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How Psychosocial Sport & Play Programs Help Youth Manage Adversity: A Review of What We Know & What We Should Research

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Abstract

A review of theories and practices pertaining to the possible underlying dynamics of international community-based resilience enhancing psychosocial sport and play programs, established to help children and youth experiencing adversity in their lives. Sport and play activities (with play being inclusive of any organized movement, exercise, game or artistic activities) can have a stabilizing impact on most children through supporting and encouraging their resilience processes, with resilience being described as the process of, and capacity for, successful adaptation despite challenging or threatening circumstances. Psychosocial sports and play programs are a relatively

new approach to helping children manage adversity, so more field investigations need to be implemented to establish best practices methodology, and to discover the impact that sport and play activities may have on the enhancement of children's resilience. Additionally, more funding must be allocated for research on the effectiveness of these psychosocial sport and play programs.

Keywords: Psychosocial rehabilitation, sport & play, resilience, youth, stress, trauma

Introduction

In recent years, the United Nations, individual governments, international non-governmental humanitarian aid organizations, and sports corporations have been turning to psychosocial sport and play programs as an innovative method to address numerous health and social problems (with the use of the term "play" being inclusive of any organized movement, exercise, game or artistic activities). Projects are being initiated that use sports and play activities with children as psychosocial interventions in a variety of situations, including (but not limited to):

- In and after wars or conflicts to provide opportunities for "peace building" between conflicted parties
- In response to pandemics to provide healthcare education, support and services
- In response to social problems, such as providing opportunities to help reintegrate homeless children and child soldiers into society, or to address issues of poverty
- After disasters to help re-establish social and psychological stability

II. The Role of Sport and Play in Development and Rehabilitation

Psychosocial sport and play programs aim to restore children's social well-being and psychological health within their community through group-focused practices, tailored to fit the contexts of local culture, traditions, needs and resources (Boyden & Mann, 2005; Duncan & Arntson, 2004; Eisenbruch, 2004; Grotberg, 2001; Henley, 2007). These programs hope to fulfil key healthcare functions in two ways: 1. By offering the majority of affected children direct psychosocial support via sport and play programs that also teach important values and skills, etc., and 2. By helping to identify those children who are unable to effectively participate in these programs due to the severity of their stress or trauma, offering more individual psychological attention through referrals to mental health specialists (Statham, 2004; Yule, 2000).

Play has long been understood to provide children with the experiences they need in order to learn social skills and values. Through play, children become sensitive to other children's needs and values, learn to handle exclusion and dominance, manage their emotions, learn self-control, plus to share power, space, and ideas with others. At all levels of development, play provides opportunities for children to feel comfortable and in control of their feelings by allowing the expression of emotions in acceptable ways. Further, sport and play activities provide children with the opportunity to negotiate and resolve conflict (Erikson, 1977; McArdle, 2001; Piaget, 1959; Winnicott, 1968). Thus the concept behind psychosocial sport and play activities is that these will assist children and adolescents address a myriad of social and psychological challenges simultaneously in gentle and non-intrusive ways through accessing the natural predilection to play (Bell & Suggs, 1998; Henley, 2007).

Managing Adversity

Humanitarian and social crises are any occurrences that can cause loss of human life or the deterioration of health and health services on a scale that requires an extraordinary helping response from outside the affected community. These events can result in the experience of severe stress or trauma in any population, irrespective of their cultural background (Dougherty, 1999). Trauma is defined as the direct or indirect exposure of a person to a life-threatening event, and the concurrent experience of intense feelings of terror or horror (APA, 1996). Fortunately, the ability

of human beings to cope effectively with traumatic experiences should not be under-rated, and traumatic experiences rarely develop into psychiatric illnesses (Bonanno, 2004; Bonnano, 2005; Creamer, Burgess, & McFarlane, 2001; Kleber & Brom, 1992). In studies of Western populations, 60% to 90% of affected people have been found to be able to integrate the traumatic experience by themselves (Connor & Davidson, 2003; Kleber & Brom, 1992). In this context, “integrating the experience” refers to an individual’s ability to resolve its traumatic experience and return to pre-disaster levels of functioning (de Jong et al., 2002). The ability of a person to manage severely stressful or traumatic experiences has been identified as the process of resilience (Alvord & Grados, 2005; Boyden & Mann, 2005; Luthar & Cicchetti, 2000; Masten, 1997; Ungar, 2005)

Enhancing Resilience Processes In Children Through Sport and Play

Resilience is understood to be the process that enables some survivors of high-risk environments to experience social competence, empathy, caring, problem-solving skills, critical and creative thinking, task mastery and a sense of purpose and connectedness in the face of adversity and distress (Connor & Davidson, 2003). It is believed that successful resolution and integration of severely stressful or traumatic experiences by children can even contribute to increased resilience in response to future stressors (Alvord & Grados, 2005; Apfel & Bennett, 1996; Boyden & Mann, 2005; Connor & Davidson, 2003).

Research on resilience has identified key protective factors in a child’s life that can buffer and prevent the impact of such risk factors as severe stress or trauma (Markstrom, Marshall, & Tryon, 2000; Tiet et al., 1998). The most significant protective factor is the child’s connection with and attachment to beneficial friends, family and unrelated adults. For children particularly, experiencing caring, accepting and encouraging relationships with family and non-family adults (such as teachers, coaches and mentors) has a significant and positive impact on their development. Even for older children and teenagers who have already been exposed to and adversely affected by long-term hardship, the late establishment of healthy adult-child relationships can help intercept the child’s negative life trajectories and prevent future exposure to high-risk situations (Alperstein & Raman, 2003; Luthar & Cicchetti, 2000; Rutter, 1998; Wolff & Fesseha, 1999).

As children and adolescents benefit from quality role models (Boyden & Mann, 2005; Ungar, 2005), group sports and play activities offer important opportunities for them to be engaged by older members of a community. These adults are the ones who can provide structured activities that encourage the development of children’s sense of self-worth, support their ability to communicate more effectively, and help them have healthier relationships with peers - and having healthy peer relationships is yet another significant protective factor. It must be emphasized that a key aspect of the healthy adult-child relationship is the role that adults play in teaching values such as teamwork, fair play and ethics, and the social skills that support these values (Boyden & Mann, 2005; Dumont & Provost, 1999; Duncan & Arntson, 2004). Thus, the impact of the sport worker in the psychosocial sport and play program is of crucial importance, though it must be noted that coaches in psychosocial sport and play programs must have skills beyond solely teaching sport and game activities. These coaches should also be able to facilitate the understanding of emotions and inter-personal communications between children, and help children develop effective coping skills. These teaching skills require special training, which will help the coaches effectively intervene in many challenging situations, as well as enable them to deal with any of their own unresolved issues that they may face living in the same adverse conditions as the children they hope to help. When adults give their support to children, and encourage the children to help others, they are in turn helping to enhance the value and resilience of the community, for engagement in and connection to a community which is seen as another significant protective factor (Moscardino, Axia, Scrimin, & Capello, 2007; Wolkow & Ferguson, 2001).

While many psychosocial sport and play programs provide children with the chance to get involved with others through joining competitive teams, the context of interventions are primarily focused on the process of helping children restore their psychological and social functioning in a

cooperative environment. These programs offer children the opportunity to learn new problem-solving skills in managing their own emotions and behaviours, as well as to have healthy peer relationships. Of note, these problem-solving skills have also been found to be a strong predictor of improved resilience in children, as improved problem-solving skills can enhance the possibility that life's challenges will be resolved successfully (Boyden & Mann, 2005; Fok & Wong, 2005; Grotberg, 2001; Place, Reynolds, Cousins, & O'Neill, 2002; Save the Children, 2004).

Implications and Recommendations

It has long been recognized that play is instrumental in a child's healthy development, and the ability to play is one of the signs used to determine if a child is healthy or meets age-related developmental requirements. Additionally, when a child is under extreme stress or has been traumatized, this is often seen through symbolic repetitive behaviors suggesting aspects of the traumatizing event through play. Thus the use of psychosocial sports and play programs provide important opportunities for trained sports workers to help enhance children's resilience, facilitating emotional and social stabilization, and the acquisition of new skills and abilities.

While it is hoped that psychosocial sports and play programs can make a positive contribution towards the enhancement of a child's resilience, this can only occur under certain conditions - a sport is often mistakenly viewed as having some sort of intrinsic nature in and of itself (either good or bad), but is actually a neutral or empty practice that is filled with meanings, values, and ideas of the culture in which it takes place, and influenced by the individuals who participate (Guest, 2005).

There is compelling practical, anecdotal and theoretical evidence to suggest that psychosocial sport and play programs can be helpful with children who have experienced severe stress or trauma, but there is yet little empirical evidence proving it. This is a challenge that the initiators of (and donors to) psychosocial sports and play programs now face. While their focus has been primarily on raising and spending money on the development and implementation of programs, there has been a significant lack of money being spent on collecting empirical research data on short-term outcomes and long-term impacts. Empirical data is crucial to ascertain which interventions are the most effective in helping enhance resilience in children and adolescents, and thus enable them to more effectively adapt in a post-crisis environment. Empirical data can also be helpful in improving organizational accountability, potentially increasing future fundraising abilities as a result. Additionally, empirical field research of psychosocial sports and play programs can help establish a comparable database to facilitate the identification of best practices and the accurate evaluation of different resilience-focused programs. These psychosocial studies will then be comparable with classical psychological and medical studies, and will thus become empirically competitive. This can help both to map out the borders of effective psychosocial practices, defining where and when psychosocial programs reach their limits, and also identify when traditional forms of psychological and medical help would be more effective and efficient.

Psychosocial research has unique challenges it must address in order to gather useful data (Duncan & Arntson, 2004). The following areas should be considered for future research on psychosocial sport and play programs in international settings:

- Identifying stressors, and assess the impact of these stressors on children's behavior, emotional stability and mental health.
- Assessing child and adolescent resilience levels, particularly before and after their participation in sports and play activities in order to identify any behavioral and psychological changes that may occur.
- Using resilience measures in international settings with children, to measure the reliability of these tools to effectively assess strengths and difficulties (though these tools will need to be translated into local languages, and then re-validated).
- Observing the impact of psychosocial sports and play activities on children's behavioral and psychological status over time, paying particular attention to whether certain sports are more effective.

- Identifying changes in behavior and progress in school during the time a youth is participating in sports, to note the influence of participation in other areas of their lives.
- Assessing coach and child interactions, and compare which coaching styles may be more effective in helping children.
- And in order to do any of the above assessments, a project must identify practical, measurable outcomes, both short-term and long-term, and evaluation of the effectiveness of a program will require the inclusion of either a cluster-randomized trial, or if that is not possible, then with the inclusion of a control group.

Conclusion

Psychosocial sport and play programs look to be an important development in potentially helping children manage and thrive in the aftermath of traumatic or severely stressful experiences, and it appears that the “active ingredient” of these programs is in the enhancement of children’s resilience processes. A crucial component of any program will be the quality of relationships between the children and the adults who work with them, as programs run by adults offer children the opportunity to establish healthy attachments with them, to teach children how to effectively manage the various challenges they face in an effective manner, and offer encouragement throughout the process. Furthermore, since sport encourages group participation in community settings, these psychosocial sport and play programs provide a predictable and structured environment where even communities with histories of conflict can come together to play in a peaceful and safe environment, thus encouraging community reintegration. Therefore, sport may be utilized to support communication and self-sustaining development for an entire affected community. Likewise, psychosocial sports and play programs can provide the international academic research community with the opportunity to gain a better understanding of how to enhance resilience through psychosocial programs and practices.

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