

## Narrative interventions for children and adolescents in foster care: A scoping review

Yvette Xufré<sup>a</sup>, Meritxell Pacheco<sup>a,\*</sup>, Margarida R. Henriques<sup>b</sup>, Josep Gallifa<sup>a</sup>

<sup>a</sup> FPCEE Blanquerna, Universitat Ramon Llull, Spain

<sup>b</sup> FPCEUP, Universidade do Porto, Portugal

### ARTICLE INFO

#### Keywords:

Foster care  
Children  
Adolescents  
Narrative therapy  
Identity

### ABSTRACT

This study aims to provide a scoping review of the literature on narrative therapy interventions for children and adolescents in foster care. Following PRISMA-ScR guidelines, searches were conducted in PsycInfo, Scopus, PubMed, and Web of Science databases. Of 390 identified articles, 38 met inclusion criteria and were grouped into three categories: studies analyzing minor's narratives to explore experiences and needs ( $n = 22$ ), studies proposing theoretical or practice models without evaluating intervention efficacy ( $n = 10$ ), and studies that evaluated the efficacy of an intervention ( $n = 6$ ). The main findings reveal that children and adolescents in foster care often express a lack of internal locus of control and clear information about their lives, highlighting the need for empowering, resource-focused therapeutic approaches. Therapeutic strategies such as externalization, re-authoring, and life story work were identified as effective tools to provide coherence and continuity for identity development. Potential obstacles to applying these techniques to children and adolescents in foster care were also discussed. The study emphasizes the scarcity of validated programs for this population despite evidence of mental health risks. Future research may prioritize designing and systematically evaluating interventions tailored to their needs.

### 1. Introduction

In a society where the protection and comprehensive development of young people should be a priority, addressing the mental health needs of adolescents in foster care emerges as a crucial factor in promoting their emotional well-being and supporting adaptive psychological, social, and identity development. A progressive society should assume the responsibility of protecting those who start life in adverse conditions, and consequently being more vulnerable to mental health issues. We therefore consider the question of how psychotherapy can also contribute to the protection of these minors.

Children and Adolescents in Foster Care (CAFC) are more likely than the general population to develop psychopathologies and to face challenges in several areas (Alcoriza, 2012; Camps-Pons et al., 2018; Oswald et al., 2010). For this reason, it is necessary to focus on improving their psychological well-being. As will be seen, the vulnerability factors presented by this population are tied to their life stories. Given the relationship between psychological well-being and narrative coherence (Baerger & McAdams, 1999; Waters & Fivush, 2015; Mitchell et al., 2020; Vanaken et al., 2022), addressing life stories could be beneficial

for these individuals. The present work therefore aims to map the existing literature on narrative approaches with CAFC, focusing on the needs emerging from minors' narratives and on the ways these approaches have been applied in research and practice.

The emotional, behavioral, and relational difficulties of children in foster care are understood in the context of their potential experiences of maltreatment (Shuker et al., 2019), separation from their homes and attachment figures (Gil et al., 2012; Camps-Pons et al., 2018), and subsequent adaptation to an artificial living environment which, despite its benefits, often lacks the qualities of a natural upbringing context (Galán, 2014). Although it is evident that the psychological care of CAFC requires adjustments at many levels due to their vulnerability to mental health issues (Galán, 2014; Villalba, 2017), multiple studies highlight insufficient resources to address their specific psychological needs. Similarly, there are few proposals aimed at meeting the unique needs of this population. Based on his own life history, Galán (2014) suggests that an approach that goes beyond symptoms, one which is phenomenological, biographical, contextual and constructivist, would be more beneficial.

Most studies on the psychological well-being or functioning of

\* Corresponding author at: Meritxell Pacheco, FPCEE Blanquerna, Universitat Ramon Llull, C/Císter, 34, 08022 Barcelona, Spain.

E-mail address: [meritxellpp@blanquerna.url.edu](mailto:meritxellpp@blanquerna.url.edu) (M. Pacheco).

<https://doi.org/10.1016/j.childyouth.2026.108853>

Received 26 September 2025; Received in revised form 13 February 2026; Accepted 25 February 2026

Available online 28 February 2026

0190-7409/© 2026 The Authors. Published by Elsevier Ltd. This is an open access article under the CC BY license (<http://creativecommons.org/licenses/by/4.0/>).

minors in foster care focus on direct indicators of emotional, social, and cultural adjustment without relating them to children's self-representations (Torres et al., 2006). However, several authors argue that if identity is a central construct in promoting positive adolescent development and mental health, programs must address it as either a mediator or an outcome (Kurtines et al., 2008; Montgomery et al., 2008; Branje et al., 2021). As early as Kools' (1997) research, it was suggested that adolescents in foster care, in this case, residential, were at greater risk of identity deterioration, internalizing stigma, and behavioral expectations.

We equate identity with the construction of life narratives about the past, present, and future (Bruner, 2004; McAdams, 2001). The creation of this autobiographical meaning promotes psychological well-being and a sense of self-continuity, enabling individuals to connect personal experiences with personality changes and life events in a narrative way (Camia & Zafar, 2021). Since Baerger and McAdams (1999) demonstrated the relationship between well-being and narrative coherence, research in this area has expanded, conceptualizing narrative coherence as a protective factor against adversity. Several authors have concluded that psychological well-being is linked to a coherent and integrated life story, which entails a coherent self-representation (Baerger & McAdams, 1999; Waters & Fivush, 2015; Mitchell et al., 2020; Vanaken et al., 2022). Moreover, many studies (Waterman, 1999; Dumas et al., 2012; Branje et al., 2021) have suggested that identity achievement and psychosocial well-being are positively correlated; identity diffusion or a weaker sense of identity has been associated with psychosocial maladjustment, low self-esteem, aggressive and delinquent behaviors, family conflicts, isolation, anxiety and depressive symptoms, and even substance abuse.

From narrative approaches, brought to psychological and community intervention since the 1980s and formalized in the narrative therapy's foundational text by White and Epston (1990) the metaphor of narrative is used as an organizing element in the construction of the self, and the focus is placed on the processes of identity construction in a temporal dimension. When symptoms appear, the aim is to ensure that the identity of the consultant is not identified with the symptom. Taking this into account, as well as the flexibility of the narrative structure and the constructivist position that assumes infinite possibilities for the construction of experience, intervention techniques focus precisely on this: helping the person gain control over the symptom by seeing it as separate from themselves, and enabling them to reconstruct their life story from a more empowered and symptom-free position. Techniques such as Externalizing, Reauthoring or Remembership Conversations (see, e.g., White 2016) are particularly useful in this regard.

We exist in the present based on the past we construct and the future we anticipate. It is in this sense that interventions designed from a narrative approach are extremely useful for working with CAFC, since these children and adolescents need to coherently integrate into their life history the traumatic events that led them to become children in state care, so that they can make sense of themselves in the present and project themselves into the future. Despite the growing body of research on the relationship between psychological well-being, narrative coherence, and identity, knowledge of this relationship and its clinical applications remains limited, especially in specific populations such as CAFC. Unlike previous reviews, this scoping review updates the evidence base through 2025 across four major databases, integrates three complementary literature streams, narrative clinical analyses of youth experiences, descriptive intervention models, and efficacy evaluations, and emphasizes practice implications for mental health services supporting this vulnerable population.

## 2. Objective

The present study was conducted as a scoping review aimed at mapping the existing literature on narrative approaches in research and practice with CAFC. In line with scoping review methodology, the

objective was not limited to assessing intervention efficacy, but to provide a comprehensive overview of how narrative perspectives have been used to understand and support this population.

Specifically, the review pursued two main objectives: (1) to identify and synthesize the needs, experiences, and psychosocial themes expressed by CAFC through the analysis of their life narratives in research contexts; and (2) to map and describe how narrative approaches have been translated into practice, including both intervention programs and theoretical or practice-oriented models, with attention to their methodological characteristics. Additionally, the review aimed to summarize the main strengths, methodological tendencies, and gaps in the literature on narrative approaches with this population.

## 3. Method

This study followed the methodology outlined in the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) guidelines (Tricco et al., 2018).

### 3.1. Eligibility criteria

The inclusion criteria were defined using the PCC (Population, Concept, Context) framework. The population consisted of minors in foster care or adults who experienced foster care. The concept encompassed narrative therapy interventions, including individual and group approaches, as well as programs that integrate narrative therapy with other therapeutic modalities. The context included any geographical location and care setting, such as clinical, educational, community-based, or residential environments, without restrictions on research design. No limitations were applied regarding publication year or language.

Exclusion criteria:

- Studies focusing exclusively on populations other than individuals who are or have been in foster care (e.g., foster parents, biological families, teachers, social workers)
- Studies whose primary objective was unrelated to therapeutic or psychosocial benefit (e.g., improving academic performance or critiquing institutional frameworks)
- Studies using the term narrative in contexts unrelated to the theoretical framework of this review (e.g., incomplete story tasks for assessment, narrative used merely as a synonym for recounting experiences, or narrative material not linked to therapeutic or psychosocial processes)

The process of locating and selecting articles, including reasons for exclusion during screening and selection phases, is presented in the flow diagram (Fig. 1) following PRISMA-ScR guidelines.

### 3.2. Search strategy

A comprehensive search strategy was developed to identify relevant literature from multiple sources. The following databases were consulted: PsycInfo, Scopus, PubMed, and Web of Science.

The search terms used were: ("Narrative\*" OR "Narrative Analysis" OR "Narrative Therapy" OR "Life Review" OR "Storytelling" OR "Life Story") AND ("Foster Child\*" OR "Foster Adolesc\*" OR "Foster Care Child\*" OR "Foster Care Adolesc\*" OR "Child\* in foster care" OR "Out-of-home Care" OR "Former Foster Youth" OR ("Emerging Adulthood" OR "Middle Adulthood" OR "Older Adulthood" OR "Young Adults") AND "Foster Care")) NOT "Foster Parents".

The strategy excluded the term "foster parents" as the abundance of programs or theoretical models addressing foster families was not the primary focus of this research.

The search was conducted during December 2025.

Flow Diagram of the Literature Search

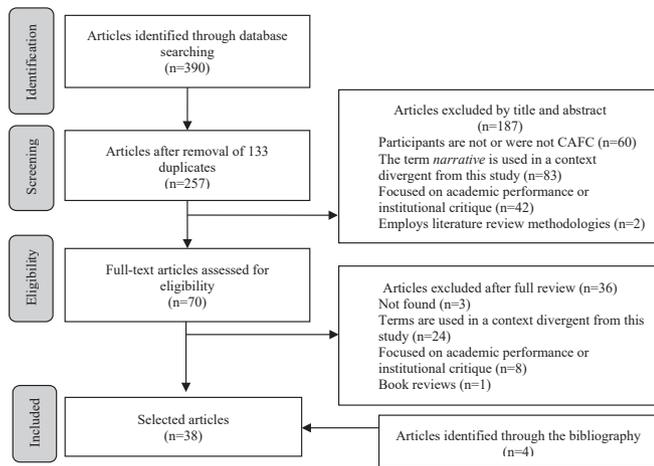


Fig. 1. Flow diagram of the literature search.

### 3.3. Data extraction

A flow diagram (Fig. 1) illustrates the process of article selection.

Screening was conducted using Microsoft Excel. It was done by two researchers working independently on titles/abstracts, with full-text review for potentially eligible articles. Following Krippendorff (2018), a preliminary training phase was carried out through the joint coding of a sample of the material to ensure that observers shared a common interpretative framework and to minimize individual bias. Discrepancies that arose during the independent coding phase were resolved through a process of discussion and consensus among the researchers, a procedure that guarantees intersubjective validity in each of the phases of article selection and analysis.

The search identified 390 articles. After removing 133 duplicates, 257 articles remained for screening. A total of 70 articles met the inclusion criteria, and after thorough examination, 36 were excluded. Additionally, 4 articles were identified through references in other studies. In the end, 38 articles were included in this review.

Given the diverse types of articles, they were divided into three categories according to their primary focus. First, studies centered on the analysis of life narratives as a means of exploring experiences, needs, identity processes, or psychosocial adjustment in this population, without proposing intervention models, were grouped separately ( $n = 22$ ). Second, descriptive studies presenting theoretical models, conceptual frameworks, or practice-oriented proposals for working with this population, but not including efficacy evaluation, were classified as descriptive intervention-oriented literature ( $n = 10$ ). Third, studies aimed at evaluating the efficacy or validating intervention programs were categorized as efficacy evaluation studies ( $n = 6$ ).

For the first and second categories, the same data extraction variables were applied: (i) authors, (ii) study location, (iii) objectives, (iv) design, (v) methodology and instruments, and (vi) main results. For the third category, summaries additionally incorporated: (i) theoretical framework, (ii) sample characteristics, (iii) evaluation instruments, (iv) intervention format, and (v) outcomes.

## 4. Results

### 4.1. Characteristics of the studies

The characteristics of the selected articles are summarized in Tables 1, 2 and 3.

Table 1 presents the 22 studies that analyze life narratives or narratives of foster care experiences to explore how children and

adolescents with care experience construct meaning around their life circumstances. Collectively, these studies seek to identify identity-related dynamics, psychosocial needs, sources of resilience, and the perceived impact of care experiences and systems on their development and well-being. In terms of design, most studies employed cross-sectional approaches, reflecting the exploratory and descriptive nature of the field, with a primary focus on understanding subjective experiences and meaning-making processes. Only one study (Bouillon et al., 2025) employed a longitudinal design, examining how the process and content of narratives about foster care experiences evolve over time and relate to psychological and social adjustment during the transition to adulthood. Methodologically, these 22 studies predominantly employ qualitative approaches, using semi-structured interviews, narrative accounts, or life stories. Data are typically analyzed using thematic, content, or narrative analysis. Only two studies used quantitative methods (Staines & Selwyn, 2020; Bouillon et al., 2025). Overall, the methodological approach reflects an exploratory and descriptive orientation, prioritizing the voices and perspectives of the young people themselves.

Table 2 presents nine studies that describe narrative-based interventions with CAFC, most of which did not employ experimental designs and instead focused on literature reviews or theoretical model descriptions. Only three of these studies involved participants, and only two explicitly employed qualitative methods to explore the use of a specific technique. Participants were primarily minors in foster care or former foster youth, with one study (Draper et al., 2022) focusing on unaccompanied migrant minors, whose findings were considered relevant to foster youth. These studies aim to describe therapeutic techniques, illustrate intervention frameworks, and highlight strategies for promoting personal strengths, identity development, and psychosocial well-being, rather than evaluating intervention efficacy.

Table 3 summarizes six studies that examined narrative therapy interventions. Considerable heterogeneity was observed in study designs and intervention characteristics. While narrative therapy was the theoretical framework sought, one study used solution-focused therapy (Čepukienė et al., 2018), but was included due to its incorporation of narrative therapy aspects. Another study combined narrative and drama therapy (Nsonwu et al., 2015). Additionally, two interventions specifically focused on working with life stories (Schepp et al., 2024; Kontomichalos-Eyre et al., 2025). Three explored overall well-being using qualitative methods such as interviews and focus groups (Haight et al., 2010; Nsonwu et al., 2015; Schepp et al., 2024). Three others assessed specific constructs such as self-efficacy (Čepukienė et al., 2018), resilience (Karibwende et al., 2022; Kontomichalos-Eyre et al., 2025) and emotional and behavioural difficulties (Kontomichalos-Eyre et al., 2025) employing quantitative measures. Intervention characteristics varied. Most were group-based with 8 to 13 participants per group. Session duration ranged from 1 to 3 h, with frequencies varying widely. The shortest intervention spanned three sessions within one week (Čepukienė et al., 2018), while others lasted two to seven months with weekly or biweekly sessions. Only two studies implemented individual interventions, one of which allowed session frequency and overall duration to be adapted to the child's pace, extending up to 18 weeks (Kontomichalos-Eyre et al., 2025).

Across these studies, improvements were reported in areas such as externalizing problems (Haight et al., 2010), self-efficacy (Čepukienė et al., 2018; Nsonwu et al., 2015; Schepp et al., 2024), resilience (Karibwende et al., 2022), and sense of control (Nsonwu et al., 2015; Schepp et al., 2024). By contrast, Kontomichalos-Eyre et al. (2025) did not observe significant improvements in resilience or behavioral and emotional outcomes. Although improvements were frequently described, the diversity of designs and measures limits the comparability of findings.

### 4.2. Needs identified based on CAFC or former foster youth life stories

Several studies highlighted recurring feelings expressed by foster children. A common theme was a perceived lack of an internal locus of control and a sense of agency over their lives (Nybell, 2013; Saldanha,

**Table 1**  
Summary of articles exploring foster care experiences and needs from the perspective of children and youth.

Authors	Study location	Objective	Design	Method	Results
Bizzi et al. (2023)	Italy	To examine the self-perception of former foster youth, with a focus on identifying perceived strengths and difficulties.	Cross-sectional	N = 26 (19-25y) Qualitative methodology: Semi-structured interview analyzed through thematic analysis (Kiger & Varpio, 2020).	Key strengths: (1) Self-awareness and capacity for life reflection. (2) Sense of purpose and future orientation. (3) Sense of mutuality (desire to care for and help others). (4) Gratitude for positive life aspects. Personal difficulties: (1) Feelings of resignation. (2) Negative future outlook. (3) Use of psychological defense mechanisms as emotional denial and humor. (4) Feelings of rejection and relational deprivation. (5) Feelings of anger and fear, and relational distrust.
Bouillon et al. (2025)	USA	To analyze how the process and content of narratives about foster care experiences evolve over time, and how these narrative changes relate to psychological and social adjustment during the transition to adulthood.	Longitudinal	N = 172 Quantitative methodology: (1) Five-Minute Speech Sample (FMSS; Magaña et al., 1986), (2) The Early Trauma Inventory (ETI; Bremner et al., 2000). (3) Brief COPE Inventory (Carver, 1997), (4) Berlin Social Support Scale (BSSS; Schulz & Schwarzer, 2003), (5) The Satisfaction with Life Scale (SWLS; Diener et al., 1985), (6) The Brief Symptom Inventory (BSI; Derogatis, 1993).	This study observed: (1) Higher childhood emotional abuse severity and more foster care placement changes predicted lower initial narrative integration and greater negative affect. (2) Those with higher scores in narrative processing (reflective functioning, integration, complexity) tend to use coping strategies such as positive coping and seeking support. Promoting emotional safety and relational stability from the start of foster care is crucial. Narrative interventions may help youth, particularly those with emotional abuse or multiple placement changes, process difficult experiences and enhance adjustment across life domains.
Croce (2014)	USA	To gain a better understanding of the experiences of former foster youth, focusing on resilience processes.	Cross-sectional	N = 11 (18-26y) Qualitative and quantitative methodology: (1) Resilience Scale (Wagnild & Young, 1996), (2) Hope Traits Scale (Snyder et al., 1991), and (3) Foley Life Story Interview (McAdams, 1995).	They value having a reference person who acts as a "mentor." Information as an influencing factor in the construction of a positive narrative identity. Lack of information or clarity about their past is a barrier. The most concerning topics are relocation and moves, stigma, and the feeling of being different from others.
Edwards et al. (2022)	Canada	To amplify the voices of foster youth themselves and to understand how pathologizing interpretations of their behaviors impact their lived experiences.	Cross-sectional	N= 27 (16-26y) Qualitative methodology: Coding process (Coffey & Atkinson 1996) for the analysis of the interviews.	Frequent placement changes are perceived as unpredictable and emotionally taxing, often leading to feelings of abandonment due to insufficient support and communication. This ongoing state of survival can limit youth development in areas such as academics, social skills, and relationships, as their focus remains on finding safety and belonging. Trauma-related behaviors are frequently pathologized, with youth feeling punished rather than supported, reinforcing stigma and prejudice.
Folman (1998)	USA	To analyze the narratives of foster children experiences during the placement and foster care process.	Cross-sectional	Qualitative methodology: Semi-structured interviews with foster children, analyzed through thematic analysis (Weiss, 1994).	The moment of removal as a traumatic event: feelings of fear and panic due to a sudden and unpredictable event experienced as a threat, not as victims, but as perpetrators. Feelings of loss and abandonment (due to not being able to say goodbye to the family or plan the next meeting). They lack strategies to cope with the trauma experienced that day. Guidelines on how to reduce the risk of trauma on the day of separation.
Havlicek and Lansing (2024)	USA	To identify and retrospectively connect life experiences in young people's narratives and examine representations of child welfare systems and psychosocial interventions.	Cross-sectional	N=12 (21-34y) Qualitative methodology: Semi-structured interviews analyzed through thematic analysis (Braun & Clarke, 2006).	Participants perceived trauma from cumulative adverse experiences as minimized and insufficiently recognized as a risk factor. They described being labeled or treated as "the problem" and reported multiple mental health diagnoses, few of which reflected their

(continued on next page)

Table 1 (continued)

Authors	Study location	Objective	Design	Method	Results
Ie (2022)	Spain	Explore CAFC's perception of family in Spain.	Cross-sectional	N=14 (10-22y) Qualitative methodology: (1) Semi-structured interviews analyzed through thematic coding (Braun & Clarke, 2019), (2) Family Map Drawing Method (Punch, 2002), social network method (Ryan et al., 2014), and memory method (Ennew et al., 2009b).	histories of adversity. Early disruptions of attachments may constitute a source of lasting loss and uncertainty during middle childhood, affecting future transitions and relationships. Having lacked sufficient support and validation in childhood, participants may perceive the world as an unsafe place where no one can be trusted. Engaging with professionals who show interest in them and their histories and are committed to their well-being helps to rebuild connections and repair past insecurity. Most attribute family meanings to behavioral practices and expressions of affection. Family provides stability, continuity, and predictability. They do not want to lose their origins, and biological family serves as a link to those origins. A sense of belonging is at stake when the bonds are not biological. Self-understanding helped the young people feel better, facilitated their use of available support, and reinforced their motivation to build a more positive life. Friendship, especially with peers who have had similar experiences in out-of-home care (OOHC), was highly valued, although friendships with individuals without such experiences were also important, as they represented a sense of "normalcy" outside the care system. Trusting and supportive relationships with professionals were crucial. Relationships with peers within the care system were especially valuable in coping with challenges. Sharing similar experiences with other young people provided a sense of understanding, belonging, and emotional support, helping them feel less alone in their journeys. Having future goals and hopes was seen as fundamental. Although many expressed uncertainty about how to achieve their goals, simply having aspirations was associated with greater well-being. A sense of belonging to the community was also essential. Being part of a group and participating in activities like other young people helped maintain a sense of "normalcy." Managing anger and avoiding emotional dysregulation were seen as key to their socioemotional well-being.
Kaittila et al. (2023)	Finland	To identify factors that promote resilience among youth in care, based on their own experiences and perspectives.	Cross-sectional	N=19 (18-21y) Qualitative methodology: Narrative and thematic interviews, supported by a timeline. Thematic analysis guided by the socio-ecological framework.	Most participants developed resistance identities to cope with adversity, sometimes at the cost of emotional suppression or restricted social networks. Participants used comparisons with biological parents or caregivers to define themselves by who they were not, which served as motivation for personal growth and self-improvement. Participants faced narrative challenges, including difficulty creating coherent stories from chaotic childhood family histories, reconstructing missing information, and self-protecting their foster care histories to feel "normal".
Kelly et al. (2019)	USA	To explore how young people living in residential care settings conceptualize their socioemotional well-being from their own perspective.	Cross-sectional	N= 20 (12-17y) Qualitative methodology: Semi-structured interviews analyzed using constant comparative analysis (Lincoln & Guba, 1985).	
McMillen et al. (2024)	USA	To examine identities and identity-construction challenges of former foster youth through the lens of narrative identity theory.	Cross-sectional	N=12 (21-34y) Qualitative methodology: Semi-structured interviews analyzed by modified grounded theory approach (Charmaz, 2006; Glaser & Strauss, 1967)	

(continued on next page)

Table 1 (continued)

Authors	Study location	Objective	Design	Method	Results
Musgrove and Michell (2018)	UK	To explore how memories related to experiences in the foster care system are constructed, preserved, and forgotten.	Cross-sectional	N=14 (20-70y) Qualitative methodology: Analysis of interviews, records, and institutional reports.	University and work environments offered spaces to live like any young adult, but posed dilemmas about disclosing their foster care past. Participants reported that professionals rarely took the time to get to know them fully and help them make sense of their experiences. They would have needed enduring safe spaces, with responsive professionals and environments that validated their histories without judgment or pathologization. Verbalizing experiences helped organize life and uncover missing information for future processing, while interactions with understanding individuals and non-stigmatizing contexts re-personalized and transformed narrative identities. Memories of the foster system play a crucial role in shaping identity, influencing self-esteem, perceptions of the past, and sense of belonging. Individual, collective, and official narratives can influence how individuals interpret and understand their past and communicate their experiences. Experiences within the foster system vary greatly among individuals.
Nybell (2013)	USA	To explore the inclusion of the voice of the youth in the foster care system and barriers to their participation.	Cross-sectional	N=5 Qualitative methodology: Narrative analysis of interviews using the “direct scribing” technique.	Need to improve the inclusion of youth voices in decision-making. Structural and cultural barriers to youth participation are identified. Structural: (1) Lack of mechanisms to gather and consider the opinions and experiences of youth. (2) Instability in the care environment (rotations, relocations in centers). (3) Lack of resources to implement these measures for youth participation. Cultural: (1) Underestimation of youth opinions. (2) Paternalistic attitudes (doing what is thought to be best for them without considering their perspective). (3) Stigma associated with their situation, which can make their voices less valued and less heard.
Reimer and Schäfer (2015)	Germany	To identify which elements of former foster youths’ personal experiences and life stories influence their outcomes in the foster care system.	Cross-sectional	N=4 (18-24y) Qualitative methodology: Biographical narrative analysis.	Factors contributing to positive outcomes in parenting: (1) Stable and supportive relationships fostering safety and trust. (2) Early intervention and personalized support for emotional or behavioral issues. (3) Positive school experiences, with academic and emotional support, strengthen self-esteem. Factors contributing to negative outcomes: (1) Traumatic experiences and frequent changes in the care environment. (2) Insufficient support and lack of stability. (3) Poor caregiver-child relationships marked by low empathy and understanding.
Soffer-Elnekave et al. (2023)	USA	To explore how former foster youth can alleviate moral injury and foster personal growth and development.	Cross-sectional	N=28 (18-26y) Qualitative methodology: Life Story Interview (Haight et al., 2022) analyzed through Life Story Analysis (Haight et al., 2022) and thematic analysis.	Participants described relationships that provided corrective or positive experiences, rebuilding trust. They emphasized that adults should treat children as “people”, value their opinions, and listen to their experiences and contributions. Peer mentoring programs can offer both current and former foster youth the opportunity to reframe moral injury narratives within supportive relationships, promoting hope and resilience. Meaning-making through service and social engagement, such as

(continued on next page)

Table 1 (continued)

Authors	Study location	Objective	Design	Method	Results
Staines and Selwyn (2020)	UK	To investigate the impact of children's and young people's lack of understanding of the reasons for their placement in OOH on their emotional well-being and sense of security.	Cross-sectional	N= 3314 (4-18y) Quantitative methodology: Validation of an ad-hoc questionnaire on subjective well-being, designed from focus groups of 140 CAFC.	mentoring, community service, or volunteer work, can also help reorient moral injury narratives. Uncertainty about their placement in the system causes insecurity, anxiety, and concerns about the future. Lack of understanding about foster care origins contributes to unease and a lower sense of well-being. Need to improve communication with CAFC, through honesty and openness. Provide clear and age-appropriate explanations to improve well-being and the sense of stability. Do not force participation in LSW as it can be threatening and retraumatizing, but ensure they have the opportunity to ask and receive information about their families when it is most convenient for them.
Steenbakkers et al. (2019)	Netherlands	To investigate how foster youth perceive the impact of traumatic experiences in their lives.	Cross-sectional	N= 13 (15-23y) Qualitative methodology: Episodic narrative interview (Flick, 2018), thematic analysis (Braun & Clarke, 2006).	Traumatic experiences shape youth's identity and relationships, affecting self-image and their ability to form healthy bonds. Emotional and psychological support is crucial. Common coping strategies include: (1) support from family, friends, or caregivers, (2) stress management through activities like sports or arts, (3) avoidance or distraction through addictive behaviors, (4) personal storytelling and journaling, and (5) professional help.
Streissguertl (2025)	Austria	To explore how turning points are narratively constructed as moments in which agency is redefined and negotiated in former foster youth.	Cross-sectional case study	N=1 Qualitative methodology: narrative interviews (Rosenthal, 2015) analyzed through reflexive grounded theory (Breuer et al., 2009) and narrative agency analysis (Lucius-Hoene & Deppermann, 2004; Helfferich, 2020)	Agency is not an individual process but is constructed through relational and narrative dynamics. Empathic support from professionals and helping youth narrate and reorganize their life stories strengthens both identity and agency. Turning points are internal processes, narratively constructed, that require relational support and positive reinforcement from a caring social environment to consolidate.
Tillmann (1997)	UK	To explore the narrative of a woman about her experience in foster care.	NA	NA	Family separation generates emotional and psychological impact. Writing as a significant tool to process and understand the experience of separation. After separation, the concept of family is reconfigured, and an identity is built that integrates both the past and new experiences.
Wagner and Heberle (2024)	USA	To examine how emerging adults with foster care experience construct their narrative identity and the psychological experiences influencing this process.	Cross-sectional	N=9 (18-24y) Qualitative methodology: semi-structured interviews analyzed through reflexive thematic analysis (Braun & Clarke, 2006; Braun et al., 2019).	Participants commonly experienced relational loss, absence, and abandonment, with these ruptures becoming enduring aspects of the self and continuing to shape their present sense of self, regardless of current relationships. A lack of intergenerational knowledge further shaped identity development, as participants had to reconstruct their own life histories, often discovering early experiences later in life, sometimes in contexts where caregivers minimized or reshaped those narratives. Foster care experiences influenced narrative identity through disrupted relationships, gaps in family knowledge, and the need to balance imposed independence with ongoing needs for interdependence and support. Being a "foster care youth" constituted a salient identity, with trauma as a central organizing theme, leading to narratives

(continued on next page)

Table 1 (continued)

Authors	Study location	Objective	Design	Method	Results
Whiting (2000)	USA	To provide a framework for understanding the life stories of children.	NA	NA	of growth and overcoming adversity or to claims that life had been unfairly difficult. CAFC often feel like pawns, lacking control and voice in their lives. When gathering stories from minors, patience, sensitivity, and care are crucial to encourage honest expression. Allowing them to share their stories fosters empowerment. Listening to their perspective can help examine the meanings and beliefs behind their stories, enabling them to reframe parts of their life for different emotions and behaviors.
Whiting and Lee (2003)	USA	To examine the narratives of foster children to understand their experiences and views of the system.	Cross-sectional	N=23 (7-12y) Ethnographic qualitative methodology: Ethnographic analysis of semi-structured interviews.	Children in foster care experience feelings of displacement, affecting their sense of stability and belonging. They often desire contact with their biological family, and separation can lead to loss and confusion. A negative perception of the foster care system, with feelings of lack of control, is common. Greater child participation in decision-making is needed, along with opportunities to express opinions and share their stories through storytelling, art, or life books. Professionals should address key issues like loss, confusion, and ambivalence for greater effectiveness.

2015; Schepp et al., 2024; Whiting, 2000; Whiting & Lee, 2003; Streissguertl, 2025). Additionally, there is a frequent demand for clarity regarding their situation and origins (Staines & Selwyn, 2020). In alignment with Whiting and Lee's (2003) propositions, institutions should revise their procedures to enhance the participation of foster minors, enabling them to feel heard and generating a sense of control. Consequently, some studies emphasize the benefits of psychological interventions aimed at granting children control over their life narratives (Saldanha, 2015; Haight et al., 2010; Whiting, 2000). Importantly, Streissguertl (2025) highlights that agency is not an individual process but is constructed through relational and narrative dynamics, with empathic support from professionals and guidance in narrating and reorganizing life stories strengthening both identity and agency.

The main concerns voiced by CAFC, and therefore priorities in therapy, include stigma, feelings of being different, instability (Croce, 2014; Nybell, 2013; Schepp et al., 2024; McMillen et al., 2024), confusion, loss, and ambivalence (Folman, 1998; Schepp et al., 2024; Whiting & Lee, 2003; Wagner & Heberle, 2024; Havlicek & Lansing, 2024). Professionals who address these significant aspects are deemed more effective in therapy (Whiting & Lee, 2003). Furthermore, separation from biological families is perceived as a traumatic event and requires therapeutic attention to enhance well-being (Folman, 1998; Tillmann, 1997; Whiting & Lee, 2003). Other events may also be traumatic and must be addressed preemptively to reduce or prevent behaviors such as aggression or antisocial tendencies (Vasileva et al., 2018). Given these numerous challenges, CAFC may feel treated as "the problem", receiving multiple mental health diagnoses that do not reflect their histories of adversity (Havlicek & Lansing, 2024). In line with this, their dysfunctional behaviors tend to be pathologized rather than being addressed as part of the trauma. For this reason, it is important to understand the origins of such behaviors and to provide appropriate treatment (Edwards et al., 2022).

Relationships play a crucial role in this population; amidst instability, they require stable relationships (Reimer & Schäfer, 2015; Kaittila et al., 2023; Soffer-Elnekave et al., 2023; Bouillon et al., 2025) and, in general, social support (Steenbakkers et al., 2019). They face a central challenge: a

pervasive mistrust of others, stemming both from histories of abandonment and from experiences of invalidation by adults. The literature highlights the particular need of CAFC for adults and professionals to listen to and validate their life stories (McMillen et al., 2024; Havlicek & Lansing, 2024; Reimer & Schäfer, 2015; Steenbakkers et al., 2019; Streissguertl, 2025; Whiting, 2000). Such validation contributes to the development of trust (Kaittila et al., 2023; Soffer-Elnekave et al., 2023; Havlicek & Lansing, 2024) and, at the same time, supports young people in reorganizing and making sense of their life narratives (Streissguertl, 2025; McMillen et al., 2024; Whiting, 2000).

Several studies indicate that CAFC emphasize the value of forming connections with peers who have had similar experiences, as such relationships promote a sense of understanding and reduce feelings of isolation (Kaittila et al., 2023). In addition, some young people express the importance of maintaining friendships outside the care system, as these are often associated with a sense of normality (Kaittila et al., 2023). Mentor figures, adults who have experienced similar circumstances, are particularly valued, as such relationships can promote hope and resilience (Croce, 2014; Soffer-Elnekave et al., 2023).

Finally, the sense of belonging is often fragile in these children, whether due to non-biological ties (Ie, 2022), frequent changes that create feelings of uprootedness and uncertainty (Whiting & Lee, 2003; Edwards et al., 2022; Havlicek & Lansing, 2024), or unclear information about their origins, which affects identity development (Croce, 2014; Musgrove & Michell, 2018; Wagner & Heberle, 2024; McMillen et al., 2024). Even some CAFC described defining themselves in part through comparisons with biological parents or caregivers by identifying who they did not want to become, which served as motivation for personal growth and self-improvement (McMillen et al., 2024). For this reason, promoting a sense of belonging to the community among this population is particularly important for their development and to reinforce the perception of normality described earlier (Kelly et al., 2019; McMillen et al., 2024).

**Table 2**  
Summary of descriptive articles reviewing narrative interventions with CAFIC.

Authors	Study location	Objective	Design	Method	Results
Cook-Cottone and Beck (2007)	USA	To describe a model for working with life stories.	NA	NA	Life Story Work (LSW) involves constructing or reconstructing an individual's life narrative, integrating internal processes, relationships, and values from their family, community, and culture. It helps organize the sense of self, making it more coherent. The Life Story Book (LSB) is proposed as a tool for working with life stories.
Crenshaw and Tillman (2015)	USA	To explore the use of play therapy and trauma storytelling in children in foster care.	NA	NA	Role of the therapist: to help children find a language based on development and trauma that enables them to create a coherent story that gives expression, meaning, and perspective to their lived experiences. Techniques that allow children to work safely and at their own pace to address traumatic events or life issues: play therapy, artistic work, sand therapy, and animal-assisted play therapy. Use of the externalization process.
Draper et al. (2022)	UK	To explore the use of continuous bonds as a form of inquiry when working with unaccompanied asylum-seeking minors experiencing migration grief.	Cross-sectional case study	N = 2 Qualitative methodology: Transcription of therapeutic conversations.	Use of questions with a response-based perspective rather than an effect-based one. They emphasize how an individual has responded to life events. Encourage reflection on decisions based on self-preservation and safety. Introduction of family members into the story. Questions that connect the past and present, even if these people are physically separated today. Creating proximity with the past cultural and family context. Reduce the specific condition of the refugee child as the main focus of identity.
Holody and Maher (1996)	USA	To demonstrate the effectiveness of the Here and Now Model through case examples.	NA	N = 4 (9-11y) NA	The goal of using lifebooks is to integrate personal identity by helping children process and understand their personal stories, essential for emotional and psychological development. The article proposes a Here and Now process model for effectively using lifebooks: (1) Continuous and updated use of the lifebook over time, allowing children to reflect on their past while recording their present. This promotes a sense of continuity and coherence in the child's life. (2) Retrieving resources that support the child's current life. (3) No specific structure but rather one based on the character and interests of the child, fully personalized. (4) Various ways of talking about the child's life, not only through their family history but through the environment of friends, favorite games, school... allowing the child to lead the process of exploring their life. Construction and reconstruction of their life narratives to highlight their strengths and resilience. Subjects are shown how to recognize their limitations and strengths. They are helped to face everyday obstacles by shifting their thinking toward strengths. Connection to their culture and community. Promotion of collective thinking and the creation of community support networks. Steps: (1) Use difficulties as measures to build positive outcomes. (2) Accept limitations and capacities. (3) Build spiritual awareness. (4) Use the environment as a classroom to teach oneself and others. (5) Establish a way of thinking of collective empowerment.
Kirven (2000)	USA	To describe the Holistic Integration Techniques (HIT) that provide an approach to help adolescents from minority groups to identify their personal strengths and build self-esteem based on their internal characteristics.	NA	NA	These populations tend to use defenses (avoidance, denial, depersonalization, idealization, etc.) that hinder access to lived experiences. Using these defenses, they may lose their sense of self. Description of the PLHB: 21 chapters addressing past, present, and future. There is space for photographs or drawings, and affirmations or questions with a blank space to be completed.
Kliman and Zelman (1996)	USA	To describe the Personal Life History Book (PLHB) for treating children in foster care.	NA	NA	

(continued on next page)

Table 2 (continued)

Authors	Study location	Objective	Design	Method	Results
Maresca and Montali (2022)	Italy	To highlight elements of an intervention to reduce the risk of fragmentation in the withdrawal and placement process of children in foster care.	NA	NA	Strategies to support the child's identity, which is at risk of fragmenting, and help integrate their experiences and find coherence in their sense of self: <ul style="list-style-type: none"> <li>• Creating a safe, stable environment to ensure emotional stability and a sense of continuity.</li> <li>• Collaborating with foster and biological families for a shared understanding of the child's emotional well-being.</li> <li>• Using symbolic play and dramatization to represent experiences and organize the child's inner world.</li> <li>• A notebook that compiles the child's biography and an album to be developed with the foster family.</li> <li>• Use of the metaphor "the cloud of worries" to externalize and manage concerns.</li> </ul>
Reid (2022)	Australia	To analyze tensions in integrating therapeutic approaches in working with foster children and their caregivers.	Theoretical analysis	NA	There is a need to integrate therapeutic, educational, and social support to address the complex needs of children and caregivers, though institutional and structural barriers often limit collaboration. In practice, therapeutic integration happens, but research is scarce. Combining narrative therapy with attachment concepts creates tension between the therapist's "knowing" (attachment) and "not knowing" (narrative) stances. Narrative therapy values the child as an expert of their own experiences, highlighting the power of stories in shaping identity. Therapy becomes a collaborative exploration, aiming to expose alternative narratives (unique outcomes) and foster reauthoring.
Saldanha (2015)	USA	To analyze the narratives of homeless youth by promoting direct scribing techniques to effectively address their needs.	Cross-sectional	N= 16 (16-24y) Qualitative methodology: Direct scribing.	Giving foster youth a voice and authentically reflecting their experiences is crucial to addressing their needs. Allowing them control over the narrative process empowers them, making them feel heard, which is profoundly transformative.
Vasileva et al. (2018)	Germany	To explore programs aimed at reducing aggressive-delinquent behavior in adolescents who have experienced violence or abuse.	NA	NA	The article evaluates the effectiveness of four interventions: trauma-focused cognitive-behavioral therapy, narrative exposure therapy for violent offenders, the Youth Relationships Project, and the Life Story Intervention. Effective components include: (1) psychoeducation on violence's origins and effects, and (2) the narrative approach, which organizes traumatic memories into autobiographical memory and promotes habituation. Addressing trauma is often essential to reduce aggressive behavior. Youth motivation to participate can be a challenge, and there is limited systematic research, with studies focusing on varied aggression concepts and sample groups.

#### 4.3. Intervention strategies: Setting and therapeutic techniques

Several studies highlight the importance of attributing meaning and coherence to lived experiences (Cook-Cottone & Beck, 2007; Crenshaw & Tillman, 2015; Withing, 2000; McMillen et al., 2024). These approaches are frequently described as adopting a strengths-based perspective, highlighting individuals' adaptive responses to life events (Draper et al., 2022; Kirven, 2000; Haight et al., 2010) and recognizing CAFC as experts in their own experiences (Reid, 2022). Techniques reported in this context include re-authoring practices and making visible unique outcomes. (Reid, 2022; Karibwende et al., 2022). Numerous studies underscore the impact of lived experiences on identity and advocate for interventions aimed at fostering an integrated and coherent identity (Croce, 2014; Draper et al., 2022; Maresca & Montali, 2022; Musgrove & Michell, 2018; Steenbakkers et al., 2019; Tillmann, 1997; Holody & Maher, 1996; Wagner & Heberle, 2024).

Various techniques allow for safe and child-paced exploration of traumatic events or personal topics, such as symbolic play (Maresca & Montali, 2022), play therapy, art-based approaches, sand therapy, and

animal-assisted play therapy (Crenshaw & Tillman, 2015). Establishing a trusting relationship is crucial before initiating therapeutic work (Haight et al., 2010). Staines and Selwyn (2020) caution against forcing children to participate in LSW, as it may be threatening or re-traumatizing. Instead, they recommend ensuring opportunities for children to ask questions and access information at their own pace. The process of building a trusting relationship is also described in connection with professionals' validation of children's life stories without judgment or pathologization (Streissguertl, 2025; McMillen et al., 2024). The therapist's stance is characterized in several sources as involving empathic listening and recognition of the child's experiences (Kaittila et al., 2023; Havlicek & Lansing, 2024), and, in narrative therapy-oriented work, as grounded in a collaborative, "not-knowing" position (Reid, 2022).

Externalization is described across multiple studies as a technique used in work with CAFC (Draper et al., 2022; Karibwende et al., 2022; Maresca & Montali, 2022). Other reports highlight the role of being listened to and participating in the construction of life narratives

**Table 3**  
Summary of articles evaluating the effectiveness of narrative interventions with CAFc.

Authors	Study location	Theoretical approach	Objective	Study design	N	Evaluation instruments	Format	Results
Čepukienė et al. (2018)	Lithuania	Solution focused therapy	To evaluate the effectiveness of an intervention aimed at increasing self-efficacy among adolescents in foster care.	Quasi-experimental with a control group and quantitative methodology	29 (13-15y) experimental group and 29 control group.	Self-Efficacy Scale (Hamill, 2013) Adolescent Psychological Functioning Questionnaire (Pakrosnis & Čepukienė, 2013).	Group. 9–13 participants per group. 3 weekly sessions, each lasting 1.5 h.	Significant increase in self-efficacy levels in the experimental group. Use of a shared narrative in the group: “train journey toward greater self-efficacy”. Improvements observed in the emotional well-being of adolescents.
Haight et al. (2010)	USA	Narrative and trauma	To evaluate the effectiveness of a mental health intervention in rural settings affected by methamphetamine use.	Experimental with qualitative methodology	N = 15 (7-15y)	Child Behavior Checklist (CBCL) (Achenbach & Rescorla, 2001). Semi-structured post-intervention interviews with CAFc, and open-ended questionnaires for caregivers and community paediatricians.	Individual. 1 session per week for 7 months.	Reduction in externalizing problems. Foundations for the Life Story Intervention: (1) Focuses on building a trusting relationship during the first two months. (2) Centers on understanding and addressing CAFc’s emotional reactions to trauma by co-constructing personal narratives. Special attention is given to the minors’ tolerance. The narrative not only addresses the trauma but also incorporates non-traumatic life events, building a comprehensive life story. (3) Aims to create a sense of control over traumatic events, emphasizing the minors’ adaptive responses.
Karibwende et al. (2022)	Rwanda	Narrative therapy	To evaluate the effectiveness of narrative therapy in enhancing resilience.	Experimental with quantitative methodology.	N=72 (6-15y) 36 control group and 36 experimental group.	Child and Youth Resilience Measure (Liebenberg et al., 2013)	Group. 12 participants per group. 10 weekly sessions, each lasting 90–100 min.	Increased resilience compared to the control group. Reduction in trauma-related symptoms, such as anxiety and depression. Narrative therapy shown to be effective in helping CAFc develop skills to face and overcome emotional challenges. Use of techniques such as re-authoring, externalization, and creating alternative stories.
Kontomichalos-Eyre et al. (2025)	Australia	Based on Therapeutic Life Story Work (TLSW)	To explore the effectiveness of Therapeutic Life Story Work (TLSW) with	Quasi-experimental with a control group and	N=46 (11-17y) 23 control group and 23	Strengths and Difficulties Questionnaire (Goodman,2001).	Individual. 1 session of 1 h per week or every two	TLSW is based on the practitioner having therapeutic skills and experience

(continued on next page)

Table 3 (continued)

Authors	Study location	Theoretical approach	Objective	Study design	N	Evaluation instruments	Format	Results
			children in foster children.	quantitative methodology.	experimental group.	Child and Youth Resilience Measure (Liebenberg et al., 2013)	weeks for 9–18 months, depending on the child's pace.	to support children in safely processing their trauma narratives, managing triggers associated with re-experiencing trauma, and challenging cognitive distortions such as self-blame. It is implemented in three stages: (1) Information gathering and development of the Information Bank. (2) Direct work and internalization. (3) Production of a LSB. The Intervention Group did not show improvements in resilience or prosocial behaviors, nor reductions in behavioral problems or emotional symptoms. A trend toward statistical significance was observed in prosocial skills. Recovery from emotional and neurological harm in CAFC requires long-term therapeutic support and cannot be achieved through a single intervention. Research in this field is complex, due to difficulties in engaging and retaining this population and the challenge of producing change while children's lives remain unstable in placements and caregivers.
Nsonwu et al. (2015)	USA	Narrative and drama therapy	To investigate how the arts can serve as an effective intervention for adolescents transitioning out of the foster care system.	Experimental with qualitative methodology.	N=10 (16-19y)	Techniques of narrative analysis of the focus group	Group. 10 participants per group. 2 sessions per month, each lasting 3 h, over 6–8 months.	Participation in the arts program enhances self-efficacy, improves self-image, and fosters the ability to manage emotions and challenges, as well as creating a stronger sense of control over one's life.
Schepp et al. (2024)	Germany	Based on LSW	To explore the experiences of adolescents participating in a manualized group intervention (ANKOMMEN)	Experimental with qualitative methodology.	N= 48 (12-17y)	Semi-structured interviews analyzed using the focused interview analysis method (Kuckartz and Rädiker, 2020).	Group. 8 participants per group. 8 weekly sessions, each lasting 90 min.	The ANKOMMEN intervention diverges from traditional LSW by concentrating on a specific biographical segment, leaving the family home and

(continued on next page)

Table 3 (continued)

Authors	Study location	Theoretical approach	Objective	Study design	N	Evaluation instruments	Format	Results
								entering residential care, and by employing a structured group format. Key elements of the setting included the co-creation of group norms, confidentiality, voluntariness, and a consistent weekly schedule, all of which fostered a safe and supportive environment. Participants reported that sharing personal experiences in the group promoted emotional relief, increased self-understanding, empathy, self-esteem, and self-efficacy. The intervention also helped clarify future goals, alleviate guilt and confusion, and normalize experiences through peer exchange and mutual understanding.

(Saldanha, 2015), as well as the sharing of personal stories (Whiting, 2000). For example, Nybell (2013) describes the use of direct scribing to support participants in working with stories told about them.

As noted earlier, the sense of belonging significantly influences self-perception. Due to their status as foster children, stigma is a constant reality they face and may impact identity development (Croce, 2014; Nybell, 2013; Edwards et al., 2022; Schepp et al., 2024; Musgrove & Mitchell, 2018; Saldanha, 2015; McMillen et al., 2024). Sharing experiences with peers is described as associated with feelings of normalization, mutual understanding, and reduced isolation (Schepp et al., 2024; Kelly et al., 2019; Kaittila et al., 2023). Group-based formats are therefore frequently represented in the intervention literature. Specifically addressing refugee children, Draper et al. (2022) recommend that their foster status should not become the central aspect of their identity. For this reason, numerous studies employing LSW recommend initiating the process with present-day experiences, thereby ensuring that the young person's everyday life is meaningfully incorporated into their personal narrative (Kliman & Zelman, 1996; Holody & Maher, 1996).

The use of LSB (Cook-Cottone & Beck, 2007; Kliman & Zelman, 1996; Whiting & Lee, 2003) or adapted tools (Maresca & Montali, 2022) is also documented. Institutions, often in collaboration with families, collect the necessary materials and information for these books.

#### 4.4. Challenges to implementation

Several obstacles can arise when working therapeutically with CAFC. Some proposals are hindered by the structural limitations of the foster care system, such as the implementation of preventative interventions at the time of family separation to reduce trauma (Folman, 1998; Maresca & Montali, 2022) or relational interventions involving biological families (Maresca & Montali, 2022). Additionally, the lack of

comprehensive biographical information on foster children may pose challenges (Croce, 2014; Musgrove & Michell, 2018). Staines & Selwyn (2020) highlight the importance of improving institutional record-keeping.

The characteristics of this population can also create difficulties. Broadly speaking, CAFC may employ defense mechanisms (e.g., avoidance, denial, depersonalization, idealization) that hinder access to lived experiences and so complicating therapeutic work (Kliman & Zelman, 1996; Bizzi et al., 2023). Vasileva et al. (2018) noted that youth motivation to engage in therapeutic programs may be problematic. This can slow the therapeutic process given that, as previously emphasized, a trusting relationship must precede any exploration of life stories (Haight et al., 2010; Kaittila et al., 2023; Havlicek & Lansing, 2024). The child's willingness is crucial for effective intervention (Staines & Selwyn, 2020). In various interventions, it is recommended that practitioners respect the participant's pace, thereby fostering a sense of control and strengthening the relationship with the adult (Crenshaw & Tillman, 2015; Saldanha, 2015; Staines & Selwyn, 2020; Kontomichalos-Eyre et al., 2025). In the group intervention implemented by Schepp et al. (2024), participants appreciated the freedom to choose whether or not to engage, without feeling pressured. When the environment was perceived as safe and relaxed, open expression was encouraged, free from fear of judgment. The initial reluctance to open up emotionally to an adult may be more easily overcome in a group setting with peers undergoing similar experiences.

## 5. Discussion and conclusions

This scoping review highlights a growing interest in exploring the voices and experiences of children and adolescents in foster care. Whiting and Lee (2003) observed that earlier research analyzed

children's perceptions in different ways, either retrospectively examining foster care experiences or focusing on specific aspects, such as improving care practices or comparing biological and foster families. Folman (1998) noted that while previous studies clarified certain aspects of how minors perceive foster care, researchers largely agreed that understanding their perspective remained limited. Thus, more recent studies prioritize exploring foster minors' experiences, emotional needs, and integrative processes from their perspective. This study aims to collect therapeutic strategies and techniques as well as processes and themes that CAFC themselves deem significant for therapeutic exploration, bringing together studies that analyze life narratives, descriptive practice-oriented models, and evaluations of narrative-focused interventions.

As Vasileva et al. (2018) highlighted, few programs have been systematically evaluated. Many studies describe working methods or interventions without measuring their effectiveness or providing outcome data. This is surprising, given the extensive evidence on mental health risks within this population. Therefore, further research is needed to evaluate existing interventions and design specific programs, which, as observed, remain scarce. A strength of the studies reviewed is the prevalent use of qualitative methodologies, such as interviews, which provide deeper and less reductionist insights into children and adolescents' experiences. This approach also provides a broader perspective on subjective well-being and emotional needs. To assess intervention outcomes, it is valuable to include caregivers and educators as informants, as Haight et al. (2010) did. This offers a more comprehensive perspective by considering both the child's internal processes and observable behavioral changes in their immediate environment.

The development of therapeutic programs for CAFC cannot disregard their life stories, including traumatic events (Folman, 1998; Crenshaw & Tillman, 2015; Haight et al., 2010; Maresca & Montali, 2022; Reimer & Schäfer, 2015; Edwards et al., 2022), which shape their identity and relational patterns (Steenbakkens et al., 2019; Bizzi et al., 2023; Wagner & Heberle, 2024). Other critical themes include sense of belonging (Croce, 2014; Ie, 2022; Musgrove & Mitchell, 2018; Whiting & Lee; Edwards et al., 2022; Kelly et al., 2019; Wagner & Heberle, 2024; McMillen et al., 2024), stigma (Croce, 2014; Nybell, 2013; Edwards et al., 2022; Schepp et al., 2024; Musgrove & Mitchell, 2018; Saldanha, 2015; Havlicek & Lansing, 2024), feelings of being different (Croce, 2014; Schepp et al., 2024; Kelly et al., 2019; McMillen et al., 2024), ambivalence (Folman, 1998; Whiting & Lee, 2003; Wagner & Heberle, 2024), and lack of control over their lives (Nybell, 2013; Saldanha, 2015; Whiting, 2000; Whiting & Lee, 2003; Schepp et al., 2024). The inclusion of longitudinal studies or studies with former foster youth further underscores how these themes persist over time and how they continue to influence adaptation into emerging adulthood.

Interventions should aim to enhance social support (Croce, 2014; Reimer & Schäfer, 2015; Steenbakkens et al., 2019; Kelly et al., 2019; Kaittila et al., 2023; Streissguertl, 2025; Soffer-Elnekave et al., 2023) and strengthen internal locus of control and sense of agency over their lives (Saldanha, 2015; Haight et al., 2010; Whiting, 2000; Schepp et al., 2024). Findings from recent narrative programs and LSW interventions suggest that when children are actively involved in constructing and revisiting their stories, they can experience an increased sense of control and continuity. Narrative therapy allows children to be recognized as experts in their lives (Reid, 2022; Kelly et al., 2019; Saldanha, 2015), fostering meaning-making (Cook-Cottone & Beck, 2007; Crenshaw & Tillman, 2015) and focusing on the inherent strengths that have helped and will continue to help them navigate experiences in their lives (Draper et al., 2022; Kirven, 2000; Haight et al., 2010).

From these findings, several practical recommendations emerge. First, the therapeutic relationship is essential, especially for minors in foster care with attachment disruptions. Establishing a secure bond is essential before addressing traumatic experiences. Therapists must respect the child's pace and autonomy in exploring their life stories (Haight et al., 2010; Staines & Selwyn, 2020). When it has not yet

established a solid foundation, symbolic play and creative approaches can facilitate safe exploration and processing of experiences (Crenshaw & Tillman, 2015; Maresca & Montali, 2022). These findings suggest that flexibility in session length and frequency, as well as opportunities for young people to choose their level of participation, may support engagement and help protect against re-traumatization.

To foster meaning-making and coherence, techniques such as re-authoring and making unique outcomes visible help CAFC to reinterpret their experiences from a strengths-based perspective (Reid, 2022; Karibwende et al., 2022). Exercises that emphasize adaptive responses to life challenges reinforce resilience and resources (Draper et al., 2022; Kirven, 2000). Externalization, which separates problems from the child's identity, enhances control and coping mechanisms (Draper et al., 2022; Karibwende et al., 2022; Maresca & Montali, 2022). These practices position individuals as active agents in their narratives, reducing their sense of helplessness (Nybell, 2013; Saldanha, 2015; Whiting, 2000; Whiting & Lee, 2003; Kelly et al., 2019). Evidence from recent interventions with foster youth suggests that these narrative practices can be feasibly integrated into both individual and group formats, although more rigorous outcome data are still needed. Available outcome studies, despite their heterogeneity, indicate that narrative-informed programs may support improvements in self-efficacy, resilience, and externalizing problems (Čepukienė et al., 2018; Haight et al., 2010; Karibwende et al., 2022; Kontomichalos-Eyre et al., 2025), while also underscoring that change is not uniform across domains and that some interventions show limited quantitative effects (Kontomichalos-Eyre et al., 2025).

Interventions may strengthen minors' connections with their community and maintain social support (Croce, 2014; Reimer & Schäfer, 2015; Steenbakkens et al., 2019; Kelly et al., 2019; McMillen et al., 2024). Narrative tools, including LSB (Cook-Cottone & Beck, 2007; Kliman & Zelman, 1996; Whiting & Lee, 2003; Maresca & Montali, 2022), can bolster a sense of belonging (Croce, 2014; Ie, 2022; Musgrove & Mitchell, 2018; Whiting & Lee) and reduce stigma (Croce, 2014; Nybell, 2013). By reframing the concept of family and integrating past and present experiences, minors in foster care can develop a cohesive identity. Therapists should support foster children and their families in constructing a narrative where foster care becomes a part of, but does not define, the child's life story (Holody & Maher, 1996). Group therapy may constitute a valuable approach for fostering intrapersonal and interpersonal understanding, encouraging emotional expression, and reducing stigma (Schepp et al., 2024).

This review mapped the available evidence, highlighting key themes, therapeutic techniques, and implementation challenges, while underscoring the need for more systematic research that includes diverse populations and perspectives from children, caregivers, and practitioners. The literature revealed significant gaps that we consider for future research. Few studies assessed outcomes longitudinally, included diverse samples, or compared therapeutic models, and structural barriers within foster care systems or cross-cultural considerations received limited attention. Moreover, only 16% of studies ( $n = 6$ ) evaluated intervention efficacy, with considerable heterogeneity in designs and outcome measures. The evidence remains fragmented, which constrains conclusions about effectiveness. For future research we recommend prioritizing longitudinally and randomized controlled trials of group- and individual-based narrative interventions, assessing narrative coherence, agency, and long-term resilience in diverse samples of CAFC.

In conclusion, CAFC face a complex reality of emotional and relational challenges that demand carefully tailored interventions. Promising therapeutic approaches emphasize secure relationships, recognition of minors as agents of their narratives, and validation of their experiences through strengths-based storytelling. Integrating their past is essential for strengthening identity, reducing stigma, and fostering belonging and continuity. However, the limited research on these interventions highlights the importance of exploring and evaluating specific programs that address the mental health vulnerabilities of

foster children, enhance their inner resources, and support networks, which may ultimately contribute to their holistic well-being.

## Funding

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

## Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

## Acknowledgements

We would like to thank James McCue for his assistance with proofreading.

## Ethical considerations

Not applicable. This study does not involve human participants, human data, or human tissue.

## Data availability

No data was used for the research described in the article.

## References

- Alcoriza, F. (2012). El bienestar del menor acogido en familia extensa. Un estudio de casos sobre la influencia de las visitas de los padres biológicos durante el acogimiento. *Quaderns de Ciències Socials*, 23, 3–31. <https://roderic.uv.es/bitstream/am/handle/10550/36698/3-31.pdf?sequence=1>.
- Baerger, D. R., & McAdams, D. (1999). Life story coherence and its relation to psychological well-being. *Narrative Inquiry*, 9(1), 69–96. <https://doi.org/10.1075/ni.9.1.05bae>
- Bizzi, F., Cardinali, P., Cavanna, D., & Migliorini, L. (2023). Beyond the Family Fostering Experience: A Qualitative Study on the Perceptions of the self and One's own history in Italian Care Leavers. *Adoption Quarterly*, 27(1), 51–66. <https://doi.org/10.1080/10926755.2023.2198519>
- Boullion, A., Linde-Krieger, L. B., Sher-Censor, E., & Yates, T. M. (2025). Narrative development among emerging adults who aged out of foster care: Patterns and implications for adaptation. *Children And Youth Services Review*, 172, Article 108268. <https://doi.org/10.1016/j.childyouth.2025.108268>
- Branje, S., De Moor, E., Spitzer, J., & Becht, A. (2021). Dynamics of identity development in adolescence: A decade in review. *Journal of Research on Adolescence*, 31(4), 908–927. <https://doi.org/10.1111/jora.12678>
- Bruner, J. (2004). The narrative creation of self. In L. E. Angus, & J. McLeod (Eds.), *The handbook of narrative and psychotherapy: Practice, theory and research* (pp. 3–14). Sage Publications.
- Camia, C., & Zafar, R. (2021). Autobiographical meaning making protects the sense of self-continuity past forced migration. *Frontiers in Psychology*, 12, Article 618343. <https://doi.org/10.3389/fpsyg.2021.618343>
- Camps-Pons, S., Castillo, J. A., & Cifre, I. (2018). Apego y psicopatología en adolescentes y jóvenes que han sufrido maltrato: Implicaciones clínicas. *Clínica y Salud*, 29(2), 151–155. <https://doi.org/10.5093/cl2014a6>
- Čepukienė, V., Pakrosnis, R., & Ulinskaitė, G. (2018). Outcome of the solution-focused self-efficacy enhancement group intervention for adolescents in foster care setting. *Children and Youth Services Review*, 88, 81–87. <https://doi.org/10.1016/j.childyouth.2018.03.004>
- Cook-Cottone, C., & Beck, M. (2007). A model for life-story work: Facilitating the construction of personal narrative for foster children. *Child and Adolescent Mental Health*, 12(4), 193–195. <https://doi.org/10.1111/j.1475-3588.2007.00446.x>
- Crenshaw, D. A., & Tillman, K. S. (2015). Trauma narratives with children in foster care: Individual and group play therapy. In D. A. Crenshaw, & A. L. Stewart (Eds.), *Play therapy: A comprehensive guide to theory and practice* (pp. 262–275). The Guilford Press.
- Croce, M. (2014). *Youth aging out of foster care: A study of youth sense of hope*. Union Institute & University of Vermont. PhD thesis.
- Draper, A., Marcellino, E., & Ogonnaya, C. (2022). Narrative therapy and continuing bonds enquiry with refugees and asylum seekers: Bridging the past and the future. *Journal of Family Therapy*, 44(4), 520–534. <https://doi.org/10.1111/1467-6427.12401>
- Dumas, T., Ellis, W., & Wolfe, D. (2012). Identity development as a buffer of adolescent risk behaviors in the context of peer group pressure and control. *Journal of Adolescence*, 35(4), 917–927. <https://doi.org/10.1016/j.adolescence.2011.12.012>
- Edwards, T., King, B., Risidore, J., & Parada, H. (2022). Many households but never a home: Stories of resistance from Black youth navigating placement instability in Ontario's child welfare system. *Journal of Youth Studies*, 26(9), 1219–1239. <https://doi.org/10.1080/13676261.2022.2080539>
- Folman, R. D. (1998). I was taken. *Adoption Quarterly*, 2(2), 7–35. [https://doi.org/10.1300/j145v02n02\\_02](https://doi.org/10.1300/j145v02n02_02)
- Galán, A. (2014). Tratamiento psicológico de niños y niñas y adolescentes en acogimiento residencial, aportaciones a un campo específico de intervención. *Papeles del Psicólogo*, 35(3), 201–209. <https://dialnet.unirioja.es/servlet/articulo?codigo=4839340>
- Gil, M. D., Molero, R. J., Ballester, R., & Sabater, P. (2012). Establecer vínculos afectivos para facilitar la resiliencia de los niños acogidos. *International Journal of Developmental and Educational Psychology*, 2(1), 337–344. <https://www.redalyc.org/pdf/3498/349832339035.pdf>
- Haight, W., Black, J. E., & Sheridan, K. (2010). A mental health intervention for rural, foster children from methamphetamine-involved families: Experimental assessment with qualitative elaboration. *Children and Youth Services Review*, 32(10), 1446–1457. <https://doi.org/10.1016/j.childyouth.2010.06.024>
- Havlicek, J., & Lansing, J. (2024). "I Want everybody to know as much of my Life Story as they can": Life Stories of Former Foster Youth. *Child Maltreatment*, 30(2), 278–290. <https://doi.org/10.1177/10775595241268194>
- Holody, R., & Maher, S. (1996). Using lifebooks with children in family foster care: A here-and-now process model. *Child Welfare: Journal of Policy, Practice, and Program*, 75(4), 321–335.
- Ie, J. (2022). The concept of family: Perspectives of spanish young people in foster care. *Child & Family Social Work*, 28(2), 503–514. <https://doi.org/10.1111/cfs.12980>
- Kaaitila, A., Alin, M., Leinonen, L., Kraav, S., Vornanen, R., Karukivi, M., & Anis, M. (2023). Factors supporting resilience during out-of-home care: Experiences of former child welfare clients in Finland. *Child & Family Social Work*, 28(4), 1121–1130. <https://doi.org/10.1111/cfs.13031>
- Karibwende, F., Niyonsenga, J., Nyirinkwaya, S., et al. (2022). A randomized controlled trial evaluating the effectiveness of narrative therapy on resilience of orphaned and abandoned children fostered in SOS children's village. *European Journal of Psychotraumatology*, 13(2). <https://doi.org/10.1080/20008066.2022.2152111>
- Kelly, C., Anthony, E. K., & Krysik, J. (2019). "How am I doing?" narratives of youth living in congregate care on their social-emotional well-being. *Children and Youth Services Review*, 103, 255–263. <https://doi.org/10.1016/j.childyouth.2019.06.001>
- Kirven, J. (2000). Building on strengths of minority adolescents in foster care: A narrative-holistic approach. *Child and Youth Care Forum*, 29(4), 247–263. <https://doi.org/10.1023/a:1009496730434>
- Kliman, G. W., & Zelman, A. B. (1996). Use of a personal life history book in the treatment of foster children: An attempt to enhance stability of foster care placements. In A. B. Zelman (Ed.), *Early intervention with high-risk children: Freeing prisoners of circumstance* (pp. 105–124). Jason Aronson.
- Kools, S. (1997). Adolescent identity development in foster care. *Family Relations*, 46(3), 263–271. <https://doi.org/10.2307/585124>
- Kontomichalos-Eyre, S., Fuller-Tyszkiewicz, M., Browne, J., & McGillivray, J. (2025). An evaluation of therapeutic Life Story Work in residential out of home care. *Children And Youth Services Review*, 178, Article 108539. <https://doi.org/10.1016/j.childyouth.2025.108539>
- Krippendorff, K. (2018). *Content analysis: An introduction to its methodology* (4.ª ed.). Sage Publications.
- Kurtines, W., Montgomery, M., Eichas, K., et al. (2008). Promoting positive identity development in troubled youth: A developmental intervention science outreach research approach. *Identity*, 8(2), 125–138. <https://doi.org/10.1080/15283480801938515>
- Maresca, E., & Montali, C. (2022). L'incontro tra psicologo e bambino piccolo in affidamento: Un sostegno alla sua identità a rischio di frammentazione in un viaggio che attraversa più famiglie. *Terapia Familiare*, 130, 39–61. <https://doi.org/10.3280/tf2022-130003>
- McAdams, D. (2001). The psychology of life stories. *Review of General Psychology*, 5(2), 100–122. <https://doi.org/10.1037/1089-2680.5.2.100>
- McMillen, J. C., Lansing, J., & Havlicek, J. (2024). Building narrative identity in a context of audience failures: Stories of resistance among young adults formerly in foster care. *Child Abuse & Neglect*, 157, Article 107035. <https://doi.org/10.1016/j.chiabu.2024.107035>
- Mitchell, C., Reese, E., Salmon, K., & Jose, P. (2020). Narrative coherence, psychopathology, and wellbeing: Concurrent and longitudinal findings in a mid-adolescent sample. *Journal of Adolescence*, 79(1), 16–25. <https://doi.org/10.1016/j.adolescence.2019.12.003>
- Montgomery, M., Hernandez, L., & Ferrer-Wreder, L. (2008). Identity development and intervention studies: The right time for a marriage? *Identity*, 8(2), 173–182. <https://doi.org/10.1080/15283480801940115>
- Musgrove, N., & Michell, D. (2018). Remembering and forgetting foster care. In N. Musgrove, & D. Michell (Eds.), *The slow evolution of foster care in Australia* (pp. 87–126). Palgrave Macmillan. [https://doi.org/10.1007/978-3-319-93900-1\\_4](https://doi.org/10.1007/978-3-319-93900-1_4)
- Nsonwu, M., Dennison, S., & Long, J. A. (2015). Foster care chronicles: Use of the arts for teens aging out of the foster care system. *Journal of Creativity in Mental Health*, 10(1), 18–33. <https://doi.org/10.1080/15401383.2014.935546>
- Nybell, L. M. (2013). Locating "youth voice": considering the contexts of speaking in foster care. *Children and Youth Services Review*, 35(8), 1227–1235. <https://doi.org/10.1016/j.childyouth.2013.04.009>
- Oswald, S. H., Heil, K., & Goldbeck, L. (2010). History of maltreatment and mental health problems in foster children: A review of the literature. *Journal of Pediatric Psychology*, 35(5), 462–472. <https://doi.org/10.1093/jpepsy/jsp114>

- Reid, K. (2022). Is a 'both/and' approach to integration possible? a practice reflection on working with children in out-of-home care and their caregivers. *Australian and New Zealand Journal of Family Therapy*, 43(1), 140–150. <https://doi.org/10.1002/anzf.1476>
- Reimer, D., & Schäfer, D. (2015). The use of biographical narratives to explain favourable and unfavourable outcomes for children in foster care. *Adoption and Fostering*, 39(1), 5–20. <https://doi.org/10.1177/0308575914565084>
- Saldanha, K. (2015). Promoting and developing direct scribing to capture the narratives of homeless youth in special education. *Qualitative Social Work: Research and Practice*, 14(6), 794–819. <https://doi.org/10.1177/1473325015570690>
- Schepp, S., Fegert, J., Pfeiffer, E., Witt, A., & Rassenhofer, M. (2024). Framework and effects of the life story work based group intervention ANKOMMEN for adolescents in residential care in Germany: A qualitative analysis of interviews with participants. *Children and Youth Services Review*, 163, Article 107692. <https://doi.org/10.1016/j.childyouth.2024.107692>
- Shuker, L., Sebba, J., & Höjer, I. (2019). Teenagers in foster care: Issues, themes, and debates from and for practice and policy. *Child and Family Social Work*, 24(3), 349–353. <https://doi.org/10.1111/cfs.12650>
- Soffer-Elnekave, R., Haight, W., Nashandi, N. J., Cho, M., Suleiman, J., & Park, S. (2023). Re-orienting narratives of moral injury towards positive development: The experiences of emerging adults with child welfare histories. *Children And Youth Services Review*, 149, Article 106922. <https://doi.org/10.1016/j.childyouth.2023.106922>
- Staines, J., & Selwyn, J. (2020). "I wish someone would explain why I am in care": The impact of children and young people's lack of understanding of why they are in out-of-home care on their well-being and felt security. *Child and Family Social Work*, 25, 97–106. <https://doi.org/10.1111/cfs.12721>
- Steenbakkens, A., Van Der Steen, S., & Grietens, H. (2019). How do youth in foster care view the impact of traumatic experiences? *Children and Youth Services Review*, 103, 42–50. <https://doi.org/10.1016/j.childyouth.2019.05.026>
- Streissguertl, G. (2025). The interplay between turning points and agency among young people with out-of-home care experience. a relational-narrative approach. *Social Work & Society*, 23(1). <https://ejournals.bib.uni-wuppertal.de/index.php/sws/article/view/1173>.
- Tillmann, L. M. (1997). A home of her own: (Writing) a family story of separation and second chances. *Journal of Personal and Interpersonal Loss*, 2(3), 293–303. <https://doi.org/10.1080/10811449708414423>
- Torres, B., Rivero, A. M., Balluerka, N., et al. (2006). Autoconcepto de los menores en acogimiento familiar: Diferencias en función del tipo de acogimiento, historia de crianza y problemática de la familia biológica. *Infancia y Aprendizaje*, 29(2), 147–166. <https://doi.org/10.1174/021037006776789971>
- Tricco, A. C., Lillie, E., Zarin, W., O'Brien, K. K., Colquhoun, H., Levac, D., et al. (2018). PRISMA extension for scoping reviews (PRISMA-ScR): Checklist and explanation. *Annals of Internal Medicine*, 169(7), 467–473. <https://doi.org/10.7326/M18-0850>
- Vanaken, L., Bijttebier, P., Fivush, R., & Hermans, D. (2022). An investigation of the concurrent and longitudinal associations between narrative coherence and mental health mediated by social support. *Journal of Experimental Psychopathology*, 13(1). <https://doi.org/10.1177/20438087211068215>
- Vasileva, M., Petermann, F., Nitkowski, D., & Petermann, U. (2018). Den transgenerationalen Kreislauf der Gewalt durchbrechen. *Kindheit und Entwicklung*, 27(2), 91–101. <https://doi.org/10.1026/0942-5403/a000249>
- Villalba, A. (2017). *Les resistències dels infants i adolescents acollits en CRAEs a l'acompanyament educatiu*. Doctoral dissertation: Universitat Autònoma de Barcelona. <https://ddd.uab.cat/record/187059>.
- Wagner, A. C., & Heberle, A. E. (2024). Exploring the development of narrative identities in emerging adults who have been in foster care. *Children And Youth Services Review*, 164, Article 107868. <https://doi.org/10.1016/j.childyouth.2024.107868>
- Waterman, A. S. (1999). Identity, the identity statuses, and identity status development: A contemporary statement. *Developmental Review*, 19, 591–621. <https://doi.org/10.1006/drev.1999.0493>
- Waters, T. E., & Fivush, R. (2015). Relations between narrative coherence, identity, and psychological well-being in emerging adulthood. *Journal of Personality*, 83, 441–451. <https://doi.org/10.1111/jopy.12120>
- White, M. (2016). *Mapas de la práctica narrativa*. Santiago de Chile: PRANAS Chile Ediciones. Original published in 2007.
- White, M., & Epston, D. (1990). *Narrative means to therapeutic ends*. W.W. Norton & Company.
- Whiting, J. B. (2000). The view from down here: Foster children's stories. *Child and Youth Care Forum*, 29(2), 79–95. <https://doi.org/10.1023/A:1009497110958>
- Whiting, J. B., & Lee, R. E. (2003). Voices from the system: A qualitative study of foster children's stories. *Family Relations*, 52(3), 288–295. <https://doi.org/10.1111/j.1741-3729.2003.00288.x>

### Further reading

- Minnis, H., Millward, R., Sinclair, C., et al. (2006). The computerized MacArthur story stem battery - a pilot study of a novel medium for assessing children's representations of relationships. *International Journal of Methods in Psychiatric Research*, 15(4), 207–214. <https://doi.org/10.1002/mpr.198>