

Resilient Citizens: Strong Recovery - Stronger Future

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Humans have the capacity to deal with, overcome, be strengthened by, and even transformed by experiences of adversity, including both manmade and natural disasters (Grotberg, 2001).

Over the last weeks, the COVID-19 global pandemic has brought about emotional, physical and financial stress, impacting almost every aspect of our lives. The governmental measures that have been taken to prevent the spread of COVID-19 have resulted in a partial lockdown, with schools, universities and all non-essential business closed and all of us asked to stay at home as much as possible. For families with (young) children, the COVID-19 pandemic involves a shift in family structure. Parents/caregivers need to juggle educational responsibilities, work duties as well as household chores. Children face the struggle of staying at home, receiving educational instructions from their parents/caregivers, whilst contact with peers is limited. For singles, elderly or those with limited social ties, the COVID-19 pandemic may result in increased feelings of loneliness and alienation.

Times of crisis, such as the current COVID-19 pandemic, will confront and challenge the prior existing societal equilibrium. Thankfully, every system will strive to regain this balance and move towards a post-event recovery. However, the pace and strength of that recovery can differ at an individual, family, community, and societal level. The ability of a system to “bounce back” is founded on two essential building blocks: Coping and Resiliency. Coping refers to an *ability* to deal with problems and difficulties, either through cognitive or behavioral efforts. Resilience is the *capacity* of a system to successfully face challenges that threaten the functioning, the survival or the positive development of that system.

This policy brief will outline what steps can be taken to ensure that the people of Rotterdam make a strong recovery as well as point out what constructs are the important at an individual and societal level to better face future challenges.

Table 1. Three Levels of the Disaster Lifecycle

Disaster Lifecycle	Time	Focus
Preparedness	Pre-Event	Identifying/Creating the essential building blocks in the society to face future events
Recovery	During Event	Engaging societal forces to activate the essential building blocks
Transformation	Post-Event	Incorporating the essential building blocks to the new fabric of society

Elmqvist et al., 2019; Peek, L. (2020).

Preparedness

Identifying/Creating the essential building blocks in the society to face future events

In the following table, an outline for the elements of Coping and Resiliency will be presented. While there is a lively debate in the academic literature as to the definition and scope of these two concepts, the presented elements below reflect a broad perspective of each concept.

Ideally, a society would begin in this phase when identifying/creating the essential elements for Coping and Resiliency. However, Rotterdam as well as the world finds itself already in the middle of this global pandemic. This being said, this phase is crucial in terms of setting out an evidence-based framework in order for a city to be able to effectively focus on coping and resiliency.

Societies are comprised of a precarious balance between individual agency and systemic forces. And while both play essential roles in the success for individuals as well as the society as a whole, this policy letter will focus on how a society as a systemic collections of structures can create opportunities for its inhabitants to grow and develop their full potential.

Table 2. Essential building blocks for Coping and Resiliency

Building Block	Definition	Elements
Resiliency <i>Sense of Mastery</i>	Sense of Mastery refers to an individual's beliefs about his or her own capabilities to deal with the demands of prospective situations (Bandura, 1997), which both directly and through its impact on cognition, emotions, and decision-making, affects self-regulatory processes (Bandura et al., 2003, Prince-Embury & Saklofske, 2013)	<ul style="list-style-type: none"> ● Optimism ● Self-efficacy ● Adaptability
Resiliency <i>Sense of Relatedness</i>	Sense of Relatedness involves establishing a close and consistent relationship to a caregiver has long been recognized as a fundamental part of the process of recovering from stress (Prince-Embury & Saklofske, 2013)	<ul style="list-style-type: none"> ● Trust in others ● Access to support ● Social comfort ● Tolerance of difference
Resiliency <i>Emotional Reactivity</i>	Emotional reactivity is in part the child's arousability or the threshold of tolerance that exists prior to the occurrence of adverse events or circumstances (Prince-Embury & Saklofske, 2013)	<ul style="list-style-type: none"> ● Sensitivity ● Recovery ● Impairment
Coping <i>Emotional Awareness</i>	Emotion awareness involves being able to identify and label emotions and to allow and tolerate those emotions within oneself (Gross & Thompson, 2007)	<ul style="list-style-type: none"> ● Identify emotions ● Label emotions ● Tolerate emotions
Coping <i>Coping Efficacy</i>	Coping efficacy is about the "fit" between the choice of coping strategy and the "changeability" of the stressful situation (Chesney, Folkman & Chambers, 1996; 2003)	<ul style="list-style-type: none"> ● Appraisal of situation ● Attentional deployment ● Response modulation
Coping	Interventions to enhance coping play an important role in both the prevention and	<ul style="list-style-type: none"> ● Social support ● Problem-solving

<i>Coping Skills</i>	treatment of psychopathology (Smith, 1980; Anshel & Gregory, 1990)	<ul style="list-style-type: none"> ● Avoidance ● Positive thinking
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Recovery

Engaging societal forces to activate the essential building blocks

In order to strengthen cities and citizens, policymakers need to create a system to build their capacity for a strong recovery in terms of providing the framework, resources and evaluation of adult and youth health initiatives. In order to achieve this capacity, there are six capacity areas that should be focused on: Commitment to Youth Development, Partnerships and Collaborations, Education and technical assistance, Planning & Evaluation, Policy & Advocacy (see table #3; Association of Maternal & Child Health Programs, 2004). The importance of a societal/governmental dedication to the positive development of its youth in terms of an explicit statement in terms of allocation of resources for staff, programs, systems and health issues as well as the concrete development of strategic plans and conceptual frameworks in order to formalize and support these initiatives. This “System Capacity for Adolescent Health: Public Health Improvement Tool” outlines the specific actions policymakers in the areas of youth, health, public safety and education as well as, health officials can undertake in order to assess the current capacity as well as identify areas needing improvement.

Table 3. The six key system capacity areas

Capacity Area	Description	Activities	Outputs
Commitment to Youth Development	Commitment to health engenders a formal process of recognizing youth as a program and policy priority	<ul style="list-style-type: none"> ● Dedicated resources ● Staff expertise ● Youth health focal points 	Resources such as staff, programs, systems and health issues. (e.g. strategic plans and conceptual frameworks that guide actions, documents and other informational resources that highlight youth health issues).
Partnerships and Collaborations	Partnerships to promote health initiatives are collaborative relationships with individuals, families, communities, schools, health providers and other agencies, and organizations or groups interested in youth health issues	<ul style="list-style-type: none"> ● Working Relationships ● Partnerships – Coverage and Effectiveness ● Partnerships with Youth and Families 	Provide formal and informal structures that interact across multiple levels to promote youth health from the local to the state level; Effectively and constructively work together to identify, understand, and solve problems facing youth;
Education and technical assistance	To build the capacity of individuals, families, communities and partners to successfully address youth health issues.	<ul style="list-style-type: none"> ● Public education ● Professional education ● Technical assistance (i.e. support programs/trainings/workshops) 	Education and technical assistance can also be provided to professionals - those individuals, organizations and partners that address youth issues. The goal is to build workforce that is able to effectively improve the health of youth.

<p>Planning & Evaluation</p>	<p>Youth development principles can be incorporated into programs and services at the planning, implementation, and evaluation stages. Across those stages, collaboration with and input from key stakeholders, including young people themselves and their families, is critical. Program assessment or intake processes should include the identification of youth needs as well as their assets, strengths, and interests.</p>	<ul style="list-style-type: none"> ● Program Planning Process ● Program Fit to Population ● Program Evaluation 	<p>Systematic assessment and identification of youth health issues and needs; Collaborative structures through which key stakeholders, including youth and their families, are routinely involved in all planning and evaluation activities; and Established indicators of success that are tracked for continual quality improvement.</p>
<p>Policy & Advocacy</p>	<p>Policy is a course of action designed to define issues, influence decision-making and promote broad community actions for youth health. Advocacy is the act of speaking out on issues of concern or arguing in favor of an idea or a policy. It is often a process of educating key stakeholders and decision-makers about youth and their health.</p>	<ul style="list-style-type: none"> ● Legislative policy ● Programmatic policy ● Education/ Advocacy for action 	<p>Legislative (e.g. laws, statutes, regulations addressing youth health issues) or programmatic (plans that guide how an agency carries out its roles and responsibilities)</p>

In the following table, a selection of case examples of academic studies investigating either Coping or Resiliency, is presented. While many of the contexts within which this research took place are different in terms of the type of disaster or trauma leading to a threat to individual development, these case examples are still applicable, since they draw on large scale disasters/situations in which coping and resiliency have played an important role in the recovery of individuals, families and/or communities in terms of positive developmental outcomes. The aim of this overview is to present different forms of interventions concerning Coping or Resiliency as well as their eventual effect.

Table 4. Examples of interventions on Coping and Resiliency

Intervention/Focus	Element (for definitions, see Table 2)	Outcome	Summary
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Rochester Child Resilience Project (Cowen, Pryor-Brown, Hightower, & Lotyczewski, 1991).	<i>Sense of Mastery</i>	Positive efficacy expectations in 10–12 year-olds predicted better behavioral adaptation and resilience to stress	Previous research and theory suggests that children and youth who have a greater sense of competence/efficacy may be more likely to succeed in a school environment and less likely to develop pathological symptoms.
Project Competence group (Masten & Powell, 2003)	<i>Sense of Mastery</i>	Focused on competence criteria for positive adaptation in age-salient developmental tasks	
Stress, social support, and the buffering effect (Cohen & Wills, 1985)	<i>Sense of Relatedness</i>	Positive association between social support and well-being: the effect of support or a process of support protecting persons from stressful events.	Previous research has indicated that perceived support, as distinguished from actual support, is the dimension of social support that is most strongly related to psychological well-being in adults and children.
School-aged stress (Jackson & Warren, 2000)	<i>Sense of Relatedness</i>	Support was found for global social support and positive life events in predicting adaptive, externalizing, and internalizing behavior.	
Study of high-risk populations to understanding the development of emotion regulation (Cicchetti, Ganiban, & Barnett, 1991)	<i>Emotional Reactivity/ Emotion Awareness</i>	Emotional reactivity or the ability to modulate emotional responses is a significant factor in fostering resilience	Limited emotional awareness, emotional reactivity and related difficulties with emotion regulation have been associated with behavioral maladjustment and vulnerability to pathology.
Emotion and self-regulation (Thompson, 1990)	<i>Emotional Reactivity/ Emotion Awareness</i>	Awareness, regulation and redirection of emotional arousal are necessary for children to function adaptively in emotionally challenging situations	
Coping effectiveness training in HIV-patients (Chesney et al. 2003)	<i>Coping Efficacy</i>	Coping effectiveness training proved successful in improving perceived stress, burnout, and anxiety in HIV-patients relative to control conditions	Coping effectiveness training improves coping self-efficacy, coping effectiveness and positively impacts overall well-being.

Coping effectiveness training in relation to sport performance (Reeves et al. 2011)	Coping Efficacy	Results suggest that participants' coping self-efficacy, coping effectiveness and subjective performance improved as a result of the coping efficacy intervention	
Resilience and coping intervention for children and adolescents 7-21y old (RCI; Allen, 2014; First et al. 2018)	Coping Skills	Following the RCI intervention, participants reported significantly more hope and less stress and depression compared to controls.	Training coping skills is associated with a decrease in psychopathology, increase in overall well-being and overall favorable outcomes.
Coping skills training in chronic pain patients (Keefe et al. 2004)	Coping Skills	Coping skills training combined with exercise training improved physical fitness and strength, pain-related coping attempts, and coping self-efficacy.	

Transformation

Incorporating the essential building blocks to the new fabric of society

There are several main conclusions from the literature regarding the form and focus of Coping and Resiliency programs aimed at transforming societies. These specific recommendations come directly out of disaster context studies and create a strong framework in terms of guiding policy makers in both the choice of topics as well as the implementation of such initiatives.

- There needs to be a *sustained* focus on the needs of children post-event. Often either societal or parental needs are assumed to be enough to ensure positive recovery.
- The post-event needs for children differ from other demographic groups and therefore post-event interventions should be developed taking this *specifically* into account.
- Besides loss of schooling and its potential negative effects on children's development, there are also many other socio-emotional developments that might suffer as a result of the event (i.e. social contact and social skills, emotional support, loss of self-efficacy, increased pessimism).
- There are three main "types" of vulnerabilities: Psychological Vulnerability, Physical Vulnerability, Educational Vulnerability
- In this framework there must be a focus on creating resiliency (both systematically as well as individual agency) prior to any event, as well as, a focused response in restoring resiliency during and post-event (Peek, 2020).
- When working toward recovery following trauma or disasters there are three important foci for recovery that can be supported by public policy: to provide external support, to develop inner strength, and to acquire interpersonal and problem-solving skills (Grotberg, 2001).
- Provide external supports: this notion is akin to the concept of social connectedness (Prince-Embury & Saklofske, 2013) and the importance of emotional and instrumental social support (Anshel & Gregory, 1990)
- Develop inner strengths: This notion is akin to self-esteem and emotional awareness.
- Acquire interpersonal and problem-solving skills: this notion is akin to Bandura's concept of self-efficacy, coping efficacy and the development of a wide range of ready-to-use and employ coping skills (Chesney, Folkman & Chambers, 2003; Anshel & Gregory, 1990)

- *“The prevalence of some of the most common specific disorders and syndromes and their associated risk and protective factors varies across culture”, however...*
- *“Patterns of comorbidity and responses to treatment vary little across cultures.”*
- Focus on post-event initiatives should be on supporting families and providing psychoeducational opportunities for development and growth.
- A strong emphasis should also be placed in identifying long-term negative mental health issues (Williams, Alexander, Bolsover & Bakke, 2008)

Current Examples of Coping and Resiliency Projects in Rotterdam

Dr. Godor and Dr. Van der Hallen have developed two psychoeducational programs focused on coping and resilience for two on-going social impact projects. Both psychoeducational programs have been specifically developed for primary school-aged children and combine elements of coping and resiliency with sports and inquiry-based learning. The first, “Citizen Science” is a joint project with the EUR Science Hub and involves a series of classroom lessons that offer children the chance to explore their coping styles and discover how resilient they are. In these classroom lessons, children actively “investigate” these topics and set up their own mini-research project to delve into coping and resilience. The second project, Sv GIO, is in cooperation with the Giovanni van Bronckhorst foundation (and the EUR Science Hub). It involves a 20-week program, with a focus on coping and resilience as well as lots of sport activities incorporated into the program. Both social impact projects are supervised by either Dr. Godor and/or Dr. Van der Hallen and researched in terms of their effectiveness. Preliminary results show that children that followed Sv GIO program showed a significant increase in optimism and self-efficacy.

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