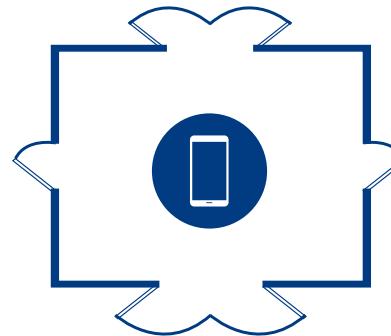




Youth Engagement Blueprint Series: Using Science and Technology Effectively



What is Youth Engagement?

Youth engagement is the intentional, authentic, and sustained involvement of young people in a decision-making activity (Gaughen et al., 2009). “Using Science and Technology Effectively” is the second in a series of four factsheets that will provide practical advice for increasing capacity for youth engagement at the organizational level.

How Are Science and Technology Linked to Normalcy and Trauma-Responsive Care?

In recent years, research has emerged on adolescent brain development, trauma-responsive care, and the importance of normalcy on the well-being of young people. As a result, child welfare workers should be equipped to understand the biological effects of trauma and high levels of toxic stress on young people who were abused or neglected as children (Office of Planning, Research and Evaluation [OPRE], 2015), and to craft programs and policies aligned with the principles of trauma-responsive and developmentally supportive care. This research can also inform the ways in which organizations think about normalcy and the use of mobile technology and social media in designing effective programs for young people in foster care. Providing opportunities for normalcy—which includes the use of mobile technology and social media—can effectively engage youth and offer them more opportunities to build essential social networks that can improve outcomes in adulthood.

Trauma results from an event or series of events experienced by an individual as physically or emotionally harmful or life threatening, and has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014). Trauma “overwhelms the child’s ability to cope and causes feelings of fear, helplessness, or horror, which may be expressed by disorganized or agitated behavior” (National Child Traumatic Stress Network [NCTSN], 2011). Current research shows that children who experience early trauma may face significant problems in their teen years, including anxiety, aggression, depression, and academic impairment (LaLiberte & Crudo, 2013). A nationwide sample of over 2,200 children in child welfare found that more than 70 percent met the exposure criteria for complex trauma (Gleeson, et al., 2011, as cited in LaLiberte & Crudo, 2013).

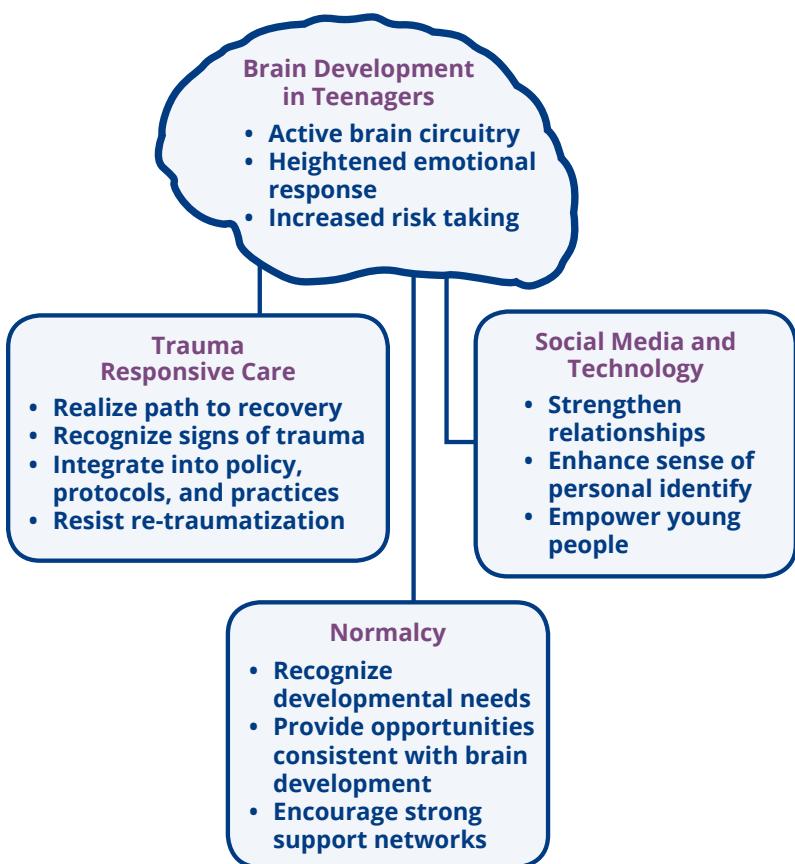
Though a recent study indicates that adverse childhood experiences (ACEs) have a significant effect on adult outcomes (Center for Disease Control and Prevention's ongoing ACE Study), research also indicates that the teenage brain is undergoing a critical period of development that provides an opportunity for intervention (Perry, 2006). Thus, the evidence shows that with trauma-responsive care, access to support networks, and normative experiences, the effect of ACEs can be mitigated during adolescence (OPRE, 2015).

Normalcy means allowing young people in foster care to have experiences similar to peers who are not in foster care, such as allowing them the freedom to take risks and have new and independent experiences (Capacity Building Center for States, 2016). The Preventing Sex Trafficking and Safe Families Act (P.L. 113-183), enacted in 2014, includes the "reasonable and prudent parent standard," which requires State child welfare agencies to allow caregivers to determine whether particular activities are developmentally appropriate for a young person. This provision offers enormous potential to help provide normalcy for young people in foster care. Normative activities offer young people opportunities for enhanced social engagement and network building, two essential components of identity development; such activities also create a sense of belonging, which further combats the negative effects of trauma (Perry, 2006).

Access to mobile and other technology is an important part of normalcy. Research shows that by 2009, 93 percent of all U.S. teenagers between the ages of 12 and 17 were online (LaLiberte & Snyder, 2011). Further, Pew Internet Research data for 2013 found that 78 percent of all young people had mobile phones and 47 percent had smartphones. One recent study reported that having access to a smartphone gave young people in foster care the opportunity to feel like other teenagers—an important normalcy goal (Denby-Brinson, et. al., 2015).

Brain Development in Teenagers:

- During the teen years, brain circuitry related to emotional responses is particularly active, and teenagers are likely to have substantially heightened emotional responses relative to younger children and adults (National Institute of Mental Health, 2011). It is also during this time that additional interventions can be most effective (OPRE, 2015).
- As a result, most teens have a tendency to act impulsively at times; in fact, increased risk taking is part of the normal teenage experience (Child Welfare Information Gateway, 2015). With this in mind, caregivers should assume responsibility for monitoring and facilitating peer relationships and other normative activities in a way that best supports self-regulation development in teens, in the larger context of greater risk tolerance (OPRE 2015).



Normalcy

- Child welfare organizations should recognize the developmental needs of teens and work to build organizational capacity for normalcy, including leadership opportunities, in a manner consistent with the science of brain development.
- An important part of developmental normalcy for young adults involves continued strong engagement in support networks—biological, foster care, and peer networks—which can help significantly reduce the level of psychological distress experienced by young adults in foster care (Perry, 2006).

Trauma-Responsive Care

- A program or organization practicing trauma-responsive care: realizes the effect of trauma and understands potential paths to recovery; recognizes the signs and symptoms of trauma in young people and families; integrates knowledge about trauma into policies, protocols, and practices; and actively resists re-traumatization (SAMHSA, 2014).

Social Media and Technology

- When used properly, and with buy-in from caregivers and caseworkers, access to the Internet and mobile devices helps young people in foster care establish and strengthen meaningful, healthful relationships, enhance a sense of personal identity, and feel empowered.

How to Build Organizational Capacity for Integrating Science and Technology into Policy and Practice

Capacity describes the potential of a child welfare system to be productive and effective by applying its human and organizational assets to identify and achieve its goals.

Building organizational capacity for using science and technology effectively encompasses all five dimensions of capacity building: (1) **resources**; (2) **infrastructure**; (3) **knowledge and skills**; (4) **culture and climate**; and (5) **engagement and partnership** (Capacity Building Center for States, 2016).

Building Capacity for Biological Understanding of Trauma and Trauma-Responsive Care

- **Resources:** Provide ongoing training and coaching for caregivers and staff regarding the latest developments in trauma-informed and trauma-responsive care for young people, as well as the latest developments in brain science and the biological effects of trauma.
- **Infrastructure:** Institute policies and protocols that establish a trauma-responsive approach to care as part of the organizational mission at the micro and macro levels.

ADDITIONAL RESOURCES

- [White House Convening on Developmentally Appropriate Services for Children, Youth, and Young Adults in Foster Care](#)
- [Child Welfare Information Gateway: Normalcy for Youth in Foster Care](#)
- [Child Welfare Information Gateway: Trauma-informed Practice](#)
- [Trauma-Informed Child Welfare Practice Toolkit](#)
- [SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach](#)
- [NCTSN Child Welfare Trauma Training Toolkit](#)

- **Knowledge and skills:** Focus on an integrated approach to trauma-responsive care in six key areas: safety; transparency; peer support; collaboration, empowerment; and cultural, historical, and gender issues. Explore these areas through team building experiences focused on trauma-informed care (SAMHSA, 2014). See the “Additional Resources” sidebar for more information.
- **Culture and climate:** Create a culture of mutual trust that encourages young people with lived experience of trauma to have a meaningful voice in the organization.
- **Engagement and partnership:** Learn from agencies and organizations that have established successful programs for trauma-responsive care.

Building Capacity for Normalcy and Developmentally Appropriate Care

- **Resources:** Work with caregivers to ensure they understand normalcy and its relationship to providing appropriate experiences for young people in their care. Help foster parents better engage young people in making decisions about their own lives.
- **Infrastructure:** Engage young people in governance and policy creation in areas that concern them, especially areas that relate to delineating developmentally appropriate activities and evaluating outcomes related to normalcy. Encourage young people to take part in potential leadership opportunities, such as student government, sports, etc. In addition, work to design policies with the underlying understanding of young peoples’ developmental stages and need for normalcy, while recognizing that this process will require a higher level of risk tolerance.
- **Knowledge and skills:** Acknowledge that young people are experts in their own care when it comes to normalcy. Empower them to share their perspectives and advocate for themselves by regularly seeking their input, and engage them in regular conversations about normalcy.
- **Culture and climate:** Recognize that creating a culture of normalcy is a complex endeavor with many different stakeholders. Be prepared to facilitate stakeholder conversations to agree on terms and to resolve any disagreements. Organizations should understand that young people in foster care need to build social networks and healthful relationships, and must be allowed opportunities to do so depending on their developmental stage.
- **Engagement and partnership:** Partner with community organizations and businesses to provide mentorship and professional opportunities for young people in foster care.

Building Capacity for Effective Technology Use

- **Resources:** Seek funding to make sure that young people in foster care have access to mobile technology and the Internet.
- **Infrastructure:** Involve young people in foster care in decision-making related to the use of mobile technology and social media. Research shows this creates buy-in for organizational programming in this area when organizations understand how technology and social media is being used by young people and provide opportunities for its use.
- **Knowledge and skills:** Educate young people in effective and healthy electronic communication. Educate caregivers and others about how to use technology and social media to engage with young people.

- **Culture and climate:** Meet young people in their comfort zone with technology and social media by supporting a culture of openness to technological change. Embrace the use of mobile technology and social media to stay in touch and communicate with young people in foster care, and encourage young people to create and maintain healthful connections using social media and mobile technology
- **Engagement and partnership:** Partner with educational institutions and young people in foster care to collect data and conduct research on the types and outcomes of technology use among young people, as more information generally leads to better understanding and outcomes. Use technological advances to create platforms (apps) to better serve youth in care.

References

- Capacity Building Center for States. (2016). *The Child Welfare Capacity Building Collaborative, Brief #1: Child Welfare Organizational Capacities*. Retrieved from <https://library.childwelfare.gov/cwig/ws/library/docs/capacity/Blob/101166.pdf?w=NATIVE%28%27BASIC+ph+is+%27%27child+welfare+capacity+building+collaborative+brief%27%27%27%29&upp=0&order=native%28%27year%2FDescent%27%29&rpp=25&r=1&m=1>.
- Capacity Building Center for States. (2016). *Having the Normalcy Conversation: A Guide for Discussing Developmentally Appropriate Services for Children, Youth, and Young Adults in Foster Care*. Retrieved from https://library.childwelfare.gov/cwig/ws/library/docs/capacity/Blob/106243.pdf?w=NATIVE%28%27SIMPLE_SRCH+ph+is+%27%27Having+the+Normalcy+Conversation+A+Guide+for+Discussing+Developmentally+Appropriate+Services+for+Children+Youth+and+Young+Adults+in+Foster+Care%27%27%27%29&upp=0&order=native%28%27year%2FDescend%27%29&rpp=25&r=1&m=1.
- Child Welfare Information Gateway. (2013, October). *Social Media: Tips for Foster Care Workers*. Washington, D.C.: Department of Health and Human Services, Children's Bureau. Retrieved from https://www.childwelfare.gov/pubPDFs/smtips_worker.pdf.
- Child Welfare Information Gateway (2015, April). *Understanding the Effects of Maltreatment on Brain Development*. Washington, D.C.: U.S. Department of Health and Human Services, Children's Bureau. Retrieved from <https://www.childwelfare.gov/pubs/issue-briefs/brain-development/>.
- Denby-Brinson, R., Gomez, E., & Alford, K. (2015, July). *Becoming "Smart" About Relationship Building: Foster Care Youth and the Use of Technology*. Retrieved from http://digitalscholarship.unlv.edu/cgi/viewcontent.cgi?article=1016&context=lincy_publications.
- Gaughen, K., Flynn-Khan, M., and Hayes, C. (2009, November). *Sustaining Youth Engagement Initiatives: Challenges and Opportunities*. Washington, D.C.: The Finance Project. Retrieved from http://c.ymcdn.com/sites/www.summerlearning.org/resource/group/7FBA0800-C5EE-4859-9C1E-1205ED9F6116/financesustainability/sustainingyouthengag_54fc77.pdf.
- LaLiberte, T., & Crudo, T. (Eds.). (2013). Trauma-Informed Child Welfare Practice [Special issue]. *CW360, Winter 2013*. Retrieved from http://cascw.umn.edu/wp-content/uploads/2013/12/CW360-Ambit_Winter2013.pdf.
- LaLiberte, T., & Snyder, E. (Eds.). (2011). Child Welfare and Technology [Special issue]. *CW360, Spring 2011*. Retrieved from http://cascw.umn.edu/wp-content/uploads/2013/12/CW360_2011.pdf.
- Murray, D. W., Rosanbalm, K., Christopoulos, C., & Hamoudi, A. (2015). *Self-Regulation and Toxic Stress: Foundations for Understanding Self-Regulation from an Applied Developmental Perspective* (OPRE Report #2015-21). Washington, D.C.: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/opre/report_1_foundations_paper_final_012715_submitted_508.pdf.

- The National Child Traumatic Stress Network. (2011). *Child Welfare Trauma Training Toolkit, 2nd ed.* Retrieved from <http://www.nctsn.org/products/child-welfare-trauma-training-toolkit-2008>.
- National Institute of Mental Health. (2011). *The Teen Brain: Still Under Construction* (NIH Publication No. 11-4929). Retrieved from <https://www.nimh.nih.gov/health/publications/the-teen-brain-still-under-construction/index.shtml>.
- Perry, B. (2006). Understanding Social Network Disruption: The Case of Youth in Foster Care. *Social Problems*, 53(3), 371–391.
- Pokempner, J., Mordecai, K., Rosado, L., & Subrahmanyam, D. (2015, May). *Promoting Normalcy for Children and Youth in Foster Care*. Philadelphia, PA: Juvenile Law Center. Retrieved from http://jlc.org/sites/default/files/publication_pdfs/JLC-NormalcyGuide-2015FINAL.pdf.
- U.S. Department of Health & Human Services, Center for Disease Control and Prevention. (n.d.). *ACE Study*. Retrieved February 21, 2016 from <https://www.cdc.gov/violenceprevention/acestudy/index.html>.
- U.S. Department of Health & Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) Trauma and Justice Strategic Initiative Workgroup. (2014, July). *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach*. Retrieved from <http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>.