**Trajectories of risk and resilience among maltreated youth: Prospective associations with adult social outcomes**

In 2017, the United States had over 3.5 million maltreatment investigations, which determined that an estimated 674,000 children were maltreatment victims (U.S. Department of Health & Human Services, 2019). Maltreated children are twice as likely to develop both recurrent and persistent depressive episodes compared to non-maltreated individuals (Nanni et al., 2012). Yet, not all children who experience maltreatment become depressed, and few studies have investigated whether there may be individual differences in how depression may develop over time among a subset of children who are maltreated (e.g., development resilience) (Cicchetti, 2013).

In this study, we will use five waves of data from the National Longitudinal Study of Adolescent to Adult Health (Add Health), a nationally-representative population-based sample of over 20,000 adolescents who have been followed for over 20+ years. The goals of this study are two-fold: 1) to examine whether there may be distinct developmental trajectories of depression among maltreated (and non-maltreated) Add Health individuals using growth mixture modeling (GMM) over five waves, spanning participant ages 13 to 43, and 2) to examine the adult functional correlates of these trajectories across several social domains. Maltreatment status was retrospectively self-reported at Wave I (ages 13-17), querying whether the adolescent was neglected or abused (i.e., sexual, physical) prior to age 5.

We hypothesize developmentally distinct depression trajectories among maltreated and non-maltreated individuals in the GMM. Among maltreated individuals, we expect there to be a “severe” depression latent growth class (i.e., chronically high from adolescence to adulthood), given the robust association of maltreatment on depression in later life (Kaplow & Widom, 2007). However, we also expect the emergence of a “resilient” latent growth class among maltreated individuals, such that a subset of maltreated individuals may not develop depression between adolescence to adulthood. Furthermore, maltreated individuals belonging to the “resilient” trajectory are expected to have better functional outcomes by middle adulthood (Wave V) relative to those in the “severe” trajectory, such as higher quality social relationships, larger social networks, lower rates of intimate partner violence, and better parental relationships and support. Findings from this study will have important implications for both prevention and intervention efforts, especially in helping to identify the most vulnerable group of maltreated individuals.