
Profiling Resilience: Capturing Complex Realities in One Word

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Resilience realities are local and global and, like politics, are contested locally and globally. This may be both reassuring and unsettling for young scholars as well as for practitioners seeking to meaningfully engage in resilience-building action, particularly regarding international humanitarian policy and public health. Does the international humanitarian imperative thwart or enable communities to self-organize, mitigate, and reduce their vulnerabilities to disasters? Given that securing public health is fundamental to human security, what role does the international humanitarian play on the contemporary world stage, with its increasingly complex scenes of global health and security challenges? Are resilience realities different on the home front than they are on distant continents? How are we framing our respective resilience narratives? Whose resilience reality counts?¹

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RESILIENCE AND VULNERABILITY: INTERTWINED, YET DISTINCT

Resilience takes myriad forms that appear in multiple layers and dimensions across a wide spectrum of language and meaning systems.

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In the last decade, “resilience” has become a ubiquitous word in disaster reporting, reflecting its application to multiple contexts. Is resilience about “bouncing back” to pre-disaster positions, and does it also imply “change and transformation” resulting from experiential learning while withstanding adversity? The answers may depend on whom you ask. Resilience represents a powerful idea that resonates not only with the individuals and groups who are positively transformed by surviving disasters, but also with the officials who are tasked with ensuring the safety and survival of citizens in large-scale emergencies.

The Department of Homeland Security’s official definition of resilience is the:

- 1) *ability of systems, infrastructures, government, business, and citizenry to resist, absorb, recover from, or adapt to an adverse occurrence that may cause harm, destruction, or loss of national significance*
- 2) *capacity of an organization to recognize threats and hazards and make adjustments that will improve future protection efforts and risk reduction measures*

The lexicon notes, “Resilience can be factored into vulnerability and consequence estimates when measuring risk.”²

The Center for National Policy (CNP) has spearheaded resilience-building in a well-informed and highly organized manner, led by Dr. Stephen Flynn and his team of senior practitioners and administrators.³ Unelected, self-appointed actors—often under the auspices of voluntary and non-governmental organizations (NGOs)—are also in the business of protecting citizens, seeking to build and maintain emergency-response and disaster-mitigation institutions. Although many are well-meaning and accountable individuals or entities that have earned respect for their roles and activities, some are driven by self-serving goals and remain unaccountable until unmitigated disasters expose their fault lines.

The difference between an emergency and a disaster is in the system’s capacity to respond to and manage the crisis. A capable system can respond to, manage, and prevent an emergency (or accident) from turning into a disaster. Potential disasters may be predicted if the system’s vulnerabilities are known. Resilience and vulnerability are thus intertwined, with understanding of both being largely dependent on the quality of information disseminated by the media and international organizations. Selective reporting that focuses on vulnerabilities and accentuates the weaknesses of society without equal attention to its capacities and strengths may perpetuate perceptions of deficit and a seemingly endless need for external

assistance. The complexity of realities on the ground may not be apparent to the untrained eye, and real need may be glossed over in even the best reports. Where does vulnerability end and resilience begin, and for whom?

Contemporary international humanitarian discourse is rife with competing narratives of resilience and vulnerability. Many of those who were immersed in the vulnerability discourse are now reframing vulnerability and adjusting their vision to focus on resilience. It is important to ask: Resilience to *what*? *Whose* resilience? And by *whose* reckoning?

THE KEYS TO RESILIENCE

The capacity to anticipate and prepare for disasters is the first key to adaptive learning, which characterizes resilient strategies of disaster preparedness and response. While resilience may depend on robust and functioning infrastructure, people—including their adaptability and the strength of the social fabric they weave—are more important. Seen as a dynamic process of learning and adaptation, resilience is more about transformative change than a return to a previous state, particularly if that state was vulnerable to the disaster that sparked such turbulent change in the first place.

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The second key to resilience is the capacity to withstand and/or overcome catastrophic events or experiences, actively creating meaning from adversity and striving to maintain core identities and “normal” functions. In operational terms, this implies the mobilization of human and economic capital by means of social capital, characterized by shared norms and values that provide the foundations for trust and reciprocity, informal social control, and civic participation.

In 2001, two major disasters triggered a search for meaning that ultimately introduced the concept of “national resilience” into the English language. The first disaster was the April foot-and-mouth disease (FMD) outbreak in the United Kingdom, and the second was September 11. The former destroyed many livestock and livelihoods⁴ and the latter irreversibly changed the dynamics of international relations on both sides of the Atlantic. In response, former Prime Minister Tony Blair’s government immediately established “UK Resilience” as “a system designed for handling

and recovering from the effects of a large-scale emergency such as a terror attack.”⁵ The website later served to coordinate government resources and structural mechanisms for emergency response, allowing affected citizens direct and efficient access to information and financial support.⁶ More recently, national resilience has taken a more proactive and holistic meaning in the United States, reaffirming the “can-do” spirit that, according to the president of the Center for National Policy (CNP), encapsulates community resourcefulness and a sense of empowerment that had previously been untapped.⁷

HUMAN RESILIENCE CONTEXTUALIZED AND DEFINED

I began systematically studying human resilience in response to the early challenges I faced on research trips in Eritrea over the past decade. Hearing the stories of human courage, growth, and transformation on the ground motivated me to find ways to examine resilience in its multiple dimensions. Since every research project is a collaborative attempt at approximating and representing the contested realities of the participants and/or respondents, I employed active learning techniques that included a variety of participatory and quantitative methods as well as investigatory and analytical tools. The challenge was for my multidisciplinary team to design and execute a scientific study of the complex realities of individual and collective human resilience. Understanding that human resilience is embedded in the social and health systems and sub-systems that, in turn, operate in the context of the local environment that influences and is influenced by human activity, I ultimately came to define resilience as: “the capacity of individuals, families, communities, systems, and institutions to anticipate, withstand and/or judiciously engage with catastrophic events and/or experiences, actively making meaning out of adversity with the goal of maintaining ‘normal’ function without fundamental loss of identity.”⁸

Contested realities may be explained by the multiple definitions and tools used to assess and measure resilience. We had cautioned against vague and simplified notions of measuring resilience. For example, in a sample of New York City residents surveyed via telephone six months after the September 11 terrorist attacks, we argued that the absence of (self-reported) symptoms of post-traumatic stress disorder (PTSD) may not mean they are resilient. Our study participants (in Eritrea as well as New Orleans, Louisiana) had clearly related to us during our face-to-face interactions that the common symptoms of PTSD—such as anxiety and sleeplessness—were, in fact, normal human responses to catastrophic

events and experiences.⁹ We concluded that resilience is not the absence of PTSD anymore than health is the absence of disease.¹⁰ The most suitable scale for measuring resilience had proved to be the short form of the “Sense of Coherence” (SOC-13) scale that my team adapted and translated into Eritrea’s nine languages. This compound scale has three subscales that gauge comprehensibility, manageability, and meaningfulness of engaging with adversity. As we administered the SOC-13 scale, it sparked spontaneous discussions of the complex realities of our study participants, which revealed profiles of resilience in multiple dimensions.¹¹ Allowing participants’ questions and commentaries on the scale itself to inform the interpretation of the quantitative data resulted in a fuller understanding of resilience dynamics in Eritrea. Subsequent studies have attempted to do the same for New Orleans, Louisiana, and, more recently, for Chechnya.¹²

INTERDISCIPLINARY APPROACHES TO UNDERSTANDING RESILIENCE

At the turn of the century, some psychologists and other behavioral scientists began turning their attention away from psychopathology and social dysfunction, moving toward human strengths and human capacities for adaptive learning and healthy behavioral functioning. *American Psychologist*, the official journal of the American Psychological Association, produced a special issue heralding the new millennium in January 2000. Renowned leading psychologists Martin Seligman and Mihaly Csikszentmihalyi guest-edited the volume on “Positive Psychology,” which included articles by George Vaillant on adaptive mental mechanisms, and by Ed Diener, who proposed a national index for happiness.¹³ The volume also included Barry Schwartz’s analysis of the downside of individual freedoms of choice and self-determination in American society. Schwartz argued that these freedoms may have produced unrealistic expectations that led to disillusionment and increased rates of clinical depression, amounting to “the tyranny of freedom” in America.¹⁴ This discussion was revitalized in *American Psychologist’s* March 2001 volume, which dedicated a section to positive psychology. In her article “Ordinary Magic,” Ann Masten argued that resilience is ordinary and common, particularly among children living in adverse circumstances that pose serious threats to their adaptation and development.¹⁵ In the same volume, Sandra Schneider’s article, “In Search of Realistic Optimism,” described the tendency to remain positive based on what is known, and to accept what is unknown or unknowable by adopting modest expectations, hope, and aspiration for positive experiences.¹⁶ George Bonanno’s 2004 article, “Loss, Trauma, and Human

Resilience,”¹⁷ which linked resilience to the absence of PTSD, generated five commentaries published in *American Psychologist* in 2005,¹⁸ sustaining a vigorous debate on resilience among social psychologists.

Other journals in the field have published special issues on resilience that address the broader concept of resilience, moving beyond children and youth who rise above conditions of poverty, parental abuse, neglect, or severe illness and incapacitation. Among the fifteen such special issues—to which my team also contributed—are the *Journal of Social Issues* (“Thriving: Broadening the Paradigm Beyond Illness to Health,” 1998), the *Journal of Social and Clinical Psychology* (“Classical Sources of Human Strength,” 2000), the *Journal of Clinical Psychology* (“A Second Generation of Resilience Research,” 2002), and *Substance Use and Misuse* (“Resilience,” 2004).¹⁹

One of the most important findings of resilience research to date is that individual, community, and national resilience can be enhanced by creating the conditions for people and their institutions to collectively act to prevent or mitigate disasters. The emerging tone of the U.S. national conversation confirms that resilience is both what people can do for themselves and how they seek effective ways for external actors to facilitate and support coherence on the ground in order to meaningfully promote systems’ resilience.

CHANGING ROLES OF THE INTERNATIONAL HUMANITARIAN

The humanitarian imperative, some have argued, is not absolute but is dictated by self-interest meshed with altruistic ideals.²⁰ However, the first decade of the twenty-first century has focused attention on disaster mitigation and risk reduction as key components of resilience-building. For example, in 2004, the World Disasters Report focused on “Community Resilience.”²¹ Its examples demonstrated multiple dimensions and meanings of resilience at play, including the need to transform the interconnected systems and subsystems of international humanitarian aid to foster a culture of listening to and responding to expressed needs; preventing and mitigating the worst effects of disasters; and coordinating external assistance with internal capacities. The report cited examples of interconnected processes of coping and transformative change across spatial and temporal scales that strengthen community resilience, in addition to other examples that erode community resilience.

In 2005, the United Nations International Strategy for Disaster Reduction (UN/ISDR) used the tenth anniversary of the Kobe earthquake

(1995) to launch the Hyogo Framework of Action (2005-2015).²² The Framework was intended to galvanize international efforts to translate lessons learned into action points for disaster preparedness, planning, and response. Since then, member countries have been focusing primarily on the third priority for action outlined in the Hyogo Framework (HFA 3), which states, “Use knowledge, innovation and education to build a culture of safety and resilience at all levels.” Examples of good practice have been documented.²³

Students attending professional graduate schools of international affairs are also developing skills to identify and understand the resilience of systems and subsystems of disaster preparedness, mitigation, and response that contribute to overall well-being, starting with the home front. Among the specific skills to learn, unlearn, and relearn are:

1. *Active listening and being heard.* The new international humanitarian understands that listening is a two-way process. It is no longer a mission to “teach” others what we know, but to learn about their knowledge and wisdom first. Having both parties listen to each other and be heard can bring mutual gain.

2. *Active questioning and reappraisal of implicit and explicit attitudes, and beliefs about disaster victims and/or survivors.* This amounts

to unlearning misinformation, letting go of entrenched ideas, and relearning the flexibility and openness of mind that underlie active international citizenship and insightful global leadership.

My prediction for the new decade is that resilience, like politics, will continue to be contested. This will result in greater understanding of the interdependent and increasingly interconnected systems and subsystems of health and human security, both locally and globally.

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ENDNOTES

1 Robert Chambers has highlighted the problem of disinformation that is perpetuated by development researchers and professionals who get trapped in a power play that

- inhibits learning; their subjects tend to play along by means of selective reporting, thereby simplifying and misrepresenting complex realities. See Robert Chambers, *Whose Reality Counts?* (London: Intermediate Technology Publishing, 1997).
- 2 *DHS Risk Lexicon*, Risk Steering Committee, U.S. Department of Homeland Security, September 2008, <http://www.dhs.gov/xlibrary/assets/dhs_risk_lexicon.pdf> (accessed December 13, 2010): 24.
 - 3 “Strengthening National Resilience,” Center for National Policy, <http://www.centerforationalpolicy.org/ht/d/Items/cat_id/18586/pid/18570/sortby/date/direction/des/paginateItems/5/paginateItemsPage/1> (accessed December 13, 2010). A national conversation is well underway, focusing on national security under the National Security Council Resilience Directorate, and extending to regional and community levels through the Community and Regional Resilience Institute (CARRI), an initiative of the CNP.
 - 4 According to the Department for Environment, Food and Rural Affairs (DEFRA), which has made the 2001 foot-and-mouth disease epidemic data sets available to researchers who want to examine the evidence, it was the worst epidemic in the recorded history of the UK, with a chain of disastrous consequences for the farming, tourism, and business sectors. See “Animal Health and Welfare: FMD Data Archive,” DEFRA, <<http://footandmouth.csl.gov.uk/>> (accessed December 13, 2010). It was an unmitigated disaster also in terms of its impact on the mental health of farmers and their families who were deeply traumatized by the magnitude of mandatory culling of their livestock-animals they had raised and looked after as valued assets.
 - 5 UK Resilience was subsequently formed as roughly equivalent to the American “Department of Homeland Security,” with the intent to avoid emotive language. See “National Resilience: Duck and Cover,” BBC News, March 22, 2004, <http://news.bbc.co.uk/2/hi/uk_news/magazine/3557611.stm> (accessed December 13, 2010).
 - 6 See “London Bombings 7 July 2005: Financial Support for Individuals,” UK Resilience, last updated May 7, 2010, <http://www.cabinetoffice.gov.uk/ukresilience/response/recovery_guidance/case_studies/y4_london_bombings.aspx> (accessed December 13, 2010).
 - 7 See Stephen Flynn, “America the Vulnerable,” *Foreign Affairs* 81 (1) (January/February 2002); and Stephen Flynn, “America the Resilient,” *Foreign Affairs* 87 (2) (March/April 2008). Flynn has continued to lead and inform the national conversation on resilience policy and practice. See, for example, Stephen Flynn and Sean Burke, *Before the next Katrina: Urgent Recommendations for the President and Congress on Gulf Coast Resilience*, CNP document, August 2010, <<http://www.centerforationalpolicy.org/ht/a/GetDocumentAction/i/19750>> (accessed December 13, 2010); and the panel discussion convened on the same topic emphasizing the importance of emergency planning and preparedness as the most important first steps to building resilience, CNP, August 27, 2010, <<http://www.centerforationalpolicy.org/ht/display/ContentDetails/i/19781>> (accessed December 13, 2010).
 - 8 As first presented and discussed among scholars and practitioners who participated in our first International Resilience Workshop convened in Talloires, France (Tufts University’s European Center) in July 2007, and later published in a special issue of *African Health Sciences* on resilience in 2008. See Astier M. Almedom and James K. Tumwine, “Resilience to Disasters: A Paradigm Shift from Vulnerability to Strength,” *African Health Sciences* 8 (S) (December 2008), <<http://www.bioline.org.br/pdf?hs08057>> (accessed December 13, 2010): 1-4.

- 9 A common refrain amongst our study participants in Eritrea, particularly the women, was, "I wouldn't be human if I wasn't anxious or vigilant about unexpected or destructive events," showing the appropriateness of responses that should not be unduly pathologized or medicalized.
- 10 Almedom and Douglas Glandon, "Resilience is not the Absence of PTSD Any More than Health is the Absence of Disease," *Journal of Loss and Trauma* 12 (2007): 127-143.
- 11 Sense of Coherence (SOC) is a construct developed and refined by the late renowned medical sociologist Aaron Antonovsky (1923-1994) with a corresponding scale to operationalize the theory of Salutogenesis (origins of health). See Aaron Antonovsky, *Unraveling the Mystery of Health: How People Manage Stress and Stay Well* (San Francisco: Jossey-Bass, 1987). The ever-growing number of studies that has employed the SOC scale in North America, Europe, Australia, South Africa, and the Middle East (beyond Antonovsky's own meticulous re-checking and evaluations of it) have confirmed its validity and robustness. However, ours was the first study to translate the scale into eight African languages plus Arabic, involving significant alteration of at least one of its items to better reflect the sense and sensibilities of coherence of the study participants whose commentaries "interrogated" the scale. See Almedom et al., "'Hope' Makes Sense in Eritrean Sense of Coherence, but 'Loser' Does Not," *Journal of Loss and Trauma* 10 (5) (October 2005): 433-451; and Almedom et al., "Use of 'Sense of Coherence (SOC)' Scale to Measure Resilience in Eritrea: Interrogating Both the Data and the Scale," *Journal of Biosocial Science* 39 (1) (2007): 91-107.
- 12 See Evelyn A. Bensing, "Post-Katrina Study of Human Resilience and Corresponding Sources of Strength, Hope, and Support in the Greater New Orleans Area," unpublished master's thesis, The Fletcher School at Tufts University, Medford, MA (2010). Analysis of SOC data from Chechnya is in progress-to be submitted for publication in 2011.
- 13 Martin E.P. Seligman and Mihaly Csikszentmihalyi, eds., "Positive Psychology," Special Issue, *American Psychologist* 55 (1) (January 2000).
- 14 Barry Schwartz, "The Tyranny of Freedom," in Seligman and Csikszentmihalyi: 79-88.
- 15 Ann Masten, "Ordinary Magic: Resilience Processes in Development," *American Psychologist* 56 (3) (March 2001): 227-238.
- 16 Sandra Schneider, "In Search of Realistic Optimism: Meaning, Knowledge, and Warm Fuzziness," *American Psychologist* 56 (3) (March 2001): 250-263.
- 17 George Bonanno, "Loss, Trauma, and Human Resilience: Have We Underestimated the Human Capacity to Thrive After Extremely Adverse Events?" *American Psychologist* 59 (1) (January 2004): 20-28.
- 18 Five commentaries were published, followed by the author's reply. See *American Psychologist* 60 (3) (March 2005): 261-267.
- 19 For a summary of their main points, see Almedom, "Resilience Research and Policy/ Practice Discourse in Health, Social, Behavioral, and Environmental Sciences Over the Last Ten Years," *African Health Sciences* 8 (S) (December 2008), <<http://www.bioline.org.br/pdf?hs08058>> (accessed December 13, 2010): 5-13.
- 20 See, for example, Tony Vaux, *The Selfish Altruist* (London: Earthscan, 2001).
- 21 *World Disasters Report 2004*, International Federation of Red Cross and Red Crescent Societies, 2004, <<http://www.ifrc.org/publicat/wdr2004/>> (accessed December 13, 2010).

- 22 *Hyogo Framework for Action 2005-2015: Building the Resilience of Nations and Communities to Disasters*, United Nations International Strategy for Disaster Reduction (UN/ISDR), World Conference on Disaster Reduction, January 18-22, 2005, Kobe, Hyogo, Japan, <<http://www.unisdr.org/wcdr/intergover/official-doc/L-docs/Hyogo-framework-for-action-english.pdf>> (accessed December 13, 2010).
- 23 See, for example, *Towards National Resilience: Good Practices of National Platforms for Disaster Risk Reduction*, UN/ISDR, Geneva, Switzerland, July 2008, <http://www.unisdr.org/preventionweb/files/3292_TowardsNationalResilience.pdf> (accessed December 13, 2010).