Supporting resilience in war-affected children: How differential impact theory is useful in humanitarian practice

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ARTICLE INFO

Keywords:
- Resilience
- War-affected children
- Differential impact theory
- Social ecology
- Practice

ABSTRACT

This paper examines the utility of the Differential Impact Theory for child protection practitioners who work in humanitarian settings, with a focus on war-affected children. A primary advantage of DIT is that it focuses efforts to strengthen children's resilience on improving children's social ecologies at different levels. This ecological focus is more likely to address the sources of children's suffering and resilience and also helps to avoid the problems associated with an individualized focus. It also shows how DIT provides a differentiated view of war-affected children and stimulates multiple interventions at different ecological levels, avoiding the common error of taking a one size fits all approach to intervention. In keeping with DIT, it suggests that child protection practice would benefit from addressing macro-level risks such as poverty and discrimination that are drivers of various harms to children and from more systematic linkages between macro- and micro-levels. It concludes that DIT serves as a critical lens for viewing current work on child protection in humanitarian settings and also for illuminating ways to develop more comprehensive supports for children's resilience.

In international humanitarian settings such as those involving armed conflicts or natural disasters, practitioners such as myself increasingly use a resilience approach in supporting children. The shift toward a resilience approach, which is now conspicuous in international standards on child protection (e.g., Child Protection Working Group, 2012), has occurred for multiple reasons. For one thing, practitioners observed that despite exposure to extreme forms of adversity, the majority of children exposed to armed conflict do not exhibit Post Traumatic Stress Disorder (PTSD) or other clinical problems. Also, deficit approaches frequently pathologized war-affected people, thereby adding to their burden of stigma. Too often, there was a one-sided analysis of risks and problems facing war-affected children, without commensurate attention to their resources, strengths, and abilities to cope with and navigate complex environments. From a practice perspective, this is critical since effective supports for war-affected children need to simultaneously reduce risks and strengthen the protective and promotive factors that support children. Further, deficit approaches portrayed war-affected children as victims. Yet many practitioners recognized that even amidst armed conflicts or recent mass displacement, children and adolescents exhibit agency that is an important resource for coping, adjustment, and resilience.

This shift toward recognizing affected people's agency had enabled self-help efforts that draw on the capacities of children, families, and communities to take steps that improve their protection and well-being. This captures the reality that some of the best supports are provided not by outside agencies but by local people themselves (Inter-Agency Standing Committee, 2007). Too often, we forget or minimize the fact that some of the most widely used interventions such as Child Friendly Spaces (CFSs), have positive effects but for the most part influence the pace of recovery rather than whether recovery occurs at all (Ager & Metzler, 2017; World Vision International, 2015). Since natural supports and locally led processes can enable children's recovery and protection in a
sustainable manner, practitioners would be well advised to support self-help (UNHCR, 2017a), without overburdening affected people. Children and teenagers have enormous energy, creativity, networks and resources that can be harnessed for purposes of reducing suffering and supporting resilience.

Nevertheless, work on resilience in international humanitarian settings remains in its infancy, and much remains to be learned. There is a weak evidence base regarding which resilience interventions work and are sustainable (Betancourt & Williams, 2008; Boothby, Strang, & Wessells, 2006; Tol et al., 2011; Tol, Jordans, Kohrt, Betancourt, & Komproe, 2013; Wessells, 2006, 2017). At field level, resilience oriented approaches frequently suffer from an excessive focus on individuals, the use of universalized, non-holistic approaches, and limited attention to strengthening different systems in children’s social ecologies. These are not insurmountable limitations but require a deepening of resilience approaches as used in the field and a steadfast commitment to strengthening practice in regard to war-affected children.

The purpose of this paper is to examine how the Differential Impact Theory (DIT; Ungar, this issue) is useful from the standpoint of humanitarian practice on supporting children’s resilience, particularly in war zones. Drawing on my field experience over several decades, it explores how the DIT keeps the focus on children’s social ecologies, avoids excessive individualism and one size fits all approaches, and enables multi-systemic approaches that include attention to macro-level factors. In discussing these, I will refer to the specific principles of DIT that Ungar has articulated.

1. The focus on children’s social ecologies

The central emphasis of DIT is on the importance of children’s social ecologies (e.g., Bronfenbrenner, 1979) and the interactions that occur within and between multiple levels over time. From a practitioner’s standpoint, this emphasis offers significant conceptual and practical advantages relative to other approaches that focus on processes internal to war affected children. Much of the suffering that children experience in war zones is due to radical changes in their environment such as family separation, exposure to attack and sexual violence, mass displacement, loss of home and loved ones, and threats of recruitment, among many others. Often, children’s suffering and distress owes to so called everyday distress associated with food insecurity, overcrowding, family conflict, disruption of education, ongoing deprivation and inability to meet basic needs, and insecurity, among many others (Miller & Rasmussen, 2010; Wessells & Kostelny, 2014).

These changes in children’s social environments are the immediate causes of children’s suffering and threats to healthy trajectories of development. Consistent with the first principle of DIT, the key to enabling children’s resilience in such settings is to change their social environments in ways that promote children’s well-being (Wessells, 2016). This focus on children’s social environments is all the more appropriate because, practically speaking, it is the social environment that is accessible and that can be changed in ways that support children. To be sure, radical shifts in children’s social environments may produce internal changes such as high levels of stress and anxiety or clinical maladies such as PTSD and depression (Apfel & Simon, 1996). These disorders clearly need to be addressed, which is no small task in settings where there are few psychological or psychiatric services. Yet addressing only the internal problems while failing to address the environmental causes would amount to providing band aids. For example, healing a child’s PTSD without also taking steps to prevent significant risks in the children’s social environment would have limited value.

If the importance of the social environment seems obvious, it is a point that frequently gets lost in humanitarian practice. Consider, for example, efforts to reintegrate former child soldiers during and following the decades long war in northern Uganda between the Ugandan government and the so called Lord’s Resistance Army, a group that was infamous for its child abductions and brutality (Human Rights Watch, 2003a, 2003b). Large numbers of former child soldiers were placed in NGO run transit centers that provided basic health screening, peer discussions, and mental health and psychosocial supports. The latter frequently emphasized trauma counseling that was aimed at reducing individual suffering and putting the child in a better position for reintegration with their families and communities.

Although this approach had value, it focused too much on healing individuals rather than on repairing the social relationships that are at the heart of children’s well-being. Family relations were badly strained as ordinary parents feared that their sons and daughters who had been with the LRA had become killers. At the community level, the former child soldiers were called names such as ‘rebel boys’ or ‘rebel girls’ and were badly stigmatized and socially isolated by both peers and adults (Annan, Blattman, & Horton, 2006; McKay, Veale, Worthen, & Wessells, 2011). It was unfortunate that too little attention was given to the social and community dimensions of reintegration, which is inherently a social process that involves the reweaving of positive social relationships (UNICEF, 2007; Wessells, 2006; Williamson & Cripe, 2002). This same pattern of paying too little attention to social challenges such as stigma is evident in many different conflicts, and is particularly pronounced in regard to formerly recruited girls (Betancourt, McBain, Newnham, & Brennan, 2015; McKay & Mazurana, 2004; McKay et al., 2011; Tonheim, 2012, 2014).

The use of individualized approaches is by no means limited to efforts to reintegrate former child soldiers. For example, in tribal areas of India, it is customary for girls to marry below 18 years of age, with most marrying at age 15 years and above (Xaxa, 2011). NGOs that address this harm to children frequently take an individualistic approach, for example, by seeking to rescue a girl who is about to be married at an early age. Such approaches are severely limited by the fact that child marriage is often supported by social norms of child marriage. They overlook the pivotal role that the girl's family, particularly her father, play in arranging and demanding the early marriage. To address early marriage in such a context requires concerted attention to changing social norms and to helping families to protect family honor and status through means that do not include child marriage. Here, too, the DIT serves a poignant reminder to avoid excessive individualism and keep the focus on the social environments that can either harm children or support their resilience.
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