

From Risk to Resiliency: Fostering Resiliency in Kids -

Despite overwhelming adversity, many children successfully manage to bounce back and become healthy, productive adults. The foundation of health promotion and prevention is evidence-based risk and protective factor research. This workshop will discuss those factors that put children at risk, and those that promote resiliency.

What is prevention?

What are we preventing?

Current appropriate terms include:

drug _____ (in the case of illicit substances),

drug _____ (in the case of problematic use of legal drugs or prescription medications) and

_____ (in the case of substance use disorder).

Prevention Strategies-

1. Individual-level Strategies
2. Communication & Education
3. Policy Adoption
4. Enforcement
5. Environmental Change

Behavioral health refers to “a state of emotional/mental being and/or choices

and _____ that affect health and wellness”.

Interventions that occur prior to the onset of a disorder that are intended *to prevent or* _____ *risk for the disorder.*

- *Risk factors* are certain biological, psychological, family, community, or cultural characteristics that *precede and are associated with a higher likelihood of behavioral health problems.*
- *Protective factors* are characteristics at the individual, family, or community level that are associated with *a lower likelihood of problem outcomes.*

List risk factors that your program can reduce.

- 1.
- 2.
- 3.
- 4.
- 5.

List protective factors that your program can increase.

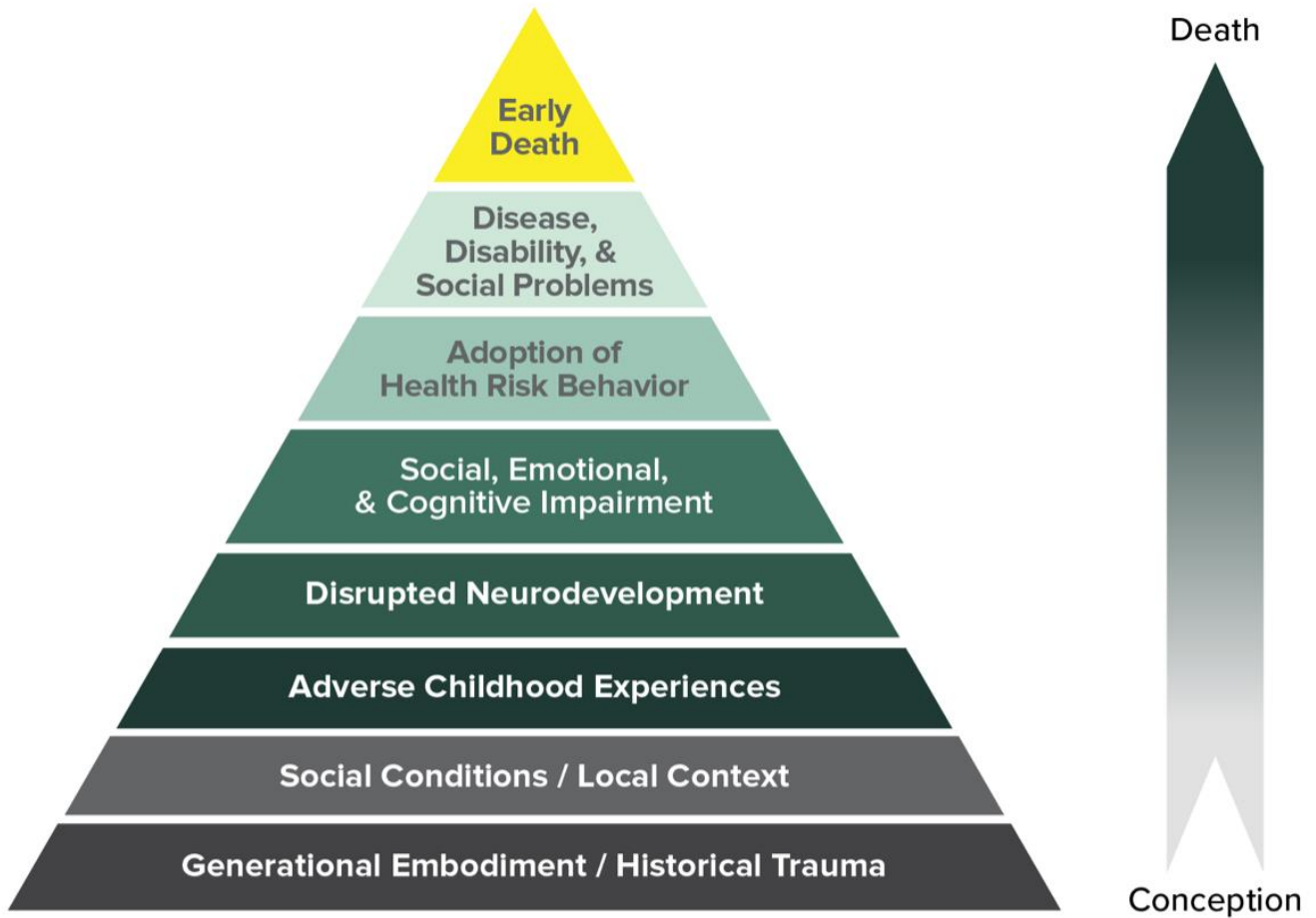
- 1.
- 2.
- 3.
- 4.
- 5.

Risk factors are conditions that increase the likelihood of a young person becoming involved in drug use, delinquency, school dropout, and/or violence

	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	Depression & Anxiety
Community	Low Neighborhood Attachment	✓	✓		✓	
	Perceived Availability of Drugs	✓			✓	
	Perceived Availability of Handguns		✓		✓	
	Community Laws and Norms Favorable Toward Drug Use, Firearms and Crime	✓	✓		✓	
Family	Family History of Antisocial Behavior	✓	✓	✓	✓	✓
	Poor Family Management	✓	✓	✓	✓	✓
	Family Conflict	✓	✓	✓	✓	✓
	Parental Attitudes Favorable Toward Drugs and Antisocial Behavior	✓	✓		✓	
School	Academic Failure	✓	✓	✓	✓	✓
	Low Commitment to School	✓	✓	✓	✓	
Peer / Individual	Rebelliousness	✓	✓	✓	✓	
	Gang Involvement	✓	✓		✓	
	Perceived Risk of Drug Use	✓	✓	✓	✓	
	Attitudes Favorable Toward Antisocial Behavior and Drug Use	✓	✓	✓	✓	
	Friend's Use of Drugs	✓	✓	✓	✓	
	Interaction with Antisocial Peers	✓	✓	✓	✓	
	Depressive Symptoms	✓				✓







McLeod, S. A. (2017). Maslow's hierarchy of needs. Retrieved from www.simplypsychology.org/maslow.html .



Mechanism by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

<https://www.cdc.gov/violenceprevention/childabuseandneglect/cestudy/resources.html> June 2020

RISK FACTORS Risk factors increase the likelihood young people will develop health and social problems.	DOMAIN	PROTECTIVE FACTORS Protective factors help buffer young people with high levels of risk factors from developing health and social problems.
<ul style="list-style-type: none"> ▪ Low community attachment ▪ Community disorganisation ▪ Community transitions and mobility ▪ Personal transitions and mobility ▪ Laws and norms favourable to drug use ▪ Perceived availability of drugs ▪ Economic disadvantage (not measured in youth survey) 		<ul style="list-style-type: none"> ▪ Opportunities for prosocial involvement in the community <ul style="list-style-type: none"> ▪ Recognition of prosocial involvement ▪ Exposure to evidence-based programs and strategies (some are measured in youth survey)
<ul style="list-style-type: none"> ▪ Poor family management and discipline <ul style="list-style-type: none"> ▪ Family conflict ▪ A family history of antisocial behaviour ▪ Favourable parental attitudes to the problem behaviour 		<ul style="list-style-type: none"> ▪ Attachment and bonding to family ▪ Opportunities for prosocial involvement in the family <ul style="list-style-type: none"> ▪ Recognition of prosocial involvement
<ul style="list-style-type: none"> ▪ Academic failure (low academic achievement) <ul style="list-style-type: none"> ▪ Low commitment to school ▪ Bullying 		<ul style="list-style-type: none"> ▪ Opportunities for prosocial involvement in school <ul style="list-style-type: none"> ▪ Recognition of prosocial involvement
<ul style="list-style-type: none"> ▪ Rebelliousness ▪ Early initiation of problem behaviour <ul style="list-style-type: none"> ▪ Impulsiveness ▪ Antisocial behaviour ▪ Favourable attitudes toward problem behaviour ▪ Interaction with friends involved in problem behaviour <ul style="list-style-type: none"> ▪ Sensation seeking ▪ Rewards for antisocial involvement 		<ul style="list-style-type: none"> ▪ Social skills ▪ Belief in the moral order <ul style="list-style-type: none"> ▪ Emotional control ▪ Interaction with prosocial peers

<https://www.communitiesthatcare.org.au/how-it-works/risk-and-protective-factors> June 2020

The 40 Developmental Assets are divided into ___ categories.

The categories of _____ assets are:

1. Support
2. Empowerment
3. Boundaries & Expectations
4. Constructive use of time

The categories of _____ assets are:

5. Commitment to learning
6. Positive Values
7. Social competencies
8. Positive identity

List ways you can build assets.

- 1.
- 2.
- 3.
- 4.
- 5.

Cultural competence implies having the _____ to function _____ as an individual, an organization, or a system within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities.

Cultural inclusion is the practice of _____ working to ensure the right of all of a community's diverse populations to _____ fully and equally in decision-making, policy development, and implementation of programs, policies and practices.

The Social Development Strategy includes _____, _____, and _____ .



*As a result of this training;
What have you learned?*

What will you do to improve your program?

Resources:

<https://preventiontrainingservices.com/wp/resources/>
<https://youthtoday.org/hub/youth-leadership/resources/>
<https://freechild.org/tools/>
<https://www.youthdoit.org/themes/meaningful-youth-participation/flower-of-participation/>
<https://www.youthpower.org/youth-drg-toolkit-3-models-integrating-youth>
<https://cssp.org/our-work/projects/protective-factors-framework/>
<http://www.layouth.com/stories-by-foster-youth-2/#support>

References:

Adverse Childhood Experiences (ACEs)

<https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html>

Centers for Disease Control and Prevention (2019). *Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

<https://www.cdc.gov/violenceprevention/pdf/preventingACES.pdf> June 2020

Risk & Protective Factors- National Research Council and Institute of Medicine. (2009). *Preventing mental, emotional, and behavioral disorders among young people: Progress and possibilities (O'Connell, M. E., Boat, T., & Warner, K. E., Eds.)* Washington, DC: National Academies Press.

Social Development Strategy <https://www.communitiesthatcare.org.au/how-it-works/social-development-strategy> March 2020

The Developmental Relationships Framework www.searchinstitute.org May 2020



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