# The Translating Child Welfare Research podcast. The graphic features a swirl with University of Illinois colors.

# Episode 5. Guidance from Youth with Lived Experiences on How to Center Their Well-Being in our Child Welfare Practice: An Interview with Dr. Bridget Colacchio

## Dr. Heather Fox

In this episode we get guidance from youth with lived experiences on how to center their well-being and our child welfare practices. Welcome to the Translating Child Welfare Research Podcast. The goal of this podcast is to provide child welfare professionals with timely and quality research information to help them support their well-being and their well-being of the families they serve. Each month, we invite a researcher to highlight one finding or implication of their research. Visit our web page to explore our podcast. Read biographies for our guests and access information about the research we feature. In this podcast, we have our first guest host, Dr. Valetta Saxon. Dr. Saxon is the Deputy Director of the Office of Research and Child Well-being with the Illinois Department of Children and Family Services. Today's topic – Youth Well-being – is central to her work. She is interviewing Dr. Bridget Colacchio from Dartmouth College on her research on well-being.

## Dr. Verletta Saxon

Welcome Dr. Colacchio; We are excited to meet with you today! Let’s start with a brief introduction and tell us about a recent proud accomplishment.

## Dr. Bridget Colacchio

Sure, and thank you so much for having me, Dr. Saxon. I’m really excited for this conversation that we’re about to have. My name is Dr. Bridget Colacchio. I currently am a director of Family Support Engagement at Dartmouth College, and also an adjunct professor at the School of Social Work at Loyola University, Chicago. I have several research interests, including pedagogy that is values-based and student-centered. Anti-oppressive pedagogical practices, specifically, is an area that I am excited to be working in.

I also have a couple of projects underway related to art-spaced research methodology. And what we're here to talk about today is sort of the focus of my research on that is on well-being specifically in the child welfare field. But I'm looking into applications outside of child welfare as well. Well-being is really the center of the work that I do. And something I'm proud of – I recently transitioned to this new position and in a new area in New England and that's a lot! You know what it's like to pick up and move to a new place and situated in a new place; that I'm feeling very proud.

## Dr. Verletta Saxon

Well, congratulations on your move. Welcome to New England and Welcome to the podcast. I'm really curious if you can share with us how you became interested in researching child and youth well-being.

## Dr. Bridget Colacchio

I am a social worker. That's my professional training and passion. My early work as a young clinical social worker out in the field was working with foster families in Chicago. That was my role as part of an agency to go in when there were some challenges in the foster placement. What we did was called placement stabilization work – to try and help the family and the young person, the child – be able to stabilize there in their placement so that they could stay, if that was possible. That was amazing and grueling work, to be honest.

I transitioned in higher education, where I was really supporting sort of a holistic educational experience for all students. But I had the opportunity to start a bunch of programs that were aimed specifically at underserved populations - low income, first generation, youth of color from around Chicago – that morphed into providing a program for youth in foster care.

It was through that program that I learned a lot from the young people that I was working with. I heard a lot of their stories. I had a lot of time over the four years that I ran that program to understand more about what their lives were like. And my role as a program administrator, as opposed to a therapist, allowed me some different perspective on their lives.

So, I was undertaking my doctoral studies at the time that I was running this program. I was really captivated by these young people who I spent so much time with who I cared so deeply about. I was taken by the way they described their experiences in care. And heartbroken, maybe is the better word to use their…particularly as these young people were describing the gaps in their experience.

I always say that the things that just have stuck with me are, you know, somebody saying that nobody looks them in the eye when they go into their foster home.

Or that they've not been hugged in five years since they saw their extended family.

Those very small moments of people's lives were not being documented anywhere.

It made me think that, wow, we really are not understanding what their lives are like. We are not paying attention as a system to those little micro examples of what their lives are actually like, that in the grand scheme of things – is well-being.

That large umbrella is sometimes hard to describe and hard to understand. I just became very committed to trying to understand better well-being for youth and care. But then for people in general.

## Dr. Verletta Saxon

I hear your passion, and you have such a heart for this kind of work for well-being and looking at core elements of well-being that really promote overall health. I just really want to celebrate with you this important work that you have done. But before we get into that important work that you have done, you did something interesting in your study that I want to ask you about. Youth in child welfare were part of your research team. Can you tell us a little bit more about that experience?

## Dr. Bridget Colacchio

In general, I realized OK, I have some questions here. What is well-being all about? How can we better understand what it is, so that we can do something about it. Knowing that if we have efforts aimed at well-being that are aiming at the wrong target, then we're just not going to get anywhere. I really wanted to back upstream to try and understand, especially from the youth perspective what this whole thing was about.

Obviously did a little bit of investigating to see what other people were saying about what well-being is about. And the reality was that no one was really asking youth themselves.

I knew that I wanted to ask about well-being and have youth provide the answer. But, knowing that who I am as a highly educated white woman, who has not experienced foster care myself and has not been in the shoes of these young people, it felt really disingenuous for me to launch into this research process without the voices of young people being represented in every part of the research.

I just felt really strongly that I couldn't do it by myself, that I really needed to invite some young people to be part of the research team. Some people are familiar with what we call participatory action research, which is really just trying to get folks who are part of the population of interest to be part of the research process in a more substantial way. As opposed to just being kind of the participants or the informants to a researcher who is really distant. I was able to invite a couple of young people to be part of the research team. They helped to craft the questions that we asked. They were instrumental in deciding how we would recruit young people to be part of the study, and they really drove some of the important decisions that were made along the process.

Then, they participated in the analysis. I wanted to be sure that this is what I think I'm hearing. Am I right? Am I on the right track? Is this your experience too? I just really needed to center them in the whole process, and it was tremendous. My co-researchers were just amazing, and their fingerprints were all over this.

## Dr. Verletta Saxon

I love the way that you describe it, as their fingerprints are all over the study. That is really you speaking about their voice. And you bringing to light that these are all things that they are developing, all things that are coming from them, and you're a facilitator in this process. As I think about it, there was a moment when they didn't want to use the word well-being. And instead they selected two different words. Can you share with us those different words that they selected or chose?

## Dr. Bridget Colacchio

When we were talking with the co-researchers, and we had a bunch of research team meetings and I was bringing them in on some of the facts that I had about how we would approach this. I asked them, can I even say: “Tell us about your thoughts about well-being?” And they were like, “No, nobody is going to know what you're talking about. We don't talk like that.” I was like, “Yeah, I didn't think so. What should we say instead?”

So, they came up with the idea that we should provide to the participants this invitation to reflect on the best times in their life, and the worst times in their life. When they were at their highest and when they were at their lowest. And to give them the chance to describe the full spectrum of their experiences. That ended up being critical to what we found in the study, which went beyond a definition of well-being. Which is what I kind of thought we were going to arrive at. Instead, what they described was a process. And how their lives tell the story of a process that is aiming in the direction of well-being. They did have these beautiful ways of describing what well-being is itself, a definition of sorts, but that invitation for them to describe the full spectrum of their lives was really the key. I think that unlocked this finding, ultimately that was about a process.

## Dr. Verletta Saxon

Such a beautiful way to think about having people participate, and getting their perspective, thinking about how they can thrive, how they're struggling and having their voice added to this study. Such a beautiful way to think about it, and such a beautiful way to then implement the work that you were doing in this study. Based on what the youth shared with you in this study, you develop the Way to Well-being framework which highlights the importance of safety, trust, and freedom in supporting well-being. Can you describe the framework for us?

## Dr. Bridget Colacchio

What the young people ended up describing in these interviews… We had hour to an hour and a half long interviews with each of the participants, and they shared stories. They shared some artwork and they described their lives. This description, as we analyzed the data, was telling the story of the journey that starts for all of them in the same place, which was a background of trauma.

But it's really important that we… that [trauma] was part of the framework. We cannot forget that that is the foundation on which these young people’s lives are being built. So this context of trauma, is where we have to acknowledge the starting place. If I could, I’d love to share a couple of quotes, as I describe this framework because I think it's really important for the youth voices to be heard. I know I'm the one talking here, but, I am an ambassador for them, and so I really want their voices to be heard.

One participant just said:

“It's really hard to be in an abusive home and think this stuff is normal. We thought getting hurt and abused was normal.”

So, all of the young people came from a context of trauma. What the framework says is that from that place, there's sort of two trajectories that they would go on based on their interactions, mostly with adults once they got into the child welfare system.

I'm going to describe the unfortunate trajectory first. Which I have to be honest, is the story that we heard the most of. A lot of what we learned from the young people was based on the difficulties that they had had. We were then able to understand what would be the best case scenario of an outcome toward well-being. But sadly, a lot of our participants actually hadn't experienced that. What they experienced were the stress and detours.

So let me describe what that means. Starting from this context of trauma, if young people were sort of not getting what they needed from the adults in the system, we described that they were sort of off on a detour, that they were not headed toward well-being anymore. They, because of the interactions that they were having with adults, that they were being threatened, they were being subjected to further abuse. They were just off track. And these detours sounded, if I could share, someone said:

“It was awful.”

She was talking about when she was an adolescent, and she was in a group home and was being harmed, and she kept telling people, and nothing changed. So, she said:

“It was awful. It's just the fact that DCFS never stood up. They never did anything for me. That group home, people never did anything and I think somebody said an excuse, I’ll never forget it. It was like ‘Well, you know, nobody wants you guys. So where are you going to go? This is your only option.’”

So, this is an example of a detour. This is not in the direction of well-being absolutely. Sadly, if young people were on these detours, they experienced an enormous amount of distress. And the distress came out in so many ways. It came out in self-harm. It came out in the behaviors that we can see externally. So maybe criminal activity or substance abuse. Or maybe it was more internal instead. Suicidality or depression. But the distrust that they were experiencing, they felt that they were pretty loud about how they were not OK. And yet they were not getting what they needed. So, one participant described this experience of distress. She said:

“I mean most of my life, I felt hopeless. There was just no hope in the world. I was totally defeated. I would pray as a child to not wake up in the morning. ‘Like God, just please do not wake me up. I can't deal with this.’ It was just so awful. It was the most hopeless feeling. There was no joy in the world, no happiness. There was no nothing. There was just misery.”

This is unfortunately was a story that we heard a lot. Youth were on a detour away from well-being and experiencing this horrible distress. But, what they also talked about was what the path was to well-being. And what it required is the out of their context of trauma, they needed adults who were able to establish something we called relational safety with them. That was where the youth were being seen. They were being understood, they felt embraced. They were being supported. They felt the commitment from adults in their lives and they felt that they were receiving love even. So, one participant said about a woman who was a part of her church who she felt really was a beacon of hope and light for her when she was going through a hard time. She said:

“She was the only person that wasn't afraid to touch my hair. He did my hair and makeup. Everyone else was afraid to be in my vicinity because I was like, ‘I don't even know. Damaged goods is what I felt like.’ But she just found me as a child of God.”

So, the sense of ease and goodness in a relationship – that was absolutely necessary, as sort of the first step on this road to well-being for the young people. And if they were able to have that kind of relational safety with adults in their lives, then what they developed was trust. …Which seemed sort of like common knowledge that, ‘Yeah, of course, we want young people to trust the adults around them.’

But this is really critical that the participants described that this feeling that they were able to arrive at, once they had relationships that genuinely were safe for them. And it wasn't just safety in terms of not being hurt, it had to be more than that. That was just the bare minimum to have adults who weren't harming them. That was too low of an expectation. There needed to be extra commitment, extra support, extra love and when they felt trust, then they had confidence.

They felt connected to other people and really importantly, they felt like they were open to healing from what they had been through. There was this sort of key that was unlocking their ability to process and heal and be able to move on from this trauma where they started. So, one participant said how she felt in this space of being full of trust for these adults.

“The little things they would do for me, whether it was like, you know, a certain dinner like chili or something that I really liked. Or I'm not a materialistic person, but if they would buy me something sentimental – a necklace that was just for me. Maybe it was just checking in. ‘Like, hey, how are we doing?’ It all just felt genuine.”

So, this person was able to kind of receive the goodness of the relationship from the adults in her life. Whether or not they had ever experienced this, because some of the participants could only talk about safety in a relationship and could only talk about trust in terms of a fantasy. That they knew that that's what they deserved and that they wished for, even if they had never experienced it themselves. But, that was the road to well-being. Those are the steps that were required for them to sort of arrive at this place that was well-being. And how they defined that, was that well-being was a place that was hopeful. It was a fate of being where they had a loving support system, so much so that they started to love themselves. Their guard was down. That they could be authentically themselves. They were at ease. And the most important dimension of this -- the crux of well-being –was that they felt worthy, and they felt free. This idea of freedom…

So many of these brought up ideas of feeling like they were in prison, in certain homes, or that they were shackled. This sense of freedom was just… It was an existential, deep, visceral idea of being able to be themselves, and live a life that was a place to thrive and realize their best potential. That is what well-being was about. I would love to share a couple of quotes. One participant said,

“You just know what you deserve. You know what you want, and you know what you deserve and you know you can give. If someone gives me love, I'll give you love. And if you give me, well, ‘I don't care at all.’ Then I'm gonna give you, ‘I don't care at all.’ But no matter who that person is, everybody deserves to be treated like the next person. They deserve to be treated like they were the one that you have love for.

Then, another participant said:

“You've got to just count your own blessings. You've got to look your life and you've got to say, ‘I'm doing good for myself.’ And then maybe one day you can sit there and pay it back, and you can be that ray of sunshine that you had for someone else. And I hope to be that one day. I hope to be in a position where I can try and help people just like my foster dad helped me.”

The idea of being in relationship giving of yourself, being your full authentic self, being worthy of love, that was sort of the culmination in the ending. This definition, I think really could stand by itself. I think it is different than the way anyone else is describing well-being…the way that these young people talked about their lives.

But it doesn't stand by itself. It really is important in the context of this trajectory, and the process of how to get there. Or that I really think is the brilliance of this, which again is this is not mine. This belongs to these young people. It is their stories. This is the magnificent insight that they had in their own lives, and that they shared and that is what, the way the well-being framework is all about.

## Dr. Verletta Saxon

I love your mindset around social justice principles and bringing in the people who are impacted by this work. Thinking about the meaning of this work and thinking about how we get from trauma all the way over to hope and healing and doing that through these well-being components. Thinking about well-being as a place, as the young individuals have described it as a place that is hopeful, has a support system, where people feel like they belong. They feel worthy and they can experience freedom for themselves in the way that they describe it. All of those things when you have that trauma background and that trauma history, when you're able to focus in on well-being – it is the bridge to getting over to hope, healing, and ultimately thriving in your life.

One of the things that the youth share with you is artwork. Can you describe some of the art they shared, and how it reflects the key aspects of the framework you described?

## Dr. Bridget Colacchio

This is the brilliance of the co-researchers that I worked with to ensure that we included art into the data collection process, the interview process, and was just such a tremendous demonstration of the humanity of the participants. What we did in our interviews is then the participants described their own artwork. Just is so compelling and so powerful. So, I'm glad we did that, and we collected drawings and paintings and sculptures, photographs of tattoos, song lyrics, and rap lyrics. It really was all-encompassing and interestingly, it ended up being the artwork that they created years back when they were in care. So, even for those who had aged out of the system, this is all artwork that was created when they were in care, which tells me that this is really speaking to what their experiences were like. I'd love to tell you about this one pencil drawing.

It shows a pond in the foreground, and then in the background, there are sketched out little pine trees. And a mountain and a moon in the sky, that's kind of partially covered by clouds. And in that pond in the foreground, you can see a very small hand that was sticking out through the water. And next to the pond is one of those trees. And you can see that there is a shadowy figure behind the tree looking at the hand. And the participant who made this described that this was the feeling that she was drowning. There were people who were there watching. They saw it happening, and they were doing nothing.

This was a description of the opposite of relational safety. They told us that relational safety was so important, but we learned about it because we were exposed to the opposite. Where she was not being supported. She was not being believed in what she was experiencing. She was not even being seen or understood in her experiences, and she needed all of that. She needed to be seen. She needed to be helped, to be supported. So that was a really profound description of the need for relational safety.

Another example… Also, most of the art was the opposite of these themes unfortunately, but this was about distress. And this is an ink drawing.

You see the side profile of a young woman who was sort of crouched down, and she has long dark hair that is sort of cascading down her back. And also is hanging in front of her as she is looking at the floor. That's all in black and white. And on her back, is this beautiful pair of wings, and the wings are as big as Thea's. And there is this color gradation of the rainbow going from purple, where the rings meet her back through blue-green, yellow, orange and then a little bit of red at the tips of the wings. But on the floor, dripping from her hair, are all of those colors in reverse. All of the colors from the wings are dripping onto the floor. And she was describing that her experience of being in foster care was all about losing herself and losing her colors. And that everything that was magical about who she was, everything that was unique and authentic and beautiful about who she was, that was there in the wings -- was being drained out of her, because she felt that she couldn't actually be herself. That she had to morph and mold to be able to fit in, so she wouldn't get kicked out of the foster homes that she was in. And ultimately, she just was losing herself.

So, this element of being in distress and not being able to be that beautiful winged creature was so, so compelling.

## Dr. Verletta Saxon

What beautiful imagery, like even the way that you are describing it; it brings up a lot of pictures and action items, so please go on.

## Dr. Bridget Colacchio

Yeah, I'm trying to represent in words, the sort of beauty and the emotion. And that was the thing, that this artwork was absolutely full of to the brim – of raw emotion and raw experience from these young people. It was just stunning. So, the last one is a little more uplifting. The others are heartbreakingly beautiful, and this one, I think is a little more hopeful. A young person who was describing her well-being, and it was in the context of a very loving and safe and trust-filled relationship with a foster parent who became an adoptive parent to her. She's a pretty talented artist, and her parent had asked her to make her something. She said she made something to represent her parents and their relationship, and what this parent has meant to her.

This is a green sort of garden, if you can imagine in the foreground, there are various colors of green with ivy-looking plants and really large leaves, with the variegated light green to dark green; little yellow in there. Wrinkled throughout, there are some pink and red roses and a few daisies. And those appear to be sort of in motion, because coming from the back of the painting, almost like a waterfall would be sort of behind that greenery in the front, there's this waterfall of just light. So, it is yellow and white, and it is moving. And she described that that was sort of the loving energy that came from her parents and that she was being showered in this loving energy. And this this sort of shower of flowers, which to her was thriving. This was the space of beauty and hope, and all of the goodness that we came to understood is what well-being actually felt like for them.

All of the work that we received really was so touching and so expressive and really, really critical, I think, to understanding what the young people 's experience was. Hearing their words describing their own artwork, was just profound.

## Dr. Verletta Saxon

It is interesting to see the empowerment that was even offered by this study. And being able to hear someone tell their story in picture form is amazing. I'm wondering how can we translate what you learned from youth into our own child welfare practices? And what challenges did the youth share with you, and what was their advice on how we could better support their well-being?

## Dr. Bridget Colacchio

This is so important, and I know that this is the focus of the work that you and others are doing, as everything we can to kind of learn about the experience of people in the system, but for the purpose of making it better. And that really was the purpose of the research that I have done, and every single participant and the co-researchers who I worked with. I asked them, “Why are you doing this? Why do you want to be a part of this study? And they all said,

“I don't want other people to experience what I experienced. I need to tell my story, and I hope someone believes my story, because it needs to get better. And please tell people who have power. Please tell people who are in charge what we said.”

This is the most important part -- is what does this all mean. Because I think it starts with making an effort to ask and listen to, and believe kids, and anyone else who is directly being touched by, being impacted by these systems. We have to start by believing people. We have to ask them how are things really, truly are. We have to ask them the right questions. I know that some well-being surveys and checklists are asking, ‘Are you taking your medicine? Do you have a bed to sleep in at night? How many absences have you had from school?’

Those are all really important things, but that is the bare minimum and barely scratching the surface of a human being's experience of their life. I think we have to ask the right questions. And then when people tell us what their life is like, we have to believe them. That is the start. My hope is that having done that, having done just that with this research, there is an opportunity to now revise the questions we ask, revise the tools that we use to measure how well or not someone is doing. Measurement is obviously really important, but if we find that someone's well-being based on their relationships, based on their trust, based on their sense of worthiness and freedom, for example.

If not going so well, so what are we going to do about it? These young people told us that what we need to do about it is focus on their relationships. The key to moving out of the context of trauma and in the direction of well-being, without going off on these detours, was the relational safety, and this was so clear from all of the participants.

Some of whom said that they were in foster homes where they got a game console, and they had new shoes at the start of the school year. And they were never hungry. Yet they felt like they were in prison. They felt like nobody actually wanted them there. They felt like they were a burden, but they were being treated worse than the family dog. On some measures, they had everything that we think they should need. But as far as their relational safety – feeling connected, feeling loved, feeling seen – they had none of that. This group of young people would suggest that – that is the focus.

That should be the focus is on the quality of those relationships. An extension of that… The young people, I think maybe pointed to a little bit, but I have read on to it. Is about how important it is that we are thinking about the well-being of everyone in the system. Not just the youth and the children, which of course is important, but how about the well-being of their biological family? How about the well-being of their foster caregivers? How about the well-being of the casework professionals and the supervisors, and the folks who are making the policies? I think that the trickle-down reality of people feeling overburdened as professionals, people feeling not trusted as caregivers, that trickles down.

The youth are like the canary in the coal mine of a problematic system, where no one feels like a complete and valued human being. We need to do better in how everyone is treated. There is an opportunity to shift what this is like. There is an opportunity for the focus to really be on well-being. To move away from the survival mentality that keeping a young person just alive until they're eighteen or twenty-one, when they exit the system, that we have succeeded. We need to raise our standards. That is not good enough. That is not good enough for my biological children. That is not good enough for my adopted children. That is not good enough for your children. That is not good enough for the children that are in the system. We have to raise the bar.

## Dr. Verletta Saxon

I want to add a little bit here to what I heard you say that we want to ask the right questions. We want to find better measurements and tools and really focus on relationships. One of the foundational pieces was also that you were hearing from people in the system, and you were learning from those people. Going to where to people are actually impacted by the system, instead of administrators saying, “Hey, we have an idea.” You’re actually getting this information and ideas from people impacted by the system, experienced with the system, and then they’re telling you, “These are better ways for us. And we feel like if the system was orchestrated in a way that made it better for us, not just ways that an administrator came up with, we would have fared a little bit different in the system.”

And that providing support to individuals who have walked through child-serving systems, like a child welfare organization, that it is more than just serving their basic needs, it’s more than just making sure they’re in school for education, making sure they have someplace to live, that they have enough to eat.

It’s that we want to pay attention to their relationships one. And two, how we as system players, are also building those relationships, how we talk to these youth, how we, not just asking questions, but how we ask the questions, how we go about building relationships with them, is also something that is important in promoting and supporting their well-being.

## Dr. Bridget Colacchio

Absolutely. And even if you describe that, and I can imagine maybe for someone listening who is in a role like that, that is so exhausting, that is so hard, and I don’t have enough support to do that. It really requires that we think about… If the caregivers and casework professionals are providing that kind of relational support and safety, who do they lean on? Oh, they need someone. OK. We need to expand the lens again. Who do they need to receive that kind of relational safety from? Then, that is challenging on those levels. So, who do they need?

I think that really quickly, the scope needs to be wide open. To include everyone. It just has to include everyone. That is so hard. That is resources and that is training. That is support. That is how big is a caseload. How many resources are available to provide these things? I know they are not easy questions to answer. These are not easy situations, to just kind of snap our fingers and make better. And yet, I think we have a responsibility to do so, even though it is not easy.

## Dr. Verletta Saxon

Absolutely. And that well-being and improving well-being is not just about people who have traumatized. It is really, literally about all of us. That we all have well-being that changes, shifts and moves, because we all continue to experience life. We all need more support. We all need the kind of support that gets us to improved well-being.

## Dr. Bridget Colacchio

Absolutely. Yeah.

## Dr. Verletta Saxon

Well, I’m interested in what you are researching now. Is there a research question that you are hoping to explore in the near future?

## Dr. Bridget Colacchio

Well, I really am excited to take the Way to Well-being Framework, and start testing it out with other folks. So, within child welfare, I think there is an opportunity to see if this resonates with folks in other roles. Particularly biological families, foster caregivers, and the child welfare professionals. I want to complicate the framework by other peoples’ experiences, but then also see if there are some resonant themes that really could help to describe the well-being journey.

I also work in higher education. And so, I see application of this outside of child welfare. Certainly in my previous role, where I worked very closely with faculty, and seeing particularly for my colleagues of color, and other marginalized identities, and seeing their trauma in being a professional in whatever field they are in, and seeing their distrust and their sense of feeling very unsafe in their relationships in their professional field. They are not experiencing well-being, for sure. I think there is relevance of this framework to other populations.

It brings me back to the brilliance of the participants of this study, and how often it is that youth in foster care are just so marginalized, and so invisible. Really, they are just not seen, and have been through so much, and yet their ability to drill down into the core of what it means to be a human being, in the way that they did with the study. I just think it applies broadly. It is about the human experience. It is not tied, I don’t think at all, to child welfare.

I’m just excited to bring this framework to other populations. I think it resonates, and it has promise to provide some direction forward for lots of different groups. And the lives of the young people who contributed to this deserve to be amplified like that. I’m excited to be an ambassador to do that.

## Dr. Verletta Saxon

We are excited for your future work, and we are excited to hear you talk about being an ambassador for this work. As an ambassador, where can people go to learn more about this important topic?

## Dr. Bridget Colacchio

I would love for people to visit drbridgetcolacchio.com and check out this and other studies. Read the work that I am working with so many amazing collaborators in different areas, both on well-being work, and also the heart-spaced research methodology that I mentioned. My colleagues from University of Windsor, and Marist College, and some folks at Loyola University Chicago around pedagogy stuff. I would be thrilled to have people visit, see what we have going on, and please let me know if there is some other way we can collaborate. I would absolutely love to keep this going.

## Dr. Verletta Saxon

Excellent! To recap, we have been talking with Dr. Bridget Colacchio about centering youth well-being in our child welfare practice. Thank you, Bridget, for sharing your research with us today. We look forward to learning more from your research in the future.

## Dr. Heather Fox

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