Resilient Citizens: Strong recovery – Stronger future

Vital Cities and Citizens

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People have the capacity to deal with adversity such as disasters caused by man and nature, to overcome them, to learn from them and to transform themselves.
(Grotberg, 2001).

The COVID-19 pandemic has led to emotional, physical and financial stress and has an impact on virtually every aspect of our lives. The government has taken measures to contain COVID-19, including a partial lock-down. Everyone has been asked to stay at home as much as possible. For families with children, this leads to major changes in rhythm and structure. Parents/caregivers struggle to combine educational support, working from home and housework. Children have to learn how to deal with staying at home, receiving education by parents/caregivers, while missing contacts with peers. For singles, the elderly and people living alone, the pandemic can degenerate into increasing feelings of loneliness and alienation.

A crisis such as the COVID-19 pandemic puts existing social systems to the test. However, social systems have the capacity to bounce back and recover themselves, but the speed and degree of recovery varies between individuals, households and societies. The ability to bounce back rests on two foundations: *Coping and Resilience.* Coping refers to the ability to deal with problems and setbacks through cognitive or behavioural actions. Resilience is the ability of a system to deal with threats to its functioning, survival or further development.

This policy brief outlines the steps (see Table 1) to a prosperous recovery of Rotterdammers and shows which constructs are important to make individuals and society more resilient.

Table 1. Three levels in the life cycle of disasters

Level	When	Focus
Preparation	Before the disaster	Identifying and creating the important social building blocks to cope with adversity and setbacks
Recovery	During the disaster	Connecting social forces to activate the social building blocks
Transformation	After the disaster	Institutionalising the social building blocks in a new social structure.

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

Preparation
Identifying and creating the important social building blocks to cope with adversity and setbacks

Urban societies consist of both a system, a standard way of doing things laid down in routines and rules, and individual room for manoeuvre. While both are important, this policy brief focuses on how society as a system can offer residents the opportunity to cope with the crisis and evolve within it. The following table briefly shows the components of *coping* and *resilience.*

Recovery
Connecting social forces to activate the social building blocks

We recommend that policymakers establish a system of support for social networks and initiatives that focus on the health of adults and youth. This requires capacity building in six areas: youth care, partnership and collaboration, training and technical assistance, planning and evaluation, and policy and advocacy (Table 3; Association of Maternal & Child Health Programs, 2004). This then requires explicit allocation of resources, creation of an institutional structure, and policy making and implementation.

- Resilience should be built up before, during and after a crisis whenever possible (Peek, 2020)

- Jeugdzorg (youth care) needs to prioritize programs that aim at increasing coping and resiliency. This can be achieved in the form of creating educational materials, staff professionalization on this topic and a focus on knowledge dissemination.

- Educational institutions need to focus on building capacity and knowledge concerning coping and resiliency and begin to create sustainable long-term activities, thus creating a curricular focus on this topic.

- Educational and Healthcare partners in Rotterdam need to build strong partnerships with families and caregivers in order to create and support sustainable long-term activities concerning coping and resiliency that can be implemented at home.

- Appropriate legislation needs to be created and implemented as to incentivize and mandate new sustainable long-term activities concerning coping and resiliency

Examples from Rotterdam

Dr. Godor and Dr. Van der Hallen have developed two psychoeducational education programmes to teach primary school children to cope with stress and adversity. The first, "Citizen Science: Coping and Resilience" is a joint project with the EUR Science Hub (700 children). The project consists of a series of lessons in which the children work on their own resilience through inquiry-based learning. *How do I deal with difficult situations and, if I do not feel comfortable with them, how can I improve or change them*? They learn to find their own pitfalls and how to deal with them in a way that works for them. The children do their own research, and in these lessons, they help Dr. Godor and Dr. Van der Hallen with their research on resilience of children. The second project is a collaboration with the Giovanni van Bronckhorst Foundation and EUR Science Hub. In a 20-week programme, coping and resilience are combined with sport. The first results show that the programme seems to lead to a significant improvement of optimism and self-confidence.

Table 2. Examples of interventions

Project	Intervention Description
UK Resilience Programme (UKRP): Challen et al. (2014)	PRP teaches cognitive-behavioural and social problem-solving skills. PRP also teaches techniques for positive social behaviour, assertiveness, negotiation, decision making and relaxation. PRP sessions involved discussions, skill training and role plays in the classroom setting, and homework to reinforce the program content.
Anticich et al. (2013) Brisbane, Australia	The primary components of the program include relaxation, cognitive restructuring, attention training and graded exposure to anxiety-provoking situations and problem solving, which are facilitated by peer and family support.
Watson et al. (2014) USA	Aims to improve social competence by teaching children how to initiate and maintain peer interactions, to engage in reciprocity, to self-regulate their emotions and behaviours, and to become aware of how their behaviour impacts others.

Froehlich-Gildhoff et al. (2012) Germany	Early childhood teachers – 6 training sessions (4 hours each) on resilience, resilience courses for children, cooperation with parents, networking and project reflection and sustainability. Monthly supervised team meetings

Transformation
Institutionalising the social building blocks in a new social structure.

Research leads to the following recommendations:

- There is a need for a continuous policy focus on the needs of children after crises. It is often wrongly assumed that parents can do this adequately.
- The needs of children after a crisis are different from those of other groups and therefore require their own approach. This has to do with school dropouts, the general development process of children and social-emotional development, including social contacts.
- Vulnerabilities of children are psychological, physical and educational.
- Resilience must be built up before, during and after a crisis whenever possible (Peek, 2020).
- After a traumatic event, there are three fields of attention (Grotberg, 2001). External support has to do with social connectedness (Prince-Embury & Saklofske, 2013) and with offering emotional and instrumental support (Anshel & Gregory, 1990). Internal strength has to do with self-confidence and emotional awareness, interpersonal and problem-solving skills have to do with the ability to deal effectively with a crisis through various home-based skills (Chesney, Folkman & Chambers, 2003; Anshel & Gregory, 1990)
- After a crisis, the focus should be on supporting families and phyco-educational opportunities for the child's development and growth, as well as on identifying long-term mental health problems (Williams, Alexander, Bolsover & Bakke, 2008)

Literature

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