Introduction to the Special Issue: Assessing Resiliency in Children and Adolescents

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Abstract

This Introduction to the JPA special issue Assessing Resiliency in Children and Adolescents presents measurement issues encountered in the past as well as criteria for currently needed user friendly measures. These criteria include the following: (a) tools should be based on developmentally appropriate factors of resiliency that are well grounded in theory, (b) should be brief, user friendly and easy to administer, applicable for group and individual use, (c) should be theoretically and practically linked to intervention and (d) be psychometrically sound. Four tools for assessing strengths/resiliency are introduced and discussed in articles that follow in the Special Issue.

Keywords

resilience, resiliency, strength assessment, personal resiliency profile

The study of resiliency or the ability to bounce back in the face of adversity has been a topic of investigation by developmental theorists for the past 50 years. Earlier researchers started by noticing that some youth managed to survive exposure to adversity whereas others developed psychopathology. The field has gone through many rich phases of discovery, identifying aspects of both child and environment that appeared to serve as protective or mitigating variables to the impact of adversity. Much of previous resilience research has examined the interaction of protective factors and risk in high risk populations. The focus of this work has been the identification of factors that were present in the lives of those who thrived in the face of adversity as compared with those who did not (Garmezy, Masten, & Tellegen, 1984; Luthar, 1991; Luthar & Zelazo, 2003; Masten, 2001; Rutter, Harrington, Quinton, & Pickles, 1994; Werner & Smith, 1982, 1992, 2001).

Broad-Based Resilience Assessment Issues

Several outstanding researchers and theorists have attempted to integrate the many research findings and their implications for practical application. However, the understanding that resilience is a product of complex interactions of personal attributes and environmental circumstances, mediated by internal mechanisms, has presented an assessment challenge to developmental

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researchers (Luthar, Cicchetti, & Becker, 2000). Studies from a developmental psychopathology perspective have been longitudinal and have tried to capture contextual aspects of resilience specific to the group and sets of circumstances. These studies have employed extensive batteries of preexisting tests, along with measures of achievement, to assess personal resiliency. In this process, "resilience" has been distinguished from "resiliency" in that the former is defined as interactive and contextual and the latter addresses personal attributes of the individual (Luthar & Zelazo, 2003). Research from both perspectives has used different measures across studies and across populations, making it difficult to compare across studies and across groups. The research-based tools employed in previous research have often been impractical for widespread use in the school community because they are too labor intensive, expensive or focused on presence or absence of psychiatric symptoms. Consequently, the lack of a common metric has resulted in difficulty in assessing the need for, choice of and effectiveness of preventive intervention strategies in a way that allows comparison across methods and populations.

On a practical level, it has been suggested that there is work to be done in making tools more field-friendly (Masten, 2001; Masten & Powell, 2003). Hence, there is a need for measures and benchmarks that are brief; easily administered, scored, and interpreted. In addition, tools for use with diverse populations and school systems would need to be bias free with respect to gender and ethnicity and worded so that it might be used with a broad range of reading levels. To gain acceptance with parents, students and teachers in school settings, tools for assessing resilience/resiliency need to be strength based and informative while at the same time avoiding stigmatizing or "pathologizing" of groups or individuals.

In summary, there are many methodological issues related to resilience/resiliency assessment which include defining, measuring, and interpreting resilience. This special issue on resiliency assessment is focused on currently available tools for examining resilience/resiliency in standardized ways, across different populations and in different settings. Within a zeitgeist that asks for empirical validity, assessment methods that are most useful: (a) are based on developmentally appropriate factors of resiliency that are well grounded in theory, (b) are brief, user friendly and easy to administer, applicable for group and individual use, and (c) theoretically and practically linked to intervention. In short, useful assessments of resiliency should suggest specific interventions as well as allowing the monitoring of their effectiveness. The articles presented in this special issue were selected to provide examples of adherence to these principles in ways that are varied and applicable to different populations and settings.

The articles in this special issue employ four different instruments designed to assess strengths or resiliency. Although these assessments vary in the way that they address resiliency, they all adhere to the criteria mentioned above. The Resiliency Scales for Children and Adolescents (RSCA) assess personal resiliency as experienced by youth (aged 9-18 years) in their everyday lives and expressed in their own words (Prince-Embury, 2007). The ClassMaps Survey assesses aspects of resiliency in aggregate within the context of individual classrooms (Doll, Zucker, & Brehm, 2004). The Devereux Early Childhood Assessment–Clinical Form (DECA-C) assesses strengths and problems of children (aged 2-5 years) as rated by their teachers (LeBuffe & Naglieri, 2004) and the Devereux Student Strengths Assessment (DESSA; LeBuffe & Naglieri, 2008) represents strengths in children (kindergarten through eighth grade) as rated by their parents.

The first section of this special issue includes four articles employing the RSCA (The first section of this special issue includes four articles employing the RSCA (Prince-Embury, IN PRESS; Prince-Embury & Steer, IN PRESS; Kumar, Steer & Gulab, IN PRESS; Mowder, Cummings & McKinney, IN PRESS). The first article addresses the use of the RSCA in clinical samples. Findings of adequate psychometric properties in clinical samples support the notion that children with clinical diagnoses have strengths as well as vulnerabilities. The significance of this finding is that the RSCA may be used to suggest interventions and monitor progress in

Prince-Embury 3

diverse samples, including those with clinical diagnoses. The next three articles demonstrate the use of the RSCA Personal Resiliency Profile with nonclinical, clinical, and offending youth. These articles demonstrate the usefulness of considering resiliency in terms of multiple dimensions across diverse samples. Specific validity evidence is provided differentiating personal resiliency profiles as appropriate for each sample.

The fifth article presents the ClassMaps Survey, which is an ecologically based tool that uses students reports of classroom experience to provide feedback for teacher modification of the classroom environment to foster resiliency in students (Doll, Kurien, LeClair, et al., 2009; Doll, Spies, LeClair, Kurien, & Foley, in press). In this study, Doll et al employ confirmatory factor analysis to examine the seven-factor structure of the ClassMaps Survey administered to middle school science students. Validity evidence is provided to support the structure of the ClassMaps Survey and the relationship between student engagement in science and student attitudes expressed in the ClassMaps Survey particularly "belief in self" and "taking charge."

The sixth article by Oades-Sese and Kaliski (**IN PRESS**) employs confirmatory factor analysis to examine the factor structure of the DECA-C as well as its applicability with a sample of Hispanic children between the ages of 3 and 5 years. These authors suggest future replication of their study for the purpose of assuring the factor structure of the DECA-C for use with similar samples of children.

The seventh article by Naglieri, Goldstein, and LeBuffe (IN PRESS) explores the relationship between parent ratings of protective factors on the DESSA and parent ratings of child impairment of functioning in the home. Findings reported suggest that impairment of functioning in the home is related to absence of protective factors.

In summary, the articles in this special issue suggest that aspects of strength and resiliency may be assessed for children and adolescents in a variety of ways that are psychometrically sound and practical to use. There is a consensus that resiliency is multidimensional and that constructs have been identified as core to the development of resiliency such as mastery/initiation, relatedness/attachment, self/behavioral control. Collectively, these tools suggest that resiliency may be assessed through child self-report, other ratings, or both depending on the intended application. Future validity research for these instruments might include use of each other as evidence of validity and construct refinement.

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