Resilience Interventions Are Here: The Psychology of Toughen Up and Suck It Up


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Reviewed by

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Resilience is an appealing topic in the popular media. We’d all like to have it—to be able to spring back easily into shape when twisted or stretched by adversity. But as a concept in psychology, it is the word “adversity” that causes concern. Do we want children and families and people generally to be resilient in the face of adversity, or do we really want them to have less adversity? In the maelstrom of life, of course, with its ups and downs, it is good to be able to handle the downs. But as a deliberate intervention strategy—trying to foster resilience or teach resilient coping skills—it is hard to escape the truth that it might be better to reduce the adversity. And it is usually in the face of chronic adversity that resilience enhancement is proposed; in the United States these are often identified as domestic violence, poverty, homelessness, ill-health, sexual abuse, or resource-poor and crime-filled neighborhoods.

It was from this perspective that we approached *Resilience Interventions for Youth in Diverse Populations*. Could our cynicism be dispelled? Would the evidence support the promoting and building of resilience and what would the controlled comparisons be: Doing nothing or directly reducing the risks and enhancing the supports—combatting the adversity?

Not surprisingly, the editors are well aware of this dilemma. They solicited contributions to this edited work that are indeed diverse and come from a number of different countries: Canada, Greece, and Australia. In the United States, the “at risk” groups that chapter authors identified for resilience building include African-American and Latina middle school girls from low income communities, preschoolers from families who are homeless, children in foster care, transsexual youth, children with chronic illness, and students with mental health needs, as well as children with specific developmental disorders such as autism, intellectual disability, and attention-deficit/hyperactivity disorder. That is indeed a wide...
spread of adversity in this country, and truly, not circumstances whose core social challenges will be remedied any time soon. So if resilience training helps them at all, it is obviously a very good thing.

Inevitably, perhaps, *Resilience Interventions for Youth in Diverse Populations* reveals that resilience training has promise across this wide spectrum. Most programs, including those from other countries, are well described, offering very practical suggestions and ideas that seem promising and that fit within the editors’ general perspective. As the editors have made a distinguished contribution themselves to this perspective, it is worth mentioning that one of them, Sandra Prince-Embury, offers a thorough and authoritative review of resilience concepts, as well as presenting her three-factor model of personal resilience as a way of integrating all these different interventions.

Briefly, the three factors in her model are as follows: (a) having a sense of mastery, which involves elements such as identifying strengths and encouraging self-praise; (b) having a sense of relatedness, which includes, obviously, relationships with caring adults who are trusted, developing support networks, and from the individual’s side, enhanced social skills and empathy; and (c) having the ability to regulate emotional reactivity. Some of the support for the model is related to the emergence and construct validation of an instrument to measure resiliency in children and adolescents (Prince-Embury, 2007). The problem, however, as we see it, is in the complexity of elements, influences, and variables, ranging from environmental circumstances (having a caring adult, the presence of social supports), to acquired (learned) social and emotional skills (empathy, relating interpersonally), to foundational personality and temperamental variables such as emotion regulation and behavioral inhibition.

Incorporating most of these complex elements, the best researched program is the FRIENDS program developed by Paula Barrett and colleagues in Australia. It is a broad cognitive-behavioral therapy program designed to help children and adolescents cope with stress and worry. What makes it a resilience program is that it is offered broadly to school students before they need clinical interventions for anxiety and depression. It has been extensively replicated and evaluated in many different settings. The acronym stands for Feelings, Relaxing, Inner helpful thoughts, Exploring solutions, Now rewarding yourself, Doing it every day, and Staying strong inside.

How, we wonder, would this approach compare with a rather different program targeting leadership skills in middle school girls, described in Chapter 6, “Girls Leading Outward (GLO)”? In this program at-risk students are first identified. We have to say that there are many negative implications of such an approach. Who wants to be identified as an at-risk ethnic minority from a poor area? Twenty years ago, when Evans and colleagues were conducting school dropout prevention programs across New York State (Evans, Cicchelli, Cohen, & Shapiro, 1995), the one thing we all agreed on was never to identify, label, and use as a selection criterion for programs the concept that a student was inherently at risk. Maybe it is the emotional environment of the school—its culture—that contains the risk, not the students (Evans & Harvey, 2012).

The problem with these criticisms is that in most cases one could not possibly object to the proposed resilience interventions. Who would argue, for example, that increasing executive functions would not be good for homeless and highly mobile preschoolers (Chapter 7 by
Casey and colleagues)? But really, shouldn’t we start out by finding them a home—in the world’s richest country?

Not all the chapters focus on inherent adverse conditions. Sesame Street, for instance, as Chapter 9 tells us, is watched by millions of children in the United States. (Strangely the lead author is from Turkey, but that country and its children’s needs are never mentioned.) Thinking about how one can go beyond entertainment or basic counting and color-naming skills towards friendship, tolerance, empathy, changes, and so forth, has long been an implicit component of the Sesame Street brand—available to all children. Adding workbooks and extra components that relate to such experiences as parental divorce or paternal incarceration is excellent community intervention, just as in the past the program has promoted inter-racial acceptance, tolerance for disabilities, and the importance of thinking ahead (executive cognitive skills).

The program from Greece started with the premise that the financial crisis in Greece and the imposed austerity national budget created both adverse conditions and the need for educational psychology to reinvent itself. It is very interesting to track the authors’ attempts to move away from an individual focus toward a positive psychology perspective and “systems interventions that emphasize students’ strengths and contextual protective factors” (p. 301). At one level you could argue that this somewhat negates our sense that resilience development focuses too much on the individual and not enough on the context of some children’s lives. However, it is far from clear to us that a temporary economic set-back in one of the countries of the European Union and in the Eurozone represents anything like the adversity that less-developed countries experience chronically.

The Canadian program for children with autism emphasizes protective factors for children with this disability. The individual ones are, however, simply the opposite of autistic characteristics—having friends, a sense of humor, self-confidence, and academic strengths. Protective factors from the family and community include family support, community support, and peer support, and from the school, such factors as quality teachers. Who would dispute the wisdom of all that?

Overall, then, there is a strong focus on adding programs for young people in schools, and we feel there are rich ideas that are easily applicable, considering that many of the programs described are now aiming to provide online resources and training opportunities for those who are interested. The book may be a good starting point for educational services to review and consider the various options that might be integrated into their curricula. The emphasis on positive psychology and prevention is pleasing to see. Many clinical and educational psychologists will find many useful ideas, but will need to remember that the majority of the programs described have not been formally evaluated.

And that leads us back to the original concern. Resilience is a catchy idea and a feel-good concept for psychology. The concepts and theories presented, especially by the editors, are difficult to refute. But ask yourself—what places a child or adolescent in our global societies at risk, and what social, emotional, and environmental experiences are not protective factors? It is beyond the province of contemporary psychology to ask questions about relative national wealth and quality of life, but maybe a simple example will express our disquiet. Cyber-bullying has become a problem in the United States and other industrialized countries. But you can’t be cyberbullied unless you have a cell phone and a Twitter account,
a laptop with internet access, or a Facebook page where you can “face” daily rejection. That does not sound like deprivation.

When you then look at the children in the world who are denied education, who are chronically hungry, who are refugees living in United Nations tents in a foreign country, who are orphaned by HIV/AIDS and Ebola, or who are genitally mutilated, stoned, whipped or otherwise denigrated in the name of religion, it is a little difficult to get too concerned about worried Australian teens, financially strapped Greek families, or kids with too many smartphones. All resilience challenges are not created equal.

That may be a harsh comment, but we consider there is a dark side of resilience work: It seems to judge children and youth to be at risk because they are not adequate to weather inequitable systems and flawed institutions. We would love to see, when formal outcome studies do become available, that the control group participants (in the United States) are young people who have access to free school breakfasts, nutritional lunches, emotionally available teachers, supportive pathways to tertiary education, and free community college. This may sound political, and it is. But resilience work, however much we need to be open to its possibilities, also represents a form of political philosophy—an extension of the great American dream: suck it up kid, toughen up, success comes to those individuals willing to take responsibility (control their emotions), work hard, feel powerful, and reward themselves.

References