

FRAMEWORK FOR YOUTH RESILIENCE WORK

Full report



Promoting psychosocial well-being and
RESILIENCE
of young people in South Africa



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List of Acronyms

List of acronyms and abbreviations

| | |
|----------|---|
| SDGs | The Sustainable Development Goals |
| PRA | Participatory Reflection and Action |
| SARB | South African Reserve Bank |
| PYD | Positive Youth Development |
| UN | United Nations |
| SA | South Africa |
| USA | United State of America |
| Stats SA | Statistics South Africa |
| HIV | Hunan Immunodeficiency Virus |
| SERT | Social-Ecological Resilience Theory |
| WHO | World Health Organisation |
| NYDA | National Youth Development Agency |
| R-MATS | The Resilience Questionnaire for Middle-adolescents in Township Schools |
| NGOs | Non-Governmental Organisation |
| GBV | Gender Based Violence |
| IPV | Intimate Partner Violence |
| SANCA | The South Africa National Council on Alcoholism and Drug Dependence |
| SAPS | South Africa Police Service |
| RRR | Relationship-Resourced Resilience |

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1. Executive summary

The purpose of the National Youth Resilience Initiative (NYRI) study was to investigate risks to youth resilience (especially violence and crime as risk factors) and to develop a Youth Resilience Framework to enhance youth resilience. Theoretically, the study is grounded in the Resilience frameworks and Bronfenbrenner's bioecological theory of human development. Methodologically, data was collected sequentially using three methods. First, a rapid systemic literature review was conducted, second Participatory Reflection and Action (PRA) research activities and last online focus groups. The key questions that guided the study are:

How can youth inform our knowledge of youth resilience? How do youths define youth-related risks? How do youth define youth-related resilience?

The first phase of the study focused on a systematic literature review. Desktop search for peer-reviewed and scientific published articles, policy papers and published reports on the topics of resilience, youth, crime, violence, youth risk factors, youth protective factors and resilience framework was conducted. Ebscohost and Scopus platforms were searched, specifically PsycINFO, PSYLIT, PsycArticles, Med-Line, SocINDEX, Social work abstract, CINAHL and Scopus. The searches yielded n=235 articles, with 107 articles applicable to youth resilience. The limitation of the systematic literature review is that due to limited time only the above platforms were searched. Saturation of topics relating to youth and resilience occurred as the same topics repeatedly surfaced in the searches.

The second phase of the study was concurrent with phase one and focused on, ethics clearance application. Ethics clearance was granted by the Ethics Committee of the University of Pretoria. Access to participants was achieved in collaboration with the National Youth Development Agency (NYDA), and partner organisations, namely ACTIVATE + WESSA. Invitations were sent to youth Ambassadors across SA to participate in the national youth resilience initiative. Fifty youths were targeted based on their youth Ambassador membership as the research population. But due to other commitments, not all Ambassadors could participate in the study. Participation approval from participants included completion of consent forms in which the participants agreed to voluntary and informed participation, anonymity and confidentiality as far as possible, and audio recording of the research sessions. PRA activities were conducted in the following South African Provinces: Gauteng (Pretoria), Limpopo (Mokopane), KZN (Durban) and Western Cape (Cape Town). Member checking was conducted with some participants who confirmed the PRA and online focus group findings. Overall, participation includes PRA: N= 17; Online Focus Groups: N= 22 and Online Member Checking N= 15.

To understand the risk that youths encounter in their developmental environment, PRA activities, focused on the role of youths' development context in identifying: (i) exposure to risk in all their contexts of development, (ii) the envisaged protective factors (buffers to risk) and (iii) in generating knowledge on resilience and strength to inform the development of pathways to resilience which will ultimately inform and strengthen the framework for youth resilience.

To contextualise and make the questions operational during PRA and online focus groups, the following semi-structured questions were asked to all participants:

1. In your understanding what risk is characteristic to youth
2. What risk can be associated with youths?
3. Indicate the type of context the risk can occur/is the risk characteristic to a particular context/situation/position/person etc.
4. What kind of protective factors do you need to overcome the risk?
5. Are protective factors linked to a particular context / position / person / situation etc.
6. Map the risk to the protective factors needed to overcome it
7. What resources are available in your context (e.g., schools, family, government)?
8. How can you access these resources?
9. What kind of protection do these resources offer to the risk or in general?
10. How do the resources protect you from all the risks (mention the risk that is protected)?

Summary of key findings

1) Systemic literature review (desktop)

Findings from international and national desktop systemic literature review covered the following themes:

The risks (constraints) identified in the desktop review are presented within the context they occur, based on the systems theory of Bronfenbrenner where an individual is considered as a system.

- *Individual / personal context:* emotional, behavioural. victimisation, loneliness, depression, boredom, over-crowding, gender (female), lack of learning opportunities, imprisonment etc.
- *Family context:* history of parent (or) substance abuse, parental abuse, unemployment, violence, illiteracy, sexual victimisation, homelessness, teenage pregnancy, low-income households, etc.
- *Social system:* problem with teachers, not doing homework, worries about academic failure, exposure to poverty, trauma, discrimination, etc
- *Peer system:* drug use, delinquency, gang involvement, substance abuse, crime,
- *Community system:* poverty, violence, limited access to education, female sexual harassment, homelessness
- *Socioeconomic system:* sexuality, abuse of alcohol, drugs and cigarettes, poverty, violence etc.
- *Education system:* high school dropout, low levels of school performance
- *Health system:* trauma, HIV prevalence, high infant mortality rates
- *Political system:* trauma through exposure to war
- *Cultural system:* gender, female stereotypes, stigmatisation, racism

Protective factors and resources (enablers) found in the desktop review include the following

- *Individual / personal context*: personal attributes/characteristics such as optimism, easy temperament, altruism, hope, high self-esteem; high social skills; personal and emotional strengths, etc.
- *Family context*: household chores, family connectedness, stable adult support, familial relationships, parental monitoring, lower levels of parental discord, etc.
- *School system*: active participation in school activities, connectedness to school, safe school environment, good teaching, extracurricular activities, etc.
- *Peer system*: socialisation (hanging out) with friends, prosocial friendship, going to movies, going to concerts, peers to confide in, peer networks, positive peers, etc.
- *Community system*: stable adult support, positive relationship with adults, support from NGOs, finding belonging, involvement in sports / extracurricular activities, safe community, etc.
- *Socioeconomic system*: internet, data, computers, finding a job, opportunities, social work organisations, etc.
- *Education system*: counselling canthers, availability and quality of the school, school supplies, and national laws governing the management and operation of schools
- *Health system*: Emotional and instrumental support by caseworkers, relationships, good health, stable accommodation, sustained employment, etc.
- *Political system*: institutional support, policies/implementation (rights of children, laws that stops child labour), protection of children, etc.
- *Cultural system*: cultural values, racial identity, family history, values and principles, developmental and cultural assets, etc.
- *Spiritual system*: faith-based activities, religious beliefs and affiliation etc.
- *Time system*: early intervention, programmes

The findings indicate that at the individual or personal level, characteristics, either as a result of biological disposition or personality traits, contributed to youth risk factors and resilience. Living with HIV, mental health issues, academic challenges, low level of school performance, learning difficulties, aggression, conduct problems, criminal behaviour, heightened behavioural and academic performance problems, neglect and suicide risks were significant risk factors that youth experience at the individual level. Personal factors such as confidence in own self-regulatory capacity, cognitive flexibility, sense of agency, high expectations, toughness and commitment, perseverance and determination, future dreams, ability, etc. significantly distinguished between resilient youth and those who had serious challenges in a significant way as a result of the risk factors. Furthermore, findings suggest that daily stressors at the community level that put young people at risk of negative outcomes

include exposure to community violence, discrimination, living in a severely disadvantaged environment, anti-social activity, limited transportation, etc.

2) PRA Activities

Numerous factors expose South African youth to risks and adversities, but available resources enhance their resilience by preventing risk factors from occurring, and by interfering in the process where risk factors operate. Thus, these resources serve as buffers against the negative effects of risk factors, and they improve the youth' self-esteem so that they can better manage the risk factor at hand. The themes and sub-themes derived from the PRA activities and the virtual focus group discussion sessions indicate risk and protection youths experience in their developmental context.

- *Crime and violence*: Gender-based violence; neglect; abusive homes; bribery, (sexual favours for job opportunities); crime and violence etc.
- *Mental health*: Peer pressure; positive self-esteem; self-awareness; strong mindset, mental health (depression); bullying etc.
- *Family background/Upbringing*: Parental involvement; morals and values, generational knowledge; absent parents; family structure, etc.
- *Context/Environment*: Environmental and current affairs; racism and discrimination
- *Resources*: Support and economic opportunities; capacity building and awareness workshops, Information campaigns; creating SMME's; lack of education and opportunities; exposure to poverty; adequate access to health care services; Functionality of policy services, etc.
- *Substance abuse*: Drugs; cigarettes; alcohol
- *Lack of awareness/Ignorance*: Negligence, ignorance of youth; lack of information, lack of knowledge,
- *Education*: Curriculum; vocational learning; over-crowded classrooms, inequality in education (the differences in public vs private schools); peer-education; formal and informal education etc.
- *Mentorship*: Role models, mentors

Based on findings from empirical studies on risks and protective factors experienced by South African youth, the current study proposes a conceptual framework that includes a set of ideas and practices that promote the availability of resilience resources that youth require to do well. To reduce risk factors, enhance resilience, and prevent violence and crime following the conceptual framework (depicted in Figure 4, page 85) the following five strategies are proposed:

1. *Strategy 1: Identify risk and protective factors*: identify factors that, if present in an individual's life, may raise the chances of them facing challenges and difficulty
2. *Strategy 2: Determine the nature of violence*: understanding first the nature of violence

3. *Strategy 3: Establish risk factors peculiar to each type of violence:* to link risk factors that are peculiar to the type of violence
4. *Strategy 4: Identify protective factors for each type of violence:* identify resources at the disposal of youth that could work to reduce the chances of youth adopting violent behaviour or becoming vulnerable to committing a crime
5. *Strategy 5: Develop primary, secondary, and tertiary prevention programmes:* prevent youth violence, reduce risks factors and strengthen resilience among youth

Finally, we recommend a set of policies, actions, and prevention strategies to eliminate or reduce risk factors and to optimise protective factors.

2. Introduction

Before the Covid-19 crisis, the youth in South Africa already suffered social marginalisation and poverty. The outbreak of the Coronavirus pandemic further exposed youths to risks threatening their lives and livelihood. As a result of the sharp economic recession caused by the stringent lockdown aimed at curtailing the spread of Covid-19, businesses owned and run by youths have experienced a significant drop in revenue (Kartseva & Kuznetsova, 2020). Even more worrisome is the fact that the National Treasury has forecasted that South Africa's economy is expected to contract by 7.8%, with job losses projected to be severe (SARB, 2020). The South African Reserve Bank forecasts that the South African economy is unlikely to return to normal within the next two to three years. In the face of these realities and the consequent economic hardships and other adversities that may affect the youth, it is important to develop overarching tools and parameters that could be used to enhance youth resilience.

Youth resilience is critical because the role of youth in our society is undeniably an important one. However, research has shown that young people are vulnerable to multiple stressors that can threaten their wellbeing and resilience. The South African youth is no exception. They experience multiple adversities in their developmental context and require resilience to live and thrive despite these hardships. The construct of resilience, which emphasises strengths despite exposure to significant risks, is a social, cultural and ecological concept that manifests itself across different cultures and contexts (Ungar & Liebenberg, 2009). For the youth of South Africa, the discussion of resilience cannot be detached from the *cultural and contextual factors* they are exposed to in their development. Resilience, as a dynamic process functions significantly as a lifelong buffer to potential threats and wellbeing over time and serves to promote and maintain youth mental health (Khanlou & Wray, 2014). The developmental and process nature of the concept of resilience is well encapsulated by Masten (2014, p. 1018) who states that resilience is “the capacity of a dynamic system to adapt successfully to disturbances that threaten system function, viability, or development”.

According to Theron and Theron (2010, p. 1), *youths should be assisted* by adults, professionals, and other youth-related community organisations to sustain and develop “resilience and insight into a commitment towards, promoting the phenomenon of resilience as resilience is increasingly being conceptualised as a culturally and contextually nuanced construct”. Thus, it is important to consider the developmental context and cultural nuances of the youth's life world when developing a resilience framework.

Furthermore, youth organisations need to *invest in the resilience of youth*. Khanlou and Wray (2014, p. 65) argue that “investing in the resilience of individuals is a powerful health-promoting step with lifelong benefits including potential improvements in school, employment, and prosocial outcomes – as well as a possible ‘equalizer’ in socioeconomic differences”. One way of investing in the resilience of youth is to develop a framework that can support youth resilience. An initial literature review shows

that several youth resilience frameworks exist. For instance, Rew and Horner (2003) developed their Youth Resilience Framework to address individual and sociocultural risk factors and protective resources that are essential to promote positive or hinder negative health outcomes in adolescence; Masten (2014) focuses on resilience and positive youth development (PYD) frameworks that are grounded in the history of developmental science and positive adaptation; Walsh (2012) focuses on a family resilience framework that highlights family strengths. Significant to these resilience frameworks are the *multiple and variable contextual and cultural differences that encompass risks, protective factors, and the resilience process*.

The youth remains a contentious issue, and different generations voice different opinions. With the 45th commemoration of the Soweto protests in 2021, the Daily Maverick recently reported the opinions of five men who had been involved in the planning and execution of the 1976 Soweto protests where they, as children and youth, protested to improve, among many things, education for all. These men believe that although the youth in Soweto in 2021 now has more opportunities than they had 45 years ago, the youth of 2021 have to put up with government corruption, unemployment, drugs and a lack of recreational and sporting facilities (Nicholson & Simelane, 2021). Some of them described the youth in 2021 as privileged, disunited, and lacking focus and discipline. They also felt that today's youth choose individual gratification over community values (Nicholson & Simelane, 2021). However, these are mere opinions, and although respected, may not reflect the experiences of all the youth in South Africa (SA). Therefore, a national study of youth resilience, in which youth can voice their own opinions, could integrate worldviews on what matters to support youth resilience with the own experiences of young South Africans. More importantly, such a study may elicit insight into core constructs needed to consider when youth resilience in South Africa. Such core constructs may be useful in future work to measure youth resilience (determining relevant youth resilience outcomes to measure and outcome measurements), as well as designing socio-ecological pathways to invest in supporting young people to resile.

Today's youth may be fighting more than government corruption, unemployment, drugs and a lack of facilities. The Sustainable Development Goals (SDGs) of the United Nations, with which South Africa's Millennial Development Goals are aligned, comprise 17 goals and subgoals, nine of which are relevant to youth as well. The specific goals are (1) No poverty; (2) Zero hunger; (3) Good health and well-being; (4) Quality education; (5) Gender equality; (8) Decent work and economic growth; (9) Industry, innovation, and infrastructure; (10) Reduced inequalities; and (16) Peace, justice and strong institutions. The nine goals can be grouped as social, economic, environmental or governance goals, and remain interlinked and interdependent, although listed separately (Stats SA, 2019b; UN, 2021). They give an inkling of the multitude and complexity of the challenges that youth in 2021 must contend with.

In an attempt to build up a mentally, morally, physically and financially healthy and prosperous South Africa, the youth has been involved in many of the goals. However, the one factor that has been

unforeseen by the many goals set for the world, Africa, South Africa and the youth, is the devastating effect that the Covid-19 pandemic is having on the goals, prompting the UN to provide a Covid-19 response to all of the sustainable development goals. Another effect of the pandemic is that some of the recent statistics (from early 2020) may no longer reflect the current situation in SA (more than a year into lockdown). Such data can also not be extrapolated to anticipate situations in SA, as the baseline of data has changed.

The request to conceptualise a national framework for youth resilience comes at a relevant time. The purpose of such a framework would be to investigate what has been learnt internationally and nationally about youth resilience and to conceptualise a comprehensive South African understanding of youth resilience to support our youth to flourish despite the many social, economic, environmental, governance and Covid-19 challenges. A solid understanding of South African youth resilience can guide appropriate support and intervention to facilitate, promote and protect resilience. It can also support preventative programmes where risk factors (constraints) are mitigated, and resources (enablers) are activated, channelled, and optimised. The primary research objective would be to answer the question:

- How is a South African youth resilience framework conceptualised?

Secondary research questions that would contribute to answering the primary research question would be:

- Which risk factors (constraints), that predict negative developmental outcomes, do young people experience worldwide?
- Which protective resources buffer youth against risks and support their attainment of positive developmental outcomes? (Literature review)
- Which risk factors (constraints), that predict negative developmental outcomes, do South African youths experience and need to be buffered against? (PRA)
- Which protective resources (enablers) are experienced by young people in South Africa as accessible to support youth to resile and attain positive developmental outcomes despite the ongoing risk? (PRA)

3. Concept clarification

In conceptualising a national youth resilience framework, it is essential to have a clear understanding of youth and resilience based on sound prior evidence, recentness, and context. In the literature review, we discuss the concepts of youth and resilience and rely on up-to-date evidence-based research applicable to South Africa and similar contexts. Where certain topics have not been researched or still lack sufficient supportive research in South Africa or similar contexts, we consult international literature to gain a comprehensive understanding of youth resilience.

3.1 Youth

Youth in South Africa includes all people from the age of 15 years up to and including 34 years (Statistics South Africa (Stats SA), 2021a). The age range of South African youth stands in contrast to the age range for youth used by the United Nations, which is 15-24 years of age (UN, 2019). The extended age range was accepted in South Africa based on the lingering effects of inequality during apartheid that officially ended almost three decades ago, and the experienced hardships of South African youth (RSA, 2015). This is similar to the upper age range for youth in some other countries such as Nigeria and Vietnam. With an average life expectancy of 64.1 years in South Africa (UN, 2019), it implies that the average South African is considered a youth for more than half of their life.

According to Stats SA (2021a), South Africa had 49.9% males and 50.1% females in the youth sector of the population during the 2019 survey, totalling approximately 20 514 000 youthful males and females. Slightly more youthful males (50.5%) than youthful females (49.5%) were urbanised, and consequently, slightly more youthful females (51.1%) than youthful males (48.9%) resided in rural areas. The distribution of youth according to age and gender was almost equal: in the 15-24 years age range 49.8% were male and 50.2% were female. In the 25-34 years age range exactly 50.0% were male and 50.0% were female. In total, 35.1% of the South African population are youths, with 35.8% of the SA population youthful males and 34.4% youthful females. It is difficult to compare the percentage of South African youth to the percentage of youth in other countries, as many other countries use different upper and lower ages to define their youth. What is noteworthy, however, is that with more than a third of SA's population being youths (20 514 000), the country simultaneously has a large asset that can contribute to growth in South Africa, but also a huge liability if more than a third of the population require funding for studies, daily living, health care, grants and/or investment in upstart businesses.

Altogether 26.9% of all SA households are headed by youths. Fewer than a third of youths are in a nucleus family (31.7%), with the rest spread among extended families (58.5%), single-parent families (5.6%) and complex families (4.3%). Almost one in four (24.2%) of the youths in SA are living in households without an employed adult (Stats SA, 2021a). In the 15 to 24 years age range, 18.7% of youth are employed, in contrast to 81.3% of youth in the 25 to 34 years age range (Stats SA, 2021a). These employment/unemployment statistics stand in stark contrast to the 2021 statistics of employment/unemployment amidst the Covid-19 pandemic. During the first four months of 2021, the statistics show 46.3% of youths unemployed, implying that almost half of the youth population is without employment, and thus without any income (Stats SA, 2021b). As more than a quarter of SA households are headed by youths, many more individuals than only the unemployed youth are detrimentally affected in terms of daily living, education, access to health services, etc. Youth-headed households may also have to cope without the example, cultural knowledge, wisdom and experience of parents or elders, and they may have limited networks in the community.

Twelve per cent of the youth lives in households that reported hunger, while 27.7% attends educational institutions ranging from school (Grade 9-12) and literacy classes to higher education

institutions and colleges. In contrast, 40.7% of the youth does not attend any educational institution and is also not employed (Stats SA, 2021a). The two leading causes of natural death among the youth are tuberculosis (8.5% of male youth deaths; 13.6% of female youth deaths) and living with HIV (6.7% of male youth deaths; 12.3% of female youth deaths) respectively (Stats SA, 2020). The limited nutritional, familial, social, financial, health and educational resources available to some youths are evident in the statistics, and clearly show the importance of the SDGs for SA.

Statistics related to violence and crime include the following: 16.9% of youths feel unsafe or very unsafe to walk alone in their area by day, in contrast to 65% of youths who feel unsafe or very unsafe to walk alone in their area by night. The statistics remain similar for both genders. The Free State province ranks first with the highest percentage of youths (79.4%) fearful at night, followed by Gauteng (70.2%). In Limpopo, only 50.4% of youths feel unsafe or very unsafe to walk alone in their area by night. Some youths have been the victims of property crime (6.6%) and assault (2.0%) in the previous five years (2014-2019) (Stats SA, 2021a). Alarming, the second-highest non-natural cause of death for all youth was assault (7.9% of non-natural deaths among female youths; 11.4% of non-natural deaths among male youths), which confirms the seriousness of violence among SA's youth (Stats SA, 2020). To cap it all, the statistics in this section do not reflect the influence of the Covid-19 pandemic in SA, except where explicitly mentioned.

3.2 Resilience

The term **resilience** is described as having positive outcomes while being exposed to risks (Allan & Ungar, 2014; Ungar, 2011). In other words, resilience is the capacity to do well despite adversity (Theron & Theron, 2010). Numerous factors expose youth to risks and adversities. The social-ecological model highlights the interplay of risk factors that operate across four domains – **individual, relationships, community, and society** – as a guide to identifying variables that render the youth vulnerable (Decker et al., 2013; O'Brien et al., 2013). The social-ecological model recognises that each domain or level is linked to a collection of risks that impact a person's behaviour. In this regard, the more factors a person or a group of people is exposed to, the higher the risks.

Resilience is a concept widely encountered – from architecture (such as the resilience of structures) to zoology (such as in the resilience of ecosystems). Applied to people, resilience means the ability to bounce back during and after adversity – in other words, the ability to have better than expected outcomes during and after adversity. Exposure to adversity thus becomes a prerequisite for resilience. The adversity or challenges the person is subjected to often continue over some time, and they are chronic and/or very often complex and multiple.

3.2.1 A unidimensional model of resilience

Several theoretical models for resilience have been developed. A unidimensional model of resilience explains resilience in terms of the internal traits of a person, implying that resilience is inborn, can be learnt, and that the responsibility for being resilient lies with the person. In certain contexts, such an understanding of resilience may be appropriate.

3.2.2 A multidimensional model of resilience

Research in South Africa, however, favours a multidimensional model of resilience, as the ability to bounce back is facilitated by the availability of a variety of accessible resources in and around the person. It does not necessarily result only from a personal trait located inside a person. Resilience is also facilitated by various protective factors that protect and support a person's attempts to resile, and these can be present in the individual, family, school, community, government, or any sphere or system that may influence the person. Such resources and protective factors are jointly referred to as enablers. However, resilience is threatened by various risk factors (constraints) that may hamper a person's attempts to resile (be resilient), and these risks can also be present in the individual, family, school, community, government, or any sphere or system that may influence the person. The presence of resources, risks and protective factors presupposes that different resources, risks and protective factors will operate differently for different persons in different contexts. The outcome of the process of resilience for a person affects their wellbeing.

Bronfenbrenner's bio-ecological model of development (Bronfenbrenner, 1977; Donald et al., 2012) contains examples of systems usually present in an individual's life, which can be enabling and/or constraining. The bio-ecological model explains the interdependence and reciprocal interactions among the various levels of systems. The microsystem comprises systems in which the young individual is directly involved, such as the family, peer and school systems. Enablers, such as good parent-child relationships, and constraints in these systems, such as non-supportive peers, can support or constrain youth in their resilience. The mesosystem is the space where the microsystems regularly interact (often also referred to as the community), which can similarly enable or constrain resilience. The exosystem contains systems where the youth is not directly involved, but which nevertheless can influence the youth in the microsystem, e.g., the parent's workplace, or an older sibling's peer group. The macrosystem contains dominant structures and beliefs, such as the economic system, health system, political system, and cultural beliefs, which can influence the youth (e.g., if the political system makes policy based on patriarchy, which does not allow young married women to work).

One criticism of Bronfenbrenner's model is that culture should be contained in the microsystem and not the macrosystem, as culture co-determines the context for the microsystem where the youth primarily find themselves (Vélez-Agosto et al., 2017). The chronosystem contains developmental time and is present across all the systems. For instance, if a youth loses a parent at a young age, the influence

on their development would be different than if they lost a parent at an older age. Another example of the enabling or constraining influence of time would be if a 17-year-old youth falls pregnant and has to raise a child as a single parent without the advantage of completing Grade 12 – in comparison to a 34-year-old youth who falls pregnant and already has a qualification and employment. The children born of these two youths have different opportunities in life, based on the influence of time in their parents' lives. For a systematic analysis of enablers and constraints, the following systems were initially used in this research: the individual/personal; family; school; peers; community; socioeconomic; education; health; political; cultural; spiritual, and time systems.

3.2.3 Socioecological resilience theory (SERT)

Resilience research by Ungar, a world-renowned researcher who is also involved in resilience research in SA, led to the development of the social-ecological resilience theory (SERT) (Ungar, 2011). The SERT conceptualises an understanding of resilience that rests on four principles, namely decentrality, complexity, atypicality and cultural relativity. A correct understanding of resilience is essential to understand and apply the principles. According to Ungar, resilience can be described as follows:

In the context of exposure to significant adversity, resilience is both the capacity of individuals to navigate their way to the psychological, social, cultural, and physical resources that sustain their well-being and their capacity individually and collectively to negotiate for these resources to be provided in a culturally meaningful way (<https://resilienceresearch.org/about-resilience/>).

Masten (2014) applies resilience to systems with the following description: “Resilience is the capacity of a dynamic system to adapt successfully to disturbances that threaten system function, viability, or development”. These descriptions of resilience focus our attention on the role of relations in resilience: relations between the individual and the available resources, the relationship between individuals to access, provide and share resources (refer to 2.2.4), but also the relationship between the resources and the systems from where they come, such as schools coming from the education system, vaccinations from the health system, jobs from the economic system, etc. This description also shifts the responsibility for resilience away from the individual to a shared responsibility for resilience between the individual and the family, school, community, government and/or other systems (<https://resilienceresearch.org/about-resilience/>) – which encompasses the principle of decentrality (Ungar, 2011).

The principle of complexity relates to the dynamic and changeable nature of resilience enablers and constraints over time, and also in different contexts. Dependence on nurturing parents can be a resilience enabler to young children, but over time it may become a constraint to resilience for youths. Similarly, dependence on mobility guidance for youth with visual impairment may enable resilience,

but in a different context, such dependence may constrain resilience for youth without visual impairment. In devising intervention programmes, the different requirements of the different genders, age groups, socioeconomic statuses, etc., have to be kept in mind.

The principle of atypicality posits that resilience enablers and constraints may not be what is expected. Belonging to street gangs enables resilience for some street children in China, as the gangs offer protection, belonging, some care, and ultimately survival on the streets (Yu et al., 2019). Similarly, Stubbs and Hart (2020) report that prison often becomes a protective factor in the absence of warmth, shelter, and safety.

Cultural relativity is closely associated with atypicality, but it emphasises the importance of dealing with resilience enablers and constraints in a cultural context. This is because different cultures may regard different resilience enablers (or constraints) as more important than in other cultures, e.g., it appears as if the Ghanaian understanding of mentor is not the same as that in more Western cultures (Abukari & Laser, 2013). The importance of relations in a culture is an example of cultural relativity and will be explained by the relationship-resourced resilience theory.

3.2.4 Relationship-resourced resilience (RRR) theory

Ebersöhn's seminal work on relationship-resourced theory (2019) is essential in understanding resilience enablers and constraints in SA, a country where severe poverty, decades of structural inequality, and severely limited resources are still rampant (and worsened by the effects of the lockdown regulations, trying to curb the Covid-19 pandemic). In Ebersöhn's own words (2019, p. x):

With the relationship-resourced resilience theory, I propose that better-than-expected outcomes are possible for many despite chronic and cumulative challenges because of *flocking*, rather than fight, flight, freeze, faint, or swarm. The 'superpower' of flocking is not that it annihilates poverty. The superpower of flocking is that it clothes those made vulnerable systematically over ages of systemic exclusion with the *benefits of cultural beliefs of communal agency to buffer the collective*. Flocking buffers against eons of socially engineered inequality. Flocking is an intergenerationally tried and tested pathway to leverage culture for unpredicted outcomes when context fails to provide structural support.

By understanding and leveraging culturally appropriate relationships as a resource in strengthening resilience and providing a buffer against the risks/constraints, better than expected outcomes can be reached for all who flock – despite poverty, inequality, and limited resources.

3.2.5 Risk factor predicts negative outcomes and hinders positive outcomes

Risk factors are daily stressors at an individual, relationship, community, and society community level that put young people at risk for negative outcomes (Decker et al., 2013). At the individual level, personal development factors, as well as biological disposition factors, are identified. These are factors that, if present in an individual's life may raise the chances of him or her facing adversities or difficulties. Risks factors at an individual level include living with HIV, mental health issues (Adegoke & Steyn, 2017; Dow et al., 2018; Olson & Goddard, 2015); academic challenges, low level of school performance, learning difficulties (Batsche et al., 2014; Filbert, & Flynn, 2010; Hopson et al., 2014); aggression, conduct problem, criminal behaviour, heightened behavioural and academic performance problem (Duggins et al., 2016; Hsing Jung Chen 2013; Ungureanu & Biriş, 2018); neglect, suicide risks (Giordano et al., 2019; Michelle, 2019). These individual traits are modified by the social context in which young people find themselves, rather than existing in isolation.

At the relationship level, factors deriving from close interpersonal relationships between friends, families, intimate partners, and peer relationships are identified. In other words, factors emanating from a relationship level encompass risk factors that are linked to friends and family level characteristics that may exacerbate the probability that a person will suffer harm or resort to violence or crime. In the same vein, risks that factor relationship levels too, do not exist in isolation, rather interact with different factors from other risk factor levels, to make youth vulnerable to harm.

At the relationship level, numbers of risks factors include sexual victimisation, teenage pregnancy, (Pérez-González et al., 2017; Pfeiffer et al., 2017); dating violence, youth partner intimate violence, interpersonal violence, intra-personal violence, poly victimisation (Giordano et al., 2019; Korkmaz & Överlien, 2020; Segura et al., 2017); drug use, substance abuse, gang involvement, alcoholism (Bernstein et al., 2011; Kelly & Ward, 2012; Tiet et al., 2010); homelessness, child-headed household, orphanhood (Karabanow et al., 2010; Laura, 2012; Oppong Asante & Meyer-Weitz, 2015; Rosenwald et al., 2013; Van Breda & Theron, 2018). Other risk factors stemming from relationship level include separation from parents, insecure attachment, parent loss, maltreatment, hardship, being raised in a single-parent household, raised in a low-income household (Andreea Birneanu, 2014; Gartland et al., 2019; Williams & Bryan 2013); family conflict, poor family supervision, and social isolation (Hopson et al., 2014; Olson & Goddard, 2015).

Risk factors at the community level relate to factors deriving from immediate social relations such as neighbourhoods, schools, workplaces, that put youth under adverse conditions and elevated risks. Community-level risk factors include exposure to community violence and anti-social activity (Hardaway et al., 2016; Jain et al., 2012; McKay, 2010); street-involved, high crime rate, drug consumption and dealing (Bademci et al., 2015); discriminations, exposure to school bullying and violence, lack of social capital (Duggins et al., 2016; Yasui et al., 2015); weak infrastructures to meet young peoples need, limited transportation, lack of leisure activities (Rosenwald et al., 2013); living in

a severely disadvantaged environment, dangerous neighbourhood, easy availability of weapons (Guthrie et al., 2014).

The societal level risk factor focuses on overarching factors affecting the whole of society that contribute to creating or encouraging a climate of violence for youth. At the society level, political conditions, economic and social policies, norms and values can serve to increase youth risks factors. There are other numbers of risk factors at the society level which include structural disadvantage, poverty, deprivation and violence (Barrington et al., 2017; Mosavel et al., 2015); post-war trauma exposure, political and economic crises, exposure to protracted political violence, exposure to war and organised crime (Kangaslampi et al., 2015; Lavi & Slone, 2011; Levey et al., 2016); social and economic exclusion or marginalisation, socioeconomically disadvantaged with HIV prevalence, stigmatisation and poverty, discrimination of certain population group, cultural oppression, (Adegoke & Steyn 2017; Cortina et al., 2016; Hopson et al., 2014; Yasui et al., 2015). In addition, other societal risk level factors that could be linked to weak or poor governance include inequitable income situations, inequitable social security, high rate of infant mortality and diseases (Filbert & Flynn, 2010; Hopson et al., 2014).

3.2.6 Protective resource/enabler buffers against risk and predicts positive outcomes

Protective resources are characteristics inherent in individuals, the environment, community, and society that can help in resisting or reducing risk factor effects. WHO (2010) described protective resources as internal and external characteristics that can aid in the development of youth resilience while also lowering the overall likelihood of crime and violent behaviour.

At the individual level, protective resources entail personal adaptation to adversity. They are resources within an individual's control that may help to lessen the impact of risks factors. Protective resources at an individual level linked to positive outcomes in the context of high risk include confidence in own self-regulatory capacity, cognitive flexibility, low negative cognition, sense of agency (Levey et al., 2016; Pérez-González et al., 2017); a sense of confidence and high expectations, toughness and commitment (Mampane, 2014); perseverance and determinations, future dreams, ability to create hope, religious and spiritual beliefs (Adegoke & Steyn, 2018; Zoleka, 2018; Zoleka et al., 2015); personal and emotional strength, personal disposition and habit, desire to change, positive attitudes and resourcefulness, goal orientation optimism (Batsche et al., 2014; Hills et al., 2016; Kelly & Ward, 2012; Pfeiffer et al., 2017); individual temperament, self-control and self-regulation, self-awareness, self-management skills, high self-esteem, internal competency (Hinduja & Patchin, 2017; Lavi & Slone, 2011; Mcvie, 2014).

Protective resources at a relationship level are family characteristics or conditions that promote healthy development, wellbeing, positive social adjustment and prosocial outcomes for youth development. These are resources deriving from a close personal relationship that combine additively to either buffer against risk or directly lower its levels. Family protective resources that may help to

mitigate the negative impacts of hardship or adversity on youth development include positive peers and family support, connectedness to family, family and peer networks, family values and loyalty, Ubuntu and relationality, high parental monitoring (Jain et al., 2012; Tiet et al., 2010); social regulation, social capital, staying connected to family history values and principles, improve peer and caregivers relationship (Bhana et al. 2016; Dow et al., 2018).

Other resources capable of providing a protective environment for youth at the relationship level include kinship support, secure attachment relationship with trusted adults, absence of incarcerated family members, observed parental cultural socialisation (Hardaway et al., 2016, Stevens et al., 2011; Yasui et al., 2015); positive parent-child communication (mother support), stable family income, many close friends, positive emotional climate (Eisman et al., 2015; Lorin Jones, 2013; Mcvie, 2014; Ungureanu & Biriş, 2018).

Community resources are also important in predicting system or group adaptation to adversities. Community infrastructures can act as a protective factor by allowing youth to participate in activities that enable them to make a decision and take responsibilities, allowing them to improve their skills and self-confidence while also contributing to the development of the community. Youth resilience can be aided by community structures that provide them with a feeling of identity and belonging as well as a place to learn and practise adult skills such as leadership.

Protective resources deriving from social context and at a community level include social services in the community such as rehabilitation centres for drug users, a refuge for orphans and rape victims, community resources, community connectedness, connectedness to school, school opportunities, community opportunities, health and counselling centres, community support, social support, social network, sense of safety and assurance of survival (Barrington et al., 2017; Mampane, 2014; Mosavel et al., 2015; Sta. Maria et al., 2014); opportunities for prosocial involvement, participation in sports activities, involvement in extracurricular activities, a safe environment created by peer-support, healthy environment, safe community non-conflictual environment, healthy environment, youth activism, sense of belonging, teacher support, community strength, cultural values (Andreea Bîrneanu, 2014; Hsing-Jung Chen, 2013; McCrea, et al., 2019; Olson & Goddard, 2015).

Lastly, on a societal level, protective resources include municipal and national legislations, policies as well as fundamental services that support youth-oriented initiatives, reduction of economic inequalities, increased adults understanding and engagement of youths towards improving youth resilience. Broad societal resources that may help youths navigate stressful environments include economic capital command over economic resources, work opportunities, access to post-secondary education, and enactment of policies that support youth protection, anti-bullying policies, and access to microcredit facilities (Johns, 2019; McCrea, et al., 2019; Pfeiffer et al., 2017; Rosenwald et al., 2013; Sta. Maria et al., 2014).

It is important to emphasise that protective resources are not interventions or programmes that aim to eliminate risks or harms, instead, protective factors refer to a broader category of circumstances

that minimise a person's chances of being susceptible to violence and crime. It is equally important to note that risk factors that present at all levels of ecological models are not types of violence and do not necessarily become a root cause of violence or crime. However, the presence of risks factors can increase a person's chances of being susceptible to violence or crime.

In conclusion, it is necessary to state that no single risk factor explains why a youth could be vulnerable to violence and criminality. Rather, vulnerability to crime and violence resulting from a series of interconnected factors at the individual, relationship, community, and societal level. In the same way, protective resources that address forces that may push or pull youth to engage in violent behaviour are also interrelated.

3.3. Conclusion

The different models of resilience broadly explain the development of our understanding of resilience. A unidimensional understanding of resilience may be relevant when internal resilience traits are researched, but a multidimensional understanding of resilience in South Africa factors in many more aspects of resilience. One challenge of a multidimensional understanding of resilience is that resilience constraints and resilience enablers may be viewed as opposites of one another, thereby oversimplifying possible interventions or solutions. For instance, if orphanhood is a constraint for resilience, and nurturing parents are an enabler, youths who are orphaned must be placed in families with nurturing parents. Although families for all seem like a pathway to resilience, the limited resources in South Africa make such solutions an impossibility. Although several researchers have identified specific protective resources against specific constraints, and specific factors that compensate for specific constraints (Wang et al., 2015), one must be careful of listing protective resources without identifying mechanisms of change (Zimmerman et al., 2013). It is only through using a theoretically driven model of resilience and understanding decentrality, complexity, atypicality and cultural relativity, combined with the powerfully relevant relationship-resourced resilience theory, that other pathways to resilience can be sought. It is hoped that the results of the research reported here can suggest culturally appropriate pathways to resilience in South Africa.

4. Methodology

Three streams of data were analysed to address the research questions, namely a desktop review of literature, participatory reflection and action (PRA) and online focus group discussions. Participants were South African youth ambassadors. The following sections discuss the sampling, methods and analyses of each. Ethics clearance was granted by the Ethics Committee of the University of Pretoria (Ref: EDU046/21).

4.1 Desktop review

4.1.1 *Sampling of published articles for review*

The desktop review comprised searching, reading and summarising articles according to previously set inclusion criteria. Two Postdoctoral Fellows oversaw the desktop review.

Ebscohost and Scopus *platforms were searched*, specifically PsycINFO, PSYLIT, PsycArticles, Med-Line, SocINDEX, Social work abstract, CINAHL and Scopus. Given the time sensitivity of the funded project not all the possible platforms for articles, nor all articles on a platform could be searched. *Search terms* applied in searching for titles and abstracts were the following: youth, resilience, risk, framework, resilien*, child, young men/women/adults, adolescent*, risk* or violence* or crime* or youth risk* or youth violence* or youth crime* AND resil* or positive [adjustment/adaptation] or protective AND youth* or adol* or child or young person AND framework* or theory [youth resilience theory/youth resilience framework]. Refer to Table 1 and 2 below:

Table 1: Summary of literature search

| Platform | Keywords | Total hit | Not relevant | Relevant | Accepted | Rejected |
|-------------------------|---------------------------------------|-----------|--------------|----------|----------|----------|
| Africa wide information | Youth resilience | 54 | 29 | 25 | 22 | 3 |
| Social work abstract | Resil* AND youth | 50 | 29 | 21 | 17 | 4 |
| APA PsychINFO | Youth resilience AND violence | 71 | 38 | 33 | 28 | 5 |
| PSYLIT | Adolescen* | | | | | |
| PsycArticles | Risk* or violence or crime | 60 | 15 | 45 | 40 | 5 |
| Med-Line | Youth crime* AND resil* | | | | | |
| SocINDEXT | Youth resilience theory AND framework | | | | | |
| CINAHL | | | | | | |
| Total | | 235 | 111 | 124 | 107 | 17 |

Table 2: Inclusion and Exclusion criteria

| Inclusion criteria | Exclusion criteria |
|---|--|
| <ul style="list-style-type: none"> - Published peer-reviewed articles - English text - Full-text articles - Articles published from 2010 – 2020 | <ul style="list-style-type: none"> - Articles where a person-centred or unidimensional understanding of resilience formed the theoretical framework - Intervention studies - Any systematic reviews - Any theorising paper(s)/reflections that did not report empirical research |

Database searches yielded 235 articles, with 107 articles applicable to youth resilience and complying with the inclusion criteria. For some topics relating to youth and resilience, a saturation of topics occurred, meaning that the same content repeatedly surfaced in the searches.

4.1.2 Methods and analysis

Once an article was included in the desktop review, the identifying details of the article were meticulously noted. These included the title, author(s), journal title, year of publication, volume, page

numbers, DOI and/or website address where applicable. Each article was then read and summarised according to headings, predetermined by the principal investigators, which related to the current understanding of resilience in South Africa. These headings were risk factors/constraints, protective factors and resources (enablers), and major findings. Some other headings were related to the research process to place the research findings in context. These headings alluded to the definition of key search words (where applicable), methodology, measures, country, specific province/area, setting of the study, school level, school type, predominant home language, sample size, the age range of participants, and the gender composition of the participant group. Each article was also tabbed to be included or not, and the inclusion criteria were listed. Each article was also critically read to determine the rigour of the research, with examples of the rigour noted.

The articles that were included made use of different theoretical frameworks of youth resilience. As one of the exclusion criteria implied using a multidimensional understanding of youth resilience, each article was scrutinised for enablers and constraints in various dimensions (or systems) of living. Bronfenbrenner's bio-ecological model of development (Bronfenbrenner, 1977) contains various systems on different levels of interaction. These various systems, together with some other systems that were regularly present in the literature, were used to categorise the constraints and enablers in the desktop analysis of the selected available research on youth resilience. The systems used were the individual or personal system, family system, school system, peer system, community system, the socioeconomic system, education system, health system, political system, cultural system, spirituality system and time system. The systems were purposefully detailed to minimise the loss of details in the analysis, but full cognition was given to the fact that the theoretical or conceptual framework for youth resilience in SA may combine some of these systems, rename some of the systems, disregard some of the systems, and/or present a different framework altogether.

4.2 Data collection

4.2.1. Participatory Reflection and Action (PRA) sessions and Online Focus Groups

We used PRA and focus groups with youth ambassadors to obtain information on how youth resilience framework can be conceptualised

PRA is often a choice of method for qualitative research where groups of participants are given one or more activities to complete. These activities are predetermined by the researcher to generate data required to answer the research questions. The activities are often planned so that the groups make posters of outcomes in their discussions, and then the posters are presented to the other groups for comments and additions. By performing the activity, participants learn from one another and are often empowered to return to their homes with new insight and ideas. Also, while participants carry out the activity, the researcher or field workers can observe and use careful probing to clarify responses. The

activities and questions are predetermined to allow for consistency among the PRA sessions with different participant groups (Ferreira et al., 2013).

Mills (2014) stated that a focus group is a valuable interview technique that involves using individuals who are purposively selected and can contribute to the understanding of the specific research topic. Participants in focus groups are selected because they would have information to give on the subject of research (Richardson & Rabies, 2001). For the proposed study, focus group interviews will be used as an avenue to consolidate and shed more light on the statistical results obtained from the questionnaire (Creswell & Clark, 2007).

4.2.2 Sampling

Convenience sampling using stakeholders/partners networks was used to involve youth ambassadors. In collaboration with the National Youth Development Agency (NYDA) and WESSA Activate, invitations to participate were sent to 50 youth ambassadors who were identified as part of the larger project and who were already working with partner agencies in the national youth resilience initiative (NYRI). Approved consent forms in which the participants agreed to voluntary and informed participation, anonymity and confidentiality as far as possible, and audio recording of the research sessions, were sent to the participants.

Table 3: Data collection and participants details

| PRA-session | Hours | Province/City | Males | Females | Total |
|-----------------------|--------------------|-----------------------------|--------------------|----------------------|----------------------------------|
| | 6½ | Gauteng (Pretoria) | 2 | 4 | 6 |
| | 5 | Limpopo (Mokopane) | 1 | 1 | 2 |
| | 6 | KwaZulu-Natal (Durban) | 2 | 3 | 5 |
| | 6 ½ | Western Cape (Cape Town) | 0 | 4 | 4 |
| Online Focus Group | 4 | Mpumalanga/KZN/LP | 3 | 4 | 7 |
| | 4 | North West/Gauteng | 3 | 1 | 4 |
| | 4 | Eastern Cape/Free State | 6 | 2 | 6 |
| | 4 | Northern Cape | 3 | 0 | 3 |
| | | | | | |
| TOTAL | Hours total: 40 | Provinces Total: 9 | Males total: 20 | Females total: 19 | Young people total: 39 |

4.2.3 Data collection and analysis

The following PRA-prompts were generated to address the research questions, “Which risk factors (constraints), that predict negative developmental outcomes, do South African youths experience and need to be buffered against?” and “Which protective resources (enablers) are experienced by young people in South Africa as accessible to support youth to resile and attain positive developmental outcomes despite ongoing risks?”:

The research team (four MEd-students and their supervisors) drafted data collection activities for six and half-hour-long PRA- sessions (see Addendum A), including an introduction, ice breakers, collaborative description of terms, PRA-poster activities, debriefing and conclusion activities. PRA sessions were scheduled to last from 9:00 until 15:30, with time for lunch and tea.

For regional representativeness of young people from across South Africa, the initial planning was for five place-based PRA sessions at different cities and towns in Gauteng (Pretoria), Limpopo (Mokopane), KwaZulu-Natal (Durban), Northern Cape (Kimberley) and the Western Cape (Cape Town). Given COVID-19 restrictions an additional data collection method, online focus groups were also used to collect data from those unable to attend the sessions.

Four PRA-sessions in Gauteng, Limpopo, KwaZulu-Natal and Western Cape were possible where safety could be maintained (considering travel, lodging and social distancing guidelines). Covid-19 protocols were strictly adhered to during PRA-session (completing health screens, taking temperature, wearing masks, social distancing and sanitising regularly).

Four hour-long online focus group sessions safely accommodated participation from Gauteng, Free State, Limpopo, Western-, Eastern-, and Northern Cape participants. Virtual focus groups were scheduled to start at 10:00 and continue until 14:00.

The virtual focus groups followed the same protocol as the PRA sessions, except for a few adaptations in the form of different ice breakers and debriefing exercises, shorter formulation and the merging of some similar-sounding questions (see Addendum B). Youths who participated in the virtual focus groups also received a R200.00 data voucher the day before the virtual focus group session.

The audio recordings (PRA-sessions and online focus groups) were transcribed verbatim for inductive thematic analysis by multiple coders. Researchers consulted on preliminary themes and subthemes, before continuing with the rest of the inductive thematic analysis. The saturation of data was established during the preliminary analysis.

4.2.4. Data collection limitations

Acknowledging possible limitations due to the methodology used may prevent unrealistic expectations. The sample of 50 participants representing youth in SA is too small for generalisations to be made from the findings. The purposeful sampling design allows for the transferability of findings to other similar contexts. It is also possible that the request for prospective participants unintentionally caused the

selection of those youths who were eager to contribute and not necessarily representative of the general youth. However, many of the selected participants worked with youth in various organisations, which exposed them to the experiences and voices of many other youths, for whom they could become a voice. PRA and focus groups, which were used as methods to collect data from a specific time frame, do not allow a longitudinal understanding of resilience. Longitudinal research is valuable as it examines the cumulative effect of enablers over time; such research may also indicate the ages when some enablers become more or less salient (Zimmerman et al., 2013). Some resilience research identifies single constraints and enablers but does not portray the cumulative effect of multiple risks, which has been proven to be too difficult to overcome (Sameroff & Rosenblum, 2006, in Zimmerman et al., 2013). However, the national youth resilience framework proposed in this report will be subjected to further research to refine the proposed initial youth resilience framework.

4.2.5. Ethical consideration

Ethics approval was obtained from the Faculty of Education, University of Pretoria. The NYRI partners also consented to the team contacting the youth ambassadors to seek their participation in the project. A virtual presentation on the role of the CSR in the larger NYRI project took place before contacting the youth ambassadors. Informed consent letters prepared for youth ambassadors explained the nature of the project, the expectations and that participation was voluntary. The letters reiterated that the participants' basic rights would be respected including their right of refusal to participate, and their right to privacy and confidentiality. Permission was obtained from the youth ambassadors to photograph the data generated and audio record the presentations. The details of how the data would be used and stored were explained to the youth ambassadors.

The data generated is stored according to University of Pretoria guidelines and protected in line with regulations and policies.

4.3 Results and findings

The following sections will explain how we came to this synthesis based on (i) findings from the desktop, and (ii) findings from the PRA/Focus group discussions.

Table 4: Think global and act local: A comparison of global and local evidence on youth resilience

| System | Global trends | Local trends |
|-------------------|---|---|
| Individual | <ul style="list-style-type: none"> - Individual / personal system protective resources - Spirituality system protective resources | <ul style="list-style-type: none"> - Individual / personal system protective resources - Entrepreneurial skills development - Spirituality system protective resources |
| Peers | <ul style="list-style-type: none"> - Peer system protective resources | <ul style="list-style-type: none"> - Peer system protective resources |

| System | Global trends | Local trends |
|---|---|--|
| School | - School system protective resources | - No evidence |
| Family and Community (sociocultural) | - Family system protective resources - Community system protective resources - Cultural system protective resources | - Family system protective resources - Community system protective resources - Cultural system protective resources |
| Structural | - Socioeconomic system protective resources - Education system protective resources - Health system protective resources - Political system protective resources | - Socioeconomic system protective resources - Education and School system protective resources - Health system protective resources - Political system protective resources |

4.3.1 Global trends on youth resilience

The risks (constraints) identified in the desktop review are presented verbatim as in the articles, according to the systems mentioned in the literature review. Empty table cells do not mean that no information exists, but merely imply that information was not found in the 66 articles reviewed. To make it easier to find results, a reference is added, as well as a quick description of the conditions or context of the specific research.

4.3.1.1 Global youth resilience risks (constraints)

Table 5(a): Global individual / personal system youth resilience risk factors

| Risk | Reference | Conditions/Context |
|---|-------------------------------|--|
| - Lonely, not fitting in, or others do not like them - Discouraged - Worried a lot - Blue, depressed, worthless, or hopeless - Bored in general - Angry - Has had suicidal thoughts/ideation, attempted suicide | Anderson-Butcher et al., 2010 | 100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website. This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks. |

| Risk | Reference | Conditions/Context |
|---|---------------------------|--|
| Victimisation | Duggins et al., 2016 | More frequent victimisation and low-income status were associated with higher levels of aggressive behaviour. 373 students (Grades 7–10) who completed up to three annual surveys. |
| Exposure to levels of stress associated with excessive, persistent, and/or uncontrollable adversity | Hopkins et al., 2015 | Resilient Aboriginal youths were significantly more likely to have lower self-reported asthma symptoms and carer-reported lifetime health problems than Less Resilient youths. The results support the posited biological pathways between chronic stress and physical health and identify the protective role of social connections that impact not only psychosocial function but also physical health. |
| <ul style="list-style-type: none"> - Minimal early learning opportunities - Under-funded, over-crowded, and woefully inadequate schools - Individual risk factors: female, rural and remote living | Abukari & Laser, 2013 | Gender differences in academic outcomes among Ghanaian youth: the role of protective factors and risk factors were explored among 276 youths from four colleges in northern and southern Ghana. |
| Youth in foster care, posttraumatic symptoms based on exposure to violence and maltreatment in their own families | Jaramillo & Kothari, 2021 | Supportive caseworkers, school engagement, and posttraumatic symptoms among youth in foster care |
| Immigrant youth are at greater risk of declining academic engagement over the course of adolescence, perhaps because of challenges they face in the host country | Smith et al., 2020 | Parents, friends and immigrant youths' academic engagement: A mediation analysis |
| Prior prisoner | Stubbs & Hart, 2020 | Resilience to reoffending: Practice considerations for psychological therapies supporting young men to overcome adversity. |

Table 5(b): Global youth resilience family system risk factors

| Risk | Reference | Conditions/Context |
|---|-------------------------------|--|
| <ul style="list-style-type: none"> - Parents angry with them - Parents too strict - Parents disciplining them - History of parent substance abuse or illness | Anderson-Butcher et al., 2010 | <p>100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website.</p> <p>This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks.</p> |
| <ul style="list-style-type: none"> - Family risk factors: unemployment and underemployment, violence, illiteracy, and low levels of education, teen parenting and large family size - The results also support the critical importance of familial risk factors for the development of substance abuse problems in youth and the need to develop preventive and early intervention strategies targeted at youth at risk of substance abuse. | Abukari & Laser, 2013 | Gender differences in academic outcomes among Ghanaian youth: the role of protective and risk factors were explored among 276 youths from four colleges in northern and southern Ghana. |
| Sexual victimisation: the results revealed that all forms of sexual victimisation were associated with higher levels of emotional and behavioural problems. | Pérez-González et al., 2017 | A study to assess protective factors that promote resilience in child sexual victims. Altogether, the study included 1105 children and youths (590 male and 515 female) aged between 12 and 17 from north-eastern Spain. |
| <ul style="list-style-type: none"> - Substance abuse - Homelessness | Hills et al., 2016 | The lived experiences of street children in Durban, South Africa. Ten adolescents aged between 14 and 18 were selected purposefully to participate in the study. |
| <ul style="list-style-type: none"> - Sexuality - Teenage pregnancy | Pfeiffer et al., 2017 | Resilience factors of female adolescents towards teenage pregnancy. A cross-sectional cluster sampling approach was used in Tanzania to select 750 female adolescents aged 15–19 years who were interviewed about how they mobilise and access |

| Risk | Reference | Conditions/Context |
|------------------------------|-------------------|---|
| | | resources to avoid or deal with teenage pregnancy. |
| Cumulative violence exposure | Humm et al., 2018 | To explore the protective factors that may reduce exposure to and the impact of cumulative violence on mental health among young South African adolescents. Measures of perceived social support, different types of violence exposure and symptoms of depression, aggression and conduct disorder were administered to a sample of 615 Grade 7 learners. |
| Youth-headed households | Soji, 2018 | A longitudinal study was conducted in Port Elizabeth, Eastern Cape, South Africa from 2012 to 2016 to explore the developmental pathways of youths who head their families following the demise of their parents, and how these youths navigate through the challenges associated with their transition to adulthood. The study drew data from the narratives of three South African youths who are the head of their families. |
| Youth-headed household | Laura, 2016 | Factors that help youths in Rwanda to demonstrate resilience amid chronic crises characterised by poverty, economic deprivation, social isolation, abuse and exploitation. The study adopted a qualitative ethnographic approach to generate information on how 25 Rwandan youths aged between 9 and 24 years navigate their life trajectory and social networks over time. |
| Youth-headed households | Soji et al., 2015 | To understand the coping strategies and factors that enhanced resilience among six youth-headed families. Data was collected using individual and focus group interviews with six youths who head their families and |

| Risk | Reference | Conditions/Context |
|---|------------------------|---|
| | | who have been able to keep the family going after the death of the parents. |
| Factors that contributed to involvement in risk behaviours: <ul style="list-style-type: none"> - Ineffective parenting - Hardship - A lack of commitment to school | Kelly & Ward, 2012 | Data from eight youths from the Western Cape, South Africa who are no longer into substance abuse and criminal acts. |
| <ul style="list-style-type: none"> - Raised in a low-income household - Raised in a single-parent household | Williams & Bryan, 2013 | Educational resilience of eight urban, African American high school graduates from low-income and single-parent families. |

Table 5(c): Global youth resilience school system risk factors

| Risk | Reference | Conditions/Context |
|--|--|--|
| <ul style="list-style-type: none"> - Bored by school/school not enjoyable - Not doing homework or motivated to do homework - Problems with teachers - Behavioural issues at school (being sent to the principal, being disruptive in class) - Worries about academic failure | Anderson-Butcher et al., 2010 | 100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website. This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks. |
| <ul style="list-style-type: none"> - Excessive pressures to excel (generally in affluent contexts) are now listed among the top four “high-risk” factors for adolescents’ mental health, along with <ul style="list-style-type: none"> • exposure to poverty, • trauma, and • discrimination. | Geisz & Nakashian, 2018 in Luthar et al., 2020 | Multiple studies of high-achieving school (HAS) cohorts have shown elevated rates of serious symptoms relative to norms. A conceptual model is presented here on major risk and protective processes implicated in unrelenting achievement pressures facing HAS youth. These include forces at the macro level, economic and technological changes that have led to the “middle-class squeeze,” and proximal influences involving the family, peers, schools, and communities. |

| Risk | Reference | Conditions/Context |
|---|----------------------------------|--|
| <ul style="list-style-type: none"> - The relationship between the teacher and the student as a mentor, an important mesosystem in the ecological theory (Bronfenbrenner, 1979; Garbarino & Ganzel, 2000), was inversely related to female grades. Our interpretation is that the student-teacher relationship in the Ghanaian context is more distal and does not directly support female students' academic outcomes. - It appears that the perception of the school mentor (as found in Western literature) being a caring adult role model who exerts a positive influence on youth behaviour outcomes (e.g., Werner, 2000) is incompatible with the Ghanaian teacher's role and a contributory factor to low student achievement. This is a significant revelation of the contextual applicability of this measure. | <p>Abukari & Laser, 2013</p> | <p>Gender differences in academic outcomes among Ghanaian youth: the role of protective and risk factors were explored among 276 youths from four colleges in northern and southern Ghana.</p> |
| <p>Academic challenges</p> | <p>Mampane, 2014</p> | <p>The resilience of middle-adolescents in a South African township. The Resilience Questionnaire for Middle-adolescents in Township Schools (R-MATS) was used to survey 291 Grade 9, middle-adolescent learners from two black-only township secondary schools.</p> |

Table 5(d): Global youth resilience peer system risk factors

| Risk | Reference | Conditions/Context |
|---|----------------------|--|
| <ul style="list-style-type: none"> - Delinquency - Drug use - Gang involvement | Tiet et al., 2010 | In Denver, USA, to ascertain the factors that helped youths who maintained favourable outcomes to be resilient, despite being exposed to neighbourhood risks. Predictors of resilience were examined from longitudinal data of 877 youths. |
| Substance abuse and crime | Kelly & Ward, 2012 | Data from eight youths from the Western Cape, South Africa who are no longer into substance abuse and criminal acts. |
| Adolescent delinquency | Stevens et al., 2011 | Included 1297 females in the age range 17 to 18. The purpose of the study was to investigate factors that make girls differ in risk at the start of adolescence. |

Table 5(e): Global youth resilience community system risk factors

| Risk | Reference | Conditions/Context |
|---|-----------------------|---|
| <ul style="list-style-type: none"> - Community and environmental risk factors such as poverty. Communities characterised by collective poverty face a cluster of risks including poor health, poor nutrition, violence, and limited access to education. African teachers tend to be authoritarian and consider girls less competent than boys. - Girls also suffer sexual harassment from teachers for preference of higher grades. - The results support the critical importance of environmental risk factors that encourage substance abuse problems in youth and the need to develop preventive and early | Abukari & Laser, 2013 | Gender differences in academic outcomes among Ghanaian youth: the role of protective and risk factors were explored among 276 youths from four colleges in northern and southern Ghana. |

| Risk | Reference | Conditions/Context |
|--|-------------------------|---|
| intervention strategies targeted at youth at risk of substance abuse. | | |
| Exposure to community violence | Jain et al., 2012 | |
| Exposure to community violence | Hardaway et al., 2016 | Low-income youth exposed to community violence. |
| Exposure to violence and crime | Mampane, 2014 | The resilience of middle-adolescents in a South African township. The Resilience Questionnaire for Middle-adolescents in Township Schools (R-MATS) was used to survey 291 Grade 9, middle-adolescent learners from two black-only township secondary schools. |
| <ul style="list-style-type: none"> - Living in the street - Exposure to violence | Sta. Maria et al., 2014 | Filipino street youths in Manila. Thirty-seven street youths between the age of 12 and 18 were asked questions related to their life experiences on the streets and conditions that help youths leave the streets. |
| Homelessness | Karabanow et al., 2010 | Explore how homeless youth survive in neo-liberal times. In-depth, semi-structured, qualitative interviews were conducted with 34 youths between 16- and 24-years old living in Halifax, and seven service providers in Toronto. |

Table 5(f): Global youth resilience Macrosystem risk factors

(i) Global youth resilience socioeconomic system risk factors

| Risk | Reference | Conditions/Context |
|--|-------------------------------|--|
| <ul style="list-style-type: none"> - Use of drugs, alcohol, or cigarettes - Having oral, anal, or vaginal sex - Going to bars and clubs | Anderson-Butcher et al., 2010 | 100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website. This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks. |

| Risk | Reference | Conditions/Context |
|---|------------------------|---|
| <p>Multiple risks of poverty included</p> <ul style="list-style-type: none"> - a lower rate of high school completion, - higher rates of long-term unemployment, - higher health morbidity and mortality rates, and - excessive rates of incarceration relative to the general Australian population. | Hopkins et al., 2014 | <p>Investigated whether the profile of factors that protect the psychosocial functioning of Australian Aboriginal youth exposed to high risk is the same as those factors promoting psychosocial functioning in youth exposed to low risk.</p> <p>Data was gathered from 1,021 youths aged 12–17 years.</p> |
| <p>Risks such as poverty, chronic violence exposure, poor education, exposure to drugs, and shrinking employment opportunities are often associated with being a Black male in an urban environment (Thomas & Stevenson, 2009). These risks occur concurrently, chronically, and accumulate, thereby increasing academic failure and involvement in violence.</p> | Woodland, 2016 | After-school programmes: A resource for young black males and other urban youth. |
| <ul style="list-style-type: none"> - Street children - Domestic violence - Sexual abuse and violence - Poor family relations - Poverty | Kaiser & Sinanan, 2020 | Survival and resilience of female street children experiencing sexual violence in Bangladesh: A qualitative study. |
| <ul style="list-style-type: none"> - Participants' transcripts revealed their pathways to delinquency and three major stages emerged from the interviews: - Stage One: Initial attempt to make a living through conventional activities such as scavenging (food, clothes, and recyclables) and begging (for food and money, sometimes using a disability). Since | Yu et al., 2019 | Pathways to delinquency for street children in China: Institutional anomie, resilience, and crime. |

| Risk | Reference | Conditions/Context |
|--|-------------------------|--|
| <p>begging is prohibited in China, the children had to find other ways to get money, i.e., labour.</p> <ul style="list-style-type: none"> - Stage Two: Involvement in informal economic activities (such as handing out leaflets if they were below 16 years) as a middle solution, risking maltreatment and exploitation. - Stage Three: Engagement in instrumental crime as a last resort (individual theft for food, theft by a peer group, organised gangs under adult leadership to steal). | | |
| <ul style="list-style-type: none"> - Structural disadvantage - Poverty - Deprivation - Violence | Mosavel et al., 2015 | Narratives of 112 South African youths. |
| Socioeconomically disadvantaged with high HIV prevalence | Cortina et al., 2016 | A study to understand the influence of cognitive styles and psychological functioning on risks and resilience of rural South African school students exposed to chronic adversity. A quantitative survey was used to obtain data from 1228 children in Grades 4 and 6 aged 10 to 12 years old. |
| Poverty | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |
| Structural disadvantage (poverty) | Barrington et al., 2017 | To establish the extent to which unconditional cash transfer programmes could form part of a structural intervention to address poverty. The study explored the experiences of resilience and vulnerability among 11 youth-caregivers who benefited |

| Risk | Reference | Conditions/Context |
|---------|---------------------|--|
| | | from the Malawi Social Cash Transfer Programme. |
| Poverty | Laura, 2016 | Factors that help youths in Rwanda to demonstrate resilience amid chronic crises characterised by poverty, economic deprivation, social isolation, abuse and exploitation. The study adopted a qualitative ethnographic approach to generate information on how 25 Rwandan youths aged between 9 to 24 years navigate their life trajectory and social networks over time. |
| Poverty | Theron et al., 2011 | Four impoverished resilient youths. |

(ii) Global youth resilience education system risk factors

| Risk | Reference | Conditions/Context |
|--|-----------------------|--|
| <ul style="list-style-type: none"> - A low level of school performance - High school dropout rates | Filbert & Flynn, 2010 | To examine developmental and cultural assets as a resilience enabler among Aboriginal Canadian youths living in out-of-home care. The participants comprised 97 First Nations young people aged between 10 and 17. |

(iii) Global youth resilience health system risk factors

| Risk | Reference | Conditions/Context |
|--|----------------------|--|
| Trauma through exposure to Ebola epidemic | Levey et al., 2016 | Investigated factors that impact resilience among the youth in post-conflict Liberia. Seventy-five youths in the age range 13 to 18 were recruited to participate in the study and were interviewed to provide insight into factors contributing to resilience among youths. |
| Socioeconomically disadvantaged youth with high HIV prevalence | Cortina et al., 2016 | A study to understand the influence of cognitive styles and psychological |

| Risk | Reference | Conditions/Context |
|--|-----------------------|--|
| | | functioning on risks and resilience of rural South African school students exposed to chronic adversity. A quantitative survey was used to obtain data from 1228 children in Grades 4 and 6, aged 10 to 12 years old. |
| Living with HIV | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |
| Living with HIV/AIDS | Bhana et al., 2017 | Resilience factors in perinatal HIV+ adolescents in South Africa, involving 177 participants. |
| HIV epidemic | Laura, 2016 | Factors that help youths in Rwanda to demonstrate resilience amid chronic crisis characterised by poverty, economic deprivation, social isolation, abuse, and exploitation. The study adopted a qualitative ethnographic approach to generate information on how 25 Rwandan youths who are aged between 9 to 24 years, navigate their life trajectory and social networks over time. |
| Living with HIV/AIDS | Sharp et al., 2018 | Children affected by HIV/AIDS in South Africa in an attempt to understand the resilience factors in them. Using a quantitative research design, 750 respondents between the age of 7 and 11 completed a Strengths and Difficulties Questionnaire and a school-connectedness questionnaire. |
| High rates of infant mortality and disease | Filbert & Flynn, 2010 | To examine developmental and cultural assets as a resilience enabler among Aboriginal Canadian youths living in out-of-home care. The participants comprised 97 First Nations young people aged between 10 and 17. |

(iv) Global youth resilience political system risk factors

| Risk | Reference | Condition |
|--------------------------------|--------------------|--|
| Trauma through exposure to war | Levey et al., 2016 | Investigated factors that impact resilience among the youth in post-conflict Liberia. Seventy-five youths in the age range 13 to 18 were recruited to participate in the study and were interviewed to provide insight into factors contributing to resilience among youths. |

(v) Global youth resilience cultural system risk factors

| Risk | Reference | Conditions/Context |
|---|-----------------------|---|
| In contexts of low family risk, the perception of racism increased the likelihood of poor psychosocial functioning. | Hopkins et al., 2014 | Investigated whether the profile of factors that protects the psychosocial functioning of Australian Aboriginal youth exposed to high risk is the same as those factors promoting psychosocial functioning in youth exposed to low risk. Data was gathered from 1,021 youths aged 12–17 years. |
| <ul style="list-style-type: none"> - Gender - Female stereotypes | Abukari & Laser, 2013 | Gender differences in academic outcomes among Ghanaian youth: the role of protective and risk factors was explored among 276 youths from four colleges in northern and southern Ghana. |
| This pattern of findings indicates that the negative effects of racial discrimination on adolescents' grades may be cumulative, and therefore more evident over time. | Gale, 2020 | Examining black adolescents' perceptions of in-school racial discrimination and the effect of teacher support on the academic outcomes of 374 black African American adolescents. |
| Online discrimination | Tynes et al., 2012 | Online racial discrimination and the protective function of ethnic identity and self-esteem for African American Adolescents. 125 African American youths aged 14 to 19. |

| Risk | Reference | Conditions/Context |
|----------------|-----------------------|---|
| Stigmatisation | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |

4.3.2 Global youth resilience protective resources (enablers) review

Table 6(a): Global youth resilience individual / personal system protective resources

| Enablers | Reference | Conditions/Context |
|---|-------------------------------|--|
| <ul style="list-style-type: none"> - Optimism about the future - Plans for attending college - Skills for blogging <p><u>Unstructured activities:</u></p> <ul style="list-style-type: none"> - Watching television - Playing an instrument for fun - Computer/internet use not for games - Playing video games - Reading a book for pleasure <p><u>Structured activities:</u></p> <ul style="list-style-type: none"> - Going to lessons (music, dance, martial arts, etc.) - Participating in hobbies | Anderson-Butcher et al., 2010 | <p>100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website.</p> <p>This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks.</p> |
| <p>Assets:</p> <ul style="list-style-type: none"> - Easy temperament - Positive coping strategies - High self-esteem - A positive future outlook appears to be just as protective for high-risk black males as for other groups (Li et al., 2007) | Woodland, 2016 | After-school programmes: A resource for young black males and other urban youth. |
| <ul style="list-style-type: none"> - Perceived physical beauty was significantly higher in the female respondents and perhaps played a protective role for female achievement | Abukari & Laser, 2013 | Gender differences in academic outcomes among Ghanaian youth: the role of protective and risk factors were explored among 276 youths from four colleges in northern and southern Ghana. |

| Enablers | Reference | Conditions/Context |
|---|------------------------|--|
| The negative effects of online racial discrimination on African American adolescents' anxiety were significantly minimised for those who reported higher ethnic identity and self-esteem. | Tynes et al., 2012 | Online racial discrimination and the protective function of ethnic identity and self-esteem for African American adolescents – 125 African American youths aged 14-19. |
| They already had strong willpower of coping in a negative environment. | Kaiser & Sinanan, 2020 | Survival and resilience of female street children experiencing sexual violence in Bangladesh: A qualitative study. |
| <ul style="list-style-type: none"> - Being true and accepting the self, elicits protective mechanisms such as happiness, stability and security. - RT (resilience therapy) is a protective process that involves reducing adversity and enabling positive directions for young people's resilience. - Practitioners have an opportunity to enhance resilience in young men by providing chances to develop key life skills, creating systems that celebrate and praise achievements, highlighting behavioural choices available, and introducing functional strategies to support those choices. | Stubbs & Hart, 2020 | Resilience to reoffending: Practice considerations for psychological therapies supporting young men to overcome adversity. |
| Propensity towards <ul style="list-style-type: none"> - altruism and - hope | Mosavel et al., 2015 | Narratives of 112 South African youths. |
| <ul style="list-style-type: none"> - Empathy - Altruism - Confidence in own self-regulatory capacity - Cognitive flexibility - Sense of agency | Levey et al., 2016 | Investigated factors that impact resilience among the youth in post-conflict Liberia. Seventy-five youths in the age range 13 to 18 were recruited to participate in the study and were interviewed to provide insight into factors contributing to resilience among youths. |

| Enablers | Reference | Conditions/Context |
|---|-----------------------------|--|
| Children with positive cognitive interpretations had better psychological functioning on scales of depression, anxiety and somatisation. | Cortina et al., 2016 | A study to understand the influence of cognitive styles and psychological functioning on risks and resilience of rural South African school students exposed to chronic adversity. A quantitative survey was used to obtain data from 1228 children in Grades 4 and 6, aged 10 to 12 years old. |
| <ul style="list-style-type: none"> - A low negative cognition, - High social skills - High confidence (seems to act as a buffer against internalising problems) - Empathy/tolerance (protective factor to externalising symptoms) | Pérez-González et al., 2017 | A study to assess protective factors that promote resilience in child sexual victims. Altogether, the study included 1105 children and youths (590 male and 515 female) aged between 12 and 17 from north-eastern Spain. |
| Personal and emotional strength | Hills et al., 2016 | The lived experiences of street children in Durban, South Africa. Ten adolescents aged between 14 and 18 were selected purposefully to participate in the study. |
| <ul style="list-style-type: none"> - Self-confidence - Achievement driven - Tough personality - Commitment - Internal locus of control | Mampane, 2014 | The resilience of middle-adolescents in a South African township. The Resilience Questionnaire for Middle-adolescents in Township Schools (R-MATS) was used to survey 291 Grade 9, middle-adolescent learners from two black-only township secondary schools. |
| Self-regulation | Bhana et al., 2017 | Resilience factors in perinatal HIV+ adolescents in South Africa, involving 177 participants. Suggests that self-regulation is manifestly related to attaining healthy emotional, behavioural, mental health and cognitive functioning. The findings of this study provided support for evidence-based family interventions that could also promote youth |

| Enablers | Reference | Conditions/Context |
|--|-------------------------|--|
| | | self-regulation skills to enhance the health and mental health of PHIV+ youth. |
| <ul style="list-style-type: none"> - Perseverance and determination - Positive attitudes | Soji, 2018 | A longitudinal study was conducted in Port Elizabeth, Eastern Cape, South Africa 2012 to 2016 to explore the developmental pathways of youths who head their families following the demise of their parents, and how these youths navigate through the challenges associated with their transition to adulthood. The study drew data from the narratives of three South African youths who are the head of their families. |
| <ul style="list-style-type: none"> - A sense of resignation - An ability to create hope | Soji et al., 2015 | To understand the coping strategies and factors that enhanced resilience among six youth-headed families. Data was collected using individual and focus group interviews with six youths who head their families and who have been able to keep their family going after the death of the parents. |
| Desire to change | Kelly & Ward, 2012 | Data from eight youths from the Western Cape, South Africa who are no longer into substance abuse and criminal acts. |
| Sense of hope | Sta. Maria et al., 2014 | Filipino street youths in Manila. Thirty-seven street youths between the age of 12 and 18 were asked questions related to their life experiences on the streets and conditions that help youths leave the streets. |

Table 6(b): Global youth resilience family system protective resources

| Enablers | Reference | Conditions/Context |
|---|-------------------------------|--|
| <ul style="list-style-type: none"> - Positive interactions with parents <p><u>Unstructured activities:</u></p> <ul style="list-style-type: none"> - Completing household chores | Anderson-Butcher et al., 2010 | 100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website. |

| Enablers | Reference | Conditions/Context |
|---|-----------------------|---|
| | | This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks. |
| <ul style="list-style-type: none"> - Students who reported higher levels of family connectedness and school belonging reported fewer aggressive acts. - Family connectedness emerged as a potentially important protective factor for aggressive behaviour among victims of school bullying. It appears that a strong sense of connectedness with parents helps young people to engage with the stressful experience of victimisation in a way that enables them to manage their aggressive behaviour more positively over time and “bounce back” from the adverse experience of victimisation. | Duggins et al., 2016 | <p>Cross-sectional and two-year longitudinal associations between school victimisation and aggression among middle and high school students.</p> <p>The study included 373 students (Grades 7–10) who completed up to three annual surveys.</p> |
| Stable adult support | Hopkins et al., 2015 | <p>Resilient Aboriginal youths were significantly more likely to have lower self-reported asthma symptoms and carer-reported lifetime health problems than less resilient youth.</p> <p>The results support the posited biological pathways between chronic stress and physical health and identify the protective role of social connections that impact not only psychosocial functioning but also physical health.</p> |
| <ul style="list-style-type: none"> - Relationship with the mother and parental educational values were significantly higher in the female | Abukari & Laser, 2013 | Gender differences in academic outcomes among Ghanaian youth: the role of protective and risk factors were explored among 276 |

| Enablers | Reference | Conditions/Context |
|---|---------------------------|---|
| <p>respondents and perhaps played a protective role for female achievement.</p> <ul style="list-style-type: none"> - Among male students, intersections at the microsystem and exosystem levels engendered successful school outcomes. Parental social support and neighbourhood cohesion and collective efficacy were higher among male respondents. The finding was consistent with previous research that identified parental support network (an exosystem) and neighbourhood cohesion and camaraderie (a microsystem) as buffers against adversity that enhance youths' positive development and academic achievement (Werner, 2000). | | <p>youths from four colleges in northern and southern Ghana.</p> |
| <ul style="list-style-type: none"> - Relationships with parents and friends may help to facilitate academic engagement. - Immigrant parents' home involvement (e.g., communication, educational values) is especially pertinent for newcomer immigrants because many foreign-born parents face structural barriers (e.g., language barriers) to school involvement. | <p>Smith et al., 2020</p> | <p>Parents, friends, and immigrant youths' academic engagement: A mediation analysis.</p> |
| <p>Family support</p> | <p>Jain et al., 2012</p> | <p>Many youths who are exposed to community violence are able to adapt successfully over time. Multiwave data from 1166 youth aged 11–16 years was used in Chicago neighbourhoods to examine protective factors</p> |

| Enablers | Reference | Conditions/Context |
|--|-----------------------------|--|
| | | for youth exposed to violence. The findings indicated that positive peers and family support were significantly protective for youths who are witnesses and victims of community violence. |
| Connectedness to family | Pérez-González et al., 2017 | A study to assess protective factors that promote resilience in child sexual victims. Altogether, the study included 1105 children and youth (590 male and 515 female) aged between 12 and 17 from north-eastern Spain. |
| Family networks | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |
| <ul style="list-style-type: none"> - Parental monitoring - Connectedness to the family - Lower levels of parental discord | Tiet et al., 2010 | In Denver, USA, to ascertain the factors that helped youths who maintained favourable outcomes to be resilient, despite being exposed to neighbourhood risks. Predictors of resilience were examined from longitudinal data of 877 youths obtained from the Denver Youth Survey. |
| <ul style="list-style-type: none"> - Kinship support - Parental involvement | Hardaway et al., 2016 | Low-income youth exposed to community violence. |
| <ul style="list-style-type: none"> - Caring and supportive relationships - Positive identification of social support - Timely access to social support | Mampane, 2014 | The resilience of middle-adolescents in a South African township. The Resilience Questionnaire for Middle-adolescents in Township Schools (R-MATS) was used to survey 291 Grade 9, middle-adolescent learners from two black-only township secondary schools. |
| <ul style="list-style-type: none"> - Peer support and social support - Young adolescents perceived their immediate families, particularly their mothers, to be their strongest source of social support. | Humm et al., 2018 | To explore the protective factors that may reduce exposure to and the impact of cumulative violence on mental health among young South African adolescents. Measures of perceived social support, different types of |

| Enablers | Reference | Conditions/Context |
|--|--------------------|---|
| | | violence exposure and symptoms of depression, aggression and conduct disorder were administered to a sample of 615 Grade 7 learners. |
| <ul style="list-style-type: none"> - Family values and loyalty - Ubuntu (refers to culture as well) and relationality - Social networks | Soji, 2018 | A longitudinal study was conducted in Port Elizabeth, Eastern Cape, South Africa from 2012 to 2016 to explore the developmental pathways of youths who head their families following the demise of their parents, and how these youths navigate through the challenges associated with their transition to adulthood. The study drew data from the narratives of three South African youths who are the head of their families. |
| To improve overall wellbeing and mitigate suffering for youth-headed households, it is important to recognise the social relations that may have a positive or negative influence on these youths' ability to navigate their social environment. | Laura, 2016 | Factors that help youths in Rwanda to demonstrate resilience amid chronic crises characterised by poverty, economic deprivation, social isolation, abuse and exploitation. The study adopted a qualitative ethnographic approach to generate information on how 25 Rwandan youths aged between 9 and 24 years, navigate their life trajectory and social networks over time. |
| Strong family and social relationships within the family | Soji et al., 2015 | To understand the coping strategies and factors that enhanced resilience among six youth-headed families. Data was collected using individual and focus group interviews with six youths who head their families and who have been able to keep the family going after the death of their parents. |
| Social support | Kelly & Ward, 2012 | Data from eight youths from the Western Cape, South Africa, who are no longer into substance abuse and criminal acts. |

| Enablers | Reference | Conditions/Context |
|--|-------------------------|--|
| <ul style="list-style-type: none"> - Positive mother-child relationships - Extended family networks - Social support networks | Williams & Bryan, 2013 | Educational resilience of eight urban African American high school graduates from low-income and single-parent families. |
| <ul style="list-style-type: none"> - Absence of an incarcerated family member - High parental monitoring | Stevens et al., 2011 | Included 1297 females in the age range between 17 and 18. The purpose of the study was to investigate factors that make girls differ in risk at the start of adolescence. |
| <ul style="list-style-type: none"> - Caring and familiar relationships (attachment) - Social relationships | Sta. Maria et al., 2014 | Filipino street youths in Manila. Thirty-seven street youths between the age of 12 and 18 were asked questions related to their life experiences on the streets and conditions that help youths leave the streets. |
| <ul style="list-style-type: none"> - Social assistance - Support from family/friends for food, shelter, and money | Karabanow et al., 2010 | Explore how the homeless youth survive in neo-liberal times. In-depth, semi-structured, qualitative interviews were conducted with 34 youths between 16- and 24-years old living in Halifax, and seven service providers in Toronto. |

Table 6(c): Global youth resilience school system protective resources

| Enablers | Reference | Conditions/Context |
|---|-------------------------------|--|
| <p><u>Structured activities:</u></p> <ul style="list-style-type: none"> - Participation in school-sponsored activities - Participation in an organised sports team, playing a sport or exercising - Doing homework or participating in tutoring/homework assistance programmes | Anderson-Butcher et al., 2010 | <p>100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website.</p> <p>This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks.</p> |

| Enablers | Reference | Conditions/Context |
|---|------------------------------------|---|
| <p>Students who reported higher levels of family connectedness and school belonging reported fewer aggressive acts. It appears that support from adults at school might increase the vulnerability of students who have experienced victimisation over time in specific circumstances (thus becoming a RISK).</p> | <p>Duggins et al., 2016</p> | <p>Cross-sectional and two-year longitudinal associations between school victimisation and aggression among middle and high school students. 373 students (Grades 7–10) completed up to three annual surveys.</p> |
| <p>This study found that black adolescents' perceptions of teacher support were a buffer against the negative effects of in-school racial discrimination from teachers, particularly for low levels of discrimination.</p> | <p>Gale, 2020</p> | <p>Examining black adolescents' perceptions of in-school racial discrimination and the effect of teacher support on academic outcomes of 374 black African American adolescents.</p> |
| <p>Connectedness to school</p> | <p>Pérez-González et al., 2017</p> | <p>A study to assess protective factors that promote resilience in child sexual victims. Altogether, the study included 1105 children and youths (590 male and 515 female) aged between 12 and 17 from north-eastern Spain.</p> |
| <ul style="list-style-type: none"> - The results of the study confirmed that school connectedness is a psychological resilience factor in a low-resource setting, regardless of orphan status. - The result of this study draws attention to the fact that the school environment is expected to be a safe and healthy place to serve as a buffer against negative mental health outcomes, regardless of orphan status. | <p>Sharp et al., 2018</p> | <p>Children affected by HIV/AIDS in South Africa in an attempt to understand the resilience factors in them. Using a quantitative research design, 750 respondents between the age of 7 and 11 completed a Strengths and Difficulties Questionnaire and a school-connectedness questionnaire.</p> |
| <ul style="list-style-type: none"> - Supportive school-based relations - Good teaching - Extracurricular school activities | <p>Williams & Bryan, 2013</p> | <p>Educational resilience of eight urban African American high school graduates from low-income and single-parent families.</p> |

Table 6(d): Global youth resilience peer system protective resources

| Enabler | Reference | Condition |
|--|-------------------------------|--|
| <ul style="list-style-type: none"> - Blog use among these adolescents paralleled traditional means of social interactions among youth. They primarily used their online communications to foster and sustain relationships with others. - Having peers to confide in <p><u>Unstructured activities:</u></p> <ul style="list-style-type: none"> - Hanging out with friends - Going to the movies - Going to concerts | Anderson-Butcher et al., 2010 | <p>100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website.</p> <p>This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks.</p> |
| Results showed that in contexts of high family risk, prosocial friendship and low-level socioeconomic status uniquely protected psychosocial functioning. | Hopkins et al., 2014 | <p>Investigated whether the profile of factors that protect the psychosocial functioning of Australian Aboriginal youth exposed to high risk is the same as those factors promoting psychosocial functioning in youth exposed to low risk. Data was gathered from 1,021 youths aged 12–17 years.</p> <p>Only in high family risk contexts</p> |
| Fostering interests that give access to other protective mechanisms such as positive peer relations | Stubbs & Hart, 2020 | Resilience to reoffending: Practice considerations for psychological therapies supporting young men to overcome adversity. |
| Positive peers | Jain et al., 2012 | <p>Many youths who are exposed to community violence are able to adapt successfully over time. Multiwave data from 1,166 youth aged 11–16 years was used in Chicago neighbourhoods to examine protective factors for youth exposed to violence. The findings indicated that positive peers and family support were significantly protective for youth who are witnesses and victims of community violence.</p> |

| Enabler | Reference | Condition |
|-------------------------------|-----------------------|--|
| Peer networks | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |
| Supportive peer relationships | Hills et al., 2016 | The lived experiences of street children in Durban, South Africa. Ten adolescents aged between 14 and 18 were selected purposefully to participate in the study. |

Table 6(e): Global youth resilience community system protective resources

| Enabler | Reference | Condition |
|---|---------------------------|---|
| A dearth of literature exists on protective factors and, more specifically, in community resources that show promise in developing resilience among black males. | Woodland, 2016 | After-school programmes: A resource for young black males and other urban youth. |
| Stable adult support | Hopkins et al., 2015 | Resilient Aboriginal youth were significantly more likely to have lower self-reported asthma symptoms and carer-reported lifetime health problems than less resilient youth. The results support the posited biological pathways between chronic stress and physical health and identify the protective role of social connections that impact not only psychosocial function but also physical health. |
| <ul style="list-style-type: none"> - The relationship quality between youth in foster care and their caseworkers bolsters school engagement during adolescence, thus highlighting the potential role of caseworkers in promoting resilience. - Positive relationships with adults are protective. | Jaramillo & Kothari, 2021 | Supportive caseworkers, school engagement, and posttraumatic symptoms among youth in foster care. |

| Enabler | Reference | Condition |
|---|------------------------|--|
| NGOs She was able to eat, cook and have health benefits from the centre. | Kaiser & Sinanan, 2020 | Survival and resilience of female street children experiencing sexual violence in Bangladesh: A qualitative study. |
| <ul style="list-style-type: none"> - The importance of belonging reinforced how resilience to reoffending is grounded within individual and community exchanges. Belonging somewhat compensated for the loss of family. - Finding belonging was a protective mechanism for the young men. It contributed to their resilience to reoffending and their psychological safety. - The social capital of the young men's networks is instrumental to their resilience as offering essential accessible resources within conditions of adversity. Important resources that are made available by friends, neighbourhood networks and community organisations provided a buffer against adverse conditions and supported their resilience to reoffending. | Stubbs & Hart, 2020 | Resilience to reoffending: Practice considerations for psychological therapies supporting young men to overcome adversity. |
| Community connectedness | Mosavel et al., 2015 | Narratives of 112 South African youths. |
| Involvement in extracurricular activities | Tiet et al., 2010 | In Denver, USA, to ascertain the factors that helped youths who maintained favourable outcomes to be resilient, despite being exposed to neighbourhood risks. Predictors of resilience were examined from longitudinal data of 877 youths obtained from the Denver Youth Survey. |

| Enabler | Reference | Condition |
|---|-------------------------|---|
| Participation in sports activities | Hills et al., 2016 | The lived experiences of street children in Durban, South Africa. Ten adolescents aged between 14 and 18 were selected purposefully to participate in the study. |
| Community support in terms of unconditional cash transfer was a major component of resilience against shocks and daily struggles. | Barrington et al., 2017 | To establish the extent to which unconditional cash transfer programmes could form part of a structural intervention to address poverty. The study explored the experiences of resilience and vulnerability among 11 youth-caregivers who benefited from the Malawi Social Cash Transfer Programme. |
| Safe community | Stevens et al., 2011 | Included 1297 females in the age range between 17 and 18. The purpose of the study was to investigate factors that make girls differ in risk at the start of adolescence. |
| Sense of safety and assurance of survival | Sta. Maria et al., 2014 | Filipino street youths in Manila. Thirty-seven street youths between the age of 12 and 18 were asked questions related to their life experiences on the streets and conditions that help youths leave the streets. |

Table 6(f) *Global youth resilience macrosystem protective resources*

(i) Global youth resilience socioeconomic system protective resources

| Enablers | Reference | Conditions/Context |
|---------------------------|-------------------------------|--|
| Internet, data, computers | Anderson-Butcher et al., 2010 | 100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website. This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks. |

| Enablers | Reference | Conditions/Context |
|--|--------------------------------|---|
| <ul style="list-style-type: none"> - Finding a job - Services must understand the <u>triggers to offend</u>, at an individual and a community level. In the <u>absence of these provisions, prison becomes a protective mechanism</u>, providing warmth, shelter and safety. Therefore, appropriate housing needs to be in place to facilitate the promotion of their resilient selves. | <p>Stubbs & Hart, 2020</p> | <p>Resilience to reoffending: Practice considerations for psychological therapies supporting young men to overcome adversity.</p> |
| <ul style="list-style-type: none"> - Social welfare targeting this group of children should consider providing mechanisms to ensure children can earn money via safe and monitored procedures. - The establishment of social enterprises may be a good avenue to pursue this option. - Social work organisations could provide education and vocational training in specific working skills and enhance basic knowledge of entering the labour market. - Also, more developmental assistance such as independent life skills training and mental health training (e.g., stress management, handling interpersonal relationships) should be provided by social work organisations to help street children adjust to working life. - Additionally, follow-up services should be provided for working children to further help them through the transition period. | <p>Yu et al., 2019</p> | <p>Pathways to delinquency for street children in China: Institutional anomie, resilience and crime.</p> |

| Enablers | Reference | Conditions/Context |
|-------------------------|-------------------------|--|
| Job opportunities | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |
| Work opportunities | Sta. Maria et al., 2014 | Filipino street youths in Manila. Thirty-seven street youths between the age of 12 and 18 were asked questions related to their life experiences on the streets and conditions that help youths leave the streets. |
| Formal or informal work | Karabanow et al., 2010 | Explore how homeless youth survive in neo-liberal times. In-depth, semi-structured, qualitative interviews were conducted with 34 youths between 16 to 24 years old living in Halifax, and seven service providers in Toronto. |

(ii): Global youth resilience education system protective resources

| Enablers | Reference | Conditions/Context |
|--|-----------------------|---|
| <ul style="list-style-type: none"> - The family microsystem was not a significant predictor of student outcomes in this study. This finding contradicts previous research in the United States about the positive and protective effect of family factors on student outcomes (e.g., Gutman & Midgley, 2000; Werner, 2000). - Findings suggest that student achievement may depend less on family socioeconomic status and social network, and more on other exosystems and macro systems of their environment, such as availability and quality of the school, school supplies, and national laws | Abukari & Laser, 2013 | Gender differences in academic outcomes among Ghanaian youth: the role of protective and risk factors were explored among 276 youths from four colleges in northern and southern Ghana. |

| Enablers | Reference | Conditions/Context |
|--|-----------------------|---|
| governing the management and operation of schools. | | |
| Counselling centres | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |

(iii): Global youth resilience health system protective resources

| Enablers | Reference | Conditions/Context |
|--|---------------------------|---|
| <ul style="list-style-type: none"> - Emotional and instrumental support by caseworkers. - Emotional support is part of relationship building, as is instrumental support, whereby the caseworker can act as an “institutional agent” linking the youth to resources within the child welfare system and making decisions that have a significant impact on the safety, permanency and well-being of the youth. | Jaramillo & Kothari, 2021 | Supportive caseworkers, school engagement, and posttraumatic symptoms among youths in foster care. |
| <p>The three elements that make the biggest difference to the reduction of reoffending rates:</p> <ul style="list-style-type: none"> - Stable accommodation - Good health - Sustained employment | Stubbs & Hart, 2020 | Resilience to reoffending: Practice considerations for psychological therapies supporting young men to overcome adversity. |
| Health centres | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |

(iv): Global youth resilience political system protective resource

| Enablers | Reference | Conditions/Context |
|---|------------------------|--|
| Institutional support could work as protective and positive factors in the safeguarding of female street children. | Kaiser & Sinanan, 2020 | Survival and resilience of female street children experiencing sexual violence in Bangladesh: A qualitative study. |
| <ul style="list-style-type: none"> - The pathways to delinquency for street children show that the prohibition of child labour leads to a lack of opportunities for street children to survive through prosocial ways, and the economic activities of the State often result in them having to use crime as a last resort. - Reflections are needed on laws that ban child labour, state intervention, and how to provide street children with conventional survival opportunities. - Overall, though, the rights of children must be protected. | Yu et al., 2019 | Pathways to delinquency for street children in China: Institutional anomie, resilience and crime. |

(v): Global youth resilience cultural system protective resource

| Enablers | Reference | Conditions/Context |
|---|--------------------------------------|--|
| Cultural factors such as ethnic and racial identity have been recognised as unique protective factors among black adolescents. | Woodland, 2016 (Wright et al., 2013) | After-school programmes: A resource for young black males and other urban youth. Explains resilience models. |
| Cultural values | Hills et al., 2016 | The lived experiences of street children in Durban, South Africa. Ten adolescents aged between 14 and 18 were selected purposefully to participate in the study. |
| The importance of cultural capital as a determining factor for reproductive resilience. The findings revealed that cultural capital, in particular, contributed | Pfeiffer et al., 2017 | In Tanzania, to understand resilience factors of female adolescents concerning teenage pregnancy. A cross-sectional cluster sampling approach was used to select 750 |

| Enablers | Reference | Conditions/Context |
|--|-----------------------|--|
| to the resilience of never-pregnant girls, pregnant adolescents and young mothers. | | female adolescents aged 15–19 years who were interviewed about how they mobilise and access resources to avoid or deal with teenage pregnancy. |
| <ul style="list-style-type: none"> - Cultural affiliations and practices - Staying connected to family history, values and principles | Soji et al., 2015 | To understand the coping strategies and factors that enhanced resilience among six youth-headed families. Data was collected using individual and focus group interviews with six youths who head their families and who have been able to keep the family going after the death of their parents. |
| Developmental assets and cultural assets | Filbert & Flynn, 2010 | To examine developmental and cultural assets as a resilience enabler for Aboriginal Canadian youths living in out-of-home care. The participants comprised 97 First Nations young people aged between 10 and 17. |
| Traditional cultural practices such as collective family activity, religious structures and ethnic social systems encouraged adaptive behaviour and hence improved resilience. | Theron et al., 2011 | Four impoverished resilient youths. |

(vi): Global youth resilience spirituality system protective resource

| Enablers | Reference | Conditions/Context |
|---|---------------------------------|--|
| <ul style="list-style-type: none"> - Participation in faith-based activities. | Anderson-Butcher et al., 2010 | 100 teenagers in the USA (13-18 years old) who post blogs were randomly selected from a public blogging website. This sample posted many more comments reflecting prosocial behaviours and protective factors than comments describing negative behaviours and/or risks. |
| Herndon (2003) found a belief in spirituality was an important asset that led to resilient educational outcomes among | Herndon, 2003 in Woodland, 2016 | After-school programmes: A resource for young black males and other urban youth. Explains resilience models. |

| Enablers | Reference | Conditions/Context |
|---|-----------------------|--|
| young black males in college. In Herndon's study, black males who had established spiritual beliefs were also more persistent and had a higher internal locus of control. | | |
| Religious and spiritual beliefs | Adegoke & Steyn, 2017 | A photovoice means of collecting data to examine factors contributing to the resilience of HIV-positive Yoruba adolescent girls in Nigeria. |
| Religious beliefs | Hills et al., 2016 | The lived experiences of street children in Durban, South Africa. Ten adolescents aged between 14 and 18 were selected purposefully to participate in the study. |
| Religious affiliations | Soji et al., 2015 | To understand the coping strategies and factors that enhanced resilience among six youth-headed families. Data was collected using individual and focus group interviews with six youths who head their families and who have been able to keep the family going after the death of their parents. |
| Religious belief | Kelly & Ward, 2012 | Data from eight youths from the Western Cape, South Africa, who are no longer into substance abuse and criminal acts. |

4.3.2.1 Time system

When one reads about intervention programmes, one realises the importance of early intervention – before the accumulated constraints become too challenging. Prevention also becomes an important matter. Programmes that prevent certain constraints to resilience may be more cost-effective than those that focus only on intervention.

4.3.3 Summary of global trends on youth resilience constraints and enablers

Table 7 lists a succinct summary of the constraints and enablers identified in the various systems. This distilled insight is not exhaustive. Constraints/enablers are linked and interdependent, and the exact location of a constraint or enabler in a system is sometimes a matter of opinion. Constraints and enablers do not operate in isolation but as a combination of factors. Furthermore, a single constraint does not

necessarily require a specific enabler. Enablers can sometimes prevent a constraint, minimise the effect of a constraint or promote resilience to act as a buffer against the effects of the constraints. Some researchers are of the opinion that the presence of mild constraints in a youth's life can prepare the youth against the effect of more serious constraints (Wang et al., 2015).

Resilience is decentralised, complex, atypical, culturally relative, and relational. Categorising constraints and enablers could promote a comprehensive understanding of resilience and enable intervention strategies to promote youth resilience. The following framework of global enabler and constraints of youth resilience is proposed based on the synthesis of the findings above. These capture the essence of what constitutes the broad categories of the enablers and constraints of youth resilience:

- Individual constraints/enablers
- Relational constraints/enablers
- Institutional and structural constraints/enablers
- Cultural and spiritual constraints/enablers

Table 7: Global views on youth resilience constraints and enablers

| Global views on youth resilience in terms of the individual / personal system | |
|---|--|
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Constraining emotions: feeling lonely, disliked, discouraged, worried, depressed, worthless, hopeless, bored, angry - Suicidal thoughts - Attempted suicide - Victimization - Exposure to excessive, persistent and uncontrollable levels of stress - Minimal early learning opportunities - Female gender - Rural and remote living - Foster care - Exposure to violence in families - Exposure to abuse in families - Being an immigrant - Being a prior prisoner | <ul style="list-style-type: none"> - Optimism about future - Plans for attending college - Skills for blogging - Perceived beauty for females - High ethnic identity - High self-esteem - Will-power of coping - Accepting him-/herself - Resilience therapy - Key life skills - Altruism - Empathy - Emotional regulatory capacity - Cognitive flexibility - Sense of agency - Positive cognitive interpretations - Low negative cognition - High social skills - High self-confidence |

| Global views on youth resilience in terms of the individual / personal system | |
|--|--|
| Constraints | Enablers |
| | <ul style="list-style-type: none"> - Personal strength - Emotional strength - Being achievement driven - Having a tough personality - Commitment - Internal locus of control - Perseverance and determinations - Positive attitudes - A sense of resignation - An ability to create hope - Desire to change <p><u>Unstructured activities:</u></p> <ul style="list-style-type: none"> - Watching television - Playing an instrument for fun - Computer/internet use not for games - Playing video games - Reading a book for pleasure <p><u>Structured activities:</u></p> <ul style="list-style-type: none"> - Going to lessons (music, dance, martial arts, etc.) - Participation in hobbies |
| Global views on youth resilience in terms of the family system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Angry parents - Too strict parents - Parents who discipline - History of parent substance abuse or illness - Unemployment and underemployment - Violence - Illiteracy - Low levels of education - Teen parenting - Large family size - Sexual victimisation - Substance abuse | <ul style="list-style-type: none"> - Positive interactions with parents - Caring and supportive relationships - Connectedness with parents - Connectedness with family - Stable adult support - A strong relationship with the mother - Parental educational values - Parental social support - Family/kinship support - Family/social networks - Parental monitoring - Low levels of parental discord |

| Global views on youth resilience in terms of the family system | |
|--|--|
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Homelessness - Sexuality - Teenage pregnancy - Youth-headed households - Ineffective parenting - Hardship - A lack of commitment to school - Being raised in a low-income household - Being raised in a single-parent household | <ul style="list-style-type: none"> - Parental involvement - Positive identification of social support - Timely access to social support - Family values and loyalty - Ubuntu (refers to culture as well) - Absence of an incarcerated family member - Support from family/friends for food, shelter and money - Completing household chores |
| Global views on youth resilience in terms of the school system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Under-funded schools - Over-crowded schools - Inadequate schools - Bored at school - School not enjoyable - Not doing homework or being motivated to do homework - Problems with teachers - Behavioural issues at school (being sent to the principal, being disruptive in class) - Worries about academic failure - Excessive pressures to excel, generally in affluent contexts - Exposure to poverty - Trauma - Discrimination - Lack of a mentor - Academic challenges | <ul style="list-style-type: none"> - Participation in school-sponsored activities - Participation in an organised sports team, playing a sport or exercising - Doing homework - Participating in tutoring/homework assistance programmes - Belonging and connectedness to school - Teacher support - A safe and healthy school environment - Supportive school-based relations - Good teaching - Extracurricular school activities |
| Global views on youth resilience in terms of the peer system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Delinquency - Drug use - Gang involvement | <ul style="list-style-type: none"> - Online communications - Having peers to confide in - Positive peer relations |

| Global views on youth resilience in terms of the peer system | |
|---|--|
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Substance abuse - Crime | <ul style="list-style-type: none"> - Supportive peer relations - Peer networks - Hanging out with friends - Going to the movies - Going to concerts |
| Global views on youth resilience in terms of the community system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Poverty - Poor health - Poor nutrition - Violence - Limited access to education - Gender inequality - Sexual harassment - Violence - Crime - Living in the street - Homelessness | <ul style="list-style-type: none"> - Stable adult support - NGOs - Feelings of belonging - Community networks - Community connectedness - Participation in community extracurricular activities - Participation in community sport activities - Community support for a cash-saving scheme - Community safety |
| Global views on youth resilience in terms of the socio-economic system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Use of drugs, alcohol, or cigarettes - Having oral, anal, or vaginal sex - Going to bars and clubs - Multiple risks of poverty, including a lower rate of high school completion, higher rates of long-term unemployment, higher health morbidity and mortality rates, and excessive rates of incarceration relative to the general population - Street children - Domestic violence - Sexual abuse and violence - Poor family relations - Poverty - Maltreatment and exploitation | <ul style="list-style-type: none"> - Availability of internet, data and computers - Employment opportunities (formal or informal) - The establishment of social enterprises - Education and vocational training in specific working skills and basic knowledge of entering the labour market - Developmental assistance, such as independent life skill training and mental health training (e.g., stress management, handling interpersonal relationships) - Follow-up services for youth |

| Global views on youth resilience in terms of the socio-economic system | |
|--|--|
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Crime - Structural disadvantage - Deprivation - Violence - High HIV prevalence | |
| Global views on youth resilience in terms of the education system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Low levels of school performance - High school dropout rates | <ul style="list-style-type: none"> - Availability of schools - Quality of schools - School supplies - National laws governing the management and operation of schools - Counselling centres |
| Global views on youth resilience in terms of the health system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Trauma through exposure to Ebola epidemic - HIV - High rates of infant mortality and disease | <ul style="list-style-type: none"> - Emotional support by caseworkers - Caseworker as an “institutional agent” linking the youth to resources within the child welfare system and making decisions that have a significant impact on the safety, permanency, and well-being of youths - Health centres - Good health |
| Global views on youth resilience in terms of the political system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Trauma through exposure to war | <ul style="list-style-type: none"> - Institutional support - Labour laws - Human rights must be protected |
| Global views on youth resilience in terms of the cultural system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Poor psychosocial functioning - Gender stereotypes - Racial discrimination | <ul style="list-style-type: none"> - Cultural values - Cultural factors such as ethnic and racial identity - Cultural capital |

| Global views on youth resilience in terms of the cultural system | |
|---|--|
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Online discrimination - Stigmatisation | <ul style="list-style-type: none"> - Culture as asset - Cultural affiliations and practices - Staying connected to family history, values, and principles - Traditional cultural practices such as collective family activities, religious structures, and ethnic social systems |
| Global views on youth resilience in terms of the spiritual/religious system | |
| Constraints | Enablers |
| | <ul style="list-style-type: none"> - Participation in faith-based activities - Religious and spiritual beliefs - Religious affiliations |
| Time system | |
| Constraints | Enablers |
| <ul style="list-style-type: none"> - Absence of early prevention and intervention | <ul style="list-style-type: none"> - Presence of early prevention and intervention |

4.4 Local perspectives on youth resilience in South Africa

Table 7 provides an overview of themes and sub-themes derived from the PRA activities and the virtual focus group discussion sessions. Below are the prompts that generated these themes: (see Appendix 3)

4.4.1 Risk related questions

1. In your understanding, what risk is characteristic to youth?
2. What risk can be associated with youths?
3. Mention all youth-related risks –
4. Indicate the type of context the risk can occur/is the risk characteristic to a particular context/situation/position/person etc.

4.4.2 Protective factors

1. In your understanding how can each of the risks you mentioned (even those you can think of / not mentioned) be overcome?
2. What kind of protection is needed for one to overcome the risk? –
3. Is protection characteristic to a particular context / position / person etc.
4. If possible, map the risk to protection needed to overcome it

4.4.3 Resources

1. Think of any youth resources that you know – how do they protect you from risk?
2. What kind of protection do these resources offer to the risk or in general?
3. Do the resources protect you from all the risks (mention risk that is protected)?
4. What else is needed to protect youths from risk?
5. How can youths access protection/resources / or avoid being harmed by risk?

What do you know that can make youths resilient? / What do youths in South Africa need to be resilient?

Table 8: Local youth resilience evidence: Young South African perspectives on systemic enablers and constraints of youth resilience

| SYSTEM | CONSTRAINTS THAT INHIBIT Youth Resilience | ENABLERS THAT PROMOTE Youth Resilience (and buffer against crime, violence, and negative youth development) |
|-------------------|---|--|
| Individual | <ul style="list-style-type: none"> - Negative mental health outcomes (depression) - Disempowered lack of freedom to be yourself (helplessness and hopelessness) - Substance abuse/ Addiction (drugs, cigarettes, alcohol). | <ul style="list-style-type: none"> - Positive self-esteem; self-awareness; strong mindset. - Socioemotional competence (including emotional intelligence) developed over the lifespan (from childhood) - Hope, optimism and expectation drive agency and self-efficacy beliefs and actions (enhanced capability: sufficient knowledge to have the freedom to make the best use of available resources and opportunities); - Prosocial, adaptive choices. |
| Peers | <ul style="list-style-type: none"> - Peer pressure - Bullying - Intergenerational trauma; | <ul style="list-style-type: none"> - Positive, caring and supportive peer relationships. - Intergenerational wellbeing. |
| Family | <ul style="list-style-type: none"> - Abusive homes (including viewing domestic violence as normative and resilient) and patriarchy; lack of family structure (including absent parents; single parenthood). | <ul style="list-style-type: none"> - Parental/caregiver involvement; prosocial values, beliefs and practices; positive intergenerational knowledge; caring and supportive, family structure; openness and dialogue encouraged; |

| SYSTEM | CONSTRAINTS THAT INHIBIT Youth Resilience | ENABLERS THAT PROMOTE Youth Resilience (and buffer against crime, violence, and negative youth development) |
|-----------------------------------|--|--|
| | | equality. |
| Community | <ul style="list-style-type: none"> - Gender-based violence; sexual coercion (bribery: sexual favours for job opportunities); child neglect - Unsafe environment; crime and gangsterism, violence - Racism - Lack of community-level information/ knowledge on available opportunities. | <ul style="list-style-type: none"> - Positive social relations and roles; positive role models, mentors - Active citizenship - Mental health awareness - Challenge stereotypes - Positive social group membership; a sense of cohesion and community (reconciliation, race unity). |
| Structural: Education | <ul style="list-style-type: none"> - Over-crowded classrooms; inequality in education (quality of education differences in public vs private schools). | <ul style="list-style-type: none"> - Safe schools - Curriculum: <ul style="list-style-type: none"> - Reflects the sociocultural identity of education actors - Includes core basic skills e.g., computers and how to use - Makes use of peer education - Vocational learning - Opportunity to excel in your area of interests; cater for all career choices. |
| Structural: Socio-Economic | <p>Structural disparity means a lack of:</p> <ul style="list-style-type: none"> - Developmental programmes - Employment opportunities - Entrepreneurship crisis | <p>Structures that support economic, education, health, protection:</p> <ul style="list-style-type: none"> - Capacity building and awareness workshops - Information campaigns - Creating small, micro, medium enterprises - Adequate access to health care services - Food security - The functionality of police services - Faith-based organisations |

What matters for youth resilience in South Africa:

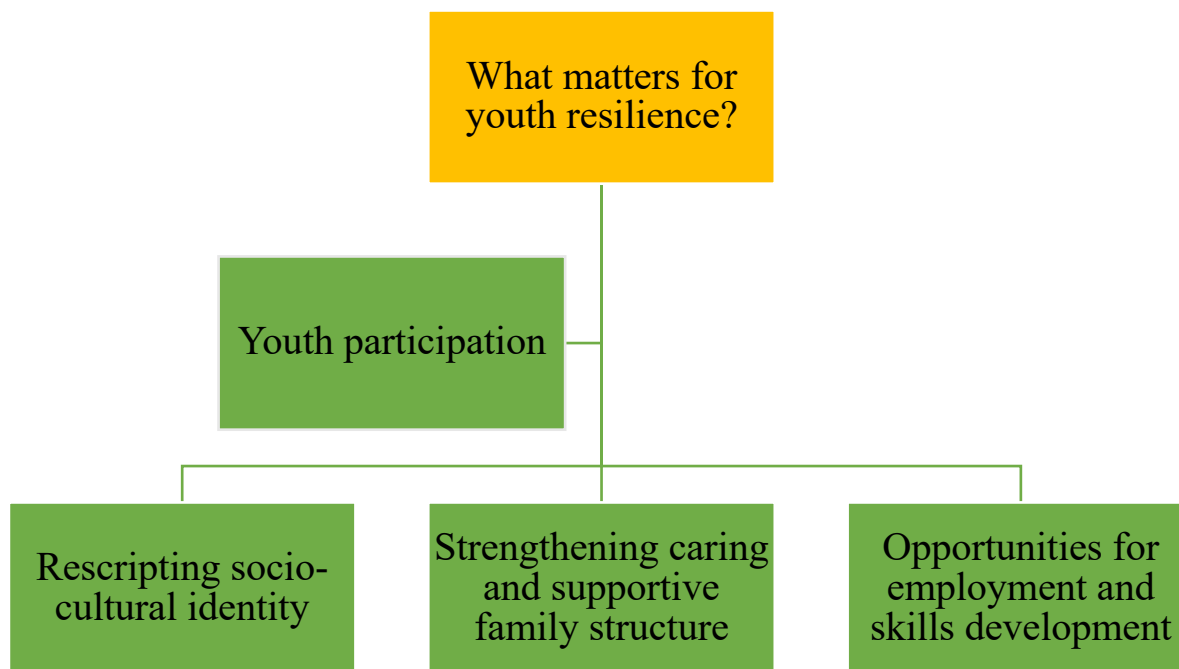


Figure 1: What matters for youth resilience in South Africa

What matters for crime prevention in South Africa:

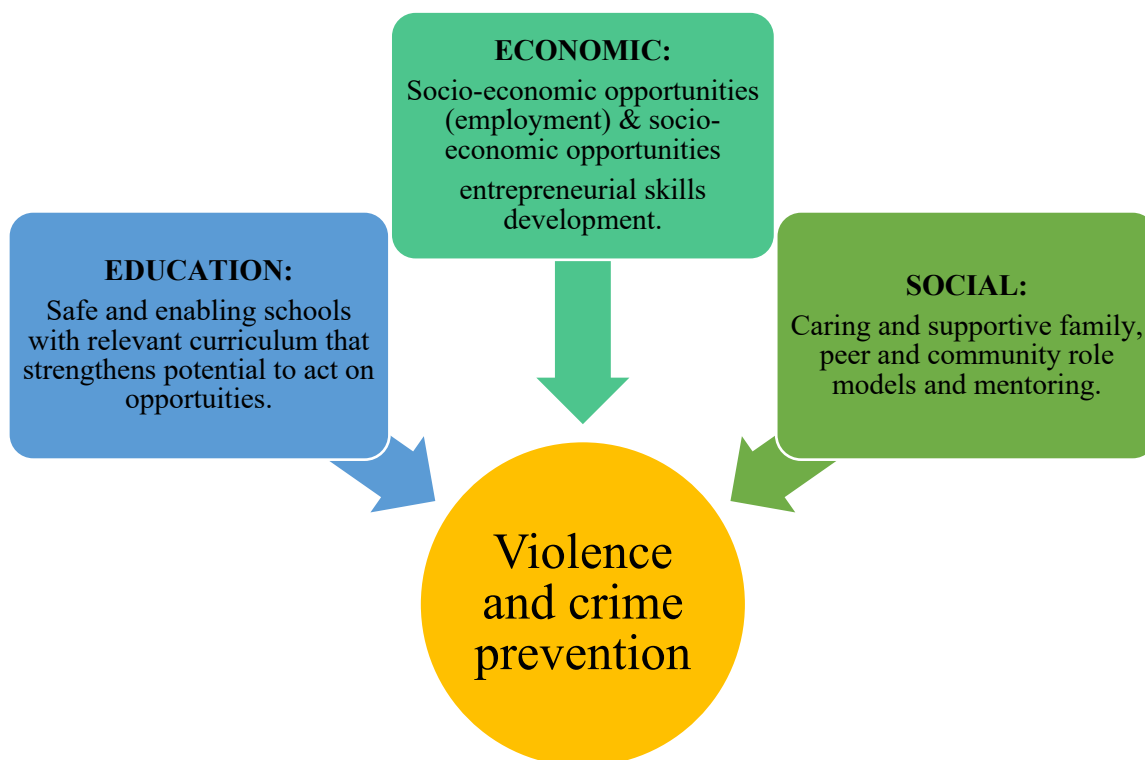


Figure 2: What matters for crime prevention in South Africa

Table 9: Themes and data extracts

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|------------------------------|-----------------------|---|--|--|
| 1. Crime and violence | Gender-based violence | <p>Violence: “The intentional use of physical force or power threatened or actual, against oneself, another person, or against a group or community, that either result in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation (WHO, 1996).</p> <p>Crime: “Crime is a public wrong. It is an act of offence that violates the law of the state and is strongly disapproved by society. Crime is defined as acts or omissions forbidden by law that can be punished by imprisonment or fine. Murder, robbery, burglary, rape, drunken driving, child neglect and failure to pay taxes are examples of crimes” (Thotakura, 2014, p. 196).</p> | Violence and crime of any form, that is perpetrated on any gender. | <p><i>GBV: Which can be in 3 ways. Woman abusing a male, a female abusing another female or both, male, and male. (PRA-GP-P1)</i></p> <p><i>(The awareness that GBV is not always in the form of a man abusing a woman).</i></p> <p><i>So I’m just thinking if we are going to be talking about risk at the relationship level, we could look at things such as your intimate partner violence that happens in relationships and that is something that is not commonly spoken about. (VFG-WC)</i></p> |
| Crime and violence | Child Neglect | | Leaving children alone to care for themselves or to | <i>Neglect, or leaving the child to be looked after by friends... (risk) (PRA-GP-P2)</i> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|---------------------------|--|------------------------------|---|--|
| | | | be looked after by other people; lack of parental presence. | |
| Crime and violence | Abusive homes | | Homes where abuse is taking place. This can be abuse on the parent/s or the children or people living in a particular home. | <p><i>Abusive homes may play a critical role in other young people who might view their lives from a negative perspective. You might find that they commit suicide; others will drop out of school, and there will be a high rate of crime in communities. (PRA-KZN-P4)</i></p> <p><i>For people in my community abuse is normal. They normalize staying in abusive marriages, and the people in the community believe that it is okay to live in fear and to live with the fear of not knowing what might happen to you tomorrow. (PRA-GP-P3)</i></p> <p><i>A lot of people in communities do not understand what abuse is, so if they were to get informed about what abuse is, then people will understand it better. Families need to come together in wanting to gather more knowledge about what abuse is, what causes it, and how to combat it. (PRA-GP-P6)</i></p> |
| Crime and violence | Bribery (sexual favours for job opportunities) | | Include any form of exchange of money or sex as a payment to get a job. | <i>There is this thing that is being normalized in government spaces, and the private sector. It has become a norm that when one applies for funding to start a business or a project,</i> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|---------------------------|---|---|--|--|
| | | | | <p><i>an exchange of souls must be done. Why do we have to exchange souls so that we can be funded? (PRA-GP-P4)</i></p> <p><i>Exchange souls= Offer sexual favours to get funding (have sex; sexual favours for opportunities).</i></p> |
| Crime and violence | Crime and violence | | Include Poverty, nepotism, housebreaking, vandalising... which leads to crime. | <p><i>Poverty can lead to social crimes. If you have no skills, then you will not get a job to ensure that you sustain yourself. (PRA-UKZN-P2)</i></p> <p><i>Housebreaking, vandalising, and violence</i></p> <p><i>Nepotism: Nepotism in relation to the unemployment factor that we previously spoke about. People are selected based on who they know, connections, and not what you have. (LP-PRA-P2)</i></p> |
| 2. Mental health | Peer pressure; positive self-esteem; self-awareness; strong mindset; mental health (depression); bullying | “Mental health is a dynamic state of internal equilibrium which enables individuals to use their abilities in harmony with universal values of society. Basic cognitive and social skills; ability to recognize, express and modulate one’s own emotions, as well as empathize with others; flexibility | Any form of mental health-related topic. | <p><i>Mental health issues and free counselling. In our country counselling is available not at the level that is required. We need to have more counsellors available to assist people, especially the youth. (PRA-UKZN-P2)</i></p> <p><i>The lack of mental health awareness within our communities. Most of us live in rural areas where there is no mental health awareness. (PRA-GP-P1)</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|--------|------------|--|----------------------------------|--|
| | | <p>and ability to cope with adverse life events and function in social roles; and harmonious relationship between body and mind” (Galderisi et al., 2015, p. 232).</p> | | <p><i>We also do not understand mental health. We do not take it as a critical thing within our communities. (PRA-GP-P5)</i></p> <p><i>4. Peer pressure is a huge factor. The environments that we find ourselves in put us under pressure because we want to emulate what other people are doing. (PRA-GP-P4)</i></p> <p><i>5. The youth must be internally motivated to overcome the risks that they are exposed to (positive self-esteem and self-awareness). (PRA-GP-P6)</i></p> <p><i>6. Bullying. Bullying being direct bullying and not cyber-bullying. We thought of bullying in a case where young boys are out there playing, and there is always that one boy that wants to claim the territory, the aggressive one. Bullying can also lead others into substance abuse. You get one leader who has the cigarette with him, coercing the other person into smoking. When you listen to stories of people on how they started smoking you will hear them talk about how they started smoking, and they say that they had a leader who came with a cigarette and then told them that they had to smoke the cigarette. This is also a huge risk, and this may lead the coerced youth into adopting such behaviour becoming criminals at a very young age (PRA-LP-P1)</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|--------|------------|------------------------------|----------------------------------|--|
| | | | | <p>7. <i>Depression, (mental health issues) have become such a risk as they are in our everyday lives. (PRA-GP-P3)</i></p> <p>8. <i>Positive self-esteem, self-awareness, and a strong mental capacity (as a protective factor against mental health issues). (PRA-GP-P2)</i></p> <p>9. <i>I think another risk that we often overlook is the mental health aspect you know that comes with being at the forefront or that comes with doing the work, as much as we are speaking on resilience, that you know mental health is still such a huge issue, because of stigmatisation, because you know, people still believe that it is a white people's thing. More and more young people are drowning in depression and anxiety and so many disorders. If someone is suffering from a mental health condition, it's somewhat, it sometimes tampers with their progress and how they then start to do their work. So, I think we need to also look at mental health as a risk. Just to make an example. We went into a hard lockdown last year. People's lives changed drastically, there was just a lot that was happening, and we were more concerned about you know people staying at home, and staying safe, but not realising that some of these people are</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|--|--|--|--|--|
| | | | | <p><i>staying in households or in homes with abusers. People are staying home living in absolute poverty, these people lost their jobs, there was an anxiety that came with COVID 19 because nobody knew what it was ... how long it's going to stay. So I think post you know the pandemic, we are going to have a high rate you know of mental health issues and I think it's imperative that we start working towards addressing mental health now so that by the time we reach an end this time ..., if we do get to that point, people are equipped as to how do I not start navigating you know life post the pandemic. (VFG-WC)</i></p> |
| <p>3. Family background/ Upbringing</p> | <p>Parental involvement; morals and values; generational knowledge; absent parents; family structure</p> | <p>People that live together within a household as a unit.</p> | <p>Include anything that has been said that relates to the family, background, and one's upbringing.</p> | <p><i>Our parents and grandparents have knowledge with them that can serve as protective factors. When we listen to their teachings, we can gather morals and values that we as the youth can be able to use for ourselves, and their teachings can protect us from the risks that we are facing because whenever we face situations, we can always refer to what they taught us, and then apply that knowledge to our situations (generational knowledge) (PRA-GP-P5)</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|------------------------------------|--|---|--|---|
| 4. Context/ Environment | Environmental and current affairs; racism and discrimination | Environment: The surroundings in which organisms/ people live. | Include any mention of the context and environment. | <p><i>Discrimination still exists, even though they are advocating that there no longer is discrimination, but there is still a part where discrimination exists in our society. (PRA-LP-P2)</i></p> <p><i>If we look at risks within a community that's where you would find your stigmatisation, your exclusion, your discrimination (VFG-NC)</i></p> |
| 5. Resources | Support and economic opportunities; capacity building and awareness workshops; information campaigns; creating small, micro, medium enterprises (SMME); lack of education and opportunities; | “A resource is considered a source or supply from which benefits are produced. The resources human use includes materials, water, energy, minerals, services, staff, knowledge or others that can be transformed to produce benefits” (Chan, 2016, p. 27) | Include anything that is a resource that has been mentioned. | <p><i>No opportunities or funds to further our education: If there are no funds to study then you need to go look for a job, but at the same time there are not enough job opportunities. This will then leave you feeling helpless because you will not have anything to do, and you may feel like your life is just going around in circles. (PRA-UKZN-P4)</i></p> <p><i>We should use religious spaces as support structures. We should use these spaces to do things like offer more counselling. If a priest or pastor talks about counselling, then people are more likely to go for counselling. (PRA-UKZN-P1)</i></p> <p><i>The functionality of police services: To make sure that they protect citizens against gender-based violence and violence of all forms, and crime. (PRA-UKZN-P3)</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|--------|--|------------------------------|----------------------------------|--|
| | <p>exposure to poverty; adequate access to health care services; functionality of police services; religious organisations</p> | | | <p><i>Campaigns can also be created to bring awareness and to provide information on matters regarding abuse. (PRA-LP-P1)</i></p> <p><i>Lack of opportunities: there need to be more establishments, like the youth centre in more areas, so that kids can know that there is something else to look forward to. (PRA-UKZN-P1)</i></p> <p><i>When it comes to the risk of lack of skills, one might argue that there are TVET colleges, but the problem arises once you are done studying, and you have acquired those skills. For example, after studying you may want to start your own plumbing business, only to find that you do not have the resources to do so (resources such as funding). (PRA-UKZN-P5)</i></p> <p><i>I think poverty has done havoc on our people and it's ..., you need a decent sort of living standard you know and certain factors that you know, because it contributes to a lot and the way that you think and the way that you survive and the way that you ..., you know so poverty as an external factor contributes a lot to development. (VFG-EC)</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|--|----------------------------------|---|---|--|
| | | | | <p><i>I am coming from a very deep rural areas, it is always said and I can say we have a small primary school there and you know, a clinic, okay it is used as a common clinic by various villages and you manoeuvre and drive around the other villages, all you see is poverty guys, we just under resourced and hence I am saying I think like at some point I am out of this world. We are not part of South Africa actually. (VFG-MP)</i></p> <p><i>I think as young people to be resilient what they need now is resources, and they need to be empowered. Is one thing to put somebody in deep water and say the person must swim out, while we know ..., the person will know the goal is to swim out and they need to be out there. But now we don't give them the equipment to swim and manoeuvre around and to direct them, how to go about. We need the information as well to reach young people. (VFG-EC)</i></p> |
| 6. Substance abuse/ Substance addiction | Drugs; cigarettes; alcohol | “Loss of control over drug use, or the compulsive seeking and taking of drugs despite adverse consequences” (Zou, et al., 2017, p. 36). | Include anything that has been said on drugs, cigarettes, and alcohol. As well as anything that has | <i>Substance abuse (as I said earlier on that the youth are easily influenced), so if they share the same thoughts, beliefs, and values, then obviously with substance abuse is something that can play a critical role in expressing how peer pressure</i> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|---|--|--|---|---|
| | | | <p>been said about peer pressure and how it has led to the use of substances.</p> | <p><i>comes about. (PRA-UKZN-P2)</i> <i>I believe that one of the challenges that South African youth are currently facing if the world, is substance abuse, be it alcohol, be it drugs, you know you name them. They are really struggling with them, and I believe it's a great concern to us. (VFG-NC)</i></p> |
| <p>7. Lack of awareness/ Ignorance</p> | <p>Negligence and ignorance of the youth; lack of information; lack of knowledge</p> | <p>“Awareness in general means, knowledgeable being conscious; cognizant, informed alert. Awareness is the state or ability to perceive, to feel, or to be conscious of events, objects, or sensory patterns” (Gafoor, 2012, p. 2)</p> | <p>Include anything that focuses on the lack of awareness, knowledge, and ignorance of the youth.</p> | <p><i>Lack of knowledge and a lack of awareness of existing opportunities. (PRA-GP-P6)</i> <i>Ignorance: Some of us as the youth are ignorant, we do not take things seriously (our future and lives). (PRA-GP-P3)</i> <i>Negligence and ignorance of the youth can also be a risk factor because if the youth do not actively participate in the community, then this is a hindrance, and we are not moving forward. (PRA-LP-P2)</i></p> |
| <p>8. Self-identity</p> | | <p>“Identities are the traits and characteristics, social relations, roles, and social group memberships that define who one is” (Oyserman, Elmore & Smith, 2012, p. 69).</p> | <p>Include anything that addresses self-identity, self -knowledge and awareness.</p> | <p><i>We need to firstly understand what social identity means. It is either in the context of the environment, socially, resourcefulness, and how that affects the person as an individual. Social identity is also about the level that an individual identifies themselves to be at when it comes to social clusters/social level.</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|---------------------|---|-----------------------------------|--|---|
| | | | | <i>When we defined social identity as a group, we said that it refers to you as a person and you trying to find yourself. Your abilities, capabilities, and who you are and what you stand for. (PRA-GP-P5)</i> |
| 9. Education | Curriculum; vocational learning; over-crowded classrooms; inequality in education (the differences in public vs private schools); peer education; formal and informal education | The process of gaining knowledge. | Include anything that addresses anything related to education, school, and learning. | <i>The life skills subject taught at schools these days does not go in depth with the information that it teaches its learners. Life skills education is tied with vocational learning where we are learning more about life, instead of just being thrown into a way of doing things. (PRA-GP-P4)</i> <i>Life skills education should become a priority. Life skills education is tied with vocational learning where we are learning more about life, instead of just being thrown into a way of doing things. As kids we go from school to university where we are supposed to make our own decisions. You are asked to make these life changing choices, and you need to do so on your own. Therefore, there needs to be education in school about the choices that you would have to make later in life, and the effects that these choices will have on you, and your family. So, we need to have more education that focuses on that. (PRA-UKZN-P2)</i> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|--------|------------|------------------------------|----------------------------------|--|
| | | | | <p><i>Peer education matters: teenage pregnancy and child abuse. Peer education often focuses on these two matters. (PRA-LP-P1)</i></p> <p><i>No opportunities or funds to further our education: If there are no funds to study then you need to go look for a job, but at the same time there are not enough job opportunities. (PRA-UKZN-P3)</i></p> <p><i>Inequality in education (the differences in public vs high schools, as well as those differences that exist in the different higher education institutions). There were news circulating around stating that most universities start enrolling learners that come from private schools, and then fill up space by enrolling those that come from public schools. This shows that there is still a lot of inequality that exists in our education system. (PRA-UKZN-P5)</i></p> <p><i>The strengthening of the education system: The education system needs to be aligned with life and soft skills, so that young people can be able to envision themselves doing better due to the skills that they will be having. (PRA-UKZN-P4)</i></p> <p><i>Easy access to vocational education: You cannot use science as a measure to how intelligent a person is. You cannot judge</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|--------|------------|------------------------------|----------------------------------|--|
| | | | | <p><i>a fish on its ability to climb a tree. Some people would be good at farming or carpentry, and we need these people. We cannot say that just because they are failing at science, then they are failing at life. There needs to be more resources that will make it easier for kids at a younger age to explore their creativity. (PRA-UKZN-P2)</i></p> <p><i>Education: If there is a strong guidance in education, then there will be opportunities created for young people. (PRA-UKZN-P2)</i></p> <p><i>Lack of formal or informal education (risk factor) and how social media can be used as a platform to teach others or make them aware of certain things that are happening in the community) (protective factor) (PRA-GP-01)</i></p> <p><i>Formal (acquiring a certain qualification) or informal education (using social media and how you can use this platform to teach others or make them aware of certain things that are happening in the community). (PRA-UKZN-P4)</i></p> <p><i>Education prevents students from dropping out of school through helping them to cope with the different challenges that they are exposed to in their lives. (PRA-UKZN-P3)</i></p> |

| Themes | Sub-themes | Definition of the main theme | Inclusion and exclusion criteria | Data extracts |
|-----------------------|----------------------|---|--|---|
| 10. Mentorship | Role models, mentors | A mentor is an individual with expertise who can help develop the career of a mentee. A mentor has two primary functions for the mentee. The career-related function establishes the mentor as a coach who provides advice to enhance the mentee's professional performance and development. The psychosocial function establishes the mentor as a role model and support system for the mentee. Both functions provide explicit and implicit lessons related to professional development as well as general work-life balance" (American Psychological Association, 2006, p. 5). | Include anything that addresses mentorship/mentoring | <i>Lack of mentorship. This is at the relationship level because if our elders are not really advocating things that are positive in our lives, then our lives will just be complicated, and bad. Parents must also accept when they are wrong. Lack of mentorship from elders can be a risk factor. (PRA-LP-1)</i> |

5. Discussion of all the themes and subthemes in the table

5.1 Theme 1: Crime and violence

This theme revealed that many young people in South Africa are exposed to gender-based violence (GBV), intimate partner violence (IPV) and community violence. Despite exposure to violence, young people in South Africa were able to adapt successfully over time. Protective resources that enable young people to thrive amidst crime and violence include peer networks, a strong relationship with mother, emotional regulatory capacity, cognitive flexibility, participation in community sports activities, community support for a cash-saving scheme, community networks. There are similarities in the findings of this present study with other studies from literature. For instance, Jain et al. (2012) noted that many youths who are exposed to community violence are able to adapt successfully. Their findings indicated that positive peers and family support were significantly protective for youth who are witnesses and victims of community violence.

Similarly, Pérez-González et al. (2017) conducted a study to assess protective factors that promote resilience in sexual victims. Firstly, the results of their study revealed that all forms of sexual victimisation were associated with higher levels of emotional and behavioural problems. However, the presence of a low negative cognition, high social skills and high confidence seem to act as a buffer for internalising problems. Furthermore, empathy/tolerance, connectedness to school, connectedness to family acted as protective factors in connection to externalising symptoms.

5.2 Theme 2: Mental health

The findings of previous studies explored the protective factors that may reduce both exposure to and the impact of cumulative violence on mental health among young people (Humm., 2018; Sharp et al., 2018). The result of a study by Sharp et al. (2018) draws attention to the fact that the school environment is expected to be a safe place and healthy to serve as a buffer against negative mental health outcomes regardless of orphan status. Moreso, Bhana et al. (2016) reported that self-regulation is manifestly related to attaining healthy emotional, behavioural, mental health and cognitive functioning of PHIV+ youth. Following the existing findings from previous studies, the finding of our study also confirmed that a safe and healthy school environment, counselling centres and health centres are protective resources for mental health issues among young South African adolescents.

5.3 Theme 3: Family background/Upbringing

This theme unveiled the developmental pathways of young people who head their families following the demise of their parents and how these young people navigate through the challenges associated with the transition to adulthood. Analysis of the data obtained from the narratives of the participants in this study revealed that optimism about the future, the willpower of coping, positive attitudes, high self-

confidence, ability to create hope and staying connected to family history, values and principles. This theme is in line with the findings of Soji (2008) who reported that family/social networks perseverance and determinations, family values and loyalty, Ubuntu and relationality, social networks were factors that influence resilience as youth who head households navigate their unique pathways to adulthood.

The findings of our study also correlate with the report of Laura (2016) who reported that to improve overall wellbeing and mitigate suffering for youth-headed households, it is important to recognise the social relations that may influence positively youths' ability to navigate their social environment.

5.4 Theme 4: Context/Environment

Racism and discrimination: The participants revealed that all forms of racism and discrimination are associated with higher levels of emotional and behavioural problems.

5.5 Theme 5: Resources

Participants in this study expressed that, rising poverty and widening income inequality pose a major risk to young people's development in South Africa. From the findings of this study, it appeared that Young people thrive amidst limited resources with the aid of enablers such as optimism about the future, employment opportunities (formal or informal), the establishment of social enterprises, education and vocational training in specific working skills and basic knowledge of entering the labour market, developmental assistance, such as independent life skill training and mental health training (e.g., stress management, handling interpersonal relationships).

These findings coincide with the report of Mosavel et al. (2015) who explored the narratives of South African youths to gain a better understanding of how South African Youths thrive amidst adversities such as structural disadvantage, poverty, deprivation and violence. Results of their study indicated that community connectedness, hope and altruism were frequent in youth's responses, and it could be used to help communities and individuals become more resilient.

5.6 Theme 6: Substance abuse

The findings of this study indicated that drug and substance use is a risk factor among young people in South Africa and is connected to criminal acts. However, protective resources that enabled young people to become resilient against substance and drug abuse risk factors are personal and emotional strength, connectedness with parents, connectedness with family, participation in community extracurricular activities, cultural values and religious and spiritual beliefs.

This finding resonates with the findings of research conducted by Tiet et al. (2010) in Dever, USA to ascertain the factors that make young people to maintained favourable outcomes, despite being exposed to neighbourhood risks such as substance and drug abuse. The findings of the study showed

that Resilience was longitudinally predicted by family and teacher connectedness, involvement in extracurricular activities, lower levels of parental discord, and being less involved with delinquent peers. This finding implies that early intervention to improve both teacher and family bonding and efforts to limit involvement with delinquent's peers could help strengthen the resilience of high-risk youths.

This finding is also consistent with the report of Hills et al. (2016) who explored the lived experiences of street children in Durban, South Africa Violence. Their findings revealed that firstly, the incidence of violence, crime, drug and alcohol use were reoccurring decimal among street children in Durban, South Africa. However, despite these challenges young people were able to survive through, supportive peer relationships, and participation in sports activities.

5.7 Theme 7: Lack of awareness/Ignorance

The youth ambassadors stated that there is a general lack of awareness of opportunities among the youth. Lack of information and access to support services creates more challenges for youth and this could be an enabler of youth resilience if it is properly addressed.

5.8 Theme 8: Self-identity

The youth ambassadors indicated that the identity that youth ascribe to themselves either individually or as a group determines how they respond to risks and resources in their environment.

5.9 Theme 9: Education

Vocational education: Vocational education was deemed as an important part of youth development and resilience by the youth. Access to education was cited as being critical for youth resilience.

Equitable provision of resources: Resources in school constituted a challenge for the youth ambassadors who believed that schools need to be better resourced for youth to thrive in the education system.

Over-crowded classrooms: The youth ambassadors stated that overcrowded classroom makes efficient learning for learners difficult. The school environment is expected to be a safe and conducive place. However, they revealed that this is not the case for some learners who received lessons in an overcrowded classroom as a result of a lack of facilities. Inequality in education (the differences in public versus private schools).

5.10 Theme 10: Mentorship

Role models, mentors: Participants indicated that an essential component of resilience against behavioural problems is mentorship. Most participants believed that when more experienced adults share knowledge, skills, and perspectives on behavioural problems such as aggression, adjustment

problem, conduct problem, criminal behaviour, and prostitution, it helps to raise awareness about the nature and consequences of youth actions that are capable of putting youth at risks.

5.11 Conceptual framework to address individual, cultural, and systemic risk associated with youth development

Based on findings from empirical studies on risks and protective factors experienced by South African youths, the current study proposes a conceptual framework that includes a set of ideas and practices that promote resilience. A resilience framework is understood as a set of strategies and actions to address individual, cultural, and systemic risks, including violence and crime associated with youth development. The resilience conceptual framework in Figure 3 depicts how the interplay of risk and protective factors along with the individual, family and relationship, community, and society levels flow from one to the other, and how each connects to and is interlinked to addressing individual, the cultural and systemic risk associated with youth development. Specifically, this resilience conceptual framework captures the interconnection between those factors that influence risk factors and those that strengthen resilience among youths to prevent violence and crime in South Africa.

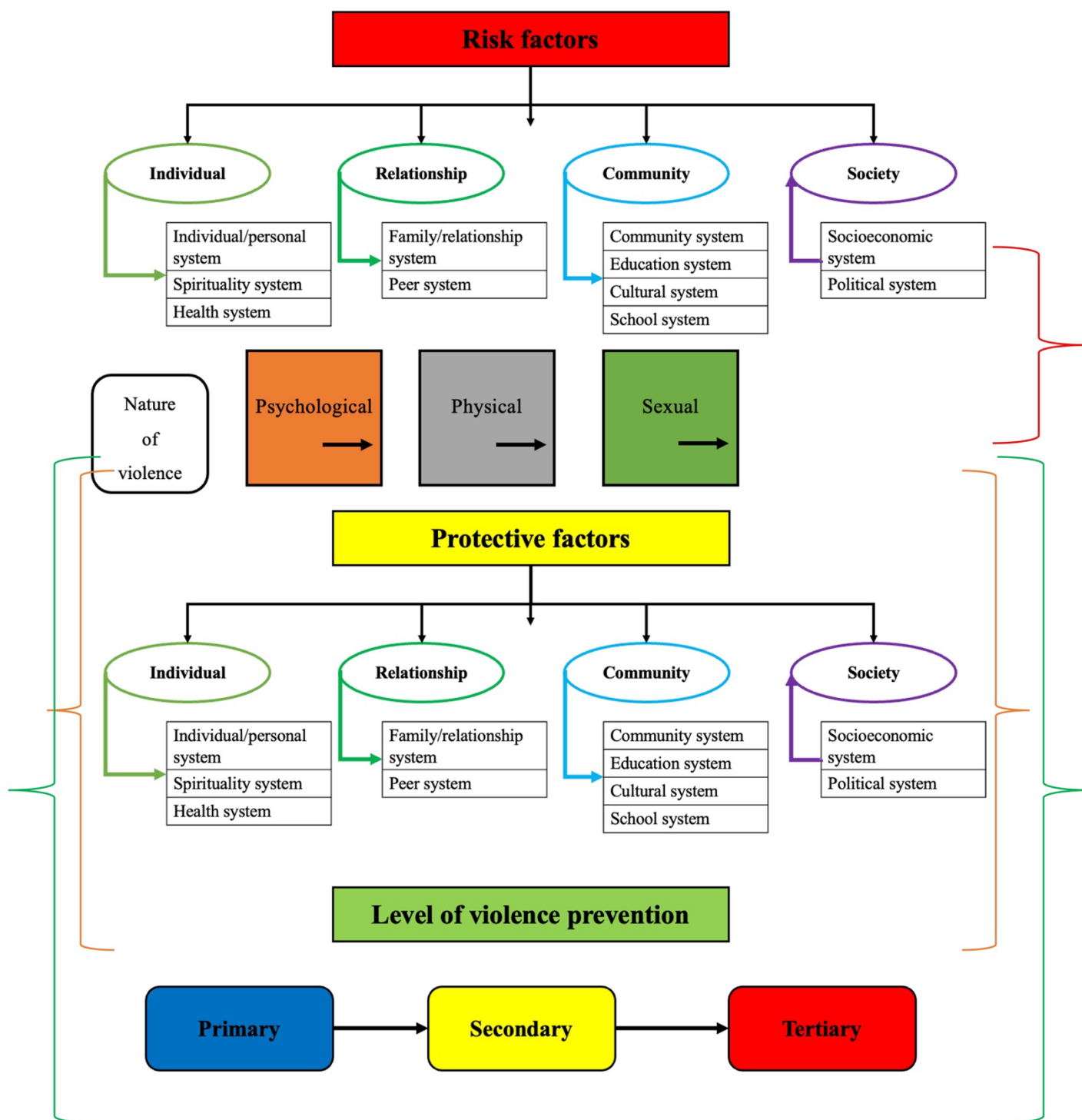


Figure 3: A conceptual framework to address individual, cultural, and systemic risk associated with youth development

5.12 Strategies to reduce risk factors and prevent youth violence in South Africa

To reduce risk factors, enhance resilience, and prevent violence and crime in accordance with the conceptual framework depicted in Figure 3, the following five strategies are proposed:

5.12.1 Strategy 1: Identify risk and protective factors

It is imperative to identify factors that, if present in an individual's life, may raise the chances of them facing challenges and difficulty. These risk factors may be present at the individual level (individual/personal system, spirituality system, health system); at the family and relationship level (family/relationship system, peer system); at the community level (community system, education system, cultural system, school system); and at the society level (socioeconomic system, political system). The identification of risk factors will give a better understanding of the challenges confronting youths, as well as the opportunity to design and implement prevention initiatives. On the other hand, identifying protective factors will also allow pinpointing resources that need to be harnessed and addressed to empower youths to develop resilience.

For instance, to reduce risks at the individual level, such as living with HIV, mental health issues, academic challenges, low level of school performance, learning difficulties, aggression, conduct problems, criminal behaviour, heightened behavioural and academic performance problems, neglect and suicide risks, it is necessary to identify corresponding protective factors at the individual level. Examples of such protective factors include confidence in own self-regulatory capacity, cognitive flexibility, sense of agency, high expectations, toughness and commitment, perseverance and determination, future dreams, ability to create hope, religious and spiritual beliefs, personal and emotional strength, personal disposition and habit, desire to change, positive attitudes, resourcefulness, and goal orientation.

5.12.2 Strategy 2: Determine the nature of violence

Preventing crime and youth violence requires understanding first of all the nature of violence. Youth violence can be categorised into three categories:

Physical violence: This form of aggression includes any action that causes physical harm, and at the extreme, the murder of the victim. For youth, this may mean receiving any sort of beating by an adult, or youths physically assaulting each other. Examples of physical violence include delinquency, gang involvement, domestic violence, parental maltreatment, intra familiar violence, interpersonal violence, and exposure to community violence.

Sexual violence: This type of violence involves subjecting a victim to sexual activity against their will. Sexual violence can occur within families and is usually, although not always, perpetrated by males. Examples of sexual violence include dating violence, sexual victimisation, and youth intimate partner violence.

Psychological violence: This type of violence involves acts of harassment, threat or intimidation intended to degrade the victim, exert control over them and stand in the way of their autonomy. Examples include school bullying, discrimination, and harassment.

5.12.3 Strategy 3: Establish risk factors peculiar to each type of violence

Once the nature of violence has been determined, it becomes important to link risk factors that are peculiar to each type of violence in order to understand factors that influence or make the youth vulnerable to violence and crime. For instance, risk factors deriving from close personal relationships such as sexual victimisation, teenage pregnancy, dating violence, and youth intimate partner violence could be clustered under the heading of sexual violence. Risk factors deriving from personality traits and dispositional characteristics such as adjustment problems, conduct problems, aggression and criminal behaviour could be linked to physical violence. More so, factors that derive from the immediate social environment and overarching factors affecting the whole of society – such as structural disadvantage, stigmatisation, poverty, deprivation, discrimination, socioeconomic disadvantage, and cultural oppression – could be associated with psychological violence.

5.12.4 Strategy 4: Identify protective factors for each type of violence

It is necessary to identify resources at the disposal of youths that could work to reduce the chances of youths adopting violent behaviour or becoming vulnerable to committing a crime. To prevent physical violence, individual protective factors that could regulate individual temperaments such as coping style, emotion regulatory style and social cognitive processing style, personal and emotional strength, self-regulation, positive attitudes should be identified and promoted.

To prevent sexual violence, protective factors at the relationship level that could enhance positive and trusting relationships with individuals should be identified and strengthened. Lastly, to reduce psychological violence, community and societal protective factors that reduce discrimination, harassment, and income inequalities, and that can boost youth self-esteem should be identified. Such factors could include the provision of work opportunities, policies that support youth participation in economic decision making, and access to post-secondary education opportunities.

5.12.5 Strategy 5: Develop primary, secondary, and tertiary prevention programmes

Once risk and protective factors have been identified, the nature of violence has been determined, and risk and protective factors have been linked to each type of violence, then efforts should be enforced to prevent youth violence, reduce risks factors, and strengthen resilience among youths, based on this progression. Such efforts could be implemented on three levels namely primary, secondary and tertiary prevention.

Primary prevention: Emphasise efforts that seek to stop or prevent risk factors that could lead to violent behaviour from occurring in the first place. Actions may be focused on childhood, through adolescence, and on parents or principal caregivers. Interventions may include parenting initiatives, life and social skills training for children and youth, and mentoring programmes.

Secondary prevention: Try to halt the progression or interfere in the process where risk factors are operating. This could be achieved by early identification of risks, followed by prompt identification, and strengthening of protective factors. Examples include a home visiting programme, drug abuse prevention programmes, gender violence prevention programmes, after-school programmes, poverty alleviation programmes and opportunities for prosocial involvement.

Tertiary prevention: Enable youths to cope better with the risks at hand. Tertiary prevention also involves the rehabilitation of people with an established violent behaviour or those affected as victims. This aim could be achieved by providing health and counselling centres, as well as social services in the community (e.g., rehabilitation centres for drug users, refuge for orphans and rape victims).

6. Recommended policies to address risks, optimise protective factors, and provide resources

In this section, we recommend a set of policies, actions, and prevention strategies to eliminate or reduce risk factors and to optimise protective factors. Risk prevention entails strategies and actions to prevent risk factors from manifesting in the first place or to halt the progression of risk factors once they have been established. It requires early identification of risk factors and eliminating or reducing the underlying risk factors that could put the youth in danger or subject them to adversity. In other words, risk prevention is designed to address and change the conditions that are capable of making the youth vulnerable to adversities. The following are some of the risk prevention strategies recommended:

6.1 Mentoring programme

A fundamental component of a mentoring programme is to raise awareness about the nature and consequences of youth actions that are capable of putting youths at risk. It could involve a partnership in which more experienced adults share knowledge, skills, and perspectives to boost the youth's positive development. The proposed mentoring programme can be designed to focus on academic-related risk at the individual level, such as academic challenges, low level of school performance, high dropout rates, poor educational outcomes, and adjustment problems. The mentoring programme could also be designed to address behavioural problems such as aggression, adjustment problems, conduct problems, criminal behaviour, and prostitution. All of these constitute risk factors at the individual level. The programme could also aim to improve protective factors in general to promote overall healthy youth development.

6.2 Poverty alleviation programme

In South Africa, rising poverty and widening income inequality pose a major risk to youth development. Youth who experience poverty and are victims of income inequality may also experience risks at the relationship and community level, such as delinquency, drug use, gang involvement, homelessness, being raised in a low-income household, anti-social activity, discrimination, marginalisation, and deprivation. Therefore, a poverty alleviation programme should aim to reduce poverty and disparities in income distribution by offering work opportunities, youth empowerment, training for entrepreneurship and income generation, and unconditional cash transfer to youths who are socioeconomically disadvantaged. A poverty alleviation programme is needed to curb hardship and anti-social behaviour.

6.3 Access to education

One of the important ways to create resilience against youth criminality and anti-social behaviour is through high-quality education. Programmes that motivate youths to attend and be involved in school activities should be promoted. For example, graduation incentives should be introduced for reducing the rate of drop out and encouraging school completion. Therefore, ensuring that youths receive consistent and high-quality post-secondary education should be the responsibility and objective of the community and government at large.

6.4 After-school programmes

After-school programmes might include a variety of activities that engage the youth in meaningful ways. The provision of sports, games and recreation activities have traditionally been the focus of after-school programmes. In addition, activities that offer good decision-making skills, internal competency and cultural awareness, improve self-esteem, and prevent alcohol and drug abuse could be incorporated into the programme. After-school programmes tend to result in better family bonding, confidence in own self-regulatory capacity, prosocial behaviour, emotional awareness and assertiveness, all of which can strengthen resilience in youths. Programmes that encourage the youth to get involved in extracurricular activities like sport will reduce their involvement in crime and violence.

6.5 Parent education programmes

Parent education programmes aim to improve their monitoring and disciplinary skills, but also to increase their confidence. The content of such programmes should include positive parent-child communication skills, conflict resolution skills, counselling skills and anger management skills. Family life centres in South Africa offer some of these types of training. However, much is still needed to be done regarding equipping parents with the parenting skills that are required to improve family values

and loyalty, Ubuntu and relationality, staying connected to family history, values and principles, supervision, strong family and social relationships within the family, and to secure attachment.

6.6 A home visiting programme

As part of a home visiting programme, social workers can visit identified homes regularly in support of a single parent, teenage mothers or youths in foster care to provide them with information about parenting practices, the health system, social functioning and the importance of a supportive family and friends. In the long run, home visits could be an effective tool for preventing or reducing crime and violence. This is because a programme that improves parenting practices can also have a positive impact on child behaviour.

6.7 Drug abuse prevention programme

A programme to prevent drug abuse should consider causal factors that promote the use of drugs and alcohol and should respond accordingly. For instance, providing a safe haven where youth can be protected from the influence of community drug dealers in high drug traffic regions can be helpful. Also, such a programme should raise awareness about the dangers of substance abuse.

6.8 Gender violence prevention programme

Gender violence often begins in early adolescence and a meaningful preventative programme aimed at pre-teen youths should be implemented. Such a programme should include changing young people's attitudes regarding sexism, raising awareness of fallacies and myths about gender violence, and teaching non-violent relationship skills, such as learning how to communicate and manage anger.

6.9 Policies that support youth participation in society and the economy

Enacting policies that promote youths' political participation and support for youth leadership and development programmes can enhance the inclusion of the youth in running political and economic affairs in their local society. This could help to reduce risk factors and to create a sense of belonging, a sense of safety, the assurance of survival, feelings of usefulness, feelings of hope and optimism about the future. It can also give youth the forum to express and air their views on important issues.

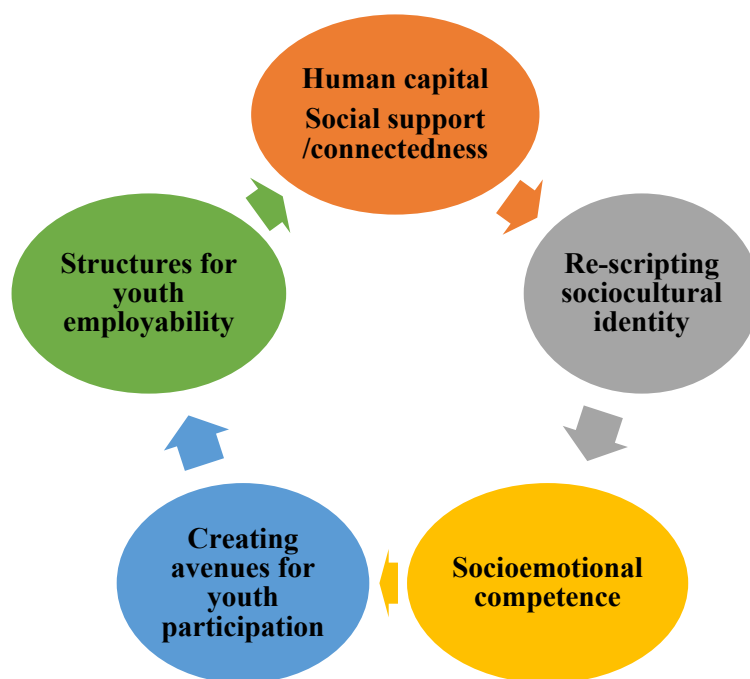


Figure 4: Systemic support framework to promote youth resilience

Table 10: Systemic support framework to promote youth resilience

| Human capital Social support/connectedness | Structures for youth employability | Re-scripting sociocultural identity | Emotional regulation/ socioemotional competence | Creating avenues for youth participation |
|--|--|--|--|---|
| Mentorship and a sense of belonging | Career centres (career fairs, information sessions) | Cultural values Challenge the sociocultural scripts | Integrating mental/emotional health and wellbeing | Engagement at a primary school level |
| Levels of youth leadership | Skills development | Challenging the culture of crime and violence through re- scripting and reorientation | Creating avenues for emotional expression and avoidance of crime and violence | Participation at a high school level |
| Structured activities (sports, arts and crafts) | Skills for job seeking | Parent webinars and support series (ending patriarchy and GBV) | Youth-led initiatives for emotional support | Involvement at tertiary level |

| Human capital Social support/connectedness | Structures for youth employability | Re-scripting sociocultural identity | Emotional regulation/ socioemotional competence | Creating avenues for youth participation |
|--|--|--|---|---|
| Support programmes (e.g., Head Start) | Entrepreneurial skills | Reaffirming positive identity Core self- alignment to solution-focused ideology | Intermittent health and wellbeing assessment and intervention | Post-school youth partnership |
| Freedom to use opportunities | Building a mindset for success | Youth-led centres for support and rehabilitation in cases of substance abuse | Health and wellbeing proactive interventions | Alignment of policy to youth-school partnerships |

7. Framework to address individual, cultural, and systemic risk associated with youth development

Based on findings from empirical studies on risks and protective factors experienced by South African youths, a conceptual framework that includes a set of ideas, practises, key actions that promote resilience, implementation plan, lead agency and stakeholders to be involved is proposed.

7.1 Drug use/Substance abuse

Incidences of drug and alcohol use were common experiences of South African youth who engaged in street life.

7.1.1 *Protective factor*

- Personal and emotional strength; cultural values, religious beliefs, supportive peer relationships; and participation in sports activities.

7.1.2 *Key actions/implementation plan*

- Protective, resilience resources should be strengthened in health promotion interventions with a focus on mental health, substance use, and daily physical activities that seems to provide meaning and hope.
- Effective substance abuse programmes should be implemented.

- This programme should consider causal factors that promote the use of drugs and alcohol to respond accordingly.
- Development of educational campaign and awareness for targeted groups and the general population about the causes and consequences of substance abuse
- Provision of a safe haven where youth can be protected from the influence of community drug dealers in high-drug-traffic regions.
- Strengthening of rehabilitation centres as a tertiary prevention measure for youth with an addiction problem.
- Strengthen institution capacity to prevent drug use
- Proper regulation and monitoring of import and export of precursor chemicals and other substances

7.1.3 Stakeholders

The following role players are identified for the purposes of implementation, monitoring and evaluation: Youth welfare department, through inter-ministerial committee on youth at risk; to be assisted by other key role players such as

- NGO's like SANCA, to acts as partners in the implementation of primary prevention measures; to supply information regarding the trends of drug abuse to the youth welfare department
- Academia; to partner with youth welfare department and NGO'S in capacity building
- SAPS; to enforce the law in relation to drug use
- Department of trade and industry; to work with stakeholders such as the Local drug action committee, National Institute on Drug Abuse, International Narcotics Control Board to control the inflow of drugs and other substances.

7.2 Exposure to community violence

Exposure to community violence is a risk factor for internalising and externalising problems. South African youth in low-income, urbanised communities are exposed to high levels of daily stressors, which increase their risk of negative outcomes. Exposure to community violence put young people at risk for negative outcomes.

7.2.1 Protective factors

- Positive peers and family support; kinship support; parental involvement, maternal monitoring, caring adults, positive relationship with mothers as well as peers, spirituality caring and supportive relationships, a sense of confidence and high expectations, toughness and commitment, social and adaptive skills.

7.2.2 Key actions and implementation plan

- Development of a culture of peaceful co-existence that promotes peaceful conflict resolution to reduce permissiveness of violence.
- Strengthening of citizen participation in strategies for violence prevention that seek to create social cohesion
- Promoting institutional support for families and households for the recoveries of values, improvement of communications, peaceful conflict resolutions, family and community life
- Design, organisation and promotion of organisation of cultural, educational and sporting activities that foster community social cohesion.
- Development of a central information system for timely intervention for youth at risk and violence driven vulnerability.
- Strengthen the capacity of institutions responsible for violence prevention by creating awareness, education and training on violence prevention strategies.
- Researchers and clinicians should continue to study the poly-victimisation/ psychopathology relationship, and also design measures, interventions and prevention programmes that incorporate the most relevant resilience resources.
- Strengthens and building developmental assets within the family, peer, and community environments for high-risk youth who have been exposed to violence (ETV).
- Discourage the possession, carrying and use of firearms. Strengthens the rules and regulations of the marketing and possession of firearms
- Create awareness for the elimination of toy arms and other games that promote violence

7.2.3 Stakeholders

- Law enforcement agency; to regulate and control the use of firearms
- Private sector; service group; safety and security authorities; supported by religious groups and NGO's: to empower sectors and communities prone to victimisation
- Institute for peace and alternative conflict resolution: to promote non-violence conflict resolution

7.3 Youth Unemployment

In South Africa, rising poverty and the widening income inequality pose a major risk factor to youth development. Youth who experience poverty and are victims of income inequality may also experience risks at a relationship and community level such as delinquency, drug use, gang involvement, homelessness, being raised in a low-income household, anti-social activity, discrimination, marginalisation, and deprivation.

7.3.1 *Protective factor*

- Community support
- Social support networks
- Hope
- Compassion

7.3.2 *Key actions and implementation plan*

- Implement a poverty alleviation programme to reduce poverty and disparities in income distribution by offering work opportunities, youth empowerment, training for entrepreneurship and income generation, unconditional cash transfer to youth who are socioeconomically disadvantaged.
- Design training for employment. For instance, skill training for income generation and entrepreneurship especially in the small and medium enterprise sector.
- Increase learnerships and apprenticeships to fast-track youth development, offer youth opportunities to acquire accredited qualifications and serve as an entry point for young people into jobs.
- Promote youth engagement through arts, sports, recreation, and community participation. Programmes that encourage youth to get involved in extracurricular activities like sport will reduce their involvement in crime and violence.
- Development of professional and vocational guidance that will allow South African youth to participate in the productive life of their country and enable suitable provision for their families.

7.3.3 *Stakeholders*

- Government: to provide an enabling environment, facilities, and infrastructures to implement training programmes
- Training providers: to design and implement suitable occupation centred training for employment.
- Employers: to complement government and training providers' efforts by supporting greater transparency in selecting youth for entry-level job opportunities.
- NGOS: to facilitate partnership development by bringing together relevant employers, youth trainees and government agencies for the purpose of job creation.

7.4 Intimate partner violence/ sexual victimisation/dating violence

7.4.1 *Protective factor*

- Parental responses
- Positive relationship with mothers as well as peers
- Emotional regulation
- Positive relationship with caregivers

7.4.2 *Key actions and implementation plan*

- Prioritise education of girls to expand their capacity to navigate for resources within their environments rather than depending on their male counterparts for survival.
- Encourage the organisation and participation of youth in the development of regional policies, programmes, strategies, and actions to prevent violence at a primary level.
- Develop comprehensive programmes for the prevention of early pregnancies in girls and adolescents and protective measures against sexual victimisation
- Development and implementation of local, regional, and national policies, programmes and actions for the comprehensive prevention of violence against women.
- Implementation of mechanisms and care services to address family, domestic and dating violence.
- Strengthen the recovery of values, communications, equity, equality, and conflict resolution.
- Provision of expert legal advice to victims of sexual violence

7.4.3 *Stakeholders*

- Municipal and national institutions: to operate at the local level, as well as act as agents of change, to prevent violence through training programmes. Such preventative programmes should include changing young people's attitudes towards sexism and raising awareness of fallacies and myths about gender violence, teaching non-violent relationship skills such as learning how to communicate and manage anger
- NGO's: to contribute to strengthening the capacity of the government institutions to address the issue of youth violence.
- Educational institutions: to communicate active and passive strategies for conflict resolutions.
- South African communication services, supported by various NGOs, religious groups: to create awareness of causes and danger of gender-based violence in the communities.

7.5 Homelessness

7.5.1 *Protective factors*

- Informal work such as panhandling, squeegeeing, flying a sign, and/or busking
- Social assistance
- Support from family/friends for food, shelter, and money

7.5.2 *Key actions and implementation plan*

- Provision of shelter for homeless youth
- Implement health promotion interventions with a focus on mental health, prevention of violence, substance use, and daily physical activities that seem to provide meaning and hope.
- Ensure accessibility to education. One of the important ways to create resilience to youth criminality and anti-social behaviour among homeless youth is through high-quality education.
- Programmes that motivate youth to attend and be involved in school activities should be promoted. For example, graduation incentives for reducing the rate of drop out and encouraging school completion should be introduced.

7.5.3 *Stakeholders*

- Community and government: to ensure that homeless youth receive consistent and high-quality post-secondary
- Child welfare agencies: to make effort to ensure that homeless youth have adults in their life whom they can trust and turn to for help
- Service providers: to support homeless youth in exploring work and employment options

8 Suggested action steps

In this section we highlight in Table 11 and Table 12, the evidence-based suggestions that include:

- Relevant Youth Resilience Outcomes and how to measure;
- Buffers and support that promote Youth Resilience; and
- A supportive framework

Table 11: Youth resilience outcomes and measures

| System | Outcome | Definition | Measure | Description |
|---------------------|---|--|--|---|
| Individual/Personal | Socio-emotional competence (including grit, self-efficacy and positive affect). | Capacity to self-regulate emotions and cognitions to establish and maintain relationships as a pathway to give and receive social support. Capacity to make meaning of adversity, keep positive outlooks, rise above small problems and nurture spirituality, demonstrate flexibility, stay connected, find social and economic resources, clear communication, openly share emotional expression, solve problems. | <ul style="list-style-type: none"> - Social Competence Questionnaire (SECQ); - Bar-On Emotional Quotient Inventory: Youth Version (Bar-On EQ-i: YV). | <ul style="list-style-type: none"> - Assesses how children and adolescents are aware of themselves as well as others and how they respond to the contexts of family, school, and community personally, socially and ethically. - Measures emotional intelligence, including the ability to understand feelings, empathise with others, and adapt to new and changing environments and contexts. |

| System | Outcome | Definition | Measure | Description |
|----------------------|-------------------------------|--|---|---|
| Individual/Personal | Socio-ecological resilience. | Capacity to experience recovery, sustainability, and growth after the experience of adversity by being able to navigate to and negotiate access to relevant sectoral (health, education, welfare, labour) opportunities (policies, programmes, services), necessary to support resilience. | The Child and Youth Resilience Measure (CYRM-R). | Self-report measures of social-ecological resilience. |
| Individual /Personal | Income generation competence. | Capacity to access employment opportunities and entrepreneurial competence. | The Entrepreneurship Competence Framework (EntreComp). | Reference framework to explain an entrepreneurial mindset (developed by European Union). |
| Family and Community | Socio-cultural competence | Capacity to use salient socio-cultural values, beliefs and practices to access social connections and/or community resources to promote resilience. | <ul style="list-style-type: none"> - Afrocentric Pathways to Resilience Measure; - Walsh Family Resilience Questionnaire. | <ul style="list-style-type: none"> - Adaptive Socio-cultural Processes Scale (salient sociocultural resources; social support; sociocultural governance pathways), and Adaptive Pathways to Well-Being Scale (pathways to well-being: leisure activities; maintaining physical health; education; spirituality); |

| System | Outcome | Definition | Measure | Description |
|---------------------------|------------------------|--|---------------------------------|--|
| | | | | <ul style="list-style-type: none"> - Measure families who have changed over time, in the course of dealing with an adverse situation. |
| Structural (macro-system) | Structural competence. | <p>System capacity to promote positive youth development outcomes by:</p> <ul style="list-style-type: none"> - absorbing, adapting or transforming in response to changing external conditions; and - sustaining required operations or adjusting functioning prior to, during, or following adverse events. | Resilience Analysis Grid (RAG). | Measure the system's ability to adjust its functioning to expected and unexpected conditions including the ability to, respond, monitor, anticipate and learn. |

Table 12: Promoting positive youth resilience outcomes: buffers and support

| System | Outcome | Buffers Against Risk / Violence and Crime | Support Services / Resources |
|--------------------------|---|--|--|
| Individual / Personal | <p>Socio-emotional competence - Capacity to self-regulate emotions and cognitions to establish and maintain relationships as a pathway to give and receive social support.</p> <p>Capacity to make meaning of adversity, keep positive outlooks, rise above small problems and nurture spirituality, demonstrate flexibility, stay connected, find social and economic resources, clear communication, openly share emotional expression, solve problems.</p> | <p>Access to:</p> <ul style="list-style-type: none"> - Information - Internet / media - Mental health - Social clubs - Mentorship / Peer education mentors - Empowerment - Good communication skills - Networking - resources e.g., funds, supportive structures <p>Increased opportunity</p> <p>Free resources – counselling</p> <p>Strengthen education systems so they are aligned with life skills and soft skills and help youth emerge into the bigger world with greater ease</p> <ul style="list-style-type: none"> - Make a conscious decision (if not you will repeat the same mistakes as parents) - Choose right - Know what you want to gain - Channel – to the right path - Entrepreneurship | <ul style="list-style-type: none"> - Increased opportunity to Counselling - Strengthen education systems -aligned with life skills and soft skills (help youth emerge into the bigger world with greater ease - Social workers/ psychologist - Community health care facilities /primary health care |

| System | Outcome | Buffers Against Risk / Violence and Crime | Support Services / Resources |
|-----------------------|---|--|---|
| | | <ul style="list-style-type: none"> - Active citizenship - Openness/being encouraged to speak up - Equality | |
| Individual / Personal | Socio-ecological resilience. Capacity to experience recovery, sustainability, and growth after the experience of adversity by being able to navigate to and negotiate access to relevant sectoral (health, education, welfare, labour) opportunities (policies, programmes, services), necessary to support resilience. | <ul style="list-style-type: none"> - Capacity building - Awareness workshops - Informal/formal education - Resilient youth (young people who push beyond boundaries) - Information (taking it out there) - Campaigns (to educate, inform people in general) - Collaboration amongst young people - Community support - Proper mentorship will evoke youths to become active participants in community meetings - Improve knowledge. - Access to information (information huts IDP) - Peer educators in the community | <ul style="list-style-type: none"> - Water and sanitation - Skills development - Recreational facilities -Different for context (rural/urban) - Schools -SGB “Meetings” - Functions Ward Meetings, - Celebrations– Ward committee - Stadium – Soccer events, cricket – Municipality - Library “Research, readings, journalism – Librarian - Police station “Legal march, escorts, reporting crime” – Station commander - Churches, “events, meetings, religion” – Pastor, Priest - Local councils “Community meetings”/ municipality - Traditional leaders “Advisory committee” |

| System | Outcome | Buffers Against Risk / Violence and Crime | Support Services / Resources |
|-------------------------|--|--|---|
| Individual/ personal | Income generation competence. Capacity to access employment opportunities and entrepreneurial competence. | <ul style="list-style-type: none"> - Good governance will lead to fewer illegal strikes, and employment (This will affect the community growth positively) - People empowerment - create chances of being exposed. - People can also have the motive to become entrepreneurs/ refrain from being dependent on the government. - Good communication from the society, (crime will be reduced as the community will be unified, acting as one) - Networking will assist in exposure to various fields of occupation and skills development. - Peer education will assist in reducing teenage pregnancy, peer counselling and role model. - Enforcement of policies reduce discrimination and nepotism - Looking for more economical opportunities that are presented - Creating/coming up with business | <ul style="list-style-type: none"> - Education (formal and informal) / Vocational education - Social events – Funding - Visibility, collaboration, and participation. - Social club (where young people meet to discuss youth-related issues). - Social Events (be active and request a platform to discuss youth issues). - Creating SMME's (small businesses) - Community development - Empowerment and education - Resources e.g., funds, supportive structures - Exposure to governmental policies - Inclusive policies, internal drive, and knowledge |
| Family and Community | Socio-cultural competence. Capacity to use salient socio-cultural values, beliefs, and practices to access social | <ul style="list-style-type: none"> - Community support - Youth development programmes | <ul style="list-style-type: none"> - Youth centres - Religious organisations - Government clinics - Police stations |

| System | Outcome | Buffers Against Risk / Violence and Crime | Support Services / Resources |
|---------------------------|---|--|--|
| | connections and/or community resources to promote resilience. | <ul style="list-style-type: none"> - Police station / Functional police services and response to protect citizens against GBV, abuse of all kinds, crime - Local councils <p>Access and awareness of:</p> <ul style="list-style-type: none"> - Healthcare facilities - Recreational parks - Multipurpose centres - Youth skill centres - Department of social development – food parcels, grant <p>Supporting adults at risk/not</p> <ul style="list-style-type: none"> - The concept of resilience for youth is different to the older generation e.g., Accepting abuse in marriage – seen as resilient - Different ideas of being resilient/ staying in an abusive situation is seen as being resilient - “Bring” back family structure (change mindset around family structure) - A sense of community | <ul style="list-style-type: none"> - Community policing forums - Anti-drug forums - Libraries - Sports grounds |
| Structural (macro-system) | Structural competence. | <ul style="list-style-type: none"> - Good governance - Enforcement of policy - (Unemployment, nepotism, discrimination) | <ul style="list-style-type: none"> - Civic society organisations – lifeline gives counselling, TB, HIV and healthcare primary services. |

| System | Outcome | Buffers Against Risk / Violence and Crime | Support Services / Resources |
|--------|--|--|---|
| | <p>System capacity to promote positive youth development outcomes by:</p> <ul style="list-style-type: none"> - absorbing, adapting or transforming in response to changing external conditions; and - sustaining required operations or adjusting functioning prior to, during, or following adverse events. | <ul style="list-style-type: none"> - Mini-parliament legislature (Lebowakgomo) <p>Government programmes:</p> <ul style="list-style-type: none"> - NYDA - SETA's - SEDA's - SEFA - Inclusion in policy-making structures – funding with the right focus - HRC (Human Rights Commission) - Restructure TRC - Race unity - Race identification through segregation <ul style="list-style-type: none"> o Black o Coloured o Include minority in programmes | <ul style="list-style-type: none"> - Police services - Digital library/ coding and robotics programmes - Thuthuzela centres/ Sizakala centres – GBV safety house - SEDA – skill development - DUT – public school programmes – social entrepreneurship - Peace club - Matric programme |

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10. Appendices

Appendix 1: Search Framework

PLATFORMS TO BE SEARCHED:

EBSCOHOST AND SCOPUS PLATFORMS TO INCLUDE:

- PsycINFO - Searched for youth, resilience, risk and framework
- PSYLIT – Nothing
- PsycArticles - Searched for youth, resilience, risk and framework
- Med-Line – Nothing
- SocINDEX
- Social work abstract - – Searched for youth, resilience, risk and framework
- CINAHL – Searched for youth, resilience, risk and framework
- Scopus – Searched for youth, resilience, risk and framework

SEARCH TERMS TO USE in title and abstract:

risk* or violence* or crime* or youth risk* or youth violence* or youth crime* AND

Resil* or positive [adjustment/adaptation] or protective AND

youth* or adol* or child or young person AND

framework* or theory [youth resilience theory/ youth resilience framework]

EXCLUSIONS:

Person centred resilience (unidimensional understanding)

Intervention studies

Exclude other systematic reviews

Any theorising paper(s)/reflections [not empirical]

FILTERS:

Only peer reviewed publications/articles

English

Available in full text

Date: From 2010 – 2020

SUMMARY INSTRUCTIONS:

Please summarise in the following way:

First remove duplicates

Include the author(s), title, abstract of each article as per example [alphabetical].

Indicate whether it should be excluded based on the exclusion criteria and mention the criteria.

Highlight the key search words in the title or text, where applicable.

| | Abstract | Yes | No | Maybe |
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Appendix 2a: Extracts of abstract/article analysis

Analysis Breakdown

| | |
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| <p>1. Jain, S., Buka, S. L., Subramanian, S. V., & Molnar, B. E. (2012). Protective Factors for Youth Exposed to Violence: Role of Developmental Assets in Building Emotional Resilience. <i>Youth Violence and Juvenile Justice</i>, 10(1), 107–129.</p> | |
| Abstract | <p>There is compelling evidence that many youth exposed to community violence manage to adapt successfully over time. Developmental assets have been deemed salient for positive youth development, though limited longitudinal studies have examined their relevance for high-risk youth. Using the Developmental Assets framework, the authors test whether supportive relationships, high expectations, and opportunities build emotional resilience directly or indirectly via interaction with risk. Further, the authors examine the effect of neighbourhood collective efficacy on resilience. The authors use multiwave data from 1,166 youth aged 11–16 years and data about their neighbourhoods from the Project on Human Development in Chicago Neighbourhoods (PHDCN). Generalized estimating equations (GEE) were used to examine whether baseline protective factors in subjects' home, peer, and neighbourhood environments predicted log odds of emotional resilience at Waves 2 and 3 among youth ETV. Over 7 years, 60–85% was emotionally resilient. Positive peers and supportive relationships with parents and other adults had significant main effects. Positive peers and family support were particularly protective for witnesses and victims. Structured activities and collective efficacy influenced change in resilience differentially among ETV groups. Strengths-based policies and systems should focus on building developmental assets within the family, peer, and community environments for high-risk youth who have been exposed to violence (ETV).</p> |
| Risk factor | Exposure to community violence |
| Protective factors | Positive peers and family support; |
| Resources | Personal |
| <p>2. Mosavel, M., Ahmed, R., Ports, K. A., & Simon, C. (2015). South African, urban youth narratives: Resilience within community. <i>International journal of adolescence and youth</i>, 20(2), 245–255.</p> | |

| | |
|--|--|
| Abstract | <p>South African youth in low-income, urbanised communities are exposed to high levels of daily stressors, which increase their risk to negative outcomes. Resiliency can provide avenues for youth to transcend adversity and may contribute to their positive development. To provide a deeper understanding of the pathways that adolescents use to overcome adversity, this paper examined future aspirations of South African youth and how these aspirations were connected to resiliency factors framed by their lived context. A phenomenological approach was used to explore the perceptions of high school students. Fourteen focus groups with girls and boys (N = 112) were conducted. Data were analysed using a thematic approach. Discussions of the harsh conditions undermining the community's future highlighted opportunities for improvement. Community connectedness, hope and altruism were prevalent in youth's responses and could be used to facilitate community and individual resiliency. Our overall findings have important implications for positive youth development efforts.</p> |
| Risk factors | Structural disadvantage; Poverty, deprivation and violence |
| Protective factors | <p>Propensity towards altruism; Social services in the community such as rehabilitation centres for drug users, refuge for orphans and rape victims; Community connectedness;</p> |
| Resources | Personal and community |
| <p>3. Levey, E.J., Oppenheim, C.E., Lange, B.C.L. et al. (2016). A qualitative analysis of factors impacting resilience among youth in post-conflict Liberia. <i>Child Adolescence Psychiatry Mental Health</i> 10, 26.</p> | |
| Abstract | <p>In 2008, 5 years after the Liberian civil war ended, there were an estimated 340,000 orphans in Liberia, 18 % of the total child population of the country. Given that children make up half the population and that these children experienced significant trauma and loss both through direct exposure to the war and then to the Ebola epidemic, and indirectly as a result of the trauma experienced by their parents, the recovery of these children is essential to the recovery of the nation as a whole. The goal of this research was to identify factors contributing to resilience among youth in post-conflict Liberia. Resilience was defined as evidence of adaptive functioning and psychological health. Seventy-five young people (age 13–18) in the capital city of Monrovia, Liberia were recruited in 2012. Semi-</p> |

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| | <p>structured interviews were conducted, and demographic data were collected. Interviews were then transcribed and coded thematically. Forty-six of the participants were attending school, and 29 were not enrolled in school. Youth enrolled in school demonstrated greater adaptive functioning. This was particularly true for boys in any school setting and girls attending private school. Youth not attending school were more likely to have lost family members or become estranged from them, and many were also engaging in substance use. Emotion regulation, cognitive flexibility, agency, social intelligence and, in some cases, meaning-making were found in participants who showed resilient outcomes.</p> <p>Caregiver relationships mediate the development of psychological capacities that impact resilience. These findings suggest that youth who have lost a caregiver, many of whom are not attending school, are experiencing a significant on-going burden in terms of their daily functioning and psychological health in the post-war period and should be the focus of further study and intervention targeting substance use and community reintegration</p> |
| Risk factor | Trauma exposure |
| Protective factors | Empathy and altruism; Confidence in own self-regulatory capacity; Cognitive flexibility; Sense of agency |
| Resources | Personal |
| <p>4. Cortina, M. A., Stein, A., Kahn, K., Hlungwani, T. M., Holmes, E. A., & Fazel, M. (2016). Cognitive styles and psychological functioning in rural South African school students: Understanding influences for risk and resilience in the face of chronic adversity. <i>Journal of adolescence</i>, 49, 38–46.</p> | |
| Abstract | <p>Adverse childhood experiences can show lasting effects on physical and mental health. Major questions surround how children overcome adverse circumstances to prevent negative outcomes. A key factor determining resilience is likely to be cognitive interpretation (how children interpret the world around them). The cognitive interpretations of 1025 school children aged 10 to 12 years in a rural, socioeconomically disadvantaged area of South Africa were examined using the Cognitive Triad Inventory for Children (CTI-C). These were examined in relation to psychological functioning and perceptions of the school environment. Those with more positive cognitive interpretations had better psychological</p> |

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| | functioning on scales of depression, anxiety, somatization and sequelae of potentially traumatic events. Children with more negative cognitions viewed the school-environment more negatively. Children living in poverty in rural South Africa experience considerable adversity and those with negative cognitions are at risk for psychological problems. Targeting children's cognitive interpretations may be a possible area for intervention. |
| Risk factor | Socioeconomically disadvantaged with high HIV prevalence |
| Protective factor | Positive cognitive interpretations |
| Resources | Personal |
| <p>5. Pérez-González, A., Guilera, G., Pereda, N., & Jarne, A. (2017). Protective factors promoting resilience in the relation between child sexual victimization and internalizing and externalizing symptoms. <i>Child abuse & neglect</i>, 72, 393–403.</p> | |
| Abstract | <p>Sexual victimization has been one of the most frequently studied forms of child victimization. Its effects are common and diverse; however, not all children and youth exposed to sexual victimization eventually develop adjustment problems. A total of 1105 children and youth (590 male and 515 female) aged between 12 and 17 from north eastern Spain were assessed regarding their experiences of sexual victimization, symptoms of psychopathology, and protective factors. The results showed that all forms of sexual victimization were associated with higher levels of emotional and behavioural problems. However, the presence of a low Negative Cognition, high. Social Skills and high Confidence seem to act buffering internalizing problems. Additionally, a significant interaction between Sexual Victimization and low Negative Cognition was observed ($p < 0.5$), so that, low Negative Cognition was related to a lower risk of being in the clinical range for internalizing problems. Likewise, high scores on Empathy/Tolerance, Connectedness to School, Connectedness to Family and low Negative Cognition acted as protective factors in relation to externalizing symptoms, in this case without any interaction effect. The strong relationship found with emotional and behavioural problems highlights the importance of continuing the research on the protective factors underlying resilience in the relationship between sexual victimization and psychopathological symptoms. The findings also support the multi-dimensional and</p> |

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| | specific nature of resilience and identify some of the protective factors that should be regarded as key intervention targets in adolescents with a history of sexual victimization. |
| Risk factor | Sexual victimisation |
| Protective factor | Social Skills, Confidence, Empathy/Tolerance act as protective factors against internalizing problems Connectedness to School, Connectedness to Family and low negative cognition were related to lower levels of externalizing symptoms |
| Resources | Personal |
| <p>6. Adegoke C. O., & Steyn M.G. (2017). A photo voice perspective on factors contributing to the resilience of HIV positive Yoruba adolescent girls in Nigeria. Journal of Adolescence, 56, 1-10. DOI: 10.1016/j.adolescence.2017.01.003.</p> | |
| Abstract | There is a growing discourse worldwide on the impact of the Human Immunodeficiency Virus (HIV) on “at risk youths”. In response, five HIV-positive Nigerian adolescent girls were qualitatively investigated in collaboration with a non-governmental organisation (NGO) in Ibadan, an urban settlement in Nigeria in 2013. Using a secondary data analysis from a photo voice component of the research, combined with narratives, we show that participants possess the capacity to overcome their adversities from the effects of HIV infection and remain resilient. Few studies have used photo voice _ a visual participatory approach _ and its impact on this group. The theories of Bourdieu, Piaget and Erikson were used as tools to interpret and document, resilience, social capital and coping among participants. Findings reveal participants frame positive goals, use social competence, coping skills, and express personal challenges. These have serious implications for policy makers, researchers and programmer in strengthening adolescents' resilience. |
| Risk factor | Living with HIV, stigmatization and poverty |
| Protective factor | Family and peer networks; Religious and spiritual beliefs; health and counselling centres. |
| Resources | Personal and community |
| <p>7. Tiet, Q.Q., Huizinga, D. & Byrnes, H.F. (2010). Predictors of Resilience Among Inner City Youths. J Child Fam Stud 19, 360–378. https://doi.org/10.1007/s10826-009-9307-</p> | |

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| Abstract | <p>Prior studies have suggested that living in high-risk neighbourhoods is associated with youths' maladjustment. Youths who maintained favourable outcomes, despite being exposed to such neighbourhood risks, were considered resilient. Using structural equation modelling techniques, longitudinal data of 877 youths from the Denver Youth Survey were examined to identify predictors of resilience, longitudinal interrelations among predictors, and bi-directional relationships between resilience and life context factors. Resilience was longitudinally predicted by bonding to family and teachers, involvement in extracurricular activities, lower levels of parental discord, fewer adverse life events, and being less involved with delinquent peers. A positive feedback loop was found, in which resilience predicted further resilience. Early intervention to strengthen traditional bonding, decrease involvement with delinquent peers, and reduce the effects of adverse life events and parental discord may be essential in enhancing functioning of high-risk youths</p> |
| Risk factors | Delinquency; Drug use; gang involvement |
| Protective factor | Parental monitoring; bonding to the family; involvement in Extracurricular Activities |
| Resources | Personal |
| <p>8. Hardaway, C. R., Sterrett-Hong, E., Larkby, C. A., & Cornelius, M. D. (2016). Family Resources as Protective Factors for Low-Income Youth Exposed to Community Violence. <i>Journal of youth and adolescence</i>, 45(7), 1309–1322.</p> | |
| Abstract | <p>Exposure to community violence is a risk factor for internalizing and externalizing problems; however, resources within the family can decrease the likelihood that adolescents will experience internalizing and externalizing problems as a result of such exposure. This study investigates the potential moderating effects of kinship support (i.e., emotional and tangible support from extended family) and parental involvement on the relation between exposure to community violence (i.e., witnessing violence and violent victimisation) and socio emotional adjustment (i.e., internalizing and externalizing problems) in low-income adolescents. The sample included 312 (50 % female; 71 % African American and 29 % White) low-income youth who participated in a longitudinal investigation when adolescents were age 14 (M age = 14.49 years) and again when</p> |

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| | <p>they were 16 (M age = 16.49 years). Exposure to community violence at age 14 was related to more internalizing and externalizing problems at age 16. High levels of kinship support and parental involvement appeared to function as protective factors, weakening the association between exposures to violence and externalizing problems. Contrary to prediction, none of the hypothesized protective factors moderated the association between exposure to violence and internalizing problems. The results from this study suggest that both kinship support and parental involvement help buffer adolescents from externalizing problems that are associated with exposure to community violence</p> |
| Risk factors | Exposure to community violence |
| Protective factor | Kinship support; parental involvement |
| Resources | Personal |
| <p>9. Hills, F., Meyer-Weitz, A., & Asante, K. O. (2016). The lived experiences of street children in Durban, South Africa: Violence, substance use, and resilience. <i>International journal of qualitative studies on health and well-being</i>, 11, 30302.</p> | |
| Abstract | <p>South African studies have suggested that street children are resilient but also suicidal, engage in unprotected sex and other high risk sexual behaviour as a means of survival, have high rates of substance abuse and are physically abused and stigmatized due to their state of homelessness. However, few studies have explored in a more holistic manner the lived experiences of street children in South Africa. The main purpose of this study was to explore qualitatively the lived experiences of street children living on the street of Durban, in the province of KwaZulu-Natal, South Africa. Adolescents (six males and four females) between the ages of 14 and 18 years (average age 16) were purposively selected and in-depth semi-structured interviews were conducted. An interpretative phenomenological analysis of the transcribed data revealed that incidence of violence and drug and alcohol use were common experiences of street life. Yet despite these challenges survival was made possible through personal and emotional strength, cultural values, religious beliefs, supportive peer relationships, and participation in sports activities. These protective, resilience resources should be strengthened in health promotion interventions with a focus on mental health, the prevention</p> |

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| | of violence, substance use, and daily physical activities that seems to provide meaning and hope. |
| Risk factors | Substance abuse; homelessness |
| Protective factors | Personal and emotional strength; cultural values, religious beliefs, supportive peer relationships; and participation in sports activities |
| Resources | Personal and community |
| 10. Boxer, P., & Sloan-Power, E. (2013). Coping with violence: a comprehensive framework and implications for understanding resilience. <i>Trauma Violence Abuse, 14(3), 209-221.</i> | |
| Abstract | Interpersonal violence is present at all levels of influence in the social ecology and can have comprehensive and devastating effects on child and adolescent development through multiple simultaneous channels of exposure. Children's experiences with violence have been linked with a range of behavioural and mental health difficulties including posttraumatic stress disorder and aggressive behaviour. In this article, we offer a conceptual framework delineating the ways in which children and adolescents might encounter violence, and a theoretical integration describing how violence might impact mental and behavioural health outcomes through short- and long-term processes. We propose that coping reactions are fundamental to the enduring effects of violence exposure on their psychosocial development and functioning. Finally, we discuss the manner in which coping efforts can support resilience among children exposed to violence and suggest new directions for research and preventive intervention aimed at optimizing outcomes for children at risk of exposure. |
| Risk factor | Interpersonal violence |
| Protective factor | Coping style; emotion regulatory style and social cognitive processing style |
| Resources | Personal |
| 11. Mampane, M. Ruth. (2014). Factors contributing to the resilience of middle-adolescents in a South African township: insights from a resilience questionnaire. <i>South African Journal of Education, 34(4), 1-11</i> | |
| Abstract | Factors that contribute to resilience are key to the positive development of youths, and knowledge of such factors is essential for promoting resilience in schools through both policy and practice. This study reports on the results of an item and factor analysis of the Resilience Questionnaire for Middle-adolescents in Township |

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| | Schools (R-MATS) that was used to survey 291 Grade 9 middle-adolescent learners from two black-only township secondary schools. The majority of respondents indicated an overall sense of contending with various stressors, especially the exposure to violence, and academic challenges. Respondents attributed their buoyancy to individual and environmental factors, such as self-confidence, an internal locus of control, a tough personality, commitment, being achievement-oriented, as well as positive identification of and access to social support. |
| Risk factors | Exposure to violence and crime and academic challenges |
| Protective factor | Caring and supportive relationships; A sense of confidence and high expectations; Toughness and commitment Social support |
| Resources | Personal |
| 12. Bhanaa, A., Mellins, C. A., Small, L., Nestadt, D. F., Leu, C., Petersen, I. Machanyangwa, S., & McKaye, M. (2016). Resilience in perinatal HIV+ adolescents in South Africa. <i>AIDS Care</i>, 28(2), 49-59. | |
| Abstract | Increasing numbers of perinatally HIV (PHIV+)-infected youth are surviving into adulthood with better access to treatment. However, few studies examine positive outcomes in the face of adversity (resilience) for PHIV+ youth. Social Action Theory (SAT) provided the theoretical framework for this study of PHIV + youth in South Africa (SA), allowing examination of contextual, social, and self-regulatory factors that influence behavioural health. Data were from youth and caregiver baseline interviews, simply pooled from a pilot (N=66) and larger (n=111) randomized control trial (RCT) of the VUKA Family program. For this analysis, outcomes included emotional and behavioural functioning (total difficulties), and prosocial behaviours. Potential SAT correlates included socio-demographics; caregiver health and mental health; parent-child relationship factors; stigma, and child coping, support; and self-esteem. Regression analyses adjusted for age, gender, and study revealed significant associations at the contextual, social, and self-regulation level. Lower total child difficulties scores were associated with lower caregiver depression ($\beta = 3.906, p < .001$), less caregiver- |

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| | <p>reported communication about difficult issues ($\beta = 1.882, p = .009$) and higher youth self-esteem ($\beta = -0.119, p = .020$). Greater prosocial behaviours were associated with greater caregiver-reported communication ($\beta = 0.722, p = .020$) and child use of wishful thinking for coping ($\beta = 5.532, p = .009$). Less youth depression was associated with higher caregiver education ($\beta = -0.399, p = .010$), greater caregiver supervision ($\beta = -1.261, p = .012$), more social support seeking ($\beta = -0.453, p = .002$), higher youth self-esteem ($\beta = -0.067, p < .001$), lower internalized stigma ($\beta = 0.608, p = .040$), and child use of resignation for coping ($\beta = 1.152, p = .041$). Our data support evidence-based family interventions that also promote youth self-regulation skills to enhance the health and mental health of PHIV+ youth.</p> |
| Risk factors | Living with HIV/AIDS |
| Protective factor | Social regulation; Self-regulation |
| Resources | Personal |
| <p>13. Pfeiffer, C., Ahorlu, C.K., Alba, S., Obrist, B. (2017). Understanding resilience of female adolescents towards teenage pregnancy: a cross-sectional survey in Dar es Salaam, Tanzania. <i>Reproduction Health</i> 14, 77.</p> | |
| Abstract | <p>Background: In Tanzania, teenage pregnancy rates are still high despite the efforts being made to reduce them. Not enough is known about how adolescents experience and cope with sexuality and teenage pregnancy. Over the past few decades, most studies have focused on vulnerability and risk among youth. The concept of ‘reproductive resilience’ is a new way of looking at teenage pregnancy. It shifts the perspective from a deficit-based to a strength-based approach. The study presented here aimed to identify factors that could contribute to strengthening the reproductive resilience of girls in Dar es Salaam, Tanzania.</p> <p>Methods: Using a cross-sectional cluster sampling approach, 750 female adolescents aged 15–19 years were interviewed about how they mobilize resources to avoid or deal with teenage pregnancy. The main focus of the study was to examine how social capital (relations with significant others), economic capital (command over economic resources), cultural capital (personal dispositions and habits), and</p> |

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| | <p>symbolic capital (recognition and prestige) contribute to the development of adolescent competencies for avoiding or dealing with teenage pregnancy and childbirth.</p> <p>Results: A cumulative competence scale was developed to assess reproductive resilience. The cumulative score was computed based on 10 competence indicators that refer to the re- and pro-active mobilization of resources. About half of the women who had never been pregnant fell into the category, ‘high competence’ (50.9%), meaning they could get the information and support needed to avoid pregnancies. Among pregnant women and young mothers, most were categorized as ‘high competence’ (70.5%) and stated that they know how to avoid or deal with health problems that might affect them or their babies, and could get the information and support required to do so. Cultural capital, in particular, contributed to the competence of never-pregnant girls [OR = 1.80, 95% CI = 1.06 to 3.07, p = 0.029], pregnant adolescents and young mothers [OR = 3.33, 95% CI = 1.15 to 9.60, p = 0.026].</p> <p>Conclusions: The reproductive resilience framework provides new insights into the reproductive health realities of adolescent girls from a strength-based perspective. While acknowledging that teenage pregnancy has serious negative implications for many female adolescents, the findings presented here highlight the importance of considering girls’ capacities to prevent or deal with teenage pregnancy.</p> |
| Risk factors | Sexuality; Teenage pregnancy |
| Protective factor | Social capital (relations with significant others), Economic capital (command over economic resources) Symbolic capital (recognition and prestige) Cultural capital (Personal dispositions and habit) |
| Resources | Personal |
| <p>14. Humm, A., Kaminer, D., & Hardy, A. (2018) Social support, violence exposure and mental health among young South African adolescents. <i>Journal of Child & Adolescent Mental Health, 30(1), 41-50</i></p> | |
| Abstract | <p>Objective: Cumulative violence exposure has been associated with both internalising and externalising difficulties in youth. Therefore, it is important to identify protective factors that may ameliorate both</p> |

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| | <p>exposure to and the impact of cumulative violence. This study aimed to identify sources of perceived social support amongst early adolescents in a low-income, high-violence community in South Africa, and to examine the association of perceived support with exposure to violence and with the severity of depression, aggression and conduct disorder symptoms.</p> <p>Method: A sample of 615 Grade 7 learners completed measures of perceived social support, different types of violence exposure and symptoms of depression, aggression and conduct disorder.</p> <p>Results: Maternal, paternal and overall family support were weakly associated with a reduced risk of domestic violence, but not with other forms of violence exposure, and were also weakly associated with a reduced risk of mental health difficulties. Peer support was associated with higher symptomatology across all mental health outcomes while teacher support was associated with greater severity of depression.</p> <p>Conclusions: The stress-buffering effects of social support may not be maintained in contexts of high exposure to violence. Implications for interventions to enhance youth safety and resilience in high-violence contexts are considered</p> |
| Risk factors | Cumulative violence exposure |
| Protective factor | Peer support Social support |
| Resources | Personal |
| <p>15. Soji, Z. (2018). Waithood, Developmental Pathways, Coping and Resilience among South African Youths who Head Families. <i>Southern African Journal of Social Work and Social Development</i>, 30(3)</p> | |
| Abstract | <p>This article draws from the narratives of the lives of three South African youths who head families. It is based on a longitudinal study conducted from 2012 to 2016 in Port Elizabeth, Eastern Cape, South Africa. It explores the developmental pathways of youths heading their families following the deaths of their parents and how these youths cope with challenges associated with the transition to adulthood. The article engages with the concept of waithood as a period of suspension between childhood and adulthood and expands into existing western-dominant theories of human development from a social constructionist perspective. Data obtained from the narratives</p> |

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| | <p>of these participants from the global South challenge the dominant westernised understanding of individualised youth transition to adulthood, from various human development theories. The article argues that young people who head their families (after the death of their parents) forge alternative pathways to adulthood, which expands into the conventional Eriksonian-staged approach to youth development. The alternative pathways these youths forge tend to be relational rather than individualised and are embedded in social relations with their siblings, the extended family and networks of supporters and mentors. The findings also reveal that young people who head their families use their agency and creativity to fashion new ways of coping and resilience as they navigate their own unique pathways to adulthood.</p> |
| Risk factors | Child headed households |
| Protective factor | <p>Perseverance and determinations</p> <p>Family values and loyalty</p> <p>Ubuntu and relationality</p> <p>Social networks</p> <p>Positive attitudes</p> |
| Resources | Personal |
| <p>16. Barrington, C., Villa-Torres, L., Abdoulayi, S., Tsoka, M. G., & Mvula, P. M. (2017). Using photo-elicitation methods to understand resilience among ultra-poor youth and their caregivers in Malawi. Health Education & Behavior, 44(5), 758-768</p> | |
| Abstract | <p>Unconditional cash transfer programs are a form of structural intervention to address poverty, a “fundamental cause” of disease. Such programs increasingly aim to build resilience to sustain improved outcomes and provide a solid foundation for longer term transformations. As such, there is a need to understand what resilience means in specific contexts. The goal of this formative study was to explore local experiences of resilience and vulnerability among 11 youth–caregiver dyads ($n = 22$) who were beneficiaries of the Malawi Social Cash Transfer Program in Balaka district. We used a photo-elicitation approach informed by the participatory, visual methodology photovoice to guide the study and conducted an iterative content analysis using thematic coding of transcripts and photos. Participants took pictures of their daily struggles and shocks</p> |

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| | <p>and participated in audio-recorded discussions to reflect on the photos using an adapted version of the SHOWeD method. We found that participants characterized resilience as a tireless process of using all available individual, family, and community resources <i>at all times</i> in pursuit of survival and well-being. In the context of daily struggles, resilience was an essential part of survival. Shocks, mostly health-related, were depicted through staged images candidly highlighting individual and environmental vulnerabilities. Community support was an essential component of resilience for both daily struggles and shocks. Using photo-elicitation methods facilitated an intergenerational, community-driven reflection on the meaning of resilience and the multilevel determinants of health in a context of extreme poverty. Findings can inform the design of resilience-focused cash transfer programs to improve health equity.</p> |
| Risk factors | Structural disadvantage (Poverty) |
| Protective factor | Community support |
| Resources | Community |
| <p>17. Adegoke C.O & Steyn M.G. (2018). Yoruba culture and the resilience of HIV-positive adolescent girls in Nigeria. <i>Culture, Health & Sexuality</i>, 20(11), 1287–1298</p> | |
| Abstract | <p>Although there is a growing body of research exploring the influence of culture on the resilience of African youth, few studies have examined how culture constrains or enables resilience among HIV positive adolescent girls from the perspective of the young women themselves. This paper reports on the findings from a qualitative study of five purposively selected girls living with HIV in Ibadan, Nigeria. By analysing data drawn mainly from interviews and observations, we explored how cultural influences promote or limit resilience in participants. Social-ecological resilience theory was used to document and interpret the findings. While some cultural values and perceptions enable resilience, others constrain participants' resilience trajectories. However, the girls were able to navigate through these constraints using their cultural identities and coping strategies, such as future dreams, emotional and physical resources linked to spirituality and networks of friends and families. Findings have implications for policymakers, researchers and</p> |

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| | programmers in strengthening the health and resilience of young people in the face of HIV. |
| Risk factors | Living with HIV |
| Protective factor | Cultural values Future dreams Spirituality Social networks |
| Resources | Personal and community |
| <p>18. Laura, M.L. (2012). Youths navigating social networks and social support systems in settings of chronic crisis: The case of youth-headed households in Rwanda. <i>African Journal of AIDS Research</i>, 11(3),165–175.</p> | |
| Abstract | <p>Youth-headed households in Rwanda live in a context of chronic crisis, where poverty, disease and uncertainty are not exceptional but characterise people’s daily lived reality. Struggling under the pressures of economic deprivation, social isolation, abuse and exploitation, these youths experience social suffering and feel the impact of social forces on their everyday lives. Yet, amid constraints in the environment, youths demonstrate resilience by actively navigating their social networks and working to create opportunities for the future. The article describes qualitative research carried out in three communities in Rwanda, between 2006 and 2010, examining the support systems of Rwandan youths affected by the HIV epidemic and socio-political conflict and exploring how youth heads of households navigate social networks in order to buffer the suffering in their lives. It is argued that social support is vital for these youths as they struggle to survive, seek to gain a degree of control over their lives, and strive to have a hopeful future. Examples show the remarkable ability of such youths to confront adversity by mobilising resources and exhibiting agency, although they may continue to experience suffering when support is lacking. The article concludes that to improve wellbeing and reduce suffering for youth-headed households, it is critical to recognise the social relations that may limit or enhance these youths’ ability to navigate their social environment. Youths’ agency needs to be recognised as a means to reduce the detrimental impacts of their actions and instead build on positive strategies, enabling them as they navigate their life course</p> |

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| | towards future possibilities. Finally, the dual role of youth heads of households — as individuals in adult roles and as youths — should be recognised, with initiatives to build them up designed around economic strengthening and mentorship. |
| Risk factors | Youth headed household Poverty HIV epidemic |
| Protective factor | Social support |
| Resources | Personal |
| 19. Soji, Z., Pretorius, B., & Bak, M. (2015). Coping strategies and resilience in youth-headed households. <i>Africa Insight</i>, 44(4) | |
| Abstract | <p>This article seeks to examine the coping strategies and resilience factors in youth-headed families. The article is based on the narrative life stories of six youth-headed families in Port Elizabeth who were able to remain together as a family following the death of their parents. Data collection was conducted utilising multiple methods, including one-on-one individual interviews with young people heading their households, family focus group interviews with most of the members of the six selected youth-headed families, and essay writing. The findings illustrate that various coping strategies were being used by the heads of the households and by each family as a whole. The strategies used by the heads of the households included: acceptance of the situation/a sense of resignation; suppression of emotions and negative experiences; exercising control and agency over one's life through creating heroic and positive identities and stories as a way of coping with trauma and adversity; attaching to others and mobilising social support; and being proactive and creative in dealing with challenging and sensitive issues. At a family and household level, the following coping strategies were identified: remaining a family in the midst of challenges; learning to let go of what could have been; and staying connected to family history, values and principles. Other factors and processes that were identified as playing a role in strengthening the resilience of members of youth-headed households at both an individual and a family level included: the availability of circles of care and social networks for the individual and the family as a whole</p> |

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| | <p>within the community; strong family and social relationships within the family; religious and cultural affiliations and practices; availability of communication and problem-solving skills at individual and family levels; and an ability to create hope. Coping and resilience were found to be closely linked. The coping strategies used by the members of youth-headed households were varied, depending on their context and the challenges faced at that particular moment. Some of the coping strategies used reflected the agency of individual members, the dynamics of each family (whether positive or negative), and the engagement of children and young people in youth-headed households with their social environments. Resilience factors and processes were located theoretically within the ecological systems perspective, where the individual child is placed at the centre of the system that interacts with other systems in the surrounding environments</p> |
| Risk factors | Youth headed households |
| Protective factor | <p>A sense of resignation</p> <p>Strong family and social relationships within the family</p> <p>Religious and cultural affiliations and practices</p> <p>An ability to create hope</p> <p>Staying connected to family history, values and principles</p> |
| Resources | Personal and community |
| <p>20. Sharp, C., Penner, F., Marais, L., & Skinner, D. (2018) School connectedness as psychological resilience factor in children affected by HIV/AIDS, AIDS Care, 30(4), 34-4</p> | |
| Abstract | <p>Children affected by HIV/AIDS are at high risk for poor mental health outcomes. Social and psychological connectedness to school has been identified as an important resilience factor for youth affected by adversity (Centers for Disease Control and Prevention. (2009). School connectedness: Strategies for increasing protective factors among youth. Atlanta, GA: U.S. Department of Health and Human Services). Defined as “the belief by students that adults in the school care about their learning as well as about them as individuals” (Centers for Disease Control and Prevention. (2009). School connectedness: Strategies for increasing protective factors among youth. Atlanta, GA: U.S. Department of Health and Human Services), school connectedness has been shown to be associated with higher</p> |

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| | <p>academic performance, increased mental health, and quality of life. However, few studies have examined school connectedness in sub-Saharan Africa, and none have examined school connectedness in relation to mental health in children orphaned by HIV/AIDS. Further, existing studies have relied on self-report measures. Against this background, the aim of the current study was to examine orphan status, school connectedness, and their interaction in relation to child mental health by using a multimethod design. 750 children between the ages of 7–11, recruited through South African community-based organizations (224 AIDS/HIV orphans, 276 non-AIDS/HIV orphans, 250 non-orphans; 51.2% girls), completed measures of school connectedness; children, caregivers, and teachers reported on child well-being using the Strengths and Difficulties Questionnaire. AIDS/HIV and non-AIDS/HIV orphans reported lower school connectedness than non-orphans. However, results demonstrated significant relations between school connectedness and overall mental health regardless of group, suggesting that school connectedness buffers against negative mental health outcomes regardless of orphan status. This study identifies a strategic point of intervention to build resilience against the cascading effects of HIV/AIDS and poverty in children in sub-Saharan Africa.</p> |
| Risk factors | Living with HIV/AIDS |
| Protective factor | School connectedness |
| Resources | Community |
| <p>21. Kelly, J.F., & Ward, C.L. (2012). Narratives of resilience after a period of substance abuse and crime. <i>African Journal of Drug & Alcohol Studies, 11(1)</i></p> | |
| Abstract | <p>Substance abuse and criminality are critical problems in South Africa, yet little is understood about youth resilience. Through narrative analysis, this study sought to gain an understanding of resilience in eight men who have disengaged from criminality and substance abuse. Childhood difficulties, ineffective parenting, delinquent peers, and a lack of commitment to school, all contributed to involvement in risk behaviours. A desire to change, often triggered by a pivotal event, was important in turning away from risk behaviours. Other contributing factors included the</p> |

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| | negative impact of drug abuse, leadership and social skills, academic competence, access to social support and religious beliefs. Maintaining a prosocial life style was supported by giving back to others and an effective substance abuse programme. |
| Risk factors | Substance abuse and crime |
| Protective factor | Desire to change Social support Religious belief |
| Resources | Personal |
| 22. Asante, K. O., & Meyer-Weitz, A. (2015). Association between perceived resilience and health risk behaviours in homeless youth. <i>Journal of Adolescence</i>, 39, 36-39 | |
| Abstract | Homeless youth are regarded as an extremely high risk group, susceptible to suicidal ideation, substance abuse, and high rates of mental illness. While there exists a substantial body of knowledge regarding resilience of homeless youth, few studies has examined the relationship between perceived resilience and health risk behaviours. The present study describes the findings from a quantitative examination of street-related demographics, resilience, suicidal ideation, substance abuse, sexual risk behaviours and violent related behaviours among 227 homeless youth. The findings revealed that perceived resilience was negatively related to suicidal ideation, substance abuse and violence. Suicidal ideation was positively related to both substance abuse and violence, whilst violence and substance abuse were positively correlated. Multiple regressions showed that perceived resilience served as a protective factor for suicidal ideation and having multiple sexual lifetime partners, suggesting that youth with lower level of perceived resilience were more likely to engage in various health risks behaviours. |
| Risk factors | Homelessness |
| Protective factor | Perceived resilience |
| Resources | Personal |
| 23. Dow, D. E., Mmbaga, B. T., Turner, E. L., Gallis, J. A., Tabb, Z. J., Cunningham, C. K., & O'Donnell, K. E. (2018) Building resilience: a mental health intervention for Tanzanian youth living with HIV, <i>AIDS Care</i>, 30(4), 12-20 | |

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| Abstract | <p>Despite a growing population of youth living with HIV, few interventions have been developed to address their unique mental health needs and to promote resilience. Based on our prior needs assessment, a mental health intervention, Sauti ya Vijana (The Voice of Youth), was developed to address identified mental health needs and promote resilience. The intervention emphasized resilience strategies for identifying and coping with stressful events, supporting strong familial and social relationships, and planning for a safe and healthy living environment through stigma reduction, planning for disclosure, and instilling hope for the future. Ten group sessions (two of which were joint youth/caregiver sessions) and two individual sessions were developed around these three resilience domains. Youth living with HIV (average age 17.4 years), who were receiving antiretroviral therapy and attending HIV adolescent clinic in Tanzania were randomized to intervention or treatment as usual. Trained group leaders led the intervention sessions. Near perfect program fidelity by the group leaders and unanimous acceptance of the intervention by the youth was documented. SYV successfully promoted youth resilience as measured by youth reported utilization of new coping skills, improved peer and caregiver relationships, reduced stigma, and improved confidence to live positively according to their personal values.</p> |
| Risk factors | Living with HIV |
| Protective factor | <p>Utilization of new coping skills, Improved peer and caregiver relationships, Reduced stigma, Improved confidence to live positively according to their personal values.</p> |
| Resources | Personal |
| <p>24. Silveira, F. S., & Boyer, W. (2015). Vicarious resilience in counselors of child and youth victims of interpersonal trauma. <i>Qualitative Health Research</i>, 25(4), 513–526.</p> | |
| Abstract | <p>In this study, we investigated how bearing witness to clients' resilience processes during treatment impacts the personal and professional lives of counselors who work with child and youth victims of interpersonal trauma. We used a qualitative instrumental multiple-case study design and thematic analysis to explore the</p> |

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| | <p>research question. The participants indicated that they experienced an increased sense of hope and optimism, and were inspired by the strengths of their clients while working with this population. As the participants reflected on the challenges that their clients faced, the participants put their own challenges and strengths into perspective; they reported positive changes in their personal relationships. We suggest that future research might investigate the relationships we found between optimism, hope, and vicarious resilience processes, as well as the potential relationship between the counselling approach that counselors adopt and the development of vicarious resilience responses.</p> |
| Risk factors | Secondary trauma |
| Protective factor | Increased sense of hope and optimism |
| Resources | Personal |
| <p>25. Van Breda, A. D., & Theron, L. C. (2018). A critical review of South African child and youth resilience studies, 2009–2017. <i>Children and Youth Services Review (91)</i> 237–247</p> | |
| Abstract | <p>In contexts of high levels of structural disadvantage, such as South Africa, resilience among children and youth becomes increasingly important to buffer children and youth from the negative effects of adversity. This article reports on a systematic review of research conducted in South Africa over the period 2009 to 2017 on the resilience of children and youth (ages 0 to 24) from the perspectives of young people themselves. It serves as a follow-up and refinement of an earlier publication in 2010. A total of 61 journal articles are reviewed. Four categories of social-ecological resilience-enablers emerge from these studies, viz. personal, relational, structural and spiritual/cultural. Most of the resilience-enablers identified in these studies are in the personal and relational domains. Various reasons for this finding are discussed, and emerging recommendations for service professionals (particularly social worker and educational psychologists) and youth resilience researchers are advanced.</p> |
| Risk factors | Orphan hood Poverty |
| Protective factor | Personal, Relational, Structural |

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| | Spiritual/cultural |
| Resources | Personal and community |
| 26. Williams, J. M., & Bryan, J. (2013). Overcoming Adversity: High-Achieving African American Youth's Perspectives on Educational Resilience. <i>Journal of Counseling & Development</i> (91) | |
| Abstract | This qualitative multicase research study identified the home, school, and community factors and processes that contributed to the academic success of 8 urban, African American high school graduates from low-income, single parent families. Ten main themes emerged: school-related parenting practices, personal stories of hardship, positive mother-child relationships, extended family networks, supportive school-based relationships, school-oriented peer culture, good teaching, extracurricular school activities, social support networks, and out-of-school time activities. Implications for counselors are discussed. |
| Risk factors | Raised in a low-income household Raised in a single-parent household |
| Protective factors | Positive mother-child relationships Extended family networks, Supportive school-based relationships, School-oriented peer culture, Good teaching, Extracurricular school activities, Social support networks Out-of-school time activities |
| Resources | Relational Environmental factors (family, school and community) |
| 27. Jones, L. (2013). The Family and Social Networks of Recently Discharged Foster Youth. <i>Journal of Family Social Work</i>, 16(3), 225-242, | |
| Abstract | Many youth leave foster care with disrupted relationships with family and others in their social networks. Previous research has documented the severe adversity that former foster youth face in the transition to young adulthood. Some of these difficulties are at least partially related to a lack of social support that results from frayed relationships. The purpose of this research was to examine the role that social support plays in the transition to adulthood. It was hypothesized that foster youth with higher levels of social support |

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| | would make more successful adaptations to early adulthood than youth without that support. Ninety-seven former foster youth were followed for 2 years. Youth reported low levels of “feeling close to parents,” but higher levels of “closeness” were expressed for other relatives. Findings were mixed. Organizational involvement and having many “close” friends were associated with better outcomes. On the other hand, family contact and family support was inversely associated with resiliency. The implications of these findings are discussed. |
| Risk factor | Youth in foster care |
| Protective factors | Organizational involvement Many close friends |
| Resources | Instrumental support (housing or financial assistance) Emotional support |
| 28. Ungureanu, R., & Biriş, D. (2018). Risk and Protective Factors for Children Facing the Criminal Justice System. <i>Revista de Asistență Socială</i>, anul, 17(1), 41-47 | |
| Abstract | Juvenile delinquency as an antisocial phenomenon is characterized by features and specific notes of the age category, as well as by personality characteristics within a particular socioeconomic and cultural framework. Juvenile antisocial manifestations should be understood by taking into account the conjugate (perspective of multiple causality) of individual psychological, social, cultural factors. The aim of this paper is to highlight the sociocultural diversity within the criminal justice system as protective or risk factors for the resilience of youth delinquents. The educational and residential climate in which the minors live highlights significant differences between resilient and non-resilient minors. Resilient adolescents live in a positive emotional climate and are immersed in a non-conflictual environment, they benefit from cohesion, in which their autonomy and openness are improved. At the same time, their educational climate pleads for the value of success and promotes stable religious values. |
| Risk factor | Youth delinquency |
| Protective factors | Positive emotional climate Nonconflictual environment |
| Resources | Sociocultural protective factors |

29. Bademci, H. Ö., Karadayı, E. F., & de Zulueta, F. (2015). Attachment intervention through peer-based interaction: Working with Istanbul's street boys in a university setting, *Children and Youth Services Review, Elsevier, 49, 20-31*

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| Abstract | <p>Street youths are a particularly vulnerable group because of early experiences of emotional and physical neglect and abuse which can make them difficult to approach. Traditional interventions such as 1 h weekly therapy sessions do not meet their needs. This article describes a creative and novel approach to the rehabilitation of street children implemented during the To-Gather with Youth Project (TYP) under the aegis of the Research and Application Center to Support Children/Youth Living and Working in the Streets (SOYAÇ) at Maltepe University in Istanbul, running in collaboration with state-run care institutions for boys since 2010. The approach consists of a peer-based supportive model that provides adolescent boys care with emotional and social security through attachment relationships that they develop with university students. The teaching staff and students of the psychology department constitute the core group running the program, which also includes workshops assisted by teachers and students from humanities departments such as philosophy, drama, and radio. These workshops are organized to promote the psychosocial and cognitive development of the participating street boys as well as to enable their direct access to the public through their art and photography. Based on a qualitative analysis of narrative interviews with boys and detailed observational reports by project volunteers, we identify several mechanisms that we believe contribute to change in the boys, including the development of secure attachment relationships with a trusted adult, a child-centered approach, and a socially safe environment created by peer-support in a university setting. The boys and volunteers also reported incidents and feelings that seem to suggest that the boys' have increased their capacity to regulate their emotions, sense of self-esteem and resilience, and desire to develop their lives in the future. This paper offers this intervention as a feasible service model for the rehabilitation of street boys in other cities.</p> |
| Risk factors | Street involved |

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| Protective factor | Secure attachment relationships with a trusted adult Safe environment created by peer-support |
| Resources | Relational Environmental factors |
| 30. Filbert, K. M. & Flynn, R. J. (2010). Developmental and cultural assets and resilient outcomes in First Nations young people in care: An initial test of an explanatory model. <i>Children and Youth Services Review, 32, 560–56.</i> | |
| Abstract | Resilience has been defined as a positive adaptation in the face of serious threats to development (Masten, 2006). The present study is among the first to focus on resilience among Canadian First Nations youth living in out-of-home care, who constitute the largest group of Aboriginal youth in care. The participants were 97 First Nations young people (49 males, 48 females), aged 10–17 and drawn from an on-going study of young people in care in Ontario, Canada. The second Canadian adaptation of the Assessment and Action Record (AAR-C2-2006; Flynn, Vincent & Legault, 2009) from Looking After Children was used to collect data on all of the study variables. The criterion variables were the young person's prosocial behaviour, self-esteem, educational performance, and behavioural difficulties. The predictor variables were the levels of the young person's developmental assets and cultural assets, with statistical controls for gender, age, and level of cumulative risk. Multiple regression analyses indicated that the greater the level of the youth's developmental assets, the higher was his or her level of resilience on all four criterion variables. Also, the greater the level of the young person's cultural assets, the lower was his or her level of behavioural difficulties. The implications of the findings for child welfare practice with First Nations youth in care were discussed |
| Risk factors | High rates of infant mortality and disease A low level of school performance High dropout rates, |
| Protective factor | Developmental asset and cultural asset |
| Resources | Individual attributes, self-processes, or ecological supports that have been consistently demonstrated to lessen risk and promote positive developmental outcomes |

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| | Collective resources that enable ethno cultural groups to maintain their identities over time and experience more positive outcomes. |
| 31. Bîrneanu, A. (2014). The Resilience of Foster Children: The Influence and the Importance of Their Attachment. <i>Revista de Asistență Socială</i>, anul, 13(4), 85-100 | |
| Abstract | Both resilience and attachment requires positive social interactions from one's significant other's. Method: investigation of attachment and resilience in foster care children was made through semi-structured interview Friends and Family Interview. There were evaluated with this instrument a sample of 92 children in foster care, 48 boys and 44 girls aged 6 to 18 years. Results: of the present research demonstrates that many of these children and youth reflect history of insecure attachment patterns in relationship with foster parents. Conclusions: Foster parents can improve the self-esteem of children in their care, which is lower than of their non-fostered peers. |
| Risk factors | Separation from parents Insecure attachment |
| Protective factor | Healthy environment |
| Resources | Environmental features |
| 32. Lavi, I., & Slone, M. (2011). Resilience and Political Violence: A cross-cultural study of moderating effects among Jewish- and Arab-Israeli youth. <i>Youth & Society</i>, 43(3), 845–872. | |
| Abstract | Children in countries involved in violent national conflicts experience difficult and, at times, extreme events such as spending long hours in shelters, witnessing terror attacks, or having a family member absent or injured while participating in battle. This study explores the moderating effect of resilience factors, self-esteem, and self-control, on relations between political violence and children's difficulties. Children and mothers from 104 Jewish- and 108 Arab-Israeli families complete questionnaires assessing political violence exposure, self-esteem, self-control, and the child's social, psychological, and behavioural difficulties. Findings show that Israeli children exhibited heightened levels of psychological difficulties with high impact of political violence, a relationship that is partially moderated by self-control. In addition, significant ethnic group differences are found. First, political life events (PLE) are positively related to the child's social, psychological, and behavioural difficulties in the Arab group. |

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| | Second, the relationship between political life events and the child's difficulties is moderated by self-control in the Jewish group and by self-esteem in the Arab group. Consequences of these results to understanding the impact of political violence and the role of individual resilience during conflict are discussed. |
| Risk factors | Exposure to protracted political violence |
| Protective factor | Self esteem Self-control |
| Resources | Personal; Individual temperament |
| 33. Stevens, T., Morash, M., & Park, S. (2011). Late-Adolescent Delinquency: Risks and Resilience for Girls Differing in Risk at the Start of Adolescence. <i>Youth & Society</i>, 43(4), 1433–1458 | |
| Abstract | Based on resilience and feminist criminological theories, several individual, family, and community characteristics were hypothesized to predict late adolescent delinquency for girls varying in early-adolescent risk. Girls aged 12 and 13 were interviewed each year as part of the National Longitudinal Survey of Youth 1997. Predictors of late-adolescent delinquency were compared for girls in and below the top 10% in self-reported early-adolescent delinquency. Girls who were higher in delinquency in early adolescence were resilient by 2002 if they had no incarcerated family members and high parental monitoring. Girls with little or no early delinquency were at risk for illegal activity by age 17 primarily due to contextual adversities, low hope for the future, poverty status, and minority racial status. Persistently delinquent girls require programming to address multiple risk and protective factors over an extended time. To prevent delinquency beginning later in adolescence, girls need safe community and school contexts. |
| Risk factors | Adolescent delinquency |
| Protective factor | Absent of incarcerated family member High parental monitoring Safe community |
| Resources | Family and community |
| 34. Theron, L., Ann Cameron, C., Didkowsky, N., Lau, C., Liebenberg, L., & Ungar, M. (2011). A “Day in the Lives” of four resilient youths: cultural roots of resilience. <i>Youth & Society</i>, 43(3), 799–818. | |
| Abstract | Grounded in the examples of four impoverished, relocated youths (two Sesotho-speaking orphans in South Africa and two Mexican |

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| | immigrants in Canada), we explore cultural factors as potential roots of resilience. We triangulate rich qualitative findings (visual, dialogical, and observational) to foreground the particular, as well as acknowledge the universal, in explicating resilience in transitional contexts. Resilience-promoting cultural practices rely on adults to function as custodians of protective practices and values and on youth actively to accept their roles as cultural cocustodians. Our findings urge service providers toward foregrounding the specific cultural context of young people in their therapeutic interventions and toward purposefully championing resilience-promoting cultural values and practices. |
| Risk factors | Poverty |
| Protective factor | Cultural factors |
| Resources | Cultural practices: extended families, religious structures, and ethnic social systems latently encourage adaptive behaviour |
| 35. Sta. Maria, M. A., Martinez, C. L., & Diestro, J. M. A. (2014). Typologies of risk and protection in the lives of Filipino street children in Manila. <i>Youth & Society</i>, 46(1), 112–131. | |
| Abstract | Focus group discussions with the youth living and working in the streets of Manila as well as interviews with key informants involved in intervention programs for these youth reveal several ways by which the youth may be protected from engaging in problem behaviours in and out of the streets. Findings reveal that conditions which promote the feeling of safety and of nurturance within familial relationships provide the children with a sense of protection and stability. The children are also protected when the community provides the child with opportunities to be productive and positively contribute to community life. The efficacy gained from their participation in productive communal life provides the street children with a sense of hope which allows them with an agency to chart their movement out of the streets. |
| Risk factors | Living in the street Exposure to violence |
| Protective factor | Caring and familiar relationships (attachment); Social relationship Sense of Safety and Assurance of Survival Sense of hope |

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| | Work opportunities |
| Resources | Individual traits Relationships |
| 36. Olson, J. R., & Goddard, H. W. (2015). Applying prevention and positive youth development theory to predict depressive symptoms among young people. <i>Youth & Society</i>, 47(2), 222–244. | |
| Abstract | The purpose of this study was to identify predictors of depressive symptoms among adolescents using concepts drawn from two theoretical models that underlie popular youth-focused programs. Specifically, we assessed the degree to which family-level risk factors increase the likelihood of depressive symptoms, and the degree to which community and/or school-level protective/promotive factors either buffer against risk, or directly lead to lower levels of depressive symptoms. Results indicate that three of the four hypothesized risk factors were associated with elevated levels of depressive symptoms. In addition, the protective/promotive factors had more promotive than protective effects because they were directly related to lower levels of symptoms. Implications for youth-focused programming are discussed. |
| Risk factors | Depressive symptoms. -Poor family supervision -Family conflict |
| Protective factors | Community opportunities School opportunities Community rewards School rewards Opportunities for pro social involvement |
| Resources | School- and community-based programs |
| 37. Yasui, M., Dishion, T. J., Stormshak, E., & Ball, A. (2015). Socialization of culture and coping with discrimination among American Indian families: examining cultural correlates of youth outcomes. <i>Journal of the Society for Social Work and Research</i>, 6(3). 2334-2315. | |
| Abstract | The current study examines the interrelations between observed parental cultural socialization and socialization of coping with discrimination, and youth outcomes among a sample of 92 American Indian adolescents and their parents in a rural reservation. Method: Path analysis is used to examine the relationships among observed parental socialization (cultural socialization and |

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| | <p>socialization of coping with discrimination), and youth-reported perceived discrimination, ethnic identity and depression.</p> <p>Results: Findings reveal that higher levels of observed parental cultural socialization and socialization of coping with discrimination predict lower levels of depression as reported by youth 1 year later. Path analyses also show that observed parental cultural socialization and socialization of coping with discrimination are positively associated with youth ethnic identity.</p> <p>Conclusions: These findings point to the importance of integrating familial socialization of culture and coping with discrimination in fostering resilience among American Indian youth.</p> |
| Risk factors | <p>Cultural oppression</p> <p>Discrimination</p> |
| Protective factors | <p>Observed parental cultural socialization</p> <p>Socialization of coping with discrimination</p> |
| Resources | <p>a) Intrapersonal, (b) interpersonal and (c) community domains</p> |
| <p>38. Karabanow, J., Hughes, J., Ticknor, J., Kidd, S., & Patterson, D. (2010). The economics of being young and poor: how homeless youth survive in Neo-liberal times. The Journal of Sociology & Social Welfare, 37(4).</p> | |
| Abstract | <p>Based upon in-depth interviews with 34 youth in Halifax and seven service providers in St. John's, Montreal, Hamilton, Toronto, Winnipeg, and Calgary, the findings of this study suggest that labor occurs within a particular street context and street culture. Formal and informal work can be inter-related, and despite the hardships they experience, young people who are homeless or who are at-risk of homelessness can respond to their circumstances with ingenuity, resilience and hope. Often street-involved and homeless young people are straddling formal and informal work economies while mediating layers of external and internal motivations and tensions. The reality is that the participants in this study cannot very easily engage in formal work. There is a dearth of meaningful formal work available, and when living homeless there are many challenges to overcome to maintain this work. In addition, there are few employers willing to risk hiring an individual who is without stable housing, previous employment experiences and, most likely, limited formal education. Therefore, street youth are left with informal work that</p> |

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| | provides them with survival money, basic needs, and a sense of citizenship, but which also invites belittlement, harassment, and mockery |
| Risk factors | Homelessness |
| Protective factors | Informal work such as panhandling, squeegeeing, flying a sign, and/or busking Social assistance Support from family/friends for food, shelter and money |
| Resources | Personal (willingness to engage in productive activities) Community (availability of informal job opportunities) |
| 39. Batsche, C., Hart, S., Ort, R., Armstrong, M., Strozier, A., & Hummer, V. (2014). Post-secondary transitions of youth emancipated from foster care. <i>Child and Family Social Work, 19</i>, 174–184. | |
| Abstract | This study investigated the extent to which KnowHow2Go (KH2Go), a national college access campaign developed for first-generation students in the USA, would resonate with youth who had aged out of foster care. Interviews were conducted with 27 youth who were enrolled in a post-secondary programme following emancipation from foster care. We found KH2Go to have a close fit with the experiences of youth who had been in foster care. Four topics emerged as particularly important for youth in our study: money management, work, parenting and transportation. Finally, the study identified attributes these youth demonstrated that contributed to their resilience during the transition process. This study and the data presented pertain to youth living in the south-eastern USA. |
| Risk factors | Poor educational outcomes |
| Protective factors | At the individual level. Resourcefulness Goal orientation Positive attitudes and future orientation Optimism The ability to make conscious changes based on past mistakes. At the family level of the resilience process Trusting relationships with individuals At the system level Reliance more on Connected by 25 (Cby25), than on the school or foster care systems. CBY25 one of the three national community |

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| | demonstration programmes dedicated to ensuring that youth aging out of foster care are educated, housed, employed and connected to a support system by age 25 |
| Resources | Personal traits Supportive individuals Supportive policies |
| 40. Hsing-Jung, C. (2013). Robust protective factors for African American youths who have a parent with depression. <i>Social Work Research</i>, 37(2),121-134. | |
| Abstract | <i>A considerable body of literature suggests that children of a parent with depression are at heightened risk of developing maladjustments. Few studies, however, have examined protective mechanisms for this population, particularly for African American youths. Based on theoretical and empirical studies of risk and protective factors for offspring of a parent with mental illness, this study examined four adjustment outcomes associated with six protective factors among African American youths in poor communities with a primary caregiver who had depression. Families (N= 126) were drawn from an on-going panel study, the Family and Community Health Study. Hierarchical regression analyses showed that most protective factors operated only for specific adjustment outcomes; only parental monitoring functioned across behavioural and academic domains of youth adjustment. The findings suggested that the improvement of parental monitoring skills could be essential for interventions designed to prevent multiple adjustment problems among these youths, particularly in behavioural and academic domains. Moreover, because many protective factors across different systems are likely to affect youth resilience, collaborative multisystem programs are needed to targets all of these factors.</i> |
| Risk factors | Adjustment problems Conduct problems Psychiatric illness Heightened behavioural and academic performance problems |
| Protective factors | Youth optimism, Youth self-control, Parental monitoring, Prosocial friendships |

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| | Teacher support. |
| Resources | Individual and environmental protective factors |
| <p>41. Hopson, L., Schiller, K., & Lawson, H. (2014). Exploring Linkages between School Climate, Behavioral Norms, Social Supports, and Academic Success. <i>Social Work Research</i>, 38, 197-209.</p> | |
| Abstract | <p>This article presents an exploratory study that examined the effects of school climate; students' perceptions of supports; and behavioural norms in their homes, schools, and neighbourhoods on student behaviour and grades. The authors conducted a multilevel analysis of secondary data collected from 13,068 predominantly low-income middle school students across 43 school sites. The analysis was informed by ecological theory and a risk and resilience perspective. The findings of the study indicated that students tend to have better grades and to behave better in the context of more supportive relationships and norms promoting safe, prosocial behaviour. However, even the students attending the safest schools have disparities in grades that correlate with their perceptions of neighbourhood support. In these schools, students who report more support from neighbours have significantly better grades than those who report less support. The findings suggest that research needs to more closely examine the potentially unique relationships between key school climate conditions, behavioural norms, and social supports for higher-risk youths, such as those from low-income families.</p> |
| Risk factors | <p>High density poverty Social isolation Poor academic outcomes</p> |
| Protective factors | <p>Social support Positive relationships with parents and teachers</p> |
| Resources | <p>Supportive relationships and behavioural norms within youths' homes, in neighbourhoods, at schools, and in other settings</p> |
| <p>42. Bernstein et al. (2011). Determinants of drinking trajectories among minority youth and young adults: The interaction of risk and resilience. <i>Youth & Society</i>, 43(4), 1199– 1219. DOI: 10.1177/0044118X10382033</p> | |
| Abstract | <p>Adolescent drinking research has focused heavily on risks for alcohol-related consequences and on personality traits associated with adverse alcohol-related outcomes. A risk-based paradigm may</p> |

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| | <p>inadvertently overemphasize risk when measures are applied to communities that experience discrimination and socioeconomic disadvantage. In this study we use qualitative methods to examine drinking motives and the relationship between motives and patterns of risk and resilience among a diverse group of 60 youth and young adults enrolled in an independent trial of brief intervention for alcohol use at an inner-city paediatric emergency department and report on their own understandings of their experiences, particularly their reasons for drinking. We found a clear distinction between drinking to “chill” and drinking to “cope” with very different projected life course trajectories despite similarities between groups in neighbourhood and interpersonal stressors. Strategies to motivate “copers” to alter drinking behaviour may need to be shored up with a network of support services.</p> |
| Risk factors | <p>Binge drinking Alcoholism</p> |
| Protective factors | <p>Writing stories Poetry and plays Friends and caring adults</p> |
| Resources | <p>Personal/internal /relational</p> |
| <p>43. Guthrie, D., Ellison, V., Sami, K., & McCrea, K. T. (2014). Clients’ hope arises from social workers’ compassion: young clients’ perspectives on surmounting the obstacles of disadvantage. <i>Families in Society, 95</i>(2)</p> | |
| Abstract | <p>While social workers strive to build disadvantaged African-American youth’s resilience by improving services, rarely are those youths’ perspectives included in research. In a previous participatory action evaluation of an after school program, disadvantaged African-American youth prioritized instructors’ compassion, and said compassion engendered hope. This study explores their connection between compassion and hope more deeply. After summarizing the literature and focusing on Snyder’s hope theory, this study examines the connection between compassion and hope as individual traits (using standardized scales), and as relational, action-based experiences (using qualitative analysis of interview data). Instructor actions youth identified as compassionate and as engendering hope were encouragement, problem-solving, responsive empathy, and</p> |

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| | affirming that good choices could bring about good futures. Youth built their hope by internalizing their instructors' compassion. |
| Risk factors | Living in a severely disadvantaged environment Post-traumatic syndromes Traumas of poverty, Community violence Racial discrimination |
| Protective factors | Hope Compassion Caring adults Peer support |
| Resources | Internal motivation Relations |
| 44. McKay-Jackson, C. (2010). Critical Service Learning: A School Social Work Intervention. <i>Children & Schools</i>, 32, 5-13. 10.1093/cs/32.1.5. | |
| Abstract | Youths at risk for violent and antisocial behaviour often suffer from alienation and a lack of bonding to family, school, and community. The role of the school social worker is often to implement interventions that support inclusion and connection to these entities. Yet using a theoretical trajectory that solely supports a unidirectional flow of care from the school social worker to youths may limit the level of application of learned skills. When working with marginalized and disempowered youths, the school social worker must also confront the conditions that further promote the marginalization and isolation of youths. This article asserts that using critical service learning (CSL) that encourages youth activism may promote attributes of resilience and social and emotional learning. Various types of CSL projects and the barriers to use of CSL projects, such as adultism, are discussed, as are practice implications for school social workers. |
| Risk factors | Exposure to violence and anti-social activity |
| Protective factors | Youth activism Positive relationships with others Self-awareness and the acquisition of self-management skills |
| Resources | Interpersonal skills |

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| <p>45. Black-Hughes, C., & Stacy, P. D. (2013). Early childhood attachment and its impact on later life resilience: A comparison of resilient and non- resilient female siblings. <i>Journal of Evidence-Based Social Work, 10(5), 410-420</i></p> | |
| Abstract | <p>Prior research has repeatedly identified early childhood attachment as a primary protective factor. In this study the authors sought to assess if there were significant differences in the attachment levels of resilient females in comparison to their non-resilient female siblings. The authors examine, using standardized attachment scales, the levels of attachment through the use of an intra-family research design. The study consists of a comparative analysis of female inmates from five Midwestern state correctional departments to their resilient female siblings' attachments, in correlation with their subsequent use of alcohol and/or drugs and the completion of high school. This is a replication of Stacy's (2004, 2006) research of the attachment levels of male resilient individuals in comparison to their non-resilient siblings. The conclusions may be utilized by practitioners identifying appropriate interventions for female youth at risk of becoming non-resilient.</p> |
| Risk factors | Criminal behaviour and substance use. |
| Protective factors | Parental and peer Attachment |
| Resources | Family bonds |
| <p>46. Rosenwald, M., McGhee, T., & Nofall, R. (2013) Perspectives on independent living services among resilient youth. <i>Journal of Family Social Work, 16(2), 148-163,</i></p> | |
| Abstract | <p>This article describes the results of a qualitative research study of youth who are primarily aging out of foster care and utilizing Independent Living Services. Interviews and focus groups from youth revealed the following four themes: (1) emotional support needed (family support, case manager support), (2) tangible independent living services requested (financial resources, life skills, day care), (3) communication of program services, and (4) the role of resiliency. A discussion of the themes and recommendations for child welfare agencies that work with this population are forwarded.</p> |
| Risk factors | <p>Homelessness Criminal justice involvement limited transportation Substance abuse</p> |

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| | Prostitution Mental health issues, Maltreatment Community challenges such as poverty and crime |
| Protective factor | Access to postsecondary education opportunities Family support |
| Resources | Educational facilities Social support supportive families, peers, and professional staff |
| <p>47. Duggins et al., (2016). Aggression Among Adolescent Victims of School Bullying: Protective Roles of Family and School Connectedness. <i>Psychology of Violence</i>, 6(2), 205–212</p> <p>http://dx.doi.org/10.1037/a0039439</p> | |
| Abstract | <p>To examine cross-sectional and 2-year longitudinal associations between school victimization and aggression among middle and high school students. Drawing on resilience theory, family and school connectedness were examined as compensatory or protective factors.</p> <p>Method: We sampled 373 students (Grades 7–10, 54% girls, 53% White/Caucasian, 26% Hispanic/Latino, and 56% economically disadvantaged), who completed up to 3 annual surveys.</p> <p>Results: Aggression declined over the 3 waves. Victimization predicted higher initial levels of and steeper decline in aggression. Family connectedness was protective; baseline aggression was lower and declined more steeply for youth who reported more family connectedness. School connectedness played a complex role, potentially contributing to students' vulnerability over time.</p> <p>Conclusions: The steeper declines in aggression among victimized youth suggest a resilience process. High family connectedness and school belonging were linked to lower level of aggression regardless of victimization. Efforts to provide family support may be effective in reducing risk for aggression among victimized youth. Promoting students' sense of school belonging may compensate for negative effects of victimization on aggression in the short term; however, broader efforts directed at establishing a safe and supportive school climate and setting social norms that discourage school violence may be necessary to reduce the incidence of victimization and subsequent aggressive behaviour.</p> |

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| Risk factors | Aggression Exposure to school bullying and violence |
| Protective factors | High family and school connectedness Positive connections at school Sense of belonging Social support from peers and adults |
| Resources | Relationship |
| <p>48. Kangaslampi et al. (2015). Narrative exposure therapy for immigrant children traumatized by war: study protocol for a randomized controlled trial of effectiveness and mechanisms of change. <i>BMC Psychiatry</i> 15:127 DOI 10.1186/s12888-015-0520-z</p> | |
| Abstract | <p>Background: Millions of children worldwide suffer from posttraumatic stress disorder (PTSD) symptoms and other mental health problems due to repeated exposure to war or organized violence. Forms of cognitive-behavioural therapy (CBT) are the most commonly used treatment for PTSD and appear to be effective for children as well, but little is known about the mechanisms of change through which they achieve their effectiveness. Here we present the study protocol of a randomized controlled trial (RCT) studying the effectiveness and mechanisms of change of Narrative Exposure Therapy (NET), a CBT-based, manualised, short-term intervention for PTSD symptoms resulting from repeated traumatization, in immigrant children traumatized by war.</p> <p>Methods/Design: We are conducting a multicentre, pragmatic RCT in a usual care setting. Up to 80 9–17-year-old immigrant children who have experienced war and suffer from PTSD symptoms will be randomized into intervention (NET) and control (treatment as usual, TAU) groups of equal sizes. The effectiveness of NET treatment will be compared to both a waiting list and the parallel TAU positive control group, on the primary outcomes of PTSD and depressive symptoms, psychological distress, resilience, and level of cognitive performance. The effects of the intervention on traumatic memories and posttraumatic cognitions will be studied as potential mechanisms of change mediating overall treatment effectiveness. The possible moderating effects of peritraumatic dissociation, level of cognitive performance, and gender on treatment effectiveness will also be considered. We hypothesize that</p> |

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| | <p>NET will be more effective than a waitlist condition or TAU in reducing PTSD and other symptoms and improving resilience, and that these effects will be mediated by changes in traumatic memories and posttraumatic cognitions.</p> <p>Discussion: The results of this trial will provide evidence for the effectiveness of NET in treating trauma-related symptoms in immigrant children affected by war. The trial will also generate insights into the complex relationships between PTSD, memory functions, posttraumatic cognitions and cognitive performance in children, and help guide the future development and implementation of therapeutic interventions for PTSD in children.</p> |
| Risk factors | Exposure to war and organised violence |
| Protective factors | Peritraumatic dissociation, Changes in traumatic memory Level of cognitive performance, Gender |
| Resources | Individual/ personal |
| <p>49. McCrea, et al., (2019). Understanding violence and developing resilience with African American youth in high-poverty, high-crime communities. <i>Children and Youth Services Review</i>,99, 296–307 https://doi.org/10.1016/j.chilyouth.2018.12.018</p> | |
| Abstract | <p>The scourge of community violence that besets young citizens in high-poverty U.S. communities of colour is a compelling social problem to address. This article synthesizes studies of causes and preventive services for youth violence, including randomized controlled experiments and theoretical, case study contributions. Available evidence indicates that causes of youth violence are complex and interact across multiple layers of social systems. Accordingly, single-factor programs and policies developed for other populations tend to be ineffective for addressing the many injustices with which youth in high-poverty, high-crime communities of colour contend. Therefore, we develop a perspective that is developmental, multi-systemic, and restorative of youths' dignity. Responding to researchers' calls for more contextually-grounded case studies of causes and remedies for youth violence, this article focuses on Chicago, where street violence rates in some communities are among the highest in the world and have increased in the last several years.</p> |

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| | <p>First, we describe the intersectional ties of catalysts of violence, such as institutional racism, police brutality, deficits in child protection, and deep poverty, in a developmental systems-based framework. Next, we frame community service principles with population-specific features, recognizing cultural and community strengths and youths' significant resilience and potential. Drawing from Afrocentric social thought, positive youth development, trauma treatment models, cognitive behavioural, and empowerment approaches, we describe intervention principles for community-based services. Examples are drawn from decades of work with Chicago's impoverished African American youth on the violence-beset south and west sides of Chicago.</p> |
| Risk factors | <p>Community violence Street violence</p> |
| Protective factors | <p>Community service principles Community strength</p> |
| Resources | <p>Community and society level;</p> <ul style="list-style-type: none"> • After school program • Policies that support child's protection |
| <p>50. Korkmaz, S., & Överlien, C. (2020) Responses to youth intimate partner violence: the meaning of youth-specific factors and interconnections with resilience, <i>Journal of Youth Studies</i>, 23(3), 371-387, DOI: 10.1080/13676261.2019.1610557</p> | |
| Abstract | <p>Taking its starting point in a mixed methods study on Dating Violence/Youth Intimate Partner Violence (youth IPV), this article emphasizes the social sphere of youth IPV and contributes to a focus shift from consequences and risks to responses, resilience, and resistance. It asks how IPV-exposed youth describe their responses and those of their social networks to violence, and how these responses might be interconnected with resilience. By exploring the concepts of 'resistance' and 'paradoxical resilience', youth responses in the context of an abusive relationship are highlighted. The empirical data comes from 18 in-depth, 'teller focused' interviews with victimized youth (aged 17–23) in Sweden. A theoretical thematic analysis of the interviews surfaced responses from three different types of actors, all described from the youth perspective. Responses are discussed from the point of view that they can promote</p> |

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| | resilience, but also enable abuse to continue. Overall, the data show youth-specific factors that have meaningful bearing on responses as well as resilience. The article also proposes that responses should be an omnipresent concern for practitioners working with these young people and for the adults involved in their lives. |
| Risk factors | Dating violence Youth intimate partner violence (youth IPV) |
| Protective factors | Parental responses School responses |
| Resources | Family and close relationships |
| <p>51. Eisman et al., (2015). Depressive Symptoms, Social Support, and Violence Exposure Among Urban Youth: A Longitudinal Study of Resilience. <i>Developmental Psychology</i>, 51(9), 1307–1316 http://dx.doi.org/10.1037/a0039501</p> | |
| Abstract | <p>Depression is a serious mental health concern among adolescents. Violence exposure is a potent risk factor for depression. Social support may help reduce depression risk, even when adolescents are exposed to violence. Using a compensatory model of resilience, we investigate the influence of violence exposure and social support on depression over time in a sample of urban youth during the high school years (N = 824, 52% female, mean age Year 14.9). We used growth curve modelling to examine depressive symptoms across adolescence and its association with violence exposure and social support, accounting for important socio demographic characteristics (sex, socioeconomic status, and race/ethnicity). Depressive symptoms on average increase from Year 1 to 2 of high school and then are stable or decline from Years 2 to 4. Violence observation and conflict in the family were each associated with increased depressive symptoms during the high school years. Mother support was associated with decreased depressive symptoms over time. Our results support a compensatory model of resilience. Promoting positive parent– child communication among urban youth living in disadvantaged contexts may help reduce the probability that exposure to violence will result in depressive symptoms.</p> |
| Risk factors | Violence exposure |
| Protective factors | Social support Positive parent /child communication (mother support) |

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| Resources | Families and close relationships Community resources |
| <p>52. Mariscal, E. S. (2020). Resilience following exposure to intimate partner violence and other violence: A comparison of Latino and non-Latino youth. <i>Children and Youth Services Review, 113</i> https://doi.org/10.1016/j.chilyouth.2020.104975</p> | |
| Abstract | <p>Childhood exposure to violence can have serious consequences for children’s social-emotional development and maltreatment risk. However, growing evidence suggests that these negative outcomes are not inevitable. In order to identify personal and environmental factors contributing to the resilience of youth involved with child welfare and exposed to IPV and other violence, and then compare these factors between Latino and non-Latino youth, this study examined data from the National Survey of Child and Adolescent Well-being II corresponding to 601 youth ages 11–17.5 under child maltreatment investigation. Sequential structural equation modelling was used to examine the racial/ethnic differences in the relationship patterns between exposure to violence and personal and environmental protective factors on mental health, risky behaviours, and school engagement. Social and adaptive skills moderated the negative effects of youth-reported exposure to severe violence on mental health; caring adults moderated the negative effects of mother-reported IPV exposure on school engagement; and spirituality moderated the relationship between youth-reported mild violence and school engagement. Maternal monitoring had more positive effects on Latinos’ mental health than on “other” youth’s, despite stronger negative effects of exposure to mild violence were identified among Latinos. Findings from this study support the implementation of programs that prevent child maltreatment and IPV and enhance youth’s resilience by building connections (e.g., mentoring), developing personal strengths (e.g., social and adaptive skills), and enhancing parental monitoring among Latinos.</p> |
| Risk factors | Childhood exposure to violence |
| Protective factors | <p>Maternal monitoring Caring adults Positive relationship with mothers as well as peers Spirituality</p> |

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| | Social and adaptive skills |
| Resources | Personal protective factor Environmental factor |
| <p>53. McVie, S. (2014) The Impact of Bullying Perpetration and Victimization on Later Violence and Psychological Distress: A Study of Resilience Among a Scottish Youth Cohort. <i>Journal of School Violence</i>, 13(1), 39-58, https://doi.org/10.1080/15388220.2013.841586</p> | |
| Abstract | <p>This article examines the impact of bullying between age 13 and 16 years on negative outcomes at age 17 years, taking into account various resilience factors at the individual, family, and community level. Using longitudinal data from the Edinburgh Study of Youth Transitions and Crime, a prospective cohort study of around 4,300 young people in Scotland, the impact of bullying perpetration on later engagement in violence and the impact of bullying victimization on later psychological distress are modelled. The analysis finds significant resilience factors, which reduce violence and psychological distress in late adolescence; however, even when controlling for such factors, both bullying perpetration and bullying victimization are strongly predictive of later negative outcomes. The findings support policy responses that implement early and effective interventions within schools to both prevent bullying and improve individual resilience to its long-term effects.</p> |
| Risk factors | Psychological distress as a result of bullying |
| Protective factors | High self esteem Stable family income Parental supervision |
| Resources | Personality characteristics Family level characteristics |
| <p>54. Hinduja, S., & Patchin, J.W. (2017). Cultivating youth resilience to prevent bullying and cyberbullying. <i>Victimization Child Abuse & Neglect</i>, 73, 51–62 http://dx.doi.org/10.1016/j.chiabu.2017.09.010</p> | |
| Abstract | <p>In an effort to better prevent and respond to bullying and cyber bullying, schools are recognizing a need to focus on positive youth development. One often-neglected developmental construct in this rubric is resilience, which can help students successfully respond to the variety of challenges they face. Enhancing this internal competency can complement the ever-present efforts of schools as</p> |

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| | they work to create a safe and supportive learning environment by shaping the external environment around the child. Based on a national sample of 1204 American youth between the ages of 12 and 17, we explore the relationship between resilience and experience with bullying and cyberbullying. We also examine whether resilient youth who were bullied (at school and online) were less likely to be significantly impacted at school. Results show resilience is a potent protective factor, both in preventing experience with bullying and mitigating its effect. Implications for school and community-based interventions are offered. |
| Risk factors | Bullying and cyber bullying |
| Protective factors | Internal competency |
| Resources | Individual level. Personal |
| 55. Panter-Brick, C. et al., (2015). Trauma memories, mental health, and resilience: a prospective study of Afghan youth. <i>Journal of Child Psychology and Psychiatry</i>, 56(7), 814–825 doi:10.1111/jcpp.12350 | |
| Abstract | Background: Studies of war-affected youth have not yet examined how trauma memories relate to prospective changes in mental health and to subjective or social experiences. Methods: We interviewed a gender-balanced, randomly selected sample of Afghan child-caregiver dyads (n = 331, two waves, 1 year apart). We assessed lifetime trauma with a Traumatic Event Checklist, past-year events with a checklist of risk and protective events, and several child mental health outcomes including posttraumatic distress (Child Revised Impact of Events Scale, CRIES) and depression. We examined the consistency of trauma recall over time, identified mental health trajectories with latent transition modeling, and assessed the predictors of posttraumatic distress and depression trajectories with multinomial logistic regressions. Results: From baseline to follow-up, reports of lifetime trauma significantly changed ($p \leq 0.01$). A third of the cohort reported no trauma exposure; only 10% identified the same event as their most distressing experience. We identified four CRIES trajectories: low or no distress (52%), rising distress (15%), declining distress (21%), and sustained high distress (12%). Youth with chronic posttraumatic distress were more likely to be girls (OR = 5.78, $p \leq 0.01$), report more trauma exposure at baseline (OR = 1.55, $p \leq 0.05$) and follow-up (OR = 5.96, $p \leq 0.01$), and experience |

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| | on-going domestic violence (OR = 4.84, $p \leq 0.01$). The risks of rising distress and sustained distress showed a steady increase for youth recalling up to four traumatic experiences. Depression and CRIES trajectories showed weak comorbidity. Conclusions: Memories of violent events are malleable, embedded in social experiences, and present heterogeneous associations with posttraumatic distress. Our study provides insights on resilience and vulnerability to multiple adverse childhood experiences, highlighting research and clinical implications for understanding trauma in conflict-affected youth. |
| Risk factors | Domestic violence Poverty Insecurity |
| Protective factors | Forgetting Repression of memories of life-time trauma |
| Resources | Personal and individual characteristics |
| <p>56. DaViera et al., (2020). Safe Spaces Embedded in Dangerous Contexts: How Chicago Youth Navigate Daily Life and Demonstrate Resilience in High-Crime Neighbourhoods. <i>Community Psychology</i>, 66, 65–80 DOI 10.1002/ajcp.12434</p> | |
| Abstract | <p>Much is known about how experiences of community violence negatively affect youth, but far less research has explored how youth remain resilient while living in dangerous neighbourhoods. This study addresses this need by analysing in-depth, geo-narrative interviews conducted with 15 youth (60% Black, 27% Latinx, 53% female, 14 to 17 years old) residing in low-income, high-crime Chicago neighbourhoods to explore youths' perceptions of safety and strategies for navigating neighbourhood space. After carrying geographical positioning system (GPS) trackers for an eight-day period, youths' travel patterns were mapped, and these maps were used as part of an interview with youth that explored daily routines, with special consideration paid to where and when youth felt safe. Drawing on activity settings theory and exploring youth voice, we find that experiences of community violence are commonplace, but youth describe how they have safe spaces that are embedded within these dangerous contexts. Perceptions of safety and danger were related to environmental, social, and temporal cues. Youth reported four overarching safety strategies, including avoidance, hyper</p> |

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| | vigilance, self-defence, and emotional management, but these strategies considerably varied by gender. We discuss implications for practice and future directions of research. |
| Risk factors | Dangerous neighbourhood Community violence |
| Protective factors | Safe places Self defence Emotional regulation Safety strategies such as avoidance, hyper vigilance, |
| Resources | Individual perceived ability Social context and community level |
| <p>57. Gartland, D., Riggs, E., Muyeen, S., et al. (2019). What factors are associated with resilient outcomes in children exposed to social adversity? A systematic review. <i>BMJ Open</i> 2019;9:e024870. doi:10.1136/bmjopen-2018-024870</p> | |
| Abstract | <p>Objectives Children exposed to social adversity—hardship as a result of social circumstances such as poverty or intergenerational trauma—are at increased risk of poor outcomes across the life course. Understanding what promotes resilient outcomes is essential for the development of evidence informed intervention strategies. We conducted a systematic review to identify how child resilience is measured and what factors are associated with resilient outcomes. Design Systematic search conducted in CINAHL, MEDLINE and PsychInfo from January 2004 to October 2018 using the keywords ‘resilien* and child* in the title or abstract. Eligible studies: (1) described children aged 5–12 years; (2) identified exposure to social adversity; (3) identified resilience; and (4) investigated factors associated with resilience.</p> <p>Outcome measures (1) approaches to identifying resilience and (2) factors associated with resilient outcomes. Results From 1979 studies retrieved, 30 studies met the inclusion criteria. Most studies were moderate to high quality, with low cultural competency. Social adversity exposures included poverty, parent loss, maltreatment and war. Only two studies used a measure of child resilience; neither was psychometrically validated. Remaining studies classified children as resilient if they showed positive outcomes (eg, mental health or academic achievement) despite adversity. A range of child,</p> |

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| | <p>family, school and community factors were associated with resilient outcomes, with individual factors most commonly investigated. The best available evidence was for cognitive skills, emotion regulation, relationships with caregivers and academic engagement.</p> <p>Conclusions While there is huge variation in the type and severity of adversity that children experience, there is some evidence that specific individual, relational and school factors are associated with resilient outcomes across a range of contexts. Such factors provide an important starting point for effective public health interventions to promote resilience and to prevent or ameliorate the immediate and long-term impacts of social adversity on children.</p> |
| Risk factors | <p>Hardship</p> <p>Parent loss</p> <p>Maltreatment</p> |
| Protective factors | <p>Cognitive skills</p> <p>Emotion regulation</p> <p>Relationships with caregivers</p> <p>Academic engagement</p> |
| Resources | Individual characteristics and environmental factors |
| <p>58. Giordano, F. et al. (2019). Testing Assisted Resilience Approach Therapy (ARAT) with children victims of violence. <i>Children and Youth Services Review</i>, 96, 286–293 https://doi.org/10.1016/j.chidyouth.2018.11.050</p> | |
| Abstract | <p>Background: Violence against children is considered one of the most serious human rights violation in Lithuania. Several studies affirm that child maltreatment is one of the main predictors of subsequent PTSD, and that resilience processes can lead to successful adaptation despite traumatic experience. Out of this concept came an empirical investigation on the role of resilience in supporting children victims of violence.</p> <p>Objectives: The aim of this pilot study was to determine whether the increment in resilience paralleled with the application of the Assisted Resilience Approach Therapy with children victims of violence could predict lower trauma-related symptoms at the end of the treatment.</p> <p>Participants and setting: 65 children (mean age=13.03; range=9–17) victims of different types of violence and neglect, referred to 25 day-care centers across Lithuania specialized in child violence.</p> |

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| | <p>Methods: The Child Youth Resilience Measure (CYRM-28) and the Trauma Symptom Checklist for Children (TSCC) have been administered to children before and at the end of the treatment. A structural equation modeling (SEM) was performed to test direct relationship between the resilience increase over the treatment and the trauma-related outcomes at the end of it, by controlling the direct effect of trauma-related symptoms at the baseline on the outcomes.</p> <p>Results: The increase in resilience along the treatment predicts lower levels of anger and dissociation after the treatment.</p> <p>Conclusion: Resilience increase appears to predict better outcomes in mental health of children victims of violence. Therefore, clinicians may consider the enhancement of resilience process within the therapy and researchers may assess the protective role of resilience process on the mental health outcomes.</p> |
| Risk factors | <p>Intra familiar violence</p> <p>Physical maltreatment</p> <p>Witnessing violence</p> <p>Neglect and sexual abuse</p> |
| Protective factors | <p>Individual skills</p> <p>Relationship with care givers</p> |
| Resources | <p>Personal and family level characteristics</p> |
| <p>59. Segura, A. et al., (2017). Resilience and psychopathology among victimized youth in residential care. <i>Child Abuse & Neglect</i>, 72, 301–311 http://dx.doi.org/10.1016/j.chiabu.2017.08.019</p> | |
| Abstract | <p>This study examines the role of several resilience resources in the relationship between lifetime victimization and mental health problems among adolescents in care. The sample comprised 127 adolescents (53.% females, aged 12–17 years) from residential care facilities in Catalonia, Spain. The Juvenile Victimization Questionnaire, the Youth Self-Report, and the Adolescent Resilience Questionnaire were used to assess victimization, psychological symptoms, and resilience respectively. Results indicated that poly-victimization was associated with fewer resources, and with an increased risk of mental health problems. Self-resources mediated the relationship between victimization and internalizing and externalizing symptoms; community support mediated the relationship between victimization and internalizing symptoms. Self,</p> |

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| | <p>school and peer support moderated the relationship between victimization and externalizing symptoms. Adolescents with fewer self-resources and less school support reported more externalizing symptoms, as did those with more peer support. However, poly-victimized youths reported symptoms within the clinical range, regardless of their level of resources. The findings stress the importance of preventing poly-victimization and of empowering poly-victimized adolescents, who appear to present low levels of resources. Researchers and clinicians should continue to study the poly-victimization/ psychopathology relationship, and also design interventions and prevention programs which incorporate the most relevant resilience resources.</p> |
| Risk factors | <p>Poly victimisation Interpersonal violence</p> |
| Protective factors | <p>Self-resources Community support</p> |
| Resources | <p>Personal and environmental factors</p> |
| <p>60. Johns, M. M. (2019). Strengthening Our Schools to Promote Resilience and Health Among LGBTQ Youth: Emerging Evidence and Research Priorities from The State of LGBTQ Youth Health and Wellbeing Symposium. <i>LGBT</i>, 6(4) DOI: 10.1089/lgbt.2018.0109</p> | |
| Abstract | <p>Lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ) adolescents face well-documented health disparities in suicide risk, substance use, and sexual health. These disparities are known to stem, in part, from stigma directed toward LGBTQ youth in the form of minority stressors such as violence, discrimination, and harassment. Given the proportion of time that LGBTQ students spend in school, schools provide a critical context within which protective factors may be developed and leveraged to improve the health and wellbeing of these populations. This article provides a summary of key findings from a discussion among researchers, practitioners, and community members who participated in “The State of LGBTQ Youth Health and Wellbeing: Strengthening Schools and Families to Build Resilience,” a public symposium held in June 2017. We detail emerging science on and future priorities for school-based research with LGBTQ youth which were identified by attendees at this meeting, with a particular focus on intersectionality,</p> |

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| | supportive adults in schools, and in-school programs. We call for more school-based research on priority gaps such as how LGBTQ students' intersecting identities affect their in-school experiences, how to design professional development programs that cultivate supportive educators, and how to leverage gay-straight alliances/gender and sexuality alliances as sites of health programming for LGBTQ students. |
| Risk factors | Suicide risk; Substance abuse; Stigma; Discrimination and harassment |
| Protective factors | School connectedness Supportive educators Anti-bullying policies |
| Resources | In-school resources |
| <p>61. Howell et al., (2015). Promoting Resilience in Children Exposed to Intimate Partner Violence Through a Developmentally Informed Intervention: A Case Study. <i>Clinical Case Studies</i>,14(1), 31– 46 DOI: 10.1177/1534650114535841</p> | |
| Abstract | A significant proportion of children exposed to intimate partner violence (IPV) are preschool aged, yet few interventions exist for this population. Those interventions that do exist focus primarily on reducing psychopathology, without addressing the range of potential outcomes, including resilient functioning. This case study considers the treatment of Alexis, a 6-year-old, African American girl who was referred for services following exposure to IPV. At her initial intake, she not only showed evidence of posttraumatic stress but also exhibited characteristics of resilient functioning. Over the course of a 10-session group intervention, Alexis's resilient functioning improved, according to both therapist and maternal report. At follow-up, her posttraumatic stress symptoms were below the clinical range, indicating improvement in psychopathology paralleling her increases in resilient functioning. This case lends support for the use of group interventions with young children exposed to violence and also emphasizes the importance of assessing multiple domains of functioning, including resilient behaviours. |
| Risk factors | Behavioural stress Emotional stress Post-traumatic stress symptoms |

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| Protective factors | Emotional regulation Personal strength Prosocial skills |
| Resources | Personal protective factors |

Appendix 2b: Extracts of abstract/article analysis

Analysis Breakdown

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| <p>1. van Breda, A.D., Theron, & L.C. (2018). A critical review of South African child and youth resilience studies, 2009–2017. <i>Children and Youth Services Review</i>, (91), 237–247 https://doi.org/10.1016/j.chidyouth.2018.06.022</p> | |
| Abstract | <p>In contexts of high levels of structural disadvantage, such as South Africa, resilience among children and youth becomes increasingly important to buffer children and youth from the negative effects of adversity. This article reports on a systematic review of research conducted in South Africa over the period 2009 to 2017 on the resilience of children and youth (ages 0 to 24) from the perspectives of young people themselves. It serves as a follow-up and refinement of an earlier publication in 2010. A total of 61 journal articles are reviewed. Four categories of social-ecological resilience-enablers emerge from these studies, viz. personal, relational, structural and spiritual/cultural. Most of the resilience-enablers identified in these studies are in the personal and relational domains. Various reasons for this finding are discussed, and emerging recommendations for service professionals (particularly social worker and educational psychologists) and youth resilience researchers are advanced.</p> |
| Risk factor | <p>Orphan hood Poverty</p> |
| Protective factors | <p>Personal, Relational, Structural Spiritual/cultural</p> |
| Resources | <p>Personal and community</p> |
| <p>2. Theron. L. (2020). Resilience of sub-Saharan children and adolescents: A scoping review. <i>Transcultural Psychiatry</i>, 1–23. DOI: 10.1177/1363461520938916</p> | |
| Abstract | <p>The population of sub-Saharan children and adolescents is substantial and growing. Even though most of this population is vulnerable, there is no comprehensive understanding of the social-ecological factors that could be leveraged by mental health practitioners to support their resilience. The present study undertakes a narrative scoping review of empirical</p> |

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| | <p>research (quantitative, qualitative, and mixed) on the resilience of children and adolescents living in sub-Saharan Africa to determine what enables their resilience and what may be distinctive about African pathways of child and adolescent resilience. Online databases were used to identify full-text, peer-reviewed papers published 2000–2018, from which we selected 59 publications detailing the resilience of children and/or adolescents living in 18 sub-Saharan countries. Studies show that the resilience of sub-Saharan children and adolescents is a complex, social-ecological process supported by relational, personal, structural, cultural, and/or spiritual resilience-enablers, as well as disregard for values or practices that could constrain resilience. The results support two insights that have implications for how mental health practitioners facilitate the resilience of sub-Saharan children and adolescents: (i) relational and personal supports matter more-or-less equally; and (ii) the capacity for positive adjustment is complexly interwoven with African ways-of-being and -doing.</p> |
| Risk factor | |
| Protective factors | |
| Resources | |
| <p>3. Jaramillo, J., & Kothari, B. (2021). Supportive Caseworkers, School Engagement, & Posttraumatic Symptoms Among Youth in Foster Care. <i>Child and Adolescent Social Work Journal</i>. 10.1007/s10560-021-00749-w.</p> | |
| Abstract | <p>The current study used a resilience framework to describe youth experiences with their caseworkers, examine the association of youth–caseworker relationship quality with school engagement, and to examine the differential impact of youth–caseworker relationships on youth school engagement by level of youth risk (i.e. posttraumatic symptoms). Secondary data collected from youth in foster care were analyzed via descriptive statistics, correlations, and linear regression with moderation. On average, youth reported relatively high relationship quality with caseworkers. There was substantial variation and developmental differences in youth–caseworker relationship quality. Additionally, current findings suggest that positive youth–</p> |

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| | caseworker relationships can bolster school engagement. Finally, the study provided support for differential impact theory whereby the influence of youth–caseworker relationships on youth school engagement was stronger for youth with fewer posttraumatic symptoms. Implications for research, intervention efforts, policy, and practice in child welfare, education, and mental health are discussed. |
| Risk factor | |
| Protective factors | |
| Resources | |
| <p>4. Flynn, R. J., Tessier, N. G., & Coulombe, D. (2013) Placement, protective and risk factors in the educational success of young people in care: cross-sectional and longitudinal analyses. European Journal of Social Work, 16(1), 70-87, DOI: 10.1080/13691457.2012.722985</p> | |
| Abstract | <p>In the present study, we formulated and tested a basic model of the educational success of young people in out-of-home care. We used data from 2007 to 2008 and 2008 to 2009 on a sample of 1106 young people in care in Ontario, Canada. The youths were 12-17 years of age; 56.24% were male and 43.76% female. The indicators of educational success in both years were the youth’s average marks and the youth’s school performance in reading, math, science and overall, as rated by his or her caregiver. Based on resilience theory and on a model of the influence of maltreatment on educational achievement, our model included four categories of predictors: control variables (youth gender and age and, in the longitudinal analyses, the year 7 value of the year 8 dependent variable), three placement types (foster, kinship care or group homes), three risk factors (previous repetition of a grade in school, a health-related cognitive impairment index and a measure of behavioural difficulties) and three protective factors (caregiver involvement in the youth’s school, caregiver educational aspirations for the young person and the youth’s total number of internal developmental assets). Cross-sectional and longitudinal hierarchical regression analyses provided mixed support for the proposed model. The youth’s gender, level of behavioural difficulties and number of developmental assets, and the caregiver’s educational aspirations for the young person, emerged as the most consistent predictors of educational success. The implications and limitations of the findings were discussed.</p> |

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| Risk factor | |
| Protective factor | |
| Resources | |
| <p>5. Kaiser, E., & Sinanan, A. N. (2020). Survival and Resilience of Female Street Children Experiencing Sexual Violence in Bangladesh: A Qualitative Study. <i>Journal of child sexual abuse</i>, 29(5), 550–569. https://doi.org/10.1080/10538712.2019.1685615</p> | |
| Abstract | <p>The goal of this exploratory study was to inspect and comprehend the phenomenon of female street children who left their homes and came to the streets for survival. The study explored any violent experience (i.e., sexual violence) they had, their feedback about the support they receive from the non-governmental organizations (NGOs). It also aimed to explore their hopes, aspiration, resilience and their thoughts about their lives, despite the challenges they faced. The study utilized qualitative methodology and information was collected through open-ended questions. The study was guided by resilience theory to understand the coping strategy and resilience among these children. Twelve female children between the ages 13–14 were selected from the local NGOs in Dhaka, Bangladesh. For analysis purposes, the study utilized grounded theory and identified three themes. These themes include Reasons for moving to the streets, experience of living on the streets and hopes and aspiration: Resilience. Majority of the respondents experienced sexual violence and despite all the challenges many of these children could still dream of a pleasant future.</p> |
| Risk factor | |
| Protective factor | |
| Resources | |
| <p>6. Lee, S., McMurtry, C. M., Summers, C., Edwards, K., Elik, N., & Lumley, M. N. (2020). Quality of Life in Youth With Chronic Pain: An Examination of Youth and Parent Resilience and Risk Factors. <i>The Clinical journal of pain</i>, 36(6), 440–448. https://doi.org/10.1097/AJP.0000000000000820</p> | |
| Abstract | <p>Objectives: Pediatric chronic pain has often been examined from a risk perspective, and relatively less is known about the individual and family-level resilience factors that help youth with chronic pain maintain their quality of life (QOL). This cross-sectional study: (1) examined the relations among purported youth and parent resilience</p> |

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| | <p>(youth pain acceptance and pain self-efficacy, parent psychological flexibility) and risk (youth pain intensity and parent protectiveness) factors with youth QOL, and (2) tested exploratory statistical mechanisms that may explain relations between parent and youth variables.</p> <p>Methods: Participants included 122 youth (10 to 17 y; M= 14.26, SD =2.19) seen in an interdisciplinary pediatric chronic pain program and a parent. Youth completed measures of their average pain, QOL, pain acceptance, and pain self-efficacy. Parents completed measures of their pain-related psychological flexibility and behavioural responses to pain (ie, protectiveness, distraction, monitoring, minimizing).</p> <p>Results: Youth pain acceptance, pain self-efficacy, and parent psychological flexibility were highly positively correlated with each other, and with overall youth QOL. Evidence for a buffering effect of pain acceptance and pain self-efficacy on the association between pain intensity and QOL was not found. Protectiveness was found to be a significant mediator of the relation between parental psychological flexibility and youth QOL.</p> <p>Discussion: The results are discussed in the context of the resilience-risk framework and current understandings of the role of parental factors for pediatric chronic pain.</p> <p>Key Words: pediatric chronic pain, resilience, parents, quality of life.</p> |
| Risk factor | |
| Protective factor | |
| Resources | |
| <p>7. Smith, N. A., Brown J. L., Tran, T., & Suárez-Orozco, C. (2020). Parents, friends and immigrant youths' academic engagement: A mediation analysis. <i>International Journal of Psychology</i>, 55(5), 743-753. Doi: 10.1002/ijop.12672.</p> | |
| Abstract | <p>Parents and friends can help facilitate the academic engagement of newcomer immigrant youth during the early post-migration years. Using an accelerated longitudinal design and the integrative risk and resilience framework, we examined how parent home involvement and friendships were directly and indirectly associated with the development of newcomer immigrant youths' academic engagement. We used data from three waves (Years 3–5) of the Longitudinal Immigrant Student Adaptation study where a culturally diverse group</p> |

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| | <p>of immigrant youth (N = 354, ages 10–17, M (time in US) = 3.98 years, SD = 1.39) in the United States reported on their perceptions of parent home involvement (educational values and communication) and friendship (educational values and academic support) in Year 3 and on their academic engagement (behavioural and emotional) across 3 years.</p> <p>Findings showed high-stable behavioural and emotional engagement and direct positive associations between perceptions of parent home involvement and initial levels of behavioural and emotional engagement and between perceptions of friend educational values and initial levels of emotional engagement. Additionally, perceptions of parents' educational values indirectly contributed to initial levels of emotional engagement through positive associations with perceptions of friends' educational values.</p> <p>These findings can inform family–school partnerships and school-interventions targeting newcomer immigrant youths' engagement.</p> |
| Risk factor | |
| Protective factor | |
| Resources | |
| <p>8. Stubbs, C. & Hartz, A. (2020). Resilience to reoffending: Practice considerations for psychological therapies supporting young men to overcome adversity. <i>Counselling & Psychotherapy Research</i>,20(4), 563-731. DOI: 10.1002/capr.12350</p> | |
| Abstract | <p>Within the United Kingdom, 75% of young men aged 18–25 will reoffend within two years of being released from prison, yet we still do not know enough about how underlying protective mechanisms contribute to positive outcomes for those who have engaged in antisocial behaviour. This study explored the mechanisms that support young men's resilience to reoffending. The aim was to inform the approach of practitioners working with this population, in particular counselling psychologists, and to contribute to youth justice policy. Additionally, young people who are involved in crime are often discussed in the literature on youth offending and mental health, yet rarely given the chance to tell their story of changing their trajectory. Eight young men, aged 18–25, with previous involvement in the criminal justice system were interviewed using narrative enquiry with an emphasis on the subjective experiences that nurtured</p> |

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| | <p>their resilient pathways. The study drew on Hart, Blincow and Thomas' Resilience Framework (Hart, Blincow, & Thomas, 2007) to categorise the data. The young men's accounts highlighted that mechanisms within all the categories of the Resilience Therapy (Hart, Blincow & Thomas, 2007) framework were pertinent in nurturing resilient pathways: Basics, Belonging, Learning, Coping and Core Self. The study further demonstrated how the young men's contexts were significant in fostering their resilience to reoffending. The findings suggest the importance of a counselling and psychotherapy approach that targets both social and individual mechanisms to facilitate growth. In a context with significant social, economic and political challenges, the absence of a two-pronged approach will limit the young men's resilience to surviving.</p> |
| Risk factor | |
| Protective factor | |
| Resources | |
| <p>9. Woods-Jaeger, B., Briggs, E. C., Gaylord-Harden, N., Cho, B., & Lemon, E. (2021). Translating cultural assets research into action to mitigate adverse childhood experience-related health disparities among African American youth. <i>American Psychologist</i>, 76(2), 326-336. Doi: 10.1037/amp0000779. PMID: 33734798.</p> | |
| Abstract | <p>Adverse childhood experiences (ACEs) including trauma exposure, parent mental health problems, family dysfunction, and community-level adversities put individuals at risk for a host of negative health outcomes. The effects of cumulative ACEs are numerous, diverse, and can predispose an individual to cognitive, emotional, behavioral, and physical health problems as well as premature death. African American youth experience disproportionate exposure to ACEs in the context of racism that increases risk for allostatic load and hinders systems of care responses resulting in physical and mental health disparities. To maximize efforts to mitigate these disparities it is imperative that we translate research into action to respond to ACEs in the context of racism. This article synthesizes African American cultural assets research within a resilience after trauma framework to provide a foundation for translating research into action to mitigate ACE-related disparities among African American youth. We present task shifting and youth-partnered advocacy as two strategies</p> |

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| | supported by this framework and describe their application to responding to ACEs in the context of racism. |
| Risk factor | |
| Protective factor | |
| Resources | |

Appendix 3a: PRA prompts

PRA Activities

Funke, Ruth, Mpho, Nombali

1. Introduction – **Funke/Ruth**

- **Activity: Introducing self – Nombali (5 min)**

“I am Nombali, who are you? She is Nombali, I am Mapule, who are you? She is Nombali, she is Mapule, I am Ruth, who are you?”

2. Expectations for the day – **Mpho (15 min)**

- List their expectations

3. Definition of keywords to be used – **Mpho** (Ask them to define the keywords)

- **Risk Factors:** are characteristics at the biological, psychological, family, community, or cultural level that lead and are associated with a higher likelihood of negative outcomes or cause harm.
- **Protective Factors:** are characteristics associated with a lowering the likelihood of negative outcomes or that reduce a risk factor’s impact. Protective factors may be seen as positive countering events.
- **Resources:** include personal skills and abilities, as well as environmental resources, institutional, ethical, and emotional access to the social environment.
- **Resilience:** is the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress — such as family and relationship problems, serious health problems, or workplace and financial stressors.
- **Context:** refers to the position, situation or circumstances in which an event occurs. This can be the particular setting in which the event occurs.

4. Warm-up discussions – (Rapport building exercise) – **Zanele (5 min)**

- 4.1. What do you think can make youth resilient?
- 4.2. What do youth in South Africa need to be resilient?

5. Risk-related questions (2 posters) – Zanele (1 hr)

- 5.1. In your own understanding, what risks are characteristic to youth?
- 5.2. Mention all youth related risks – e.g. crime, violence, poverty – picture of e.g. crime (poster)
- 5.3. Are risks characteristic to a particular context / situation / position / person etc? Indicate the type of context the risk can occur in. i.e. 2 or 3 images indicating different contexts.

6. Protective factors – Mapule (30 min)

- 6.1. What kind of protective factors do you need to overcome the risks? **Flip chart.**
- 6.2. Are protective factors linked to a particular context / position / person / situation etc. State the contexts for the protective factors identified above (e.g. family, school)? **Same flip chart page as 6.1.**
- 6.3. If possible, map the risks to the protective factors needed to overcome it (Note: multiple protective factors can overcome one risk). **Flip chart.**

7. Resources – Nombali (1 hr)

- 7.1. What resources are available in your context (e.g. schools, family, government)? (Images: teacher at school, police officer at the station, nurse in a clinic) poster 3
- 7.2. How can you access these resources?
- 7.3. What kind of protection do these resources offer to the risks identified or in general?
- 7.4. Do the resources protect you from all the risks (mention the risks that you are protected from)?
Flip chart

Additional Questions on Resources – Mpho (discussion) (20 min)

Know where can you go / how to get advice?

1. How can youth become aware of the protective factors and resources which are available to them?
2. Think of any other youth resources that you know – how do they protect you from risk?

Reflection exercises – Mpho (10 min)

- See expectations / recap: were your expectations met?

Closing – debrief exercise – Nombali (10 min)

- Imitation/communication game

Thank them: Funke/Ruth (10 min)

Appendix 3b: Extracts of abstract/article analysis

PRA activities and questions for the focus group

Anna-Barbara, Nombali, Mapule

1. Introduction – **Anna-Barbara (max 2 min)**

- **Activity: Introducing self – Nombali (max 5 min)**

As the planned PRA activity may not work online, I suggest we each say our name, place where we stay, our greatest wish that day, any wish, not necessarily for the focus group...

E.g. “I am Anna-Barbara du Plessis. I stay in Stellenbosch. My greatest wish for today is that my children are happy.”

2. Expectations for the day – **Mapule (max 5 min)**

- List their expectations.

3. Definition of keywords to be used – **Anna-B (max 5 min)** (Ask them to define the keywords)

These are the definitions for the ambassadors.

- **Resilience:** The ability to overcome challenges and to recover from them quickly.
- **Resources:** Any asset/s found within a person, or their environment that can be of use to that person or the people in that environment.
- **Protective factors:** Any tool or resource within a person or their environment that can help to prevent the person from encountering any harm or being exposed to danger.
- **Risk factors:** Any tool or resource within a person or their environment that can put one in danger or in harm’s way, and increases the chances of something negative happening to that person.
- **Context:** A circumstance, situation, or event in which something happens and can be best explained from.

These are the definitions that ground our thinking for our background only.

- **Risk Factors:** are characteristics at the biological, psychological, family, community, or cultural level that lead to and are associated with a higher likelihood of negative outcomes or cause harm.
- **Protective Factors:** are characteristics associated with a lowering the likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events.
- **Resources:** include personal skills and abilities, as well as environmental resources, institutional, ethical, and emotional access to the social environment.
- **Resilience:** is the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress — such as family and relationship problems, serious health problems, or workplace and financial stressors.
- **Context:** refers to the position, situation or circumstances in which an event occurs. This can be the particular setting in which the event occurs.

4. Warm-up discussions – (Rapport building exercise) – Anna-B (max 5 min)

- 4.1. What do you think can make youth resilient?
- 4.2. What do youth in South Africa need to be resilient?

5. Risk-related questions – Nombali (max 10 min)

- 5.1. In your own understanding, what risks are characteristic to youth?
- 5.2. Mention all youth related risks (if no answers are given, ask What puts youth in danger or in harm's way? Perhaps something inside the youths? Perhaps something in the youth's environment, such as crime or violence, or poverty...)
- 5.3. Are risks characteristic to a particular context / situation / position / person etc? State where can these risks occur, such as at school, the community, home...?

6. Protective factors – Mapule (max 10 min)

- 6.1. What kind of protective factors do you need to overcome the risks?
- 6.2. Are protective factors linked to a particular context / position / person / situation etc. State where can these protective factors occur, such as in the family, school?
- 6.3. If possible, which protective factors are needed to overcome the risks? (Note: multiple protective factors can overcome one risk).

7. Resources – Nombali (max 10 min)

- 7.1. What resources are available in your context (e.g. schools, family, government, clinic)?
- 7.2. How can you access these resources?
- 7.3. What kind of protection do these resources offer to the risks identified or in general?
- 7.4. Do the resources protect you from all the risks (mention the risks that you are protected from)?

Additional Questions on Resources – Anna-Barbara (discussion) (max 10 min)

Know where can you go / how to get advice?

1. How can youth become aware of the protective factors and resources which are available to them?
2. Think of any other youth resources that you know – how do they protect you from risk?

Reflection exercises – Mapule (max 5 min)

- See expectations / recap: were your expectations met?

Closing – debrief exercise- Nombali (max 5 min)

- Again, I think we need to change the debrief exercise for the FG. What about asking everyone to close their eyes, take a few deep breaths and then say, one by one: I grew today because I learnt from you that....

Thank them: Anna-Barbara (max 2 min)

PRA activities and questions for the focus group

Emmanuel, Zanele, Mpho

1. Introduction – Emmanuel (max 2 min)

- **Activity: Introducing self – Zanele (max 5 min)**

As the planned PRA activity may not work online, I suggest we each say our name, place where we stay, our greatest wish that day, any wish, not necessarily for the focus group...

E.g. “I am Anna-Barbara du Plessis. I stay in Stellenbosch. My greatest wish for today is that my children are happy.”

2. Expectations for the day – Mpho (max 5 min)

- List their expectations.

3. Definition of keywords to be used – **Mpho (max 5 min)** (Ask them to define the keywords)

These are the definitions for the ambassadors.

- **Resilience:** The ability to overcome challenges and to recover from them quickly.
- **Resources:** Any asset/s found within a person, or their environment that can be of use to that person or the people in that environment.
- **Protective factors:** Any tool or resource within a person or their environment that can help to prevent the person from encountering any harm or being exposed to danger.
- **Risk factors:** Any tool or resource within a person or their environment that can put one in danger or in harm's way, and increases the chances of something negative happening to that person.
- **Context:** A circumstance, situation, or event in which something happens and can be best explained from.

These are the definitions that ground our thinking for our background only.

- **Risk Factors:** are characteristics at the biological, psychological, family, community, or cultural level that lead to and are associated with a higher likelihood of negative outcomes or cause harm.
- **Protective Factors:** are characteristics associated with a lowering the likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events.
- **Resources:** include personal skills and abilities, as well as environmental resources, institutional, ethical, and emotional access to the social environment.
- **Resilience:** is the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress — such as family and relationship problems, serious health problems, or workplace and financial stressors.
- **Context:** refers to the position, situation or circumstances in which an event occurs. This can be the particular setting in which the event occurs.

4. Warm-up discussions – (Rapport building exercise) – **Emmanuel (max 5 min)**

- 4.1. What do you think can make youth resilient?
- 4.2. What do youth in South Africa need to be resilient?

5. Risk-related questions – **Zanele (max 10 min)**

- 5.1. In your own understanding, what risks are characteristic to youth?
- 5.2. Mention all youth related risks (if no answers are given, ask What puts youth in danger or in harm's way? Perhaps something inside the youths? Perhaps something in the youth's environment, such as crime or violence, or poverty...)

- 5.3. Are risks characteristic to a particular context / situation / position / person etc? State where can these risks occur, such as at school, the community, home...?

6. Protective factors – Emmanuel (max 10 min)

- 6.1. What kind of protective factors do you need to overcome the risks?
- 6.2. Are protective factors linked to a particular context / position / person / situation etc. State where can these protective factors occur, such as in the family, school?
- 6.3. If possible, which protective factors are needed to overcome the risks? (Note: multiple protective factors can overcome one risk).

7. Resources – Zanele (max 10 min)

- 7.1. What resources are available in your context (e.g. schools, family, government, clinic)?
- 7.2. How can you access these resources?
- 7.3. What kind of protection do these resources offer to the risks identified or in general?
- 7.4. Do the resources protect you from all the risks (mention the risks that you are protected from)?

Additional Questions on Resources – Mpho (discussion) (max 10 min)

Know where can you go / how to get advice?

1. How can youth become aware of the protective factors and resources which are available to them?
2. Think of any other youth resources that you know – how do they protect you from risk?

Reflection exercises – Mpho (max 5 min)

- See expectations / recap: were your expectations met?

Closing – debrief exercise- Zanele (max 5 min)

- Again, I think we need to change the debrief exercise for the FG. What about asking everyone to close their eyes, take a few deep breaths and then say, one by one: I grew today because I learnt from you that...

Thank them: Emmanuel (max 2 min)

Appendix 4: Extracts of PRA/Focus group transcripts

Themes and sub-themes generated from the data collected across all the PRA's and Focus-Group discussions are:

| Themes | Sub-themes |
|---------------------------------------|---|
| 1.Crime and violence | Gender-based violence; neglect; abusive homes; bribery (sexual favours for job opportunities); crime and violence |
| 2.Mental Health | Peer pressure; positive self-esteem; self-awareness; strong mindset; mental health (depression...); bullying |
| 3.Family background/Upbringing | Parental involvement; morals and values; generational knowledge; absent parents; family structure |
| 4.Context/Environment | Environmental and current affairs; racism and discrimination |
| 5.Resources | support and economic opportunities; Capacity building and awareness workshops; Information campaigns; Creating SMME's; Lack of education and opportunities; Exposure to poverty; Adequate access to health care services; Functionality of policy services. |
| 6. Substance abuse | Drugs, cigarettes, alcohol. |
| 7.Lack of awareness/Ignorance | Negligence and ignorance of the youth; Lack of information; lack of knowledge. |
| 8. Self-identity | |
| 9.Education | Curriculum; vocational learning; Over-crowded classrooms; Inequality in education (the differences in public vs private schools); peer-education; formal and informal education. |
| 10.Mentorship | Role models, mentors... |

RISK FACTORS

Question 5.1: In your own understanding what risks are characteristic to the youth?

Theme: Family

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| 1. Background where you come from for example the family, can be a risk to the youth |
| 2. The way that we are brought up, and the environment that we live in contributes to the way in which we view things. |
| 3. We grew up in families that are not encouraging. |
| 4. Assumption of caregiving and responsibility at an early |
| 5. Neglect, or leaving the child to be looked after by friends... |
| 6. Not having a stable home environment would affect a child more, not meaning that it would not affect an adult, but when it comes to mental health and mental development, it would affect a child more. A plant needs stable ground to grow into a tree. |
| 7. Parents need to be knowledgeable as they do not know it all. When parents are knowledgeable, they will be able to assist the youth with the different challenges that they have, and they will also be in a better position to be good parents to their children. |
| 8. The parents therefore need to be involved in the lives of their children (parental involvement) so that they can be able to point them in the right direction should they see that they are starting to go off the right path |
| 10. Our parents and grandparents have knowledge with them that can serve as protective factors. When we listen to their teachings, we can gather morals and values that we as the youth can be able to use for ourselves, and their teachings can protect us from the risks that we are facing because whenever we face situations, we can always refer to what they taught us, and then apply that knowledge to our situations (generational knowledge) |
| 11. Broken homes , where you find that there is no stable family structure. |

Theme: Mental Health

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| 1. The lack of mental health awareness within our communities. Most of us live in rural areas where there is no mental health awareness. |
| 2. Imprisonment: Our thoughts get compressed (we are not able to think outside of the box) |
| 3. Awareness (because sometimes we are facing challenges as the youth in communities, but we do not know who to turn to or where to go). |
| 5. We also do not understand mental health. We do not take it as a critical thing within our communities. |
| 6. Peer pressure is a huge factor. The environments that we find ourselves in put us under pressure because we want to emulate what other people are doing. |
| 7. The youth must be internally motivated to overcome the risks that they are exposed to (positive self-esteem and self-awareness). |

8.The imposter syndrome which is a big thing. A lot of us are going through it, and just not having the confidence sometimes or not believing in what we are doing, especially when we are starting out. So, imposter syndrome is like an internal experience when you believe that you cannot do, or you perceive yourself not to be able to do some things.

Theme: Context/ Environment

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| 1.Social identity: The youth trying to fit into the community. |
| 2.Discrimination still exists, even though they are advocating that there no longer is discrimination, but there is still a part where discrimination exists in our society. |
| 3.Inequality of gender |
| 4.race and stereotype |
| 5.The environment, place, and location of the community can be a risk to the youth. (Some of us are from the informal settlement and this can also be a risk) |
| 6.Environmental and current affairs. |
| 7.Bullying. Bullying being direct bullying, and not cyber-bullying. |
| 8.Nepotism. Nepotism in relation to the unemployment factor. |
| 9.Lack of Ubuntu (people in communities are only concerned with looking after themselves). |
| 10. Bad governance |

Theme: Self-identity

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| 1.We suffer from a very low esteem, a lot of it is historic, it has been passed down from generation to generation. |
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Theme: Resources/ Accessibility

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| 1.Limited resources such as the internet |
| 2.Negative influences of social media. (If there is negative social media, and only negative things are trending then this will be a risk factor to the youth and may encourage them to follow negative things). |
| 3.Lack of education and opportunities. |
| 4.Exposure to poverty |
| 5.lack of skills (Young people need to be skilled and resourceful) |
| 6.There is a lack of knowledge. If the youth are not knowledgeable enough, they will not know anything and them not knowing anything is a risk factor. |
| 7.Unemployment |
| 8.Limited means to pursue personal aspirations |
| 9.Value of formal education |

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| 10. Young people lack motivation. If you are not self-motivated you will not be able to withstand a negative environment. |
| 11. No opportunities or funds to further our education: If there are no funds to study then you need to go look for a job, but at the same time there are not enough job opportunities. This will then leave you feeling helpless because you will not have anything to do, and you may feel like your life is just going around in circles. |

Theme: Crime & Violence

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| 1. Abusive homes may play a critical role in other young people who might view their lives from a negative perspective. You might find that they commit suicide; others will drop out of school; and there will be a high rate of crime in communities. |
| 2. GBV: Which can be in 3 ways. Woman abusing a male, female abusing another female or both, male, and male. |
| 3. For people in my community abuse is normal. They normalize staying in abusive marriages , and the people in the community believe that it is okay to live in fear, and to live with the fear of not knowing what might happen to you tomorrow. |
| 4. Exchange souls= Offer sexual favours to get funding |
| 5. A lot of people in communities do not understand what abuse is, so if they were to get informed about what abuse is, then people will understand it better. Families need to come together in wanting to gather more knowledge about what abuse is, what causes it, and how to combat it. |
| 6. Risk at relationship level, right we could look at things such as your intimate partner violence, that happens in relationships and that is something that is not commonly spoken about. And then if we look at risks within community that is where you would find your stigmatisation, your exclusion your discrimination. Then we can also look at risks at the community level, for example, when there are certain community development organisations you will find community members victimizing against each other. |
| 7. Family violence |

Theme: Lack of awareness/ Ignorance

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| 1. Negligence and ignorance of the youth can also be a risk factor because if the youth do not actively participate in the community, then this is a hindrance, and we are not moving forward. |
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Theme: Mentorship

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| 1. Lack of mentorship. This is at the relationship level because if our elders are not really advocating things that are positive in our lives, then our lives will just be complicated, and bad. Parents must also accept when they are wrong. Lack of mentorship from elders can be a risk factor. |
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Question 5.2: Mention all youth related risks**Theme: Family: Background/ Upbringing**

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| 1. Broken homes, where you find that there is no stable family structure. |
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Theme: Mental Health

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| 1. Mental health. We do not take it as a critical thing within our communities. (Lack of opportunities can negatively affect the mental state of individuals within the communities). |
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| 2. Peer pressure |
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Theme: Resources/ Accessibility

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| 1. Poverty |
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| 2. Unemployment |
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| 3. Lack of opportunities: there needs to be more establishments, like the youth centre in more areas, so that kids can know that there is something else to look forward to. |
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| 4. No opportunities or funds to further our education: If there are no funds to study then you need to go look for a job, but at the same time there are not enough job opportunities |
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| 5. Feedback (Lack of feedback when applying for internships, jobs...) creates doubts about one's capabilities. |
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Theme: Substance abuse

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| 1. Substance abuse: If the youth share the same thoughts, beliefs, and values, then it will be easy for them to also coerce each other into using substances. This also speaks to peer-pressure. |
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| 2. Smoking cigarettes and drugs |
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Theme: Lack of awareness/ Ignorance

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| 1. Ignorance: Some of us as the youth are ignorant, we do not take things seriously (our future and lives). |
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| 2. Lack of information |
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| 3. Lack of knowledge and a lack of awareness of existing opportunities |
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Theme: Education

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| 1. Over-crowded classrooms |
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| 2. Inequality in education (the differences in public vs high schools, as well as those differences that exist in the different higher education institutions). There were news circulating around stating that most universities start enrolling learners that come from private schools, and then fill up space by enrolling those that come from public schools. This shows that there is still a lot of inequality that exists in our education system. |
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| 3.The life skills subject taught at schools these days does not go in depth with the information that it teaches its learners. |
| 4.Teachers are not protective factors for their learners. You will find a teacher sitting with his learners after hours and thinking that this is right. You find 16-year-old at taverns with their teachers, and in this way the teacher is a risk factor. The teacher is a risk factor because he/she is supposed to be an example to their learner (lack of boundaries) . |
| 5.The teacher needs to know better (discipline) . So, teachers always must be positive examples to their learners (professionalism) . The teacher is the foundation. Instead of teachers becoming protective factors for their learners, they are the risk factors. |

Question 5.3: Are risks characteristic to a particular context/situation/position etc... Indicate the type of context the risk can occur in.

Theme: Resources/ Accessibility

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|---|
| 1.Poverty can lead to social crimes. If you have no skills, then you will not get a job to ensure that you sustain yourself. |
| 2.When it comes to the risk of lack of skills, one might argue that there are TVET colleges, but the problem arises once you are done studying, and you have acquired those skills. For example, after studying you may want to start your own plumbing business, only to find that you do not have the resources to do so (resources such as funding). |

Theme: Self-identity

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| 1.Risks can further play as characteristics in the form of personal context. In personal contexts we explained that they affect a person's development. If the risk is personal development, then it will affect the personal context in the form of affecting the person's development. This can be through the increasing of self-doubt. |
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PROTECTIVE FACTORS

Question 6.1: What kind of protective factors do you need to overcome the risks identified?

Theme: Family

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| 1.Parents need to be knowledgeable (protective factor) as they do not know it all. When parents are knowledgeable, they will be able to assist the youth with the different challenges that they have (risks), and they will also be in a better position to be good parents to their children. |
| 2.When we listen to their teachings, we can gather morals and values that we as the youth can be able to use for ourselves, and their teachings can protect us from the risks that we are facing because whenever we face |

situations, we can always refer to what they taught us, and then apply that knowledge to our situations (**generational knowledge**).

Theme: Mental Health

1. The youth must be **internally motivated** to overcome the risks that they are exposed to.

2. Positive self-esteem, self-awareness, and a strong mental capacity.

3. Emotional intelligence

Theme: Resources/ Accessibility

1. Action over awareness: More work less talk. In the government there is a lot of talk, and no action. For example, with GBV there are a lot of posters and adverts that say that GBV must come to an end/ stop GBV... but that is all just talk. We are not being shown or told how we can stop GBV. There needs to be more action. The government needs to come and say that they have established a centre with resources, and then leave it up to us to make use of those resources.

2. Support structure: We should use religious spaces as support structures. We should use these spaces to do things like offer more counselling. If a priest or pastor talks about counselling, then people are more likely to go for counselling.

3. Functionality of policy services: To make sure that they protect citizens against gender-based violence and violence of all forms, and crime.

4. Creating opportunities through giving them entrepreneurship skills, and if there are internships, then these internships need to have an assurance of giving one a permanent job.

5. Organizations can work together to raise awareness for each other, such as libraries that offer information, and how they can offer information on leaflets about other organizations.

6. These peer educators (resources) also guide matriculants (they make university applications available to the learners in matric, and career guidance (protection)).

7. Social workers (resource). They serve as a resource when they take care of children that have been neglected (risk). They can help by finding foster homes/care for these children (protection).

8. Stakeholders (resources). They can assist with skills development (protection), and this will be protection from unemployment, and low self-esteem (risk).

9. Psychologists (resources), and the risk being bitterness (risk). They can help with emotional regulation (protection).

10. Traditional leaders. Without them there will be community disputes and collusions. Advisory body to resolve the disputes, guidance to the leaders of the community and shaping the community.

11. Police station i.e. station commander (resource). Crime and drugs (risk). Protects against illegal strikes, house breaking, vandalizing, violence, drug selling and substance abuse (protective factor).

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| 12. Stadiums (resource). Children playing in the streets, and thus being exposed to danger. It will protect children from playing in the streets. It will provide a safe playground for sports activities and celebrations (protective factor). |
| 13. Community halls (resource). Without community halls we would have street meetings which would lead to violence and strikes. Because the meeting would be held out in the open Protect us from meeting on the streets; they provide shelter (protective factor), and this will help us to reduce disputes faster. They provide shelter for homeless people (risk). |
| Enforcement of policies (resource): To get rid of nepotism, and discrimination (risk factor). |

Theme: Education

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| 1. The life skills subject taught at schools these days does not go in depth with the information that it teaches its learners. Life skills education is tied with vocational learning where we are learning more about life, instead of just being thrown into a way of doing things. |
| 2. The strengthening of the education system: The education system needs to be aligned with life and soft skills, so that young people can be able to envision themselves doing better due to the skills that they will be having. |
| 3. Easy access to vocational education: You cannot use science as a measure to how intelligent a person is. You cannot judge a fish on its ability to climb a tree. Some people would be good at farming or carpentry, and we need these people. We cannot say that just because they are failing at science, then they are failing at life. There needs to be more resources that will make it easier for kids at a younger age to explore their creativity. |
| 4. Peer education matters: teenage pregnancy and child abuse. Peer education often focuses on these two matters. |

Question 6.2: Are protective factors linked to a particular context/position, situation...

Theme: Education

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|---|
| 1. Teachers are not always protective factors for their learners. You will find a teacher sitting with his learners after hours and thinking that this is right. You find 16-year-old at taverns with their teachers and in this way, the teacher is a risk factor. The teacher is a risk factor because he/she is supposed to be an example to their learner (lack of boundaries). |
| 2. The teacher needs to know better (discipline). Meaning that teachers must be positive examples to their learners (professionalism). The teacher is the foundation. Instead of teachers becoming protective factors for their learners, they are risk factors (lack of professionalism). |
| 3. Education: If there is a strong guidance in education, then there will be opportunities created for young people. |

Question 6.3: If possible, map the risks to the protective factors needed to overcome it.

Theme: Self-identity

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| 1. Self-identity (risk) Positive self-esteem (protective factor) |
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Theme: Resources/ Accessibility

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|---|
| 1. Limited resources (risk) and Capacity building and awareness workshops (protective factor) |
| 2. Unemployment (risk) and Creating SMME's and looking out for economic opportunities that are presented by the public or private sector (protective factor) |
| 3. Support structure: We spoke about the wealth of an area. Here, we are in Umhlanga and if you around the area there are no religious places (protective factor) like temples and churches. But, if you go to more poorer areas like Chatsworth, Umlazi, Kwamashu, Phoenix, then you will find a lot of churches and temples. The less opportunities that people have (risk), the more reason that they need to pray, and because these organizations are in these areas, we need to be using them more to our advantage to not only focus on religious practices as the people that go to these places trust the elders that go to these places. |

Theme: Crime & Violence

Sub-themes: Gender-based violence; neglect; abusive homes; bribery (sexual favours for job opportunities); crime and violence

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| 1. Abuse (risk factor) and A lot of people in communities do not understand what abuse is, so if they were to get informed about what abuse is (protective factor), then people will understand it better. |
| 2. Campaigns (protective factor) can also be created to bring awareness, and to provide information on matters regarding abuse (risk factor) |
| 3. Criminal activities (risk), these tie in with vocational activities (protective factor). For example, if you fail matric, you should not think that it is the end of the world. Society has portrayed the image that if you fail matric, then you have failed at life. The government can change this by informing people that it is okay to fail matric, and should you fail matric, then you should know that you can re-write matric, that there are courses that you can take (protective factor). Although, these alternatives exist, they are not promoted. |

Theme: Education

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| 1. Lack of formal or informal education (risk factor) and how social media can be used as a platform to teach others or make them aware of certain things that are happening in the community) (protective factor) |
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Theme: Mental Health

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| 1.Mental health issues (risk) and free counselling (protective factor). In our country counselling is available not at the level that is required. We need to have more counsellors available to assist people, especially the youth. |
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RESOURCES

Question 7.1: What resources are available in your context?

Theme: Resources/ Accessibility

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| 1.Ambassadors: People like us who are ambassadors are needed. We are the core assets of our communities. |
| 2.Skills and youth development centres |
| 3.Libraries |
| 4.Youth and development centres |
| 5.Health facilities |
| 6.Civic centres |
| 7.Forums such as CPF |
| 8.Recreational parks |
| 9.NGO's and NPO's |
| 10.Schools |
| 11.People within the community who have relevant resources_and skills. The old man sitting in the corner in your community is a resource because he has knowledge that he has gathered through the generational sector. |
| 12.Posters and banners. |
| 13.Government: We have different institutions like the NYDA, SEFA, SEDA, CETA. |
| 15.Religious organizations such as temples, churches... |
| 16.Government clinics, police stations |
| 17.Community policy forums, anti-drug forums |
| 18.Sports grounds. |
| 19.Social development which helps with food parcels and grants. |
| 21.Civil society organizations which has lifeline that gives counselling. |
| 22.TB, HIV care primary services. |
| 23.Police services |
| 24.Digital library which is there to introduce the coding robotics programme. |
| 25.We have Thuthezela and Sizakala centres which usually work with the communities towards GBV safety houses. |
| 26.We have SEDA, helps us with skills development. |

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| 27. We have DUT that works with public school programmes, social enterprise programmes, peace club programmes, and matric programmes. |
| 28. We also have churches that have soup kitchens and counselling. |
| 29. Traditional leaders |
| 30. Malls: I am considering a mall as a resource because at times we are given or granted an opportunity to do activations within the mall so that more people know about the different programs that are running within the communities and the mall also employs a lot of people from the community. |

Question 7.2: How can you access these resources?

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| 1. We can access most of the resources that we mentioned through us knowing our community. If we know the people in our communities that have the right resources, then we can access them (community networking). |
| 2. Word of mouth (social interviews) |
| 3. The internet |
| 4. Media (radio stations, newspapers, and the TV) |
| 5. Visiting government institutions |
| 6. Organizations can work together to raise awareness for each other, such as libraries that offer information, and how they can offer information on leaflets about other organizations. |
| 7. For the DUT service, you can request a call out for your school. |
| 8. For church, you can go to church or to any available religious organizations |
| 9. Schools can be accessed via the SGB, including the principal. |
| 10. Community Hall can be accessed through our ward committees. |
| 11. Stadium for events can be accessed through the municipality. |
| 12. Libraries for research... can be accessed through the librarian. |
| 13. Police station for legal marches, escorting... we can talk to the station commander. |
| 14. Churches, for any events since this is a bigger space we can then talk to the bishop, pastor, priest. |
| 15. Local councils can be accessed through community meetings. |
| 16. Traditional leaders and advisories through chiefs, and the chiefs right hand man. |

Question 7.3: How can youth become aware of the protective factors and resources which are available to them?

Theme: Education

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|---|
| 1. Formal (acquiring a certain qualification) or informal education (using social media and how you can use this platform to teach others or make them aware of certain things that are happening in the community). |
| 2. Life skills education should become a priority. Life skills education is tied with vocational learning where we are learning more about life, instead of just being thrown into a way of doing things. As kids we go from school to university where we are supposed to make our own decisions. You are asked to make these life changing choices, and you need to do so on your own. Therefore, there needs to be education in school about the choices that you would have to make later in life, and the effects that these choices will have on you, and your family. So, we need to have more education that focuses on that. |

Theme: Resources/ Accessibility

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| 1. Social events (young people love having fun, so if you want to introduce young people to events you must make it fun). |
| 2. Visibility (IDP meetings), collaboration, and participation |
| 3. social media as a platform to educate and bring awareness instead of just for entertainment. |
| 4. As young people we need to immerse ourselves in events that are not created for us just as a way of us being active in our communities. We can even ask for a platform at these events to address any issues that are present in the community. |
| 5. Social clubs, and youth summits (where the youth can come together to talk about the issues that they are facing in their communities). |

Question 7.4: What kind of protection do these resources offer to the risk identified or in general?

Theme: Resources/ Accessibility

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|---|
| 1. Protects against hunger or fights poverty. |
| 2. It looks out for one's health i.e., mental, emotional, and physical health. |
| 3. It builds opportunities. |
| 4. It protects victims from hurt. |
| 5. Lack of knowledge (risk). Helps us to be knowledgeable and to also get access to information. They provide exposure to information, and access to the internet (protection offered) |
| 6. Without community halls (risk) we would have street meetings which would lead to violence and strikes. Because the meeting would be held out in the open. Protect us from meeting on the streets; they provide shelter, and this will help us to reduce disputes faster. They also provide shelter for homeless people (protection). |

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| 7.Children playing in the streets, and thus being exposed to danger (risk). Will protect children from playing in the streets. It will provide a safe playground for sports activities and celebrations (protective factor). |
| 8.Police station (risk) Crime and drugs. Protects against illegal strikes. |
| 9.House breaking, vandalizing, and violence. |
| 10.Drug selling and substance abuse |
| 11.Traditional leaders (resource). Without them there will be community disputes and collusions (risk). Advisory body to resolve the disputes; Guidance to the leaders of the community; Shaping the community (protection). |

Theme: Education

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| 1.It prevents students from dropping out of school through helping them to cope with the different challenges that they are exposed to in their lives. |
| 2.Peer educators (resource) and then they provide peer counselling (protection) |

Additional questions (resources):

Question 1: How can youth become aware of the protective factors and resources which are available to them?

Theme: Resources/ Accessibility

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|---|
| 1.Schools, teachers, churches, and religious organizations |
| 2.Create more opportunities for young people that are passionate about community development. This can be done by putting more funding towards public transports that will go to organizations that they youth are interested in joining, so that the youth do not come across the challenge of accessing these organizations due to them not having any transport money... |
| 3.Through fliers/ posters, and awareness campaigns, |
| 4.Word of mouth |
| 5.Face to face/ door to door and billboards. |
| 6.Through us as ambassadors (WESA activate ambassadors, sharing their knowledge with other people in the community). |
| 7.Community meetings (chiefs and induna as the leaders in these community meetings). |
| 8.Media platforms (radio, tv) |

Question 2: Think of any youth resources that you know. How do they protect you from risks? Are there any other resources that you can think of which you forgot to mention?

Theme: Family: Background/ Upbringing

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|---|
| 1. Family and community as a resource (when they provide support to their children). The support therefore being a protective factor. |
|---|

Theme: Resources/ Accessibility

| |
|---|
| 1. Create awareness through word of mouth, sharing information through social media platforms and print media. |
| 2. More research can be conducted by organizations to identify what it is that the youth need exactly. Meaning that organizations should stop making assumptions about the needs of the youth. |
| 3. Youtube (Youth need to use such platforms as they help to give information about D.I.Y projects). |
| 4. Creating initiatives that teach the youth how to use smart phones, so that they can be able to engage in D.I.Y projects. |
| 5. Transform traditional libraries into smart/digital libraries. |
| 6. Community service being introduced in public schools to create exposure to opportunities, spaces, and the environment around them. |
| 7. Peer educators in the communities. These peer educators (resources) also guide matriculants (they make university applications available to the learners in matric, and career guidance (protection)). |
| 8. Social workers (resource). They serve as a resource when they take care of children that have been neglected. They can help by finding foster homes/care for these children (protection). |
| 9. Stakeholders (resources). They can assist with skills development (protection), and this will be protection from unemployment, and low self-esteem (risk). |
| 10. Psychologists (resources), and the risk being bitterness (risk). They can help with emotional regulation (protection). |

Appendix 5: Summary of Analysis

Analysis Summary

| Article | Risk factors | Protective factors | Resources |
|---------------------------------|--|---|------------------------|
| 1. Jain et al. (2012) | Exposure to community violence | Positive peers and family support; | Personal |
| 2. Mosavel et al. (2015) | Structural disadvantage; Poverty, Deprivation, Violence | Propensity towards altruism; Social services in the community such as rehabilitation centres for drug users, Refuge for orphans and rape victims; Community connectedness; | Personal and community |
| 3. Levey et al. (2016) | Trauma exposure | Empathy and altruism; Confidence in own self-regulatory capacity; Cognitive flexibility; Sense of agency | Personal |
| 4. Cortina et al. (2016) | Socioeconomically disadvantaged with high HIV prevalence | Positive cognitive interpretations | Personal |
| 5. Pérez-González et al. (2017) | Sexual victimisation | Social Skills, Confidence, Empathy/Tolerance act as protective factors against internalizing problems Connectedness to School, Connectedness to Family and low negative cognition were related to lower levels of externalizing symptoms | Personal |

| Article | Risk factors | Protective factors | Resources |
|---------------------------------|--|--|------------------------|
| 6. Adegoke & Steyn (2017) | Living with HIV, stigmatization and poverty | Family and peer networks; Religious and spiritual beliefs; health and counselling centres | Personal and community |
| 7. Tiet et al. (2010) | Delinquency; Drug use; gang involvement | Parental monitoring; bonding to the family; involvement in extracurricular activities | Personal |
| 8. Hardaway et al. (2016) | Exposure to community violence | Kinship support; parental involvement | Personal |
| 9. Hills et al. (2016) | Substance abuse; homelessness | Personal and emotional strength; cultural values, religious beliefs, supportive peer relationships; and participation in sports activities | Personal and community |
| 10. Boxer & Sloan-Power (2013). | Interpersonal violence | Coping style; emotion regulatory style and social cognitive processing style | Personal |
| 11. Mampane (2014) | Exposure to violence and crime and academic challenges | Caring and supportive relationships; A sense of confidence and high expectations; Toughness and commitment Social support | Personal |
| 12. Bhanaa et al. (2016) | Living with HIV/AIDS | Social regulation; Self-regulation | Personal |
| 13. Pfeiffer et al. (2017) | Sexuality; | Social capital | Personal |

| Article | Risk factors | Protective factors | Resources |
|------------------------------|---|---|------------------------|
| | Teenage pregnancy | (relations with significant others), Economic capital (command over economic resources), Symbolic capital (recognition and prestige), Cultural capital (personal dispositions and habit) | |
| 14. Humm et al. (2018) | Cumulative violence exposure | Peer support Social support | Personal |
| 15. Soji (2018) | Child headed households | Perseverance and determinations Family values and loyalty Ubuntu and relationality Social networks Positive attitudes | Personal |
| 16. Barrington et al. (2017) | Structural disadvantage (poverty) | Community support | Community |
| 17. Adegoke & Steyn (2018) | Living with HIV | Cultural values Future dreams Spirituality Social networks | Personal and community |
| 18. Laura (2018) | Youth headed household Poverty HIV epidemic | Social support | Personal |

| Article | Risk factors | Protective factors | Resources |
|---------------------------------|---------------------------|--|------------------------|
| 19. Soji et al. (2015) | Youth headed households | A sense of resignation Strong family and social relationships within the family Religious and cultural affiliations and practices An ability to create hope Staying connected to family history, values and principles | Personal and community |
| 20. Sharp et al. (2018) | Living with HIV/AIDS | School connectedness | Community |
| 21. Kelly & Ward (2012) | Substance abuse and crime | Desire to change Social support Religious belief | Personal |
| 22. Asante & Meyer-Weitz (2015) | Homelessness | Perceived resilience | Personal |
| 23. Dow et al. (2018) | Living with HIV | Utilization of new coping skills, Improved peer and caregiver relationships, Reduced stigma, Improved confidence to live positively according to their personal values. | Personal |
| 24. Silveira & Boyer (2015) | Secondary trauma | Increased sense of hope and optimism | Personal |

| Article | Risk factors | Protective factors | Resources |
|-------------------------------|---|---|--|
| 25. Van Breda & Theron (2018) | Orphan hood Poverty | Personal, Relational, Structural Spiritual/cultural | Personal and community |
| 26. Williams & Bryan (2013) | Raised in a low-income household, Raised in a single-parent household. | Positive mother–child relationships, Extended family networks, Supportive school-based relationships, School-oriented peer culture, Good teaching, Extracurricular school activities, Social support networks, Out-of-school time activities | Relational, Environmental factors (family, school and community) |
| 27. Jones (2013) | Youth in foster care | Organizational involvement, Many close friends | Instrumental support (housing or financial assistance) Emotional support |
| 28. Ungureanu & Biriş (2018) | Youth delinquency | Positive emotional climate Nonconflictual environment | Sociocultural protective factors |
| 29. Bademci (2015) | Street involved | Secure attachment relationships with a trusted adult, Safe environment created by peer-support | Relational, Environmental factors |
| 30. Filbert & Flynn (2010) | High rates of infant mortality and disease, | Developmental asset and cultural asset | Individual attributes, self- processes, or ecological supports |

| Article | Risk factors | Protective factors | Resources |
|---------------------------|---|--|---|
| | A low level of school performance, High dropout rates, | | that have been consistently demonstrated to lessen risk and promote positive developmental outcomes Collective resources that enable ethno cultural groups to maintain their identities over time and experience more positive outcomes. |
| 31. Bîrneanu (2014) | Separation from parents, Insecure attachment | Healthy environment | Environmental features |
| 32. Lavi & Slone (2011) | Exposure to protracted political violence | Self-esteem, Self-control | Personal; Individual temperament |
| 33. Stevens et al. (2011) | Adolescent delinquency | Absent of incarcerated family member, High parental monitoring, Safe community | Family and community |
| 34. Theron et al. (2011) | Poverty | Cultural factors | Cultural practices: extended families, religious structures, and ethnic social systems latently encourage adaptive behavior |

| Article | Risk factors | Protective factors | Resources |
|------------------------------|---|---|---|
| 35. Sta. Maria et al. (2014) | Living in the street, Exposure to violence | Caring and familiar relationships (attachment); Social relationship; Sense of Safety and Assurance of Survival; Sense of hope; Work opportunities | Individual traits, Relationships |
| 36. Olson & Goddard (2015) | Depressive symptoms, Poor family supervision, Family conflict | Community opportunities, School opportunities, Community rewards, School rewards, Opportunities for pro social involvement | School- and community-based programs |
| 37. Yasui (2015) | Cultural oppression Discrimination | Observed parental cultural socialization, Socialization of coping with discrimination | a) Intrapersonal, b) interpersonal and c) community domains |
| 38. Karabanow et al. (2010) | Homelessness | Informal work e.g. panhandling, squeegeeing, flying a sign, and/or busking, Social assistance, Support from family/friends for food, shelter and money | Personal (willingness to engage in productive activities) Community (availability of informal job opportunities) |

| Article | Risk factors | Protective factors | Resources |
|---------------------------|---------------------------|---|---|
| 39. Batsche et al. (2014) | Poor educational outcomes | <p>At the individual level</p> <p>Resourcefulness</p> <p>Goal orientation</p> <p>Positive attitudes and future orientation</p> <p>Optimism</p> <p>The ability to make conscious changes based on past mistakes.</p> <p>At the family level of the resilience process</p> <p>Trusting relationships with individuals</p> <p>At the system level</p> <p>Reliance more on Connected by 25 (Cby25), than on the school or foster care systems. CBY25 one of the three national community demonstration programmes dedicated to ensuring that youth aging out of foster care are educated, housed, employed and connected to a support system by age 25</p> | <p>Personal traits</p> <p>Supportive individuals</p> <p>Supportive policies</p> |

| Article | Risk factors | Protective factors | Resources |
|-----------------------------|--|---|---|
| 40. Hsing-Jung (2013). | Adjustment problems Conduct problems Psychiatric illness Heightened behavioural and academic performance problems | Youth optimism, Youth self-control, Parental monitoring, Prosocial friendships Teacher support. | Individual and environmental protective factors |
| 41. Hopson (2014) | High density poverty Social isolation Poor academic outcomes | Social support Positive relationships with parents and teachers | Supportive relationships and behavioural norms within youths' homes, in neighbourhoods, at schools, and in other settings |
| 42. Bernstein et al. (2011) | Binge drinking Alcoholism | Writing stories Poetry and plays Friends and caring adults | Personal/internal /relational |
| 43. Guthrie et al. (2014) | Living in a severely disadvantaged environment Post-traumatic syndromes Traumas of poverty, Community violence Racial discrimination | Hope Compassion Caring adults Peer support | Internal motivation Relations |
| 44. McKay-Jackson (2010) | Exposure to violence and anti-social activity | Youth activism Positive relationships with others | Interpersonal skills |

| Article | Risk factors | Protective factors | Resources |
|---------------------------------|--|--|--|
| | | Self-awareness and the acquisition of self-management skills | |
| 45. Black-Hughes & Stacy (2013) | Criminal behaviour and substance use | Parental and peer Attachment | Family bonds |
| 46. Rosenwald et al. (2013) | Homelessness, Criminal justice involvement, limited transportation, Substance abuse, Prostitution, Mental health issues, Maltreatment, Community challenges such as poverty and crime | Access to postsecondary education opportunities Family support | Educational facilities, Social support supportive families, peers, and professional staff |
| 47. Duggins et al. (2016) | Aggression Exposure to school bullying and violence | High family and school connectedness Positive connections at school Sense of belonging Social support from peers and adults | Relationship |
| 48. Kangaslampi et al. (2015). | Exposure to war and organised violence | Peritraumatic dissociation, Changes in traumatic memory Level of cognitive performance, Gender | Individual/ personal |
| 49. McCrea et al. (2019) | Community violence | Community service principles | Community and society level; |

| Article | Risk factors | Protective factors | Resources |
|--------------------------------|--|---|--|
| | Street violence | Community strength | <ul style="list-style-type: none"> • After school program • Policies that support child's protection |
| 50. Korkmaz & Överlien (2020) | Dating violence Youth intimate partner violence (youth IPV) | Parental responses School responses | Family and close relationships |
| 51. Eisman et al. (2015) | Violence exposure Social support | Positive parent /child communication (mother support) Families and close relationships | Community resources |
| 52. Mariscal (2020). | Childhood exposure to violence | Maternal monitoring Caring adults Positive relationship with mothers as well as peers Spirituality Social and adaptive skills | Personal protective factor Environmental factor |
| 53. McVie (2014) | Psychological distress as a result of bullying | High self esteem Stable family income Parental supervision | Personality characteristics Family level characteristics |
| 54. Hinduja & Patchin (2017) | Bullying and cyber bullying | Internal competency | Individual level, Personal |
| 55. Panter-Brick et al. (2015) | Domestic violence Poverty Insecurity | Forgetting Repression of memories of life-time trauma | Personal and individual characteristics |

| Article | Risk factors | Protective factors | Resources |
|-----------------------------|---|--|--|
| 56. Andrea et al. (2020) | Dangerous neighbourhood Community violence | Safe places Self defence Emotional regulation Safety strategies such as avoidance, hyper vigilance, | Individual perceived ability Social context and community level |
| 57. Gartland et al. (2019) | Hardship Parent loss Maltreatment | Cognitive skills Emotion regulation Relationships with caregivers Academic engagement | Individual characteristics and environmental factors |
| 58. Giordano, et al. (2019) | Intra familiar violence Physical maltreatment Witnessing violence Neglect and sexual abuse | Individual skills Relationship with care givers | Personal and family level characteristics |
| 59. Segura, et al. (2017) | Poly victimisation Interpersonal violence | Self-resources Community support | Personal and environmental factors |
| 60. Johns (2019) | Suicide risk; Substance abuse; Stigma; Discrimination and harassment | School connectedness Supportive educators Anti-bullying policies | In-school resources |
| 61. Howell et al. (2015) | Behavioural stress Emotional stress Post-traumatic stress symptoms | Emotional regulation Personal strength Prosocial skills | Personal protective factors |