

# Family focused interventions for at risk children and youth

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Children and youth who experience adversity during childhood may suffer serious psychological and psychiatric difficulties as a result. Adversity may range, for example, from chronic poverty to parents' mental health problems. A new special section published in the journal *Child Development* includes articles from 12 sets of experts on how interventions can be developed to maximize resilience among children experiencing adversity and improve outcomes for their families as well. The special section, "Developmental Research and Translational Science: Evidence-Based Interventions for At-Risk Youth and Families," edited by Drs. Suniya Luthar and Nancy Eisenberg, "distills robust findings to derive top priorities for interventions" intended to help those at-risk for psychological and psychiatric maladjustment.

Across the articles included in the special section, authors frequently noted that the well-being of the primary caregiver was an important focal point for intervention. The primary caregivers in most cases were mothers, and researchers noted that successful interventions needed to "ensure ongoing nurturance and support for mothers" through relational, interpersonal therapeutic approaches as well as supportive relationships in their everyday communities. A second focal issue was specific parenting behaviors: researchers found that averting harsh, insensitive behaviors in favor of nurturing, loving ones was very beneficial. Additionally, several authors provide strategies for how parents experiencing high stress levels can respond to their children's needs and demands with appropriate sensitivity rather than harshness. Third, Luthar and Eisenberg indicate that from the studies included in the

special section, it is evident that interventions should foster self-regulation and coping skills among parents and their children, noting that parents often adjust their parenting strategies based on how regulated their child's behavior is or is not.

In their introduction, Luthar and Eisenberg highlight areas that need further attention in future prevention research. These include more attention to fathers and father-figures, adolescents and their parents, and interventions successful among specific ethnic minority groups. Furthermore, the studies underscore the need to strive for outcomes related to everyday competence (i.e., academic achievement, healthy choices) and altruistic behaviors like compassion as "children who are prosocial and sympathetic toward others tend to be socially competent, well regulated, low in externalizing problems, and express more positive emotion."

The special section articles also suggest that future work must focus on developing intervention programs in community settings, particularly using a "deployment focused model" where interventions are developed and tested in the very settings they are ultimately intended to support, and not just in university laboratory settings. There has been much success, for example, from interventions implemented in schools, where efforts are to promote the well-being of not just students but also of their teachers, who serve important socializing functions and are themselves at high risk for burnout.

The special section includes a practical summary table which can be used to guide the development of interventions for different populations. Interventions targeted different groups of at-risk families including, but not limited to:

\* Taylor et al.: Families headed by single mothers, including peer-led group support and individual therapy.

\* Reynolds et al.: Families in poverty with young children, including educational experiences for the children in school and family supports at home.

\* Smith et al.: Childhood obesity among low income minority children, including [behavioral interventions](#) for parents to more effectively support and encourage their children's healthy lifestyle choices.

Finally, in order to achieve large-scale implementation of such programs that science has shown to be beneficial, Luthar and Eisenberg recommend shifts in national funding priorities.

"We do know what helps kids and what hurts them, and how best to intervene," Luthar said. "The problem is that we have not, in parallel, directed resources toward taking these evidence-based interventions to large scale. This must change. If we are to truly help today's vulnerable children and families, there has to be greater commitment of resources to ensure that promising programs are readily accessible to those most in need, and that these programs are implemented with high quality and fidelity to treatment procedures."

**More information:** Suniya S. Luthar et al, Resilient Adaptation Among At-Risk Children: Harnessing Science Toward Maximizing Salutary Environments, *Child Development* (2017). [DOI: 10.1111/cdev.12737](#)

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