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Focusing on Well-Being: Developing a Protective Factors Framework for Youth in Care 2008-present

A Meaning-Centered Approach to Building Youth Resilience (Chapter 27 of *The Human Quest for Meaning: Theories, Research, and Applications*, 2nd Edition).

Wong, Paul T. P. Wong, Lilian C. J.

Trent University.

2012

In this chapter, we first develop a taxonomy of resilience and articulate the holistic, multidimensional nature of the resilience construct. We then briefly review the various theoretical perspectives and intervention programs. Finally, we describe our meaning-centered approach, which is based on the interactions between the three modules of the positive triad: (a) the PURE principles of meaningful living, (b) the ABCDE strategies of resilience, and (c) the five elements of tragic optimism. (Author abstract)

<http://www.drpaulwong.com/documents/HQM2-chapter27.pdf>

Resilience as a Positive Youth Development Construct: A Conceptual Review.

Lee, Tak Yan. Cheung, Chau Kiu. Kwong, Wai Man.

City University of Hong Kong.

2012

The Scientific World Journal

Research on resilience has been a major theme in developmental psychopathology focusing on the question why some children and adolescents maintain positive adaptation despite experiences of distressing life conditions and demanding societal conditions such as violence, poverty, stress, exposure to trauma, deprivation, and oppression. Despite concerted efforts in research on the concept of resilience over three decades, there are still different definitions of the term. Three waves of research on resilience have been identified and have set the path for the fourth wave which focuses on multilevel analysis and the dynamics of adaptation and change. Although resilience has been linked with positive youth development there is a wide range of theories about the relationships between resilience and positive youth development. In order to promote an integration of theory, research, practice, and policy on positive youth development, a critical review of resilience is imperative. Consistent with the framework of applied developmental science, we offer a critical examination of several theories. In particular, the present paper reviews the theoretical conception of resilience, its relationships with positive youth development, as well as the antecedents of resilience. In addition, ways of enhancing

adolescents' resilience that are pertinent to positive development are outlined. (Author abstract)
<http://www.tswj.com/aip/390450.pdf>

Promoting Social and Emotional Well-Being by Facilitating Healing and Recovery: The Critical Interplay of Relationships and Brain Development [Presentation Slides].

Samuels, Bryan.

Policy to Practice Dialogue: Making It Work In Child Welfare (2011 : Arlington, VA)

United States. Dept. of Health and Human Services. Administration on Children, Youth and Families.

2011

This slide presentation explores the link between relationships and brain development and discusses strategies for promoting social and emotional well-being by facilitating healing and recovery. It calls for child welfare interventions to focus on the repair or establishment of protective, supportive, and emotionally responsive adult relationships that will allow children to thrive in safe, permanent homes with access to the physical health, mental health, and educational resources necessary for their long-term well-being. Fiscal year 2012 federal grants totaling \$28 million for facilitating healing and recovery to promote social and emotional well-being are listed and provisions under the Child and Family Services Improvement and Innovation Act of 2011 that address trauma and vulnerable population are explained. Additional information shares findings of the CDC Adverse Childhood Experiences Study and other studies that emphasize the impact of childhood trauma on physical health, the impact of chronic fear and anxiety on brain development, the link between chronic interpersonal trauma and relational health, and the impact of maltreatment across multiple domains. Charts illustrate that compared with youth who are not reunified, youth who returned home displayed increasing levels of self-destructive behavior, substance use, and total risk behaviors, kinship placements were not predictive of mental health outcomes, and the persistence of problems after adoption from foster care. Critical components for successful placements for maltreated children are reviewed, as well as indicators for key social emotional well-being domains, effective approaches to promoting social and emotional well-being, and evidence-based interventions.

<http://www.nrcadoption.org/wp-content/uploads/Promoting-Social-Emotional-Well-Being-Commissioner-Samuels.pdf>

A Risk and Resilience Framework for Child, Youth, and Family Policy (chapter in Social Policy for Children and Families: A Risk and Resilience Perspective. 2nd Edition).

Jenson, Jeffrey M. Fraser, Mark W.

University of Denver.

2011

This chapter outlines a risk and resilience framework for developing effective public policies for children, youth, and families. The framework is rooted in ecological theory and based on the idea that practices and programs targeting known causes and correlates of child and adolescent problems are most likely to be successful in preventing problem behaviors and supporting children and families. The chapter discusses common risk factors for children and adolescents,

applying principles of risk and resilience to social policy, and ecological theory and life course development. 2 tables, 1 figure, and 89 references.

http://www.sagepub.com/upm-data/37820_Chapter1.pdf

Supporting Brain Development in Traumatized Children and Youth

Bulletin for Professionals

Child Welfare Information Gateway

2011

Summarizes what child welfare professionals can do to support the identification and assessment of the impact of maltreatment and trauma on brain development, including what to look for at different ages and stages of child development. The bulletin also addresses how to work effectively with children, youth, and families to support healthy brain development and how to improve services through cross-system collaboration and trauma-informed practice.

<http://www.childwelfare.gov/pubs/braindevtrauma.cfm>

<http://www.childwelfare.gov/pubs/braindevtrauma.pdf>

Healing Trauma and Building Resiliency: Ramsey County's Runaway Intervention Project.

Richtman, Kathryn Santelmann.

American Bar Association. Criminal Justice Section.

2011

Children's Rights

13 (2) This article highlights the Runaway Intervention Project (RIP), implemented in Ramsey County, Minnesota. RIP uses a public health model of intervention that includes individualized care for highly traumatized girls designed to reduce the traumatic response to sexual victimization, increase family and school connectedness, improve health and protective factors of victims, and build resiliency. The goals, design, and positive outcomes of 68 girls who participated in the program are shared.

http://apps.americanbar.org/litigation/committees/childrights/content/newsletters/childrens_winter2011.pdf

Trauma-Informed Care: Tips for Youth Workers.

Asking: "What's Happened to You?" A Focus on Trauma-informed Care.

National Clearinghouse on Families and Youth.

2011

The Exchange

This fact sheet highlights the incorporation of trauma-informed care when providing services to youth. It begins by explaining that while each young person's response to trauma is unique, youth workers who take a trauma-informed approach try to understand each young person's emotional triggers, build supportive relationships, and give youth opportunities to rebuild control in their lives. The behaviors of traumatized youth are described and techniques for building trusting relationships with youth and giving youth a sense of control are discussed.

<http://ncfy.acf.hhs.gov/tools/exchange/trauma-informed-care/tips>

Fostering Resilience in Adolescents (Chapter 14 in *Child Psychology and Psychiatry: Frameworks for Practice*).

Veale, Angela.

2011

This chapter outlines new theoretical resilience frameworks and links them to a psychotherapeutically informed participatory action research project involving 9 at-risk girls (ages 12-18). The girls participated in weekly creative arts workshops in which experiences of policy, youth justice, and social integration were explored. The project resulted in enhanced resilient capacities. 1 box and 9 references.

Development of a Multi-Dimensional Measure of Resilience in Adolescents: The Adolescent Resilience Questionnaire.

Gartland, Deirdre. Bond, Lyndal. Olsson, Craig A. Buzwell, Simone. Sawyer, Susan M. Murdoch Children's Research Institute, Melbourne, Australia.

2011

BMC Medical Research Methodology

Background: The concept of resilience has captured the imagination of researchers and policy makers over the past two decades. However, despite the ever growing body of resilience research, there is a paucity of relevant, comprehensive measurement tools. In this article, the development of a theoretically based, comprehensive multidimensional measure of resilience in adolescents is described. Methods: Extensive literature review and focus groups with young people living with chronic illness informed the conceptual development of scales and items. Two sequential rounds of factor and scale analyses were undertaken to revise the conceptually developed scales using data collected from young people living with a chronic illness and a general population sample. Results: The revised Adolescent Resilience Questionnaire comprises 93 items and 12 scales measuring resilience factors in the domains of self, family, peer, school and community. All scales have acceptable alpha coefficients. Revised scales closely reflect conceptually developed scales. Conclusions: It is proposed that, with further psychometric testing, this new measure of resilience will provide researchers and clinicians with a comprehensive and developmentally appropriate instrument to measure a young person's capacity to achieve positive outcomes despite life stressors. (Author abstract)

<http://www.biomedcentral.com/content/pdf/1471-2288-11-134.pdf>

Developing Effective Strategies for Transition (Chapter 17 in *Home-Based Services for High-Risk Youth: Assessment, Wraparound Planning, and Service Delivery*).

Cornett, Stacey M.

2011

An overview of the concepts of recovery and resiliency is provided in order to build an understanding of what needs to occur for the successful transition of youth with serious emotional challenges out of services. Elements of transition activities that begin from engagement throughout service delivery and the development of a plan are discussed relative to the current status of the families. Barriers and concerns families may have regarding transition are also

addressed, and components of transition planning are described. 1 table, 2 exhibits, and 13 references. (Author abstract modified)

The Adolescent Brain: New Research and Its Implications for Young People Transitioning From Foster Care.

Freundlich, Madelyn.

Jim Casey Youth Opportunities Initiative.

2011

Science has contributed to a more in-depth understanding of the impact of trauma on the developing brain. In the clinical realm, the past decades have seen the development of the key concepts of complex trauma and ambiguous loss. We now know that in order to be effective, practice and interventions must be trauma-informed if they are to address the identity- and grief-related issues that older youth and young adults in foster care are likely to experience. In this paper, we examine this new knowledge base with a particular focus on the neuroscientific findings about adolescent brain development. We consider the implications for developmentally appropriate child welfare practice with young people in foster care, taking into account their experiences of trauma and loss. We first describe the characteristics and needs of the older youth and young adults who comprise a significant portion of the foster care population. Second, we discuss the specific aspects of the developmental knowledge base that relate to this older foster care population. Third, we provide recommendations that can guide child welfare agencies and others in serving older youth and young adults in foster care in ways that are specifically tailored to their developmental status and needs. Finally, we pose questions for the child welfare field that are designed to promote critical conversations about developing, implementing, and evaluating developmentally appropriate practices for young people in foster care. (Author abstract)

http://www.jimcaseyyouth.org/sites/default/files/The%20Adolescent%20Brain_prepress_proof%5B1%5D.pdf

Postrumatic Stress Disorder (Chapter in Mental Health Treatment for Children and Adolescents).

Corcoran, Jacqueline.

2011

This chapter analyses treatment outcomes research on posttraumatic stress disorder in youth, summarizes empirically-supported psychosocial and pharmacological treatments, and provides a case study and recommended research agenda. In addition, biopsychosocial risk and resilience influences are reviewed that impact the development of the disorder and the implementation and adaptation of evidence-based practices. 1 table and 44 references.

Resilience and Suicidality Among Homeless Youth.

Cleverley, Kristin. Kidd, Sean A.

McMaster University (Canada)

2011

Journal of Adolescence

34 (5) p. 1049-1054

Homeless and street-involved youth are considered an extremely high risk group, with many studies highlighting trajectories characterized by abusive, neglectful, and unstable family histories, victimization and criminal involvement while on the streets, high rates of physical and mental illness, and extremely high rates of mortality. While there exists a substantial body of knowledge regarding risk, in recent years attention has been increasingly shifting to the examination of resilience, intervention, and service delivery models for these young people. The present study describes the findings from a quantitative examination of personal and street-related demographics, psychological distress, self-esteem, resilience, and suicidality among 47 homeless and street-involved youth. Key findings indicate that the apparent erosion of mental health variables, including resilience, occurs as a function of how long the youths have been without stable housing. Finally, those youths' perceived resilience was associated with less suicidal ideation whereas higher psychological distress was associated with higher suicidal ideation, even when accounting for resiliency. (Author abstract)

Working With Distressed Young People.

Empowering Youth and Community Work Practice.

Harris, Bob.

2011

Part of a series written to support students working on youth and community work degrees, this text shows how distress and disturbance is created in young people and causes their behavior to become difficult and problematic to themselves, adults, and wider society. It discusses how to detect and diagnose problems and work out strategies for helping young people in distress. The first part of the book includes chapters that explain how a young person's social, relational, and cultural environment affects their development, major cases of distress in young people, manifestations of distress in young people, evidence-based processes that are essential for the optimal development of young people, the concepts of holding and containments, denial and dissociation as ways of coping with painful feelings, problematic ways in which young people communicate their distress, attachment responses and learning theory, the concept of projective identification, and ways disturbances and distress are manifested and communicated in group behavior. Part 2 focuses on strategies to assist youth in distress. Chapters examine support structures, critical elements of staff support and training, confidentiality, group processes and dynamics, the manifestations of distress and delinquency, working with distressed and disturbed young people in groups, starting and sustaining work with distressed young people, coping with the impact of the work, and supervision and staff support. Chapters include activities and case examples. 40 references.

Risk and Protective Factors for Depression and Substance Use in an Adolescent Child Welfare Sample.

Guibord, Mélanie. Bell, Tessa. Romano, Elisa. Rouillard, Louise.

2011

Children and Youth Services Review
33 (11) p. 2127-2137

Research on the mental health needs of maltreated youth in out-of-home care remains limited. The goal of the current study was to examine two common mental health concerns (i.e., depression, substance use) among 122 12-15 year olds in out-of-home placements. Specifically, we investigated potential risk and protective factors among socio-demographic, maltreatment, youth, family, and community variables. We relied on data collected through the AAR-C2, a Canadian needs assessment and outcome monitoring tool. Approximately 4 in 10 (39.2%) youth endorsed at least one mental health problem, which we defined as the youth scoring at least one standard deviation above the sample mean for the depression items and the youth indicating the presence of alcohol and/or substance use over the past year. Almost 1 in 10 (8.3%) reported struggling with both mental health issues. Results from logistic regressions indicated that adolescent females were at higher risk of experiencing depression than males, and increasing age was associated with increased risk for substance use. Turning to protective factors, results indicated that the greater the perceived quality of the youth-caregiver relationship, the lower the risk for mental health difficulties (i.e., depression, substance use). Moreover, participation in extracurricular activities appeared to protect youth against depression or substance use. Results imply that the youth-caregiver relationship and involvement in extracurricular activities are important areas to consider to promote the well-being of maltreated youth in out-of-home care. (Author abstract)

The Impact of Trauma on the Developing Social Brain: Development and Regulation in Relationship (Chapter 2 of Clinical Work with Traumatized Young Children).

Van Horn, Patricia.
2011

This chapter examines the stresses that affect young children and the social, emotional, and physiological consequences of stress and trauma. It focuses on the impact of extreme stress and trauma on the developing brain and central nervous system, and on understanding relationship security as a moderator of that impact. Numerous references. (Author abstract modified)

Advancing Trauma-Informed Practices: Bringing Trauma-Informed, Resilience-Focused Care to Children, Adolescents, Families, Schools and Communities.

Steele, William. Kuban, Caelan.

National Institute for Trauma and Loss in Children. Starr Commonwealth Institute for Training.
2011

The purpose of this paper is threefold: 1) To define the primary experience of trauma in order to support trauma-informed care grounded in evidence-based research, neuroscience and the essential components of trauma-informed practices, 2) To view trauma not as a diagnostic category but as a series of experiences that result in survival driven behaviors, thoughts, emotions, sensations and needs unique to traumatized children which are often misinterpreted and assigned as symptoms of disorders other than trauma, and 3) To explain the essential importance of understanding the child's experience, within a trauma-informed context, in order

to guide practitioners in evaluating, identifying and initiating trauma-informed, developmentally appropriate interventions beneficial to the unique needs and world of traumatized children and youth. (Author abstract)

<http://assets1.mytrainsite.com/500051/tlcwhitepaper.pdf>

Trauma-Informed Practices With Children and Adolescents.

Steele, William. Malchiodi, Cathy A.

2011

Intended to assist helping professionals who work with traumatized children and adolescents, this text explains strategies, policies, and procedures that meet the criteria supported by the National Center for Trauma-Informed Care (NCTIC) and approaches from recognized leaders in the trauma field. Chapter 1 reviews previous and current theories about trauma intervention with children and adolescents and how these approaches have enhanced understanding of trauma-informed approaches. A comprehensive definition of trauma-informed practice is presented with an emphasis on the key factors necessary in developing effective assessment, environments, relationships, and treatment. Chapter 2 defines trauma-informed assessment and provides several standardized models for assessment including developmental, ecological, and trauma histories, and Chapter 3 provides sensory-based models for evaluation using play- and art-based methods. Both chapters underscore the need for continual assessment and sensitivity to cultural aspects that impact evaluation with traumatized children and adolescents. Establishing safety through self-regulation is explained in Chapter 4, and the body's responses to trauma, methods to help individuals achieve self-regulation, examples of self-regulation processes, and key elements of safe interventions are discussed. The following chapter explores the role of the environment in trauma-informed interventions with children and adolescents and strategies for creating and sustaining such environments. Trauma-informed relationships are addressed in Chapter 6 and ways to help children through trauma-informed relationships are explained. Final chapters explain strategies for supporting resilience and posttraumatic growth and aspects of trauma integration, including biopsychosocial signs of trauma integration and concepts of balance, adaptability, and sustainability. Numerous references.

An Examination of Factors Contributing to Resilience among Children and Youths in Out of Home Care in Ontario.

Barnsley, Shannon E.

University of Ottawa.

2011

Objective: Some of the most vulnerable children and youths in Canada are those in out of home care, and these children demonstrate higher rates of psychopathology and fare more poorly in school and in social relationships than their peers. Typically, when studying at risk populations, negative outcomes are examined, thereby ignoring those who do well despite their vulnerability. These children, who demonstrate positive patterns of functioning and development despite their exposure to adversity, are considered resilient. The objective of this study was to identify factors associated with a resilient outcome among children and youths in out of home care. Method: The

study sample was comprised of 417 children 10 to 15 years old in Ontario who had been removed from their homes of origin and placed in out of home care. Predictor variables were selected based on previous research findings in the area of resilient outcome. In the cross-sectional study, a series of sequential logistic regression analyses were conducted to identify factors associated with a resilient outcome among children in out of home care. These children were then followed one year later. In the longitudinal study, another series of sequential logistic regression analyses were used to identify variables that were related to future resilient outcomes among the same children in out of home care. Results: The findings showed that many of the independent variables predicted resilient outcome on the different dimensions. Furthermore, overall resilient outcome was best predicted by the foster parental report of high sociability. Conclusion: The findings in the present study confirmed that there exists a subset of resilient children among children in out of home care. The findings allowed for the identification of some factors related to resilient outcome among this population. The practical implications of these findings are discussed. (Author abstract)

http://www.ruor.uottawa.ca/en/bitstream/handle/10393/19922/Barnsley_Shannon_2011_thesis.pdf?sequence=1

The Teen Brain: Still Under Construction.

United States. Dept. of Health and Human Services. National Institutes of Health. National Institute of Mental Health.

2011

This brochure discusses the development of the brain during adolescence. Information is provided on research that indicates the brain doesn't begin to resemble that of an adult until the early 20s, and that different parts of the cortex mature at different rates and parts of the brain responsible for controlling impulses and planning ahead are among the last to mature. The increase and decline of gray matter and changes in gray matter during adolescence are described, as well as the relationship between changes in the brain and behavior in teens and the impact of alcohol on the teen brain. A list of additional resources is provided.

<http://www.nimh.nih.gov/health/publications/the-teen-brain-still-under-construction/teen-brain.pdf>

Synthesis of Research and Resources to Support at-Risk Youth: ACF Youth Demonstration Development Project.

United States. Department of Health and Human Services. Administration for Children and Families. Office of Planning, Research, and Evaluation. Mathematica Policy Research. Chapin Hall at the University of Chicago. Public/Private Ventures.

2011

This federally funded report provides a synthesis of research and existing Administration for Children and Families (ACF) resources for serving at-risk youth. It begins by stating the key questions that guide the synthesis, defining key concepts, and describing a number of at-risk youth populations served by ACF programs. The following chapter explains two complementary theoretical perspectives on the needs of at-risk youth: the risk and resilience perspective that

focuses on developing resilience among at-risk youth through improving psychological health, forming nurturing attachments with caring adults, and identifying role models within communities; and the capital development perspective that focuses on developing the human, social, cultural, and economic capital that at-risk youth will need to succeed in educational and employment settings. After describing each theoretical perspective, an overview of related intervention approaches is provided. Chapter 3 focuses on four programs or offices within ACF that serve at-risk youth, specifically runaway and homeless youth, youth aging out of foster care, youth who are noncustodial parents, and youth whose families receive public assistance. The funding streams that these ACF bureaus and offices use or could use to provide services to these youth are discussed, and one illustrative program within each bureau or office is described. The chapter concludes with a summary of the program models, the extent to which they focus on promoting self-sufficiency, and evidence of their effectiveness. The final chapter explores implications for conceptual frameworks. 4 tables and numerous references.

http://www.acf.hhs.gov/programs/opre/fys/youth_development/reports/synthesis_youth.pdf

Protective Factors Associated with Fewer Multiple Problem Behaviors Among Homeless/Runaway Youth.

Lightfoot, Marguerita. Stein, Judith A. Tevendale, Heather. Preston, Kathleen.
2011

Journal of Clinical Child and Adolescent Psychology
40 (6) p. 878-889

Although homeless youth exhibit numerous problem behaviors, protective factors that can be targeted and modified by prevention programs to decrease the likelihood of involvement in risky behaviors are less apparent. The current study tested a model of protective factors for multiple problem behavior in a sample of 474 homeless youth (42% girls; 83% minority) ages 12 to 24 years. Higher levels of problem solving and planning skills were strongly related to lower levels of multiple problem behaviors in homeless youth, suggesting both the positive impact of preexisting personal assets of these youth and important programmatic targets for further building their resilience and decreasing problem behaviors. Indirect relationships between the background factors of self-esteem and social support and multiple problem behaviors were significantly mediated through protective skills. The model suggests that helping youth enhance their skills in goal setting, decision making, and self-reliant coping could lessen a variety of problem behaviors commonly found among homeless youth. (Author abstract)

Reduced Hippocampal Activity in Youth with Posttraumatic Stress Symptoms: An fMRI Study.

Special Issue: The Physical Health Consequences of Childhood Maltreatment: Implications for Public Health.

Carrión, Victor G. Haas, Brian W. Garrett, Amy. Song, Suzan. Reiss, Allan L.
Stanford University.

2010

Journal of Pediatric Psychology

35 (5) p. 559-569

Objective: Youth who experience interpersonal trauma and have posttraumatic stress symptoms (PTSS) develop cognitive deficits that impact their development. Our goal is to investigate the function of the hippocampus in adolescents with PTSS during a memory processing task.

Methods: Twenty-seven adolescents between the ages of 10-17 years (16 with PTSS and 11 healthy controls) encoded and retrieved visually presented nouns (Verbal Declarative Memory Task) while undergoing fMRI scanning. Results: The PTSS group demonstrated reduced activation of the right hippocampus during the retrieval component of the task. Further, severity of symptoms of avoidance and numbing correlated with reduced left hippocampal activation during retrieval. Conclusions: Decreased activity of the hippocampus during a verbal memory task may be a neurofunctional marker of PTSS in youth with history of interpersonal trauma. The results of this study may facilitate the development of focused treatments and may be of utility when assessing treatment outcome for PTSS. (Author abstract)

Illinois Childhood Trauma Coalition White Paper: Child Trauma as a Lens for the Public Sector.

Griffin, Gene. Studzinski, Anne.

Illinois Childhood Trauma Coalition.

2010

This report discusses the impact of child trauma on child and adolescent brain development. It explains the short-term and long-term effects of trauma, post-traumatic stress disorder, disruption in the brain development due to chronic traumatic events, developmental response styles, the prevalence rates of child trauma, and the financial costs of child trauma. The clinical response to trauma is then described, including systemic responses from national organizations and Illinois organizations. The challenges Illinois faces in integrating trauma informed practices into public sector children's services are explored and action steps that should be taken are highlighted. Recommended actions include: recognition by the child serving public sector agencies of the latest research on normal development and trauma, training of staff, families, and youth, prevention programs, early intervention programs, common assessment tools, trauma-informed treatment, more public sector funding of services for youth and families, development of professional credentials for trauma-informed care, system coordination and shared services, and universal child trauma awareness. 17 references.

<http://www.law.uchicago.edu/files/file/ICTC%20White%20Paper%20120110.pdf>

Vulnerability in the Transition to Adulthood: Defining Risk Based on Youth Profiles.

Berzin, Stephanie Cosner.

2010

Children and Youth Services Review

32 (4) p. 487-495

In spite of an extended transition to adulthood for many segments of the population, many youth still struggle considerably with transition outcomes. With data from the National Longitudinal Survey of Youth (N = 8984), this study uses latent class analysis to identify patterns of youth

development in emerging adulthood based on education level and social outcomes. These classes are used to identify risk and protective factors for class membership. Four profiles of youth were identified with two groups showing positive outcomes and two groups struggling considerably. Bivariate and cumulative logit analysis shows that demographic characteristics, childhood home environment, and psychosocial resources predict class membership. Involvement in youth-serving government systems is associated with poorer outcomes and remains salient when considered with other risk factors. The emergence of this new developmental stage requires a reexamination of vulnerability and how we understand risk and resiliency during this period. (Author abstract)

Comparing Three Years of Well-Being Outcomes for Youth in Group Care and Nonkinship Foster Care (article in Residential Care and Treatment).

McCrae, Julie S. Lee, Bethany R. Barth, Richard P. Rauktis, Mary E.

2010

Child Welfare

89 (2) p. 229-249

Using three waves of data from the National Survey of Child and Adolescent Well-Being, this study examines differences in cognitive, academic, and affective well-being of youth first placed in nonkinship foster care (N = 259) and youth first placed in group care (N = 89). To compare nonrandomized groups, propensity score matching was used. Results from hierarchical linear modeling suggest that both groups of youth show improved behavior and below-average academics over time. (Author abstract)

Tracking Child and Youth Well-Being.

Ravindranath, Nalini. Pittman, Karen.

Forum for Youth Investment. Ready by 21 Initiative.

2010

This is an analysis of several newly released reports on child and youth well-being. The paper outlines how tools such as the Ready by 21 Developmental Dashboard can help leaders be effective. The analysis also includes commentary on how these report cards can measure well-being across outcome areas and ages and calls for robust indicators that measure the performance of systems and services. (Author abstract)

http://forumfyi.org/files/Tracking_Child_Youth_Well_Being_Final.pdf

Exploring Spirituality Among Youth in Foster Care: Findings from the Casey Field Office Mental Health Study.

Jackson, Lovie J. White, Catherine Roller. O'Brien, Kirk. DiLorenzo, Paul. Cathcart, Ernie. Wolf, Mary. Bruskas, Delilah. Pecora, Peter J. Nix-Early, Vivian. Cabrera, Jorge.

2010

Child and Family Social Work

15 (1) p. 107-117

This study examined spiritual coping mechanisms, beliefs about spirituality and participation in

spiritual activities and in other positive activities among adolescents in foster care. A multidimensional measure of spirituality was developed for face-to-face interviews with 188 youth (ages 14-17) from diverse racial/ethnic backgrounds in the United States. Findings revealed 95% of youth believe in God, over 70% believe God is 'creator' and God is 'love', and 79% considered prayer a spiritual practice. Most youth said love and forgiveness help them heal. Two-thirds (67%) reported responding to 'bad or tragic things happening' by spending time alone, and over half responded by praying (59%) or sharing the problem with someone else (56%). Youth's top three spiritual goals were to follow God's plan for them, become a better person, and know their purpose in life. Based on the value youth ascribed to spiritual coping mechanisms, recommendations for policy and practice focus on the integration of spirituality into practice and caregiving for youth in foster care. (Author abstract)

Individual and Contextual Correlates of Adolescent Health and Well-Being.

Anthony, Elizabeth K. Stone, Susan I.

2010

Families in Society : The Journal of Contemporary Social Services

91 (3) p. 225-233

Assessing a broad positive outcome such as well-being presents numerous challenges, and empirical investigations are limited. This study used an eco-interactional-developmental perspective based on risk and protective factors to examine individual and contextual correlates of health and well-being in a sample of 20,749 ethnically diverse middle- and high-school students. School fixed-effects regression analyses modeling a composite measure of well-being as a function of youth, peer, family, school, and neighborhood characteristics indicated that the measure was most stable when modeled as a global (vs. domain specific) composite. Relational (vs. expectation and behavioral) characteristics of parental and peer involvement were more influential in predicting adolescent well-being. The implications for interventions striving to enhance well-being across developmental transitions are discussed. (Author abstract)

Making the Case: A Comprehensive Systems Approach for Adolescent Health and Well-Being.

AMCHP White Paper.

Association of Maternal and Child Health Programs (AMCHP).

2010

This paper is intended to raise awareness and stimulate a consensus building dialogue among Association of Maternal and Child Health Programs (AMCHP) members, Title V programs, and partners around the need for a comprehensive systems approach to adolescent health. It begins by discussing the challenges faced by adolescents and the need for States to develop comprehensive systems for adolescents that will assist young people and their families safely navigate the complex biological, behavioral, cognitive, and social facts that impact their lives. The theory behind "systems thinking", efforts by the Early Childhood Comprehensive Systems (ECCS) Initiative to coordinate services, and how ECCS principles and models can be applied to the adolescent population are explored. Current adolescent health is discussed, as well as what

adolescents need for their health and well-being, the importance of family involvement in the care and transition of adolescents, and crucial systems, services, and resources for adolescents. Efforts by the Title V Maternal and Child Health programs in the development and implementation of adolescent health-based strategies that involve coordinating programs are also reviewed. Finally, recommendations are made for developing a comprehensive systems approach to adolescent health. 35 references.

<http://www.amchp.org/programsandtopics/AdolescentHealth/Documents/AHWG%20White%20Paper%20FINAL.pdf>

Tips for Working with Children and Teens in Foster Care.

Healthy Foster Care America. American Academy of Pediatrics.

2010

This brief notes that children and teens in foster care may have common developmental and behavioral concerns but due to the severe nature of these disorders, many may need special services. American Academy of Pediatrics recommendations for the health care of children and teens in foster care are then presented. A list of effective interventions is provided, as well as a list of professionals that health care professionals should be communicating with. Tips for providing follow-up care to foster children and youth are also given. 10 references.

http://www.aap.org/fostercare/PDFs/HFCA_Children_Teen_Tips.pdf

Is There a Developmentalist in the House?: Using Developmental Theory to Understand the Service Needs of Emerging Adults.

Tanner, Jennifer.

Rutgers University.

2010

Focal Point

24 (1) p. 8-12

This article explains how recent advances in developmental theory can be applied to design policies and programs that help young people transition to adulthood in a way that befits their normative maturation processes and the realities of today's world. (Author abstract)

<http://pathwaysrtc.pdx.edu/pdf/fpS1003.pdf>

Positive Indicators of Child Well-Being: A Conceptual Framework, Measures and Methodological Issues.

Innocenti Working Paper

Lippman, Laura H. Moore, Kristin Anderson. McIntosh, Hugh.

United Nations Children's Fund (UNICEF).

Child Trends.

2009

This paper highlights a number of frameworks for positive indicator development which examine the positive well-being of children. Based upon this review, it suggests a new comprehensive framework which identifies constructs for positive well-being as well as potential

indicators and extant measures that fit with those constructs. In addition, the paper reviews existing data sources for examples of positive measures that are found in the proposed framework as well as research studies that have been successful in measuring these indicators. The paper then notes the data and measurement gaps that exist in comprehensively measuring the positive in children and youth. Finally, it identifies a number of conceptual and methodological issues that need consideration as efforts to define and measure positive indicators of well-being and well-becoming go forward. (Author abstract)
http://www.unicef-irc.org/publications/pdf/iwp_2009_21.pdf

Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities.

O'Connell, Mary Ellen. Boat, Thomas. Warner, Kenneth E.
Institute of Medicine (U.S.). Committee on Prevention of Mental Disorders and Substance Abuse Among Children, Youth, and Young Adults: Research Advances and Promising Interventions.
National Research Council (U.S.). Board on Children, Youth, and Families.
2009

This report builds on a 1994 report by the Institute of Medicine (IOM), "Reducing Risks for Mental Disorders: Frontiers for Preventive Intervention Research," which highlighted the promise of prevention of mental, emotional, and behavioral disorders among young people. It reports the findings of the Committee on the Prevention of Mental Disorders and Substance Abuse Among Children, Youth, and Families that was formed under the auspices of the Board on Children, Youth, and Families. Part 1 provides contextual and background information on mental disorders in youth, beginning with a description of the available epidemiological literature on the prevalence and incidence of mental health and substance use disorders. It then moves to a discussion of the scope of prevention, including the definitions of the various types of prevention and discussion of recent developments and definitions of mental health promotion. The next two chapters outline perspectives on the developmental pathways that may lead to disorder and provide an empirical and theoretical basis for preventive interventions. The first presents available research on risk and protective factors related to prevention and promotion in a developmental context. Chapter 5 focuses on research related to genetics and developmental neuroscience, highlighting developmental plasticity and the important findings from research on epigenetic and gene-environment interactions that present potential intervention opportunities. Part 2 includes two chapters that present the evidence related to interventions aimed at individual, family, and community-level factors associated with emotional and behavioral outcomes and those that either target a specific disorder or are directed at overall promotion of health. Chapter 8 discusses issues and opportunities related to screening and Chapter 9 discusses the benefits and costs associated with MEB disorders. Part 3 includes chapters that outline the frontiers for prevention science. Chapters discuss implementation and dissemination of prevention science, prevention infrastructure, and the future of prevention. Numerous references. (Author abstract modified)

http://www.nap.edu/catalog.php?record_id=12480#toc

The Amazing Teen Brain: What Every Child Advocate Needs to Know.

Chamberlain, Linda Burgess.

Alaska Family Violence Prevention Project.

2009

ABA Child Law Practice

28 (2) p. 17-18, 22-24 p.

This brief describes the development of the adolescent brain and stresses the importance of lawyers understanding this development to better represent their teen clients. The slow growth of the prefrontal cortex, the development of short term memory, and the impact of trauma and adult mentoring on adolescents are discussed, and strategies for lawyers are provided. Additional information is given on gender differences on brain structure and function and recommended strategies that recognize those differences, the emotional development of adolescents and the impact of sleep on emotions, risk-taking in teens, drugs and the teen brain, and strategies for creating opportunities for teens to practice good decision making, develop new skills, seek adventure through structured risk taking, and benefit from the experience of adult mature cortexes. 14 references.

<http://www.hawaiiilure.com/kiwanis/teenbrain.pdf>

When Children are Asked About Their Well-Being: Towards a Framework for Guiding Policy.

Fattore, Toby. Mason, Jan. Watson, Elizabeth.

2009

Child Indicators Research

2 (1) p. 57-77

Research which focuses on children's perspectives of their well-being complements and challenges existing research and policy on children. The study reported on here explored children's views of what constitutes well-being, what meaning children and young people ascribe to the concept and whether distinct dimensions or characteristics of well-being can be identified. The project was initiated by the New South Wales Commission for Children and Young People as a basis for developing an authoritative child-informed framework for monitoring of well-being of children in New South Wales, Australia. In this paper, we outline the rationale for and details of qualitative research methods employed in the project, along with details of the major findings from the research. These include, the overarching importance of relationships with others and, more specifically, the importance of agency and control in the various domains identified as relevant to their wellbeing, the importance of safety and security and the way these factors contribute to sense of self. More minor but significant domains identified were: dealing with adversity, material and economic resources, physical environments, physical health and social and moral responsibility. The significance of the findings for policy development and the particular challenge of developing indicators from the research are discussed. (Author abstract)

Keys to Achieving Resilient Transitions: A Program to Reduce Substance Use and Promote Resiliency in Youth Aging-Out of Foster Care.

Ocasio, Kerrie. Staats, Adam. Van Alst, Donna.

Rutgers University. School of Social Work. Institute for Families.
2009

This brief highlights the outcomes of the Keys to Achieving Resilient Transitions (KART) program, a program implemented in 2005-2008 to provide comprehensive substance abuse information to foster youth aging out of the child welfare system in New Jersey. The program utilized the Keys to Innervation curriculum that focuses on fundamental ingredients of change and the Institute for Families' positive youth development approach. Outcomes of the program are discussed and indicate: a total of 562 youth were served by the program and 423 completed the program; between 20% and 34% of participants self-reported reduction in their tobacco use; between 33% and 37% of youth reported a reduction of alcohol and drug use in years 2005-2007, 29% of youth showed improvements in both areas in 2008, and in 2009, around 14% showed improvements in alcohol and 19% in drug use; youth showed improvements in knowledge of the dangers of alcohol, tobacco, and other drug use, ranging between 39% and 57% of participants; between 43% and 54% of participants showed improvements in conflict resolution skills; and goal setting skills improved for between 39% and 57% of participants. 1 figure and 11 references.
http://socialwork.rutgers.edu/Libraries/IFF_Docs/Brief_Report_on_Keys_to_Achieving_Resilient_Transitions.sflb.ashx

The 2009 Foundation for Child Development Child and Youth Well-Being Index (CWI) Report (Including, An Update of the CWI for the Years 1975-2007; Projections of the CWI for 2008; and A Special Focus Report on Anticipating the Impacts of a 2008-2010 Recession).

Land, Kenneth C.
Foundation for Child Development.
Duke University.
2009

The FCD Child Well-Being Index (CWI) is an annual comprehensive measure of how children are faring in the United States. It is based on a composite of 28 Key Indicators of well-being that are grouped into seven Quality-of-Life/Well-Being Domains. This year's CWI is an updated measure of trends over the 32-year period from 1975 to 2007, with projections for 2008. Progress in American children's quality of life has fluctuated since 2002, and began to decline in 2008. Overall well-being peaked in 2002, at 102.07. This was followed by a decline below the 2002 level in 2003 and 2004. The CWI then rose by small amounts in the 2005 to 2007 years, reaching an estimated 103.17 in 2007, before declining in 2008. Also included in this document is a Special Focus Report, "Anticipating the Impacts of a 2008-2010 Recession." This is the first-ever report on the impact of the current recession on the overall health, well-being and quality of life of America's children. It finds that the downturn will virtually undo all progress made in children's economic well-being since 1975. The significant decrease in this domain will also drag down the other domains of the CWI. The impact will be especially severe for low-income children of color. (Author abstract)
<http://www.soc.duke.edu/~cwi/2009CWIREport.pdf>

The Social Capital of Youth in Foster Care: An Assessment and Policy Implications (Chapter 7 in Child Welfare and Child Well-Being: New Perspectives from the National Survey of Child

and Adolescent Well-Being.)

Stagner, Matthew. Kuehn, Daniel.

2009

Drawing on data from the National Survey of Child and Adolescent Well-Being (NSCAW), a study explored the social capital of youth (n=260) while he or she remains in out-of-home care. Findings indicate youth in out-of-home care at the beginning of the survey had some indicators of greater bonding social capital than those remaining at home. They gained significant bridging social capital, however, particularly in terms of foster parents' higher incomes and rates of employment but were lower in other forms of bonding social capital, feeling less close to their caregivers. 1 table, 7 figures, and 26 references.

Using the Media to Promote Adolescent Well-Being.

Future of Children Policy Brief

Haskins, Ron. Donahue, Elisabeth Hirschorn. Nightingale, Marissa.

2008

Adolescent media use has exploded. Parents are worried that teens are drowning in messages about sex, smoking, drinking, consumer goods, and a host of other behaviors and products that threaten their health and well-being. This brief advocates fighting fire with fire by creative use of media to provide youth with positive messages that counteract the negative and potentially damaging messages to which they are so frequently exposed. (Author abstract)

http://www.brookings.edu/~media/Files/rc/papers/2008/spring_children_haskins/spring_children_haskins.pdf

Helping Teens Handle Tough Experiences: Strategies to Foster Resilience.

Nelson, Jill R. Kjos, Sarah.

2008

This book highlights 20 adversities that an adolescent may face, explains how each adversity may impact a teen, and provides tips, advice, and suggestions for working with teens who are dealing with these challenges. The book begins with an explanation of strength interviewing in which teens are asked about their positive influences or attributes and encouraged to build on them. Strength interviewing tips and suggestions for questions are provided. The 40 developmental assets that are crucial to positive youth development are then listed, including external and internal assets. Following chapters focus on one of the 20 adversities, including: addiction, anxiety, attention and behavior disorders, bullying, chemically dependent parents, dating violence, depression, divorce, domestic violence, eating disorders, foster care, gangs, sexual identity issues, homelessness, mentally ill parents, physical abuse, pregnancy, self-injury, sexual abuse, and suicide. Each chapter includes reproducible handouts to give to other educators and youth workers, parents, or teens themselves, and contains suggestions for further reading, Web sites, and contact information for relevant organizations.

Guiding Your Child Through Adolescence. 2009 Edition.

A Parent's Handbook

Channing Bete Company, Inc.
2008

Helping teens move on to a healthy adulthood is one of the toughest parts of parenting -- and one of the most rewarding! This handbook prepares parents to provide the positive guidance teens need with interactive exercises that strengthen parenting and communication skills, help parents build strong bonds with their teen, and provide support for coping with the developmental changes associated with adolescence and parents' changing role in a teen's life. (Author abstract)

Resiliency in Children and Youth in Kinship Care and Family Foster Care.

Metzger, Jed.
2008

Child Welfare
87 (6) p. 115-140

This study examined self-concept, resiliency, and social support in 107 children and youth placed in foster care in New York City. Of the children and youth, 55 were placed in family foster care, while the remaining 52 children and youth were placed in a kinship foster home. Significantly more of the mothers of the kinship foster care children and youth were homeless or substance abusing, yet visited their children more often than the family foster care youth. These same kinship-placed children and youth had significantly more robust self-concept, performance, and personal attribute scores. Implications for these findings are highlighted. (Author abstract modified)

<http://grandfamiliesptsa.org/wp-content/uploads/2011/11/Resiliency-in-Children-and-Youth-Kinship-Care-and-Family.pdf>

Brain-Based Therapy with Children and Adolescents: Evidence-Based Treatment for Everyday Practice.

Arden, John B. Linford, Lloyd.
2008

Drawing on research in developmental neurobiology, brain imaging, and evidence-based psychotherapeutic practices, this text is designed to assist clinicians in becoming more effective therapists by applying recent findings about the brain in their work with children and adolescents. Chapters discuss: the importance of understanding how the brain develops and functions in doing the actual work of child and adolescent psychotherapy; temperament and neurodynamics; attachment and subjectivity; attachment ruptures and repair in caregiving relationships; the impact of adolescence on psychological development and the parent-child relationship; recent neuroscientific discoveries and how these can be integrated into evidence-based interventions to create uniquely effective treatments; and evidence-based interventions for the most common childhood and adolescent disorders, such as attention deficit disorders, obsessive-compulsive disorder, and depression. The four major elements of brain-based therapy with children are explained and include a neurodynamic theory of attunement and empathy, a systematic approach to treatment planning, and the system of clinical strategies that utilize both the therapeutic relationship and evidence-based methods. Numerous references.

"What Doesn't Kill You Makes You Stronger": Survivalist Self-Reliance as Resilience and Risk Among Young Adults Aging Out of Foster Care.

Samuels, Gina Miranda. Pryce, Julia M.

2008

Children and youth services review

30 (11) p. 1198-2110

This interpretive study explores the experiences of 44 Midwestern young adults in the process of aging out of foster care. This paper highlights the degree to which they endorse self-reliance as they reflect on past experiences, offer advice to foster youth, and identify barriers to achieving their own life goals. Findings suggest that this identity must be understood in multiple contexts including societal expectations of independence and autonomy, foster-care and family of origin as developmental contexts, and current scholarship on youth aging out of care. We argue that vigilant self-reliance can be a source of resilience but also a potential risk in facilitating the very connections to supportive relationships that research suggests can produce positive outcomes in adulthood. This article advances a holistic life course perspective [Stein, M. & Wade, J. (2000). *Helping care leavers: Problems and strategic responses*. London: HMSO.] on the development of independence and self-reliance in adulthood to expand current conceptualizations of these and more recent ideals of interdependence promoted in child welfare policy and practice. (Author abstract)

Treating Traumatized Children: Risk, Resilience and Recovery.

Brom, Danny. Pat-Horenczyk, Ruth. Ford, Julian.

2008

This book is designed to provide clinicians, educators, and researchers with updated and innovative theoretical, developmental, and clinical conceptualizations and research on risk and resilience among traumatized children and youth. In addition, it highlights promising evidence-based treatments developed in various international contexts to address risk and resilience factors in the prevention and treatment of posttraumatic distress in children and youth. The text begins by defining the term "developmental trauma disorder" (DTD) and differentiating it from adult posttraumatic stress disorder. Seven trajectories of functioning that may occur following a child's exposure to psychological trauma are then identified and include: the positive trajectories of resistance, resilience, posttraumatic growth, and protracted recovery, and the unhealthy trajectories of severe persisting distress, decline, and stable maladaptive functioning. Chapters in Part 1 review risk and protective factors and discuss parenting in the throes of traumatic events, the specificity of reactions to trauma in infants, physical and mental health functioning in Sudanese unaccompanied minors, and risk and resilience in young Londoners. Part 2 on resilience includes chapters on resiliency and resource loss in times of terrorism and disaster, ecological resilience, and bolstering resilience. Chapters in Part 3 focus on empirically based systemic interventions for traumatized children and address restoring children's capacities for self-regulation, using dyadic therapies to treat traumatized young children, group treatment for chronically traumatized adolescents, family-based treatment for child traumatic stress, and using the metaphor of the hero to inspire posttraumatic resilience in children. Numerous references.

Promoting Resilience in Young People in Long-Term Care: The Relevance of Roles and Relationships in the Domains of Recreation and Work.

Gilligan, Robbie.

2008

Journal of Social Work Practice

22 (1) p. 37-50

This paper seeks to highlight the resilience-enhancing potential for vulnerable young people of roles and relationships in the domains of recreation and work. The paper explores its theme through a specific focus on the needs of young people in long-term care. The paper has four sections: the first deals with some key conceptual propositions relevant to understanding resilience-related processes; the second with the resilience-enhancing potential of recreational activities; the third with the resilience-enhancing potential of work roles; and the fourth with the implications for practices by carers and professionals in relation to helping young people in care to derive benefits from the positives that recreation and work experiences may have to offer. The paper reviews relevant research evidence from a range of perspectives and through related case examples. (Author abstract)