## Your Journey Together: A Resilience-building Parenting Curriculum <u>A Literature Review</u>

Your Journey Together (YJT) is a strength-based parenting curriculum designed to promote the social and emotional well-being and resilience of vulnerable children and their families. All children and families have experienced some risk and adversity. However, some families are unfortunately faced with more adversity, risk and trauma than others. It is the goal of YJT to support those most vulnerable parents in their journey to strengthen their own, and their children's, social and emotional health, protective factors and resilience. The goal of YJT is to provide parents with the knowledge and skills that promote resilience, and help all members of the family better cope with life's challenges. The YJT model is based on research and evidence from the several areas of study including resilience, child development, trauma and parenting. This literature review highlights key findings that strongly influenced the final YJT model. The resilience literature specifically underscores the fact that to effectively promote children's social and emotional health and overall well-being, it is critical to focus on promoting the resilience of both the children and the parents and to so do within the context of strengthening parenting skills.

The literature review follows the framework of the YJT Curriculum. The 4 Modules of YJT include: (1) Introducing Resilience; (2) Strengthening Caregiving Practices; (3) Promoting Children's Protective Factors (4) Promoting Adult Caregiver Resilience.

ARTICLE CONTENT	CITATIONS
Resilience	
Resilience is common and arises from basic human resources and protective factors.  Many factors linked to positive outcomes for children are ones that can be nurtured and strengthened and are part of a family's ordinary experience.	Masten, A. S. (2001). Ordinary magic: Resilient processes in development. <i>American Psychologist</i> , <i>56</i> (3), 227–238.
Resilience is the process by which individuals	Masten, A. S. (2014). Ordinary magic: Resilience in development. New York, NY:

are able to positively adapt in the context of risk or adversity.	Guilford.
Many protective factors can be promoted through explicit, deliberate skill-building that can occur during everyday interactions and activities with families.	Masten, A. S., & Coatsworth, J. D. (1998). The development of competence in favorable and unfavorable environments: Lessons from research on successful children. <i>American Psychologist</i> , <i>53</i> (2), 205–220.
When at-risk children have well-developed protective factors, they are more likely to have positive lives.	Masten, A. S. (2006). Promoting resilience in development: A general framework for systems of care. In R. J. Flynn, P. M. Dudding, & J. G. Barber (Eds.), <i>Promoting resilience in child welfare</i> (pp. 3–17). Ottawa, ON: University of Ottawa Press.
Resilient children are self-starters, leaders, adventurous, problem-solvers, optimistic, hopeful, creative, comfort-seekers, and	Werner, E. E., & Smith, R. S. (1982). Vulnerable but invincible: A longitudinal study of resilient children and youth. New York, NY: McGraw-Hill.
autonomous.	Werner, E. E. & Smith, R. S. (1992). <i>Overcoming the odds: High-risk children from birth to adulthood.</i> Ithaca, NY: Cornell University Press.
Children's Protective Factors	
Protective factors which affect a person's resilience come from three main areas of life: the environment, the family, the self.	Goldstein, S., & Brooks R. B. (2005). Why study resilience? In S. Goldstein & R. B. Brooks (Eds.), <i>Handbook of resilience in children</i> (pp. 3–14). New York, NY: Springer.
The high levels of risk factors and negative outcomes experienced by children and families in the child welfare system indicate a need for resilience-focused approaches that intentionally develop protective factors to counter these potentially destructive influences.	Leve, L.D., Harold, G.T., Chamberlain, P., Landsverk, J.A., Fisher, P.A., & Vostanis, P. (2012). Practitioner Review: Children in foster care — vulnerabilities and evidence based interventions that promote resilience processes. <i>The Journal of Child Psychology and Psychiatry</i> , <i>53</i> (12), 1197-1211.
Protective factors are characteristics that moderate or buffer the negative effects of	Masten, A. S., & Garmezy, N. (1985). Risk, vulnerability, and protective factors in developmental psychopathology. In <i>Advances in clinical child psychology</i> (pp. 1-52). Springer US.

and psychological outcomes in at-risk children than would have been possible in their absence.	
Executive Function skills, which are a broader category of self-regulation skills, are associated with resilience among children	Masten, A. S. (2014). <i>Ordinary magic: Resilience in development</i> . New York, NY: Guilford.
who are at-risk, including children who are homeless or living in poverty.	Buckner, J.C., Mezzacappa, E., & Beardslee, W.R. (2009). Self-regulation and its relations to adaptive functioning in low income youths. <i>American Journal of Orthopsychiatry</i> , 79, 19-30.
Caregiving Practices	
Although childhood trauma and significant stress can have serious, lasting effects, there is hope. Children can and do recover with the support of responsive, caring and nurturing adult caregivers who are consistent and predictable, patient, emotionally and physically available and use positive discipline.	Child Welfare Information Gateway. (2014). Parenting a child who has experienced trauma. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.
The parent-child relationship is key to development and recovery from trauma. Parent's protection, nurturance and guidance speeds recovery and supports their child's coping when faced with stress and trauma.	Families and Trauma. (n.d.). Retrieved May 02, 2014, from http://www.nctsn.org/resources/topics/families-and-trauma
A child needs frequent face-to-face interactions, eye contact, physical proximity, touch and other primary sensory experiences such as smell, sound and taste to develop secure attachment.	Perry, B. D. (2000). Trauma and terror in childhood: The neuropsychiatric impact of childhood trauma. In I. Schulz, S. Carella & D.O. Brady (Eds.), Handbook of psychological injuries: Evaluation, treatment and compensable damages. Washington, DC: American Bar Association Publishing.

Research says that young children need spaces that are organized and structured. If things are out of place, some children may feel increased anxiety. For children who have had traumatic events or an unpredictable routine in their past, the stability of a well-thought-out and organized home environment provides comfort.	Appelstein, C. D. (1998). No such thing as a bad kid: Understanding and responding to the challenging behavior of troubled children and youth. Weston, MA: The Gifford School.
At birth, the infant is dependent on the caregiver for the maintenance of smooth routines that can help modulate physiological arousal states. The caregiver's role in helping the infant regulate distress becomes increasingly important between the ages of 3 and 6 months. Under optimal circumstances, the caregiver helps the infant maintain organization during periods of increased stimulation or tension.	Sroufe, L. A. (1996). Emotional development: The organization of emotional life in the early years. New York: Cambridge University Press.
The development of a feeling word vocabulary is considered to be of critical importance in a child's emotional development because it makes it possible for the child to better understand his or her emotional experiences. The ability to name a feeling allows children to discuss and reflect with others about their personal experiences.	Joseph, G., Strain, P., & Ostrosky, M. M. (2005). Fostering emotional literacy in young children: Labeling emotions. What Works Brief Series, #21. Nashville, TN: Center on the Social Emotional Foundations for Early Learning.
For children who have experienced trauma, warmth and affection serve as a key part of recovery and healing.	Twardosz, S. (2005). Expressing warmth and affection to children. What Works Brief Series, #20. Center on the Social and Emotional Foundations for Early Learning, University of Illinois, Urbana.
When you look at your children, play with	Perry, B. D. (2000). Trauma and terror in childhood: The neuropsychiatric impact of

them, hug them and love them, this builds attachment. Secure attachment is the backand-forth bond children form with a familiar person that keeps them safe.	childhood trauma. In I. Schulz, S. Carella & D.O. Brady (Eds.), Handbook of psychological injuries: Evaluation, treatment and compensable damages.  Washington, DC: American Bar Association Publishing.
When adults provide very predictable environments children's brains show less stress.	Fisher, P. A. (2001). Physical growth, cortisol, and neuropsychological functioning among maltreated preschoolers in the foster care system. Paper presented at the biennial meeting of the Society for Research in Child Development, Minneapolis, MN.
Caregivers who provide a very predictable environment have preschoolers who show more normative patterns of cortisol production.	Fisher, P. A. (2001). Physical growth, cortisol, and neuropsychological functioning among maltreated preschoolers in the foster care system. Paper presented at the biennial meeting of the Society for Research in Child Development, Minneapolis, MN.
Stability of caregiving and sensitive attunement appear pivotal to the development of early regulatory capabilities. Later sensitive care does not easily remediate early deficits in regulatory capabilities, although there is some evidence that extraordinary surrogate can help children develop their self-regulatory capabilities.	Fisher, P. A., Gunnar, M. R., Chamberlain, P., & Reid, J. B. (2000). Preventive intervention for maltreated preschoolers: Impact on children's behavior, neuroendocrine activity, and foster parent functioning. Journal of the American Academy of Child and Adolescent Psychiatry, 39, 1356–1364.
High-quality day-to-day caregiving is one of the few interventions that provides a reliable buffer against the effects of multiple risks and can have a role in the remediation of early behavioral, emotional, or developmental deficits.	Greenberg, M. (1999). Attachment and psychopathology in childhood. In J. Cassidy & P.R. Shaver (Eds.), Handbook of attachment: Theory, research, and clinical applications (pp. 469–496). New York: Guilford Press.
Adult Caregiver Resilience	
In order to take good care of your child, you must take good care of yourself. Honoring	Child Welfare Information Gateway. (2014). Parenting a child who has experienced trauma. Washington, DC: U.S. Department of Health and Human Services,

strengths, making time for doing things that bring joy and pleasure, and seeking support from others are key to supporting the physical, emotional and spiritual health of parents.	Children's Bureau.
How adults feel and act has strong influence on children. In order to promote strengths in children, adults need the skills to bounce back from their own daily stressors, risk and adversity.	Fleming, J., Mackrain, M. & LeBuffe, P. (2013). Caring for the caregiver: Promoting resilience of teachers. In S. Goldstein & R. Brooks (Eds.), Handbook of resilience in children. New York, NY: Spring-Verlag.
Parents' protection, nurturance and guidance speeds recovery and supports their child's coping when faced with risk and trauma. When parents are not available or struggling with their own reactions or problems, they may have trouble staying in tune with their children's reactions and responses to the traumatic experience.	Families and Trauma. (n.d.). Retrieved May 02, 2014, from http://www.nctsn.org/resources/topics/families-and-trauma
Statistical analysis shows that the DARS is a reliable and valid tool that can be used by adults to nurture their own personal strengths, thereby supporting resilience, the ability to bounce back from life challenges. Young children need responsible, loving care and adults who are able to care for themselves are better able to support the needs of children within their care.	Devereux Center for Resilient Children. (2009). Psychometric Support for the Devereux Adult Resilience Survey. Villanova, PA: Amanda Ball & Mary Mackrain.
"Numerous researchers have concluded that how parents respond to stressors is much	Parental Resilience. Retried from http://www.cssp.org/reform/strengthening-families

more important than the stressor itself in		
determining the outcomes for themselves and		
their children. Parents are more likely to		
achieve healthy, favorable outcomes if they		
are resilient."		