Resilience in Children, Families, and Communities

Linking Context to Practice and Policy
Resilience in Children, Families, and Communities
Linking Context to Practice and Policy

Edited by

Ray DeV. Peters
Queen’s University
Kingston, Ontario

Bonnie Leadbeater
University of Victoria
Victoria, British Columbia

and

Robert J. McMahon
University of Washington
Seattle, Washington

Kluwer Academic / Plenum Publishers
New York, Boston, Dordrecht, London, Moscow

“The work presented... 32nd annual Banff International Conference on Behavioural Science held in Banff, Alberta, Canada in March 2000. The conference addressed the topic of resilience in children from cities and communities...” —Pref.

Includes bibliographical references and index.


HQ789.B376 2000
362.7—dc22
2004048556
This volume honors the research, resilience and wonderful humor of Emmy E. Werner
Contributors

Nancy H. Apfel, Yale University, New Haven, Connecticut
Michael W. Arthur, University of Washington, Seattle, Washington
Dan Dodgen, Substance Abuse and Mental Health Services Administration Rockville, Maryland
Renita R. Glaser, University of Washington, Seattle, Washington
Deborah Gorman-Smith, University of Illinois, Chicago, Illinois
J. David Hawkins, University of Washington, Seattle, Washington
David Henry, University of Illinois, Chicago, Illinois
Marianne Key-Carniak, Oakland University, Rochester, Michigan
Bonnie Leadbetter, University of Victoria, Victoria, British Columbia, Canada
Ann S. Masten, University of Minnesota, Minneapolis, Minnesota
Kenneth I. Maton, University of Maryland Baltimore County, Baltimore, Maryland
Francesca Pernice-Duca, Michigan State University, East Lansing, Michigan
Ray DeV. Peters, Queen’s University, Kingston, Ontario, Canada
Jennifer R. Riley, University of Minnesota, Minneapolis, Minnesota
Cynthia J. Schellenbach, Oakland University, Rochester, Michigan
Katreena Scott, OISE/University of Toronto, Toronto, Ontario, Canada
Victoria Seitz, Yale University, New Haven, Connecticut
Andrea Solarz, Consultant, Arlington, Virginia
Laura-Lynn Stewart, OISE/University of Toronto, Toronto, Ontario, Canada
Kathleen Strader, Healthy Families America Midwest Regional Resource Center, Pontiac, Michigan
Patrick Tolan, University of Illinois, Chicago, Illinois
Richard E. Tremblay, University of Montréal, Montréal, Quebec, Canada
Emmy E. Werner, University of California, Davis, California
David Wolfe, University of Western Ontario, London, Ontario, Canada
Preface

This volume honors the work of Emmy Werner, one of the leading researchers in defining the field of resilience in human development. Her research has examined resilience within the social context of adversity in a longitudinal study of a large sample of Kauai children from birth through age 40 disadvantaged by poverty and minority status. This landmark study has had a strong impact on resiliency research since it began in 1955 and it is a pleasure to dedicate this volume to Emmy and her long and productive career in resilience research.

The work presented in this volume was first discussed at the 32nd Annual Banff International Conference on Behavioural Science held in Banff, Alberta, Canada in March, 2000. That conference addressed the topic of resilience in children from cities and communities, and the chapters in this volume expand the discussions at that conference.

Within the past 10 years, there has been growing interest in the psychological construct of resilience. Spurred by the research of Emmy Werner, Norman Garmezy, and Michael Rutter in the early 1970's in which many children in high-risk environments were found to show normal development, scholarly interest in resilience expanded rapidly through the 1990's.

Resilience refers to “a dynamic process encompassing positive adaptation within the context of significant adversity. Implicit within this notion are two critical conditions: (1) exposure to significant threat or severe adversity; and (2) the achievement of positive adaptation despite major insults on the developmental process” (Luthar, Cicchetti, & Becker, 2000, p. 543; see Roberts & Masten, Chapter 2; Werner, Chapter 1).

The early research on childhood resilience was rooted in the fields of developmental psychopathology, abnormal psychology and mental health, and focused primarily on identifying protective factors in children showing adaptive functioning under a host of adverse conditions
including schizophrenic parents, socioeconomic disadvantage, maltreatment, urban poverty, community violence and catastrophic life events. Also, the early research efforts focused primarily on identifying the personal characteristics of resilient children that differentiated them from children who evidenced less adaptive functioning in similar adverse environments. Subsequent research, however, indicated that resilience in children also may be strongly related to factors external to the child, including parent and family influences as well as characteristics of their wider social environments such as their local neighborhoods and schools (Werner, Chapter 1).

Most recently, research on resilience has expanded on several fronts. There is increased interest in research which moves beyond merely identifying protective factors to an attempt to understand why and how protective factors influence adaptive development; i.e., the processes and underlying mechanisms of resilience.

A second development has been to expand the concept of resilience from characteristics of individuals, to characteristics of groups of individuals, particularly families, peer groups and neighborhoods. This notion goes beyond the above-mentioned recognition that families, groups and neighborhoods provide important sources of protection for individual children. Rather, it applies the concept of resilience to families and other social groups by, for example, studying resilience in families. What factors and processes differentiate well adapting families from those who show poor adaptive functioning under comparably high levels of stress, adversity or risk?

A final expansion of resilience research is concerned with applying the findings of previous work to the development and evaluation of intervention strategies and social policies that are designed to promote and strengthen resilience in children, in families and in broader social groups. This is the main topic of the present volume.

We have assembled a group of resilience researchers from across North America who discuss both conceptual and practical challenges arising from attempts to apply the theoretical construct of resilience, along with existing empirical resilience findings, to the formulation of intervention strategies and social policies.

The volume is organized into three sections. Section I focuses on defining the scope and limits of resilience, Section II focuses on programs directed at supporting resilience in families, and Section III focuses on programs that are directed at neighborhoods and communities.

Section I consists of four chapters describing various approaches to the definition and study of resilience, and the challenges of extending empirical findings to intervention programs, emphasizing the importance of context in resilience-enhancing interventions. In Chapter One,
Preface

Preface xi

an introduction to the volume, Werner describes the history of resilience research and outlines future challenges to the field. In Chapter Two, Roberts and Masten set the conceptual framework for the volume by discussing the importance of context in resilience research and important challenges in attempting to link a contextual resilience framework to intervention efforts. Following this is a chapter by Tremblay, in which he questions the relevance of the concept of resilience in light of findings from empirical studies on the development of physical aggression in very young children. He discusses the implications of those findings for social learning theories of social development, describes the long-term results of the Montreal Prevention Experiment and argues for the importance of intervening very early with young boys who are at high risk for later conduct problems. In Chapter Four, Leadbeater, Dodgen and Solarz discuss the concept of resilience in terms of the paradigm shift that has occurred in research, practice and policy on a range of social problems. They describe how a resilience framework fosters attention on specific risk and protective factors rather than general population factors, emphasizes competence rather than deficiency, focuses on long-term adaptation rather than immediate outcomes, and emphasizes an ecological view of human adaptation rather than limiting analyses to individual characteristics. The chapter concludes with a discussion of the important role public policy needs to play in supporting this paradigm shift.

Section II begins the discussion of resilience-based intervention programs. The three chapters in this section describe resilience enhancement programs for high-risk women, children and youth. In Chapter Five, Seitz and Apfel describe a comprehensive competence enhancement program for pregnant teenagers, and also the results of an 18-year longitudinal follow-up study of short-term and long-term benefits to teen mothers and their children. In Chapter Six, Scott, Stewart and Wolfe present an analysis of teen dating violence in high-risk adolescents, in this case youth who have histories of abuse. They describe the procedures and outcome results of a program that has been operating for over 10 years to prevent abuse and promote positive teen dating relationships. They present an analysis of factors that appear to differentiate resilient from non-resilient youth in these relationships. In Chapter Seven, Schellenbach, Strader, Pernice-Duca, and Key-Carniak apply a developmental-ecological framework to a strengths-based resilience model, utilizing individual, family and community levels of analyses of resilience factors in adolescent mothers. The chapter concludes with a description of a community-based prevention program for adolescent mothers and their children, discussing the implication of this work for social policy and system change.
Section III consists of four chapters, all of which describe the expansion of resilience concepts and practice to include neighborhoods and communities. In Chapter Eight, Maton expands the ecological approach to resilience intervention to include broader cultural and societal factors. He describes a framework to guide intervention efforts for enhancing children’s resilience at each level of ecological influence. In their chapter on promoting resilience in inner city children, families and neighborhoods, Gorman-Smith, Tolan, and Henry describe a developmental-ecological framework, apply this ecological framework to an analysis of inner-city children, families and neighborhoods, and discuss the implications of this analysis for understanding resilience and intervention efforts in this particular high-risk context. In Chapter Ten, Peters examines the value of high-risk vs. universal interventions for resilience enhancement. He then continues the discussion of neighborhood resilience as an important part of the conceptual basis for a multi-site intervention project for young children and their families living in eight disadvantaged neighborhoods throughout the Canadian province of Ontario. In Chapter Eleven, Arthur, Glaser, and Hawkins expand the focus on resilient communities by reporting the results from a large-scale study concerning factors that are associated with the degree to which communities adopt science-based prevention and promotion interventions for high-risk adolescents.

This volume constitutes a leading-edge analysis and description of the current status of the concept of resilience in human development; expands the concept to families, communities, and society; presents a variety of well-developed interventions for children and youth from the prenatal period to early adulthood; and outlines the implications of this work for public policy.
The Banff Conferences on Behavioural Science

This volume is one of a continuing series of publications sponsored by the Banff International Conferences on Behavioural Science. We are pleased to join Kluwer Academic/Plenum Press in bringing this volume to an audience of practitioners, investigators, and students. The publications arise from conferences held each spring since 1969 in Banff, Alberta, Canada, with papers representing the product of deliberations on themes and key issues. The conferences bring together outstanding behavioral scientists and professionals in a forum where they can present and discuss data related to emergent issues and topics. As a continuing event, the Banff International Conferences have served as an expressive ‘early indicator’ of the developing nature and composition of the behavioral sciences and scientific applications to human problems and issues.

Because distance, schedules, and restricted audience preclude wide attendance at the conferences, the resulting publications have equal status with the conferences proper. Presenters at the 32nd Banff Conference wrote a chapter specifically for the present volume, separate from his or her presentation and discussion at the conference itself. Consequently, this volume is not a set of conference proceedings. Rather, it is an integrated volume of chapters contributed by leading researchers and practitioners who have had the unique opportunity of spending several days together presenting and discussing ideas prior to preparing their chapters.

Our ‘conference of colleagues’ format provides for formal and informal interactions among all participants through invited addresses, workshops, poster presentations, and conversation hours. When combined with sightseeing expeditions, cross country and downhill skiing, and other recreational activities in the spectacular Canadian Rockies,
the conferences have generated great enthusiasm and satisfaction among participants. The Banff Centre, our venue for the Conferences for more than 30 years, has contributed immeasurably to the success of these meetings through its very comfortable accommodation, dining, and conference facilities. The following documents conference themes over the past 36 years.

<table>
<thead>
<tr>
<th>Year</th>
<th>Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>1969</td>
<td>I Ideal Mental Health Services</td>
</tr>
<tr>
<td>1970</td>
<td>II Services and Programs for Exceptional Children and Youth</td>
</tr>
<tr>
<td>1971</td>
<td>III Implementing Behavioural Programs for Schools and Clinics</td>
</tr>
<tr>
<td>1972</td>
<td>IV Behaviour Change: Methodology, Concepts, and Practice</td>
</tr>
<tr>
<td>1973</td>
<td>V Evaluation of Behavioural Programs in Community, Residential, and School Settings</td>
</tr>
<tr>
<td>1974</td>
<td>VI Behaviour Modification and Families and Behavioural Approaches to Parenting</td>
</tr>
<tr>
<td>1975</td>
<td>VII The Behavioural Management of Anxiety, Depression, and Pain</td>
</tr>
<tr>
<td>1976</td>
<td>VIII Behavioural Self-Management Strategies, Techniques, and Outcomes</td>
</tr>
<tr>
<td>1977</td>
<td>IX Behavioural Systems for the Developmentally Disabled A. School and Family Environments B. Institutional, Clinical, and Community Environments</td>
</tr>
<tr>
<td>1978</td>
<td>X Behavioural Medicine: Changing Health Lifestyles</td>
</tr>
<tr>
<td>1979</td>
<td>XI Violent Behaviour: Social Learning Approaches to Prediction, Management, and Treatment</td>
</tr>
<tr>
<td>1980</td>
<td>XII Adherence, Compliance, and Generalization in Behavioural Medicine</td>
</tr>
<tr>
<td>1981</td>
<td>XIII Essentials of Behavioural Treatments for Families</td>
</tr>
<tr>
<td>1982</td>
<td>XIV Advances in Clinical Behaviour Therapy</td>
</tr>
<tr>
<td>1983</td>
<td>XV Childhood Disorders: Behavioural-Developmental Approaches</td>
</tr>
<tr>
<td>1984</td>
<td>XVI Education in ‘1984’: Celebrating the 80th Birthday of B. F. Skinner</td>
</tr>
<tr>
<td>1985</td>
<td>XVII Social Learning and Systems Approaches to Marriage and the Family</td>
</tr>
<tr>
<td>1986</td>
<td>XVIII Health Enhancement, Disease Prevention, and Early Intervention: Biobehavioural Perspectives</td>
</tr>
<tr>
<td>1987</td>
<td>XIX Early Intervention in the Coming Decade</td>
</tr>
</tbody>
</table>
1989  XXI  Psychology, Sport, and Health Promotion
1990  XXII  Aggression and Violence Throughout the Lifespan
1991  XXIII  Addictive Behaviours Across the Lifespan: Prevention, Treatment, and Policy Issues
1992  XXIV  State of the Art in Cognitive/Behaviour Therapy
1993  XXV  Anxiety and Depression in Adults and Children
1994  XXVI  Prevention and Early Intervention: Child Disorders, Substance Abuse, and Delinquency
1995  XXVII  Child Abuse: New Directions in Prevention and Treatment Across the Lifespan
1996  XXVIII  Best Practice: Developing and Promoting Empirically Validated Interventions
1997  XXIX  Stress: Vulnerability and Resilience
1998  XXX  Children of Disordered Parents
1999  XXXI  Suicide: Prediction, Prevention, and Intervention
2000  XXXII  Resilience: Children, Families, and Communities
2001  XXXIII  Emotional Self-Regulation: Development, Successes, and Failures
2002  XXXIV  Adolescent Substance Abuse: Innovative Approaches to Prevention and Treatment
2003  XXXV  Early Childhood Development: From Research to Policy and Practice
2004  XXXVI  Terrifying Experiences: Resilience and Vulnerability to Psychological Trauma

We would like to acknowledge the expert guidance and support that we received from Siiri Lelumee and Anna Tobias at Kluwer Academic/Plenum Press. It has been a pleasure working with them. Also we would like to thank Meghan Provost and Gail Irving for the excellent assistance in preparing the manuscript. Special thanks to our colleague on the Planning Committee, Dr. Ken Craig. While preparing this volume, Ray Peters was on the faculty at Queen’s University, Bonnie Leadbeater at the University of Victoria, and Bob McMahon at the University of Washington.

Ray DeV. Peters
Bonnie Leadbeater
Robert J. McMahon
Contents

I. THE CONCEPTUAL AND EMPIRICAL FRAMEWORK FOR LINKING RESILIENCE TO INTERVENTION AND POLICY ....... 1

1. Resilience Research: Past, Present, and Future ............. 3
   Emmy E. Werner

2. Resilience in Context ............................................. 13
   Jennifer R. Riley & Ann S. Masten

3. Disruptive Behaviors: Should We Foster or Prevent Resiliency? 27
   Richard E. Tremblay

   Bonnie Leadbeater, Dan Dodgen, & Andrea Solarz

II. RESILIENCE ENHANCEMENT PROGRAMS FOR HIGH-RISK CHILDREN, FAMILIES, AND YOUTH ...................... 63

5. Creating Effective School-Based Interventions for Pregnant Teenagers ........................................... 65
   Victoria Seitz & Nancy H. Apfel

   Katreena Scott, Laura-Lynn Stewart, & David Wolfe

7. Building Strengths and Resilience among At-Risk Mothers and Their Children: A Community-Based Prevention Partnership 101
   Cynthia J. Schellenbach, Kathleen Strader, Francesca Pernice-Duca, & Marianne Key-Carniak
III. EXPANDING RESILIENCE PROGRAMS TO INCLUDE NEIGHBORHOODS AND COMMUNITIES ....................... 117

8. The Social Transformation of Environments and the Promotion of Resilience in Children ............................. 119
   Kenneth I. Maton

   Deborah Gorman-Smith, Patrick Tolan, & David Henry

10. A Community-Based Approach to Promoting Resilience in Young Children, Their Families, and Their Neighborhoods . . 157
    Ray DeV. Peters

11. Steps Toward Community-Level Resilience: Community Adoption of Science-Based Prevention Programming ............. 177
    Michael W. Arthur, Renita R. Glaser, & J. David Hawkins

Index .......................... 195
PART I

The Conceptual and Empirical Framework for Linking Resilience to Intervention and Policy
CHAPTER 1

Resilience Research

Past, Present, and Future

EMMY E. WERNER

The contributions in this volume bring back fond memories of the 32nd International Conference on Behavioural Science held in Banff, Canada in March 2000 at which I received an unusual award: a sweater for the most hapless skier among the participants. I must confess, I actually can’t ski at all, but the two path diagrams that I presented at the close of that meeting looked as if I darted back and forth in deep snow, surrounded by tree stumps and goal posts, yearning to reach a place of rest. My intent had been to illustrate the complex chain of protective factors, linked across time, that enabled most of the females and males in our 40-year longitudinal study on the island of Kauai to overcome the adversities they had encountered in their formative years. My husband, who thought they represented my erratic driving record, suggested I put them discreetly in the Appendix of our most recent book, *Journeys from Childhood to Midlife: Risk, Resilience, and Recovery* (Werner & Smith, 2001).

In the mid-1950’s when our study began, behavioral scientists had tended toward a more simplistic account of the impact of biological and psychosocial risk factors on the development of children by reconstructing the history of individuals who had failed in school, become delinquents or criminals, or suffered from serious mental health problems. This retrospective approach had created the impression that a poor developmental outcome is inevitable if a child is exposed to perinatal trauma, poverty, parental psychopathology, or chronic family discord, since it examined only the lives of the “casualties,” not the lives of the successful “survivors.”
During the last two decades of the twentieth century, our perspective changed (Garmezy & Rutter, 1983). Prospective longitudinal studies in North America and Europe have now followed individuals from childhood to adulthood and have fairly consistently shown that even among children exposed to multiple stressors, only a minority develop serious emotional disturbance or persistent behavior problems. Today, many behavioral scientists who study children who grow up in high-risk conditions have shifted their focus from negative developmental outcomes to the study of individuals who have made a successful adaptation to life. Hence there is now a growing body of research—as illustrated in this volume—that deals with the phenomenon of resilience—the dynamic process that leads to positive adaptation within the context of significant adversity (Luthar, 2003; Luthar, Cicchetti, & Becker, 2000).

A lively debate has begun over conceptual and methodological issues centering on whether resilience is a state or trait, whether successful coping in the face of adversity is domain-specific, and on the challenge of linking the construct of resilience to effective models of intervention (see Roberts & Masten, Chapter 2; Rutter, 2000; Tremblay, Chapter 3). Methodological issues that have confronted researchers who study the buffering process of protective factors in the lives of such individuals include: (1) the selection of age-appropriate measures of adaptation; (2) the need to use multiple criteria to determine successful outcome; (3) the need for low-risk comparison groups; and (4) the need to observe individuals at multiple measurement points in time.

Just as risk factors and childhood stressors may co-occur within a particular population in a particular developmental period, protective factors are also likely to occur together to some degree (Gore & Eckenrode, 1994). Protective factors not only contribute to individual differences in response to adversity at any given point in time, but the presence of certain protective factors also determines the likelihood of emergence of others at some later point in time. The task of delineating such interconnections should become an important agenda in intervention programs, like the ones described in Sections II and III in this book.

Our current understanding of the roots of resilience comes from about a dozen longitudinal studies in North America and Europe. They include Asian-American, African-American and Caucasian children who have been exposed to a variety of psychosocial risk factors, such as chronic poverty, parental mental illness and substance abuse, divorce, chronic family discord, and child abuse. Most of these studies have focused on school-age children; investigations that began in infancy and preschool are still quite rare, and so are studies that have followed high-risk children into adulthood. (For a detailed review of their methodology and findings, see Werner, 2000).
Despite the heterogeneity of these studies, one can discern a common core of individual dispositions and sources of support that contribute to resilience in individual development and that have been replicated independently in two or more longitudinal studies in different contexts. These protective buffers appear to make a more significant impact on the life course of children who grew up in adversity than do specific risk factors or stressful life events, and transcend ethnic, social class and geographic boundaries.

Good health; an easygoing, engaging temperament; intellectual and scholastic competence; an internal locus of control; a positive self-concept; the ability to plan ahead; and a strong religious faith or sense of coherence were among the protective factors that made it possible for many children and young people to overcome adversity in their lives. So were the role model of a competent mother who was sensitive to the needs of her child; affectionate bonds with alternate caregivers—such as grandparents, older siblings, teachers, and elder mentors—and an external support system in the neighborhood, church, youth groups or school that rewarded competence.

Among the handful of prospective studies that have first reported these findings is the Kauai Longitudinal Study, which has monitored the impact of a variety of biological and psychosocial risk factors, stressful life events, and protective factors on a multi-racial cohort of children, born in 1955 on the Hawaiian island of Kauai, the westernmost county of the USA. Our investigation documented the course of all pregnancies and their outcomes in the entire island community and assessed the effects of multiple risk factors, such as poverty, perinatal trauma, parental psychopathology, and adverse child-rearing conditions on the development and adaptation of some 500 individuals at ages 1, 2, 10, 18, 32, and 40 years (Werner, 2002).

Many of the protective factors that contributed to resilience among those exposed to multiple risk factors were also beneficial to those who lived in more favorable environments, but they did have a stronger predictive power for positive developmental outcomes among individuals especially challenged by childhood adversity (see Peters, Chapter 10).

Since we collected data at multiple time periods on the children, their families, and the community in which they lived, we were able to trace, in a number of path models, patterns of temporal relationships that illustrate the complexity of the phenomenon of resilience. They show the direct and indirect links between protective factors within the individual and outside sources of support in the formative years of life and how these variables, in turn, relate to positive developmental outcomes in adulthood (Werner & Smith, 1989, 1992, 2001).
When we examined these links, we noted that individuals who made a successful adaptation in adulthood in the context of significant adversity had relied on sources of support within their family and community that increased their competencies and efficacy, decreased the number of stressful life events they subsequently encountered and opened up new opportunities for them. The lessons we learned from an examination of the process that linked these protective buffers over time were twofold: first, the extraordinary importance of the early childhood years in laying the foundation for resilience, and second, the possibilities for recovery at later stages in development that were available to most individuals who seized a variety of opportunities offered to them in their community.

Individual dispositions and competencies were strongly related to the number of stressful life events encountered and reported by the men and women in this cohort. Children who had displayed a greater amount of autonomy and social maturity at age 2 reported fewer stressful life events by age 10. Individuals with higher scholastic competence at age 10 reported fewer stressful life events in adolescence. Men and women who displayed a higher degree of self-efficacy and planfulness in their teens reported fewer stressful life events in their thirties and forties—even though they had grown up in poverty and under adverse rearing conditions.

Many of the individuals who managed to successfully “beat the odds” sought out people and opportunities that led to positive turnarounds in their lives. They selected or constructed environments that, in turn, reinforced their active, outgoing dispositions and rewarded their competencies. In many ways, they made their own environments, picked their own niches (Scarr, 1992).

We noted, however, that protective factors within the individual (an “engaging” temperament, scholastic competence, an internal locus of control, and self-esteem) tended to make a greater impact on the quality of adult adaptation for females than for males who successfully coped with adversity in their lives. In contrast, outside sources of support in the family and community tended to make a greater difference in the lives of the men who “beat the odds.” These gender differences need to be systematically explored in intervention programs designed to enhance competence and self-efficacy and to provide emotional support.

Several turning points led to shifts in life trajectories during the third and fourth decade of life among the men and women in our cohort. They also have been noted in other longitudinal studies that have followed children and adolescents into adulthood in the United States and Great Britain (Rutter, 1996). These positive changes took place after they
left high school, mostly without the benefit of planned intervention by professional “experts.”

Among the most potent forces for positive changes for high-risk youth who had a record of delinquency and/or mental health problems in adolescence, and for teenage mothers, were continuing education at community colleges; educational and vocational skills acquired during voluntary service in the Armed Forces; marriage to a stable partner; conversion to a religion that required active participation in a “community of faith”; recovery from a life-threatening illness or accident that required a lengthy hospitalization; and occasionally, psychotherapy.

We also noted that the “troubled” teenagers who made use of opportunities that opened up for them in their twenties and thirties, and whose life trajectories subsequently took a positive turn, differed in significant ways from those who did not. They were more active and sociable, had been rated as more affectionate and less anxious by parents and teachers in middle childhood, possessed better problem-solving and reading skills, and had been exposed to more positive interactions with their primary caregivers in infancy and early childhood than youths whose coping problems persisted into mid-life.

In sum: Throughout our study, there were large individual differences among “high-risk” individuals in their responses to adversity as well as to the opening up of opportunities. The very fact of individual variation in coping skills among the men and women who live in adverse conditions suggests that educational, rehabilitation, or therapeutic programs designed to improve their lives will have variable effects, depending on the dispositions and competencies of the participants. This is an issue that needs to be carefully addressed in the intervention programs described in the following chapters.

Many “second generation” studies of prevention and intervention now under way in North America represent efforts to learn from deliberate attempts to alter the course of development of so-called “high-risk” children and youth in a positive direction (Luthar, 2003; Masten & Coatsworth, 1998). In the United States, unfortunately, these efforts, though commendable, tend to take place in a social policy vacuum, for unlike the countries of the European Union, the federal government has not yet made any major commitments to universal policies that benefit children and families.

Even Head Start, the only nationwide program for young children and families who live in poverty in the USA and among the First Nations of Canada, reaches only a minority of those who are eligible. We really still do not know how selection effects (who gets in, who gets left out among those who are eligible) ultimately influence the reported outcomes for this program. I make this point not to discourage any of the