

Research Summary

Resilience and At-risk Children and Youth



National Center for Homeless Education
<http://www.serve.org/nche>

Jan Moore

April 2013

Table of Contents

Introduction to Resilience	3
Risk Factors	3
Counteracting Risk	4
History of Resilience Research: Four Waves.....	5
Table 1. Commonly Observed Predictors of Resilience in Young People	6
Resilience and Relationships.....	7
Enhancing Academic Outcomes Through Relationships.....	8
Homelessness	9
Trauma	10
Science and Interventions	11
Suggestions for Future Research.....	12
Conclusion.....	12
Resources for Interventions and Strategies:	13
References	14
About NCHE.....	23
National Center for Homeless Education	23

Introduction to Resilience

Today's children are growing up in an increasingly stressful world. As everyone faces stress at some point, unfortunately it is unrealistic to think that children can be shielded completely from experiencing stress. For most students, stress stems from the pressure to succeed academically or in an extracurricular activity, or worry over how to deal with a demanding teacher or a difficult peer. Exposure to moderate stressors, challenges, and risks can help children develop effective coping responses and resilience (Rutter, 1981); but students experiencing homelessness may face particularly difficult and harmful challenges such as poverty, residential and/or school mobility, family or neighborhood violence, and inadequate nutrition. Homeless students are unique individuals who experience a variety of living situations, and family, school, and community environments, all of which have distinctive factors that may influence students' ability to be successful.

Homelessness often has been the result of insufficient resources; as a result, social service organizations historically have approached the problem from a material perspective of providing food and shelter (Burt, 2002). Homeless service agencies, however, often provide non-material aid, such as advocacy and education,¹ in an effort to help individuals build intangible resources that they might translate later into more concrete benefits. One such intangible, resilience, has received increased attention recently in a growing body of literature that has reported not only the psychological and academic impacts of homelessness, but also has highlighted ways to strengthen the resilience of children and youth experiencing homelessness.

The root word for resilience is *resile*, which means to bounce back or rebound after being stressed

The root word for resilience is *resile*, which means to bounce back or rebound after being stressed (Agnes, 2013; Smith, et al., 2008). Although many definitions of resilience have been proposed, all contain two common elements: 1) An exposure to great risk; and 2) Corresponding factors that help promote positive outcomes or reduce negative outcomes (Fergus & Zimmerman, 2005; Fraser, Galinsky, & Richman, 1999; Luthar & Ziegler, 1991). Resilience is described as a dynamic development process of responding more positively than expected after facing risk (Glennie, 2010). It is measured by how well someone reacts to a threat using his own abilities and available support systems (Condly, 2006).

Risk Factors

Risk is the probability of a future situation occurring, the likelihood that a problem will be "created, maintained, or exacerbated" (Fraser & Terzian, 2005) given certain conditions. Risk factors are the

¹See, for example, the model promoted by the National Coalition for the Homelessness: *How You Can Help End Homelessness* at http://www.nationalhomeless.org/want_to_help/index.html.

probability markers or correlates that increase risk (Coie, et al., 1993; Masten, 2001). Being at-risk for a problem signifies that an individual belongs to a group with similar characteristics that is more likely than others in the general population to develop the problem (Fraser, Galinsky, & Richmond, 1999). For example, children living in poverty often are considered at risk for poor academic outcomes. The poverty itself does not explain why an increased risk exists; rather, it serves as a marker for a host of conditions that commonly accompany poverty, such as fewer financial resources, lower quality schools, more dangerous neighborhoods, and fewer social supports (Brooks-Gunn, Duncan, & Aber, 1997). The significance of a risk factor can vary based on the individual's characteristics (such as personality traits), specific life experience (such as loss of housing), and contextual factors (such as neighborhood crime), as well as the stressor's timing and relation to other known and unknown risk factors (Greenburg, 2006).

Risk factors rarely occur in isolation. Instead, it is more common for at-risk children to experience multiple risk factors. The effects of risk factors then accumulate, such that differences in outcomes more often are due to the accumulation of risks rather than to a single factor (Flouri, Tzavidis, & Kallis, 2010; Masten & Coatsworth, 1998). The negative outcomes associated with accumulated risk factors are dramatic, whether they co-occur or accrue over time, as additional risks have multiplicative instead of additive effects (Brooks, 2006; Masten, 2001). For example, studies showed no differences in child adjustment between children in families who had zero risk factors versus children in families with one risk factor (Rutter, 1979). However, children in families that had accumulated two risk factors showed a more than fourfold increase in exhibiting behavior problems (McFarlane, Groff, O'Brien, & Wilson, 2003; Trentacosta et al., 2008).

Although accumulated risk often has negative effects on academic achievement, this is not always the case. Additional risk factors increase vulnerability; but, "thresholds vary as to 'how much is too much' in terms of experiencing damage or harm" (Resnick & Taliaferro, 2012, p. 300). Some researchers have concluded that the best predictor of whether a student will experience future academic difficulties is not a single negative indicator over time but a pattern of difficulties in several areas (Doll, Jones, Osborn, Dooley, & Turner, 2011). And despite experiencing risk, competence in one area may position the student for future success under certain conditions. Thus, although the presence of risk typically increases the likelihood of poorer outcomes, researchers only offer statistical probabilities. Inability to measure the effects of interactions among a host of variables makes it impossible to guarantee specific results (SPACING).

Counteracting Risk

Resilience requires both a risk factor and some type of counteracting or protective factor that reduces the negative impact of the risk factor (Benard, 2004; Luthar, Sawyer, & Brown, 2006). Although the terms protective factor and promotive factor are often used interchangeably, protective factors require risk to operate, whereas promotive factors² such as personal abilities and external resources (Bandura, 2006; Kia-Keating et al., 2011) can lead to positive outcomes regardless

² Originally, factors associated with positive effects often were called *compensatory factors* (Benson, Scales, Leffert, & Roehlkepartain, 1999). Later they were termed *promotive factors* (Sameroff, 1999; Sameroff & Gutman, 2004). In more recent literature on positive youth development, they are referred to as *developmental assets* (Kia-Keating, Dowdy, Morgan, & Noam, 2011).

of whether adversity exists (Sandler, 2001).

Protective factors can be defined partly by the extent to which they moderate risk (Rutter, 1987) with the strongest positive effect being on those who have been exposed to adversity (D'Imperio, Dubow, & Ippolito, 2000). For instance, although a supportive school environment may have a positive effect on all children, it could have an even greater effect on children exposed to higher levels of risk. The means for defining and categorizing risk and protective factors are not well specified (Jenson & Fraser, 2006). For example, whether greater school support is defined as a protective factor or lesser school support is defined as a risk factor depends on the nature of the relationship between the support and the outcome.

Human beings are born with an instinctive capacity for resilience (Zolkoski & Bullock, 2012), and that results when they respond to risk with properly functioning adaptation systems (Resnick & Taliaferro, 2012). The capacity to cope with risk successfully changes over time (particularly in young people who are experiencing developmental changes), and is enhanced by protective and promotive factors within the environment and the person (Anthony, 2008; Stewart, Reid, & Mangham, 1997). As long as the balance between risks and protective factors is manageable, people are able to adapt and cope adequately (Greenberg, 2006). To ensure the likelihood of positive adaptation, counteracting factors must be strengthening at the individual, family, and community levels (Benzies & Mychasiuk, 2009).

History of Resilience Research: Four Waves

Research on resilience began in the medical field and was focused solely on understanding abnormalities and deficits in order to predict atypical or maladaptive behavior (Masten, 1989; Masten & Coatsworth, 1998). Around 1970, research on resilience expanded when behavioral scientists looking for causes of serious mental disorders discovered that some children fared well overall despite their difficult situations (Masten, 2004; Masten & Obradović, 2006; Wright & Masten, 2005). Seeking explanations for how such unexpectedly positive outcomes could occur, researchers moved from a risk-based focus toward examining children in their broader context, as interrelated with surrounding systems such as families, peers, schools, communities, and societies (Masten, 2006).

Resilience studies were conducted in four major waves.

Resilience studies were conducted in four major waves. In order to determine the differences between resilient individuals and others in similar situations who did not cope as well, the first wave of research focused on an individual's strengths and available resources. Despite a variety of perspectives and methodologies, researchers consistently found the same potential promotive and protective factors (see Table 1) commonly associated with resilience in children and youth (Masten & Obradović, 2006).

Table 1. Commonly Observed Predictors of Resilience in Young People (Cutuli, Herbers, Lafavor, & Masten 2008, p. 79)

Promotive/Protective Factors
Positive relationships with caring adults
Effective parenting
Intelligence, problem-solving skills
Perceived efficacy, control
Achievement motivation, persistence
Self-regulation skills
Effective stress management
Positive friends, romantic partners
Faith, hope, spirituality
Religion, cultural systems
Beliefs that life has meaning
Effective teachers, schools

In the second wave, as researchers tried to determine how these common promotive and protective factors influence adaptation, they recognized the role of developmental systems in causal explanations (Cicchetti, 2010; Cicchetti & Curtis, 2007; Masten, 2007, 2011). This, in turn, led to a greater emphasis on the role of relationships and systems beyond the family (Cicchetti, 2010; Cicchetti & Curtis, 2007; Masten, 2007, 2011).

In the third wave, researchers combined resilience science findings on assets and promotive and protective factors with prevention science findings, which stressed the importance of promoting competence, to design and test interventions intended to improve resilience by changing developmental pathways (Masten, Burt, & Coatsworth, 2006; Masten, 2007; Weissberg, Kumpfer, & Seligman, 2003). Subsequent findings confirmed much of what was reported in prior research, i.e., that personal characteristics, relationships, and context are associated with resilience in varied situations. This indicated the probability of some common general factors and adaptive systems associated with positive response to risk (Masten, 2001, 2004; Masten & Obradović, 2006). Common adaptive systems associated with positive results include learning, attachment, self-regulation, family, school, and peer systems, among others (Masten & Obradović, 2006). When these systems are available and operating normally, individual resilience is common; the worst results occur when these systems are damaged, destroyed, or develop abnormally as a result of adversity (Masten & Obradović, 2006).

In 2006, the fourth wave of research began as part of a larger movement in all sciences related to genes, brain function, and development (Cicchetti, 2010; Feder, Nestler, & Charney, 2009). Assimilating research findings from different fields about brain development, neurobiological

processes, and system interaction to shape development paved the way for new resilience interventions that have begun to be implemented (Lester, Masten, & McEwen, 2006). For example, Obradović, Burt, and Masten (2006), using a new person-centered methodology, found five pathways of adaptation from adolescence to adulthood making it possible to categorize positive pathways of development or recovery among groups with high adversity exposure. For example, Obradović, Burt, and Masten (2006), using a new person-centered methodology, found five pathways of adaptation from adolescence to adulthood making it possible to categorize positive pathways of development or recovery among groups with high adversity exposure.

Research on risk and response produced another approach to adolescent development, referred to as positive youth development (PYD). Whereas resilience research has focused primarily on risk and protective factors, PYD has emphasized strengthening developmental assets and building on strengths, (Small & Memmo, 2004; Roth & Brooks-Gunn, 2003; Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2002) and is used frequently by local agencies that provide after-school and informal educational programs. Both research areas have limitations: Resilience research may overemphasize negative outcomes and overlook positive ones, while PYD research may neglect the role of risk in positive outcomes and fail to consider negative outcomes adequately. As a result, a more holistic approach of looking at resilience has been suggested to integrate the reduction of negative behaviors and the promotion of positive ones (Kia-Keating, et al., 2011).

Resilience and Relationships

Since risk and protective factors are related to specific outcomes and populations, there is no consensus among researchers about which factors have the greatest overall impact. Nevertheless, the foundation of resilience seems to rest on quality relationships (Doll, et al., 2011), which, as the core of psychological development, are “critical for achieving and sustaining resilient adaptation” (Luthar, 2006, p. 780). It is evident that positive relationships support resilience when considering the variety of protective factors that are relational in nature: positive relationships with caregivers; a sense of belonging to the community; supportive relationships with teachers; friendships with peers; strong family relationships; early family connections; high levels of parental warmth; supportive and warm relationships with fathers; and relationships with extended kin (Reed-Victor, 2008).

Affirmative relationships are linked directly with positive outcomes; yet, relationships interplay with a host of genetic and environmental factors to produce multiple pathways to resilience. These additional factors include social competence, problem-solving skills, autonomy, a sense of purpose, positive self-esteem, competence, coping skills, parental support, and mentoring (Benard, 2004; Fergus & Zimmerman, 2005). Therefore, the pathways through which relationships produce the greatest impact may not be obvious. Since positive relationships either can reduce risk or reduce a youth’s exposure to risk, some interventions focus on reducing risk factors such as parental unemployment or lack of housing (Reed-Victor, 2008). Others focus on supporting protective factors, some of which are relational, such as positive connections with alternative caregivers or friendships with peers, that may buffer adolescents from circumstances that place them at risk (Reed-Victor, 2008; Saewyc, Wang, Chittenden, Murphy, & The McCreary Centre Society, 2006).

Increasing resilience requires continued nurturing throughout a child’s development. Building a relationship is commonly viewed as a lengthy, intensive process that can seem daunting to

overworked school personnel and service providers. But, instead of devoting enormous segments of time with each individual, Brendtro and Larson (2006) suggest that brief encounters can provide the basis of building “natural supportive alliances between trusting individuals” (p. 58). These encounters provide opportunities for teaching moments and serve as the building blocks for meaningful relationships.³ The influence of even one person can contribute significantly to another’s resilience (National Scientific Council on the Developing Child, 2004). This may include someone who is dependable in a crisis, makes one feel cared for and loved, is a confidante, or provides input and feedback (Andersson & Ledogar, 2008). Some researchers say that the presence of one caring person is the most potent protective factor a youth can have (Brendtro & Larson, 2006; Brendtro, Brokenleg, & Van Bockern, 2005).

The influence of one person can contribute significantly to another’s resilience.

Enhancing Academic Outcomes Through Relationships

Youth who have strong relational connections in their homes, schools, and communities have higher educational aspirations (Reed-Victor, 2008; Saewyc, et al., 2006). They have better academic outcomes when their parents engage in their learning activities (such as homework), join parent organizations at school, and are involved in their extracurricular activities (Rutter & Maughan 2002; Slavin, 1994; Spera 2005). Students with close, supportive, and positive relationships with their teachers also demonstrate higher levels of achievement (Rimm-Kaufmann, 2012).

Youth with a positive attitude toward social relationships are more resilient, do better in school, and contribute more to those around them (Wilson, O’Brien, & Sesma, 2009). Unfortunately, students in poverty, especially homeless and highly mobile students, are at high risk for disconnection from positive relationships with peers and supportive adults. Poor academic achievement and poor social relationships are two factors that place homeless youth in danger of future difficulties (Levy & Wall, 2000). On the other hand, positive relationships with parents, teachers, and others can support resilience by eliminating or mitigating risk, buffering youth from risk, empowering youth, or through some combination of these three. Relationships, then, can be a conduit through which academic outcomes are improved.

Considering the impact of environmental factors on resilience, school is a prime target area for interventions that foster coping skills and increase student success (Kanevsky, et al., 2008; Rosen, Glennie, Dalton, Lennon, & Bozick, 2010). Three factors related specifically to school protective factors are:

- ◇ School connectedness - the general perception of a student’s relationship to school (Anderson-Butcher, Amorose, Iachini, & Ball, 2012)

³ Chapter 3 of Brendtro and Larson’s book, *The Resilience Revolution*, is a guide to building trusting connections with youth and may be helpful for those who have brief and/or sporadic contact with young people.

- ◇ Academic press - the expectation of a student experiencing academic success (Anderson-Butcher, Amorose, Iachini, & Ball, 2012)
- ◇ Academic motivation - general interest, engagement, and enjoyment in learning and school (Anderson-Butcher, Amorose, Iachini, & Ball, 2012)

These factors are linked to improved grades, higher academic performance, graduation from high school (Battin-Pearson, et al., 2000; Klem & Connell, 2004; Nasir, Jones, & McLaughlin, 2011), higher grade point average and standardized test scores (Anderson & Keith, 1997; Eccles, Wong, & Peck, 2006; Ratelle, Guay, Vallerand, Larose, & Sénécal, 2007), and overall student achievement (Bryk, 2010).

Interventions that promote healthy relationships in school should include strategies focused on student-student, student-staff, and staff-staff relationships (McNeely, et al., 2002; Cuthrell, et al., 2010) in order to improve the interactions within and among all groups. Although many school interventions can impact everyone in the school, students from poor families are more likely to benefit the most, as people with fewer social supports and less access to resources tend to be impacted more by any single resource or support than the general population (Cooper & Crosnoe, 2007).

Homelessness

Poverty is a major risk factor for several cognitive, emotional, and behavioral disorders, as well as for other developmental challenges; yet, homelessness can affect students' academic resilience above and beyond the impact of general poverty. Most scholars agree that homeless students' academic difficulties cannot be attributed solely to their homelessness; instead, it is more likely due to their position on the extreme end of a risk continuum, where low-income students perform worse than middle-class students, and homeless students perform worse than residentially stable low-income students (Buckner et al., 1999, 2008; Masten, et al., 1997; Rafferty, Shinn, & Weitzman, 2004). As a result, when examining resilience, the effects of homelessness must be considered in relation to co-occurring poverty-related risk factors.

The effects of homelessness may depend on the student's age, living arrangement, and duration of homelessness (Komro, Flay, & Biglan, 2011). In regard to age, adolescents show less academic resilience while homeless than do younger students (Haber & Toro, 2004; Obradović, et al., 2009). Living arrangements can have a significant impact, especially for those who stay in settings that are crowded, stressful, or dangerous (Hallett, 2010; Shinn, et al., 2008). Even though doubling up is the most common living arrangement of homeless families (National Center for Homeless Education [NCHE], 2012, p. 16-17), many doubled-up parents perceive the turmoil in that situation as more detrimental to their children's education than staying in a shelter (Miller, 2009).

The duration of a student's homelessness also impacts school experiences (Barwick & Siegel, 1996; Shinn, et al., 2008). Students who are homeless for extended periods are most likely to experience social isolation, rejection, and withdrawal (Anooshian, 2003; Anooshian, 2005). A positive correlation also exists between children's length of shelter stay and internalizing problem behaviors such as stress and depression, both of which impact academic performance negatively (Buckner, Bassuk, Weinreb, & Brooks, 1999). Leaving home, even a home where life is chaotic, can be extremely unsettling for youth, as they deal with the loss of familiar routines, such as school attendance and

daily contact with friends. This may result in a greater sense of vulnerability, anxiety (Whitbeck, Hoyt, & Bao, 2000), and distress (MacLean, Paradise, & Cauce, 1999), all of which impact developmental and academic outcomes negatively.

The homeless experience can be disempowering, especially for youth who experience homelessness not only as a material loss but also as a loss of self (Dashora, Erdem, & Slesnick, 2011). Research demonstrates consistently that social support reduces psychological distress, such as depression or anxiety, and promotes psychological adjustment to a broad array of chronically stressful conditions (Taylor & Stanton, 2007)⁴. Youth who are empowered to make better decisions instead of being rescued from adversity, develop more confidence in their own decision-making ability which, in turn, increases the likelihood that they will utilize healthy coping processes and be willing to try new things on their own (Kidd & Shahar, 2008; Taylor & Stanton, 2007).

A mentor relationship could serve as a protective factor to support some homeless youth; indeed, some researchers feel strongly that this type of relationship is essential (Hyman, Aubry, & Klodawsky, 2011). But mentors must understand how to deal with learning gaps that are likely to manifest in highly mobile populations and must be committed to a long-term, ongoing relationship (Klaw, Rhodes, & Fitzgerald, 2003). Short-term mentoring situations not only may not build resilience, but may even do harm (Minnard, 2002; Pianta & Walsh, 1998). This is especially true if mentors are not equipped to understand and provide adequate support to at-risk youth, as this may lead to short-lived relationships that only exacerbate the relational instability and insecurity they feel. Much is still unclear about the effectiveness of mentoring on the academic performance of homeless students. More research is needed to guide the development of mentoring programs before mentoring can be considered an evidence-based intervention (Rhodes & Dubois, 2006).

A mentor relationship could serve as a protective factor to support some homeless youth; indeed, some researchers feel strongly that this type of relationship is essential.

Trauma

Hopper, Bassuk, and Olivet (2010) define trauma as an experience that “creates a sense of fear, helplessness, or horror and overwhelms a person’s resources for coping” (p. 80). There is increasing recognition of the extremely high levels of traumatic stress among families and unaccompanied youth experiencing homelessness and the resulting impact on physiological, emotional, and cognitive functioning, relationships, and identity formation (Bassuk, Konnath, & Volk, 2006; Hopper, et al., 2010)

Homelessness can be especially traumatic for young people due to the associated loss of housing,

⁴Taylor and Stanton review coping resources such as optimism, mastery, self-esteem, and social support, and offer strategies for improving coping processes.

family connections, social roles, and routines (Olivet, Paquette, Hanson, & Bassuk, 2010). Youth experiencing homelessness on their own may be impacted even more negatively as symptoms from the trauma they experienced before leaving home are worsened by the actual experience of leaving. Whitbeck, Hoyt, Johnson, and Xiaojin (2007) report that “besides living in a war zone, the vulnerability posed by running away and the experiences associated with being homeless and alone may pose the greatest risk for Post-Traumatic Stress Disorder among adolescents” (p. 721).

Recognizing the need to avoid re-traumatizing or blaming victims for their response to trauma, some organizations incorporate trauma awareness and understanding into their service provision. Trauma-informed care, a framework that refocuses the attitudes and behaviors of an entire organization on the impact of trauma, “emphasizes physical, psychological, and emotional safety [...] and [...] creates opportunities for survivors to rebuild a sense of control and empowerment” (Hopper, et al., 2010, p. 82).

Science and Interventions

Identifying appropriate interventions to increase youth resilience has been difficult because of the wide variety of promotive and protective factors that may be associated with different combinations of risk and responses (Crosnoe, Erickson, & Dornbusch, 2002; Gutman, Sameroff, & Eccles, 2002). In addition to personal and family characteristics, resilience can vary depending on a youth’s location (urban, suburban, or rural), socioeconomic status, gender, immigration status, chronological age, or development stage (Fergus & Zimmerman, 2005). Moreover, a youth may adapt positively when faced with one type of risk, but be overcome by another (Fergus & Zimmerman, 2005).

Integrating findings from research in developmental psychology, resilience, and neuroscience has spurred interest in developing interventions specifically designed to help children overcome the negative consequences of poverty. Neuroscience studies use the term *neuroplasticity* to describe the brain’s ability to change and grow, particularly in childhood, through exposure to environmental stimulus. Recent research shows that early childhood risk and adversity not only affect overall conditions in children’s lives, but can alter the physical development of their brains as well. This developmental period of extreme plasticity, when both the brain’s structure and function change, may leave a child especially vulnerable to harm, but it also may provide a prime opportunity for interventions focused on diminishing the negative effects of simultaneous emotional or physical trauma (Romeo & McEwen, 2006).

Obradović, et al. (2009) suggest that school districts typically do not measure factors with the greatest potential for positive influence on academic resilience in disadvantaged students. These factors include the synonymously used terms self-regulation (SR) and executive function (Buckner, 2012), which refer to processes that enable individuals to exert control over attention, cognition, and behavioral tendencies (Blair, Zelazo, & Greenberg, 2005) over time and across changing settings (Karoly, 1993). Many of the systems associated with positive response to risk are related to the brain’s capacity for SR; and insufficient SR skills are associated commonly with behavioral and academic problems (Bradley & Corwyn, 2005; Buckner, Mezzacappa, & Beardslee, 2009; Strayhorn, 2002; Vohs & Ciarocco, 2004). More specifically, SR seems to be an important factor in distinguishing resilient and non-resilient children and youth living in poverty (Buckner et al., 2003). Therefore, many recent

strategies designed to improve children’s response to risk are centered on SR (Dishion & Connell, 2006).

Suggestions for Future Research

Many studies have examined risk and resilience, providing an abundance of information about risk factors that increase vulnerability and counteracting factors that offer protection from risk. Children, all with their own unique characteristics, are greatly impacted by a multitude of people, circumstances, and systems; but there is little understanding of how these factors combine to influence children’s resilience. Moving forward, it is critical to uncover the essential elements of interventions that can foster resilience successfully in at-risk children and youth, particularly those who experience homelessness. In order to accomplish this, following are some of the most relevant suggestions for future studies:

- ◇ Increase cross-discipline collaboration, integrate findings across diverse fields, and create a systematic resilience framework.
- ◇ Conduct longitudinal studies to better understand and disentangle the relationships among risk factors, protective factors, and internal assets during developmental stages.
- ◇ Analyze the distinctiveness of subgroups (e.g., homeless students)⁵ and how subgroup characteristics affect resilience, especially in terms of response to particular risk and protective factors.
- ◇ Examine academic resilience in order to develop specific interventions that promote positive development and reduce achievement gaps.
- ◇ Determine the best approaches to building resilience through relationships.
- ◇ Clarify trauma-informed care, including what defines it, what changes should be made within systems wishing to use it, and how these changes can be implemented best in youth-serving agencies.

Conclusion

Children and youth are more resilient when they live in safe and stable environments; have strong connections to families, schools, and communities; and are able to develop age-appropriate cognitive and social skills. Early exposure to multiple risk factors increases the likelihood of adverse effects on healthy development; and the negative impact increases over time. Therefore, it is important to promote resilience in children as early as possible by utilizing the most effective interventions within the context of the child, family, school, and broader community.

Gaining a better understanding of ways to increase resilience in homeless children and youth holds great promise for improving the effectiveness of preventive community, school, and family

⁵The NCHE publication entitled *Summary of the State of Research on the Relationship Between Homelessness and Academic Achievement Among School-Aged Children and Youth*, available at http://center.serve.org/nche/downloads/nche_research_pub.pdf, discusses the issue of subgroups of homeless children with different patterns of functioning.

services. Although some approaches have been shown to be more effective than others, currently no consensus exists regarding what an ideal program to promote resilience in youth would look like. In the meantime, the most crucial piece seems to be the human dimension. "It's how we do what we do that counts" as we capitalize on the "power of one person to make a difference" (Benard, 2004, p. 108-109).

Resources for Interventions and Strategies:

The ARC Framework⁶ (Attachment, Self-Regulation, Competency) for Runaway and Homeless Youth Serving Agencies: This publication from the Hollywood Homeless Youth Partnership provides principles of intervention for working with youth who have experienced multiple and/or prolonged traumas, as have many youth experiencing homelessness. Visit http://www.hhyp.org/downloads/HHYP_ARC_Framework.pdf.

Fostering Resiliency: Mitigating the Impact of Homelessness on Children: In this webcast, presenter Katie Volk from the Center for Social Innovation discusses the impact of homelessness on children and offers strategies to foster resiliency in children experiencing homelessness. Visit <http://homeless.samhsa.gov/Resource/HRC-Webcast-Resources-Fostering-Resiliency-Mitigating-the-Impact-of-Homelessness-on-Children-51247.aspx> for links to the webcast, PowerPoint presentation, and full transcript.

NCHE Information by Topic Webpage - Resilience: This webpage provides links to resources related to resilience in children and youth experiencing homelessness. Visit http://center.serve.org/nche/ibt/sps_resilience.php.

Trauma Informed Consequences for Homeless Youth: This publication explains the differences between punishment and consequences and acknowledges the tension between maintaining consistency and providing individualized, trauma-informed responses when working with homeless youth. Visit <http://hhyp.org/downloads/Trauma-Informed-Consequences.pdf>.

Homelessness Resource Center Webpage - Resilience and Youth: This webpage provides links to resources related to resilience in vulnerable youth. Visit <http://homeless.samhsa.gov/Search.aspx?search=resilience+and+youth>.

Working with Young Homeless Families: Strategies to Foster Resiliency: This webinar from the National Center on Family Homelessness provides information on the housing, developmental, and clinical needs of young families and fosters knowledge and skills in assessment and intervention to improve outcomes. Visit <https://www3.gotomeeting.com/register/658844942>.

⁶The concept of the ARC Framework is based on Kinniburgh, K. & Blaustein, M. (2005). Attachment, self-regulation, and competency: A comprehensive intervention framework for children with complex trauma. *Psychiatric Annals*, 35(5), 424-430.

References

- Agnes, M. E. (2013). *Webster's new world college dictionary*. Foster City, CA: John Wiley.
- Anderson, E. S., & Keith, T. Z. (1997). A longitudinal test of a model of academic success for at-risk high school students. *The Journal of Educational Research, 90*(5), 259-268.
- Anderson-Butcher, D., Amorose, A., Iachini, A., & Ball, A. (2012). The development of the perceived school experiences scale. *Research on Social Work Practice, 22*(2), 186-194.
- Andersson, N., & Ledogar, R. J. (2008). The CIET Aboriginal youth resilience studies: 14 years of capacity building and methods development in Canada. *Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health, 6*(2), 65-88. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2942846/pdf/nihms1051.pdf>.
- Anooshian, L. J. (2003). Social isolation and rejection of homeless children. *Journal of Children and Poverty, 9*(2), 115-134.
- Anooshian, L. (2005). Violence and aggression in the lives of homeless children. *Journal of Family Violence, 20*(6), 373-387.
- Anthony, E. K. (2008). Cluster profiles of youths living in urban poverty: Factors affecting risk and resilience. *Social Work Research, 32*(1), 6-17.
- Bandura, A. (2006). "Adolescent development from an agentic perspective". In F. Pajares & T. Urdan (Eds.), *Self-efficacy beliefs* (pp. 1-44). Colorado: Information Age Press.
- Barwick, M. A., & Siegel, L. S. (1996). Learning difficulties in adolescent clients of a shelter for runaway and homeless street youths. *Journal of Research on Adolescence, 6*(4), 649-70.
- Bassuk, E.L., Konnath, K., & Volk, K.T. (2006). *Understanding traumatic stress in children*. Retrieved from <http://www.familyhomelessness.org/media/91.pdf>
- Battin-Pearson, S., Newcomb, M.D., Abbott, R.D., Hill, K.G., Catalano, R.F., & Hawkins, J.D. (2000). Predictors of early high school dropout: A test of five theories. *Journal of Educational Psychology, 92*(3), 568-82.
- Benard, B. (2004). *Resiliency: What we have learned*. San Francisco: WestEd.
- Benson, P.L., Scales, P.C., Leffert, N., Roehlkepartain, E.C., & Search Institute. (1999). *A fragile foundation: The state of developmental assets among American youth*. Minneapolis, MN: Search Institute.
- Benzies, K., & Mychasiuk, R. (2009). Fostering family resiliency: A review of the key protective factors. *Child & Family Social Work, 14*(1), 103-114.
- Blair, C., Zelazo, P. D., & Greenberg, M. T. (2005). The measurement of executive function in early

childhood. *Developmental Neuropsychology*, 28(2), 561-571.

Bowen, N. K., Lee, J-S., & Weller, B. E. (2007). Social environmental risk and protection: A typology with implications for practice in elementary schools. *Children & Schools*, 29(4), 229–242. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3119897/pdf/nihms297650.pdf>

Bradley, R., & Corwyn, R. (2005). Productive activity and prevention of behavior problems. *Developmental Psychology*, 41(1), 89–98.

Brendtro, L., & Larson, S. (2006). *The resilience revolution*. Bloomington, IN: National Educational Service.

Brendtro, L.K., Brokenleg, M., & Van Bockern, S. (2005). The circle of courage and positive psychology. *Reclaiming Children & Youth*, 14(3), 130-136.

Brooks, J.E. (2006). Strengthening resilience in children and youths: Maximizing opportunities through the schools. *Children & Schools*, 28(2), 69-76.

Brooks-Gunn, J., Duncan, G., & Aber, L. (1997). *Neighborhood poverty: Context and consequences for children* (Vol. 1). New York: Russell Sage Foundation.

Bryk, A. S. (2010). Organizing schools for improvement. *Phi Delta Kappan*, 91(7), 23-30.

Buckner, J. (2012). Educational research on homeless and housed children living in poverty: Comments on Masten, Fantuzzo, Herber, and Voight. *Educational Researcher*, 41(9), 403-407.

Buckner, J.C., Mezzacappa, E., & Beardslee, W.R. (2003). Characteristics of resilient youth living in poverty: The role of self-regulatory processes. *Development and Psychopathology*, 15, 139–162.

Buckner J.C., Mezzacappa E., & Beardslee W.R. (2008). Self-regulation and its relation to adaptive functioning in low income youths. *American Journal of Orthopsychiatry*, 79(1), 19-30.

Buckner, J.C., Bassuk, E.L., Weinreb, L.F., & Brooks, M.G. (1999). Homelessness and its relation to the mental health and behavior of low-income school-age children. *Developmental Psychology*, 35(1), 246-57.

Buckner, J., Mezzacappa, E., & Beardslee, W. (2009). Self-regulation and its relation to adaptive functioning in low income youth. *American Journal of Orthopsychiatry*, 79(1), 19–30.

Burt, Martha R. (2002). *Evaluation of Continuums of Care for homeless people: Final report*. Washington, DC: Urban Institute. Retrieved from <http://www.urban.org/publications/310553.html>.

Burt, M. R., Pollack, D., Sosland, A., Mikelson, K. S., Drapa, E., Greenwalt, K., et al. (2002). Evaluation of continuums of care for homeless people. Washington, D.C.: The Urban Institute. Retrieved from http://www.huduser.org/publications/pdf/continuums_of_care.pdf.

Catalano, R. F. , Berglund, M. L., Ryan, J. A. M., Lonczak, H. S., & Hawkins, J. D. (2002). Positive youth

development in the United States: Research findings on evaluations of positive youth development programs. *Prevention Treatment*, 5(1), 1-111.

Cicchetti, D. (2010). Resilience under conditions of extreme stress: a multilevel perspective. *World Psychiatry*, 9(3), 145-54.

Cicchetti, D., & Curtis, W. J. (2007). Special issue: A multi-level approach to resilience. *Development and Psychopathology*, 19(3), 627-955.

Coie, J.D., Watt, N.F., West, S.G., Hawkins, J.D., Asarnow, J.R., Markman, H.J., et al. (1993). The science of prevention: A conceptual framework and some directions for a national research program. *American Psychologist*, 48(10), 1013-22.

Condly, S.J. (2006). Resilience in children: A review of literature with implications for education. *Urban Education*, 41(3) 211-236.

Cooper, C., & Crosnoe, R. (2007). The engagement in schooling of economically disadvantaged parents and children. *Youth & Society*, 38(3), 372-391.

Crosnoe, R., Erickson, K. G., & Dornbusch, S. M. (2002). Protective functions of family relationships and school factors on the deviant behavior of adolescent boys and girls: Reducing the impact of risky friendships. *Youth & Society*, 33(4), 515-544.

Cuthrell, K., Stapleton, J., & Ledford, C. (2010). Examining the culture of poverty: Promising practices. *Preventing School Failure*, 54(2), 104-110.

Cutuli, J.J., Herbers, J.E., Lafavor, T.L., & Masten, A.S. (2008). Promoting competence and resilience in the school context. *Professional School Counseling*, 12(2), 76-84.

Dashora, P., Erdem, G., & Slesnick, N. (2011). Better to bend than to break: Coping strategies utilized by substance-abusing homeless youth. *Journal of Health Psychology*, 16(1), 158-168.

D'Imperio, R.L., Dubow, E.F., & Ippolito, M.F. (2000). Resilient and stress-affected adolescents in an urban setting. *Journal of Clinical Child Psychology*, 29(1), 129-42.

Dishion, T.J., & Connell, A. (2006). Adolescents' Resilience as a Self-Regulatory Process. *Annals of the New York Academy of Sciences*, 1094(1), 125-138.

Doll, B., Jones, K., Osborn, A., Dooley, K., & Turner, A. (2011). The promise and the caution of resilience models for schools. *Psychology in the Schools*, 48(7), 652-659.

Eccles, J. S., Wong, C. A., Peck, S. C., & Motivation. (2006). Ethnicity as a social context for the development of African-American adolescents. *Journal of School Psychology*, 44(5), 407-426.

Feder A., Nestler E.J., & Charney D.S. (2009). Psychobiology and molecular genetics of resilience. *Nature Reviews Neuroscience*, 10(6), 446-457.

Fergus, S., & Zimmerman, M. A. (2005). Adolescent resilience: A framework for understanding healthy

development in the face of risk. *Annual Review of Public Health*, 26(1), 399-419.

- Flouri, E., Tzavidis, N., & Kallis, C. (2010). Adverse life events, area socioeconomic disadvantage, and psychopathology and resilience in young children: The importance of risk factors' accumulation and protective factors' specificity. *European Child Adolescent Psychiatry*, 19(6), 535–546.
- Fraser, M.W., & Terzian, M.A. (2005). Risk and resilience in child development: Practice principles and strategies. In G. P. Mallon & P. McCartt Hess (Eds.), *Handbook of children, youth, and family services: Practice, policies, and programs* (pp. 55–71). New York: Columbia University Press.
- Fraser, Galinsky, & Richman. (1999). Risk, protection, and resilience: Towards a conceptual framework for social work practice. *Social Work Research*, 23(3), 131-144.
- Glennie, E.J. (2010). Coping and Resilience. In Rosen, Glennie, Dalton, Lennin, & Boswick (Eds.), *Noncognitive skills in the classroom: New perspectives on educational research*. Research Triangle Park, NC: RTI International. Retrieved from <http://www.rti.org/pubs/bk-0004-1009-rosen.pdf>
- Greenberg, M.T. (2006). Promoting resilience in children and youth: Preventive interventions and their interface with neuroscience. *Annals of the New York Academy of Sciences*, 1094(1), 139-150.
- Gutman, L.M., Sameroff, A.J., & Eccles, J.S. (2002). The academic achievement of African American students during early adolescence: an examination of multiple risk, promotive, and protective factors. *American Journal of Community Psychology*, 30(3), 367-99.
- Haber, M., and Toro, P.A. (2004). Homelessness among families, children and adolescents: An ecological-developmental perspective. *Clinical Child and Family Psychology Review*, 7(3), 123-164.
- Hallett, R. E. (2010). Homeless: How residential instability complicates students' lives. *About Campus*, 15(3), 11-16.
- Hopper, Bassuk, & Olivet, (2010). Shelter from the Storm: Trauma-Informed Care in Homelessness Service Settings. *The Open Health Services and Policy Journal*, 3, 80-100.
- Hyman, S., Aubry, T., & Klodawsky, F. (2011). Resilient educational outcomes: participation in school by youth with histories of homelessness. *Youth & Society*, 43(1) 253–273.
- Jenson, J.M., & Fraser, M.W. (2006). A risk and resilience framework for child, youth, and family policy. In J. M. Jenson and M. W. Fraser (Eds.), *Social policy for children and families: A risk and resilience perspective*. (pp. 1–18). Thousand Oaks, CA: Sage.
- Jozefowicz-Simbeni, D.M.H. & Allen-Meares, P. (2002, April). Poverty and schools: Intervention and resource building through school-linked services. *Children & Schools*, 24(2), 123-136.
- Kanevsky, L., Corke, M., & Frangkiser, L. (2008). The academic resilience and psychosocial

characteristics of inner-city english learners in a museum-based school program. *Education and Urban Society*, 40(4), 452-475.

- Karoly, P. (1993). Mechanisms of self-regulation: A systems view. *Annual Review of Psychology*, 44, 23-51.
- Kelly, K., & Caputo, T. (2007). Health and street/homeless youth. *Journal of Health Psychology*, 12(5), 726-736.
- Kia-Keating, M., Dowdy, E., Morgan, M.L., & Noam, G.G. (2011). Protecting and promoting: An integrative conceptual model for healthy development of adolescents. *Journal of Adolescent Health*, 48(3), 220-228.
- Kidd, S., & Shahar, G. (2008). Resilience in homeless youth: the key role of self-esteem. *The American Journal of Orthopsychiatry*, 78(2), 163-72.
- Klaw, E.L., Rhodes, J.E., & Fitzgerald, L.F. (2003). Natural mentors in the lives of African American adolescent mothers: tracking relationships over time. *Journal of Youth and Adolescence*, 32(3) 223-232.
- Klem, A.M., & Connell, J.P. (2004). Relationships matter: Linking teacher support to student engagement and achievement. *Journal of School Health*, 74(7), 262-273.
- Lester, B.M., Masten, A.S., & McEwen, B.S. (2006). Preface. *Annals of the New York Academy of Sciences*, 1094(1).
- Long, J.F., Monoi, K., Harper, B., Knoblauch, D., & Murphy, P.K. (2007). Academic motivation and achievement among urban adolescents. *Urban Education*, 42(3), 196-222.
- Levy, A. J., & Wall, J. C. (2000). Children who have witnessed community homicide: Incorporating risk and resilience in clinical work. *Families in Society: The Journal of Contemporary Human Services*, 81(4), 402-411.
- Luthar, S. S. (2006). Resilience in development: A synthesis of research across five decades. In D. Cicchetti & D. J. Cohen (Eds.), *Developmental psychopathology: Vol. 3, Risk, disorder, and adaptation* (2nd ed., pp. 739-795). New York: Wiley.
- Luthar, S.S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development*, 71(3), 543-562.
- Luthar, S.S., Sawyer, J.A., & Brown, P.J. (2006). Conceptual Issues in Studies of Resilience: Past, Present, and Future Research. *Annals of the New York Academy of Sciences*, 1094(1), 105-115.
- Luthar, S.S., & Ziegler, E. (1991). Vulnerability and competence: A review of research on resilience in childhood. *American Journal of Orthopsychiatry*, 61(1), 7-22.
- MacLean, M.G., Paradise, M.J., & Cauce, A.M. (1999). Substance use and psychological adjustment in homeless adolescents: A test of three models. *American Journal of Community Psychology*,

27(3), 405-27.

- Masten, A.S. (1989). Resilience in development: implications of the study of successful adaptation for developmental psychopathology. In D. Cicchetti, (Ed.), *The Emergence of a Discipline: Rochester Symposium on Developmental Psychopathology, Volume 1* (pp. 261–294). Hillsdale, NJ: Lawrence Erlbaum Associates.
- Masten, A.S. (2001) Ordinary magic: Resilience processes in development. *American Psychologist*, 56(3), 227–238;
- Masten, A.S. (2004). Regulatory processes, risk and resilience in adolescent development. *Annals of the New York Academy of Sciences*, 1094(1), 310–319.
- Masten, A.S. (2006). Developmental psychopathology: Pathways to the future. *International Journal of Behavioral Development*, 30(1), 47-54.
- Masten, A. S. (2007). Resilience in developing systems: Progress and promise as the fourth wave rises. *Development and Psychopathology*, 19(3), 921-930.
- Masten, A. S. (2011). Resilience in children threatened by extreme adversity: Frameworks for research, practice, and translational synergy. *Development and Psychopathology*, 23(2), 493-506.
- Masten, A. S., Burt, K., & Coatsworth, J. D. (2006). Competence and psychopathology. In D. Cicchetti & D. Cohen (Eds.), *Developmental psychopathology, Volume 3, Risk, disorder and psychopathology* (2nd ed.) (pp. 696-738). New York: Wiley.
- Masten, A.S. & Coatsworth, J.D. (1998). The development of competence in favorable and unfavorable environments: lessons from research on successful children. *American Psychology*, 53(2), 205–220.
- Masten, A.S., & Obradović, J. (2006). Competence and resilience in development. *Annals of the New York Academy of Sciences*, 1094(1), 13-27.
- McFarlane, J. M., Groff, J. Y., O'Brien, J. A., & Wilson, K. Behaviors of children who are exposed and not exposed to intimate partner violence: An analysis of 330 Black, White, and Hispanic children. *Pediatrics*, 112(3), 202–207.
- McNeely, C. A., Nonnemaker, J. M. and Blum, R. W. (2002). Promoting school connectedness: Evidence from the National Longitudinal Study of Adolescent Health. *Journal of School Health*, 72(4), 138–146.
- Miller, P. (2009). Leadership and collaboration for homeless students: Examining community perceptions. *Urban Review*, 41(3), 222–250.
- Minnard, C. V. (2002). A strong building: Foundation of protective factors in schools. *Children & Schools*, 24(4), 233-46.
- Nasir, N. S., Jones, A., & McLaughlin, M. W. (2011). School connectedness for students in low-income

urban high schools. *Teachers College Record*, 113(8), 1755-1793.

- National Center for Homeless Education. (2012). *Education for Homeless Children and Youths Program: Analysis of 2010-2011 Federal Data Collection and Three-Year Comparison*. Retrieved from http://center.serve.org/nche/downloads/data_comp_0909-1011.pdf.
- National Coalition for the Homelessness. (N.D.). *How you can help end homelessness*. Retrieved from http://www.nationalhomeless.org/want_to_help/index.html
- National Scientific Council on the Developing Child. (2004). *Young children develop in an environment of relationships. Working Paper No. 1*. Retrieved from <http://www.developingchild.net>
- Obradović, H., Burt, K.B., and Masten, A.S. (2006). Pathways of Adaptation from Adolescence to Young Adulthood: Antecedents and Correlates. *Annals of the New York Academy of Sciences*, 1094(1), 340-344.
- Obradović, J., Long, J. D., Cutuli, J. J., Chan, C-K., Hinz, E., Heistad, D., & Masten, A. S. (2009). Academic achievement of homeless and highly mobile children in an urban school district: Longitudinal evidence on risk, growth, and resilience. *Development and Psychology*, 21(2), 493-518.
- Olivet, J., Paquette, K., Hanson, J, & Bassuk, E. (2010). The future of homeless services: An introduction. *The Open Health Services and Policy Journal*, 3, 30-33.
- Pianta, R. C., & Walsh, D. J. (1998). Applying the Construct of Resilience in Schools: Cautions from a Developmental Systems Perspective. *School Psychology Review*, 27(3), 407-17.
- Rafferty, Y., Shinn, M., & Weitzman, B. (2004). Academic achievement among formerly homeless adolescents and their continuously housed peers. *Journal of School Psychology*, 42, 179-99.
- Ratelle, C. F., Guay, F., Vallerand, R. J., Larose, S., & Senecal, C. (2007). Autonomous, controlled, and amotivated types of academic motivation: A person-oriented analysis. *Journal of Educational Psychology*, 99(4), 734-746.
- Reed-Victor, E. (2008). *Resilience: Strengthening relationships, fostering hope*. Retrieved from <http://education.wm.edu/centers/hope/publications/infobriefs/documents/resili.pdf>.
- Resnick, M.D., & Taliaferro, L.A. (2012). Resilience. In B. Brown & M. Prinstein (Eds.), *Encyclopedia of adolescence* (pp. 299-306). San Diego, CA: Academic Press.
- Rhodes J.E. & Dubois D.L. (2006). Understanding and facilitating the youth mentoring movement. *Social Policy Report*, 20(3), 3-19.
- Rimm-Kaufman, S. (2012). *Improving students' relationships with teachers to provide essential supports to learning*. Retrieved from <http://www.apa.org/education/k12/relationships.aspx>
- Romeo, R.D. & McEwen, B.S (2006). Stress and the adolescent brain. *Annals of the New York Academy of Sciences*, 1094(1), 202-214.

- Rosen, J.A., Glennie, E.J., Dalton, B.W., Lennon, J.M., & Bozick, R.N. (2010). *Noncognitive skills in the classroom: New perspectives on educational research*. Retrieved from <http://www.rti.org/pubs/bk-0004-1009-rosen.pdf>
- Roth, J.L., & Brooks-Gunn J. (2003). What exactly is a youth development program? Answers from research and practice. *Applied Developmental Science, 7*(2), 94–111.
- Rutter, M. (1979). Protective factors in children's responses to stress and disadvantage. In M. W. Kent & J. E. Rolf (Eds.), *Primary prevention in psychopathology. Vol. 8: Social competence in children* (pp. 49–74). Hanover, NH: University Press of New England.
- Rutter, M. (1981). Stress, coping and development: some issues and some questions. *Journal of Child Psychology and Psychiatry and Allied Disciplines 22*(4), 323–356.
- Rutter, M. (1987). Psychosocial resilience and protective mechanisms. *American Journal of Orthopsychiatry, 57*(3), 316–331.
- Rutter, M. (2006). Implications of resilience concepts for scientific understanding. *Annals of the New York Academy of Sciences, 1094*(1), 1-12.
- Saewyc, E., Wang, N., Chittenden, M., Murphy, A., & The McCreary Centre Society (2006). *Building resilience in vulnerable youth*. Retrieved from http://www.mcs.bc.ca/pdf/vulnerable_youth_report.pdf
- Sameroff, A.J. (1999). Ecological perspectives on developmental risk. In J. D. Osofsky & H. E. Fitzgerald (Eds.), *WAIMH handbook of infant mental health: Vol. 4. Infant mental health groups at risk* (pp. 223–248). New York: Wiley.
- Sameroff & Gutman, 2004. Contributions of risk research to the design of successful interventions. In P. Allen-Meares & M.W. Fraser (Eds.), *Intervention with children and adolescents: An interdisciplinary approach* (pp. 9-26). Boston: Allyn & Bacon.
- Sandler, I. (2001). Quality and ecology of adversity as common mechanisms of risk and resilience. *American Journal of Community Psychology, 29*(1), 19-61.
- Shinn, M., Schteingart, J.S., Williams, N.C., Carlin-Mathis, J., Bialo-Karagis, N., Becker-Klein, R., & Weitzman, B.C. (2008). Long-term associations of homelessness with children's well-being. *American Behavioral Scientist, 51*(6), 789-809.
- Slavin, R. A. (1994). 'Whenever and wherever we choose'. *Phi Delta Kappan, 75*(8), 639.
- Small, S., & Memmo, M. (2004). Contemporary models of youth development and problem prevention: Toward an integration of terms, concepts, and models. *Family Relations, 53*(1), 3-11.
- Smith, B. W., Dalen, J., Wiggins, K, Tooley, E., Christopher, P., & Bernard, J. (2008). The brief resilience scale: Assessing the ability to bounce back. *International Journal of Behavioral Medicine, 15*(3), 194–200.

- Sroufe, L. A., Egeland, B., Carlson, E., & Collins, A. (2005). *The development of the person: The Minnesota study of risk and adaptation from birth to adulthood*. New York City: The Guilford Press.
- Spera, C. (2005). A review of the relationship among parenting practices, parenting styles, and adolescent school achievement. *Educational Psychology Review, 17*(2), 125-146.
- Stewart, M., Reid, G., & Mangham, C. (1997). Fostering children's resilience. *Journal of Pediatric Nursing, 12*(1), 21-31.
- Strayhorn, J. (2002). Self-control: Theory and research. *Journal of American Academy of Child and Adolescent Psychiatry, 41*(1), 7-16.
- Taylor, S. E., & Stanton, A. L. (2007). Coping resources, coping processes, and mental health. *Annual Review of Clinical Psychology, 3*, 377-401.
- Trentacosta, C. J., Hyde, L. W., Shaw, D. B., Dishion, T. J., Gardner, F., & Wilson, M. (2008). The relations among cumulative risk, parenting, and behavior problems during early childhood. *Journal of Child Psychology and Psychiatry and Allied Disciplines, 49*(11), 1211-1219.
- Vohs, K., & Ciarocco, N. (2004). Interpersonal functioning requires self-regulation. In R. F. Baumeister & K. D. Vohs (Eds.), *Handbook of self-regulation, research, theory, and applications* (pp. 392-407). New York, NY: Guilford Press.
- Weissberg R.P., Kumpfer K.L., & Seligman, M.E.P. (2003). Prevention that works for children and youth: An introduction. *American Psychologist 58*(6-7) 425-432.
- Whitbeck, L.B., Hoyt, D.R., & Bao, W. (2000). Depressive symptoms and co-occurring depressive symptoms, substance abuse, and conduct problems among runaway and homeless adolescents. *Child Development, 21*(3), 721-732.
- Whitbeck, L.B., Hoyt, D.R., Johnson, K.D., & Xiaojin, C. (2007). Victimization and posttraumatic stress disorder among runaway and homeless adolescents. *Violence and Victims, 22*(6), 721-734.
- Wilson, D. S., & Csikszentmihalyi, M. (2007). Health and the ecology of altruism. In S.G. Post (Ed.), *The Science of Altruism and Health* (pp. 314-331). Oxford: Oxford University Press.
- Wright, M.O.D., & Masten, A.S. (2005). Resilience processes in development: fostering positive adaptation in the context of adversity. In S. Goldstein & R. Brooks, (Eds.) *Handbook of Resilience in Children* (pp. 17-37). New York: Kluwer Academic/Plenum.
- Zolkoski, S.M., & Bullock, L.M. (2012). Resilience in children and youth: A review. *Children and Youth Services Review, 34*(12), 2295-2303.

About NCHE



National Center for Homeless Education

Funded by the U.S. Department of Education, the National Center for Homeless Education (NCHE) serves as an information clearinghouse for people seeking to remove or overcome educational barriers and to improve educational opportunities and outcomes for children and youth experiencing homelessness. The Center also supports educators and service providers through producing training and awareness materials and providing training at regional and national conferences and events.

NCHE is part of the larger organization of the SERVE Center at the University of North Carolina at Greensboro.

National Center for Homeless Education

<http://www.serve.org/nche>

homeless@serve.org

This document was produced under U.S. Department of Education contract ED-04-CO-0056/0002.