


2017

# Elementary School Social Workers' Perspectives on the Development of Resilience in Early Childhood

Dan Podraza  
*Walden University*

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>

 Part of the [Educational Psychology Commons](#), and the [Social and Philosophical Foundations of Education Commons](#)

---

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact [ScholarWorks@waldenu.edu](mailto:ScholarWorks@waldenu.edu).

# Walden University

COLLEGE OF EDUCATION

This is to certify that the doctoral study by

Dan Podraza

has been found to be complete and satisfactory in all respects,  
and that any and all revisions required by  
the review committee have been made.

Review Committee

Dr. Donna Brackin, Committee Chairperson, Education Faculty

Dr. Christina Dawson, Committee Member, Education Faculty

Dr. Mary Howe, University Reviewer, Education Faculty

Chief Academic Officer

Eric Riedel, Ph.D.

Walden University

2017

Abstract

Elementary School Social Workers' Perspectives on the Development of

Resilience in Early Childhood

by

Danny John Podraza

MA, Northeastern Illinois University, 1973

BS, Illinois Institute of Technology, 1970

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Education

Walden University

April 2017

## Abstract

Researchers have stressed the importance of addressing the social/emotional needs of early childhood (EC) children, including the development of resilience; however, some U.S. school personnel focus more on academics than on these needs. When young children possess these skills, they can handle social/emotional challenges later in life. The purpose of this qualitative bounded case study was to explore school social workers' (SWs) perspectives about resilience in EC settings. Research questions focused on knowledge of existing programs, participants' perceptions of the successes and challenges of working with EC students, and their recommendations to improve EC students' education. Bronfenbrenner's ecological systems theory and O'Neill's and Gopnik's work on needs of young children informed this study. Five elementary school SWs with at least 6 years' experience from 5 districts in the U.S. Midwest participated in 2 semistructured individual interviews. Interpretive phenomenological analysis, involving first-cycle, transition, and second cycle coding, was used to identify themes. SWs' experiences indicated a need for a clear definition of resilience, and needs of young children, including EC programs that develop psychological resilience of children's thoughts and an increase in adults to promote resilience. Additional research may expand and enhance educators' and families' understanding of resilience and help develop research-based preventive programs and strategies to foster psychological resilience in young children. These endeavors may enhance positive social change by adding components of psychological resilience to EC programs for school personnel and students and in parent/family workshops, which may result in sound mental health practices that enable them to become productive members of society.

Elementary School Social Workers' Perspectives on the Development of  
Resilience in Early Childhood

by

Danny John Podraza

MA, Northeastern Illinois University, 1973

BS, Illinois Institute of Technology, 1970

Dissertation Submitted in Partial Fulfillment  
of the Requirements for the Degree of  
Doctor of Education

Walden University

April 2017

## Dedication

I dedicate this work to the short life of my sister Diane and to all the lonely children in the world who need a caring someone with whom to talk and who will hear them.

## Acknowledgements

I am grateful for my mother who gave me the constant advice beginning at an early age to figure things out and find the reason. I want to thank my four children; Bradley, Jennifer, Christopher, and Michael, for teaching me much about resilience. To my grandchildren Shane, Abby, Nathan, Cole, Jacob, and Alexandra, together with Constantine, Vytas, and Lianna - thank you for being my best teachers. You taught me the importance of active listening to the fears of children without judgment beginning at very young ages. With my last breath on earth, I will always try to stay connected with you and promote connections in the world.

I am thankful to Dr. Donna Brackin, whose dedication and inspiration through this doctoral process helped make this degree possible by helping me to overcome the bumps in the road. I am thankful to Dr. Christina Dawson for the expertise and encouragement that helped me in this process and provides connections as I go out in the world as a children's advocate with the message that children need to be heard. Most importantly, I want to thank my lovely wife Janina for her support that made this important step in my life's journey possible.

## Table of Contents

Chapter 1: Introduction to the Study.....	1
Background.....	3
Problem Statement.....	4
Purpose of the Study.....	6
Research Questions.....	7
Conceptual Framework.....	7
Nature of the Study.....	9
Definitions.....	11
Assumptions.....	11
Scope and Delimitations.....	12
Limitations.....	13
Significance.....	14
Summary.....	16
Chapter 2: Literature Review.....	18
Literature Search Strategy.....	19
Conceptual Framework.....	20
Literature Review Related to the Development of Resilience.....	22
History, Definitions, and Current Research.....	23
Societal Problems and Influences on Positive Behavior.....	29
Measures of Resilience.....	32
KidsMatter and FRIENDS Programs.....	35
Extrinsically-Based Programs.....	37



Intrinsically-Based Programs.....	43
Social Workers and Communication with Young Children .....	46
Studies that Help Inform the Methodology of This Study.....	48
Summary and Conclusions .....	53
Chapter 3: Research Method.....	55
Research Design and Rationale .....	55
Role of the Researcher .....	57
Methodology.....	61
Participant Selection .....	61
Instrumentation .....	64
Procedures for Recruitment, Participation, and Data Collection.....	66
Data Analysis Plan.....	67
Validation Procedures.....	70
Trustworthiness.....	70
Ethical Procedures .....	72
Summary.....	74
Chapter 4: Results.....	76
Demographics .....	77
Settings.....	80
Data Collection—First Interviews .....	81
Data Analysis—First Interviews.....	82
Coding Process and Subcodes .....	83
Emergent Themes .....	84

Conceptual Coding—The Concept of Resilience .....	85
Discrepant Cases .....	86
Results—First Interviews.....	87
Theme 1—Developing Resilience using Current SEL Programs.....	87
Theme 2—Possible Attributes that Foster Resilience .....	89
Theme 3—SEL versus Time for Academics .....	89
Theme 4—Social Work as Prevention.....	90
Theme 5—Involving Parents and Mentors (Communicating and Connecting) .....	91
Theme 6—Social Issues and Developing Resilience.....	94
Theme 7—Developing of a Resilience Capacity in EC and Outcomes in Later Life .....	95
Theme 8—Resilience and Thoughts of Children.....	96
Data Collection—Second Interviews.....	101
Data Analysis—Second Interviews .....	102
Emergent Themes .....	103
Discrepant Cases .....	103
Results—Second Interviews .....	104
Social Workers' Experiences and "Thought Fears" .....	105
Handling Thought Fears .....	111
Connecting Handling of Thought Fears in EC to Later Life .....	117
Social Workers' Recommendations .....	120
Evidence of Trustworthiness.....	123

Summary .....	125
Chapter 5: Discussion, Conclusion, and Recommendations .....	128
Interpretation of the Findings.....	132
What programs and methods have elementary school social workers experienced that support developing resilience in young children? .....	133
What successes and challenges have the social workers experienced regarding the development of resilience in young children? .....	138
How do social workers perceive the development of resilience in young children as an influence in later life? .....	140
What are the social workers' recommendations for future practice? .....	141
Limitations of the Study.....	144
Recommendations for Further Research.....	145
Implications.....	148
Conclusions.....	151
References.....	154
Appendix A: Interview Questions and Possible Probes .....	175
Appendix B: Participant Thoughts Between Interviews.....	177
Appendix C: Discussion and Questions for Second Round of Interviews .....	178

## Chapter 1: Introduction to the Study

In the United States as well as other nations, clinicians, researchers, and others who work with children are increasingly focused on the issue of resilience. Dr. Block, the immediate past president of the American Academy of Pediatrics (AAP), chose resilience in young children as a key topic of his speech at the 2015 meeting of the American Pediatric Surgical Association (Block, 2016). Dr. Shonkoff and other researchers at the Center on the Developing Child at Harvard University have also given attention to the topic of resilience in children by investigating the effects of toxic stress, supportive relationships, and active skill building (Foxhall, 2014; National Scientific Council on the Developing Child [NSCDC], 2015). The National Association for the Education of Young Children (NAEYC) and the Devereaux Center suggested that educators examine resilience in children when considering their social and emotional needs (Copple & Bredekamp, 2009; Friedman, 2016; Olmore, 2016). There is also worldwide interest in developing resilience in children (see Barrett et al., 2014; Benard, 2004; Block, 2016; Fletcher & Sarkar, 2013; Foxhall, 2014; Huppert & So, 2013; Masten, 2014; Matyas & Pelling, 2015; NSCDC, 2015; Stefan & Miclea, 2014; Ungar, 2015; Wright et al., 2013). Dr. Ungar, the director of the Resilience Research Centre in Canada, hosted the conference 2015 Pathways to Resilience III, in which 540 countries were represented.

Despite the increased interest in the study resilience in childhood, the State Board of Education (SBE) in the Midwestern U.S. state where this study was conducted has focused on academics as defined in the Common Core curriculum and Partnership for Assessment of Readiness for College and Careers (PARCC) testing (State Board of

Education, 2016a). The largest elementary school district in this state serves preschool through Grade 8 and is an example of a suburban school district that lists its goals as being academic in nature. Staffers assessed many of this district's goals and projects by administering Measures of Academic Progress (MAP) tests to students; they did not list resilience as part of any goal or project for district schools. One district goal includes that student academic performance be incorporated into all teacher evaluations as mandated by the SBE (2016c, p. 3). According to Benard (2004) and Masten (2014), educators should resist focusing on test scores at the expense of developing resilience in their students. Therefore, I concluded that the SBE's emphasis on academic outcomes rather than on resilience has created a gap in educational practice. Early childhood (EC) experiences that promote resilience are important and may have a lasting effect on individuals (Gopnik, 2009).

I designed this study to explore this perceived gap in practice in the local suburban EC setting. Using a qualitative approach, I examined the perspectives of social workers working in this public school system about the development of resilience in preschool to Grade 3 students. Local suburban school districts for this study included those that were public school districts which were involved in EC and did not serve any specific populations. By exploring the topic of developing resilience in children in EC school settings, I sought to add to the current literature on resilience and encourage educators to create preventative programs to help children develop resilience. Most researchers who have examined resilience in children have sought to address world problems such as toxic stress from family separation due to wars or natural disasters. I

planned to examine resilience in the context of EC in local suburban school districts. Conducting open-ended one-on-one interviews with social workers who are experienced in EC allowed me to understand their perspectives. The first section of this introductory chapter contains background information on research on resilience that addresses the social and emotional needs of children and young adults. In the succeeding sections, I identify social problems such as anxiety and suicide at the national and local levels followed by the research questions and purpose of this study. The remaining sections include the conceptual framework, nature of this study, definitions, assumptions, scope, delimitations, limitations, and significance of this study.

### **Background**

The study of resilience can be traced back 50 years (Goldstein & Brooks, 2013) and can be broken down into four major waves (Masten 2014; Wright, Masten, & Narayan, 2013). The pioneers of resilience science from the first and second waves identified resilience as a verifiable phenomenon and studied the process of how individuals gained resilience (Benard, 2004; Cowen, Wyman, Work, & Parker, 1990; Gribble et al., 1993; Wang, Zhang, & Zimmerman, 2015; Werner, 1993). Fourth wave researchers, such as those at the Center on the Developing Child at Harvard University and the NSCDC, are analyzing genes, hormones, brain structure/development, and toxic stress of high-risk populations, (Center on the Developing Child at Harvard University, 2016a; NSCDC, 2004). This type of fourth wave research is beyond the scope of this study. The third wave of resilience researchers continue to create new theory and action concerning the processes that facilitate positive outcomes (Masten, 2014; Wright et al.,

2013). I designed this study to inform third wave resilience researchers and local administrators about possible preventive processes that may influence young children's later lives.

Neither the local school district personnel nor state mandate documents made any reference to the development of resilience in young children (SBE, 2016a; SBE, 2016c; School District AB, 2016a). The lack of attention to resilience factors has created a gap in EC educational practice, which I sought to address with my research. I sought to inform researchers and local administrators about possible preventive processes that may influence young children's later lives.

### **Problem Statement**

An extensive body of research has established the importance of addressing individual socioemotional needs in EC (see Barrett, Cooper, & Teoh, 2014; Benard, 2004; Copple & Bredekamp, 2009; Elias, 2014; Gopnik, 2009; Masten, 2014). Researchers have conducted studies to identify and to explain the severity of social ills, such as coming from toxic stress, that have roots in EC (Bak et al., 2015; Elias, 2014; Goldstein & Brooks, 2013; Hu, Zhang, & Yang, 2015; Matyas & Pelling, 2015; Shern, Blanch, & Steverman, 2016). Resilience gives children an ability to handle toxic stress and can lead to more productive lives (NSCDC, 2015). According to the World Health Organization (WHO) (2013), there is an urgency associated with the need to develop resilience in young children as 50% of mental disorders begin before age 14. Sound mental health practices in childhood can lay a foundation for good mental health, including the development of resilience, which lasts into adulthood (NSCDC, 2012;

Center on the Developing Child at Harvard University, 2016a). In my interviews with local social workers, I sought to gauge how they felt early resilience support might affect children's outcomes in later life.

At a local elementary school district, an assistant superintendent acknowledged the need for educators to provide more socioemotional attention at the EC level so that existing problems would not increase or become more intense later in life (C. W, personal communication, February 4, 2016). A social worker, who had been in the local high school district for over 25 years, stated that the number of students receiving help for anxiety had increased (G. H, personal communication, October 13, 2015). The social worker also noted that during her tenure resilience had decreased among students. The program administrator for the alternative high school reported a rise in anxiety, depression, and mental illness among students (R. B, personal communication, October 13, 2015).

Suicide is a topic of concern in the United States. Data from the Center for Disease Control and Prevention's (CDC) annual Youth Risk Behavior Survey (YRBS) show that the percentage of public and private high school students who seriously considered attempting suicide in the 12 months before the survey increased from 13.8 in 2009 to 17.0 in 2013 (CDC, 2013). In the same study, the percentage of students who had made a plan for suicide increased from 10.9 in 2009 to 13.6 in 2013. These data coincide with the CDC (2013) report showing that suicides were the second leading cause of death in the United States in both the 15-24 and the 25-44 age groups. In a study of the Garrett Lee Smith Youth Suicide Prevention Program, researchers found that building resilience



contributed to a decrease in suicide rates of the 10 to 24-year-old population studied (Walrath, Garraza, Reid, Goldston, & McKeon, 2015). Resilience is a significant factor in human wellbeing (Huppert & So, 2013). I hope that my study findings and conclusions may help to initiate discussion among educators and researchers concerning how the development of resilience in young children may prevent destructive behaviors and promote more positive outcomes in later life.

### **Purpose of the Study**

The purpose of this qualitative study was to explore the lived experiences and self-reported interpretations of social workers in local EC settings concerning the development of resilience in children. I organized this study in a manner that is consistent with the interpretive phenomenological analysis (IPA) approach (Smith, Flowers, & Larkin, 2009) to allow future researchers to build upon this work. My goals were three-fold in that I sought to (a) obtain social worker participants' interpretations of how resilience affects the lives of students in an EC setting, (b) examine their perspectives on what is being done and what should be done in schools to develop resilience in individual children, and (c) explore their thoughts of how the development of resilience may influence the future of children. By exploring the deep, rich thoughts of social workers using an open-ended interview process, I sought to provide an impetus for social change through a better understanding of the capacity for resilience and how it can be developed in young children. My aim for this study was to add to the literature by gaining perspectives on what is being done in schools to promote resilience. I also wanted to

acquire a better understanding of the connection between the resilience capacity of young children and how it may relate to positive outcomes in later life.

### **Research Questions**

The major research questions were as follows:

1. What programs and methods have elementary school social workers experienced that support the development of resilience in young children?
2. What successes and challenges have the social worker participants experienced regarding the development of resilience in young children?
3. How do these social workers perceive the development of resilience in young children as an influence in later life?
4. What are these social workers' recommendations for future practice?

### **Conceptual Framework**

The concept/phenomenon that grounds this study is the development of resilience. For this study, I relied on the most general definition of resilience, which comes from an intrinsic perspective, as being “the capacity of individuals to cope successfully with significant change, adversity, or risk” (Lee & Cranford, 2008, p. 213). Historical and current definitions of resilience are included in the literature review in Chapter 2. I used the concepts of O’Neill and Gopnik (1991) concerning children’s abilities to understand their thoughts.

From a global perspective, the conceptual framework for my study was informed by Bronfenbrenner’s (1977) work on how bioecological systems support children. Bronfenbrenner emphasized the importance across several levels or systems

(microsystem, mesosystem, exosystem, macrosystem, and chronosystem) of the interactions and relationships between the child and different contextual beings and components. The most important aspects of Bronfenbrenner's typology I considered in my research were within the microsystem or the immediate setting (school and family) in which children live and grow through interpersonal relationships. Aspects of the other systems were considered, yet the focus of this study was on the microsystem.

Conforming to the social constructivist approach, I used the resilience elements as identified by the Center on the Developing Child at Harvard University (2016a, 2016b). Researchers from the Center listed four key elements to help children develop resilience:

- facilitating supportive adult-child relationships,
- building a sense of self-efficacy and perceived control,
- providing opportunities to strengthen adaptive skills and self-regulatory capacities; and
- mobilizing sources of faith, hope, and cultural traditions (Center on the Developing Child at Harvard University, 2016b, para. 5).

The Center's resilience list offered me a very general framework to use in developing specific interview questions for social worker participants. When analyzing data, I organized participant responses into categories I developed based on this list. I focused on the microsystem of the child in that responses from the social workers were framed within the direct experiences and communication that the social worker had with the child rather than the more external influences.

### **Nature of the Study**

The nature of an interpretive phenomenological analysis (IPA), according to Smith, Flowers, and Larkin (2009), is the building of an understanding of how individuals view their daily lives. A deeper understanding of the meaning of everyday experiences from first-person reports is characteristic of phenomenology (Moustakas, 1994; Van Manen, 1990). I used the IPA framework and examined the experiences and understandings of school social workers who had worked with early childhood-aged children to explore their views of how resilience was being developed or not being developed in young children. The reason that social workers were chosen was their experiences include direct one-on-one conversations with children and with caregivers of the children. Social workers were not confined to a single classroom and had one-on-one contact with children. Smith et al. (2009) affirmed that a phenomenon (resilience) requires careful interpretation of how it is perceived by each participant (social worker). IPA differs from other phenomenological studies in that there is the intention to arrive at *depth* of meaning of everyday experiences. Moustakas (1994) stated that intense interviewing may lead to "new levels of awareness" (p. 163). Van Manen (1990) described the interpretive phenomenological process as "an interweaving of person, conscious experience, and phenomenon" (p. 96). This study attempted to reach deeply into the social workers' experiences with children's resilience as suggested for IPA studies by Smith et al. (2009).

For IPA studies, Smith et al. (2009) stated that the number of interviews is the criterion for sample size rather than the number of participants. The authors stated that a

total of four to 10 interviews would be adequate. The following are examples of IPA studies having a small number of participants. Aisbett, Boyd, Francis, Newnham, and Newnham (2007) conducted a study concerning mental health in Australia by interviewing three adolescents three times each for a total of nine interviews. Symeonides and Childs (2015) interviewed six students, one time each, for a total of six interviews. Torbrand and Ellam-Dyson (2015) performed one interview each with seven college students. Nixon et al. (2013) interviewed six women once each. Fox and Diab (2015) interviewed six children one time each. An example of IPA using long distance interviewing through technology is the Miller and Minton (2016) study of interviewing six selected individuals one time each.

I interviewed five social workers by conducting two one-on-one interview sessions each which corresponds to the number of interviews as suggested by Smith et al. (2009) and is consistent with current IPA research. Hefferon and Gil-Rodriguez (2011) and Smith et al. (2009) recommended that a small number of participants be used for IPA to examine individual participants' experiences in greater depth. To reach for this greater depth, a second round of interviews allowed time for the creation of more questions which added to the data by further exploring resilience in young children.

Open-ended audio recorded interviews took place with a protocol as outlined by Smith et al. (2009). The audio recordings were transcribed into text so that I could search for categories and then have themes emerge from an inductive analysis process. Coding techniques were used in an inductive-deductive process that facilitated the data analysis (Merriam & Tisdell, 2016; Saldaña, 2013). A more detailed discussion of the

methodology that was designed to interpret the deep, rich thoughts of the social workers is presented in Chapter 3.

### **Definitions**

Early childhood: The life stage that spans from birth through age 8 (Copples, & Bredekamp, 2009).

Resilience: “The capacity of individuals to cope successfully with significant change, adversity, or risk” (Lee & Cranford, 2008, p. 213).

Resiliency and resilience are equivalent terms as stated by Wang et al. (2015). In this study, I am using the term resilience.

School social worker: A person who is part of an elementary school setting and is licensed as a social worker by the State Board of Education (SBE, 2016b).

### **Assumptions**

I assumed that the experiences of five social worker participants in this small, bounded study were sufficient to obtain the depth of experiences and emerging themes as suggested by Smith et al. (2009) and Van Manen (1990). I determined that IPA adequately provided a systematic framework for examining the stated perceptions of the participants concerning their lived experiences (Smith et al., 2009). I attempted to extract the rich, deep thoughts of the social workers concerning the development of resilience. I assumed that these participants had some degree of awareness concerning the phenomenon (Creswell, 2013) and the participants would share as openly and honestly as possible (Merriam & Tisdell, 2016).

### **Scope and Delimitations**

The scope of this study of resilience in early childhood was limited to interviewing five social workers from school districts located in a suburban area in the state. Within this region is a diverse population of cultures and socioeconomic backgrounds. Each chosen participant came from a different school district and gave verbal assurance that their experience was not restricted to a specific group of children such as, for example, children with certain cultural values or certain socioeconomic status. Because social workers are in contact with children one-on-one as well as in groups, making sense of their experiences with children was anticipated to stimulate and inform future studies.

The participants of this study were limited to social workers to reach a desired depth of study. Data from other sources could have helped in building a more comprehensive summary of the phenomenon, but was left for other research opportunities. Interviews with parents, teachers, clergy, siblings, and other individuals associated with young children were not included in this study because broadening this study would have limited the amount of rich description necessary for an IPA according to Smith et al. (2009).

Saturation was obtained through a depth of interviews while being bounded by criteria for anonymity relating to the school district and overall confidentiality. I chose to do my study in a suburban region of a large mid-western city where there were approximately 30 elementary or unit (K-12) school districts of similar demographics. One

social worker each from five of these districts participated in the study with EC experiences going beyond dealing with a small number of at-risk students.

The delimitation of this study was that there was no attempt to go into dense urban areas or outlying rural areas. Proximate dense urban areas were a part of a large unit school district that could have been challenging to deal with. Many outlying rural areas have few or no full-time social workers. Due to the limited geographic area, direct transferability of specific results is up to the reader of this study to determine applicability. The obligation of the researcher is to provide readers with enough details so that they can compare the "fit" with their situation (Merriam & Tisdell, 2016, p. 256). Because of the nature of the deep, rich interviews; the results of this study may inspire further research and seeds for social change concerning the need for EC programs that are designed to promote resilience.

### **Limitations**

This study was confined to a general study of the development of resilience in children in a public school setting and was not intended to categorize data into groups and subgroups of children of different cultures, family situations, or economic backgrounds. The small number of participants ( $N = 5$ ) hinders transferability, but the findings of this qualitative study may yield implications for further study by having the focus on depth of interview data and analysis of the lived experiences of the social workers pertaining to developing resilience in young children (Creswell, 2013; Smith et al., 2009). IPA studies are often limited in transferability, as is the case of this study, because of the homogeneous sample and low sample size (Smith et al., 2009).



Researcher bias was a possible factor in this study during the data collection process. As the sole interviewer, I attempted to minimize the influence of my biases through personal awareness by having a list of possible biases at hand during the interviews. Sources that could have been possible influences of this study were my experiences in tutor/mentor/observer experiences with children of different age groups using active listening techniques and many years of teaching. I formed opinions concerning resilience from working with young children, through discussions with older children and young adults in alternative school settings who overcame personal toxic stress, and by studying the literature. Having the list of biases available created awareness and was a mitigating factor during the interviews. My enthusiasm toward certain subjects also could have led to influencing the social workers. For example, transferring my enthusiasm to have future studies done on the development of resilience in children could have carried over to the SWs.

As the sole researcher, I was responsible for developing a second set of interview questions derived from the social workers' responses from the first round of interviews. The formation of a new set of questions was influenced by a perceived lack of clarity with the concept of resilience in the first round. Having adequate conceptual clarity is vital for this type of research (Eckman, 2015; Gerring, 2012; Merton, 1958; Podsakoff, MacKenzie, & Podsakoff, 2016; Sartori, 1984).

### **Significance**

The significance of this study is that it is an original contribution that may provide a base of understanding for area school personnel, families, and other influencing adults

about developing resilience in local early childhood settings as revealed from the experiences of social workers. While it is important to address individual socioemotional needs of children (Elias, 2014), many local school district personnel do not list the concept of resilience as being part of any current goals or projects. Many of the goals are academic based and are being measured by MAP testing (School District AB, 2016a). The SBE mandates that the MAP scores be incorporated into a teacher appraisal system (SBE, 2016c). Worton et al. (2014) stated that in early childhood there is a limited integration of evidence-based socioemotional prevention programs into public policy. This study may provide local leaders with information to help reevaluate early childhood programs, with the goal of including specialized activities and communication techniques that promote social and emotional growth including resilience. Getting families more involved in such programs is another possible outcome and would have critical value according to Schweinhart, president of the Highscope Educational Research Foundation (TEDx Talks, 2012, October 22). The results of this proposed study may inform practices and beliefs about the socioemotional development and communication with young children that would foster resilience and help prevent negative outcomes such as bullying, anxious, destructive, or suicidal behavior that may surface in later years. Possible connections can be made between the development of early childhood resilience and positive outcomes in later life that could be used to encourage further research on a more global scale.

I saw a need for this study to increase understanding of how we approach early childhood education concerning resilience. Significant contributions can come from

connecting socioemotional experiences and communication in early childhood with the development of resilience (Stefan & Miclea, 2014). This study may contribute to understanding the importance of prevention programs and methods regarding the development of resilience, and therefore it may contribute to social change on a more global basis.

This study may support social change affecting the socioemotional needs of children about the development of resilience. Children beginning in EC can be affected by new initiatives from parents, caregivers, and educational systems. Resilience gives children an ability to handle toxic stress and can lead to more productive lives (NSCDC, 2015), and this study addresses the development of resilience in young children.

### **Summary**

I was inspired to do this study from research that shows that positive and negative experiences can influence a child's behavior in later life (Barrett et al., 2014; Benard, 2004; Block, 2016; Center for the Developing Child, 2016a; Copple & Bredekamp, 2009; Cowen et al., 1990; Elias, 2014; Gopnik, 2009; Gribble et al., 1993; Masten, 2014; NSCDC, 2015; Ungar, 2015; Wang et al., 2015; Wright et al., 2013). When a child can handle fears beginning at an early age, then the development of resilient behavior can take place, and according to Gopnik (2009), this should begin at a very young age. There is a 50-year history of the study of resilience with many national and world organizations currently taking an interest in the development of resilience in children (Block, 2016; Fletcher & Sarkar, 2013; Foxhall, 2014; Masten, 2014; Matyas & Pelling, 2015; NSCDC, 2015; Ungar, 2015). There is a gap in practice at the local level concerning the

development of resilience in EC education. An IPA method was chosen for this study to investigate the concept of resilience in young children by exploring the deep, rich thoughts of social workers about their lived experiences using an open interview process. This study can help close the local gap in practice pertaining to the development of resilience in young children by contributing to the literature regarding a better general understanding of the capacity for resilience and how it is developed in young children.

The next chapter includes a literature review concerning resilience that includes an explanation of research strategy, relevance of the topic, and conclusions. The third chapter is comprised of the research method and design, the role of the researcher, implementation, and data analysis plan. Also discussed in the third chapter are trustworthiness of the research design and ethical considerations. The fourth chapter includes the data collection process, the data analysis, and the results of the study. The fifth chapter consists of the interpretation of the findings, limitations, recommendations, implications, and conclusions.

## Chapter 2: Literature Review

The problem addressed in this study was the gap in practice in local school districts pertaining to the social and emotional needs of students at the EC level. The purpose of this qualitative study was to explore the lived experiences and self-reported interpretations of social workers in these EC settings concerning the development of resilience in children. I organized this study in a manner consistent with interpretive phenomenological analysis (IPA) approach, as described by Smith et al. (2009), in order to allow future researchers to build upon this work. My goals were three-fold. I wanted to (a) obtain social worker participants' interpretations of how resilience affects the lives of students in an EC setting, (b) examine their perspectives on what is being done and what should be done in schools to develop resilience in individual children, and (c) explore their thoughts of how the development of resilience may influence the future of children.

The topics of this chapter center around resilience and include EC education, social work, and the socioemotional needs of individuals during EC. Also, I included articles that provide information on the research strategy I used. The literature cited in this chapter contains peer-reviewed articles that have been published within the last 5 years (2012-2016) with one article published in 2017. I found exceptions such as information that I considered as coming from authoritative sources and previously published peer-reviewed articles that complement the primary articles. The review is organized with subheadings so that resilience can be viewed from different perspectives relating to my problem and purpose statements.

Before presenting the review of the literature, I outline my search strategy and conceptual framework. I developed my search strategy based on my need to gain a broad understanding of resilience and better understand the role of social workers in EC settings. For my conceptual framework, I used the microsystem component of Bronfenbrenner's (1977) theory of bioecological systems to examine school activity related to developing resilience in children. However, I did include in my analysis the role of school personnel in providing awareness to better connect children with their parents regarding resilience strategies.

### **Literature Search Strategy**

For my literature review, I searched the Walden University Library in an ongoing testing process that involved using various Boolean operators and phrases with different search engines and databases. The databases that I searched individually by using different combinations of words and phrases from my matrix were PsycINFO, Science Citation Index, Social Sciences Citation Index, Expanded Academic ASAP, MEDLINE, Education Research Complete, Education Source, SocIndex, CINAHL, Science Direct, ERIC, and PsycARTICLE. The main topic I searched was the development of resilience (or, resiliency) in young children. Secondary topics included social workers, parents, school philosophy, EC education, thoughts of children, adolescence, intervention programs, and general socioemotional problems of children. In my initial searches, I explored peer reviewed articles with publishing dates after 2011. The operator *and* is built into the database search system; using this feature I formed a matrix that included headings such as prevention, children, parents, developing, and fostering. I also searched

with combinations generated from the matrix that were put in quotation marks such as *early childhood* and *psychological resilience*. The operator *not* proved to be ineffective in my search of the Thoreau database. The Thoreau search itself yielded few direct results because of the substantial number of articles that appeared. I terminated my initial search after checking on over 2,000 articles as I felt that I reached a saturation point. I continued to search for current literature in the Walden library as well as examining articles from previously created auto-alerts.

### **Conceptual Framework**

I used Lee and Cranford's (2008) definition of resilience as I searched for sources and framed the literature review. Beginning with this definition that included coping with change, adversity, and risk, I formed a conceptual framework by selecting articles for the literature review that directly pertained to young children or articles that informed this study by having examined resilience of human beings at the different ecological levels as described by Bronfenbrenner (1979).

Bronfenbrenner (1979) placed the individual at the center of the ecological system. He often referred to the child as being at the center and used examples concerning the effects of his defined subsystems on the child. The importance of studying children is also highlighted in the work of Gopnik (2009) at the University of California at Berkeley and the Shonkoff research group at the Center on the Developing Child at Harvard University (NSCDC, 2015). Researchers have confirmed the hypothesis that very young children have brains that are capable of high forms of reasoning (Anticich, Barrett, Silverman, Lacherez, & Gillies, 2013; Gopnik, Meltzoff, & Kuhl, 1999; Hua,

Han, & Zhou, 2015; O'Neill & Gopnik, 1991; Taket, Nolan, & Stagnitti, 2014).

Furthermore, a child's early experiences influence behavior in later life (Gopnik, 2009).

Masten (2014) elaborated further on these concepts concerning resilience. She pointed out that resilience is not a single trait; rather, it is a natural phenomenon that occurs due to many factors. Bronfenbrenner (1979) categorized factors that lead to human development in the ecological environment into four concentric structures that surround the child. He referred to these structures as the microsystems, mesosystems, exosystems, and macrosystems.

The researchers focused on issues within microsystems are those who studied direct contact with the child. Of major interest for this literature review were articles that examine basic dyads such as mentor-child, teacher-child, social worker-child, and parent-child that are related to the development of resilience. Masten (2014) suggested that schools promote mentoring to foster resilience capacity in children. Bernard (2003) used the term *turnaround teacher* to specifically emphasize the prominent role that certain teachers can play in the development of resilience in young children. A more general statement made by Bernard (2004) was that the roles of schools should be more nurturing regarding resilience and less focused on pedagogy and test scores. I categorized under the microsystem heading those that deal with resilience testing of children, peer activities, family environment, and programs specifically designed for developing resilience. Other researchers I included studied solely intervention techniques for children they categorized as at-risk or children exposed to toxic stress.



The researchers I identified who focused on the mesosystem are similar to those who focused on the microsystem in that they involved such things as home, school, peer groups, church, and extracurricular activities, with the additional elements of interactions with and involvement of the children. The exosystem includes settings that do not involve the developing person as an active participant (e.g., policy making for schools about time allocation for activities in each type or level of class). The macrosystem has to do with subculture or culture. Studies that pertain to resilience in Australia, for example, show how the culture of one country can have a different outlook toward the development of resilience than the United States (see Anticich, Barrett, Gillies, & Silverman, 2012; Barrett et al., 2014; Barrett, Fisak, & Cooper, 2015; KidsMatter, 2012; KidsMatter Early Childhood (KMEC), 2012; Polanczyk, Salum, Sugaya, Caye, & Rhode, 2015). I believe that having a solid conceptual framework made me approach my investigation from different perspectives.

### **Literature Review Related to the Development of Resilience**

I designed the review of literature to present a comprehensive picture of current studies and programs related to social change regarding children and their social and emotional needs. I chose articles that specifically address resilience and how the development of resilience may influence later outcomes. I included articles about IPA related methodology and articles about social workers that informed the interview part of this study.

## History, Definitions, and Current Research

Mészáros (2014) stated that Ferenczi was the first to introduce the concept of resilience to scientific study in the early 1930s. The ideas set forth by Ferenczi gave rise to a new approach for studying trauma caused by real events. He is well known for what he termed as the study of the "wise baby" syndrome in which he laid a foundation for handling trauma. His studying of children resulted in concepts that would later be viewed as resilience functioning.

There have been numerous definitions of resilience and psychological resilience over the last 30 years. Fletcher and Sarkar (2013) listed nine definitions that begin with Rutter (1987) with the latest written by Leipold and Grove (2009). Six of the nine definitions use words that imply resilience is something that a person has, such as "ability" or "capacity" and the other three definitions instead use the action words "process," "outcomes," and "recovery" (Fletcher & Sarkar, 2013, p. 13). This is relevant to this study because when interviewing social workers, research questions were formed about a child's *ability* for resilience as something that can be acquired in terms of an expanding *capacity*. The definition documented in the first chapter of this study is "The capacity of individuals to cope successfully with significant change, adversity or risk" (Lee & Cranford, 2008, p. 213). For the interviewing process, I left the definition more open as did Masten (2014).

The definition of resilience continues to evolve. In her book, *Ordinary Magic*, Masten (2014) began her definition of resilience as "the capacity of a dynamic system to adapt ...." (p. 10). She qualified this by stating that the dynamic system that she mainly

deals with is children. However, she was not clear if a resilience capacity implies a capacity to reach a *positive* outcome. In Masten's (2014) book, a chapter is devoted to models of resilience. The three models are listed as person-focused, variable-focused, and hybrid. In these models and in describing studies of resilience, Masten (2014) relied on the presence of a danger or a risk factor for her discussions.

The American Psychological Association (APA) is addressing the concept of resilience. APA (2014) stated, "Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress— such as family and relationship problems, serious health problems or workplace and financial stressors. It means 'bouncing back' from difficult experiences" (para. 4). This conceptual answer pertains to identifiable stressors and is geared toward adults as opposed to examining psychological resilience in children. Southwick, Bonanno, Masten, Panter-Brick, and Yehuda (2014) stated that this description of resilience by the APA, used as a definition, does not adequately reflect complexities associated with the term. Southwick et al. (2014) addressed resilience when issues of sizable stress were present. However, the authors made the point that *preparation* to handle adversity can be accomplished when building a better foundation for resilience in children.

Spencer (2015) stated that resilience is not only coping well with adversity, but it is also about navigating and negotiating for general well-being. Matyas and Pelling (2015) maintained that while resilience has become a popular concept internationally, it remains an unfamiliar term to some while not being grounded by solid definition or adequate conceptual understanding. They stated that obscurity and ambiguity could

impede plans for action. The prospect of resilience as being viewed as a capacity built on learning and self-organization may give impetus for creating programs for developing resilience in individuals (Matyas & Pelling, 2015). In the opinion of Southwick et al. (2014), there is the onset of a paradigm shift towards *prevention* as studies move toward better investing in evaluating methods to enhance resilience. In exploring the concept of developing resilience in *all* young children as seen through the experiences of social workers, the results of this study may encourage other researchers which then can inevitably result in plans of action.

In studying the concept of resilience, Ungar, Ghazinour, and Richter (2013) approached the topic of resilience using an external framework. There are four key points which indicate a socioecological model and intervention. While presenting the argument that resilience study should focus on the forces that affect the child, a child's inner capacity for resilience as being a developmental process was not addressed. The authors' first point had to do with the Bronfenbrenner (1977) bio-social-ecological model and the Ungar et al. (2013) social-ecological model. These models shift from exploring a child's inner capacity to be resilient to looking at the environmental factors of the child that influence resilient behavior. The second and third points stressed are navigating to proper resources for resilience support and how such things as cultural context influences this process. The fourth point identified considers the complexity of a multisystemic view when finding interventions for development and wellbeing. In this study, I explored thoughts of social workers to see if they suggest ways to develop resilience in children. I understand resilience as a subset of human development. When examining the

development of resilience in children using Bronfenbrenner's (1977) microsystem, I noted the direct interaction between a child and the people who interact with the child, such as parents, teachers, and social workers. I examined the development of resilience in children stated as a capacity (Lee & Cranford, 2008; Masten, 2014). In this study, increasing the internal capacity for resilience of children was explored. Using the same concept of Bronfenbrenner's (1977) microsystem, Ungar et al. (2013), on the other hand, looked externally at how to change behavior of children by altering the environment.

Projects that have dealt with early childhood interventions included The Abecedarian Project, Head Start, Perry Preschool Project, and Chicago Longitudinal Study (Wright et al., 2013). A program that has evolved and has been adopted by cities in the United States as well as internationally is the Parent Management Training - Oregon (PMTO) model (Baumann, Rodríguez, Amador, Forgatch, & Parra-Cardona, 2014; Sigmarsdóttir & Guðmundsdóttir, 2013; Wright et al., 2013). The PMTO program is designed to replace coercive parenting with positive approaches that stress adaptability (Baumann et al., 2014).

Block, the immediate past president of the American Academy of Pediatrics (AAP), announced at the 2015 meeting of the American Pediatric Surgical Association that he would become the director of the newly-formed Center on Healthy, Resilient Children (Block, 2016, p. 24). In his speech, he talked about a greater investment toward mental health in early childhood as he focused on the concept of resilience and the capacity to adapt as being the key components of societal change. In the final remarks of his speech, Block (2016) stated, " When we are able to understand the power of

prevention, the power of early, sincere intervention, we will improve the ecology of our nation as new generations of children evolve into our leaders..." (p. 27). While the AAP recognizes the importance of the development of resilience in young children, there are other organizations that are researching and implementing this concept.

At the Center on the Developing Child at Harvard University, work is being done that suggests studying the physical architecture of the brain helps in understanding children's behavior and informs policy makers for childhood programs (Center on the Developing Child at Harvard University, 2016a; NSCDC, 2004). Together with the NSCDC, the center has been citing studies on brain development and architecture since 2003. The council is part of a multi-university collaboration and has brought resilience to the forefront in the 2015 Working Paper 13 report (Foxhall, 2014; NSCDC, 2015). The 2015 Working Paper 13 report looks at brain function, physical aspects of the brain, immune system, gene expression, and toxic stress to show how these factors relate to resilience. The report concludes that by focusing on factors that facilitate resilience in young children, existing and newly created programs can result in more positive outcomes for individuals. This type of research is considered by Masten (2014) as fourth generation resilience research and is beyond the scope of this research project which is an exploration of thoughts of social workers concerning developing resilience in children.

The National Association for the Education of Young Children (NAEYC) lists in its first principle for child development, the importance of social and emotional needs (Copple & Bredekamp, 2009). The concept of resilience is recently being acknowledged by the NAEYC. Susan Friedman, Senior Director of Content Strategy and Development

at NAEYC, is suggesting a children's book, "Promoting Resilience Through Read-Alouds" (Friedman, 2016). The NAEYC has recently recognized the Devereux Center for Resilient Children, as a national organization that addresses the social and emotional needs of children concerning resilience. In 2015, the NAEYC launched a program called Strategic Direction (Olmore, 2016) which is an initiative that will reinforce the NAEYC core principles globally.

The 2015 Pathways to Resilience III conference is an example of the interest shown in the topic of resilience at the international level. In attendance were 540 delegates from 46 countries. It was hosted by the Resilience Research Centre in Halifax, Nova Scotia, Canada. The topics included nature versus nurture, protective/promotive processes, clinical interventions, human service systems, and social policies. The director of the Resilience Research Centre is Dr. Ungar, a peer-reviewed author whose articles are cited by many concerning his resilience research (Brownlee et al., 2013; Fletcher & Sarkar, 2013; Khanlou & Wray, 2014; Masten, 2014; Southwick et al., 2014). Ungar (2015) stated that there is a growing interest in resilience globally, and there is a need for simpler ways to handle complex situations. In China, for example, Wang et al. (2015) studied how resilience in Chinese adolescents plays a role in influencing later behavior. Their interest is based on what they called "resilience theory" as having been developed by the pioneers of resilience beginning over 20 years ago.

Matyas and Pelling (2015) described the term resilience as being ubiquitous for post-2015 international policy concerning intervention and risk-management. They specifically list seven humanitarian organizations as having resilience as a priority

concept - DFID, European Commission, FAO, IRWG, UNDP, UNICEF, and USAID.

While much of what Matyas and Pelling (2015) reported had to do with disaster management, it is noted that in this child development study is found rich interpretations of the capacity for psychological resilience as noted by Lee and Cranford (2008) and Masten (2014).

### **Societal Problems and Influences on Positive Behavior**

Gray and Lewis (2015) discussed the need for better safety in schools. They stated that societal problems were continuing and gave examples of measures being taken to decrease problems in schools such as locking the doors of schools and better systems to check in visitors. There are arguments that many social problems stem from EC experiences. Elias (2014) stated that a greater EC investment in the development of social and emotional needs of children will have benefits for them in later in life. Bishop, Rosenstein, Bakelaar, and Seedat (2014) interviewed 170 adults having some degree of social anxiety disorder. Those interviewed were aged 20 to 72 with a mean age of 34. Participants described experiences of early childhood trauma with the most prevalent onset occurring ages from 6 to 11. The researchers discovered a link between childhood trauma and anxiety in adulthood. Violence in the media has been studied as a contributing factor to social problems. Bushman, Gollwitzer, and Cruz (2015) studied 371 media psychologists, 92 pediatricians, and 268 parents to determine if violent media increases aggression in children. They found that media violence was an ongoing issue and their consensus was that violent media continues to cause aggression in children. Padilla-Walker, Coyne, Collier, and Nielson (2015) studied adolescent behavior



regarding television viewing. Their longitudinal study examined the connection between the ongoing aggressive behavior in adolescence and violent television. They found that changing from violence to prosocial viewing had a long term positive effect on children.

Hu et al. (2015) reviewed 86 studies in a meta-analysis study concerning internal causes and depression. In their conclusion was the suggestion that future research should pay more attention to children for causes of later depression. Their research supports an argument for the creation of socioemotional preventive programs. Douglass (2016) stated that a change in approach is needed beginning in EC education that will positively influence social change in the long term.

Researchers have found long-term benefits when promoting prosocial behavior in children. Flook, Goldberg, Pinger, and Davidson (2015) did a qualitative study to determine if a mindfulness/prosocial skills program influenced children. Ninety-nine preschool children were studied by creating an experimental group (the children in the program) and a control group. The authors stated that the experimental group not only exhibited improved prosocial behavior, but this group also improved on measures of cognitive ability over the control group. Schonfeld et al. (2015) studied high-risk students from 3rd to 6th grade to see if socioemotional intervention demonstrated higher academic achievement. They found higher academic proficiency at some grade levels. These authors reinforced the notion that attending to socioemotional behavior has residual benefits that can affect academics positively.

Schonert-Reichl et al. (2015) measured the cortisol levels of children after the children underwent a socioemotional learning process. These levels were compared to

measures of social competence and cognitive skills. The conclusion of the study was that experiencing the socioemotional learning process provided social and emotional benefits as well as increased cognitive skills. Elias (2014) presented an argument for teaching social and emotional learning (SEL) skills for obtaining better results when implementing the Common Core curriculum. He argued against those who say that social and emotional issues should be dealt with in the homes instead of the schools. Of special interest to this study was the link that Padilla-Walker et al. (2015) found between prosocial television viewing, such as programs that had people helping people, and resulting similar prosocial behavior in children. Their study contributed to an awareness that the social worker participants of this study could compare resilience to prosocial behavior. Goh, Yamauchi, and Ratliffe (2012) studied communicating with preschool children. The study was mainly centered on how children expressed themselves verbally and how conversation with an adult could be established. An emphasis was placed on the social development of the child and how nonverbal communication also played an important role in overall child development. The researchers underscored the importance of communicating with young children for social and emotional development.

Ryoo, Wang, and Swearer (2015) conducted a study using a demographic questionnaire of students from grades 5 to 9 concerning bullying experiences over three time periods (semesters). Verbal, physical, relational, and cyber bullying were prevalent and found to have inconsistent patterns for individuals over time. The need for different types of intervention to match the types of bullying was discussed. Possible preventive techniques designed to have fewer bullies were not discussed. This study is typical of

many studies in that it does not address the question of can the development of resilience in children at an early age lead to fewer bullies. Roffey (2015) argued that schools should be focused on the well-being of the whole child. She stated that "positive education" would not only have benefits for mental health and resilience but it also promotes prosocial behavior and academic learning. Roffey explained that the suggested approach as used by positive psychologists is to emphasize eudaimonic well-being, which is a concern for doing good for others and having virtue. The approach that contrasts with this is hedonistic well-being, which is centered on a person feeling good about oneself as a more self-contained entity. Roffey made the point that it is everyday experiences that most influence child development as opposed to genetic predisposition. Schools can play a major factor in children's eudaimonic well-being when caring for the social and emotional needs of children by focusing on a caring environment that promotes positive relationships and resilience (Copple & Bredekamp, 2009).

### **Measures of Resilience**

There are numerous testing devices and measures available relating to resilience. While it is not my intent to present a formal study on resilience testing and measurement, a limited amount of background and explanation is helpful in to understand references made to these in other articles. Windle, Bennett, and Noyes (2011) compared 15 test and scale devices that measured resilience in some form. The devices were used for individual assessment as well as group testing. While young children are the focus of this literature review, a conclusion from the study was that measuring adult's resilience had more validity than tests centered on other populations including young children. Hua,

Han, and Zhou (2015) found it difficult to measure young children on a late positive potential (LPP) scale that measures emotional reactivity. The resilience measures listed in the Windle et al. (2011) study that pertain to youth include the Youth Resiliency Assessing Developmental Strengths (YR:ADS) which examines various protective factors in resilience of youth aged 12 to 17; the California Healthy Kids Survey for adolescents with a resilience scale for assessing how students perceive the process of resilience; The Child and Youth Resilience Measure (CYRM) that measures how children and young adults compare in different cultural environments; the Resilience Scale for Adolescents (READ) which is designed to identify key traits of resilience; and the Ego Resiliency Test for assessing the traits of adolescents deemed to have resilient qualities.

Prince-Embury (2015) described the Resiliency Scales for Children and Adolescents (RSCA) in terms of preventive screening, intervention, and outcomes assessment in the school setting. This is an assessment that measures personal attributes of the child as well as environmental factors. Emotional reactivity to adversity plays a role in the assessment process. According to Prince-Embury, what makes this evaluation different from others is that it examines the children's experiences of the personal resources that are available to them for coping with adversity. Ungar (2015) has developed a protocol for assessing resilience in children of various ages as a diagnosis after experiencing trauma. His key points encompass a different viewpoint than that of the researchers who view resilience as a capacity that can be influenced intrinsically. He stated that instead of attempting to examine a child's individual resilience, it is the

contextual factors that are relevant. In this study, all social workers' views on the development of resilience in the children were welcome. However, an attempt was made to get at least some kind of intrinsic perspective.

Nickerson and Fishman (2013) credit Seligman and Csikszentmihalyi as formally introducing positive psychology in 2000. Positive psychology examines factors that contribute to positive outcomes for mental health. This approach does not require a previous trauma to diagnose reaction, and it focuses intrinsically on the inner child more than considering outside factors. In considering tools for strength-based assessment, Nickerson and Fishman suggest Collaborative for Academic, Social, and Environmental Learning (CASEL), Behavioral and Emotional Rating Scale-2 (BERS-2), Teacher Rating Scale (TRS), Devereux Early Childhood Assessment (DECA), the Individual Protective Factors Index (IPFI); and the Developmental Asset Profile (DAP). Brownlee et al. (2013) compared 11 quantitative studies that each evaluate a specific resilience developmental program using testing devices such as those listed above. The phrase "strength-based models" (p. 437) was used when comparing these studies which involve internal factors of adolescence and young children such as personal strengths and empowerment. Brownlee et al. (2013) concluded that 3 out of 11 of the studies provided support for an intervention being studied. One study that was rated highly was the FRIENDS program in Australia. The testing devices used in testing the children in the FRIENDS program were the BERS, the Self-Esteem Inventory (SEI), Rosenberg Self-Esteem Scale (RSES), the Child Behaviour Checklist (CBCL), Youth Self-Report (YSR), the Child and

Adolescence Functional Assessment Scale (CAFAS), and the Strength Based Orientation (SBO).

This study used a qualitative approach and did not engage the resilience scales or evaluation devices listed above to do quantitative comparisons. The literature that describes the usefulness of these studies was informative for understanding the approaches used in evaluating children as well as programs. There were a model and philosophy to note in these articles that ground each of these studies. When analyzing the data from this study and in suggesting future studies, the models and philosophies were used to help categorize the themes that were prevalent in the responses from the social worker interviews.

### **KidsMatter and FRIENDS Programs**

The programs in Australia concerning the development of resilience in children have been generating many studies that verify the value of these programs. The programs are being used in other countries including the United States. The World Health Organization (WHO) recommended activities for the social and emotional needs of children be provided in classrooms to promote better mental health (World Health Organization, 2011). In 2012, the Australian Government began funding two new school initiatives called KidsMatter and KidsMatter Early Childhood (KMEC) (KidsMatter, 2012; KidsMatter Early Childhood (KMEC), 2012). Askell-Williams and Lawson (2013) administered questionnaires and did in-depth interviews with 37 Australian teachers that had been exposed to the two programs. The results of the study showed that in the

opinions of the teachers, they were significantly better equipped to attend to the social and emotional needs of children to promote better mental health.

Concurrently, the FRIENDS series of programs are being utilized in various schools in Australia. The FRIENDS series consists of four age groups, including the recently created Friends for Life program for ages 16 and over. The FRIENDS programs have been developing since the 1990s under the direction of Dr. Barrett. Today, at least 14 countries participate in the FRIENDS program with the United States recently having some participation. The Fun Friends program for ages 4 to 7 is one of the largest programs available that has a specific protocol and commitment to promoting resilience in early childhood education. The Fun Friends program is designed with family and school group activities that develop resilience, and that help treat anxiety disorders in young children. While anxiety is among the most common mental disorders in young children (Polanczyk et al., 2015), it is noteworthy that there is a relatively small number of studies that are focused on the treatment of anxiety disorders in young children (Barrett et al. 2015).

Anticich, Barrett, Gillies, and Silverman (2012) posted an article in the *Australian Journal of Guidance and Counseling* to demonstrate the value of early childhood prevention/intervention. They charted fifteen studies published from 2002 to 2012 and one from 1997 that studied treatment programs for children aged 4 to 8. In all 16 studies, there was an increase in such things as social competence and a decrease in such things as anxiety. Cognitive behavior therapy (CBT) was often used as an experimental treatment. Anticich, Barrett, Silverman, Lacherez, and Gillies (2013) were the first to study the Fun

Friends program directly by studying the reports of the administering teachers and parents. The quantitative study involved 488 students from Catholic Education schools in Brisbane, Australia. Reports from parents and teachers showed that there was a marked improvement in behavior after the program was completed as well as one year later. Barrett et al. (2015) did a series of *t*-tests on children of the Fun Friends program comparing before and after anxiety levels in young children with the same positive results.

The programs in Australia that have to do with developing resilience in children were useful when doing data analysis for this study. The awareness of what is being done in Australia helped to compare what is being done or not being done in the local school districts in this state concerning resilience in young children. The different culture/subcultures found in Australia did not affect the discussion of developing resilience in children. The programs in Australia can also be used to compare studies in other geographic locations.

### **Extrinsically-Based Programs**

In reviewing the literature concerning the social and emotional needs of children including the development of resilience, I found it helpful to organize articles that refer to programs that are designed for changing children's behaviors as extrinsically based programs. The classification of extrinsic includes many articles that refer to such things as intervention techniques designed to have the child reach a certain competency level. In the interview process of this qualitative study, I was open to all avenues of resilience development, but I attempted to use the term *intrinsic* when discussing resilience as being



more psychological in nature. When analyzing the data from the interviews, I was aware of the intrinsic and extrinsic nature of social workers' comments.

A program that has been used in the United States since 1990 is the Penn Resiliency Program (PRP). The PRP focuses on teaching coping skills which I choose to categorize as extrinsic efforts because the authors of the following studies do not mention the program as addressing the internal conflicts of the individual child. Cutuli et al. (2015) studied the PRP to see if it had positive effects concerning depression levels and related symptoms in middle school children. The study took place in northeastern United States using approximately 330 adolescent students comparing pre- and post-tests. The tests measured internal symptoms of children after the extrinsic intervention was applied. The devices used were the YSR, CBCL, and TRF using data that were derived from internal and external characteristics. The results of the study were mixed. The teachers recorded little improvement from pre-test to post-test, while the data from the parents demonstrated significant improvement. Challen, Machin, and Gillham (2014) evaluated the effects of administering the United Kingdom Resilience Programme (UKRP), a version of the PRP, to large groups of students aged 11 to 12 attending 16 schools in England. The program consists mainly of group presentations with mentoring and support available. The intention was to lower the incidence of symptoms associated with depression and anxiety. A quantitative study was done comparing control groups to UKRP intervention groups. The authors stated that the data were examined optimistically for positive changes in behavior, and the traditionally higher significance level of .05 ( $p > .05$ ) was chosen. Despite these admissions, there was no significant difference in

anxiety; and there were small, short-lived differences in depression symptoms. With the use of large group presentations, the program can be considered to be taking an extrinsic approach and according to Challen et al., it was not effective. Sankaranarayanan and Cycil (2014) studied the PRP in India using adolescent children as participants, many of whom come from what the authors consider to be affluent families. The explanation given by the researchers of the study in justifying the use of the PRP in a different culture is that schools in India for the upper-middle class are taught in English while having several Western cultural influences. One notable exception was that the children continued to view assertiveness as a negative concept. The qualitative study consisted of using the ANCOVA tool to compare a PRP intervention group with a control group each containing 29 adolescent children. The benefits derived from the PRP that were described in the discussion part of the article I interpret as being more intrinsic in nature than the previous two reviewed articles about the PRP program. The benefits listed by the researchers included reducing pessimistic thinking, promoting a more optimistic attitude, and general enthusiasm by the children during the study. It was suggested that further studies be done to assess long-term benefits of the PRP program.

The Chicago School Readiness Project (CSRP) as discussed by Li-Grining and Durlak (2014) is an example of an extrinsically based program designed to develop resilience in young children. The discussion centers around a socioeconomic context and implementing procedures that would teach children self-control. The word "dosage" (p. 246) is used when implementing the program. I viewed this as more behavior modification coming from extrinsic sources rather than intrinsically developing

psychological resilience as I defined in Chapter 1. Another program used in Chicago for building resilience in children is Chicago Urban Resiliency Building (CURB). Saulsberry et al. (2013) studied the CURB program. The authors take credit for previously establishing the Competent Adulthood Transition with Cognitive-behavioral Humanistic and Interpersonal Training (CATCH-IT) program. The CATCH-IT program is an intervention for adolescents at risk for depressive disorders. The program consists of 14 internet modules based on Cognitive-Behavioral Therapy (CBT). As a follow-up to the CATCH-IT program, the authors designed the CURB program which follows the extrinsic nature of the CATCH-IT program by first using the extrinsic internet-based intervention techniques. The CURB program was designed to develop resilience in adolescents in mainly African American and Latino Neighborhoods in and near Chicago to reduce depressive symptoms. A part of the CURB program consists of a video for parent prevention and intervention techniques specifically designed to promote resilience in their adolescent children. The program encourages community involvement and offers a video to help physicians and medical staff be on the same motivational tract. The conclusions for the CURB program are as follows: it is a unique program that can be quickly and easily implemented in a primary care setting for at-risk adolescents, it is low cost, it includes the parents in the process, it reflects race and culture, and includes previously proven effective internet programs. While the CURB program does not directly list techniques for developing resilience, it incorporates many techniques related to resilience in children.

Stefan and Miclea (2014) did a study on the effectiveness of the Social-Emotional Prevention Program (SEP) on preschool children in Romania. The SEP was designed in the United States as a multifaceted program with the desired outcomes being emotion understanding, emotion regulation, better problem-solving skills, peer skills, social competency, and decreased negative behavior. The study involved examining the effects of changes in school curriculum, teacher activities, and parent activities on high risk and moderate risk students. A 2×3 quasi-experimental design was used with a control group and a SEP intervention group used against three time periods: pretest, post-test, and three-month follow-up. The conclusion was that children from the moderate risk group highly benefitted from the SEP program and social and emotional aptitude in children are protective factors for better mental health and can lead to better long-term resilience.

There are studies that have mixed reviews on certain extrinsically based resilience programs and the evaluations of those programs. Kress and Elias (2013) discussed the challenges faced by the current Social Emotional Learning and Character Education programs. They suggested broadening the programs into a community of learning. Their study brings up the question concerning conducting group programs as opposed to having individual deep interviews that probe the process of acquiring resilience. Jefferis and Theron (2015) studied the effect that a community-based participatory video (CBPV) that was intended to promote resilience in 28 black South African adolescent girls. The CBPV is a satisfactory example of an extrinsically based program by exposing the girls to an outside stimulus (video) to change behavior. In gathering data to evaluate the program, the girls were asked to *deeply reflect* on the CBPV. The researchers found that the

amount of data gathered was limited due to an inability of the girls to have clear thoughts about what to write about. The question arises whether an intrinsic evaluation technique can effectively appraise an extrinsically based program. The Jefferis and Theron study informs this study of the possibility that extrinsically based programs installed in a school to promote resilience may not reach intrinsic levels of meaning in the child. It was noteworthy that the social workers moved toward intrinsic methods to develop resilience. Rodriguez (2013) reported on the Preschool-Wide Evaluation Tool (Pre-SET) as used to evaluate the Positive Behavioral Interventions and Supports (PBIS) program in early childhood settings. The author questions the usefulness of the test because there has not been enough research done to establish the meaning of scores from collected data. A question raised was whether administrators have sufficient knowledge to properly administer the test. The PBIS program is of interest to this study because it is being administered in many local suburban schools. Six of seven of the PBIS principles describe intervention protocol to handle negative student behavior, and the other principle generally describes extrinsic teaching activities for the benefit of appropriate behavior among all students (School District AB, 2016b). Kress and Elias (2013) discussed the challenges faced by the current Social Emotional Learning and Character Education programs. They suggest broadening the programs into a community of learning. Their study brings up the question concerning conducting group programs as opposed to having individual deep interviews that probe the process of acquiring resilience. The question can be raised whether there should be more studies concerning the social and emotional well-being of the individual child.

Ungar (2011) declared that ambiguity continues to exist regarding the development of programs that foster resilience for individuals under stress. He emphasized that changes in the environment are ways to establish growth and offers a mathematical formula as a foundation for his views. This point of view may be a priority for stressed or high-risk individuals, however, in this study, I was more interested in the intrinsic nature of psychological resilience as illustrated by the Bak et al. (2015) study.

### **Intrinsically-Based Programs**

The articles cited below are studies that pertain to more intrinsically based programs. The intrinsically based programs have more of an identifiable focus on the psychological aspects of resilience of the individual child than those programs and studies listed as extrinsic in nature.

Bak et al. (2015) studied the Resilience Program that originated in Denmark in 2007-2009 and is currently being implemented in 5 European countries. It is an online training program for teachers of adolescence and young children involving developing resilience by understanding one's own mental states. It was created because of an increasing awareness of mental health problems in the world that need to be addressed by intrinsic preventative techniques (Kazdin & Blase, 2011). Bak et al. (2015) described the Resilience Program as making aware of the functioning of the brain by looking at how the brain organizes thoughts. As a tool for teaching children, a metaphor is used called *The Story of the House of Thoughts*. The story has to do with compartmentalizing thoughts into rooms in the brain, and the thoughts may be handled in conscious ways to promote resilience. The tools of the Resilience Program are given to teachers for their

personal awareness and inevitably for implementation with their students. According to Bak et al., a 3-year study that was planned for completion in 2016 had to do with "looked after children" and 8,000 ADHD children. Conclusions of the study are planned to be published in succeeding years. The authors cited previous studies in which the conclusions justified the use of the Resilience Program as being efficient for developing resilience.

Iizuka, Barrett, Gillies, Cook, and Marinovic (2015) studied the Friends for Life program for teacher development and the benefits that it has on the FRIENDS resilience program for students. The authors list the contents of the 10 sessions of the Friends for Life program with the first four having to do with thoughts and feelings. The intrinsically based program was shown to increase the resilience capacity for the teachers. The conclusion of the study was that the Friends for Life program for teachers has the potential to increase positive outcomes for children. I used their conclusion for comparison in analyzing comments of social workers when they discussed programs and methods that they had experienced.

Prevention techniques for children can lead to better outcomes later in life (Block, 2016; Elias 2014; Flook et al., 2015; Goh et al., 2012; Hu et al., 2015; Miller-Lewis et al., 2013; Roffey, 2015; Schonert-Reichl et al., 2015). There are programs that incorporate intrinsic methods into child development. Petty (2014) listed 10 ways to foster resilience in young children. She listed "Build Empathy" (p. 36) as her first suggestion. She described an intrinsic process whereby children talk about their feelings. The goal is to get their feelings understood and begin to understand the feelings of others. Another of

Petty's suggestions had to do with listening to individual children to draw out what they are deeply thinking. Henderson (2013) told her story of being raised in an abusive home with enough resilience to handle the situation. She credits her resilience to her childhood school experiences. She called her school a type of haven where there were many support people. She became a social worker and now speaks throughout the United States touting the value of developing resilience in schoolchildren by school staff and mentors. She lists "Sixteen Internal Protective Factors that Foster Resilience" (p. 27) as part of a resilience program for children. Examples of concepts that may be considered intrinsic in nature are internal evaluation, insight, optimism, positively coping, internal initiative, positive motivation, personal faith, perseverance, and creative thinking. Lochman et al. (2015) described the results of using two programs that are used to increase internal "coping power" (p. 378) and decrease negative behavior towards others. For their study, preadolescent children were chosen with the plan to have them not yet facing the anticipated challenges of adolescence. The study showed that prevention techniques to bolster resilience could work for many children, and individual programs work better than group programs. Dwiwardani et al. (2014) stated that attachment is formed by early childhood interactions with caregivers that lead to healthy psychological relationships later. They did a study using the concepts of attachment and ego resilience as possible predictors of humility, forgiveness, and gratitude. They found a connection in their qualitative studies. Their conclusions from attachment and resilience underscore the importance of having methods and programs in EC that affect the social and emotional needs of children.



Pitzer and Skinner (2017) conducted a quantitative study that measured the effects that a motivational resilience program had on student performance. The program consisted of a self-appraisal strategy for 1200 students grade 3 through grade 6. The program's self-appraisal feature intrinsically affected the students initially in a positive way but the results of the study showed that the gains made diminished throughout the school year. The authors reflected on the extrinsic effects of teacher support and concluded that more work is needed to understand the role of students' emotional reactions to classroom situations.

In this IPA study, social workers reflected on their experiences in EC settings that included psychological resilience. Smith et al. (2009) stated that IPA studies are psychological in nature, and the participants have an important stake in the phenomenon being covered. Schindler et al. (2015) quantitatively studied three levels of programs in EC settings with each level being defined as having a certain level of intensity. The programs were psychological in nature and were designed to prevent behavior problems. A conclusion of the study was that the more intensive the program, the more positive behavior patterns ensued and those patterns can be considered indicative of positive outcomes in later life. Their study demonstrated the importance of psychological experiences in the EC classroom.

### **Social Workers and Communication with Young Children**

Researchers have offered different approaches concerning social workers and their communication with children. Ruch (2014) conducted what she referred to as a reflective case study. She observed the communication that was taking place between

British children and social workers. Her findings were that the communication was a flawed process that sometimes became inhumane in intensity on the part of the social workers. The children often showed that they were anxious, whereas the social workers were not equipped to best handle the situation. She suggested that initiatives for developing social workers' reflective capabilities and communication skills be implemented with child-centered methods for handling troublesome situations. It was noteworthy for this study that the data examined reflected the communication between the local social workers and the children. Liebenberg, Ungar, and Ikeda (2015) concluded from their studies that social workers in Britain should encourage youth to manage their own risk. They encouraged self-sufficiency and empowerment independent from the welfare system. It was also suggested that poor decision making can be looked at as a factor but the physical things that put the child at risk should be taken most heavily into account.

There are studies that show that developing communication between social workers and children is critical. Wilkins (2015) conducted a qualitative study by doing semi-structured interviews of eighteen social workers (or their managers) in London to explore the referral process for at-risk children. A conclusion was drawn that while there was a high level of agreement between social workers of what constituted risk factors, there was a lot of uncertainty as to how to assess resilience factors of children. The participants had difficulty in describing how the resilience factors of children may be factors for handling the risk factors the children face later in life. The difficulty that the London social workers had in discussing resilience suggested a need for a careful open

interview process in which the conception of resilience was examined when doing this IPA research study. In a first round of interviews concerning developing resilience in young children, social workers were not ready to make connections between risk factors of children with how resilience factors may mitigate future problems. Investment in EC education will have benefits for children in later life (Elias, 2014; Miller-Lewis et al. 2013). Having a second round of interviews gave the social workers a better chance to identify connections. Beleslin (2014) studied relationships between adults and children in Croatia. Social workers were heavily involved as participants in this study. He stated that more research should be conducted which deals directly with young children. He concluded that children should not only be observed and investigated, but communication should be developed between the researcher and the child to find more deeply what is on the child's mind. Smith et al. (2009) talked about IPA research as relying on a "double hermeneutic" (p. 3) which in the case of this study meant that the researcher attempted to make sense out of the social workers attempting to make sense of what they have experienced. In fact, a triple hermeneutic took place because the social workers were asked to make sense out of what was happening to children. Results from this study may inspire more studies that deal directly with children as suggested by Beleslin.

### **Studies that Help Inform the Methodology of This Study**

I conducted an IPA study with open-ended questions related to the development of resilience in young children. Hefferon and Gil-Rodriguez (2011) discussed the rising popularity of IPA studies in the school and warned that the interpretation of lived-experiences may be challenging. They stated that a satisfactory IPA study relies on the

depth of the research and not on large, broad sample sizes with too many questions. Generalization of the results was a big concern. At the time of their article, Hefferon and Gil-Rodriguez stated that IPA remained a widely-misunderstood method. My plan was to limit the study to five social workers to obtain rich and deep data. I became an active listener without trying to get through too many questions. Smith (2011) studied the increase in the prevalence of peer reviewed IPA studies from 1996 when the first one was published to 2008 when 71 were published. The databases that he used for the searches were MEDLINE, PsychInfo, and Web of Science. In this process, he studied the corpus of the studies and presented a table that described the frequency of terms used at least three times in each of the 293 studies that were published during these years. Twenty-two of the terms were identified and appeared a total of 322 times. The most used term had to do with the "physical symptoms" of patients. This term appeared at least three times each in 69 of the studies. Psychological distress came in second at 45 times. Other examples were sports/exercise at 7, religion/spirituality at 5, and music at 3. Of interest to this study are the topics of education and resilience which had low frequencies of 4 and 0 respectively. The frequency of zero for resilience as late as 2008 as shown in the study may not be indicative of the interest in resilience in recent years. Interest in the topic of resilience has grown in the last few years in the United States as well as internationally (Block, 2016; Brownlee et al., 2013; Fletcher & Sarkar, 2013; Khanlou & Wray, 2014; Masten, 2014; Southwick et al., 2014).

Recent IPA studies informed this study as to procedure. Doutré, Green, and Knight-Elliott (2013) used IPA to study the experiences of those under the age of 19 who

are responsible for being a caregiver. The authors stated that there were hundreds of thousands of these caregivers in England living as a "hidden population" (p. 31). The study was done as an IPA to take a small representative population to describe their experiences with deep semi-structured interviews along with the taking of photographs to promote more depth of study. The role of the researcher was important to make sense of the individuals' accounts of experiences resulting from their complex lives. An IPA study is an interpretive venture (Smith, 2009). In this study, I was the only researcher, so my interpretations of the data were critical. Torbrand and Ellam-Dyson (2015) did an IPA for use as the methodology for qualitative study. Seven young adults from a psychology class were participants in a semistructured interview process similar to the plan for social workers as participants in this study. A phenomenon of interest was procrastination when studying for exams. The interview questions allowed for free expression concerning feelings, thoughts, and experiences and were open-ended as suggested by Smith et al. (2009). After many questions, the phrase "Can you elaborate?" (Torbrand and Ellam-Dyson, 2015, p. 81) was presented to the participants. Merriam and Tisdell (2016) stressed the importance of a solid process of questioning as part of the qualitative process and recommend phrases to use and questions to avoid. The overall structure of the Torbrand and Ellam-Dyson IPA study informed my study as to the importance of openness in the interview process and the searching for deep understanding from a small group of participants. Smith et al. (2009) explained that an IPA study often requires a relatively small number of participants because of the focus on getting a deep understanding of the thoughts of each participant.

Taket, Nolan, and Stagnitti (2014) acknowledged that when studying the development of resilience, it is important to give attention to EC situations. Their qualitative study consisted of interviewing 26 mothers of preschool children whose teachers described them as having demonstrated resilient qualities. One round of interviews was done 2010/2011 and the second round was done in 2012. All mothers participated in both rounds by being digitally recorded, except for one mother who requested to be recorded exclusively with handwritten notes. The mothers were asked to discuss methods they had used that they believed helped them to develop resilience in their child. The interview process was set up to have minimal prompting. In the analysis of the data, family strategies were identified under four headings used as thematic schemes: "self-regulation, socioemotional learning, positive relations with adults, and using community resources" (p. 292). A fifth theme was used to explore the mothers' responses concerning what they specifically did to help develop resilience in their preschooler. The suggestions by the mothers about the various themes most often had to do with setting up a solid structure. Structure meant responsibilities for the children, but it also meant a communication process between the child and parent that would help the child face and handle their fears. A side note to the study is how ethical standards were met. There were confidentiality and anonymity factors such as those planned for this study. Taket et al. had consent forms that were filled out by school personnel at many levels because the sample of preschoolers was drawn from information from the teachers. In this study, only the social workers as participants were required to fill out informed consent forms.

Reinke, Stormont, Herman, Puri, and Goel (2011) had 292 teachers complete a survey online to gain insight into a gap in practice in which the authors state as existing in U. S. schools concerning mental health practices in early childhood and upper elementary school. The authors concluded from the study that many teachers had limited knowledge of evidence-based practices they could use to help mentally distressed students. They also suggested that teachers can make great partners in the process of implementing more of these practices. Of interest to this study were the methods used to entice teachers (and psychologists) to take the survey. Fifty percent of the teachers responded to the survey, which the authors stated as being sufficient for reliability. The number of responders may have been influenced by a \$500 lottery for schools with at least 85% of staff responding. Also, \$25 gift cards were awarded to individual lottery winners. In this study, reciprocity when meeting with the social workers was not an issue because of the rapport with the social workers which was gained from open communication. Hatch (2002) stated that reciprocity is an ethical issue in any research effort and especially important when there is a direct relationship with the participant during data collection. I offered the social workers a method for contacting me to obtain a copy of the conclusions of this study. This altruistic approach created enough motivation for the social workers to participate in the study.

Solivan, Wallace, Kaplan, and Harville (2015) did a qualitative study by interviewing 15 mothers aged 15 to 19 years old in what was termed a "resiliency framework" (p. 349) to delve into protective factors that enabled the adolescent mothers to function at an acceptable level. The framework had categories for intrinsic resilience

assets, such as internal coping skills, competence from within, and self-efficacy. Extrinsic resources were acknowledged, such as family support, peer networks, community programs, and institutional programs. In the data analysis process in this study, many themes were derived from the interviews of the social workers which reflected intrinsic as well as extrinsic categorization as described by Solivan et al.

### **Summary and Conclusions**

Societal issues remain a concern for adults and children in the United States and other countries (Bishop et al., 2014; Elias, 2014; Gray & Lewis, 2015; Padilla-Walker et al., 2015). Many arguments and studies for social change are grounded in the concepts associated with children and early childhood education (Bak et al., 2015; Elias, 2014; Flook et al., 2015; Goldstein & Brooks, 2013; Hu et al., 2015; Matyas & Pelling, 2015; Roffey, 2015). Developing resilience in young children can have positive effects later in life that may eliminate or at least mitigate societal problems (Elias, 2014). Worldwide attention is currently being given to the topic of resilience with many programs taking place and being further developed to foster resilience (APA, 2014; Baumann et al., 2014; Challen et al., 2014; Foxhall, 2014; Matyas & Pelling, 2015; Sankaranarayanan & Cyclic, 2014; Sigmarisdóttir & Guðmundsdóttir, 2013; Southwick et al., 2014; Spencer, 2015; Ungar et al., 2013; Wang et al., 2015; Wright et al., 2013). Many articles have been written about the efforts in Australia to promote resilience in children (Anticich et al., 2012; Barrett et al., 2014; Barrett et al., 2015; KidsMatter, 2012; KMEC, 2012; Polanczyk et al., 2015). A discussion that continues pertains to various approaches to the conceptual definition of resilience (Fletcher & Sarkar, 2013; Masten, 2014; Matyas &



Pelling, 2015). The theme of many studies is the development of resilience approached extrinsically by implementing intervention techniques that deal with children's environments and behaviors (Cutuli et al., 2015; Jefferis & Theron, 2015; Kress & Elias, 2013; Li-Grining & Durlak, 2014; Saulsberry et al., 2013; Stefan & Miclea, 2014; Ungar, 2011, Unger et al., 2013). There are fewer studies found that focused on intrinsic methods and children (Bak et al., 2015; Iizuka et al., 2015; Lochman et al., 2015). There is a gap in literature when it comes to developing resilience for prevention in EC for all children intrinsically as compared to those studies that examine the environment and behavior of stressed or at-risk children extrinsically. Another gap in the literature is the lack programs and studies that focus on communication techniques for adults that would influence the development of psychological resilience in young children as suggested by Beleslin (2014). Interviewing EC social workers using an IPA framework worked well for this study in that social workers could describe their experiences with parents, with teachers, and one-on-one with children to explore the phenomenon of developing resilience in young children. This study offers ways to fill the gaps in the literature by extending the knowledge related to the development of resilience in young children. In Chapter 3, the research methods for this IPA study will be stated in detail including the plan for interpreting data from deep, rich interviews of social workers regarding aspects concerning the development of resilience in EC settings.

### Chapter 3: Research Method

The purpose of this qualitative study was to explore the lived experiences and self-reported interpretations of social workers in the local early childhood settings concerning the development of resilience in children. I organized this study in a manner that is consistent with the interpretive phenomenological analysis (IPA) approach to allow future researchers to build upon this work. My goals became three-fold to: (a) obtain social worker participants' interpretations of how resilience affects the lives of students in an EC setting, (b) examine their perspectives on what is being done and what should be done in schools to develop resilience in individual children, and (c) explore their thoughts of how the development of resilience may influence the future of children.

This chapter is devoted to the research method that was used for this inquiry. I used a semistructured interview process using an interpretive phenomenological analysis (IPA) methodological framework that has become popular in qualitative research (Pietkiewicz & Smith, 2012). In the sections of this chapter, I discuss my research design and rationale and the role I played in the research process; provide an overview of my participant selection protocols, instrumentation, and procedures used for participant recruitment and data collection and analysis; and consider trustworthiness issues (specifically, credibility, transferability, dependability, confirmability). In the last section, I describe the ethical procedures that I followed in keeping with the precepts of the IRB of "do no harm" (Merriam & Tisdell, 2016, p. 261).

#### **Research Design and Rationale**

The major research questions were as follows:

1. What programs and methods have elementary school social workers experienced that support developing resilience in young children?
2. What successes and challenges have the social workers experienced regarding the development of resilience in young children?
3. How do social workers perceive the development of resilience in young children as an influence in later life?
4. What are the social workers' recommendations for future practice?

The central concept of this study was the development of resilience in young children. Physical aspects of resilience, such as the body coping with malnutrition, were not of interest. The definition of resilience adopted for this study was “the capacity of individuals to cope successfully with significant change, adversity, or risk” (Lee & Cranford, 2008, p. 213). I was interested in EC development relating to this intrinsic “capacity” in this study through the interpretations of the lived experiences of the social workers by having a semistructured interview process.

Attempting to understand the experiences of others through verbal communication is fundamental to IPA qualitative research (Merriam & Tisdell, 2016). I conducted interviews with social workers to generate descriptive data in the form of words rather than numbers without attempting to prove or disprove a theory such as found in quantitative research. According to Bogdan and Biklen (2007), a characteristic of a qualitative study is the inductive process of interpreting verbal data to give meaning to lived experiences without numbers and formulas. A deeper understanding of the

meaning of everyday experiences from first-person reports is characteristic of phenomenology (Moustakas, 1994; Van Manen, 1990).

I used IPA as the approach for this study. Smith et al. (2009) stated that researchers conducting IPAs are concerned about clarifying people's open perspectives about their lived experiences in their natural environments without relying on analysis that fits descriptions of behavior into predefined categories. I followed the Smith et al.'s advice by conducting individual semistructured interviews to explore participants' everyday experiences to gain more perspective relating to the development of resilience in young children. Smith et al. (2009) stated that IPA relies heavily on hermeneutics, which is the theory of interpretation. In this study, as an IPA researcher, I engaged in a double hermeneutic as described by Smith et al. (2009), because I would be interpreting the responses of the participants who are attempting to interpret what is happening to them as social workers. In the next section of this report, there is further description relating to my role as the researcher and my process for interviewing social worker participants.

### **Role of the Researcher**

I was the sole researcher of this study, and I assumed the responsibility of obtaining informed consent to begin the research process. During the interviews, I performed as a participant/observer as described by Bogdan and Biklen (2007). I was a participant when leading the discussions by asking open-ended questions, and I was an observer when I noted and recorded social workers participants' verbal responses and mannerisms. I undertook the following tasks as part of my research:

1. recruiting the volunteer social worker participants in a purposeful sampling procedure;
2. developing a rapport with the social workers through casual conversation by providing some basic information in advance so that they have time for reflection and relating to the social workers the purpose, risk factors, and possible benefits of the study;
3. being prepared with open-ended questions and probes for conducting the first round of one-hour, semi-structured one-on-one interviews;
4. conducting and recording the first round of interviews in a mutually agreed upon environment that was safe and quiet;
5. being available when a social worker had any thoughts to be expressed between rounds;
6. preparing open-ended questions developed from the first round of interviews to more deeply explore the topic of developing resilience in young children for the second round of interviews;
7. conducting and recording a second 1-hour semi-structured one-on-one interview with the same participants in the same or similar agreed upon locations;
8. engaging a service to transcribe each interview with appropriate confidentiality agreements and performing a check of each interview transcription;
9. providing each social worker with a list of concepts that were derived from their respective responses to determine if my interpretations/findings were plausible as a member checking procedure;

10. being solely responsible for coding and analyzing data from both rounds of interviews;
11. using pseudonyms to maintain confidentiality; and
12. writing conclusions for this final paper (dissertation).

I do not hold and have never held any position in an elementary school system. I had no professional or personal relationships with any of the social worker participants. In tutoring, mentoring, or observing at the EC level before this study, I gained an appreciation for the work done by one particular elementary school social worker. This person was not a participant in this study. I believe that this study posed no known threat to the elementary school social workers. From my perspective, the appreciation I gained for the work done by social workers did not create any biases concerning their work that interfered with this study. I used no recruitment incentives other than offering a summary of results of this study and appealing to the altruistic motives of the participants. There were no apparent conflicts of interest.

There are specific challenges in this study that were confronted by me as the sole researcher. The first was using the development of resilience as the phenomenon being studied. Resilience is not well defined by research and was not a familiar a concept to social workers compared to a topic such as bullying, for example. To meet the challenge of possible unfamiliarity with developing resilience in young children, I introduced the general topic of resilience over the phone with the social workers before the first interview. I used the term "capacity" as used in the definition by Lee and Cranford (2008) that is found in the first chapter. The preliminary information was limited to

general information regarding resilience while attempting to leave their resilience experiences open for later discussion. Social workers may not have put thought into the topic of resilience prior to the study which contributed to divergent responses when I asked questions about strategies for resilience in the first round of interviews. I was challenged concerning my preconceptions of the term resilience, coming from my knowledge from the literature review and through discussions with older children and young adults in alternative school settings who have shown resilience when overcoming personal toxic stress.

I used the concept of bracketing when dealing with my preconceptions. Smith et al. (2009) stated that IPA is an interpretive endeavor and requires dealing with preconceived notions at a conscious level so that there is minimal interference when conducting interviews or doing data analysis. Moustakas (1994) stated that in the Epoche, one can have "knowing" set aside. Using the concept of Epoche to control my biases and the approach of active listening as suggested by Smith et al. (2009), I mitigated the problems associated with me leading the participants. I drew from my experiences that require active listening in one-on-one situations. These experiences include five years of mentoring in prisons, elementary schools, and adult alternative school. In all my mentoring experiences, the goal in the interaction process has been to do active listening in order to have the subjects investigate *their* thoughts. The skills that I have developed coincide with the Smith et al. (2009) suggestion concerning "going deeper" (p. 68). For this study, I created a list of my biases and kept them at hand during the interviews. When attempting to go deeper, I was more aware of my biases by having

the list, and I was better able to "depict the essence of the experience" (Merriam & Tisdell, 2016, p. 26).

I had another challenge concerning overcoming the unfamiliarity that I had with the social workers. Smith et al. (2009) stated that when conducting an interview, "the most important thing at the beginning of the interview is to establish a rapport with the participant" (p. 64). A lack of rapport would have interfered with obtaining adequate data. To meet this challenge, I wrote friendly emails, had phone conversations to develop trust, and began the interviews with cordial talk. During the interviews, I was an active listener without having a rigid structure. Developing rapport and gaining trust has always been the first objective in communication during my previous mentoring and teaching experiences, and I used these concepts during the recruiting and interview processes of this study.

## **Methodology**

In this section, I include the rationale for the selection of participants for this study, procedures for recruitment, data collection methods, and instrumentation. The last part of this section includes a data analysis plan with an outline of the phases that took place.

### **Participant Selection**

I relied on depth of interview rather breadth of the population. As such, I chose homogeneous sample as suggested by Smith et al. (2009). I drew a purposeful sample of social workers from local suburban school districts. Criteria included having at least six years of experience in elementary school social work, a portion of service having been



performed at the early childhood level, and experience that was not limited to special groups such as the handicapped. In the recruitment process, a phone conversation took place with each potential participant. The five selected social workers confirmed that the experience that they had satisfied the criteria. I verified licensing and employment from the school districts' data bases. The length of service verification came from the various school districts' data bases, the State Board of Education (2016b), and from verbal verification by the social workers during the recruitment phase. There was no other distinction, such as gender or ethnicity, made between social workers. I relied on deep rich interviews about lived experiences of social workers that lead to insights concerning the development of resilience in young children. This study was about exploration and possibly planting seeds that may cause the growth of further studies concerning developing resilience at the early childhood level. It was *not* the aim of this sampling procedure to find a pre-defined cross section of social workers that would be representative of a certain group. I had no ambition for transferability of the conclusions of this study to a diverse larger group by specific random sampling procedures. Besides using a homogeneous sample with certain criterion, Creswell (2013) pointed out that convenience sampling may also need to play a role. Because I wanted to conduct in-person interviews, I selected school districts that were within reasonable driving distances for meeting with the social workers. Also, it was necessary to select school districts in which the social workers could be contacted readily. More information concerning participant recruitment can be found in the section containing procedures for recruitment.

Sample size for this IPA study deserves special consideration. This was not quantitative research in which data from many samples were placed into formulas for comparisons and hypothesis testing. It was not grounded theory in which per Creswell (2013) requires 20 to 30 individuals to participate so that a single well-saturated theory may emerge. The purpose of this study had to do with gaining depth of subject by getting interpretations, examining perspectives, and exploring thoughts. It was in the richness of each interview where a path toward saturation in terms of depth could be explored. My aim was to extract as much insight possible from each social worker to achieve the goal of obtaining deep and rich information. The design of this study included having two 1-hour interviews and an offer for participant comments between interviews. The first interview contained open-ended questions and active listening. The second used the first round to probe more deeply into the phenomenon. A member checking process took place after the interviews were completed. When specifically discussing IPA studies done by doctoral students, Smith et al. (2009) suggested that the number of interviews is the criterion for sample size rather than relying on the number of participants. The authors stated that four to 10 interviews are adequate in this situation. Their rationale is "Successful analysis requires time, reflection, and dialogue, and larger datasets tend to inhibit all of these things, especially amongst the less experienced qualitative researchers." (p. 52). This was particularly true for this study in which there was time between each interview and between each round of interviews to adjust the open-ended questions and probes resulting from previous data. A major challenge of this study was that social workers needed time to reflect on the topic of developing resilience in young

children; a topic which previously was not a focus during their careers. I had a concern in two cases that more than a week between the two rounds of interviews may have caused some discontinuity of conversation. This study involved interviewing five participants, two times each, generating a total of 10 interviews.

I identified participants through the public databases of local school districts. The initial contact for recruitment was done by using the school email addresses of the social workers. The recruitment procedure for interested parties involved (a) sending an invitation email to the social worker, (b) doing a telephone call follow-up, (c) when asked for by the prospective social worker, obtaining a letter of approval for participation from the local school districts, and (d) emailing the required informed consent form to the social worker. The first five social workers who verbally committed came from five different school districts. Because they met the original criteria, they were selected as participants.

### **Instrumentation**

I audio recorded two interviews of each participant with a digital recorder and a backup device. I used interview questions and possible probes for the first interview session as listed in Appendix A. I took a minimal number of written notes so as not to interfere with the oral interview process. I used a Smith et al. (2009) suggestion by jotting down reminder phrases when participants mentioned something that I wanted to revisit later in the interviews. To help in the formulation of questions for the second interview, each participant was given the opportunity to write down comments and questions between interviews (See Appendix B) and email or call me before the second interview.

Only one social worker took advantage of this. The comments made by the social worker were taken into consideration before the second interview. After both interview sessions were completed and the analyses were underway, a member checking procedure took place using email. Member checking is important "for those approaching interpretive analysis from a constructivist perspective" (Hatch, 2002, p. 188). Hatch went on to say, "member checking will look different for different studies, depending on the nature of the relationships between researchers and participants and the kinds of interpretations that have been made" (p. 188). I accomplished the member checks by sending the social workers individual lists of my interpretations of their respective interview responses. I obtained the social workers' feedback by email within one week.

No historical or legal documents were used in this study. The data collection instruments were sufficient to collect deep, rich data from participants in the IPA study (Smith et al., 2009). The entire interview process was designed to give me the best chance to obtain accurate data and delve deeply into the thoughts of the participants. There was time for reflection between interviews which allowed a deeper exploration into the phenomenon during the second interview. The member checking phase after the second interview was a form of respondent validation of the interpretations and findings. This was all done with the anticipation of moving toward answers to the research questions. Smith et al. (2009) stated that interpretation of the data is the key factor that leads up to sound data analysis.

I used a transcription service, Rev.com, to convert the two interviews into text. I listened to each recording while reading the respective transcription to check for

transcription inaccuracies and gaps before doing data analysis. A confidentiality disclosure agreement form from the transcription company was secured.

### **Procedures for Recruitment, Participation, and Data Collection**

I recruited five social workers as planned for this study stemming from the email contact information provided on local school districts' websites. After identifying a prospective social worker, I reached out with an email invitation with possible telephone conversation to follow. All correspondences with the social workers were kept confidential and having at most one participant recruited from each school district supported anonymity between each social worker and the respective school district. Upon request of two prospective participants, I obtained a *general* letter of approval for participation of the social workers from the local school district. I obtained informed consent forms signed by each social worker before participation in this study as suggested by Creswell (2012). There were two audio-recorded 1-hour interview sessions with each social worker at an agreed upon quiet and neutral site. Nine interviews were done at public libraries, and one took place after school in a private room. Participants were given the option to exit this research study at any time before, during, or after the interview process without consequence to the participant. Each of the five social workers participated in the interviews and the member checking procedure.

In the field of education, data collection for qualitative studies is commonly in the form of interviews, and the researcher is the primary instrument (Merriam & Tisdell, 2016). I was the sole researcher for this study, and I interpreted the data from the two interviews according to IPA protocol. The interviews were semi-structured using

interview guides with flexible, exploring questions without an exact predetermined order as suggested by Merriam and Tisdell (2016). As the interviewer, I used the techniques that I have acquired through my mentoring experiences using active listening. The initial written questions and probes were built from the research questions from Chapter 1 (See Appendix A). Further questions intended to help address the research questions came from the first round of interview responses and the thoughts of one social worker between the interviews. A form (Appendix B) was optional but encouraged the social workers between interviews to add their opinions. One social worker offered an email correspondence between interviews that pertained directly to the development of resilience in young children and no implications were made by any of the social workers that there was researcher bias. The second interview session was an extension of the first by attempting to go more deeply into the topic of the development of resilience in young children.

### **Data Analysis Plan**

I planned this study so that as the responses of social workers were given, new questions were to be developed. Merriam and Tisdell (2016) described qualitative studies as being emergent and used the terms "recursive and dynamic" (p. 195) to describe the process of data collection and analysis. The first interview began with questions and possible probes (See Appendix A) that were written based on the research questions. The second round of interview questions relied on social worker responses from the first round including the thoughts of one social worker between interviews. Merriam and Tisdell (2016) suggested that the inductive phase of analysis begins as the first responses

are heard by the researchers. They further stated that as the researchers develop new questions, they are thinking deductively as well as inductively. The deductive process that led to new interview questions for the second round is explained in Chapter 4. Smith et al. (2009) offered strategies for this iterative process with the suggestion that the researcher is always to look for emergent patterns. The final phase of data analysis according to Merriam and Tisdell (2016) is deductive when confirmation of conclusions is done with no more data coming. For this, I drew upon deductive processes developed during my tenure as a high school mathematics teacher.

The deductive process that I used was dependent on a coding process. Saldaña (2013) profiled the many coding techniques for analyzing the data from qualitative research studies. Saldaña suggested a first-cycle coding method, a transition coding, and a second-cycle coding. The first coding process for this study was completed after the first round of interviews. After the analysis of data, the results from the first round was used to create the second round of interview questions. The method used for the creation of a second round of questions was conceptual coding as described by Smith et al. (2009). As a part of this process an analysis was done of interrogative comments that I had placed on the side of the transcribed interviews which led to further investigation of the concept of resilience. The second round of interview questions reflect the results of this coding process with further inquiry into the concept of resilience. A separate data analysis was completed after the second round by using Saldaña's techniques. I synthesized the results of both rounds and present details in Chapter 5.

The first step in the first round of interviews was to sort the data into five "Provisional Codes" (Saldaña, 2013, p. 144). "Subcodes" (Saldaña, 2013, p. 13) were found for each of the five provisional codes, and then subcategories of the subcodes were found. This was followed by the "development of emergent themes" (Smith et al., 2009, p. 91). During the process of discovering the eight emergent themes, a meta code was discovered through interrogative remarks that were made as side notes. The meta code and the participant responses were the basis for the initial set of questions for the second round of interviews. This was followed by provisional coding, a subcoding process, and the discovery of a second round of emergent themes.

I had to choose from several diverse ways to write up an interpretive phenomenological analysis. Smith et al. (2009) stated that the main goal is that a clear argument with justification be presented so that the reader can either clearly agree or disagree. In this study, themes from the coding process were presented to develop a coherent argument.

I gave special consideration to possible discrepant cases. When writing up an analysis, dealing with discrepant cases will form a more thorough argument (Merriam & Tisdell, 2016). For this study, no discrepant cases were identified due to the homogeneous group of social workers chosen and their correlative responses to the interview questions. Due to the small number of participants ( $N = 5$ ), all responses were treated as having equal value by being valuable parts of the data collection process and analysis for this study.



## **Validation Procedures**

After completion of the second round of interviews and with both rounds of data analyses underway, I performed a member checking procedure as described by Hatch (2002, p. 188). Each social worker's comments that contributed to the emergent themes were summarized and compiled into individual lists of at least 20 items. Each social worker was emailed the respective list and was asked to comment on the accuracy of the list. Within one week I received an email response from every social worker that agreed with all items.

## **Trustworthiness**

Credibility is a measure of how much a study approaches reality (Merriam & Tisdell, 2016). In this study, the social workers were presented with open-ended questions and were given a chance to openly express their interpretations of their experiences. Two interviews of each social worker with the opportunity of reflection in between helped in the process of attempting to plunge deep into the thoughts of each participant. Having two interview sessions also enabled me to confirm emergent findings by comparing responses of a social worker between the first and second round as well as comparing responses between different social workers. This is a form of triangulation and took place as the data were analyzed from the first round of interviews and questions were formed for the second round of interviews. The member checking procedure after the second session provided further validation for all participants' responses.

Transferability is a measure of how the findings of one study can be transferred to other situations (Merriam & Tisdell, 2016). I used a small sample of five participants, and

I was interested in emerging ideas from social workers to be used as seeds for more research. I provided the readers with details of the process, the questions, and social worker responses so that the readers can decide on transferability as described by Merriam and Tisdell (2016).

Dependability refers to adequate tracking procedures to see how the data were collected and interpreted (Lodico, Spaulding, & Voegtler, 2010). All facets of this study were tracked by faculty advisors and this document was part of a review process of the Walden University Research Review. I kept a log that helped me track when I did what, too.

Confirmability refers to the ability to have this study reproduced (Miles & Huberman, 1994). This has to do with the handling of biases by the researcher. For awareness during the study, I as the sole researcher took steps to write my biases down and kept them handy during the interview process. In this study, the social workers had time to reflect between interviews. Possible researcher biases were further examined during the member checking procedure. The social workers' thoughts between interviews, their thoughts during the second interview, and the member checking contributed to objectivity in the findings. Another consideration concerning the trustworthiness of a study is the biases of the researcher (Bogdan & Biklen, 2007; Creswell, 2012; Lodico et al. 2010; Merriam & Tisdell, 2016; Miles & Huberman, 1994). The researcher is the primary instrument of a qualitative study (Merriam & Tisdell, 2016). With the responsibility of being the sole researcher of this study, I had a specific plan for handling my subjectivity. The concern that I had was finding a balance between keeping the social

workers on a course toward answering the interview questions while not leading them in a direction to my anticipated conclusions. Before the interviews, I wrote down a list of my thoughts of how resilience could be approached according to the research questions. If a social worker brought up thoughts coinciding with my list, then I engaged in active listening rather than encouraging further discussion toward my way of thinking. I took into consideration the social worker's comments between interviews and results from the member checking procedure when assessing my possible biases.

### **Ethical Procedures**

In this section, the topic of ethical standards is organized into two categories. The first has to do with the Institutional Review Board (IRB) and procedures for the protection of anyone that may be affected by the study. A *do no harm* approach was taken for this study with emphasis on confidentiality and my not revealing the names of participants to others. Pseudonyms were used for the names of the social workers. The second category is the ethics involved in presenting an honest and accurate study. This discussion of the trustworthiness of this study is an extension of the previous section.

The phrases "do no harm" (Merriam & Tisdell, 2016, p. 261) and "avoidance of harm" (Smith et al., 2009, p. 53) are fundamental to qualitative study. As a part of this study, there was a plan to have minimal risk. IRB approval was necessary prior to the collection of data. In the recruitment process, the appropriate informed consent form was signed by each participant with a description of the topic covered. The goal of the recruitment process was satisfied in that five experienced social workers who each came from a unique school district participated. School district personnel were unaware of a

social worker's participation. Upon social worker request, two school districts provided general emails approving social worker participation and a third sent me a general approval letter. These correspondences were handled without the district being aware of a social worker's participation. The one-on-one interviews were done in minimal stress environments. Nine were done at public library study rooms that were not part of a social worker's school district and the tenth was done after school in a private study room. A comfortable rapport was established with the participants and all questions posed no apparent emotional threat to the participants. No unanticipated issues arose during the interviews, so it was not necessary to revisit the issue of consent (Smith et al., 2009). I am not or ever have been employed by an elementary school district, and I have no connection to any of the elementary school districts' administrators. I posed no known threat regarding the employment of the social workers. The names of the participants were not shared with any representative of the school districts.

The procedure for confidentiality consisted of confining the names of the participants to (a) contact information that I exclusively hold and (b) the signing of the consent forms. Instead of actual names, only codes were attached to the audio recordings, transcriptions, and other related correspondences and documents. As part of this study, I used pseudonyms in place of the social workers' names. No names of social workers were passed on to anyone, including to school districts.

The procedure for confidentiality was to keep all audio recordings, written material, and emails in my possession with the exceptions of involved university authorities and the deidentified audio recordings that were sent to the transcription

services. The materials are locked in my personal secure filing system at my home office with no one else having access. The data will be stored for five years then destroyed. No one outside the circle of this project will be made aware of the contents of the interview process. The data analysis phase included a careful checking of the responses so as not to use information that would identify a social worker, school district, teacher, parent, or child.

Children were not a direct part of this study. Any identifiable references to individual children or categories of children were eliminated during the data analysis procedure. Statements concerning children were made in this study. However, only generalities concerning children were written with anticipation that no individual student or specific groups of students can be identified.

I am not and never have been in a professional relationship with a social worker. I have no conscious negative biases toward social workers or the job that they do. Any biases that I may have had have dissipated through working with various groups of children and young adults. A rapport was established with the social workers and not having any significant contact with the social workers prior to this study may have been an advantage in that fresh ideas from the social workers concerning their lived experiences with the development of resilience in young children may have surfaced more freely.

### **Summary**

I established the standards for quality qualitative research in this chapter and the processes detailed in the research method adhered to those standards. Process details used

in this study were organized in a manner consistent with the IPA approach to allow future researchers to build upon this work. The chapter includes details about the research design, role of the researcher, methodology, recruitment, and data collection and analysis; with descriptions of how corresponding challenges were handled that arose from conducting this study. I enumerated appropriate processes to handle the challenges along with the rationale involved. I confronted trustworthiness and ethical challenges in a conscious manner with measures that assured this study to be a recognized contribution. Chapter 4 will contain the findings of the study with a comprehensive analysis of the participants' reflections organized around the research questions and emergent themes.

## Chapter 4: Results

The purpose of this qualitative study was to explore the lived experiences and self-reported interpretations of social workers (SWs) in the local early childhood settings concerning the development of resilience in children. I organized this study in a manner that is consistent with the interpretive phenomenological analysis (IPA) approach to allow future researchers to build upon this work. My goals became three-fold to: (a) obtain participants' interpretations of how resilience affects the lives of students in an EC setting, (b) examine their perspectives on what is being done and what should be done in schools to develop resilience in individual children, and (c) explore their thoughts of how the development of resilience may influence the future of children. The research questions that were examined in two rounds of interviews with the SWs were as follows:

1. What programs and methods have elementary school social workers experienced that support developing resilience in young children?
2. What successes and challenges have the social workers experienced regarding the development of resilience in young children?
3. How do social workers perceive the development of resilience in young children as an influence in later life?
4. What are the social workers' recommendations for future practice?

I used a social constructivist approach using the resilience elements as identified by the Center on the Developing Child at Harvard University (2016a, 2016b). and the conceptual framework informed by Bronfenbrenner's (1977) work on how bioecological systems support children. O'Neill and Gopnik's (1991) work with young children offered

a frame of reference when discussing the minds of children. After the first round of interviews, I used the social constructivist approach and the frame of reference suggested by O'Neill and Gopnik to develop a second set of interview questions that were derived from the first-round responses of the SW participants. The second round of interviews conformed to the IPA model as I delved more deeply into Bronfenbrenner's (1977) microsystem by not only considering external factors associated with children but also examining the inner workings of a child's mind by considering children's thoughts (Gopnik, Meltzoff, & Kuhl, 1999).

This chapter is organized into 10 sections: Demographics, Settings, Data Collection—First Interviews, Data Analysis—First Interviews, Results—First Interviews, Data Collection—Second Interviews, Data Analysis—Second Interviews, Results—Second Interviews, Evidence of Trustworthiness, and Chapter Summary. I performed a member check after the two rounds of interviews by having the SWs examine the accuracy of researcher interpretations of their responses. I included the member check procedure in the Evidence of Trustworthiness section in this chapter.

### **Demographics**

Five participants volunteered for this study and met their appointments (one appointment had to be rescheduled and was fulfilled one week later) for two one-on-one interviews each. While all participants showed a willingness to participate in the two 1-hour sessions, they also commented that the time commitment was at or near their limit due to family and other responsibilities. The SWs willingly shared their experiences and made general comments about the study that were positive.



The recruitment procedure consisted of obtaining emails of social workers from public school district websites. I sent an invitation letter to approximately 40 SWs from the surrounding suburbs. I selected prospective participants with whom I had never been associated and who met my experience criteria of at least 6 years of experience in elementary school social work with a portion of service having been performed at the early childhood level. I followed with phone dialog and an email containing the formal consent form. Although gender was not a factor in the recruiting process, five female SWs committed to the study and eventually participated in both interviews as well as a member check of my interpretation of their responses. They were licensed in the state and employed at five different suburban elementary schools at the time of the study. I verified employment by looking on the districts' websites.

The SWs reported that they had contact with children at the EC level (PreK through Grade 3). They all had experience that included at least up to Grade 5 with two having had junior high experience and another having had high school experience. Their contact with children was in group settings as well as one-on-one. Their overall length of school social work experience ranged from 15 years to over 29 years. In nonsolicited responses, one SW participant reported that she worked in a school that was considered somewhat affluent while another stated that the situation at her school was less stable and a more transient situation. The other three participants did not make substantial comments pertaining to the demographics of their school or district. Throughout the rest of this document, I use pseudonyms when discussing the social worker participants.

Ann graduated from a state university with a master's degree in social work. She began her career as a social worker in a group home. At the time of data collection, she had 17 years of experience as a school social worker. Her range of school social work goes from preschool to Grade 6. She has worked with the general population as well as spending time in the special education setting.

Beth graduated with a liberal arts degree in psychology. She later received a master's degree in social work. Beth had worked with some older children, but most of her career has been spent with children from kindergarten to Grade 5. She has over 20 years of experience in the elementary school.

Rose graduated with a master's degree in clinical social work. She has 15 years of experience as an elementary school social worker. She works with children from kindergarten through Grade 6 and has spent time in junior high education.

Eve obtained a bachelor's degree and then a master's degree in social work. She has been in the same school district for over 25 years. Eve has worked with children in kindergarten through Grade 5.

Cora attended a state university as an undergraduate and received a master's degree a year later in social work. She worked her first 3 years in a junior high setting. This was followed by 12 years of work in settings that included kindergarten to Grade 12. At the time of the study, she was in her third year working with children from kindergarten through Grade 5. She expressed enthusiasm for the newly implemented social and emotional learning (SEL) programs. She also has taken time off between employment to raise her children.

### **Settings**

I interviewed the five participants one-on-one in private settings where confidentiality was maintained. There were no apparent distractions during the interviews. Nine of the interviews were conducted in private library conference rooms, and one was done in a school conference room after school. All locations were chosen by the participants, and there were no complaints during the interviews about the setting. I witnessed no apparent distractions that might have influenced the results of this study.

During the recruiting process, three of the SWs had requested approvals from their respective school district to participate. To preserve confidentiality, I did not release the names of any of the SWs to schools or districts. Two school districts sent out a general email of approval to all district SWs and the other school district sent me the approval form signed by an administrator. The five participants expressed that they were comfortable doing this study.

To develop a rapport with each SW before the first interview, I explained the purpose of the study and pointed out examples of the questions that were to be asked. I referred to information from the consent form as documentation. I stated I had 46 years in education and gave examples of my diverse experiences that included EC through adulthood, and explained that many individuals that I had worked with were considered at-risk individuals. I stated that I was involved with and motivated by my eight grandchildren. All participants signed the consent form before the recording of the first interview. All interactions with the SWs were positive as I witnessed from the verbal feedback after the interviews, the willingness of each SW to participate in the second

interview, and the thoroughness of their responses. During both rounds of interviews, there was only one emotional moment. That was when social worker Rose had tears in her eyes when describing a rewarding experience she had when helping young children.

### **Data Collection—First Interviews**

I collected the first round of data as planned in one-on-one audio-recorded interviews with the five SWs. The interviews were conducted in one school conference room after school hours and four private library rooms. Before the first interview, I emailed a copy of the consent form to each participant followed by an acknowledgment that it was received. A phone conversation took place with each participant in which I introduced the purpose of the study, discussed the consent form, and gained a rapport with the SWs. There was no other preliminary communication with the SWs other than the coordination of meeting times. Each SW signed the consent form prior to the beginning of the first audio recording. The interviews lasted approximately one hour each. I used the online service, Rev.com, for transcription. The first round of interviews generated 90 pages of single-spaced text, and the second round generated 89 pages of single-spaced text. I reviewed each transcript, and I determined that they were accurate compared to the voice recordings. The transcripts required a minimal number of minor corrections and filling in of gaps.

During the first round of interviews, the four research questions of this study were investigated and discussed in a recursive process by asking each social worker the related interview questions and many of the "possible probes" (See Appendix A). As the sole researcher of this study, I could use an iterative approach for all interviews to build on the

participants' responses. I used active listening techniques that I acquired from working with adults in various situations such as financial planning, health coaching, and young adult alternative school mentoring. In this first round of interviews, I could keep rich and deep conversation flowing by sequences of listening and probing. This process conformed to Merriam and Tisdell's (2016) suggested semistructured interview process when noting that there is no exact predetermined order for phenomenological studies.

At the end of each interview, I made an offer for the SWs to contact me with questions, concerns, or suggestions pertaining to the study (See Appendix B). The only response came from Beth, who sent an email stating that the topic of resilience was relevant to her social work. She attached a YouTube video consisting of a Ted Talk concerning social and emotional resilience (TEDx Talks, 2014, February 4). The video was used as part of the data collection process. I compared the contents of the video to Beth's interview responses.

### **Data Analysis—First Interviews**

The data analysis from the first round was an inductive process in which the results had a two-fold purpose of contributing to the conclusions of this study and laying the groundwork for the creation of second round interview questions. The following steps were used to analyze the data from the first round of interviews:

1. "Provisional Coding" (Saldaña, 2013, p. 144) took place to sort the data into 5 "codes."
2. "Subcodes" (Saldaña, 2013, p. 13) and subcategories of those subcodes were determined.

3. An inductive approach took place during the process of "developing emergent themes" (Smith et al., 2009, p. 91).
4. "Conceptual Coding" (Smith et al., 2009, p. 88-90) was applied to analyze the meaning of the explored phenomenon, development of resilience.

### **Coding Process and Subcodes**

As a first cycle coding process, Saldaña (2013) suggested that "lean coding" (Creswell, 2013, p. 185) be used as a provisional coding method. The five categories that I chose were:

- Current School Programs Concerning Resilience,
- Successes and Encountered Challenges,
- Resilience in Early Childhood Related to Later Life,
- Recommendations for Future Program/Studies in Resilience, and
- Mentoring and Connecting.

The first four codes resemble the four research questions. It was necessary to use these codes for the provisional coding because when interviewing the social workers using one code at a time, there was overlap in each social workers' responses regarding the other interview questions. For example, a response by Beth to the question concerning successes and challenges (the second research question) began, "Okay, so because I have only done the Second Step (program) for two years, ..." (which refers to the first research question). Because of the frequency in which mentoring and connecting to children occurred in the different code headings, the fifth category was added which I named "Mentoring and Connecting."

**The first provisional code: Current school programs concerning resilience.** I

broke down this code into 39 subcodes that were generated from comments by at least one SW. The subcode *social-emotional programs that may offer tools for resilience* has 20 subcategories of programs used by social workers. The subcode *aspects of the program* has 16 subcategories listed, such as *good listening skills* and *confidence*. I used tally marks "+" after all subheadings and subcategories identifying how many more social workers corresponded with that subcode or subcategory.

**The other four provisional codes.** The other four provisional codes were:

- Successes and Encountered Challenges,
- Resilience in Early Childhood Related to Later Life,
- Recommendations for Future Program/Studies in Resilience, and
- Mentoring and Connecting.

I named the five social workers (Ann, Beth, Cora, Eve, and Rose) as the subcodes under each provisional code. The comments from the social workers were listed as subcategories associated with each subcode. This was done so that each social worker's comments could be told as more of a personal experience and I could more easily go back to hear the audio of their response. For example, I had the option to go back to the audio recording to listen to their tone of voice to help determine how emphatic or hesitant that they were in their response.

**Emergent Themes**

The 39 subcodes of the first provisional code had tally marks to reflect the frequency of responses. Emergent themes surfaced by comparing these subcodes. In the

other four provisional codes, I performed an item by item comparison to find emerging themes. For example, "parenting" was listed as a subcategory for Ann, Cora, Eve, and Rose under the subcode *successes and encountered challenges*. This allowed me to go back to the transcript to read more about these four social workers' views on parenting. Overall, the theme that emerged was involving parents and mentors (communicating and connecting). I listed the eight emergent themes as:

- developing resilience using current social and emotional learning (SEL) programs,
- possible attributes that foster resilience,
- SEL vs. time for academics,
- social work as prevention,
- involving parents and mentors (communicating and connecting),
- social issues and developing resilience,
- developing a resilience capacity in EC and the outcomes in later life, and
- resilience and thoughts of children

### **Conceptual Coding—The Concept of Resilience**

After extracting the emergent themes, I analyzed the notations that I had made on the side of the data. Most were interrogative annotations questioning how the participants were interpreting the meaning of resilience and its development in children. I made a plan to handle the data that caused the annotated questions. Smith et al. (2009) described such a plan for an IPA study as a process of "dealing with transcript data at a conceptual level" (p. 88). They further stated, "Conceptual annotating will usually involve a shift in your



(the researcher's) focus, towards the participant's overarching understanding of the matters that they are discussing" (p. 88). I embraced the concept of conceptual coding and labeled a new code as *Definition of Resilience According to Its Development in EC*. I listed 38 subcodes that I discovered from the transcripts having to do with the concept in question. Examples of quotes the social workers used became subcodes including "Managing anxiety is resilience," "Actions to try again may be psychological resilience," "Resilience is biological," and "Does focus and attention fall under resilience?" I determined that I needed a better understanding of the comments and designed a method to put the comments in a contextual framework.

I located the interrogative notations that I had made next to responses, and I copied the question that I had asked which precipitated that response. I used the questions that I had asked them as subcategories followed by their response(s) to that question. I was then able to formulate a strategy for the questions that would be used for the second round of interviews (See section Data Collection—Second Interviews).

### **Discrepant Cases**

I did not find a need to identify any specific discrepant cases. While not all the opinions of the participants were congruent, I drew similar themes from their lived experiences. The topic of social and emotional learning was an example of a consensus formed as social workers described acquiring tools for resilience via the existing programs. As *major* themes emerged concerning resilience in young children, I discovered an overall consistency among the social workers.

## **Results—First Interviews**

The results of the first round of interviews had two purposes. First, the results lead directly to discussion, conclusions, and recommendations as delineated in Chapter 5 of this study. Second, the results were used to form questions for the second round of interviews. The following eight themes emerged from all the data from the first round of interviews. Theme 8 is considered a metacode because it resulted from a pattern coding technique using the other seven emergent themes. The description of results reflects the frequency and relevance of the comments. The approach taken in creating the second round of interview questions was consistent with the IPA process as described by Smith et al. (2009). By delving more deeply and intrinsically into the topic of resilience, participants had the opportunities to express their experiences in working with children's minds and children's thoughts as described by Gopnik, Meltzoff, and Kuhl (1999).

### **Theme 1—Developing Resilience using Current SEL Programs**

The first interview question was, "Please describe any current school programs or methods that are designed to develop resilience in young children." The social workers described current programs such as PBIS, Second Step, and DESSA. The responses were consistent in that the five participants did *not* directly explain how the development of resilience was being addressed. As an example, the response from Ann was:

Kind of a program that teaches social skills, getting along with others, problem-solving. We start with pre-K with more "Tucker." Kindergarten goes into a teddy bear with Let's Be Better Friends and then 1st and 2nd grade, we use more skill streaming type of curriculum as well as the Superflex curriculum, which is based

for kids with social problems and on the autism spectrum, although the other kids really like this program, so we branched it out a little bit. Then we use, if it's 1st and 2nd grade and depending on again the needs, we use some different kind of anger management strategies as well as getting to problem-solving, iMessages, things like that. Then in 3rd and 4th grade, we branch out a little bit higher using a different curriculum, sometimes it's Don't Laugh at Me. We use the Superflex Unthinkable curriculum as well for them. It seems to be a good age range for them. We do another different thing for 5 and 6, more problem-solving, peer-based.

In an attempt to connect the aforementioned programs to resilience, I asked the follow-up question, "Can you relate this to resilience? How or why?" The response given by Ann was:

Yeah, because I think they have more confidence in being able to, again, problem-solve. They're building relationships, they're gaining friendships, they're happy to come to school. Obviously, a student that comes is not happy or if they're clinging onto their parent or their parent calls and says they're not, something's going on. It gives us reason to look into it further. For the most part, I would say, even in kindergarten full-day, I would say, gosh, 95% of them are just doing great and are happy to be there. The other kids we'll look into and usually, there's different circumstances going on.

The most interview time in this study was spent with the social workers describing the SEL programs in which they were familiar. However, the results of this part of the

interview were speculative in relating the current programs to developing resilience as a preventive approach. Another factor mentioned by participants is that many of the SEL programs were designed for at-risk children such as autistic children.

### **Theme 2—Possible Attributes that Foster Resilience**

The SWs were asked to describe any current school programs or methods that are designed to develop resilience in young children. In describing current and past SEL programs and relating their success stories, the participants offered examples of the positive effects that these programs had on students. They include the development of problem-solving, handling emotions, empathy, respect, listening skills, social skills, self-awareness, self-regulation, social awareness, goal-directed behavior, personal responsibility, optimism, focusing, better attention, and confidence. There were implications that these effects could promote resilience, but in no instance did a social worker declare that it was a goal of a program to promote one of these attributes so a child could gain resilience. To illustrate the challenge that they had in making a direct connection between the programs discussed and resilience development, Beth stated, "I don't know if focus and attention fall under resilience..."

### **Theme 3—SEL versus Time for Academics**

There was a consensus that there was less time for play in kindergarten and PreK. Ann stated, "They don't have a lot of time to play anymore in kindergarten." She believed that that kindergarten was split into six academic time slots. Ann was allowed 30 minutes per week in each full-time kindergarten class which she described as a very positive experience:

For thirty minutes a week, we go in and do a whole group lesson and for about twenty minutes of it, actually probably fifteen minutes for the kindergarten whole group. Then we break out into small groups, so they practice those in small groups. They do some role-playing and puppet shows and things to make sure that skill is being generalized.

Beth stated that most of the time spent in the half-time kindergarten classes was spent on academics, but there was a 15 to 20-minute timeslot allocated for Beth to come in and do SEL activities. Eve declared, "We need to let our kids be kids" and was concerned that mentors are pushing academics and thereby losing good *connections* with children. Rose concurred by saying there was an unnecessary push for academics and less time for SEL.

#### **Theme 4—Social Work as Prevention**

The five SWs were consistent in that the current SEL programs were beneficial to the well-being of children, albeit that the concept of resilience was not directly addressed. Cora had a lot to say about the Devereux Student Strengths Assessment (DESSA) and mini-DESSA programs and their contribution to the well-being of children as *preventative* programs. The corresponding questionnaires for these programs are comprised of questions relating to eight social-emotional competencies. The questionnaires are used as screening devices for all students to determine who needs help, and this is done without diagnosis or labeling. Cora described the system as follows:

We'll be able to take a look at students from kindergarten through fifth grade here and see if they have any needs in the areas of self-awareness, self-management, social awareness, relationship skills, goal-directed behavior, personal

responsibility, decision-making and optimistic thinking, so this is really cool, and then once we get that information, we can develop different interventions specifically designed for those kids, so that we can say Joey in Ms. C's room, and Tommy in Ms. J's room, and we can pull the kids together that need to work on self-management, so I'm really excited about this.

Cora stated that these programs are a far cry from handling referrals and managing IEPs and 405 plans as a part of intervention.

The SWs stated that they worked in an educational setting and their prime responsibility was to prepare students to do well in the academic environment. As such, a focus on prevention was expressed in a way meant to prevent the child from what was considered as poor behavior in a class. Eve said that she would go into the lunchroom and ask certain students how they were doing in their classes. She considered this as her attempt at prevention.

### **Theme 5—Involving Parents and Mentors (Communicating and Connecting)**

..... The theme of communicating and connecting with adults with the possibility of promoting resilience in children surfaced in many of the discussions with the participants. I will explore this topic as per respondent.

**Ann.** I posed the question, "What personal stories can you share concerning resilience in children from the perspective of an adult-child relationship?" The response was:

Obviously, there are some children with whatever condition, whether it's ADHD or maybe they haven't been in school before, they're starting from the very basics.

Which could be frustrating with a classroom of twenty-five to twenty-seven, twenty-eight kids now. It's hard for the teachers at times and sometimes it's nice to see the relationships grow with the teachers and the kids. As they are learning and growing and they can even look back and go, "Whoa, that's the same kid." I've seen a student that needed a lot of support in kindergarten and went to 1st grade and really needed little support and being able to go, "Wow, look at how far they've come."

Her district does have mentoring, but it relies on local volunteer church members to monitor and encourage academic performance.

**Beth.** When questioned about resilience in children and adult/child relationships, Beth answered that her school was not set up specifically to promote such relationships. She, however, stated that in cases where there were such relationships between students and teachers, that there were marked improvements in children's attitudes. She said that there was a lot of possibilities in establishing deep communication in child-adult relationships.

**Cora.** In talking about people who made a difference in children's lives, Cora offered the following:

The other thing, along with that, really, and this is what keeps coming into my mind, and I don't know if this is true or not, but I think kids remember, if they're in high school and they think about their grade school or early childhood, they're only going to remember, I think, a person. They're going to remember who, maybe made a difference, who they connected with, how they felt when they were

with somebody, and so I don't know if they'd remember a lesson, unless it was maybe real visual, but yes, I think things like this can make a difference, if there was application, and it was a strong enough problem that they overcame, maybe, that they would remember. I remember things from when I was little that were traumatic, that had somebody helped me through those, or pre-taught me, "This is what's going to happen," and what you said, "so how are you going to deal with that?" Maybe I could make some choices myself, and problem-solve together with an adult, but instead, I was placed in a situation that was traumatic.

The discussion continued about the possibility of deep communication with children although resilience was not specifically mentioned.

**Eve.** A mentoring program described by Eve was stated to be somewhat effective. For at-risk children, a teacher can be assigned to a particular student as a mentor. Eve stated that the challenge has been in the mentors "keeping score" on the child, with the results being that the relationship (connection) often getting broken.

**Rose.** The PBIS program in the school has a mentoring program where Rose attempts to pair any adult of her choosing with an at-risk child. Mentors are encouraged to gain a good connection with the students. The program is described as relatively new, but there have been signs of success. Rose described it as follows:

It is not at all meant to be a psychological type of interaction; it's just being there for the student, listening to the student, validating the student, supporting the student, and helping them set goals. More than anything, I think, helping to build them to know that they have the ability.



Rose went on to talk about coping skills and mentoring which may have potential toward the topic of resilience. She described her experiences as an SW as sometimes including the promotion of coping skills.

### **Theme 6—Social Issues and Developing Resilience**

Eve put this theme into perspective when she was asked, " What positive experiences have you had in which children seem to have gained resilience?" Her response was:

My focus is really on their accessibility to learn, so it's a little different being (an individual social worker) in the schools, versus an agency. I don't know if you're running into that as you're talking with other people, but my focus really is, I need to get you reorganized. If you're unavailable to learn, we need to figure out what's going on, what strategies we can use, and get you back to your learning environment. Digging deep into things, if that's happening over and over, I would refer that situation to an outside resource.

I introduced the topic of anxiety as a social issue in questioning the relation to resilience. I received no direct responses that connected what was being done in developing resilience in EC to handling anxiety. Rose had a many-faceted response that reflected other participants' responses:

I think it's (anxiety) beginning to be seen more and more. I guess I can only, because I think about my own personal children, and their experience through high school, the amount of academic pressure that's put on them. I see that in the high school more. The students that I work with, it's probably the school that I'm

at, it's probably the only school that has no pockets of affluence, so the anxiety might look different than some of the other schools in our district. Currently, there's a lot of anxiety around our political climate. We have a large bilingual population, assuming also that a large, undocumented population, so there's a lot of anxiety around what might happen to parents. In years past, after 9/11, families losing their jobs, homes going on foreclosure, we have a large working class community. Students come into school worrying about parents...

There was no discourse in what was being done in EC to promote resilience. Similarly, there was no connection made between preventing bullying in EC and developing resilience in the potential bully. Ann was asked the question, "The bullying prevention program, does it have anything to do with resilience?" Her response had more to do with the victims of bullying:

The same way as their social curriculum in the sense that these kids get empowerment of knowing what to do in case somebody is picking on them. Having that same consistent program that's heard even if they move across district, they hear the same things. The consistency of the rules and the consequences and things like that. It makes them feel safer.

### **Theme 7—Developing of a Resilience Capacity in EC and Outcomes in Later Life**

The question of how developing a capacity for resilience in EC affects later outcomes yielded a variety of answers.

**Ann.** "We can only guess" was the first response from Ann to the question and not much of a connection between resilience and later life followed that comment.

**Beth.** When asked the question, Beth stated that while paperwork from children's intervention programs follows the child into junior high, there is little feedback to the elementary school. She stated that there is no feedback most of the time.

**Cora.** Cora speculated that if children learned to handle their fears early and had actual experience doing so, then their future could be different. A personal story was given by Cora:

I remember things from when I was little that were traumatic, that had somebody helped me through those, or pre-taught me, "This is what's going to happen," and what you said, "so how are you going to deal with that?" Maybe I could make some choices myself, and problem-solve together with an adult, but instead, I was placed in a situation that was traumatic.

She continued by saying that deep communication with children as young as kindergartners could affect later life in a positive manner.

**Eve.** The importance of adult connection and communication was expressed by Eve. She stated that keeping a long-term connection with children is very difficult.

**Rose.** "Parents are perpetuating helplessness" was a comment made by Rose. She explained this by saying that adults need to be in more direct communication with children, but children must be allowed to fail. Kids must experience conflict in order to grow.

### **Theme 8—Resilience and Thoughts of Children**

When I asked questions concerning the meaning of resilience, the five social workers' responses varied when making connections to thoughts of children. When

analyzing the results of the first interview, I noticed that I had made notations next to many of the SWs' responses. They were in the form of questions such as, "Is this psychological resilience?" I noticed patterns of inconsistency in their interpretation of resilience. The following questions and answers reflect this disparity. When considering the capacity for resilience, the SWs considered the thoughts and fears in a child's mind. By delving further into the notion of the inner workings of a child's mind by considering the child's thoughts (Gopnik, Meltzoff, & Kuhl, 1999; O'Neill & Gopnik, 1991), questions were developed for the second round of interviews (See Appendix C) intended to more deeply explore the SWs' experiences with resilience having to do with children's thoughts.

**Ann.** The first question asked was, "Please describe any current school programs or methods that are designed to develop resilience in young children?" Ann gave her response by offering examples that she interpreted as being connected to resilience.

Examples of responses are as follows:

- "Programs used were designed for social problems and on the autism spectrum. . ."
- "In kindergarten. . . learning a certain language, building knowledge, problem-solving, being a good community member, being more independent."
- "In first and second grade. . . we use anger management strategies."
- "In third and fourth grade . . . 'Don't Laugh at Me' curriculum."
- "In fifth and sixth grade. . . more problem solving and peer-based."

- "In all grades, if they are not following rules. . . , then they would be written up."

When asked to relate this to the thoughts of the child, the response was, "Better problem solving, better relationships, more social smarts." When discussing the topic of relationships, I asked, "How do you relate this to what you would consider to be psychological resilience?" The response had to do with intervention techniques as being prevalent for the participant. When asked about resilience and a child's future, the response by Ann was as follows:

My feelings are just whatever your circumstances are you have the opportunity that resiliency is offered, it is possible. With different people in these kid's lives and different experiences they have and so many excellent adults that they get to interact with each day. Just that person could make a change in their lives. I think that people that focus on the negative like, "The world is getting so bad." We can say that or we can look at the positive pieces and the glass half full and we talk to kids about that too. Are we going to walk in and look at all the bad things that are happening today or are we going to change our muddy thinking into clear thinking and find the good?

Ann talked about the importance of handling physical emotions. When asked to go deeper into the triggers of the emotions, Ann replied, "There are fears in a child's mind that need to be talked about."

**Beth.** I asked the question, "What positive experiences have you had in which children seem to have gained the capacity for resilience?" Part of the response was, "They

are picking up on the lingo, and they all talk about eyes watching, ears listening. They've got certain little key phrases to help their focus and attention." Another question, "Would you say you are able to talk deeply about their thoughts?" The response was, "In many cases they are too young to talk deeply. They can express frustration. They are definitely learning about their feelings, so they can express frustration or upset or anger, things like that." When asked, "How do you define anxiety?", the response included, "...an 'irrational' kind of fear." At this point, Beth did not distinguish between emotional fear or fears as thoughts (thought fears). Later in the interview, Beth gave examples of children's thought fears such as not making a high enough grade in a class, making a mistake in front of a class, and when encountering a bully.

**Cora.** The question posed was, "What types of methods do you have to help children with resilience?" Her response was, "We'll be able to take a look at students from kindergarten through fifth grade here and see if they have any needs in the areas of self-awareness, self-management, social awareness, relationship skills, goal-directed behavior, personal responsibility, decision-making and optimistic thinking. . . And this is all for interventions." When asked about prevention, the reply was, "There's a lot of fears that kids have and we are not set up to handle them."

**Eve.** When asked about developing resilience as a capacity in children, Eve responded, " Presently, I do more but not push it into a whole class. I have more pull out, more second tier intervention areas." Developing resilience was discussed by Eve as "The program is developing resilience because it's teaching kids to, first off, identify feelings." I asked, "Are feelings synonymous with emotions?" The response, "Your feelings will

create thoughts, which will create behaviors." Next question, "What positive experience have you had in which children seem to have gained resilience?" The response by Eve was:

. . . But my focus really is, I need to get you reorganized. If you're unavailable to learn, we need to figure out what's going on, what strategies we can use, and get you back to your learning environment. Digging deep into things, if that's happening over and over, I would refer that to an outside resource. The inconsistencies, for some of the kids that I see, kids of divorce, not knowing what to expect from adults in their life, I think we have to realize that we play a bigger part in their development of whether they're going to be a resilient person or not. I hear a lot, and I don't know if you do, "Kids are resilient."

She added that there is a need to help children handle their thoughts.

**Rose.** The question, "What positive experiences have you had in which children seemed to have gained the capacity for resilience?" The response was:

Five to seven percent get intervention mentoring. . . It is not at all meant to be a psychological type of interaction; it's just being there for the student, listening to the student, validating the student, supporting the student, and helping them set goals. More than anything, I think, helping to build them to know that they have the ability.

I said, "Your example of having difficulty with transitions seems like an example of lack of resilience." Rose said, "I never really thought about it that way." She later brought up the handling of psychological fears and made a connection to the thoughts of children.

As I analyzed the results of the first interview according to the IPA model by delving deeper into Bronfenbrenner's (1977) microsystem, I noticed that I had made notations next to many of the SWs' responses. They were in the form of questions such as, "Is this 'capacity for resilience'?" I noticed patterns of inconsistency in their interpretation of resilience. I also noticed a pattern in SWs' responses that the terms "thoughts" and "fears" appeared when I attempted to go deeper into the concept of gaining the capacity for resilience. The communication process of "handling fears" as thoughts was expressed by Taket, Nolan, and Stagnitti (2014). By delving further into the notion of the inner workings of a child's mind by considering the child's thoughts as described by Gopnik, Meltzoff, and Kuhl (1999) and O'Neill and Gopnik (1991); questions were developed for the second round of interviews (See Appendix C). The newly created second round questions were intended to more deeply explore the participants experiences with resilience as a capacity and how connections could be formed with adults who may help with the development of resilience in children.

### **Data Collection—Second Interviews**

At the end of the first interview, an offer was made for to the SWs to contact me with questions, concerns, or suggestions pertaining to the study (See Appendix B). I received one reply with an email containing a speech by Trish Shaffer who is Coordinator for Multi-Tiered Systems of Support for the Washoe County School District (TEDxTalks 2014, February 4). In Ms. Shaffer's speech about social and emotional learning, she demonstrated much concern regarding a lack of resilience in children.



The second round of one-on-one interviews took place with the same five social workers. They lasted approximately one hour each, and all were recorded in a private and quiet library conference room. All data were audio-recorded, transcribed, checked, coded, and analyzed as described in Chapter 3. The data were collected as planned and without interruption.

New interview questions developed from the first round of interviews were used (See Appendix C). Inspiration for the questions came from first round discussions with the participants concerning resilience in the context of exploring the thoughts of children as opposed to exclusively dealing with physical emotions and behaviors of children. Cora described that when a child is referred to her, she first must work with the physical emotion to "calm the child down." She described the handling of fears as thoughts (thought fears) as addressing the deeper issues in the mind of the child. The second round of interview questions was designed to delve deeper into the possibility of connecting with children about handling their thought fears while retaining an alignment with the original research questions concerning the development of resilience.

### **Data Analysis—Second Interviews**

I used provisional coding when analyzing the data from the second round of interviews. The initial codes chosen coincided with the original four research questions of this study. The four code headings are:

- Current School Programs Concerning Resilience,
- Successes and Encountered Challenges,
- Resilience in Early Childhood Related to Later Life, and

- Recommendations for Future Program/Studies in Resilience.

Subcodes were used, and the responses from the dialog with the SWs were connected to the appropriate provisional code(s) as listed above. There were 49 subcodes after the transcripts were studied. From the subcodes the emergent themes surfaced.

### **Emergent Themes**

The four themes that emerged from the second round of interviews were merged with the first-round themes. Also, from the first-round data analysis, questions were formed to clarify and go deeper into the concept of resilience. The SWs considered the inner workings of a child's mind by considering the child's thoughts and fears which is in alignment with the research of Gopnik et al. (1999) and O'Neill and Gopnik (1991). In the second round, the term "thought fears" was used in the emergent themes headings:

- SW experiences and thought fears,
- handling thought fears,
- connecting handling of thought fears in EC to later life, and
- SW recommendations.

### **Discrepant Cases**

There were no identifiable discrepant cases. An example of a degree of disparity between SWs surfaced when they began discussing communicating with children about their thought fears as being a positive approach. Participants expressed reservations about going into this approach with haste. For example, Cora stated that introducing thought fears in a conversation with a child who does not fully grasp the concept may cause harm. Ann was concerned about bringing up bad memories for a child. Despite the reservations,

all SWs agreed that this type of deep communication with children would produce positive results. There was no discrepancy identifiable when considering the emergent themes.

### **Results—Second Interviews**

To begin the second round of interviews, the participants were asked to discuss the phrases "psychological resilience" and "handling fears as thoughts" that had emerged from the conceptual coding process when analyzing the first round of interviews. In the second-round discussions, there was a general acceptance that these phrases could be beneficial terminology for the second round. Ann stated that the phrases are helpful when talking about some of the programs that her district is involved in. Beth suggested that it is beneficial to consider emotional resilience to be different from psychological resilience. In terms of psychological resilience, Beth suggested that the question be asked of children, "What are your fears?" Cora discussed psychological resilience and handling fears of the mind freely and suggested that the idea of thought fears can be beneficial. She named "healthy fears" as thoughts that could be helpful to a child. Eve began sorting emotions from thoughts fears. She stated, "I feel that the programs that I talk about are addressing that emotional part, not that thought part." Rose readily accepted the phrases psychological resilience and handling fears as thoughts. She related anecdotes that had to do with handling thought fears.

The results for the second round of interviews are based on the new set of interview questions (See Appendix C). The four themes that emerged parallel the original four research questions for this study. Responses that contributed to the first theme, *SW*

*experiences and "thought fears"* and the second, *handling thought fears*, align with the first two original research questions for this study:

- What programs and methods have elementary school social workers experienced that support developing resilience in young children?
- What successes and challenges have the social workers experienced regarding the development of resilience in young children?

The third theme that emerged, *connecting handling of thought fears in EC to later life*, aligns with the third research question:

- How do social workers perceive the development of resilience in young children as an influence in later life?

And the fourth, *SW recommendations*, is basically the same as:

- What are the social workers' recommendations for future practice?

The results of the second round of interviews are stated using the four emergent themes as headings.

### **Social Workers' Experiences and "Thought Fears"**

The participants stated in the first round of interviews that most of their time spent with individual children came from referrals. Much of this time was spent on intervention that dealt with behavior and emotions. The group programs were often labeled as social and emotional programs. In the second round of interviews, the responses of the SWs described experiences more related to the development of psychological resilience by using the term "thought fears." The idea of using thought fears in the second-round discussions came from the SWs' first round responses concerning dealing with what they

described as thoughts and fears of children. This attention to the minds of children aligns with the opinions of researchers (Gopnik, Meltzoff, & Kuhl, 1999; O'Neill & Gopnik, 1991; Taket, Nolan, & Stagnitti, 2014). The following comments are based on responses of the SWs during the second round of interviews.

The SWs' comments regarding how the idea thought fears related to a specific program varied. For example, Ann stated:

We, again, at our district, are doing research-based curriculum. Obviously, there's certain programs like Skill Streaming. They have specifically fear addressed in there, but we will pull from materials. If I was to do a Skill Streaming lesson, yes, you may (be dealing with thought fears).

I asked Ann if the phrase "what are your fears" was used directly in her experiences and the reply was, "Not that I know of." She further speculated:

It can it be more predictable, though, if we somehow created a further awareness of connection. I think it could be more purposeful. Yeah. It could be, if the child is ... Some kids aren't capable, or they've shown, anyway. Maybe they are, and we just haven't done it the right way. Sometimes there are children that it seems like nobody can connect with. That's always really sad.

Ann added that talking with a child is good, "By keeping things in, they might not know what their fears are. We can't figure out what their fears are, but they are talking".

When I inquired about asking a child such as one who has been referred due to exhibiting bullying behavior, "What are your fears?" Beth responded:

Again, I feel like we could almost guess what those would be, but to actually ask a child, and by child, it could be anything, any age, really. I don't know if you'd do it in the context of "Why do you do this? Is there something you're afraid of?" Or if you don't put it in the context of, "Why do you do this," but just, "What are you afraid of? What's your fear?" I don't know that anyone has ever ... I don't even think I've ever read, like, I've read a couple books about either bullying, or bullied, or the bystander, but I don't think I've ever read about the exact question.

Cora had positive comments about finding out about thought fears of students:

Well, I think it can affect them by them knowing that it's okay to talk about fears. There are fears. It's okay to talk about them. Somebody cares about mine. Perhaps when they get older, I should care about my own fears too, you know what I mean? Yeah. I can see a lot of benefit from it.

Cora discussed influencing the futures of her own children by creating a better connection with them by discussing their thought fears. She emphatically said, "I'm going to go home and ask my kids that question (What are your fears?)" She also expressed some reservations about the process of asking children about fears:

Yes, although I told you that I get nervous about that, though. Are we introducing something too soon? When is too soon? I have reservations, but I want to understand it better. I would like to know if it's okay to introduce things to children. I can give you an example that's clear in my head. It wasn't about a student. It was about my own child. I think he was, you know, pre-kindergarten or maybe kindergarten age. It was a church event of some sort. They were playing a

cartoon, and it was about Cain and Abel. One of the brothers killed the other brother. I was really upset, because I was thinking, "Why would I want my son to learn about murder?" Is that too soon? You know what I'm saying?

When asked if we should talk about fears with bullies Eve's reply was:

That's that innate little system that we have. I think we should be asking everybody, bully or otherwise, and how do you define what a bully is, or who it is, is part of why they're bullying part of their thought fears ... Is their thought fear that they won't be accepted, or people are whatever, so that's why they're bullying, because that's how they get the attention they want? Is that how ... Some kids will say they've been bullied, so that's why they bully. There's all sorts of theories on that. Should we ask them? Sure. Why wouldn't we try to delve into that?

Rose remarked about seeing a child in an emotional state:

Emotions are a reaction to different situations. Sometimes we share or we can experience the same situation and have different feelings about it by deepening on our perception or past experiences. We help them to identify especially at a very early age. Even to see it in themselves and even in others, facial expressions, body language so that you know how to approach the situation. If somebody is smiling, you can approach them and say "hello." If they look angry, you maybe need to give them some space.

When I inquired who best should be asking about fears of the child, Rose replied:

I think the parent. I think they're the first line of defense. I think they're the ones that know their child better than anyone else and I think that when they begin to

sense some insecurities or avoidance, especially towards school, I think that they inquire about it. They're saying, "Did somebody do something, are you afraid of the teacher, is something too hard?" I think it starts with the parents. Then I think the next person might be the teacher, because they have more interaction with the child.

When asked if she talks about fears of children, Rose said:

Not necessarily. Not directly. I think about the programs that we do. I think to some degree we do talk about it, but not per se. We do a lot of feeling identification. I think that's usually probably where we begin to help them gain some awareness ...

When questioned specifically about the development of psychological resilience and how the idea of handling fears comes into play, Eve and Rose said that the current programs do not directly address handling fears. Cora brought up Erin's Law as indirectly helping with handling fears by instilling some fears in children concerning inappropriate touching. Beth mentioned indirect attention to handling fears by using emotional management programs. Ann stated that she makes attempts to introduce the handling of fears. She gave as an example the Skill Streaming program. She stated that as with other research-based curriculum that her district uses, she picks things out that best fits the situation. She said, "I'm talking about the feelings and emotions and how to handle those. The first step is to identify where that fear is from, and then pull in other materials."

The consensus was that parents or at least a family member would be the best choice for asking the question, "What are your thought fears?" In the overall view, it



would be an available adult who might connect with the child. The social workers discussed possible attributes of a connecting adult. Ann said, "Close connecting with a child comes first." Beth stated, "Rapport, trust, honesty, and caring is more important than what people teach." Cora offered, "...having patience, being passionate, and not being judgmental." Eve added, "active listening" to the list. Rose listed, "...being available, being present, having face-to-face contact, and being a non-judgmental listener."

Ann offered a story of a child offering his fears to another child as having "backfired" because of age inappropriateness:

I can think in the last week that we had a student who saw something at home that frightened him, or that he felt uncomfortable about. That student kept it in and did not know who to share it with. The student considered sharing that with a parent but felt uncomfortable so went to a close class friend to share instead. But it was not age-appropriate for the friend, and it had needed to probably go to an adult. It came out that the other student felt uncomfortable and shared it with her parent. Her parents then called the school saying, "Something's not right here."

The above story was also an illustration of what Ann named, "A child's need to share." The SWs stated that they are doing fewer one-on-one meetings in the schools and offering children less time to share their thought fears. The five participants were all in agreement that working with thought fears in young children could be considered a positive approach. They agreed in their responses that the thought fears can be positive if they motivate and protect or negative if they limit and harm.

### **Handling Thought Fears**

After discussions concerning communicating with children to identify their thought fears, the next topic was that of how to handle the fears. I placed this in the context of developing psychological resilience by giving verbal reminders that would keep the discussion in alignment with the original research questions. During the first round of interviews, the discussions gravitated toward the social and emotional activity of children. In the second round, the discussions moved toward how thoughts affect children and how the children handle thought fears. The following are comments when asked about handling thought fears:

**Ann.** Ann made various points about handling fears. She began with an example of children who were termed "frequent flyers" because of their visits to the nurse. She talked about physical problems originating from the "inside." Ann continued:

...inside, and then it could cause other physical reactions. Those kids that we visit, we check on if they're visiting the nurse a lot, we're looking into that. These persons are what we call frequent fliers because they go to the nurse a lot. Is it really stomach aches related to having the flu versus I'm fearful of something else? Like something's going on at school.

Ann stated that there are mentors in her school, but they do not play a role in handling thought fears. If a mentor suspects a child has some thoughts that need to be addressed, then it is usually referred to the parent but without adequate follow-up by the school.

When the subject of the internet came up, Ann explained that time on the internet may be detrimental when it is used as a distraction by kids to not face their thought fears. However, she also stated:

Unless they're researching their fear... Then it might be a positive thing where they can go and research snakes or whatever, and just see what that's about. They could do that with storms. They go and then they do a little research project on that, or they put a book together, and then they understand where it's coming from, and strategies to use when it comes up.

Ann did not state that "handling fears" was directly addressed using that term according to her experiences as a social worker. However, she talked about how she was somewhat familiar with the concept. For example, she stated, "We teach the kids, again, that whole fight or flight. This is how our body reacts when they come in contact with something fearful." I questioned if this was physical emotion as opposed to handling thought fears. Ann did not respond to that question.

When asking children about their thoughts and handling fears, Ann had some cautionary statements. In reply to this approach as being positive, Ann stated:

How do we know they had an understanding of what we're talking about? Maybe that's going to bring out a whole bunch of other things. I don't know if it's necessarily positive. Maybe there's more. Oh, this is why, and then all of a sudden it brings back some other dark memories in their past, or something else that occurred, and so it's just a lot for them to handle, and maybe opened up something

that they're not ready to talk about, or they're not ready to approach. They might need somebody else.

**Beth.** Beth did not express the reservations that Ann had concerning children expressing fears and helping children to handle them. Beth's comments were more in line with the idea that more should be done to help children handle fears with the conditions that a child is old enough to communicate her or his thoughts and the child is not in an emotional state. When asked about possible negative effects from asking about fears, Beth stated, "I can't think of any bad ways that it could affect them." When asked about asking individual children, especially bullies, about their fears, Beth replied:

...to actually ask a child, and by child, it could be anything, any age, really. I don't know if you'd do it in the context of "Why do you do this? Is there something you're afraid of?" Or if you don't put it in the context of "Why do you do this," but just, "What are you afraid of? What's your fear?" I don't know that anyone has ever ... I don't even think I've ever read, like, I've read a couple books about either bullying, or bullied, or the bystander, but I don't think I've ever read about ... I don't know that there's ever even been a study that I've read or heard about that has outright asked the bully, you know, to fill out this questionnaire about you, like, why are you doing it? What's going on in your head? What are you afraid of? What are you thinking? What are you, where did you get the idea that this is okay to do? I mean, nothing. I mean, I don't know if I know ...

Beth stated that the school district that she is part of was interested in investigating programs that would develop better one-on-one communication with children.

**Cora.** Cora voiced no apparent concerns when it came to asking children about their fears. She had reservations about introducing fears to children to make a point:

I can give you an example that's clear in my head. It wasn't about a student. It was about my own child. I think he was, you know, pre-kindergarten or maybe kindergarten age. It was a church event of some sort. They were playing a cartoon, and it was about Cain and Abel. One of the brothers killed the other brother. I was really upset, because I was thinking, "Why would I want my son to learn about murder?" Is that too soon?

Cora did express a need to instill some fears especially when it came to sexual abuse:

...we talked to the kids about their responsibility not to do that to other kids, because I mean, I don't know what the statistics are, but I know that there's a lot of kids who are sexually abused by older siblings, neighbors, cousins, whatever. I think it's also helping children realize, "Whoa, I can't do that. I could be hurting somebody."

Cora wants more information that could help with approaching problems. She said that she is interested in research with findings that she could apply to certain situations. Her experiences include:

There's cognitive behavioral therapy that I've tried to do with kids. I think that they leave ... I help them try to figure out what it is that's going on, what they're either afraid of, and then what their body feels like, and then what are they going to do to calm down. It doesn't really address the actual fear or problem.

And:

There's nothing in place for kids. We have to kind of just, maybe this will work. Maybe this will work. Maybe this will work. You know? Just kind of grab from our toolbox and try to find something that matches. You know, what the kids need.

Cora stated that she wished that there would have been someone available in her early childhood to help her with her thought fears.

**Eve.** Connecting with children and helping children to "figure out life" reflects the thinking that Eve expressed in the second interview. She stated:

I think that connection is vital to ... Every child needs to have somebody that they can connect with, whether that's ... An adult is important for each little person, whether that's their parent, a friend's parent, somebody that they can connect with and that they know they can count on. I think that that's vital for every person.

And by using the connection to ask a child about their fears she predicted:

My prediction would be that if you're asking that question and the child has that connection with you to share them, and then you're helping them figure it out, they're going to be better off in handling and coping and whatnot, later in life. For lack of a better word, resilient. More resilient later in their life.

Eve also talked about connecting with "bullies" about handling their fears. She said, "Why wouldn't we try to delve into that?"

**Rose.** Rose stated, "Relationship is the foundation for all of our work." She gave examples of using a connected relationship to help students to handle their fears. She mentioned the fear of stormy weather and autistic children's fears of, for example, birds.

Rose gave an example of an elementary school girl handling the fear of being sent away from her home when her mother was in the hospital:

My understanding was that when the teacher went with the student to go pick up her things, the house looked like a hoarder's house. Sometimes between the time she dropped her off, a call was made to DCFS (Department of Children and Family Services) by the social worker from the hospital. Somehow that student did something to not only clean up the house immaculately by the time her mother came home, but when the DCFS showed up, there were no signs of neglect, yet she was the one at that young age ...

Rose explained about this child handling a fear:

I think the fear of almost losing her mother, having her mother in and out of the hospital, and having her mother being immobile just created in her this strength that even us at the school didn't see. Somebody did all of those things, and it was her. That was very ..., it was surprising...

Other examples were given concerning handling fears and being resilient. Rose cautioned about not handling fears well:

Because I think sometimes when we hold onto those fears, we start building walls that we don't even realize, where you end up believing your own lies. You make up a persona to protect yourself to where you might lose yourself and not know who you are and not know that you are worthy of certain things. Maybe that's where that self-sabotage comes in.

Rose summarized by saying:

I find my role as privileged to be able to give children an opportunity to know that there's so much more. There's so much more. Whatever their fears are, I think it's important to identify them and to know that they have the power within themselves through their choices and their actions to be better, to do better.

### **Connecting Handling of Thought Fears in EC to Later Life**

During the first round of interviews, the SWs did not offer strong connections between EC and the development of resilience for later life. Participants talked about the SEL programs in which they were involved without being able to offer how these programs were affecting the later lives of the students. The connections that they offered concerning the later lives of children were more speculative and more in the realm of providing tools for young children for possible use later.

In the second round of interviews, there was more of a connection between the concept of handling thought fears in EC and relating it to the development of resilience for better outcomes in later life. The following examples demonstrate awareness of possible connections between handling fears in EC and positive outcomes later.

**Ann.** When talking about children having good connections with mentors, Ann expressed the opinion that it could help later in life if the mentor helped the child with problem-solving techniques early. When asked how guiding a child to handle fears could help later, the reply was:

Again, I think the more talk and the more communication, the better for kids.

Obviously, there's other factors that come in. They have a major accident, they can't walk any longer, then depression does come out in a different way...



Ann said that one connection might change the "trajectory of a child's life." Another point that she made was a fear, for example a fear from television that never gets out, may stay bottled up for years if there is no attempt to helping a child by making a communicative connection.

**Beth.** When asked if handling fears could be a positive approach for children's futures, Beth replied:

I think so. I think of it as looking at it like a problem-solving process someone goes through. You present an idea, and they're supposed to kind of skip ahead to look at their fear, okay, in a positive way. I have the fear of not getting good grades, I'm going to study harder. I won't get the job, so I will work harder to get good grades to get a job. Because those are the fears that promote motivation, then some positive things can result.

Beth also had opinions on instilling "healthy fears" to protect. As an example, she used the concept of fears when talking to young girls about not getting pregnant.

**Cora.** When talking about connecting with young children and the ramifications later, Cora offered an example of a relationship that lasted:

I remember I left my first counseling job and later I got this five-page letter from this girl that I didn't realize how much of an impact our relationship had on her. She gave me this letter and these cookies. It was like, wow, I had no idea. The connection can be there. We can get there with kids, but it's not always predictable.

She continued about later life implications when talking about fears early:

Well, I think it can affect them by them knowing that it's okay to talk about fears. There are fears. It's okay to talk about them. Somebody cares about mine. Perhaps when they get older, I should care about my own fears too, you know what I mean? Yeah. I can see a lot of benefit from it.

**Eve.** Eve was asked the question, "Can you offer predictions of how a parent or mentor may affect a child's later life by asking the question, 'What are your fears?'" Her reply was:

My prediction would be that if you're asking that question and the child has that connection with you to share with them, and then you're helping them figure it out, they're going to be better off in handling and coping and whatnot, later in life. For lack of a better word, resilient. More resilience later in their life.

**Rose.** Rose was asked, "Do you see research concerning the development of psychological resilience in children and communication practices of handling fears as a new domain?" Her reply:

I think so because we've gotten away from things that are so, I don't want to say primal, but even just basic building blocks for building resilience is interaction with others. Knowing how to problem solve. How to resolve conflict. I believe that children through play, that's their job. That's how they learn to work together. Just seeing even at the preschool level, things are so structured. There's not enough time I think for imaginative play for those interactions or even for adult facilitation in play environments.

The following section includes some recommendations.

### **Social Workers' Recommendations**

The following are suggestions by social workers from their experiences about how we can improve on developing resilience in young children using the concept of communication about thought fears of the child.

**Ann.** Ann stated, "A typical child shouldn't go deep into their fears to a stranger. You need to have a relationship." She talked of some children getting overmedicated before there was a good diagnosis and without a strategy for improvement. She suggested helping to keep a child's connection with family and spirituality.

**Beth.** Beth gave examples where being better in tuned to looking at a child's fears could have helped to better connect with the child by putting a framework on the situation. Beth suggests that asking the question, "What are your fears?" only can help a situation. She expounded on this idea by saying:

I think saying, "What are your fears," is like saying, "We all have them. What are yours? Mine are this. What are yours?" You know, almost opening up and making it like it's okay, because we all have this. I can't think of anything bad offhand. I feel like it would just be a good communication tool, a good openness, acknowledging feelings, putting it out on the table, saying, "Let's talk about it." It sounds like it's a good thing.

Beth suggested combining the idea of asking, "What are your fears?" with a book such as *Wilma Jean the Worry Machine*. She suggested that working with children in this way can be beneficial when trying to help children that bully. She predicted social change would occur if there was a continuous program for all a person's childhood. She qualified

this by saying that the emotions of a child must be dealt with first. Another suggestion was to do more to get parent involvement through at-home activities.

**Cora.** Cora suggested that there should be specific programs for handling fears. She stated that she previously worked with individuals through age 21 and that if there were proper programs at that time, then many problems may have been prevented. She stated that there is a need for new ideas. She offered the book, *When My Worries Get Too Big*, as an example of a tool that may be used when developing new programs. About children and their fears, she stated:

Well, I think it can affect them by them knowing that it's okay to talk about fears. There are fears. It's okay to talk about them. Somebody cares about mine. Perhaps when they get older, I should care about my own fears too, you know what I mean? Yeah. I can see a lot of benefit from it.

In talking about this study, Cora ended with, " I think it's exciting and I think it's definitely worthwhile, what you're doing. It would definitely be helpful, I think. Not just to schools and social workers, but to the mental health profession, families, and parenting."

**Eve.** Eve talked about helping children handle their thought fears, but she stated that there does not exist any specific programs for it. She talked about other people besides the social worker that the child could connect with to help with the handling of fears and the need for a "set system" to help a child handle the thought fears. She also cautioned that emotions are physical and must be under control before any deep

conversation can take place. Eve offered a suggestion about mentoring based on a personal story:

There still needs to be that connectedness. I think every little person needs to find someone... My son's friend, he had supportive family, there was therapeutic intervention, there was a lot of things happening. He and my son had a great connection, but still the depression, the medical part, was it, but I think that every little person deserves that, having somebody they can count on, they can trust, they can go to with anything. It's hard, but mentoring in the schools, and it's funny you're using the word mentoring, because I was talking with my administrator, we really need to look at developing a mentoring type program within the building, whether that's an adult to kid, or a kid to kid, which is ... But we need something where kids have that chance to connect. Right now, it's for the majority, it's the classroom of 25 to whatever, and the teacher, and that's ... How does a teacher find that relationship when you're trying to hit that many?

**Rose.** Rose suggested a need for having more one-on-one face time with each child and breaking the cycles where victims later become the offenders. The idea of being able to handle one's fears can pay off later in life. Rose offered the example, "I think sometimes when we hold onto those fears, we start building walls that we don't even realize." She added that walls can hurt relationships. Rose stated that in EC things are moving in the wrong direction:

Even in kindergarten, there's such a push for the literacy and full-time kindergarten to the point I don't even see them making time for recess even

though they're there for a whole day. Teachers are given these standards that they're trying to make every child meet, and probably losing sight of their individual needs to try to get them to have certain scores. It's just primal, having that ability to be able to play and express and interact is important...

Eve stated that research concerning the development of psychological resilience in children and communication practices of handling fears need further study. All the participants recognized a need for further study regarding the development of resilience in EC and discussing the use of the concept of handling thought fears would be a possibility.

### **Evidence of Trustworthiness**

Credibility is a measure of how much a study approaches reality (Merriam & Tisdell, 2016). In my attempt to approach reality, I conducted two interviews with each social worker with the opportunity of reflection between. My goal in this process was to dig deep into the thoughts of each participant. Having two interview sessions also enabled me to confirm emergent findings by comparing responses of a social worker between the first and second round as well as comparing responses between different social workers. This is a form of triangulation and took place as the data were analyzed from the first round of interviews and questions were formed for the second round of interviews. After completion of the second round of interviews and with both rounds of data analyses underway, I performed a member checking procedure as described by Hatch (2002, p. 188) providing further validation for participants' responses. Each social worker's comments that contributed to the emergent themes were summarized and

compiled into individual lists of at least 20 items. I emailed each social worker their respective list of items associated with the emergent themes. Responses came back within one week from each of the five social workers that they were unconditionally in agreement with each item on their list.

Transferability is a measure of how the findings of one study can be transferred to other situations (Merriam & Tisdell, 2016). I used a small sample of five participants and used emerging ideas from social workers to be used as seeds for more research. The social workers were from five suburban school districts. I attempted to provide readers with enough details about the responses of the participants so that they can decide on transferability per their situation as described by Merriam and Tisdell (2016).

Dependability refers to adequate tracking procedures to see how the data were collected and interpreted (Lodico, Spaulding, & Voegtle, 2010). I offered a detailed explanation of how all data were collected, transcribed, checked, and analyzed. This study and dissertation document were reviewed by the faculty advisors, the IRB, and the Walden University Research Review.

Confirmability refers to the ability to have this study reproduced (Miles & Huberman, 1994). This has to do with the handling biases of the researcher. I took steps to mitigate the problem of my biases affecting this study. I kept a list of my possible biases at-hand during the interview and analysis processes to help with self-awareness during the study. The social workers were given time and opportunity to reflect between interviews, and they offered no additional statements. No one contacted me, and not one sent me any narratives or questions. The member checking procedure asking the social

workers to confirm my initial interpretations was performed after the completion of the second round of interviews and with both rounds of data analyses underway. Since there were no criticism or comments concerning any parts of the initial categories or codes, I hope that no researcher bias was evident. An inductive and deductive process was used to form questions for the second round of interviews that helped to clarify conceptual definitions. Being aware of my biases throughout the study, having no apparent biases surface between interviews or during the second interview, and the member checking results confirmed a degree of objectivity in the findings.

### **Summary**

The five social workers each participated in two 1-hour interview sessions in quiet and private locations. The interview questions given in the first round concerned their general interpretation of the development of resilience in EC. In the second round, there was more of a specific focus concerning resilience as a capacity using the idea of fears as thoughts relating to the works of Gopnik, Meltzoff, and Kuhl (1999) and O'Neill and Gopnik (1991). My goals were to: (a) obtain the social workers' interpretations of how resilience is a factor in the life of a student in an early childhood setting, (b) examine their perspectives on what is being done and should be done in schools to develop resilience in the individual child, and (c) explore their thoughts of how the development of resilience may influence the future of a child. The responses from the second round of interviews helped me to better satisfy my goals. The questions in the second round were developed to address the purpose of this study more deeply by exploring the experiences of the participants regarding fears of children as thoughts.



The responses to the four original research questions, as a compilation of the two rounds of interviews, were addressed as follows: In the first round of interviews, the SWs talked about existing SEL programs in which they had experienced and how they might apply to resilience in young children. In the second round, the SWs expressed that while current programs did not specifically deal with psychological resilience, children's handling of their thought fears was a worthwhile basis for discussion. In many cases, the SWs themselves chose to use the conceptual approach of handling thought fears as the basis for discussion or for use in offering examples about successes and challenges that they encountered. The social workers had limited experience in observing the young children who they had come in contact compared to the outcomes of those children in later life. The participants expressed that they could connect with some children and speculated on the benefits that children may gain from more help with handling their fears early in life. The SWs agreed that the topic of developing resilience is important and more research needs to be done to help identify strategies that are effective.

I used member checking and a list of my biases during the interviews to help reduce the influences from my life's experiences associated with my biases related to the importance of resilience for young children and for their later lives. The results of the member checking procedure were that the social workers had no suggestions or recommendations for changing my initial interpretations of their responses.

In Chapter 5 the implications of the findings are organized in the conceptual framework. Interpretations of the finding are accomplished using the IPA format for study. A discussion follows with recommendations for further research on the topic of

developing resilience in young children. Implications for social change are offered in the conclusions.

## Chapter 5: Discussion, Conclusion, and Recommendations

The purpose of this qualitative study was to explore the lived experiences and self-reported interpretations of social workers in the local early childhood settings concerning the development of resilience in children. I organized this study in a manner that is consistent with the interpretive phenomenological analysis (IPA) approach to allow future researchers to build upon this work. My goals became three-fold to: (a) obtain social worker participants' interpretations of how resilience affects the lives of students in an EC setting, (b) examine their perspectives on what is being done and what should be done in schools to develop resilience in individual children, and (c) explore their thoughts of how the development of resilience may influence the future of children.

The nature of an IPA study according to Smith, Flowers, and Larkin (2009) is the building of an understanding of how individuals view their daily lives. In this study, I sought to gain a better understanding of how five participants interpreted their experiences with resilience in the context of EC education. The phenomenon I studied was the development resilience as a capacity in young children.

In the first round of one-on-one interviews with social worker participants, I did not specify more about the concept of resilience beyond the notion of dealing well with adversity. The various ways that the participants described resilience in EC is consistent with the many definitions of resilience within the peer-reviewed literature (Fletcher & Sarkar, 2013). Having an open concept promoted considerable open discussion about the SWs experiences. Matyas and Pelling (2015) maintained that while resilience has become a popular concept internationally, the term itself remains an unfamiliar to some as there is

not a consistent definition in the literature. Lee and Cranford (2008) provided a historical perspective on the many definitions to show the wide variations. There continue to be many definitions of resilience and psychological resilience (Kapıkıran & Acun-Kapıkıran, 2016). I chose as the basis for this research the general definition of resilience as, “The capacity of individuals to cope successfully with significant change, adversity or risk” (Lee & Cranford, 2008, p. 213). For the first round of interviews, this definition was adequate because I could relate the responses to the phrase *capacity for resilience*. The participants described the programs and methods that they and their schools were using that may have been connected to the topic of resilience.

A challenge in the first round of interviews concerned the clarity of conceptual definitions when talking about the resilience of children. The SWs talked about emotions, social difficulties, and behavior as opposed to thoughts of the mind. I discovered that the peer-reviewed literature reflects this lack of clarity concerning the concept of resilience. In my literature review, I found different terms for resilience (resiliency) such as ego-resiliency (Dwiwardani et al., 2014), emotional and behavioral resilience (Floury, Midouhas, Joshi, & Tzavidis, 2015), motivational resilience (Pitzer & Skinner, 2017) and emotional resilience (Yuzheng, Wei, & Fei, 2016; Turan et al., 2015). I found emotional resilience to be an elusive phrase because of the lack of agreement of the term *emotion* in psychology (Eckman, 2015). As an example, Aburn, Gott, and Hoare (2016) researched 100 articles in the context of nursing and concluded that there is no universal definition for resilience and that further exploratory research is needed to develop a construct that

would fit. Considering the SWs responses using the open definition of resilience found in Chapter 1, the key findings from the first round of interviews were:

- the programs and strategies used by the schools and the social workers did not directly address the development of resilience according to the general definition,
- academics were taking priority over social and emotional learning and social workers were having less one-on-one social contact with EC students,
- there is a need to have adults better connect one-on-one with children; instead of implementing counseling and mentoring exclusively to encourage or check academic performance,
- there is a need to improve communication between various levels of education that could help determine what outcomes occur in children throughout their development, and
- there is a need to have more clarity when using the term resilience.

After interpreting the responses from the first round of interviews, I tried in the second round to gain more conceptual clarity concerning the concept of resilience.

For the second round of interviews, I asked questions based on responses from the first round. To allow for more of a focus on resilience as a capacity as stated in the selected definition (Lee & Cranford, 2008), I attempted to frame "fears" of students as thoughts. My inspiration for the types of questions used (See Appendix C) came from the comments made by the participants in the first round of interviews about the fears of children as thoughts. Beth, in the first round of interviews, gave examples of children's thought fears such as not making high grades, making a mistake in class, and

encountering a bully. Cora stated that she never read any literature on handling fears as thoughts and stated that, “There's a lot of fears that kids have and we are not set up to handle them.” Eve said, “We have to learn to handle our thoughts.” Rose talked about handling “psychological fears.”

My decision to approach psychological resilience as a capacity to handle thought fears aligns with the work of O'Neill and Gopnik (1991), who presented concepts related to children's abilities to understand their thoughts. Meltzoff and Kuhl (1999) and Taket, Nolan, and Stagnitti (2014) also informed my thinking and the second set of interview queries. In the second round, by using the concept of "thought fears," deep and rich discussions resulted. As the connection was made between resilience and the handling of fears as thoughts, the responses of the social workers indicated interest in deeper understandings of resilience and more work related to its development. The findings from the second round included

- promoting resilience in children is important and the idea of asking children questions about their fears as thoughts is not being used,
- caring adults who can connect with children on a deep level are vital,
- handling thought fears in EC will increase resilience capacity,
- increasing resilience capacity in EC might be important in later life,
- more programs and strategies are needed to promote the development of psychological resilience in EC.

I combined data from the first and second rounds of interviews to develop my overall interpretation of findings.

### **Interpretation of the Findings**

From a global perspective, the conceptual framework for this study was informed by Bronfenbrenner's (1977) work on how bioecological systems support an individual. Bronfenbrenner (1979) placed the individual at the center of the ecological system. When putting the child at the center of the ecological system, he stated examples of the effects of his defined subsystems on a child. In Bronfenbrenner's (1979) work, he talked about the microsystem as being the closest bioecological system to the child which would include immediate interaction of the child with teachers and parents. He described his work as "theoretical integration" (p. 11) describing and interrelating structures and processes that shape the course of human development. The second round of interviews in this study went inside the microsystem by not only studying adult-child relationships but also by examining the ability of children to understand their thoughts (O'Neill and Gopnik, 1991).

The importance of studying young children is highlighted in the work of Gopnik (2009) at the University of California at Berkeley. Researchers have confirmed the hypothesis that very young children have brains that are capable of high forms of reasoning (Gopnik, Meltzoff, & Kuhl, 1999). Furthermore, a child's early experiences influence behavior in later life (Gopnik, 2009). For this study, the most important aspects to consider were within the microsystem or the immediate setting (school and family) in which children live and grow through interpersonal relationships. Aspects of the other systems may be acknowledged as being factors, but the focus of this study was on the microsystem as interpreted by the experiences of the SWs. Conforming to the social

constructivist approach, the resilience elements as identified by the Center on the Developing Child at Harvard University (2016a, 2016b) were used to analyze and interpret the findings. The following is an interpretation of the findings with comparisons to what has been found in the peer-reviewed literature in Chapter 2 and other peer-reviewed material. The four original research questions are used as headings for the interpretation.

**What programs and methods have elementary school social workers experienced that support developing resilience in young children?**

There were no programs identified by the participants as having a specific purpose of developing resilience in young children. The programs identified had features which may have contributed to resilience in children. Methods and strategies within these programs were selectively used by the social workers for intervention but were stated as having the possibly of fostering resilience. When I analyzed the data from the first round of interviews, the phenomenon of this study, "resilience," took on an inconsistent meaning. For example, the SWs stated that the handling of children's emotions was a prerequisite before deep communication could take place, and yet emotions were also talked about as being part of psychological resilience. Podsakoff, MacKenzie, and Podsakoff (2016) recommended better concept definitions in the organizational, behavioral, and social sciences in general. While there was no consensus concerning the concept of resilience in the first round of interviews, the SWs referenced and made connections using the terms "thoughts" and "fears." Using the frame of reference concerning the minds of young children offered by Gopnik, Meltzoff, and Kuhl (1999)



and O'Neill and Gopnik (1991), these terms were used to form questions for the second round of interviews. My interpretation of the responses the SWs gave to these second-round questions was that there exists a gap in having programs designed for developing resilience as a capacity of the mind specifically during EC.

**The social workers.** The responses of the social workers about current programs and strategies to promote resilience were (a) there exist current programs that contain strategies that could possibly promote psychological resilience in children, but these programs do not *directly* address developing resilience or handling thought fears and (b) there is value in asking children about their thought fears.

The SWs described their time spent with children as being mainly in group activities with a decreasing amount of one-on-one contact. The programs used were group orientated such as Positive Behavioral Interventions and Supports (PBIS) and The Devereux Student Strengths Assessment (DESSA). In these and other programs and strategies that were described, children were offered guidance to cope with specific situations. These programs were described as a combination of social, emotional, and behavioral techniques. Beth offered examples of the value of SEL programs in which she was familiar, "They're building relationships, they're gaining friendships, they're happy to come to school." There was nothing stated by the participants that directly involved developing techniques for the intrinsic capacity for resilience. For example, Eve stated, "I feel that the programs that I talk about are more addressing that emotional part, not that thought part." Social workers implied that children putting "tools in their toolbox" may

possibly be a benefit leading toward positive consequences concerning resilience later in life, but they did not cite evidence or give concrete examples that this was happening.

There was no mention by the SWs of any program or strategy that clearly defined how the development of resilience in children was to take place. Suggestions were made by the SWs that had to do with parents letting their children struggle at times to learn how to cope, face adversity, and work things out by themselves. The mentoring programs in the schools were not intended to engage in deep conversation with children but were meant to monitor and encourage academic performance. The concept of developing psychological resilience for prevention was remote while attempts to handle physical emotions was a commonplace occurrence.

There were no programs identified that were specifically designed to help children handle their thought fears. For example, Eve recognized that bullying behavior has origin in thoughts; and the thought fears of the bullying children should be delved into. However, when asked about addressing thought fears, she stated, "The programs that I use are more addressing that emotional part, not that thought part." In the one-on-one sessions with children, SWs were more engaged in controlling emotions and promoting proper behavior so that a child would fit into the academic environment. The SWs were not aware of a type of strategy to handle thought fears or any research that suggested it. Anxiety is an issue in the local school districts (C. Williams, personal communication, February 4, 2016) and is directly connected to fears of the mind (Koca-Atabey & Oner-Ozkan, 2014), yet according to the SWs, this connection is not addressed. The SWs suggested further inquiry be done that connects problems with thought fears.

When asked about exploring the thought fears of children, Cora commented, "Yeah, I see a lot of benefit from it." Eve talked about connecting with "bullies" about handling their thought fears. She said, "Why wouldn't we try to delve into that?" Overall, the SWs were interested in having research-based programs and strategies that promote psychological resilience in the context of handling thought fears.

**The literature.** I examined the peer-reviewed literature which cited articles that pertain to what I categorized as "intrinsically" based programs concerning developing resilience. I identified programs to be intrinsic in that they more focused on the psychological aspects of resilience of the individual child that might increase resilience capacity within the child. I attempted to locate articles that described programs that dealt with the working of the child's mind. Most programs were extrinsically based by imposing intervention techniques upon the child to change behavior and handle emotions.

Bak et al. (2015) studied the Resilience Program that originated in Denmark in 2007-2009 and is currently being implemented in at least 5 European countries. It is an online training program for instructors who teach adolescents and younger children involving developing resilience by understanding one's mental states. The Resilience Program must do with the functioning of the brain by having an awareness of how the brain organizes thoughts. The Resilience Program has influenced the Friends for Life Program that is being used in Australia and recently other countries. Iizuka, Barrett, Gillies, Cook, and Marinovic (2015) studied the Friends for Life Program for teacher development and the benefits that it has on the successful FRIENDS program for students. The FRIENDS program is an example of a program, while initially set up for

intervention for needy Australian children, has become somewhat intrinsic in nature by using techniques to increase resilience capacity in at-risk children.

The review of literature that was designed to gain insight into programs that promote resilience in EC did not refer to any programs that the SWs stated as being currently used in the SWs' school districts. This is even though the more intense the psychological programs are in EC, the better patterns of behavior ensue which are considered to have positive outcomes in later life (Schindler et al., 2015). I did not locate many examples of programs in the literature that incorporated intrinsic methods of developing resilience into child development. Found were two programs used in the United States that appeared to be somewhat intrinsic in nature. Petty (2014) listed 10 ways to foster resilience in young children. She described an intrinsic process whereby children talk about their feelings. Henderson (2013) told her story of being raised in an abusive home with enough resilience to handle the situation. She credits her resilience to her childhood school experiences. She listed "Sixteen Internal Protective Factors that Foster Resilience" (p. 27) as part of a resilience program for children. These programs and strategies were not mentioned by the SWs as being a part of their school district's agenda.

The literature review is parallel in nature to the interpretations of the SWs. The literature offers few programs and techniques in the United States which are designed *specifically* to develop psychological resilience in EC as a preventative method. The concepts of handling fears as thoughts and developing psychological resilience as a

capacity in EC are not being used in the SWs' school districts and are not specifically found in the literature in the context of prevention in EC.

**What successes and challenges have the social workers experienced regarding the development of resilience in young children?**

The social workers offered examples of what they interpreted as successes and challenges in their EC experiences. The social workers in one-on-one experiences with young children were most often in an intervention mode with resilience being taken as coping with adversity. The SWs did not include navigating and negotiating for *general* well-being as described by Spencer (2015). This study explored the SWs experiences with the development of resilience as an internal capacity while examining processes for prevention. I interpreted the words and convictions of the SWs to gain insight into the direct interaction between a child and the people who come in contact with the child, such as parents, teachers, and social workers using Bronfenbrenner's (1977) concept of the microsystem.

**The social workers' challenges.** The participants offered concerns and challenges when working with children to intrinsically develop resilience:

- The diminishing one-on-one time with students,
- the lack of time to "connect" with children,
- the requirement of first handling the emotions of a child takes time,
- not being able to figure out core thought fears behind an emotion,
- not being in a position to ask intrinsic questions such as, "What are your fears?",
- new fears of children such as possible family deportation exist,

- parents want the *schools* to "straighten out" the kids,
- the fears of a child may have roots with the parents,
- inappropriately going into "dark places" with students,
- being able to communicate with children only when age appropriate,
- children's lack of understanding that thought fears can be positive,
- minimal contact with parents, and
- a lack of research-based strategies and programs to help children develop resilience.

**The social workers' successes.** The SWs offered successes in their experiences with young children:

- Connecting and communicating with children has led to positive outcomes,
- group work that gets into children's thoughts has led to some child self-actualization,
- children's thought fears have on occasion come out and are a "release" for the child,
- when emotions are settled down, then core fears have sometimes surfaced,
- many children have shown the need to talk deeply,
- there has been more time allotted in classrooms for SEL, and
- successes have come by having children "handle their fears."

Connecting with children in an adult-child relationship was a common thread throughout the interviews. Ann said that "close connecting" with a child is always a first step. Cora listed the virtues for having a connecting adult. Eve declared, "Every child

should have a person to connect with." Beth talked about promoting deep child-adult relationships. Rose stated, "Relationship is the foundation for all of our work."

**The literature.** The development of psychological resilience in EC is not a well-defined topic (Fletcher & Sarkar, 2013; Masten, 2014; Matyas & Pelling, 2015). While arguments are being presented that resilience studies should focus on the forces that affect the child, a child's inner capacity for resilience as being a developmental process is not being addressed (Unger, Ghazinour, & Richter, 2013). There is a general concept in the literature that communication between social workers and children can be improved (Liebenberg, Ungar, & Ikeda, 2015; Ruch, 2014; Wilkins, 2015). For future studies, the work of Beleslin (2014) can be taken into consideration for his opinions that children should not only be observed and investigated, but communication should be developed between the researcher and the child to find more deeply what is on the child's mind.

### **How do social workers perceive the development of resilience in young children as an influence in later life?**

**The SWs.** The social workers' interpretations from their experiences were that the SEL programs that were being administered and the intervention processes in which they were involved had positive influences on children's later lives. They wanted a better feedback system with the junior highs and high schools so that they could better gauge the effectiveness of what was being implemented. Ann's belief was that what is done in EC may "change the trajectory of a child's life." When engaged specifically on the topic of psychological resilience, the overall participant consensus was when done appropriately, having children "release the fears from their heads" is a positive for the

child and can lead to better outcomes later in the children's lives. The SWs agree that there needs to be more research on this subject.

**The literature.** It is important to address individual socio-emotional needs in EC (Barrett, Cooper, & Teoh, 2014; Benard, 2004; Copple & Bredekamp, 2009; Elias, 2014; Gopnik, 2009; Masten, 2014). It has been explained that social ills have roots in EC (Bak et al., 2015; Elias, 2014; Goldstein & Brooks, 2013; Hu, Zhang, & Yang, 2015; Matyas & Pelling, 2015; Shern, Blanch, & Steverman, 2016). Resilience gives children an ability to handle toxic stress and can lead to more productive lives (NSCDC, 2015).

**Preventative programs that influence children's later life.** The SWs and the review of literature reflect the need to develop resilience in young children. However, local school districts and state mandates make no reference to the development of resilience in young children (SBE, 2016a; SBE, 2016c; School District AB, 2016a). Hu et al. (2015) concluded that future research should pay more attention to children for causes of later depression. Their research supports an argument for the creation of socioemotional preventive programs. Douglass (2016) stated that a change in approach is needed beginning in EC education that will positively influence social change in the long term. The inability to have a solid framework for psychological resilience and the lack of attention to resilience factors has contributed to a gap in local EC educational practice.

### **What are the social workers' recommendations for future practice?**

I used a social constructivist approach for this study in which the phenomenon concerning the "development of psychological resilience" was studied as a complex whole as suggested by Lodico, Spaulding, and Voegtle (2010). With the acceptance that



multiple realities may exist, the working relationship between the participant and the interviewer was critical. Having a positive relationship allowed the SWs to be open and candid in their recommendations for future practice. My interpretation of the responses of the social workers was that they wanted change. The SWs had a common desire of wanting more information about new possible strategies for prevention together with supporting research. After being asked at the end of the second interview if there was anything to add, Cora responded, "No. I think it's exciting and I think it's definitely worthwhile what you are doing (researching resilience). It would definitely be helpful, I think. Not just to schools and social workers, but to the mental health profession and families, parenting." The following are examples of specific suggestions by the participants.

The five SWs demonstrated consistency in that more should be done to investigate the thought fears of children and ways to guide children to handle those fears. Ann offered an example by saying, "Helping a child with their fears may be a way to get the fears from seeing bad things on television out." Beth stated, "More should be done to help children handle their fears." Cora agreed, "There are fears. . . It's okay to talk about them." Eve said, "Helping a child to handle fears now may mean better coping later." Rose cautioned, "I think sometimes when we hold onto those fears, we start building walls that we don't even realize."

Beth and Cora suggested that researchers and educators investigate what they each named as "healthy fears." In expressing her concern for children being sexually abused by their siblings, Cora expressed the need for ways to instill fears in children not

to hurt others. She stated that children should be saying, "Whoa, I can't do that. I could be hurting somebody." Ann said, "Fears can protect, like walking down a dark street." Beth said, "Fears can motivate, like in studying to get good grades."

The community of practice concept was brought up in relation to the development of psychological resilience. Rose expressed the opinion that the parents were "the first line of defense." The social workers expressed that some parents are not available, and it is important that other adults become involved and connect with children. The desired attributes as stated by the SWs for these involved community members were rapport, trust, honesty, caring, patience, being passionate, not being judgmental, being available, being present, having face-to-face contact, and being able to actively listen.

Mentoring was part of the school programs for four of the social workers and merits further research. Participants expressed that mentors could be valuable in helping children to develop resilience by having some of the qualities listed in the last paragraph. However, the mentoring programs used in the respective schools were described as focused on academic performance and mentors were not trained to caringly explore the thoughts of children. The SWs believed in the idea of *connection* with the child. Eve stated, "My prediction would be. . . When getting a connection with you to share with them, they're going to be better off in handling and coping." Rose gave an example of "relationships" helping in handling fears. She said, "Whatever the fears are, I think it is important to identify them." Ann stated, "Sometimes there are children that it seems like nobody can connect with. That's always really sad." Masten (2014) suggested that schools promote mentoring to foster resilience capacity in children.

There was some cautionary advice given by the SWs for ways to promote the development of resilience with the idea of handling thought fears. Cora asked, "Are we introducing something too soon?" Ann stated, "A typical child shouldn't go deep into their fears with a stranger." Beth warned that children in EC may be too young to talk about fears. Eve stated that emotions must be under control before there is deep communication. Cora offered advice that more studies be done to explain when and how to *introduce* healthy fears to children for the development of psychological resilience.

### **Limitations of the Study**

The five SWs selected for this study met the original criteria. They were currently employed as a social worker in a local suburban school district. They each had from 15 to 30 years of experience as a social worker which exceeded the required minimum of six years and were currently involved at least partially in EC (preschool to grade 3). They represented five different school districts in similar but somewhat diverse socio-economic regions. The homogeneous group of five SWs is typical for an IPA study because it allows for a greater depth of study (Smith et al., 2009). Although there were two interviews per SW, the small number of participants limits the transferability to other contexts outside the bounds of this study.

Limitations to the methodology were related to data collection. The only data used for analysis during this IPA study were generated from a two-round interview process for each of the five SWs and correspondence with one SW between interviews. The member check which was done after the interviews offered no additional data except the confirmation that the SWs agreed with my summary of their responses. I was the sole

researcher which entailed being the sole interviewer. My experiences in mentoring children and counseling adults enabled me to gain a rapport with the social workers and obtain quality responses about their lived experiences through active listening. A limitation to the study came from my lack of experience as an IPA researcher with the possibility of leading the participants in a certain direction. An example would be transferring my enthusiasm toward having further studies done on the development of resilience in children could have carried over to the SWs and affected their responses.

Another limitation is that it is left to the reader of this study to understand the transformation from the first round of interviews to the questions for the second round. As the sole researcher, I was responsible for developing a second set of interview questions derived from the social workers' responses from the first round of interviews. In the participants' responses and the literature were various approaches to the concepts of resilience and psychological resilience (Fletcher & Sarkar, 2013; Kapıkıran & Acun-Kapıkıran, 2016; Lee & Cranford, 2008). For the second round of interviews, the concept of handling thought fears developed when writing the new set of questions. A limitation of this study is that it is left up to the reader to process the transition from the first set of interviews to the questions formed for the second round when assessing the conclusions made from this study.

### **Recommendations for Further Research**

The participants expressed the need for research-based strategies that promote the capacity for resilience in young children. This need was further emphasized when the phrase "handling thought fears" evolved into the study. The SWs stated that there was a

need for further research and implied that the studies should involve psychological resilience. A single deductive framework that includes a set of conceptual definitions as suggested by (Gerring, 2012; Merton, 1958; Podsakoff, MacKenzie, & Podsakoff, 2016; Sartori, 1984) is preferred.

While there continues to be attention given to the general topic of resilience and how the brain physically functions, there is a gap when it comes to analyzing *preventative* methods by examining the *thoughts* of children. I suggest as a result from this study to go beyond, or perhaps better said *inside*, Bronfenbrenner's (1979) microsystem and to the concepts of O'Neill and Gopnik (1991) concerning children's abilities to understand their thoughts. Emotions and behavior can be looked at as separate entities as results of thoughts. Children's thoughts should be examined using the microsystem concept with forming healthy adult-child dyads. With a framework in place that considers the thoughts of a child, social change can be encouraged by studying how the development of psychological resilience in young children can be beneficial resulting in positive outcomes in later life.

With a solid deductive framework in place concerning developing psychological resilience in children, research can take place in the form of qualitative and later quantitative case studies of bounded systems. These systems could be homes, schools, or organizations. A question to examine would be, "How does the teacher, parent, or mentor perceive the success that they are having in the development of resilience in the children?" Such a study could be done at a public or private school where there has been known success in developing resilience in children. Other possibilities are parents of

homeschooled children or caretakers in care homes for children. The responses of children about their thoughts can be used as a measure for an independent variable.

Based on my experiences and the findings, I recommend more IPA studies. Studies can take place using children of different ages to express their thought fears and how they handle them. Interviewing children would require a solid framework with the combination of interviewing *at-stake* adults who could answer questions designed to be deeper in nature as desired in an IPA study. Interviewing parents, teachers, siblings, and clergy in an IPA designed study would yield data that would provide valuable information. For example, parents could address at-home activities as well as relationships with the schools that could influence the development of resilience in their child. I recommend specific IPA studies that would study the thought fears of children who bully and those exhibiting an elevated level of anxiety.

After multiple IPA studies, theories may develop that may describe the process of how children can develop resilience. A grounded theory approach could work with a large set of individuals who had common experiences with handling thought fears. The idea would be to generate a theory to explain the process used to handle thought fears. A recommendation would be to choose participants who have overcome trauma in their lives that include such things as living in a hostile environment. Exploration using other research techniques could follow that could lead to theory about gaining resilience.

I recommend for schools to do qualitative pilot studies of programs specifically designed to promote psychological resilience in children. Program evaluations can be done to determine the effectiveness of the programs. Also, mixed-method designs can be

used to incorporate a qualitative approach with quantitative data that may be used to convince administrators of the value of the programs.

My final recommendation would be a longitudinal study. A research-based resilience development program would be a prerequisite for the study. The program would have been determined effective in developing resilience for a circumstance, such as a mentoring system. An ideal situation for a longitudinal study would be a PreK through Grade 12 situation where there is reasonably expected low transiency so there can be a consistent sample over time. The effects of the program could be examined through the different grade levels. This study would be most effective for the United States if done in the United States. Studies completed in the United States would add to the quantity of United States literature concerning resilience in EC that would analyze *preventive* techniques customized for this society. Later, comparisons can be made to other countries. Australia is noted to be a leader in the development of resilience in young children (KidsMatter, 2012; KMEC, 2012) and with solid results from US studies, more collaboration can take place. An example of a collaborative longitudinal study pertaining to resilience in children was completed by researchers from Norway and Australia (Küenzlen, Bekkhus, Thorpe, & Borge, 2016).

### **Implications**

Positive social change would be supported by having improved conceptual clarity concerning the development of psychological resilience. Because of conceptual clarity, further studies specifically designed to promote psychological resilience beginning in EC can develop. By having universal definitions applicable for EC, such as "emotions" and

"psychological resilience," there can develop consistent communication and understanding between school personnel, family, community resources, and outside sources such as researchers. An implication for social change lies in having conceptual clarity that may lead to an understanding of how adults can be unified in their efforts to promote resilience in EC.

An implication from this study is that there is a need for parental and school programs that are specifically designed to deal with developing resilience beginning in EC. Local school districts may change EC focus by adopting preventive programs and strategies that focus on the thoughts of children rather than exclusively on emotions, behavior, and academic performance. Research-based preventive programs and strategies for schools and children's caretakers could curtail social ills such as teenage anxiety and depression. An example of a possible strategy would be to have caring adults connect with young children about their thought fears so that they might handle their fears *before* they exhibit bullying tendencies or anxiety. The implication for practice is designing mentoring that is safe for children and is effective. The type of mentoring suggested would not only encourage positive behavior, handling emotions, and academic performance; it would also promote the development of psychological resilience by having deep conversations with students based on active listening. School districts can investigate existing organizations that have been doing forms of mentoring by contacting national services such as the Center for Evidence-Based Mentoring in Boston, Massachusetts; National Mentoring Partnership; and Big Brothers Big Sisters of America.



The implication from this study is that to create social change that begins with young children requires caring adults who can be relied upon to follow a plan designed to promote resilience by guiding children to handle their thought fears. A parent or close family member would be the first choice to be an active listener to the child to develop deep communication. In schools, the adult may be an educator, counselor, social worker, or administrator. Schools can promote parental and adult programs that have corresponding goals that instruct how to guide children in developing resilience. This type of guidance can be considered mentoring. If parents are not available, then children may be paired with another caring adult. Mentoring programs can be developed by the schools that would have training for capable adults to actively listen to deeply connect with the children. The system would include a matching procedure to pair children with adult mentors. As part of the mentoring program, rules need to be developed that are designed to protect children from harm. Considerations to do no harm, such as the ability of the mentor and the capability of the child to handle the discussion with the mentor, must drive the creation of the rules to guide the mentoring system.

Implications for future practice at the local level can include using educators who are available and capable of mentoring using active listening techniques. This can be facilitated by establishing preparation programs for teachers and social workers and by providing continuing professional development for experienced personnel. Classroom activities may be developed as well as one-on-one experiences. Monitoring of participating classrooms to measure the types of improvement that occurs may lead to an increased interest in the methods, and this may result in a possible expansion of strategies

and programs. Parenting programs can create synergy between the family and the schools. Implications for families and the community may be decreases in problems such as anxiety and bullying. The family cycles of repeating social problems may be interrupted. The children may someday become parents who learned by example to be effective active listening mentors to their children to promote resilience.

### **Conclusions**

The conclusions I derived from this study reflect an alignment among the participating social workers' experiences, the peer-reviewed literature, and my experiences. Family and learning community members want children to be prepared for the challenges in life. The social workers were consistent in their responses when discussing a need for change by developing programs that specifically promote the capacity for resilience in early childhood. From my attempts to personally connect with individuals from age 2 to young adults through family, volunteering, and professional experiences, I concur with the social workers that more is needed to promote psychological resilience. My review of the literature confirmed this - beginning with a lack of consensus in basic terms and the present approach to resilience limited mainly to being extrinsic and intervening in nature. The emphasis on Bronfenbrenner's microsystem framework is warranted; however, delving into the thoughts of children by active listening may open new avenues for success. Instead of implementing programs designed to deal with emotions and behavior exclusively, my experiences are consistent with the social workers in that children's thinking needs to be explored and understood more deeply.

More research is needed concerning the development of psychological resilience in the following three areas: a need for conceptual clarity, a need for programs and strategies that are preventive, and a need to build deeper child-adult connections. Obtaining conceptual clarity as part of a deductive framework should be the basis for further research concerning the development of psychological resilience in young children. A conclusion from this study regarding conceptual clarity is that emotions can be considered apart from psychological resilience, and the phrase that can be used is "handling thought fears."

The social workers did not identify any existing programs designed to promote psychological resilience for children. There was agreement that programs can be designed to use the concept of psychological resilience to help children cope later in life with the anticipation of mitigating many societal ills. Research and programming that stress prevention are needed. An example of a preventive program would be to guide children to handle their thought fears early, which may then prevent the tendency to exhibit bullying behavior or anxiety.

To promote psychological resilience in early childhood, there must be a connection made between a child and a caring adult. When available, ideally the adult would be a parent or close family member. When parents are not available, then networks of mentoring that promote close connecting with children need to be implemented. The requirements for connecting to children to promote psychological resilience must be part of the research. Possible dangers when introducing the concept of thought fears to children must be acknowledged. A community approach is desired as the best

environment for the child, but it is in deep one-on-one communication with a child where the development of psychological resilience can best take place.

## References

- Aburn, G., Gott, M., & Hoare, K. (2016). What is resilience? An integrative review of the empirical literature. *Journal of Advanced Nursing*, 72(5), 980-1000.  
doi:10.1111/jan.12888
- Aisbett, D. L., Boyd, C. P., Francis, K. J., Newnham, K., & Newnham, K. (2007). Understanding barriers to mental health service utilization for adolescents in rural Australia. *Rural and Remote Health*, 7(1), 624. Retrieved from <http://www.rrh.org.au/Articles/subviewnew.asp?ArticleID=624>
- American Psychological Association. (2014). *The road to resilience*. Washington, DC: Author. Retrieved from <http://www.apa.org/helpcenter/road-resilience.aspx>
- Anticich, S. A., Barrett, P. M., Gillies, R., & Silverman, W. (2012). Recent advances in intervention for early childhood anxiety. *Australian Journal of Guidance & Counselling*, 22(2), 157-172. doi:10.1017/jgc.2012.24
- Anticich, S. A., Barrett, P. M., Silverman, W., Lacherez, P., & Gillies, R. (2013). The prevention of childhood anxiety and promotion of resilience among preschool aged children: A universal school based trial. *Advances in School Mental Health Promotion*, 6, 93–121. doi:10.1080/1754730X.2013.784616
- Askill-Williams, H. W., & Lawson, M. J. (2013). Teachers' knowledge and confidence for promoting positive mental health in primary school communities. *Asia-Pacific Journal of Teacher Education*, 41(2), 126-143.  
doi:10.1080/1359866X.2013.777023

- Bak, P. L., Midgley, N., Zhu, J. L., Wistoft, K., Obel, C., Stewart, T. C., & Blasi, V. (2015). The resilience program: Preliminary evaluation of a mentalization-based education program. *Frontiers in Psychology, 6*(1), 1-6.  
doi:10.3389/fpsyg.2015.0075
- Barrett, P.M., Cooper, M., & Teoh, A.B. H. (2014). When time is of the essence: A rationale for 'earlier' early intervention. *Journal of Psychological Abnormalities in Children, 3*, 133–140. doi:10.4172/2329-9525.1000133
- Barrett, P. M., Fisak, B., & Cooper, M. (2015). The treatment of anxiety in young children: Results of an open trial of the Fun Friends program. *Behaviour Change, 32*(4), 231-242. doi:10.1017/bec.2015.12
- Baumann, A. A., Rodríguez, M. D., Amador, N. G., Forgatch, M. S., & Parra-Cardona, J. R. (2014). Parent management training, Oregon model (PMTOTM) in Mexico City: Integrating cultural adaptation activities in an implementation model. *Clinical Psychology: Science and Practice, 21*(1), 32-47. doi:10.1111/cpsp.12059
- Beleslin, T. P. (2014). Play in research with children. *Croatian Journal of Education/Hrvatski Casopis Za Odgoj I Obrazovanje, 16*, 253-266. Retrieved from <http://hrcak.srce.hr/117846>
- Benard, B. (2003). Turnaround teachers and schools. In B. Williams (Ed.), *Closing the achievement gap: A vision for changing beliefs and practices* (2nd ed., pp. 115-137). Alexandria, VA: Association for Supervision and Curriculum Development.
- Benard, B. (2004). *Resiliency: What we have learned*. San Francisco, CA: WestEd.

- Bishop, M., Rosenstein, D., Bakelaar, S., & Seedat, S. (2014). An analysis of early developmental trauma in social anxiety disorder and posttraumatic stress disorder. *Annals of General Psychiatry, 13*(16). Retrieved from <http://doi.org/10.1186/1744-859X-13-16>
- Block, R. W. (2016). All adults once were children. *Journal of Pediatric Surgery, 51*(1), 23-27. Retrieved from <http://dx.doi.org/10.1016/j.jpedsurg.2015.10.020>
- Bogdan, R. C., & Biklen S. K., (2007). *Qualitative research for education: An introduction to theories and methods*. Boston, MA: Allyn & Bacon.
- Bronfenbrenner, U. (1977) Toward an experimental ecology of human development. *American Psychologist, 32*, 513–531. Retrieved from <http://dx.doi.org/10.1037/0003-066X.32.7.513>
- Bronfenbrenner, U. (1979) *The ecology of human development: Experiment by nature and design*. Cambridge, MA: Harvard University Press.
- Brownlee, K., Rawana, J., Franks, J., Harper, J., Bajwa, J., O'Brien, E., & Clarkson, A. (2013). A systematic review of strengths and resilience outcome literature relevant to children and adolescents. *Child & Adolescent Social Work Journal, 30*(5), 435-459. doi:10.1007/s10560-013-0301-9
- Bushman, B. J., Gollwitzer, M., & Cruz, C. (2015). There is broad consensus: Media researchers agree that violent media increase aggression in children, and pediatricians and parents concur. *Psychology of Popular Media Culture, 4*(3), 200-214. doi:10.1037/ppm0000046

- Centers for Disease Control. (2013). *Ten leading causes of death by age group, United States -2013*. Retrieved from [http://www.cdc.gov/injury/wisqars/pdf/leading\\_causes\\_of\\_death\\_by\\_age\\_group\\_2013-a.pdf](http://www.cdc.gov/injury/wisqars/pdf/leading_causes_of_death_by_age_group_2013-a.pdf)
- Center on the Developing Child at Harvard University. (2016a). *Building adult capabilities*. Retrieved from <http://developingchild.harvard.edu/innovation-application/key-concepts/adult-capabilities/>
- Center on the Developing Child at Harvard University. (2016b). *Resilience*. Retrieved from <http://developingchild.harvard.edu/science/key-concepts/resilience>
- Challen, A. R., Machin, S. J., & Gillham, J. E. (2014). The UK resilience programme: A school-based universal nonrandomized pragmatic controlled trial. *Journal of Consulting and Clinical Psychology, 82*(1), 75-89. doi:10.1037/a0034854
- Copple, C., & Bredekamp, S. (Eds.). (2009). *Developmentally appropriate practice in early childhood program: Serving children from birth through age 8* (3rd ed.). Washington, DC: National Association for the Education of Young Children.
- Cowen, E. L., Wyman, P. A., Work, W. C., & Parker, G. R. (1990). The Rochester child resilience project: Overview and summary of first year findings. *Development and Psychopathology, 2*(2), 193-212. doi:10.1017/S0954579400000705
- Creswell, J. W. (2012). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research (Laureate custom ed.)*. Boston, MA: Pearson Education.



- Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five approaches*. (3rd ed.). Thousand Oaks, CA: Sage Publications.
- Cutuli, J. J., Gillham, J. E., Chaplin, T. M., Reivich, K. J., Seligman, M. E., Gallop, R. J., . . . Freres, D. R. (2013). Preventing adolescents' externalizing and internalizing symptoms: Effects of the penn resiliency program. *International Journal of Emotional Education*, 5(2), 67-79. Retrieved from <http://www.um.edu.mt/cres/ijee>
- Douglass, A. (2016). Resilience in change: Positive perspectives on the dynamics of change in early childhood systems. *Journal of Early Childhood Research*, 14(2), 211. doi:10.1177/1476718X14555704
- Doutre, G., Green, R., & Knight-Elliott, A. (2013). Listening to the voices of young carers using interpretative phenomenological analysis and a strengths-based perspective. *Educational and Child Psychology*, 30(4), 30-43. Retrieved from <http://shop.bps.org.uk/publications/publication-by-series/educational-and-child-psychology/educational-child-psychology-vol-30-no-4-december-2013-strength-based-practice.html>
- Dwiwardani, C., Hill, P. C., Bollinger, R. A., Marks, L. E., Steele, J. R., Doolin, H. N., . . . Davis, D. E. (2014). Virtues develop from a secure base: Attachment and resilience as predictors of humility, gratitude, and forgiveness. *Journal of Psychology and Theology*, (1), 83-90. Retrieved from <http://journals.biola.edu/jpt/volumes/42/issues/1/articles/83>

- Eckman, P. (2015). What scientists who study emotion agree about. *Perspectives on Psychological Science, 11*(1), 31-34. doi:10.1177/1745691615596992
- Elias, M. J. (2014). Social-emotional skills can boost common core implementation. *Phi Delta Kappan, 96*(3), 58-62. doi:10.1177/0031721714557455
- Fletcher, D., & Sarkar, M. (2013). Psychological resilience: A review and critique of definitions, concepts, and theory. *European Psychologist, 18*(1), 12-23.  
doi:10.1027/1016-9040/a000124
- Flook, L., Goldberg, S. B., Pinger, L., & Davidson, R. J. (2015). Promoting prosocial behavior and self-regulatory skills in preschool children through a mindfulness-based kindness curriculum. *Developmental Psychology, 51*(1), 44-51.  
doi:10.1037/a0038256
- Flouri, E., Midouhas, E., Joshi, H., & Tzavidis, N. (2015). Emotional and behavioral resilience to multiple risk exposure in early life: the role of parenting. *European Child and Adolescent Psychiatry, 24*(7), 745-755. doi:10.1007/s00787-014-0619-7
- Fox, J., & Diab, P. (2015). An exploration of the perceptions and experiences of living with chronic anorexia nervosa while an inpatient on an eating disorders unit: An interpretative phenomenological analysis (IPA) study. *Journal of Health Psychology, 20*(1), 27-36. Retrieved from  
<http://dx.doi.org/10.1177/1359105313497526>
- Foxhall, K. (2014). AAP addresses adverse effects of toxic stress on children's health. *Contemporary Pediatrics, 31*(8), 12. Retrieved from <http://ow.ly/yhaaN>

Friedman, S. (2016, April 27). Teaching and learning with children's books[blog].

Retrieved from

[http://NAEYC%20Teaching%20and%20Learning%20With%20Children's%20Books%20\\_%20National%20Association%20for%20the%20Education%20of%20Young%20Children%20\\_%20NAEYC.html](http://NAEYC%20Teaching%20and%20Learning%20With%20Children's%20Books%20_%20National%20Association%20for%20the%20Education%20of%20Young%20Children%20_%20NAEYC.html)

Gerring, J. (2012). *Social science methodology: A unified framework (2nd ed.)*.

Cambridge, UK: Cambridge University Press.

Goh, S. S., Yamauchi, L. A., & Ratliffe, K. T. (2012). Educators' perspectives on instructional conversations in preschool settings. *Early Childhood Education Journal, 40*(5), 305-314. doi:10.1007/s10643-012-0518-9

Goldstein, S. & Brooks, R. B. (2013). Why study resilience. In S. Goldstein & R. B. Brooks, (Eds.), *Handbook of resilience in children* (pp. 3-14). New York: Springer.

Gopnik, A. (2009). *The philosophical baby*, New York, NY: Picador.

Gopnik, A. Meltzoff, A. N., & Kuhl, P.K. (1999). *The scientist in the crib: What early learning tells us about the mind*. New York, NY: Harper

Gray, L., & Lewis, L. (2015). *Public School Safety and Discipline: 2013–14 (NCES 2015-051)*. Retrieved from U.S. Department of Education, National Center for Education Statistics website: <http://nces.ed.gov/pubsearch>

Gribble, P. A., Cowen, E. L., Wyman, P. A., Work, W. C., Wannon, M., & Raoof, A. (1993). Parent and child views of parent-child relationship qualities and resilient

- outcomes among urban children. *Journal of Child Psychology and Psychiatry, and Allied Disciplines*, 34(4), 507-519. doi:10.1111/j.1469-7610.1993.tb01032.x
- Hatch, J. A. (2002). *Doing qualitative research in educational settings*. Albany, NY: State of New York University Press.
- Hefferon, K., & Gil-Rodriguez, E. (2011). Interpretative phenomenological analysis. *The Psychologist*, 24(10), 756-759. Retrieved from <http://thepsychologist.bps.org.uk/volume-24/edition-10/methods-interpretative-phenomenological-analysis>
- Henderson, N. (2013). Havens of resilience. *Educational Leadership*, 71(1), 22-27. Retrieved from <http://www.ascd.org/publications/educational-leadership/sept13/vol71/num01/Havens-of-Resilience.aspx>
- Hu, T., Zhang, D., & Yang, Z. (2015). The relationship between attributional style for negative outcomes and depression: A meta-analysis. *Journal of Social and Clinical Psychology*, 34(4), 304-321. doi:10.1521/jscp.2015.34.4.304
- Hua, M., Han, Z. R., & Zhou, R. (2015). Cognitive reappraisal in preschoolers: Neuropsychological evidence of emotion regulation from an ERP study. *Developmental Neuropsychology*, 40(5), 279-290. doi:10.1080/87565641.2015.1069827
- Huppert, F., & So, T. (2013). Flourishing across Europe: Application of a new conceptual framework for defining well-being. *Social Indicators Research*, 110(3), 837-861. doi:10.1007/s11205-011-9966-7

- Iizuka, C. A., Barrett, P. M., Gillies, R., Cook, C. R., & Marinovic, W. (2015). Preliminary evaluation of the friends for life program on students' and teachers' emotional states for a school in a low socio-economic status area. *Australian Journal of Teacher Education*, 40(3). doi:10.14221/ajte.2014v40n3.1
- Jefferis, T. C., & Theron, L. C. (2015). Community-based participatory video: Exploring and advocating for girls' resilience. *Perspectives in Education*, 33(4), 75-91. Retrieved from <http://www.perspectives-in-education.com>
- Kapıkıran, Ş. s., & Acun-Kapıkıran, N. n. (2016). Optimism and psychological resilience in relation to depressive symptoms in university students: Examining the mediating role of self-esteem. *Educational Sciences: Theory & Practice*, 16(6), 2087-2110. doi:10.12738/estp.2016.6.0107
- Kazdin, A. E., & Blase, S. L. (2011). Rebooting psychotherapy research and practice to reduce the burden of mental illness. *Perspectives on Psychological Science*, 6(1), 21–37. doi:10.1177/1745691610393527
- Khanlou, N., & Wray, R. (2014). A whole community approach toward child and youth resilience promotion: A review of resilience literature. *International Journal of Mental Health and Addiction*, 12(1), 64-79. doi:10.1007/s11469-013-9470-1
- KidsMatter. (2012). Successful schools start with healthy minds. Canberra: Commonwealth of Australia. Retrieved from <http://www.kidsmatter.edu.au/primary>

- KidsMatter Early Childhood (KMEC). (2012). Mental health matters in early childhood. Canberra: Commonwealth of Australia. Retrieved from <http://www.kidsmatter.edu.au/early-childhood>
- Koca-Atabey, M., & Oner-Ozkan, B. (2014). Loss Anxiety: An alternative explanation for the fundamental fears in human beings. *Death Studies*, 38(10), 662-671. Retrieved from <http://dx.doi.org/10.1080/07481187.2013.844748>
- Kress, J. S., & Elias, M. J. (2013). Consultation to support sustainability of social and emotional learning initiatives in schools. *Consulting Psychology Journal: Practice and Research*, 65(2), 149-163. doi:10.1037/a0032665
- Küenzlen, H., Bekkhus, M., Thorpe, K., & Borge, A. H. (2016). Potential traumatic events in early childhood and behavioral resilience: A longitudinal case control study. *European Journal of Developmental Psychology*, 13(3), 394-406. doi:10.1080/17405629.2016.1150174
- Lee, H. H., & Cranford, J. A. (2008). Does resilience moderate the associations between parental problem drinking and adolescents' internalizing and externalizing behaviours? A study of Korean adolescents. *Drug and Alcohol Dependence*, 96, 213–221. doi:10.1016/j.drugalcdep.2008.03.007
- Leipold, B., & Greve, W. (2009). Resilience: A conceptual bridge between coping and development. *European Psychologist*, 14, 40–50. doi:10.1027/1016-9040.14.1.40
- Li-Grining, C. P., & Durlak, J. A. (2014). The design and implementation of early childhood intervention programs: Informing efforts to address risk and promote

- resilience. *Journal of Prevention & Intervention in the Community*, 42(4), 243-247. doi:10.1080/10852352.2014.943640
- Liebenberg, L., Ungar, M., & Ikeda, J. (2015). Neo-Liberalism and responsabilisation in the discourse of social service workers. *British Journal of Social Work*, 45(3), 1006-1021. doi:10.1093/bjsw/bct172
- Lochman, J. E., Dishion, T. J., Powell, N. P., Boxmeyer, C. L., Qu, L., & Sallee, M. (2015). Evidence-based preventive intervention for preadolescent aggressive children: One-year outcomes following randomization to group versus individual delivery. *Journal of Consulting and Clinical Psychology*, 83(4), 728-735. doi:10.1037/ccp0000030
- Lodico, M., Spaulding, D. T., & Voegtle, K. H. (2010). *Methods in educational research: From theory to practice*. San Francisco, CA: John Wiley & Sons, Inc.
- Masten, A. S. (2014). *Ordinary magic: Resilience in development*. New York, NY: Guilford Press.
- Matyas, D., & Pelling, M. (2015). Positioning resilience for 2015: the role of resistance, incremental adjustment and transformation in disaster risk management policy. *Disasters*, 39s1-s18. doi:10.1111/disa.12107
- Merriam, S. B., & Tisdell, E. J. (2016). *Qualitative research: A guide to design and implementation*. San Francisco, CA: Jossey-Bass.
- Merton, R. K. (1958). *Social theory and social structure*. New York, NY: Free Press.
- Mészáros, J. (2014). Ferenczi's 'wise baby' phenomenon and resilience. *International Forum of Psychoanalysis*, 23(1), 3-10. doi:10.1080/0803706X.2013.773074

- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis*. Thousand Oaks, CA: Sage Publications.
- Miller, R. M., & Minton, C. B. (2016). Experiences learning interpersonal neurobiology: An interpretative phenomenological analysis. *Journal of Mental Health Counseling, 38*(1), 47-61. doi:10.17744/mehc.38.1.04
- Miller-Lewis, L. R., Searle, A. K., Sawyer, M. G., Baghurst, P. A., & Hedley, D. (2013). Resource factors for mental health resilience in early childhood: An analysis with multiple methodologies. *Child & Adolescent Psychiatry and Mental Health, 7*(1), 1-23. doi:10.1186/1753-2000-7-6
- Moustakas, C. (1994). *Phenomenological research methods*. New York, NY: Sage Publications, Inc.
- National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention; Division of Adolescent and School Health, Centers for Disease and Prevention. (2013). *YRBS: Trends in the prevalence of suicide-related behavior national 1991-2013*. Retrieved from [http://www.cdc.gov/healthyyouth/data/yrbs/pdf/trends/us\\_suicide\\_trend\\_yrbs.pdf](http://www.cdc.gov/healthyyouth/data/yrbs/pdf/trends/us_suicide_trend_yrbs.pdf)
- National Scientific Council on the Developing Child. (2004). *Children's emotional development is built into the architecture of their brains: Working Paper No. 2*. Retrieved from [www.developingchild.harvard.edu](http://www.developingchild.harvard.edu).
- National Scientific Council on the Developing Child. (2012). *Establishing a level foundation for life: Mental health begins in early childhood: Working paper No. 6. Updated edition*. Retrieved from <http://www.developingchild.harvard.edu>



- National Scientific Council on the Developing Child. (2015). *Supportive relationships and active skill building strengthen the foundations of resilience: Working paper No. 13*. Retrieved from <http://www.developingchild.harvard.edu>
- Nickerson, A. B., & Fishman, C. E. (2013). Promoting mental health and resilience through strength-based assessment in US schools. *Educational and Child Psychology, 30*(4), 7-17. Retrieved from <http://shop.bps.org.uk/catalogsearch/result/?q=Promoting+mental+health+and+resilience+through+strength-based+assessment+in+US+schools>
- Nixon, G., Evans, K., Grant Kalischuk, R., Solowoniuk, J., McCallum, K., & Hagen, B. (2013). Female gambling, trauma, and the not good enough self: An interpretative phenomenological analysis. *International Journal of Mental Health & Addiction, 11*(2), 214-231. doi:10.1007/s11469-012-9413-2
- Olmores, S. (2016). Inclusive and quality education for all. *YC: Young Children, 71*(1), 53. Retrieved from <http://www.naeyc.org/yc/>
- O'Neill, D. K., & Gopnik, A. (1991). Young children's ability to identify the sources of their beliefs. *Developmental Psychology, 27*(3), 390-97. Retrieved from <http://dx.doi.org/10.1037/0012-1649.27.3.390>
- Padilla-Walker, L. M., Coyne, S. M., Collier, K. M., & Nielson, M. G. (2015). Longitudinal relations between prosocial television content and adolescents' prosocial and aggressive behavior: The mediating role of empathic concern and self-regulation. *Developmental Psychology, 51*(9), 1317-1328. doi:10.1037/a0039488

- Petty, K. (2014). Ten ways to foster resilience in young children: Teaching kids to "bounce back". *Dimensions of Early Childhood*, 42(3), 35-39. Retrieved from [http://www.southernearlychildhood.org/upload/pdf/Dimensions\\_Vol42\\_3.pdf#page=37](http://www.southernearlychildhood.org/upload/pdf/Dimensions_Vol42_3.pdf#page=37)
- Pietkiewicz, I., & Smith, J. A. (2012). A practical guide to using interpretative phenomenological analysis in qualitative research psychology. *Czasopismo Psychologiczne Psychological Journal* 18(2), 361-369. doi:10.14691/CPJ.20.1.7
- Pitzer, J., & Skinner, E. (2017). Predictors of changes in students' motivational resilience over the school year: The roles of teacher support, self-appraisals, and emotional reactivity. *International Journal of Behavioral Development*, 41(1), 15-29. doi:10.1177/0165025416642051
- Podsakoff, P. M., MacKenzie, S. B., & Podsakoff, N. P. (2016). Recommendations for creating better concept definitions in the organizational, behavioral, and social sciences. *Organizational Research Methods*, 19(2), 159-203. doi:10.1177/1094428115624965
- Polanczyk, G.V., Salum, G.A., Sugaya, L.S., Caye, A., & Rohde, L.A. (2015). Annual research review: A meta-analysis of the worldwide prevalence of mental disorders in children and adolescents. *Journal of Child Psychology and Psychiatry*, 56, 345–365. doi:10.1111/jcpp.12381
- Prince-Embury, S. (2015). Assessing personal resiliency in school settings: The resiliency scales for children and adolescents. *Journal of Psychologists and Counsellors in Schools*, 25(1), 55-65. doi:10.1017/jgc.2014.22

- Reinke, W. M., Stormont, M., Herman, K. C., Puri, R., & Goel, N. (2011). Supporting children's mental health in schools: Teacher perceptions of needs, roles, and barriers. *School Psychology Quarterly, 26*(1), 1-13. doi:10.1037/a0022714
- Rodriguez, B. J. (2013). Test review for preschool-wide evaluation tool (PreSET) manual: Assessing universal program-wide positive behavior support in early childhood. *Journal of Psychoeducational Assessment, 31*(4), 418-422. doi:10.1177/0734282912462671
- Roffey, S. (2015). Becoming an agent of change for school and student well-being. *Educational and Child Psychology, 32*(1), 21-30. Retrieved from <http://www.sueroffey.com/wp-content/uploads/2014/02/2015-Becoming-an-Agent-of-Change-for-Wellbeing.pdf>
- Ruch, G. (2014). Helping children is a human process: Researching the challenges social workers face in communicating with children. *British Journal of Social Work, 44*(8), 2145-2162. doi:10.1093/bjsw/bct045
- Rutter, M. (1987). Psychosocial resilience and protective mechanisms. *American Journal of Orthopsychiatry, 57*, 316-331. doi:10.1111/j.1939-0025.1987.tb03541.x
- Rutter, M. (2013). Annual Research Review: Resilience - clinical implications. *Journal of Child Psychology & Psychiatry, 54*(4), 474. doi:10.1111/j.1469-7610.2012.02615.x
- Ryoo, J. H., Wang, C., & Swearer, S. M. (2015). Examination of the change in latent statuses in bullying behaviors across time. *School Psychology Quarterly, 30*(1), 105-122. doi:10.1037/spq0000082

- Saldaña, J. (2013). *The coding manual for qualitative researchers (2nd ed.)*. Thousand Oaks, CA: Sage Publications.
- Sankaranarayanan, A., & Cyclic, C. (2014). Resiliency training in Indian children: A pilot investigation of the Penn Resiliency Program. *International Journal of Environmental Research and Public Health*, *11*(4), 4125-4139.  
doi:10.3390/ijerph110404125
- Sartori, G. (1984). Guidelines for concept analysis. In G. Sartori (Ed.), *Social science concepts: A systematic analysis* (pp. 15-85). Beverly Hills, CA: Sage Publications.
- Saulsbury, A., Corden, M. E., Taylor-Crawford, K., Crawford, T. J., Johnson, M., Froemel, J., . . . Van Voorhees, B. W. (2013). Chicago urban resiliency building (CURB): An internet-based depression-prevention intervention for urban African-American and Latino adolescents. *Journal of Child and Family Studies*, *22*(1), 150-160. doi:10.1007/s10826-012-9627-8
- Schindler, H. S., Kholoptseva, J., Ohb, S. S., Yoshikawa, H., Duncand, G. J., Magnusone, K. A., & Shonkoff, J. P. (2015). Maximizing the potential of early childhood education to prevent externalizing behavior patterns: A meta-analysis. *Journal of School Psychology*, *53*(3), 243-263 Retrieved from <http://www.sciencedirect.com/science/article/pii/S0022440515000163>
- Schonert-Reichl, K. A., Oberle, E., Lawlor, M. S., Abbott, D., Thomson, K., Oberlander, T. F., & Diamond, A. (2015). Enhancing cognitive and social-emotional development through a simple-to-administer mindfulness based school program

for elementary school children: A randomized controlled trial. *Developmental Psychology*, 51(1), 52-66. doi:10.1037/a0038454

Schonfeld, D. J., Adams, R. E., Fredstrom, B. K., Weissberg, R. P., Gilman, R., Voyce, C., . . . Speese-Linehan, D. (2015). Cluster-randomized trial demonstrating impact on academic achievement of elementary social-emotional learning. *School Psychology Quarterly*, 30(3), 406-420. doi:10.1037/spq0000099.

School District. (2016a). *Board of Education Mission and Goals*. Retrieved from <http://sd54.org/board/files/2010/04/Mission-Vision-Commitments-and-Goals-English-7-1-151.pdf>

School District. (2016b). *PBIS*. Retrieved from [REDACTED]

Sherm, D. L., Blanch, A. K., & Steverman, S. M. (2016). Toxic stress, behavioral health, and the next major era in public health. *American Journal of Orthopsychiatry*, 86(2), 109-123. doi:10.1037/ort0000120

Sigmarsdóttir, M., & Guðmundsdóttir, E. V. (2013). Implementation of parent management training-Oregon model (PMTOTM) in Iceland: Building sustained fidelity. *Family Process*, 52(2), 216-227. doi:10.1111/j.1545-5300.2012.01421.x

Smith, J. A., Flowers P., & Larkin, M. (2009). *Interpretive phenomenological analysis: Theory, method, and research*. Thousand Oaks, CA: Sage Publications.

Smith, J. A. (2011). Evaluating the contribution of interpretative phenomenological analysis. *Health Psychology Review*, 5(1), 9-27.  
doi:10.1080/17437199.2010.510659

- Solivan, A. E., Wallace, M. E., Kaplan, K. C., & Harville, E. W. (2015). Use of a resiliency framework to examine pregnancy and birth outcomes among adolescents: A qualitative study. *The Journal of Collaborative Family Healthcare, 33*(4), 349-355. doi:10.1037/fsh0000141
- Southwick, S. M., Bonanno, G. A., Masten, A. S., Panter-Brick, C., & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology, 5*. doi:10.3402/ejpt.v5.25338
- Spencer, L. (2015). Psychological resilience. *Mid Yorks Medical Journal, 27-30*. Retrieved from [https://issuu.com/midyorksmesh/docs/my\\_medical\\_journal\\_summer\\_2015?e=0/30055614](https://issuu.com/midyorksmesh/docs/my_medical_journal_summer_2015?e=0/30055614)
- State Board of Education. (2016a). *Assessment*. Retrieved from [REDACTED]
- State Board of Education. (2016b). *Licensure*. Retrieved from [REDACTED]
- State Board of Education. (2016c). *Growth through learning: [REDACTED] performance evaluation*. Retrieved from [REDACTED]
- Stefan, C. A., & Miclea, M. (2014). Effectiveness of the social-emotional prevention program as a function of children's baseline risk status. *European Early Childhood Education Research Journal, 22*(1), 14-44. Retrieved from <http://dx.doi.org/10.1080/1350293X.2013.865359>

- Symeonides, R., & Childs, C. (2015). The personal experience of online learning: An interpretative phenomenological analysis. *Computers in Human Behavior, 51*, 539-545. doi:org.10.1016/j.chb.2015.05.015
- Taket, A. R., Nolan, A., & Stagnitti, K. (2014). Family strategies to support and develop resilience in early childhood. *Early Years: An International Journal of Research and Development, 34*(3), 289-300. doi:10.1080/09575146.2013.877421
- TEDx Talks. (2012, October 22). The return on investment in high-quality preschool: Larry Schweinhart at TEDxMiamiUniversity [Video file]. Retrieved from [http://www.youtube.com/watch?v=FB3\\_zMwHods](http://www.youtube.com/watch?v=FB3_zMwHods)
- TEDxTalks. (2014, February 4). Social and emotional learning: Trish Shaffer at TEDxUniversityofNevada [Video file]. Retrieved from <http://tedxtalks.ted.com/video/Social-And-Emotional-Learning-T>
- Torbrand, P., & Ellam-Dyson, V. (2015). The experience of cognitive behavioral group coaching with college students: An IPA study exploring its effectiveness. *International Coaching Psychology Review, 10*(1), 76-93. Retrieved from <http://www.bps.org.uk/publications/member-network-publications/member-publications/international-coaching-psychology-review>
- Turan, B., Foltz, C., Cavanagh, J. F., Alan Wallace, B., Cullen, M., Rosenberg, E. L., & ... Kemeny, M. E. (2015). Anticipatory sensitization to repeated stressors: The role of initial cortisol reactivity and meditation/emotion skills training. *Psychoneuroendocrinology, 52*, 229-238. doi:10.1016/j.psyneuen.2014.11.014

- Ungar, M. (2011). The social ecology of resilience: Addressing contextual and cultural ambiguity of a nascent construct. *American Journal of Orthopsychiatry*, *81*(1), 1-17. doi:10.1111/j.1939-0025.2010.01067.x
- Ungar, M. (2015). Practitioner review: Diagnosing childhood resilience - a systemic approach to the diagnosis of adaptation in adverse social and physical ecologies. *Journal of Child Psychology and Psychiatry*, *56*(1), 4-17. Retrieved from <http://dx.doi.org/10.1111/jcpp.12306>
- Ungar, M., Ghazinour, M., & Richter, J. (2013). Annual research review: What is resilience within the social ecology of human development? *Journal of Child Psychology and Psychiatry*, *54*(4), 348-366. doi:10.1111/jcpp.12025
- Van Manen, M. (1990). *Researching lived experiences*. Albany, NY: SUNY Press.
- Walrath, C., Garraza, L. G., Reid, H., Goldston, D. B., & McKeon, R. (2015). Impact of the Garrett Lee Smith youth suicide prevention program on suicide mortality. *American Journal of Public Health*, *105*(5), 986-993. doi:10.2105/AJPH.2014.302496
- Wang, J., Zhang, D., & Zimmerman, M. A. (2015). Resilience theory and its implications for Chinese adolescents. *Psychological Reports*, (2), 354. doi:10.2466/16.17.PR0.117c21z8
- Werner, E. E. (1993). Risk, resilience, and recovery: Perspectives from the Kauai longitudinal study. *Development and Psychopathology*, *5*, 503-515. Retrieved from <http://dx.doi.org/10.1017/S095457940000612X>



- Wilkins, D. (2015). Balancing risk and protective factors: How do social workers and social work managers analyze referrals that may indicate children are at risk of significant harm. *British Journal of Social Work*, (1), 395.  
doi:10.1093/bjsw/bct114
- Windle, G., Bennett, K. M., & Noyes, J. (2011). A methodological review of resilience measurement scales. *Health & Quality of Life Outcomes*, 9(1), 8.  
doi:10.1186/1477-7525-9-8
- World Health Organization. (2011). Mental health: Strengthening mental health promotion. Retrieved from <http://www.who.int/mediacentre/factsheets/fs220/en/>
- World Health Organization. (2013). Mental health action plan: 2013-2020. Retrieved from [http://apps.who.int/iris/bitstream/10665/89966/1/9789241506021\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/89966/1/9789241506021_eng.pdf)
- Worton, S. K., Caplan, R., Nelson, G., Pancer, S. M., Loomis, C., Peters, R. D., & Hayward, K. (2014). Better beginnings, better futures: Theory, research, and knowledge transfer of a community-based initiative for children and families. *Psychosocial Intervention*, 23(2), 135-143. doi:10.1016/j.psi.2014.02.001
- Wright, M. O'D., Masten, A. S., & Narayan, A. J. (2013). Resilience processes in development: Four waves of research on positive adaptation in the context of adversity. In S. Goldstein & R. B. Brooks (Eds.), *Handbook of Resilience in Children*, 15-27. New York, NY: Springer.
- Yuzheng, W., Wei, X., & Fei, L. (2016). Emotional resilience mediates the relationship between mindfulness and emotion. *Psychological Reports*, 118(3), 725-736.  
doi:10.1177/003329411664970

### Appendix A: Interview Questions and Possible Probes

What programs and methods have elementary school social workers experienced that support developing resilience in young children?

- Interview Question: Please describe any current school programs or methods that are designed to develop resilience in young children.
- Possible Probe: What positive experiences have you had in which children seemed to have gained psychological resilience?
- Possible Probe: What was the effectiveness of past programs or methods that can you share on this subject?

What successes and challenges have the social workers experienced regarding the development of resilience in young children?

- Interview Question: What personal stories can you share concerning resilience and children from the perspective of an adult-child relationship?
- Possible Probe: Please relate any more (good or bad) stories concerning the development of resilience.
- Possible Probe: What other feelings or emotions do you have to share about this?

How do social workers perceive the development of resilience in young children as an influence in later life?

- Interview Question: Please explain how you feel about the possible connection between developing resilience in a young child and how it may influence that child in later life.

- Possible Probe: Please describe any experiences in which you recognized resilience as being a factor in a young child and then saw the effects to that child's later life.
- Possible Probe: Please share more (good or bad) stories concerning these types of past experiences.

What are recommendations for future practice?

- Interview Question: What recommendations do you have going into the future concerning the development of resilience in young children?
- Possible Probe: Please discuss how social workers may play a role.
- Possible Probe: Please discuss how teachers and other educators may play a role.
- Possible Probe: Please discuss avenues that school personnel can use to get families more involved with the development of resilience in young children.
- Possible Probe: Please discuss the type of traits that may promote resilience in a child such as self-efficacy, perceived control, adaptive skills, self-regulatory capacity and family background traits.

## Appendix B: Participant Thoughts Between Interviews

Dear Participant in the Research Study,

Thank you for your participation in the first interview session.

Please jot down any suggestions, topics, or other concerns that you have from the first session:

---

---

---

---

---

Please email **[redacted]** or call at least one day before the 2nd interview session if you have any comments from the above list that you would like to share.

The 2nd and final interview session is scheduled for \_\_\_\_\_ (date, time)  
at \_\_\_\_\_. (location)

### Appendix C: Discussion and Questions for Second Round of Interviews

The first item was created to more deeply explore the concept of resilience according to the responses in the first round. The following questions are divided into the four categories that reflect the original research questions and have been developed from the first round of interviews.

1. Please express your thoughts about approaching resilience intrinsically by handling fears as thoughts.

2. Developing Resilience Using Current School Programs.

- When considering the development of resilience in the current school programs, how does the idea of handling fears as thoughts come into play?
- Who can you describe as having the best chance of asking a child the question, "What are your thought fears"? Please discuss in terms of social workers, teachers, psychologists, parents, and anyone else you deem relevant.
- What are the attributes of an adult who can best connect with a child? Please include such things as patience and active listening in your discussion.
- Is there anything else that you would like to say about current programs and this line of thinking?

3. Successes and Challenges

- Please relate any stories from your experiences concerning the development of resilience in young children by helping them to handle their thought fears.
- Stories about deep communication with young children?
- Stories about connecting with young children?

#### 4. Later Life of Child

- What kinds of predictions can you offer of how a parent or mentor may affect a child's later life by asking the question "What are your thought fears?"
- How do you predict that connection/communication lasts through the different stages of a child's life?
- How can this improve adult relationships later in a child's life?
- Can connection/communication about thought fears affect the reducing of social ills? Please discuss in terms of such problems as depression, suicidal thoughts, anxiety, drug abuse, and bullying (talking about the bully).
- Please relate other personal or professional stories of connection between helping children handle their thought fears and how this affects later life.

#### 5. Recommendations for the Future

- How do you see research concerning the development of psychological resilience in children and communication practices of handling thought fears as a new domain? Please discuss.
- Do you see research concerning the development of psychological resilience in children and communication practices of handling thought fears in need of further study? Please discuss.
- What approaches might you recommend be incorporated into the strategies or programs in your school district concerning the development of resilience in children.

- Please describe any programs that your school district may benefit from in the future concerning the development of resilience in children.