

# Promoting Children's Resilience in a Global Society



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# Purpose of Presentation

Address several key questions:

- ❖ What are the threats to child well-being (childhood adversities)?
- ❖ What are outcomes of childhood adversity?
- ❖ What is resilience?
- ❖ What are limits of current knowledge?
- ❖ What are global & local solutions?
- ❖ What can school psychologists do—individually and collectively?



# **What Are the Threats to Child Well-Being ?**

## **Childhood Adversities**



# Global and Local Threats to Well-Being: Childhood Adversity (Risk Factors)

- War, ethnic conflicts, terrorism
- Natural and man-made disasters
- Poverty/homelessness
- Discrimination/oppression
- Immigration/displacement
- Domestic/community violence
- Parental loss/separation/imprisonment
- Parent physical/mental illness/substance abuse
- Child abuse—physical, emotional, sexual
- Bullying, interpersonal violence



# What Are the Outcomes of Childhood Adversity?



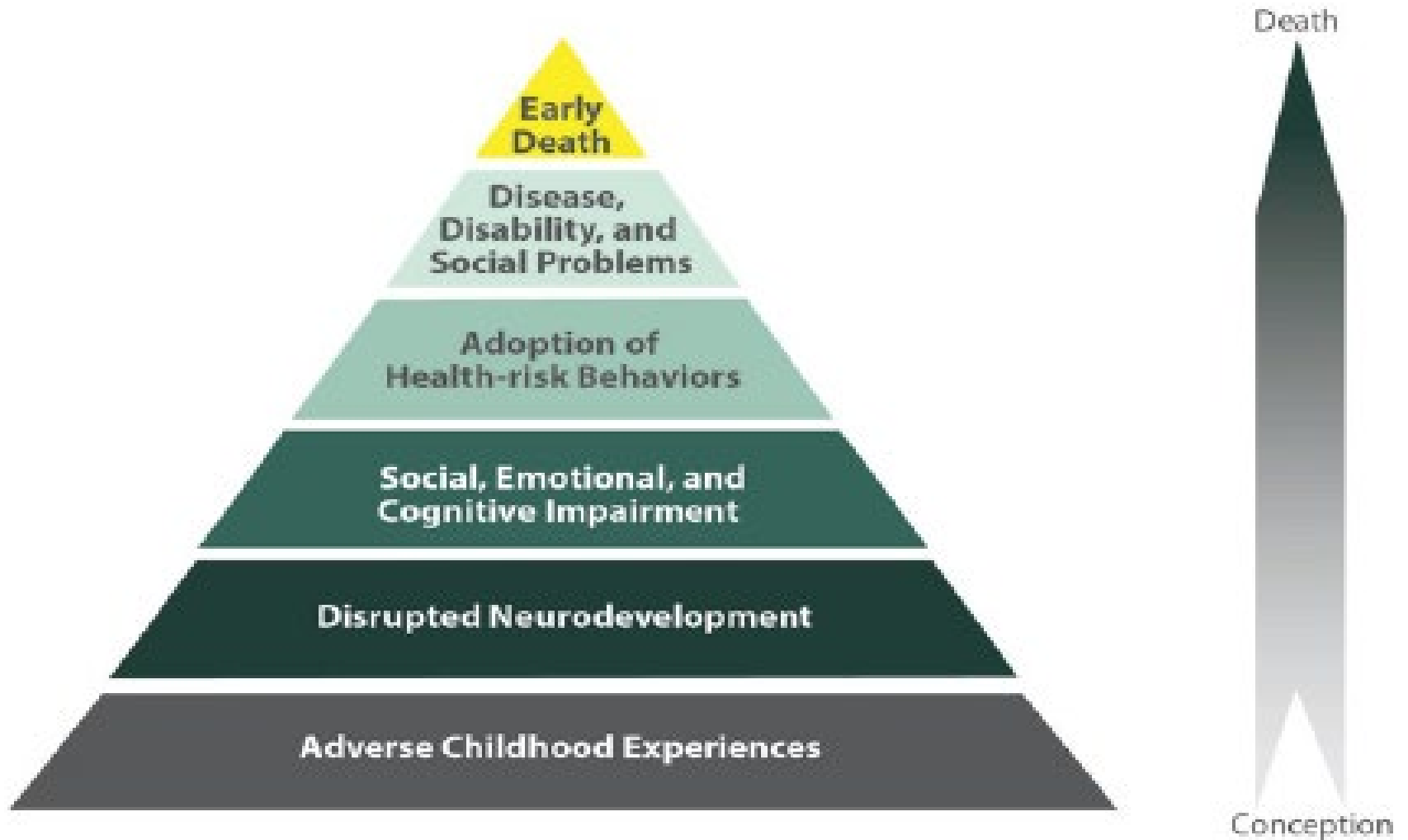
# Outcomes of Childhood Adversity

- Range of physical, psychological, social-economic consequences from early childhood through adulthood.
  - Psychological well-being (social, emotional, behavioral)
  - Academic success (learning, attention, school failure)
  - Physical and mental health problems
  - Unemployment, poverty, aggression, violence

Potential intergenerational cycle

Based on body of medical and psychological research (ACES; ACES-IQ) research in US & internationally; also, WHO; CDC; UNICEF (Sources available upon request)





Mechanism by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

Reprinted with permission CDC ACE Pyramid (downloaded 6/15/18):  
[https://www.cdc.gov/violenceprevention/cestudy/ace\\_graphics.html](https://www.cdc.gov/violenceprevention/cestudy/ace_graphics.html)



# Status of Children & Adolescents

- 20% worldwide suffer from mental health problems
- 5% severe enough to warrant clinical intervention
- Access to mental health services varies across countries
  - Ranges from 20-80%
  - Not sufficient in any country



(WHO, 2005)





# What is Resilience?



# Defining Resilience

Chmitorz et al. (2018) found multitude of definitions in review of literature:

1. Resilience as a trait (static)
2. Resilience as dynamic process of adaptation
3. Resilience as outcome of adaptation or intervention

➤ Chmitorz: Consistent with #2 & 3, resilience can be trained/learned



# Working Definition of Resilience

- Capacity for maintaining or regaining psychological/physiological well-being (mental/physical health)
- Despite adversity (trauma/stressors) that leads to significant psychological and/or physical suffering
- Ability to cope with and/or recover from adversity

Can be modified/learned through intervention/education



# Protective Factors

## Social resources

- 'Safe' environment
- Social support
- Connectedness

## Personal resources

- Coping skills
- Interpersonal skills
- Culturally valued competencies



# Conceptual Model: Psychological Well-Being (Resilience)

## Individual Factors

### Culturally Valued Competencies

Personal, Interpersonal,  
Behavioral, Academic,  
Artistic, Physical

### Personal Vulnerability

Personal History  
Family History  
Disability

### Personal Resources

Self-Efficacy  
Coping Skills  
Relationship Skills  
Problem Solving Skills

## Cultural Factors

### Social-Cultural Resources

Peer Group  
School Staff  
Family/Relatives  
Neighbors  
Religious Community  
Mental Health Facilities

### Social-Cultural Stressors

Community Violence  
Poverty  
Family Conflict,  
Bullying/Harassment

### Cultural Norms

Gender Roles  
Peer Relationships  
Adult-Child Relationships

### Socialization Practices

Discipline, Education, Modeling

### Socialization Agents

Parents, Teachers, Peers, Media



Adapted from Nastasi,  
Varjas, Sarkar, & Jayasena,  
1998



# What Are the Limits of Current Knowledge?



# Limits of Existing Research/Approaches

- ❑ Current accessible knowledge based primarily on research with populations in North America and Western Europe—thus, representing only 5% of world's population & neglecting 95% (Arnett, 2008)
- ❑ Individual approaches neglect the role of ecology, especially social, cultural, political, economic factors
- ❑ *Research* → *practice gap* related to predominance of controlled experimental trials that neglect conditions in natural context
- ❑ Minimal child participation in research or solutions



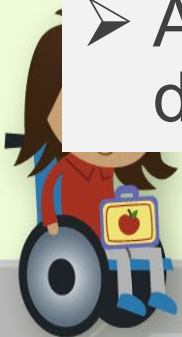


# What Are the Global and Local Solutions?



# Global & Local Solutions

- Examine individual & collective psychological consequences of risk & protective factors
- Develop programs that address local cultural context and population needs
- Engage in cultural construction of solutions
- Develop partnerships with local stakeholders
- Engage in research to expand global knowledge & inform local intervention
- Advocate for rights of each child to optimal development, health, well-being, and learning



UNICEF's *State of World's Children* (2015)  
UN Convention on Rights of the Child (1989)



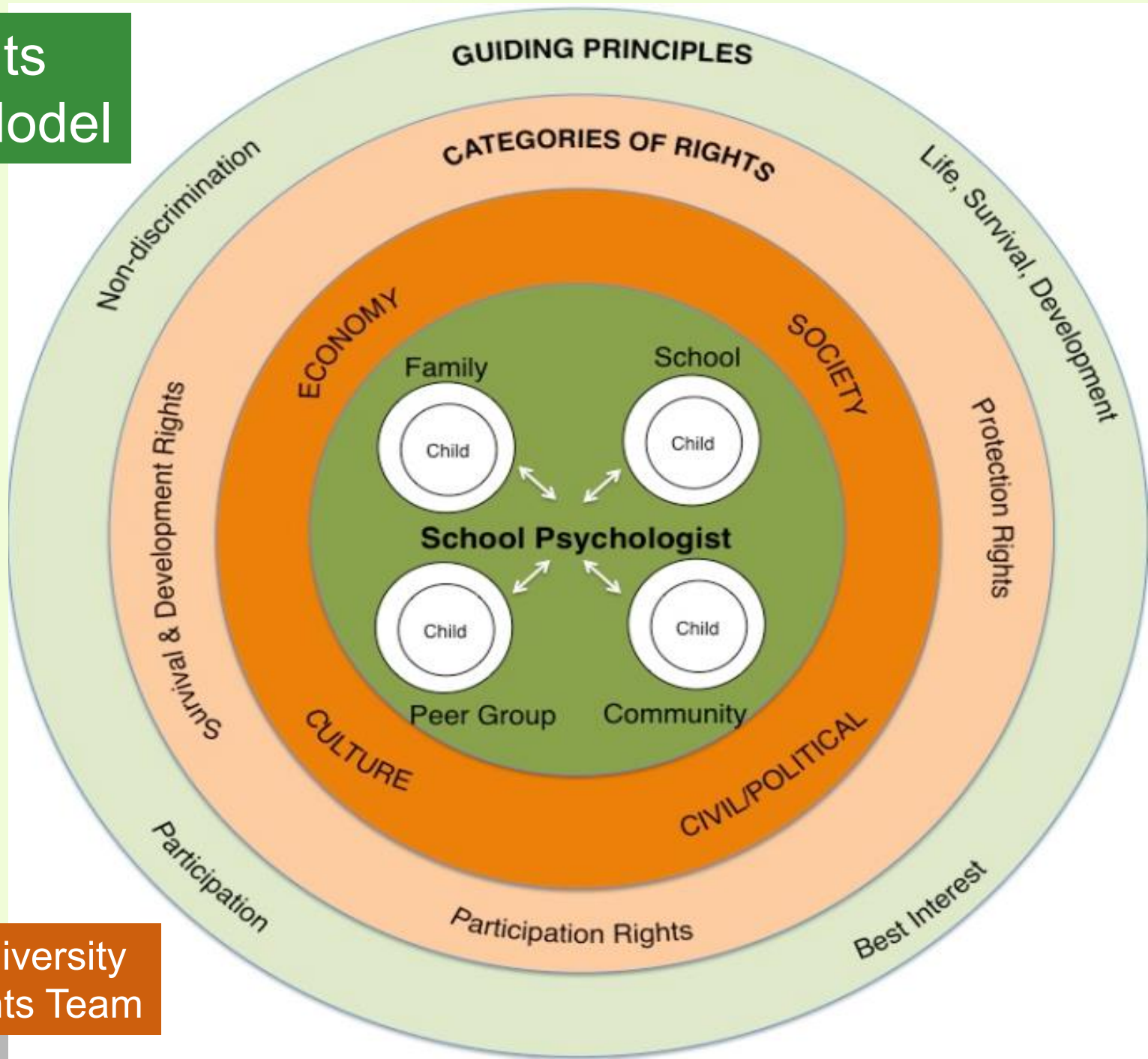
# Future Directions

Global recommendations (e.g., WHO, UNICEF)

- Public health approach
- Social-ecological approach
- Tiered approach: promotion to recovery
- Adaptable to culture and context
- Consider UN (1989) Convention on Rights of Child and UN (2015) Sustainable Development Goals

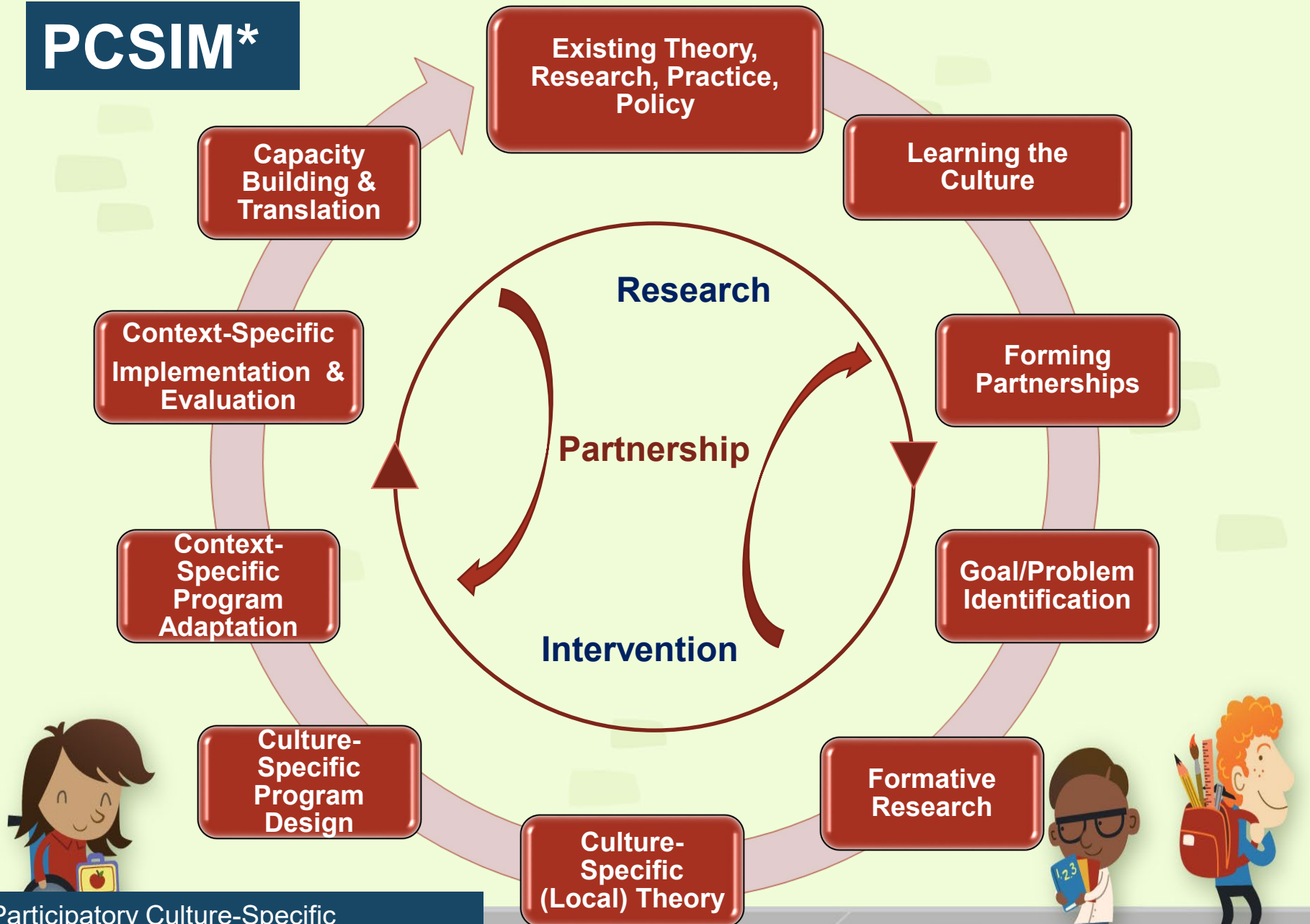


# Child Rights Ecology Model



Tulane University  
Child Rights Team

# PCSIM\*

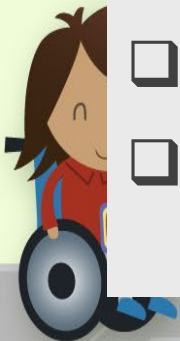


\*Participatory Culture-Specific Intervention Model (PCSIM)

Adapted from Nastasi, Moore, & Varjas, 2004

# Participatory Culture-Specific Intervention Model (PCSIM)

- ❑ Consistent with **public health & ecological models**
- ❑ Mixed-methods research to:
  - Assess contextual needs
  - Inform **cultural construction** of programs
  - Facilitate program monitoring & evaluation
  - Applicable to tiered approach (promotion to recovery; population to individual)
- ❑ **Participatory** approach engages children, adolescents, families, organizations, community members
- ❑ **Sustainability** through building local capacity
- ❑ Local voices **inform program development and advance psychological science**





# Cultural Construction Defined

Process of **negotiating shared understanding** (with stakeholders) of language, beliefs, values, and behavioral norms (Nastasi, Schensul et al., 2015).

**Necessary process for developing culturally and contextually relevant (culture-specific) solutions** to social problems that affect child well-being and learning at local and global levels (Nastasi & Varjas, 2011).





# Applications of PCSIM

*Over past 20 years, three major efforts:*

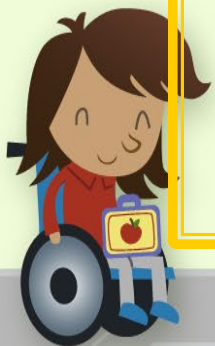
- ❖ Promotion of Psychological Well-Being in Sri Lankan Schools (local applications)
- ❖ **Promoting Psychological Well-Being Globally (global application)**
- ❖ Developing Mental Health Programming in New Orleans Schools (local applications)



# Global Project

- **Purpose:** Understand cultural constructs related to psychological well-being (resilience) from stakeholder perspective
- **Researchers:** Data collection by school/ educational psychologists (ISPA network)
- **Sites:** 14 sites in 12 countries
- **Methods:** Focus groups/interviews with students (K-12), parents, teachers, administrators, support staff; ecomaps with students; inductive data analysis

**Student voices (n = 880):  
Focus Groups & Ecomaps**



(Nastasi & Borja, 2015)

# *Promoting Psychological Well-Being Globally*

Brazil (Manaus)

Estonia (Tallin)

Greece (Athens)

India (Mumbai)

Italy (Padua)

Mexico (Xalapa)

Romania (Bucharest)

Russia (Samara)

Slovak Republic (Kocise)

Sri Lanka (Negombo)

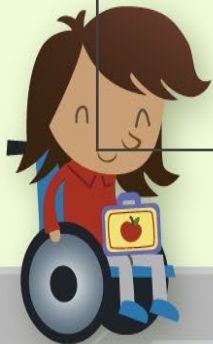
Tanzania (Arusha)

USA

Boston

Puerto Rico (Mayaguez)

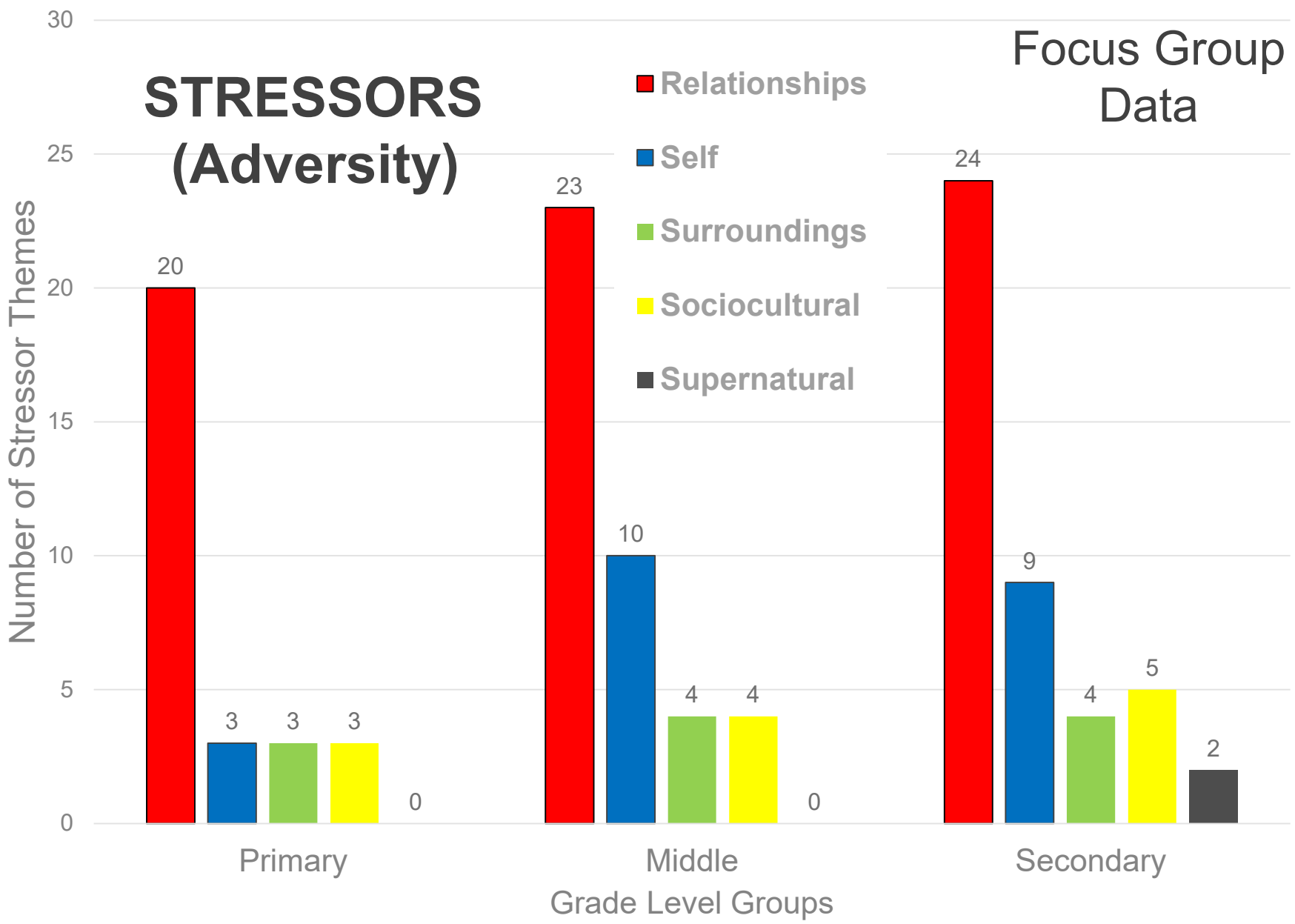
New Orleans



(Nastasi & Borja, 2015)



# STRESSORS (Adversity)

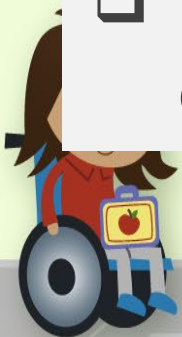


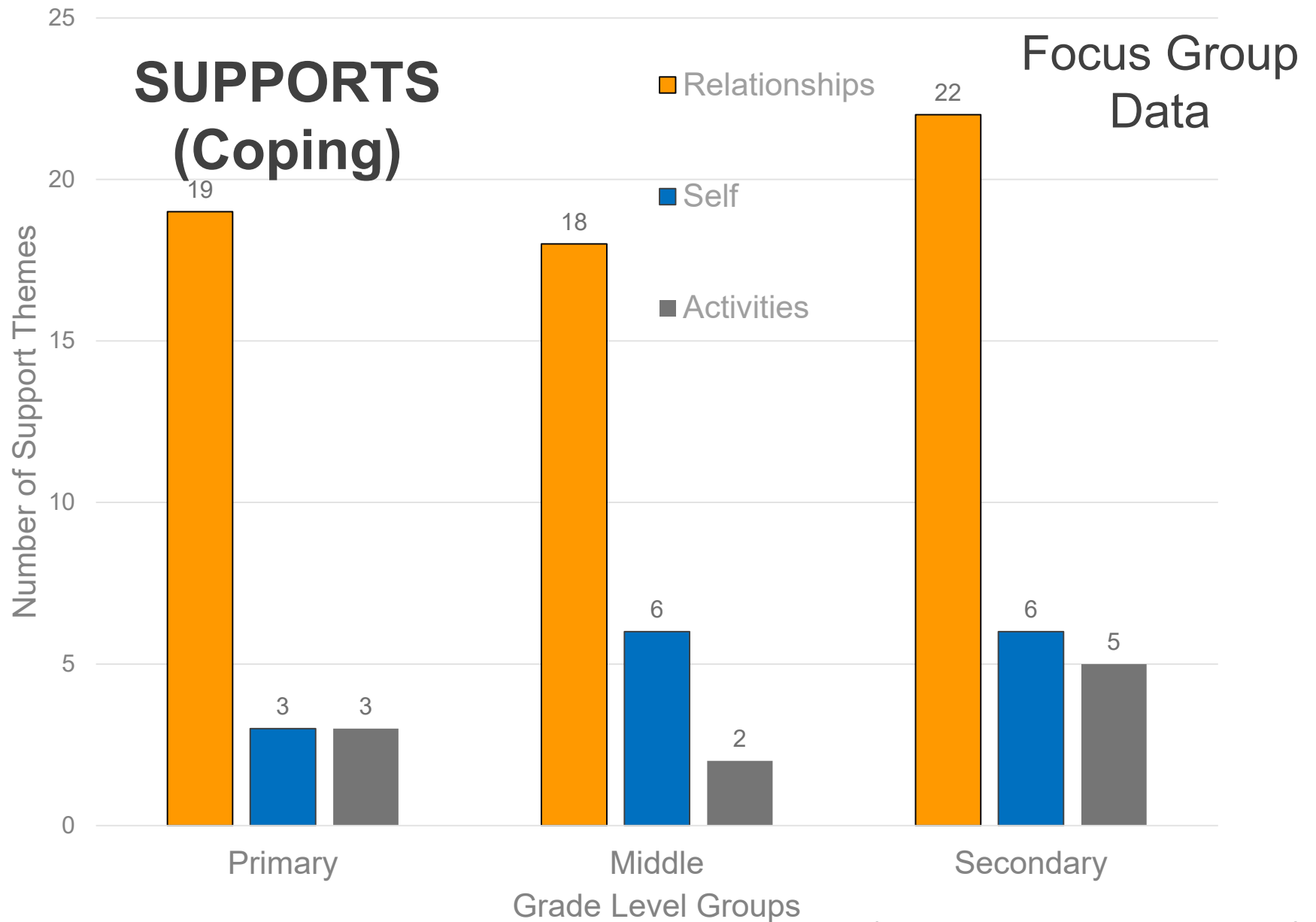
(Borja, Nastasi, et al., 2015)

# Stress Themes: Ecomaps\*

- ❑ In child-generated social network:
  - ❑ Most relationships viewed as supportive
  - ❑ Sources of stress **typically outside of close relationships**; e.g., community members, school administration, public figure, natural environment, those who posed 'threats' to safety
- ❑ **External source of stress**, due to actions (e.g., aggression), evaluations by, or moods of others **most common**
- ❑ **Internal stressors** indicative of failure, negative emotions, physical ailment/injury **less common**

\*Ecomaps are participant-generated depictions of social network





(Borja, Nastasi et al., 2015)

# Support Themes: Ecomaps

- ❑ Four 'meta' categories:
  - Interpersonal interactions & relationships (most common)
  - Degree of autonomy
  - Achievement of competencies
  - Recreation/leisure activities
- ❑ Findings suggest alternative typology for support based on sense of agency, rather than outcome

(Borja, Nastasi et al., 2016)





# **What Can School Psychologists Do?**

**Individually and Collectively**

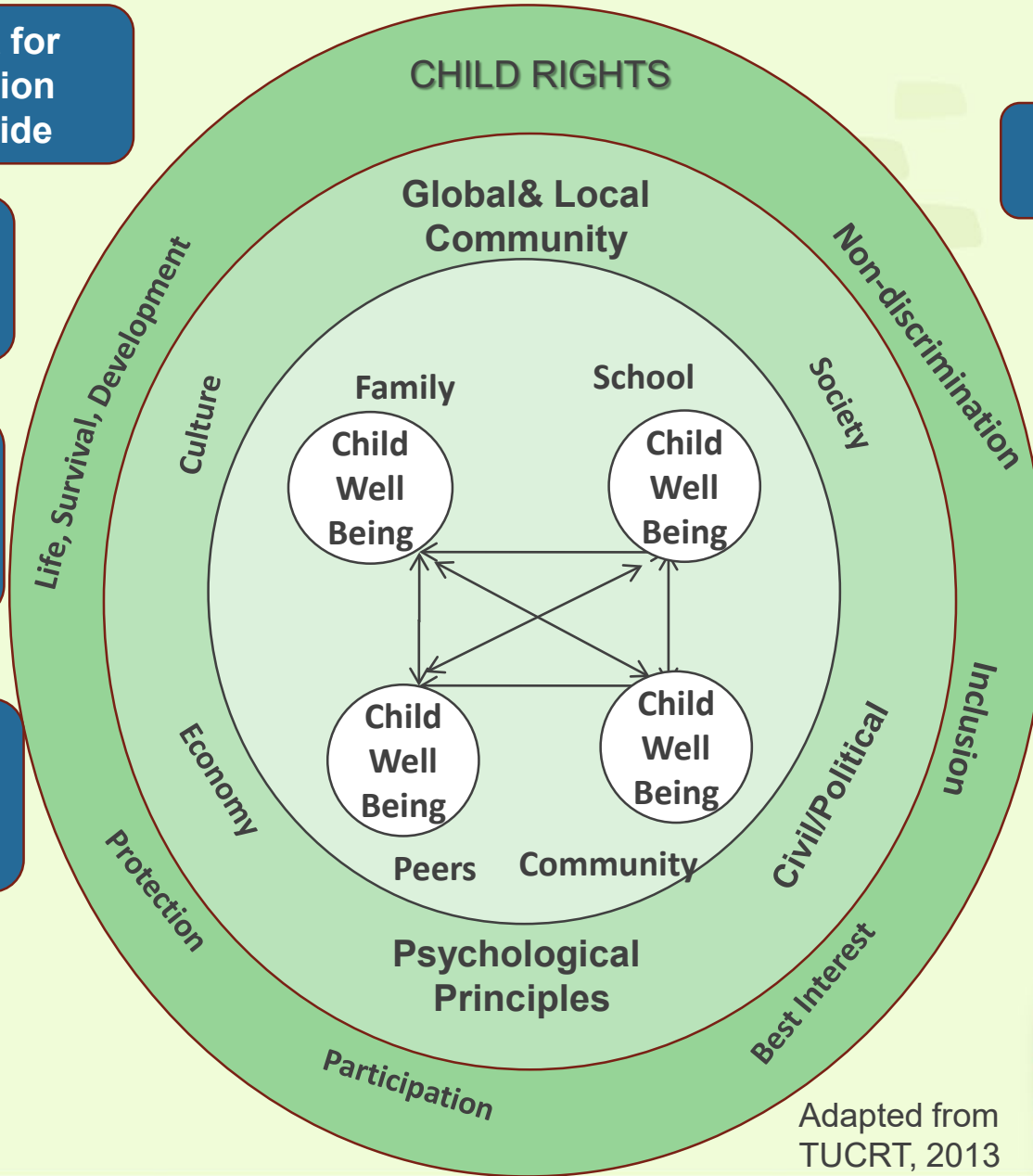


Support for Profession Worldwide

Support for Schools and Teachers

Support for Children, Parents, Families

Stakeholder & Organizational Collaboration



Practice

Research

Training

Policy

Adapted from TUCRT, 2013

SCHOOL PSYCHOLOGY ADVOCACY



## Consider the SP Advocacy Model:

1. How can we (individually and collectively) advocate for child mental health (psych well-being)—in practice, research, training, and policy?
2. What are our responsibilities for promotion of child well-being?
3. How do we engage partners? Which partners?
4. How do we ensure child voices are represented?





Thank You!

