

THE INFLUENCE OF *PROJECT CHALLENGE*  
ON LEVELS OF PSYCHOSOCIAL DEVELOPMENT AND RESILIENCE  
IN ADOLESCENT GIRLS AT RISK FOR DELINQUENCY

By

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To all of the women and girls who have taught me so much.  
You have helped me become a better man.

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## LIST OF TERMS

Development	Aspects associated with growing, maturing, and becoming a competent adult (Steinberg, 2005).
Self-confidence	Describes the individual's assessment of their ability to successfully solve problems, make decisions, and consistently behave in ways conducive to life success.
Mastery	"A person's confidence in their ability to "control their personal destiny" (Pearlin, Menaghan, Lieberman, & Mullan, 1981). Conceptualized as a synthesized measure of self-efficacy and internal locus of control.
Hope	An overall perception that goals can be met (Snyder, et al., 1991).
Self-esteem	An individual's respect for themselves and sense of worthiness; does not include a sense of being superior to others, nor a sense of feeling worse than others. (Rosenberg, 1965)
Perceived Social Support	A person's perception of the extent of their support network, the reliable provision of support, and the adequacy of support (Canty-Mitchell & Zimlet, 2000).
Mattering	The psychological tendency to evaluate the self as significant to other people (Marshall, 2001).
Identity	"A personality construct that pertains to a person's having: a firm sense of who one is, a purpose in life, a clear set of personal values, know what one wants out of life and where one is headed, and having personal goals for the future (Lounsbury, Huffstetler, Leong, & Gibson, 2005)."

At-risk	A young person with a heightened chance of experiencing poor life outcomes; typically possesses multiple risk factors associated with poor life outcomes (Rak & Patterson, 1996).
Delinquent	An adolescent under the supervision of the court for breaking a law or laws.
Alternative School	A school whose purpose involves educating students who misbehave in traditional school settings.
Gender-specific	Designed in reference to a specific gender; utilizing research and strategies pertinent to that gender.
Resilience	The combination of factors that allow a young person in a challenging or stressful environment to experience better than anticipated outcomes (Christiansen & Evans, 2005; Davey, Eaker, & Walters, 2003; Luthar, Cicchetti, & Becker, 2000).

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At-risk girls experience a disproportionate number of intense and disruptive traumatic life events which can adversely affect healthy psychosocial development. Such disruptions contribute to higher levels of delinquency, risk behavior, poor health, and diminished quality of life. Relatively few programs focus directly on enhancing the development of at-risk adolescent girls, and little research has examined the outcomes of such programs. This study 1) described a sample of girls attending alternative schools in terms of their life-time histories of developmental challenge associated with increased risk of delinquency and poor life outcomes; and 2) confirmed *Project Challenge*, an outdoor adventure program designed specifically for at-risk girls, as an effective program for enhancing psychosocial development and promoting resilience.

The study used a component mixed methods QUAN-qual design. Quantitative methods were used as the dominant form of data collection and analysis in this study. The quantitative portion of the study used an experimental cross-over design with 35 subjects alternately assigned to treatment and control conditions. Qualitative methods were utilized in a supporting role to elaborate or enhance quantitative findings.

Repeated Measures ANOVA supported significant differences in all 5 of the target variables: self-confidence, self-esteem, perceived social support, mattering, and identity. Effect

size estimates suggested *Project Challenge* had a strong effect on self-confidence; a stronger-than-moderate effect on self-esteem, mattering, and identity; and a moderate effect on perceived social support. Gains in self-confidence, self-esteem, and identity persisted two weeks after treatment. Participant exit interviews confirmed the study's quantitative findings. Additionally, participants reported positive experiences with trust as a meaningful program outcome.

## CHAPTER 1 INTRODUCTION

In contemporary American culture, many adolescent girls encounter violence, sexual exploitation, fragmented families, school failure, serious threats to emotional health, strict gender roles and stereotypes, unrealistic messages about appearance, as well as waning self-confidence, self-esteem, and sense of identity (Johnson, Roberts, & Worell, 1999; Pipher, 1994; AAUW, 1995). Each challenge offers girls both opportunities to grow and exposures to risk. Most girls navigate these obstacles successfully and grow into healthy, well-adjusted, competent women (Johnson, Roberts, & Worell, 1999). They struggle, but overcome these difficulties; and over time, emerge strong, capable, and confident.

Some girls struggle more than others. They may face more challenges or more intense threats, or they may possess fewer personal or social resources to meet the obstacles they face. Regardless of the specific cause or situation, these girls become overwhelmed by threats to their well-being and, as a result, develop beliefs and choose behaviors that place them at-risk of failing to succeed in life.

### **Problem**

At-risk girls experience a disproportionate number of intense and disruptive traumatic life events which can adversely affect healthy psychosocial development. Such disruptions contribute to higher levels of risk behavior, poor health, and diminished quality of life. Relatively few programs focus directly on enhancing the development of at-risk adolescent girls, and little research has examined the outcomes of such programs. This study described a sample of girls attending alternative schools in terms of their lifetime histories of developmental challenge associated with increased risk of delinquency and poor life outcomes, and investigated

the outcomes associated with *Project Challenge*, an outdoor program designed to use adventure experiences to enhance the psychosocial development and resiliency of at-risk girls.

### **Purpose**

Researchers recommend developing and evaluating programs designed specifically to meet the needs of delinquent girls and girls at-risk for delinquency (Bilchik, 1998; Bilchik, 1999; A.B.A., 2001). Yet, few studies in the professional literature address the effectiveness of such programs (Belenko, Sprott, & Petersen; 2004). Still fewer focus on developmental programming designed to enhance and support positive psychosocial development, particularly gender-specific approaches tailored to the developmental challenges most often faced by girls at-risk for delinquency. This study 1) contributed to the professional literature by describing the effects of stress and trauma on at-risk girls' psychosocial development and resilience, and 2) confirmed *Project Challenge* as an effective intervention for enhancing psychosocial development and promoting resilience among at-risk girls.

### **Rationale**

Previous studies reported by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) describe painful and traumatic life events as the primary antecedents of delinquent and health risk behavior in adolescent girls (Bilchik, 1998; Bilchik, 1999; Chesney-Lind, 2001). These life events include: 1) physical and sexual abuse, 2) family fragmentation, 3) school failure, 4) untreated health problems, especially those related to mental and emotional health, and 5) convergence of risk factors in early adolescence (Bilchik, 1998; Bilchik, 1999; Chesney-Lind, 2001). Each of these difficult, painful, and traumatic life experiences have been described as contributing to maladaptive psychosocial development in girls and predisposing girls toward maladaptive coping patterns related higher rates of delinquency (Sondheimer, 2001; Calhoun & Jurgens, 1993; Caspi, Lynham, Moffitt, & Silva, 1993).

In addition to delinquency, these young women bear a disproportionate amount of risk in four critical areas including substance abuse, risky sexual behavior, vulnerability to violence, and mental health problems (Crosby et al., 2004). These harmful consequences associated with developmental disruptions are not limited to adolescence. Too often – in the absence of intervention – they last well into adulthood (Aalsma & Lapsey, 2001; Bardone, et al., 1998).

Girls' delinquency frequently reflects a disruption in healthy psychosocial development characterized as a maladaptive response to traumatic or painful life experiences. As such, interventions designed to reach delinquent girls or girls at-risk for delinquency – especially prevention-oriented interventions – should not focus primarily on manipulating criminogenic factors typically associated with correctional rehabilitation. Instead, programs should be based on theories focused on recovering lost developmental progress and promoting resilience and effective coping in girls.

The professional literature related to stress, resiliency, and women's development confirms the unique aspects of growth and development, both personal and social, for adolescent girls, as well as the potential negative outcomes that can occur from failing to recognize these unique aspects of development. Synthesizing theory related to stress and coping, resilience, and girls' development, and effectively using insights gleaned from that synthesis, constitutes a reasonable and promising strategy for developing programs designed to help at-risk girls grow into strong, capable, and confident young women prepared to cope effectively with past, present, and future life challenges

Prevention and early intervention programs should provide a continuum of services for delinquent girls that meet two criteria. First, these programs should reduce girls' levels of delinquency. This purpose relates directly to the primary public safety goal of any delinquency-

related program. Second, these programs should help girls' heal from, cope with, and recover developmental progress lost to traumatic and painful life experiences, thereby increasing their capacity to resist delinquency and engage success at home, in school, and in their communities. To accomplish these goals, effective prevention and early intervention programs should develop girls' internal resources, and connect girls to external resources for support. Both of these strategies can make an enduring impact on promoting the health, well-being, and successful life outcomes for girls.

In spite of these obvious needs, communities rarely provide prevention or early intervention services for delinquent girls or girls at-risk for delinquency. Delinquent girls wait longer for services than do boys (Daniel, 1999). They rarely enter programs designed to meet their gender-specific needs or that account for differences in their reasons for offending (Acoca, 1999; Daniel, 1999; Manigha, 1998). They often are needlessly placed in deep-end residential programs away from their home communities (Daniel, 1999).

In response to increasing rates of delinquency among girls, a range of organizations and agencies including the federal Office of Juvenile Justice, Delinquency, and Prevention (OJJDP); American Bar Association (ABA); and a number of state government agencies call for developing gender-specific, community-based, prevention and early intervention programs for delinquent girls (Mullis, Cornille, Mullis, & Huber, 2004; Sondheimer, 2001; Acoca, 1999; Daniel, 1999; Manigha, 1998). While some states have passed legislation requiring and funding a balanced continuum of services for delinquent girls, the literature confirms the existence of relatively few gender-specific prevention and intervention programs tailored to meet the specific needs of at-risk girls. Even fewer of these programs have been rigorously examined using methods designed to determine their effectiveness.

## **Research Questions**

1. What levels of developmental challenge exist among adolescent girls attending alternative schools?
2. What differences exist in participant levels of self-confidence based on assignment to experimental and control conditions?
3. What differences exist in participant levels of self-esteem based on assignment to experimental and control conditions?
4. What differences exist in participant levels of perceived social support based on assignment to experimental and control conditions?
5. What differences exist in participant levels of mattering based on assignment to experimental and control conditions?
6. What differences exist in participant levels of identity based on assignment to experimental and control conditions?

## **Delimitations**

- The study was conducted at two purposively selected alternative schools located in the North Central Florida geographical region.
- Participants included at-risk girls aged 13-17 who volunteered for the study.
- Data were collected during the 2006-2007 academic year.
- Study variables were measured using a protocol consisting of the Pearlin Mastery Scale, Rosenberg Self-Esteem Scale, Hope Scale, APSI Identity Sub-scale, Perceived Social Support Scale, General Mattering Scale, and Perceived Stress Scale.
- Data were self-reported by program participants.
- Existing program records were used to obtain demographic data and information about specific participant characteristics.
- The study used a mixed methods experimental cross-over design.

## **Limitations**

- The two alternative schools purposively selected for the study may not have represented all alternative schools in Florida or elsewhere.
- Participants who volunteered for the study may not have represented all at-risk girls attending alternative schools.

- Data collected during the 2006-2007 academic year may have differed from data collected during other periods of time.
- Instruments selected for the study protocol may not have fully described their associated constructs.
- Participant responses may not have been candid or may have been based on inaccurate perceptions.
- Existing program records may not have captured all pertinent information about participants.
- Use of a mixed methods experimental cross-over design may have limited the range of legitimate options available for data analysis.

### **Assumptions**

- The two alternative schools selected purposively for the study were considered adequately representative of alternative schools in the North Central Florida geographical area.
- Participants who volunteered for the study were considered adequately representative of at-risk girls attending alternative schools.
- Data collected during the 2006-2007 academic year were considered adequate for the purpose of the study.
- Instruments selected for the study protocol adequately described their associated constructs for the purpose of the study.
- Participants responded with adequate levels of honesty and perception for the purpose of the study.
- Existing program records captured an adequate level of demographic and other pertinent information about participants for the purpose of the study.
- Use of a mixed methods experimental cross-over design provided adequate legitimate data analysis options for the purpose of the study.

### **Summary**

Delinquent girls experience intense and traumatic life events disruptive to positive psychosocial development. These developmental disruptions often manifest as delinquent behavior, risky health decision making, and poor life outcomes. Helping girls overcome developmental delays and maladaptive development represents an important goal for parents, teachers, counselors, youth development specialists, and health educators. Chapter 2 summarizes the professional literature describing risk profiles associated with delinquency in girls, elements essential for the healthy development of girls, and promising interventions designed to promote the development of resilience in girls.

## CHAPTER 2 LITERATURE REVIEW

Adolescence remains a period associated with high rates of risky health behavior (CDC, 2004). Although recent trends demonstrate overall decreases in a variety of adolescent risk behaviors, certain groups continue to engage in increasing levels of risk (CDC, 2004). Developing interventions that help vulnerable groups reduce dangerous behaviors and increase behaviors that enhance health and well-being contributes to the important public health goals of decreasing overall adolescent morbidity and mortality and increasing positive life outcomes (Porter & Lindberg, 2000). The 1997 Commonwealth Fund study of the health of adolescent girls drew attention to important issues related to girls' health and well-being. Core issues included low levels of self-confidence and self-esteem, high rates of abuse and depression, and untreated mental and physical health problems. The study described most girls as doing well, but in need of extra support and gender-specific prevention and intervention efforts. The report also suggested some groups of girls were more vulnerable than others.

### **Developmental Challenge and At-Risk Girls**

Rak and Patterson remind us that at-risk girls are at-risk of failing to succeed in life. Often, girls are at-risk because they face challenges and adversities most young people their age do not face: "poverty, family discord, violence, substance abuse, and illness (being) among the hazards (Rak & Patterson, 1996)." In other words, an at-risk girl encounters circumstances that increase the likelihood of a poor overall life outcome. A few examples of such outcomes include a life in continued poverty, plagued by mental illness, disrupted by substance abuse, or marked by illegal activity. "At-risk" means that the odds are stacked against a girl.

Delinquent girls and girls at-risk for delinquency represent particularly vulnerable groups. Over the past ten years, girls' rates of delinquency have steadily increased while boys' rates of

delinquency have steadily decreased (Manigha, 1998; Poe-Yamagata & Butts, 1996). Most delinquent girls commit minor offenses that pose little danger to their home communities (Acoca, 1999; Manigha, 1998; Poe-Yamagata & Butts, 1996). Unfortunately, their minor offenses are frequently accompanied by a history of trauma and a variety of serious and risky health behaviors (Acoca, 1999; Manigha, 1998).

Research describes different reasons for girls' and boys' juvenile offending (Acoca, 1999; Manigha, 1998). Girls' offending typically reflects a disruption of processes associated with healthy development. It can be characterized by traumatic and painful life experiences (Acoca, 1999; Manigha, 1998). Too often, these experiences make it difficult for girls to develop healthy and responsible ways to meet their needs and cope with adversity. Further, these painful experiences present their own challenges related to coping and recovery. Challenges that demand intrapersonal and interpersonal resources far beyond those associated with normal development.

Developmental challenges related to girls' delinquency often include negative experiences in one or more of five broad categories: 1) abuse and victimization, 2) family fragmentation, 3) school and academic failure, 4) untreated health issues, and 5) the convergence of traumatic experiences in early adolescence (Acoca, 1999).

Specific examples include histories of sexual, physical, and emotional abuse (Mullis, et al., 2004; Acoca, 1999; Daniel, 1999; Manigha, 1998); family fragmentation and separation from nurturing adults via divorce resulting in low or no contact with a parent, parental incarceration and substance abuse (Acoca, 1999; Daniel, 1999; Manigha, 1998); academic failure and disconnection from school (Mullis, et al., 2004; Acoca, 1999; Manigha, 1998); one or more serious health issues such as suicidal ideation, depression, pregnancy, and substance abuse

(Mullis, et al., 2004; Acoca, 1999; Daniel, 1999); lacking social and work skills (Manigha, 1998); lacking hope for the future (Mullis, et al., 2004), feeling life is oppressive (Mullis, et al., 2004); association with deviant peers (Mullis, et al., 2004), being under the age of 15 (Mullis, et al., 2004; Manigha, 1998); and being a member of a racial minority group (Mullis, et al., 2004; Manigha, 1998). Many of these characteristics are not only well-established risk factors for youth offending, but are also precursors for risky health behavior, poor health, and disappointing life outcomes.

In 1998, the U.S. Office of Juvenile Justice Delinquency and Prevention summarized basic requirements for healthy development in girls and outlined common disruptions faced by delinquent girls. Their list included:

- The need for physical safety and healthy physical development... being challenged by poverty, homelessness, violence, inadequate healthcare, inadequate nutrition, and substance abuse.
- The need for trust, love, respect, and validation from caring adults to foster healthy emotional development and form positive relationships... being challenged by abandonment, family dysfunction, and poor communication.
- The need for positive female role models to develop healthy identity as a woman... being challenged by sexist, racist, and homophobic messages and a lack of community support.
- The need for safety to explore their sexuality at their own pace and a pace that supports healthy sexual development... being challenged by sexual abuse, exploitation, and negative messages about female sexuality.
- The need to belong, to feel competent, and to feel worthy... being challenged by weakened family ties, negative peer influences, academic failure, and low self-esteem.

In addition to youth offending, these young women bear a disproportionate amount of health risk in four critical areas (Crosby, et al., 2004). These areas include 1) substance abuse including tobacco, alcohol, and illicit drug use; 2) sexual behavior including early onset of sexual intercourse, participation in dangerous sex, high numbers of lifetime partners, incidence of

sexually transmitted infections, and teen pregnancy; 3) violence including resigning themselves to abuse from family members and intimate partners; and 4) mental health including depression, suicidal ideation, and suicide attempts (Crosby, et al., 2004). Further, delinquent girls tend to struggle with these issues well into adulthood (Aalsma & Lapsey, 2001; Bardone, et al., 1998).

### **Stress and Coping**

Girls often commit youth offenses in response to stress and trauma. Frequently, these overwhelming and painful life experiences derail the healthy psychosocial development of girls and start their journey down developmental pathways leading to maladaptive coping. Left uninterrupted, their maladaptive coping responses too often lead not only to delinquency, but also risky health behavior, poor health, and disappointing life outcomes. As a result, understanding how girls cope with stress and trauma and how to intervene when girls are coping ineffectively are critical when developing programs for at-risk girls.

### **The Transactional Model of Stress**

The Transactional Model of Stress (Lazarus & Folkman, 1984) represents one of the most used theoretical frameworks in stress research and intervention (Sommerfield & McCrae, 2000). This model describes five main constructs. These constructs include stressors, primary appraisal, secondary appraisal, coping efforts, and health outcomes.

According to the Transactional Model of Stress (Lazarus and Folkman, 1984), the subjective evaluation of a stressor can contribute more to the effects or consequences of a stressful event than the event itself. Lazarus and Folkman refer to this subject evaluation as “appraisal.” Appraisal consists of two stages: primary and secondary appraisal. Primary appraisal includes the person’s evaluation of an event as stressful or not stressful. This appraisal focuses on “a person’s judgment about the significance of an event as stressful, positive, controllable, challenging, benign, or irrelevant (Wenzel, Glanz, & Lerman; 2002).” Secondary

appraisal involves a person's assessment regarding what they can do about the situation. This assessment includes their "perceived ability to change the situation, perceived ability to manage (their) emotional reactions to the threat, and expectations about the effectiveness of their coping resources (Wenzel, et al., 2002)." Together, primary and secondary appraisals contribute to a person's overall perception of stress. This perception directly influences physiological responses to stress, emotional responses to stress, and whether or not the person actively engages efforts to cope.

Folkman and Lazarus (1987) describe coping as "cognitive and behavioral efforts to master, reduce, or tolerate" a stressor. According to the model, people choose from among three primary coping strategies: problem-focused, emotion-focused, and avoidant strategies. Problem-focused strategies focus on taking action to change the problem or circumstances for the better. Emotion-focused strategies focus on regulating distressing emotions. Avoidant responses tend to deny the problem.

People choose coping strategies or combinations of strategies based in large part due to their appraisals (Folkman & Lazarus, 1987). Appraising a stressor as manageable increases the probability of choosing problem-focused strategies. Studies suggest problem-focused coping strategies are typically the most adaptive, especially among adolescent females (Wilson, Pritchard, & Revalee, 2005). Adolescent girls who choose problem-focused strategies tend to experience increased psychological health and decreased symptoms associated with psychological and physical health problems. Other coping strategies show less beneficial effects. For instance, adolescent girls choosing emotion-focused strategies corresponds with increased psychological health, but increased psychological problems and slightly increased physical problems as well. Girls who choose avoidant responses have the worst outcomes. They tend to

have strongly increased psychological problems, highly increased physical symptoms, and slightly decreased psychological vigor. (Wilson, Pritchard, & Revalee, 2005).

### **The Hardiness Extension**

In 1979, Kobasa extended the Transactional Model of Stress to include 3 personality characteristics or psychological predispositions. Kobasa theorized that certain personality characteristics or psychological predispositions interact with both how stress is appraised and the selection of coping strategies. Specifically, she suggested commitment, challenge, and control would have beneficial effects on stress appraisal and coping and be associated with positive health outcomes. Each of these personal characteristics can be conceptually defined as follows:

- Commitment: “involves believing in the importance, interest, value, and meaningfulness of life’s activities.”
- Challenge: ”reflects the belief that change is normal in life and represents a challenge rather than a threat.”
- Control: “based on the belief that life experiences are predictable and controllable.”

A wide range of research has examined the influence of Hardiness on health, well-being, and quality of life (Shepperd & Kashani, 1991; Florian, Mikulincer, & Taubman, 1995; Hannah & Morrissey, 2001). Frequently, the Hardiness Concept has been shown to predict outcomes for men while failing to predict outcomes for women (Shepperd & Kashani, 1991; Wiebe, 1991). For instance, in a study related to adolescent health the Hardiness Model accurately predicted a variety of mental health conditions and physical health symptoms for boys, but failed to predict either outcome for girls (Shepperd & Kashani, 1991). Also, Wiebe (1991) conducted an investigation into the relationship between hardiness, appraisal, and physiological responses to stress. Again, the characteristics associated with hardiness accurately predicted stress responses for men, while failing to adequately explain outcomes related to women.

Over almost five decades, Kobasa, Maddi, and a host of other researchers have demonstrated the value of using personality characteristics to predict perceived stress, coping, and stress outcomes. Although existing research accurately describes male experience, it often fails to describe characteristics that most influence women's perceptions of stress, their coping efforts, and stress-related outcomes. Other theories and research, however, may offer opportunities to identify personality and psychological characteristics that better explain women's and adolescent girls' stress and coping responses.

### **Resiliency**

Resiliency Theory asks why some young people "beat the odds" and achieve success in the midst of difficult and disruptive environments and circumstances - situations known to produce widespread failure and poor health and life outcomes (Masten & Coatsworth, 1998; Krovitz, 1999). Research demonstrates that luck has little to do with it. Instead, it demonstrates that children and adolescents who overcome adversity share a 1) common core of personal qualities and decision-making processes (Krovitz, 1999), 2) common sources of external support and assistance (Krovitz, 1999), and 3) predictable responses to past stressful conditions (Richardson, 1990).

Much like Kobasa's Hardiness extension, Resiliency Theory describes specific factors that mediate and moderate the negative impacts commonly associated with trauma and chronic stress. Although rarely stated directly, resiliency theory and theories of stress are intimately related. Poverty, family discord, violence, substance abuse, and illness – when considered objectively – can be described as sources of stress, stressful life events, or stressful conditions of daily living. In many respects, Resiliency Theory describes factors related to better than anticipated responses to serious and chronic stressors in children and youth.

The power of resilience in the lives of youth should not be thought of as “magic bullets” or oversimplifications of complex social or economic problems. Instead, learning to cope with stress effectively should be recognized as an important task central to healthy psychosocial development; and resilience should be thought of as a core contributor to effective coping efforts and successful life outcomes.

“Development” describes a psychosocial growth process whereby individuals learn to handle increased demands and complexity in their lives with greater personal efficiency and effectiveness. For most people, resilience naturally develops as they learn to adapt to stressful life events. They develop a measure of resilience as they successfully negotiate challenge, experience life, and grow.

Unfortunately, developmental challenges like abuse, family fragmentation, school and life failure, and being overwhelmed by stressors in early adolescence are commonly associated with learning maladaptive coping strategies. Strategies associated with short-term relief but long-term risk. Common maladaptive coping strategies include substance abuse, risky sexual behavior, depression, and violence; each of which is especially common among at-risk adolescent girls.

Although everyone grows, some people do become more resilient than others. Resiliency Theory answers two important questions. First, what processes promote the development of resilience in young people? And second, which characteristics and conditions best prepare us to effectively overcome adversity?

### **The Process of Developing Resilience**

Developing effective interventions designed to 1) enhance girls’ ability to recover from developmental disruptions and 2) improve their ability to cope with trauma and developmental challenge requires understanding the processes associated with developing resilience. Knowing which strengths and personal qualities “at-risk” young people need to develop in order to achieve

successful life outcomes only represents half the battle; understanding how to make these strengths a real part of young people's lives represents the other half. Although no easy answers exist for this question, research on resilience does provide us with clues concerning effective strategy. In 1990, Richardson proposed a model for the process of developing resiliency.

Richardson's model describes conditions essential for learning healthy and productive ways of coping with adversity and illustrates a range of possible responses to adversity. According to the model, all young people will inevitably encounter stress, risk, and adversity. These experiences interact with the young person in terms of their current individual and environmental protective factors. These protective factors can be conceptualized as the young person's personal assets, strengths, or qualities that make them more or less resilient under difficult or challenging circumstances. If these qualities are sufficient, they insulate the adolescent from disruption and they continue life without interruption, blissful in their comfort zone. If, however, the youth lacks the qualities associated with resilience or if these qualities are weak compared to the intensity of challenges they face, they experience disruption. They feel out of control, out of their league, and overwhelmed. Depending on the nature and duration of this disruption, they may feel this way for a relatively short or long amount of time. Most young people do not remain in disruption indefinitely. Eventually, the stressor disappears or they choose a method of dealing with the stressor. Either option can be associated with the process of reintegration. (Richardson, 1990)

Reintegration consists of adolescents reordering their lives after disruption. Reintegration does not ensure they will learn or gain from the experience. Possible outcomes associated with reintegration include 1) dysfunctional or maladaptive reintegration, 2) reintegration with loss, 3) reintegration back to the comfort zone, or 4) reintegration with resiliency. According to

Richardson, each outcome can be framed as a response to “life prompts” or the stress, risk, or adversity “prompting” the overall process. Dysfunctional reintegration occurs when young people respond to stress by engaging in destructive behaviors, for instance, substance abuse, violence, delinquency, or school failure. Reintegration with loss suggests young people “give up some motivation, hope, or drive” as part of their response to the stressor (Richardson, 1990). Reintegration back to the comfort zone implies young people either “cling to their comfort zones” or “turn down opportunities for growth.” These young people “break even;” neither gaining nor losing from the experience. Reintegration with resilience, however, results in new growth and insight or improving access to or the strength of resilient qualities. In turn, these gains increase a person’s overall resiliency helping the individual to adapt and better manage future life stresses, risks, and adversity. (Richardson, 1990)

When considering Richardson’s model, one question stands out: “In times of crisis, how do families, counselors, educators, and other practitioners help young people avoid dysfunction and loss and promote resilience?” Nevitt Sanford was one of the first developmental theorists to engage this question (Evans, Forney, & Guido-DiBrito, 1998). Sanford’s theory of Challenge and Support also proposes the important role of challenge, adversity, or stressors in personal growth and development. However, the great contribution of Sanford’s work consists of his description of the conditions under which healthy psychosocial development or “reintegration with resilience” is most likely to occur. (Evans, et al., 1998)

Sanford describes growth as a function of challenge, support, and readiness. Readiness suggests people cannot grow until they are sufficiently prepared to engage the learning experience. According to Sanford, two factors contribute to a person’s readiness. These factors include the current organization of the person’s personal resources, and the level of challenge.

For a challenge to be growth-promoting, it must be within an individual's range of optimal dissonance. This range suggests a moderate amount of challenge. Too little challenge fails to promote growth; too much challenge overwhelms the person and possibly does harm. The key factor determining a person's range of optimal dissonance is the quality and quantity of available support. Therefore, promoting growth, development, or "reintegration with resilience" requires 1) evaluating a young person's readiness and preparing them for challenge, 2) regulating the individual's level of challenge, and 3) providing adequate support throughout the growth process. (Evans, et al., 1998)

Combined, Richardson and Sanford's descriptions provide critical insights regarding what goes right and wrong while young people develop in adverse circumstances. They describe the conditions under which young people learn both maladaptive and highly adaptive coping responses. These insights offer practitioners opportunities to create highly controlled growth promoting experiences for at-risk girls. Growth promoting experiences designed to help prepare and empower girls to cope more effectively with both past and future challenges.

### **Individual Characteristics and Resilience**

Individual characteristics and external supports play critical roles in both Richardson's and Sanford's work. Historically, resilience research has focused more on describing the role individual characteristics play in promoting better than anticipated outcomes in children and youth. Similar to Kobasa's emphasis on the mediating and moderating effects of personality and personal characteristics on stress appraisal and coping, resiliency researchers have focused on identifying which individual characteristics make the most substantial contributions to overcoming adversity and achieving successful outcomes. Many descriptions and profiles outline the individual qualities most frequently associated with resilient youth. Although researchers label them differently, certain concepts recur in study after study.

Tables 2-1 and 2-2 present the findings of four different groups of resiliency researchers. Table 2-1 presents the most commonly cited description of the qualities and strengths of resilient young people. Table 2-2 presents a comparison among 3 commonly cited resiliency studies. Table 2-3 presents the Search Institutes list of 40 developmental assets.

In 1991, Bernard conducted a meta-analysis of the professional literature related to resiliency. She reviewed a large number of resiliency studies, removed studies with weak research methods or questionable results, and used the best data available to develop collective results. Her findings are most often cited in the work of other resiliency researchers. And, because educators tend to favor her description and have the most frequent and continual contact with young people, a mass of research literature has become available in reference to her description.

Bernard suggested certain individual characteristics contributed to resilient outcomes. These characteristics included self-efficacy, autonomy and identity, and a sense of purpose and future-orientation. In terms of individual characteristics, she suggested - and subsequent research has supported - the idea that young people able to 1) develop an authentic sense of who they are and what they want in life, and 2) retain confidence in themselves and their ability to act successfully in spite of an unpredictable and hostile environment experience better than anticipated life outcomes.

Research conducted by the Search Institute supports her conclusions. Years of cumulative study guided the Search Institute as members worked to compile a comprehensive list of developmental assets for youth. Assets can be thought of as factors predisposing the young person toward a positive outcome. Conversely, each asset missing from a young person's life can be thought of as increasing their vulnerability to negative outcomes. Twenty of the 40 assets

focus on assets external to the young person; the remaining 20 assets focus on internal assets or the personal strengths and qualities discussed so far. A list of these internal developmental assets can be found in Table 2-3. Once again, concepts related to identity, personal control, confidence, self-esteem, purpose, and hope combined with positive goals for the future factor largely in young people's ability to achieve successful and healthy life outcomes.

Further, work by Tomsen (2002), Henderson, and Millstein (1996), and Wolin and Wolin (1996) support the importance of the same individual characteristics (Table 2-2). All three suggest the critical importance of a cohesive personal identity, a sense of personal mastery or self-confidence, and the ability to act independently or with autonomy.

Although these lists of individual characteristics theorized to promote resilience are not identical, many common elements are evident, and considering them together helps establish an important pattern. Characterized by items including identity, mastery, autonomy, and goals for the future, each list presents qualities traditionally associated with mature, well-adjusted adolescents – no more and no less. Young people who “defy the odds” have somehow successfully adapted in ways similar to youth growing up in environments more conducive to healthy development. Young people in challenging circumstances “beat the odds” when they develop in healthy and adaptive ways in spite of their challenging circumstances. These individual characteristics allow them to interpret challenging and difficult circumstances in adaptive ways and, as a result, choose behaviors in the midst of challenging and difficult circumstances, behaviors that promote healthy and successful life outcomes. Resilient young people mature in relatively normal ways in spite of overwhelming challenges.

### **External Support and Resilience**

Explaining resilient young people's success in terms of their individual characteristics represents only part of the picture. Over the years, Resiliency Theory has evolved to place

greater and greater emphasis on the role of external and environmental sources of support. Tomsen (2002), Henderson and Millstein (1996), and Wolin and Wolin (1993) all describe factors related to external and environmental sources of support as well as individual characteristics (Table 2-2). Examples of these factors include access to caring and support (Henderson & Millstein, 1996), the ability to elicit positive responses from others (Thomsen, 2002), and maintaining fulfilling relationships with others that provide stability nurturing and love (Wolin & Wolin, 1993).

Almost 50 percent of Bernard's description relates directly to factors associated with social support (Table 2-1). Bernard describes these factors within two major categories 1) social competencies, and 2) social and environmental factors. Social competencies include eliciting positive responses from others, establishing positive relationships with others, and the ability to make and keep a few good friends. Social and environmental factors include receiving support from caring environments, being connected to adults who communicate high expectations, and having access to people who can give assistance when necessary. (Bernard, 1991)

Exactly 50 percent of the Search Institute's 40 developmental assets are devoted to external assets and sources of social support (Table 2-3). Examples include a family life that provides high levels of love and support, receiving support and assistance from other caring adults, and growing up in a caring neighborhood and school.

Further, both Richardson and Sanford describe sources of social support as critical to the process of developing resilience. Sanford especially emphasizes social support as critical to promoting growth in challenging circumstances. According to Sanford, social support makes two important contributions to healthy psychosocial development. First, an environment rich in social support helps people feel able to take the emotional risks associated with growth and

development. And second, access to adequate social support provides young people with access to roles models, guidance, and instrumental help when needed.

### **The Gender Limitation in Resiliency Theory**

Resiliency Theory makes important contributions to understanding how children and youth facing adversity achieve better than anticipated outcomes. Insights related to the processes associated with promoting resilience, individual characteristics contributing to resilience, and the external supports required to foster resilient outcomes provide much needed direction when planning interventions for at-risk young people.

Unfortunately, Resiliency Theory fails to sufficiently consider the influence of gender. If boys and girls develop in any substantially different ways, or if the social environment interacts with gender in any important way, then the influence of gender must be re-considered in the resiliency equation. Three questions related to gender and resilience stand out. First, which individual characteristics best help girls achieve “maturity” and successful life outcomes? Second, what is the role of social support in girls’ development? And third, how might the process of fostering resilience differ for girls?

Extensive resiliency literature reviews returned one article devoted to developing resilience in girls. This article was a combination review and editorial piece. Although resiliency studies frequently report comparisons between boys and girls, little substantial work has been published addressing girls and resiliency.

### **Adolescent Girls and Development**

Fortunately, a rich history of developmental research provides valuable insight into the healthy growth and development of adolescent girls. Developmental pioneers such as Jean Baker Miller, Carol Gilligan, Mary Field Belenky, and Ruthellen Josselson describe the unique developmental needs of girls and processes unique to young women’s psychosocial growth.

Considering the developmental challenges faced by at-risk adolescent girls, at least six major themes emerge from their work.

### **Theme 1: Relationship as a Context**

*Relationships shape girls' development and serve as the primary context for girls' developmental processes* (Miller, 1986; Gilligan, 1993; Brown & Gilligan, 1992; Belenky, Holsinger, Goldberger, & Tarule, 1986; Josselson, 1987). Boys' development has been generally characterized by increasing separation and individuation (Erickson, 1968), girls' development has been characterized by the increasing importance of attachment (Gilligan, 1993; Brown & Gilligan, 1992) and the refining of self as it relates to the various contexts in which relationships occur (Johnson, et al., 1999). For instance, during development boys are likely to answer the question, "Who am I as a totally separate and unique individual?" whereas girls are likely to answer the questions, "Who am I when I relate to my mom? Who am I when I relate to my dad? Who am I when I relate to my school friends? Who am I when I relate to my work friends?" and the like (Johnson, et al., 1999). In this way, developing girls inter-mingle context and identity – particularly the context of relationships.

### **Theme 2: The Legitimacy of Care**

*Girls often follow a distinct developmental trajectory focused on caring and connection to others* (Miller, 1986; Gilligan, 1993). Miller (1986) and Gilligan (1993) critiqued developmental psychologists' tendency to focus on men's descriptions of male development – while excluding or devaluing the distinct developmental experiences of women. Both Miller and Gilligan suggested men and women tend to develop along different developmental trajectories toward different developmental targets.

In her book, *In a Different Voice*, Gilligan (1993) outlines two distinct trajectories and their corresponding targets – the ethic of justice and the ethic of care. According to Gilligan,

boys most frequently develop toward the ethic of justice. This justice orientation focuses on hierarchy, fairness, rules, and competition. It values achievement within the rules and places little emphasis on the context of relationships. In our male-dominated society, the ethic of justice under-girds our primary social institutions and provides the framework on which our communities are built – the rule of law, the language of rights, and competition-based economies. Girls, however, frequently develop toward the ethic of care. This care orientation focuses on building relationships, maintaining connections, meeting others’ needs, supporting others’ efforts, and preventing others’ harm. It values intimacy, closeness, and harmony.

In our male-dominated society, people often belittle and trivialize the ethic of care – ignoring the growing reality of our highly interdependent and connected life and characterizing the care orientation as a “feminine weakness.” Of course, each developmental trajectory and target represent fundamentally neutral phenomenon. However, in the context of a society in which male developmental trajectories are dominant and highly valued, the developmental trajectory of care has often been considered immature or deviant (Gilligan, 1993). As such, girls require validation and support as they develop toward to the ethic of care. A developmental arc culminating in a well-refined ethic of care represents a valid and powerful developmental outcome.

### **Theme 3: Caring for Self and Others**

*An important milestone in girls’ development includes learning to care for themselves as well as others.* Gilligan’s (1982) description of the three phases of women’s moral development illuminates this issue. In the first phase, women are primarily concerned with survival.

In the second phase, their concern shifts to responsibility for others. In this phase, girls and women often equate goodness with self-sacrifice and fail to give themselves permission to include themselves as someone they should take care of. They attempt to establish and maintain

relationships regardless of the personal cost. Too readily, they sacrifice their unique voice and individual needs to maintain relationships – not realizing how often this act undermines the relationships they hope to protect. Too often, these sacrifices include allowing themselves to be exploited and harmed - frequently by those who are supposed to be connected to them and caring for them.

In the third phase, girls - more frequently women - begin to equate goodness with caring for both self and others. They learn to equitably apply the ethic of care to both themselves and those to whom they are connected. They begin to understand the importance of caring for self in maintaining the capacity to care for others. Perhaps more importantly, girls and women develop a self-respect that requires the condemnation of others' attempts to exploit and harm them. At this final phase of development, the ethic of care has been refined and expanded to include both caring for and protecting others and caring for and protecting self.

#### **Theme 4: Challenge as Growth Promoting**

*Crisis and challenge present important opportunities for girls to learn and grow.* Miller (1968) and Gilligan (1993) both describe the importance of conflict, crisis, and challenge in girls' development. Both authors acknowledge this as an element in both girls' and boys' developmental processes. Both authors also propose a special emphasis on the role of crisis and challenge in girls' development. Marone (1992) suggests American culture communicates gender prescriptions that result in a strange mix of girls being over-protected and exposed to added harm. She suggests this cultural combination predisposes many girls to learned helplessness, undermines their sense of competence and confidence, and limits their opportunities for personal growth. Marone highlights the importance of encouraging girls to take risks and face challenges.

## **Theme 5: Differences in Learning Style**

*Girls often experience the process of learning differently than boys.* Belenky et al. (1986) and Josselson (1987) describe the importance of connection in girls' learning. Boys tend to manipulate physical and mental objects with detachment and feel satisfied when objective goals are met, for instance, number of tasks accomplished according to a previously established criteria. Girls tend to connect to physical and mental objects and feel satisfied when subjective goals are met; goals including a sense of understanding, appreciation, and comprehension of subtly and nuance.

Both Belenky and Josselson emphasize the importance of connection to others in the learning process. Belenky (1986) outlines 8 conditions that promote learning in girls. These conditions include 1) a safe learning environment in which students can speak freely without fear of ridicule or judgment, 2) teachers who role model risk, intellectual and otherwise, by sharing real emotion and revisions in their thinking and skill development with their students, 3) teachers and mentors students are able to identify personally with – people girls are able to see themselves or future selves in, 4) facilitative instruction focused on helping girls develop and gain confidence in their own ideas and abilities, 5) students working together in small groups and “talking through” their thought processes and skills practice, 6) an educational environment that encourages reflection and nurturing an individual's thoughts to maturity and their skills to mastery, 7) an educational atmosphere that values the contributions of both objective and subjective knowing – both evidence and intuition, and 8) feedback and evaluation conducted by a teacher or mentor who knows the student well and demonstrates a vested interest in the student's success. The role connection and relationships play in providing a context for girls' learning is pervasive in Belenky's work.

Josselson (1987) supports Belenky's emphasis on connection and relationships in girls' learning and development. According to Josselson, relationships are often the critical factor deciding whether or not developmental transitions are fully engaged and determining the probability of successful change. Josselson suggests that all growth requires risk and that relationships tend to provide support for risky transitions. She calls these relationships "anchors." An anchor is linked to direction of growth and change and serves as a focal point during risky transitions.

### **Theme 6: Environmental Threats to Girls' Safety**

As mentioned earlier in this chapter, the Office of Juvenile Justice, Delinquency, and Prevention (Bilchik, 1998) summarized five basic requirements for healthy development in girls. Below, each item is also accompanied by common threats to girls' healthy development as follows:

- The need for physical safety and healthy physical development... being challenged by poverty, homelessness, violence, inadequate healthcare, inadequate nutrition and substance abuse.
- The need for trust, love, respect, and validation from caring adults to foster healthy emotional development and form positive relationships... being challenged by abandonment, family dysfunction, and poor communication.
- The need for positive female role models to develop healthy identity as a woman... being challenged by sexist, racist, and homophobic messages and a lack of community support.
- The need for safety to explore their sexuality at their own pace and a pace that supports healthy sexual development... being challenged by sexual abuse, exploitation, and negative messages about female sexuality.
- The need to belong, to feel competent, and to feel worthy... being challenged by weakened family ties, negative peer influences, academic failure, and low self-esteem.

Each of these items speaks not only to girls' needs, but to an environment that is either safe or threatening. These items describe girls' common needs in terms of safety. In order to develop

in a healthy manner, all girls must feel physically, emotionally, and sexually safe – safe in terms of both their physical environment and relationships. Basic conditions any girl requires to develop into a healthy, vibrant, and successful woman.

### **The Model of Girls' Resilience: Integrating Stress, Resilience, and Women's Development**

Developing effective prevention and early intervention programs requires clearly understanding the target population's needs and the conditions and processes associated with meeting those needs. Further, designing effective programs means selecting high-leverage targets for intervention and choosing the strategies most likely to positively impact those targets. Many times, this process requires being able to meaningfully integrate and synthesize theory, research, and practice published in the pertinent professional literature as combined with experience and professional judgement.

*The Model of Girls' Resilience* was developed specifically for the *Project Challenge* program by the author of this study. This model summarizes and integrates the work of stress, resilience, and developmental theorists and researchers; particularly work designed to promote the health and well-being of adolescent girls. Further, it is influenced by observations of and feedback from girls participating in the *Project Challenge* program.

Like any good theory or model, *The Model of Girls' Resilience* was developed with parsimony in mind. Each of the model's constructs was selected sparingly and with great care. Only the highest leverage constructs were included in the model – those determined to be the most influential in girls' outcomes. Figure 2-1 presents the model's constructs and illustrates the relationships between each construct.

The model consists of 8 core propositions:

1. Girls are strong and capable. They can successfully overcome difficulty, actively engage challenge, and achieve life success.

2. Developmental challenges exert discernable influences on girls' psychosocial development – both positive and negative.
3. Girls' resilience is composed of factors related to both intrapersonal development (self-confidence and self-esteem) and interpersonal development (perceived social support and mattering).
4. Intrapersonal development and interpersonal development are intimately related to one another and equally essential as girls' develop resilience. Intrapersonal development is most likely to be fostered in rich interpersonal environments. Interpersonal development is most likely to be fostered based on a strong intrapersonal foundation.
5. Self-esteem consists of a girl's estimation of her value, and mattering consists of a girl's estimation of the value others place on her. These constructs influence whether or not she will attempt to cope effectively and the number and quality of attempts she will make.
6. Self-confidence includes a girl's belief in her ability to act on her own behalf, and perceived social support includes girls' beliefs in others' willingness to act on her behalf. Together, these constructs constitute the most reliable predictors of a girl's level of persistence throughout the coping effort, her coping success or failure, and her health and behavioral outcomes.
7. Girls compose their identities as both individuals and as they relate to significant others. Factors associated with girls' resilience become more stable as they are more deeply integrated into girls' independent and relational identities. For instance, as evidence of self-confidence becomes increasingly more pervasive in a

girl's values and goals, the more stable and influential the impact of self-confidence will be in the rest of the model.

8. Factors associated with girls' resilience influence stress appraisal which, in turn, influences the selection of coping strategies which, in turn, influences girls' health and life outcomes.

*The Model of Girls' Resilience* provides a working model designed to describe factors, conditions, and processes associated with developing resilience in girls facing developmental challenge. It accounts for the most common sources of trauma in this population and the developmental consequences most often associated with those traumas. Further, it clearly delineates the developmental characteristics most likely to promote girls' resilience, and addresses the gender-specific processes and conditions associated with girls' development.

The model suggests that developmental challenges may contribute to decreased levels of self-confidence, self-esteem, perceived social support, mattering, and identity. In turn, these factors can foster negative stress appraisals and promote the selection of maladaptive coping strategies associated with delinquency, loss, and poor life outcomes. The model also suggests that increasing levels of self-confidence, self-esteem, perceived social support, mattering, and identity will help improve a girls' ability to cope. Interventions designed to help girls' recover developmental losses associated with resilience-related factors will help produce outcomes conducive to healthy decision-making and successful life outcomes.

### **Summary**

Chapter 2 provided an overview of the professional literature related to 1) the developmental challenges faced by adolescent girls, 2) theories related to stress, coping, and resilience, and 3) the growth and development of adolescent girls. Each of these elements was

summarized in *The Model of Girls' Resilience* – a model designed specifically for the *Project Challenge* program.

Girls experience intense and traumatic life events that can lead to delinquent behavior, risky health decision-making, and poor life outcomes. Girls' responses to these events often depend on their levels of psychosocial development and their ability to effectively appraise and cope with stress. Understanding how these factors interact and influence girls' health and life decisions helps when developing effective prevention and early intervention programs designed to help at-risk girls improve their health and life outcomes.

Chapter 3 will describe the methods associated with the study. These methods include the research design, research variables, participant characteristics, instrumentation, intervention program, and data collection and analysis procedures.

Table 2-1. Bonnie Bernard's list of personal qualities associated with resilience.

Social Competence	Problem Solving Skills/Self-efficacy	Autonomy/Identity	Sense of Purpose and Future	Social and Environmental Factors
Elicit positive responses from others	Internal locus of control	Sense of own identity	Clear goals including educational aspirations	Supported in various caring environments
Establish positive relationships with others	Planning skills Decision-making skills	Ability to act independently Confident in strengths	Persistence Hopefulness	Adults who communicate high, positive expectations
Ability to make and keep good friends	Resourcefulness- the ability to seek and acquire help from others	Able to exert control over the environment	Career and job success as highest priority	Able to participate in meaningful activities  Gender differences attended to

Table 2-2. Comparison of personal qualities associated with resilience.

Kate Thomsen, 2002	Henderson & Millstein, 1996	Wolin & Wolin, 1996
Having an easy temperament or disposition	Ability to elicit positive responses from others	Insight: Habit of asking tough questions that promote clarity
Having the ability to elicit positive responses from others	Empathy and caring	Independence: Emotional and physical distancing placing youth out of harm's way
Having empathy and caring about others	Communication skills	Relationships: Fulfilling ties to others providing stability, nurturing, and love
Having excellent communication skills	Autonomy or Self-efficacy	Initiative: A push for mastery that combats helplessness
Having a sense of humor about oneself	Problem-solving skills	Creativity: Resolving one's pain through "building a new world from the ruins of the old"
Having a sense of one's identity	Sense of purpose or future	Humor: Ability to minimize pain and troubles by laughing at oneself
Having the ability to act independently	Easy temperament/ability to regulate temper	Morality: An informed sense of "goodness" or "badness"
Having the ability to separate from unhealthy situations or people	High expectations	
Having a sense of purpose or future	Has access to and takes advantage or opportunities for meaningful participation	
	Environmental conditions at home, school, and community that promote resilience	
	Access to caring and support	

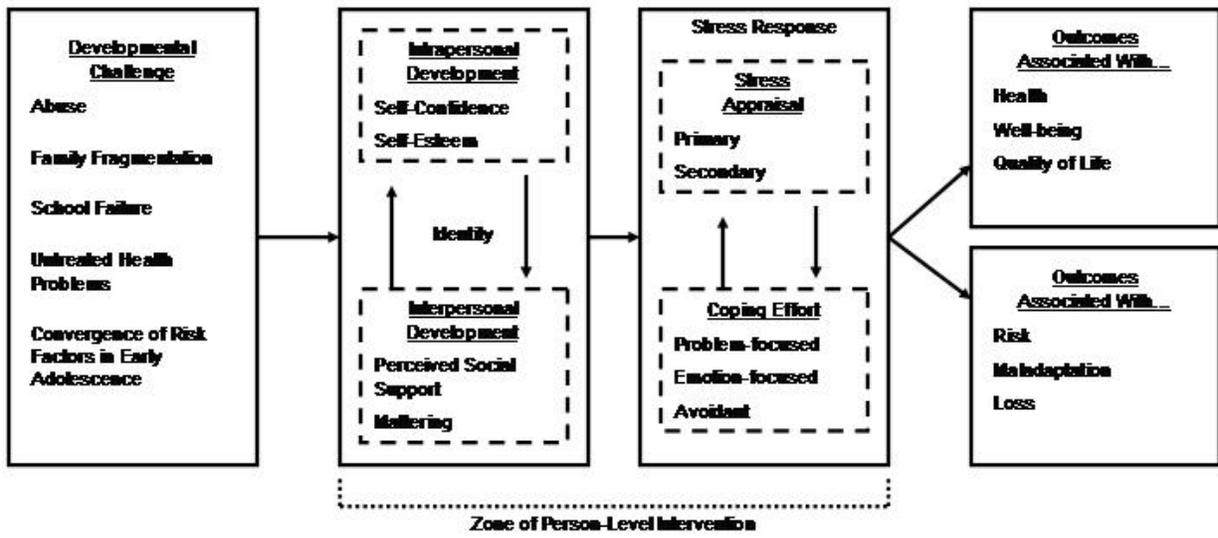


Figure 2-1. The Model of Girls' Resilience.

## CHAPTER 3 METHODS

At-risk girls experience a disproportionate number of intense and disruptive traumatic life events which can adversely affect healthy psychosocial development. Such disruptions contribute to higher levels of risk behavior, poor health, and diminished quality of life. Relatively few programs focus directly on enhancing the development of at-risk adolescent girls, and little research has examined the effectiveness of such programs. To add to this important body of literature, the study described the lifetime incidence of developmental challenge among a sample of adolescent girls attending alternative schools, and examined the relationship between a developmental program for at-risk girls, *Project Challenge*, and participant levels of intrapersonal and interpersonal development.

### **Research Design**

The study utilized a component mixed methods design, where quantitative and qualitative “data gathering methods [are] implemented as separate aspects of the evaluation and remain distinct throughout” a study (Rallis & Rossman, 2003). Typically, one method remains dominant in data collection and analysis, while the second method corroborates, elaborates, or expands research findings. This study utilized a QUAN + qual design (Morse, 2003). Both quantitative and qualitative data collection methods were used simultaneously. Quantitative methods were used as the dominant form of data collection and analysis in this study. Qualitative methods were utilized in a supporting role. Specifically, the qualitative portion of the study used both triangulation and complementary design elements to corroborate and enhance or elaborate quantitative findings. (Rallis & Rossman, 2003)

The quantitative portion of the study used an experimental repeated measures cross-over design. This design uses random assignment to create two separate groups – Group 1 and Group

2. After assignment, the study proceeded according to the following steps:

1. Both groups completed the first round of surveys (T1).
2. Group 1 received the experimental treatment, while the Group 2 received no treatment.
3. Both groups completed the second round of surveys (T2).
4. Group 1 received no treatment while, Group 2 received the experimental treatment.
5. Both groups completed the third round of surveys (T3).

This design allowed each group to be assigned to both experimental and control conditions. Between T1 and T2, Group 1 was the experimental group while Group 2 was the control group. Between T2 and T3, Group 1 was the control group while Group 2 was the experimental group. (Streiner & Norman, 1998)

The design also included conducting participant exit interviews to explore participant perceptions of *Project Challenge* and the outcomes associated with their *Project Challenge* experience. Group discussions were conducted as a part of the curriculum and conducted by a trained facilitator. Interviews were conducted after the intervention by a trained facilitator. The researcher observed and participated in both group discussions and individual interviews and kept notes throughout the study. (Hatch, 2002; Glesne, 2006)

There were several strengths associated with this design. Experimental designs provide clear evidence regarding the effects of an intervention and the best protection against threats to validity (Creswell, 2005). Cross-over designs also contribute substantial strength to experimental studies. This design allows both groups to receive the experimental treatment and requires repeated measurements from each participant. Both procedures increase the power of a

study. Participant exit interviews provide a “qualitative description enhancing particular aspects of the study” (Morse, 2003). In particular, interviewing provides opportunities for rich, detailed feedback that elaborates on the quantitative findings of the study

### **Research Variables**

The study described rates of developmental challenge for 4 variables: abuse, family fragmentation, school failure, and convergence of problems in early adolescence. The study determined the intervention’s effect on 6 variables related to psychosocial development and resilience in girls: 2 variables related to intrapersonal development (self-confidence and self-esteem); 2 variables related to interpersonal development (perceived social support and mattering); 1 variable related to both intra- and interpersonal development (identity); and 1 variable related to intervention status. Continuous variables included self-confidence, self-esteem, perceived social support, mattering, and identity. Categorical variables included intervention status and developmental challenge. Dependent variables included self-confidence, self-esteem, perceived social support, mattering, and identity. The independent variable included intervention status.

### **Instruments**

A battery of instruments was used to measure the 5 dependent variables – self-confidence, self-esteem, perceived social support, mattering, and identity.

#### **Self-Confidence**

Self-confidence was measured using a combination of the Pearlin Mastery/Self-efficacy Scale (Pearlin et al., 1981) and the Hope Scale (Synder, et al., 1991). Both scales described participant confidence in their ability to positively affect the outcomes of their lives.

*Mastery/Self-efficacy.* The Pearlin Mastery/Self-efficacy Scale (Pearlin et al., 1981) measures “the extent to which people see themselves in control of the forces that importantly

affect their lives. (Pearlin et al., 1981).” Higher scores suggest higher levels of global self-efficacy or confidence in their ability to make successful life decisions and behave in ways conducive to success. The scale includes 7 items answered using a 4-point Likert-type scale. Sample items include “I can do just about anything I set my mind to,” and “I often feel helpless in dealing with my problems.” Responses indicated how strongly participants agreed or disagreed with each of the 7 items. Scores may range from 7 to 28 and were analyzed as one continuous variable. The original Cronbach’s alpha for this scale was .72, and recent studies with adolescents reported Cronbach alpha’s between .67 and .75. Confirmatory factor analysis was used to establish the validity of the scale. (Ludwig & Pitman, 1999; Desocio, Kitzman, & Cole, 2003) A copy of this scale can be found in Appendix D.

*Hope.* The Hope Scale (Synder, et al., 1991) measures the “perception that goals can be met.” According to the scale’s designers, hope is composed of two dimensions – agency and pathways. Agency involves “a sense of successful goal-directed determination,” while pathways involves “a sense of successful goal-directed planning.” The scale and its corresponding subscales consist of items related to individuals’ confidence in their ability to positively influence their future. Sample items include “My past has prepared me for future success,” “I energetically pursue my goals,” “There are lots of ways around any problem,” and “I can think of many ways to get the things in life that are most important to me.” The scale includes 12 items answered using a 4-point Likert-type scale. Responses indicated how strongly participants agreed or disagreed with each of the 12 items. Scores may range from 12 to 48 and were analyzed as a continuous variable. The original Cronbach’s alpha ranged between .74 and .88 for the entire scale. The original Cronbach’s alpha for the agency subscale ranged from .71 to .76, and the pathways subscale reliability scores ranged from .63 to .80. Confirmatory factor

analysis was used to establish the validity of the total scale and both subscales. A copy of this scale can be found in Appendix E. (Snyder, et al., 1991; Snyder, 2002)

### **Self-Esteem**

The Rosenberg Self-Esteem Scale (Rosenberg, 1965) measures individuals' respect for themselves and their sense of worthiness. The self-esteem construct does not include a sense of being superior to others, nor a sense of feeling worse than others. Higher scores indicate the strength to which people believe they are "good enough" – not better or worse than others. The scale includes 10 items answered using a 4-point Likert-type scale. Sample items include "I am able to do things as well as most other people," "I take a positive attitude toward myself," and "I feel that I have a number of good qualities." Responses indicate how strongly participants agreed or disagreed with each of the 10 items. Scores may range from 10 to 40, and scores were analyzed as a continuous variable. The original coefficient of reproducibility for this scale was .92. Recent studies report Cronbach's alphas between .70 and .85 (Rosenberg, 1965). A copy of this scale can be found in Appendix F.

### **Perceived Social Support**

The Multidimensional Scale of Perceived Social Support (Zimlet et al., 1988) assesses individuals' "perceptions of their level of social support from family, friends, and a significant other (Canty-Mitchell & Zimlet, 2000)." The scale includes 12 items answered using a 7-point Likert-type scale. Sample items include "My family really tries to help me," "There is a special person there when I need them," and "I can count on my friends when things go wrong." Responses indicate how strongly participants agree or disagree with each of the 12 items. Scores may range from 12 to 84, and were analyzed as a continuous variable. The original Cronbach's alpha for the total scale was .93. Factor analysis and comparisons with other common social

support scales support the validity of the instrument (Canty-Mitchell & Zimlet, 2000; Zimlet, et al., 1988). A copy of this scale can be found in Appendix G.

### **Mattering**

The short form of the Mattering Index (Elliot, Kao, & Grant, 2004) measures “the perception that we are a significant part of the world around us” (Elliot, et al., 2004). The form is conceptualized in 3 dimensions: awareness, importance, and reliance. Awareness suggests others realize a person exists. Importance implies that individuals feel others care about them and are concerned about them. Reliance means individuals believe others look to them for “satisfaction of needs or wants.” The index includes 15 items answered using a 5-point Likert-type scale. Sample items include “For whatever reason, it is hard for me to get other people’s attention,” “ My successes are a great source of pride to people in my life,” and “People count on me to be there in times of need.” Responses indicate how strongly participants agree or disagree with each of the 15 items. Scores may range from 15 to 75 and were analyzed as a continuous variable. Cronbach’s alpha for the most recent youth administration of this scale was .84. Validity was previously established by using factor analysis, comparisons with other instruments, and expert review. A copy of this scale can be found in Appendix H. (Elliot, et al., 2004; Elliot, Colangelo, & Gelles, 2005)

### **Identity**

The Identity Sub-scale of the Adolescent Personality Style Inventory (Lounsbury, et al., 2005) measures individuals’ sense of their level of identity formation. The scale includes 8 items answered using a 5-point Likert-type scale. Sample items include “I have a firm sense of who I am,” and “I have a clear set of personal values or moral standards.” Responses indicate how strongly participants agree or disagree with each of the 8 items. Scores may range from 8 to 40 and were analyzed as a continuous variable. The original Cronbach’s alpha for the scale was .84.

This score was derived using a college population. Because the instrument is relatively new, reliability coefficients associated with younger adolescent populations have not yet been extensively reported. Comparisons with other common identity scales support the validity of the instrument. A copy of this scale can be found in Appendix I. (Lounsbury, et al., 2005)

### **Developmental Challenge and Demographic Information**

The University of Florida Institutional Review Board requested that items related to developmental challenge be obtained from existing student records when possible, thereby limiting the number of times participants would be asked to discuss potentially painful or traumatic issues. As part of *Project Challenge*, participants are required to complete an assessment interview. Assessment interviews are routinely conducted by a *Project Challenge* team member trained to conduct assessment interviews of a highly personal nature. Information related to developmental challenge was retrieved from these records. A copy of the *Project Challenge* Assessment Interview can be found in Appendix K.

The *Project Challenge* Assessment Interview also includes a variety of demographic items. Demographic information for the study was retrieved from existing program records. A copy of the *Project Challenge* Assessment Interview can be found in Appendix K.

### **Instrument Pilot**

The complete instrument battery (Appendix J) was administered to 10 at-risk girls attending one of the alternative schools participating in the study. All pilot subjects were former *Project Challenge* participants. The battery was administered two times, two weeks apart, using the same procedures and under the same conditions outlined in the study procedures. The researcher evaluated the administration in terms of time to complete, test fatigue, participant comprehension, and instrument reliability.

Results from the pilot administration were favorable. Both administrations were timed (T1, 19 minutes; T2, 17 minutes). After the second administration, participants were interviewed individually regarding their experience with the instrument battery. Participants indicated instructions were easy to understand and that the instrument battery was of a reasonable length. No participants reported test fatigue. The battery was then reviewed with each participant item-by-item. This thought-response evaluation indicated each participant clearly understood the survey items and answered using logic consistent with the intent of the instruments.

The study focused on changes associated with the intervention over a two-week time period, so it was critical to evaluate the stability of the scales and their corresponding constructs over the same period of time. Results indicated adequate test-retest reliability for 4 of 6 scales. Independently, the 2 scales related to self-confidence did not demonstrate stable test-retest reliability. When used collectively, test-retest reliability was adequate (.700,  $p=.05$ ). Internal consistency reliability was also calculated for each scale at each administration.

The combined self-confidence scales, and each of the 4 individual scales, exceeded the previously established minimum threshold of .60 reliability (Penfield, 2003) for both test-retest and internal consistency measures of reliability. Therefore, the combined self-confidence scales and each of the 4 individual scales were used for the main study. Results of reliability testing are recorded in Table 3-1.

### **Participants**

Study participants included girls aged 13 to 17 years. All participants were referred by local alternative schools. Each school referred one hundred percent of its female population for the study, and 95% (N=37) of those referred chose to participate in *Project Challenge* and in this study. Program groups included 5 to 8 participants per group.

Informed consent was obtained in writing from each participant's parents or guardians. Each participating alternative school sent informed consent forms home with participants then collected forms signed by a parent or guardian. Parent/guardian informed consent was also confirmed by telephone. Underage participants cannot legally consent to participate in a research study, so an assent script was read to participants before all three administrations of the instrument battery. Each time, 100% of participants indicated they wanted to participate in the study. Participants were not asked to provide any information that could be used to identify them individually.

Survey data were collected confidentially. Each participant was assigned a random number. Data were collected and recorded using only the participant's assigned number. The list of assigned numbers, completed instruments, and data spreadsheets were kept in locked cabinets. The list of assigned numbers was kept separately from the completed instruments and data spreadsheets. At the end of the study, the list of assigned numbers and completed instruments were shredded.

### **Setting**

The study was conducted in three settings. Data collection was conducted in a traditional classroom at each participating alternative school. The program was conducted 1) at *Project Challenge's* outdoor ropes course and classroom located on the campus of a local alternative school in North Central Florida, and 2) in U.S. national forests on the Ocoee and Nantahala rivers in Tennessee and North Carolina and on the cliffs of Starr Mountain in Tennessee.

### **Procedures**

The *Project Challenge* program consisted of 4 phases. Each phase included activities unique to that phase. However, a clearly defined philosophy concerning what best promotes the development of at-risk girls unified all 4 phases. Activities associated with each phase included:

## **Pre-Program: Team Training**

*Project Challenge* team members received comprehensive training prior to the study. Each team member participated in two types of training. First, team members were trained to be effective with the target population. This training included the *Model of Girls' Resilience*, principles of girls' development, challenges faced by girls' at-risk for delinquency, and behavior counseling skills. Second, all team members were trained to maintain program fidelity. This training focused on curriculum and consistent program delivery. All *Project Challenge* team members worked with the organization for a minimum of 6 months prior to the beginning of the study. Prior to the study, each team member was evaluated in terms of both effectiveness and fidelity. Each team member demonstrated satisfactory levels of both.

## **Phase 1: Assessment**

Phase 1 focused on establishing contact with treatment group participants. This phase's primary activity included an individual meeting with a program team member. During this meeting, the program team member conducted a brief orientation, answered participant questions, and conducted a brief assessment interview. This interview was conducted by the same *Project Challenge* team member at each time. This team member had been trained by *Project Challenge* to conduct assessment interviews and by the researcher to adhere to program fidelity and treatment protocols. Information provided during the interview was made available for the purposes of the study. During this phase, a program team member also contacted each participant's parent or guardian, requested their support for the program, and encouraged active communication and involvement with the participant during the program.

## **Phase 2: Preparation**

Phase 2 focused on 1) developing safe and trusting relationships between adult team members and program participants, and 2) teaching wilderness camping, hiking, rock climbing,

rappelling, and whitewater safety skills. This phase consisted of four training sessions. Each session began with an overview of the day's training activities and a 2-4 minute talk about a topic relevant to an aspect of development. Students participated in safety training activities for approximately 1½ hours. These activities included rock climbing and rappelling on an artificial climbing tower, and practicing whitewater and swimming rescue at a local lake. Every participant received a personal journal where they could record their thoughts and feelings during the program. At the end of each session, a journal topic was read by a *Project Challenge* team member, and participants were given 10-15 minutes to respond to the topic in their personal journal. Sessions concluded with a facilitated discussion about the assigned journal topic, and a summary and assessment related to the day's training activities.

The main priority of this phase was to encourage and promote trusting, growth-promoting relationships between participants and *Project Challenge* team members; authentic relationships characterized by respect, caring, and trust. Relationships of this nature take time to develop. The training sessions provided time to build a safe emotional environment prior to the trip's potentially stressful and demanding challenges. Both the journal and the discussion activities helped participants begin thinking about topics and issues to be addressed in more detail during the challenge trip. Further, the discussions also allowed students to practice the discussion format used on the challenge trip, and to create group dynamics conducive to sharing openly and honestly with each other

### **Phase 3: Challenge Trip**

Phase 3 consisted of a 4-day adventure camping trip. During this phase, participants camped in a primitive portion of the Cherokee National Forest in Tennessee where they completed a series of outdoor adventure challenges including rafting two whitewater rivers,

completing two strenuous wilderness hikes, climbing one 75-foot rock wall, and rappelling one 75-foot cliff and one 125-foot cliff. The itinerary for the trip included:

Day 1:

- Travel to the campsite in Tennessee
- Lunch on the road
- Camp set-up
- Recreational river hike
- Completion of one journal assignment
- Dinner
- Campfire Session 1

Day 2:

- Breakfast
- Whitewater practice on the Class I-II Nantahala River
- Lunch
- Hiking Challenge 1
- Rappelling Challenge 1 (75 feet)
- Return to camp
- Completion of one journal assignment
- Dinner
- Campfire Session 2

Day 3:

- Breakfast
- Whitewater Challenge on the Class III-IV Nantahala River
- Lunch
- Hiking Challenge 2
- Climbing Challenge
- Rappelling Challenge 2 (125 feet)
- Return to camp
- Completion of one journal assignment
- Dinner
- Campfire Session 3

Day 4:

- Break down camp
- Breakfast on the road
- Celebration lunch at Sonny's Barbeque
- Completion of one journal assignment
- Personal goal setting with *Project Challenge* team member

“Campfire sessions” involved facilitated discussions about the day’s experiences and journal topic. Together, the journals and campfire sessions encouraged reflection about issues

pertinent to intrapersonal and interpersonal development. These activities linked personal reflection, experience, and integration of the day's accomplishments.

Journal assignments and campfire sessions provided a structured curricular framework for the challenge trip experience. The essence of the trip experience consisted of a combination of personal experience, individual reflection, and growth promoting relationships with others. Engaging in the authentic and reciprocal relationship-based transactions was the first priority during this experience. As discussed in Chapter 2, most developmental growth among girls occurs in the context of experience, reflection, and relationships. *Project Challenge's* formal curriculum and behavior counseling strategies actively supported and structured participant engagement in these experiences and relationships. *Project Challenge's* philosophy of actively using the time between journals and campfires to effectively build growth-promoting relationships and to explore participant experiences represents an equally important strategy.

#### **Phase 4: Transference**

Phase 4 included activities designed to help participants transfer what they learned on the challenge trip to their personal lives. Activities included goal-setting and participation in a Family and Friends Celebration. Participants set personal goals to help them apply developmental lessons learned on the trip directly to real challenges they face in their personal lives. The goal-setting activity was clearly participant directed. Participants chose the challenges they wanted to address, and the steps they would take to achieve those goals, with some restrained guidance from the Project Challenge team member in charge of goal setting. This *Project Challenge* team member did help participants set achievable and measurable goals clearly under the participant's control, but actively refrained from telling participants which life challenges to work on or exactly what steps should be taken to achieve their goals.

The final group session focused on participants sharing their program experiences with family and friends. This session occurred approximately two days after the trip. The Family and Friends Celebration session consisted of a barbeque dinner, a slide presentation, participant speeches and goal sharing, opening the climbing tower to family and friends, and climbing demonstrations conducted by participants. The goal of this session included inviting participant's ongoing sources of social support and mattering to engage tangibly in the participant's experience, learning, and growth. At the conclusion of this session, participants were presented with three keepsakes: 1) their completed *Project Challenge* journal; 2) a framed, personalized display of pictures taken while they completed various program challenges; and 3) a *Project Challenge* tee-shirt.

As an addendum to the study, *Project Challenge* team members remained available to participants for two months after the program. *Project Challenge* team members visited participants at their local alternative school each week. They followed-up with participants regarding their goals and offered a variety of assistance to participants. Informally, *Project Challenge* team members remain available to participants any time after program completion. Team members actively refer participants to a range of assistance and support.

The full *Project Challenge* Curriculum can be found in Appendix F. This curriculum includes the mission of the organization, philosophy of the organization, goals of the program, and the objectives and activities associated with each session. A full copy of the *Project Challenge* Participant Journal can be found in Appendix G. Examples of *Project Challenge* Family and Friends Celebration keepsakes can be found in Appendix H.

### **Data Collection**

Three strategies were used to collect data during the study. The first strategy included using the instrument battery to collect information related to the study's 5 dependent variables.

The second strategy was integrated within the intervention and included collecting demographic information and history of developmental challenges using the *Project Challenge Assessment Interview*. The third strategy involved the researcher making qualitative observations throughout the intervention.

### **Strategy 1: Instrument Battery**

The study was conducted in three waves. For each wave, participants were randomly assigned to Group 1 or Group 2. Over the course of each wave, quantitative data related to the dependent variables were collected from both groups three times. These data were collected throughout each wave using the following schedule.

1. Data Collection 1 (T1): Both groups completed the instrument battery on the same day at the same time prior to either group participating in program activities.
2. Assignment 1 (I1): Group 1 received the intervention while Group 2 received no intervention.
3. Data Collection 2 (T2) Group 2 completed the instrument battery the day after Group 1 returned from the challenge trip, but before contact with Group 1 members; Group 1 completed the instrument battery 1 day later. (T2).
4. Assignment 2 (I2): Group 1 received no intervention while Group 2 received the intervention.
5. Data Collection 3 (T3): Both groups completed the instrument battery on the same day and at the same time after all of Group 2's intervention-related activities were completed.

Participants completed the full instrument battery composed of scales related to self-confidence, self-esteem, perceived social support, mattering, and identity each time (T1, T2, and T3). Procedures used each time participants completed the instrument battery included:

1. Welcoming participants and thanking them for participating in the study.
2. Distributing a copy of the instrument battery to the correct participants according to their assigned numbers, and reminding participants not to begin completing the survey until instructed to do so.
3. Reading the assent script and waiting for participant response.
4. Reminding participants about: 1) the need to take their time, 2) the confidentiality of their responses, and 3) the importance of serious and thoughtful answers.
5. Allowing participants to complete their surveys free of distraction.
6. Answering participant questions about survey items by encouraging them to “Select the answer you think is best.”
7. Instructing participants to place their completed instrument battery in the one large envelope provided for the group and requesting the last participant who completed the survey to seal the envelope.
8. Thanking participants and supervising them as they returned to class.

The researcher was blind to all pre- and post-test results until after all three waves of the study were completed. All data collection was supervised by trained personnel associated with the study. Data were collected in equivalent classroom settings and conducted on the same day and at the same time unless otherwise specified by the protocol.

### **Strategy 2: *Project Challenge* Assessment Interview**

Demographic information and information related to Developmental Challenge were collected using the *Project Challenge* Assessment Interview. As requested by the University of Florida Institutional Review Board, existing program records were used to collect information related to potentially sensitive topics such as abuse and family trauma.

The first phase of *Project Challenge* involved conducting a comprehensive assessment interview. For participants assigned to the intervention condition, the interview was conducted between administration of the instrument battery and the beginning of program activities. The interview was conducted by the same *Project Challenge* team member for all participants. The team member had been trained to collect sensitive information in an interview format. Further, the researcher provided training for the *Project Challenge* team member concerning the importance of consistent adherence to interview procedures. Procedures followed each time an interview was conducted included:

1. Welcoming the interviewees and expressing excitement about their participation in the program and challenge trip.
2. Explaining the purpose of the interview, and asking for the interviewees' permission to proceed with the interview.
3. Reassuring the interviewees about the confidentiality of their responses.
4. Asking the interview questions in the prescribed order, and recording responses using the response codes previously established by *Project Challenge*.
5. Answering interviewees' questions about interview questions by encouraging them to "Answer however you think is best."
6. Asking interviewees if they had any questions about the program, then answering their questions.
7. Thanking interviewees for participating in the interview, telling them the interviewer was looking forward to seeing them at *Project Challenge*, and supervising them as they returned to class.

### **Strategy 3: Participant Exit Interviews**

Qualitative data were recorded in the form of informal notes kept by the researcher. These notes included observations related to general program activities and participation in the informal group discussions and interviews. Additionally, the *Project Challenge* program routinely video tapes program activities and participant reactions to the program. The researcher had access to the video tapes taken during the study and reviewed them as needed. Qualitative data collection focused on documenting and exploring participants' perceptions of their experiences with the *Project Challenge* program and participants' beliefs concerning what they learned or gained while participating in the program.

### **Data Analysis**

Methods for data analysis were selected based on the nature of the research question. A Type I error rate was set at .10 for all tests. Researchers often set a .10 error rate in social science research, particularly in conjunction with preliminary studies (Agresti, 1997).

### **Research Question 1**

*What levels of developmental challenge are prevalent among adolescent girls attending alternative schools?*

Demographic data and histories of developmental challenge were analyzed using descriptive statistics (Agresti & Finlay, 1999). Analyses included all study participants. Frequencies and rates were reported for each variable. Variables included age, ethnicity, total incidence of abuse, physical abuse, sexual abuse, family fragmentation, nature of family fragmentation, school behavior problems, academic failure, and substance use and abuse.

### **Research Questions 2-6**

*What differences exist in participant levels of psychosocial development based on assignment to experimental and control conditions?*

## Quantitative Analysis

Primary data analysis focused on using Repeated Measures of Analysis of Variance. This statistical procedure was used to examine differences between groups of participants based on the timing of each group's exposure to the Project Challenge program. Group 1 participants received the treatment between Time 1 (T1) and Time 2 (T2) measurements. Group 2 did not receive the treatment during this time, and were used as a control group between these measurements. Alternately, Group 2 participants received the treatment between T2 and Time 3 (T3) measurements. In this case, Group 1 did not receive another dose of the treatment, and were used as a control group between those measurements.

Results from these analyses indicated whether or not there was a significant difference in the pattern of change between group means over time. Group 1 received the treatment between T1 and T2 and theoretically should have demonstrated an increase in the variables targeted by the intervention between measurements. Conversely, Group 1 did not receive the treatment between T2 and T3 and should have demonstrated no change or a slight decrease after the T2 measurement.

Group 2 did not receive the treatment between T1 and T2 and, based on the objectives of the program, there should have been no evidence supporting a difference between measurements. Between T2 and T3, however, Group 2 received the treatment and should have demonstrated corresponding increases in the psychosocial variables targeted by the intervention. This interaction between treatment and time of measurement provided evidence concerning the relationship between the program and each psychosocial variable of interest.

Effect size was calculated using partial *eta* squared which described the strength of the treatment's effect on the targeted psychosocial variables. Effect size estimates were interpreted

using traditional ranges. These included small effects/weak relationships (.01), medium effects/moderate relationships (.09), and large effects/strong relationships (.25).

For each variable with significant evidence of a treatment-by-time effect, follow-up data analysis strategies were used to investigate the nature of the differences between treatment and control groups. Follow-up data analysis strategies were two-fold. First, means were computed for each group at each time of measurement. The data were then used to construct line graphs depicting the pattern of change for each group at each time of measurement. These line graphs illustrated whether or not changes in each variable corresponded with their assignment to the treatment or control groups.

Second, One-tailed Dependent Samples t-tests were used to examine within group pre- and post-test differences. These tests provided evidence regarding the nature of the difference between treatment and control groups, i.e. “Was there statistically significant evidence that the treatment group experienced a pre-/post-test increase in target variable?” and “Was there statistically significant evidence that the treatment group did not reflect corresponding increase during the same time period?” Together, these strategies provided evidence regarding the nature of the differences between treatment and control groups. These strategies indicated whether or not changes occurred as predicted and in the directions predicted.

Finally, data were collected from Group 1 participants two weeks after the intervention. Two-tailed Dependent Samples t-tests were used to provide evidence regarding post-treatment changes in each targeted psychosocial variable or changes between T2 and T3. One-tailed Dependent Samples t-tests were used to evaluate net increases between T1 and T3.

### **Participant Exit Interviews**

Participant exit interviews allowed participants to describe the influence of program experiences and activities on their psychosocial development. An informal and adapted version

of the Interpretative Analysis model (Hatch, 2002) was used to analyze the study's qualitative data. Hatch (2003) described interpretative analysis as a process in which the researcher gives meaning to qualitative data by actively "making inferences, developing insights, drawing conclusions, and extrapolating lessons." Steps used to conduct this analysis included:

1. Observing one administration of the program for a sense of the whole and recording broad impressions in researcher's notes.
2. Observing a second administration of the program and recording specific impressions gleaned from Participant Exit Interviews in researcher notes, then recording both specific and broad impressions as theme statements or memos.
3. Observing a third administration of the program in the context of previously recorded impressions, theme statements, and memos, then recording new insights gleaned from Participant Exit Interviews.
4. Studying theme statements and memos for salient interpretations.
5. Reviewing researcher notes and video tapes looking for places where interpretations are supported or challenged.
6. Writing a draft summary.
7. Reviewing the draft summary with participants.
8. Writing a revised summary as informed by participant feedback.

Hatch (2002) cautions against attempting to over-analyze while doing interpretative work and suggests interpretative methods be used to illuminate a previously established phenomenon. This approach to qualitative data analysis complemented the overall QUAN-qual design of the study. Qualitative data was used to confirm, enhance, and elaborate the quantitative findings of the study.

## **Summary**

This chapter described the methods associated with the study including research design, variables, instruments, setting, participants, intervention, data collection, and data analysis. These methods were used to conduct the Project Challenge program, collect data related to participant outcomes, and to analyze that data. Chapter 4 presents the results of the study.

Table 3-1. Instrument pilot reliability test results.

Scale	Test-Retest	Internal Consistency Time 1	Internal Consistency Time 2
Self-Confidence Combined	.700*	.769	.770
Pearlin Mastery Alone	.307	.584	.196
Hope Scale Alone	.571	.597	.869
Agency Subscale	.782*	.629	.850
Pathways Subscale	.266	.103	.588
Rosenberg Self-esteem Scale	.845**	.817	.910
Perceived Social Support	.814**	.684	.674
Special Person Subscale	.770*	.749	.754
Family Subscale	.913**	.919	.909
Friends Subscale	.692*	.775	.765
Mattering	.922**	.798	.777
Awareness Subscale	.564	.505	.333
Importance Subscale	.793*	.722	.717
Reliance Subscale	.805**	.926	.968
Identity Subscale	.885**	.869	.890

\*Significant at the .05 level. \*\*Significant at the .01 level.

## CHAPTER 4 RESULTS

This study examined the lifetime incidence of developmental challenges related to delinquency in girls attending alternative junior and senior high schools and the influence of participating in *Project Challenge* on their psychosocial development and resiliency. Data collected during the study are presented in this chapter. These data describes girls' experiences with developmental challenge and the influence of participating in the *Project Challenge* program.

### **Participant Demographics**

Participants were recruited from one alternative junior high school and one alternative senior high school in the North Florida region. A presentation describing *Project Challenge* was made to 100% of eligible students at each school. To participate in *Project Challenge*, students were required to return paperwork indicating parental permission to participate. To participate in the study, students were required to return a copy of the IRB-approved informed consent. Thirty-seven of thirty-nine students (94.87%) returned both forms and participated in both the program and study. One of the remaining students indicated she personally did not want to participate in the program; the other non-participant indicated her parent or guardian did not want her to participate as punishment for behavior problems at home. Thirty-five out of thirty-seven students (86.49%) participated in all aspects of the program and data collection. One participant left the study due to incarceration, two were forced to move unexpectedly, and one failed to attend program safety sessions and was rescheduled for a future *Project Challenge* program.

Table 4-1 presents participant demographic data. Participants ranged in age from 13 to 17 years. Seventeen percent of students were 13, 29% were 14, 23% were 15, 11% were 16, and

20% were 17. Forty-nine percent of participants described themselves as Black, 9% as Hispanic, and 43% as White. Forty percent attended the alternative junior high school, and 60% attended the alternative senior high school.

### **Research Question 1**

*What levels of developmental challenge and psychosocial development are prevalent among adolescent girls attending alternative schools?*

Univariate statistics were used to describe the lifetime incidence of the four types of developmental challenge that most often precede delinquent behavior in adolescent girls: abuse, family fragmentation, and school failure. Table 4-2 presents the lifetime incidence of each.

According to the information provided, 94.59% of participants were victims of sexual or physical abuse. Seventy-one percent described at least one incident of physical abuse, and 26% described at least one incident of sexual abuse. Only 11% of participants indicated they had received some form of counseling or treatment related to their abuse history.

Ninety-five percent (94.59%) of participants were exposed to some form of family fragmentation. Eighty-three percent (82.86%) experienced parental divorce and subsequent lack of involvement from the parent not-in-residence as an ongoing source of family fragmentation. Forty-nine percent (48.57%) reported prolonged parental incarceration as an ongoing source of family fragmentation. Thirty-one percent (31.43%) described parental substance abuse as a contributing factor to family fragmentation. One hundred percent (100%) of the participants who reported family fragmentation described the father as being the primary family member who was absent, missing, or unavailable. At program entry, 91.43% of participants lived with their mother in the home, while 28.57% lived with their father in the home.

One hundred percent of participants described experiencing abuse or family fragmentation, and 94.59% described experiencing both abuse and family fragmentation. Of the participants

who experienced either abuse or family fragmentation, 100% experienced the problem prior to academic failure and prior to beginning the behavior resulting in their placement in alternative school. Of the participants who experienced both abuse and family fragmentation, 100% experienced both prior to other developmental challenges and onset of behaviors resulting in their alternative school placement.

School failure was examined in terms of school behavior and school grades. One hundred percent of participants indicated failure to behave appropriately at school. This finding reflects the source of participant referrals – alternative schools. The school district this study was conducted in requires a confirmed history of in-school behavior problems before to assignment to an alternative school. Eighty-nine percent (89.19%) of participants also reported academic failure defined as receiving the letter grade “D” or below for half or more of their courses during the previous semester.

## **Research Question 2**

*What differences exist in participant levels of self-confidence based on assignment to experimental and control conditions?*

Repeated Measures Analysis of Variance supported significant differences in self-confidence based on assignment to treatment and control groups ( $p=.005$ ,  $F=6.171$ ,  $df=1.864$ ). Treatment groups demonstrated increased levels of self-confidence while control groups remained constant. The effect size estimate (partial eta squared=.310) suggested a strong relationship between the intervention and increased Self-confidence. Comparisons of group means demonstrated patterns for each group as hypothesized (Table 4-4). One-tailed Dependent samples t-tests revealed significant differences between pre- and post-test measurements (Group 1- $p=.000$ ,  $t=-3.806$ ,  $df=19$ ; Group 2- $p=.000$ ,  $t=-4.156$ ,  $df=12$ ).

As part of the cross-over design, Group 1 was measured two weeks after treatment. Two-tailed Dependent samples t-test provided evidence for a small decrease in self-confidence 2 weeks after treatment ( $p=.074$ ,  $t=1.518$ ,  $df=17$ ; mean decrease=1.333, 90% CI =.194-2.861). Paired samples t-tests strongly supported a net improvement in self-confidence for Group 1 despite a decrease between T2 and T3 ( $p=.007$ ,  $t=-2.718$ ,  $df=17$ )

Repeated Measures ANOVA showed significant differences in the agency subscale between treatment and control groups ( $p=.008$ ,  $F=4.408$ ,  $df=2.000$ ). The partial eta squared effect size estimate of .153 indicated the treatment had a stronger-than-moderate effect on agency. Comparisons of group means demonstrated patterns for each group as hypothesized (Table 4-4). Paired samples T-tests revealed significant pre- and post-test differences in agency (Group 1- $p=.002$ ,  $t=-3.312$ ,  $df=19$ ; Group 2- $p=.006$ ,  $t=-2.894$ ).

Group 1 measurements taken 2 weeks post-treatment suggested a slight decrease in agency. Paired samples t-tests provided strong evidence of this decrease ( $p=.009$ ,  $t=1.844$ ,  $df=17$ ). The corresponding ninety percent confidence interval suggests the decrease was small (mean decrease=.667, 90% CI=.038-1.296). Paired samples t-test also supported a net increase in agency in spite of the decrease between T2 and T3 ( $p=.002$ ,  $t=-2.099$ ,  $df=17$ ).

### **Research Question 3**

*What differences exist in participant levels of self-esteem based on assignment to experimental and control conditions?*

Repeated Measures Analysis of Variance supported significant differences in self-esteem between treatment and control groups ( $p=.016$ ,  $F=4.408$ ,  $df=2.000$ ). The effect size estimate (partial eta squared=.128) suggested a stronger-than-moderate relationship between the intervention and increased self-esteem. Comparisons of group means demonstrated patterns for each group as hypothesized (Table 4-4). Paired samples t-tests revealed significant differences

between pre- and post-treatment measurements (Group 1- $p=.001$ ,  $t=-3.375$ ,  $df=18$ ; Group 2- $p=.009$ ,  $t=-2.672$ ,  $df=13$ ).

Group 1 measurements taken two weeks post-treatment suggested no decrease in self-esteem. Two-tailed Dependent samples t-tests provided no evidence of a significant decrease in self-esteem between T2 and T3 ( $p=.208$ ,  $t=.833$ ,  $df=17$ ). One-tailed Dependent samples t-tests also supported a net increase in self-esteem between T1 and T3 ( $p=.007$ ,  $t=-2.271$ ,  $df=17$ ).

#### **Research Question 4**

*What differences exist in participant levels of perceived social support based on assignment to experimental and control conditions?*

Repeated Measures Analysis of Variance showed significant differences in perceived social support between treatment and control groups ( $p=.048$ ,  $F=3.209$ ,  $df=2.000$ ). The effect size estimate (partial eta squared=.100) indicated the treatment made a moderate impact on perceived social support. Comparisons of group means demonstrated patterns for each group as hypothesized (Table 4-4). Paired samples t-tests revealed significant differences between pre- and post-treatment measurements for Group 1 ( $p=.015$ ,  $t=-2.341$ ,  $df=18$ ), but no evidence for an increase in Group 2- ( $p=.179$ ,  $t=-.953$ ,  $df=13$ ). In Post Hoc analysis, Group 2 data were split into the three subgroups in which treatment occurred. After this procedure, two of three sub-groups demonstrated a significant increase in perceived social support, while one group showed no increase between any points of measurement. Ultimately, five of six subgroups experienced statistically significant pre-post increases in perceived social support.

Group 1 measurements taken two weeks post-treatment suggested a substantial decrease in perceived social support. Paired samples t-tests provided evidence of a statistically significant decrease between T2 and T3 ( $p=.016$ ,  $t=2.310$ ,  $df=16$ ). Paired samples t-test also indicated no net increase in perceived social support between T1 and T3 ( $p=.360$ ,  $t=-.365$ ,  $df=16$ ). This

pattern of evidence and its corresponding confidence intervals suggest a sharp increase in perceived social support during treatment followed by a swift return to baseline.

Repeated Measures ANOVA did not support differences in the treatment and control groups for two of the perceived social support subscales: family ( $p=.069$ ,  $F=2.079$ ,  $df=2.000$ ), and friend ( $p=.242$ ,  $F=1.458$ ,  $df=1.812$ ). Findings did support differences in the special person subscale ( $p=.046$ ,  $F=3.286$ ,  $df=1.927$ ). The partial eta squared for special person was .102 which indicated a moderate treatment effect.

In further analysis of the special person subscale, Paired samples t-tests revealed significant differences between pre- and post-treatment measurements for Group 1 ( $p=.020$ ,  $t=-2.208$ ,  $df=18$ ) but no evidence for an increase in Group 2- ( $p=.124$ ,  $t=-1.210$ ,  $df=13$ ). In Post Hoc analysis, Group 2 data were split into the three subgroups in which treatment occurred. After this procedure, two of the subgroups demonstrated a significant increase in the special person sub-scale, while one group showed no increase between any points of measurement. Ultimately, five of six subgroups experienced a significant post-treatment increase in the special person subscale.

Group 1 measurements taken two weeks post-treatment suggested a substantial decrease in the special person subscale. Paired samples t-tests provided evidence of a statistically significant decrease between T2 and T3 ( $p=.032$ ,  $t=1.979$ ,  $df=16$ ). Paired samples t-test also indicated no net increase in the special person subscale between T1 and T3 ( $p=.315$ ,  $t=-.491$ ,  $df=16$ ). This pattern of evidence and its corresponding confidence intervals suggest a sharp increase in the special person subscale during treatment followed by a swift return to baseline.

## Research Question 5

*What differences exist in participant levels of mattering based on assignment to experimental and control conditions?*

Repeated Measures Analysis of Variance supported significant differences in mattering between treatment and control groups ( $p=.009$ ,  $F=5.107$ ,  $df=1.971$ ). The effect size estimate (partial eta squared=.150) suggested a stronger-than-moderate relationship between the intervention and increased mattering. Comparisons of group means demonstrated patterns for each group as hypothesized (Table 4-4). Paired samples t-tests revealed significant differences between pre- and post-treatment measurements (Group 1- $p=.011$ ,  $t=-2.510$ ,  $df=18$ ; Group 2- $p=.014$ ,  $t=-2.474$ ,  $df=13$ ).

Group 1 measurements taken two weeks post-treatment suggested a significant decrease in mattering ( $p=.007$ ,  $t=2.799$ ,  $df=16$ ; 90%). This decrease represented an almost exact return to baseline. The T1 to T2 mean increase of 6.053 (90% CI=1.871-10.234) was followed by a corresponding T2 to T3 mean decrease of 6.059 (90% CI=-5.233-5.233).

Repeated Measures ANOVA supported differences in the treatment and control groups for one of the mattering subscales, importance ( $p=.059$ ,  $F=2.994$ ,  $df=1.979$ ), but not for the other subscale, reliance ( $p=.297$ ,  $F=1.167$ ,  $df=1.162$ ). The partial eta squared for the importance subscale was .100 which indicated a moderate treatment effect.

In further analysis of the importance subscale, Paired samples t-tests revealed significant differences between pre- and post-treatment measurements for Group 1 ( $p=.031$ ,  $t=-1.986$ ,  $df=18$ ), but no evidence for an increase in Group 2 ( $p=.146$ ,  $t=-1.087$ ,  $df=13$ ). In Post Hoc analysis, Group 2 data were split into the three subgroups in which treatment occurred. After this procedure, two of the subgroups demonstrated a significant increase in the importance sub-

scale, while one group showed no increase. Ultimately, five of six subgroups experienced a significant post-treatment increase in the importance subscale.

Group 1 measurements taken two weeks post-treatment suggested a substantial decrease in the importance subscale. Paired samples t-tests provided evidence of a statistically significant decrease between T2 and T3 ( $p=.037$ ,  $t=1.897$ ,  $df=14$ ). Further, Paired samples t-test also indicated no net increase in importance between T1 and T3 ( $p=.335$ ,  $t=-.436$ ,  $df=14$ ). This pattern of evidence and its corresponding confidence intervals suggest a sharp increase in the Importance subscale during treatment followed by a swift return to baseline.

### **Research Question 6**

*What differences exist in participant levels of identity based on assignment to experimental and control conditions?*

Repeated Measures Analysis of Variance supported significant differences in identity between treatment and control groups ( $p=.018$ ,  $F=4.505$ ,  $df=1.817$ ). The effect size estimate (partial eta squared=.139) indicated a stronger-than-moderate relationship between the intervention and improved identity. Comparisons of group means demonstrated patterns for each group as hypothesized (Table 4-4). Paired samples t-tests revealed significant differences between pre- and post-treatment measurements (Group 1- $p=.001$ ,  $t=-3.529$ ,  $df=18$ ; Group 2- $p=.009$ ,  $t=-2.678$ ,  $df=13$ ).

Group 1 measurements taken two weeks post-treatment suggested a slight decrease in identity. Paired samples t-tests provided significant evidence of a decrease in identity after the intervention ( $p=.063$ ,  $t=1.617$ ,  $df=15$ ). The decrease appeared relatively small. However, Paired samples t-tests supported a net increase in identity ( $p=.020$ ,  $t=-2.247$ ,  $df=15$ ) between T1 and T3.

## Participant Exit Interviews

Participant exit interviews were conducted during, immediately following, and up to 90 days after program delivery. Participants were asked the following open ended questions: “Did you learn anything from your *Project Challenge* experience? If so, what?” or “Did you get anything out of participating in *Project Challenge*? If so, what?” Interpretive data analysis strategies were used to analyze investigator notes and help identify several key themes related to participants’ *Project Challenge* experiences. These themes clearly supported the quantitative findings of Research Question 2. Two main themes were pervasive and unanimous – increased self-confidence and positive experiences with trust. Findings related to self-esteem, perceived social support, mattering, and identity also consistently supported the quantitative findings.

### Self-Confidence

Participants clearly, unanimously, and most frequently described increased self-confidence as the first of two important outcomes from their *Project Challenge* experience. Participants consistently reported this finding during the program, one month after the program, and three months after the program. Some examples of participant comments include:

“Life is full of challenges, and you have to overcome them someday or another. Now I feel more confident in my ability to overcome challenges because if I can do whitewater rafting and climb then I can do anything...ANYTHING!”

“*Project Challenge* changed me. I have more confidence now and know I can do more than before. “

“I have learned that I can overcome any obstacle, I just have to set my mind to it. If I really want to do something...I focus on how much I want to do it, work hard, and (know) I can overcome it. Don't put yourself down by saying, "oh, I can't, I can't", because you really can do it.”

Two sub-themes emerged as participants discussed *Project Challenge*'s influence on their self-confidence – underestimation and perseverance.

*Underestimation.* Participants described their *Project Challenge* experience as helping them better understand their personal strengths and better estimate what they are actually capable of achieving.

“I learned I can do things I think I can't do.”

“(I learned) there is a big difference between what I think I can do and what I can (actually) do.”

“*Project Challenge* showed me I am so much stronger than I think (I am). I can do a lot of stuff I didn't think I could do.” -

“Other girls should participate in *Project Challenge* because they will learn they can do things they never thought they could do.”

Participants described *Project Challenge* activities' high level of difficulty as an important element in learning to correctly estimate their abilities. The presence of obvious and indisputable difficulty, and genuine doubt about their abilities, helped participants gain better perspective about their capacities. When describing the final challenge, a 120 foot rappel off a 750 foot cliff, one participant said:

“...leaning back over a 750 foot cliff is scary. I really didn't think I could do it. (I was so scared) I cried, but knew I wanted to do it.. I told myself I could (do it) over and over again, even though I could feel tears. “I can't” kept trying to get in my head, but I thought about how I did everything (right) on the other rappels and I did it anyway. (At the bottom) I felt so great. I screamed, and cried, and was so happy. I did it!” -16 year old participant three months after the program

Participants described the dissonance created by achieving things they deeply believed they could not do as a critical aspect of the program. The dramatic difference between what they believed they were capable of doing and what they actually achieved served as powerful evidence demanding they re-evaluate and re-estimate their capacities.

*Perseverance.* *Project Challenge* participants described their budding self-confidence as fuel for perseverance. Perseverance helps people continue to try in the face of difficulty or to try

again after a failure. Participants insisted *Project Challenge* helped them learn to persevere, to work hard in the face of adversity, and to resist quitting too easily or too soon.

“I learned to never say never until you try and to always try your best.”

“I learned to never give up and to always try my best.”

“It’s okay if things are hard. I can do hard (things).”

“It’s okay to be scared. If it hurts, I can take it. If I cry, that’s okay. Just don’t give up. If you don’t give up you will do more (than you thought you could).”

A team member described observing participants develop self-confidence and perseverance in concert.

“On a girl’s first day, our 18 foot tower seems terrifying. It takes a lot of encouragement for many of them to even try. They are unsure about whether they can (climb the tower) and so they don’t want to risk even one failure. By the last challenge, girls are on an 80 foot cliff 700 feet above the valley below. It’s safe, but can be pretty scary. (When they take a fall) before you can even ask them if they want to keep trying, they grab the rock and start climbing again... sometimes through tears, but always determined. They know what they want and are going to make it happen.”– *Project Challenge* team member.

## **Trust**

Participants clearly, unanimously, and most frequently described positive experiences with trust as the second most important outcome of their *Project Challenge* experience. This finding was unanticipated and not evaluated quantitatively. Participants consistently cited trust as a central theme in their responses.

“You can’t do any of this without trusting people.”

“My favorite activity was whitewater rafting because I had never been on a boat on water before and working together as a team taught me how to trust people.”

“I learned it's best to work together to get things done, to trust others, and to get along with everyone. Before *Project Challenge*, I used to get frustrated and mad around a bunch of girls. Now, I'm okay around other girls. Everyone isn't out to get you. I can trust some people.”

“*Project Challenge* changed me because I used to judge people I didn't really know. I learned if I get to know people, I can build a relationship with them and we can learn to trust each other.”

“In *Project Challenge* I learned that I can trust other people.”

Participants emphasized how their developmental histories made it difficult to trust other people. *Project Challenge* asks participants literally to trust team members with their lives. Participants were aware that tying a knot wrong or forgetting a safety precaution could cost them their lives. They described the program’s philosophy of relationship building and progressively working from small to big challenges as key elements in bridging the gap from mistrust to trust.

Participants also described the personal qualities of *Project Challenge* team members as central to having positive experiences with Trust. Participants described team members’ genuine and authentic respect for, confidence in, and care for program participants as key elements in the positive trust experience.

“*Project Challenge* is special because the people support you and encourage you to never give up.”

“The adults in *Project Challenge* treated me the way I was supposed to be treated, the way I should be treated. They trusted me, and they had confidence in me that I could do anything.”

“*Project Challenge* is special because of the people who work there...Mr. Mike, Miss Melissa, Mr. Dustin, Miss Raket. They always treat you with respect... they definitely care about you.”

“I believed in them because they believed in me... (through tears)... I’ve never had anyone believe in me like that before.”

### **Self-Esteem**

Participants described increased self-esteem as an important outcome of *Project Challenge*. “You are worthwhile, valuable, and special – no matter what has happened in your past” is one of the core messages of the *Project Challenge* program. Participants reported feeling and appreciating the influence of this core message.

“I learned to value myself. There’s more to me than I thought there was.”

“*Project Challenge* makes girls feel good about themselves.”

“*Project Challenge* helped me not be as sad as I was. (*Project Challenge*) definitely improved my self esteem and my outlook on life.”

Participants described two important ideas related to *Project Challenge*'s influence on self-esteem. First, participants noted the importance of developing self-esteem in the context of achievement. Participants described placing more value on themselves as a result of discovering unrealized strength and capacity. In many ways, participants described self-esteem as a by-product of, and in the context of positive, goal-oriented achievement. Participants reported placing more value on themselves as they realized their own capacities.

Second, participants described developing self-esteem in the context of authentic, genuine, and caring relationships. Participants felt that being in a respectful and supportive environment where people “obviously care about you a lot” makes it easier to believe you are valuable, or “When people treat you like you are valuable, it’s easier to believe you are.” Many participants described team members caring enough not to give up on them as being critical to increases in self-esteem.

“I’ve never had anyone care about me enough to spend that much time encouraging me, working with me, not giving up on me. I’d say I want to quit, but (team members) would say (they) believed in me, that (they) knew I could do it. When someone refuses to give up on you because they believe in you... that means a lot.”

### **Perceived Social Support and Mattering**

Neither increases in perceived social support nor mattering were mentioned by participants as long-term outcomes of *Project Challenge*. However, participants did describe *Project Challenge* as an environment high in perceived social support and mattering, and they emphasized the importance of this context for developing self-confidence and self-esteem.

“At *Project Challenge*, you don't have to worry about someone not respecting you because everyone there respects each other.”

“My favorite *Project Challenge* activity was sitting around the campfire hanging out with the girls. I learned I'm not the only person who has problems because they do, too. It was good to be able talk about them and feel understood.”

“The most challenging activity for me was the rock climbing. It was hard because everyone wanted to give up but we also wanted to get it done. This one part was so hard, I cried. But everyone supported me and encouraged me to keep going until I made it to the top. When I finally got to the top, I stopped crying and SMILED!”

Participants described feeling safe, supported, understood, and genuinely cared for by staff.

Without this relationship and support-rich environment, most participants felt they would not have been as successful. Participants described this supportive environment as providing the security and strength necessary keep trying. One participant suggested, “Sometimes you need someone to believe in you before you can believe in yourself.” Other participants described the importance of knowing you would be respected even if you failed, knowing team members would be responsive to your requests for help, and that other participants would be “there for you.” A *Project Challenge* team member described it this way:

“We maintain amazingly high expectations. We expect students to do things they sincerely believe are impossible. We try to match our levels of support to our levels of expectation. If we are going to require a lot from you, we better be willing to give a lot to you. This means being there when students need us. Not “rescuing” or “saving” - just being there. Letting them know we are with them, we care, and that we believe in them.” – *Project Challenge* team member

## **Identity**

Participants described *Project Challenge* as an opportunity to learn new things about themselves, and to better develop their sense of who they are and what they really want. One of the program’s core strategies includes creating a therapeutic environment “in which girls can step away from the pressures of adolescence and just be themselves.”

“*Project Challenge* takes you out of the environment you're normally in. You're basically in the middle of no where and nothing can distract you. At *Project Challenge*, you get to be yourself. After the trip, you go back as yourself because you realize you don't have to change to fit in. You can be yourself and that's okay.”

Ninety days after the program, participants believed *Project Challenge's* emphasis on identity helped them make what they described as better choices that were more congruent with who they really wanted to be and what they felt was most important to them.

“Before I went to *Project Challenge*, if someone was talking about me I would have just fought them. But now, since I went to *Project Challenge*, I can ignore them and because I know who I am and it doesn't really matter what they say.”

“Before *Project Challenge*, I was hanging around the wrong crowd and getting in trouble. *Project Challenge* helped me change those things.”

“*Project Challenge* made me a better person. I never went to church before *Project Challenge* and since then I go to church every Wednesday and Sunday.”

The *Project Challenge* curriculum did not speak directly to fighting, changing peer groups, or attending religious services. However, participants describe the combination of time spent “unplugged” from their normal routine, participation in activities encouraging them to reconsider their possibilities, and time spent thinking, writing, and talking about topics such as “What makes you you?” and, “What do you want most in life?” as beneficial.

“At campfire (sessions) I realized I only have positive goals. I only want positive things and to be a good person. I wondered about how I got to (my alternative school). At *Project Challenge*, you think about what it means to be yourself. I got to be myself (on the trip), and I wanted to be like that all the time. Who I was at *Project Challenge* would never have to go to (my alternative school).”

### **Participant Satisfaction**

The program evaluation focused primarily on participant outcomes. However, participant satisfaction remains an important part of any evaluation. In this case, participants described *Project Challenge* as a meaningful and valuable experience. Participants stated they were glad they participated in the program and would highly recommend it to other girls. Participants often used effusive language to describe their *Project Challenge* experience. Describing it as “one of the most positive experiences of their lives.”

“Other girls should participate in *Project Challenge* because it's fun and it (gives you the opportunity to) do things you never thought you could do.”

“Other girls should participate in *Project Challenge* because they will learn they can overcome obstacles, to believe in themselves, and how to trust the right kind of people.”

“*Project Challenge* is a once in a lifetime experience.”

“Every girl should be in *Project Challenge*!”

### **Summary**

This chapter presented findings related to lifetime histories of developmental challenge in alternative school girls and the influence of *Project Challenge*. Findings suggested high levels of abuse, family fragmentation, and school failure in this sample of alternative school girls. Further, quantitative and qualitative findings converged and provided strong evidence for the positive influence of the *Project Challenge* program on each of its targeted psychosocial variables – self-confidence, self-esteem, perceived social support, mattering, and identity. Additionally, qualitative findings suggested at least one unintended positive outcome – positive experiences with trust.

This study included several strengths. First, the study’s experimental design provided the strongest possible evidence concerning the influence of the intervention on the variables in question. True experimental designs incorporate randomization and control groups, and control for the influence of more threats to validity than other research designs. Second, the cross-over element of this design required repeated measurements from participants. Using repeated measurement increases the total number of data points analyzed and, thereby, the power of the study. Third, the mixed methods design element strengthened the study as well. The incorporation of qualitative methods enhanced the quantitative portion of the study. Participant exit interviews confirmed and elaborated on the quantitative findings of the study. Combined

with the true experimental design, this triangulation of methods provided important evidence regarding the influence of the intervention on participants.

One limitation of the study concerned the potential for diffusion of treatments. In this study, there was no way to separate groups or prevent them from communicating with each other. In order to limit the effects of this threat, the group receiving the experimental condition did not have to attend school the day after the challenge trip. The group assigned to the control condition was administered the instrument battery on the day before they interacted with participants assigned to the experimental condition in school. Participants from both groups may have communicated outside of school, but this communication was probably limited. Further, this study investigated the effects of a program designed around highly visceral experiential activities such as rock climbing, rappelling, and whitewater rafting. Oral communication about these activities may have had an influence on control group responses. However, it is reasonable to assume that the intensity of these activities exerted a greater effect than would be possible by standard oral communication between participants. Perhaps most importantly, the influence of diffusion of treatments could only minimize the differences between treatment and control conditions.

Chapter 5 will summarize the activities associated with this study, discuss the theoretical implications of this study, and offer recommendations for future research and practice.

Table 4-1. Population demographics.

	N	Percent
Age		
13 years old	6	17.14
14 years old	10	25.57
15 years old	8	22.86
16 years old	4	11.43
17 years old	7	20.00
Ethnicity		
Black	17	48.57
Hispanic	3	8.57
White	15	42.86

Table 4-2. Descriptive statistics: History of developmental challenge.

	N	Percent
Abuse	33	94.29
Physical Abuse	25	71.43
Sexual Abuse	9	25.71
Received Treatment	4	11.43
Family Fragmentation	33	94.29
Parents Divorce	29	82.86
Parents Incarceration	17	48.57
Parents Substance Abuse	11	31.43
Currently Living with Mother	32	91.43
Currently Living with Father	10	28.57
School Failure	35	100
School Behavior Problems	35	100
Academic Failure	31	88.57

Table 4-3. Interaction between time and treatment.

	F	df time	df time x treatment	p-value	Partial Eta Squared	Observed Power
Self-confidence	6.171	1.706	1.864	.005	.310	.919
Agency Subscale	5.238	2.000	2.000	.008	.153	.889
Self-esteem	4.408	2.000	2.000	.016	.128	.834
Perceived Social Support	3.209	2.000	2.000	.048	.100	.713
Special Person Subscale	3.286	1.927	1.927	.046	.102	.712
Family Subscale	2.079	2.000	2.000	.134	.067	.542
Friend Subscale	1.458	1.812	1.812	.242	.048	.406
Mattering	5.107	1.971	1.971	.009	.150	.879
Importance Subscale	2.994	1.979	1.979	.059	.100	.681
Reliance Subscale	1.167	1.162	1.162	.297	.039	.296
Identity	4.505	1.817	1.817	.018	.139	.818

Table 4-4. Means by variable and time of measurement.

Targeted Psychosocial Variables	Group	Time 1		Time 2		Time 3	
		Mean	SD	Mean	SD	Mean	SD
Self-confidence	1	44.25	5.571	49.30	6.783	47.94	5.724
	2	43.44	5.573	43.75	6.028	49.00	6.164
Agency Subscale	1	11.70	2.430	13.55	2.523	12.89	2.220
	2	11.81	2.228	11.56	1.548	13.31	2.016
Self-esteem	1	28.21	4.984	32.00	4.410	31.22	3.490
	2	29.71	6.101	29.47	4.888	32.71	5.210
Perceived Social Support	1	67.32	13.149	74.32	6.961	68.41	10.995
	2	69.82	8.748	68.00	12.196	71.86	14.914
Special Person Subscale	1	24.74	3.709	26.63	1.802	23.76	6.057
	2	26.06	2.926	24.18	4.953	25.79	4.902
Family Subscale	1	20.95	6.485	23.32	4.448	21.82	4.660
	2	21.06	4.879	20.88	5.988	22.21	7.329
Friend Subscale	1	21.63	5.698	24.37	3.670	22.82	5.065
	2	22.71	5.181	22.94	5.332	23.86	5.749
Mattering	1	56.63	9.001	62.68	7.484	56.29	8.880
	2	58.59	9.159	57.76	8.497	61.00	9.389
Importance Subscale	1	22.68	4.989	25.32	4.015	22.87	5.041
	2	24.76	3.615	23.76	4.549	24.07	5.240
Reliance Subscale	1	11.95	2.321	12.00	2.769	15.71	13.037
	2	11.47	2.348	11.29	2.085	11.79	2.190
Identity	1	29.58	5.440	34.00	4.497	32.97	4.735
	2	31.12	4.328	30.06	5.391	32.93	4.665

Table 4-5. Changes in means over time due to treatment.

Targeted Psychosocial Variables	Group	T-T	Mean Diff.	90% CI		t	df	One Tailed Prob.
				Upper	Lower			
Self-confidence	1	1-2	5.050	7.344	2.756	-3.806	19	.000
		2-3	-1.333	.194	-2.861	1.518	17	.073
		1-3	3.833	6.286	1.380	-2.718	17	.007
	2	1-2	.313	2.085	-1.460	-.309	15	.356
		2-3	4.923	7.034	2.812	-4.156	12	.000
		1-3	1.850	2.816	.884	-3.312	19	.002
Agency Subscale	1	1-2	1.850	2.816	.884	-3.312	19	.002
		2-3	-.667	-.038	-1.296	1.844	17	.041
		1-3	1.167	2.133	.200	-2.099	17	.025
	2	1-2	-.250	.438	-.938	.637	15	.267
		2-3	1.769	2.859	.680	-2.894	12	.007
		1-3	1.167	2.133	.200	-2.099	17	.025
Self-esteem	1	1-2	3.789	5.736	1.842	-3.375	18	.001
		2-3	-.667	.726	-2.059	.833	17	.208
		1-3	3.167	5.191	1.142	-2.721	17	.007
	2	1-2	-.235	1.157	-1.628	.295	16	.386
		2-3	3.357	5.582	1.138	-2.672	13	.009
		1-3	3.167	5.191	1.142	-2.721	17	.007
Perceived Social Support	1	1-2	7.00	12.185	1.815	-2.341	18	.015
		2-3	-6.235	-1.524	-10.95	2.310	16	.017
		1-3	1.529	8.855	-5.796	-.365	16	.360
	2	1-2	-1.824	2.095	-5.742	.812	16	.214
		2-3	4.071	11.659	-3.516	-.950	13	.179
		1-3	1.529	8.855	-5.796	-.365	16	.360
Special Person Subscale	1	1-2	1.895	3.383	.407	-2.208	18	.020
		2-3	-2.941	-.346	-5.537	1.979	16	.032
		1-3	-.882	2.258	-4.022	.491	16	.315
	2	1-2	-1.882	.052	-3.816	1.699	16	.054
		2-3	1.786	4.399	-.828	-1.210	13	.124
		1-3	-.882	2.258	-4.022	.491	16	.315
Family Subscale	1	1-2	2.368	4.572	.165	-1.864	18	.037
		2-3	-1.765	-.170	-3.360	1.931	16	.035
		1-3	.706	3.151	-1.739	-.504	16	.360
	2	1-2	-.176	1.742	-2.095	.161	16	.437
		2-3	1.714	4.495	-1.067	-1.092	13	.147
		1-3	.706	3.151	-1.739	-.504	16	.360
Friend Subscale	1	1-2	2.737	4.911	.563	-2.183	18	.021
		2-3	-1.529	.105	-3.163	1.634	16	.061
		1-3	1.706	5.066	-1.654	-.886	16	.194
	2	1-2	.235	2.518	-2.048	-.180	16	.427
		2-3	.571	3.609	-2.466	-.333	13	.372
		1-3	1.706	5.066	-1.654	-.886	16	.194
Mattering	1	1-2	6.053	10.234	1.871	-2.510	18	.011
		2-3	-6.059	-2.279	-9.839	2.799	16	.006
		1-3	.000	5.233	-5.233	.000	16	.500

Importance Subscale	2	1-2	-.824	1.610	-3.257	.591	16	.281	
		2-3	4.071	6.986	1.157	-2.474	13	.014	
	1	1-2	2.632	4.929	.334	-1.986	18	.031	
		2-3	-2.200	-.158	-4.242	1.897	14	.037	
	Reliance Subscale	2	1-3	.733	3.698	-2.231	-.436	14	.335
			1-2	-1.000	.605	-2.605	1.087	16	.146
1		2-3	1.143	2.979	-.694	-1.102	13	.145	
		1-2	.053	1.031	-.926	-.093	18	.463	
2		2-3	3.765	8.876	-1.346	-1.286	16	.108	
		1-3	3.647	8.746	-1.452	-1.249	16	.115	
Identity	2	1-2	-.176	.725	-1.078	.342	16	.363	
		2-3	.286	1.015	-.443	-6.94	13	.250	
	1	1-2	4.421	6.593	2.249	-3.529	18	.001	
		2-3	-1.406	.119	-2.931	1.617	15	.063	
	2	1-3	3.281	5.842	.721	-2.247	15	.020	
		1-2	-1.059	1.018	-3.136	.890	16	.193	
		2-3	2.643	4.390	.895	-2.678	13	.009	

## CHAPTER 5 SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Girls at-risk for delinquency represent a highly vulnerable population (Bilchik, 2001; Acoca, 1999; Manigha, 1998). Too often, these girls share painful and traumatic life experiences that precede their delinquency. These life events include abuse, family fragmentation, school failure, untreated health problems, and convergence of risk in early adolescence (Acoca, 1999). Girls exposed to these traumatic and stressful developmental histories are frequently overwhelmed by these occurrences, and they experience developmental disruptions and delays in their psychosocial growth (Acoca, 1999; Manigha, 1998). These disruptions may include lower levels of self-confidence and self-esteem, diffuse intrapersonal and interpersonal identities, and feelings of isolation manifested in low levels of perceived social support and mattering.

Many negative consequences are associated with these developmental disruptions (Crosby et al., 2004; Aalsma & Lapsey, 2001; Bardone et al., 1998), but none more damaging than their role in mediating coping responses. Learning maladaptive coping responses represents a particularly influential negative consequence of girls' developmental disruptions (Li, DiGuiseppe, & Froh, 2006; Lobmann, Greve, Wetzels, & Bosold, 2001). Maladaptive coping responses are strongly associated with girls' delinquency, substance abuse, risky sex, and continued victimization throughout the lifespan (Aalsma & Lapsey, 2001). Although the professional literature related to girls' development and juvenile justice has called for the development and study of prevention and early intervention programs designed to meet the needs of at-risk girls (Bilchik, 1999; Bilchik, 1998; ABA, n.d.), almost no such efforts have been documented in the professional literature.

## Summary

This study examined the influence of a gender-specific prevention program created to meet the needs of adolescent girls at-risk for delinquency. *Project Challenge* was designed specifically to meet the needs of girls with developmental histories predisposing them to delinquency, risky health behavior, and poor life outcomes by promoting healthy psychosocial development and the intrapersonal and interpersonal factors associated with girls' resilience.

The program was developed based on the *Model of Girls' Resilience*. This model represents a synthesis of the professional literature related to stress, resilience, and girls' development. It identifies crucial developmental constructs and processes associated with improving girls' abilities to cope effectively with the painful and traumatic experiences that precede delinquency and risky healthy behavior.

This study examined the impact of *Project Challenge* on six variables identified in *The Model of Girls' Resilience* and addressed the following research questions:

1. What levels of developmental challenge exist among adolescent girls attending alternative schools?
2. What differences exist in participant levels of self-confidence based on assignment to experimental and control conditions?
3. What differences exist in participant levels of self-esteem based on assignment to experimental and control conditions?
4. What differences exist in participant levels of perceived social support based on assignment to experimental and control conditions?
5. What differences exist in participant levels of mattering based on assignment to experimental and control conditions?

6. What differences exist in participant levels of identity based on assignment to experimental and control conditions?

The study utilized a component mixed methods QUAN-qual design. The dominant method of inquiry was quantitative, and an experimental cross-over design was used for the main portion of the study. Participants were randomly assigned to two groups. Each group received the treatment and control conditions at different times. Comparisons were made between groups based on the timing of their assignment to each condition. Repeated Measures ANOVA was used to examine the impact of the intervention on participants assigned to the treatment condition as compared to participants assigned to the control condition. This design also included collecting data from half of the participants two weeks after completing the program. This element presented opportunities to evaluate the impact of the intervention over time. One-tailed Dependent Samples t-tests were used to determine differences from baseline over time.

Per the QUAN-qual design, the qualitative portion of the study was informal in nature and used to confirm and elaborate the quantitative findings of the study. Data were collected using informal participant exit interviews. These interviews were conducted as an integrated part of the *Project Challenge* curriculum and program.

Results indicated the developmental histories of girls in this study matched the literature's description of girls likely to choose delinquent behaviors. Evidence supporting this match was persuasive. One hundred percent of participants described a history including 2 of 3 developmental challenges investigated in this study; 94.29% of participants reported a history including 3 of 3 developmental challenges. The rates at which participants experienced each individual challenge were high as well: school behavior problems, 100%; abuse and family fragmentation, 94%; and academic failure 89%. *Project Challenge* was designed to help girls

regain some of the developmental losses associated with experiencing these challenges and contribute to preventing future delinquency.

Quantitative data analysis provided strong evidence *Project Challenge* accomplished all of its program objectives. Congruent with the program's primary objective, assignment to the treatment condition corresponded with an anticipated increase in self-confidence. According to the data, *Project Challenge's* influence on self-confidence was strong and remained strong two weeks after the program. Congruent with the program's secondary objectives, assignment to the treatment group corresponded with anticipated increases in both self-esteem and identity. Data suggested the program's influence on self-esteem and identity was moderate. This finding is particularly important because both self-esteem and identity are stable constructs that resist intervention (LeCroy, 2004). Evidence also suggested self-esteem resisted decay two weeks after the program, and that changes in identity remained significant during that time. Data supported *Project Challenge's* influence on variables related to each of its three main desired outcomes: increased participant levels of self-confidence, self-esteem, and sense of identity.

According to the *Model of Girls' Resilience*, *Project Challenge* needed to influence perceived social support and mattering if participants were to benefit from activities related to self-confidence, self-esteem, and identity. The model suggested increases in girls' interpersonal development most likely occur in a caring, supportive, responsive, and developmentally rich interpersonal environment. Quantitative data analysis provided strong evidence *Project Challenge* accomplished its objectives related to perceived social support and mattering. Data suggested a moderate and stronger-than-moderate influence on both perceived social support and mattering, followed by a return to baseline two weeks after the program.

Participant exit interviews corroborated the study's quantitative findings. When asked whether and how *Project Challenge* affected them, program participants consistently and passionately offered responses congruent with the study's quantitative findings. Participants were aware of the ways *Project Challenge* had impacted them. They described the program as a valuable experience, an experience they would highly recommend to other girls in general, and especially to girls who faced or were facing difficulty in their lives.

Participants also described *Project Challenge* as a positive experience with building trust. This finding represented an unintended positive result associated with the program. Although clearly related to the caring and responsive atmosphere presented as a central part of the program, participants described their positive experiences with trust in manner that stood on its own.

### **Conclusions**

Psychosocial developmental theory focuses on how people change over time (Steinberg, 2005; Miller, 1993) and, at its core, "development" refers to a special type of learning. This type of learning has a limited relationship with traditional classroom curricula. Instead, it represents an education built on experience, observation, and relationships or, in essence, an education based on living life. This education promotes learning in its most fundamental form, and this type of learning has the potential to change behavior in broad and far-reaching ways. Developmental learning contributes directly to changes in people in terms of their cognitive abilities, moral decision-making, identity, social skills, personality, and temperament (Steinberg, 2005; Miller, 1993).

*Project Challenge* effectively promotes psychosocial development and resilience in adolescent girls at-risk for delinquency. The program operates as designed. It creates an environment high in perceived social support and mattering; in that environment, program

activities and experiences contribute to increased self-confidence, self-esteem, and identity.

Together, these increases contribute to improvements in girls' overall resilience.

Increasing girls' resilience empowers them to face adversity. This factor represents the most important outcome of the current study – *Project Challenge* empowers girls who have been beaten down by life. *Project Challenge* empowers by:

1. Helping girls recover lost developmental progress caused by disruptions related to abuse, family fragmentation, school failure, untreated health problems, and early convergence of risk.
2. Increasing girls' self-confidence, self-esteem, and sense of identity, thereby restoring their feelings of personal power and strength, faith in their ability to cope with difficulty and challenge, and hope for the future.

Self-confidence, self-efficacy, and agency represent reliable predictors of human behavior (DeSocio, Kitzman, & Cole, 2003; Wenzel et al., 2002) and resilient outcomes (Christiansen & Evans, 2005; Grossman et al., 1992). Before attempting to change a behavior, individuals must believe they are capable of performing new behaviors successfully. Given the wide ranging impact of self-confidence on behavior (Wenzel et al., 2002; Cheng & Fernham, 2002), the tendency of victimized individuals to experience lower levels of self-confidence (Compas, Orosan, & Grant, 1993), and the prevalence of abuse and victimization among at-risk girls, the researcher chose to focus on increasing participant self-confidence as the primary objective of the intervention.

### **Self-Confidence**

*Project Challenge* significantly enhanced participant self-confidence both immediately after program completion ( $p=.005$ ) and two weeks later ( $p=.000$ ). The effect size estimate (partial eta squared=.310) suggested participating in the program had a very strong effect on girls' self-confidence.

Richardson's (1990) model, which describes the process of developing resilience, suggests increasing resilience requires successfully negotiating crisis. Josselson's (1987) work also suggests that crisis often precedes developmental growth in women and girls.

*Project Challenge* intentionally simulated crisis in a physically safe and emotionally supportive environment. The program included outdoor activities girls would want to complete and be able to complete, and activities girls would find sufficiently mentally, physically, and emotionally challenging to increase stress and create perceptions of high difficulty. Program curriculum and team-member interactions with the girls were designed to help resolve the dissonance (Aronson, 1992) between low personal expectations and actual high performance in a manner conducive to promoting positive psychosocial development and resilience.

No published studies have investigated the effectiveness of delinquency prevention programs designed specifically for at-risk girls. Thus, no frame of reference exists regarding the relative ease or difficulty required to increase the resilience or self-confidence of at-risk girls. In the few programs that targeted increasing the self-confidence of girls in the general population, evidence supporting increased self-confidence has been insufficient or minimal, and in no case was an effect size reported. During this study, *Project Challenge* demonstrated the ability to help at-risk girls re-evaluate their capabilities, increase their appraisal of their abilities, and describe themselves as self-confident.

### **Self-Esteem**

Evidence ( $p=.016$ ) suggests participating in *Project Challenge* contributed to a moderate increase in the self-esteem of at-risk girls (partial eta squared=.128). Further, evidence also suggests these changes remained two weeks after program completion ( $p=.007$ ).

Self-esteem, one of the most widely reported factors associated with resilience (Grossman et al., 1992; Chapman & Mullis, 1999), has been used to predict a variety of health behaviors and

outcomes (Chapman & Mullis, 1999). Low levels of self-esteem in girls has been associated with depression, suicide, substance abuse, school failure, disorder eating, and delinquency (Chapman & Mullis, 1999; Grossman et al., 1992).

No programs designed specifically to promote self-esteem in girls at-risk for delinquency were found in the literature. Likewise, relatively few gender-specific programs designed to promote self-esteem in the general population of girls have been reported. Among the published gender-specific studies, only one reported a significant increase in self-esteem and only when participation occurred long-term. Self-esteem in girls generally resists intervention (Steese et al., 2006; LeCroy, 2004). Steese et al. (2006) suggested that self-esteem may be a stable construct that resists intervention, or that the Rosenberg Self-esteem Scale may not be sufficiently sensitive to detect short-term changes in Self-esteem.

The *Project Challenge* approach assumes increased self-esteem will be developed in the context of achievement. The same experiences that increase self-confidence also contribute to increases in self-esteem. As we become increasingly aware of our capacities, we learn to value ourselves more. Burwell and Shirk (2006) supported this contention by concluding that self-worth contingencies – “the extent to which adolescents link self-worth to external feedback and success” – contribute not only to increased self-esteem, but to decreased depression, a widely established correlate of self-esteem.

*Project Challenge* and *The Model of Girls' Resilience* both assume girls' intrapersonal development occurs in the context of rich interpersonal relationships. Team members attempt to build authentic, positive, and supportive relationships as a context for increasing girls' self-esteem. Results of this study confirm that *Project Challenge* creates the emotional environment it intends to create. Both mattering and perceived social support increased while participants

attended *Project Challenge*. The one gender-specific program that reported increased self-esteem did so following a long-term intervention measured in months or years. *Project Challenge* required two weeks to complete and reported stronger evidence concerning increased self-esteem.

## **Identity**

Results indicated a moderate increase in identity ( $p=.018$ ; partial eta squared=.139) and a net increase in identity two weeks after treatment ( $p=.001$ ). In participant interviews, girls reported feeling free to “be themselves” while attending *Project Challenge*, and they valued taking “who they really are” back into their normal lives.

Researchers widely report developing identity as one of the most important factors contributing to healthy decision-making and successful life outcomes among youth in adverse circumstances (Bernard, 1991). Adolescents with a clear sense of self make decisions congruent with protecting their futures and consonant with their internalized view of themselves (Steinberg, 2005). Researchers also suggest women and girls face unique challenges related to identity formation (Miller, 1986; Gilligan, 1993; Belenky et al., 1986). These challenges relate to girls discovering their own “voice” (Gilligan, 1993), maintaining authenticity (Pipher, 1994), and reconciling their independent and relational selves (Gilligan, 1993). Further, research suggests favorable health and life outcomes for girls and women who achieve a secure sense of self (Johnson et al., 1999).

The *Project Challenge* curriculum and philosophy view nature as a “therapeutic environment in which girls can step away from the pressures of adolescence and just be themselves. This slower less ‘plugged in’ environment gives girls time to think, reflect, and discover who they really are and what they really want.” The *Project Challenge* curriculum uses adventure activities followed by structured journal questions and group discussions to help girls

clarify their sense of self as an individual and in relation to others. The program supports development of intrapersonal and interpersonal identities related to self-confidence, self-esteem, perceived social support, and mattering. This approach includes helping girls see themselves as “the kind of person who...” believes in and values themselves, and as connected to people who believe in and value them as well.

### **Perceived Social Support and Mattering**

Results indicate *Project Challenge* had a moderate impact on perceived social support ( $p=.048$ , partial eta squared=.10) and a stronger than moderate impact on mattering ( $p=.009$ , partial eta squared=.15). These differences were pronounced during the *Project Challenge* program, followed by a return to baseline immediately after the program.

These trends suggest that participants were exceptionally responsive to treatment or that the *Project Challenge* intervention was exceptionally effective with this population. These findings are especially interesting considering the short-term nature of the program, only eight days over the course of 2 weeks. These results confirm findings from the literature. Previous studies suggested the importance of relationships in the lives of girls (Frydenberg & Lewis, 1993; Shulman, 1993) particularly with adults who interact in warm, caring, and authentic ways (Johnson et al., 1999).

The results of this study confirmed differences made by adding sources of caring and support. The program used three main strategies to increase these variables: 1) creating an emotional environment characterized by warmth, caring, and support; 2) sharing emotionally intense experiences and activities; and 3) involving existing sources of social support in certain aspects of the program.

Participant exit interviews suggested the first two strategies were implemented effectively. Participants indicated the program created an emotionally safe environment characterized by

respect, warmth, and responsiveness. Participants also described *Project Challenge* team members as genuinely caring and as believing in them. The nature of *Project Challenge* program activities also may have contributed to the increases as well. Participants described program activities as intense, challenging, and difficult. Completing the activities required participants to place a great deal of confidence in *Project Challenge* team members and required *Project Challenge* team members to earn that confidence. These positive interpersonal interactions, combined with the program's emotionally intense activities, may be particularly effective contributors to increases in perceived social support and mattering.

Perhaps most remarkably, *Project Challenge* effectively influenced perceived social support and mattering in an extremely short period of time. After the program, participants remained especially responsive to *Project Challenge* team members. Possibly the combination of warmth, caring, and high expectations, combined with the perceived intensity of the experience and pride of achievement, helped accelerate the development of helping and caring relationships.

*Project Challenge* was developed as a supplement to longer-term care provided by schools, foster care, social work, and other youth service agencies. Although *Project Challenge* increased perceived social support and mattering, those increases were not maintained two weeks after participation in the program. This finding indicates that the programs' third strategy of involving existing sources of support in certain aspects of the program was insufficient to maintain these increases. Pursuing means to extend these increases should become an important future goal of *Project Challenge*.

## **Trust**

Wenninger and Ehlers (1998) identified an impaired ability to trust as a dysfunctional belief associated with long-term symptoms of post-traumatic stress. Symptoms include

depression, substance abuse, low self-esteem, dissociation, feelings of guilt, interpersonal and relationship problems, and sexual problems.

*Project Challenge* did not originally identify trust as a target for intervention. Program participants included adolescent girls with histories of abuse and abandonment. Completing the program required participants to accept high levels of vulnerability. Team members understood this fact and designed the program to build participant trust before exposing participants to increasing levels of risk or vulnerability. The potential value of this process of team members earning and deserving increasing levels of participant trust was underestimated as a discreet outcome. Perhaps because of the high incidence of abuse and abandonment inflicted on these girls by men, participants frequently cited the value of a positive trusting experience with men.

## **Recommendations**

### **Future Research**

- Reproducibility represents one of the core tenets of experimental science. The results from an effective intervention should be reproducible by other researchers using the same protocols. The current study should be replicated to collect further evidence supporting or refuting the results of the original study. Future studies should be conducted by independent researchers, both impartial and objective.
- Generalizability represents one of the core goals of experimental science. To further establish external validity, the study should be replicated with a variety of times, places, and people. The current study was conducted using students from two different schools, during fall and spring, and with middle and high school students. All participants and program activities came from one city in the North Central Florida area. Therefore, replicating the study in a different geographic area will help establish generalizability.
- Due to the study's cross-over design, two weeks was the longest period of time any post-program comparisons could be made between the experimental and control conditions. Although the two-week time period provides some evidence about changes in the dependent variables post-program, these results represent fundamentally short-term changes. Future experimental studies should examine the longer term effects of *Project Challenge* on self-confidence, self-esteem, perceived social support, and mattering. Further, longer term studies should investigate the influence of program participation on the long-term and life outcomes predicted in *The Model of Girls' Resilience*.

- The *Project Challenge* program was based on *The Model of Girls' Resilience*. This model was developed specifically for the program and represents a synthesis of stress theory, resiliency theory, and theories of girls' development. This model incorporates the constructs and processes likely to exert the most significant influence on girls' health, delinquency, and life outcomes. Because the model was developed specifically for *Project Challenge*, a large scale test of *The Model of Girls' Resilience* has not been conducted. Although the variables examined in this study are strongly supported by the scientific literature related to stress, resiliency, and girls' development, a large-scale test of the model could increase its generalizability for use in other gender-specific prevention programs for both at-risk girls and girls in the general populations.
- Instrumentation represents one of the most difficult challenges in a behavioral study. Future studies involving self-confidence could benefit from improved instrumentation. Although the combined survey battery was sufficient for the purposes of this study, one survey that is reliable on its own would be beneficial. Future studies should focus on developing or identifying a single, reliable instrument that adequately assesses self-confidence.
- Trust represents an unanticipated finding described in the qualitative portion of the study but not examined quantitatively. In retrospect, it should not be surprising that a program of this nature helped girls with histories of abuse and victimization have a positive experience with trust. Future studies should include a quantitative examination of both the influence of *Project Challenge* on trust and the influence of improved trust on other health and life outcomes.
- One particularly difficult variable to control was the influence of the *Project Challenge* team members' themselves. *Project Challenge* team members were hired with specific qualities in mind including warmth, caring, confidence in girls', and the ability to develop effective relationships and role model effective behavior. Perceived social support and mattering seem particularly amenable to the confounding effects of team member personal qualities. Selecting team members possessing the personal qualities that allow them to naturally and successfully express the *Project Challenge* philosophy may constitute the most critical factor related to program success.

### ***Project Challenge***

- Results indicate *Project Challenge* achieves its intended objectives and short-term outcomes. As long as *Project Challenge* retains those objectives, program personnel should maintain program fidelity. Evidence suggests the program operates as intended and positively influences self-confidence, self-esteem, and identity.
- *Project Challenge* was designed to compliment the work of agencies providing long-term care. To this end, *Project Challenge* partners with local alternative schools, foster care, and social work agencies, and relies on them to provide additional support after the program. Historically, *Project Challenge* has attempted to involve partner agencies in two ways. First, by having a member of the sponsoring agency complete the program with participants, and second, by inviting all members from the sponsoring agency to attend a

Family and Friends Celebration. Unfortunately, partner agencies rarely support the program in these ways. During this study, no individual from a sponsoring agency attended the program, and very few attended the Family and Friends Celebration.

- Results indicate *Project Challenge* had a moderate impact on perceived social support and a stronger than moderate impact on mattering. These differences were pronounced during the *Project Challenge* program, and the return to baseline was immediate after the program ended. These results suggest participants responded positively to the extra support provided by the program and that extending this support would be beneficial. Therefore, finding ways to consistently involve and maintain the involvement of sponsoring agencies offers potential for increasing and extending the influence of the program on participant intrapersonal development – perceived social support and mattering.
- This study determined whether or not *Project Challenge* achieved its intended short-term outcomes. It did not address long-term impact associated with the program. According to the professional literature and *The Model of Girls' Resilience*, interventions influencing proximal psychosocial variables like self-confidence and self-esteem should also influence a variety of variables involving longer-term outcomes related to limiting risk, promoting health, improving quality of life, and enhancing life outcomes. Conducting a future study to examine the longer term outcomes of the program could provide an important step in understanding the full impact of *Project Challenge*.

### **Professional Practice**

- One of the fundamental propositions of health education and promotion includes developing programs with the specific target population in mind. The current study supports the value of purposely tailoring programs to specific target populations. From conception, *Project Challenge* was designed considering gender and developmental history. All program curriculum, activities, and philosophies were developed based on these factors. The consistently positive results associated with the study support this approach to program planning.
- Health and Wellness are often conceptualized in terms of multiple dimensions including the physical, mental, emotional, social, and spiritual aspects of health. *Project Challenge* was designed to promote the emotional well-being of program participants. Study results support the efficacy of using carefully conceived educational experiences to promote positive psychosocial development and emotional health. Although none of the findings associated with this study suggest educational programs supplant the need for other mental health services, they do confirm the valuable role education-based programs can play in promoting emotional health and well-being.
- Previous studies have been conducted using outdoor adventure programming to reduce delinquency in adolescent boys. These studies frequently yielded few significant findings. No studies were found using outdoor adventure programming to promote the well-being of at-risk adolescent girls. Study results suggest the *Project Challenge* experiences and outdoor adventure programming can promote the health and well-being of adolescent girls,

particularly their self-confidence. Results also suggest outdoor adventure programming may be more effective with at-risk girls than with boys.

- Both developmental theory and theories of women's development suggest certain levels of emotional arousal or stress can contribute to or detract from learning. *Project Challenge* intentionally leverages heightened levels of emotional arousal in its program design. The program creates manageable levels of stress in a highly controlled and supportive environment. *Project Challenge* uses these highly visceral experiences to facilitate psychosocial development in at-risk girls. Study results confirm the effectiveness of this approach.
- *Project Challenge* takes place on eight days over the course of a two week period. Structured "on-task" time consists of less than 20 hours total. Study results support the efficacy of this short-term program designed to enhance psychosocial development and emotional health. This short-term program appeared highly effective, perhaps because *Project Challenge* 1) intentionally uses high emotional arousal and intense program activities, 2) creates an emotionally supportive environment that facilitates rapid growth in girls, or 3) some combination of elements ingrained in the program design. Time restricted programs could consider *Project Challenge's* core design elements and incorporate them in their programming.

APPENDIX A  
INSTITUTIONAL REVIEW BOARD APPLICATION AND APPROVAL

**1. TITLE OF PROJECT:** The Influence of *Project Challenge* on Psychosocial Development, Resilience, and Perceived Stress Levels of Adolescent Girls At-Risk for Delinquency

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**4. DATES OF PROPOSED PROJECT:** August 1, 2006 – July 31, 2007

**5. SOURCE OF FUNDING FOR THE PROJECT:** *Project Challenge* Program Budget

**6. SCIENTIFIC PURPOSE OF THE INVESTIGATION:** At-risk girls experience a disproportionate number of intense and disruptive traumatic life events which can adversely affect healthy psychosocial development. Such disruptions contribute to higher levels of risk behavior, poor health, and diminished quality of life. Relatively few programs focus directly on enhancing the development of at-risk adolescent girls, and little research has evaluated the influence of such programs. This study will examine 1) the influence of *Project Challenge* - a gender-specific, developmentally-focused, outdoor program - on at-risk girls' psychosocial development, and 2) the relationships between risk factors for girls' delinquency, psychosocial development, and perceived stress.

This investigation promises particularly important research opportunities. Programs developed specifically for adolescent girls at-risk for delinquency are rare, and studies evaluating their effectiveness are even rarer. The professional literature clearly and consistently insists on the

need for the developing and evaluating programs designed to meet the specific needs of this underserved population and the potential of these programs to help reduce health disparities during both adolescence and adulthood.

#### **7. DESCRIBE THE RESEARCH METHODOLOGY IN NON-TECHNICAL**

**LANGUAGE (PILOT STUDY):** A draft version of the study protocol will be prepared that includes a consent script for prospective participants, collection of participant profile information, and completion of the Pearlin Mastery Scale, the Rosenberg Self-esteem Scale, the Hope Scale, the Identity Sub-scale of the Adolescent Personality Style Inventory, the Multidimensional Scale of Perceived Social Support, the Mattering Index, and the Perceived Stress Scale. First, a panel of 3 previous program participants will review the instrument battery for readability and clarity. Second, the consent script and full instrument battery will be administered to a group of 8-10 previous program participants to assess administrative procedures, instrument reliability, and time of completion. Based on results from pilot testing, adjustments will be made to the consent script, participant profile, and the other surveys.

#### **8. DESCRIBE THE RESEARCH METHODOLOGY IN NON-TECHNICAL**

**LANGUAGE (FINAL STUDY):** A final version of the study protocol will be prepared that includes distribution and collection of informed consent documentation, the development of a participant profile using existing program records, a pre-test administration, participation in a treatment or control group, two post-test administrations, a 45 day follow-up test administration, and distribution of incentives. For each test administration a protocol will be developed that includes a consent script for prospective participants and completion of the instrument battery. For each treatment group a protocol will be developed outlining student participation in an informal discussion group.

Signed informed consent forms will be collected by *Project Challenge* staff from young women who choose to participate in the study and whose parent/guardian(s) approve of their participation. Participants will be assigned to either a treatment or control group.

Using existing program records, the researcher or research assistant will develop a participant profile. This profile will include demographic information and historical information related to developmental challenges cited as common among delinquent girls and girls at-risk for delinquency. These challenges include a history of abuse, family fragmentation, academic failure, untreated health problems - especially those related to emotional health such as depression and suicidal ideation - , and the convergence of risk factors in early adolescence. The participant profile will be used for three primary purposes 1) to match participants as closely as possible for nonequivalent group comparisons, 2) to determine whether or not the program participants in the study share developmental histories comparable to those described in the literature, and 3) to examine the relationship between developmental history and program outcomes, ie. Which participants benefit the most from the program? According to previously collected *Project Challenge* statistics, the majority of their participants have histories of abuse and suicidal ideation – approximately 90% and 50% respectively. Typically these incidents have previously been reported and investigated. *Project Challenge* team members immediately report all undocumented allegations of abuse and refer all participants experiencing suicidal ideation to an onsite counselor. No participant names will be recorded on the participant profile. Each will

be marked with a confidential number. Only the researcher and research assistant will have access to these confidential numbers. The sheet recording number assignments will be kept by the researcher in a locked cabinet separate from the completed participant profiles, and destroyed at the end of the study.

Both groups will be tested four times using identical procedures – once every two weeks for one month and approximately 45 days after participation in the program. The researcher or research assistant will 1) read the consent script, and 2) administer the instrument battery. Participants will be allowed to complete the surveys with only the researcher and/or research assistant present, will be seated a reasonable distance from other participants, and will be provided a cover sheet to use at their discretion. No student names will be recorded on the instrument battery. Each will be marked with a confidential number. Only the researcher and research assistant will have access to these confidential numbers. The sheet recording number assignments will be kept by the researcher in a locked cabinet separate from the completed instrument batteries, and destroyed at the end of the study.

Treatment group participants will complete the standard *Project Challenge* program. This program will be delivered by *Project Challenge* staff according to their standard operating procedures. The program involves four sessions designed to teach camping, hiking, climbing, and rafting skills; one four day and three night outdoor trip in which participants camp, hike, and raft; and one “Family and Friends Celebration”. Participants are encouraged to set post trip personal goals, and program staff will be available to provide active support for up to 60 days following program completion.

Directly after the treatment group completes the program, both treatment and control groups will be tested using identical procedures. The researcher or research assistant will 1) read the consent script, and 2) administer the instrument battery. All procedures related to confidentiality will mirror those associated with the pre-test described above.

All control group participants will receive the full *Project Challenge* intervention immediately after the second test has been administered. Directly following the control group’s completion of program, both groups will be tested for a third time using procedures identical to those described above.

Approximately 45 days after the third test, both groups will be follow-up tested using identical procedures. All procedures will be the same as those used for the post-test described above.

Finally, treatment group participants will be invited to participate in a discussion about their experiences in *Project Challenge*. This discussion will be informal in nature. Participants will be asked questions regarding whether they found the *Project Challenge* program helpful and which program elements most contributed to or detracted from their experience. This discussion will be audio-taped. The tapes will be kept in a locked cabinet and destroyed immediately following transcription. No names will be used on the transcripts. No incentive will be offered for participation in this discussion group.

**9. POTENTIAL BENEFITS AND ANTICIPATED RISK:** The *Project Challenge* staff will ensure the adequacy of training, equipment, and adult supervision for the instructional sessions and field experience components of the program. The research methods will involve using paper-and-pencil surveys that pose no physical or economic harm to participants. Psychological harm will be no greater than those experienced in daily life. To protect participants from any unforeseen harm that might arise from taking the instrument batteries, contact information associated with various community resources will be provided.

Benefits include conducting research focused on a severely understudied and underserved population – delinquent adolescent girls and girls at-risk for delinquency. This study offers to provide valuable insight related to program development and effectiveness for these girls. These insights may then be used to help develop more effective programs designed to eliminate health and quality of life disparities in this priority population.

**10. DESCRIBE HOW PARTICIPANTS WILL BE RECRUITED, THE NUMBER AND AGE OF THE PARTICIPANTS, AND PROPOSED COMPENSATION, IF ANY (PILOT STUDY):** Pilot study participants will be recruited from young women who have previously completed the *Project Challenge* program. *Project Challenge* staff members will identify and request these young women's participation in the pilot study. The pilot study will consist of between 11-13 volunteers between the ages of 13-17. Participants who complete the protocol will receive a \$5 dollar gift certificate to Wal-Mart or Target as an incentive.

**11. DESCRIBE HOW PARTICIPANTS WILL BE RECRUITED, THE NUMBER AND AGE OF THE PARTICIPANTS, AND PROPOSED COMPENSATION, IF ANY (FINAL STUDY):** Final study participants will be recruited from young women who are referred to the *Project Challenge* program between August 1, 2006 and November 1, 2006. At the student's intake meeting, *Project Challenge* staff members will request these young women's participation in the pilot study and present her and her parent or guardian with the informed consent form. Final study participants will consist of young women referred to the program who agree and whose parent/guardian agrees to their participation. The final study will consist of between 50-80 volunteers between the ages of 13-17. All participants who complete the pre-test, post-test, or follow-up test will receive a \$5 dollar gift certificate to Wal-Mart or Target as an incentive for each test they complete.

**12. DESCRIBE THE INFORMED CONSENT PROCESS. INCLUDE A COPY OF THE INFORMED CONSENT DOCUMENT:** Before participating in either the pilot or final studies, all potential participants and their parents or guardians will receive a description of the study procedures and information regarding their rights as a participant. Participants' parents or guardians will be asked to sign their informed consent form indicating they understand the nature of the questions asked, their child's willing participation, and the parent/guardian's consent to their child's participation. Further, at each administration of the protocol, the researcher or research assistant will read a consent script explaining the study to participants including their rights and the guarantee of confidentiality in the study. Participants will be reminded that their participation is voluntary, that they can choose not to answer any questions they do not wish to answer, and that they can withdraw from the study at any time. Informed consent forms will be collected separately from the surveys so participants may not be identified with their responses.

(Please see attached copies of the consent form and other project materials.)

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Principal Investigator's Signature

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Supervisor's Signature

I approve this protocol for submission to the UFIRB:

---

Department Chair/Center Director, Date

APPENDIX B  
PARENT/GUARDIAN INFORMED CONSENT

**The Influence of *Project Challenge* on the Psychosocial Development and Resilience of Adolescent Girls At-Risk for Delinquency**

Dear Parent or Guardian,

My name is Michael Mann and I am a doctoral candidate in the Department of Health Education and Behavior, College of Health and Human Performance, at the University of Florida. The name of my research project is *The Influence of Project Challenge on Psychosocial Development, Resilience, and Perceived Stress Levels of Adolescent Girls At-Risk for Delinquency*.

The purpose of this study is to examine the influence of the *Project Challenge* program on program participants. The goals of *Project Challenge* include improving girls' self-confidence, self-esteem, hopefulness, sense of identity, and commitment to positive life goals. *Project Challenge* team members believe changes in these areas contribute to improvements in girls' behavior at home, school performance, and decisions to avoid illegal activity. The results of this study will help the *Project Challenge* team members evaluate the effectiveness of their program and help other youth professionals design effective programs for adolescent girls.

This study will use pencil and paper surveys to measure the effects of the *Project Challenge* program on participants. These surveys include items related to self-confidence, self-esteem, hope, identity, social support, and stress. Study participants will be asked to complete these surveys four times – once every two weeks for one month and approximately 45 days after participation in the program. Each group of surveys will take about 20 minutes to complete and all surveys will be completed within 90 days. Participants will receive a \$5 dollar gift certificate to Wal-Mart or Target for each survey they complete.

At the end of the study, your child may be invited to participate in an informal group discussion. During this discussion, she will have the opportunity to share whether or not she found the *Project Challenge* program helpful and describe which program elements most contributed to or detracted from her experience. With your permission, this discussion will be audio taped. Only the researcher and research assistant will have access to these audio tapes. The tapes will be kept in a locked cabinet and destroyed immediately following transcription. No names will be used on transcripts of the discussion. No incentive will be offered for participation in this discussion group.

Your child must be between the ages of 13-17 to participate in the study. Their participation will be completely voluntary. They may decline to answer any question they do not want to answer. They can withdraw from the study at any time without negative consequence - any decision to withdraw from the study will not affect their participation in the *Project Challenge* program. Their responses and identity will be kept confidential to the extent provided by law (for example, intentions to commit suicide or reports of abuse must be referred to the proper authorities). Their name will never appear on any survey they complete. During this study, study researchers may access *Project Challenge* student records. Any information obtained through student records will

also be kept confidential according to the standards described above. The information gathered from this study will be used for my dissertation research. Depending on the results of this study, other publications may be submitted from the information provided. Your child's name will never be used in any document or reports associated with this study. Group study results will be available upon request in August 2007.

Allowing your child to participate in this study by taking surveys and participating in discussion groups exposes them to no more risk than your child would encounter in their daily lives. The Project Challenge staff will ensure the adequacy of training, equipment, and adult supervision for the instructional sessions and field experience components of the program.

If you have questions about the study, contact Michael Mann, Ph.D. candidate, Department of Health Education and Behavior, University of Florida, 352-392-0583 (ext. 1409), or my supervisor Dr. R. Morgan Pigg, Jr., Professor, Department of Health Education and Behavior, 352-392-0583 (ext. 1285).

For more information about your child's rights as a research participant, contact the UFIRB Office, Box 112250, University of Florida, Gainesville FL 32611-2250; ph 352-392-0433.

Thank you for your consideration,  
Michael J. Mann, Doctoral Candidate

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I have read the procedure described above. I voluntarily give my consent for my child, \_\_\_\_\_, to participate in this study evaluating the *Project Challenge* program. I have received a copy of this study description.

\_\_\_\_\_  
Parent/Guardian                      Date

\_\_\_\_\_  
Principal Investigator              Date

APPENDIX C  
PARTICIPANT ASSENT SCRIPTS

**A. For surveys**

My name is Michael Mann and I am a doctoral candidate at the University of Florida. Today you will be asked to participate in a study to about the influence of the *Project Challenge* program on program participants. If you choose to participate, you will be asked to complete pencil and paper surveys that measure the effects of the *Project Challenge* program. These surveys include items related to self-confidence, self-esteem, hope, identity, social support, and stress. You will be asked to complete these surveys four times - ,once every two weeks for one month and approximately 45 days after participation in the program. Each group of surveys will take about 20 minutes to complete and all surveys will be completed within 90 days. Participants will receive a \$5 dollar gift certificate to Wal-Mart or Target for each survey you complete.

To participate, you must be between the ages of 13-17. Participation is completely voluntary and you may decline to answer any question you do not want to answer. You also can withdraw from the study at any time without negative consequence - any decision to withdraw from the study will not affect your participation in the Project Challenge program. Your responses and your identity will be kept confidential to the extent provided by law. Your name will never appear on the any survey you complete. The information gathered from this study will be used for my dissertation research. Depending on the results of this study, other publications may be submitted from the information provided. Your name will never be used in any document or reports associated with this study. Participation in this study exposes you to no more risk than you would encounter in your daily life. Are you willing to participate? Yes/no.

**B. For Informal Group Discussion**

My name is Michael Mann and I am a doctoral candidate at the University of Florida. Today you will be asked to participate in a study to about the influence of the *Project Challenge* program on program participants. If you choose to participate, you will be asked to take part in an informal group discussion about the *Project Challenge* program. During this discussion, you will have the opportunity to share whether or not you found the *Project Challenge* program helpful and describe which program elements most contributed to or detracted from your experience. With your permission, this discussion will be audio taped. Only the researcher and research assistant will have access to these audio tapes. The tapes will be kept in a locked cabinet and destroyed immediately following transcription. No names will be used on transcripts of the discussion. No incentive will be offered for participation in this discussion group.

To participate, you must be between the ages of 13-17. Participation is completely voluntary and you may decline to answer any question you do not want to answer. You also can withdraw from the study at any time without negative consequence. Your responses and your identity will be kept confidential to the extent provided by law. The information gathered from this study will be used for my dissertation research. Depending on the results of this study, other publications may be submitted from the information provided. Your name will never be used in any document or reports associated with this study. Participation in this study exposes you to no known risks or immediate benefits. Are you willing to participate? Yes/no.

APPENDIX D  
PEARLIN MASTERY SCALE

How strongly do you agree or disagree with these statements about yourself?

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree

- |                                                                                |   |   |   |   |
|--------------------------------------------------------------------------------|---|---|---|---|
| 1. There is really no way I can solve some of the problems I have.             | 1 | 2 | 3 | 4 |
| 2. Sometimes I feel that I'm being pushed around in life.                      | 1 | 2 | 3 | 4 |
| 3. I have little control over the things that happen to me.                    | 1 | 2 | 3 | 4 |
| 4. I can do just about anything I really set my mind to.                       | 1 | 2 | 3 | 4 |
| 5. I often feel helpless in dealing with the problems of life.                 | 1 | 2 | 3 | 4 |
| 6. What happens to me in the future mostly depends on me.                      | 1 | 2 | 3 | 4 |
| 7. There is little I can do to change many of the important things in my life. | 1 | 2 | 3 | 4 |

(Pearlin, Menaghan, Lieberman, & Mullan, 1981)

APPENDIX E  
THE HOPE SCALE

Directions: Read each item carefully. Using the scale shown below, please select the number that best describes YOU and circle it.

1 = Definitely False   2 = Mostly False   3 = Mostly True   4 = Definitely True

1. I can think of many ways to get out of a jam. (Pathways)	1	2	3	4
2. I energetically pursue my goals. (Agency)	1	2	3	4
3. I feel tired most of the time. (Filler)	1	2	3	4
4. There are lots of ways around any problem. (Pathways)	1	2	3	4
5. I am easily downed in an argument. (Filler)	1	2	3	4
6. I can think of many ways to get the things in life that are most important to me. (Pathways)	1	2	3	4
7. I worry about my health. (Filler)	1	2	3	4
8. Even when others get discouraged, I know I can find a way to solve the problem. (Pathways)	1	2	3	4
9. My past experiences have prepared me well for my future. (Agency)	1	2	3	4
10. I've been pretty successful in life. (Agency)	1	2	3	4
11. I usually find myself worrying about something. (Filler)	1	2	3	4
12. I meet the goals that I set for myself. (Agency)	1	2	3	4

(Synder, et al., 1991)

APPENDIX F  
ROSENBERG SELF-ESTEEM SCALE

Instructions: Below is a list of statements dealing with your general feelings about yourself. Using the scale shown below, please select the number that best describes YOU and circle it.

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree

- |                                                                               |   |   |   |   |
|-------------------------------------------------------------------------------|---|---|---|---|
| 1. On the whole, I am satisfied with myself.                                  | 1 | 2 | 3 | 4 |
| 2.*At times, I think I am no good at all.                                     | 1 | 2 | 3 | 4 |
| 3. I feel that I have a number of good qualities.                             | 1 | 2 | 3 | 4 |
| 4. I am able to do things as well as most other people.                       | 1 | 2 | 3 | 4 |
| 5.*I feel I do not have much to be proud of.                                  | 1 | 2 | 3 | 4 |
| 6.*I certainly feel useless at times.                                         | 1 | 2 | 3 | 4 |
| 7. I feel that I'm a person of worth, at least on an equal plane with others. | 1 | 2 | 3 | 4 |
| 8.*I wish I could have more respect for myself.                               | 1 | 2 | 3 | 4 |
| 9.*All in all, I am inclined to feel that I am a failure.                     | 1 | 2 | 3 | 4 |
| 10. I take a positive attitude toward myself.                                 | 1 | 2 | 3 | 4 |

(Rosenberg, 1965)

APPENDIX G  
MULTIDIMENSIONAL SCALE OF PERCEIVED SOCIAL SUPPORT

Instructions: We are interested in how you feel about the following statements. Read each statement carefully. Indicate how you feel about each statement.

Circle the "1" if you Very Strongly Disagree  
 Circle the "2" if you Strongly Disagree  
 Circle the "3" if you Mildly Disagree  
 Circle the "4" if you are Neutral  
 Circle the "5" if you Mildly Agree  
 Circle the "6" if you Strongly Agree  
 Circle the "7" if you Very Strongly Agree

- |                                                                         |   |   |   |   |   |   |   |
|-------------------------------------------------------------------------|---|---|---|---|---|---|---|
| 1. There is a special person who is around when I am in need.           | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2. There is a special person with whom I can share my joys and sorrows. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 3. My family really tries to help me.                                   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 4. I get the emotional help and support I need from my family.          | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 5. I have a special person who is a real source of comfort to me.       | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 6. My friends really try to help me.                                    | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 7. I can count on my friends when things go wrong.                      | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8. I can talk about my problems with my family.                         | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 9. I have friends with whom I can share my joys and sorrows.            | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 10. There is a special person in my life who cares about my feelings.   | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 11. My family is willing to help me make decisions.                     | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 12. I can talk about my problems with my friends.                       | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

(Zimlet, Dahlem, Zimlet, & Farley, 1988)

APPENDIX H  
INTERPERSONAL MATTERING

1 = Strongly Disagree 2 = Disagree 3 = No opinion 4 = Agree 5 = Strongly Agree

1. Most people do not seem to notice when I come or when I go.	1	2	3	4
2. In a social gathering, no one recognizes me.	1	2	3	4
3. People are usually aware of my presence.	1	2	3	4
4. For whatever reason, it is hard for me to get other people's attention.	1	2	3	4
5. Whatever else may happen, people do not ignore me.	1	2	3	4
6. For better or worse, people generally know when I am around.	1	2	3	4
7. People do not care what happens to me.	1	2	3	4
8. My successes are a source of pride to people in my life.	1	2	3	4
9. I have noticed that people will sometimes inconvenience themselves to help me.	1	2	3	4
10. When I have a problem, people usually don't want to hear about it.	1	2	3	4
11. There is no one who really takes pride in my accomplishments.	1	2	3	4
12. If the truth be known, no one really needs me.	1	2	3	4
13. Quite a few people look to me for advice on issues of importance.	1	2	3	4
14. When people need help, they come to me.	1	2	3	4
15. People count on me to be there in times of need.	1	2	3	4

(Elliot, et al., 2004)

APPENDIX I  
APSI SENSE OF IDENTITY ITEMS

1 = Strongly Disagree 2 = Disagree 3 = No opinion 4 = Agree 5 = Strongly Agree

1. I have a definite sense of purpose in life.	1	2	3	4	5
2. I have a firm sense of who I am.	1	2	3	4	5
3. I have a set of basic beliefs and values that guide my actions and decisions.	1	2	3	4	5
4. I know what I want out of life.	1	2	3	4	5
5. I have a clear set of personal values or moral standards.	1	2	3	4	5
6. I don't know where I fit in the world. (reverse-scored)	1	2	3	4	5
7. I have specific personal goals for the future.	1	2	3	4	5
8. I have a clear sense of who I want to be when I am an adult.	1	2	3	4	5

(Lounesbury, et al., 2005)

APPENDIX J  
PROJECT CHALLENGE ASSESSMENT INTERVIEW



Date: \_\_\_\_\_  
Completed by: \_\_\_\_\_

**Participant Assessment**

Name: \_\_\_\_\_

Directions: This assessment is not a survey. It is to be completed by a staff member and participant in an interview format with staff member filling in answers.

1. How old are you?

- Ⓐ 11
- Ⓑ 12
- Ⓒ 13
- Ⓓ 14
- Ⓔ 15
- Ⓕ 16
- Ⓖ 17
- Ⓗ 18

2. What is your ethnic background?

- Ⓐ American Indian or Alaska Native
- Ⓑ Asian
- Ⓒ Black or African American
- Ⓓ Hispanic or Latino
- Ⓔ Native Hawaiian or other Pacific Islander
- Ⓕ White

3. Referred to Project Challenge by:

- ① Diversion
- ② Probation
- ③ Alternative Education\_\_\_\_\_
- ④ School district social services
- ⑤ Local mental health counselor, Name:\_\_\_\_\_
- ⑥ Public School\_\_\_\_\_
- ⑦ Other\_\_\_\_\_

SOCIAL DOMAIN

4. Who would you say the most supportive relationship(s) in your life are with? Check all that apply.

- ① Mother
- ② Father
- ③ Sibling\_\_\_\_\_
- ④ Family\_\_\_\_\_
- ⑤ Friend(s)
- ⑥ Teacher
- ⑦ Counselor
- ⑧ Minister/ Pastor

5. A. Describe you relationship with your Mother.

- ① Very good
- ② Good
- ③ Neutral
- ④ Bad
- ⑤ Very bad

B. Have you had any significant relationship changes in the last year with your Mother? If yes, what were they?

- ① No
- ② Don't live with Mother now
- ③ Get along better with Mother now
- ④ Argue with Mother more now
- ⑤ Don't talk to Mother anymore
- ⑥ Other\_\_\_\_\_

6. A. Describe you relationship with your Father.

- ① Very good
- ② Good
- ③ Neutral
- ④ Bad
- ⑤ Very bad

B. Have you had any significant relationship changes in the last year with your Father? If yes, what were they?

- ① No
- ② Don't live with Father now
- ③ Get along better with Father now
- ④ Argue with Father more now
- ⑤ Don't talk to Father anymore
- ⑥ Other\_\_\_\_\_

7. Who do you live with? Check all that apply.

- ① Mother
- ② Father
- ③ Siblings\_\_\_\_\_
- ④ Step-parent
- ④ Grandparent
- ⑤ Other\_\_\_\_\_

8. Describe your family history. Check all that apply and list age at event.

- Ⓐ Parents divorced; age\_\_\_\_\_
- Ⓛ Family incarceration; age\_\_\_\_\_
- Ⓒ Separation from one or both parents\_\_\_\_\_; age\_\_\_\_\_
- Ⓜ Family substance abuse; age\_\_\_\_\_
- Ⓓ Deaths\_\_\_\_\_; age\_\_\_\_\_
- Ⓟ Serious illness\_\_\_\_\_; age\_\_\_\_\_
- Ⓠ Moving; age\_\_\_\_\_

9. How do you feel you get along with kids your age?

- Ⓐ Get along well with both boys and girls my age
- Ⓛ Get along better with boys
- Ⓒ Get along better with girls
- Ⓜ Don't get along well with kids my age

10. Who, if anyone, are the adults you go to when you need help? Check all that apply.

- Ⓐ Mother
- Ⓛ Father
- Ⓒ Family member \_\_\_\_\_
- Ⓜ Teacher
- Ⓓ Counselor
- Ⓟ Minister/ pastor
- Ⓠ Other\_\_\_\_\_
- Ⓡ No adult to go to

INTELLECTUAL DOMAIN

11. A. What is the name of the school you are currently attending?\_\_\_\_\_

B. If attending an alternative school, what happened that brought you there?

- Ⓐ Multiple suspensions\_\_\_\_\_

- ① Expulsion\_\_\_\_\_
- ② Felony transfer\_\_\_\_\_
- ③ Law violation\_\_\_\_\_
- ④ Probation violation\_\_\_\_\_
- ⑤ Other\_\_\_\_\_

12. A. Have you ever attended an alternative school? If yes, at what age?

- ① No
- ② Yes; age\_\_\_\_\_

B. What brought you there?

- ① Multiple suspensions\_\_\_\_\_
- ② Expulsion\_\_\_\_\_
- ③ Felony transfer\_\_\_\_\_
- ④ Law violation\_\_\_\_\_
- ⑤ Probation violation\_\_\_\_\_
- ⑥ Other\_\_\_\_\_

13. What grade in school are you in?

- ① 6<sup>th</sup>
- ② 7<sup>th</sup>
- ③ 8<sup>th</sup>
- ④ 9<sup>th</sup>
- ⑤ 10<sup>th</sup>
- ⑥ 11<sup>th</sup>
- ⑦ 12<sup>th</sup>

14. Did you have any school problems in the 5<sup>th</sup>, 6<sup>th</sup>, and/or 7<sup>th</sup> grades? Examples include problems with grades, behavior, classmates, and being picked on, etc. If yes, explain.

- ① No
- ② Low GPA

- ② Failed a grade
- ③ Discipline referrals
- ④ Suspension/ expulsion
- ⑤ Didn't get along with teachers
- ⑥ Didn't get along with peers
- ⑦ Frequent absenteeism
- ⑧ Other \_\_\_\_\_

15. How would you describe your school performance over the past year?

- ④ Excellent
- ① Good
- ② OK
- ③ Fair
- ④ Poor

16. What is your current grade point average in school?

- ④ A
- ① B
- ② C
- ③ D
- ④ F

17. How many unexcused school absences have you had in the past 60 days?

- ④ None
- ① 1-5
- ② 6-10
- ③ 11-15
- ④ 16-20
- ⑤ 20+

18. How many behavior referrals have you received in the past 60 days?

- ① None
- ② 1
- ③ 2
- ④ 3
- ⑤ 4
- ⑥ 5+

19. How many school suspensions have you received in the past year?

- ① None
- ② 1
- ③ 2
- ④ 3
- ⑤ 4
- ⑥ 5+

20. What is your academic/ school goal?

- ① Complete current grade
- ② High school diploma/ GED
- ③ Trade school\_\_\_\_\_
- ④ College
- ⑤ Other\_\_\_\_\_

21. If you could have any career, what would it be? \_\_\_\_\_

22. What are you doing now that is helping reach your goals for the future? \_\_\_\_\_

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23. Are you currently involved in any extra-curricular activities? If yes, Please describe.

- ① No
- ② Sports/athletics\_\_\_\_\_
- ③ Performing arts (dance, theater, music, etc.)\_\_\_\_\_
- ④ Academic/ leadership group\_\_\_\_\_
- ⑤ Part-time job\_\_\_\_\_
- ⑥ Volunteering\_\_\_\_\_
- ⑦ Other\_\_\_\_\_

24. A. Have you ever been arrested? If yes, how old were you when you were first arrested?

- ① No
- ② Yes; age\_\_\_\_\_

B. If yes, what were you arrested for?

- ① Battery
- ② Burglary
- ③ Assault
- ④ Drugs\_\_\_\_\_
- ⑤ Weapons
- ⑥ Other\_\_\_\_\_

C. Were you charged?

- ① No
- ② Yes

EMOTIONAL DOMAIN

25. What are some accomplishments you are proud of?

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26. Do you feel like people listen to and understand you?

- No
- Yes

27. A. Have you ever felt overwhelmed or over-stressed?

- No
- Yes

B. If yes, what do you do to feel better? Check all that apply.

- Avoidant behavior (ex. don't think about it, listen to music, do something to get mind off of it.)
- Emotion-focused behavior (ex. venting feelings to friends/ someone who listens but can't do anything to help, journal writing, doing something to get feelings out but not make situation better.)
- Problem focused behavior (ex. anything designed to improve the situation, talking to a teacher/mentor who can give advice, making a plan to fix situation.)

28. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?

- No
- Yes

29. Have you ever thought about harming yourself? If yes, please list age and explain.

- No
- Yes; age\_\_\_\_\_

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30. Have you ever cut yourself? If yes, please list age and explain.

- No
- Yes; age\_\_\_\_\_

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31. During the past year, have you ever:

- ① Thought about suicide
- ① Made a plan about suicide
- ② Attempted suicide
- ③ Been injured by a suicide attempt

Describe: \_\_\_\_\_  
\_\_\_\_\_

32. A. Have you ever been in counseling? If yes, at what age were you first in counseling?

- ① No
- ① Yes; age \_\_\_\_\_

B. If yes, what you were counseled for? Check all that apply.

- ① Anxiety
- ① Depression
- ② Behavior problems
- ③ Suicide related
- ④ Disorders \_\_\_\_\_
- ⑤ Other \_\_\_\_\_

33. Do you feel unsafe at home, school or in your neighborhood?

- ① No
- ① Unsafe at home
- ② Unsafe at school
- ③ Unsafe in neighborhood

34. A. Have you ever been physically, verbally or sexually abused? Check all that apply and list age at occurrence.

- ① No
- ① Physical abuse; age\_\_\_\_\_
- ② Verbal abuse; age\_\_\_\_\_
- ③ Sexual abuse; age\_\_\_\_\_

B. If yes, who was it who abused you?

- ① Family member\_\_\_\_\_
- ① Acquaintance (someone they knew) \_\_\_\_\_
- ② Friend/friend of the family\_\_\_\_\_
- ③ Stranger
- ④ Other\_\_\_\_\_

C. Have you ever talked to someone about it? If yes, who did you talk to?

- ① No
- ① Family member\_\_\_\_\_
- ② Friend
- ③ Counselor
- ④ Teacher
- ④ Minister/ Pastor
- ⑤ Other\_\_\_\_\_

35. Has a boyfriend, girlfriend, or date ever threatened to or actually hit, slapped, or physically hurt you on purpose? If yes, how old were you?

- ① No
- ① Yes; age\_\_\_\_\_

PHYSICAL DOMAIN

36. Do you have any allergies? For example, bees, certain foods, etc. \_\_\_\_\_

If yes, please describe any medication/treatment. For example, an Epi pen for bee stings.

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37. Do you have Asthma? \_\_\_\_\_

If yes, do you use an inhaler? \_\_\_\_\_

38. Do you have any physical limitations/ailments that may prevent you from fully participating in Project Challenge? For example, a history of knee pain. \_\_\_\_\_

If yes, please explain.

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39. Are you currently taking any prescription medications? \_\_\_\_\_

If yes, please describe. (Note: If the participant wants to bring any medication (prescription or OTC) on the trip they must give it to a PC team member with their name labeled on it).

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40. How many hours of sleep do you get per night?

- Ⓐ 0-2 hours
- Ⓑ 3-4 hours
- Ⓒ 5-6 hours
- Ⓓ 7-8 hours
- Ⓔ 9+ hours

41. Are you a vegetarian or do you have any specific dietary needs we should know about for the camping trip?

Ⓐ Vegetarian

Ⓑ Special needs\_\_\_\_\_

42. How often do you exercise or engage in physical activity per week?

Ⓐ Never

Ⓑ At least 1x per week

Ⓒ At least 3x per week

Ⓓ Daily

43. A. Have you ever smoked cigarettes? If yes, at what age did you first smoke?

Ⓐ No

Ⓑ Yes; age\_\_\_\_\_

B. Are you a current smoker?

Ⓐ No

Ⓑ Yes

C. If yes, how often do you smoke?

Ⓐ Tried it once or twice

Ⓑ A few times a year

Ⓒ Once a month

Ⓓ Once a week

Ⓔ Several times a week

Ⓕ Everyday

44. A. Have you ever drunk alcohol? If yes, at what age did you first drink?

Ⓐ No

Ⓑ Yes; age\_\_\_\_\_

B. Are you a current drinker?

- Ⓐ No
- Ⓑ Yes

C. If yes, how often do you consume alcohol?

- Ⓐ Tried it once or twice
- Ⓑ A few times a year
- Ⓒ Once a month
- Ⓓ Once a week
- Ⓔ Several times a week
- Ⓕ Everyday

45. A. Have you ever experimented with drugs? If yes, at what age did you first try drugs?

- Ⓐ No
- Ⓑ Yes; age\_\_\_\_\_

B. If yes, what types of drugs?

- Ⓐ Marijuana
- Ⓑ Cocaine (powder, crack, or freebase)
- Ⓒ Prescription Drugs (Ritalin, Oxycotin, etc.)
- Ⓓ Other illegal drugs (speed, crystal, crank, Ecstasy, heroin, etc.)
- Ⓔ Aerosol spray cans or paints

C. Are you a current drug user?

- Ⓐ No
- Ⓑ Yes

D. If yes, how often do you do drugs?

- Ⓐ Tried it once or twice
- Ⓑ A few times a year
- Ⓒ Once a month

- ③ Once a week
- ④ Several times a week
- ⑤ Everyday

46. A. Are you sexually active? If yes, at what age did you become sexually active?

- ① No
- ② Yes; age\_\_\_\_\_

B. If yes, what type of birth control did you use the last time you had sexual intercourse?

Check all that apply.

- ① None
- ② Condoms
- ③ Birth control pills
- ④ Withdrawal
- ⑤ Other\_\_\_\_\_

47. Are you, or have you ever been, pregnant? If yes, how old were you?

- ① No
- ② Yes; age\_\_\_\_\_

48. Do you feel as though you have access to all the healthcare services you need?

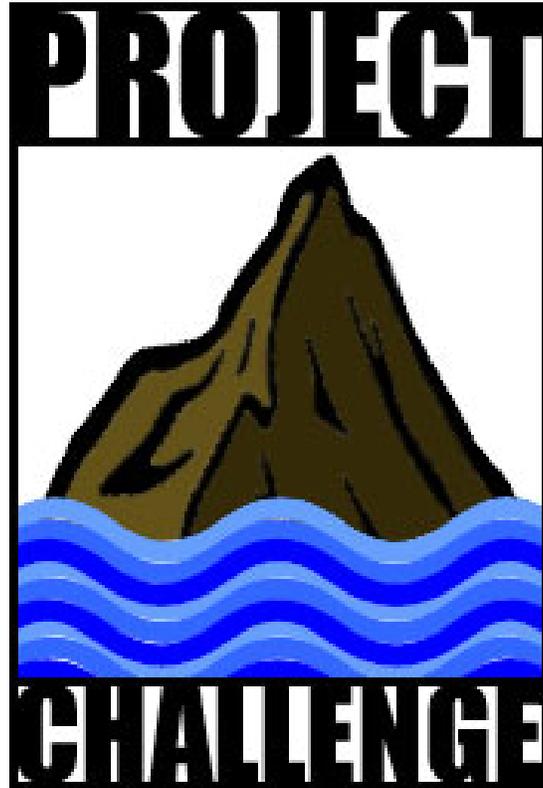
- ① No
- ② Yes

49. Do you have any questions/concerns with anything regarding Project Challenge?

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APPENDIX K  
PROJECT CHALLENGE CURRICULUM



**Challenge Trip**  
*Program Curriculum*

**Mission:**

To promote girls' health and well-being by helping them become strong, capable, and confident young women.

**Program Goals:**

Our goals include:

1. Building girls' self-confidence, self-esteem, identity, and coping skills, and
2. Helping girls strengthen their relationships with supportive family, friends, and a community that cares.

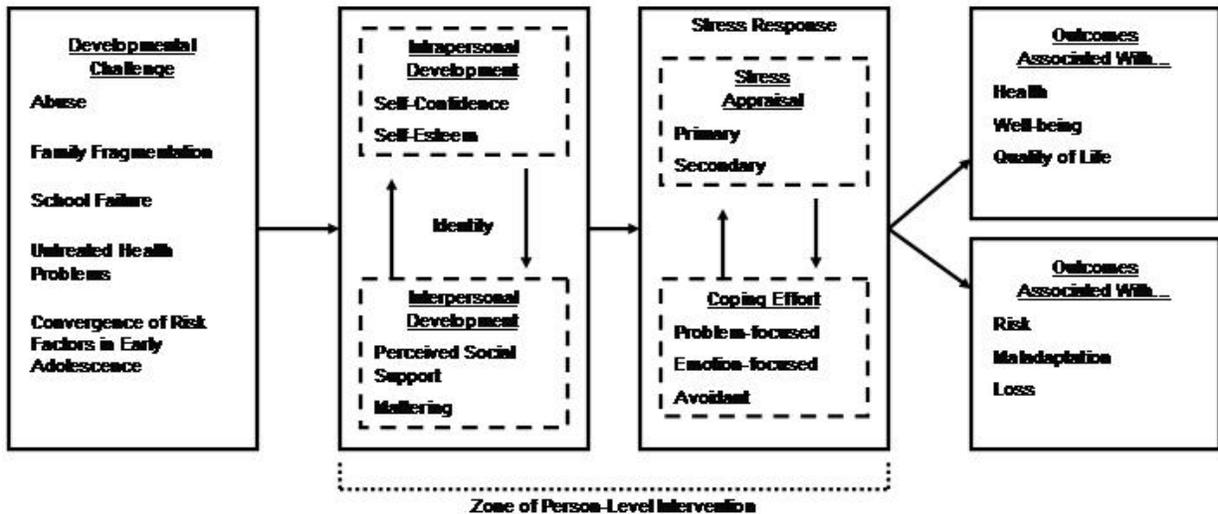
**Project Challenge Philosophy:**

We believe...

- Girls are strong and capable. They can successfully overcome difficulty, actively engage challenging goals, and achieve life success. (Deleted beginning with, "Unfortunately...")
- Girls face a different set of challenges than boys do and gain the greatest benefits from learning strategies that recognize gender differences.
- Challenge provides girls with opportunities to learn and grow. Some of life's most important lessons are learned while facing challenging and difficult circumstances.
- Girls grow in the context of authentic, caring, and safe relationships. These relationships are characterized by respect, warmth, and expectations worthy of young women with promising futures.
- Nature provides a therapeutic environment in which girls can step away from the pressures of adolescence and just be themselves. This slower, less "plugged in" environment gives girls time to think, reflect, and discover who they really are and what they really want.
- Youth professionals deserve to be well respected, supported, and rewarded. Creating conditions in which team members can consistently bring their personal best to our mission is critical to the success of our programs.
- Research and evaluation contribute directly and meaningfully to each girl having the best possible outcome. Grounding programs in theory and research and routinely evaluating each Project Challenge program dramatically improves our ability to make a difference in girls' lives.

## The Model of Girls' Resilience:

All Project Challenge programs are based on The Model of Girls' Resilience (Mann, 2007). This model represents a synthesis of stress and resiliency theories and theories of girls' development.



The model consists of 8 core propositions:

1. Girls are strong and capable. They can successfully overcome difficulty, actively engage challenge, and achieve life success.
2. Developmental challenges exert discernable influences on girls' psychosocial development – both positive and negative.
3. Girls' resilience is composed of factors related to both intrapersonal development (self-confidence and self-esteem) and interpersonal development (perceived social support, and mattering).
4. Intrapersonal development and interpersonal development are intimately related to one another and equally essential as girls' develop resilience. Intrapersonal development is most likely to be fostered in rich interpersonal environments. And, interpersonal development is most likely to be fostered based on a strong intrapersonal foundation.
5. Self-esteem consists of a girl's estimation of her value, and Mattering consists of a girl's estimation of the value others place on her. These constructs influence whether or not she will attempt to cope effectively and the number and quality of attempts she will make.
6. Self-confidence includes a girl's belief in her ability to act on her own behalf, and Perceived Social Support includes a girls' belief in other's willingness to act on her behalf. Together, these constructs consist of the most reliable predictors of a girl's level of persistence throughout the coping effort, her coping success or failure, and her health and behavioral outcomes.
7. Girls compose their identities as both individuals and as they relate to significant others. Factors associated with girls' resilience become more stable as they are more deeply integrated into girls' independent and relational identities. For instance, as evidence of self-confidence becomes increasingly more pervasive in a girl's values and goals, the more stable and influential the impact of self-confidence will be in the rest of the model.

8. Factors associated with girls' resilience influence stress appraisal; which in turn, influences the selection of coping strategies; which in turn, influences girls' health and life outcomes.

### **Challenge Trip Overview:**

Challenge Trips represent our most comprehensive program. This program consists of 1) four pre-trip training sessions, 2) a multi-day adventure camping trip, 3) a Family and Friends Celebration, and 4) 45-60 days of post-trip activities and support. Adventure camping trips include whitewater rafting, rappelling, and/or rock climbing activities. Challenge Trips emphasize building girls' self-confidence, self-esteem, identity, and coping skills and enhancing supportive relationships.

### **Challenge Trip Outcome and Process Objectives:**

#### *Primary Objective: Outcome*

1. Participants will self-report increased levels of Self-Confidence as demonstrated by pre/post paper and pencil surveys and qualitative interviews.

#### *Secondary Objectives: Outcome*

2. Participants will report increased levels of Self-esteem as demonstrated by pre/post paper and pencil surveys and qualitative interviews.
3. Participants will report increased levels of Identity as demonstrated by pre/post paper and pencil surveys and qualitative interviews.

#### *Tertiary Objectives: Process*

4. Participants will report increased levels of Perceived Social Support as demonstrated by pre/post paper and pencil surveys and qualitative interviews.
5. Participants will report increased levels of Mattering as demonstrated by pre/post paper and pencil surveys and qualitative interviews.

### **Challenge Trip Impact Objectives:**

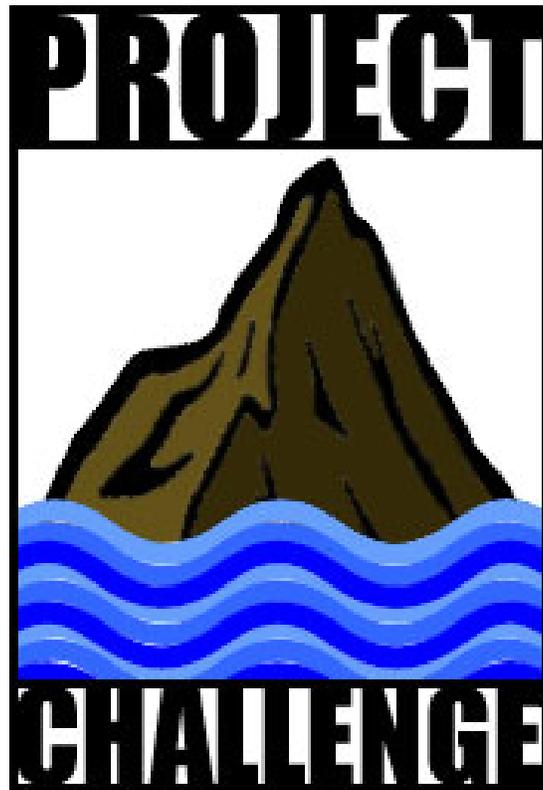
1. Participants will cope in ways associated with less health risk behavior. This includes:
  - a. Decreased substance misuse and abuse.
  - b. Decreased sexual risk taking.
  - c. Decreased ongoing victimization.
  - d. Decreased depression, anxiety, suicidal ideation, and suicide attempts.
2. Participants will cope in ways associated with more health protective behavior. This includes:
  - a. Increased affiliation with pro-social behaviors and values.
  - b. Increased goal-oriented behavior.
  - c. Increased school and life achievement.
  - d. Improved relationships and increased social support.
  - e. Increased subject well-being.

**Keys to the “Project Challenge Experience”:**

1. Put girls’ needs first. a.k.a.) The trip is for them, not us. We’ll make time for us later ☺
2. Enthusiasm is the fuel on which good programs run. a.k.a.) We love, they love.
3. Incrementally increase intensity based on girls’ readiness. a.k.a.) Get girls ready!
4. Build genuine and authentic relationships. a.k.a.) Listening, talking, and laughing IS the job.
5. Role model every behavior you hope to see. a.k.a.) BE the change you hope to see.
6. Create opportunities to interact together. a.k.a.) Include girls in EVERY activity or inactivity.
7. Watch, wait, and engage teachable moments. a.k.a.) We are here to TEACH girls about life and TIMING is everything.

**Team Member Credentials and Certifications**

- Ropes Course Certification
- 1 AMGA Top Rope Site Manager
- 1 Whitewater guide for each raft – certified
- 1 Lifeguard for swim tests and recreational swimming
- 1 Wilderness First Responder
- Any personnel supervising participants alone should be adult CPR/First Aid Certified



**Challenge Trip**  
*Pre-Trip Sessions*

## Pre-Trip Session 1

### *Session Goals:*

1. Establish Project Challenge as a fun program that participants look forward to attending.
2. Establish Project Challenge as a physically and emotionally safe environment.
3. Begin building positive, supportive, and trusting relationships between team members and participants.
4. Begin developing teamwork and team problem-solving, planning, and perseverance.

### *Participant Objectives: Life Skills*

Participants will work together to:

1. Analyze 3 low ropes course challenges.
2. Develop and implement a plan of action for each challenge that considers the apparent strengths and weaknesses of group members.
3. Persist when encountering set backs and adversity.

Participants will:

4. Identify common challenges to girls' self-confidence.
5. Describe how a person's level of Self-confidence affects their life choices.

### *Participant Objectives: Outdoor Skills*

Participants will work together to:

1. Complete 3 low ropes challenges.

### *Time:*

3 hours

### *Curricular Materials:*

Pre-trip Journal 1

### *Experiential Equipment:*

Low ropes elements including

- Wobbling Woozy
- Nitro-crossing
- Islands
- The Muse
- Team Wall

### *Procedures:*

1. Warmly welcome all participants as they arrive. Let them know you are glad to meet them.
2. Spend a few minutes of "informal" time getting to know each participant and helping them get to know each other.
3. Have the session leader welcome the group, introduce their self, and facilitate an introduction from each participant and remaining team-members.
4. Review program expectations:

- a. Attend all sessions and arrive on-time. Participants who miss a safety session or arrive too late will not be able to attend the trip.
  - b. Come prepared to do your personal best. You do not have to complete every activity to attend the trip, but you do have to try your hardest to do so.
  - c. Treat everyone with respect – including your self. At some point, everyone will struggle in this program. When this happens treat others like you want to be treated.
  - d. Maintain confidentiality. As we get to know each other better, we tend to talk about increasingly personal subjects. Do not repeat any personal information you hear at Project Challenge.
5. Review operational procedure:
    - a. Bathrooms
    - b. Drinks/Snacks
    - c. Supervision Policy
  6. Share the goals for the day with participants:
    - a. Get to know each of your team-members.
    - b. Begin to develop teamwork and perseverance.
    - c. Establish Project Challenge as physically and emotionally safe environment.
    - d. Complete 3 low ropes challenges.
  7. Set-up, complete, and debrief the following low ropes elements in this order:
    - a. Wobbling Woozy – emphasize fun, safety, communication, and teamwork.
    - b. Islands – emphasize fun, safety, communication, and teamwork.
    - c. Nitro-crossing – emphasize challenge, fun, safety, communication & teamwork.
    - d. Bonus for groups who are either way ahead of schedule or who have not been challenged by other activities: The Muse - emphasize challenge, fun, safety, communication & teamwork.
    - e. Super-bonus: Team Wall - emphasize challenge, fun, safety, communication & teamwork.
  8. Present participants with their personalized journals. Explain that although we use the journals as an outline for group discussion, these journals are confidential. They will be stored in a locked cabinet and no one will read them.
  9. Conduct group discussion session.
    - a. Read Pre-trip Journal 1 to participants out loud or allow a volunteer to read it.
    - b. Let students find a comfortable place in the Project Challenge classroom and give them 10 minutes to complete their journal assignment.
    - c. Review expectations for group discussions:
      - i. Be serious during journal time. Project Challenge is more than a fun trip. It is designed to help you learn about yourself. Respect yourself by taking these times seriously.
      - ii. Listen and respond to each other with respect. This usually means only 1 person is talking at a time, while everyone else listens carefully.
      - iii. Maintain each others confidentiality.
    - d. Facilitate a discussion about Self-confidence based on the three questions found in Pre-trip Journal 1. Ask each question and ask the group to respond. Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage

- participation from all members. Close the discussion emphasizing the importance of Self-confidence and Project Challenge as an opportunity to practice Self-confidence.
10. Have the group evaluate their goal-related performance for the day. Have each team member comment on the group's performance. Remind the group of the next meeting times and dismiss.

## Pre-Trip Session 2

### *Session Goals:*

1. Further establish Project Challenge as a physically and emotionally safe environment.
2. Continue building positive, supportive, and trusting relationships between team members and participants.
3. Introduce challenge activities and strategies associated with achieving success in stressful and difficult environments.
4. Practice challenge skills in low risk environments, e.g.) on flat water and artificial climbing towers.

### *Participant Objectives: Life Skills*

Participants will attempt to:

1. Choose problem-focused coping strategies including.
  - a. Setting ambitious performance goals.
  - b. Developing, implementing, and revising plans for achieving success.
2. Manage stress-related emotions by:
  - a. Limiting negative self-talk and utilizing positive self-talk strategies.
  - b. Soliciting social support using positive and pro-social methods.
3. Persist when encountering setbacks and adversity.

Participants will:

4. Examine the influence of Self-esteem on girls' decision-making processes.
5. Identify 10 or more qualities they like about themselves.

### *Participant Objectives: Outdoor Skills*

Participants will:

1. Complete a swim evaluation.
2. Demonstrate basic whitewater paddling and safety skills in a flat water environment.
3. Climb 1 beginner's route on an approximately 20 foot climbing wall.
4. Rappel (standard) from a height of approximately 20 feet.

*Time:*

5 hours

### *Curricular Materials:*

Pre-trip Journal 2

### *Experiential Equipment:*

Whitewater equipment including:

- Rafts
- Paddles
- Throw bags
- Safety equipments including PDF's, lifeguard tubes, throw bags, and rescue/first aid gear

High ropes elements including:

- 20 foot climbing wall with a beginner's route.
- 20 foot climbing wall with a suitable and safe rappelling set-up
- Safety equipment including harnesses, helmets, lobster claws, and rescue/first aid gear

*Procedures:*

1. Warmly welcome all participants as they arrive. Let them know you are glad to meet them.
2. Spend a few minutes of "informal" time getting to know each participant and helping them get to know each other.
3. Have the session leader welcome the group.
4. Review program expectations:
  - a. Attend all sessions and arrive on-time. Participants who miss a safety session or arrive too late will not be able to attend the trip.
  - b. Come prepared to do your personal best. You do not have to complete every activity to attend the trip, but you do have to try your hardest to do so.
  - c. Treat everyone with respect – including your self. At some point, everyone will struggle in this program. When this happens treat others like you want to be treated.
  - d. Maintain confidentiality. As we get to know each other better, we tend to talk about increasingly personal subjects. Do not repeat any personal information you hear at Project Challenge.
5. Share the goals for the day with participants:
  - a. Practice whitewater paddling and rescue skills.
  - b. Practice climbing and rappelling skills.
  - c. Continue building team work/supportive environment.
  - d. Practice Self-confidence.
6. Have students and team members to load vehicles with rafting and safety equipment.
7. Drive to practice lake.
8. Complete whitewater practice session:
  - a. Teach participants how to inflate, prep, and transport rafts.
  - b. Fit all participants in PDF's.
  - c. Conduct a brief paddle talk.
  - d. Demonstrate and practice all paddle skills and commands including:
    - i. Forward, back, left, and right
    - ii. Incremental commands (easy/hard and 1/2/3)
  - e. Rearrange boats until each boat has a safe combination of paddlers.
  - f. Demonstrate and practice all rescue skills and commands including:
    - i. Lean-in, All-in, High-side
    - ii. Fall out procedures:
      1. Breath
      2. Grab chicken line
      3. Extend/grab paddle
      4. Throw bag/Towing
      5. Safety guidelines
        - a. Point toward safety, whistles, hand signals
        - b. Avoiding foot entrapment & strainers
    - iii. Swim positions

1. Defensive swim position
2. Offensive swim position
- g. Teach participants how to deflate and properly store rafts.
9. Have lunch together.
10. Return to Project Challenge facility.
11. Complete climbing and rappelling practice session:
  - a. Set expectations for climbing rappelling activities
    - i. It's okay to be afraid
    - ii. Do your personal best – The top isn't the issue; going down trying is the issue.
    - iii. Pay attention to other climbers – offer help and encouragement
  - b. Discuss equipment safety (What does 22kn mean? Why is it on everything?)
  - c. Teach participants how to put on their harness and helmets
  - d. Teach participants how to tie in as a climber and how to belay a climber
  - e. Have each student climb to the top of the wall with a team member supervising the safety of the climb. Each student should top-out with the help of the team member who will supervise the rappel. (Remember praise/enthusiasm – Whooo!)
  - f. When 3-4 students are on top of the low wall, teach a rappelling skills course.
    - i. Clipping in
    - ii. Brake operation (brake goes in your butt)
    - iii. Negotiating the edge (Lead with your butt out –like you want to pee on \_\_\_\_)
    - iv. Assuming the rappel position
    - v. Rappelling the face of the tower/cliff
  - g. Have each student rappel the low wall face. (Remember praise/enthusiasm – Whooo!)
  - h. If possible, repeat until each participant has climbed and rappelled the low wall twice
  - i. Have students collect all equipment and store it properly.
12. Conduct a group discussion.
  - a. Read Pre-trip Journal 2 to participants out loud or allow a volunteer to read it.
  - b. Let students find a comfortable place in the Project Challenge classroom and give them 10 minutes to complete their journal assignment.
  - c. Review expectations for group discussions:
    - i. Be serious during journal time. Project Challenge is more than a fun trip. It is designed to help you learn about yourself. Respect yourself by taking these times seriously.
    - ii. Listen and respond to each other with respect. This usually means only 1 person is talking at a time, while everyone else listens carefully.
    - iii. Maintain each others confidentiality.
  - d. Facilitate a discussion about Self-esteem based on the three questions found in Pre-trip Journal 1. Ask each question and ask the group to respond. Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
  - e. End with the \$20 bill demonstration. Take a \$20 bill and ask who wants it. (Everyone) Crumple the \$20, rub it in your armpits, stomp on it, - add whatever “damage” you can think of. Ask who still wants the \$20 bill. (Everyone) Remind participants people, like \$20 bills, retain their value no matter what has been done to

- them. Close the discussion emphasizing the importance of Self-esteem and Project Challenge as an opportunity to practice Self-esteem.
13. Review the packing list with participants.
  14. Have the group evaluate their goal-related performance for the day. Have each team member comment on the group's performance. Remind the group of the next meeting times and dismiss.

### Pre-Trip Session 3

#### *Session Goals:*

1. Further establish Project Challenge as a physically and emotionally safe environment.
2. Continue building positive, supportive, and trusting relationships between team members and participants.
3. Increase the intensity of challenges and practice effective coping strategies.
4. Practice climbing and rappelling skills in moderate intensity environments,

#### *Participant Objectives: Life Skills*

Participants will practice:

1. Choosing problem-focused coping strategies including.
  - a. Setting ambitious performance goals.
  - b. Developing, implementing, and revising plans for achieving success.
2. Managing stress-related emotions by:
  - a. Limiting negative self-talk and utilizing positive self-talk strategies.
  - b. Soliciting social support using positive and pro-social methods.
3. Persisting when encountering setbacks and adversity.

Participants will:

4. Develop criteria with which to judge potential sources of social support.
5. Evaluate current sources of social support.
6. Identify their highest quality existing sources of social support.

#### *Participant Objectives: Outdoor Skills*

Participants will:

1. Attempt to climb 1 beginner's route on an approximately 40 foot climbing wall.
2. Rappel (helo) from a height of approximately 40 feet.

#### *Time:*

3 hours

#### *Curricular Materials:*

Pre-trip Journal 3

#### *Experiential Equipment:*

High ropes elements including:

- 40 foot climbing wall with a beginner's route.
- 40 foot climbing wall with a suitable and safe rappelling set-up
- Safety equipment including harnesses, helmets, lobster claws, and rescue/first aid gear

#### *Procedures:*

1. Warmly welcome all participants as they arrive. Let them know you are glad to meet them.
2. Spend a few minutes of "informal" time getting to know each participant and helping them get to know each other.
3. Have the session leader welcome the group.

4. Review program expectations:
  - a. Come prepared to do your personal best. You do not have to complete every activity to attend the trip, but you do have to try your hardest to do so.
  - b. Treat everyone with respect – including your self. At some point, everyone will struggle in this program. When this happens treat others like you want to be treated.
5. Share the goals for the day with participants:
  - a. Continue practicing climbing and rappelling skills.
  - b. Practice Self-confidence – How many times did you guys say, “I can’t”? Set a goal to reduce by half.
6. Have students and team members collect and distribute climbing and safety equipment.
7. Complete climbing and rappelling practice session:
  - a. Set expectations for climbing rappelling activities
    - i. It’s okay to be afraid
    - ii. Do your personal best – The top isn’t the issue; going down trying is the issue.
    - iii. Pay attention to other climbers – offer help and encouragement
  - b. Remind participants how to put on their harness and helmets.
  - c. Remind participants how to tie in as a climber and how to belay a climber
  - d. Have each student climb to the top of the wall with a team member supervising the safety of the climb. Each student should top-out with the help of the team member who will supervise the rappel. (Remember praise/enthusiasm – Whooo!)
  - e. When 3-4 students are on top of the high wall, refresh rappelling skills.
  - f. Have each student rappel the high wall face. (Remember praise/enthusiasm – Whooo!)
  - g. If possible, repeat until each participant has climbed and rappelled the high wall twice
  - h. Have students collect all equipment and store it properly.
8. Conduct a group discussion.
  - a. Read Pre-trip Journal 3 to participants out loud or allow a volunteer to read it.
  - b. Let students find a comfortable place in the Project Challenge classroom and give them 10 minutes to complete their journal assignment.
  - c. Review expectations for group discussions:
    - i. Be serious during journal time. Project Challenge is more than a fun trip. It is designed to help you learn about yourself. Respect yourself by taking these times seriously.
    - ii. Listen and respond to each other with respect. This usually means only 1 person is talking at a time, while everyone else listens carefully.
    - iii. Maintain each others confidentiality.
  - d. Facilitate a discussion about Social Support/Trust based on the four questions found in Pre-trip Journal 3. Ask each question and ask the group to respond. Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
  - e. End the discussion by asking for examples of good support during Project Challenge. Discuss importance of that support, especially its influence on completing challenges conducted so far. Close the discussion emphasizing the importance of Social Support and Project Challenge as an opportunity to develop new and existing sources of Social Support.

9. Remind participants about the Family and Friends Celebration. Ask them to invite the people that support them when things are hard.
10. Have the group evaluate their goal-related performance for the day. Have each team member comment on the group's performance. Remind the group of the next meeting times and dismiss.

## Pre-Trip Session 4

### *Session Goals:*

1. Continue building positive, supportive, and trusting relationships between team members and participants.
2. Make up any climbing and rappelling skills practice. At a minimum all participants should have successfully.
3. Conduct any extra skill practice deemed necessary.
4. Practice tent pitching and preparing sleep areas (pad/bag/liner/cloths).
5. Present principles of Leave No Trace Camping.
6. Pack for the trip.

### *Participant Objectives: Life Skills*

Participants will practice:

1. Choosing problem-focused coping strategies including.
  - a. Setting ambitious performance goals.
  - b. Developing, implementing, and revising plans for achieving success.
2. Managing stress-related emotions by:
  - a. Limiting negative self-talk and utilizing positive self-talk strategies.
  - b. Soliciting social support using positive and pro-social methods.
3. Persist when encountering setbacks and adversity.

Participants will:

4. List benefits associated with healthy relationships.
5. Develop criteria with which to judge the quality of a relationship.
6. Identify strategies for strengthening genuinely caring relationships.

### *Participant Objectives: Outdoor Skills*

Participants will:

1. Pitch a tent.
2. Prepare a sleeping area.
3. List and describe the principles of Leave No Trace camping.

### *Time:*

3 hours

### *Curricular Materials:*

Pre-trip Journal 4

### *Experiential Equipment:*

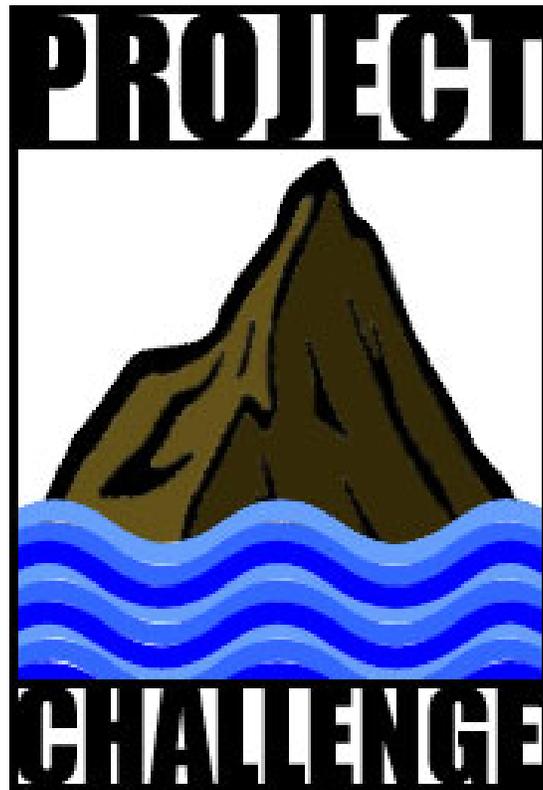
High ropes elements including:

- 20 & 40 foot climbing wall with a beginner's route.
- 20 & 40 foot climbing wall with a suitable and safe rappelling set-up
- Safety equipment including harnesses, helmets, lobster claws, and rescue/first aid gear
- Tents
- Sleep gear

*Procedures:*

1. Warmly welcome all participants as they arrive. Let them know you are glad to meet them.
2. Spend a few minutes of “informal” time getting to know each participant and helping them get to know each other.
3. Have the session leader welcome the group.
4. Review program expectations:
  - a. Come prepared to do your personal best. You do not have to complete every activity to attend the trip, but you do have to try your hardest to do so.
  - b. Treat everyone with respect – including your self. At some point, everyone will struggle in this program. When this happens treat others like you want to be treated.
5. Share the goals for the day with participants:
  - a. If necessary, continue practicing climbing and rappelling skills.
  - b. Practice tent pitching and sleep prep.
  - c. Discuss Leave No Trace camping.
  - d. Pack for trip.
  - e. Review participant packing list.
6. If necessary, complete climbing and rappelling practice sessions.
7. Set-up tent pitching as a challenge. Have participants work in teams to pitch their tents. Provide all tent materials and instructions. Explain this is something you want them to do themselves; you will answer questions, but will not pitch the tent for them. DO NOT rescue. Typically, participants struggle to figure out the tents. Let them. Debrief strengths and weaknesses of effort.
8. Demonstrate preparing a sleep area (pad/bag/bag-liner/clothes) and have participants practice setting-up their sleep area.
9. Discuss fundamentals of Leave No Trace camping.
10. Have participants breakdown and pack their tents and sleep gear.
11. Have participants and team members work together to pack all communal gear.
12. Conduct a group discussion.
  - a. Read Pre-trip Journal 4 to participants out loud or allow a volunteer to read it.
  - b. Let students find a comfortable place in the Project Challenge classroom and give them 10 minutes to complete their journal assignment.
  - c. Review expectations for group discussions:
    - i. Be serious during journal time. Project Challenge is more than a fun trip. It is designed to help you learn about yourself. Respect yourself by taking these times seriously.
    - ii. Listen and respond to each other with respect. This usually means only 1 person is talking at a time, while everyone else listens carefully.
    - iii. Maintain each others confidentiality.
  - d. Facilitate a discussion about Mattering based on the five questions found in Pre-trip Journal 4. Ask each question and ask the group to respond. Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
  - e. Close the discussion emphasizing the importance of Mattering and Project Challenge as an opportunity to develop new and existing sources of Mattering.

13. Review participant packing list. Remind participants about critical gear: wet/dry shoes, swim suits, hats, layers, etc...
14. Remind participants about the Family and Friends Celebration. Ask them to invite the people who really care about them.
15. Have the group evaluate their goal-related performance for the day. Have each team member comment on the group's performance. Remind the group of the next meeting times and dismiss.



**Challenge Trip**  
*Trip Sessions & Activities*

## **Day 1: Non-session Activities**

Challenge Trips begin with a van ride to the trip area. How this time is spent is important. All team members should spend at least 50% of their passenger time interacting with and being available to participants.

Upon arriving at the campsite, participants pitch their tents, arrange their sleeping areas, and assist setting up the rest of the camp.

When camp has been set, 2 team members help participants explore the camp area by leading a short creek hike.

Shortly after participants arrive back at the campsite, they review of their earlier journal entries to prepare for the evening's campfire session.

Campfire occurs after dinner and before roasting marshmallows.

## Day 1: Campfire 1

### *Session Goals:*

1. Set a serious and thoughtful tone for campfire sessions.
2. Create a social and emotional climate in which participants can thoughtfully consider intensely personal issues related to their psychosocial development.

### *Participant Objectives: Life Skills*

Participants will:

1. Identify, list, and describe the essential components of their personal identity.
2. Identify, list, and justify which relationships mean the most in their lives.
3. Evaluate the extent to which current behavior is congruent with maintaining this identity and these relationships.

### *Participant Objectives: Outdoor Skills*

None

### *Time:*

1½ hours

### *Curricular Materials:*

Trip Journal Day 1A & 1B

### *Experiential Equipment:*

None

### *Procedures:*

1. Prepare participants to complete their journals. (Before the van disembarks.)
  - a. In the morning before the van leaves, team members give each participant their personalized journal. Show them where the trip entries are in their journals and call their attention to the Day 1 entries. Ask them to complete these entries during the day while traveling.
  - b. Also in the morning before the van leaves, show participants the “Women’s Thoughts” and “Women’s Stories” sections of their journals. Encourage them to read these prior to the end of Day 2.
2. Prepare participants for campfire. (Before dinner.)
  - a. Read Trip Journals 1A & 1B to participants out loud or allow a volunteer to read it.
  - b. Let students find a comfortable place at the campsite and give them 10 minutes to review and add to their journal assignment. Ask them to spend this time thoughtfully preparing for campfire.
3. Conduct a campfire discussion. (After dinner.)
  - a. Review expectations for campfire:
    - i. Campfires are the most important part of any trip. We discuss serious and personal issues. We owe it to ourselves and other participants to demonstrate our highest levels of maturity and thoughtfulness. Remember Project

Challenge is more than a fun trip. It is designed to help you learn about yourself. Respect yourself by taking these times seriously.

- ii. Listen and respond to each other with respect. This usually means only 1 person is talking at a time, while everyone else listens carefully.
  - iii. Maintain confidentiality. Both Project team members and participants will be sharing personal and possibly private information. Remember to keep what you hear in these sessions confidential.
- b. Facilitate a discussion about “What makes you... you?” based on the question found in Trip Journal 1A. Ask the group the question from the journal and allow them to respond. Allow each member to describe these essential personal qualities without interruption. Encourage participation from all members.
  - c. Next, ask participants why it is important to know, “Who you are?” How does knowing this help you make decisions or face difficulty? Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
  - d. Facilitate a discussion about “Who are the most important people in your life? And, why?” based on the questions found in Trip Journal 1B. Ask the group the three questions from the journal and allow them to respond. Allow each member to describe these important people without interruption. Encourage participation from all members.
  - e. Next, ask participants why it is important to know, “Who is most important to you?” How does knowing this help you make decisions or face difficulty? Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
  - f. Share the following thoughts with the group:
    - i. Notice no one described anything negative as being a part of “What makes you... you.” For instance, no one said, “Telling my math teacher to fuck off makes me me,” or stealing, doing drugs, dropping out of school, running away, etc... But we sometimes spend way more energy on things than what is most important. At our core, we are each made of positive qualities and attributes, and if we think about it seriously, we know it.
    - ii. Notice the people you named.
    - iii. Ask, how would your life be different, if when making every decision, you tried to bring out our essential qualities and build relationships with the people who are most important.
  - g. End by letting each team member share their final thoughts.
  - h. Close the discussion emphasizing the importance of knowing who you are and the people who are most important to you and the trip as a time to think about those things.
4. Review safety precautions at the campsite
    - a. Bear precautions/defense
    - b. Snakes/bugs
    - c. Bathroom procedures
  5. Share the agenda for the following day.

## Day 2: Water Session 1

### *Session Goals:*

1. Complete 1 outdoor river challenge.
2. Continue building positive, supportive, and trusting relationships between team members and participants.

### *Participant Objectives: Life Skill*

Participants will practice:

1. Choosing problem-focused coping strategies including.
  - a. Setting ambitious performance goals.
  - b. Developing, implementing, and revising plans for achieving success.
2. Managing stress-related emotions by:
  - a. Limiting negative self-talk and utilizing positive self-talk strategies.
  - b. Soliciting social support using positive and pro-social methods.
3. Persist when encountering setbacks and adversity.

### *Participant Objectives: Outdoor Skills*

Participants will:

1. Paddle 1 beginner's river. (Class II-III)

### *Time:*

3 hours total (1½ water hours; 1½ preparation hours)

### *Curricular Materials:*

None

### *Experiential Equipment:*

Whitewater equipment including:

- Rafts
- Paddles
- Safety equipments including PDF's, lifeguard tubes, throw bags, and rescue/first aid gear

### *Procedures:*

Complete beginning whitewater session:

1. Have participants inflate, prep, and transport rafts.
2. Fit and check all participants in PDF's.
3. Conduct a brief paddle talk.
4. Remind participants of all paddle skills and commands including:
  - a. Forward, back, left, and right
  - b. Incremental commands (easy/hard and 1/2/3)
5. Remind participants of all rescue skills and commands including:
  - a. Lean-in, All-in, High-side
  - b. Fall out procedures:
    - i. Breath
    - ii. Grab chicken line

- iii. Extend/grab paddle
- iv. Throw bag/Towing
- v. Safety guidelines
  - 1. Point toward safety, whistles, hand signals
  - 2. Avoiding foot entrapment & strainers
- c. Swim positions
  - i. Defensive swim position
  - ii. Offensive swim position
- 6. Raft the beginners' river. (e.g. The Nantahala)
- 7. Rearrange boats until each boat has the safest combination of paddlers for the challenge river.
- 8. Practice all commands and skills throughout the trip. Simulate any activities that would leave participants cold or uncomfortable. For instance, instead of having participants enter the cold water to practice rescues, ask them, "If \_\_\_\_\_ fell in, then what would..." type scenarios.
- 9. Complete extra runs of difficult sections, if necessary. (e.g. The Falls)
- 10. Have participants deflate and properly store rafts and rafting gear.
- 11. Celebrate and tell/listen to everyone tell their cool rafting stories ☺

## Day 2: Mountain Session 1

### *Session Goals:*

1. Complete 2 outdoor mountain challenges.
2. Continue building positive, supportive, and trusting relationships between team members and participants.

### *Participant Objectives: Life Skill*

Participants will practice:

1. Choosing problem-focused coping strategies including.
  - a. Setting ambitious performance goals.
  - b. Developing, implementing, and revising plans for achieving success.
2. Managing stress-related emotions by:
  - a. Limiting negative self-talk and utilizing positive self-talk strategies.
  - b. Soliciting social support using positive and pro-social methods.
3. Persist when encountering setbacks and adversity.

### *Participant Objectives: Outdoor Skills*

Participants will:

1. Hike one strenuous mountain approach. (Approx. 1 mile with a 750 vertical feet/mile elevation gain)
2. Rappel (standard) from a height of approximately 70 feet from a cliff top approximately 750 feet above the valley floor.

### *Time:*

4 hours

### *Curricular Materials:*

Trip Journals 2A & 2B

### *Experiential Equipment:*

- Ropes
- Helmets and Harnesses
- Carabiners
- Belay devices
- First aid and safety equipment

### *Procedures:*

Complete 1 beginning standard rappel.

1. Handout participant personal safety equipment.
2. Make sure participants bring water.
3. Hike to rappel site. Use a slow/moderate pace with frequent breaks.
4. Set expectations for rappelling activities.
  - a. It's okay to be afraid
  - b. Do your personal best – The top isn't the issue; going down trying is the issue.
  - c. Pay attention to other climbers – offer help and encouragement

5. Have participants put on their harness and helmets and safety check each.
6. Refresh participant rappelling skills.
  - a. Clipping in
  - b. Brake operation (brake goes in your butt)
  - c. Negotiating the edge (Lead with your butt out –like you want to pee on \_\_\_\_)
  - d. Assuming the rappel position
  - e. Rappelling the face of the tower/cliff
7. Have each student rappel the beginning wall face. (Remember praise/enthusiasm – Whooo!)
8. Have students collect all equipment and hike to the vans.
9. Have participants properly store their equipment properly.

## Day 2: Campfire 2

### *Session Goals:*

1. Create a social and emotional climate in which participants can thoughtfully consider and discuss personal issues related to their personal goals and activities they care deeply about.

### *Participant Objectives: Life Skill*

Participants will:

1. Identify, list, and describe the things they want most in life (experiences, memories, achievements, etc...).
2. Identify talents and activities they love to use/participate in and that bring out the best in them as people.
3. Evaluate the extent to which current behavior is congruent with achieving these goals and developing these talents.

### *Participant Objectives: Outdoor Skills*

None

### *Time:*

1½ hours

### *Curricular Materials:*

Trip Journals 2A & 2B

### *Experiential Equipment:*

None

### *Procedures:*

1. Prepare participants to complete their journals. (After breakfast.)
  - a. In the morning after breakfast, make sure each participant has their personalized journal for the van ride. Call participants attention to the Day 2 entries. Ask them to complete these entries during the day while traveling.
  - b. Also, remind participants to read the “Women’s Thoughts” and “Women’s Stories” sections of their journals before tonight’s campfire.
2. Prepare participants for campfire. (Before dinner.)
  - a. Read Trip Journals 2A & 2B to participants out loud or allow a volunteer to read it.
  - b. Let students find a comfortable place at the campsite and give them 10 minutes to review and add to their journal assignment. Ask them to spend this time thoughtfully preparing for campfire.
3. Conduct a campfire discussion. (After dinner.)
  - a. Review expectations for campfire:
    - i. Campfires are the most important part of any trip. We discuss serious and personal issues. We owe it to ourselves and other participants to demonstrate our highest levels of maturity and thoughtfulness. Remember Project Challenge is more than a fun trip. It is designed to help you learn about yourself. Respect yourself by taking these times seriously.

- ii. Listen and respond to each other with respect. This usually means only 1 person is talking at a time, while everyone else listens carefully.
    - iii. Maintain confidentiality. Both Project team members and participants will be sharing personal and possibly private information. Remember to keep what you hear in these sessions confidential.
  - b. Facilitate a discussion about “What do you want in life?” based on the question found in Trip Journal 2A. Ask the group the question from the journal and allow them to respond. Allow each member to describe these essential personal qualities without interruption. Encourage participation from all members.
  - c. Next, ask participants why it is important to know, “What you want?” How does knowing this help you make decisions or face difficulty? Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
  - d. Facilitate a discussion about “What do you love to do? And, how do you feel about yourself and life when you do this?” based on the questions found in Trip Journal 2B. Ask the group the three questions from the journal and allow them to respond. Allow each member to describe these important people without interruption. Encourage participation from all members.
  - e. Next, ask participants, “How might/does having activities you love and pursue help you in life?” Particularly, how does having things you love and pursue help you make decisions or face difficulty? Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
  - f. Share the following thoughts with the group:
    - i. Notice no one described anything negative as being a part of “What they want,” or “What they love to do.” In this serious thoughtful environment, when you are REALLY thinking about what you want most... again, you only think of positive and worthy things.
    - ii. Ask, “how do you think having clear goals and something they loved to do affected the women in ‘Women’s Stories?’” Ask, do you think having these things in their lives helped these women overcome the difficulties and challenges of their childhoods and adolescent years.
    - iii. Share the importance of having goals. Many participants may not think of themselves as the type of person who has “goals.”
  - g. End by letting each team member share their final thoughts.
  - h. Close the discussion emphasizing the importance of knowing who you are and the people who are most important to you and the trip as a time to think about those things.
4. Share the agenda for the following day.

## Day 3: Water Session 2

### *Session Goals:*

1. Complete 1 outdoor river challenge.
2. Continue building positive, supportive, and trusting relationships between team members and participants.

### *Participant Objectives: Life Skill*

Participants will practice:

1. Choosing problem-focused coping strategies including.
  - a. Setting ambitious performance goals.
  - b. Developing, implementing, and revising plans for achieving success.
2. Managing stress-related emotions by:
  - a. Limiting negative self-talk and utilizing positive self-talk strategies.
  - b. Soliciting social support using positive and pro-social methods.
3. Persist when encountering setbacks and adversity.

### *Participant Objectives: Outdoor Skill*

Participants will:

1. Paddle 1 advanced river. (Class IV-V)

### *Time:*

3 hours (1½ water hours; 1½ preparation hours)

### *Curricular Materials:*

None

### *Experiential Equipment:*

Whitewater equipment including:

- Rafts
- Paddles
- Safety equipments including PDF's, lifeguard tubes, throw bags, and rescue/first aid gear

### *Procedures:*

Complete challenge whitewater session:

1. Have participants inflate, prep, and transport rafts.
2. Fit and check all participants in PDF's.
3. Conduct a brief paddle talk.
4. Remind participants of all paddle skills and commands including:
  - a. Forward, back, left, and right
  - b. Incremental commands (easy/hard and 1/2/3)
5. Remind participants of all rescue skills and commands including:
  - a. Lean-in, All-in, High-side
  - b. Fall out procedures:
    - i. Breath
    - ii. Grab chicken line

- iii. Extend/grab paddle
- iv. Throw bag/Towing
- v. Safety guidelines
  - 1. Point toward safety, whistles, hand signals
  - 2. Avoiding foot entrapment & strainers
- c. Swim positions
  - i. Defensive swim position
  - ii. Offensive swim position
- 6. Raft the challenge river. (e.g. The Ocoee)
- 7. Have participants deflate and properly store rafts and rafting gear.
- 8. Celebrate and tell/listen to everyone tell their cool rafting stories ☺

## Day 3: Mountain Session 2

### *Session Goals:*

1. Complete 2 outdoor mountain challenges.
2. Continue building positive, supportive, and trusting relationships between team members and participants.

### *Participant Objectives: Life Skill*

1. Choosing problem-focused coping strategies including.
  - a. Setting ambitious performance goals.
  - b. Developing, implementing, and revising plans for achieving success.
2. Managing stress-related emotions by:
  - a. Limiting negative self-talk and utilizing positive self-talk strategies.
  - b. Soliciting social support using positive and pro-social methods.
3. Persist when encountering setbacks and adversity.

### *Participant Objectives: Outdoor Skill*

Participants will:

1. Climb 1 beginner's route on an approximately 75 foot rock face.
2. Rappel (helo) from a height of approximately 120 feet.

### *Time:*

5 hours

### *Curricular Materials:*

Trip Journals 3A & 3B

### *Experiential Equipment:*

- Ropes
- Helmets and Harnesses
- Carabiners
- Belay devices
- First aid and safety equipment

### *Procedures:*

1. Handout participant personal safety equipment.
2. Make sure participants bring water.
3. Hike to climb site. Use a slow/moderate pace with frequent breaks.
4. Complete 1 rock climb
  - a. Set expectations for climbing activities.
    - i. It's okay to be afraid
    - ii. Do your personal best – The top isn't the issue; going down trying is the issue.
    - iii. Pay attention to other climbers – offer help and encouragement
  - b. Have participants put on their harness and helmets and safety check each.
  - c. Refresh participant climbing skills.
    - i. Tying in

- ii. Belay skills and commands
    - iii. Descending
  - d. Have each student rappel the beginning wall face. (Remember praise/enthusiasm – Whooo!)
- 5. Hike to the rappel site.
- 6. Complete 1 advanced helo rappel.
  - a. Set expectations for rappelling activities.
    - i. It's okay to be afraid
    - ii. Do your personal best – The top isn't the issue; going down trying is the issue.
    - iii. Pay attention to other climbers – offer help and encouragement
  - b. Have participants put on their harness and helmets and safety check each.
  - c. Refresh participant rappelling skills.
    - i. Clipping in
    - ii. Brake operation (brake goes in your butt)
    - iii. Negotiating the edge (Lead with your butt out –like you want to pee on \_\_\_\_)
    - iv. Assuming the rappel position
    - v. Rappelling the face of the tower/cliff
  - d. Have each student rappel the beginning wall face. (Remember praise/enthusiasm – Whooo!)
- 7. Have students collect all equipment and hike to the vans.
- 8. Have participants properly store their equipment properly.

### Day 3: Campfire 3

#### *Session Goals:*

1. Create a social and emotional climate in which participants can thoughtfully consider and discuss personal issues related to their experiences with developmental challenge and lessons learned in *Project Challenge*.

#### *Participant Objectives: Life Skill*

Participants will:

1. Identify life challenges commonly faced by girls at-risk for delinquency.
2. Identify and discuss what they learned about themselves and life while attending *Project Challenge*.

#### *Participant Objectives: Outdoor Skill*

None

#### *Time:*

1½ hours

#### *Curricular Materials:*

Trip Journals 3A & 3B

#### *Experiential Equipment:*

None

#### *Procedures:*

1. Prepare participants to complete their journals. (After all challenges are completed, before dinner.)
  - a. Read Trip Journals 3A & 3B to participants out loud or allow a volunteer to read it.
  - b. Let students find a comfortable place at the campsite and give them 15 minutes to complete and review their journal assignment. Ask them to spend this time thoughtfully preparing for the last campfire.
2. Conduct a campfire discussion. (After dinner.)
  - a. Review expectations for campfire:
    - i. Campfires are the most important part of any trip. We discuss serious and personal issues. We owe it to ourselves and other participants to demonstrate our highest levels of maturity and thoughtfulness. Remember Project Challenge is more than a fun trip. It is designed to help you learn about yourself. Respect yourself by taking these times seriously.
    - ii. Listen and respond to each other with respect. This usually means only 1 person is talking at a time, while everyone else listens carefully.
    - iii. Maintain confidentiality. Both Project team members and participants will be sharing personal and possibly private information. Remember to keep what you hear in these sessions confidential.
  - b. Facilitate a discussion about “What challenges do girls encounter?” based on the question found in Trip Journal 3A. Set-up the discussion with a paraphrased version

- of the question 3A. Maintain a discussion environment if at all possible – not an “everyone takes a turn” environment. Let participants know its okay to share personal challenges, but that it is not required. Avoid an “everyone takes a turn” environment. Be aware of who is and is not participating in discussion. Encourage participation from all members.
- c. List the challenges most often faced by girls attending *Project Challenge* programs. Ask and discuss, “What can girls learn at *Project Challenge* that will help them face these challenges?”
  - d. Remind participants that we conduct Challenge Trips so they can learn something that applies personally to them and their life. Share that we hope they have had an experience that can help them facing the challenges in their lives. Ask participants to think about what they have personally learned in Project Challenge; particularly the “lessons” they hope to remember/use when they return home.
  - e. Conduct the last campfire ceremony. Each participant:
    - i. Sits in a designated place next to the campfire facilitator.
    - ii. Shares the lessons they have learned and hope to remember.
    - iii. Receives a bracelet from a team member.
    - iv. Allows the group to “wish together” that the participant will remember these lessons, especially when they think of Project Challenge or see their bracelet. During this wish the group leader throws magic powder (sugar) on the fire to seal the deal. ☺
  - f. End by letting each team member share their final thoughts.
3. Share the agenda for the next day. Particularly instructions about breaking down camp and packing for home.
  4. Watch for participants who withdraw and be prepared to spend time with participants who are having difficulties.

## Day 4: Goal-Setting

### *Session Goals:*

1. Help participants apply lessons learned in Project Challenge directly to challenges they face in their daily lives.
2. Help participants set personally meaningful goals and develop individually tailored strategies for meeting those goals.

### *Participant Objectives: Life Skill*

#### Participants will:

1. Set two-three goals in a developmentally challenging area of their lives.
2. Develop two-three action steps per goal.
3. Create criteria with which to judge their goal achievement.
4. Write a “graduation speech” that describes their *Project Challenge* experience in terms of activities, lessons learned, and goals for the future.

### *Participant Objectives: Outdoor Skill*

None

### *Time:*

20-40 minutes per participant

### *Curricular Materials:*

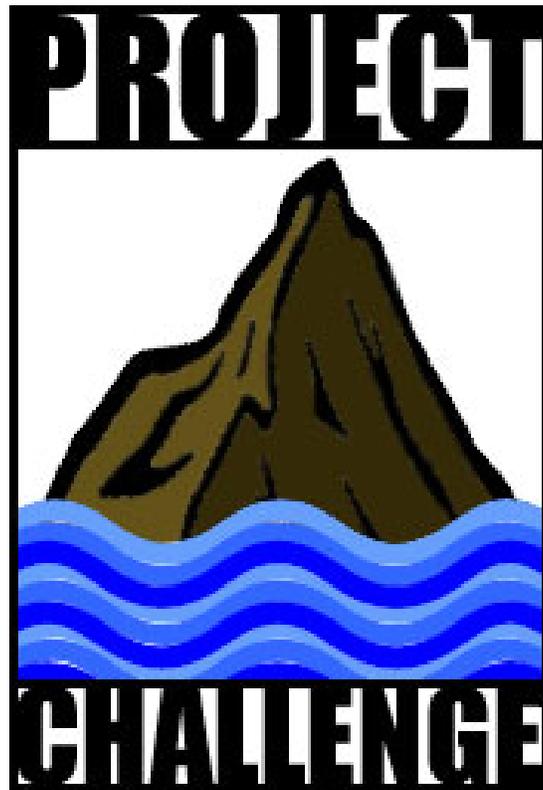
Trip Journals 4A & 4B

### *Experiential Equipment:*

None

### *Procedures:*

1. Prepare participants to complete their journals. (After breakfast.)
  - a. In the morning, make sure each participant has their personalized journal for the van ride.
  - b. As participants wake up, call their attention to the Day 4 entries. Ask them to complete these entries during the day while traveling.
2. Have a team member spend time with each girl helping her develop 2-3 goals for themselves. This process should be GIRL-DIRECTED. Team members may help girls state their goals in realistic or measurable ways, BUT the goals should come from the girls. People are most motivated to act on what THEY want. After this trip, they will want good things. Help them develop their goals, but dramatically avoid assigning them goals.
3. Have a team member spend time listening to each participants graduation speech. This will not be a formal speech. It should consist of their honest and genuine answers to the questions provided in



**Challenge Trip**  
*Post-Trip Session & Activities*

## Family & Friends Celebration

### *Session Goals:*

1. Help existing sources of social support connect with their participant's Project Challenge experience and extend their support to help participants achieve post-program goals.
2. Create an experience that participants and their families can feel good about together.

### *Participant Objectives: Life Skill*

Participants will:

1. Identify and invite existing sources of positive social support.
2. Describe their *Project Challenge* experience in terms of activities, lessons learned, and goals for the future.
3. Solicit continued social support and instrumental assistance related to goal attainment.

### *Participant Objectives: Outdoor Skill*

Participants will:

1. Demonstrate climbing and rappelling on the climbing tower.
2. Assist and support family and friends with gear and challenge activities.

### *Time:*

2 hours

### *Curricular Materials:*

None

### *Experiential Equipment:*

Climbing equipment including:

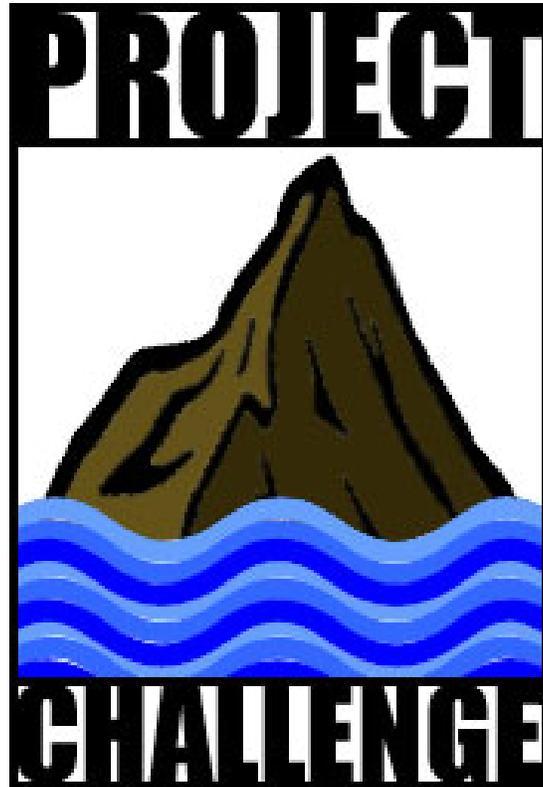
- 20 & 40 foot climbing wall with a beginner's route.
- 20 & 40 foot climbing wall with a suitable and safe rappelling set-up
- Safety equipment including harnesses, helmets, lobster claws, and rescue/first aid gear

### *Procedures:*

1. Prepare for Family and Friends Celebration.
  - a. Create 1 group slideshow.
  - b. Create 1 individual slideshow for each participant.
  - c. Create 1 framed scrapbook page for each participant.
  - d. Order, pick-up, and display catered meal.
  - e. Shop for and display items not provided by caterer.
  - f. Prepare climbing tower in advance.
2. Conduct a Family and Friends Celebration.
  - a. Enthusiastically welcome participants and the family and friends they have invited. Take a moment with each group and share something their participant did well.
  - b. When most people have arrived, welcome the group.
  - c. Serve dinner with the group slideshow pictures playing in the background.
  - d. Once everyone has been served, start and conduct the presentations while attendees are eating.

- e. For each individual participant...
  - i. Conduct a chronological slideshow that shows them at every stage of the program. From the first day of low ropes, to their first whitewater practice, to the low towers... all the way until the advanced rappel. Provide commentary that is
  - ii. Bring the participant up with a picture of them still on the screen.
  - iii. Ask the participant the graduation questions outlined in her journal and allow her to share her goals with her family and friends and ask for their support. Give participants the opportunity to make any other comments she wants to share.
- f. Again, thank all attendees for supporting their participant.
- g. Explain that we want to give them a taste of what their participant has been doing at Project Challenge and open the tower to all family and friends.
- h. Clean-up.

APPENDIX L  
PROJECT CHALLENGE PARTICIPANT JOURNAL



**Your Journal**





















**Camping Trip: Day 4: Journal A**

A. Read “*The Starfish Story*”

*A man was jogging down the beach after a major storm had just come through the area. He was dismayed by the huge number of starfish that the storm had washed up on the beach. He thought that there was nothing he could do because of the immense numbers. As he continued down the beach he saw an old man throw something into the water. As he got closer, he saw the old man walk a little farther down the beach, bend over, pick up a starfish and throw it back into the water. As the jogger approached, the old man stopped again, bent over, picked up another starfish and was about to throw it into the water.*

*The jogger stopped and asked "Why are you doing that? There are thousands of starfish on the beach. You can't possibly make a difference." The old man looked at the starfish, threw it back into the water, then replied, "I made a difference to that one, didn't I?"*

B. Think of two or three goals - big or small & things you can work on now - that you could do that would make an important difference in your life? Write these here. Read the “Smart Goals” section of your journal to help you write these goals. What you will need to do or change in order to meet these goals successfully? Who you will need help and support from? What might distract you or challenge you while you work toward these goals? What are the benefits of achieving them?

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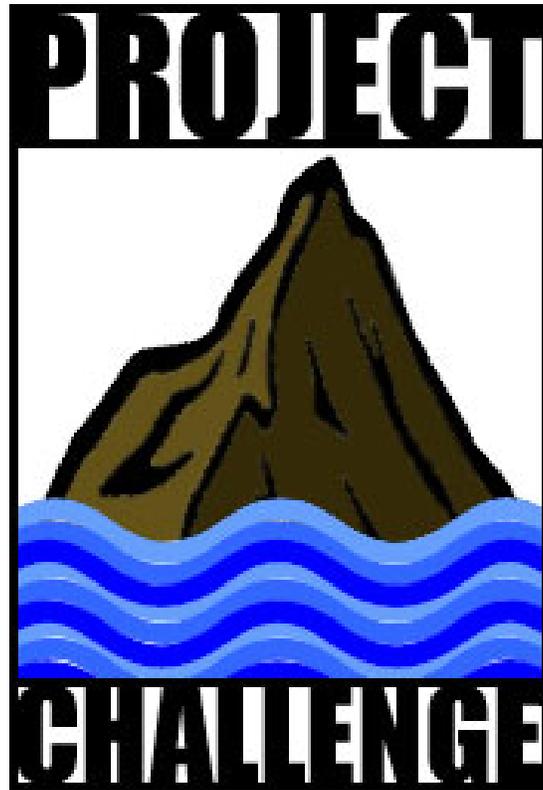
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## Goal Setting

## How to Set SMART Goals

**S-** Specific

**M-** Measurable

**A-** Achievable

**R-** Realistic

**T-** Timely

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**Specific** - A specific goal has a much greater chance of being accomplished than a general goal.

To set a specific goal you must answer the six "W" questions:

\*Who: Who is involved?

\*What: What do I want to accomplish?

\*Where: Identify a location.

\*When: Establish a time frame.

\*Which: Identify requirements and constraints.

\*Why: Specific reasons, purpose or benefits of accomplishing the goal.

**EXAMPLE:** A general goal would be, "Graduate high school." But a specific goal would say, "I will go to class and turn in all my work this semester to get an A in math. Making school a priority and getting tutoring are important to help me accomplish this goal. By accomplishing this goal, I will be on my way to successfully graduating high school. "

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**Measurable** - Establish concrete criteria for measuring progress toward the attainment of each goal you set. When you measure your progress, you stay on track, reach your target dates, and experience the exhilaration of achievement that spurs you on to continued effort required to reach your goal.

To determine if your goal is measurable, ask questions such as.....How much? How many? How will I know when it is accomplished?

**EXAMPLE:** I will know I have accomplished my goal when I get an A on my report card and I can track my progress by getting good grades on all of my class work.

**Attainable** - When you identify goals that are most important to you, you begin to figure out ways you can make them come true. You develop the attitudes, abilities, and skills to reach them.

You begin seeing previously overlooked opportunities to bring yourself closer to the achievement of your goals. You can attain most any goal you set when you plan your steps wisely and establish a time frame that allows you to carry out those steps. Goals that may have seemed far away and out of reach eventually move closer and become attainable, not because your goals shrink, but because you grow and expand to match them.

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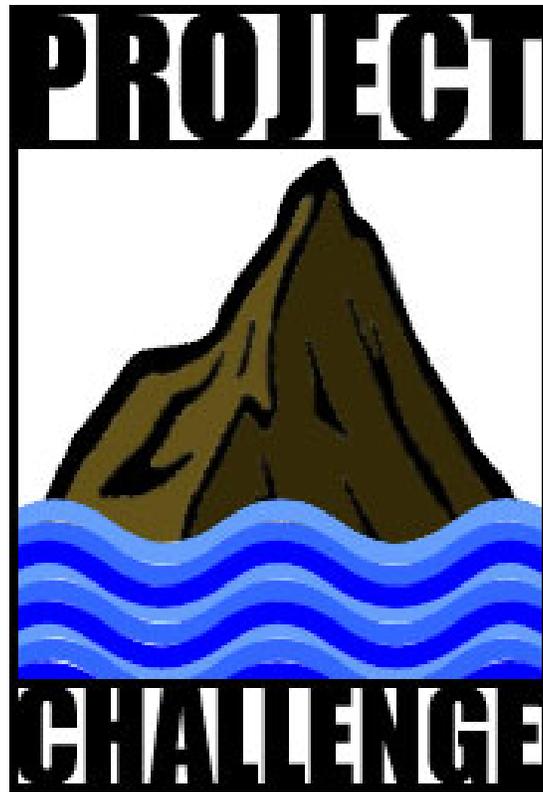
**Realistic** - To be realistic, a goal must represent an objective toward which you are both *willing* and *able* to work. A goal can be both high and realistic; you are the only one who can decide just how high your goal should be. But be sure that every goal represents substantial progress. A high goal is frequently easier to reach than a low one because a low goal exerts low motivational force. Some of the hardest jobs you ever accomplished actually seem easy simply because they were a labor of love.

Your goal is probably realistic if you truly *believe* that it can be accomplished.

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**Time** – It is also important to have a time frame in mind of when you want to accomplish your goal by. If your goal is long term, like going to college, you may want to set up a series of short term goals to help you on your way to accomplishing your long term goal. Let's take a look at the long term goal of going to college. This is a great long term goal. To reach this goal we you may want to set up a few short term goals like: 1.) This semester I will get all my grades up to B's and C's and I will go to school everyday. 2.) Next semester I will keep all my grades at A's and B's and I will talk to my teachers about what colleges I should consider. 3.) I will apply to 3 colleges and take the SAT test. 4.) I will graduate from high school. 5.) I will go to college.

When you look at goal in a reasonable time frame they do not seem so intimidating and you can see what you want to be working at now to accomplish the things you want later on.



## **Women's Stories**

## Sandra Cisneros



Sandra Cisneros is an author and poet best known for her novel *The House on Mango Street*. Much of her writing is influenced by her Mexican-American heritage.

Born in Chicago, Illinois, in 1954, Sandra grew up in poverty. As the only girl in a family of seven children, Cisneros spent a lot of time by herself. During childhood her family moved through a series of apartments in the poor neighborhoods of Chicago's south side. Because her family moved often, she found it difficult to form lasting friendships. She became very introverted and shy. Because she was too shy to volunteer or speak up in class, Cisneros often received poor grades in school. During this time she became a quiet, careful observer of the people and events around her, and recorded her feelings through secret writings at home. This ability to observe and write about the human experience would later help her in her writings.

After high school, Cisneros attended Loyola University in Chicago to study English. Cisneros's old fears about sharing her writing with others soon came back. Many of Cisneros's classmates had come from more privileged backgrounds than she had, and she felt she could not compete with them. As she explained in an interview, "It didn't take me long to learn -after a few days of being there- that nobody cared to hear what I had to say and no one listened to me even when I did speak. I became very frightened and terrified that first year." She soon realized, however, that her experiences as a Mexican American and as a woman were very different, but just as important as anything her classmates wrote about. "It was not until this moment when I separated myself, when I considered myself truly distinct, that my writing acquired a voice," she explains. Out of this insight came her first book, *The House on Mango Street*.

In her poetry and stories, Sandra Cisneros writes about Mexican and Mexican American women who find strength to rise above the poor conditions of their lives. Cisneros' ability to write about these strong characters comes from her childhood experiences. These types of characters have not been presented so clearly in writing before. Cisneros is determined to introduce them to American readers. Cisneros is one of the first Hispanic-American writers who has achieved commercial success. She is admired by literary scholars and critics for her works which help bring the perspective of Chicana (Mexican-American) women into the mainstream of literary feminism.

## Oprah Winfrey



Oprah Winfrey was born on January 29, 1954 in Mississippi. Oprah had a mountain of obstacles already in front of her as a newborn baby... she was born to unwed teenage parents, she was female, she was black, and she was poor.

For the first six years of her life, Oprah was raised on a Mississippi farm by her grandmother. Oprah has stated that living with her grandmother probably saved her life. While in her grandmother's care, she was taught to read at a very early age, instilling a love of reading in her that she retains today. She began her public speaking career at the tender age of three when she began reading aloud and reciting sermons to the congregation of her church. The support from her grandmother in her early years of life may have been what got Oprah through the hard years that she was to spend with her mother.

At the age of six, Oprah was sent to live with her mother in Milwaukee. From ages six to thirteen, Oprah stayed with her mother. She was raped by a cousin when she was nine years old and later molested by a male friend of her mother's and by an uncle. The young girl never told anyone about the abuse that she was suffering. Instead, she held her anger and pain inside and she rebelled. She repeatedly ran away and got into trouble.

Her mother decided to put her into a detention home. Fortunately for Oprah, she was denied admission to the home because there were no openings. So, in what may have been her second major stroke of good luck, she was sent to live with her father Vernon Winfrey in Nashville. Before she ceased her promiscuous and wild behavior, she became pregnant and gave birth to a stillborn baby boy when she was fourteen. The death of her baby devastated her and she vowed to turn her life around.

Her father helped her with her mission by strapping her with his strict rules and discipline. Vernon made sure that his daughter stuck to her curfew, maintained high grades in school and encouraged Oprah to be her best. Oprah's father helped her turn her life around.

Oprah went on to major in radio and television broadcasting at Tennessee State University. After success in school and in her first television jobs, Oprah was given her own nationally broadcasted talk show in 1986 named *The Oprah Winfrey Show*.

Oprah has used the events of her troubled childhood to create a talk show for exploring and helping other women with real life problems and has gone on to become one of the most powerful and successful people in America. Oprah has said of life, "Create the highest, grandest vision possible for your life because you become what you believe."

## Michelle Kwan



Michelle Kwan is a figure skater who has won nine U.S. championships, five world championships, and two Olympic medals. She has remained competitive for over a decade and is the most decorated figure skater in U.S. history. Known for her consistency and expressive artistry on ice, she has routinely been called one of the greatest figure skaters of all time.

Born in Torrance, California, Michelle is the third child of Danny and Estella Kwan, Chinese immigrants from Hong Kong. Her interest in figure skating began at the age of 5 when she followed her two older siblings onto the ice. Her brother played ice hockey and her sister was already a figure skater and she wanted to be like them. Michelle and her sister began seriously training in figure skating when Michelle was 8 years old. They practiced three to four hours a day; waking up at 3am to skate before school and going back to the rink right after school to skate again. Michelle skated on second-hand skates but achieved triumph after triumph.

As Michelle's talent in skating grew, so did the financial cost that it took to become better. Paying for the increased rink time, coaching fees and other costs led to financial hardship for Kwan's working-class family. Kwan's mother took on a second job and her father started working extra time. Although it was a financially difficult time for the family, Michelle's parents could see their daughter's talent and dedication and tried to do all they could to support her dreams.

One Christmas the struggling family couldn't afford a Christmas tree so Michelle made it her goal to win one at school by treading the most popcorn on a string. She ended up winning a miniature Christmas tree for the family's holiday celebration. Eventually the family decided to sell their house, but that still wasn't enough to finance the skating. When Michelle was ten years old, her family could no longer afford a coach. With the money running out, it was going to be Michelle's last year of skating.

However, Michelle was not ready to give up on her dreams. She trained harder than ever and her dedication to her sport became stronger. That year, at the regional skating competition, talent scouts noticed Michelle's talent and awarded her a full scholarship to the Ice Castle International Training Center in Lake Arrowhead, California. It was the second chance Michelle had been waiting for. She used this opportunity to become the best skater she could be and went on to achieve greatness as one of the world's best skaters. She hasn't always won every competition, including never getting an Olympic gold medal, but she has continued skating every step of the way and has never let any setbacks stop her from achieving her dreams and doing what she loves.

## Bethany Hamilton



Born February 8, 1990, Bethany Hamilton is an American surfer. She is known for surviving a shark attack in which she lost her left arm and for overcoming the serious and debilitating injury to return to surfing.

Bethany was born in Hawaii and began surfing at the early age of 5 years old. As a result, her family liked to joke that she had "salt water in her veins." Her surfing abilities progressed very quickly and, while still in grade school, she was participating in the push in division of a Quicksilver surfing contest. (In this "push-in" competition, her father would push her and her mother would wait to catch her). Remarkably, Hamilton won first place. She went on to win the 7-9 short board and long board competition in challenging conditions at the age of eight. Her senior career as a surfer started when she won the 2001 Haleiwa Menehune Championships 25th annual contest. In this competition, she placed 1st in the "13-under girls", 1st in the "17 under girls," and 2nd in the "12-under boys" division. She also became a Rip Curl Girl team rider and made plans to become a professional surfer.

On October 31, 2003, at about 7:00 a.m., Hamilton, her best friend Alana Blanchard, and Blanchard's father, Holt, all paddled out into the waves of Tunnels Beach, Hawaii. It was a sunny day, and the waves were not very big, but she decided to surf anyway. As Hamilton lay on her surfboard, waiting for the next set of waves to roll into the beach, her left arm dangled beside her in the water. Then, without warning, a 14 ft tiger shark attacked, taking a 17 inch wide bite of the board and her left arm. In jerking Hamilton back and forth, the shark ripped off her arm just below her shoulder before disappearing. Although she was bleeding profusely, Hamilton was able to compose herself enough to use her right arm to paddle in to the shore. Her friend's father was able to fashion a tourniquet out of a surfboard leash around what was left of her arm before rushing her to the hospital. She lost 70% of her blood that morning and Hamilton said in her book, *Soul Surfer*, that the reason she kept calm was because of God watching over her.

Despite the trauma of the incident, Hamilton was determined to return to surfing. Just ten weeks after the accident, she returned to her board and went surfing again. She adopted a custom-made board that was longer and slightly thicker which made it easier to paddle. Hamilton observed that she had to kick a lot harder to make up for the loss of her left arm. Not only did she teach herself to surf with only one arm, she also began surfing competitively in competitions again. She commented on this, saying, "When I got up on my first wave, I rode it all the way into the shore, and after that, I just had like, tears of happiness, I was so stoked to be back out there."

Hamilton said she wants to encourage other people to follow their dreams despite obstacles that seem insurmountable. "[People] can do whatever they want if they just set their heart to it, and just never give up, and just go out there and do it."

## Gloria Estefan



Gloria Estefan's early years were not easy. Her father Jose was among the Cuban exiles who participated in the 1961 Bay of Pigs invasion, the unsuccessful attempt to oust Castro from power. Jose spent a year and a half in a Cuban prison, and during this time Gloria and her mother lived in a Cuban ghetto near the Orange Bowl in Miami. Misfortune continued to follow her dad. He was badly poisoned while serving in Vietnam. When her mother went out to make a living, Gloria had to act as nurse and tend to her invalid father. Her one source of comfort was the guitar she had been given when she was 12. She would sing to herself the Top 40 tunes of the day, alone in her room for hours on end.

In 1975, at the urging of her mother, Gloria sang some songs at a wedding which was being entertained by a local party band, The Miami Latin Boys. The band leader, Emilio Estefan, was so impressed by her smooth alto voice that he hounded her to join his band. She reluctantly agreed, but only to sing on weekends. No longer all boys, the band was rechristened The Miami Sound Machine.

That was the start of Miami Sound Machine's rise to fame. By 1983, the group was well known throughout Central and South America and had produced four albums for a major label, CBS Discos. Then in 1984, Emilio convinced record executives at Epic to release an English only album to the US and European markets. The first single, Dr. Beat, became a huge hit on the dance charts. The crossover worked! The next album solidified their success. From this album came the single "Conga!" which carried with it a unique distinction. It is the only song in history to appear on Billboard's Pop, Latin, Soul and Dance charts all at the same time.

Tours, awards, fame, fortune and good luck followed in a steady stream. That is until the morning of March 20, 1990. As Gloria slept in her tour bus which had stopped along a Pennsylvania Interstate highway, a speeding semi-truck smashed into it from behind. She knew immediately that her back was broken. A delicate surgery was performed that required two 8-inch titanium rods to be placed on either side of her spine. She needed 400 stitches to close the 14-inch incision. The operation was a success but in the year that followed, Gloria would have to go through the painful and difficult process of recovery. Due to her hard work and perseverance, within one year of the accident Gloria was performing on stage again. Gloria is well known as one of the most successful Cuban singers and is admired for her perseverance in life and her dedication to her culture and music.

## Maya Angelou



Maya Angelou is hailed as one of the great voices of contemporary literature and as a remarkable Renaissance woman. Through her powerful writings, she has inspired generations of women, African-Americans and all people who struggle to overcome prejudice, discrimination and abuse.

Maya Angelou was born in St. Louis, Missouri on April 4, 1928. In 1931, her parents divorced and she and her older brother Bailey were sent to live with their grandmother in Stamps Arkansas. After five years of being apart from their mother, the children were sent back to St. Louis to be with her. This move eventually took a turn for the worst when Maya was 8 years old and she was raped by her mother's boyfriend. This devastating act of violence caused Maya to be silenced to everyone except her brother for nearly four years. She was sent back to Arkansas because no one could handle the awful state she was in. With the constant help of a woman named Mrs. Flowers, Angelou began to transform into a young girl with a renewed sense of pride and confidence.

In 1940, she and her brother were sent to San Francisco to live with their mother again. Life with her mother was in constant disorder; it soon became too much for Maya so her father came and took her to live with him and his girlfriend in their rundown trailer. Finding that life with him was no better, she ended up living in a graveyard of wrecked cars that mainly housed homeless children. It took her a month to get back home to her mother. Maya's dysfunctional childhood spent moving back and forth between her mother and grandmother caused her to struggle with maturity. She became determined to prove she was a woman and began to rush towards adulthood. Soon, she found herself pregnant, and at the age of 16 she delivered her son, Guy. In order to support her son and herself, Maya embarked on a remarkable career as an actress and entertainer, as a journalist, educator and civil rights activist, and finally, as one of the world's most eminent authors and poets.

Eventually, Maya turned her love for reading and writing into a powerful and successful career as a poet and author. Angelou's first work of literature, *I Know Why the Caged Bird Sings*, is an autobiography. Angelou's sometimes disruptive life inspired her to write this book. It reflects the essence of her struggle to overcome the restrictions that were placed upon her in a hostile environment. Being a poet, educator, historian, best-selling author, actress, playwright, civil-rights activist, producer and director, Dr. Angelou continues to spread her legendary wisdom.

## Ann Curry



Ann Curry has been a news anchor on NBC's *Today* show since 1997, and was named co-anchor of *Dateline NBC* in 2005. She's reported from the scenes of big news stories, from the 1987 Los Angeles earthquake and the September 11th attacks to the 2004 Asian tsunami.

"Along the way someone will tell you that you can't do something or be who you want to be. When that happens, remember to think, 'Oh yeah, watch me.' I did and I showed 'em. I bet you will, too." -Ann Curry's advice to young girls.

Ann Curry was born on November 19, 1956, in Guam, to an American career navy man and the daughter of a Japanese rice farmer. While Ann was growing up, the family moved often, and she never attended the same school for more than two years. Eventually, Ann, her parents, and her four younger siblings settled in Ashland, Oregon. Ann's career prospects seemed dim, since the Currys had no money to pay for their children's higher education.

But Ann was determined to be a journalist and enrolled in the University of Oregon School of Journalism, one of the most highly regarded in the country. To pay for it, Ann worked constantly during the school year and throughout summer vacation at a wide variety of menial jobs. Being the first in her family to attend college was intimidating at first, but Ann was fortunate enough to have supportive professors, and she graduated in 1978.

Ann had other challenges to overcome once she had earned her journalism degree. Television news reporters at the time were predominantly white men, and being both a woman and a visible minority, Ann faced her share of discrimination. Nevertheless, she soon got a job as an intern at Medford, Oregon's NBC affiliate KTVL, and eventually rose to become that station's first female news reporter. Ann stays determined to be the best reporter she could be and eventually she was covering big stories and moving her way up through the ranks of NBC.

By 1997, already successful as a correspondent for *Dateline NBC*, Ann was made the news anchor for the *Today* show. She had a wide variety of assignments over the next few years. She interviewed the parents of the McCaughey septuplets in 1997, was the first network reporter to report on the crisis in Kosovo in 1999, and was on the scene reporting at Ground Zero after September 11th, 2001. Ann Curry was named co-anchor of *Dateline NBC* in May of 2005, in addition to continuing work on *Today*. Through her hard work, dedication and perseverance, Ann has become one of the most respected news reporters in the US today.

## **Beth Rodden**

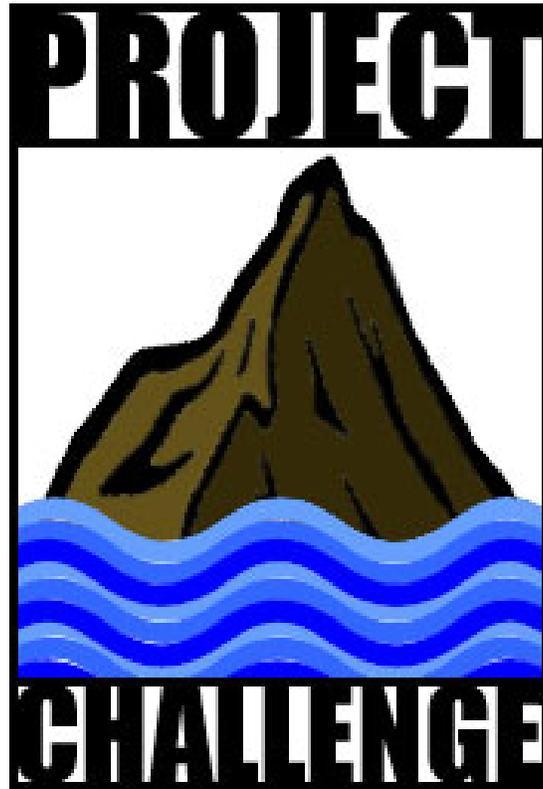


Beth Rodden is one of the strongest and most successful American rock climbers in the world. Born in California, Beth began climbing at the age of 14 at a local indoor rock gym. Beth fell in love with the sport, and through dedication and hard work, she improved quickly and won the Junior National Championships in 1997, 1998 and 1999. Soon, indoor climbing competitions lost their glory to Beth, so she turned to the outdoors for rock climbing on real rock. Beth proved to be successful both indoors and outdoors. By the age of 18, Beth had climbed a 5.14 route in Oregon, making her the youngest woman to ever complete such a grade. Beth also made many other notable climbing ascents and had a strong passion and talent for climb. Beth had become one of the best climbers.

Beth was at the top of her sport, when a horrifying kidnapping event occurred in the year 2000 that would make her question everything. In 2000, Beth, her boyfriend, Tommy Caldwell, and two other friends traveled to the former Soviet republic on the border of China to the sheer cliffs of Kyrgyzstan test their climbing skills. But what was tested for Rodden and her climbing partners was their ability to survive. One early morning, as they camped on a rock face they were ascending, they awoke to the sound of gunfire and quickly realized they were being shot at. The four climbers were taken hostage by armed rebels at war with the Kyrgyz government. During the six days that followed, these American climbers would be pushed to limits they never dreamed possible. The group spends the next 6 days under the control of their kidnappers; hiking through the country, sleeping in caves, starving from no food, and having their lives threatened.

Although they had talk about escaping they see no opportunity to do so safely. Until late in the night on the sixth day when a couple of the captures leave for a few hours putting them in the care of only one guard. At that time, scared and exhausted, Tommy Caldwell waits till the guard is on the edge of the cliff, runs up to him and pushes him off the 2,000 foot cliff. Several miles and several hours later, exhausted and frightened, the hikers finally stumbled into an army camp and safety. The man Tommy Caldwell thought he had killed, survived the fall, only to be eventually captured by Kyrgyz soldiers and sentenced to death.

After the traumatic event, Beth said, "For the first six months, I had nightmares, and actually didn't enjoy climbing at all. I related climbing to being kidnapped. But through time and patience, I've learned to love climbing and enjoy it again." Beth overcame her fears, began climbing again and regained her rank as one of the truly great rock climbers of the world.



## **Women's Thoughts**

## Women's Thoughts

“To have a sense of one’s intrinsic worth...is potentially to have everything.”

–Joan Didion

“We gain strength, courage and confidence by every experience in which you really stop to look fear in the face...We must do that which we think we cannot.”

-Eleanor Roosevelt

“Life is not easy for any of us. But what of that? We must have perseverance and confidence in ourselves.”

-Marie Curie

“Each individual woman’s body demands to be accepted on its own terms.”

-Gloria Steinem

“Although there may be tragedy in your life, there’s always a possibility to triumph. It doesn’t matter who you are, where you come from. The ability to triumph begins with you. Always.”

-Oprah Winfrey

“Mistakes are a fact of life. It is the response to error that counts.”

-Nikki Giovanni

“Courage is very important. Like a muscle, it is strengthened by use.”

-Ruth Gordon

“When I dare to be powerful –to use my strength in the service of my vision, then it becomes less and less important whether I am afraid.”

-Audre Lorde

“Remember no one can make you feel inferior without your consent.”

-Eleanor Roosevelt

“As long as you keep a person down, some part of you has to be down there to hold him down, so it means you cannot soar as you would otherwise might.”

-Marian Anderson

“The future belongs to those who believe in the beauty of their dreams.”

- Eleanor Roosevelt

“I have not ceased to be fearful, but I have ceased to let fear control me.”

-Erica Jong

“Keep working hard and you can get anything that you want. If God gave you the talent, you should go for it. But don't think it's going to be easy. It's hard!”

-Aaliyah

“Always continue the climb. It is possible for you to do whatever you choose, if you first get to know who you are and are willing to work with a power that is greater than ourselves to do it.”

-Oprah Winfrey

“We may encounter many defeats but we must not be defeated.”

-Maya Angelou

## Twenty dollars

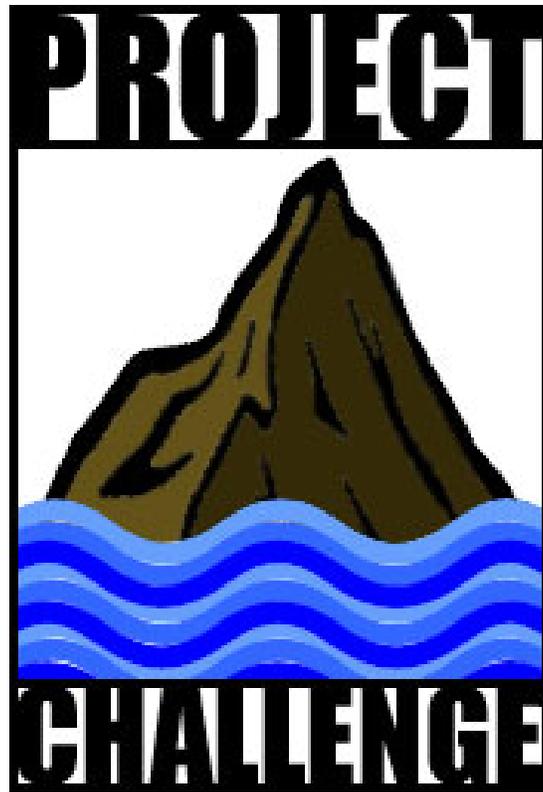
A well known speaker started off his seminar by holding up a \$20 bill. In the room of 200, he asked. "Who would like this \$20 bill?"

Hands started going up. He said, "I am going to give this \$20 to one of you - but first, let me do this." He proceeded to crumple the 20 dollar note up. He then asked. "Who still wants it?" Still the hands were up in the air.

"Well," he replied, "what if I do this?" He dropped it on the ground and started to grind it into the floor with his shoe. He picked it up, now crumpled and dirty. "Now, who still wants it?" Still the hands went into the air.

"My friends, you have all learned a very valuable lesson. No matter what I did to the money, you still wanted it because it did not decrease in value. It was still worth \$20. Many times in our lives, we are dropped, crumpled, and ground into the dirt by the decisions we make and the circumstances that come our way. We feel as though we are worthless; but no matter what happened or what will happen, you will never lose your value. Dirty or clean, crumpled or finely creased, you are still priceless to those who love you. The worth of our lives comes, not in what we do or who we know, but by ...WHO WE ARE.

You are special - don't ever forget it."



## **A Final Thought**

## Our Deepest Fear

Our deepest fear  
is not that we are inadequate.

Our deepest fear  
is that we are powerful  
beyond measure.

It is our light, not our darkness,  
that most frightens us.  
We ask ourselves,  
"Who am I to be Brilliant,  
Gorgeous, Talented and Fabulous?"

Who are you not to be?

You are a child of the Universe.  
Your playing small does not serve the world.

There is nothing enlightened about shrinking  
So that other people won't feel  
insecure around you.

We were born to make manifest  
The Glory of God  
that is within us.

It's not just in some of us;  
it is in everyone.

As we let our own light shine,  
we unconsciously give other people  
permission to do the same.

As we are liberated  
from our own fear,  
our presence automatically  
liberates others.

-Nelson Mandela

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## BIOGRAPHICAL SKETCH

Michael Joseph Mann was born September 24<sup>th</sup>, 1970 in Birmingham, Alabama. He grew up in Palm Bay, Florida and graduated from Palm Bay High School in 1988. After graduation, Michael enrolled at Asbury College (Kentucky) and completed two-years of undergraduate study before transferring to the University of Florida. While at the UF, Michael earned a Bachelor's degree and Master's degree, both in Health Science Education.

Michael began working with children while he was a teenager. In 1988, he was hired as a YMCA summer camp counselor and has consistently worked with children and youth ever since. During the past 19 years, Michael has worked as a camp counselor, a coach, a church youth leader, a youth development specialist, a teacher, an alternative school director, and in several corporate leadership positions in a national youth organization. In each position, he has been a passionate advocate for children, youth, and the people who care for them. Currently, - in addition to his doctoral studies - Michael is founder and director of *Project Challenge*, an outdoor adventure program for at-risk girls.

Michael entered the Ph.D. program in the Department of Health Education and Behavior at the University of Florida in 2004. He will be granted a Doctor of Philosophy in Health and Human Performance with an emphasis in Health Behavior and a minor in College Student Development through the College of Health and Human Performance, in August 2007.