



**Center for the
Study of Social Policy**
Ideas into Action

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Expanding the Perspectives and Research Foundation for the Strengthening Families & Youth Thrive Frameworks



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**Strengthening
Families**
An initiative
of CSSP



**Youth
Thrive**
An initiative
of CSSP

This report, and all related research, policy, programs, and practice, are the offspring of the vision and brilliance of

Judy Langford and Nilofer Ahsan.

Their commitment to addressing child maltreatment primary prevention and promotion gave rise to the Strengthening Families Approach and Protective Factors Framework which later served as the model for the Youth Thrive Framework. The Human Services field—and countless children, youth, parents, and families who have experienced strengths-based services and supports through these efforts—are indebted to their foresight.

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ABOUT CSSP

The Center for the Study of Social Policy (CSSP) works to achieve a racially, economically, and socially just society in which all children, youth, and families thrive. We translate ideas into action, promote public policies grounded in equity, and support strong and inclusive communities. We advocate with and for all children, youth, and families marginalized by public policies and institutional practices. Learn more at www.CSSP.org.



ABOUT STRENGTHENING FAMILIES

The Strengthening Families Approach and Protective Factors framework is both a research-informed and action-oriented initiative that describes attributes and conditions that mitigate the effect of exposure to risk factors and help to keep families of young children on a pathway of healthy development and well-being. Learn more at CSSP.org/our-work/project/strengthening-families/



ABOUT YOUTH THRIVE

Youth Thrive is both a research-informed framework that addresses youth well-being and an action-oriented initiative designed to promote healthy development and well-being for youth and young adults. Learn more at CSSP.org/our-work/project/youth-thrive/

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TABLE OF CONTENTS

INTRODUCTION	5
BACKGROUND INFORMATION	7
• Strengthening Families Protective Factors = Youth Thrive Protective and Promotive Factors	7
• The Foundational Values of Strengthening Families and Youth Thrive	7
· <i>Employ a Social-Ecological Approach</i>	7
· <i>Adopt a Strengths-Based Perspective</i>	8
· <i>Recognize and Respond to Oppression and Privilege</i>	8
· <i>Incorporate an Intersectional Frame of Reference</i>	8
· <i>Demonstrate Cultural Responsiveness, Cultural Humility, and Intellectual Humility</i>	8
· <i>Amplify Constituent Voice and Power</i>	8
· <i>Pursue Equity and Justice for All Children, Youth, and Families</i>	9
EXPANDING THE UNDERSTANDING OF WELL-BEING	9
RACISM: A SIGNIFICANT THREAT TO CHILD, YOUTH, AND FAMILY WELL-BEING	10
CULTURE AS AN OVERARCHING PROTECTIVE FACTOR	12
EXPANDING THE UNDERSTANDING OF THE SF PROTECTIVE FACTORS/ YOUTH PROTECTIVE AND PROMOTIVE FACTORS	13
• Parental Resilience and Youth Resilience	13
· <i>The Need to Redefine Resilience</i>	13
· <i>Parental Resilience and Youth Resilience</i>	14
· <i>Societal Factors that Facilitate Resilience</i>	14
· <i>Community Factors that Facilitate Resilience</i>	15
· <i>Relational Factors that Facilitate Resilience</i>	15
· <i>Individual Factors that Facilitate Resilience</i>	15
· <i>Posttraumatic Growth</i>	16
· <i>Resistance as a Viable Act of Resilience</i>	16
• Social Connections	16
· <i>The Nature of Social Connections</i>	16
· <i>Belonging</i>	17
· <i>Mattering</i>	18
· <i>Healthy vs. Unhealthy Relationships</i>	18

· <i>Family Relationships</i>	18
Early Relational Health	18
Parent-Youth Connections	20
Sibling Relationships	20
· <i>Community Connectedness</i>	21
• Knowledge of Parenting, Child Development, and Adolescent Development	21
· <i>Knowledge of Parenting and Child Development</i>	21
Parenting as a Cultural Act	21
Good Enough Parenting	22
The Prenatal Period	22
Positive Childhood Experiences	22
· <i>Knowledge of Adolescent Development</i>	23
The Impact of Environmental Factors on Adolescent Development	23
The Impact of Racism on Adolescent Development	23
Dating Violence Against Youth	24
• Social, Emotional, and Cognitive Competence	25
· <i>Social and Emotional Competence of Children</i>	25
· <i>Cognitive and Social-Emotional Competence</i>	25
· <i>Core Life Skills</i>	26
· <i>Self-Advocacy</i>	26
· <i>Racial Socialization</i>	27
• Concrete Support	27
· <i>Social Determinants of Health and Economic Stability</i>	28
· <i>Cross-System/Cross-Sector Collaboration</i>	28
· <i>Collaborative Goal Setting</i>	29

CONCLUSION **29**

TABLES

• Table 1: Definitions of SF Protective Factors and YT Protective & Promotive Factors	5
• Table 2: Well-Being Domains	10
• Table 3: Levels of Racism	11
• Table 4: Individual Characteristics that Support the Development of Resilience	15
• Table 5: Characteristics of Healthy and Unhealthy Relationships	18

INTRODUCTION

The Center for the Study of Social Policy (CSSP) developed the *Strengthening Families Approach and Protective Factors Framework* and the *Youth Thrive Protective and Promotive Factors Framework* in response to an urgent need in the fields of child maltreatment prevention and youth services to shift from a primary goal of identifying risk factors and “fixing” problems to elevating the goal of building attributes, relationships, knowledge, skills, and resources that maximize the potential of children, youth, and families. These research-informed frameworks address the two most significant developmental periods in the lifespan: early childhood and adolescence. Originally, Strengthening Families (SF) targeted young children ages birth to 5-years-old; however, the expanded range of its target population now extends from the prenatal developing

child to 8-years-old and their families. Youth Thrive (YT) focuses on youth and young adults ages 9 to 26-years-old. As young children become youth who become young adults who may become parents of young children, together SF and YT describe CSSP’s developmental continuum of factors that increase the likelihood of positive outcomes in ways unique to each developmental period, specifically: *resilience, social connections, knowledge of development, developmental competencies, and concrete support*. The distinct terminology and definitions used in each framework are provided in Table 1.

During the 21 years since the introduction of Strengthening Families (2003) and the 13 years since the introduction of Youth Thrive (2011), the landscape of challenges facing

TABLE 1. DEFINITIONS OF THE SF PROTECTIVE FACTORS AND YT PROTECTIVE & PROMOTIVE FACTORS

FACTOR	DEFINITION
Parental Resilience (SF) & Youth Resilience (YT)	Managing stress and functioning well—facilitated by individual, relational, community, or societal factors—when faced with stressors, adversity, or trauma.
Social Connections (SF & YT)	Healthy, meaningful, trusting, and sustained relationships with people, institutions, communities, or a higher power that promote a sense of connectedness, belonging, and mattering.
Knowledge of Parenting & Child Development (SF)	Learning about prenatal, infant, and child development, and using developmentally and contextually appropriate parenting practices.
Knowledge of Adolescent Development (YT)	Learning about adolescent development and using this knowledge to support the development of competencies needed for adulthood.
Social & Emotional Competence of Children (SF)	Providing environments and experiences—grounded in early relational health—that build positive social skills; enable children to regulate thoughts, emotions, and behaviors; and promote effective communication, problem-solving, and decision-making skills.
Cognitive & Social-Emotional Competence (YT)	Acquiring skills that enable youth to form healthy relationships; regulate thoughts, emotions, and behaviors; engage in effective communication and problem-solving; and gain self-awareness and a sense of personal identity.
Concrete Support (SF & YT)	Identifying, accessing, advocating for, and receiving high quality and equitable support including the basic necessities everyone deserves and specialized services to address specific needs.

young people has changed significantly in that they are experiencing *major threats to health* (e.g., global pandemic); *increased burdens on families* (e.g., rising costs of housing relative to family incomes); *changing social norms* (e.g., increased efforts to ban books about racial and LGBTQ+ identities); *environmental disruptions* (e.g., climate change); and *new discriminatory policies and laws* (e.g., transgender people being denied access to gender-affirming medical care). These challenges come with a difficult price for many children, youth, and young adults. In 2021, the United States Surgeon General stated:

The challenges today's generation of young people face are unprecedented and uniquely hard to navigate. And the effect these challenges have had on their mental health is devastating. . . . All of that was true even before the COVID-19 pandemic dramatically altered young peoples' experiences at home, at school, and in the community. The pandemic era's unfathomable number of deaths, pervasive sense of fear, economic instability, and forced physical distancing from loved ones, friends, and communities have exacerbated the unprecedented stresses young people already faced. (pp. 3-4)¹

Children, youth, and young adults in the United States have not experienced these national challenges equally.² Studies show that young people who are members of historically marginalized identity groups—based on race, ethnicity, gender identity, sexuality, ability, economic circumstances, geographic location, national origin, and involvement in child- and youth-serving systems—tend to fare worse. For instance, during the COVID-19 pandemic, “56% of LGBTQ youth reported that their mental health was poor most of the time or always” (p. 13)³; Indigenous youth had the highest rates of depression and Black and Latine youth had the greatest increases in the proportion of youth experiencing suicidal ideation⁴; children in households with lower incomes lost access to free school lunches; youth who lived in rural areas frequently had difficulty participating in school because of limited internet connectivity; and Asian American youth experienced increased stress due to COVID-19-related blame, discrimination, harassment, and attacks.⁵

Despite the challenges for many children, youth, and families in general and the additional, exacerbated challenges for historically marginalized identity groups, this is still a time of hope, optimism, and promise. For example, today's young people are growing up in an era of increased youth volunteerism; more acceptance of diverse racial, ethnic, gender, and sexual identities; and digitalization including the internet, smart phones, apps, social media platforms, and emerging technologies.⁶ Data from a 2021 survey of young people “suggests that the pandemic, extreme climate events, and a charged sociopolitical atmosphere may have reinforced people's passions and given them oxygen” (p. 1).⁷ In fact, studies show that what matters most to young people is their desire to be heard, as well as their sense of identity, individual expression, authenticity, meaning, purpose, and personal ethics.⁸ Young people are environmentally conscious, passionate about changing the world, and are eager to “take the torch from those who, in their opinion, are doing too little to improve society and address the issues they care about most. They're tired of waiting for change to happen and are taking action to hold others accountable” (p. 33).⁹ For instance, they have demonstrated their power and voice by fighting for racial, ethnic, climate, and environmental justice (e.g., demonstrating solidarity with the Black Lives Matter movement and the Standing Rock Sioux Tribe), as well as mobilizing against gun violence (e.g., the March for Our Lives student-led organization).

The purpose of this report is to expand the perspectives and research evidence that inform the SF and YT frameworks by addressing key issues not highlighted in the initial SF and YT research foundation reports (see reports^{10,11}). It is intended to broaden understandings about the challenges children, youth, and parents face and ways to promote a trajectory of healthy development and well-being. The report includes research and perspectives by racially and ethnically diverse scholars to ensure that the explanations of key constructs and pathways to healthy development and well-being are not limited to a single ethnocentric perspective. Also, it is informed by perspectives of SF and YT thought partners, practitioners, and young adults which were shared during several listening sessions undertaken in 2023.

Numerous references are made to Black, Indigenous, Latine, Asian American, and White children, youth, and families as a collective but this does not presume that these racial and ethnic groups are monolithic. The characteristics and experiences that are described refer to similar within-group patterns with the understanding that there are also

meaningful cultural, linguistic, gender, and socioeconomic differences within each racial and ethnic group. In addition, the names of racial and ethnic groups are indicated each time they are referenced rather than reducing them to a collective identity, such as “People of Color” or “BIPOC”.

BACKGROUND INFORMATION

SF PROTECTIVE FACTORS = YT PROTECTIVE AND PROMOTIVE FACTORS

Although the Strengthening Families framework refers to “protective factors” and the Youth Thrive framework refers to “protective and promotive factors”, this different terminology carries the same meaning. A common definition of protective factors is characteristics that operate in response to risk factors; that is, factors that lessen the impact of exposure to risk factors and, thereby, decrease the likelihood of negative outcomes.¹² Both the Strengthening Families and Youth Thrive Frameworks point out that while reducing risk factors is necessary, only reducing risk is not sufficient for individuals and families to flourish; actively promoting well-being and increasing the likelihood of positive outcomes is essential, as well.

In some literature, protective factors are considered to be characteristics, conditions, and circumstances that have two simultaneous functions: (a) to reduce the effect of exposure to risk factors and stressful life events and (b) to promote healthy development and well-being¹³; this is the case in the Strengthening Families Framework. In other research literature these two functions are labeled separately as “protective factors” and “promotive factors”, respectively.¹⁴ In the Youth Thrive Framework, the five factors also serve the two functions simultaneously and are labeled protective and promotive factors to underscore the two functions. Going forward, the acronyms “PFs” will be used to refer to the SF protective factors and “PPFs” to refer to the YT protective and promotive factors.

THE FOUNDATIONAL VALUES OF STRENGTHENING FAMILIES AND YOUTH THRIVE

The SF and YT frameworks are grounded in a common set of values that describe the standards for implementing the frameworks irrespective of the context in which they are applied. The action-oriented values are: (a) employ a social-ecological approach; (b) adopt a strengths-based perspective; (c) understand oppression and privilege; (d) incorporate an intersectional frame of reference; (e) demonstrate cultural responsiveness, cultural humility, and intellectual humility; (f) amplify constituent voice and power; and (g) pursue equity and justice for children, youth, and families. Although these foundational values are not entirely new to the child and youth development fields, they are implemented in ways unique to the SF and YT frameworks.

Employ a Social-Ecological Approach. A social ecological approach extends the responsibility for health and well-being from singularly on individuals to include environmental influences including community, cultural, economic, political, systemic, structural, and ideological forces. Employing a social-ecological approach in the SF and YT frameworks enables a comprehensive examination of conditions and processes that build or undermine the PFs/PPFs; as well as contribute to the root causes of problems, healthy or adverse outcomes, pathways to care and healing, and equity and justice for all children, youth, and families.

Adopt a Strengths-Based Perspective. SF and YT are strengths-based frameworks in that they affirm that all individuals have intrinsic value and existing assets that can be identified and mobilized to improve their quality of life, promote well-being, address problems, and heal. Focusing on strengths does not mean ignoring, minimizing, or denying an individual’s pain, challenging circumstances, risk factors, or the institutional and systemic factors that create and sustain inequities. Rather, a strengths-based perspective acknowledges individuals’ difficulties and frames them as motivation and opportunities for positive change. “Strengths-based perspectives do not view the individual or community as the source of the problem, but rather suggest that the individual or community is being impacted by a problem” (p. 6).¹⁵

Recognize and Respond to Oppression and Privilege.

Implementing SF and YT is an implicit commitment to improving the lives of children, youth, and families whose circumstances increase the likelihood of poor outcomes, including experiencing forms of oppression. Oppression refers to the unjust exertion of power that marginalizes, dehumanizes, and delimits power, rights, and opportunities to individuals based on deeply embedded socially constructed ideas about their identity group(s) as inferior, inherently undeserving, and pathological.¹⁶ An equally significant form of injustice is privilege, which refers to unearned power, rights, advantages, and benefits afforded to individuals based on deeply embedded socially constructed ideas about their identity group(s) as superior, inherently deserving, powerful, and the norm or standard against which other identity groups should be compared.¹⁷ “Privilege and oppression operate hand in hand; one cannot exist without the other. . . . Privilege and oppression affect each of our life chances, the impressions we make on others, and our own sense of identity” (p. 523).¹⁸ Socially constructed identity group hierarchies define which groups are granted privilege and which are not. Thus, identity group hierarchies result in systems of oppression—such as racism, sexism, heterosexism, classism, and ableism—that become rooted in individuals’ consciousness and in the ideologies of a society’s institutions.

Incorporate an Intersectional Frame of Reference. The SF and YT frameworks acknowledge the importance of incorporating an intersectional frame of reference to analyze, inform, and respond to a broader, more inclusive understanding of the experiences and specific needs of children, youth, parents, and families. Intersectionality is commonly interpreted as meaning that individuals have simultaneous multiple identities. Some researchers “stress that intersectionality is not simply about ‘multiple identities’ and urge greater fidelity to intersectionality’s historic focus on power and interlocking structural inequality” (p. 88).¹⁹ In this regard, intersectionality not only refers to the interconnectedness of identities but to the interconnectedness of systems of oppression and privilege which places some individuals at higher risk of discrimination and other forms of injustice.²⁰

Demonstrate Cultural Responsiveness, Cultural Humility, and Intellectual Humility.

Learning from and about diverse children, youth, parents, and families and responding respectfully to them—that is, demonstrating cultural responsiveness, cultural humility, and intellectual humility—is essential for the effective implementation of the SF and YT frameworks. Being culturally responsive means that individuals are able to appreciate and value cultural differences, recognize potential biases, and interact and work with diverse individuals in a manner that affirms their worth.²¹ Cultural humility is the process of intentional and honest self-examination, self-reflection, and critical consciousness about one’s own embedded assumptions and blind spots about different identity groups which may influence one’s perception and treatment of children, youth, parents, and families.²² Intellectual humility involves recognizing that one’s current beliefs may not be fully informed or may be wrong; being willing to listen to and learn from others’ experiences and perspectives; being open to corrective feedback; and appreciating others’ intellectual strengths.²³

Amplify Constituent Voice and Power. Within the SF and YT frameworks parents and youth are regarded as resources who deserve a voice in defining their own needs, goals, hopes, and future aspirations—as well as in shaping

programs, practices, policies, and systems that impact them, their families, and the collective interests of their peers.^{24,25} SF and YT further emphasize that constituent voice is insufficient without a shift in power dynamics. Thus, parents and youth also need constituent power; that is, equal access to resources and equal opportunity to direct influence over their lives and circumstances, as well as the life of their families and communities. The critical importance of constituent voice and power is symbolized in the mantra from the disability rights movement, “Nothing about us without us”.

Pursue Equity and Justice. Pursuing the equitable and just treatment of the children, youth, parents, and families who are served is viewed as an ethical obligation in the implementation of SF and YT. The need to pursue equity and justice is an acknowledgement that individuals and communities have been differentially impacted by systems, laws, and ideologies that have

unfairly advantaged some while intentionally and unfairly disadvantaging others and causing disproportionate harm.

Equity requires that all individuals and populations are valued equally, historical injustices are recognized and rectified, and resources are provided according to need.

Justice embraces these requirements but goes a step further: It requires repairing and transforming circumstances, structures, contexts, and systems themselves so that they achieve and sustain equity and fairness through proactive and preventative measures (para. 3).²⁶

Taken together, the foundational values of Strengthening Families and Youth Thrive reflect the fundamental ideas, priorities, and effective courses of action in implementing the two frameworks. The next section of the report will provide additional perspectives and research evidence that informs the SF and YT frameworks.

EXPANDING THE UNDERSTANDING OF WELL-BEING

Although there is no consensus about a single definition of well-being, there are several common points of agreement about individual well-being among many researchers.^{27,28,29}

Well-being is:

1. An individual’s life-long self-appraisal of the quality of their life based on their unique circumstances at a particular point in time.
2. A combination of several experiences, specifically:
 - frequent positive emotions
 - infrequent negative emotions
 - functioning well
 - having a sense of purpose
 - developing one’s potential
 - having some control over one’s life
 - experiencing positive relationships
 - effectively navigating life’s challenges
 - overall satisfaction with one’s life

3. Promoted or threatened by characteristics, conditions, and experiences across the levels of the social ecology.
4. Comprised of several interrelated domains that contribute to healthy functioning and success throughout childhood, adolescence, and adulthood.

The SF and YT frameworks delineate 12 well-being domains which can be discussed with youth and parents to encourage them to pinpoint both areas of strength and needed growth more precisely and to affirm that the PFs/PPFs can help to promote one or more well-being domains. The 12 well-being domains are defined in Table 2. CSSP’s research brief titled “Domains of Well-Being” provides detailed information about the nature of well-being and examples of parents’ and young people’s healthy functioning in each well-being domain.

TABLE 2. WELL-BEING DOMAINS

WELL-BEING DOMAINS	DEFINITION
Physical	Practicing self-care for the needs of one’s body (e.g., adequate nutrition & sleep)
Emotional	Accepting and managing one’s emotions; functioning well during difficult times
Relational/ Social	Building healthy relationships and having authentic interactions with others
Intellectual	Desiring to increase understanding, improve skills, and continually challenge oneself
Spiritual	Having a sense of purpose and meaning in one’s life
Behavioral	Engaging in lifestyle choices that support other domains of well-being
Economic/ Financial	Having the most basic survival needs met and sustainable assets to prosper
Vocational/ Occupational	Experiencing personal satisfaction and meaning in one’s work
Environmental	Valuing the relationship between oneself and the natural and built environments
Family	Members are safe, healthy, productive, and supportive in good and difficult times
Community	Presence of conditions that enable a community to flourish (e.g., political, economic)
Societal	People are able to coexist peacefully and have opportunities to thrive

RACISM: A SIGNIFICANT THREAT TO CHILD, YOUTH, PARENT, AND FAMILY WELL-BEING

Major science and research organizations have emphasized the need for practitioners to acknowledge and address the role of racism in threatening healthy child and youth development and well-being. For example, research from the Center on the Developing Child at Harvard University indicates that:

Years of scientific study have shown us that, when children’s (and youth’s) stress response systems remain activated at high levels for long periods, it can have a significant wear-and-tear effect (i.e., “weathering”) on their developing brains and other biological systems. This can have lifelong effects on learning, behavior, and both physical and mental health. A growing body of evidence from both the biological and social sciences connects this concept of chronic wear and tear to racism. This research suggests that constant coping with systemic racism and everyday discrimination is a potent activator of the stress response. . . . Multiple studies

have documented how the stresses of everyday discrimination on parents or other caregivers, such as being associated with negative stereotypes, can have harmful effects on caregiving behaviors and adult mental health. And when caregivers’ mental health is affected, the challenges of coping with it can cause an excessive stress response in their children. (p. 1)³⁰

Yet, even with evidence of the deleterious impact of racism, rarely are racial trauma, prejudice, and discrimination a focus in programs and interventions for children, youth, and parents.³¹ The SF and YT frameworks assert that it is essential to integrate into practice research-based and youth- and parent-informed understandings of the effects of racism, as well as proactive strategies that have been employed to navigate life effectively within conditions of racism. SF and YT practitioners should be prepared to intentionally discuss these issues with children, youth, and parents of all races and ethnicities, and to understand,

recognize, and proactively respond to racism that they, and the constituents with whom they work, experience. Discussing and responding to these experiences helps to mitigate their effect and communicates to children, youth, and parents that they are in a supportive environment.³² To do so, SF and YT practitioners must explore their own racial or ethnic identities, reflect on their beliefs and feelings about other racial and ethnic groups, and understand the dynamics and manifestations of racism.

DEFINING RACISM

Many definitions of racism focus on the outcomes of racism, such as how it unfairly advantages some and unfairly disadvantages others. The SF and YT frameworks focus on a definition that relates to the conditions, circumstances, or processes that contribute to these outcomes. That is, racism is:

A complex system of beliefs, attitudes, behaviors, practices, policies, and laws borne out of the

ideology of white supremacy—that is, the internalized belief of White people’s presumed superiority and entitled power over people of other races and ethnicities. Racism presumes a hierarchy of human value and regards “whiteness” as the standard against which other races and ethnicities should be compared. (p. 1)³³

Manifestations of racism occur across the four levels of the social ecology and are labeled here as: systemic/societal racism, institutional/community racism, interpersonal/relational racism, and intrapersonal/individual racism. In addition to interpersonal and intrapersonal experiences, practitioners should recognize and address systemic and institutional policies, procedures, and practices that perpetuate inequities, as well as those which connect youth and parents to opportunities for advocating for change. Table 3 provides a brief description of each level of racism. CSSP’s research brief titled “Racism and Anti-Racism Across the Social Ecology” provides more detailed descriptions and examples of each level.

TABLE 3. LEVELS OF RACISM

LEVEL	DEFINITION
Systemic/ Societal Racism	Racism that is “pervasively and deeply embedded in systems, laws, written or unwritten policies, and entrenched practices and beliefs that produce, condone, and perpetuate widespread unfair treatment and oppression of People of Color, with adverse health consequences” (p. 171). ³⁴ Also called structural racism.
Institutional/ Community Racism	Racism that involves discriminatory attitudes, regulations, procedures, practices, and experiences in organizational and community contexts—such as neighborhoods, schools, workplaces, healthcare, and courts—that create, result in, and sustain differential outcomes, as well as differential access to power, privilege, opportunity, and resources.
Interpersonal/ Relational Racism	Racism that involves verbal and non-verbal prejudiced and discriminatory interactions between individuals.
Intrapersonal/ Individual Racism	Racism that is manifested in two forms. Personal racism is reflected in the deeply ingrained stereotypical, prejudiced beliefs and feelings individuals hold about other races and ethnicities. Internalized racism refers to the acceptance of negative beliefs and feelings about one’s own racial group.

CULTURE AS AN OVERARCHING PROTECTIVE FACTOR

The SF protective factors (PFs) and YT protective and promotive factors (PPFs) are universal—in that they describe factors that are essential for the well-being of all children, youth, and families—yet they may be understood, implemented, and manifested in culturally specific ways. In general, PFs and PPFs are characteristics and conditions that serve four essential purposes for children, youth, and parents:

1. Maximizing potential by building competencies, relationships, resources, and environments that promote healthy development, healing, and well-being;
2. Reducing the likelihood of engaging in negative risk-taking behaviors;
3. Lessening the effect of exposure to risk factors, harmful situations, and stressful life events; and
4. Helping individuals negotiate challenging circumstances, identify proactive solutions, and fare better in school, work, and life.^{35,36}

Research and practice have shown that individuals' racial and ethnic culture significantly contributes to these purposes.³⁷ Thus, within the SF and YT frameworks, racial and ethnic culture is conceived as an overarching protective factor that influences how resilience is demonstrated, the nature of social connections, what knowledge is acquired and how, the expression of social and emotional competence, and the type of concrete support and care that is sought and provided. This perspective is grounded in the belief that all racial and ethnic groups have a unique collective culture, not just those who are typically labeled as “minority groups” or “historically marginalized”. Research conducted by a group of Native American scholars provided a unique definition of culture that is generalizable to all racial and ethnic groups, specifically:

The meaning of culture to Native American/Indigenous Peoples is not about esteem, taste, or music but rather is described as a *cognitive map on how to be* (emphasis added). Native American/

Indigenous culture can be thought of as all the things and ways in which Native/Indigenous Peoples understand who they are, where they come from, and how they are to interact with others. (p. 2)³⁸

Each culture provides its members an understanding of “how to be” in daily living through direct, indirect, and vicarious experiences that teach shared values, beliefs, behavior, skills, language, meanings, history, and ways of knowing, thinking about, and responding to the world. White children and youth in the United States learn “how to be” in a context which centers their race as the norm, while Black, Indigenous, Latine, and Asian American children and youth learn “how to be” in a context of the threat or actual experience of racism and discrimination. The fact that positive child and youth outcomes are still possible for them speaks to the strength and protective nature of the messages and experiences Black, Indigenous, Latine, and Asian American children and youth receive in their relational contexts, in particular, family and culture.

Numerous studies have shown that a sense of cultural connectedness helps to promote positive child and youth development and mitigate the negative impact of racism. “Cultural connectedness is closely linked to positive health and social outcomes for Native youth. A growing body of research supports what tribal communities have long known and practiced—that building a sense of belonging and helping youth grow a connection to place and cultural identity helps them grow into healthy adults” (para. 2).³⁹ Cultural connectedness refers to having a strong sense of belonging to and pride in one's family and community, as well as one's physical, biological, emotional, relational, and spiritual environments which “impart in the individual a sense of fitting in and being part of a significant social group” (p. 10).⁴⁰ This conception of cultural connectedness is typically found in the research literature focused on different Indigenous Peoples.

Similarly, studies focused on Black, Latine, and Asian American youth also have found that a strong sense of

racial and ethnic identity—that is, positive beliefs, feelings, and behavior about their group membership, irrespective of public regard for their group—can protect against or reduce the deleterious effects of racism-related stress and discrimination because a sense of connectedness with one’s cultural group can enhance one’s sense of self, self-esteem, and self-worth.^{41,42,43,44} The SF and YT frameworks emphasize

that authentic and effective engagement with children, youth, parents, and families requires a consideration of and responsiveness to their cultural beliefs, values, and individual or collective experiences of racial privilege or racial trauma which have shaped individuals’ ways of knowing, thinking about, and responding to the world.

EXPANDING UNDERSTANDING OF THE STRENGTHENING FAMILIES PROTECTIVE FACTORS & YOUTH THRIVE PROTECTIVE AND PROMOTIVE FACTORS

Together, the SF and YT frameworks describe CSSP’s developmental continuum of protective factors/protective and promotive factors that increase the likelihood of positive outcomes for young children and their families and youth and young adults, respectively. Many early explanations of child, parent, and youth PFs/PPFs primarily focused on characteristics and conditions at the individual and interpersonal levels of the social ecology. More recently, research has begun to examine the institutional/community and systemic/societal forces that affect children, youth, parents, and families in tandem with the individual and interpersonal levels.⁴⁵ Results suggest that “programmatically and policy interventions that reduce risk and enhance protection at these levels are promising primary prevention strategies for child maltreatment” (p. 1)⁴⁶ and other potentially negative outcomes. The next sections of this report will provide research and perspectives that build on and expand the existing research foundation for each of the Strengthening Families PFs/Youth Thrive PPFs, including community and societal level factors that promote or threaten the PFs/PPFs.

PARENTAL RESILIENCE AND YOUTH RESILIENCE

The Need to Redefine Resilience

Many SF and YT practitioners and thought partners report that parents and youth reject the long-standing message that resilience is their sole responsibility and that the

solution to the trauma, adversity, and negative forces that impact their lives is dependent upon whether they have the inner strength to cope with and persevere through difficult circumstances (CSSP Listening Sessions, 2023). The implication of this long-standing message is that, if they do not possess the required personal strength, or do not put forth sufficient effort, then it is their fault for not achieving positive outcomes. This message grows out of a dominant view of resilience “as situated within the individual” (p. 2)⁴⁷ and a commonly cited definition of resilience as *positive adaptation despite adversity*.⁴⁸ Positive adaptation typically refers to adjustments that individuals make to cope with adversity and maintain healthy functioning which result in outcomes that are better than what would be expected since their circumstances are typically associated with poor outcomes⁴⁹ (e.g., a student who maintains an “A” average although her family is experiencing homelessness).

Although these conceptions of resilience and positive adaptation may seem desirable, they are problematic because they place the locus of solutions to problems and the process of change entirely on the individual, implicitly blame the individual experiencing adversity,⁵⁰ and “exonerate the macro system of society from its responsibility to deal with adverse social conditions” (p. 238).⁵¹ A SF thought partner stated, “We can’t just keep expecting parents and youth to be resilient, to overcome obstacle after obstacle after obstacle. At some point we must not have so many obstacles” (CSSP Listening Sessions,

2023). In addition, often, the message about efforts to promote resilience “may shift the emphasis from positive adaptation despite adversity to positive adaptation to adversity” (p. 334).⁵² For example, although Black girls and women tend to experience disproportionately high levels of racism, sexism, and discrimination compared to other racially gendered groups, often, they are encouraged to develop thick skin and ignore their mistreatment in order to get along with and be accepted by others; yet, the racist, sexist, and discriminatory conditions remain unchanged.

Parental Resilience and Youth Resilience

Given the growing number of resilience researchers who assert that an exclusive focus on individual-level factors is shortsighted,⁵³ as well as parents’ and youths’ concerns, in the SF and YT frameworks parental resilience and youth resilience are no longer viewed as singularly an individualistic construct. Instead, the frameworks emphasize the need to consider factors across the social ecology that impact the lives of children, youth, parents, and families and help to build or undermine resilience. Thus, **parental resilience and youth resilience are defined as managing stress and functioning well—facilitated by individual, relational, community, or societal factors—when faced with stressors, adversity, or trauma.** Parental resilience and youth resilience are:

1. Influenced by the individual’s, family’s, or culture’s conceptions of what managing stress and functioning well means and how they are demonstrated.
2. In response to current or past adversity.
3. Contextual with respect to individual, family, cultural, or societal circumstances, resources, expectations.
4. Reflected in outcomes such as:
 - Ongoing efforts to heal from the effects of trauma,
 - Having access to opportunities and resources that promote well-being,
 - Decreased impact of adverse conditions and the likelihood of further harm,

- Reduced or eliminated root causes of adverse conditions,
- The absence of or reduced maladaptive emotions or behaviors,
- Resistance to oppressive or traumatic conditions or experiences,
- Seeking a balanced lifestyle, and
- Personal growth and wisdom.^{54,55}

Parental resilience and youth resilience may be influenced by specific cultural norms, values, traditions, rituals, support systems, and ways of knowing and being that contextualize how resilience is defined and manifested in different cultural groups.^{56,57} For example, “Native Americans draw strength from traditional ways of living, places, relationships, and collective successes. Their resilience is built up through culture, spirituality, shared values, and a strong sense of identity, accountability, and responsibility” (para. 1).⁵⁸ It is important for parents and youth to self-identify the conditions and processes that facilitate resilience and the other PFs/PPFs. In this way, efforts to promote the PFs/PPFs will be better aligned with their personal, family, or culture’s definition of resilience and well-being.

Societal Factors that Facilitate Resilience

Societal factors that facilitate resilience are processes within and across social, political, economic, legal, health, and environmental systems that support positive macro-level change in response to macro-level root causes of adversity. The idea of identifying and addressing societal factors tends to be minimized or ignored altogether in much of resilience research, but some researchers assert that “careful attention must be paid to the structural deficiencies in our society and to the social policies that families need to become stronger, more competent, and better functioning in adverse situations” (p. 385).⁵⁹ For example, societal level factors can include such processes as creating policies and laws that protect the fundamental rights of all people, earmarking federal funding for projects targeted for underserved populations, and building public support to advocate for change.

Community Factors that Facilitate Resilience

Toxic or adverse community environments are characterized by conditions such as persistent poverty and unemployment, lack of affordable and safe housing, neighborhood violence, institutional and systemic racism, inadequate public transportation, and limited access to social and economic mobility.⁶⁰ Changing the toxicity of community environments by identifying and addressing community conditions and processes that facilitate positive change and positive functioning is increasingly recognized as essential for preventing adversity, mitigating the impact of adversity, and building stronger communities to support child, youth, and family health and well-being.⁶¹ A preliminary study of community protective factors resulted in the identification of four community conditions regarded as essential for children, youth, families, and communities to thrive, specifically: (a) providing equitable access to essential, basic needs such as affordable and quality housing; (b) fostering a collective understanding that asking for help is a sign of strength and that all parents and young people can benefit from support; (c) promoting racial and social justice; and (d) clarifying the community’s collective responsibility and accountability for the well-being of children.⁶²

Relational Factors that Facilitate Resilience

The science of child and adolescent development over the last two decades consistently confirms that children’s, youth’s, and parents’ supportive, reliable relationships are

essential in facilitating positive functioning in response to disruptive life challenges and trauma.⁶³ “Relational processes support individuals’ resilience by encouraging their potential to overcome stressful challenges and by supporting their best efforts to make the most of their lives” (p. 255).⁶⁴ Studies have shown that the presence and emotional support that healthy, caring relationships provide can promote overall physical and mental health; strengthen the ability to deal with adversity and challenges; and be protective against health risk behaviors (e.g., suicidal ideation), adverse experiences, and the impact of trauma.^{65,66}

Individual Factors that Facilitate Resilience

Much of the research on resilience has focused on studying and identifying individual-level characteristics that promote or are an outcome of resilience. For example, research has shown that “on a biological level, resilience results in healthy development because it protects the developing brain and other organs from the disruptions produced by excessive activation of stress response systems.” (p. 1).⁶⁷ Table 4 provides a list of individual characteristics that are commonly indicated in the resilience literature as those which support the development of resilience in children, youth, and adults.⁶⁸ Taken together, these characteristics reflect aspects of two of the other Strengthening Families and Youth Thrive PFs/PPFs; specifically, social connections and social, emotional, and cognitive competence.

TABLE 4. INDIVIDUAL CHARACTERISTICS THAT SUPPORT THE DEVELOPMENT OF RESILIENCE

SOCIAL, EMOTIONAL, AND COGNITIVE COMPETENCIES	SOCIAL CONNECTIONS
<ul style="list-style-type: none"> • Executive function skills (e.g., persistence, problem-solving, decision-making) • Cognitive flexibility—thinking about something in multiple ways • Self-regulation skills (e.g., goal setting, self-monitoring, self-evaluation, self-reinforcement) • Sense of optimism and hope for the future • Self-confidence, self-efficacy • Positive view of present and future self • A sense that one’s life has meaning and purpose • Channeling emotions into healthy behaviors • Making safe and constructive choices 	<ul style="list-style-type: none"> • Nurturing, protective, warm, communicative, and encouraging parent-child relationship • Relationship with at least one positive, stable, and nurturing parent or other caregiver who provides consistent and warm responsiveness • Network of trusted, caring individuals • Friendships characterized by care and acceptance • Prosocial participation in safe, supportive, growth-oriented organized activities • Sense of connectedness and belonging with others, organized activity, and/or organization • Professional psychosocial supports

Posttraumatic Growth

Resilience results in much more than “bouncing back” from difficult situations⁶⁹; that is, it is much more than parents and youth returning to how things were before experiencing adversity. “As people encountering trauma seek to reestablish equilibrium in their life, they (may) engage in a process of reflection and reevaluation. . . . This process of meaning-making in trauma may result in personal growth and wisdom” (p. 281).⁷⁰ Thus, resilience may result in “bouncing forward”⁷¹ or posttraumatic growth; that is, positive change and growth that benefits parents and youth as a result of their efforts to cope with or move beyond significant challenges, adversity, or trauma.

Posttraumatic growth can occur in various ways, such as experiencing an increased sense of hope; improved problem solving and coping skills; new understandings about one’s self, priorities, goals, and future; strengthened spirituality or religious commitment; more meaningful and valuable relationships; and an increased appreciation for life.^{72,73} Posttraumatic growth often takes time and individuals may continue to experience distress as they make efforts to achieve positive change. Also, not everyone who experiences trauma will experience posttraumatic growth.⁷⁴ Although posttraumatic growth may be desirable, the pain and suffering from adversity and trauma and the significant emotional and cognitive efforts to recover should not be minimized in an effort to promote posttraumatic growth.

Resistance as a Viable Act of Resilience

Resistance refers to different forms of overt or covert individual and collective “pushing back” against traumatic, oppressive, or destabilizing experiences.⁷⁵ In contrast to the earlier example about Black girls and women being encouraged to ignore their mistreatment, often they resist mistreatment by speaking up, demanding to be heard, and refusing to remain invisible. Because this kind of response and resistance tends to run counter to what may be considered appropriate behavior by those in positions of power, often it is devalued and punished rather than being recognized as self-affirmation and resilience. “Resistance needs to be viewed as the mediating process of resilience targeted at challenging the adversity, rather

than accommodating to it” (p. 90).⁷⁶ Acts of resistance can be risky (e.g., risk of school expulsion, job loss, or being arrested). Thus, everyone must decide for themselves if engaging in resistance is worth the risk and if not resisting would compromise their personal principles.

Resistance can benefit an individual’s mental health and well-being. For example, standing up for oneself, for one’s children, for the group(s) with which one identifies, or for a just cause—that is, resistance—is a form of personal agency. Agency is the desire and ability of individuals to make decisions and navigate change in their own lives, families, communities, and other contexts of influence. Agency drives individuals to be the architects of their own future; thus, activism is agency in action. Activism has been proposed as a mechanism through which individuals who witness or experience injustice can strengthen their individual and collective identity, forge community bonds, promote a positive sense of self and well-being, increase hope, and heal.^{77,78}

Resistance is commonly thought of as activism or other forms of pushing back against external forces, such as calling a help line, writing an anonymous op-ed, taking action to leave an abusive relationship, or being involved with youth-led movements about racial justice, climate change, or gun violence. But resistance also can mean pushing back against challenging internal forces by engaging in self-care. “Some days, the most radical thing you can do is care for yourself enough that you may show up again tomorrow.”⁷⁹ Self-care includes actions that serve to: prioritize one’s needs; preserve one’s physical, emotional, spiritual, relational, and cognitive health; restore balance and heal; and bring peacefulness and joy.^{80,81} To paraphrase author Audre Lorde, caring for oneself is not self-indulgence, it is self-preservation, and that is an act of resistance.⁸²

SOCIAL CONNECTIONS

The Nature of Social Connections

A substantial body of evidence consistently shows that positive, meaningful, supportive, and warm social connections can have lifelong positive effects on an

individual's health, development, coping ability, and well-being as well as protect against a range of health and behavioral risks such as suicidal ideations and violence perpetuation.^{83,84} For example, studies have demonstrated that parents' positive social connections can help relieve some of the demands of parenting; provide needed concrete assistance; support the development of resilience; increase parents' overall well-being; and foster attuned, nurturing parenting behavior that promotes secure attachments and relational health in children and youth.^{85,86} Also, when children, youth, and parents are faced with stressors, adversity, or trauma, constructive and supportive social connections can help them to feel secure and not alone, even when the significant others they trust are not physically present; believe that they matter and are loved; and have a positive self-concept, high self-esteem, and self-confidence.^{87,88} Social connections also play an important role in the physiology of the stress response. Research on neuroendocrine systems found that social connectedness can help buffer bodily responses to stress thereby reducing general levels of psychological distress and anxiety.⁸⁹

In the SF and YT frameworks **social connections are defined as healthy, meaningful, trusting, and sustained relationships with people, institutions, communities, or a higher power that promote a sense of connectedness, belonging, and mattering.** Positive relationships with others are valuable resources for children, youth, and parents because they can provide emotional support, helpful guidance, a sense of community, and concrete support. For example, youth who have an adult to confide in and talk about serious concerns are less likely to take part in risky behaviors such as alcohol and drug use and sexual violence. Preventing these behaviors is important because they are associated with many health and behavioral problems later in life. Also, it is helpful for children, youth, and parents to be constructively engaged in social institutions and contexts that are safe, stable, equitable, and growth oriented. For instance, studies show that mentoring programs are an effective way to improve behavioral, social, emotional, and academic outcomes in youth.⁹⁰ Social institutions provide similar types of social support as do people, as well as opportunities to participate in organized activities and

contribute to the betterment of one's community and the larger society. Researchers have noted that contributing to the well-being of others implicitly assigns value to parents and youth and positively contributes to their own sense of self-worth.^{91,92}

The SF and YT frameworks also emphasize the value of spiritual connectedness/spirituality in the lives of parents and youth. Spirituality is conceived in this context as a feeling of connection with something that helps parents and youth to find meaning, purpose, optimism, and value in their lives, such as cultivating a relationship with oneself, one's community, one's environment, a higher power, or nature.⁹³ For example, studies show that feeling emotionally connected with nature/the natural world is associated with a range of benefits to well-being such as, feeling good, functioning well, and a sense of autonomy, vitality, meaning, and personal growth.⁹⁴ The SF and YT emphasis on spiritual connectedness is consistent with a position articulated by a leading researcher in adolescent development who acknowledged, "spiritual development is a missing priority in youth development and that theory, research, and practice would be enhanced and enriched if the field purposefully incorporated spiritual development" (p. 119).⁹⁵ Also, in a cross-cultural study about parenting philosophies and child care practices, researchers found that many parents described the strength they derived from their spirituality in guiding them in their parenting roles and decision making.⁹⁶

Belonging

A sense of belonging is commonly conceived as "feeling that one is an integral part of their surrounding systems, including family, friends, school, work environments, communities, cultural groups, and physical places" (p. 87).⁹⁷ Evidence suggests that feeling welcomed, accepted, and included has positive effects on one's identity, sense of self-worth, worldview, physical and mental health, and positive emotions.⁹⁸ In contrast, being or feeling excluded, ignored, or rejected can interfere with an individual's ability to connect with others and can evoke negative feelings such as anxiety, depression, and loneliness.

Sometimes in an effort to offset these negative feelings and seek acceptance, individuals may try to change how they act and distort who they really are. Thus, some researchers include an additional aspect in their conception of belonging; that is, being and presenting one's true self rather than being inauthentic in order to fit in with and be accepted by a desired group.⁹⁹ "Because true belonging only happens when we present our authentic, imperfect selves to the world, our sense of belonging can never be greater than our level of self-acceptance."¹⁰⁰ When youth and parents internalize the importance of being one's true self, they are able to be more critically attuned to the social connections that fit with their sense of self and those which do not fit. Also, being one's true self reminds parents of the importance of prioritizing and actively encouraging their children and youth to be comfortable with who they are and to be proud of their identities.

Mattering

Having a sense of mattering is thought to be a basic human need. Mattering commonly refers to a child's, youth's, or adult's perception that others are aware of and pay attention to them, depend on them, are concerned with what happens to them, and appreciate them.¹⁰¹ Mattering matters. Individuals who believe that they matter feel validated for who they are—their values, thoughts, feelings, beliefs, knowledge, abilities, and experiences—fully and totally without judgment. Recent research asserts that mattering also includes adding value to others. "To matter, it is not enough to feel appreciated and recognized. Being valued is a necessary but insufficient condition for mattering. To feel fully human, and to matter, we need skills and opportunities to add value, to make a contribution, to ourselves and others" (p. 4).¹⁰²

Infants and toddlers need to feel that they matter to their family; their early life experiences can nurture or obstruct their sense of mattering. The adults and older children in young children's lives can positively contribute to young ones' sense of mattering by being consistently responsive, attentive, and communicating in various ways that they are special and important (e.g., cuddling, talking with them, reading books). Young children who don't feel

that they matter are less likely to thrive.¹⁰³ The need to matter to one's family continues across the lifespan. In adolescence, mattering to others includes youth's family, peers, significant adults outside of one's family, valued communities, and the larger society. A study of 2,000 youth provided evidence that feeling that they matter to their families was protective against threats to well-being (e.g., engaging in self-destructive behaviors) and helped youth to navigate through the adolescent years. Conversely, as youth's feelings of mattering in their family decreased, antisocial, aggressive, and self-destructive behaviors increased.¹⁰⁴

Whether or not an individual feels like they matter is central to how they view themselves and their lives. Studies indicate that individuals who feel a "persistent sense of mattering unconditionally to significant others will have a key inner resource that fuels positive responses to life challenges" (p. 4).¹⁰⁵ They tend to experience a positive self-concept; more positive emotions; high levels of self-significance, social support, school and job satisfaction, and well-being; and low anxiety and depression levels.¹⁰⁶ In contrast, individuals who do not have a sense of mattering tend to experience high levels of depression and academic or job-related stress.¹⁰⁷ Also, they "lack the basic sense of personal significance, human connectedness, and social acceptance required to thrive and flourish" (p. 4).¹⁰⁸

Healthy vs. Unhealthy Relationships

Having healthy relationships that are supportive and create a sense of belonging and mattering is critically important; but not all relationships are healthy. An unhealthy relationship is one in which there is a consistent pattern of destructive conflicts, arguments, violence, or other negative interactions. Even if an apology follows each toxic interaction, the relationship is still unhealthy and can be physically and emotionally devastating to the well-being of children, youth, and parents. For example, parents and youth who experience intimate partner violence (IPV) may suffer physical injuries and depression, become cut-off from family and friends, begin to doubt their ability to care for themselves or their children, have a reduced sense of self, and have feelings of guilt, self-blame, and

hopelessness.¹⁰⁹ Similarly, children who are exposed to IPV are at risk of emotional, behavioral, and health problems.¹¹⁰

Unhealthy, toxic relationships can exist in many contexts, such as, between children, family members, marital relationships, youth exploring romantic relationships, long-term friendships, or co-workers. Thus, it is important for SF and YT practitioners to help children, youth, and parents to be able to distinguish between healthy and unhealthy relationships; seek help when they feel uncomfortable or threatened; and employ a safe, proactive response that removes them from the relationship, based on the nature of the relationship and the threatening conditions. Table 5 provides a list of some of the characteristics of healthy and unhealthy relationships that are relevant for both youth and parents. In addition, parents can use this list as a basis to discuss the characteristics of a good friend with their children.

Family Relationships

Family relationships can range from loving and supportive to hostile and strained and can advance, strengthen, or undermine well-being. At birth and continuing across the lifespan, loving, supportive family relationships provide a sense of security, mattering, self-worth, identity, purpose, optimism, positive affect, behavior regulation, and social

and tangible resources.¹¹² In contrast, strained, stressful family relationships not only negatively impact mental health but overall physical health, as well. For example, the stress associated with strained family relationships “can result in physiological processes that impair immune function, affect the cardiovascular system, and increase risk for depression, whereas positive relationships are associated with lower allostatic load (i.e., ‘wear and tear’ on the body accumulating from stress)” (p. 2).¹¹³ Three types of family relationships have garnered much research attention in recent years, specifically: early relational health, parent-adolescent connectedness, and the sibling relationship.

Early Relational Health. The knowledge about the importance of early relational health is a product of decades of scientific research from the fields of pediatrics, infant mental health, child development, and neuroscience, as well as observations and experiences of early childhood parents and practitioners. Early relational health refers to the state of emotional well-being that develops from a strong emotional connection between young children (birth to age 3) and their parents and other caregivers when they experience positive, warm, responsive, and consistent interactions with each other. These experiences communicate to young children that they matter and help to lay the foundation for health, development, and

TABLE 5. CHARACTERISTICS OF HEALTHY AND UNHEALTHY RELATIONSHIPS¹¹¹

HEALTHY	UNHEALTHY
Respectful: Partners treat each other with kindness, trust, and fairness.	Disrespectful: Lack of consideration of the other person’s feelings, needs, or goals.
Equitable: Partners respect each other’s differences and share decisions and responsibilities.	Controlling: One partner dominates the other person in a self-serving way.
Honest: Partners share their dreams, fears, and concerns with each other.	Dishonest: One partner lies or keeps information from the other.
Physically Safe: Partners feel safe in the relationship and respect each other’s space.	Physically Abusive: One partner uses force to get his or her way.
Sexually Respectful: Partners never force sexual activity.	Sexually Abusive: One partner forces the other into sexual activity.
Kind: Being thoughtful, caring, and compassionate toward the other person.	Hostile: One partner seeks to hurt the other person emotionally or physically.

well-being during early childhood and across the lifespan. The benefits of early relational health are bidirectional in that early positive relationships also support parents' and other caregivers' overall well-being by promoting a sense of competence, connectedness, mattering, and joy. In addition, strong, nurturing, and enduring relationships help to mitigate the negative effects of stress that families experience.^{114,115}

The American Academy of Pediatrics describes relationships, in particular ones established in early childhood, as biological necessities for lifelong healthy development and well-being.¹¹⁶

During the first few years of life, no aspect of the child's environment is more important for proper brain development than his or her connections with others. . . . Nurturing and supportive social connections early in life promote healthy emotional regulation, and that allows for optimal brain development and function. Conversely, excessive or prolonged stress in absence of social supports activates and strengthens the neuronal connections underlying the stress response, setting up a brain that is wired more for stress and survival and less for learning and empathy. (p. 4)¹¹⁷

Although the parent-child relationship tends to be the earliest and strongest source of emotional well-being for young children, the early relational health paradigm asserts that children and their parents are embedded in a "child-serving ecosystem"; that is, multiple systems and sectors (e.g., housing, policymakers, education, healthcare providers) which influence parents, parenting, and child development. Thus, efforts to promote early relational health emphasize that "extending the notion of relational health across the child-serving ecosystem may help promote child well-being on a broad scale by connecting individuals across the many systems and sectors that impact child health and development" (para. 1).¹¹⁸

Parent-Adolescent Connectedness. In contrast to a common belief that parents' influence is overshadowed by the adolescent peer group, research has shown that

youth still value and seek to maintain a strong emotional relationship with parents or caregivers while pursuing their own sense of independence, establishing new social roles outside of the family, and forming social connections with peers.¹¹⁹ Secure attachment and emotional connectedness with at least one parent or caregiver has been found to facilitate an adolescent's healthy transition to autonomy and adulthood.¹²⁰ When parent-adolescent connectedness is high, youth feel that they can talk with and seek advice from a parent about their concerns and that the parent will understand them without judgement. In addition, "compared with less connected peers, adolescents who are connected to at least one parent experience fewer emotional problems, fewer suicide attempts, less conduct disorder, better school performance, higher self-esteem, and less involvement in violence and substance use" (p. 1).¹²¹

Sibling Relationships. Sibling relationships in family systems have been found to be a key influence on developmental trajectories, understanding others' emotions and perspectives, learning conflict negotiation and resolution, and developing prosocial behavior.^{122,123} Of particular concern in the SF and YT frameworks is the sibling relationship of children and youth involved with the child welfare system (also called the "family policing system"¹²⁴ by some social justice advocates). Both the accusation and experience of maltreatment, as well as the exposure to the family policing system through investigation, removal, and family separation can contribute to experiences of trauma for children, youth, and their families. A major source of trauma is the disruption to important relationships, including sibling relationships.

Data indicate that 66 percent of children and youth in foster care have a sibling who is also in care and more than 70 percent of this population are separated from one or more of their siblings while they are in care.¹²⁵ Being separated from one's sibling can contribute to difficulty adjusting to a new placement and can negatively impact mental health, self-esteem, identity, and sense of belonging and mattering.¹²⁶ Preserving and promoting sibling relationships contribute to a range of better outcomes for children and youth, such as fewer emotional and behavioral difficulties and improved

school performance.¹²⁷ Providing families with the support they need to care for their children safely is the first line of defense in preventing children from entering the foster care system in the first place. For those children who cannot remain safely with their parents, efforts should be made to keep children with family members, thus preserving family connections. For those children who are in traditional foster care placements, keeping siblings together should be a priority, and when that is not possible, other efforts to maintain sibling relationships should be employed.

Community Connectedness

In the SF and YT frameworks, communities are environments in which individuals feel connected, valued, and engaged such as neighborhoods, social organizations, child and youth programs, and identity and special interest groups. Community connectedness is conceived as a healthy, protective relationship between individuals and their key environments. Although the role and importance of community connectedness with parents has not been widely studied, the research about youth and community connectedness is regarded as relevant to parents and other adults. For example, a finding from the National Longitudinal Study of Adolescent to Adult Health indicated that high levels of both home and school connectedness during adolescence are protective factors for overall health and well-being in adulthood.¹²⁸ This finding is supported by two conclusions from a longitudinal study on happiness, specifically: (a) individuals who are more connected to family, friends, school, and the community are happier, healthier, and live longer than individuals who are disconnected; and (b) being connected helps to protect individuals from the adverse effects of stressors and to delay mental and physical decline.¹²⁹ Thus, the SF and YT frameworks emphasize the importance of implementing intentional strategies that enable children, youth, and parents to have opportunities to build healthy, protective, safe, equitable, and sustainable social connections that promote a sense of family, school, and community connectedness.

KNOWLEDGE OF PARENTING, CHILD DEVELOPMENT, AND ADOLESCENT DEVELOPMENT

Knowledge of Parenting and Child Development

Twenty-first century biological and social sciences have provided a significant body of evidence about conditions, experiences, and practices that contribute to a strong developmental foundation in early childhood and establish a trajectory for lifelong health and well-being.¹³⁰ Thus, in the SF framework, **“knowledge of parenting and child development” refers to learning about prenatal, infant, and child development, and using developmentally and contextually appropriate parenting practices.** In this context, “parent” refers to an adult or adolescent who has responsibility for rearing a child, including a biological or adoptive parent, grandparent, other relative, or non-biological parent-figure.

Parenting as a Cultural Act. Parenting has been defined as “implementing a series of decisions about the socialization of children”.¹³¹ Although children have some physical, emotional, relational, and cognitive needs that are universal—such as the need for nurturance, protection, and attention—the series of decisions parents employ to address these needs may be culturally specific. Culture has a major influence on parents’ beliefs, values, definitions, practices, the child behaviors they consider to be appropriate and inappropriate, and their acceptance of and responsiveness to parenting messages from their family, professionals, and media.^{132,133} Yet, parenting research and recommended “best practices” have been dominated by studies that proceed as though parenting is basically the same across cultures. Using a single cultural lens minimizes or ignores valuable differences in what diverse cultures understand about the role and responsibilities of parents, how they value and conceive parent-child/parent-adolescent relationships, and the nature of parenting practices. The SF framework underscores the importance of understanding and honoring diverse parenting strengths, values, expectations, and multiple pathways to competent parenting and promoting optimal child development.

Good Enough Parenting. No parent is a perfect parent, nor should a parent strive to be perfect or expect their child to be perfect. A SF trainer stated, “Fully embracing the protective factor ‘knowledge of parenting and child development’ means acknowledging that parenting is challenging at times, that no one can do it perfectly, and that children just need ‘good enough’ parenting to allow them to develop their unique potential” (CSSP Listening Sessions, 2023). Good enough parenting does not mean mediocre parenting. Instead, it refers to efforts to make reflective, rational, and responsible decisions that meet a child’s or youth’s current needs and guides them toward a healthy, productive adulthood, based on one’s personal, family, or cultural standards.¹³⁴

Good enough parenting prioritizes building and sustaining a strong relationship with one’s child; the quality of the parent-child relationship is regarded as more important than any parenting practice or skill. What constitutes good enough parenting is contextual with respect to individual, family, cultural, community, and/or societal circumstances, resources, expectations, and definitions. Although good enough parenting is an acknowledgement that there is no single, right way to parent, proponents suggest that there are attitudes and efforts that support a good enough parenting perspective which can be expressed in family- or culturally-specific ways, including:

1. Accepting and valuing a child unconditionally, consistently communicating a message of belonging and mattering, and “being there” for them.
2. Asking questions, talking with, and listening to children to learn more about them.
3. Being patient when children make mistakes and having them acknowledge and take steps to correct their mistakes.
4. Acknowledging one’s own mistakes, taking steps to correct them, and apologizing.
5. Engaging in actions to reduce the likelihood of misbehavior and being selective about which misbehaviors matter most to address, rather than responding to everything.

6. Repairing the emotional parent-child connection when it is damaged.
7. Teaching essential family values and behaviors by example, rather than just words.^{135,136}

The Prenatal Period. The prenatal period and the first three years of life are the most sensitive for the developing child’s brain and body¹³⁷ and the mother’s health prior to conception, during pregnancy, and postnatally significantly affect fetal and early childhood developmental outcomes. For example, the mother’s ability to supply the developing child’s nutritional needs based on the adequacy of her stored nutrients before conception and her intake of important nutrients during pregnancy are essential for the fetal and infant brain to be on an optimal developmental trajectory.¹³⁸ Conversely, exposure to adverse conditions or trauma during pregnancy can create physical and chemical disruptions in the fetal brain which can negatively impact various organ systems, future learning ability, and result in poor behavioral, physical, and mental health outcomes.^{139,140,141} Although the prenatal period has always been of concern in the SF framework, given the long-term developmental implications of this period, as well as the persisting racial and ethnic maternal and child health disparities,^{142,143} SF now elevates attention to this period and redefines the range of its target population to be *the prenatal developing child – 8 years old and their families.*

Positive Childhood Experiences. The deleterious impact of adverse childhood experiences is well-documented and well-known. The SF and YT frameworks support the growing emphasis on shifting from a singular focus on addressing adversity and trauma to integrating a focus on positive experiences for children and youth, such as helping them to foster healthy relationships within and outside of the family and to live, play, and learn in safe, stable, and equitable environments.¹⁴⁴ Positive experiences play an important role in human development across the lifespan, including helping to establish a strong foundation for learning, engaging in productive behavior, and the ability to cope and thrive¹⁴⁵; promoting child and adult mental and relational health¹⁴⁶; and influencing the structure and function of the developing brain.¹⁴⁷

Studies show that the absence of positive childhood experiences—in particular, the absence of caring and responsive parenting—can result in the young brain being exposed to an abundance of stress hormones that negatively impact how it develops. “As a child gets older, the stress introduced by a lack of positive childhood experiences accumulates and can show up as problems with motivation, optimism about life, focus, problem solving, getting along with others, developing a positive self-image and stable sense of self-worth, and managing normal daily stress” (para. 7).¹⁴⁸ It is not possible to always avoid negative experiences, but positive childhood experiences can help to mitigate or protect children and youth against the effects of adversity and trauma.

Knowledge of Adolescent Development

Like child development research, twenty-first century biological and social sciences also have provided a significant body of evidence about conditions, experiences, and practices that impede or contribute to a strong foundation in adolescence along the pathway to adulthood. Thus, in the YT framework, the protective and promotive factor **“knowledge of adolescent development” refers to learning about adolescent development and using this knowledge to support the development of competencies needed for adulthood.**

Environmental Factors Impact Adolescent Development.

Much of the research on adolescent brain development has focused on individual factors that contribute to differences in brain structure and function. In recent years efforts have been made to study the influence of the physical and social environment on brain development and the implications for well-being. “Identifying modifiable environmental effects that impact neurodevelopment in children and adolescents is an important endeavor because practical application of this knowledge may translate into long-lasting improvements in mental health” (p. 171).¹⁴⁹

Recent studies have linked several physical environmental factors (e.g., air and noise pollution) to brain development and mental health in children and adolescents. For example, increased residential greenspace was found to

decrease children’s risk for conduct disorders at age 7 and youths’ risk for anxiety and depression at age 12.¹⁵⁰ Also, a study found that significant exposure to traffic related air pollution in early childhood is associated with structural alterations in the brain, such as reduced cortical thickness in the sensorimotor, frontal, and limbic regions of the brain which results in adverse effects on cognitive, behavioral, and psychomotor development.¹⁵¹ Findings like these reveal preventable and modifiable factors that can inform environmental regulations and public policy designed to improve children’s and youths’ neurodevelopment and overall health.

A range of contexts in the social environment have been identified as factors that shape brain structure in adolescence, such as positive parenting in early childhood,¹⁵² family income,¹⁵³ and friendship quality.¹⁵⁴ A group of researchers noted:

One social contextual factor understudied in developmental cognitive neuroscience is the experience of racism. Race and ethnicity shape children’s and adolescents’ social experience with the world. Recent meta-analyses have demonstrated that racial/ethnic discrimination is related to negative outcomes across multiple developmental domains, and these effects are particularly strong in adolescence. As affiliation with some racial or ethnic groups may carry a risk of experiencing rejection and social marginalization, we hypothesize that experiences of discrimination may represent a form of chronic social stress that may impact adolescent brain development. (p. 172-173)¹⁵⁵

The Impact of Racism on Adolescent Development.

Black, Indigenous, Latine, and Asian American children and youth not only must navigate typical developmental stressors (e.g., parents’ and teachers’ high academic expectations; friendship issues) they are also confronted with the entrenched nature of racism and its pernicious psychological, behavioral, and academic effects. Although more research is needed to examine the causal effects of racism on child and adolescent neurodevelopment, the harsh effects of racism on adolescent mental health,

academic performance, health behaviors, and health outcomes have been documented in an increasing body of evidence.^{156,157} For example, a recent study found that Black youth averaged 5.21 experiences of interpersonal racism per day—either directly, vicariously, or online—such as teasing about their physical appearance, jokes about Black people online, threats of or actual harm, humiliating incidents, and witnessing racial mistreatment of or violence toward others.¹⁵⁸

In addition, studies have found positive associations between experiencing, witnessing, perceiving, or being fearful of racism and *physical effects* (e.g., sleep disturbances), emotional problems (e.g., diminished self-confidence), and *behavioral challenges* (e.g., reduced academic engagement).^{159,160,161,162} The American Academy of Pediatrics issued a policy statement in 2019 which emphasized that failure to address racism will continue to undermine health equity, as well as the health status and overall well-being of all children, adolescents, emerging adults, and their families.¹⁶³ Thus, researchers, practitioners, and policymakers have a responsibility to acknowledge and respond to racism as a public health imperative to ensure the equitable and just treatment of Black, Indigenous, Latine, and Asian American individuals, families, and communities.

Dating Violence Against Youth. Although adolescence is a period of significant change in all developmental domains, the changes may not be synchronous. For example, youth who have matured physically may still demonstrate immature cognitive skills that can contribute to poor judgment and inadequate decision-making, such as failing to consider the consequences of their actions.¹⁶⁴ Neuroscience identified a developmental timing gap in the adolescent brain in which the rational prefrontal cortex develops later than the emotional limbic system. An implication of this uneven development is that:

When faced with an immediate personal decision, adolescents will rely less on intellectual capabilities and more on feelings. . . . In other words, when a poor decision is made in the heat of the moment, the

adolescent may know better, but the salience of the emotional context biases his or her behavior in (the) opposite direction of the optimal action. (p. 12)¹⁶⁵

One area in which adolescent emotion-based decision-making can be very problematic is differentiating between healthy and unhealthy relationships, particularly regarding dating and sexual relationships. Adolescent dating can promote healthy development and well-being by building self-esteem, self-awareness, and supporting social and relationship skills; but it can have unhealthy aspects, as well, when problems occur. In some cases, youth may not have the emotional maturity to handle feelings of jealousy and rejection or may not have developed conflict resolution skills. The result can be one party being the perpetrator and the other a victim of violence. “When adolescents start to explore dating, romance, and sex, a troubling number fall victim to violence. In the United States, up to 19% of teens experience sexual or physical dating violence, about half face stalking or harassment, and as many as 65% report being psychologically abused” (para. 1).¹⁶⁶ Yet, the topic of adolescent dating violence often is ignored or minimized in youth settings, which serves to reinforce a culture of dating violence. For example, a study found that teachers and administrators may dismiss reports of sexual harassment in school settings, blame the victim of dating violence, or may not hold the accused perpetrator accountable for their actions.¹⁶⁷ The Office of Juvenile Justice and Delinquency Prevention reported that teen dating violence is defined as:

Physical, emotional, or sexual abuse; harassment; or stalking that occurs among persons ages 12 to 18 within the context of a past or present romantic or consensual relationship. . . . A newer form of dating violence, cyber dating abuse, involves the use of technology to control, harass, threaten, or stalk another person in the context of a dating relationship. (para. 4 & 6)¹⁶⁸

All of these forms of teen dating violence can cause immediate and long-term harm to youth’s health and well-being that can extend throughout adulthood.¹⁶⁹ Youth who are victims of dating violence in high school are more likely to: “experience depression and anxiety symptoms;

engage in unhealthy behaviors, like using tobacco, drugs, and alcohol; exhibit antisocial behaviors, like lying, theft, bullying, or hitting; think about suicide. . . . (and) are at higher risk for victimization during college” (para. 7).¹⁷⁰ But, with the consistent engagement and advocacy of youth, families, schools, communities, and the larger society as prevention advocates, there are ways to prevent teen dating violence before it starts. For instance, starting with middle-school students and continuing throughout high school, it is extremely important for youth to engage in discussions about: respecting their own and others’ body; differentiating between healthy/safe and unhealthy/unsafe relationships (see Table 5); interacting with diverse gender identities in respectful ways; and that forcible sex is an act of violence called rape and is against the law.

SOCIAL, EMOTIONAL, AND COGNITIVE COMPETENCE

Social and Emotional Competence of Children

It is a well-established conclusion in child development research that acquiring social and emotional competence is the primary developmental task of early childhood because social and emotional skills impact all other developmental domains; is associated with academic, behavioral, and social outcomes; and lays the foundation for later development. **In the SF framework, social and emotional competence involves providing environments and experiences—grounded in early relational health—that build positive social skills; enable children to regulate thoughts, emotions, and behaviors; and promote effective communication, problem-solving, and decision-making skills.** In research, practice, and policy, the emphasis on cultivating cognitive development, building academic skills, and enhancing intelligence in early childhood has often overshadowed the importance of social and emotional competence. However, research studies have found that “children who are socially and emotionally well-adjusted do better at school, have increased confidence, have good relationships, take on and persist at challenging tasks, and communicate well” (p. 81).¹⁷¹

Young children do not develop social and emotional skills naturally. Research indicates that the type and quality of

environments and experiences parents and other caregivers provide can either promote or undermine the development of young children’s social and emotional skills.¹⁷² For example, the strong emotional connection between young children and their parents/caregivers that emerges from everyday activities and routines which build early relational health, “creates the necessary footing for young children to optimally learn about and engage in the world around them and to cultivate relationships throughout their lifetime” (para. 3).¹⁷³ Also, having a relationship with a nurturing, caring, and reliable adult who provides environments in which children feel safe to express their emotions, helps to promote healthy social and emotional outcomes in young children.¹⁷⁴ Children who have such experiences are able to recognize their and others’ emotions, take the perspective of others, and use their emerging cognitive skills to consider and differentiate appropriate and inappropriate behaviors. Conversely, children who do not have such experiences may have difficulty exhibiting empathy, interacting effectively with others, and acquiring more advanced language and cognitive skills.

Cognitive and Social-Emotional Competence

There is much established evidence that early social-emotional skills continue to develop through adolescence and into adulthood and are a function of the maturation of the prefrontal cortex and other regions of the brain. Early social-emotional skills become the foundation for developing more mature learning and problem solving, establishing healthy relationships, engaging in effective parenting, demonstrating the ability to work well with others, and having a productive, responsible, and satisfying adulthood.¹⁷⁵ The additional focus on cognitive competence within the YT framework does not refer to an emphasis on increasing how much youth know. Rather, the focus is on the interrelated components of cognitive and social-emotional competence that have been found to be linked to the structural and functional changes in brain development that occur during adolescence. **In the YT framework, cognitive and social-emotional competence is defined as acquiring skills that enable youth to form healthy relationships; regulate thoughts, emotions, and behaviors; engage in effective communication and problem-solving; and gain self-awareness and a sense of personal identity.**

Having experiences that promote or strengthen emerging cognitive and social-emotional competence helps to reduce the likelihood of youth developing problems and increases the likelihood of good outcomes despite threats to healthy development, such as early trauma. The information that follows refers to social, emotional, and cognitive competencies in both early childhood and adolescence.

Core Life Skills

Early childhood is a critical time for brain development because neural connections may be established that become the foundation for a child's future health, learning, and behavior. Based on the nature of a child's experiences and relationships, social and emotional skills can begin to be learned in early childhood that will serve as executive function and self-regulation core life skills. Adolescence is also a vital time for building core life skills—such as planning, focus, awareness, self-control, and flexibility—that are essential for successfully managing school, work, outside interests, relationships, and family life. “As the different areas of the brain mature during adolescence, their ability to function as an interconnected system improves. Practicing core life skills during adolescence helps the brain build the most efficient pathways to support these skills throughout life” (p. 1).¹⁷⁶

When children's, youth's, and adults' experiences do not support the development of core life skills, or when stressors are excessive and persistent, their brains are limited in how well they acquire and use core life skills. For example, studies have shown:

Even without the addition of serious trauma, poverty can overload self-regulation, potentially as a result of a pile-up of stresses associated with trying to survive in the face of inadequate resources. Frequent, stressful events (e.g., bills to be paid, needs that can't be met, safety concerns) capture attention from other areas (e.g., planning, budgeting, getting a bank account). Directing attention to a crisis becomes habitual, while the ability to redirect attention in the face of such stimulation is not well practiced. Dealing with these unceasing demands can deplete the store of physiological energy required for self-regulation,

and chronic stress has been shown to weaken the neural circuitry that connects intentional self-regulation to automatic responses. In other words, the multiple stresses that accompany poverty can overload the brain systems involved in decision-making. (p. 11)¹⁷⁷

Since the brain continues to develop during adolescence and the adult years, it is possible for youth and adults to still learn or strengthen their core life skills. Service delivery practices, procedures, and policies are needed that: (a) ensure that stakeholders have an understanding of the effects of adversity and stress on brain development and behavior; (b) reduce the sources and burden of stress in the individual's or family's life; (c) reduce the sources and burden of stress in service delivery systems (e.g., streamline and simplify processes); and (d) provide training and employ strategies designed to increase the individual's self-awareness, self-regulation, and executive function skills.¹⁷⁸

Self-Advocacy

The SF and YT frameworks emphasize the importance of parent and youth voice and power in decisions about their lives. In order to use their voice and power in the most effective ways, self-advocacy skills are needed. When individuals learn self-advocacy skills, they are able to realistically assess and describe their strengths and needs, as well as the desired supports and accommodations that address their needs. Self-advocacy is defined as the ability to speak up for oneself; know one's legal rights; gather pertinent information; identify and take responsibility to clearly communicate one's needs, wants, strengths and goals; be aware of power dynamics; make decisions about the supports needed to achieve one's goals; and reach out to others as needed.¹⁷⁹ “Self-advocacy raises awareness. It makes others aware of the issues you're facing. . . . Self-advocacy is more than knowing and communicating your needs. It's also about knowing your worth and making it known” (para. 6 & 10).¹⁸⁰

In the past, self-advocacy skill development primarily was focused on adults with disabilities or adults with children with disabilities. Today, researchers and practitioners

emphasize the importance of teaching self-advocacy skills to children, youth, and adults—with and without disabilities—to enable them to become aware of and articulate their strengths and limitations to others, gain confidence, and make decisions by speaking on their own or others' behalf. Learning self-advocacy skills will be critical across the lifespan and can evolve from individual- or relational-level advocacy to community- and systems-level advocacy.

Racial Socialization

In 2019, The American Academy of Child and Adolescent Psychiatry (AACAP)—the leading national professional medical association dedicated to treating and improving the mental health of children and adolescents—issued a statement supporting the American Academy of Pediatrics' policy statement on the impact of racism on child and adolescent health. The AACAP's statement indicated:

Racism causes widespread harm impacting all racial and ethnic groups. The greatest harm is felt by communities of color, children, and adolescents. Inequities in health care, education, poverty, and employment all have connections to racism. AACAP stands firm in our commitment in promoting the healthy development of all children and in determining effective multidisciplinary strategies to better address the harmful effects of racism on children and adolescents. (para. 2-3)¹⁸¹

Within the SF and YT frameworks, racial and ethnic socialization is viewed as a viable strategy to raise awareness of and sensitize children and adolescents to the dynamics of racism. It refers to the “social, (emotional), cognitive, and developmental process through which ideas, beliefs, values, social norms, and behaviors regarding race and ethnicity are transmitted, interpreted, negotiated, and adopted” (p. 55).¹⁸² Racial and ethnic socialization is a form of social awareness which is a component of social and emotional competence. Individuals with high levels of social awareness are willing to listen to, understand, and appreciate the perspectives of ethnically and racially diverse individuals, as well as apply core life skills to build relationships with individuals from diverse backgrounds.

The nature of children's and youth's racial and ethnic socialization will influence how they make meaning of and interact with different racial and ethnic groups. Many parents feel ill-equipped or uncomfortable having conversations about race and racism with their children or youth or emphasize having a “colorblind” perspective which involves communicating to their children that “race is not important” or “treat everyone the same”. But, to live in the United States is to live in a racially and ethnically diverse culture, and often, a racially charged environment. Thus, openly and accurately discussing race and racism with children and youth is essential; avoiding these issues is counterproductive. Prioritizing racism and racial justice issues in SF and YT work will prepare children and youth of all races and ethnicities to question and reject extreme, inaccurate, and damaging messages about different racial and ethnic groups that serve to undermine efforts to promote equity and practice anti-racism. “If we are to progress in this country, it's going to be because we help our children, adolescents, and young adults learn not just that racism exists, but that it is something all of us can work together to dismantle” (para. 12).¹⁸³

CONCRETE SUPPORT

This PF/PPF was originally called “concrete support in times of need” in the SF and YT frameworks. It is now called simply “**concrete support**” in both frameworks and is defined as **identifying, accessing, advocating for, and receiving high quality and equitable support including the basic necessities everyone deserves and specialized services to address specific needs**. Youth and parents need experiences that enable them to gain knowledge of relevant services, understand their rights in accessing services, and learn how to navigate through service agencies and systems. SF and YT practitioners should help to ensure that children, youth, parents, and families receive services and resources that are high quality, equitable, culturally responsive, strengths-based, trauma-informed, and healing-centered. Concrete support must be provided in a manner that preserves individuals' dignity and helps to minimize the effects of adversity and traumatic experiences. Being able to seek help and find concrete support from formal or informal sources increases individuals' overall satisfaction with life.

Social Determinants of Health and Economic Stability

Although youth and parents need knowledge and skill regarding concrete support and institutions should be critically aware of the respectful manner in which individuals and families should be served, there are also societal-level concerns regarding the provision of concrete support, particularly in relation to social determinants of health. Social determinants of health are “the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life” (para. 1).¹⁸⁴ The wider set of forces and systems that impede or facilitate health and well-being are related to the community and societal levels of the social ecology and are considered to be the root causes of poor health outcomes and health inequities and disparities. They include economic, political, and social policies and systems; legal or policy actions; and social norms and systems of oppression and privilege. Examples of social determinants of health include access, or the lack thereof, to nutritious food, safe and affordable housing, reliable transportation, stable neighborhoods, venues for physical activity, and employment security; as well as discriminatory practices that are deeply embedded in various policies and practice.¹⁸⁵

Screening for and helping youth and parents address social determinants of health are important parts of SF and YT practice. But parents and youth may feel embarrassed, judged, stigmatized, or fearful of potentially negative consequences when screening about their current circumstances and needs. Thus, to reduce these possibilities, SF and YT practitioners work to build a trusting, nonjudgmental relationship with parents and youth that (a) helps them feel valued and respected; (b) honors their voice and power; and (c) seeks to identify their strengths, resources, and protective factors, in addition to assessing their immediate needs and risk factors. With this approach, parents and youth can see themselves as more than their “needs” and have confidence in their ability to exert control over what happens to them.

A social determinant which is receiving increasing research attention is economic stability; that is, the relationship between health and an individual's or family's financial resources. For example, research studies have shown that “people with higher levels of education may be healthier and live longer. (Thus) interventions that increase high school graduation rates and help young people in the job market are important for improving physical and mental health” (summary)¹⁸⁶, and contribute to economic stability. With respect to families living in poverty, a large body of research has demonstrated the relationship between receiving multiple economic and other concrete support—such as tax credits, Temporary Assistance to Needy Families (TANF), and child care—and reduced risk for poor outcomes, including reductions in child abuse and neglect.¹⁸⁷ Research findings such as these underscore the importance of SF and YT practitioners advocating for policies and employing interventions that promote economic stability.

Cross System/Cross Sector Collaboration

Individuals may have multiple human services needs based on their individual, relational, community, cultural, societal, and/or systems-involved experiences. For example, children may be diagnosed with complex physical and emotional needs. In order to adequately care for their child, parents may need care related to their own trauma histories, personal status, and under-resourced communities. Expectant and parenting youth who are involved with youth-serving systems present intersectional developmental needs based on their identities as adolescents, emerging adults, parents, and young people involved with child welfare, juvenile justice, or other human services systems. These examples suggest that, in order to achieve the best possible outcomes, the multiple, diverse, and co-occurring human services needs of individuals must be assessed and addressed. Although different support services for individuals with co-occurring challenges may exist, the services may be disconnected or not easily accessible.

The first system an individual comes into contact with may be the one best equipped to address the issue that appears to be the most urgent or

immediate, but it might not be equipped to handle deeper issues the individual is dealing with and their root causes. . . . The provision of effective services and treatment for children and families dealing with co-occurring issues relies on collaboration across systems so that the needs of children and families can be better understood and services can become more streamlined and cohesive. (p. 3)¹⁸⁸

The SF and YT frameworks endorse cross-system/cross-sector collaboration—that is, reaching across fragmented systems and services—so that the provision of high quality, effective services can become more efficient, seamless, and cohesive. Connecting community members and diverse systems and sectors as partners (e.g., education, housing, transportation, economic development) is viewed as an important, beneficial, and viable strategy for improving individual, family, community, and population health, as well as increasing health equity.^{189,190}

Collaborative Goal Setting

In the SF and YT frameworks, goal setting with children, youth, and parents is viewed as essential to achieving positive outcomes. If a practitioner attempts to impose goals and services upon a child, youth, or parent that

are incongruent with their values and priorities, the probability of successful goal attainment is limited. A successful approach to avoiding this incongruence is through collaborative goal setting; that is, the process of individuals, families, and practitioners jointly determining meaningful goals and how they will be achieved. The increasing emphasis in many fields on collaborative goal setting with families grows out of an awareness that “a shared understanding of the individual’s goals directly impacts the outcomes and experience of the person receiving care (cover).”¹⁹¹ A growing trend in collaborative goal setting is to ask individuals “What matters to you?” and not singularly “What’s the matter with you?”. Professionals across many disciplines acknowledge power in the four words “What matters to you?”¹⁹² Proponents suggest that determining what matters most to individuals is an essential component of high-quality service delivery; that it can be the foundation for a stronger partnership with individuals in improving outcomes; that it can increase a family’s motivation to work to reach a goal; and that it contributes to better outcomes for the individuals and families in their care.¹⁹³ SF and YT practitioners are encouraged to test the benefit of this approach in their work with children, youth, parents, and families.

CONCLUSION

The Center for the Study of Social Policy (CSSP) works to achieve a racially, economically, and socially just society in which all children, youth, and families thrive. CSSP translates ideas into action; promotes public policies that create more equitable opportunities and outcomes for all children, youth, and families; supports strong, inclusive, and safe communities; and works to ensure public systems provide the resources and opportunities sought and needed by families. CSSP advocates with and for all children, youth, and families marginalized by public policies and institutional practices.

The Strengthening Families and Youth Thrive frameworks exemplify CSSP’s commitment to identify, communicate, and apply research-informed ideas that contribute to improved outcomes for children, youth, and parents. Parents, youth, system administrators, program developers, service providers, and policymakers can each benefit from learning about and using these frameworks in their efforts to ensure parents, children, youth, and families are on a path that leads to healthy development and well-being.

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