A White Paper on
The Hong Kong Jockey Club Charities Trust
Positive Trajectory Framework:
Promoting Positive Trajectories of Children and Youth in Hong Kong











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Executive Summary

In Hong Kong, some of the most marginalised and underserved children and youth (C&Y) reside in out-of-home care, separated from their families of origin within the Residential Child Care Services (RCCS) system. Subvented and regulated by the Social Welfare Department (SWD) and operated by non-governmental organisations (NGOs), the RCCS provides a continuum of care to more than 4,300 C&Y under the age of 21 (Committee on Review of Residential Child Care and Related Services, 2022). RCCS encompasses both non-institutional, family-like settings, such as small group homes and foster care, as well as institutional settings, including residential child care centres, children's homes, boys' homes, and girls' homes. The circumstances that lead to family separation and voluntary RCCS placement often arise from challenges that compromise a family's capacity to care for their children, including substance abuse, behavioural and emotional issues, domestic violence, poverty, and other familial crises (Social Welfare Department, 2025).

While the RCCS is intended to provide temporary, transitional services prior to reunification with families, more than half of the C&Y in RCCS spend up to five years within these out-of-home settings before discharge. Frequent moves between placements along with limited opportunities, resources, and workforce capacity further hinder their ability to thrive and integrate into their communities (Committee on Review of Residential Child Care and Related Services, 2022, 2023). The 30-year-old RCCS model has reached a critical juncture, particularly in light of incidents of child abuse at a residential child care centre in 2021 (Chui et al., 2023). In response, the SWD formed the Committee on Review of Residential Child Care and Related Services to conduct a comprehensive review, with a focus on service quality, regulation, monitoring, planning, and provision (Committee on Review of Residential Child Care and Related Services, 2022). Key recommendations from this review include adapting services to better align with the evolving needs of C&Y, expanding the workforce, offering professional development and training opportunities, and strengthening accountability and governance infrastructures (Committee on Review of Residential Child Care and Related Services, 2023).

Amid this pivotal moment for RCCS transformation, The Hong Kong Jockey Club Charities Trust (HKJC), in partnership with The Hong Kong Polytechnic University (PolyU) and Chapin Hall, introduced the Positive Trajectory Framework (PTF)©, which is our theory of change to bridge the developmental gaps of disadvantaged C&Y, unite stakeholders, enhance family and community connections, and build both internal and external capacities across the RCCS system. The PTF underpins two five-year HKJC Trust-Initiated Projects (TIPs) with more than $100 million (United States dollars) in funding support: JC Project Bonfire—Small Group Homes (SGHs) (https://jcbonfire.hk), focusing on C&Y in small group homes beginning in September 2023, and JC Project Bonfire—Foster Care, focusing on C&Y in foster homes beginning in September 2025. Both projects leverage the PTF to develop a positive trajectory for the vulnerable C&Y populations in SGHs and foster homes by fostering upwardly mobile developmental pathways, rather than merely providing traditional welfare services, so that C&Y and their communities are empowered to achieve long-term success. This white paper outlines the holistic, actionable, evidence-informed PTF that:

- Addresses the multifaceted developmental challenges faced by C&Y;
- Operationalises five core PTF domains—Health, Trusted Relationships, Social Capital, Sense of Purpose, and Future Navigation Competencies—which are critical for steering C&Y towards positive trajectories in well-being, growth, and long-term success; and

- Implements three innovative PTF interventions—Trajectory Development Coordinator (TDC), Individualised Development Plan (IDP), and Social Capital Platform (SCP)—to address developmental gaps and guide C&Y towards positive outcomes.

Furthermore, this white paper presents two use cases of the PTF in SGHs and foster care, to illustrate HKJC's commitment to ensuring that the PTF is adaptable to evolving needs of C&Y, generalisable across diverse contexts, and scalable beyond RCCS to benefit a broader population of C&Y, both in Hong Kong and internationally.

Theoretical Foundation of the Positive Trajectory Framework (PTF)

The theoretical foundation of the PTF recognises the unique needs and experiences of vulnerable C&Y within the RCCS, drawing upon seminal theoretical frameworks of positive C&Y development from the relevant research literature. In Hong Kong, many C&Y entering RCCS—such as SGHs and foster care—have experienced adversity, including trauma, abuse, and neglect, which impedes their development relative to their peers in the general population. Upon entering RCCS, these developmental disparities are often exacerbated by frequent transitions, such as changes in residence, schools, and caregivers, which profoundly affect C&Y by undermining their sense of stability, belonging, and connections with trusted peers, adults, and their communities. These repeated transitions and destabilising experiences within the out-of-home continuum during C&Y's formative years can create a perfect storm for biopsychosocial instability, difficulties in building and sustaining stable relationships, and compromised well-being overall, potentially delaying, diminishing, or derailing C&Y's positive developmental pathways to successful permanency, whether that be family reunification, or transition to independent adulthood (Chor, 2013).

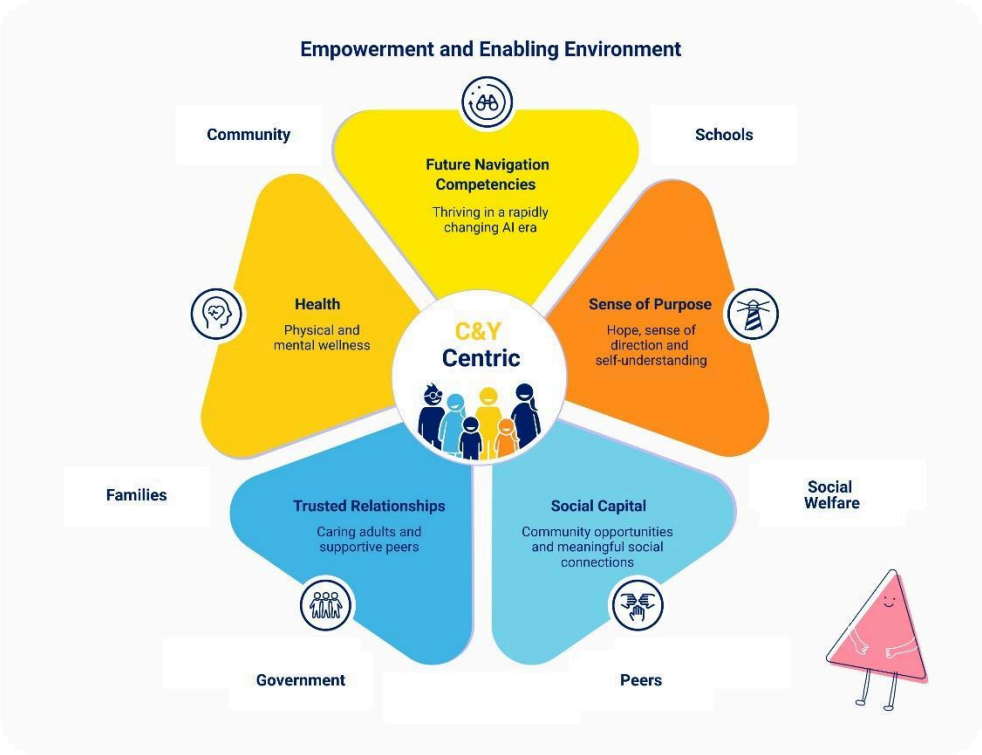
In response, the HKJC PTF develops a holistic, actionable, evidence-informed framework to mitigate the multifaceted challenges faced by C&Y in RCCS. The core assumptions of the PTF emphasise that C&Y's developmental trajectories are adaptive (i.e., not predetermined but fluid) and holistic (i.e., multidimensional, dynamic, and with a gradient for growth). The PTF provides a systematic structure to strengthen C&Y's internal capacities and external support networks to overcome life's challenges and achieve optimal development, personal growth, and long-term success. These tenets of the PTF are grounded in existing theoretical frameworks related to positive youth development, resilience science, and developmental systems theory (Lerner et al., 2013), which accentuate positive adaptation in high-risk, adverse contexts; bring about translational impact on interventions and policies; and aim to promote positive development (Masten, 2014). The relevance of these frameworks to the PTF includes:

- An emphasis on the interactions between individual and community contexts shaping youth development, particularly for high-risk C&Y;
- Recognition of unique individual developmental trajectories for individuals as well as commonly occurring patterns across different C&Y;
- Acknowledgment of C&Y's developmental assets and protective or promotive factors that can foster positive outcomes; and
- Understanding that C&Y's trajectories may converge or diverge under influences from various systems, including social and physical contexts.

The Five PTF Domains: Health, Trusted Relationships, Social Capital, Sense of Purpose, and Future Navigation Competencies

Grounded in the theoretical foundation of positive youth development, resilience, and developmental systems theory, the PTF centres on five critical domains that inform the developmental trajectories of C&Y: **Health, Trusted Relationships, Social Capital, Sense of Purpose, and Future Navigation Competencies** (**Figure 1**). The PTF posits that strengthening these domains fosters C&Y's resilience, personal growth, and long-term success across care settings (e.g., SGH, foster care, community). Developing a holistic understanding of positive development for C&Y necessitates a multidimensional assessment of these domains, while tracking C&Y developmental trajectories requires multiple domains and indicators spanning both positive and negative adjustments over time (Masten, 2014). The five PTF domains embody essential attributes of multidimensionality and responsiveness to longitudinal changes, aligning with empirically supported dimensions of positive youth development, such as the 5 C's: Competence, Confidence, Connection, Character, and Caring (Bowers et al., 2010). These interconnected domains are nested within C&Y's support systems, enabling environments, and social contexts, which include families, peers, schools, communities, social welfare, and the government (**Figure 1**).

Figure 1. The Positive Trajectory Framework (PTF) and Five PTF Domains Critical to C&Y's Positive Developmental Trajectories: Health, Trusted Relationships, Social Capital, Sense of Purpose, and Future Navigation Competencies.



1. Health

The Health domain encompasses C&Y's physical, mental, psychological, behavioural, and emotional well-being. When these fundamental components are balanced, functioning optimally, and

developmentally appropriate to the needs of C&Y, they create a strong foundation for overall health and well-being. This conceptualisation aligns with the Life Course Health Development framework, which emphasises the importance of positive health and well-being constructs, viewing health development as a continuous, adaptive process shaped by multiple ecological determinants including biological, psychological, behavioural, and social factors (Halfon & Hochstein, 2002).

2. Trusted Relationships

The Trusted Relationships domain covers the connections of C&Y with trusted adults (e.g., parents, family members, caregivers, teachers, mentors), peers, and other significant figures in their social networks. These relationships offer indispensable socioemotional support, stability, security, and a sense of belonging. Stable and supportive connections fostered through trusted relationships are important to the positive development of C&Y (Bowers et al., 2010), serving as protective factors for their health and well-being, particularly during adolescence (Whitehead et al., 2019). While there is no universally accepted definition of a "trusted adult" (Whitehead et al., 2019), having access to a trusted adult during childhood is pivotal for building supportive friendships, fortifying resilience against adverse childhood experiences, and increasing access to opportunities for skill development (Ashton et al., 2021).

3. Social Capital

The Social Capital domain, while related to the Trusted Relationships domain, specifically addresses the quality, quantity, and strength of C&Y's diverse social connections, essential for social integration, access to life opportunities, and upward mobility towards positive life outcomes (Pettit et al., 2011). Many different dimensions of social capital exist, such as: social networks, trust and solidarity, mutual aid and reciprocity, social norms, cohesion and inclusion, social participation, civic engagement, information and communication (Community Investment and Inclusion Fund, 2021; Grootaert et al., 2004; Ting, 2012). But three critical types are especially important for C&Y:

i. Bonding social capital (Putnam, 2000): Close-knit connections within a homogeneous group or community, which enhance intra-group cohesion, trust, and reciprocity, and provide emotional support, a sense of belonging, and the mobilisation of collective action.

ii. Bridging social capital (Gittell & Vidal, 1998; Putnam, 2000): Relationships that connect individuals from different backgrounds promote social interaction and integration across heterogeneous groups, facilitate the exchange of information and resources among diverse groups, and encourage inclusion and integration beyond one's immediate circle.

iii. Linking social capital (Woolcock, 2001): Connections across different social strata and power hierarchies that bridge gaps between the powerful and the powerless, which promote equity and enable access valuable resources, information, and support from institutions and formal systems. This is particularly important for young adults transitioning into full adulthood, as it opens pathways to education, employment, and other opportunities.

4. Sense of Purpose

The Sense of Purpose domain posits that C&Y's intrinsic aspirations, motivation, hope, agency, self-direction, decision-making, and personal goals contribute significantly to their overall sense of purpose. A robust sense of purpose is associated with better well-being and serves as a protective factor

against psychopathology (Barcaccia et al., 2023). For C&Y, cultivating a sense of purpose, along with confidence and self-worth, is a critical part of the positive youth development process (Bowers et al., 2010). Moreover, fostering a sense of purpose is linked to improved functioning, increased life satisfaction, and a reduction in depressive symptoms (Chen & Cheng, 2020).

5. Future Navigation Competencies

The Future Navigation Competencies domain covers developmental and age-appropriate competencies related to self-care, problem solving, critical thinking, self-efficacy, education, career planning, and future-oriented skills needed to navigate and adapt to an evolving, complex digital society. These competencies are developed and accumulated over time, and they are vital for older C&Y as they transition from adolescence to independent adulthood. This domain aligns closely with core competencies for C&Y across the world to thrive in an increasingly resource-constrained, inequitable, and challenging environment (Organisation for Economic Co-operation and Development, 2018), positive youth development (Bowers et al., 2010), as well as the skills that youth need to achieve long-term goals and healthy, productive lives, including digital literacy and online safety in this quickly changing era (Casey Family Programs, 2022).

Measurement of the Five PTF Domains in Alignment with the HKJC Hierarchical Model of Impact Measurement

While the PTF is grounded in theoretical frameworks and developed organically to address the needs of C&Y in the RCCS sector, it also aligns with HKJC's overarching agenda to assess collective impact across programme areas (e.g., Fairer Opportunities, Children and Youth in Families etc.). Specifically, measurement of the five PTF domains fits squarely within the HKJC Hierarchical Model of Impact Measurement (Leung, 2024), which examines social impact top-down, from the HKJC level to the programme and project levels, using reliable and valid measures. Under the programme-level purview of HKJC Youth Development & Poverty Alleviation, project-level measures for the five PTF domains in two ongoing HKJC TIPs in SGHs and foster care are vetted and prioritised based on alignment with each domain, empirical evidence of reliability and validity, and contextual and cultural relevance for Chinese C&Y populations, preferably in Hong Kong. **Table 1** lists the measures currently used in the HKJC TIP, JC Project Bonfire—SGHs, to assess outcomes of C&Y in SGHs according to the five PTF domains.

Table 1. Outcome Measures of PTF Domains for JC Project Bonfire—SGHs for C&Y Living in SGHs.

PTF Domain	Indicator	Measure
Health	Self-esteem	Rosenberg Self-Esteem Scale (RSES)
	Negative affect	Positive and Negative Affect Scale (PANAS)
	Positive affect	PANAS
	Psychological distress	Kessler Screening Scale for Psychological Distress (K6)
	Subjective happiness	Subjective Happiness Scale
	Life satisfaction	Overall Life Satisfaction
Trusted Relationships	Relationship with house/ relief parents	Interpersonal Relationship Harmony Inventory (IRHI)
	Connectedness with peers	IRHI
Social Capital	Connectedness with society	Social Connectedness Scale-Revised

PTF Domain	Indicator	Measure
	Connectedness with SGH	Social Capital Scale
	Connectedness with school	Social Capital Scale
	Community support	Community Autonomy Support (CAS)
Sense of Purpose	Hope	Visions About Future (VAF)
	Resilience	Resilience Scale for Children (RS10)
	Youth voice in decision-making	Youth-Adult Partnership (YAP)
Future Navigation Competencies	Self-efficacy	General Self-Efficacy Scale (GSE)
	Proactiveness	Self-Regulation Questionnaire (SRQ)
	Goal attainment	SRQ
	Perceived academic success	Academic Success Scale
	Career and life goals planning and attainment	Career and Live Development Hope Scale

PTF Community-Home Opportunity Structure (COS) Interventions: Trajectory Development Coordinator (TDC), Individualised Development Plan (IDP), and Social Capital Platform (SCP)

While the PTF conceptualises positive trajectories for C&Y across the five domains using reliable and valid measures, HKJC enhances this framework with the Community-Home Opportunity Structure (COS), introducing three specific interventions to positively impact C&Y. The ethos of the COS is rooted in a C&Y-centric, strength-based, holistic, and community-based approach that seeks to uplift the trajectories of C&Y, in contrast to the deficit-focused, clinical, or therapeutic paradigms often prevalent in child welfare and public health interventions. Substantively, the COS applies wraparound principles by providing C&Y and their families with a tight-knit external network of coordinated community supports and resources (Olson et al., 2021), designed to bridge developmental gaps and strengthen internal capacities across the five PTF domains. The three interventions within the COS are the Trajectory Development Coordinator (TDC), the Individualised Development Plan (IDP), and the Social Capital Platform (SCP).

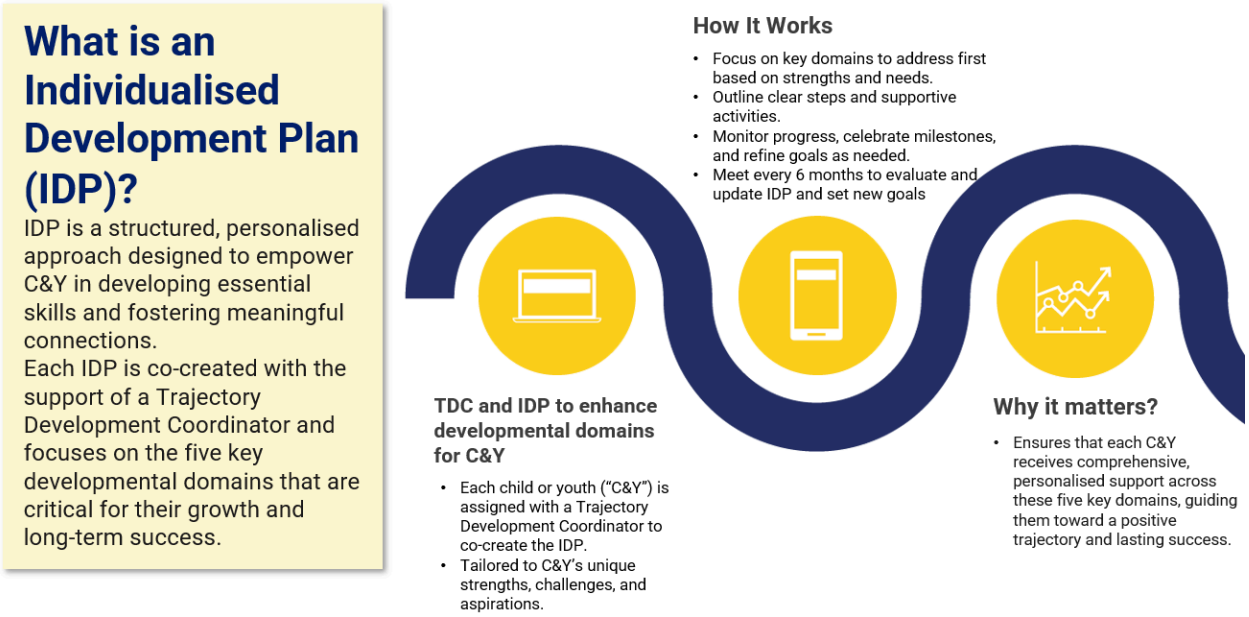
1. Trajectory Development Coordinator (TDC)

The Trajectory Development Coordinator (TDC) is a new role established by HKJC to address a critical gap in the RCCS workforce. This dedicated professional engages with C&Y, advocates for their needs, and amplifies their voice. The TDC identifies the needs and interests of C&Y across the five PTF domains while connecting them to community opportunities, resources, and supports that align with their goals. In the process, C&Y build and solidify their community connections that contribute to improving their individual developmental trajectories. TDCs undergo extensive structured training (**Annex)** by field and research experts to familiarise themselves with PTF concepts, principles, and intervention techniques, which include the IDP and the SCP further described below. TDCs also organise bonding activities for C&Y and their biological parents to strengthen parent-child relationships in service of IDP goals. Following the training, they receive a comprehensive TDC manual and participate in monthly Community of Practice (CoP) sessions. These sessions provide a safe and collaborative learning environment for TDCs to discuss challenges and share solutions with their peers.

2. Individualised Development Plan (IDP)

A core responsibility of the TDC is to engage C&Y in co-creating an Individualised Development Plan (IDP) (**Figure 2**). Tailored to each C&Y and grounded in the five PTF domains, the IDP includes specific assessment questions relevant to each domain, providing a comprehensive understanding of C&Y's needs and strengths. To differentiate the IDP from existing service plans, which often tend to be prescriptive and compliance-driven, the TDC facilitates the development process by incorporating input from the C&Y and feedback from their stakeholders (e.g., caregiver, caseworker, staff). While the TDC assesses C&Y's capacities across all five PTF domains, each IDP highlights two target domains—typically, one area of strength and one area needing additional support—under which personalised goals are identified. Each IDP is structured for a duration of six months, during which the TDC reviews progress towards established goals monthly. At the end of the six-month period, the TDC revisits the IDP with the C&Y to discuss renewing it for another cycle, which includes a new round of assessments and goal setting. By combining a strength-based approach with a focus on supporting the needs of C&Y, the first IDP may aim to reduce developmental gaps, while subsequent IDPs may focus on actualising the unique potential and strengths of C&Y. Over time, the IDP serves as a data-informed tool to streamline administrative processes, track the developmental journey of C&Y across the five PTF domains, and connect community activities and resources with C&Y. A post-discharge IDP is also offered to facilitate the reintegration of C&Y into their home communities.

Figure 2. Highlights of an Individualised Development Plan (IDP).



3. Social Capital Platform (SCP)

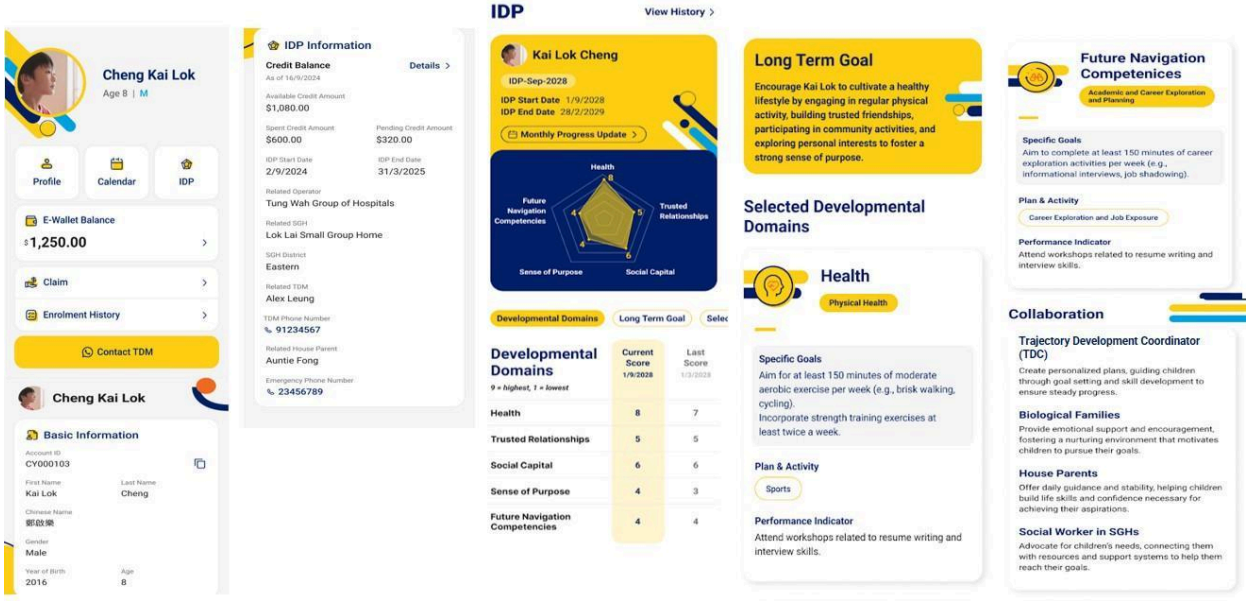
The Social Capital Platform (SCP) is a centralised digital platform (web portal and app) designed to facilitate the management of the IDP process while connecting C&Y with developmental opportunities, community resources, and supports that align with their IDP goals (**Figure 3**). To date, the SCP has brought together more than 170 community partners committed to the HKJC mission through the PTF,

providing community-based, long-term support aimed at enhancing the developmental trajectories of C&Y across the five PTF domains.
The criteria for selecting this expanding network of community partners include:

i. A long-term commitment to supporting C&Y, ensuring ongoing care and assistance beyond their time in the RCCS.
ii. The mobilisation of social and human capital within their organisation and the broader community to address the developmental needs of C&Y.
iii. A dedication to elevating the voices, well-being, and development of C&Y, grounded in a proven record of implementing programmes and initiatives designed to address their unique needs and challenges, empowering them to participate in decision-making processes and shape relevant programmes and services.
iv. The creation of a sense of belonging, meaningful membership, and positive identity by fostering an inclusive environment that nurtures a sense of self and purpose within the community.
v. The provision of age- and developmentally appropriate activities tailored to the specific needs and interests of C&Y, enabling them to grow, learn, and flourish in a supportive setting.
vi. The offering of a diverse range of skill-building activities for C&Y, empowering them to develop practical skills, talents, and abilities necessary for future success and independence.

Operationally, TDCs collaborate with each C&Y to utilise the SCP for browsing, identifying, and enrolling in activities and development opportunities, as well as accessing supporting resources to achieve specific IDP goals related to the two target PTF domains. Various stakeholders (e.g., caregivers, caseworkers, staff) have different levels of access to the SCP, facilitating coordination and collaboration among all parties involved (**Figure 3**). Thus, the SCP serves as a communication tool that connects C&Y with invested stakeholders while providing comprehensive documentation, data monitoring, and tracking of IDP implementation.

Figure 3. Snapshots of a Mock Account on the Social Capital Platform (SCP).



Current Use Case of the PTF in JC Project Bonfire—Small Group Homes (SGHs) (September 2023-August 2028)

SGH Context

In the five-year JC Project Bonfire—SGHs (https://jcbonfire.hk), the target population consists of C&Y aged 4-18 who live in 107 SGHs within the RCCS continuum, operated by 11 NGOs and regulated by the SWD. SGHs are home-based, non-institutional settings embedded within public or subsidised housing estates throughout Hong Kong. Each SGH accommodates six to eight C&Y under the 24/7 care of house parents or relief parents. Additionally, each C&Y is assigned an SGH social worker responsible for providing case management, alongside a referring worker who manages the family case and permanency planning for the C&Y.

Applying the PTF Interventions (TDC, IDP, SCP, and the HKJC Positive Trajectory Fund) in SGHs

JC Project Bonfire integrates TDCs into the existing care models and infrastructure of SGHs (**Figure 4**). Each TDC oversees three SGHs, managing a caseload of up to 24 C&Y. As the primary agents of change trained in the PTF, TDCs engage closely with C&Y within their SGHs and surrounding communities to foster a deeper understanding and cultivate meaningful relationships on three levels: (1) the individual needs and strengths of C&Y; (2) the existing dynamics and cultures of the SGHs influenced by key stakeholders (i.e., families of origin, house parents, relief parents, social workers, referral workers); and (3) the community resources and supports that need to be discovered, leveraged, and integrated.

Through this relationship-building process with C&Y and stakeholders, TDCs initiate the co-creation of an IDP that places C&Y at the centre of goal setting and service planning, emphasising the voluntary nature of participation in the IDP (**Figure 4**). While the formulation of the IDP is guided by semi-structured assessment questions and rubrics aligned with the five PTF domains, TDCs customise the IDP by selecting two target domains for each C&Y and developing tailored IDP goals. Typically, the two target domains consist of one area of relative strength and one area needing additional support. This approach results in the IDP of each C&Y reflecting a unique combination of target domains and goals that are neither prescribed nor fixed, deviating from a top-down, one-size-fits-all approach more common in existing model of SGH operations.

The principles of C&Y voice and co-creation persist from the formulation stage to the implementation stage of the IDP. Specifically, TDCs introduce C&Y to the SCP and assist them in finding, navigating, and selecting activities, programmes, and resources offered by community partners registered on the SCP. Unique to JC Project Bonfire, each C&Y also receives a monthly HKJC Positive Trajectory Fund in the form of HK$2,000 e-credit, which can be utilised for costs associated with participation in activities, programmes, and resources available on the SCP (**Figure 3**). Consequently, TDCs fulfil three proactive roles critical for the successful implementation of the IDP. First, TDCs leverage their local knowledge of community resources and connections to engage community partners that are not currently registered on the SCP but should be included to address the specific needs, developmental gaps, and IDP goals of the C&Y. Second, together with C&Y, TDCs explore previously inaccessible developmental opportunities now made possible by the HKJC Positive Trajectory Fund. Third, TDCs use the SCP to manage the IDP journey of C&Y, track monthly progress towards the IDP goals, and reassess the interest of C&Y in continuing or renewing the IDP.

Figure 4. Intervention components of the PTF in SGHs: TDC, IDP, SCP, and the HKJC Positive Trajectory Fund.



Trajectory Development Coordinator ("TDC")

The program introduces the role of a TDC in Hong Kong's social services, focusing on providing guidance to C&Y, developing **Individualised Development Plans ("IDP")**, and connecting C&Y with diverse community opportunities and resources. The TDC plays a crucial role in identifying the unique strengths and potential of each C&Y, offering tailored support that lays the foundation for their sustainable growth.

JC Positive Trajectory Fund ("JCPTF")

A monthly stipend of up to HK$2,000, with a total allocation exceeding HK$80,000,000 for 3 to 5 years, supports the implementation of **Individualised Development Plans**, enabling young people to pursue their goals and unlock their full potential.

Social Capital Platform ("SCP")

This innovative platform unites over **150 qualified partners and institutes** connected by HKJC to provide structured, long-term support. It helps young people establish a sustainable support network and develop positive identities within the community.

Impact and Implementation of the PTF Interventions in SGHs to Date

To balance the feasibility of implementing the PTF across 107 SGHs with a rigorous evaluation of its impact over five years, JC Project Bonfire uses a stepped-wedge cluster randomised controlled trial (Hemming et al., 2015), in which sets of two to four SGHs from the same NGO are randomly assigned to three clusters. These clusters begin implementing the PTF interventions one year apart in a staggered approach (**Figure 5**). The period from September 2023 to August 2024 marked the baseline year (Year 1) of standard SGH care for all three clusters. As of now, Cluster 1 (36 SGHs) has experienced a full year of PTF interventions from September 2024 to August 2025 (Year 2); while Cluster 2 (38 SGHs) recently began PTF implementation, in September 2025 (Year 3); and Cluster 3 (33 SGHs) will begin in September 2026 (Year 4). Annual data collection occurs at the end of each year and will result in five rounds of data collection by the end of the five-year project.

Figure 5. Stepped-wedge cluster randomised controlled trial of JC Project Bonfire—SGHs.

SGH Cluster	**Year 1** Sep 23-Aug 24	**Year 2** Sep 24-Aug 25	**Year 3** Sep 25-Aug 26	**Year 4** Sep 26-Aug 27	**Year 5** Sep 26-Aug 28
Cluster 1 (36 SGHs)	Baseline Control	PTF Interventions (TDC + IDP + SCP)			
Cluster 2 (38 SGHs)	Baseline Control		PTF Interventions (TDC + IDP + SCP)		
Cluster 3 (33 SGHs)	Baseline Control			PTF Interventions (TDC + IDP + SCP)	

Preliminary findings regarding the impact of the PTF interventions in SGHs indicate encouraging trends, although further longitudinal data from more C&Y participating in the interventions is necessary to confirm the robustness of these initial findings:

- On average, 71.7% of C&Y in Cluster 1 demonstrated rating improvement from Year 1 to Year 2 on at least one C&Y outcome measure in each PTF domain (**Figure 6**).
- A majority of C&Y in Cluster 1 demonstrated improvement on at least one measure of Health (82.7%), followed by Future Navigation Competencies (80.0%), Social Capital (78.3%), and Sense of Purpose (74.4%), followed by Trusted Relationships (43.3%), which is only assessed by two outcome measures and will be expanded in future data collection (e.g., relationships with TDCs and biological parents) (**Figure 6**).
- Out of 20 outcome ratings, 13 improved from Year 1 to Year 2 (**Figure 7**), with three statistically significant improvements in Community Support ($p < .01$), Positive Affect ($p < .01$), and Self-Esteem ($p < .05$).
- In comparison to Cluster 2 and Cluster 3, which have yet to participate in PTF interventions, Cluster 1 demonstrated significant improvements over time from Year 1 to Year 2 (**Figure 8**) in Community Support ($p < .05$) and Positive Affect ($p < .05$), as well as marginally significant improvement in Goal Attainment ($p = .10$).

Figure 6. Percentage of Cluster 1 C&Y in JC Project Bonfire—SGHs, with Rating Improvement from Year 1 to Year 2 on at Least One Outcome Measure in Each PTF Domain.

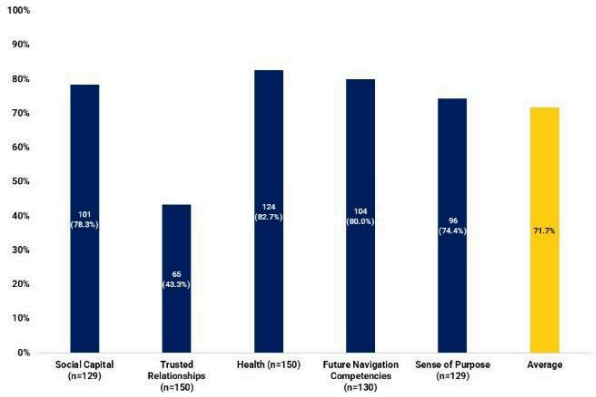


Figure 7. Year 1 vs. Year 2 Outcome Ratings (Multi-Level Modelling) of Cluster 1 C&Y in JC Project Bonfire—SGHs, across PTF Domains.

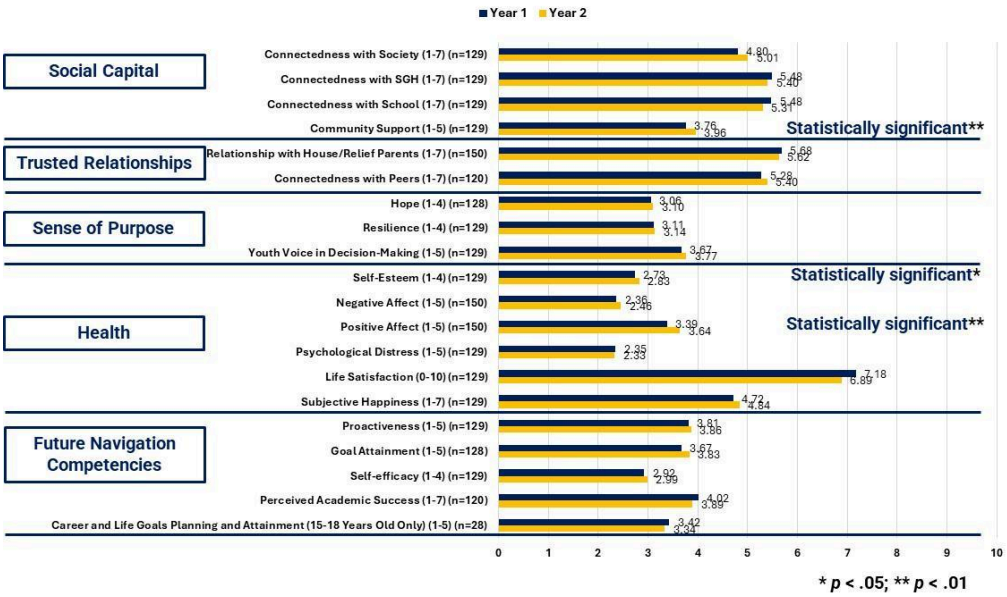
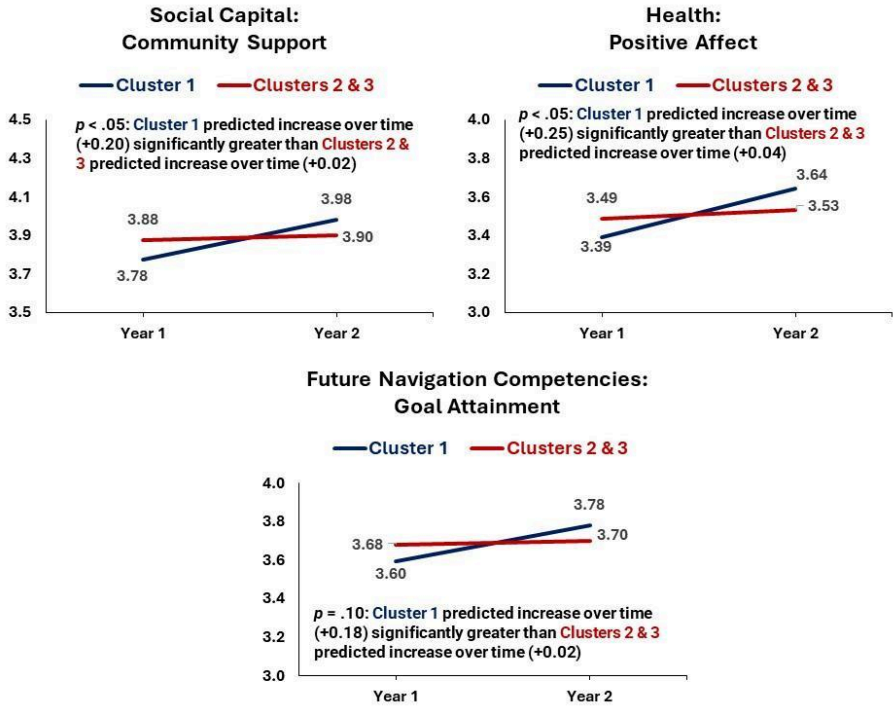


Figure 8. Statistically Significant and Marginally Significant Year 1 vs. Year 2 Outcome Ratings (Mixed Design ANOVA) between Cluster 1 C&Y and Clusters 2 and 3 C&Y in JC Project Bonfire—SGHs.

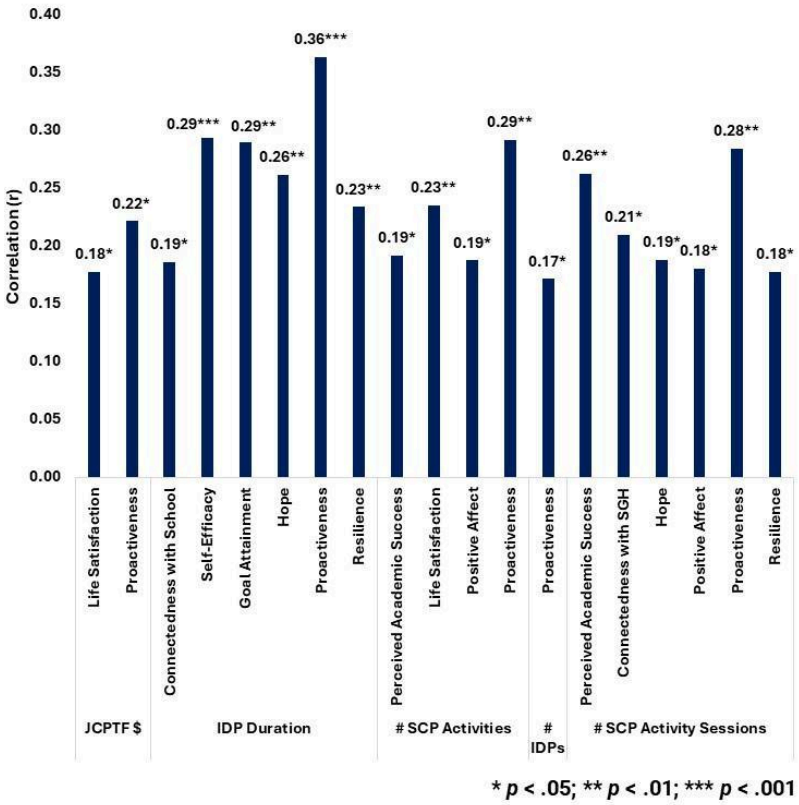


Collectively, these preliminary results suggest that the PTF interventions are beginning to yield positive impacts on several C&Y outcomes, though they do not encompass all indicators. Such outcomes align with expectations given that the interventions are still at an early stage. More robust effects likely will require extended exposure to the PTF interventions (i.e., Year 3, 4, and 5) and the participation of a greater number of C&Y (i.e., in Cluster 2 and Cluster 3).

Preliminary results concerning the implementation or dosage of the PTF interventions provide insights into the underlying mechanisms of the initial positive effects observed in Cluster 1 C&Y outcomes described above. The SCP serves as the IDP data source for quantifying intervention dosage in terms of the uptake of SCP activity enrolments, activity sessions, and HKJC Positive Trajectory Fund utilisation by PTF domain:

- As of August 2025, at the end of Year 2, a total of 168 C&Y in Cluster 1 had 193 IDPs with recorded activities in the SCP. On average, each IDP included 2.26 SCP activity enrolments, 8.21 activity sessions, and an expenditure of HK$2,464.4.
- The most commonly registered activities were primarily within the Sense of Purpose domain (53.4%), followed by the Health domain (44.6%), and the Future Navigation Competencies domain (40.9%). In contrast, the Trusted Relationships and Social Capital domains exhibited little to no SCP usage.
- Notably, when a PTF domain was prioritised in an IDP, there was a significantly greater number of SCP activity enrolments (390 vs. 228, $p < .001$), a greater number of activity sessions (1,408 vs. 833, $p < .001$), and increased utilisation of the HKJC Positive Trajectory Fund ($441,291 vs. $231,501, $p < .001$).
- Among the 180 Cluster 1 C&Y that provided outcome data from Year 1 and Year 2 and IDP records as of September 30, 2025, intervention dosage—reflected through SCP activity enrolments, activity sessions, JCPTF utilisation, IDP duration, and the number of IDPS—demonstrated significant positive correlations with outcome improvements across various outcome measures (**Figure 9**). Noteworthy correlations include:
  - Proactiveness improvement ($r = 0.29$ with SCP activity enrolments, $p < .01$; $r = 0.28$ with SCP activity sessions, $p < .01$; $r = 0.22$ with JCPTF utilisation, $p < .05$; $r = 0.36$ with IDP duration, $p < .001$; $r = 0.17$ with number of IDPs, $p < .05$).
  - Positive Affect improvement ($r = 0.19$ with SCP activity enrolments, $p < .05$; $r = 0.18$ with SCP activity sessions).
  - Hope improvement ($r = 0.19$ with SCP activity sessions, $p < .05$; $r = 0.26$ with IDP duration, $p < .01$).
  - Resilience improvement ($r = 0.18$ with SCP activity sessions, $p < .05$; $r = 0.23$ with IDP duration, $p < .01$).
  - Life Satisfaction improvement ($r = 0.23$ with SCP activity enrolments, $p < .01$; $r = 0.18$ with JCPTF utilisation, $p < .05$).
  - Perceived Academic Success improvement ($r = 0.19$ with SCP activity enrolments, $p < .05$; $r = 0.26$ with SCP activity sessions, $p < .01$).

Figure 9. Statistically Significant Correlations between SCP Dosage and Year 1 vs. Year 2 Outcome Changes for Cluster 1 C&Y in JC Project Bonfire—SGHs.



- For the 123 Cluster 1 C&Y who completed their first IDP and transitioned to a second IDP by September 30, 2025, IDP ratings improved consistently across domains (**Figure 10**), with significant enhancements noted in the Sense of Purpose domain when targeted ($p < .001$), along with the Health domain ($p < .05$) and the Trusted Relationships domain ($p < .05$), even when these were not targeted. Moreover, a higher intervention dosage correlated significantly and positively with greater improvement in IDP ratings across domains (**Figure 11**):
  - Sense of Purpose IDP rating improvement ($r = 0.27$ with SCP activity enrolments, $p < .01$; $r = 0.33$ with SCP activity sessions, $p < .001$; $r = 0.25$ with JCPTF utilisation, $p < .01$).
  - Social Capital IDP rating improvement ($r = 0.21$ with IDP duration, $p < .05$).
  - Trusted Relationships IDP rating improvement ($r = 0.18$ with IDP duration, $p < .05$).
  - Future Navigation Competencies IDP rating improvement ($r = 0.20$ with SCP activity sessions, $p < .05$).

Figure 10. First IDP vs. Second IDP Rating Changes for Cluster 1 C&Y in JC Project Bonfire—SGHs.

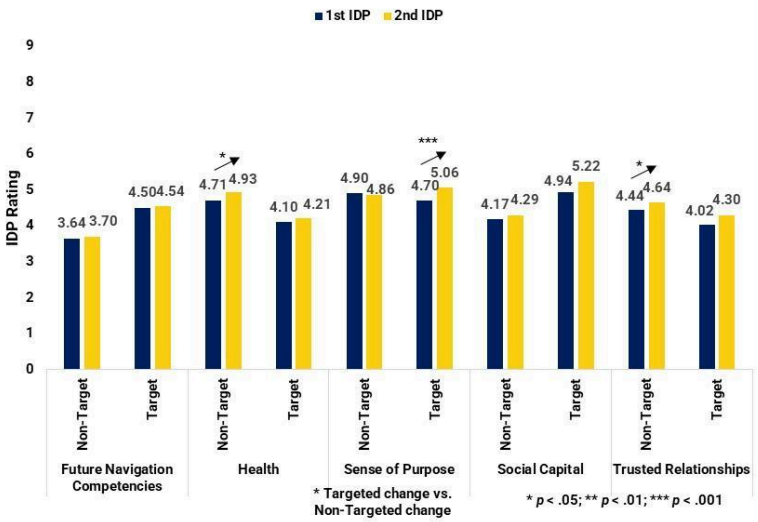
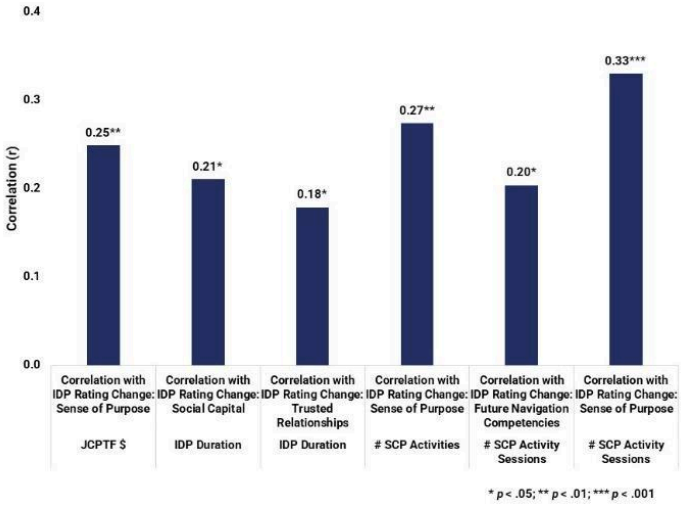


Figure 11. Statistically Significant Correlations between SCP Dosage and First IDP vs. Second IDP Rating Changes for Cluster 1 C&Y in JC Project Bonfire—SGHs.



These collective implementation findings suggest that no two IDPs are identical; intervention dosage varies by PTF domain and individual C&Y; IDPs are tailored to meet the specific needs of each C&Y; there is evidence of intentional alignment by TDCs between IDP priorities and SCP utilisation; and, most importantly, increased intervention dosage is generally associated with improved outcomes and developmental capacity among C&Y.

Future Use Case of the PTF in JC Project Bonfire—Foster Care (September 2025-August 2030)

Foster Care Context

In the five-year JC Project Bonfire—Foster Care, the target population consists of C&Y aged 0-18 living in foster homes within the RCCS continuum, operated by 10 NGOs. Each foster home accommodates at least one foster parent who provides 24/7 care for one or two C&Y. Foster parents receive a monthly stipend for each placement. Each C&Y is also assigned a foster care social worker responsible for case management, in addition to a referring worker responsible for managing the family case and permanency planning for the C&Y.

Planned Applications of the PTF Interventions (TDC, IDP, and SCP) in Foster Care

Currently in the planning phase, JC Project Bonfire—Foster Care, will build on the same PTF interventions validated in JC Project Bonfire—SGHs, but will adapt them to support the foster care context because of the unique dynamics and relationships C&Y navigate between substitute foster care and target home of reunification. Specifically, supported by two community hubs, this project will implement three unique Tailored Interventions (TIs) for three subpopulations of C&Y in foster care:

- TI1: Family Reunion Programme targets C&Y with regular home leave, with the goal of readiness for reunification in 12 months.
- TI2: Family Engagement Programme targets C&Y deemed safe to connect with biological parents but without regular home leave, with the goal of increasing readiness for reunification.
- TI3: Age-Out Support targets C&Y ages 15 or above whose permanency goal pivots to independent living.

While the specific components of TI1-TI3 are in the process of being defined and operationalised, TDCs will take on distinct roles in interacting with these unique intervention components alongside the IDP and SCP. Unlike the JC Project Bonfire—SGHs, the standard care model in the control group of JC Project Bonfire—Foster Care will offer TDC, IDP, and SCP without the three unique TIs. **Figure 13** illustrates the randomised controlled trial (RCT) design for this project, which incorporates a nine-month baseline ramp-up period to finalise the unique TI1-TI3, followed by a two-year RCT pilot to assess their effectiveness compared to standard care, before scaling up sector-wide across all foster homes.

Figure 13. Randomised Controlled Trial of JC Project Bonfire—Foster Care.

<table>
<tr><th>Year</th><th>Year 1</th><th>Year 1-2</th><th>Year 2-3</th><th>Year 3</th><th>Year 4</th><th>Year 5</th></tr>
<tr><th>Month</th><th>Months 1-8</th><th>Months 9-20</th><th>Months 21-32</th><th>Months 33-36</th><th>Months 37-48</th><th>Months 49-60</th></tr>
<tr><th>Study Phase</th><th>Baseline</th><th>RCT Pilot</th><th>RCT Pilot</th><th>Review RCT Pilot Results</th><th>Sector-Wide Rollout</th><th>Sector-Wide Rollout</th></tr>
<tr><td rowspan="2">C&Y from 10 NGOs</td><td rowspan="2">Project Preparation (Usual Foster Care)</td><td colspan="3">RCT Pilot Intervention Group (TI1, TI2, or TI3)</td><td colspan="2" rowspan="2">Sector-Wide TI1, TI2, or TI3</td></tr>
<tr><td colspan="3">RCT Pilot Control Group Usual Foster Care</td></tr>
<tr><td colspan="7">RCT: Randomised controlled trial.
Usual Foster Care/Control Group: TI1, TI2, and TI3 are not implemented but TDC, IDP, and SCP are offered.
Intervention Group: TI1, TI2, and TI3 are implemented with TDC, IDP, and SCP.</td></tr>
</table>

Conclusions

In the context of the transformation of the RCCS in Hong Kong, the HKJC has developed the PTF as a unifying, evidence-informed, holistic framework aimed at redefining positive trajectories for underserved C&Y. This framework is supported by a suite of innovative PTF interventions (TDC, IDP, SCP) hypothesised to uplift these trajectories. Beginning with C&Y living in SGHs (JC Project Bonfire—SGHs)

and expanding to encompass C&Y living in foster care (JC Project Bonfire—Foster Care), preliminary evidence of positive outcomes and insights gained from the implementation of the PTF thus far encourages its adaptation and adoption across diverse C&Y-serving contexts. Moreover, it highlights the potential for scalability beyond RCCS to benefit a broader population of C&Y in Hong Kong and internationally. These collective efforts will not only enrich the evidence base for the PTF as a benchmark in the research literature regarding positive C&Y development and impact measurement, but they will also serve as an exemplar of an applied, flexible framework to support the field of C&Y welfare in terms of both policy and practice.

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Annex: Overview of JC Project Bonfire—SGHs: TDC Training Curriculum

Module	Objective	Session	Speaker
1. JC Project Bonfire – SGHs Overview	To empower TDCs, we provide them with essential knowledge about JC Project Bonfire—SGHs. This includes understanding the project's background, the Theory of Change, the TDC roles, and the core beliefs of the project.	1. Introduction to JC Project Bonfire - SGHs 2. Becoming a Trajectory Development Coordinator 3. Journey of Strength-Based Discovery 4. The Power of Stories – Voices and Agency of C&Y	● Prof. Eric Chui (PolyU) ● Dr. Yam Kong (PolyU) ● Mr. Jelly Tam (PolyU) ● Mr. David Lui (PolyU) ● Ms. Chloe Leung (PolyU)
2. C&Y Centricity and Empowerment	To equip TDCs with essential knowledge about C&Y centricity and empowerment for developing IDPs based on the PTF.	1. Children's Rights 2. Youth Development and Empowerment 3. Individualised Development Plan Overview	● Dr. Albe Ng (PolyU) ● Mr. Jelly Tam (PolyU) ● Ms. Chloe Leung (PolyU) ● Ms. Ivy Yau and PA Team (Hong Kong Playground Association)
3. Healthy Trajectory Development	To provide a comprehensive overview of C&Y development, covering key milestones, growth stages, and common special needs and mental health challenges faced by this population. The goal is to equip TDCs with a thorough understanding of the physical, cognitive, emotional, and social development of C&Y from	1. Child Development Milestones 2. Child Development (Ages 4-6) 3. Child Development (Ages 7-12) 4. Child Development (Ages 13-18) 5. Children with Special Needs: Attention Deficit / Hyperactivity Disorder (ADHD) and Autistic Spectrum Disorder (ASD) 6. Children with Special Needs: Dyslexia and Developmental Coordination Disorders (DCD) 7. Children with Special Needs: Speech and Language Impairment and Limited Intelligence 8. Mental Health Needs of C&Y and Practical Interventions 9. Children with Mild Intellectual Disabilities	● Ms. Leah Kong (Yew Chung College of Early Childhood Education) (YCCECE) ● Mr. Aaron Ng (YCCECE) ● Hong Chi Association ● Ms. Agnes Choi (Parent-Child Interaction Therapy) ● Dr. Yam Kong (PolyU) ● Dr. Albe Ng (PolyU) ● Mr. Jelly Tam (PolyU) ● Ms. Chloe Leung (PolyU)

Module	Objective	Session	Speaker
	early childhood through adolescence.	10. Support the Healthy Sexual Development of C&Y 11. Individualised Development Plan Co-Assessment: Physical / Mental Wellness	
4. Trusted Relationships	To equip TDCs with the knowledge and skills to establish and cultivate trusting, collaborative, and supportive relationships and environment with the C&Y that they work with.	1. Defining Trusted Relationships, Engaging and Building Relationships with Children 2. Engaging and Building Relationships with Adolescents 3. Cultivating a Trusting Atmosphere through Collaboration in SGHs 4. Understanding Biological Connections: Building Trust and Communication 5. Co-Assessment & Intervention for Individualised Development Plan: Providing Support in Social Networks and Social Skills	● Dr. Yam Kong (PolyU) ● Dr. Albe Ng (PolyU) ● Ms. Ida Yip & CS Team (Hong Kong Christian Service) (HKCS)
5. Sense of Purpose	To help TDCs guide C&Y in developing a strong sense of purpose, self-understanding, and direction for their future through a structured process of self-exploration, career and life planning, and ongoing follow-up using CLAP artefacts and other useful tools.	1. Defining Sense of Purpose: Self-Understanding and Exploration (Young Children) 2. Defining Sense of Purpose: Self-Understanding and Exploration (Adolescents) 3. Co-Assessment & Intervention for Individualised Development Plan: Academic and Career Exploration and Planning 4. Follow Up on CLAP Sessions and Individualised Development Plan Co-Assessment & Intervention	● Ms. Eva Lam (YCCECE) ● Ms. Toby Chung (HKCS-CLAP Team) ● Dr. Albe Ng (PolyU)
6. Future Navigation Competencies	To equip TDCs with the knowledge and strategies to help C&Y develop the necessary competencies	1. Academic Competencies and Positive Learning Experience 2. Core Life Skills (1) 3. Core Life Skills (2)	● Dr. Herrick Wong (PolyU) ● Dr. Felix Ng (PolyU) ● Mr. Jelly Tam (PolyU) ● Ms. Esther Chan

Module	Objective	Session	Speaker
	and life skills to successfully navigate their future, including educational success, self-care and independent living, financial management, digital literacy, etc.	4. Arrangements for Post-Small Group Home "Extended Individualised Development Plan & JC Positive Trajectory Fund Support"	● Mr. Jelly Tam (PolyU) ● Ms. Chloe Leung (PolyU)
7. Social Capital	To equip TDCs with the knowledge and strategies to help C&Y build and leverage their social capital, which includes their connections, networks, and access to community resources, in order to support their overall well-being and trajectory development.	1. Understanding Social Capital 2. Community/Eco/Environmental Scanning, Mapping and Utilising Community Resources 3. C&Y Empowerment in Social Capital Development 4. From Theory to Practice: Building Social Capital and Community Connections 5. Co-Assessment & Intervention for Individualised Development Plan: Community Engagement and Prosocial Skills	● Dr. Brian Chor (Chapin Hall) ● Mr. Bird Tang (Voltra) ● Deloitte Team Social Capital Platform's Partner ● Mr. Jelly Tam (PolyU) ● Ms. Chloe Leung (PolyU)
8. Summary, Case Presentation, and Course Feedback	To facilitate reflection, knowledge sharing, and continuous improvement of the training programme based on TDCs' experience and input.	1. Individualised Development Plan Formulation, Implementation, and Adaptation 2. Presentation on Case Conceptualisation and Discussion; Course Review and Feedback	● Dr. Albe Ng (PolyU) ● Mr. Jelly Tam (PolyU) ● Ms. Chloe Leung (PolyU)
A monthly Community of Practice meeting will be arranged for TDCs to regroup, share best practices, and create group activities for all SGHs' C&Y.			