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Psychology Applications & Developments XI

Edited by Clara Pracana & Michael Wang



Advances in Psychology and Psychological Trends Series

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Edited by: Prof. Dr. Clara Pracana and Prof. Dr. Michael Wang



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FOREWORD

inScience Press is pleased to publish the book entitled *Psychology Applications & Developments XI* as part of the Advances in Psychology and Psychological Trends series. These series of books comprise authors' and editors' work to address generalized research, focused on specific sections in the Psychology area.

In this eleventh volume, a committed set of authors explore the Psychology field, therefore contributing to reach the frontiers of knowledge. Success depends on the participation of those who wish to find creative solutions and believe in their potential to change the world, altogether, to increase public engagement and cooperation from communities. Part of our mission is to serve society with these initiatives and promote knowledge. Therefore, it is necessary the strengthening of research efforts in all fields and cooperation between the most assorted studies and backgrounds.

In particular, this book explores 7 major areas (divided into 7 sections) within the broad context of Psychology: Clinical Psychology, Educational Psychology, Social Psychology, Health Psychology, Psychoanalysis and Psychoanalytical Psychotherapy, Cognitive and Experimental Psychology and Legal Psychology. Each section comprises chapters that have emerged from extended and peer reviewed selected papers originally published in the proceedings of the International Psychological Applications Conference and Trends (InPACT 2025) conference series (<http://www.inpact-psychologyconference.org/>). This conference occurs annually with successful outcomes, for that reason original papers have been selected and its authors were invited to extend them significantly to once again undergo an evaluation process. Subsequently, the authors of the accepted chapters were requested to make corrections and improve the final submitted chapters. This process has resulted in the final publication of 21 high quality chapters.

The following present a small description of each section and the chapters' abstracts to provide an overall information on the contents of this book.

Section 1, entitled "Clinical Psychology", provides reviews and studies within various fields concerning relationship processes in clinical practice. Each chapter is diversified, mainly addressing topics related to individuals' well-being and improvement of quality of life.

Chapter 1: *A Qualitative Exploration of Stress and Support among In-Service Teachers and Prospective Teachers*; by Janka Liptáková & Oľga Orosová. This qualitative study aims to explore the main sources of stress and support among teachers in practice and prospective teachers, as well as the quality of their

interpersonal relationships using ecomaps. Focus group interviews were conducted with 25 in-service teachers (mean age = 44.9 years, 84 % of women) and 38 prospective teachers (mean age = 23.1 years, 79 % of women) from the Pavol Jozef Šafárik university in Košice and local schools. Results indicate that teachers in practice primarily experienced stress related to workload, student behavior, administrative demands, and the Covid-19 pandemic. Prospective teachers reported stress linked to academic pressure, identity formation, and concerns about the future. Sources of support included interpersonal relationships and inner coping resources. Ecomap analysis revealed that most relationships were supportive, with a notable proportion being ambivalent, reflecting the complex nature of social interactions in education. The findings offer insight into developing targeted support strategies for current and future educators, emphasizing the importance of relational and systemic support structures in educational settings.

Chapter 2: *The Savior-Rescuer Paradox: Navigating Recovery and Relapses among Peer Supporters in Drug Addiction Treatment*; by Ety Elisha & Esthi Shachaf-Friedman. This study explored the experiences of relapse and recovery among peer supporters recovering from drug addiction. While relapse has been extensively studied in general, limited attention has been paid to individuals in recovery who simultaneously support others while facing their setbacks. Participants were 13 trained men and women with histories of addiction and criminality who held formal peer support roles in therapeutic settings for drug recovery in Israel. Data were collected through semi-structured, in-depth interviews and analyzed using thematic content analysis. Key findings indicate that disengagement from 12-step programs and recovering peer networks often precedes relapse, illustrating the “savior-rescuer” paradox. While empowering, the dual identity of peer supporters with troubled pasts exposes unresolved personal issues that undermine recovery. Nevertheless, when effectively processed, the relapse experiences can foster greater resilience and strengthen one’s commitment to recovery. These findings frame relapse not as a failure but as a potential learning opportunity, underscoring the importance of social and recovery capital in sustaining long-term recovery. Grounded in the convict therapy perspective, the study contributes to a deeper understanding of relapse dynamics and offers practical insights for relapse prevention in addiction recovery.

Chapter 3: *How to be a Psychotherapist and Remain Happy? - Shaping resilience of psychologists, psychotherapists in training and certified psychotherapists working in counseling business: A theoretical analysis*; by Angelika Kleszczewska-Albińska. Providing counseling services means being exposed to suffering and all sorts of difficulties on a regular basis. Being a professional, empathetic listener who stays attentive and responsive to other people’s needs can result in emotional exhaustion of a professional. Taken together with no regular self-care and self-help it can lead to compassion fatigue or work burnout. Therefore, in order to maintain good quality of life and mental

health it is needed to remain resilient. The main aim of the article is to offer a theoretical analysis of steps needed to maintain resilience in psychologists and psychotherapists working in counseling business. It includes an analysis of the current data considering the mental health of psychologists and psychotherapists working in counseling business and a discussion considering possible ways to enhance the quality of life and mental well-being of mental health professionals. It also includes some ideas concerning preventive programs and components of educational curricula that should be offered to psychologists and psychotherapists working in counseling business. The text serves as a theoretical introduction and a basis for development of future preventive programs for psychologists and psychotherapists as well as a foundation for a research in the field of well-being and a quality of mental health of psychologists and psychotherapists working in the counselling business.

Chapter 4: *From Surgical to Comprehensive Care: The reconfiguration of transgender healthcare in a university hospital of the Brazilian Unified Health System (SUS)*; by Luciana Ribeiro Marques, Priscila Mählmann, Sonia Alberti, Márcia Cristina Brasil dos Santos, Aldine Marinho, Pedro Henrique de Souza Boente, & Victor Luigi Maiolino Lopez. Brazil has a universal public health system – the Unified Health System (SUS) – created in 1990 and founded on the principles of universality, comprehensiveness, and equity. As a unique public policy in the global context, ensures free access to healthcare for the entire population. Within this framework, healthcare for trans and travesti people was initially structured through the Transsexualization Process, established in 2008 and centered on gender-affirming surgeries. The experience since then has revealed the need to broaden the concept of care, incorporating psychological, social, and institutional dimensions: guidelines of Ordinance No. 2.803/2013 of the Brazilian Ministry of Health. The creation, in 2022, of the Identidade – Transdiversidade Outpatient Clinic, linked to the Health Complex of the State University of Rio de Janeiro (UERJ), responds to this demand by proposing a model of comprehensive and interdisciplinary care. Based on institutional records and ongoing research (2022–2025), this chapter analyzes the reconfiguration of transgender healthcare, with an emphasis on depathologizing practices and the interface between public policy and clinical work. Preliminary data indicate a high prevalence of psychological distress, suicidal ideation, and hormonal self-medication among users, underscoring the urgency of intersectoral policies focused on mental health and the strengthening of care networks.

Chapter 5: *Group Therapy: The Path to Promoting Children's Mental Health*; by Zipora Shechtman. The contemporary world presents increasingly complex challenges for children. In addition to normative developmental tasks, children must now navigate epidemic health crises, armed conflicts, family dissolution, economic instability, and academic pressures. Consequently, children experience diminished security and elevated levels of anxiety, loneliness, and depression. While the need for emotional support has intensified across all demographics,

children's psychological needs remain particularly underserved. The American Psychological Association has recently advocated for a paradigm shift from individual to group therapy, given the demonstrated cost-effectiveness and therapeutic efficacy of group treatment modalities. The group format aligns particularly well with children's socioemotional needs and provides a natural setting for them. This chapter discusses the unique aspects of group work with children, with a focus on emotions, presents specific intervention methods relying on the arts in psychotherapy, and demonstrates the empirical evidence for this type of group. These groups were predominantly conducted in school settings, with normative students as well as students experiencing diverse psychosocial difficulties. The findings support the conclusion that emotion-focused group therapy significantly contributes to children's well-being.

Chapter 6: Examining Mental Health Literacy and its Factors among Slovak and Foreign University Students; by Ján Kulan & Oľga Orosová. University years can be stressful, making students vulnerable and reluctant to seek mental health support. Aim: This cross-sectional study investigated the relationships between gender, prior help-seeking experience (HSE) with a mental health professional (MHP), self-stigma, social stigma, and mental health literacy (MHL) among 438 Slovak (73.3 %) and foreign (26.7 %) university students (60.5 % women; M age = 22.76, SD = 4.96). Data were collected from October 2024 to March 2025 at Slovak and foreign universities through online and paper-based surveys in Slovak, English, and Italian. Measures included The General Help-Seeking Questionnaire, The Self-Stigma of Seeking Help Scale, The Perceptions of Stigmatization by Others for Seeking Help Scale, The Mental Health Literacy Scale, and descriptive, non-parametric, correlational, and multiple regression analyses were conducted. Women reported higher MHL and were more likely to seek psychological support than men. Both self- and social stigma were significantly negatively associated with MHL, confirming stigma as a key barrier to mental health knowledge and help-seeking. Foreign students showed lower MHL, suggesting cultural and systemic challenges. Prior HSE with MHP was positively associated with MHL. These findings highlight the complex social, cultural, and psychological factors associated with MHL and emphasize the need for stigma-reducing and culturally sensitive interventions in university settings.

Section 2, entitled “Educational Psychology”, offers a range of research about teachers and students and the learning process, as well as the behavior from a psycho-educational standpoint.

Chapter 7: Attachment Profiles and Institutional Trust: A person-centered analysis of teachers' relational dispositions; by Athena Daniilidou. Trust is critical in effective school functioning, yet its dispositional antecedents remain underexplored. This study examines how teachers' attachment orientations influence institutional trust within school communities. Drawing on attachment theory, the research employed Latent Profile Analysis (LPA) to identify distinct

teacher profiles based on closeness, dependence, and anxiety. Four profiles emerged: Secure, Anxious, Fearful-Avoidant, and Dismissing-Avoidant. Analysis revealed significant differences across these profiles in levels of trust toward principals, colleagues, students, and their parents. Teachers with secure attachment style reported the highest trust across all relational domains, while avoidant profiles exhibited the lowest. Anxious teachers reported moderate trust, reflecting ambivalent relational patterns. These findings suggest that teachers' relational dispositions, rooted in early attachment experiences, shape how they interpret institutional dynamics and respond to trust-building efforts. The study contributes to the literature by bridging intrapersonal and organizational perspectives on trust and offers practical implications for leadership and professional development. Recognizing attachment-based tendencies may help create more responsive strategies to foster trust in educational settings.

Chapter 8: *Learning Style and Generation Z in Higher Education: A Scoping Review*; by Yoshitaka Yamazaki, Yusuke Yamazaki, & Ayako Matsui. The aim of this study was to understand the characteristics of Generation Z's learning styles by mapping emerging empirical results through a scoping review applying the PRISMA framework. After retrieving 945 potential studies, we identified 21 empirical studies of Generation Z that used four scales related to learning style theories: the Gregorc Style Delineator; the Kolb Learning Style Inventory; the Felder-Silverman/Felder-Soloman Index of Learning Style; and the VAK/VARK Learning Model. A single dominant learning style of Generation Z students could not be specified because of the theories' different approaches. Studies showed a Concrete Sequential learning style from the Gregorc theory as a unimodal type; a Diverging learning style from the Kolb model; an Active, Sensing, Visual, and Sequential learning style from the Felder-Silverman/Felder-Soloman paradigm; and a Visual style of the VAK and a Kinesthetic style of the VARK. Based on the results, this study offers pedagogical and research implications.

Chapter 9: *Strengthening Collaborations among School, Family, and Community to Prevent Cyberbullying*; by Michelle Dusko Biferie & Johanna Sam. The most promising anti-cyberbullying interventions are rooted in high quality interactions across individual, school and family spheres. This literature review uses Epstein's school-family-community spheres of influence theory to identify areas for improvement and future research in school and community relations to address cyberbullying. Articles were selected from Google Scholar, EBSCO, and PsychInfo and published between 2010 and 2025. The most effective approaches to engaging with youth rely on building trust in adults and for youth to share their knowledge and lived experiences. School authorities and teachers advocated increasing their knowledge and understanding of cyberbullying interventions, clearer policies, and prioritizing student safety and increased communication between all stakeholders. School counsellors, nurses and psychologists expressed

the need for inter-and-intra professional collaboration. Studies showed that parental involvement in the design, planning and implementation of initiatives reduced cyberbullying incidents. There was a dearth of studies that explained how collaborations should occur and the responsibilities of all stakeholders. The most salient recommendations were: 1) schools need to create a welcoming environment for parents; 2) parents should adopt the educational and monitoring habits recommended by the school; 3) communities and community agencies need to allocate resources to supporting families in navigating digital spaces safely.

Chapter 10: *Democratic School Culture and Student-Teacher Relationships: Insights for Immigrant-Background Students*; by Igor Peras. Relationships between students and teachers are central to academic success and psychological well-being, yet perceptions of these relationships can differ across student groups. Immigrant-background students are often at risk of less positive relationships than their native peers due to language and acculturation challenges. Positive student-teacher relationships can, however, function as a protective factor by supporting inclusion, social engagement, and a sense of school belonging. Drawing on data from the International Civic and Citizenship Education Study (ICCS), the present study examines how aspects of democratic school and classroom culture—openness in classroom discussions, perceived influence on school decision-making, participation in civic activities, peer interactions, and civic learning—are associated with perceptions of student-teacher relationships among immigrant-background students in Slovenia and Croatia, two neighboring countries that differ in the proportion of students with an immigrant background. In both countries, results show that peer interactions and perceived influence on decision-making are robust positive predictors of student-teacher relationships, whereas openness in classroom discussions and participation in civic activities differ between countries. Findings are discussed through the lens of fostering positive perceptions of student-teacher relationships for immigrant-background students.

Chapter 11: *Printmaking Art Applications for Children with Special Needs*; by Eda Yazgin & Yucel Yazgin. In applications where art is used as a psychoeducational intervention method in schools with various techniques. This study aimed to determine the application levels of simple printmaking techniques applied by children with special needs during art activities and to guide special education teachers and families while performing these applications with children through the results of this study. The research was conducted with 40 children who were receiving education in a special education center in Nicosia, selected by the purposeful sampling method. The research method is qualitative research and has a case study design. The data were analyzed in 5 categories: simple printmaking, techniques that children can do without needing support, they need support for, what kind of support they need, their reactions to the drawing activity, and whether the application tells its story. As a result, it was determined that children can

perform techniques that they apply with direct contacts, such as hand printing, without needing support, that they need support in techniques such as citrus printing, that they need more support such as modeling, that they participate in activities with pleasure, and that they use mostly emotional nonverbal expressions in telling their stories due to their language developmental disabilities.

Section 3, entitled “Social Psychology”, gives a glance at projects from a psycho-social perspective.

Chapter 12: *Cross-National Comparison of Behavioral Immune Sensitivity in Japan, Malaysia, and the Philippines*; by Yasuyuki Fukukawa. This study aimed to investigate the characteristics of the human behavioral immune sensitivity by comparing its attributes across three Asian countries: Japan, Malaysia, and the Philippines. A total of 1,055 university students completed paper-based questionnaires, including the Perceived Vulnerability to Disease Questionnaire (PVD-Q), the Death Anxiety Scale, and a self-assessment of current health status. Across all national groups, females scored significantly higher than males on the germ aversion subscale of the PVD-Q, which measures affective discomfort in contexts with heightened pathogen transmission risk. Furthermore, participants in tropical regions (Malaysia and the Philippines) exhibited significantly higher germ aversion scores compared to those in Japan, a country predominantly situated in a temperate climate zone. In contrast, no significant sex or regional differences were observed on the perceived infectability subscale of the PVD-Q, which assesses individuals’ beliefs about their susceptibility to infectious diseases. Perceived infectability was strongly associated with current health status but only partially related to fear of death, whereas germ aversion was positively associated with fear of death but unrelated to health status. These patterns of association were generally consistent across the countries.

Chapter 13: *The Role of Maternal and Paternal Autonomy Support in Young Adolescent Alcohol Consumption*; by Oľga Orosová, Mária Bačíková-Šlěšková, & Beata Gajdošová. Self-esteem (SE), descriptive normative beliefs (DNB), and alcohol availability (AA) have been identified as salient gender-specific risk factors for alcohol use (AU) among young adolescents. However, empirical research examining dyadic associations between maternal and paternal autonomy support and adolescent AU, both directly and indirectly via these risk factors, remains limited. The present study therefore investigated the relationships among perceived parental autonomy support, SE, AA, DNB, and lifetime AU using parallel mediation analyses in a sample of 1,125 adolescents (M age = 12.99, SD = 0.77; 50.1% girls). Among boys, maternal autonomy support was associated with higher SE but not with AU, whereas paternal autonomy support was indirectly associated with a lower likelihood of AU through higher SE and less favorable DNB regarding peer drinking. Among girls, both maternal and paternal autonomy support were indirectly associated with a lower likelihood of AU. Specifically,

maternal autonomy support was linked to higher SE and lower AA, which were in turn related to reduced odds of AU. Similarly, paternal autonomy support was associated with lower AA and less favorable DNB, both of which were linked to a decreased likelihood of AU. These findings underscore the importance of parenting and perceived social context in adolescent alcohol-related behavior.

Chapter 14: *Hate, Equality, or Neutrality? Psychological and Moral Determinants of Political Speech Preferences*; by Medea Despotashvili. This study examines voters' perception of hate language in political communication by investigating its psychological, moral, and demographic correlates. Using a sample of 706 participants from Georgia, the study explores how variables such as cognitive style, moral foundations, emotional reactivity, intellectual humility, and social comparison influence attitudes toward political speeches containing hate language, equality-oriented language, or neutral discourse. Results reveal that individuals with higher cognitive openness, intellectual humility, and individualizing moral foundations are less accepting of hate speech. Conversely, those with closed-mindedness, and binding moral foundations demonstrate greater tolerance for hate-based rhetoric. Evaluation patterns varied by gender, generation, and education, reflecting broader socio-cultural dynamics. The findings underscore the importance of cognitive, emotional, and moral dimensions in public receptivity to divisive political narratives and offer theoretical implications for mitigating hate language through education, critical thinking, and moral engagement.

Chapter 15: *Identity, Religion, and the Politics of Khawa-Khawa: Algerian Children's Perceptions of Coexistence with Refugees*; by Sarra Boukhari & Justine Howard. This chapter explores how Algerian children sharing spaces with refugee children imagine and negotiate questions of coexistence, belonging, and diversity in a national context marked by colonial memory, religious heritage, and contemporary migration. Drawing on an arts-based participatory study in three public schools in eastern Algeria, it examines how children frame coexistence through everyday practices and moral geographies. Guided by Sociocultural theory and Social-Cognitive Developmental Theory, the chapter considers how children develop understandings in response to their environments and shared narratives. Play emerged as a rich terrain for ethical negotiation, where inclusion was expressed through invitations to games and acts of sharing, and exclusion was marked by denying access to communal spaces. Younger children tended to frame inclusion through immediate, relational gestures, while older children engaged more critically with inherited discourses and structural inequalities. These varied responses invite a closer look at how children's reasoning is shaped not only by developmental factors but also by religious, historical, and national influences. Rather than provide a definitive account, the chapter introduces children's perspectives as complex and evolving, offering insights into how coexistence is imagined, contested, and sometimes resisted within the everyday moral worlds of childhood.

Section 4, entitled “Health Psychology”, focuses on how biological, social and psychological factors can influence health.

Chapter 16: *The Japanese Version of the Brief Resilience Scale - Translation, reliability and construct validity*; by Katsunori Sumi. Resilience as a positive psychological construct has recently attracted considerable attention. However, a consensus on the definition of resilience has not yet been reached; as a result, numerous measures have been developed to address this concept. This study examined the reliability and construct validity of a new Japanese translation of the Brief Resilience Scale (BRS-J) to assess the ability to bounce back or recover from stress, an important conceptualization shared by many definitions of resilience. Data were collected from 276 college students in Japan (40.1% women; mean age 20.81 years, SD = 0.67). Although exploratory factor analysis revealed a one-factor structure with all items, confirmatory factor analysis supported a bifactor structure with a general resilience factor and a method factor for negatively worded items. The internal consistency reliability and test-retest reliability over a 1-month period were good. Construct validity was supported by the hypothesized correlations with scores for three types of dispositional coping, grit, hedonic and eudaimonic well-being, perceived stress, depression, and anxiety. These preliminary findings support the idea that the BRS-J is a valid measure of resilience among Japanese-speaking people.

Chapter 17: *Preventive Psychology in Refugee Mental Health - Trust-building between traumatized individuals, experts, and responsible authorities*; by Solvig Ekblad, Oksana Gramatik, & Yuliia Suprun. The full-scale invasion of Ukraine on February 24, 2022, led to an unprecedented refugee crisis in Europe, necessitating the development of effective preventive psychological support strategies. In response, a trauma-focused group intervention program called "Hälsoskola" (in Swedish) was developed and implemented for 100 Ukrainian refugees in Sweden, predominantly women. The program, grounded in trauma-informed principles, aimed to create a framework for building trust in dialogue and for cultural sensitivity. Over five weeks, participants met with local experts to discuss topics of stress management, somatic and mental health literacy, human rights, employment, and social support. The results showed that the face-to-face dialogue between the participants' needs and the experts' responses was promising, leading to increased trust and somatic and mental health literacy. We provide a key concept in the field of trauma and explain how a participatory approach can be used to develop tailored “Train-the-trainers” programs for refugees of various origins. The book chapter also considers the key challenges associated with assisting refugees, including methodological and ethical difficulties such as language barriers, cultural differences, ensuring informed consent, and community involvement.

Section 5, entitled “Psychoanalysis and Psychoanalytical Psychotherapy”, presents chapters that report on different approaches and methods to treat mental health concerns.

Chapter 18: *Contemporary Vicissitudes of the Oedipus Complex in Adolescence*; by Sonia Alberti, Luciana Ribeiro Marques, Heloene Ferreira da Silva, & Priscila Möhlmann. This study explores contemporary expressions of sexuality through the theoretical articulation of the Oedipus and Castration complexes. Drawing on data from the Ambulatory for Transgender Care at a public university hospital and clinical observations with five adolescents, it examines how unconscious determinations operate in current experiences of adolescence. The research is organized around three axes. The first is theoretical, based on a psychoanalytic reading of adolescence as a crucial moment in the structuring of sexual difference and subjective identity, revisiting Freud and Lacan to question binary identifications. The second is clinical, presenting five vignettes that illuminate how adolescent sexuality – intersected by issues of identity and self-construction – challenges and reaffirms psychoanalytic conceptions of sexuality. The third axis emphasizes the enduring relevance of classical psychoanalytic concepts in addressing new forms of subjectivity emerging today. By linking the Oedipus Complex to the theory of castration, the study highlights how psychoanalysis remains capable of interpreting experiences that were not visible in Freud’s time, reaffirming its theoretical and clinical vitality in contemporary contexts.

Chapter 19: *Drive for Research in Psychoanalysis*; by Boris Kordić & Violeta Tadić. Freud distinguished between the drive for self-preservation and the drive for the preservation of the species, and later between the life and the death drive. Between 1908 and 1915, he wrote about *Wissbegierde* (the greed to know), but left the question of the instinctive longing for knowledge unresolved for two reasons: (a) what kind of satisfaction is connected with *Wissbegierde*; (b) how to reconcile passion and impartiality in the search for truth. Our aim is to determine whether there are arguments for accepting the hypothesis of a drive for research. If we have a theory of the development of libido (oral, anal, urethral, phallic), then what could constitute the development of the drive for research? We propose Winnicott’s theories of development from the subjective object, through the transitional object, to the objective object. We could say that the prototype of the K (Bion’s term) relationship is the mother–child relationship, while the exemplar is the analyst–analysand relationship in the psychoanalytic situation. Thus, the drive for research can be understood as a key personal motive in psychoanalysis, which strives to achieve a mature object relationship through object permanence, just as love is an expression of the development of the libido.

Section 6, entitled “Cognitive Experimental Psychology”, delivers chapters concerning, as the title indicates, studies and research in the area of behavior regarding cognitive aspects

Chapter 20: *Priced and Pressed: Employed Females’ Coping Strategies for Thriving Amidst Challenges in a Demanding World*; by Heleen Dreyer, Minnet Du Preez, Neoline Le Roux, Annemie Niemann, Nastasha Sousa, & Valentia Mouton. Financially empowered women play vital roles in supporting their families and communities, contributing to broader societal benefits, including improved education, better health outcomes, and reduced child mortality. Employed females (EFs) face the challenge of balancing work, household responsibilities, and other commitments, which can impact their overall well-being. This study explores the challenges EFs encounter and the coping strategies they adopt, particularly during purchasing decision tasks. The results presented were part of a larger research project that included similar independent qualitative and quantitative studies. An exploratory qualitative study involved four EF focus groups that identified and described challenges and coping strategies until data saturation was achieved. Furthermore, an exploratory quantitative study (N = 255) was conducted among EFs using online questionnaires, providing descriptive insights. Across both phases, time and financial constraints emerged as the primary challenges. While many EFs utilised adaptive coping strategies—such as seeking support, planning purchases, and shopping online—some resorted to less sustainable behaviours, including overpaying for convenience, relying on fast food, and exhibiting fight-or-flight responses. These findings underscore the need for strategies that foster psychological well-being, potentially enhancing EFs’ ability to manage stress, maintain productivity, and strengthen self-efficacy, ultimately supporting psychological and social well-being.

Section 7, entitled “Legal Psychology”, focuses on issues that arise within the legal system and the law.

Chapter 21: *Resistance to those Harmful Comments: How Métis youth resist and cope with online hate*; by Johanna Sam, Michelle Dusko Biferie, Daniel Gallardo, Sabrina Forcier, Rachel Hussey, Claire Hein-Salvi, Haoyu Zhao, Jennifer Shapka, & Jan Hare. Understanding how Indigenous youth cope with negative online experiences remains largely unexplored. In this study, the concept of the warrior, as articulated by Alfred (2005), serves as a metaphor for resilience, strength, and courage. The objective of this study was to honour the voices of Indigenous youth and to understand how they navigate the challenges of online hate as “warriors” in a digital world. All four participants self-identified as Métis or First Nations and resided in British Columbia, Canada and were between the ages of 18 to 21 years of age. In sharing circles, youth created an online empathy map to collaboratively develop a persona or narrative representative of their experiences. The ‘Online Warrior’ identity involved standing up for oneself, practicing self-care, and using

Foreword

social media to promote positive messages about Indigenous culture and people. Indigenous youth actively engaging in cultural revitalization by defending and honoring their Indigenous ways of knowing. Study findings highlight the need for support from emotional connections with family and peers. A need for educational support to help navigate online life in a balanced way and the importance of social and emotional learning programs that emphasize community, cultural identity, and resilience were also emphasized.

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Section 1
Clinical Psychology

Chapter # 1

A QUALITATIVE EXPLORATION OF STRESS AND SUPPORT AMONG IN-SERVICE TEACHERS AND PROSPECTIVE TEACHERS

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ABSTRACT

This qualitative study aims to explore the main sources of stress and support among teachers in practice and prospective teachers, as well as the quality of their interpersonal relationships using ecomaps. Focus group interviews were conducted with 25 in-service teachers (mean age = 44.9 years, 84 % of women) and 38 prospective teachers (mean age = 23.1 years, 79 % of women) from the Pavol Jozef Šafárik university in Košice and local schools. Results indicate that teachers in practice primarily experienced stress related to workload, student behavior, administrative demands, and the Covid-19 pandemic. Prospective teachers reported stress linked to academic pressure, identity formation, and concerns about the future. Sources of support included interpersonal relationships and inner coping resources. Ecomap analysis revealed that most relationships were supportive, with a notable proportion being ambivalent, reflecting the complex nature of social interactions in education. The findings offer insight into developing targeted support strategies for current and future educators, emphasizing the importance of relational and systemic support structures in educational settings.

Keywords: stress, support, in-service teachers, prospective teachers, ecological system.

1. INTRODUCTION

Stress significantly affects teachers' effectiveness, job satisfaction, risk of burnout, attrition, and overall well-being, with consequences for student learning and engagement (Shernoff, Mehta, Atkins, Torf, & Spencer, 2011). Compared to other professionals, teachers consistently report higher levels of physical and psychological problems (Johnson et al., 2005; Kidger et al., 2016; Scheuch, Haufe, & Seibt, 2015; Stansfeld, Rasul, Head, & Singleton, 2009). Studies identify workload, time pressure, classroom management, administrative demands, and role ambiguity as key stressors (Kyriacou, 2001). More recent findings highlight that the Covid-19 pandemic intensified these pressures, with online teaching, blurred work-life boundaries and shifting regulations creating additional burdens. Teachers reported increased burnout, sleep and eating problems, alcohol use, career-change considerations, and worries about student welfare (Stang-Rabrig, Brüggemann, Lorenz, & McElvany, 2022; Sigursteinsdóttir & Rafnsdóttir, 2022; Minihan et al., 2022; Robinson et al., 2022). These findings point to the need for updated research on teacher stress and support in the post-pandemic period.

For prospective teachers, stress arises from academic pressure, identity formation, and the transition from theory to practice. These tensions often lead to feelings of self-doubt, frustration, or helplessness (Pillen, Beijaard, & den Brok, 2013). Recent studies during and after the pandemic documented heightened levels of stress, anxiety, depressive symptoms,

and uncertainty among university students preparing for teaching careers (Son, Hegde, Smith, Wang, & Sasangohar., 2020; Barbayannis et al., 2022; Skaalvik & Skaalvik, 2021).

Research shows that sources of social support, whether interpersonal, institutional, or internal, play a key role in mitigating stress (Collie, 2023). In this context, ecomaps provide a useful methodological tool to capture relational dynamics and visualize the balance between stressors and support within teachers' ecological systems (Nastasi, Borja, & Summerville, 2018; Bennett & Grant, 2016; Manja, Nrusimha, MacMillan, Schwartz, & Jack, 2021).

By integrating both in-service and prospective teachers, this study addresses an important gap in the literature, which often focuses either on novice teachers at the beginning of their careers or on generalized stress factors without differentiating stages of professional development. Examining similarities and differences across these groups provides a more comprehensive understanding of stress and support in post-pandemic educational context and can inform more targeted and context-sensitive support strategies.

2. OBJECTIVES

The aim of this study is: 1) to explore the main sources of stress and support that teachers and prospective teachers experience, and 2) to examine the quality of teachers' and prospective teachers' relationships mapped through their ecosystem.

3. METHODS

3.1. Research Sample

Firstly, data from teachers were obtained as part of an international research project. In this part, four focus groups were created based on a request from Pavol Jozef Šafárik University to participate in the research. Twenty-five teachers from four schools (two primary schools, two secondary schools) in the Košice region participated. The average age of teachers was 44.9 years, with the average years' experience = 18.4 years, with a higher representation of women ($n = 21$; 84 %).

Secondly, the data has been extended with a sample of prospective teachers. Data from four focus groups of prospective teachers were obtained. Therefore, the focus interviews were attended by 38 master's degree students in teaching fields. The average age of prospective teachers was 23.1 years; 15 students completed teaching practice ranging from 32 to 40 hours. In the group of prospective teachers, there were 30 women (79 %) and 8 men (21 %).

3.2. Research Design

This study involves two qualitative data collections. The first data collection was part of the International School Psychology Association (ISPA) research project 'Global perspectives on teachers' wellbeing and mental health following the COVID-19 pandemic.' This research sample was expanded to include prospective teachers at master's degree in teaching fields from Pavol Jozef Šafárik University in Košice. Data were obtained from April to May 2023 (groups of teachers) and from October to November 2023 (groups of prospective teachers). The respondents were selected based on availability and participated in the research voluntarily. All the collected data was anonymized. The research was approved by the local Ethics Committee.

During the realization of focus group interviews with teachers, the ISPA international research protocol was followed, included 15 questions divided into three areas: 1) general questions (e.g., "What is well-being?"), 2) questions about stressors and support (e.g., "How

do you know when you are feeling stressed?”), and 3) questions about challenges in teaching and discipline (e.g., “What is your approach to teaching?”). After 45-60 minutes of the interview, the ecomap activity followed. This included drawing an ecomap and marking supportive, stressful, and both (supportive and stressful) relationships with suggestions from the ecomap (Nastasi et al., 2018).

In focus groups of prospective teachers, 10 questions were discussed, divided into two areas: 1) general questions, and 2) questions about stressors and support. The wording of the questions was identical to the questions in the focus group of teachers. Interviews were also followed by an ecomap activity.

In this study, the results of questions in the second area, questions about stressors and support, as well as results related to ecomaps, are presented.

3.3. Data Analysis

3.3.1. Analysis of Focus Group Interviews

According to Braun and Clarke (2006, 2013), we applied the six-step approach to thematic analysis. First, all focus group interviews were transcribed and preliminary concepts noted. Second, an inductive-deductive coding process was conducted in ATLAS.ti. Third, codes were organized into potential themes, and in the fourth step these were reviewed and refined to ensure coherence with the data. In the fifth step, themes and subthemes were finalized and described in detail by two researchers. Finally, in the sixth step, data extracts were selected linked to research questions, and their broader implications were discussed. Data were analyzed and presented without the use of false, incorrect statements, or erroneous interpretations.

3.3.2. Analysis of Ecomaps

Ecomaps were analyzed quantitatively and qualitatively. For each participant, the number of relationship types, support sources, stress sources, and sources of ambivalent relationships were calculated. The stress-support index (SSI) was calculated by assigning numerical values to each relationship: 1 for support, 1.5 for ambivalence, and 2 for stress. These values were summed and divided by the total number of sources in the ecomap (Nastasi et al., 2018). The qualitative themes were then identified based on the responses provided by the teachers and prospective teachers, and the consensus of three assessors specializing in psychology (Tennant, Li, Kruger, & Leite, 2018).

4. RESULTS

4.1. Sources of Stress among In-Service Teachers and Prospective Teachers

Three main themes were identified in the group of in-service teachers, with a total of nine subthemes. The three main themes were “*work and working conditions*”, “*the Covid-19 pandemic*” and “*additional stress sources*”. In the group of prospective teachers, two themes were identified, with a total of two subthemes. The main themes were “*university*” and “*personal and professional challenges*”. Themes related to teachers' and prospective teachers' sources of stress are presented in Table 1.

Sources of stress among in-service teachers

Theme 1: *Work and working conditions* are the main sources of stress for teachers. As part of their work, they experience time pressure related to administrative work and extracurricular activities (participation in student competitions), which represents an increased burden for teachers. Furthermore, challenges such as student behavior and

motivation, as well as difficult relationships with colleagues and parents, contribute significantly to the stress faced by teachers

Theme 2: *The Covid-19 pandemic* represents a specific period during which the level of stress and workload have increased for teachers. Although the pandemic has ended, teachers continue to reflect on the challenges they faced during this period, such as technical difficulties and confusion caused by constantly changing rules. The stress associated with online teaching and the ambiguity of pandemic-related guidelines left teachers feeling uncertain and overwhelmed.

Theme 3: *Additional stress sources* of stress described factors such as work-life balance, health problems, and social and political pressures. Although these were perceived as less significant sources of stress, they still contributed to the general levels of stress of teachers. The challenges of balancing professional and personal responsibilities, dealing with health-related concerns, and managing external pressures from social and political factors added to the stress of teachers.

Sources of stress among prospective teachers

Theme 1: *University* is a major source of stress for prospective teachers. Heavy workloads, strict academic demands, frequent exams, and public presentations contribute to feelings of overwhelm. Students often experience performance anxiety and burnout, especially during exam periods, when emotional tension can lead to sleep disturbances and even physical symptoms.

Theme 2: *Personal and professional challenges* arise from both everyday responsibilities and long-term career concerns. Poor time management, procrastination, and the pressure to meet high personal standards are common stressors. Additionally, worries about their future effectiveness as teachers and how they will handle real classroom situations contribute to stress linked to their emerging professional identity.

Table 1.
Sources of stress among in-service teachers and prospective teachers.

Group	Themes	Subthemes	Citations (examples)
Teachers	1. Work and working conditions	1.1 Time pressure, administrative burden, and extracurricular activities 1.2 Student behavior and motivation 1.3 Interactions with colleagues 1.4 Students' parents	"And for example, my stressor is that I personally don't like doing paperwork, there's more and more of it, and I always tell myself I'll do it continuously, so I won't be under time pressure later, but I never manage. This is the only minus point for me – that I can't manage this in a way that it wouldn't cause me stress. I always have it."
	2. The Covid-19 pandemic	2.1 Online teaching and technologies in education 2.2 Chaotic and unclear regulations	"Just the whole Covid situation was stressful for everyone. And very much to us teachers, because we had to learn how to teach online."
	3. Additional stress sources	3.1 Work-life balance 3.2 Health and health problems 3.3 Social and political factors	"Exactly from the government, the state, comes a message that 'tomorrow it must be done.' And that's for me something like – maybe I won't manage it, or I won't do it well."

Group	Themes	Subthemes	Citations (<i>examples</i>)
Prospective teachers	1. University		"...for me, the stressor is the given teacher, examiner..." "Exam period."
	2. Personal and professional challenges	2.1 Individual stressors 2.2 Professional stressors	"Just in general, the future – what it will be like when we're actual teachers, whether we'll even have free time. So I'm stressed about that, for example."

4.2. Sources of Support Among In-Service Teachers and Prospective Teachers

Three main themes were identified in the group of in-service teachers, with a total of five subthemes. The three main themes were “*interpersonal relationships*”, “*individual coping strategies*” and “*work and working conditions*”. In the group of prospective teachers, also three themes were identified, with a total of five subthemes. The main themes were “*interpersonal relationships*”, “*individual coping strategies*” and “*university and practice*”. Themes related to teachers' and prospective teachers' sources of support are presented in Table 2.

Sources of support among in-service teachers

Theme 1: *Interpersonal relationships* are a crucial source of support for them, particularly those within the school, family and teacher-student interactions. Relationships within the school provide emotional and professional support, especially during challenging times. In addition, family relationships provide emotional relief and guidance, while teacher-student relationships can also provide motivation and fulfillment through personal connections.

Theme 2: *Individual coping strategies* represent a teacher's hobbies which provide a mental break from their daily routines, helping them recharge and reduce stress. In addition, inner resources, including personal reflection, connection with nature, and spiritual support, offer teachers the strength to cope with challenges and maintain a sense of balance during difficult times.

Theme 3: *Work and working conditions* were also identified as a theme of teachers' support. For some of them, their work is more than just a job, it is a source of personal fulfillment. The sense of purpose is derived from teaching and interactions with students and colleagues, even during challenging moments. Despite physical exhaustion or stress, teachers find that being in the classroom energizes them and helps them overcome personal difficulties or pains.

Sources of support among prospective teachers

Theme 1: *Interpersonal relationships* play a vital role in maintaining well-being of prospective teachers. Family members, especially parents, often provide comfort, encouragement, and reminders to take care of themselves. Friends and peers help by sharing similar experiences, which reduces feelings of isolation and helps normalize stress.

Theme 2: *Individual coping strategies* of support include leisure activities, inner coping mechanisms, and comfort eating. Physical activities like running or walking help reduce tension, while routines such as hot showers or time in nature promote emotional balance. Prospective teachers also rely on self-talk, prayer, and maintaining perspective. Occasionally, sweets or warm drinks offer quick emotional relief during stressful moments.

Theme 3: *University and practice* are also a source of support, especially through positive interactions with mentor teachers and practical teaching experiences. When supervising teachers offer reassurance and constructive feedback, students feel more confident and validated, which helps reduce stress and build a sense of competence.

Table 2.
Sources of support among in-service teachers and prospective teachers.

Group	Themes	Subthemes	Citations (examples)
Teachers	1. Interpersonal relationships	1.1 Colleagues and school management 1.2 Family 1.3 Pupils	"...for me it's very important that I have people around me, not only at home but also at work, who know how to listen to me, who know how to support me when I'm sad, even praise me – whether colleagues or the leadership. I think it's very important that when you do something, you see the feedback..."
	2. Individual coping strategies	2.1 Hobbies 2.2 Inner sources and spiritual support	"...read some books or go for a walk outside, change the activity for a while. Not to stay in that cycle..."
	3. Work and working conditions		"But I realize that even when I get up in the morning and I'm tired and I go to work – but once I'm with the students, it actually energizes me, boosts me, I function somehow, even just fine on a Friday during the seventh lesson. And then I get home – and that's it."
Prospective teachers	1. Interpersonal relationships	1.1 Family 1.2 Friends and classmates	"...conversation, rest, and maybe when it comes to the conversation, it always calms me when I realize that others, like my classmates or friends, are dealing with the same thing I am."
	2. Individual coping strategies	2.1 Hobbies 2.2 Inner sources and spiritual support 2.3 Food	"I go running. And the more nervous I am, the more I run." "...a hot shower." "...to replenish sugar, so I get some energy..."
	3. University and practice		"...it really calms me when the examiner calms me down, tells me it's no big deal, that it's okay, and then it's just like nothing. That everything's fine. So the stressor then becomes something positive for me."

4.3. Quality of In-Service Teachers' and Prospective Teachers' Relationships

Table 3 presents an overview of the types of interpersonal relationships mapped in the ecosystem of in-service teachers and prospective teachers, categorized as supportive, stressful, or ambivalent.

Among both groups, the majority of relationships were identified as supportive (60.4 % among teachers and 58.7 % among prospective teachers, indicating a generally positive social environment. Ambivalent relationships, representing mixed or uncertain feelings, accounted for 29.6 % in both groups, suggesting that nearly one-third of interactions are perceived as helpful and challenging at the same time. Stressful relationships were less frequent, reported by 10 % of teachers and 11.7 % of prospective teachers.

The Stress-support index (SSI) values were similar between groups: 1.24 for teachers and 1.23 for prospective teachers, indicating that both groups operate within a relatively supportive social network, with only moderate levels of relational stress.

Table 3.
Types of relationships and Stress-support index.

Group	N	Supportive relationships n (%)	Stressful relationships n (%)	Ambivalent relationships n (%)	SSI
In-service teachers	159	96 (60.4 %)	16 (10 %)	47 (29.6 %)	1.24
Prospective teachers	351	206 (58.7 %)	41 (11.7 %)	104 (29.6 %)	1.23

Notes: SSI – Stress-support index

In Table 4 is presented the distribution of supportive, stressful and ambivalent relationships across various themes identified in the ecomaps of teachers and prospective teachers. The themes include people, places, activities, things, values, pets, events, faith, and others.

The first theme, *people*, was a frequent source of supportive and ambivalent relationships. Teachers reported 37 supportive and 24 ambivalent relationships, while prospective teachers noted 45 supportive and 33 ambivalent relationships, indicating the complexity of interpersonal connections in educational environments.

The theme *activities* emerged as another major source of supportive relationships in both groups, particularly among prospective teachers (n = 68). However, it also included a notable number of stressful (n = 18) and ambivalent (n = 23) relationships, indicating that engagement in activities (e.g., hobbies, sports, relaxation routines) serves as a key support mechanism, though it may also be linked to pressure or conflicting emotions.

Places were identified as meaningful relational contexts, especially for prospective teachers, who reported 36 supportive and 22 ambivalent relationships. For both groups, *values* and *faith* were recognized as internal sources of support, with no reported stress. Interestingly, *events* (e.g., parental meetings) were mentioned only by teachers and were associated with stress. This may reflect the formal and often evaluative nature of such events in a teacher's professional environment.

Table 4.
Types of relationships by identified themes in the ecosystem.

Themes	In-service teachers			Prospective teachers		
	Supportive n	Stressful n	Ambivalent n	Supportive n	Stressful n	Ambivalent n
People	37	3	24	45	1	33
Places	19	2	10	36	14	22
Activities	19	3	9	68	18	23
Things	3	0	0	13	1	4
Values	5	2	1	26	6	19
Pets	3	0	0	12	0	2
Events	5	5	2	0	1	0
Faith	2	0	0	6	0	1
Others	3	1	1	0	0	0

5. DISCUSSION

This study provides an in-depth exploration of stressors and sources of support among in-service and prospective teachers, with particular attention to the post-pandemic context and show that while both groups experience high levels of stress, the nature of their stressors and coping strategies differs.

For in-service teachers, workload, administrative demands, student behavior, and lingering effects of the Covid-19 pandemic were the most salient stressors. These results align with earlier research on role overload and classroom management (Kyriacou, 2001; Shernoff et al., 2011), but they also echo recent studies showing that working conditions continued to deteriorate after the pandemic, with increased classroom disruptions and declining trust between teachers, parents, and school leaders (Baker & Koedel, 2025). Psychological consequences are also well documented: in large surveys, up to three-quarters of school staff reported moderate to severe stress, with high rates of anxiety, depression, and intentions to leave the profession (Cavallari et al., 2025). At the same time, in-service teachers in our study drew on professional maturity, using colleagues, pupils, and families as relational support while relying on hobbies, spirituality, and nature as internal resources. Seeing teaching itself as a meaningful and energizing activity reflects resilience, though it coexists with chronic systemic stressors.

Prospective teachers, in contrast, described stressors more directly linked to academic demands and identity formation. They reported pressure from examinations, evaluations, and practicum performance, together with uncertainty about their readiness for future teaching roles. These stressors reflect the developmental tensions of early professional socialization (Pillen et al., 2013) and are consistent with studies documenting heightened anxiety and depressive symptoms among university students during and after the pandemic (Son et al., 2020; Barbayannis et al., 2022). Our findings show that their coping strategies were more situational, such as comfort food, exercise, or peer reassurance, reflecting a repertoire that is still emerging. Importantly, prospective teachers perceived the university both as a stressor and as a source of support, particularly when mentoring and constructive feedback were available. This resonates with recent qualitative studies emphasizing the importance of embedding stress-management, mindfulness, and self-care training into teacher education programs (Zito et al., 2024).

The ecomap analysis highlighted further contrasts. In-service teachers identified specific professional interactions, such as meetings with parents, as ambivalent sources of both support and stress, reflecting the evaluative nature of such encounters. Prospective teachers, however, emphasized “places” and “values” as important supportive anchors, indicating their reliance on broader environmental and personal resources outside of professional practice. Both groups reported predominantly supportive networks, but the relatively high proportion of ambivalent relationships points to the complexity of social interactions in education and the need to strengthen positive ties.

Overall, the comparison demonstrates that while both in-service and prospective teachers share vulnerability to stress, the underlying mechanisms differ. In-service teachers face systemic and chronic stressors tied to workload and organizational demands, but they benefit from established support networks and professional identity. Prospective teachers, on the other hand, struggle with transitional and identity-related stressors and rely on less developed coping strategies.

The methodological approach, combining focus groups with visual mapping, provided a layered understanding of how stress and support manifest in different ecological domains, fulfilling the call for more context-sensitive research in psychology.

5.1. Limitations

The qualitative design and geographically limited sample restrict generalizability. Participants were selected by availability, and group dynamics of focus interviews may have influenced openness of responses. Findings may also reflect the post-pandemic context and time during the school and academic year in which data were collected. Despite these limits, strengths lie in the combined research approach, focus groups, and ecomap analysis. Including both teachers and prospective teachers offers a unique comparative perspective across different stages of the teaching trajectory.

5.2. Future Research Directions

Longitudinal research should examine how perceptions of stress and support evolve during critical academic periods and career transitions (from training to the early years of practice). Cross-cultural studies are also needed, as research across different countries may reveal both specific and universal sources of stress and support, offering broader insights into how educational and social contexts shape teachers' and students' experiences. Quantitative approaches should complement qualitative findings by analyzing links between stressors, support systems, and contextual variables. Finally, future research should consider how individual characteristics (e.g., gender, age, teaching experience, personality) interact with institutional and contextual factors in shaping stress and coping.

6. CONCLUSION

This study highlights the importance of differentiated interventions for in-service and prospective teachers. For in-service teachers, support should target systemic and organizational changes. Reducing administrative burdens, strengthening collegial collaboration, and ensuring access to mental health resources are essential. School leaders play a pivotal role, and leadership training should emphasize autonomy-supportive, relational, and emotionally responsive practices, which improve teacher well-being and reduce turnover intentions.

For prospective teachers, interventions should be embedded in teacher education programs. Structured mentoring and constructive feedback during practicum can ease performance anxiety, while training in stress management, resilience, and self-care can strengthen coping.

While both groups experience stress, their stressors and resources differ. Tailored interventions, systemic reforms for practicing teachers and developmental support for future teachers, are crucial for safeguarding well-being, strengthening professional identity, and reducing attrition. Addressing these distinct needs can foster more resilient and fulfilling careers in teaching.

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Chapter # 2

THE SAVIOR-RESCUER PARADOX: NAVIGATING RECOVERY AND RELAPSES AMONG PEER SUPPORTERS IN DRUG ADDICTION TREATMENT

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ABSTRACT

This study explored the experiences of relapse and recovery among peer supporters recovering from drug addiction. While relapse has been extensively studied in general, limited attention has been paid to individuals in recovery who simultaneously support others while facing their setbacks. Participants were 13 trained men and women with histories of addiction and criminality who held formal peer support roles in therapeutic settings for drug recovery in Israel. Data were collected through semi-structured, in-depth interviews and analyzed using thematic content analysis. Key findings indicate that disengagement from 12-step programs and recovering peer networks often precedes relapse, illustrating the “savior-rescuer” paradox. While empowering, the dual identity of peer supporters with troubled pasts exposes unresolved personal issues that undermine recovery. Nevertheless, when effectively processed, the relapse experiences can foster greater resilience and strengthen one’s commitment to recovery. These findings frame relapse not as a failure but as a potential learning opportunity, underscoring the importance of social and recovery capital in sustaining long-term recovery. Grounded in the convict therapy perspective, the study contributes to a deeper understanding of relapse dynamics and offers practical insights for relapse prevention in addiction recovery.

Keywords: peer support, convict therapy, positive criminology, drug addiction, recovery, 12-step program.

1. INTRODUCTION

In recent years, peer-based programs, also known as peer work or peer-to-peer support, have been increasingly recognized as strengths-based interventions in criminology and addiction recovery. These initiatives, led by reformed individuals with lived experiences of crime, addiction, and incarceration, foster rehabilitation by transforming personal struggles into sources of empowerment and social inclusion (Elisha, 2022; Sells et al., 2016). Implemented across prisons and community settings worldwide, peer-based interventions designed to assist individuals seeking life change and recovery (LeBel, Richie, & Maruna, 2015; Perrin, 2022). By promoting prosocial attitudes and behaviors, peer support enhances the likelihood of long-term recovery and desistance for both aid providers and recipients (Buck, 2021; Maruna, 2001; White, 2000; White & Evans, 2013).

Peer support encompasses mentoring, counseling, and guidance, utilized by reformed individuals to support others' rehabilitation efforts (Bellamy, Rowe, Benedict, & Larry, 2012; Buck, 2021). This approach aligns with the developing framework of Convict Therapy (Elisha, 2023), which integrates theories of desistance and positive criminology to highlight the role of “wounded healers”, that is, reformed former convicts and recovering

individuals, who transform their carceral capital into assets for rehabilitation and recovery, based on their lived experiences.

Studies worldwide highlight the numerous advantages of peer support, especially for the aid providers, which manifests in the development of strengths and a sense of competence (e.g., Buck, 2018; Elisha & Shachaf-Friedman, 2023, 2024; LeBel et al., 2015; Lopez-Humphreys & Teater, 2020; Woods, 2020).

However, peer support is not without risks, particularly the potential for relapse (Perrin, 2022; White & Kurtz, 2006). Yet, while many studies focused on relapses among recovering individuals in general, there remains a significant gap in understanding relapse experiences among professional peer supporters in the field of drug recovery. This study aims to fill that gap by exploring the perceived factors and triggers linked to relapses among recovering individuals who formally held peer support roles, and examining how they navigate their return to recovery.

Alongside the widespread reliance on AA (Alcoholics Anonymous) and NA (Narcotics Anonymous), which continue to represent the dominant recovery approach in addiction treatment programs worldwide, as well as in Israel, the literature also points to alternative peer support models. Recovery Colleges, developed primarily in the UK, provide educational and collaborative settings where professionals and individuals with lived experience learn together, emphasizing equality and empowerment (Parsa, Towle, & Macdonald, 2025). Recent studies have shown that Recovery Colleges enhance connectedness, personal growth, and empowerment among students (Parsa et al., 2025; Whish, Huckle, & Mason, 2022). In addition, secular programs such as SMART Recovery or LifeRing are based on cognitive-behavioral principles and self-management strategies, offering a non-spiritual alternative for those who resist the religious or spiritual framing of 12-step fellowships (Tom & Fruitman, 2024). Evidence suggests that integrating SMART Recovery into treatment programs improves outcomes in substance use, health, and social connectedness (Manning, Roxburgh, & Savic, 2023). Similarly, Recovery Dharma, a Buddhist-inspired secular approach, has been found to enhance recovery capital through meditation and peer support (LeBelle, Hastings, Vest, Meeks, & Lucier, 2023). In Israel, however, such models are less common, and the dominant recovery frameworks remain AA and NA. This context highlights the uniqueness of the current study, which examines the Israeli experience and the challenges specific to peer supporters embedded in these frameworks.

1.1. Convict Therapy: Recovery Through Lived Experience

Given the recognized value of peer support in promoting recovery and rehabilitation, peer-based programs for individuals with criminal and addiction histories have been developed worldwide over the past few decades, in both prison and community settings (Elisha, 2022). These programs are grounded in the concepts of the wounded healer and the helper therapy principle (Reissman, 1965), which posit that individuals derive psychological and emotional benefits from helping others who face similar challenges. These benefits are rooted in their insights and personal experiences, referred to as *lived experience* (Sells et al., 2016).

Elisha (2023) has conceptualized these foundations under the term Convict Therapy, integrating relevant theories and approaches, such as crime desistance and positive criminology, into a cohesive framework. This model emphasizes the benefits of peer support efforts, whether delivered by paid staff or volunteers, for aid providers and recipients. Peer supporters draw on their lived experiences to build authentic, empathetic relationships with others (Woods, 2020). These experiences serve as powerful tools in the

recovery process, offering hope and motivation to those currently struggling, while positioning the supporters as role models and sources of inspiration (Elisha & Shachaf-Friedman, 2023; LeBel et al., 2015; Snoek, McGeer, Brandenburg, & Kennett, 2021).

Peer support is most prominently demonstrated in self-help and mutual aid groups for individuals with addiction, such as AA (Alcoholics Anonymous) and NA (Narcotics Anonymous) (Bellamy et al., 2012; Kelly & Yeterian, 2011; Ronel, 1998). In these settings, individuals in recovery provide support and guidance, voluntarily, to newcomers while reinforcing their sobriety and personal growth (Perrin & Blagden, 2016; Ronel, 1998). Research indicates that peer support contributes significantly to improved mental health and reduced recidivism among peer supporters (Kavanagh & Borrill, 2013; Sells et al., 2016). It fosters both personal and social transformation—critical elements in the recovery and reintegration process (Buck, 2021; LeBel et al., 2015; Maruna, 2001)—by building resilience, instilling a sense of purpose and agency, and shaping a positive, prosocial identity (Woods, 2020).

Furthermore, peer support programs create dynamic growth reciprocity, wherein both the provider and the recipient of support experience mutual growth (Buck, 2021; Owen-DeSchryver, Ziegler, Matthews, Mayberry, & Carter, 2022). This reciprocal relationship nurtures the development of key desistance-related traits, including self-esteem, hope, faith, and prosocial attitudes (Buck, 2018; LeBel et al., 2015; Lopez-Humphreys & Teater, 2020).

1.2. Social and Recovery Capital in Peer Work

The primary advantages of peer support are the acquisition of social and recovery capital, both essential for promoting and maintaining long-term recovery (Portes, 2000). Social capital involves establishing connections with individuals and organizations that provide reformed individuals with pro-social networks, relationships, and community ties offering support throughout recovery (Best & Laudet, 2010). Peer support programs enhance these networks by connecting individuals and providing emotional, informational, and tangible support necessary for maintaining sobriety (Best et al., 2011; Woods, 2020). Laudet and White (2008) demonstrate that individuals with strong social networks report higher rates of successful recovery, suggesting that social capital serves as a protective factor against relapse.

Recovery capital refers to the development of personal strengths among recovering individuals, such as resilience, motivation, and coping skills (Cloud & Granfield, 2008). According to Laudet and White (2008), individuals with diverse recovery capital are better equipped to manage mental health and substance use challenges. The peer support role contributes significantly to personal recovery capital by offering guidance and sharing experiences, reinforcing that recovery is achievable (Best & Aston, 2015).

Alongside its benefits, some studies have highlighted challenges that may jeopardize the recovery process of peer supporters in the criminological field, potentially increasing their risk of relapse. These challenges include emotional strain and burnout due to continuous exposure to others' suffering (Simpson, Oster, & Muir-Cochrane, 2017). Additionally, professional conflicts, countertransference, and role confusion may further disrupt their efforts (Elisha, 2022; Elisha & Shachaf-Friedman, 2023; White, 2000). Therefore, peer support should be viewed with a balanced perspective, acknowledging its advantages and limitations. Despite its importance, this topic remains underexplored. The current study aims to address this gap by examining the triggers for relapses among professional peer supporters with histories of crime, incarceration, and addiction (i.e., carceral capital), as well as their subsequent return to the path of recovery.

2. OBJECTIVES

This study seeks to increase our knowledge regarding the triggers leading to relapses among professional peer supporters with carceral capital in the field of drug recovery. Specifically, it investigates how recovering individuals in peer support roles experience, interpret, and navigate relapses, as well as the strategies they employ to re-engage in recovery. By focusing on the “savior–rescuer paradox” - the tension between one’s troubled past and one’s role as a recovery guide - the study aims to contribute to a deeper understanding of relapse as both a risk and a potential catalyst for growth.

3. DESIGNED

This study employed a qualitative phenomenological design to examine the lived experiences of relapse among peer supporters in drug addiction recovery. The approach provided in-depth insights into the interplay between recovery, relapse, and the peer support role (Patton, 2002), focusing on how participants perceived the challenges, interpreted the triggers, and integrated these experiences into their ongoing recovery process.

4. METHODS

4.1. Sample

Given the sensitivity of the topic, reaching suitable interviewees was challenging. To address this, we utilized the help of participants from our previous studies on peer support (Elisha & Shachaf-Friedman, 2023, 2024), through which we recruited suitable participants for the current study, using snowball sampling. In total, 13 participants from Israel were recruited, providing sufficient data for thematic saturation.

The group comprised 10 men and 3 women, all with a history of criminality and drug addiction, some also struggling with alcohol addiction. Their criminal record included arrests and prison sentences for drug-related offenses, theft, fraud, and violence. Their ages ranged from 40 to 70 years (average: 53), with formal education spanning 6 to 12 years. Despite this, all had completed professional training relevant to peer support, including group facilitation, the 12-step program, and psychotherapy.

Participants reported relapses occurring after recovery periods of one to 14 years, during which they were employed in peer support roles within addiction treatment settings in prisons or the community. Some returned to recovery within a year, while others faced prolonged relapses, the longest lasting up to 15 years. Currently, some remain in peer support work, while others have transitioned to other fields.

4.2. Measures

Data were collected using semi-structured, in-depth interviews guide developed by the researchers. The guide included broad, open-ended questions designed to elicit participants' reflections on relapse and recovery. Examples of questions included: 1. In your view, what factors led to your relapses while working in peer support? 2. What happened afterwards? 3. Reflecting on your recovery journey, what lessons have you learned about relapse and recovery?

4.3. Procedure

The study received approval from the Institutional Review Board (IRB) of the first author. Before each interview, all participants signed an informed consent form. Interviews were conducted via Zoom, lasting approximately one hour each.

Recordings were transcribed verbatim and analyzed by the researchers, using thematic content analysis (Nowell, Norris, White, & Moules, 2017). The study followed established steps of data encoding, theme identification, and iterative comparison, ensuring that recurring patterns and key insights were systematically captured.

5. FINDINGS

The participants' accounts revealed two central themes. The first focuses on their efforts to rationalize their relapses. The second underscores the cumulative value of recovery and the lessons learned from past relapse experiences. These themes are presented below, illustrated with direct quotes from the participants' reports, using pseudonyms.

5.1. Explanations for Relapses

5.1.1. Disconnecting from Recovering Peers and the 12-Step Program

All participants cited disconnection from NA members (i.e., recovering peers), followed by neglecting the 12-step program principles, as the primary cause of their relapses. Paradoxically, they attributed this to the success they achieved in their professional and personal lives, which fostered a false sense of self-sufficiency and self-competence ("I can manage on my own"). For example:

I had financial success, got married, had children, and rehabilitated myself. From the outside, it seemed like I had everything... My deterioration began when I became financially successful. I stopped attending NA meetings, distanced myself from 'clean' addicts, and stopped working the 12-step. Then, a crisis at home overwhelmed me, and that's when I fell back into drugs. (Shiri)

Another participant described the downhill spiral, explaining that when a recovering individual abandons the core principles of recovery – specifically, those of the 12-step program – relapse is almost inevitable:

Once you start giving up on some things, you gradually let go of others too. You stop connecting with peers, begin hanging out with active drug users, and go to problematic places. You think that because you've been clean for 20 years, you can handle it, but suddenly you find yourself using drugs again. (Avi)

5.1.2. The Savior-Rescuer Paradox: Role Confusion in Peer Support

The most significant aspect of the peer supporter paradox emerged in participants' descriptions of developing a "savior-rescuer" self-perception. They linked this mindset to unresolved personal issues, fostered a false sense of omnipotence, and a belief that they could manage everything by themselves. This dynamic reflects a form of role confusion, arising from their dual identity—as individuals in recovery with troubled pasts and as peer supporters in positions of influence. This powerful role can erode feelings of superiority and overconfidence, which may become unmanageable. Quote:

Not being a savior-rescuer is imperative for me because I need to surrender. I feel outside of myself when assisting others. There's nothing better than seeing addicts recover. But you must be careful about what mode you're in – am I a teacher or a savior? I was unaware of the unresolved issues in me, so I put myself in situations I shouldn't have, and won't do that again. (Mira)

This savior-rescuer paradox illustrates a fundamental tension within the peer support role. The very experiences that qualify reformed individuals to assist others, that is, their lived experiences with addiction and recovery, can also make them vulnerable to relapse if they develop an inflated sense of their healing power and capabilities.

5.2. The Cumulative Value of Recovery: Lessons Learned

When asked whether their lived experience—encompassing addiction, recovery, relapse, and re-recovery—adds value to their current recovery, all respondents answered affirmatively. They described cumulative benefits, including an enhanced ability to recognize and overcome relapse warning signs and maintain long-term sobriety through the daily practice of the 12-step principles, primarily by giving and receiving peer support within NA groups.

5.2.1. Recognizing Warning Signs for Relapses

One key lesson drawn from past experiences was identifying relapse warning signs and avoiding risk factors that could jeopardize recovery. Participants specifically reflected on personal character flaws, such as self-centeredness, dishonesty, pride, and manipulation, which fostered a sense of superiority over other recovering individuals and led to their disconnection from support networks. This self-awareness reinforced the realization of the need for continuous peer support and the daily practice of 12-step principles in sustaining recovery. Quote:

In addicts, the destructive part is large, and our defense mechanisms are fluid. Today, I am aware of the importance of these recovery actions... I once left the program because I didn't want to be with those 'whiners' in the groups. Today, they serve as an example for me, like a warning sign. (Omer)

5.2.2. Strengthening Recovery Through NA's Four Pillars

Reflecting on their last relapse experience while formally engaged in peer work, all participants expressed their strong commitment to what they described as the four pillars of recovery in NA: attending NA meetings, serving others, practicing spirituality through the 12-step program, and both giving and receiving peer support. Quote:

Today, I have faith in God, a permanent NA group, I practice the 12-step daily, and I do service by voluntarily supporting others in NA groups. These are the four pillars of recovery, and if you follow them, sobriety is guaranteed. (Yossi)

6. DISCUSSION

This study explored relapses among professional peer supporters in the field of drug addiction recovery and their subsequent recovery. At the core of our findings is the "savior-rescuer paradox", a dynamic stemming from respondents' struggle to reconcile two conflicting identities: their troubled past and their restored identity as recovering peer

supporters. This tension played a significant role in their relapses. Participants described how their dual identity, as individuals in recovery and as peer supporters, fostered role confusion and overconfidence, leading to disengagement from support systems such as NA groups and the 12-step program. This disengagement reflected a loss of social and recovery capital, which had previously served as protective factors.

Participants linked this paradox to unresolved character flaws, including self-centeredness, dishonesty, pride, and manipulation. These traits fostered a false sense of omnipotence and self-efficacy (White, 2000) as they navigated their dual identities. Their perceptions of authority and efficacy as peer supporters intensified this internal conflict.

Looking back, however, participants reframed relapses not solely as a failure but as an opportunity for learning. They emphasized the importance of recognizing personal “warning signs,” maintaining connections with recovering peers, and adhering to NA’s four pillars: meetings, service, spirituality, and mutual support. These insights demonstrate that relapses, when effectively processed, can strengthen resilience and deepen commitment to recovery, aligning with perspectives from positive criminology and desistance theory. Notably, no substantive differences were observed among participants’ accounts, regardless of the length of their recovery or the duration of their relapse.

6.1. The Savior-Rescuer Paradox

While helping others often provides a sense of purpose, fulfillment, and reinforcement of personal recovery efforts, the helper role can also obscure unresolved personal issues and foster an illusion of immunity (Reissman, 1965). Over-identification with the “savior” role may lead to an exaggerated sense of control and a disconnection from essential support systems, such as NA group members, as reported by our respondents. These dynamics highlight the delicate balance required to integrate the dual identities of being both in recovery and a peer supporter of other recovering individuals (White & Evans, 2013).

From the perspective of convict therapy (Elisha, 2023), engaging in peer support allows individuals to transform their criminal past into a source of strength by leveraging their carceral capital, that is, their lived experiences with crime and addiction, to assist peers. This process fosters emotional healing, enhances empathy and forgiveness, and instills a sense of purpose and self-worth, aligning with the helper therapy principle (Elisha, 2022; Lebel et al., 2015; Reissman, 1965). However, unresolved tensions between the “convict” and “recovering” identities, especially among those who have not fully processed their troubled past, can create a fragile sense of self. This may weaken their commitment to recovery and lead to relapses, as reported by our participants.

This paradox can also be framed as a dilemma of occupational identity. Peer supporters often inhabit a liminal position, that is, a transitional, in-between state where they are neither fully established professionals nor simply individuals in recovery. This ambiguous location generates boundary challenges and role ambiguity (Simpson et al., 2017; Beales & Wilson, 2015). In the addiction recovery fields, this liminality echoes the figure of the wounded healer, whose lived experience is both a source of unique strength and a potential vulnerability. The expectation to represent “successful recovery” may obscure peers’ own fragilities and intensify relapse risks, underscoring that these dilemmas are not merely individual struggles but structural features of peer work (White, 2000).

6.2. Disconnecting from Recovering Peers: The Loss of Social and Recovery Capital

Participants emphasized that distancing themselves from NA group members and neglecting the core principles of the 12-step program were key factors contributing to their relapses. This disengagement marked the loss of social and recovery capital (Portes, 2000). Convict therapy (Elisha, 2023) similarly emphasizes the vital role of peer support in building accountability and resilience. Through meaningful connections and consistent engagement in recovery-focused activities, recovering individuals strengthen these forms of capital and enhance their ability to sustain long-term recovery (Best et al., 2011; Laudet & White, 2008; Woods, 2020).

Paradoxically, participants recognized that these actions violated the core principles of the 12-step program, which had previously supported their recovery. They attributed their disengagement to the false sense of self-sufficiency fostered by the personal and professional success they had achieved through their peer support work.

Peer support, a cornerstone of the 12-step program and recovery literature, thrives on reciprocal relationships in which individuals give and receive support. Disengagement from these relationships weakened essential social bonds, eroding external validation and internal motivation to sustain recovery (Kelly & Yeterian, 2011; Ronel, 1998). Strong pro-social ties and supportive relationships, as emphasized in Sampson and Laub's (1993) life-course perspective, are crucial for maintaining recovery.

Similarly, desistance literature underscores the importance of social connections and support networks in sustaining abstinence from both criminal behavior and substance use (Laub & Sampson, 2001). Patton and Best (2024) highlight mutual aid groups as key sources of social capital for individuals in recovery. However, when individuals distance themselves from these recovery-oriented circles, the positive effects may no longer be sufficient to sustain their progress.

6.3. Relapses as a Learning Process

Respondents emphasized that their recovery journey carries significant added value, shaped by lessons learned from past experiences. These insights include recognizing relapse risk factors, referred to as "warning signs", and proactively avoiding them through consistent practice of NA's four pillars of recovery. This approach reflects a deepened commitment to long-term sobriety, aligns with the positive criminology perspective (Ronel & Elisha, 2011), suggesting that individuals can grow through adversity, given the right opportunities (Best & Aston, 2015).

Participants' reflections also align with Prochaska and DiClemente's (1983) stages of change model, which conceptualizes recovery as a cyclical process involving relapse, growth, and renewed commitment (DiClemente & Crisafulli, 2022). Rather than viewing relapses as failures, respondents reframed them as opportunities for insight, learning, and transformation.

Additionally, participants acknowledged that their relapse experiences deepened their understanding of addiction and recovery. This perspective corresponds with the concept of recovery capital (Best et al., 2011; Granfield & Cloud, 2001), suggesting that individuals in recovery accumulate social, personal, and community-based resources that strengthen their ability to sustain long-term sobriety.

6.4. Comparisons with Alternative Peer Support Models and Cultural Context

The findings of this study should also be considered in broader international developments in peer support for recovery from addiction. While NA and AA remain the dominant approaches worldwide and in Israel, alternative models have gained prominence elsewhere. Recovery Colleges, developed in the UK and increasingly studied across countries, emphasize empowerment, equality, and collaborative learning rather than spirituality, and have been shown to foster connectedness and personal growth (Parsa et al., 2025; Whish et al., 2022). Similarly, secular programs such as SMART Recovery and LifeRing draw on cognitive-behavioral and self-management strategies, providing recovery options for those less comfortable with the religious or spiritual orientation of 12-step fellowships. Research suggests that SMART Recovery contributes to improved health, sobriety, and social connectedness (Manning et al., 2023; Tom & Fruitman, 2024). Additionally, Recovery Dharma represents a Buddhist-inspired secular alternative that was found to enhance recovery capital through meditation and peer support (LeBell et al., 2023).

In Israel, however, these alternative approaches remain relatively uncommon, and recovery frameworks are still strongly anchored in NA and AA traditions. This cultural context both strengthens and complicates the savior–rescuer paradox. On the one hand, the centrality of NA/AA provides peer supporters with strong recovery-oriented communities and spiritual foundations. On the other hand, reliance on a single dominant model may intensify the risks of disengagement: when individuals distance themselves from NA, they have fewer secular or institutionalized alternatives to sustain their recovery. These cross-national differences underscore the need to interpret the findings of the present study as culturally situated: the Israeli peer support experience reflects both the strengths and vulnerabilities of a recovery system deeply rooted in NA and AA traditions.

7. IMPLICATIONS, LIMITATIONS, AND FUTURE DIRECTIONS

The findings underscore both theoretical and practical implications. Theoretically, it advances the desistance and drug recovery literature (Lebel et al., 2015; Laub & Sampson, 2001; Maruna, 2001) by deepening our understanding of relapses and re-recovery triggers among peer supporters. The findings also support the convict therapy framework (Elisha, 2023), emphasizing the critical role of peer support in fostering and sustaining long-term recovery. This is achieved through developing strong pro-social connections and personal resilience, both of which are crucial for successfully navigating recovery challenges.

At the policy level, the growing trend of institutionalizing peer support roles recognizes lived experience as professional expertise (Best & Aston, 2015; White & Evans, 2013; Patton & Best, 2024). Yet, this process also increases risks of burnout and relapses among peers, who must balance personal recovery with professional demands (Beales & Wilson, 2015; Simpson et al., 2017). Training programs should therefore not only address self-care and boundary management but also explicitly prepare peer workers to recognize and navigate the savior–rescuer paradox. Embedding supervision and institutional support into policy frameworks is essential to prevent burnout and ensure sustainability (Beales & Wilson, 2015; Patton & Best, 2024; White & Evans, 2013).

The study's main limitation is its relatively small and homogeneous sample, primarily composed of NA-affiliated peer supporters, resulting in a predominance of the 12-step worldview in participants' accounts. As such, the perspectives of individuals engaged in alternative recovery models may be underrepresented. Future studies should include more

diverse samples, and adopt longitudinal designs to capture the evolving nature of relapse and recovery. Comparative studies between peer supporters with and without carceral capital could provide deeper insights into the unique challenges and vulnerabilities of each group.

8. CONCLUSIONS

This study highlights relapses as both a risk and a potential catalyst for growth among peer supporters in drug addiction recovery, sometimes referred to as wounded healers (Elisha, 2023). The savior–rescuer paradox demonstrates how lived experience can serve as both a source of strength and a point of vulnerability (White & Evans, 2013). By reframing relapses as learning opportunities and situating them within the framework of recovery and desistance, the study underscores the importance of recovery capital and continuous connection to peers in sustaining long-term sobriety (Maruna, 2001; Cloud & Granfield, 2008; Laudet & White, 2008).

Findings further indicate that relapses are not simply failures but transitional experiences that, when processed constructively, foster humility, resilience, and renewed commitment (Best & Aston, 2015; Beales & Wilson, 2015). Yet, the liminal status of peer supporters, straddling recovery and professional roles (Simpson et al., 2017), creates identity tensions that heighten vulnerability. In Israel, where NA/AA dominate, this challenge is further intensified by the lack of diverse recovery models. To address these challenges, structured training, boundary management, and institutional supervision are essential to support professional peer workers in navigating these tensions and sustaining both their own recovery while effectively supporting others.

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Chapter # 3

HOW TO BE A PSYCHOTHERAPIST AND REMAIN HAPPY? Shaping resilience of psychologists, psychotherapists in training and certified psychotherapists working in counseling business: A theoretical analysis

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ABSTRACT

Providing counseling services means being exposed to suffering and all sorts of difficulties on a regular basis. Being a professional, empathetic listener who stays attentive and responsive to other people's needs can result in emotional exhaustion of a professional. Taken together with no regular self-care and self-help it can lead to compassion fatigue or work burnout. Therefore, in order to maintain good quality of life and mental health it is needed to remain resilient. The main aim of the article is to offer a theoretical analysis of steps needed to maintain resilience in psychologists and psychotherapists working in counseling business. It includes an analysis of the current data considering the mental health of psychologists and psychotherapists working in counseling business and a discussion considering possible ways to enhance the quality of life and mental well-being of mental health professionals. It also includes some ideas concerning preventive programs and components of educational curricula that should be offered to psychologists and psychotherapists working in counseling business. The text serves as a theoretical introduction and a basis for development of future preventive programs for psychologists and psychotherapists as well as a foundation for a research in the field of well-being and a quality of mental health of psychologists and psychotherapists working in the counselling business.

Keywords: resilience, counseling business, preventive programs, mental health of psychologists and psychotherapists.

1. INTRODUCTION

Psychological services offered in psychotherapy and counseling business cover a broad range of activities from diagnosis through psychological support and short term interventions to long term psychotherapy. Professionals who offer psychological help and support engage in varied complex activities that require certain skills and abilities. In order to be effective at their work they should present high quality empirically based knowledge and be familiarized with current research results considering efficacious methods of intervention. Additionally, they should be engaged in continuous development. While working with different patients experiencing various problems and needs, professionals in counseling business have to present certain levels of flexibility, highly developed communication skills, interpersonal abilities, emotion regulation skills, empathy, and highly developed sensitivity to interpersonal, social and emotional cues. All mentioned above factors are strongly connected to internal psychoemotional resources of professionals that can diminish without proper care. In result psychologists and psychotherapists who do not practice self-care can experience decrease in levels of well-being and quality of life, increase of mental health complaints or professional burnout.

Empirical studies show that psychologists and psychotherapists present an elevated levels of burnout symptoms (e.g. McCormack, MacIntyre, O'Shea, Herring, & Campbell, 2018; Van Hoy & Rzeszutek, 2022) and symptoms of other mental health problems (e.g. Probst, Humer, Stippl, & Pieh, 2020; Tay, Alcock, & Scior, 2018). According to the research results, psychotherapists are especially prone to early maladaptive schemas of self-sacrifice, emotional deprivation, and unrelenting standards (e.g. Pilkington, Spicer, & Wilson, 2022; Simpson et al., 2019; Young, Klosko, & Weishaar, 2003), which can lead them to ignore any signs of their emotional needs. Relatively frequently mental health professionals perceive self-care as a privilege or one of possible alternatives rather than an obligation (Mueller, Kennerley, & Westbrook, 2010). In the long term such attitudes and beliefs can cause a decrease in quality of life, and increase in the levels of symptoms of mental problems. Therefore, it can be stated that providing psychological support and help for others without adequate self-care can result in serious consequences for the mental health of professionals, so in order to effectively help others psychologists and psychotherapists need to stay attentive to their own mental condition.

Self-care and willingness to attend individual's emotional needs observed in psychologists and psychotherapists is embedded in declarative knowledge (i.e. general psychological knowledge about mental health and its conditions) procedural knowledge (i.e. practical knowledge required to solve problems and cope with mental health problems) and reflective knowledge (i.e. an ability to search for alternative sources of information and an adequate practical use of knowledge) (Bennett-Levy, & Thwaites, 2007). It means that in order to cope with emotional difficulties psychologists and psychotherapists experience in their professional life they have to stay attentive to their own emotional needs and actively apply the knowledge they have, especially since many of them share a belief that having the knowledge about efficacious coping methods is equivalent to coping (e.g. Bennett-Levy, 2006; Mueller et al., 2010). An active engagement in self-care practices requires high levels of awareness of one's condition, having necessary tools that can be applied when needed and an adequate organization of mental, emotional, social and physical space to cope with difficulties and take care of an individual's needs.

Resilience is defined as successful adaptation to challenging mentally burdensome experiences, acquired especially through an ability to flexibly cope with adversities and difficulties. It can be perceived both as a process of adaptation and an outcome of such a process (APA, n.d.). Among factors corresponding to high resilience are effective coping strategies, availability of social resources, and individual beliefs about the world as a relatively safe and predictable place and other people as relatively kind to others. It is crucial for psychologists and psychotherapists to cultivate, practice and develop their resilience since it is expected that as professionals they will be able to cope not only with their own emotions but with emotional burdens and various problems of their patients as well. The research conducted up to date demonstrates that the resources and skills associated with resilience can be developed and enhanced and can serve as protective factors increasing the quality of life of psychologists and psychotherapists (Justin, Haroon, & Khan, 2023).

The main aim of the presented article is to offer a theoretical analysis of steps needed to develop and maintain resilience in psychologists and psychotherapists working in counseling business. It starts with an analysis of the current data considering the mental condition of professionals offering psychological services in mental health business, followed by a discussion on possible ways to enhance quality of life and mental well-being of psychologists and psychotherapists. In the following paragraphs a short description of methods applied in the conducted analysis is given, next research results devoted to mental

health of professionals and information concerning factors shaping its condition are presented. After that, the description of possible ways to enhance and prevent mental well-being of psychologists and psychotherapists is given, as well as some ideas that can be applied in training processes offered to psychologists and psychotherapists in training. The text serves as a theoretical introduction and a basis for development of future preventive programs for psychologists and psychotherapists as well as a foundation for a research in the field of well-being and a quality of mental health of psychologists and psychotherapists working in the counselling business.

2. METHODOLOGY OF THE CONDUCTED ANALYSIS

Presented paper contains a narrative review aimed at describing the specific conditions corresponding to the quality of mental functioning of psychologists, psychotherapists in training and certified psychotherapists working in counseling. It focuses specifically on mental health conditions, the ways professionals' well-being is protected, and possible solutions that can be used during the development or maintenance of resilience of professional counselors.

The central question guiding the literature review was: What is the general level of well-being of professionals working in the field of psychological counseling, how is the mental health of psychologists, psychotherapists in training and certified psychotherapists protected, and how can it be improved? In order to answer the above mentioned question the relevant literature was selected. Among the inclusion criteria there were: the year of publication (after 2000), the type of the article (research paper or metaanalysis), the availability of the full text. The review was therefore prepared with a selection of relevant literature. The main key words used were: psychotherapists, counseling, well-being, mental-health, self-care, burnout prevention, resilience. Searched databases included EBSCO, Google Scholar, Medline, and Web of Science.

All the articles identified during the search were later critically analyzed whether they meet the above mentioned inclusion criteria, and at the same time whether they concern: (1) the description of mental health condition of psychotherapists, psychologists in training or counselors, (2) the description of preventive programs aimed at development, enhancement or maintenance of mental health and well-being of professionals working or studying in the field of counseling, (3) the description of activities aimed at developing and maintaining the resilience of mental health specialists.

Based on the analysis the main patterns of findings were identified. Contradictory results were addressed. Areas that were not explored sufficiently were noticed. Based on the findings the solution aimed at prevention of mental health for counselors was presented and accompanied with some ideas on how to enhance teaching curricula for psychology and psychotherapy training with special courses dedicated to the development of self-care practices of future professionals.

3. MENTAL CONDITION OF PSYCHOLOGISTS AND PSYCHOTHERAPISTS WORKING IN COUNSELING

According to the conducted review of the literature it can be stated that for many years the mental health of psychologists and psychotherapists working in counseling remained insufficiently attended while researchers intensively concentrated on the well-being of patients attending psychotherapy. Among the studies that were conducted before 2020 there were analyses of well-being of professionals working with highly

traumatized patients or in potentially traumatizing conditions (e.g. Bowden, Smith, Parker, & Boxall, 2015; Frajo-Apor, Pardeller, Kemmler, & Hofer, 2016), some research on stress levels of clinical trainees (e.g. Cushway, 1992; Pakenham, & Stafford-Brown, 2012), and data concerning the resilience levels in trainees or early-career professionals (e.g. Kolar, von Treuer, & Koh, 2017; Lamb, & Cogan, 2016). There was also research on burnout levels at early stage of professional career of clinical psychologists (e.g. Volpe et al., 2014). This approach changed especially during and after the COVID-19 pandemic, and currently there is a growing amount of data concerning the functioning of professionals offering psychological help and support to others.

The data published until now shows varied indicators of symptoms of psychological burnout observed in psychologists and psychotherapists, ranging from 6% to over 50% (e.g. Berjot, Altintas, Grebot, & Lesage, 2017; Van Hoy, & Rzeszutek, 2022), and some evidence of elevated levels of anxiety and depressive symptoms, substance misuse and insomnia (e.g. Van Hoy, & Rzeszutek, 2022). At the same time there is still a research gap considering the general nation-wide or cross-cultural studies on well-being of psychologists and psychotherapists.

While analyzing the condition of mental health of psychologists and psychotherapists various components including intraindividual, interindividual and environmental factors should be taken into account (e.g. Williams, Reed, Self, Robiner, & Ward, 2020). Among intraindividual components are: personality traits (e.g. extraversion, neuroticism), temperamental features (e.g. emotional reactivity, endurance, perseverance), levels of emotional intelligence, and biological proneness to mental problems. Interindividual factors include social contacts and quality of social interactions, perceived social support as well as explicitly and implicitly presented social expectations toward the roles and attitudes of a professional (e.g. Goodyear, & Sera, 2022; Patel, Swift, & Digesu, 2021). Environmental components contributing to the mental condition of psychologists and psychotherapists include the overall social climate of a workplace, professional isolation, work load and work-life balance (Kleszczewska-Albińska, 2020). The abovementioned factors are not unique for psychologists or psychotherapists, but taken together with specific conditions corresponding to fulfilling professional duties can contribute to a significant decrease in mental health and well-being of mental health professionals (e.g. Williams et al., 2020).

The specific settings requiring involvement in asymmetric relationships, elevated interpersonal engagement of psychologists and psychotherapists in professional relationships and high attentiveness to the needs and problems brought by patients can result in decrease of well-being of professionals (e.g. Bamforth, Rae, Maben, Lloyd, & Pearce, 2023). Among other factors leading to the decrease of a quality of life observed in psychologists and psychotherapists working in counseling are case complexities and difficulties with emotion management corresponding to professionals' dysfunctional beliefs about themselves and their professional competencies (Kleszczewska-Albińska, 2020). The mentioned above components can cause insomnia, elevated symptoms of anxiety or depression (Schaffler et al., 2022) as well as somatic symptoms such as back pain, headaches, and gastroenteritis (Rupert, & Kent, 2007).

The decrease in quality of well-being and mental health issues observed in psychologists and psychotherapists are also correlated with an external pressure from clients (e.g. Bamforth et al., 2023). It was proved that patients are more prone to engage in psychotherapeutic relationships with professionals perceived as mentally stable and satisfied with their lives (Wogan, & Norcross, 1985). Additionally, there is a correlation between psychotherapists' well-being and their professional effectiveness (Laverdière, Kealy, Ogrodniczuk, & Morin 2018) which means that the more mentally unstable and

vulnerable the therapist is the worse the outcomes of their work are. And while performing poorer they experience even higher levels of vulnerability, psychological discomfort, and work dissatisfaction, which in turn decreases professionals' well-being.

According to the research conducted up to date there is a lack of agreement whether the mental condition of psychologists and psychotherapists engaged in counseling is relatively poor, neutral or satisfactory (e.g. Posluns, & Gall, 2020; Schaffler, Probst, Pieh, Haid, & Humer, 2024; Van Hoy, & Rzeszutek, 2022), so further research in this area is needed. While analyzing the factors corresponding to quality of mental health and well-being of professionals working in counseling several factors should be taken into consideration, including: symptoms of depression and anxiety, levels of general and work-related stress, work load, work-life balance, patients' complexity, exposure to patients' traumatic histories, excessive situational stress and intensive work-related emotions. Also, the description of mental state of psychologists and psychotherapists working in counseling services has to include data on their self-care levels.

4. PREVENTION OF MENTAL HEALTH OF PSYCHOLOGISTS AND PSYCHOTHERAPISTS

Since psychoemotional condition of professionals providing psychological help and support to others influences both specialists' efficacy, and their clients functioning (e.g. Posluns, & Gall, 2020) it is crucial to analyze the protective factors, and plan activities aimed at supporting mental condition of psychologists and psychotherapists working in counseling. Mental health of psychologists and psychotherapists depends on many different factors that should be considered while planning self-care practices. It is important to underline that the research on positive aspects of mental health professionals' well-being is less frequent than studies on mental health problems suffered by psychologists, psychotherapists and counselors (e.g. Van Hoy, & Rzeszutek, 2022). The studies conducted up to date prove that older, i.e. more experienced professionals report higher levels of general well-being in comparison to younger psychotherapists (e. g. Summers, Morris, Bhutani, Rao, & Clarke, 2021). It was also discovered that better quality of life of counselors corresponds to the involvement with self-care practices (e.g. Yip, Mak, Chio, & Law, 2017). Additionally, work settings enabling maintenance of work-life balance, and access to professional support proved to be important factors supporting high levels of well-being of professionals (e.g. Summers et al., 2021). Therefore, taking into consideration the data presented above it can be stated that while planning preventive programs for mental health professionals intraindividual, interindividual as well as environmental factors should be taken into account. At the same time planning preventive activities is important for professionals themselves – both in personal and professional life, for their job performance and clients they work with.

In order to develop or maintain high levels of well-being mental health professionals need to be self-aware about their strengths and weaknesses. They need to know how to organize their work settings and entire environment so it will fit best their temperamental needs. Using the knowledge about their personality traits can help professionals to adequately plan their professional and leisure activities in such a way to optimize their functioning (e.g. Pereira, Pires, & Neto, 2024). In order to improve or maintain levels of their interpersonal skills psychologists and psychotherapists can get involved in any type of interpersonal training, developmental groups etc. While taking care of environmental components psychologists and psychotherapists should analyze their work and personal environment and verify whether they do have personal spaces to rest and take care of

themselves in a preferred way. In other words, taking care of their well-being psychologists and psychotherapists have to maintain high levels of attentiveness toward their needs and emotions, and pay attention to the consequences external features have on them (e.g. Watson, Walker, Cann, & Varghese, 2021).

Taking care of their well-being and mental health psychologists and psychotherapists should therefore plan the time for self-care practices such as leisure activities, time with meaningful others, sport or psychological practices such as mindfulness. Due to the complexity of counseling processes professionals have to regularly supervise their work as well as engage in consultations or other types of meetings gathering professionals discussing their work outcomes (e.g. Gönültaş, Meydan, & Sağkal, 2024; Rønnestad, Orlinsky, & Willutzki, 2024). Whenever it is needed psychologists and psychotherapists should also engage in personal psychotherapeutic processes that can help them to improve their mental functioning, address specific issues they struggle with, and improve coping mechanisms they have (e.g. Posluns, & Gall, 2020). Crucial for general well-being and mental health of professionals is a sense of belonging to a greater community, therefore being a part of a professionally oriented group of people can enhance the quality of life of psychologists and psychotherapists (e.g. Dose, Desrumaux, Bernaud, & Hellemans, 2019; Toubassi, Schenker, Roberts, & Forte, 2023). All the above mentioned factors should be additionally embedded in a relatively stable balanced environment in which professionals set adequate boundaries between professional and personal life (e.g. Ohrt, & Cunningham, 2024).

Factors mentioned above can serve as a starting point for preventive programs aimed at enhancement and maintenance of well-being, mental health and resilience of psychologists and psychotherapists. In the literature there is some data concerning the programs for an improvement of the well-being of therapists. Such programs most often offer interventions based on evidence-based approaches, including, among others, cognitive-behavioral approach, acceptance and commitment therapy, behaviorally oriented stress reduction methods, mindfulness, dialectical behavioral oriented skills etc. (e.g. Barnett, Johnston, & Hillard, 2006; Duncan, & Pond, 2024; Wise, Hersh, & Gibson, 2012). Such interventions relatively often are presented as tools for reduction of burnout symptoms, and a way for enhancing resilience and psychological flexibility, but in most cases these activities are presented in a short-term period while mental health professionals do need long-lasting support programs.

Hypothetically, such a long-lasting program, based mostly on various empirically-based interventions should start with a thorough diagnosis of individuals' needs and identification of factors contributing to increased stress levels. The process of psychoeducation during which professionals are reminded about the limits of their interventions and their responsibility for their patients should follow the diagnosis process. In the next step a supportive group should be formed for professionals who volunteer to participate in it. Additionally, an optional meeting with other mental health professionals should be offered to psychologists and psychotherapists participating in such preventive programs. What is crucial, all of the abovementioned activities and interventions should not be obligatory but rather voluntary.

An active participation in supportive groups should result in development of resilience, better understanding of individual strengths and weaknesses and enhancement of self-efficacy (e.g. Rippon, Shepherd, Wakefield, Lee, & Pollet, 2022). Based on the experiences of other people gathered in a supportive group participants can learn more about themselves, their attitudes and beliefs corresponding to therapeutic processes they are involved in. Also, they will be able to share their own experiences and gain support and

guidance they need for themselves. During individual sessions professionals will be able to deepen their knowledge about themselves and their dysfunctional beliefs, and to understand the impact their past experiences have on their present counseling services and general professional well-being and mental health.

The next step of enhancing or maintaining resilience should be devoted to the recognition and application of individually fitted adaptive ways of coping. Based on previously identified individual histories, psychologists and psychotherapists should re-evaluate their coping mechanisms, and make necessary modifications in that area when needed. Another important factor corresponding to the maintenance of resilience is self-compassion (e.g. Li, Malli, Cosco, & Zhou, 2024). Therefore, based on their knowledge concerning personal strengths and weaknesses, psychologists and psychotherapists participating in the supportive program should evaluate their approach to self-compassion and, if needed, introduce necessary changes in it. Additionally, participants of supportive group meetings can learn how other professionals deal with their critical thoughts and how they overcome unpleasant emotions which can be a useful tool for introducing any modifications in that area.

Generally speaking while helping psychologists and psychotherapists to sustain good mental condition and to enhance resilience it is important to learn how they cope with professional difficulties. It is crucial to learn about their previous experiences and adversities and to recognize the main problems they are facing in the current situation, then to help them identify the most adaptive coping strategies they can apply in different conditions. In order to increase resilience levels it is necessary to develop self-compassion, maintain supportive relationships with others, and learn how to ask for help from others when it is necessary (e.g. Chye, Kok, Chen, & Meng Er, 2024; Helmreich et al., 2017). All the suggested steps needed while enhancing and maintaining resilience of psychologists and psychotherapists working in counseling are given in Table 1.

The hypothetical activities described in Table 1. can be used independently or as modules of a complex preventive program. Such activities can help psychologists and psychotherapists to maintain good mental health, overcome adversities, and model adequate coping behaviors to others. Greater resilience can serve as a factor decreasing the risk of psychological crises (Hall et al., 2023). Whenever support and simple activities aimed at increasing levels of resilience are not sufficient it is recommended to search for empirically-based therapeutic interventions such as cognitive-behavioral therapy. Development, enhancement, and maintenance of psychologists' and psychotherapists' resilience can result in an increase of the general well-being of professionals themselves as well as in the quality of life of their patients. Data published up to date proves that psychologically stable individuals helping others contribute to better functioning of persons they offer their support to (Bamforth et al., 2023).

Table 1.
Elements of proposed hypothetical resilience enhancement program for psychologists and psychotherapists working in counseling based on evidence-based psychological interventions.

Type of activity	Module	General aim of the module
Supportive groups	Recognizing individual strengths, weaknesses, and needs	Learning about oneself, one's needs, abilities, and skills
	Developing self-supportive network	Giving individuals an opportunity to meet other professionals who share similar experiences and learning from them
	Strengthening individual skills	Giving individuals an opportunity to develop and enhance their skills while helping others experiencing similar difficulties
	Psychoeducation	Providing current empirically-based knowledge on compassion fatigue, burnout, coping strategies, self-compassion, normalizing individual's experiences
	Activities aimed at strengthening individual abilities to help others	Giving individuals an opportunity to share their knowledge with other group members, encouraging people to help other group members
	Activities aimed at strengthening individual abilities for self-help and search for help from others	Giving individuals an opportunity to learn from their own experiences, encouraging individuals to ask for help from others, reinforcing individual's behaviors aimed at searching support from others
Individual work with a professional	Recognition of individual needs	Recognition of basic problems that cause individual's emotional suffering and impede performing professional duties
	Recognition of individual styles of coping with adversities	Analysis of adaptivity of preferred coping styles, finding the best, most adaptive ways of solving work-related problems
	Recognition of individual preferences in self-care	Identification of self-care methods used by an individual on a daily basis, finding the best individually fitted methods of self-care
	Supportive sessions	Discussing the outcomes of individual sessions, identifying problems, and looking for solutions

5. SHAPING RESILIENCE OF PSYCHOLOGISTS AND PSYCHOTHERAPISTS DURING THE PROCESS OF EDUCATION

As it was already stated, resilience is perceived as one of the most important features enabling mental health specialists to remain emotionally stable, and protected in the light of emotionally demanding work settings (e.g. Kunzler et al., 2020; Pereira, Barkham, Kellett, & Saxon, 2017). At the same time, it is not properly, thoroughly researched nor is it included in regular teaching curricula for psychology students or psychotherapists in training. Until now there were several studies aimed at analysis of the significance of resilience for counselors functioning (e.g. Kay, 2016). In other research projects resilience was analyzed in the supervision settings (e.g. Coaston, 2019; Milne, 2009). There were also several, mostly pilot, empirical programs devoted to resilience development and maintenance offered in training programs for clinical psychologists (e.g. Delany et al., 2015; Joyce, et al., 2018) as well as studies in which specific features corresponding to resilience enhancement were analyzed (e.g. Hopkins, & Proeve, 2013; Pereira, et al., 2017; Robins, Roberts, & Sarris, 2019; Rogers, 2016). All of the above mentioned studies were rather anecdotal. They didn't result in introduction of systematic changes in teaching curricula nor in preparing specific modules or programs devoted to resilience enhancement in psychotherapists trainees or certified psychotherapists. Based on the data gathered up to date it seems important to address this issue in the nearest future.

In current curricula of master programs in psychology or certification training courses for psychotherapists the topics of self-care and resilience are usually offered as optional rather than obligatory elements of the study program. Similarly, the well-being of professionals rarely serves as an important and obligatory topic of supervisory training or supervision process itself. Such a situation can contribute to the reinforcement of psychologists' and psychotherapists' belief that self-care is optional rather than indispensable (Baker, & Gabriel, 2021; Posluns, & Gall, 2020), but as it was already stated, providing adequate psychological support and help to others is possible only when professionals are self-aware and maintain a relatively good mental condition (Kunzler et al., 2020; Pereira et al., 2017).

High levels of resilience require meeting certain criteria, including positive, empathetic, trustworthy and compassionate interpersonal relationships, sense of belonging, an ability to ask for help from others and accept the support they offer. Resilience also corresponds with high levels of self-awareness, self-acceptance, and adaptive ways of coping and regulating emotions (e.g. Connelly et al., 2017; Shrivastava, & Desousa, 2016). While providing help and support for others it is important to be attentive not only to the patients' needs but also to one's own feelings. It is therefore recommended to stay in touch with other professionals working in the field, have leisure time, engage in pleasant activities and hobbies. Crucial for sustaining a good mental condition is working in a supportive community. Offering help to others requires being attentive to oneself, and taking care of one's own emotional and mental condition (Zerban et al., 2024).

To underline the importance and the meaning of professional's resilience and well-being for the quality of counselling processes all the abovementioned elements should be incorporated in curricula of teaching programs for MA psychology students, psychotherapists and supervisors in training. Attention given to those factors during training processes can help practitioners to understand the importance of self-care and resilience for professionals' well-being and effectiveness of offered psychological help. Table 2 includes a short description of the components that should be introduced as obligatory elements of professionals' training programs. All of the elements given below

are identified as features hypothetically important for mental health of professionals based on the previous studies concerning resilience, but were not yet empirically tested in the settings of certified psychology or psychotherapy training programs curricula.

Table 2.

Hypothetical components of resilience-enhancing training module for psychologists and psychotherapists working in counseling.

Component of a module	Component's characteristics
Self-awareness	<u>Awareness of one's emotions and needs</u> is crucial to recognize the situations in which an individual feels good or bad and helps to decide what type of activity to undertake in order to take care of one's needs in professional settlements <u>Awareness of personal strengths and weaknesses</u> is important to carry on activities congruent with personal properties and is needed for planning and executing specific activities in professional settlements <u>Awareness of self-care engagement</u> helps an individual to decide how to take care of themselves and develop certain skills and abilities in work environment <u>Awareness of an ability to solve problems and deal with difficulties</u> is crucial to overcome any difficulties corresponding to extremely complex or new types of cases an individual works with
Intrapersonal skills	<u>Styles of coping with difficulties</u> abilities to flexibly apply coping strategies adequate to different situations, helpful in dealing with difficult interpersonal situations with patients <u>Styles of problem solving</u> abilities to overcome different types of difficulties experienced at different stages of diagnostic or therapeutic processes <u>Levels of mental flexibility</u> an ability to modify behaviors, coping or problem solving strategies to the most effective ways applicable in counseling processes <u>Personal schemas and beliefs</u> an ability to address personal beliefs and schemas interfering with diagnostic or therapeutic processes <u>Self-efficacy</u> an ability to plan and carry on diagnostic or therapeutic interventions necessary for achieving patients' therapeutic goals <u>Self-esteem</u> an ability to overcome difficulties observed in interpersonal relationships with patients <u>Hardiness</u> an ability to flexibly operate with specific tasks, coping mechanisms and problem solving strategies according to patients' needs without development of compassion fatigue or secondary traumatic stress
Interpersonal skills	<u>Communication styles</u> an ability to flexibly adjust communication strategies to patients' needs and developmental stages, and to adequately present information considering nuances of therapeutic relationships with respect to both patient's and professional's personal boundaries <u>Other awareness</u> an ability to observe, interpret and react to patients' behaviors, emotions and needs and being aware of the influence those factors have on professional's functioning <u>Interpersonal relationships</u> an ability to form meaningful, safe relationships in which a professional can receive social support they need

Environmental awareness	<u>Awareness of environmental cues and its meaning</u> plays an important role in forming professional's self-awareness, and in development and maintenance of meaningful relationships with patients, helps to maintain professionals' personal boundaries <u>Awareness of the personal meaning of work</u> helps professionals to maintain attentive and motivated even in complex and difficult therapeutic situations, prevents professionals from excessive engagement in their patients' life and functioning <u>Awareness of the personal meaning of leisure activities</u> is crucial to sustain work-life balance, and to effectively fulfill professional duties
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Offering systematic training modules aimed at resilience enhancement and well-being of psychologists and psychotherapists can serve as a useful tool enhancing the quality of life of professionals and increasing the effectiveness of therapeutic processes. Helping different, especially complex and/or traumatized, patients requires from professionals extreme personal contributions. Such an involvement is better approachable with professionals' high levels of resilience (Wicks, 2007). Due to high levels of resilience professionals are able to sustain highly empathetic but not tired with helping (i.e. less prone to compassion fatigue), and less likely to experience secondary traumatic stress. As research shows resilience can be developed in many different ways (e.g. Helmreich et al., 2017; Joyce et al., 2018; Liu et al., 2020; Schäfer et al., 2024). It can be enhanced and maintained with highly developed emotion regulation skills and self-awareness. It is connected to high flexibility and coping skills. It also corresponds to awareness of one's strengths and weaknesses, abilities to maintain work-life balance and high attentiveness to self-care practices. As Wicks (2007) suggests in order to develop and maintain high levels of resilience psychologists and psychotherapists working in counseling business should learn about themselves, their beliefs, and maladaptive schemas. They also need to take care of themselves, especially through meeting and soothing their needs and managing emotions. To fulfill all those requirements they should receive systematic, organized and obligatory training. This way during their education process professionals will receive a clearly stated message about the importance of self-care and resilience for effective fulfilment of professional duties.

6. CONCLUSIONS

Resilience serves an important role and seems crucial for high levels of well-being and effectiveness of psychologists and psychotherapists working in counseling business. Since resilience – understood as a process of successful adaptation to difficulties and challenging life events and a mechanism protecting professionals from compassion fatigue and secondary traumatic stress – can be developed or increased, special attention should be given both to preventive programs and training modules devoted to resilience enhancement. In order to develop or maintain high levels of resilience, professionals working in counseling business have to, among others, take into consideration their needs and sustain supportive relationships. Since resilience is based on previous experiences, its development requires an ability to learn from previous situations, to have an open mind, accept changes, and practice self-compassion.

The ideas presented in the article are theoretical ones, and can serve as an introduction to the future research on effectiveness of specific resilience-enhancing programs devoted to psychologists and psychotherapists. In the next steps, the focus should be directed to

in-depth diagnosis of the psychoemotional condition of psychologists and psychotherapists. Based on the quantitative and qualitative research generalized information on psychoemotional needs of psychologists and psychotherapists should be described and utilized in the process of construction of preventive programs aimed at enhancement of resilience levels of psychologists and psychotherapists working in counseling business. In the next step short-term and long-term effectiveness of such programs should be empirically verified. Additionally, in near future such preventive programs should be offered as a part of obligatory training courses that help professionals maintain high quality of life and good mental health.

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Chapter # 4

FROM SURGICAL TO COMPREHENSIVE CARE:

The reconfiguration of transgender healthcare in a university hospital of the Brazilian Unified Health System (SUS)

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ABSTRACT

Brazil has a universal public health system – the Unified Health System (SUS) – created in 1990 and founded on the principles of universality, comprehensiveness, and equity. As a unique public policy in the global context, ensures free access to healthcare for the entire population. Within this framework, healthcare for trans and travesti people was initially structured through the *Transsexualization Process*, established in 2008 and centered on gender-affirming surgeries. The experience since then has revealed the need to broaden the concept of care, incorporating psychological, social, and institutional dimensions: guidelines of Ordinance No. 2.803/2013 of the Brazilian Ministry of Health. The creation, in 2022, of the *Identidade – Transdiversidade* Outpatient Clinic, linked to the Health Complex of the State University of Rio de Janeiro (UERJ), responds to this demand by proposing a model of comprehensive and interdisciplinary care. Based on institutional records and ongoing research (2022–2025), this chapter analyzes the reconfiguration of transgender healthcare, with an emphasis on depathologizing practices and the interface between public policy and clinical work. Preliminary data indicate a high prevalence of psychological distress, suicidal ideation, and hormonal self-medication among users, underscoring the urgency of intersectoral policies focused on mental health and the strengthening of care networks.

Keywords: transgender health, depathologization, mental health, public policies.

1. INTRODUCTION

The Identidade – Transdiversidade Service is affiliated with the State University of Rio de Janeiro (UERJ) through its Health Complex, which includes the Pedro Ernesto University Hospital (HUPE) and the Piquet Carneiro Polyclinic (PPC). Established in May 2022 as an initiative of the Teaching and Assistance Unit (UDA) of Endocrinology, in partnership with the Coordination of the Transsexualization Process Outpatient Clinic and the Social Work Department of HUPE, the outpatient clinic offers specialized care to the transgender population, in accordance with the guidelines of the Transsexualization Process of Brazil's Unified Health System (SUS). Since 2008, HUPE has been accredited by the Ministry of Health, a federal agency, as a Specialized Care Unit in the Transsexualization Process, both in the hospital modality – focused on surgeries – and in the outpatient modality. The Identidade Service, however, is exclusively dedicated to clinical follow-up, which is the focus of this work.

Created within a public university, the service represents an innovative model within the SUS network, shifting the focus of care from surgery to a comprehensive and interdisciplinary clinical perspective. This institutional transformation reflects contemporary changes in transgender health policies, which seeks to move beyond the pathologizing and biomedical paradigm toward more affirmative and inclusive practices (Bento, 2021; Vergueiro, 2019).

The Transsexualization Process constitutes a public health policy within the SUS aimed at ensuring the right of trans and travesti individuals to access specific healthcare, especially regarding bodily transformations. Ordinance No. 457/2008 of the Ministry of Health regulated this form of assistance, later redefined and expanded by Ordinance No. 2.803/2013. In the medical field, Resolution No. 2.265/2019 of the Federal Council of Medicine updated the guidelines for the care of people with gender incongruence or those who identify as transgender. Although since the late 1990s – starting with Resolution No. 1.482/1997 – the population has been partially included in certain forms of care, barriers to access remain significant, limiting the effectiveness of healthcare and rendering their needs invisible.

From a methodological standpoint, this chapter is based on document analysis of institutional records, minutes of interdisciplinary meetings, and reports produced by the multiprofessional team between 2022 and 2025, combined with quantitative data collected from 210 users treated at the service. This ongoing research seeks to describe the sociodemographic profile and the main physical and mental health demands of this population, as well as to reflect on the impact of depathologization on clinical and institutional care.

Limited access to specialized services aggravates preventable morbidity and mortality. In the absence of effective public policies, many trans and travesti people seek alternative means of body modification, often under precarious and unsafe conditions. Invisibility, misinformation, and prejudice result in discrimination, violence, and exclusion, with direct impacts on both mental and physical health. Anxiety, depression, self-harm, eating disorders, and psychotic episodes frequently occur, as does the high use of tobacco, alcohol, and other psychoactive substances compared to the cisgender population. In this context, the Identidade Service team seeks to provide comprehensive, interdisciplinary, and humanized care, understanding gender and sexuality markers as expressions of human diversity rather than pathologies.

This chapter aims to analyze how the institutional experience of the Identidade Service exemplifies the transition from a model of care centered on medical interventions to one that is comprehensive and depathologizing. By situating this local experience within the global debate on transgender health, it seeks to discuss the challenges and possibilities of a public healthcare approach that promotes inclusion, interdisciplinary training, and recognition of the plurality of gendered existences.

2. BACKGROUND

The consolidation of the Unified Health System (SUS) in 1990 represented a historic achievement in the field of Brazilian public policy, guaranteeing universal and free access to healthcare based on the principles of universality, comprehensiveness, and equity (Law No. 8.080/1990). The SUS is internationally recognized as one of the most comprehensive public health systems in the world (Pan American Health Organization, 2018). However, the full implementation of these principles encounters limits imposed by structural inequalities and the various forms of exclusion that affect historically marginalized populations, such as trans and travesti people.

International and Latin American studies have highlighted the vulnerability of this population in relation to healthcare systems (Winter et al., 2016; World Health Organization, 2022; World Professional Association for Transgender Health, 2022; Rocon, Rodrigues, Zamboni, & Pedrini, 2020). In many countries, access to healthcare for trans people remains restricted by rigid biomedical criteria and the pathologization of gender identities. In Brazil, although the Transsexualization Process represents progress, its initial focus on surgeries and endocrinological monitoring maintained a medicalizing logic for a long time (Bento, 2021; Pelúcio, 2020).

Since 2013, with the expansion of ministerial guidelines, the focus of care has come to include psychosocial and comprehensive health dimensions. This shift is often presented as part of a broader depathologization movement, consolidated by the World Health Organization in 2019, when the ICD-11 replaced the term “*gender identity disorder*” with “*gender incongruence*”, moving it from the chapter on mental disorders to the field of sexual health (World Health Organization, 2022). However, this change does not break with the diagnostic logic; it merely reinscribes it elsewhere within medical discourse. The trans experience remains coded as a clinical condition, revealing the persistence of a normative gaze upon bodies and modes of subjectivation. In this context, the discourse of inclusion operates as a new, subtler form of regulation, still sustained by the need for institutional legitimation. In contrast to this diagnostic rationality, the ethical position that guides the work of the Identidade Service is radically distinct: it is a clinic that transforms the clinical act itself into a form of ethical resistance to the identitarian and diagnostic normativities that permeate the field of mental health.

From this perspective, care for trans people must be understood in its ethical, political, and social dimensions. The concept of comprehensiveness in healthcare – one of the pillars of the SUS – implies recognizing the subject as the protagonist of their own care, as opposed to disciplinary fragmentation and medical-centered hierarchization, a perspective discussed by several authors in the field of collective health (Ayres, 2009; Cecílio, 2011). This paradigm underpins the model developed by the Identidade Service, in which interdisciplinary care is integrated with clinical listening and the training of professionals for the SUS.

Thus, the psychoanalytic framework guides the clinical practice in mental health at the Identidade Service. More than one theoretical tool among others, psychoanalysis offers a treatment orientation that, by operating from the subject’s discourse rather than from knowledge about the subject, redefines the very meaning of care. As an orienting framework, it provides a direction grounded in desire and singularity, rather than in models of normalization (Alberti & Jorge, 2019). The presence of psychoanalysis within the university institution, articulated with teaching and research dimensions, allows health training to open itself to listening to the subject and to the singular forms of suffering, thereby escaping classifications that tend to fix and reduce human experience.

3. OBJECTIVES, DESIGN, METHODS

The present chapter aims to analyze the reconfiguration of transgender healthcare within a public university institution, highlighting the transition from a surgical model to a comprehensive, interdisciplinary, and depathologizing approach. It seeks to understand how the Identidade – Transdiversidade Service contributes to expanding access to healthcare and to consolidating inclusive public policies.

From a methodological perspective, this is a descriptive and analytical study, combining qualitative and quantitative approaches, conducted within the Health Complex of the State University of Rio de Janeiro (UERJ). The reflections presented here are based on: (a) institutional records and administrative documents of the service; (b) minutes of interdisciplinary clinical meetings held between May 2022 and August 2025; and (c) quantitative data obtained through a sociodemographic and clinical questionnaire applied to 210 users assisted between 2022 and 2025.

The variables analyzed include gender identity, age group, waiting time for care, mental health conditions, and experiences of violence. The data were organized in spreadsheets and analyzed using simple descriptive statistics (percentages and frequencies). In parallel, qualitative reports produced by the teams of Psychology, Social Work, Endocrinology, and Psychiatry were examined to identify the main thematic axes emerging from clinical practice.

The study follows the ethical principles of Resolution No. 510/2016 of the National Health Council and is part of the institutional project “*Depathologization and Comprehensiveness in Transgender Healthcare*”, approved by the Research Ethics Committee of UERJ.

4. FUTURE RESEARCH DIRECTIONS

4.1. Sociodemographic and Mental Health Profile

Preliminary data reveal a diverse population marked by multiple social vulnerabilities. Among the 210 users who participated in the study, 44.1% identify as transmasculine, 44.1% as transfeminine, and 11.8% as nonbinary. This distribution mainly reflects the service’s role as a reference center and the growing demand for specialized care, rather than differences in prevalence within the general population. The predominant age group is between 18 and 35 years old (73%), and 68% reside in the Metropolitan Region of Rio de Janeiro – figures that highlight the urban concentration of public health services and the barriers faced by those living in other regions of the state. The average waiting time for the first appointment was 16 months, with 33.3% waiting between one and two years, indicating a concerning gap between demand and institutional capacity. This discrepancy underscores the importance of expanding the care network and training new multiprofessional teams within the Unified Health System (SUS).

Regarding mental health, there is a high prevalence of psychological distress and self-perceived vulnerability, expressed in the indicators presented in Table 1. Suicide attempts and ideation, self-mutilation, and hormonal self-medication are frequent occurrences among users, along with high rates of family and institutional violence.

These data illustrate the cumulative impact of social exclusion, transphobia, and limited access to care, forming a scenario in which suffering cannot be understood merely as an individual expression but as an effect of structural determinants. The fragility of social bonds, delays in access to clinical follow-up, and the absence of qualified listening within primary healthcare networks recurrently emerge as factors that exacerbate psychological distress.

Table 1.
Mental Health Indicators of Users of the Identidade Service (2022–2025).

Indicator	Percentage (%)
Suicide attempts	26,8
Suicidal ideation	19,5
Self-mutilation	18,3
Hormonal self-medication	38,8
Family violence	50,0
Institutional violence	40,0

Source: Identidade – Transdiversidade Service Database / State University of Rio de Janeiro (UERJ) (2022–2025).

These findings are consistent with national and international studies that indicate a high incidence of psychological distress and suicidal behavior among the transgender population (Makadon, 2012; Dhejne, Van Vlerken, Heylens, & Arcelus, 2016; Rocon et al., 2020). The prevalence of hormonal self-medication and experiences of family and institutional violence reveal the insufficiency of care networks and the persistence of discriminatory practices that hinder access to healthcare.

Within the context of Brazil’s Unified Health System (SUS), the presence of interdisciplinary teams has proven fundamental in addressing this situation. The Identidade Service brings together professionals from Psychology, Psychiatry, Social Work, Endocrinology, Gynecology, Urology, Speech Therapy, Nutrition, Physical Education, and Nursing. This multiprofessional composition makes it possible to develop individualized care plans and to integrate clinical follow-up with psychological listening and social support.

4.2. The Multi- and Interdisciplinary Model and the Ethics of Care

The Identidade – Transdiversidade Service is structured according to a multi- and interdisciplinary model in which different specialties and fields of knowledge are articulated around a common guiding principle: to provide comprehensive and continuous care that recognizes the subject in their complexity, rather than reducing them to their immediate clinical demands. Weekly team meetings constitute a central device of this practice, enabling dialogue among professionals and the collaborative construction of follow-up strategies.

More than a technical arrangement, the articulation between the multiple and the interdisciplinary assumes the status of an ethical principle, guiding collective work in a way that avoids both the fragmentation and the standardization of care (Ayres, 2009; Cecílio, 2011). From this perspective, comprehensiveness ceases to be merely a normative ideal and becomes a concrete practice that departs from the traditional biomedical logic, allowing the clinical encounter to unfold outside the regimes of stigma and prescription. Users’ reports indicate that the first consultation is often experienced as an inaugural moment of speech and recognition, in which it becomes possible to articulate experiences that had previously been marked by silence or invisibility.

5. DISCUSSION

The experience of the Identidade – Transdiversidade Service demonstrates that broadening the concept of transgender healthcare is an essential condition for realizing the principles of Brazil’s Unified Health System (SUS). The shift from a surgical model to a comprehensive and depathologizing model promotes not only access to physical and mental

health care but also the social and institutional recognition of trans and travesti people as subjects of rights.

The data presented reveal that the psychological and social vulnerabilities of the trans population remain high, underscoring the need for intersectoral policies and for the ongoing training of healthcare teams. The articulation between the university and the public health system has proven strategic in consolidating innovative practices and promoting the inclusion of gender diversity in professional training.

Furthermore, this experience highlights the university's role as a site for producing knowledge and transforming care practices. The daily clinical work, intertwined with teaching and research, generates reflections capable of informing public policies and redefining institutional responses to the demands of trans people within the SUS. The pathway described here indicates that depathologization, more than a theoretical directive, is a political and clinical practice of recognizing the subject – one capable of transforming institutions and sustaining truly humanized care.

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Chapter # 5

GROUP THERAPY: THE PATH TO PROMOTING CHILDREN'S MENTAL HEALTH

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ABSTRACT

The contemporary world presents increasingly complex challenges for children. In addition to normative developmental tasks, children must now navigate epidemic health crises, armed conflicts, family dissolution, economic instability, and academic pressures. Consequently, children experience diminished security and elevated levels of anxiety, loneliness, and depression. While the need for emotional support has intensified across all demographics, children's psychological needs remain particularly underserved. The American Psychological Association has recently advocated for a paradigm shift from individual to group therapy, given the demonstrated cost-effectiveness and therapeutic efficacy of group treatment modalities. The group format aligns particularly well with children's socioemotional needs and provides a natural setting for them. This chapter discusses the unique aspects of group work with children, with a focus on emotions, presents specific intervention methods relying on the arts in psychotherapy, and demonstrates the empirical evidence for this type of group. These groups were predominantly conducted in school settings, with normative students as well as students experiencing diverse psychosocial difficulties. The findings support the conclusion that emotion-focused group therapy significantly contributes to children's well-being.

Keywords: group therapy, children, adolescents, well-being.

1. INTRODUCTION

Contemporary global complexities have intensified children's developmental challenges. Sociopolitical upheavals, economic uncertainties, family instability, and public health crises directly impact both parents and their children. Many parents, struggling with their own life stressors, may lack the capacity to address their children's emotional needs, resulting in heightened child anxiety, loneliness, and despair. While navigating child development under optimal conditions is challenging, crisis situations—family dissolution, health pandemics, and armed conflicts—can prove devastating. Although demand for psychological services increases during such periods, service provision remains inadequate.

A recent analysis by Whittingham, Marmarosh, Mallow, and Scherer (2023) documented that millions of Americans seeking mental health services encounter unmet needs. The authors propose that transitioning from the current individual therapy paradigm to group therapy models could address this service gap. Their economic analysis demonstrates that if each practicing psychologist incorporated one therapy group into their individual practice, an additional 3.5 million individuals could receive treatment while saving millions in healthcare expenditures. Thus, group treatment expansion could substantially enhance the population's mental health outcomes. However, the rationale for group therapy extends beyond cost-effectiveness. Recent empirical evidence has established group therapy as a mature clinical field demonstrating the "three Es": Efficient, Effective, and Equal to

individual treatment (Burlingame & Strauss, 2021). However, child and adolescent group psychotherapy research lags far behind (Arnold, Burlingame, & Rosendahl, 2024).

The aim of the current chapter is to highlight child and adolescent group therapy by presenting a relatively new orientation—emotion-focused therapy (EFT)—suggesting unique practice interventions, and demonstrating research evidence for the efficacy of such groups.

2. LITERATURE REVIEW

Group interventions vary in structure and objectives. The established typology for adolescent groups encompasses psychoeducational, counseling, and psychotherapy modalities (Gladding, 2003; Fineran, Nitza, & Patterson, 2017). Group typology determines membership size, therapist qualifications, and therapeutic processes, though categories often overlap. Research indicates that 50% of child and adolescent groups are educational, 40% are counseling-oriented, and 10% are psychotherapeutic, with therapy groups demonstrating the greatest efficacy (Hoag & Burlingame, 1997).

Although past studies, in general, indicated promising outcomes, they mostly referred to psychosocial and school-based interventions (Aldabbagh, Glazebrook, Sayal, & Daley, 2022; Boldrini et al., 2023; Durlak et al., 2011; Perlstein, Fair, Hong, & Waller, 2023), often based on cognitive-behavioral orientation (Bennett & Gibbons, 2000; Riise, Wergeland, Njardvik, & Öst, 2021), and involving parents as the primary recipients of service (Kaminski & Claussen, 2017). However, group therapy with children and adolescents is rather scarce (Arnold et al., 2024), despite evidence that group therapy is the most promising setting to address difficult problem behaviors, as noted years ago (Hoag & Burlingame, 1997). Indeed, a recent meta-analysis (Arnold et al., 2024) assessed the effect of group therapy on externalizing behavior—a global issue in the field of mental health (Kahn & Aram, 2020) and among the top reasons for youth referral to services (Riise et al., 2020). Results of this analysis showed a medium effect on behavior problems, suggesting that group therapy is associated with significant improvement in externalized behavior, with outcomes comparable to past research. Nevertheless, the authors also point to the low quality of the existing studies and call for more research on group therapy with children and adolescents.

This chapter focuses on group psychotherapy and provides additional evidence supporting the efficacy and effectiveness of group therapy with challenging children.

2.1. Group Therapy for Children

Group therapy represents an optimal intervention modality for children, providing a naturalistic setting that reduces stigmatization compared to individual therapy while offering extensive emotional and social support. Groups facilitate belonging, social skill acquisition, friendship development, and intimacy formation. Moreover, group therapy is a solution to equity and access issues for children from underprivileged backgrounds, who are also the neediest ones (Arnold et al., 2024; Whittingham et al., 2023). However, children present unique therapeutic challenges. Typically referred by others rather than self-referred, they often lack enthusiasm for psychological intervention and therapeutic sophistication, and their self-regulation is often limited. They can demonstrate significant resistance, anger, and defiance. Traditional talk therapy may prove excessively threatening; therefore, specialized indirect and projective techniques are required, necessitating specifically trained group facilitators (Gladding, 2011; Haen & Boyd Webb, 2019).

Psychotherapy groups address more severe personal and interpersonal difficulties, dysfunctional behaviors, or diagnosed developmental and mental disorders. These groups emphasize individual issues through psychodynamic exploration to enhance functioning. Self-expression, self-exploration, insight development, and behavioral change are actively promoted. These intimate, less structured groups require very small membership. Populations include students with learning disabilities (LD), attention deficit hyperactivity disorder (ADHD), aggressive behaviors, and antisocial tendencies. These children exhibit elevated stress and anxiety levels alongside diminished self-esteem, self-efficacy, and self-regulation. While some demonstrate withdrawal patterns and others display externalizing behaviors, all require psychological wellness and behavioral functioning enhancement. They are sad, angry, and mistrustful, and require substantial encouragement and support. Groups must therefore be small and intimate, providing secure foundations for cognitive and emotional exploration leading to insight development and behavioral change (Hill & O'Brien, 1999; Hill, 2005). This conceptualization determines group objectives, theoretical frameworks, methodologies, and therapist behaviors.

Primary objectives include stress and anxiety reduction, anger and aggression reduction, relationship trust reconstruction, enhanced self-understanding, and increased commitment to necessary behavioral modifications. These goals necessitate psychodynamic approaches guiding children toward self-exploration. Recognizing emotions as fundamental to human action, our intervention emphasizes emotional processing. We developed an emotion-focused modality based on Emotion-Focused Therapy (EFT) established by Greenberg (2002) for individual therapy and Johnson (2008) for couple therapy.

2.2. The EFT-G Modality

The emotion-focused approach suggests that a person has two selves: the cognitive self — values, norms, feedback — and the emotional self — authentic, spontaneous, emotional. The emotional self reacts first; only later comes the cognitive evaluation. When a dog threatens someone, the first reaction is fear; only later comes the rational response. The two selves must coexist harmoniously; when the emotional self bursts out, the outcome is aggression, but when the cognitive self represses emotions, the outcome may be depression (Greenberg, 2002). The author specifically focuses on emotions such as anger, sadness, fear, shame, and guilt, which most individuals find difficult to cope with; such emotions may burst out in the wrong way and at the wrong time. Thus, the emotion-focused approach encourages the expression of emotions, identifying emotions, comprehending emotions, and controlling emotions. It is of major importance to start teaching about emotions as early as possible, and a group is the most suitable setting to learn it, due to the unique therapeutic factors such as universality, altruism, identification, imitation, and above all, the love and support in intimate groups (Yalom & Leszcz, 2015). In a most recent study (Maixner & Shechtman, 2020), over 100 elementary students identified as highly aggressive participated in small groups that focused on self-control. In 10 sessions, children learned reappraisal skills which helped them apply rational reactions to overcome spontaneous angry reactions. They first identified their angry episodes and possible triggers, agreed to own them, then looked at possible rational reactions, and exercised them. The group acted as a major source of suggestions and support.

2.3. The Process of Intervention

We implement three developmental stages aligned with theoretical orientations suggested by Prochaska and Norcross (2018):

Stage 1: Foundation building (Sessions 1-4)

The initial stage emphasizes mutual support, emotional vocabulary development, and constructive feedback skills. Group contracts, rules, and objectives are established through therapeutic games and activities. This humanistic orientation phase reduces anxiety and enhances security while establishing supportive norms maintained throughout treatment. Group relationships and group cohesion are among the most important therapeutic factors (Burlingame et al., 2018; Yalom & Leszcz, 2015), also in groups with children (Shechtman & Gluk, 2005).

The following example illustrates how we enhance emotions.

In a first session, we displayed some objects on the floor, from which children were invited to choose one and share feelings about it. One girl chose a book, sharing her positive emotions when her father reads to her: "I don't get to see him often because he is in the army, but when he reads to me, I feel him very close." Another boy glanced at her, responding, "My dad never reads to me. I selected a stone; I like to always be ready for the next fight." Similar games using written cards (sad, angry, frustrated, etc.) or pictures help children enhance their vocabulary of emotions and identify such emotions in themselves. The reaction to expressed emotion is crucial, and when a reaction is negative, we suggest trying another, more supportive response.

Stage 2: Working phase (Sessions 5-11)

This central stage involves participants exploring life events impeding well-being through cognitive and emotional processing. Empowered by therapists and peers, participants share personal experiences and feelings while developing behavioral understanding. Psychodynamic principles guide this emotionally focused stage (Prochaska & Norcross, 2018). To facilitate intimate disclosure among young clients, we employ projective techniques and arts-based interventions, which are popular in work with children (Gladding, 2011). These include techniques such as bibliotherapy (literature utilization), art therapy (visual creation), phototherapy (photographic exploration), cinematherapy, and therapeutic cards. These identification-based methods advance therapeutic progress while maintaining engagement through playful elements (Shechtman & Katz, 2007). Here are two examples from our war zone.

In one session with 10-year-old girls, we displayed some cards to choose from. One very quiet and withdrawn girl selected a picture of a crying woman, sharing the moment when her family was informed about her father's death in the war. The major feelings she expressed were fear and guilt. She was afraid that she would lose her mother too and felt guilty that she could not find a way to help her mother.

In another group of 12-year-old boys, phototherapy was used. The boys went out with their cell phones to take pictures of their interest. One boy came back with a picture of a ruined house and shared with the group his experience of going back to see his own ruined house. He was one of the children whose family was evacuated from home for months; the fear of facing his ruined house was overwhelming.

Another very useful technique is bibliotherapy. In a group of aggressive boys, the poem "Joey Joey" (Silverstein) was introduced. The poem presents a boy who spontaneously threw a stone at the sun; the sun fell down on his foot and there was darkness everywhere. The discussion focuses first on the boy's feelings—the anger, the rage, the impulsive reaction—and their feelings while listening to the poem. Based on identification processes, the children explore their own emotions and share relevant personal experiences. Then they try

to understand what could trigger such an impulsive reaction in the boy and in themselves; they share private moments of impulsivity and the feelings of shame, guilt, and helplessness. They can talk about them, write their own story or poem, or draw "their monster." Finally, they discuss possible ways to change and improve behavior.

These three examples illustrate how helpful the projective interventions are in engaging children in the therapeutic process.

Stage 3: Termination (Sessions 12-15)

The final stage consolidates gains, processes termination, and plans future application of developed skills. We consider this stage very important as it is the bridge to reality. Participants say goodbye to each other through positive feedback, which has an empowering long-term effect. They also serve as mirrors to acknowledge each other's gains and remind each other about goals they need to work on in the future. All these are achieved through structured activities, oral and written exchanges.

Here is an example of an activity at termination.

At termination, the group provides mutual feedback. A boy says to one of the girls: "I remember you at the beginning of the group hiding under the table, refusing to sit with us, but you became such an important participant here. You share, you support, you were so helpful to me."

2.3.1. Validity of the Intervention

We studied the validity of the EFT-G modality in several ways: controlled comparisons to no treatment (control or waiting list), comparison to another type of treatment, and comparison to individual treatment, under normal and crisis conditions. All studies employed pre-post experimental-control designs with random assignment, when feasible including six- to nine-month follow-up assessments. Statistical analyses utilized MANOVAs for smaller samples and hierarchical mixed models for larger samples, accounting for group-specific effects. A description of some of these studies follows. All studies were conducted in schools, approved by the research authority in the ministry of education and the ethics committee of the university. Parent consent was required for all participants.

Study 1: Underachieving students

The first study (Shechtman, Gilat, Fos, & Flasher, 1996) included 142 fifth- and sixth-grade students from two schools, identified as underachievers (grades ≤ 50 in language and mathematics). Participants displayed additional dysfunctional behaviors ranging from withdrawal to externalization, affecting relationships, discipline, and mood. They were randomly assigned to experimental ($n = 71$) or control ($n = 71$) conditions. All participants received standard academic support (4 hours weekly). Experimental participants additionally attended weekly 50-minute group counseling sessions for 15 weeks, facilitated by two trained counselors.

Measures included academic performance (grades and standardized tests in mathematics and language), self-esteem, self-regulation (self-report), and social status (teacher report).

Results indicated an impressive improvement in academic achievement for the children in the experimental groups only. They improved from failing scores and grades to average scores and grades of 75 in both subjects, with 75% showing improvement. Significant improvements occurred in self-esteem and self-regulation. Social status showed delayed improvement, becoming significant only at six-month follow-up. Control participants showed no significant changes. In summary, while psychosocial improvements aligned with expectations, academic gains proved surprising. Four hours of remedial instruction alone

produced no change, whereas one hour of group therapy yielded substantial academic improvement, highlighting the mental health-learning nexus and group treatment efficacy.

Study 2: Aggressive youth

Another study dealt with aggressive youth (Shechtman & Tutian, 2015). Participants were 230 students from 30+ schools, meeting aggressive behavior criteria based on a questionnaire. Teachers enrolled in a graduate education program conducted the groups in 15 one-hour sessions. The teachers were trained in the EFT method over 56 hours (one semester) and received group supervision throughout the treatment process (a second semester). Measures included aggressive behaviors, using both self (CBCL) and teacher (TRF) forms (Achenbach). Results indicated a reduction in aggression scores only in the treatment groups. More impressive were the clinical severity reductions: CBCL severe level decreased from 24% to 10% (experimental) versus 9% maintained (control); TRF severe level decreased from 30% to 10% (experimental) versus 12.5% maintained (control). In summary, results demonstrate that the EFT groups are efficient in aggression reduction. Interestingly, the therapists were trained teachers, suggesting expanded therapeutic role potential with appropriate training and supervision.

Study 3: Post-war trauma

A third study focused on post-war trauma (Shechtman & Mor, 2010). Participants were 104 students (grades 5, 6, and 9) from 18 schools, screening positive for mild or greater trauma symptoms on the Child Post-Traumatic Stress Reaction Index. The study was conducted a month after the war ended. School counselors conducted 10-week emotion-focused groups following specialized training. Measures included a post-traumatic symptom questionnaire and a child anxiety scale. In addition, we used process variables, including attachment to the group and group cohesion. Results indicated a significant reduction in PTSD and anxiety only for the treatment children. In addition, impressive reductions were observed in clinical severity from 47% to 20% in the experimental group versus no change in the control (40% to 37%). Similarly, anxiety severe level decreased from 24% to 3.6% in the experimental group compared to 9.6% to 4.3% in the control. In addition, anxiety reduction correlated with attachment levels to the therapist and group members and group cohesiveness, indicating the importance of close group relationships for anxiety amelioration. In summary, the EFT groups seem to be efficient also for anxiety and PTSD reduction, and the finding that close relationships are a healing factor contributes to our understanding of the power of groups.

In the above three studies, we showed the efficacy of these groups, as they were helpful with different populations. Another way to show the importance of the groups is to point to their effectiveness, that is, that they are cost-effective.

Study 4: Cost-effectiveness

To demonstrate cost-effectiveness, outcomes of groups were compared to individual treatment (for example, Shechtman, 2003). Participants were 101 aggressive children (grades 5-6) from multiple counseling centers: 30 assigned to individual treatment, 71 to groups (3-5 members). Measures included the level of aggression on the CBCL (self-report) and TRF (teacher report) instruments.

Results indicated equivalent efficacy between group and individual modalities. Note that groups treated approximately four times more children with comparable outcomes.

In addition, we also applied process research methods. First, we assessed the progress of children using the "change process" suggested by Prochaska. The change process is a four-stage progression: precontemplation (no awareness), contemplation (awareness with no intention to change), preparation (wishing to change), and action (real efforts to make a change). These stages were determined by analyzing participants' verbal reactions in each of

the 10 sessions, based on transcripts of sessions. Results showed that at the first session, all participants were at the precontemplation stage, meaning that they were unaware of a problem in their behavior. In the second session, both groups moved toward contemplation, that is, becoming aware but indifferent. The two groups continued progressing on a similar path along the 10 sessions. About 80% of participants, both in individual and group treatment, reached the preparation or action stage. These results support the outcomes on the questionnaires as well as the rationale of the intervention: after children express their feelings, they may develop insight into their negative behavior, increase motivation to make changes, and act on them.

The second process measure related to therapeutic factors, using four components: emotional awareness, relationship-climate, other versus self-focus, and problem identification-change. The only difference revealed was in the emotional awareness component, with higher levels in group treatment. In summary, results indicated general reduction in aggression over time irrespective of format of treatment. Given high child aggression prevalence and researchers' skepticism regarding group treatment for aggressive behaviors (Dishion, McCord, & Poulin, 1999), these equivalency findings hold particular significance. Moreover, these studies point to similar patterns of change, indicating that group and individual therapy with children are not that different. The similarity in the pattern of change may be attributed to the very small groups in this study, a necessity in working with aggressive youth. Nevertheless, the groups seem to be efficient, and they are obviously more cost-effective than individual treatment.

Study 5: Comparison to CBT

A third way to establish the validity of the EFT intervention is to compare it to an alternative group approach. The following investigation (Shechtman & Pastor, 2005) compared EFT-G (then termed humanistic groups) with Cognitive-Behavioral Therapy (CBT) groups commonly implemented in schools (Riise et al., 2021). The 200 second-grade children in one learning center for students with learning disabilities were divided into three experimental conditions: EFT, CBT, and no-treatment controls. Scores on language and math were recruited from report cards; adjustment, self-efficacy, and social rejection were based on student self-report questionnaires. Results indicated that EFT groups demonstrated superior outcomes across all measures compared to both CBT and control conditions. In this study, we were also interested in process differences. Process analysis was based on transcripts of all sessions using the Client Behavior System and the Therapist Helping Skills system (Hill & O'Brien, 1999). The Client Behavior System includes four simple verbal behaviors (e.g., agreement) and four advanced verbal behaviors (cognitive exploration, emotional exploration, insight, and change). The analysis revealed that in EFT groups, there was lower resistance, higher affective exploration, insight, and change, while CBT groups showed more cognitive exploration. Transcript analysis of Therapist Helping Skills indicated EFT therapists utilized more encouragement, feeling reflection, and interpretation, while CBT therapists emphasized information and guidance. The different processes revealed in each type of group add to the content validity of the intervention; both group members and therapists used different behavior systems according to their theoretical orientation. In EFT groups, the focus on emotions was indeed more obvious, which may explain the positive gains in these groups.

2.4. Parent Groups for Child Well-Being

Another approach to helping children improve child well-being is to work with their parents. The following study (Zipferfal & Shechtman, 2017) examined the benefits for children through parent group participation. Participants were 156 parents of

ADHD-diagnosed children from multiple school centers. A random design was used to compare parents participating in EFT groups of 12 sessions with waitlist control parents. They completed instruments to measure their own growth following treatment and instruments for their children, including child self-efficacy and child problem behavior. Results indicated that children of treated parents showed significant improvements in self-efficacy and reduced problems on the well-being measure. Control group children showed no changes. Some of the children's gains were related to parents' improvement. Hence, parent treatment represents an alternative pathway for enhancing children's well-being using the EFT-G modality. Interestingly, the EFT modality was also applied to the work with parents.

2.5. General Discussion and Conclusion

This chapter demonstrates that group therapy provides an efficient and effective intervention for enhancing child well-being during both normative and crisis periods. The imperative to address children's mental health is evident, yet children rarely seek treatment independently. School-based interventions capitalize on the "captive audience" while reducing stigmatization associated with individual counseling. Group participation with similarly struggling peers diminishes isolation and perceived deviance. Furthermore, current counselor-student ratios and limited school psychologist availability render individual therapy provision impossible for meeting contemporary children's needs (Whittingham et al., 2023).

Current research has established that group therapy is efficient, effective, and equivalent to individual treatment for general populations (Burlingame & Strauss, 2021). The present review of studies extends these findings to child and adolescent populations, demonstrating consistent superiority over no-treatment controls (Shechtman et al., 1996; Shechtman & Mor, 2010; Shechtman & Tutian, 2015), enhanced efficacy compared to psychoeducational groups (Shechtman & Pastor, 2005), and outcome equivalence with individual therapy (Shechtman, 2003). Group interventions vary; most of them are psychoeducational and counseling groups. Although they all are valuable (Aldabbagh et al., 2022; Durlak et al., 2011), children with various challenges such as aggression, PTSD, ADHD, and others need a more intensive intervention. They need psychotherapy groups, that is, small and intimate groups that allow and encourage the expression of emotions, focus on the unique challenges that children face, and elevate self-regulation skills. The EFT modality serves children well, as it leads to enhanced expression of emotions, the development of self-awareness, and the increase of motivation to change destructive behavior (Shechtman, 2003; Shechtman & Pastor, 2005).

Process investigations point to two important variables that may be attributed to the positive outcomes of these groups. First are relationships: relationship-climate appeared as the most important variable in children's groups (Shechtman & Gluk, 2005). The responses to the question "What was most helpful in the group?" included responses such as "children in my group liked me," "respected me," "accepted me," "listened," "understood," and "loved me" (Maixner & Shechtman, 2020). Bonding to the group and the therapist was statistically related to outcomes (Shechtman & Katz, 2007; Shechtman & Leichtentritt, 2010). Group relationships and cohesion are highly appreciated variables in the group literature (Burlingame, McClendon, & Yang, 2018; Kivlighan & Holmes, 2004; Yalom & Leszcz, 2015). This finding holds critical implications for therapists, as children's limited skills in group participation require skillful guidance toward intimacy and friendship development.

Second, process research confirms that children engage in psychodynamic processes within these groups. Participants share intimate information, express emotions, explore individual issues cognitively and affectively, develop insights, and report behavioral changes (Shechtman, 2003). Therapists employ corresponding psychodynamic helping skills including open questioning, feeling reflection, emotional expression facilitation, and interpretation (Shechtman & Pastor, 2005; Hill, 2005). These findings establish both process validity and intervention uniqueness, supporting the conclusion that EFT groups provide safe, effective pathways for enhancing adolescent well-being.

3. LIMITATIONS

Several limitations constrain generalizability. First, all studies occurred within one country. Only one study specifically assessed Arab students with adolescents in EFT groups. The study was comprised of 173 adolescents who scored high on parent-child conflict. These adolescents were divided into three conditions: EFT-G, EFT-G + films, and control. Results indicated more favorable outcomes in the two treatment groups compared to control: the number and intensity of conflicts declined in both groups with no effect of films, and no change was observed in the control conditions (Tanous-Haddad & Shechtman, 2019). In addition, therapeutic factors were assessed in this study. The most frequently mentioned factor was relationship-climate (Tanous-Haddad & Shechtman, 2020). These outcomes and process variables are comparable to the studies with a Jewish population, suggesting that EFT-G is efficacious for the Arab population as well. Despite this attempt, replication across international contexts remains necessary.

Second, comparison to individual therapy was limited to only one study. To establish the effectiveness of this model, more replications are needed with a wide population. Similarly, to establish the superiority of EFT groups over other theoretical orientations, we need more than the one study showing that these groups produced better results than CBT groups. It is a challenging issue, as most interventions with children are CBT-oriented (Bennett & Gibbons, 2000; Riise et al., 2021). However, presently we can only suggest that EFT-G is a viable intervention with children with socioemotional challenges.

Third, the EFT modality requires specialized therapist training. Training deficits represent major barriers to group therapy implementation (Whittingham et al., 2023). EFT groups particularly demand therapist competencies in children's engagement, projective method utilization, and psychodynamic skill application. Research demonstrates direct connections between therapeutic activities and outcomes—structured activities increase self-disclosure (Leichtentritt & Shechtman, 1998), while therapist self-disclosure predicts improvements across multiple domains (Shechtman & Leichtentritt, 2010).

Finally, children present inherent challenges. Their non-normative client status, potential for rejection and defiance, and their behavior problems require a secure setting and therapists with specific characteristics including firmness, clear boundaries, and sophisticated resistance management. Conducting such groups in a school setting is helpful, as the controlled environment is a buffer against dropout, which tends to be high in group therapy (Yalom & Leszcz, 2015). Nevertheless, it is crucial to ensure children and their parents that they have the freedom to leave the group when appropriate for them.

4. CONCLUSION

Despite noted limitations, accumulated evidence supports emotion-focused group therapy as a viable intervention for enhancing children's well-being across diverse settings. Children worldwide face similar developmental tasks with comparable socioemotional needs for belonging, peer interaction, recognition, respect, and acceptance (Khan & Aron, 2020; Riise et al., 2021). Well-facilitated groups address these universal needs effectively.

Moreover, considering the obvious gap between children's needs and available services, perhaps it is time to expand the therapeutic role potential and include trained teachers in treatment, as shown in our study on aggressive children (Shechtman & Tutian, 2015). During the prolonged war in the country, the role of teachers was indeed redesigned to become emotionally supportive helpers to their students (Frei-Landau, 2024).

Finally, parents are an extremely powerful resource of support for their children. Being a parent of a child with developmental or other challenges can be very stressful; helping parents in groups appears very worthy for their children (Ziperfal & Shechtman, 2017). Working with parents to help their children is not new (Beelmann, Arnold, & Hercher, 2023; Kaminski & Claussen, 2017), yet not frequent enough, although it may be another effective avenue to improved children's well-being.

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Chapter # 6

EXAMINING MENTAL HEALTH LITERACY AND ITS FACTORS AMONG SLOVAK AND FOREIGN UNIVERSITY STUDENTS

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ABSTRACT

University years can be stressful, making students vulnerable and reluctant to seek mental health support. Aim: This cross-sectional study investigated the relationships between gender, prior help-seeking experience (HSE) with a mental health professional (MHP), self-stigma, social stigma, and mental health literacy (MHL) among 438 Slovak (73.3 %) and foreign (26.7 %) university students (60.5 % women; M age = 22.76, SD = 4.96). Data were collected from October 2024 to March 2025 at Slovak and foreign universities through online and paper-based surveys in Slovak, English, and Italian. Measures included The General Help-Seeking Questionnaire, The Self-Stigma of Seeking Help Scale, The Perceptions of Stigmatization by Others for Seeking Help Scale, The Mental Health Literacy Scale, and descriptive, non-parametric, correlational, and multiple regression analyses were conducted. Women reported higher MHL and were more likely to seek psychological support than men. Both self- and social stigma were significantly negatively associated with MHL, confirming stigma as a key barrier to mental health knowledge and help-seeking. Foreign students showed lower MHL, suggesting cultural and systemic challenges. Prior HSE with MHP was positively associated with MHL. These findings highlight the complex social, cultural, and psychological factors associated with MHL and emphasize the need for stigma-reducing and culturally sensitive interventions in university settings.

Keywords: help-seeking experience, mental health literacy, self-stigma, social stigma, university students.

1. INTRODUCTION

Although starting university is for university students a positive milestone, it brings challenges like adapting to new social settings, academic demands, and adult responsibilities (Baik, Naylor, & Arkoudis, 2015; McKay, O'Bryan, & Kahu, 2021). Evidence shows elevated rates of anxiety, depression (Barrable, Papadatou-Pastou, & Tzotzoli, 2018), stress, and suicidal ideation (Beks, Cairns, Smygwyty, Miranda Osorio, & Hill, 2018). Students also face interpersonal problems, self-harm, learning difficulties, and career uncertainty (Krumrei, Newton, & Kim, 2010; Çebi & Demir, 2020), often linked to academic pressure and future concerns (Sagar-Ouriaghli, Godfrey, Graham, & Brown, 2020). Despite higher mental health risks than the general population (Beks et al., 2018), students frequently hesitate to seek professional help (Rickwood, Deane, & Wilson, 2007).

A key barrier to student help-seeking is poor mental health literacy (MHL), or difficulty recognizing mental illness (Koutra, Pantelaiou, & Mavroeides, 2024). Defined by World Health Organization (2004), mental health impacts well-being but remains overlooked. Jorm et al. (1997) introduced MHL as knowledge aiding recognition, management, and prevention (Zehra, Sharma, Pant, & Chatterjee, 2022), including illness identification, risk awareness, service access, and sustaining help-seeking attitude (HSA) and intention (HSI) (Jorm, 2000). MHL improves early detection, empathy, and help-seeking behavior (HSB) (Zehra et al., 2022), while low MHL limits HSB (Gulliver, Griffiths, & Christensen, 2010; Lee & Shin, 2020; Wright, Jorm, Harris, & McGorry, 2007). Beks et al. (2018) found males and international students had lower MHL, reducing help-seeking – confirmed in France (Theurel & Witt, 2022). Interventions raise MHL (Nazari, Garmaroudi, Foroushani, & Hosseinnia, 2023), which supports HSAs and HSB (Zehra et al., 2022; Yang et al., 2024). Awareness of disorders and services predicts help-seeking, though students often turn to informal sources (Çebi & Demir, 2020; Pham et al., 2020). Recognition boosts efficacy (Lu, Lien, Chao, Lin, & Tsai, 2021), and perceived need/benefit mediate HSI (Sagar-Ourighli et al., 2020).

Stigma has been widely recognized as a key barrier to positive HSA, HSI, and HSB among university students (Kim, 2021). It includes both public stigma – negative societal judgments – and self-stigma, where individuals internalize these beliefs, leading to reduced self-worth and avoidance of professional help (Vogel, Wade, & Haake, 2006; Kim, 2021). Numerous studies have highlighted stigma as a major obstacle to seeking support across cultures and student populations (Liu, Wong, Mitts, Li, & Cheng, 2020; Li, Denson, & Dorstyn, 2018; Shahwan et al., 2020). Stigma can result in isolation, fear of judgment, and worsened mental health (Nazari et al., 2023). While some research shows that greater HSI is linked to lower perceived stigma (Lian, Wallace, & Fullilove, 2020), others report that stigma remains a significant deterrent – particularly among male students (DeBate, Gatto, Rafal, & Bleck, 2022). Arab students facing privacy and cultural concerns (Khatib, Alyafei, & Shaikh, 2023), and Asian American students influenced by cultural notions of “saving face” (Nguyen, Kim, & Aronowitz, 2023). Web-based interventions show mixed results, with limited effects on reducing stigma (Nazari et al., 2023), while lower stigma levels have been associated with higher HSI (Dagani, Buizza, Ferrari, & Ghilardi, 2023). According to Begum, Preez, Robinson, and Zunszain (2024), stigma continues to negatively impact HSB in student populations.

Gender and prior help-seeking experience (HSE) with a mental health professional (MHP) are key predictors of HSB among university students. Female students generally seek professional mental health services more than males (Sheu & Sedlacek, 2004; Eisenberg, Golberstein, & Gollust, 2007; Sagar-Ourighli et al., 2020), partly due to masculinity norms discouraging men from seeking help (Kantar & Yalçın, 2023) and higher affective disorder prevalence in women (Rickwood & Braithwaite, 1994). Prior HSE positively influences HSA and future HSB, with female students showing more favorable HSA (Çebi & Demir, 2020). Students who sought support during distress also report more positive attitudes (Pham et al., 2020), and positive HSA predicts higher intention to seek help (Wang, Weng, Li, Xue, & Chen, 2024). Cultural and racial factors affect help-seeking: “saving face” hinders Asian American students (Nguyen et al., 2023), Black men use counseling less than White men despite high distress (Williams et al., 2023), and minority and international students are less likely to receive treatment than White/domestic students (Pei et al., 2024). Gender differences remain, with women reporting greater perceived need and treatment rates (Pei et al., 2024).

Research has examined links between gender, self-stigma, social stigma, and MHL among university students (Gibbons, Thorsteinsson, & Loi, 2015; Reavley, McCann, & Jorm, 2012; Smith & Shochet, 2011). Lower stigma is associated with higher MHL (Morgan, Ross, & Reavley, 2018; Schomerus et al., 2019) and greater HSI (Kim, Yu, & Kim, 2020; Kim, 2021). Koutra et al. (2024) found that students with higher MHL showed less stigmatizing attitudes and lower self-stigma. Gorczynski, Sims-Schouten, and Wilson (2020) reported no significant correlation between prior HSE with MHP and MHL.

2. OBJECTIVES

This study examines the relationships between gender, prior HSE with MHP, self-stigma, social stigma, and MHL among university students. Few studies have explored these links, especially between prior HSE with MHP and MHL. We expect most students won't seek help, women will be more likely to do so, and lower stigma will relate to higher MHL.

3. DESIGN

This study used a quantitative research design, which involved a quantitative data collection. A cross-sectional study was conducted among Slovak and foreign university students at Slovak universities in Slovakia and foreign universities abroad.

4. METHODS

4.1. Sample and Procedure

The final sample included 438 university students: 321 Slovak students (73.3 %) and 117 foreign students (26.7 %), studying in Slovakia or abroad. Women made up 60.5 % (n = 265) and men 39.5 % (n = 173), with a mean age of 22.76 years (SD = 4.96; range 17.17–70). Among foreign students, the most common countries of origin were Ukraine (13 %, n = 57), Russia (3.9 %, n = 17), Italy (3.4 %, n = 15), Czech Republic (1.6 %, n = 7), other European countries (1.6 %, n = 7), Asia (1.4 %, n = 6), Africa (0.9 %, n = 4), and America (0.9 %, n = 4). Participants studied at various Slovak and foreign universities (e.g., Czech Republic, Israel, Italy, Netherlands, Hungary, Ukraine), with 50.7 % (n = 222) completing the online version and 49.3 % (n = 216) the paper-based version. Most students were in the 1st degree (BA) program (61.6 %, n = 270), followed by the 2nd degree (MA/P.E/Dr./other...) program (34.9 %, n = 153), and 3rd degree (PhD) (2.7 %, n = 12); three students (0.7 %) did not report their level of study.

Data were collected from October 2024 to March 2025 via online (Google Forms) and paper-based surveys. The online form was distributed through university Facebook groups and official channels in Slovakia and abroad, available in Slovak, English, and Italian. English questionnaires without Slovak/Italian versions were translated and proofread by psychologist lecturers. The paper Slovak version was distributed on campuses and in Christian pastoral centers in Slovakia. Participation was voluntary, anonymous, and based on informed consent. Of 438 respondents, 336 gave explicit consent; 102 did not but their participation was considered implicit agreement.

4.2. Measures

Sociodemographic data included gender (0 – woman; 1 – man), age, academic level (1st degree program – BA; 2nd degree program – MA/P.E/Dr./other; 3rd degree program – PhD), origin (0 – Slovak student; 1 – foreign student), country of origin and university affiliation.

Prior HSE with MHP was assessed using additional items from the *General Help-Seeking Questionnaire* (Rickwood, Deane, Wilson, & Ciarrochi, 2005), covering previous use of professional help (e.g. from school counsellor, counsellor, psychologist, psychiatrist; 0 – Yes, 1 – No), number of visits, and perceived effectiveness (rated on a 5-point scale from 1 = extremely unhelpful to 5 = extremely helpful).

Self-stigma was measured using the 10-item *Self-Stigma of Seeking Help Scale* (Vogel et al., 2006), rated on a 5-point Likert scale. Items 2, 4, 5, 7, and 9 were reverse-scored. Higher total scores (range: 10–50) indicate greater self-stigma. Cronbach's alpha was 0.779, indicating good internal consistency.

Social stigma was assessed with the 5-item *Perceptions of Stigmatization by Others for Seeking Help Scale* (Vogel, Wade, & Ascherman, 2009), using a 5-point scale. Total scores range from 5 to 25, with higher scores reflecting stronger perceived public stigma. Cronbach's alpha was 0.901, indicating excellent internal consistency.

MHL was measured using the 13-item *Mental Health Literacy Scale* (Lee, Hwang, Ball, Lee, & Albright, 2019). Responses were on a 5-point Likert scale, with items 5–13 reverse-scored. Higher total scores (13–65) reflect greater MHL. Cronbach's alpha was 0.815, indicating good internal consistency.

4.3. Statistical Analyses

Data were analyzed in IBM SPSS Statistics 26. Descriptive statistics (mean, median, SD, range) were calculated, with medians emphasized for non-normal distributions. Histograms showed non-normality, so non-parametric tests were used. The Mann–Whitney U test compared independent groups (e.g., gender), with U, z, p, and effect size (r) reported per Cohen (1988). Chi-square tests examined associations between dichotomous variables (e.g., gender/origin and prior HSE with MHP). Pearson correlations and multiple regressions explored links between gender, prior HSE, self-/social stigma, and MHL. Assumptions (linearity, multicollinearity, homoscedasticity, residual normality) were tested and met.

5. RESULTS

5.1. Descriptive Statistics of Gender and Origin Differences of Prior MHE with MHP, Self-Stigma, Social Stigma, and MHL

Regarding prior HSE with MHP, 32.2 % (n = 141) of students reported having visited MHP (e.g., counsellor, school counsellor, psychologist, psychiatrist) for personal problems, while 67.8 % (n = 297) had not. Among those who had visited MHP (n = 141), the number of visits varied widely (M = 14.05, SD = 23.77, range = 0–150) and was generally evaluated as helpful (M = 3.71, SD = 1.23). Among 265 women, 34.7 % (n = 92) had sought professional help, compared to 28.3 % (n = 49) of 173 men. Women reported more visits (M = 15.84, SD = 27.50, range = 0–150) than men (M = 10.76, SD = 14.28, range = 0–81). However, gender differences were not statistically significant: $\chi^2(1, N = 438) = 1.96$, $p = .162$; continuity correction $\chi^2 = 1.678$, $p = .195$. Among 321 Slovak students, 31.2 % (n = 100) had sought professional help 35.0 % (n = 41) of 117 foreign students. Foreign

students reported more visits ($M = 19.00$, $SD = 30.49$, range = 0–150) than Slovak students ($M = 12.11$, $SD = 20.40$, range = 0–140). The association between origin and prior HSE with MHP was not significant: $\chi^2(1, N = 438) = 0.594$, $p = .441$.

As shown in Table 1, men reported slightly higher self-stigma than women, but the difference was not significant and had a negligible effect size. Men showed significantly higher social stigma, though the effect size was small, suggesting only a modest gender influence. No significant gender difference was found in MHL, indicating gender does not meaningfully affect MHL in this group.

Table 1.
Descriptive statistics of self-stigma, social stigma, and MHL – along with gender comparisons in the total sample of 438 university students.

Variables	Theoretical range	Total sample (N = 438)	Women (n = 265)			Men (n = 173)			U test (z; r)
		M (SD)	M (SD)	Me	Mean rank	M (SD)	Me	Mean rank	
Self-stigma	10–50	24.03 (6.96)	23.69 (7.01)	23.00	210.42	24.55 (6.86)	25.00	225.69	20779.00 (-1.246; -.06)
Social stigma	5–25	9.53 (4.51)	9.21 (4.54)	8.00	206.29	10.01 (4.42)	9.00	234.75	19537.50* (-2.337; -.11)
MHL	13–65	48.79 (8.57)	48.90 (8.78)	49.00	79.74	48.66 (8.38)	50.00	78.17	3009.50 (-.216; -.02)

Note: M – Mean; Me – Median; MHL – Mental Health Literacy; N – Number of total sample; n – number of partial sample; SD – Standard Deviation; SUM – Summary score of; U – Mann–Whitney U test; z – Standardized test statistic; r – Effect size (small $\approx .10$, medium $\approx .30$, large $\approx .50$); * $p < .05$; ** $p < .01$; *** $p < .001$.

As shown in Table 2, foreign students showed significantly higher self-stigma ($p < .05$, small effect) and social stigma ($p < .001$, small-to-moderate effect) than Slovak students. Slovak students had significantly higher MHL ($p < .001$, medium-to-large effect), indicating a substantial difference by origin.

Table 2.
Descriptive statistics of self-stigma, social stigma, and MHL – along with origin comparisons in the total sample of 438 university students.

Variables	Theoretical range	Total sample (N = 438)	Slovak (n = 321)			Foreign (n = 117)			U test (z; r)
		M (SD)	M (SD)	Me	Mean rank	M (SD)	Me	Mean rank	
Self-stigma	10–50	24.03 (6.96)	23.73 (7.20)	24.00	209.03	24.83 (6.21)	26.00	236.62	16073.50* (-2.044; -.10)
Social stigma	5–25	9.53 (4.51)	9.03 (4.47)	7.00	202.11	10.94 (4.33)	11.00	260.69	13316.50*** (-4.332; -.21)
MHL	13–65	48.79 (8.57)	53.58 (8.24)	57.00	105.64	46.98 (8.00)	47.00	68.95	1305.50*** (-4.512; -.36)

Note: M – Mean; Me – Median; MHL – Mental Health Literacy; N – Number of total sample; n – number of partial sample; SD – Standard Deviation; SUM – Summary score of; U – Mann-Whitney U test; z – Standardized test statistic; r – Effect size (small $\approx .10$, medium $\approx .30$, large $\approx .50$); * $p < .05$; ** $p < .01$; *** $p < .001$.

5.2. The Relationships Between Gender, Prior HSE with MHP, Self-Stigma, Social Stigma, and MHL

In the total sample (see Table 3), MHL was significantly negatively correlated with origin, self-stigma, social stigma, and moderately with prior HSE with MHP. Inter-correlations revealed significantly positive relationships between gender, social stigma, and origin; then between prior HSE with MHP, social stigma, and self-stigma; and moderately significant relationship between gender and social stigma. Multiple linear regression analysis (see Table 4) confirmed that self-stigma, social stigma, origin, and prior HSE with MHP were significantly negatively associated with MHL, explaining 58.7 % of its variance ($R^2 = .600$, Adjusted $R^2 = .587$, $F(4,366) = 84.46$, $p < .001$), while gender was not significantly related with MHL.

Among Slovak students (see Table 3), MHL was significantly negatively correlated with gender, self-stigma, and social stigma. Inter-correlations revealed significantly positive relationships between gender, self-stigma, and social stigma, and between prior HSE with MHP and self-stigma. Multiple linear regression analysis (see Table 4) revealed that self-stigma, social stigma, and gender were significantly negatively associated with MHL, while prior HSE with MHP was not significantly related with MHL. The model explained 43.5 % of the variance in MHL ($R^2 = .489$, Adjusted $R^2 = .435$, $F(4,243) = 50.04$, $p < .001$).

Among foreign students (see Table 3), MHL was significantly negatively correlated with self-stigma and social stigma, and with prior HSE with MHP. Inter-correlations revealed significantly positive relationships between prior HSE with MHP, social stigma, and self-stigma. Multiple linear regression analysis (see Table 4) revealed that self-stigma and social stigma were significantly negatively associated with MHL, while gender and prior HSE with MHP were not related with MHL. The model explained 50.9 % of the variance in MHL ($R^2 = .527$, Adjusted $R^2 = .509$, $F(4,108) = 30.03$, $p < .001$).

Table 3.

Correlation matrix with significance levels of all independent variables – gender, prior HSE with MHP, self-stigma and social stigma, and dependent variable MHL in the total sample of 438 university students, controlling for origin, and separately for Slovak and foreign groups.

Variables	Total sample (N = 438)					
	MHL	Origin (control)	Gender	Prior HSE with MHP	Self-stigma	Social stigma
MHL	-					
Origin (control)	-.345***	-				
Gender	-.014	.114**	-			
Prior HSE with MHP	-.185*	-.037	.067	-		
Self-stigma	-.620***	.070	.060	.186***	-	
Social stigma	-.575***	.186***	.089*	-.020	.373***	-
Slovak students (n = 321)						
MHL	-					
Gender	-.344*	-	-			
Prior HSE with MHP	-.223	-	.044	-		
Self-stigma	-.564***	-	.065	.167**	-	
Social stigma	-.467**	-	.150**	-.007	.375***	-
Foreign students (n = 117)						
MHL	-					
Gender	.143	-	-			
Prior HSE with MHP	-.177*	-	.142	-		
Self-stigma	-.621***	-	.019	.261**	-	
Social stigma	-.549***	-	-.153	-.023	.346***	-

*Note: HSE – Help-Seeking Experience; MHL – Mental Health Literacy (dependent variable); MHP – Mental Health Professional; * $p < .05$; ** $p < .01$; *** $p < .001$.*

Table 4.

Results of multiple linear regression of all independent variables – gender, prior HSE with MHP, self-stigma, and social stigma, and dependent variable MHL in the total sample of 438 university students, controlling for origin, and separately for Slovak and foreign groups.

	Total sample (N = 438)			Slovak students (n = 321)			Foreign students (n = 117)		
Variables	B	SE	β	B	SE	β	B	SE	β
Origin (control)	-4.999	1.022	-.258***	-	-	-	-	-	-
Gender	1.460	.914	.083	-4.627	2.011	-.270*	1.693	1.080	.106
Prior HSE with MHP	-2.282	.970	-.125*	-2.530	2.097	-.142	-1.285	1.164	-.077
Self-stigma	-.549	.070	-.446***	-.483	.146	-.422**	-.612	.095	-.475***
Social stigma	-.704	.108	-.371***	-.497	.233	-.270*	-.684	.133	-.370***

Note: B – Unstandardized Coefficient; β – Standardized beta coefficient; HSE – Help-Seeking Experience; MHL – Mental Health Literacy (dependent variable); MHP – Mental Health Professional; SE – Standard Error; * $p < .05$; ** $p < .01$; *** $p < .001$.

6. DISCUSSION

This study examined relationships between gender, prior HSE with MHP, self-stigma, social stigma, and MHL, while controlling for origin. As we supposed, self- and social stigma emerged as the strongest negative factors, confirming that stigma remains a major barrier to both MHL and HSB (Gulliver et al., 2010; Kim, 2021; Nazari et al., 2023; Wright et al., 2007). Stigma may lead individuals to avoid mental health information, thereby hindering symptom recognition and timely intervention (Vogel et al., 2006; Theurel & Witt, 2022), which is particularly concerning in light of the growing mental health challenges among university students (Barrable et al., 2018). Foreign students demonstrated lower MHL compared to their Slovak peers, likely due to linguistic, cultural, and systemic barriers (Beks et al., 2018; Khatib et al., 2023), emphasizing the need for culturally sensitive mental health education. As we assumed, gender was significantly associated with MHL, with females reporting higher levels of knowledge, consistent with prior findings on gender differences in mental health awareness and service utilization (Eisenberg et al., 2007; Çebi & Demir, 2020; Pei et al., 2024). Traditional masculinity norms may contribute to reduced help-seeking among men (Kantar & Yalçın, 2023). Finally, prior HSE with MHP was significantly associated with MHL, suggesting that students who had previously sought professional help possessed greater mental health knowledge than those who had not. This finding aligns with previous studies (Çebi & Demir, 2020; Pham et al., 2020; Wang et al., 2024), but contrast with the results of Gorczynski, Sims-Schouten, and Wilson (2020). Additionally, among international students, barriers such as cultural misunderstandings, language challenges, and inadequate institutional support may exacerbate negative perceptions of MHP (Nguyen et al., 2023; Pei et al., 2024), highlighting the need for more culturally attuned services that foster trust and efficacy in support systems.

Overall, findings show that MHL is related with social, cultural, and psychological factors beyond education or exposure (Zehra et al., 2022; Yang et al., 2024). Effective interventions must tackle stigma, access, and trust (Nazari et al., 2023). Strengths include a large, diverse sample and validated tools with robust analysis for non-normal data. Limitations are the cross-sectional design limiting causality, self-report bias, underrepresentation of some foreign groups, incongruity of the sample of foreign university students and focus only on university students. Cultural and contextual influences on mental health services were not deeply explored. Missing MHL data, especially among Slovak students, reduced sample size and may bias results.

For the future research, cultural, religious, and contextual variability, such as differing mental health service availability and societal attitudes toward mental health across countries, would be explored. Additionally, future longitudinal and qualitative studies could be performed to gain deeper insights into students' subjective experiences and cultural narratives surrounding HSI and HSB. Focus groups or in-depth interviews could reveal nuanced barriers and facilitators not captured in these quantitative surveys. Future studies should consider designing and testing targeted interventions such as stigma-reduction programs, life skills training, or MHL enhancement initiatives, to evaluate their effectiveness in increasing HSI and actual HSB. Finally, institutional and policy-related factors should be incorporated into future research. Variables such as campus support availability, financial barriers, awareness campaigns, and national mental health strategies can influence HSB on a systemic level.

7. CONCLUSIONS

This study shows that lower MHL among university students is related with higher self- and social stigma, foreign origin, and male gender, while higher MHL is associated with prior HSE with MHP. Addressing stigma and cultural barriers is key, beyond just raising awareness. The model explains much variance and guides future research and interventions. Universities should focus on stigma reduction, inclusive education across practical workshops about MHL, intercultural discussions, and gender-sensitive support. Future studies should examine prior help quality to clarify its value. Improving MHL is essential for resilient and healthy student communities.

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Section 2

Educational Psychology

Chapter # 7

ATTACHMENT PROFILES AND INSTITUTIONAL TRUST: A person-centered analysis of teachers' relational dispositions

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ABSTRACT

Trust is critical in effective school functioning, yet its dispositional antecedents remain underexplored. This study examines how teachers' attachment orientations influence institutional trust within school communities. Drawing on attachment theory, the research employed Latent Profile Analysis (LPA) to identify distinct teacher profiles based on closeness, dependence, and anxiety. Four profiles emerged: Secure, Anxious, Fearful-Avoidant, and Dismissing-Avoidant. Analysis revealed significant differences across these profiles in levels of trust toward principals, colleagues, students, and their parents. Teachers with secure attachment style reported the highest trust across all relational domains, while avoidant profiles exhibited the lowest. Anxious teachers reported moderate trust, reflecting ambivalent relational patterns. These findings suggest that teachers' relational dispositions, rooted in early attachment experiences, shape how they interpret institutional dynamics and respond to trust-building efforts. The study contributes to the literature by bridging intrapersonal and organizational perspectives on trust and offers practical implications for leadership and professional development. Recognizing attachment-based tendencies may help create more responsive strategies to foster trust in educational settings.

Keywords: attachment theory, latent profile analysis, organizational trust, teachers.

1. INTRODUCTION

Trust is widely regarded as a cornerstone of effective educational environments, influencing collaboration, leadership effectiveness, and student outcomes. In most empirical investigations, trust has been examined as a consequence of institutional or interpersonal behaviors, such as leadership style and communication (Sun, Zhang, & Forsyth, 2023). However, this view overlooks the dispositional foundations that teachers bring to their professional relationships. Teachers do not enter school settings as blank slates. Instead, their expectations, perceptions, and reactions are filtered through internal working models formed in early relational experiences.

Attachment theory (Bowlby, 1982; Hazan & Shaver, 1987) provides a framework for understanding how predispositions shape interpersonal dynamics. While it has informed teacher–student relationship research (e.g., Spilt & Koomen, 2022), little is known about how teachers' attachment orientations affect trust in other school stakeholders. Existing work links attachment styles to affective trust in principals (Karapinar, 2015), but broader investigations into trust among colleagues, students, and parents remain scarce. In ambiguous or high-stakes contexts, attachment schemas may be especially influential, guiding teachers' interpretations of others as benevolent, reliable, or threatening (Mikulincer & Shaver, 2016).

The present study seeks to address this gap by integrating a person-centered approach to explore the role of attachment orientations in shaping trust among teachers. In line with calls for more integrative perspectives, this study utilizes the Latent Profile Analysis

(LPA; Morin, Meyer, Creusier, & Biétry, 2016) to examine attachment profiles as a way of capturing how closeness, dependence, and anxiety interact in patterned combinations rather than in isolation. While variable-centered studies have provided valuable insights, they may obscure meaningful heterogeneity across individuals. A profile-based approach is theoretically important because it mirrors the multidimensional nature of attachment theory, which posits that attachment orientations are not reducible to single factors but instead reflect characteristic patterns of relational schemas. This approach offers a more nuanced understanding of dispositional influences on school relationships, with implications for leadership, professional development, and organizational climate.

2. BACKGROUND

2.1. Defining Attachment

Attachment theory, developed by Bowlby (1982) and further elaborated upon by Ainsworth, Blehar, Waters, and Wall (1979), provides a foundational framework for understanding the emotional bond between a child and their caregiver, as well as its impact on self-perception and social development. Central to the theory is the concept of internal working models, defined as cognitive schemas shaped by early interactions that guide expectations and behaviors in future relationships. Ainsworth et al. (1979) identified three distinct infant attachment styles, secure, anxious/avoidant, and anxious/ambivalent, highlighting individual differences in attachment.

Bowlby (1982) argued that early relational patterns shape later social functioning, and Hazan and Shaver (1987) extended this to adult romantic relationships, linking secure attachment to stability and anxious attachment to instability. Collins and Read (1990) advanced the field with a multidimensional model of adult attachment, comprising closeness (comfort with intimacy), dependence (trust in others' availability), and anxiety (fear of rejection). Secure attachment combines high closeness and dependence with low anxiety, whereas anxious attachment reflects high anxiety with moderate to high closeness and dependence. Avoidant styles involve low closeness and dependence: dismissing-avoidant individuals show low anxiety and emphasize self-reliance, while fearful-avoidant individuals report high anxiety, seeking intimacy yet fearing harm.

Building on the broader application of Bowlby's attachment theory within workplace contexts (Yip, Ehrhardt, Black, & Walker, 2017), attachment theory has been increasingly applied in education, particularly in teacher–student relationships. Building on parent–child attachment research, teachers have been conceptualized as secondary attachment figures in early childhood (Spilt & Koomen, 2022). Studies show that early caregiving, relational schemas, and attachment styles shape interaction quality (García-Rodríguez, Redín, & Abaitua, 2023). For example, avoidant attachment and negatively valenced teacher narratives predict reduced classroom emotional climate, lower sensitivity, and limited perspective-taking (Sher-Censor, Nahamias-Zlotolov, & Dolev, 2019). The Attachment Aware Schools (AAS) initiative applied these insights, improving student outcomes and reducing disciplinary issues (Rose, McGuire-Snieckus, Gilbert, & McInnes, 2019), highlighting the practical value of attachment-informed practice.

2.2. Defining Trust

The concept of trust has been a central concern in educational research for over three decades, yet it remains a complex and contested construct lacking a universally agreed-upon definition (Bukko, Liu, & Johnson, 2021). Despite numerous attempts across disciplines to delineate its meaning, trust continues to be understood in varied and sometimes contradictory

ways, prompting scholars to note the conceptual ambiguity surrounding the term (Shayo, Rao, & Kakupa, 2021). Within the educational domain, trust is understood as a dynamic, reciprocal process among stakeholders. Hoy and Tarter (2006) defined faculty trust as mutual teacher–parent commitment to students’ well-being, extending to principals, colleagues, and families. Keravnos and Symeou (2024) highlighted eight leadership practices, fairness, respect, reliability, transparency, and emotional support, as central to building trust. Similarly, Hong et al. (2020) emphasized shared values, professional confidence, emotional safety, and openness to vulnerability as key conditions for cultivating trust in schools.

Foundational research has highlighted the pivotal role of trust in promoting school effectiveness, recognizing it as a core dimension of interpersonal, professional, and institutional relationships (Shayo et al., 2021). Bryk and Schneider’s (2002) concept of *relational trust* highlighted respect, competence, and personal regard among principals, teachers, parents, and students as key to school improvement. Van Maele and Van Houtte (2011), analyzing survey data from 2,104 teachers in 84 Flemish secondary schools, found that teachers’ perceptions of students’ teachability strongly predicted trust, with organizational context also influencing it, while student culture’s academic orientation did not. Recent evidence shows that trust shapes culture and climate, strengthens relationships, and supports student achievement (Zhang, Bowers, & Mao, 2021). In centralized systems, trusted leaders demonstrate higher efficacy and foster cohesive communities (Keravnos & Symeou, 2024). Trust also predicts teachers’ self-efficacy, linked to adaptive organizational behaviors (Choong, Ng, Ai Na, & Tan, 2020), and enhances well-being by reducing depressive symptoms and buffering long working hours (Tsuyuguchi, 2023).

Building on these contributions, Bormann, Niedlich, and Würbel (2022) highlighted the need to understand trust in education through a multidisciplinary lens, noting its complexity across individual, institutional, and societal domains. They proposed a comprehensive model that links trust in and among educational settings, educational attainment, generalized social trust, and educational governance. This framework underscores that trust in schools is not confined to dyadic relationships but is deeply embedded within broader systemic dynamics.

2.3. The Relationship Between Attachment and Trust in Teachers

Researchers have examined how attachment styles shape trust in educational relationships, especially between teachers and students. Studies show that teachers’ attachment orientations influence their capacity to build and sustain classroom and collegial interactions (Ning, Lee, & Lee, 2015; Price, 2012). For instance, Riley (2010) emphasized the impact of teachers’ attachment styles on their capacity to navigate and maintain both classroom and staffroom relationships, highlighting the role of attachment processes in shaping emotional regulation during everyday educational challenges. Similarly, empirical evidence supports the importance of teacher-student relationships in serving as a secure base, fostering emotional security and resilience in children (Spilt & Koomen, 2022).

While research has examined attachment and trust in teacher–student dynamics, studies on broader school relationships, including principals, colleagues, and parents, are limited. However, teachers’ internal working models likely guide how they construe others’ intentions. For instance, securely attached individuals may view ambiguous behavior as benign, anxiously attached teachers as exclusionary, and avoidant teachers may minimize relational engagement. Karapinar (2015) found secure and preoccupied attachment styles predicted affective trust in principals, but evidence on collegial or parent interactions remains limited. This gap underscores the need for system-level studies on how attachment orientations influence trust across the school community.

3. AIMS AND HYPOTHESES OF THE STUDY

Building upon the literature reviewed above, the present study was designed to address two primary aims: (a) to identify distinct attachment profiles in teachers and (b) to investigate whether these profiles are associated with differences in trust toward principals, colleagues, and students/parents. Attachment research typically distinguishes three dimensions (anxiety, avoidance, and dependence), but the following hypotheses focus on anxiety and avoidance, as these are the most consistently validated (Brennan, Clark, & Shaver, 1998). Dependence, though included in the LPA, conceptually overlaps with the other two and is less reliably supported as a distinct construct (Ravitz, Maunder, Hunter, Sthankiya, & Lancee, 2010). Thus, the following research hypotheses were proposed:

H1. Distinct latent profiles will emerge based on teachers' experiences related to closeness, dependence, and anxiety (Hypothesis 1).

H2. Teachers assigned to profiles characterized by higher levels of closeness will report higher levels of trust (Hypothesis 2a), while profiles marked by high anxiety will report lower levels of trust (Hypothesis 2b).

4. METHOD

4.1. Sample

The final sample comprised 314 Greek in-service teachers. Among the participants, 94 identified as men (29.9%), 218 as women (69.4%), and 2 (0.6%) chose not to disclose their gender. Their age ranged from 22 to 67 years ($M = 41.93$, $SD = 11.25$). Regarding marital status, the majority ($N = 196$, 59.3%) reported being married or in a committed relationship, and 128 (31.2%) were single, divorced, or widowed. In terms of educational attainment, 181 participants (57.6%) held a bachelor's degree, 129 (41.1%) held a master's degree, and 4 (1.3%) held a doctoral degree. Concerning their professional context, the majority were employed in general education ($N = 214$, 68.2%), and 100 were working in special education (31.8%). Participants reported between 1 and 37 years of teaching experience ($M = 14.38$, $SD = 10.76$).

4.2. Materials

4.2.1. Revised Adult Attachment Scale - Close Relationships Version

The Revised Adult Attachment Scale (Collins, 1996) was used to assess teachers' attachment patterns. The scale was translated from English to Greek using a standard forward-backward translation procedure. It includes 18 items that assess three dimensions, each comprising six items: close (e.g., "*I find it relatively easy to get close to people*"), depend (e.g., "*I know that people will be there when I need them*"), and anxiety (e.g., "*I want to get close to people, but I worry about being hurt*"). Responses are provided on a 5-point Likert scale ranging from 1 (not at all characteristic of me) to 5 (very characteristic of me). In the present study, the three-factor solution was confirmed, and the confirmatory factor analysis showed that the model fit the data very well ($\chi^2(127) = 2.598$, $p < .000$, CFI = .942, TLI = .930, SRMR = .052, RMSEA = .065, 90% CI [.062, .081]). The reliability of the subscales was found to be good (Cronbach's $\alpha_{\text{close}} = .89$, Cronbach's $\alpha_{\text{depend}} = .86$, Cronbach's $\alpha_{\text{anxiety}} = .93$).

4.2.2. Omnibus Trust Scale

The Omnibus Trust Scale (Hoy & Tschannen-Moran, 2003) was used to measure faculty trust in schools. The scale was translated from English to Greek using a standard forward-backward translation procedure. It includes 26 items, of which 8 refer to trust toward principal (e.g., “*The principal in this school is competent in doing his or her job*”), 8 refer to trust in colleagues (e.g., “*I have faith in the integrity of my colleagues*”), and 10 refer to trust in students and their parents (e.g., “*Parents in this school are reliable in their commitments*”). Responses are typically provided on a 6-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). In the present study, the three-factor solution was confirmed ($\chi^2(230) = 2.354, p < .000$, CFI = .937, TLI = .924, SRMR = .048, RMSEA = .069, 90% CI [.063, .077]), and the reliability of the subscales was found to be good (Cronbach’s $\alpha_{\text{principal}} = .92$, Cronbach’s $\alpha_{\text{colleagues}} = .94$, Cronbach’s $\alpha_{\text{students_parents}} = .90$).

4.3. Procedure

The research received ethical approval from the author’s affiliated university. All research activities adhered to the ethical standards of the American Psychological Association (APA) and followed the provisions of the General Data Protection Regulation (GDPR) of the European Union. Data were gathered through an online questionnaire, distributed via convenience sampling using social media channels and educator-focused professional networks. Prior to participation, individuals received a detailed overview of the study, including its aims, ethical safeguards, and data handling procedures. Consent was obtained digitally, and respondents were assured that their involvement was entirely voluntary and anonymous. The data collection phase was conducted from April to May 2025.

4.4. Data Analyses

Initial analyses were conducted using IBM SPSS (Version 27) to assess intercorrelations and evaluate the suitability of parametric methods. Descriptive statistics (means, standard deviations, and bivariate correlations) were computed to summarize the data structure.

To address Hypothesis 1, LPA was performed in R (Tidy, Mclust) using RStudio (version 2024.12.1 Build 563). Models with two to five profiles were tested. Given the often-conflicting results from fit indices such as AIC, BIC, AWE, CLC, and KIC (Akogul & Erisoglu, 2017), the Analytic Hierarchy Process (AHP; Saaty, 1990) was employed. AHP integrates these indices into a Composite Relative Importance Vector (C-RIV), supporting a more objective model selection. The model with the highest C-RIV was retained (Akogul & Erisoglu, 2017).

To test Hypotheses 2a and 2b, ANOVAs were conducted to examine whether the resulting profiles differed significantly in levels of trust toward principals, colleagues, students, and parents.

5. RESULTS

5.1. Means and Correlations Between the Examined Variables

Preliminary analyses examined the mean scores and intercorrelations among key study variables. The mean scores indicated moderate to high levels of closeness among teachers, with slightly lower average scores for attachment dependence and anxiety. Concerning trust, participants reported relatively high trust toward school principals, followed by trust in students and parents, and slightly lower trust in colleagues. Additionally, the correlation matrix revealed statistically significant associations between attachment dimensions and trust variables (Table 1).

Table 1.
Means and Correlations of the Examined Variables.

Variables	Mean (SD)	1	2	3	4	5
Attachment						
1. Close	3.18 (.93)					
2. Depend	2.70 (.76)	.58**				
3. Anxiety	2.68 (1.03)	-.24**	-.22**			
Trust						
4. Trust toward principal	4.12 (1.06)	.45*	.47**	-.20**		
5. Trust toward colleagues	3.71 (1.03)	.43*	.39**	-.18**	.52**	
6. Trust toward students and parents	3.81 (.81)	.16**	.30**	-.15**	.18**	.31**

Note. ** $p < .01$ level

5.2. Attachment Profiles

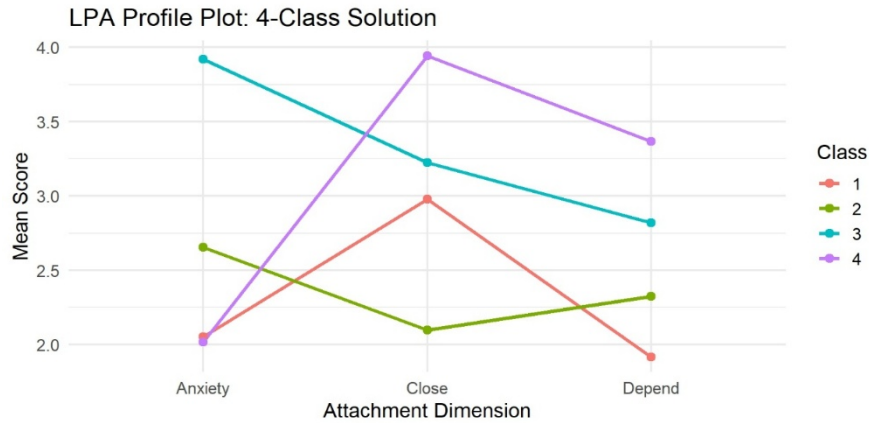
To identify distinct attachment profiles, LPA was performed, testing models with two to five latent profiles. The fit criteria and C-RIV for the estimated profile solutions are presented in Table 2. Based on the profile solution with the best fit indices and the highest entropy and C-RIV score, we concluded that four attachment profiles could be distinguished.

Table 2.
Fit Indices of Attachment Profiles.

N classes	AIC	AWE	BIC	CLC	KIC	Entropy	C-RIV
2	2245.04	2332.53	2271.28	2295.55	2252.04	.851	.957
3	2256.05	2393.54	2297.30	2401.85	2267.05	.756	.902
4	2191.34	2378.82	2247.58	2323.56	2206.34	.814	.902
5	2253.34	2490.82	2324.58	2472.12	2272.34	.745	.834

Figure 1 displays the 4-class attachment profile identified. Class 1 ($N = 68$; 21.66%) was designated as “Fearful-Avoidant”. Characterized by relatively low levels of attachment anxiety, moderate comfort with closeness, and low willingness to depend on others, this group reflects ambivalence toward intimacy. Individuals in this class may desire close relationships but simultaneously fear rejection and avoid reliance on others. Class 2 was labeled “Dismissing-Avoidant” ($N = 59$; 18.79%). Defined by low comfort with closeness, moderate anxiety, and moderate levels of dependence, this profile reflects emotional distancing and discomfort with intimacy. Class 3 ($N = 89$; 28.34%) was labeled “Anxious” as it was marked by high attachment anxiety and moderate scores on both closeness and dependence. These individuals may crave emotional closeness but feel insecure or unworthy, which can lead to a fear of abandonment and excessive concern about relational approval. Finally, Class 4, the largest subgroup, was labeled “Secure” ($N = 98$; 31.21%). Displaying low anxiety and high scores on both closeness and dependence, this profile aligns with secure, well-adjusted relational functioning. Thus, hypothesis 1 was confirmed.

Figure 1.
Latent Profile Plot Across Four Classes.



5.3. The Association of Attachment Profiles with Trust

The next aim of the study was to examine the associations between the attachment profiles and trust dimensions. Analyses of variance revealed statistically significant differences across profiles in trust toward principals [$F(3, 310) = 22.341, p < .001, \eta^2 = .178$], colleagues [$F(3, 310) = 20.327, p < .001, \eta^2 = .164$], and students and their parents [$F(3, 310) = 11.660, p < .001, \eta^2 = .101$]. Post-hoc comparisons with Bonferroni correction (Table 3) revealed that securely attached teachers reported the highest trust, followed by anxious, while fearful- and dismissing-avoidant teachers reported the lowest. The results confirmed hypotheses 2a and 2b.

Table 3.
Means and Pairwise p -values from Post-hoc Comparisons Between Attachment Latent Profiles and Trust.

Profiles	Trust toward the principal	Trust in colleagues	Trust in students and parents
	Mean (<i>SD</i>)		
Fearful-Avoidant	3.65 (.99)	3.26 (.78)	3.41 (.77)
Dismissing-Avoidant	3.65 (.90)	3.43 (1.05)	3.86 (.80)
Anxious	4.13 (1.01)	3.56 (.97)	3.73 (.77)
Secure	4.12 (.93)	4.30 (.95)	4.13 (.75)
Comparisons between groups			
	p -values		
Fearful-Avoidant vs Dismissing-Avoidant	1.00	1.00	.007
Fearful-Avoidant vs Anxious	.011	.282	.054
Fearful-Avoidant vs Secure	< .001	< .001	< .001
Dismissing-Avoidant vs Anxious	.018	1.00	1.00
Dismissing-Avoidant vs Secure	< .001	< .001	.256
Anxious vs Secure	< .001	< .001	.004

6. DISCUSSION

The present study employed a person-centered approach to explore the associations between teachers' attachment styles and their trust in faculty members. Several noteworthy findings emerged, offering valuable insights into the relational dynamics within educational settings. Four profiles emerged, Fearful-Avoidant, Dismissing-Avoidant, Anxious, and Secure, aligning with core dimensions of adult attachment (Collins & Read, 1990) and earlier typologies (Ainsworth et al., 1979; Bartholomew & Shaver, 1998). Findings support the theoretical distinction between secure and insecure attachment and highlight the value of multidimensional models for capturing nuanced relational patterns.

Teachers with secure attachment reported the highest trust levels, followed by anxious teachers, while Fearful-Avoidant and Dismissing-Avoidant profiles showed lower trust. This aligns with attachment theory, which links secure orientations to positive internal working models and confidence in relational contexts (Bowlby, 1982; Simmons, Gooty, Nelson, & Little, 2009). Prior empirical evidence has shown that secure attachment supports emotional regulation, openness, and interpersonal sensitivity, facilitating trust in others' availability and behavior (Shaver & Mikulincer, 2007; Esposito, Totaro, Di Maro, & Passeggia, 2024). Such individuals are more likely to engage in open communication, interpret others benevolently, and sustain stable relationships, highlighting the organizational value of secure attachment for cohesive school climates.

The Anxious profile, which reported moderate levels of trust, appears to reflect a relational ambivalence. While anxiously attached individuals desire connection and approval, their underlying fear of rejection may trigger hypervigilance, potentially undermining trust even in supportive environments (Collins & Read, 1990). Anxiously attached teachers may show dependency and heightened emotional attunement, initially supporting trust. However, overinvestment, unrealistic expectations, or misinterpreted cues can undermine it, resulting in conditional trust driven by emotional need rather than stable confidence. This pattern reflects a paradoxical strategy that blends affiliative and defensive behaviors rather than being purely maladaptive.

In contrast, teachers within the Fearful-Avoidant and Dismissing-Avoidant profiles demonstrated the lowest levels of trust. This is consistent with theoretical models in which fearful individuals desire intimacy but expect rejection, while dismissing individuals prioritize autonomy and minimize the value of close relationships (Bartholomew, 1990). Both avoidant types may resort to relational withdrawal or emotional disengagement, which likely restricts opportunities for building trust, even in objectively supportive school environments (Bao, Li, Zhang, Tang, & Chen, 2022).

While securely attached teachers showed consistently high trust, insecure profiles displayed greater variability, especially toward colleagues and students' parents. This indicates that attachment styles influence trust differently across relational targets. Trust in principals may be shaped more by authority and role clarity, whereas trust in colleagues and parents may develop through repeated interactions, activating attachment-based scripts. Future research should examine moderators such as perceived intimacy, authority, and emotional demands across relational contexts.

7. CONCLUSIONS

This chapter connects attachment theory with organizational trust, highlighting teachers' relational dispositions as a foundation of school dynamics. By examining how attachment shapes trust in leaders, colleagues, and families, the study underscores the value

of person-centered approaches in educational research. Positioning attachment as a bridge between psychology and organizational practice emphasizes its practical relevance: relationally attuned professional development, mentoring, and trust-oriented leadership can strengthen school communities. Against the backdrop of a global trust crisis in education, marked by strained teacher–leader relations, accountability pressures, and declining public confidence, these findings suggest that rebuilding trust requires not only structural reforms but also attention to the psychological processes guiding educators’ perceptions and behaviors.

As Bormann et al. (2022) note, trust is embedded in multi-level governance, and reforms, accountability pressures, and high-stakes testing can strain educator–leader trust. Centralized accountability may foster surveillance over collegiality, causing insecurely attached teachers to perceive demands as threats (Abbaspour, Hosseingholizadeh, & Bellibaş, 2024), whereas policies promoting autonomy and collaboration can strengthen trust. Career-stage differences may further complicate this picture. Novice teachers, often reliant on external validation, may exhibit fragile or anxious trust, whereas veteran teachers may draw on accumulated relational capital to sustain secure orientations, or, conversely, reinforce dismissing tendencies if institutional disappointments accumulate (Smith, Ulvik, & Helleve, 2019). Future longitudinal research is needed to trace these trajectories across the professional lifespan.

Finally, attachment-based trust dynamics should be understood within systemic challenges and global educational trends. Trust supports teachers’ socio-emotional well-being, resilience, and relational pedagogy, protecting against burnout, attrition, and low morale (Liu, Chen, Cheng, & Xiao, 2023). In contrast, low trust may hinder leadership and increase disengagement, exacerbating teacher shortages. In the post-COVID era, with strained institutional trust from rapid reforms and increased workload, secure attachment is particularly important for professional collaboration and organizational resilience. Linking attachment profiles to these systemic issues underscores how fostering trust and emotional safety in schools can address pressing educational challenges.

8. IMPLICATIONS, LIMITATIONS, AND FUTURE RESEARCH

The study’s findings have implications for teacher development and school leadership, particularly in light of educational psychology’s growing focus on socio-emotional perspectives and organizational resilience. Trust is influenced not only by organizational practices but also by teachers’ attachment orientations and relational schemas, suggesting that conventional interventions like communication training may be insufficient. Integrating attachment-informed approaches, such as relational self-reflection workshops, emotionally attuned peer coaching, and mentoring that models secure trust-building, can strengthen socio-emotional competencies and support authentic trust. At a whole-school level, scalable strategies such as restorative practices or relational coaching can embed trust-building into daily routines, aligning systemic conditions with relational awareness to foster resilient, trusting communities.

The study also offers guidance for leaders addressing resistance to trust-building. Teachers with fearful-avoidant or dismissing-avoidant profiles may not respond to institutional initiatives due to relational hesitancy rather than leadership deficiencies. Leadership strategies that combine structural consistency with relational sensitivity, providing emotional safety, supporting autonomy, and enabling gradual, low-risk trust experiences, may be more effective in engaging these teachers. By attending to attachment-related dispositions, schools can promote socio-emotional well-being and adaptive resilience, supporting both individual and organizational capacity to thrive amid change.

Despite its contributions, this study has limitations. The cross-sectional design precludes causal inferences, and the use of self-reported measures may be subject to bias. In addition, the emphasis on background theory, while intended to situate the study within a robust conceptual framework, may appear extensive and could be streamlined in future research to sharpen the focus on empirical findings. Additionally, conducted in Greek schools, with hierarchical structures and strong interpersonal expectations (Saiti & Eliophotou-Menon, 2009), the findings may overemphasize authority-based trust and limit generalizability. Future research should investigate how cultural dimensions such as power distance and collectivism influence the relationship between attachment and institutional trust, ideally through cross-cultural comparative designs. Finally, although the three attachment dimensions theoretically yield eight patterns, empirical studies often identify fewer due to rarity or limited measurement distinctiveness (Bartholomew & Shaver, 1998). In this study, a four-profile solution provided the best fit and reflected the most salient relational orientations among teachers. Future research should examine larger, more culturally diverse samples to determine if additional profiles emerge in educational contexts.

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Chapter # 8

LEARNING STYLE AND GENERATION Z IN HIGHER EDUCATION: A SCOPING REVIEW

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ABSTRACT

The aim of this study was to understand the characteristics of Generation Z's learning styles by mapping emerging empirical results through a scoping review applying the PRISMA framework. After retrieving 945 potential studies, we identified 21 empirical studies of Generation Z that used four scales related to learning style theories: the Gregorc Style Delineator; the Kolb Learning Style Inventory; the Felder-Silverman/Felder-Soloman Index of Learning Style; and the VAK/VARK Learning Model. A single dominant learning style of Generation Z students could not be specified because of the theories' different approaches. Studies showed a Concrete Sequential learning style from the Gregorc theory as a unimodal type; a Diverging learning style from the Kolb model; an Active, Sensing, Visual, and Sequential learning style from the Felder-Silverman/Felder-Soloman paradigm; and a Visual style of the VAK and a Kinesthetic style of the VARK. Based on the results, this study offers pedagogical and research implications.

Keywords: learning style, Generation Z, scoping review, higher education.

1. INTRODUCTION

Institutions of higher education now mostly enroll students of Generation Z, particularly in undergraduate programs, where they have substantially replaced Millennial students (Seemiller & Grace, 2016; Shatto & Erwin, 2016). This young generation represents individuals born between 1995-1997 and 2010-2012 (Dimock, 2019; Mohr & Mohr, 2017; Seemiller & Grace, 2017); scholars have proposed slightly different ranges of generational cut-off years (Dimock, 2019; Vojvodić, 2019). Like each predecessor generation—Silent, Baby Boomer, Generation X, and Millennials in order from old to new—Generation Z also has specific and unique characteristics (Shatto & Erwin, 2016; Shorey, Chan, Rajendran, & Ang, 2021), which have been strongly affected by information communication technology, social movements, and unsettled economic situations (Seemiller & Grace, 2017). Since higher education institutions must effectively engage with Generation Z (Seemiller & Grace, 2017), scholars and teachers need to understand this generation's characteristics.

Several recent studies on Generation Z illustrate its characteristics. For example, Seemiller and Grace (2017) described three distinct characteristics of Generation Z with regard to learning preferences, community engagement, and career aspirations based on their empirical findings. Isaacs, Scott, and Nisly (2020) discussed Generation Z's characteristics and integrated them into seven key themes—learning style, teaching preference, communication, feedback, technology, social media, and risk/financial views—which can differentiate between Generation Z and Millennials, even though both generations have

grown up in a similar era of advanced technology. To more profoundly understand unique learning aspects of Generation Z students, learning style has been specifically considered (Seemiller & Grace, 2016). Since learning style is an indicator of an individual's preferred way of learning in learning situations (Kolb & Kolb, 2017), it is critical to understand how Generation Z students typically learn in higher education institutions, which reflect today's technological and digitalized information environments. Yet, empirical research on the learning style of Generation Z only recently began in the context of higher education, and it remains uncertain to what extent recent work clarifies the learning style of Generation Z.

To the best of our knowledge, there is only one extensive review of research on Generation Z's learning style, which was conducted by Shorey et al. (2021). Their review applied a scoping review technique; however, coverage focused only on nursing or healthcare students. Additionally, their study was not limited to empirical research but encompassed various types of work, such as research reports, perspective papers, and commentary documents (Shorey et al., 2021). Accordingly, the aim of the current study was to understand the learning style of Generation Z as a whole, incorporating only empirical evidence-based research related to any educational program, major, or discipline. Consistent with our study aim, we had one research question: What are the learning styles of Generation Z?

2. LITERATURE REVIEW

2.1. Learning Style

For nearly half a century, the learning styles of individuals have been studied to seek answers to important issues relevant to learning and education in schools as well as organizations (Coffield, Moseley, Hall, & Ecclestone, 2004). Multiple definitions of learning style exist in the literature and may overwhelm educators and researchers (Desmedt & Valcke, 2004). In fact, the systematic and critical review study of Coffield et al. (2004) identified 71 learning style models and categorized five groups based on 13 significant models. According to their distinctive research purposes, several studies have used more than one learning style model to accompany their instruments (see Cassidy, 2004; Deng, Benkendoff, & Gao, 2022; Desmedt & Valcke, 2004; Hawk & Shah, 2007).

Coffield et al. (2004) classified learning style models. Using their classification, we excluded models belonging to the cognitive structure family, the stable personality type, and learning approaches or strategies based on the learning style. Instead, we focused on the descriptions of style models categorized into either the genetic component family, including human functioning modalities (i.e., visual, auditory, kinesthetic, etc.), or flexibility in stable learning preferences (see Coffield et al., 2004). Here, five learning style models are particularly relevant to those categories: Kolb's (1984) learning model (Kolb & Kolb, 2017), Gregorc's (1982) learning model (as cited in Cassidy, 2004), Fleming's (2019) VARK model (Fleming & Bonwell, 2019), Felder-Silverman's (Felder, & Silverman, 1988) learning model, and Dunn and Dunn's learning styles model (Honigsfeld & Dunn, 2003), all of which are well known and prominent, providing broadly available learning style measurements (Hawk & Shah, 2007). We believe that these learning models and their instruments are critical to providing useful information on how Generation Z students learn.

The first learning model is based on Kolb's (1984) experiential learning theory, which is characterized as playing an important role in individuals' experience (Kolb & Kolb, 2017). His model consists of two learning dimensions: grasping experience by the learning mode of concrete experience vs. abstract conceptualization; and transforming experience by the learning mode of reflective observation vs. active experimentation. Four learning modes become a foundation for four basic learning styles: Diverging, Converging, Assimilating, and

Accommodating. Kolb's Learning Style Inventory (Kolb, 1999) was developed to measure the extent to which people prefer to use each of the four learning modes in their learning situation. The latest Version 4 of Kolb's Learning Style Inventory was designed to identify nine typologies of learning styles (Kolb & Kolb, 2013).

The second learning model is Gregorc's (1982) Learning (Mind) Style Model (as cited in Cassidy, 2004). His learning model is composed of two dimensions: perceptual preference and ordering preference. The perceptual dimension involves how people receive information on one bipolar continuum between concrete ability and abstract ability, while the ordering dimension relates to how they deal with information on the other continuum between random ability and sequential ability (Harasym, Leong, Lucier, & Lorscheider, 1995). These preferences are combined to form four learning styles: Concrete-Sequential, Abstract-Sequential, Abstract-Random, and Concrete-Random. The Gregorc Style Delineator (Gregorc, 1982, as cited in Cassidy, 2004; Gregorc, 1985, as cited in Harasym et al., 1995) measures his proposed four types of learning styles.

The third learning model is Fleming's VARK learning style model (Fleming, 2019; Fleming & Bonwell, 2019). His model largely relates to a sensory paradigm developed from "the earlier neuro-linguistic model" (Hawk & Shah, 2007, p. 6). VARK is an acronym for Visual, Aural, Read/write, and Kinesthetic modalities. The VARK questionnaire was created to evaluate those four modalities (Fleming & Bonwell, 2019), while VAK inventories had existed for years (Fleming & Baume, 2006). Fleming added Read/write as a second visual modality, subdividing it from the Visual mode (Fleming & Baume, 2006; Fleming & Bonwell, 2019).

The fourth learning model is Felder-Silverman's learning model, which has five bipolar dimensions: Sensing vs. Intuitive, Visual vs. Auditory, Inductive vs. Deductive, Active vs. Reflective, and Sequential vs. Global (Felder & Silverman, 1988). Each dimension serves as a way of perceiving the world: receiving information, reasoning, processing perceived information, and understanding perceived information (Felder & Silverman, 1988). To assess learning preferences on the four dimensions without the dimension of inductive vs. deductive mode, the Index of Learning Style was initially developed by Felder and Soloman in 1991 and later provided as a revised version (Felder & Spurlin, 2005).

The fifth learning model is Dunn and Dunn's learning styles model (Dunn, Dunn, & Price, 1996, as cited in Honigsfeld & Dunn, 2003; Learning Abled Kids, 2023). Their learning model has five learning style stimuli: environmental (e.g., sound, light), emotional (e.g., motivation, persistence), sociological (e.g., learning alone, with peers), physiological (e.g., auditory, visual, kinesthetic), and psychological (e.g., analytic, global) (Dunn, 1984; Searson & Dunn, 2001). Each stimulus within the model includes several elements that people react to in new or difficult learning situations. To examine learning preferences with regard to the five stimuli, the Dunn and Dunn Learning Styles Inventory was developed as the newest version (Learning Abled Kids, 2023).

This description of the five learning style models reflects the classification based on Coffield et al. (2004). Several researchers have presented critical views about learning style assessments, commenting that they require more evidence for general educational application (Pashler, McDaniel, Rohrer, & Bjork, 2009).

2.2. Generation Z

Generation Z—also known as Gen Z, iGen, Net Generation, and Digital Natives (Albadi & Zollinger, 2021; Shorey et al., 2021)—is thought to always be connected with information communication devices and technology by using the Internet, cellular/mobile phones, tablets, instant messaging tools, video games, and digital music players (Prensky,

2001). This connection creates long-lasting interactions between Generation Z and digital environments, leading to unique learning characteristics that differ from those of previous generations (Prensky, 2001; Seemiller & Grace, 2017; Shatto & Erwin, 2016).

Several studies have highlighted certain learning characteristics of Generation Z (see Shorey et al., 2021). For example, Seemiller and Grace (2017) pointed out two aspects of Generation Z's learning characteristics: observation and intrapersonal learning. Regarding observation, Generation Z students prefer watching others do an assigned task before doing it themselves (Seemiller & Grace, 2017). For instance, Generation Z seeks information from videos or YouTube when encountering something difficult or hard to understand (Seemiller & Grace, 2017). The survey results of Mosca, Curtis, and Savoth (2019) supported this view, indicating that 98.5% of 133 university students favored the following statement: "Videos help to bring in real-world situations" (p. 72). Generation Z's preference to learn by watching may be captured and explained by another viewpoint. Prensky (2001) indicated that Digital Natives get accustomed to receiving information quickly by seeing graphics before reading texts. This notion suggests that they are more inclined to be observing learners (Shatto & Erwin, 2016), increasing visual learning ability (Cickovska, 2020).

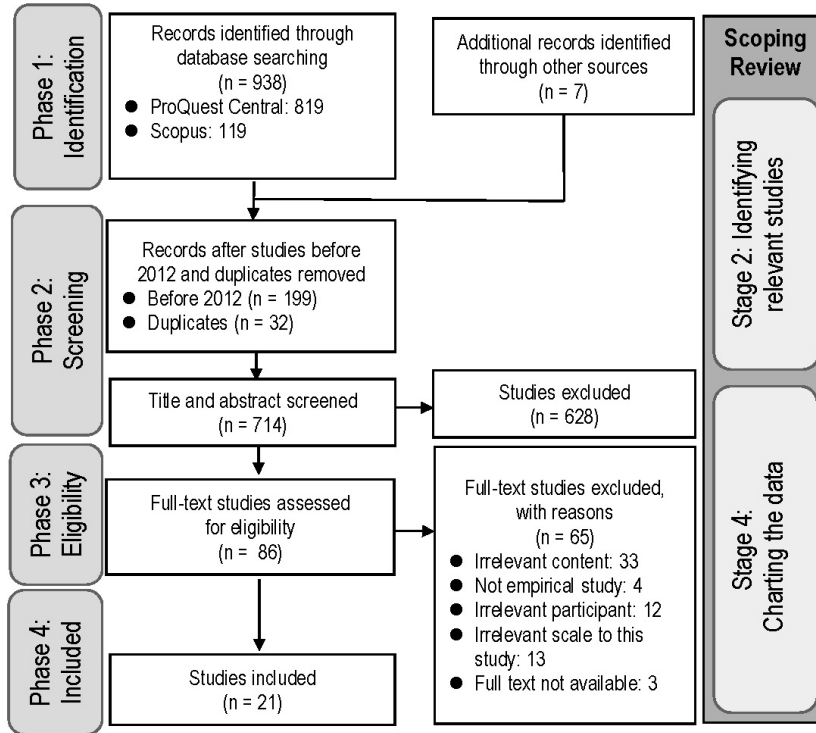
The other aspect is Generation Z's preference for intrapersonal learning (Seemiller & Grace, 2017). This learning characteristic is ascribed to "the individual nature of technology" that enables Generation Z to feel comfortable using it independently (Seemiller & Grace, 2017, p. 23). While Generation Z students communicate with others through mobile devices, they sometimes face challenges in face-to-face communication (Vojvodić, 2019). They prefer to learn in an individual learning setting where they can concentrate and maintain their personal pace (Seemiller & Grace, 2017). The tendency toward intrapersonal learning differs from the interpersonal approach of Millennials, who prefer collaboration or a teamwork orientation (Seemiller & Grace, 2017). This viewpoint is congruent with empirical results from Lai and Hong (2015), who found that the cohort of university students born after 1992 was statistically significantly different from the other two cohorts, born from 1982 to 1992 and born before 1982, with regard to preference for working in groups for schoolwork (Lai & Hong, 2015).

In addition to the above-mentioned learning characteristics, Generation Z students prefer to learn by doing and like to perform in "active learning environments" (Cickovska, 2020, p. 282), and they learn well by exploring and discovering (Oblinger & Oblinger, 2005). At a higher education institution, students exhibited their preference for engaging in hands-on opportunities for immediately applicable practices (Seemiller & Grace, 2017). This fact suggests that Generation Z students are pragmatic learners (Isaacs et al., 2020).

3. METHODS

This scoping review applied the guidance of Arksey and O'Malley (2005) and the PRISMA flowchart (Moher, Liberati, Tetzlaff, Altman, & The Prisma Group, 2009). Arksey and O'Malley (2005) outlined a five-stage approach, while the PRISMA flowchart has four phases (Moher et al., 2009; Peters et al., 2015); both groups of stages are depicted in Figure 1. The four phases within the PRISMA flowchart are (1) identification of studies, (2) screening of studies, (3) eligibility of studies, and (4) final inclusion of studies.

Figure 1.
PRISMA flowchart for a scoping review of Generation Z learning styles.



3.1. Stage 1: Identifying the Research Question

As presented in the research aims and questions, we had a research question: What are the learning styles of Generation Z? The research question was congruent with the aim of our study, which was to understand the learning style of Generation Z as a whole.

3.2. Stage 2: Identifying Relevant Studies

To find potential studies relevant to the learning styles of Generation Z, we utilized two databases: ProQuest Central and Scopus. ProQuest Central is the largest and most comprehensive multidisciplinary database of ProQuest. Scopus is also the largest and most reliable database that focuses on the studies addressing our topic.

Searches were carried out by applying the key terms with the search formula (“Generation Z” OR “Gen Z” OR “iGen” OR “Digital Natives” OR “Net Generation”) AND (“learning style” OR “preferred learning way”). The literature search was conducted on June 1, 2024. The search was limited to English-language sources in the publication categories of articles, conference papers, and book chapters, and it was conducted with no time boundary. The database search resulted in 938 potentially eligible studies: 819 from ProQuest Central and 119 from Scopus. To further find potentially eligible studies, we conducted an additional search using our research project of learning style and the reference sections of selected studies, as suggested by Siddaway, Wood, and Hedges (2019). With this effort, we added 5 articles and 2 conference papers, resulting in a total of 945 sources. To better manage the

studies, we eliminated 199 studies published in 2012 or earlier, since students born in 1995 typically enter higher education in 2013, resulting in a total of 746. Subsequently, we identified 32 duplicates to eliminate. Consequently, 714 studies remained for further investigation through title and abstract screening. Databases were independently reviewed and searched by the first and second authors, who confirmed that the number of publications targeted for the present research was consistent.

3.3. Stage 3: Study Selection

To be included, studies needed to be empirical studies that used a scale to measure the learning styles of the participants of Generation Z and showed quantitative results related to the participants' learning styles. To obtain potentially relevant studies on Generation Z's learning style in a broad manner, we not only focused on the participants explicitly described in publications as Generation Z, but also considered and investigated participants by academic year or age at higher education institutions. We selected studies using learning style scales relevant to the classifications discussed earlier: Kolb's Learning Style Inventory (Kolb, 1999), the Gregorc Style Delineator (Gregorc, 1982, as cited in Cassidy, 2004), the VARK Questionnaire (Fleming & Bonwell, 2019) including the VAK Inventories, the Index of Learning Style (Felder & Spurlin, 2005), and the Dunn and Dunn Learning Styles Inventory (Learning Abled Kids, 2023). Accordingly, to be included, the studies needed to apply those five learning style scales to measure students' learning style. Table 1 lists the criteria in detail.

Table 1.
Inclusion and Exclusion Criteria for the Scoping Review.

Category	Inclusion criteria	Exclusion criteria
1. Study type	Empirical study	Review, theoretical, or perspective study
2. Study sample	Participants in higher education belonging to Generation Z	Participants not belonging to Generation Z
3. Scale used	Kolb's Learning Style Inventory; Gregorc Style Delineator; the VARK Questionnaire including the VAK Inventories; Felder-Silverman's/Felder-Soloman's Index of Learning Style; Dunn and Dunn Learning Styles Inventory	Scale irrelevant to the five learning style models/scales
4. Language	English	Not English
5. Publication type	Article, book chapter, or conference proceedings	University-specific publication, working paper, dissertation, or thesis

3.4. Stage 4: Charting the Data

The fourth stage is similar to data extraction described in systematic reviews (Arksey & O'Malley, 2005). This stage is particularly associated with Phases 2, 3, and 4 of the PRISMA flowchart: Screening, which involves the analysis of titles and abstracts; Eligibility; and Inclusion. The first and second authors separately screened and analyzed the titles and abstracts of the 714 studies by applying the inclusion and exclusion criteria of Stage 3, followed by a discussion about the different studies selected. As a result, a total of 628 studies were removed, whereas 86 eligible studies remained for the eligibility process in Phase 3. Those studies were further analyzed independently by the same authors to determine which studies to include or exclude. Any discrepancies in decisions were discussed and consensus reached. Among the 86 studies, 65 were removed for reasons of having irrelevant content, not being empirical studies, having irrelevant participants, having irrelevant scales, and not

having full text available (Figure 1). Ultimately, 21 studies were included in the final study selection based on criteria.

The first author charted important information from the 21 studies for the extraction of data. Key characteristics and information in the included studies were listed in a summary, which the third author independently verified as aligning with the study aims and questions.

3.5. Stage 5: Summarizing and Reporting the Results

Although Stage 5 contains the term *collating* in the scoring review process of Arksey and O'Malley (2005), the present study removed the term because the primary activities in this stage were to summarize and report the results of the included studies. Table 2 lists the 21 included studies, noting publication information (author and year of publication); study design characteristics (sample, educational institution information, country, faculty/major/program, and scale/learning style model); and study results (major learning style of Generation Z). A separate table was created to present statistics based on learning style frequency for each learning style scale and model. To create this table, only data from participants in Generation Z from the 21 studies were used. We grouped the 21 studies into one of the five learning style models to examine students' learning styles and then investigated which learning style was the most dominant, as well as the second, third, and least dominant, based on that learning style model. The first author initially conducted these analyses, and the third author independently reviewed them to verify the percentages.

4. RESULTS

Table 2 highlights the context of each included study, the type of learning style models and scales applied, and the resulting preferred style of Generation Z, whereas Table 3 specifically addresses the research question: What is the learning style of Generation Z?

Table 3 is organized by the four classifications of learning style scales and models; it does not include the Dunn and Dunn learning styles model, since none of the 21 studies applied that model. Only one study used the Gregorc Style Delineator (Albadi & Zollinger, 2021). For that study, results showed that the dominant learning style of Generation Z is Concrete Sequential (43%) as a unimodal style as illustrated in Table 3.

Seven studies applied Kolb's Learning Style Inventory. For 32%, the most dominant learning style was the Diverging learning style, which consists of the two learning modes of concrete experience and reflective observation (Kolb, 1984; Kolb & Kolb, 2017). Although the Diverging learning style was most frequently the major learning style, a variety of learning styles with a range of percentages was observed in the entire group of Kolb's learning studies. This variation may result from several factors that include sample characteristics other than Generation Z, such as program type and country culture, as well as modifications of the learning style scale.

Table 2.
Characteristics and Results for Each of the 21 Studies Included in the Review.

Authors and year	Study characteristics				Results
	<i>N</i>	Educational institution	Faculty/major/program	Scale/learning style model	Major learning style of Generation Z
Albadi & Zollinger, 2021	466	University, USA	Interior design	Gregorc Style Delineator	Bimodal learning style; Concrete Sequential learning style as unimodal
Baherimoghadom et al., 2021	85 ^a	University, Iran	Dentistry	Felder-Soloman's Index of Learning Styles	Reflective, Sensing, Visual, & Sequential modes
Eid et al., 2021	113	University, Saudi Arabia	Medicine	VARK learning model	Multimodal learning style; additionally, Aural learning style as a unimodal style
Fahim et al., 2021	1473	University, Pakistan	Medicine and dentistry	VARK learning model	Multimodal learning style; additionally, Kinesthetic learning style as unimodal
Galingan, 2019	149 (360) ^b	University, Philippines	Engineering	Kolb's Learning Style Inventory and Felder-Silverman's Index of Learning Style	Reflector ^c (Diverging) learning style; Active, Sensing, Visual, and Sequential modes
Hanawi et al., 2022	84	University, Malaysia	Biomedical science	Learning Style Questionnaire (VAK learning model)	Visual learning style
Ishak et al., 2022	300	Undergraduate, Malaysia	Medicine, pharmacy, and allied health	VARK learning model	Multimodal learning style; additionally, Kinesthetic learning style as unimodal
Joonas et al., 2021	120 ^a	Undergraduate, Mexico	Not described	Kolb's Learning Style Inventory	Converging learning style
Manzoni et al., 2021	592 (870) ^b	University, Italy	MSc and executive education	Kolb's Learning Style Inventory	Assimilating learning style
Maulina et al., 2020	165	College, Indonesia	Physics teaching	VAK learning model	Visual learning style

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Authors and year	Study characteristics				Results
	<i>N</i>	Educational institution	Faculty/major/program	Scale/learning style model	Major learning style of Generation Z
Nossoni, 2021	33	University, USA	Engineering	Felder-Silverman's Index of Learning Style	Active, Sensing, Visual, and Sequential modes
Nwajiuba & Onyeneke, 2023	133	University, Nigeria	Science, social science, and humanities	VARK learning model ^d	Auditory learning style
Othman et al., 2019	305	University, Malaysia	Poly-tech	VAK learning model	Visual learning style
Payaprom & Payaprom, 2020	372	University, Thailand	Language	VARK learning model	Multimodal learning style; additionally, Kinesthetic learning style as unimodal
Reesman & Birdsong, 2023	112 (706) ^b	University, USA	Pilot flight	Felder-Soloman's Index of Learning Styles	Active, Sensing, Visual, and Sequential modes
Seemiller et al., 2019	701	College, USA	Not described	Kolb's Learning Style Inventory	Logic ^c (Assimilating) learning style
	1481	College, Brazil	Not described	Kolb's Learning Style Inventory	Logic (Assimilating) learning style
Silvestre et al., 2022	95	University, USA	Dentistry	VARK learning model	Visual learning style
Sousa, Mendonça, & Fontão, 2023	519	University, Portugal	Engineering	Kolb's Learning Style Inventory	Accommodating learning style
Toyama & Yamazaki, 2020	423	University, Japan	Business administration	Kolb's Learning Style Inventory	Diverging learning style
Turner & Gurenlian, 2023	89 (150) ^b	University, USA	Dental hygiene	Felder-Soloman's Index of Learning Styles	Active, Sensing, Visual, & Sequential modes
Yamazaki, Toyama, & Wijayanti, 2024	423	University, Indonesia	Elementary education	Kolb's Learning Style Inventory	Diverging learning style

Note. (a) Sample might include those born before 1995. (b) The number in parentheses indicates the total study sample, including those not in Generation Z. (c) This study used the original names for the learning styles based on Kolb's learning theory: the learning style of Theorist and Logic is the Assimilating learning style; that of Activist and Experience is the Accommodating learning style; that of Pragmatist and Practicality is the Converging learning style; and that of Reflector and Imagination is the Diverging learning style. (d) The VARK scale was slightly adjusted, measuring Visual, Auditorial, Tactile (Kinesthetic), and Social Interpersonal learning styles.

Table 3.
Learning Style Frequency Tendencies Shown in the 21 Studies Included in the Review^a

Learning style model or scale			Dominant learning style and mode							
Gregorc Style Delineator			Concrete Sequential		Concrete Random		Abstract Random		Abstract Sequential	
Albadi & Zollinger (2021) ^b			43%		26%		24%		6%	
Kolb's Learning Style Inventory ^c			Diverging		Assimilating		Converging		Accommodating	
Galingan (2019)			42%		7%		27%		23%	
Joonas et al. (2021)			15%		24%		37%		24%	
Manzoni et al. (2021)			25%		28%		22%		25%	
Seemiller et al. (2019): Brazil			19%		28%		25%		27%	
Seemiller et al. (2019): USA			23%		30%		24%		24%	
Sousa et al. (2023)			20%		22%		27%		30%	
Toyama & Yamazaki (2020)			46%		17%		4%		33%	
Yamazaki et al. (2024)			63%		28%		5%		4%	
Average % of each learning style			32%		23%		21%		24%	
Felder-Silverman's/ Felder-Soloman's Index of Learning Style			Active	Reflective	Sensing	Intuitive	Visual	Verbal	Sequential	Global
Baherimoghadam et al. (2021) ^d			47%	53%	72%	28%	85%	15%	64%	36%
Galingan (2019)			56%	44%	70%	30%	79%	21%	73%	27%
Nossoni (2021)			64%	36%	67%	33%	82%	18%	67%	33%
Turner & Gurenlian (2022)			71%	29%	82%	18%	78%	22%	74%	26%
Average % of each learning style			59%	41%	73%	27%	81%	19%	69%	31%
VAK learning model			Visual		Auditory		Kinesthetic			
Hanawi et al. (2022): Analysis 1 ^e			62%		29%		10%			
Hanawi et al. (2022): Analysis 2			64%		1%		35%			
Maulina et al. (2020)			55%		27%		18%			
Othman et al. (2019) ^f			38%		31%		31%			
Average % of each learning style			55%		22%		23%			
VAKR learning model			Visual		Auditory		Kinesthetic		Read/write	
(1) Only unimodal			(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)
(2) Unimodal & multimodal										
Eid et al. (2021)			24%	23%	41%	31%	26%	26%	9%	20%
Fahim et al. (2021)			31%	26%	23%	24%	34%	27%	13%	23%
Ishak et al. (2022)			14%	24%	15%	24%	42%	28%	29%	24%
Nwajiuba and Onyeneke (2023) ^g			25%		27%		25%		22%	
Payaprom and Payaprom (2020)			12%		25%		42%		22%	
Silvestre et al. (2022)			39%		19%		24%		18%	
Average % of each learning style			23%	25%	26%	25%	34%	28%	17%	22%

Note: (a) Among the 21 studies, the study of Reesman and Birdsong (2023) was excluded because it did not present learning style frequency for Generation Z. Several percentages of each learning style were calculated based on statistics reported in the studies. Also, the percentage of each study in this table represented a ratio of each learning style frequency divided by the total sample or total frequency in each study. (b) Albadi and Zollinger (2021) reported only unimodal styles. (c) This study used names of learning styles based on Kolb's learning theory, where the Theorist, Analyst, and Logic styles (see Galingan, 2019; Seemiller et al., 2019 in order) are Assimilating; Activist, Dynamic, and Experience are Accommodating; Pragmatist, Practice, and Practicality are Converging; and Reflector, Innovator, and Imagination are Diverging. (d) The results of Baherimoghdom et al. (2021) were used based on students' frequency distribution of each learning mode in the four learning dimensions. (e) Hanawi et al. (2022) conducted two analyses of learning style examination. (f) Othman et al. (2019) showed combined unimodal and multimodal results for the three learning styles. (g) The name of the learning style used in their study was changed to Tactile from Kinesthetic, and to Social Interpersonal from Read/write (Nwajiuba & Onyeneke, 2023).

Five studies employed the Felder-Silverman or Felder-Soloman Index of Learning Style. Among them, the study of Reesman and Birdsong (2023) was excluded because it did not present the learning style frequency of Generation Z. As illustrated in Table 3, except for a Reflective learning style in the study of Baherimoghadom, Hamedani, Mehrabi, Naseri, and Marzban (2021), all study results were consistent: the dominant learning style for Generation Z was Active, Sensing, Visual, and Sequential.

Among the final nine studies, three used the VAK model and six used the VARK model. The Visual learning style was the single dominant learning style modality in 55% of participants for the VAK learning model. The analysis for the six VARK model studies considered both unimodal and multimodal learning styles. For both, the dominant learning style was Kinesthetic, with 34% of a unimodal type and 28% of the multimodal type. In contrast, the study of Eid et al. (2021) revealed an Auditory learning style as dominant. This difference in unimodal learning styles might be attributed to cultural differences between Saudi Arabian students (i.e., Eid et al., 2021) and other students (Pakistani: Fahim et al., 2021; Malaysian: Ishak, Ranganathan, & Harikrishnan, 2022; Thai: Payaprom & Payaprom, 2020). Eid et al. (2021) discussed the effect of culture and student background on learning style preferences when comparing the learning styles of medical students between two countries. Hofstede (1997) demonstrated that a country's culture forms and develops people's ways of learning through their socialization process, suggesting that students from one cultural background may differ from those of another. As culture, a macro-level context, shapes students' learning styles, other contexts such as regions, societies, educational institutions, and department majors may affect students' preferred learning. Accordingly, the discussion of Eid et al. (2021) suggests that other determinants can influence learning style formation and development.

5. DISCUSSION

5.1. Implications

Our research offers two implications. The first relates to pedagogical approaches for effective Generation Z learning, and the second relates to future prospects for a scoping/systematic review on Generation Z in higher education and the workforce.

First, it is critical to consider how teachers or instructors determine course design in and out of class based on the learning styles of Generation Z students. Generally speaking, even though most Generation Z students may have a visual learning style, which makes them feel comfortable with social media pictures, videos, and YouTube as learning tools, a minority of students might prefer to learn through hands-on experiences that require face-to-face discussions with immediate feedback, actual experimentation in class, trial-and-error approaches, and role-play with classmates in an educational program. Thus, to promote effective learning among diverse Generation Z students, a one-size-fits-all approach may not work. Future studies may want to address how instructors should structure instructional methods to educate students with diverging learning styles in action learning contexts, to accommodate kinesthetic learners in flipped classrooms, or to motivate sequential learners in hybrid learning classes. Also, future studies should consider digital instructional approaches, which are highly relevant to Generation Z, including blended learning, gamification, and microlearning. It will be important to examine Generation Z students' learning styles in higher education, investigating how a variety of instructional approaches facilitate their learning, motivation, and performance.

The second implication concerns an opportunity for review studies on Generation Z. A limitation of our review was the relatively small number of 21 empirical studies, which were then subdivided into much smaller numbers based on the specific learning style models and scales they applied. The paucity of empirical studies may be due to the timing of the current study. Considering that Generation Z refers to individuals born between 1995–1997 and 2010–2012, it has been approximately 10 years since they showed up in higher education institutions or the workforce. As more Generation Z individuals enter targeted research sites, studies will be able to obtain more data. Accordingly, there may be opportunities for additional scoping/systematic reviews that provide further integrative insight into Generation Z's learning style.

5.2. Limitations

This study has several limitations. First, our review was limited to five learning style models to analyze the learning style of Generation Z. Although these models were valid and based on the classification of learning style models by Coffield et al. (2004), other learning style models that may support empirical results were excluded. We believed that those five learning style models and their instruments would be more accessible to learning style researchers interested in the students of Generation Z. The second limitation was the limited number of 21 included studies, as discussed earlier. This may lead to potential biases based on those studies' cross-sectional designs, reliance on self-report tools, and various countries and background experiences. Third, this study viewed Generation Z as a monolithic group without considering its diversities. Learning styles may be shaped by individual differences, such as gender, ethnic background, socioeconomic status, and personality. It is important to consider the heterogeneity in Generation Z in relation to learning style in future studies. Fourth, this study focused only on Generation Z. Comparison with learning styles of other generations would provide richer information on the characteristics of Generation Z learning styles.

6. CONCLUSION

The aim of this study was to understand the characteristics of Generation Z's learning styles in various academic disciplines of educational institutions. Our scoping review had three conclusions. First, the learning style of Generation Z varied based on the learning style model and scale applied; thus, a single dominant learning style of Generation Z could not be identified as a whole. Second, a predominant learning style could be specified for the varying learning style models and scales employed in this study. Third, nevertheless, it is important to examine whether the dominant learning style of Generation Z is unique as a generational characteristic compared with that of other generations such as Generations X and Y.

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*Literature used in systematic review

Chapter # 9

STRENGTHENING COLLABORATIONS AMONG SCHOOL, FAMILY, AND COMMUNITY TO PREVENT CYBERBULLYING

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ABSTRACT

The most promising anti-cyberbullying interventions are rooted in high quality interactions across individual, school and family spheres. This literature review uses Epstein's school-family-community spheres of influence theory to identify areas for improvement and future research in school and community relations to address cyberbullying. Articles were selected from Google Scholar, EBSCO, and PsychInfo and published between 2010 and 2025. The most effective approaches to engaging with youth rely on building trust in adults and for youth to share their knowledge and lived experiences. School authorities and teachers advocated increasing their knowledge and understanding of cyberbullying interventions, clearer policies, and prioritizing student safety and increased communication between all stakeholders. School counsellors, nurses and psychologists expressed the need for inter-and-intra professional collaboration. Studies showed that parental involvement in the design, planning and implementation of initiatives reduced cyberbullying incidents. There was a dearth of studies that explained how collaborations should occur and the responsibilities of all stakeholders. The most salient recommendations were: 1) schools need to create a welcoming environment for parents; 2) parents should adopt the educational and monitoring habits recommended by the school; 3) communities and community agencies need to allocate resources to supporting families in navigating digital spaces safely.

Keywords: cyberbullying, youth, parents, school-family-community spheres.

1. INTRODUCTION

Cyberbullying is the abuse of power to cause harm in digital settings (Lan, Law, & Pan, 2022). Behaviours such as impersonating another person online, posting humiliating photos in public online forums, name-calling and posting racist or sexist comments are just some examples (Lan et al., 2022). Possible outcomes of cyberbullying include anxiety, depression, poor academic performance, school truancy, difficulties with relationships and even suicide (Hendry, Hellsten, McIntyre, & Smith, 2023; Froeschle, Crews, & Lim, 2011; Lan et al., 2022). Fifty-two percent of Canadian youth aged 13 to 18 years have engaged in cyberbullying or witnessed it online (Hango, 2023). This review will speak to cyberbullying generally, rather than focusing on any particular form.

Much research has identified the psychological characteristics of adolescent cyberbullies and cybervictims. Cyberbullies tend to have a high need for social dominance and popularity goals (Villarejo-Carballido, Pulido, de Botton, & Serradell, 2019).

Cyberbullies' family life tends to be unstable and is marked with emotional and physical violence (Zheng, Fan, Huang, Lan, & Wang, 2025). Cybervictims' families tend to be more permissive about digital technologies (Elboj-Saso, Íñiguez-Berrozpe, Cebollero Salinas, & Bautista Alcaine, 2023). Research on parenting styles and cyberbullying is mixed. Some studies illustrate that authoritarian parenting is linked with cyberbullying; often, parents who espouse more violent orientations to problem-solving will participate in cyberaggression with their adolescent children (Zheng et al., 2025). Other studies demonstrate that authoritarian approaches reduce cyberbullying (Dehue, Bolman, Völlink, & Pouwelse, 2012). A lack of knowledge of what constitutes cyberbullying among parents facilitates cyberbullying behaviour and victimization (O'Moore et al., 2013; Fekolkin, 2016).

Social characteristics influence cyberbullying behaviour. Having a racialized or non-heterosexual identity, lower socio-economic status, female gender, neurodivergence, mental health challenges and exposure to violence in the home are significant risk factors for cybervictimization (Pennell, Campbell, & Tangen, 2020; Ronis & Slaunwhite, 2019; Kenny, Merry, Brownbridge, & Urquia, 2020; Stone, Saggars, Campbell, & Yates, 2025). School-level factors that are highly correlated with cyberbullying include the lack of supervision of students, poor classroom management techniques, school indifference concerning cybervictimization, student use of phones at school, poorer school climate, lack of social and school connectedness, and weaker school-family relations (O'Moore et al., 2013). This review will explore the literature on how school, family and communities address child and youth mental health as it relates to cyberbullying exposure.

Over the past 20 years, in North America and Europe, there have been significant efforts in creating anticiberbullying initiatives, especially at the school level. The most promising interventions are rooted in socio-ecological understandings of cyberbullying that explore interactions of influences across individual, school and family spheres (Cross et al., 2015b). Whole school approaches incorporate specific programming at each and intersecting levels. This approach is highly dependent on school and family collaboration and a focus on creating environments that reduce engagement in cyberbullying. Typical strategies involve improving school climate, community involvement and modelling pro-social behaviours (Cross et al., 2015b). School, family and community partnerships are a shared responsibility and a reciprocal process that engage stakeholders to enable parents to actively support their children (National Center on Safe and Supportive Learning Environments).

As the success of whole-school approaches to cyberbullying depends on the quality of school and family relations, this literature review will use Epstein's school-family-community spheres of influence theory to identify areas for improvement and future research on cyberbullying in relation to school, families, and community contexts. This review will discuss necessary conditions for collaborations among family, school and community to address cyberbullying to answer the following research question: What are the gaps and areas of future research in school-community relations as articulated by Epstein's theory on school-family community spheres of influence as it pertains to school-community approaches to dealing with cyberbullying among adolescents? An elaboration of Epstein's theory is in order.

1.1. Theoretical Approach

Epstein's theory on the school-family-community spheres of influence explains how students thrive when school-family-community mutually reinforce one another. This theory highlights the interdependency of school-family-community relations. Authentic school relations create the following conditions: 1) Family-like schools, 2) School-like families, and 3) School and family-like communities (Epstein, 2010). 1) Family-like schools welcome all

families, create ways to engage hard-to-reach families (often those experiencing systemic oppression), and make all children feel special and cared for; 2) In school-like families, parents receive support from the school to reinforce learning and positive behaviours that occur at school; 3) Communities create events, settings and services that benefit families so they can support their children's healthy development and include recognition of student success and achievement (Harris & Goodall, 2007). Epstein developed the Framework of Six Types of Involvement for Comprehensive Programs of Partnership and Sample Practices more commonly used in discussions about school-community-relations resulting from the sphere of influence theory (Organizing Development, n.d.). However, the choice to refer to the school-family-community spheres of influence theory was motivated to focus on the interdependency and mutual reinforcement (or mutual undermining activity; Epstein, 2010). Because of the sensitive nature of the issue, the emphasis of this review is to explore areas where schools, families and communities need to become aware of the interdependency and need for mutuality in responding to cyberbullying among youth. A discussion of the methodological approach is needed to ground the review in empirical approaches.

2. METHODS

Search terms included "school community relations", "school community collaboration", "school community cooperation", "school family", "school teacher," "school community", "school staff" AND "cyberbullying", "cyberaggression". The underlying notion of Epstein's theory is the interconnectedness of school, family and community and thus, the search terms focused on articles that emphasized this interconnectedness, as opposed to activities related to only schools or families or communities. Cybervictimization was not used as a term to avoid the identification of articles that discussed individual-level factors, which are not the focus of this review. Articles were selected from Google Scholar, EBSCO, and PsychInfo and published between 2010 and 2025 to reflect this topic's interdisciplinary nature and the relevance of digital technologies and platforms on which cyberbullying occurs. Based on this search, 152 articles were identified. Opinion pieces, government reports, and lay literature were excluded because this review focuses on scholarly debates about community and school relations in addressing cyberbullying. Original, global and empirical research in English regardless of methodology were also included in addition to literature reviews and scoping reviews. This review focuses on the body of research in highly industrialized countries where the majority of this research is produced. Articles about cyberbullying among adolescents were included. Abstracts and research methods were read for relevance. Articles that did not directly answer the research questions were excluded. This approach yielded 37 articles for the review after duplicate articles were removed.

3. RESULTS

The results section outlines gaps in research in the following categories 1) school; 2) parents and families; 3) community and cultural level factors. The school results are further detailed by discussing research as it relates to students and peers and school professionals (e.g., teachers and school authorities, school counsellors, psychologists and nurses).

3.1. School: Students and Peers

Many youths believe that cyberbullying cannot be prevented, reflecting perceived limitations in adult support or school policies (Parris, Varjas, & Meyers, 2014). Studies on youth disclosure of cyberbullying incidents is mixed with some claiming that up to 33% of youth disclose cyberbullying incidents to an adult (Byrne, Vessey, & Pfeifer, 2018) and others claim the number is as high as 60% (Villarejo-Carballido et al., 2019). This perception challenges the development of family-like schools as outlined in Epstein's theory, which are meant to create environments where all students feel supported, valued, and cared for. Students limited trust in the school staffs' ability to intervene effectively undermines the school's role in building safety and resilience.

Youth are more likely to confide in peers about cybervictimization explaining why peer-to-peer interventions show promise in promoting resilience among youth (O'Moore et al., 2013). Such programs enable youth to connect with their peers and acknowledge them as experts in digital technologies leading to significant reductions in cyberbullying, at least over the short term (Froeschle et al., 2011; Couvillon & Ilieva, 2011; Cross, Lester, Barnes, Cardoso, & Hadwen, 2015). These findings suggest that school-led interventions must also activate peer networks to be effective.

Other initiatives gaining the attention of school authorities are programs that foster inter-generational collaboration across student, family, and school spheres (Froeschle et al., 2011). These programs employ train-the-trainer approaches where community leaders train youth to lead workshops and educational forums for schools and families (Cross et al., 2015a). In summary, the most effective approaches to engaging with youth involves providing opportunities for connecting with others to share their knowledge and lived experience (Villarejo-Carballido et al., 2019; Cross et al., 2015a; Pennell et al., 2020). These findings align with Epstein's emphasis on mutual reinforcement within the school-community sphere, as youth-led strategies are most effective when recognized and supported by school staff and families.

3.2. School: Teachers and School Authorities

Many teachers and school authorities (e.g., principals, vice principals) voiced concern over their knowledge about cyberbullying, as well as their willingness and confidence to support students through one-on-one support or participation in implementing antibullying programs (Fekolkin, 2016). School authorities, in particular, expressed a lack of knowledge about the nature of cyberbullying and related interventions or programs (Pennell et al., 2020). Other challenges included insufficient time, heavy workloads, limited support from school authorities and districts (Young, Tully, & Ramirez, 2016), along with role confusion and diffusion (Zhu, C., Huang, S., Evans, R., & Zhang, 2021).

Teachers expressed the need for more training to support their students and guidance from school authorities on following cyberbullying protocols and fostering positive communication channels between families to build trust (Graves et al., 2022; Bell, Keles, Furenes Klippen, Silvia Caravita, & Fandrem, 2025). Some teachers, however, believed that principals and families should address cyberbullying on a case-by-case basis (Young et al., 2016). School districts felt frustrated from lack of direction from local or national legal frameworks and encouraged schools to tailor anticyberbullying initiatives to local circumstances (Young et al., 2016).

Likewise, because of the place-less nature of cyberbullying, school authorities expressed confusion over their jurisdictional power to intervene in cyberbullying cases. There was confusion surrounding when to involve the police and legal proceedings (Bell & Fandrem, 2025). Principals were unfamiliar with laws or school district policies

concerning cyberbullying, if they even existed; some areas and school districts have no cyberbullying policies (Young et al., 2016). In light of the lack of clarity around appropriate protocols for cyberbullying, many schools resort to technological solutions, such as, blocking access to specific websites and banning phones altogether, which do not address the underlying reasons for cyberbullying (Parris et al., 2023).

When surveyed on school approaches to cyberbullying, school authorities and teachers expressed the importance of increasing their knowledge and understanding of cyberbullying and interventions, advocating for clearer policies, and prioritizing student safety in their schools (Bell et al., 2025). They also emphasized the importance of home-school collaborations and increased communication between all stakeholders, including the larger community and school neighbourhood residents, to reduce cyberaggression and promote positive student development (Bell et al., 2025).

These gaps undermine the establishment of family-like schools as conceptualized by Epstein (2010) given schools should not only care for and protect students but also act as trusted sources of guidance during cyberbullying incidents.

3.3. School: School Counsellors, Psychologists and Nurses

The research on school counsellors, psychologists and nurses all highlighted their professional involvement in reducing cyberbullying in schools to the extent that professional designations and credentials allow. These school support staff provide multiple avenues for addressing cyberbullying: 1) one-on-one counselling to victims and their families; 2) helping perpetrators learn new and adaptive skills to cope with their interpersonal difficulties through psychotherapeutic techniques; and 3) educating both students and staff on risk factors for cyberbullying and its detrimental effects on development and positive rehabilitative approaches (Paolini, 2018; Yosep, Hikmat, & Mardhiyah, 2023; Elbedour et al., 2020). As frontline mental health professionals, their work contributes significantly to building family-like schools—environments where students feel safe, understood, and individually supported.

School counsellors, in particular, are well positioned to increase communication between school and parents; counsellors are encouraged to increase their visibility, approachability and connections with students to enhance relationships with all stakeholders and to promote trust between school and families (Su et al., 2021; Paolini, 2018). Thus, counsellors are uniquely positioned to foster school-like families by bridging communication between schools and home. Studies have shown that because of these support staffs' professional obligations, they are optimally prepared to link students with mental health and other supports available in the community (Byrne et al., 2018). Additional contributions to school efforts to combat cyberbullying includes participation in the development of anticyberbullying school and school district policies (Paolini, 2018). These approaches entail planning, designing and delivering train-the-trainer and peer support programs, as well as the development of prevention and intervention programs and conducting risk assessments of the school climate and individual students (Byrne et al., 2018). Studies also indicate the need for school counsellors, school psychologists and nurses to adopt trauma-informed, culturally-sensitive and spiritually-inspired care. Other studies recommend that school counsellors, school psychologists and nurses be actively involved in crisis management through the management of abusers, victims and bystanders and the documentation of cyberbullying incidents (Su et al., 2021).

To the extent that these suggestions are taken under advisement of school authorities or even adopted by schools is questionable considering resource constraints, priorities, staff shortages and staff over-work. Studies on the role of school counsellors and nurses indicated

role confusion and diffusion of responsibilities highlighting overlapping professional boundaries especially concerning their collaboration with teachers (Su et al., 2021; Byrne et al., 2018) and lack of support from school authorities (Su et al., 2021). Like teachers and school authorities, counsellors, nurses and school psychologists spoke of the importance of collaboration with families and the school community, however, most of the work of these professionals involves implementation of interventions based on high-risk approaches (Yosep et al., 2023; Elbedour et al., 2020). Also, like teaching staff, these support staff complain of a lack of training in dealing with cyberbullying and youth (Byrne et al.,; Zhu et al., 2021) and the need for inter-and-intra professional collaboration (Paolini, 2018; Elbedour et al., 2020). It should be noted that the search terms yielded only a total 5 studies on the role of nurses, school psychologists, and counsellors in curbing cyberbullying in schools illustrating the need for more research on this topic. The work of school counsellors, psychologists, and nurses contributes meaningfully to family-like schools, school-like families, and school- and family-like communities, but their impact is limited by role ambiguity, insufficient training, and systemic under-resourcing. Strengthening their capacity to collaborate across spheres is essential for implementing effective interventions that promote student well-being and resilience in the face of cyberbullying.

3.4. Parents and Families

Family dynamics and family-school relations can complicate approaches to cyberbullying in schools despite support from students and school counsellors that often act as mediators in conflicts. Cyberbullies have unique challenges, including parental denial about their child's engagement in cyberbullying (Bell & Fandrem, 2025). Many parents of cyberaggressors may struggle with their own emotional difficulties and are often mistrustful of school authorities' attempts at restorative actions (Zhu et al., 2021). In contrast, cybervictims' families have been found to hold schools responsible for cybervictimization and, at times, excessively persistent in seeking resolutions, according to school authorities. Likewise, such parents reported having to 'fight for the school's attention' for the school to address cyberbullying incidents (Bell & Fandrem, 2025). These challenges illustrate the fragility of school-like families; Epstein's concept where families and schools work together to reinforce student development. Such responses erode opportunities for mutual accountability and hinder the development of shared intervention strategies.

Regardless of students' cybervictimization status, studies have shown that schools should be sensitive to parental concerns and show empathy, understanding and humility to work with families to address cyberbullying incidents (Fekolkin, 2016; Zhu et al., 2021). When parents believe in teachers and school authorities' competence to address cyberbullying, they were more willing to take teachers' advice and participate in antibullying interventions (Fekolkin, 2016). Parents were more likely to believe and trust teachers when they demonstrated knowledge and skill in managing cyberbullying or aggression at school (Fekolkin, 2016). Schools should also be flexible, taking into account parents' busy schedules, and tailor approaches accordingly.

Studies elaborated that interventions involving parents in the design, planning and implementation of school-based antibullying initiatives reduced cyberbullying incidents at school (Zhu et al., 2021). Having shared goals and effective communication strategies that encouraged parents to participate were noted as promoters of parental involvement (Stamatis & Nikolaou, 2016). These types of partnerships align closely with school- and family-like communities, where schools, families, and even community services share responsibility for student safety. However, most initiatives to address school-based cyberbullying were simply educational programs. These programs were directed at parents and encouraged increased

monitoring of online activities and identification of behavioural changes associated with cybervictimization or cyberbullying with advice on how to best support affected youth (Lan et al., 2022). Other interventions incorporated high-risk approaches such as family counselling or psychotherapy for victims and their families led by the school counsellor, school psychologist. Other interventions recommended school linkages to specialized mental health services (Dailey & Roche, 2025; Paolini, 2018).

3.5. Community and Cultural Level Factors

While discussed sparingly, many studies reiterate the need for greater community involvement in helping youth deal with cyberbullying. Studies advocate for more community linkages with schools, enabling students to engage in pro-social activities and supporting various community-based work in their neighbourhoods while providing respite from online time (Dailey & Roche, 2025). These studies reflect Epstein's concept of school- and family-like communities, where community agencies, service programs, and neighborhood organizations collaborate with schools and families to create environments that promote youth well-being beyond the school. Although most studies highlighted in this review indicated the need to involve the community (e.g., community agencies, services programs), there was a dearth of research on how to proceed in garnering community support. Additionally, most school and community based antibullying initiatives are short-term interventions (less than 5 months) whose effects diminish with time (Lan et al., 2022). Programs that use train-the-trainer models, where community leaders equip youth to lead cyberbullying workshops for peers, parents, and school personnel, exemplify Epstein's third sphere, school- and family-like communities, in practice (Cross et al., 2015a). Through these collaborative initiatives, all three spheres are mutually strengthened, reflecting the interdependent system that Epstein's theory describes. However, the few studies about how schools and families can effectively engage community partners did not meet the review criteria, suggesting a critical need to explore this interrelationship in greater depth. The interdependency of these spheres is vital for creating lasting, culturally sensitive, and responsive programs that empower youth, engage families, and build resilient communities. Addressing the challenges educators face in responding to cyberbullying requires a coordinated focus on all three of Epstein's spheres. Building family-like schools demands training and clear policies; supporting school-like families requires equipping caregivers to respond to cyber harms at home; and cultivating school- and family-like communities necessitates multi-stakeholder collaboration rooted in shared values. Only when these spheres work in mutual reinforcement can school systems implement trust-based, effective cyberbullying interventions that truly support youth safety, mental health, and long-term resilience.

4. DISCUSSION

The research on school-family cooperation in reducing cyberbullying incidents among adolescents reiterates the need for parental and community involvement. However, only one article elaborated on the challenges and pitfalls of engaging multiple stakeholders. There was also a dearth of studies that explained how such collaboration should occur and the expected responsibilities of all stakeholders. Using Epstein's concept of the spheres of influence, an exploration of the intersection of individual, peer, school, and community factors will follow.

4.1. “Family-Like Schools”

A significant limitation is the dearth of research on the involvement of school staff other than teachers despite the requirement for the entire school to be involved in whole-school approaches (Hellfeldt, López-Romero, & Andershed, 2019). Other staff, such as school counsellors, nurses, school custodians or administrative staff, received little mention despite their importance to the social ecology of the school (Yosep et al., 2023). For example, studies show that custodians significantly promote student welfare (Scott, 2007). The school’s capacity to be a ‘family-like school’, to garner support from parents in responding to cyberbullying, is severely curtailed if schools cannot foster and utilize each staff member’s time and talent.

Recommendations to build change-promoting collaborations among school staff and parents involve inviting parental participation before conversations about cyberbullying and having shared expectations. Because of the sensitivity and potential legal implications, it is also essential to foster caring relationships with all families to reduce the perception of ‘singling out’ families. Expectations around the efficacy of anticyberbullying initiatives are important, especially if complacency exists among students, school staff and parents.

The creation of shared expectations, goals and approaches occurs when all parties understand that their efforts are for the betterment of students’ lives. Reiterate the need to promote psychological safety at school as a deterrent to cyberaggression and also as a means to foster resilience for those affected may be sufficient to begin to build collaborations between all stakeholders. Language has to be clear, concise and understandable to all families and families should be invited to co-construct shared goals.

Appropriately delivered education can enable stakeholders to contribute to shared goals and to divide responsibilities accordingly. Incorporating pre-service training on cyberbullying, including risk assessments and identification mitigation, and crisis management for nurses, school psychologists, and school counsellors, would prepare future professionals to implement and help sustain anticyberbullying initiatives, policies and protocols. Requiring continuing professional training on cyberbullying mitigation strategies could be required as a condition of employment for support and teaching staff. As a lack of knowledge and confidence among school staff were identified as jeopardizing parental involvement and education (Fekolkin, 2016), building knowledge among school staff should be a main priority prior to collaboration and involvement with parents.

While effective communication is essential to establishing shared goals, managing expectations and dividing or sharing responsibilities, a dearth of findings elaborated on how best to communicate about cyberbullying within and outside the school community. Related findings on school-community communication point to the need for consistent and clear communication within the school community, respecting differences of opinion and negotiating outcomes (Bell & Fandrem, 2025). However, in light of the unclear and poorly understood school district or school policies, school staff and families may have difficulties doing so. Schools, school districts, government families and the larger community must conceptualize whole-school approaches to cyberbullying that are rooted in evidence and that promote safety and a positive school climate, including school connectedness (Bell et al., 2025). Some solutions include communicating the seriousness of the issue, especially with resistant school authorities and parents. Sharing the lived experiences of students impacted by cyberbullying and bringing in experts may foster common ground for constructive discussions among all stakeholders. In order for schools to be ‘family-like’, the principal must coordinate activities and communicate empathically with a consistent message that encourages feedback and that is delivered in a culturally appropriate manner. These

approaches create a warm atmosphere where parents feel that each child, parent and family are valued and cared for.

Bell and Fandrem (2025)'s study investigated parental beliefs in addition to the barriers and facilitators of cooperation among parents, school staff, and community stakeholders to combat cyberbullying in Norwegian contexts. Using reflexive thematic analysis of parental interviews, and guided by bioecological theory, Bell and Fandrem (2025) identified practical steps for successful school-family- and community anticyberbullying collaboration. Their findings are summarized in the table below.

Table 1.
Bell and Fandrem's practical actions on cyberbullying reduction initiatives with schools, families and community.

Focus Area	Practical Actions for Schools & Educators
1. Communication	- Schedule regular parent–teacher meetings focused on online safety. - Use multiple formats (e.g., emails, school apps, translated letters, phone calls). - Create safe, open channels for parent feedback and reporting concerns. - Offer workshops on cyberbullying, digital behavior, and school response protocols.
2. Parent Education	- Provide plain-language guides (with translations) on parent rights and policies. - Use real-life examples or role-playing to increase parent confidence.
3. Staff Training	- Train school staff in: • Cyberbullying detection and intervention • Trauma-informed approaches • Culturally responsive communication. - Reinforce consistent and empathetic adult responses.
4. Clear Roles & Follow-Up	- Define clear staff responsibilities when cyberbullying occurs. - Use incident tracking systems to ensure accountability and follow-through. - Create individualized support plans for involved students (victims and aggressors).
5. School–Community Culture	- Embed parent and community collaboration in school planning. - Include parent/community reps in anti-bullying or digital safety committees. - Partner with local agencies (e.g., youth services, cultural groups, law enforcement).
6. Equity & Inclusion	- Actively include immigrant, minority, and underrepresented families. - Translate all communication materials; provide interpreters at meetings. - Regularly collect feedback from diverse parents to improve inclusion.

(adapted from Bell, M., & Fandrem, H. (2025). “It Takes a Village”: Parental Experiences with Cooperation to Overcome Cyberbullying in Norwegian Schools. *International Journal of Bullying Prevention*, 1-13. <https://doi.org/10.1007/s42380-024-00277-y>)

Schools should develop a detailed understanding of their students, families, district policies, and local community resources to effectively implement anticyberbullying interventions. Most interventions are expected to require faithful implementation of programmatic antibullying approaches often without attention to the school context, resulting in limited effectiveness (Casas, Del Rey, & Ortega-Ruiz, 2018; Hortigüela Alcalá, Fernández Río, González Calvo, & Pérez Pueyo, 2019; Lan et al., 2022). Likewise, most programs do

not account for the ethnic and cultural diversity within schools, school types (e.g., charter, private, public) or the underlying causes of cyberbullying such as systemic oppression, racism, or sexism (King, 2024) that disproportionately affect marginalized groups (Ronis & Slaunwhite, 2019). Addressing these concerns must become a priority if schools favour whole-school approaches. Furthermore, interventions that are strength-based over deficit-focused would motivate more effective school-family and community partnerships, as deficit thinking in partnerships tends to exasperate victim-blaming and hegemonic systems (Gillies, 2023).

4.2. “School-Like Families”

Attention should also be paid to involving 'hard to reach' or reticent families to not further exasperate existing social inequalities through the differential participation of more affluent and high-resourced parents. Parental involvement and engagement should include efforts to reduce language and cultural barriers while embracing students' and parents' funds of knowledge. Adopting school-family relation principles of democratic engagement and parental empowerment will encourage parental participation from marginalized communities. To create balanced partnerships with families requires social justice and strength-based approaches in the implementation of sensitive programming around cyberbullying.

4.3. “School and Family-Like Communities”

Equality of parental and student engagement should be fostered to promote reciprocal relations between school staff, parents, and the community. Creating cyberbullying initiatives that enable parents to raise their concerns and enable students to provide their expertise through lived experiences and technological understandings with school staff is essential. However, current conceptualizations perceive parents and students as passive recipients of knowledge; the interventions with the best results empower parents to reinforce what students learn in school about cyberbullying (Lan et al., 2022). Although beyond the scope of this chapter, school-community partnerships could involve families and students in designing, delivering, implementing, and evaluating digital literacy and cybersafety programs.

5. FUTURE RESEARCH DIRECTIONS

Future research on school-community relations and cyberbullying needs to consider schools' power dynamics, the staffs' specific roles and how best to mobilize staffs' respective expertise or power to shape whole school anticyberbullying approaches. These factors affect how anticyberbullying policies are implemented, resulting in youths' perceptions of safety and support. Understanding these interdependencies through case studies could identify staff roles and tasks for consistent support which has been shown to improve resilience among youth (Anderson-Butcher, Cash, Saltzburg, Midle, & Pace, 2004).

Studies should also examine how schools and communities negotiate sensitive issues like cyberbullying, emphasizing inclusive methods like Participatory Action Research (PAR) to co-create strategies that reflect shared values across all stakeholders. This inclusive approach can strengthen students and families' sense of belonging, safety and resilience by ensuring that support systems reflect the lived realities and values of all stakeholders. Without full parental engagement, interventions may lack crucial context and continuity at home. PAR can improve youth mental health by promoting more consistent support networks across home and school environments.

Another critical gap lies in professionals' limited training to respond to digital harms in trauma-informed or equity-focused ways. Future research should assess the efficacy of professional development programs using pre/post evaluation designs, with a focus on outcomes such as student safety perceptions, reduced incidents, and increased staff intervention efficacy.

Similarly, empowering schools to incorporate inclusive practices into anticyberbullying work is essential as interventions may fail to address the structural biases that disproportionately expose marginalized youth to cyberbullying. School case studies that integrate equity-diversity- and inclusion principles and enhance the resilience of marginalized youth by creating more affirming environments.

Parental involvement in anticyberbullying initiatives must also be aligned with health equity principles. Future studies could apply an intersectional framework to analyze how socioeconomic status, race, and immigration status shape parent engagement in anticyberbullying initiatives at school. Longitudinal designs would be particularly useful to examine how parent-school relationships evolve over time and influence youth outcomes such as emotional regulation and digital coping skills.

Lastly, there is a pressing need to develop school-family-community models that include trusted community partners, especially in under-resourced or politically disengaged areas. These partnerships can fill support gaps, making interventions more effective and relevant, while enhancing students' safety and long-term wellbeing.

6. CONCLUSION

Future research should promote collaboration among students, schools, families, and communities using culturally responsive, equitable, and strength-based approaches. Effective anticyberbullying efforts require respectful stakeholder engagement and shared responsibility. For schools to apply Epstein's 1) Family-like schools, 2) School-like families, and 3) School and family-like communities, a welcoming environment for cooperative parental involvement is needed. Likewise, parents should adopt the educational and monitoring habits recommended by the school and attempt to instill habits that are consistent with the school approaches to reinforce students' learning. Lastly, parents and community agencies should allocate resources to help families navigate digital spaces safely. Schools, families, and communities should address their respective concerns and expectations while centering youth in initiatives to enhance knowledge transfer and youth resilience.

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Chapter # 10

DEMOCRATIC SCHOOL CULTURE AND STUDENT-TEACHER RELATIONSHIPS: INSIGHTS FOR IMMIGRANT-BACKGROUND STUDENTS

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ABSTRACT

Relationships between students and teachers are central to academic success and psychological well-being, yet perceptions of these relationships can differ across student groups. Immigrant-background students are often at risk of less positive relationships than their native peers due to language and acculturation challenges. Positive student–teacher relationships can, however, function as a protective factor by supporting inclusion, social engagement, and a sense of school belonging. Drawing on data from the International Civic and Citizenship Education Study (ICCS), the present study examines how aspects of democratic school and classroom culture—openness in classroom discussions, perceived influence on school decision-making, participation in civic activities, peer interactions, and civic learning—are associated with perceptions of student–teacher relationships among immigrant-background students in Slovenia and Croatia, two neighboring countries that differ in the proportion of students with an immigrant background. In both countries, results show that peer interactions and perceived influence on decision-making are robust positive predictors of student–teacher relationships, whereas openness in classroom discussions and participation in civic activities differ between countries. Findings are discussed through the lens of fostering positive perceptions of student–teacher relationships for immigrant-background students.

Keywords: student-teacher relations, immigrant background, students, ICCS 2022.

1. INTRODUCTION

The relationships students build with their teachers are foundational to school practice and educational systems, shaping motivation, engagement, and well-being (Endedijk et al., 2022; Roorda, Koomen, Spilt, & Oort, 2011; Zheng, 2022). Yet students do not perceive these relationships uniformly, nor are they homogeneous in their characteristics. In increasingly multicultural classrooms, immigrant-background students may be at greater risk of less positive student–teacher relationships than their native peers, as differences in cultural background, language proficiency, prior schooling, and experiences with stereotyping or discrimination shape both their perceptions and their relationships (e. g. Štremfel, Šterman Ivančič, & Peras, 2024; Wanders, Dijkstra, Maslowski, & Van Der Veen, 2020). At the same time, warm, respectful, and responsive teacher–student interactions can be especially consequential for these students, buffering social exclusion and supporting psychosocial adjustment (Archambault et al., 2024; Peguero & Bondy, 2011; Štremfel, Šterman Ivančič, & Peras, 2024; Wanders, Dijkstra, Maslowski, & Van Der Veen, 2020).

A growing literature suggests that student–teacher relationships are embedded in the social ecology of classrooms and schools (Endedijk et al., 2022). This foregrounds elements of democratic school and classroom culture (Tzankova, Albanesi, Cicognani, 2021; Yavuz

Tabak & Karip, 2022) as a promising lens for understanding immigrant-background students' perceptions of student–teacher relationships. In particular, fostering open discussions, enabling meaningful student participation in decision-making, cultivating supportive peer relationships, and promoting civic participation are plausible antecedents of more positive perceptions of student–teacher relationships. However, the literature has not sufficiently examined how these features relate to the perceptions of immigrant-background students, particularly across national contexts.

To address this research gap, this study uses data from the International Civic and Citizenship Education Study (ICCS 2022), an international large-scale assessment (ILSA). Accordingly, we focus on Slovenia and Croatia—neighboring countries with shared historical and regional ties but different proportions of immigrant-background students in the latest ICCS data. Specifically, we examine whether—and how—core elements of democratic school and classroom culture—openness in discussions, influence on decision-making, civic participation, peer interactions, and civic learning—predict immigrant-background students' perceptions of student–teacher relationships within each national context.

2. BACKGROUND

Student–teacher relationships are important to students' educational success, shaping academic performance and engagement (Zheng, 2022). Yet, because students are a heterogeneous group, these relationships are not experienced uniformly. In the contemporary context of rising immigration, students with an immigrant background provide a critical lens for examining variation in perceived relationship quality. In this study, we define immigrant-background students as those who were born abroad and/or have at least one parent born outside the country of schooling.

Using national data from the International Civic and Citizenship Education Study (ICCS 2022), we adopted a civic and citizenship education framework to examine immigrant-background students' perceptions of student–teacher relationships. According to prior work (e.g., Munniksma, Ziemes, & Jugert, 2022; Wanders et al., 2020), practices such as openness in classroom discussions, student voice and perceived influence in decision-making, participation in civic activities, supportive peer interactions, and civic learning at school are associated with more positive student–teacher relationships. The present study assumes that immigrant-background students' perceptions of student–teacher relationships are embedded in classroom and school ecologies shaped by the values, norms, and practices that constitute democratic school and classroom culture (Yavuz Tabak & Karip, 2022).

According to the latest ICCS data, immigrant-background students in both Slovenia and Croatia report perceptions of student–teacher relationships below the international average. This pattern is concerning because prior research consistently identifies positive student–teacher relationships as a protective factor, supporting development (Peguerro & Bondy, 2011), school belonging (Štremfel et al., 2024), and adaptation to new environments (Archambault et al., 2024). When teachers demonstrate personal regard, provide structure, and offer choices, they help meet students' needs for relatedness, competence, and autonomy, thereby fostering more positive perceptions of student–teacher relationships among students (Roorda et al., 2011). From this perspective, schools play a key role in supporting the integration and well-being of immigrant-background students within the broader community.

Moreover, examining student–teacher relationships among immigrant-background students is warranted because many are at risk, depending on the timing and circumstances of arrival in the host country and on their daily experiences. They may encounter language barriers, unfamiliar school systems, cultural dissonance, the use of a different home language, and instances of discrimination. In this context, warm, respectful, and responsive relationships with teachers are especially important; they not only promote academic adjustment but also buffer social exclusion and emotional distress. Thus, for immigrant-background students, student–teacher relationships function as academic and psychosocial protective factors, promoting student engagement, school satisfaction, and prosocial behavior (Wanders et al., 2020).

Schools themselves play a key role in fostering a democratic culture through civic and citizenship education, not only by building civic knowledge but also by creating opportunities for participation and inclusive dialogue (Tzankova et al., 2021). From a psychological perspective, however, these practices may not benefit all students equally unless they are enacted in culturally responsive ways. Open classroom discussions can remain superficial or exclusionary if topics, norms, and interactional routines fail to include diverse perspectives. Participation in civic activities may also be ineffective if immigrant-background students cannot relate to the sociopolitical context and civic norms of the host country.

To address this gap, we examine how specific features of democratic school and classroom culture are associated with immigrant-background students' perceptions of student–teacher relationships in Slovenia and Croatia. We focus on these two neighboring countries because they share historical ties as former Yugoslav republics but differ in the proportion of immigrant-background students according to ICCS 2022 data. In Slovenia, approximately 21 % of eighth-graders reported having an immigrant background, reflecting long-standing migration from the former Yugoslav republics and more recent arrivals from other countries (e.g., Ukraine). In contrast, only 6 % of eighth-graders in Croatia reported having an immigrant background.

More specifically, we aim to identify which aspects of democratic school and classroom culture predict these perceptions for students with an immigrant background and whether similar patterns of predictors emerge in both countries. Accordingly, the study addresses the following research questions:

- 1) What factors related to democratic school and classroom culture are associated with immigrant-background students' perceptions of student–teacher relationships?
- 2) What similarities and differences can be observed in these associations between Slovenia and Croatia?

Given the exploratory nature of the research design, we did not pose specific hypotheses.

3. METHODS

3.1. Participants

This study draws on data from the International Civic and Citizenship Education Study 2022 (ICCS 2022). For Slovenia and Croatia, only data from the student-background questionnaire are used. ICCS is an international large-scale assessment organized by the IEA and implemented across participating countries in regular cycles. ICCS employs a complex sampling and assessment design that enables representative population estimates (Schulz et al., 2025).

In Slovenia, the ICCS 2022 sample included 3,466 eighth-grade students (50.12% male), with 21% reporting an immigrant background (they themselves were born abroad and/or at least one parent was born outside the country of assessment). In Croatia, the sample included 2,759 eighth-grade students (52.09% female), of whom 6% reported an immigrant background. For the present study, only data for immigrant-background students from Slovenia and Croatia were used.

3.2. Measures

For this study, we used scales available in the international ICCS database. Item Response Theory (IRT) was used in the development and construction of these scales. All scales were rescaled to have a mean of 50 (the international average) and a standard deviation of 10 points (Schulz et al., 2025).

The primary outcome variable is the Students' Perceptions of Student-Teacher Relations at School scale. Additional variables were selected from the international database as indicators of democratic school and classroom culture.

Accordingly, the following variables are used in this study:

Students' perceptions of student-teacher relations at school (S_STUTREL). This scale captures students' overall perceptions of how they are treated by their teachers. It consists of five items, with responses rated on a four-point Likert scale (1 = strongly disagree, 4 = strongly agree). Example item: "Most of my teachers treat me fairly." Higher scores indicate more positive perceptions of student-teacher relationships. Cronbach's alpha was 0.84 in Slovenia and 0.83 in Croatia.

Students' perceptions of openness in classroom discussions (S_OPDISC). This scale reflects the extent to which political or social issues are openly discussed in class. It includes six items rated on a four-point scale (1 = never, 4 = often). Example item: "Teachers encourage students to make up their own minds." Higher scores indicate more frequent opportunities for open classroom discussions. Cronbach's alpha was 0.83 in Slovenia and 0.80 in Croatia.

Perceptions of student interaction at school (S_INTACT). This scale assesses the quality of student-student relationships in school. It is composed of three items on a four-point scale (1 = strongly disagree, 4 = strongly agree). Example item: "Most students at my school treat each other with respect." Higher scores reflect more positive peer interactions among students. Cronbach's alpha was 0.88 in Slovenia and 0.75 in Croatia.

Students' civic learning (S_CIVLRN). This scale measures the extent to which students report learning about civic-related topics at school. It includes nine items on a four-point scale (1 = not at all, 4 = to a large extent). Example item: "How citizens can vote in local or national elections." Higher scores reflect greater exposure to civic education. Cronbach's alpha was 0.88 in Slovenia and 0.85 in Croatia.

Students' beliefs about their influence on decision-making at school (S_INFDEC). This scale captures students' beliefs about their influence on decisions made at school. It contains six items rated on a four-point scale (1 = strongly disagree, 4 = strongly agree). Example item: "Students' participation in decision-making contributes to making my school better." Higher scores indicate stronger perceptions of student agency. Cronbach's alpha was 0.86 in both Slovenia and Croatia.

Students' participation in civic activities at school (S_SCHPART). This scale reflects the frequency of students' engagement in civic-related activities at school. It is based on seven items assessed on a three-point scale (1 = no, I have never done this; 2 = yes, but more than a year ago; 3 = yes, within the last 12 months). Example item: "Taking part in decision-making about how the school is run." Higher scores represent more frequent participation in civic activities. Cronbach's alpha was 0.76 in Slovenia and 0.59 in Croatia.

3.3. Analysis and Procedure

The present study used student-level data from the International Civic and Citizenship Education Study (ICCS 2022), an international large-scale assessment. Data were collected during the main survey administration of ICCS 2022 in participating countries and are publicly available through the official ICCS data repository. The analysis focuses on data from Slovenia and Croatia, with specific attention to immigrant-background students. The data were downloaded directly into RALSA (Mirazchiyski, 2021), a statistical package for R designed to analyze data from international large-scale assessments.

All analyses were conducted in RALSA, which automatically accounts for the study's complex sampling design and weighting procedures, including the use of student estimation weights (TOTWGTS) and jackknife replication methods to ensure population-representative estimates. To address the research questions, we employed descriptive statistics, bivariate correlations, and linear regression models. All analyses were conducted separately for each country. Given the ILSA design and the cross-national comparison, linear regression is an appropriate statistical approach (see Schulz et al., 2025).

In both regression models (for Slovenia and Croatia separately), Students' perceptions of student-teacher relations at school (S_STUTREL) served as the dependent variable. The five variables representing aspects of democratic school and classroom culture (S_OPDISC, S_INTACT, S_CIVLRN, S_INFDEC, and S_SCHPART) were entered as independent variables. Gender was included as a control variable. All predictors were entered simultaneously using the enter method. Assumptions for linear regression analysis were met for all models.

4. RESULTS

Descriptive statistics and correlations among the variables are presented in Table 1. The correlation coefficients for immigrant-background students in Slovenia are shown below the diagonal, while those for immigrant-background students in Croatia are displayed above the diagonal. Immigrant-background students in Slovenia reported lower perceptions of student-teacher relations than students in Croatia (Slovenia: $M = 47.02$, $SD = 10.77$; Croatia: $M = 49.48$, $SD = 10.05$), with both means slightly below the international average. Moreover, Slovenian immigrant-background students reported greater exposure to civic learning than their Croatian peers, whereas Croatian immigrant-background students reported more openness in classroom discussions and greater participation in civic activities. Bivariate correlations show similar patterns for immigrant-background students in both countries.

Table 1.
Descriptive statistics and correlations between variables.

	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7
1	47.02	10.77	49.48	10.05	1.00	0.45**	0.50**	0.39**	0.09	0.51**	0.12
2	45.88	11.76	49.82	11.18	0.19**	1.00	0.26**	0.45**	0.19**	0.40**	0.28**
3	46.17	10.78	47.34	10.72	0.63**	0.15	1.00	0.26**	0.12	0.36**	-0.02
4	51.17	12.47	45.23	10.31	0.26**	0.29**	0.23**	1.00	0.22**	0.50**	0.21*
5	48.51	11.02	49.58	8.03	0.01	0.20**	0.06	0.14**	1.00	0.13	0.16
6	49.26	10.40	47.70	9.14	0.59**	0.18**	0.53**	0.32**	0.11**	1.00	0.22*
7	1.47	0.50	1.52	0.50	0.02	0.27**	-0.03	0.07**	0.06	-0.03	1.00

*Notes: Means and standard deviations for Slovenia are in the first two column followed by means and standard deviations for Croatia. ** $p \leq 0.01$; * $p \leq 0.05$. S_OPDISC—students' perceptions of openness in classroom discussions; S_INTACT—students' perceptions of student interaction at school; S_CIVLRN—student reports about civic learning at school; S_INFDEC—students' beliefs about their influence on decision-making at school; S_SCHPART—students' participation in civic activities at school; S_STUTREL—students' perceptions of student-teacher relations at school. Numbers of variables in the table: 1 – S_STUTREL; 2 – S_OPDISC; 3 – S_INTACT; 4 – S_CIVLRN; 5 – S_SCHPART; 6 – S_INFDEC; 7 – S_GENDER.*

We estimated two linear regression models to examine predictors of student-teacher relationships among immigrant-background students in Slovenia and Croatia. In both models, gender was included as a control variable, and all continuous predictors were entered simultaneously. The Slovenia model (Table 2) accounted for 49% of the variance in students' perceptions of student-teacher relationships. Students' perceived influence on decision-making at school (S_INFDEC; $\beta = 0.35$, $p < .05$) and student interaction at school (S_INTACT; $\beta = 0.44$, $p < .05$) were significant positive predictors, whereas participation in civic activities at school (S_SCHPART; $\beta = -0.08$, $p < .05$) emerged as a negative predictor. In Croatia, the model (Table 3) explained 41% of the variance in the dependent variable; perceived influence on decision-making (S_INFDEC; $\beta = 0.31$, $p < .05$), student interaction (S_INTACT; $\beta = 0.30$, $p < .05$), and openness in classroom discussions (S_OPDISC; $\beta = 0.20$, $p < .05$) were all positive predictors. No other predictors were statistically significant in either model.

Table 2.
Linear regression model for immigrant-background students in Slovenia.

	β	$SE(\beta)$	t	p
Intercept	8.50	2.29	3.70	0.000
S_OPDISC	0.06	0.04	1.38	0.169
S_INFDEC	0.35	0.03	10.42	0.000
S_CIVLRN	0.04	0.03	1.32	0.186
S_INTACT	0.44	0.04	12.44	0.000
S_SCHPART	-0.08	0.03	-2.63	0.009
S_GENDER	0.63	0.62	1.02	0.307
Adjusted R^2	0.49			
F-statistic	101.80			
DF	69.00			

Notes: S_OPDISC—students' perceptions of openness in classroom discussions; S_INTACT—students' perceptions of student interaction at school; S_CIVLRN—student reports about civic learning at school; S_INFDEC—students' beliefs about their influence on decision-making at school; S_SCHPART—students' participation in civic activities at school; S_STUTREL—students' perceptions of student-teacher relations at school.

Table 3.
Linear regression model for immigrant-background students in Croatia.

	β	$SE(\beta)$	t	p
Intercept	9.83	4.03	2.44	0.016
S_OPDISC	0.20	0.09	2.39	0.018
S_INFDEC	0.31	0.08	3.83	0.000
S_CIVLRN	0.07	0.10	0.70	0.488
S_INTACT	0.30	0.08	3.88	0.000
S_SCHPART	-0.05	0.09	-0.57	0.568
S_GENDER	-0.18	1.61	-0.11	0.911
Adjusted R^2	0.41			
F-statistic	39.98			
DF	66.00			

Notes: S_OPDISC—students' perceptions of openness in classroom discussions; S_INTACT—students' perceptions of student interaction at school; S_CIVLRN—student reports about civic learning at school; S_INFDEC—students' beliefs about their influence on decision-making at school; S_SCHPART—students' participation in civic activities at school; S_STUTREL—students' perceptions of student-teacher relations at school.

Table 4 presents a comparative overview of the predictors of immigrant-background students' perceptions of student-teacher relations (S_STUTREL) in Slovenia and Croatia. The results reveal both similarities and differences in how aspects of democratic school and classroom culture contribute to these perceptions across the two national contexts. Consistently, students' perceptions of student interaction at school (S_INTACT) and their

perceived influence on school decision-making (S_INFDEC) emerged as robust, significant predictors in both countries. Notable differences were observed for other predictors. In Croatia, openness in classroom discussions (S_OPDISC) was a significant predictor, whereas this was not the case in Slovenia. In contrast, participation in civic activities (S_SCHPART) was a significant predictor in Slovenia but not in Croatia. The remaining predictors were not significant in either country.

Table 4.
Comparison of predictors in Slovenia and Croatia.

Predictor	Significant for immigrant-background students in Slovenia	Significant for immigrant-background students in Croatia
Students' perception of openness in classroom discussions	No	Yes
Students' perceptions of student interaction at school	Yes	Yes
Student reports about civic learning at school	No	No
Students' beliefs about their influence on decision- making at school	Yes	Yes
Students' participation in civic activities at school	Yes	No
Student gender	No	No

5. DISCUSSION

The present study examined how features of democratic school and classroom culture relate to student–teacher relationships among immigrant-background students in Slovenia and Croatia—two neighboring countries with different proportions of immigrant-background students. The findings indicate both similarities and differences in predictors across the two countries. Students' perceived influence on decision-making at school emerged as a significant predictor in both contexts, underscoring the role of democratic school and classroom culture in establishing positive student–teacher relationships (Tzankova et al., 2021). It is likely that teachers who encourage student participation in decision-making are perceived as more supportive, thereby, in turn, strengthening student–teacher relationships. Additionally, student interaction at school was a significant positive predictor in both countries, emphasizing the role of peer relationships in fostering positive student–teacher interactions, consistent with prior research (Kiuru et al., 2015). However, country-specific differences were observed: openness in classroom discussions was a significant predictor only in Croatia, whereas participation in civic

activities was a significant predictor only in Slovenia. These patterns suggest that contextual factors may shape the mechanisms through which democratic school culture is associated with students' perceptions of student-teacher relationships. Overall, the findings reinforce the importance of both democratic school practices and peer interactions in promoting positive relationships between immigrant-background students and their teachers.

The results align with prior work showing that student-teacher relationships are embedded in the broader social ecology of classrooms and schools (Endedijk et al., 2022). Peer interactions appear to influence how students interpret teacher behavior and their relationships with teachers, suggesting that supportive classroom climates foster not only student engagement but also relational trust. This is especially relevant for immigrant-background students, who may initially feel marginalized or disconnected in the school environment (Dežan & Sedmak, 2023). Encouraging positive peer relationships thus acts as a protective factor, reducing experiences of social exclusion and supporting emotional and academic adjustment (Schachner, Schwarzenhal, Moffitt, Civitillo, & Juang, 2021). The connection between peer and teacher relationships further supports the idea that immigrant-background students benefit most when teachers intentionally cultivate inclusive classroom climates that support all students.

The consistent significance of student voice—as reflected in perceived influence on decision-making at school—further reinforces the importance of democratic structures within schools. Students who feel their opinions matter and who are included in decision-making processes tend to report more positive relationships with teachers (Conner et al., 2024; Quinn & Owen, 2016). This highlights the need for participatory pedagogies in which student agency is actively supported. In Slovenia in particular, where past research suggests that student involvement in decision-making remains limited (Mithans, Ivanuš Grmek, & Čagran, 2017), this finding is noteworthy. Schools seeking to strengthen student-teacher relationships for immigrant-background students should not only encourage student voice but also ensure that student input is taken seriously and translated into meaningful classroom or schoolwide action (Mager & Nowak, 2012).

Differences in significant predictors between the two countries underscore the importance of context-sensitive approaches. In Croatia, openness in classroom discussions significantly predicted positive student-teacher relationships, whereas this was not the case in Slovenia. Although open dialogue has been linked to increased civic engagement and tolerance (Maurissen, Barber & Claes, 2020), its effectiveness may depend on how inclusive and culturally responsive such discussions are. In more ethnically homogeneous settings, or in classrooms where cultural diversity is underacknowledged, immigrant-background students may feel excluded from these conversations or lack the confidence to participate fully (Schachner, Noack, Van De Vijver, & Eckstein, 2016). As noted by Banks (2024), civic education that does not integrate diverse cultural perspectives may unintentionally alienate students with immigrant backgrounds, limiting the relational benefits of such pedagogical strategies.

Interestingly, participation in civic activities at school was a significant predictor only in Slovenia, and it was negatively associated with perceptions of student-teacher relationships. While the association was small, its direction warrants attention. One possible explanation is that civic activities in Slovenia are still largely aimed at the majority population—emphasizing civic documents and the constitution (Južnič, 2014; Šimenc, 2012)—with less focus on marginalized groups. As suggested by Zhang (2018), such activities may inadvertently trigger identity dissonance among immigrant-background students, particularly if they feel pressure to conform to the majority. In this light, civic

education should be carefully designed to be inclusive, student-centered, and culturally responsive, consistent with J. A. Banks's (2011) conception of multicultural education.

From a practical perspective, these findings highlight the need for teachers and schools to intentionally promote inclusive forms of democratic education. Professional development in intercultural competence and inclusive pedagogy can help teachers better support diverse learners, particularly in navigating sensitive classroom discussions or civic learning activities (Romijn, Slot, & Leseman, 2021). By doing so, teachers can foster more positive student–teacher relationships with immigrant-background students through elements of democratic school and classroom culture. In line with a whole-school approach (Cavanagh, McDowell, Connor Bones, Taggart, & Mulhall, 2024), schools are encouraged to promote student voice, peer collaboration, and critical engagement across the curriculum—not only within civic education. Moreover, student–teacher relationships should be viewed as co-constructed by teachers and students through everyday classroom practices, shaped not only by individual behavior but also by a broader culture of participation, inclusion, and respect.

These results also point to several important limitations. First, the analysis relied on student self-report data, which may introduce bias relative to objective indicators of behavior. Second, the operationalization of democratic school and classroom culture was limited to constructs included in the ICCS 2022 framework, which, while robust and reliable, may not capture all relevant dimensions of the construct. Third, observed similarities and differences in predictors are specific to the national contexts of Slovenia and Croatia and may differ when using student-level ICCS data from other countries. Future research could build on this work by incorporating teacher perspectives and mixed-methods designs to probe the mechanisms underlying these statistical associations in greater depth.

6. CONCLUSION

Fostering positive student–teacher relationships for immigrant-background students depends not only on teacher behaviors in isolation but also on the democratic culture of classrooms and schools. Two strategies—supportive peer interactions and perceived influence on decision-making—emerge as reliable, actionable levers for strengthening student–teacher relationships among immigrant-background students in both Slovenia and Croatia. In contrast, open classroom discussions and civic participation appear context-dependent within the ILSA framework employed here and likely require culturally responsive implementation to resonate with immigrant-background students. As classrooms diversify, careful attention to the design and enactment of democratic practices is essential for building inclusive, supportive learning environments for all students.

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Chapter # 11

PRINTMAKING ART APPLICATIONS FOR CHILDREN WITH SPECIAL NEEDS

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ABSTRACT

In applications where art is used as a psychoeducational intervention method in schools with various techniques. This study aimed to determine the application levels of simple printmaking techniques applied by children with special needs during art activities and to guide special education teachers and families while performing these applications with children through the results of this study. The research was conducted with 40 children who were receiving education in a special education center in Nicosia, selected by the purposeful sampling method. The research method is qualitative research and has a case study design. The data were analyzed in 5 categories: simple printmaking, techniques that children can do without needing support, they need support for, what kind of support they need, their reactions to the drawing activity, and whether the application tells its story. As a result, it was determined that children can perform techniques that they apply with direct contacts, such as hand printing, without needing support, that they need support in techniques such as citrus printing, that they need more support such as modeling, that they participate in activities with pleasure, and that they use mostly emotional nonverbal expressions in telling their stories due to their language developmental disabilities.

Keywords: art education, developmental disability, printmaking, psychoeducational intervention.

1. INTRODUCTION

This chapter deals with children's art. Art methods that have survived for centuries, such as printing techniques, are activities that human children are interested in and benefit from throughout their developmental processes. Inclusive quality education is the most fundamental human right for all children. The first human rights treaty to explicitly refer to the concept of inclusive quality education is the Convention on the Rights of Persons with Disabilities, adopted by United Nations member states in 2006 (Corradi, Crippa, Drasute, Sgaramella, & Ferrari 2022). In this chapter, the printmaking technique, one of the educational art activities, is based on the rights-based education framework. Hand prints made on cave walls by early humans thousands of years ago can be considered archetypes of printmaking art. While printmaking is used as an original art form in Japan and China, in Europe it is mostly considered as a reproduction. The art of printmaking is directly related to technique and material. Technical developments and innovations in these areas affect printmaking in terms of both aesthetic and technical success (Grabowski and Fick, 2012). Printing is the process of creating works of art, usually by printing on paper. Printing involves the process of creating prints that have an element of originality, rather than being a photographic reproduction of an image. Except in the case of monotyping, this process is

capable of producing multiple copies of the same piece, and is called a print. Each print produced is considered an "original" work of art and is properly referred to as an "impression" rather than a "copy" (this meant a different print that copied the first print, common in early printmaking). Often the impressions vary considerably, whether intentionally or not. The images in most prints are created for this purpose, perhaps through preparatory work such as a drawing. A print that copies another work of art, especially a picture, is called a "production print". Prints are created by transferring ink from a matrix to a sheet of paper or other material, using various techniques (Ahuja, 2021). Art fields have been used as a means of treatment and healing since ancient times. Printmaking is an ancient art form, used for healing and education. In education, techniques like drawing, painting, and printmaking aid development and emotional regulation. Art activities are also included in the curriculum in education both to support development and as a psychoeducational intervention tool. In this context, one of the important points to be considered is that the materials and tools of the technique to be applied are suitable for the development of the target audience (Yazgin, 2010). Printmaking offers several advantages for children. In a sense, printmaking is a second-chance art. If the first print fails, reprints are made again and again, and the best is ultimately retained. Printmaking is an art form that promises surprises. Some students may not appreciate surprises, but others eagerly await the results to see what they will encounter. While it may be difficult to implement in large classes, it can be collaboratively worked on with interested students simultaneously. This also encourages children to engage with each other (Douglas & Jaquit, 2019). Art activities should be an integral part of absolute education as a psychoeducational intervention tool in schools (Rihter & Potočnik, 2022). The techniques frequently preferred in education are drawing with charcoal, pastel, watercolor, oil painting, acrylic painting, sculpture, marbling art, ceramic making, tile painting and printmaking techniques. Based on the knowledge that art activities in education are effective in supporting the development of the individual the main problem of this research is the application level of simple printmaking techniques applied by children with special needs who are studying in a private special education school during their art activities. This study investigates the application levels of simple printmaking techniques by children with special needs. It aims to guide special education teachers and families in using art as a psychoeducational intervention tool. To determine which simple printmaking techniques children with special needs can apply. To evaluate the level of support required for each technique. This research is important in different aspects as it concerns the best interests of the child in education. Education is for everyone. It is known that art activities in both art education and general education are effective in ensuring the balanced development of people in all aspects. Art activities are a mechanism that keeps intuitions and memories in the memory. It eliminates despair by keeping beautiful and pleasing things in mind. It helps to cope with difficulties. It acts as an emotional regulator. It serves to concretize the ideas that the child cannot verbalize or define. It expands the child's vocabulary and allows him to gain perspective (Botton & Armstrong, 2013). However, since the techniques and practices mentioned are not suitable for the development of children, there will be negative consequences such as failure, disappointment and loss of self-confidence, it is important to underline that the results of this research will provide guidance to parents and teachers.

When art materials are adapted to children's developmental levels, children's autonomy is encouraged, and physical modeling is provided when necessary, art can serve as an emotional and communication bridge with its developmental pedagogical effects.

1.1. Limitations

This study was conducted with children with special needs. During the applications conducted for the purpose of collecting data, the researcher, who was a printmaking expert, could not be directly involved in the process. Since working with people they do not know, who are a sensitive group, would have negative effects, the applications and information about the techniques were conveyed to the special education teachers by the printmaking expert. The applications were carried out by special education teachers. While this caused a limitation in one respect, the fact that they worked with their own teachers also had a positive effect. Another limitation was that during the period when the applications for the purpose of collecting data began, education was interrupted several times, albeit briefly, due to intense Covid-19 cases. Participant profile is limited to children with neurodevelopmental disorders: 24 children (incl. autism, ADHD, etc.), neurological disorders: 2 children, comorbid disorders: 11 children, genetic/special conditions: 1 child, speech/language disorders: 2 children.

2. MATERIALS AND METHODS

In accordance with the ethical procedure of the research, the ethics committee (Near East University) permission was obtained first. After obtaining the ethics committee permission, the school administration and a teacher were informed about the research procedure and the families were informed and their consents were obtained through the school administration. The research method is qualitative research and has a case study design. The data recording form developed by the researchers was used as the data collection tool in the research. The data were analyzed in 5 categories: simple printmaking techniques, techniques that children can do without needing support, techniques that they need support for, what kind of support they need, their reactions to the drawing activity, and whether the application tells its story.

2.1. Participants

The research was conducted with 40 children aged between 4-13 who were receiving education in a special education center in Nicosia, selected by the purposeful sampling method. A classification of the types and levels of special needs of individuals is grouped under four main headings: neurodevelopmental disorders, neurological disorders, comorbid disorders, and speech and language disorders. There is also a category of genetics and special conditions. The group of students with disabilities is diverse. The only thing they have in common is a disability that prevents them from taking advantage of the general education without specialized support. Although the age ranges of the children were wide, the children's ages were not taken as a criterion variable since the aim was to examine the participation and ability levels of simple printmaking techniques, not age categories.

2.2. Data Analysis

The order of techniques in the data record list is; from those that do not require formatting template material, from those that are easy to format templates to those that are difficult to format. The order is made in the form of techniques with low to high variety of tools and equipment, while the tools used are ranked from easy to difficult in terms of use. The grouping is made from simple to complex. In the order made by taking these criteria into consideration, simple printmaking techniques are in the following order:

Prints made without material

- Hand print
- Finger print

Prints made by tools

- Steel wool print
- Sponge print
- Paper print
- Fabric printing
- Brush print (1.5/ 2 inch.)
- Brush print (15/20 no.)
- Stencil print
- Rope print

Printing with natural materials

- Citrus print
- Onion press
- Apple print
- Leaf print
- Potato print

3. RESULTS

A classification of the types and levels of needs of the children included in the study is grouped under four main headings: neurodevelopmental disorders, neurological disorders, mixed (comorbid) disorders and language and speech disorders. There is also a genetic and special conditions category.

A total of 24 children are included in the neurodevelopmental disorders category. The most common condition in this group (n=12) is autism. Autism is followed by attention deficit and hyperactivity disorder (ADHD) with 3 children. Developmental delay, hearing impairment/disability, mental disability/disability and attachment disorder-attention deficit conditions are each present in 2 children. Learning disability was detected at a lower rate in 1 child. There are 2 children diagnosed with epilepsy in the neurological disorders category. There are 11 children in the mixed (comorbid) disorders category. The most common combination in this group is autism and ADHD (n=4). Other combinations included ADHD and epilepsy (n=1), ADHD and developmental delay (n=1 individual), epilepsy, ADHD and autism (n=1), epilepsy and developmental delay (n=1), epilepsy and Dravet syndrome (n=1), autism and attention deficit (n=1), and autism, Down syndrome and intellectual disability (n=1). There was only 1 child in the genetic and special conditions category, who was diagnosed with Down syndrome.

Finally, 2 children were diagnosed with delayed speech in the speech and language disorders category.

3.1. Findings regarding Prints Made without Tools, with Tools, with Natural Materials

Table 1.
Results of printing without using any tools.

		Techniques applied without needing support	Techniques applied with support	Techniques applied with excitement/eagerness
Application Success		n	n	n
Hand printing	Successful	35	14	30
	Unsuccessful	5	26	10
Finger print	Successful	34	14	28
	Unsuccessful	6	26	12

In general, children's autonomy levels and motivation levels were important determinants of success in hand and finger print art applications. The failure rate increased significantly in applications requiring support. On the other hand, the success rate was high in children who practiced with excitement or enthusiasm. This situation shows that children's emotional and physical support needs in technical applications should be evaluated correctly. Encouraging children's autonomy and increasing their motivation in hand print technique can be considered as an effective strategy in increasing the success rate. Three of the children among the participants refused to apply these techniques.

Sample quotes from teachers' statements in the category of techniques applied willingly (with excitement) by participating children:

C.6. *"A child who loves to draw... enjoyed all the activities very much. All the activities seemed different to .. wanted to smell it constantly because the smell of onion only attracted her attention in vegetable prints".*

C.13. *" We did simple printmaking techniques between classes. C.13 enjoyed doing these practices because C.13 perceived them as a reward. I think it was therapy for C.13".*

C.18 *"Successfully painted and practiced simple printmaking techniques with patience and enthusiasm. He wanted to paint and print again and again. He wanted to take his works home. He enjoyed them very much despite practicing them with physical support".*

C.36 *"..did all the simple printmaking techniques with great pleasure. C.36 applauded constantly to express his feelings".*

C19 *"Enjoyed touching the paint with his hands while practicing hand and finger printing techniques. He was very excited to see different colors forming in his hands. He wanted to mix the paints constantly".*

Table 2.
Findings regarding the printing done by children with special needs using tools.

		Techniques applied without needing support	Techniques applied with needing support	Techniques applied with excitement/eagerness
Application Success		n	n	n
Steel wool print	Successful	21	11	12
	Unsuccessful	19	29	28
Sponge print	Successful	31	11	21
	Unsuccessful	9	29	19
Paper print	Successful	24	12	13
	Unsuccessful	16	28	27
Fabric print	Successful	22	14	10
	Unsuccessful	18	26	30
Brush print (1.5/2 inch)	Successful	10	12	3
	Unsuccessful	30	28	37
Brush print (15/20 no.)	Successful	11	12	3
	Unsuccessful	29	28	37
Stencil	Successful	3	7	8
	Unsuccessful	37	33	32
Rope print	Successful	25	15	14
	Unsuccessful	15	25	26

Sponge printing, paper printing and rope printing were techniques that children practiced more successfully than other techniques, had higher levels of excitement and desire, and required less support.

Table 3.
Findings regarding the printing with natural materials.

		Techniques applied without support	Techniques applied needing support	Techniques applied with excitement/eagerness
Application Success		n	n	n
Citrus print	Successful	11	8	5
	Unsuccessful	29	32	35
Onion print	Successful	17	11	11
	Unsuccessful	23	29	29
Apple print	Successful	17	10	11
	Unsuccessful	23	30	29
Leaf print	Successful	23	15	15
	Unsuccessful	17	25	25
Potato print	Successful	28	15	20
	Unsuccessful	12	25	20

Figure 1.
Examples of children's prints.



Among the printing techniques where natural materials are used as tools, the techniques that children prefer the most and have successfully applied are leaf printing and potato printing techniques.

As a result, when the average durations of the activities on which children spend the most time among all printing techniques are examined, it is seen that the highest rates are hand, finger, potato and sponge prints, while the least time is spent on stencil, citrus and apple prints.

4. DISCUSSION

All fields that can be applied without being a professional in art can be used as psychoeducational intervention tools in schools. Art provides students with disabilities with a positive and empowering way to express their ideas. This non-traditional way of communicating allows students to express themselves in ways that often transcend their limitations. In this way, art serves as a vehicle for addressing inequalities (Schwartz & Pace, 2008). In art education programs Printmaking techniques can be used effectively with children with special needs. Techniques should be selected based on ease of application and emotional engagement. Here, it is important that the techniques are well known by teachers and are appropriate for the developmental levels of the children.

Art serves as a powerful tool for learning, expression, and healing. In this context, one of the important points to consider is that the materials and tools of the technique to be applied are suitable for the development of the children (Yazgin, 2010). In this study, 12 different printmaking techniques in three categories were presented for the use of children with special needs. Various studies in the literature indicate that the printmaking art can be an effective tool for art therapies in terms of helping with spontaneity and expression of emotions the themes of this multi-step process align with the three Rs of recovery: remediation, restoration, and reconnection, as well as its underlying precondition of hope. (Morton, 2019; Paddock, 2020). Corradi et al. (2022), report that the Covid-19 pandemic has forced schools to accelerate the digitalization process, further deepening existing educational inequalities and increasing the number of students affected by mental health problems worldwide. In response to these serious problems, the OECD calls for the identification of inclusive education strategies that address both learning and emotional issues. Specific applications of arts education enable these strategies to be effectively implemented. Corradi et al. (2022) demonstrate the benefits of arts education for children through their InCrea project, "Inclusive Creativity through Educational Artmaking," an innovative educational approach focused on universal design for learning principles and inclusive creativity through educational art production. In parallel with this study, children participated in the majority of the 12 different printmaking techniques with excitement, curiosity and desire, and expressed their pleasure and happiness by patiently painting, with gestures such as applauding. White (2002), outlined the historical, educational, and healing contexts of printmaking. As a result of this research, children's high level of participation and satisfaction in printmaking activities using both their hands and fingers and various tools and natural materials can guide teachers in making more place for printmaking art activities in the education programs of children with special needs. Engelmann, Kappel, and Kerry-Moran (2018) reported on how pre-service teachers can cultivate art for their future classrooms by using a two-stage method in an early childhood and special education program that transformed pre-service teachers' attitudes toward visual arts and art integration. The researchers reported that pre-service teachers who had no prior art education and were resistant to abstract painting began to enjoy it and appreciate the value of art for children's learning. They recognized visual art as a tool for supporting social development and children with special needs, understood the importance of process in children's art experiences, and considered ways to integrate art throughout the curriculum.

Mareza, Mumpuniarti, Suwarjo, Mustadi, and Dewi (2025) state that, based on the results of scientific research, inclusive, multidisciplinary, multisensory, simplified instructions and individualized educational strategies in art education are effective in the benefit and participation of children with disabilities. Researchers also point to weaknesses in education, particularly inadequate materials and teacher training. This highlights the need for arts education programs. Consistent with the results of this study, it is important to emphasize that teacher educators and teaching artists should include art in teacher education programs to prepare future teachers to integrate art into their future classrooms. Teaching students with disabilities is a requirement for all teachers, regardless of their subject-matter expertise (Mareza et.al., 2025). Since human society began, the arts have helped humans reconcile the eternal conflict between their instincts and the demands of society. Therefore, the arts are therapeutic in the broadest sense of the word. School should be a place that prioritizes the well-being of the child. Therefore, art serves as a qualified tool in education.

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Section 3

Social Psychology

Chapter # 12

CROSS-NATIONAL COMPARISON OF BEHAVIORAL IMMUNE SENSITIVITY IN JAPAN, MALAYSIA, AND THE PHILIPPINES*

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ABSTRACT

This study aimed to investigate the characteristics of the human behavioral immune sensitivity by comparing its attributes across three Asian countries: Japan, Malaysia, and the Philippines. A total of 1,055 university students completed paper-based questionnaires, including the Perceived Vulnerability to Disease Questionnaire (PVD-Q), the Death Anxiety Scale, and a self-assessment of current health status. Across all national groups, females scored significantly higher than males on the germ aversion subscale of the PVD-Q, which measures affective discomfort in contexts with heightened pathogen transmission risk. Furthermore, participants in tropical regions (Malaysia and the Philippines) exhibited significantly higher germ aversion scores compared to those in Japan, a country predominantly situated in a temperate climate zone. In contrast, no significant sex or regional differences were observed on the perceived infectability subscale of the PVD-Q, which assesses individuals' beliefs about their susceptibility to infectious diseases. Perceived infectability was strongly associated with current health status but only partially related to fear of death, whereas germ aversion was positively associated with fear of death but unrelated to health status. These patterns of association were generally consistent across the countries.

Keywords: behavioral immune system, disgust avoidance, death anxiety, subjective health, sex difference, geographic difference.

1. INTRODUCTION

Infectious disease has posed a significant threat to human reproductive fitness throughout evolutionary history (Schaller & Murray, 2010). While the activation of the physiological immune system constitutes an effective defense against infection, it is metabolically costly and provides only imperfect protection. Consequently, humans have evolved an additional psychological mechanism designed to mitigate pathogen exposure prior to actual infection. This prophylactic immune sensitivity, now commonly referred to as the behavioral immune system (BIS), detects cues to the presence of infectious pathogens in the immediate environment and triggers affective, cognitive, and behavioral responses designed to prevent contact with disease-causing agents (Schaller & Park, 2011).

BIS is a psychological adaptation acquired to cope with ancestral environments (Schaller & Murray, 2010), and it has been argued that, in modern contexts, it may at times engender maladaptive emotions and behaviors. For example, activation of the BIS can give rise to prejudice against outgroup individuals (e.g., immigrants) as potential pathogen carriers (Duncan & Schaller, 2009) or the overestimation of others' physical attractiveness as a signal of non-carrier status (White, Kenrick, & Neuberg, 2013). The COVID-19 pandemic further illustrates the maladaptive consequences of BIS activation: high stress among healthcare and essential workers has been associated with excessive alcohol and

drug use (McKay & Asmundson, 2020), while older adults at high risk for severe illness have experienced increased depressive symptoms (Joseph, O'Shea, Eastman, Finlay, & Kobayashi, 2022). These findings demonstrate that BIS processes continue to shape human emotions, cognition, and behavior even in our contemporary society.

A substantial body of literature has identified a range of factors associated with BIS. Among these, sex is perhaps the most extensively studied demographic variable. Numerous studies have consistently reported that females exhibit significantly higher disgust sensitivity than males (Curtis, Aunger, & Rabie, 2004; Haidt, McCauley, & Rozin, 1994; Prokop, Usak, & Fančovičová, 2010; Rozin, Haidt, McCauley, Dunlop, & Ashmore, 1999). Al-Shawaf, Lewis, & Buss (2018) proposed six evolutionary explanations for this heightened sensitivity in females: (a) reduced risk-taking due to females' critical role in gene propagation; (b) greater potential for females to transmit infections to offspring; (c) a more central role for females in shielding children from pathogens and in socializing disease-avoidant behavior; (d) ancestral responsibilities related to food cleaning and preparation; (e) lower male disgust sensitivity as a signal of immunological robustness conducive to short-term mating; and (f) elevated male thresholds for disgust in contexts involving blood, injury, and death due to selective pressures from hunting and warfare. These hypotheses, while not mutually exclusive, collectively suggest that humans—particularly females—have undergone adaptive responses to environments characterized by high pathogen threat.

Geographic context represents another critical factor. The disease prevalence hypothesis (Schaller & Duncan, 2007) posits that the salience of pathogen threat in one's environment amplifies BIS reactivity. Parasitic and infectious diseases, such as malaria and the Zika virus, are disproportionately concentrated in equatorial regions, thereby presenting elevated survival risks (van Lange, Rinderu, & Bushman, 2018). Supporting this hypothesis, Skolnick and Dzokoto (2013) found that individuals in Ghana—a country with a historically high prevalence of infectious disease—report greater sensitivity to disgust and contamination than those in the United States, where pathogen threats are comparatively lower. However, to date, few empirical studies have examined BIS-related differences across Asian countries with varying disease ecologies.

Beyond demographic and geographic determinants, individual-level characteristics also influence BIS functioning. One such determinant is physical health. According to the Health Belief Model (Becker, Drachman, & Kirscht, 1974), perceived vulnerability to illness functions as a distal factor that increases perceived threat, leading to more pronounced health-related behaviors (Schwarzer, 1994). For instance, individuals with hypochondriasis not only report poorer perceived health and greater physical impairment but also make more frequent use of healthcare services (Gureje, Üstün, & Simon, 1997). Similarly, patients with familial hypercholesterolemia modify their perceptions of vulnerability to heart disease in response to their illness experiences (Frich, Ose, Malterud, & Fugelli, 2006). These findings suggest that current health status may similarly modulate BIS sensitivity.

Geographic context is another critical factor. The disease prevalence hypothesis (Schaller & Duncan, 2007) posits that the salience of pathogen threat in one's environment amplifies BIS reactivity. Parasitic and infectious diseases, such as malaria and the Zika virus, are disproportionately concentrated in equatorial regions, thus posing elevated survival risks (van Lange et al., 2018). Supporting this hypothesis, Skolnick and Dzokoto (2013) found that individuals in Ghana—a country with a historically high prevalence of infectious disease—report greater sensitivity to disgust and contamination than those in the United States, where pathogen threats are comparatively lower. However, to date, few

empirical studies have examined BIS-related differences in populations across Asian countries with varying disease ecologies.

Emerging research further suggests that psychological variables constitute key contributors to BIS activation. Terror management theory (Greenberg, Pyszczynski, & Solomon, 1986; Solomon, Greenberg, & Pyszczynski, 1991) posits that humans' awareness of their mortality produces existential anxiety—fear of death—which can influence a broad range of attitudes and behaviors. Stimuli reminding us of our animalistic nature—such as dead bodies, deformities (e.g., burn scars, birthmarks), poor hygiene (e.g., body odor), and sexual activity—frequently elicit the emotion of disgust (Rozin, Haidt, & McCauley, 2008). Goldenberg et al. (2001) demonstrated experimentally that mortality salience intensifies disgust responses to such stimuli, including animals (e.g., cockroaches), body products (e.g., unflushed feces), and sexual scenarios (e.g., age-discrepant relationships). Given the close association between these disgust-eliciting cues and pathogen threat, fear of death may constitute a psychological antecedent of BIS activation.

2. OBJECTIVES

The present study conducted a cross-national comparison of BIS-related characteristics using samples from Japan, Malaysia, and the Philippines. The first objective was to investigate differences in BIS activity, including demographic (sex) and geographic (cross-national) factors. Based on prior research, we hypothesized that females would exhibit higher BIS-related scores than males. Similarly, we predicted that individuals residing in the tropical regions of Malaysia and the Philippines—where the prevalence of infectious diseases is relatively high—would demonstrate more pronounced BIS activation compared to those residing in Japan, which is primarily located in a temperate climate zone. The second objective was to examine physical and psychological correlates of BIS activity, specifically current health status and fear of death. In line with theoretical expectations, we hypothesized that individuals in poorer health and those reporting stronger fear of death would exhibit heightened BIS sensitivity.

3. METHODS

3.1. Participants

Data were collected from university students living in three countries: Japan (Waseda University), Malaysia (Universiti Tunku Abdul Rahman), and the Philippines (De La Salle University). A total of 1,142 participants initially completed a set of questionnaires assessing BIS responses, fear of death, and current health status. Participants also provided demographic information, including sex, age, and nationality. To ensure sample consistency, individuals who were not undergraduate students (e.g., graduate students) and those whose nationality did not correspond to the country in which the survey was conducted (e.g., international students) were excluded from the final analysis. As a result, the final dataset comprised 1,055 valid undergraduate respondents: 410 from Japan, 346 from Malaysia, and 299 from the Philippines. Of these, 311 males and 744 females (29.5% male) participated, with ages ranging from 17 to 28 years ($M = 19.98$, $SD = 1.75$). All potential participants were first informed of the purpose of the study and that by completing the questionnaire, they would be considered to have given their consent to participate. The approval for the study protocol was granted by the Ethics Committee of Waseda University on behalf of the participating institutions (Approval No.:2015-104).

3.2. Materials

Participants from Japan completed the Japanese version of the study, while those from Malaysia and the Philippines completed the English version. All questionnaires employed in the study have been previously validated and utilized in multiple studies in both languages. The raw data supporting the conclusions of this manuscript will be made available by the author to any qualified researcher upon reasonable request and without undue restriction.

3.2.1. Behavioral Immune System (BIS)

We employed the Perceived Vulnerability to Disease Questionnaire (PVD-Q; Duncan, Schaller, & Park, 2009) to assess individual differences in BIS. For Japanese participants, we utilized the validated Japanese version of the scale (Fukukawa, Oda, Usami, & Kawahito, 2014), which is a translation of the original English instrument. The PVD-Q comprises two primary subscales. One is the Perceived Infectability subscale, which assesses beliefs regarding one's susceptibility to infectious diseases. It consists of seven items, including statements such as "I am more likely than the people around me to catch an infectious disease" and "My immune system protects me from most illnesses that other people get" (reverse-scored). Another is the Germ Aversion subscale, which measures emotional discomfort in situations perceived to involve a high risk of pathogen transmission. This subscale includes eight items, such as "It really bothers me when people sneeze without covering their mouths" and "I am comfortable sharing a water bottle with a friend" (reverse-scored). Participants rated the extent to which each item applied to them on a 7-point Likert scale (1 = strongly disagree, 7 = strongly agree). Reverse-scored items were recoded accordingly, and subscale scores were calculated by averaging the item responses, resulting in possible subscale scores ranging from 1 to 7, with higher scores indicating greater perceived vulnerability to infectious disease. Composite reliability estimates (Raykov, 1997) in the present study were 0.88, 0.67, and 0.87 for Perceived Infectability and 0.70, 0.43, and 0.69 for Germ Aversion for the Japanese, Malaysian, and Filipino samples, respectively. Except for Germ Aversion in the Malaysian sample, the internal consistency of these subscales was generally within an acceptable range.

3.2.2. Current Health Status

Participants' current health status was evaluated using a single-item self-assessment questionnaire. "In general, how would you rate your current health status?" Subjective health assessments have garnered substantial attention in population health research (Joe & Subramanian, 2017) and have been employed in cross-cultural studies as well (e.g., Jürges, 2007). In the present study, responses were recorded on a 5-point Likert scale ranging from 1 (very good) to 5 (very bad). For analytical purposes, scores were reverse scored so that higher values reflected better self-rated health.

3.2.3. Fear of Death

The Death Anxiety Scale (Templer, 1970) was employed to assess individual differences in fear of death. For Japanese participants, the validated Japanese version of the scale (Okamura, 1983), a translation of the original English instrument, was used. The scale comprises 15 items reflecting a broad spectrum of experience-related to dying, the finality of death, and death-related phenomena such as corpses and burial. Examples of items include: "The sight of a dead body is horrifying to me" (reverse-scored) and "It doesn't make me nervous when people talk about death." Participants responded to each statement with a dichotomous "true" or "false." Responses marked "true" were scored as 1, while

“false” responses were scored as 2. Following reverse scoring of applicable items, item scores were summed, yielding a total score range from 15 to 30, with higher scores indicating greater fear of death. The internal consistency (composite reliability) of the scale in the present sample was 0.71, 0.62, and 0.72 for the Japanese, Malaysian, and Filipino samples, respectively.

3.2.4. Statistical Analysis

Bayesian analyses were employed to test all hypotheses presented in this study. First, to examine demographic and geographic differences in PVD-Q subscale scores (i.e., perceived infectability and germ aversion), we conducted Bayesian versions of classical two-way analyses of variance (ANOVAs). In these models, scores on each PVD-Q subscale served as dependent variables, while sex and country functioned as independent variables. Second, to investigate the relationships between PVD-Q subscale scores and participants’ physical and psychological characteristics, Bayesian regression analyses were performed separately for each country’s sample. Specifically, individual regressions of current health status and fear of death were computed against scores on each PVD-Q subscale. All Bayesian analyses were conducted using Stan (Stan Development Team, 2017) via the R interface (R Core Team, 2018). To ensure convergence to normal posterior distributions, we employed Markov Chain Monte Carlo (MCMC) simulation with a Gibbs sampler, running four chains with 1,000 burn-in iterations, 20,000 total iterations, and thinning every third iteration. Prior distributions were specified as follows: the population mean parameter (μ) was assigned a normal distribution with mean 0 and standard deviation 10, and the population standard deviation parameter (σ) was assigned a wide half-Cauchy distribution with scale 5.

4. RESULTS

4.1. Descriptive Statistics

A chi-squared test indicated that the sex ratio did not differ among the three countries. A one-way ANOVA revealed statistically significant age differences among the countries, $F(2, 1052) = 813.9, p < .001, \eta^2 = .51$. The mean ages were 21.73 (SD = 1.56) for Malaysia, 19.37 (SD = 0.98) for Japan, and 18.81 (SD = 1.10) for the Philippines. Other one-way ANOVAs revealed no significant differences regarding current health status and fear of death. Overall, these results suggest minimal differences among the national groups in these variables.

4.2. Demographic and Geographic Differences of the BIS

The result of the Bayesian analyses indicated no violations of normality or homogeneity of variance in scores on the two PVD subscales—perceived infectability and germ aversion—across the six demographic and geographic groups (2 sexes $\times$ 3 countries). The effective sample sizes for each parameter (ranging from 15,953 to 25,224 for perceived infectability and from 16,499 to 25,336 for germ aversion) were sufficiently large, and all $\hat{R}$ values were below 1.1, indicating satisfactory convergence and adequate sampling.

The left half of Table 1 presents the expected a posteriori (EAP) estimates and corresponding posterior statistics for perceived infectability scores across the three countries. The estimated Markov Chain Monte Carlo (MCMC) p-values indicated no significant main effects of sex or country, nor any interaction between these variables ($p > .10$), suggesting no sex or regional differences in this PVD-Q subscale.

The right half of the table shows the analogous statistics for germ aversion. In contrast to perceived infectability, the MCMC p-value estimation revealed a significant main effect of sex ($p < .001$). The estimated difference in EAP scores between females and males was 0.32, with a 95% highest density interval (HDI) of [0.21, 0.43], excluding zero. This indicates that germ aversion was significantly higher in females than males, irrespective of country. A marginally significant main effect of country was also observed ($p < .06$). Post hoc comparisons revealed estimated EAP differences of 0.18 (95% HDI [0.04, 0.30]) between Malaysian and Japanese participants, and 0.30 (95% HDI [0.17, 0.44]) between Filipino and Japanese participants; both intervals excluded zero. Conversely, the estimated difference between Filipino and Malaysian participants was 0.13, with a 95% HDI including zero ([−0.01, 0.27]), indicating no significant difference between these two groups. These findings suggest stronger germ aversion among Malaysian and Filipino participants compared to Japanese participants. The interaction between sex and country was nonsignificant, indicating that the effects of sex and country on germ aversion were independent.

Table 1.
Posterior statistics on perceived infectability (left half) and germ aversion (right half) in each country.

Country	Perceived Infectability				Germ Aversion			
	Male		Female		Male		Female	
	EAP (SE)	95% HDI	EAP (SE)	95% HDI	EAP (SE)	95% HDI	EAP (SE)	95% HDI
Japan	3.80 (0.10)	[3.61, 4.00]	3.77 (0.06)	[3.65, 3.89]	3.74 (0.08)	[3.59, 3.89]	4.05 (0.05)	[3.96, 4.14]
Malaysia	3.72 (0.10)	[3.52, 3.92]	3.83 (0.07)	[3.70, 3.97]	3.96 (0.08)	[3.81, 4.12]	4.17 (0.05)	[4.07, 4.28]
Philippines	3.49 (0.11)	[3.28, 3.71]	3.62 (0.07)	[3.47, 3.76]	3.97 (0.09)	[3.80, 4.15]	4.42 (0.06)	[4.30, 4.53]

EAP, Expected A Posteriori; SE, Standard Error; HPD, Highest Density Interval.

4.3. Physical and Psychological Correlates of the BIS

As a result of the Bayesian analyses, the effective sample sizes for each parameter (ranging from 23,677 to 25,336 for perceived infectability and from 23,775 to 25,336 for germ aversion) were sufficiently large. Additionally, the potential scale reduction factors ($\hat{R}$) were all below 1.1, indicating adequate convergence and confirming that the sample size was sufficient.

Figure 1 depicts the regression analyses of current health status and fear of death on perceived infectability. For current health status (A), the estimated regression coefficients (β) were −0.37 (95% highest density interval [HDI]: −0.47 to −0.27), −0.19 (95% HDI: −0.32 to −0.06), and −0.43 (95% HDI: −0.58 to −0.28) for the Japanese, Malaysian, and Filipino samples, respectively. None of these 95% HDIs included zero, indicating a consistent negative association across countries whereby better health was related to lower perceived infectability. In contrast, the estimated coefficients for the effect of fear of death on perceived infectability (B) were 0.02 (95% HDI: −0.01 to 0.06), 0.01 (95% HDI: −0.03 to 0.05), and 0.06 (95% HDI: 0.02 to 0.10) for the Japanese, Malaysian, and Filipino samples, respectively. The 95% HDIs for the Japanese and Malaysian samples included zero, indicating no significant relationship, whereas for the Filipino sample, the HDI excluded zero, suggesting a positive association between fear of death and perceived infectability.

Figure 1.
Regression lines showing the associations of perceived infectability with (A) current health status and (B) fear of death in each of the three countries.

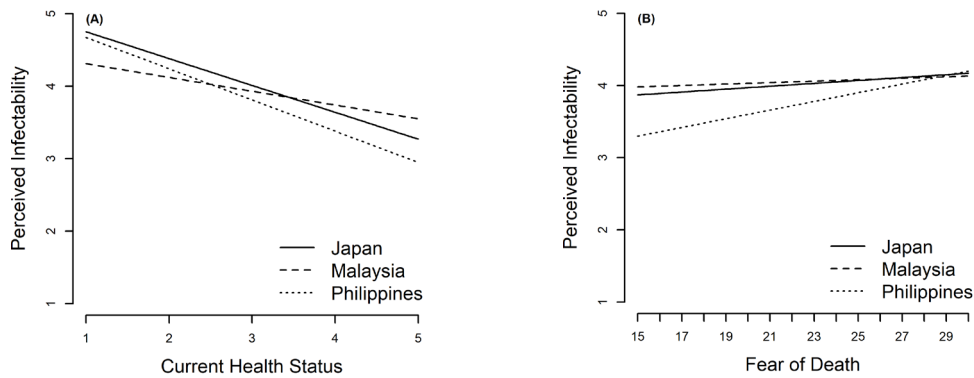
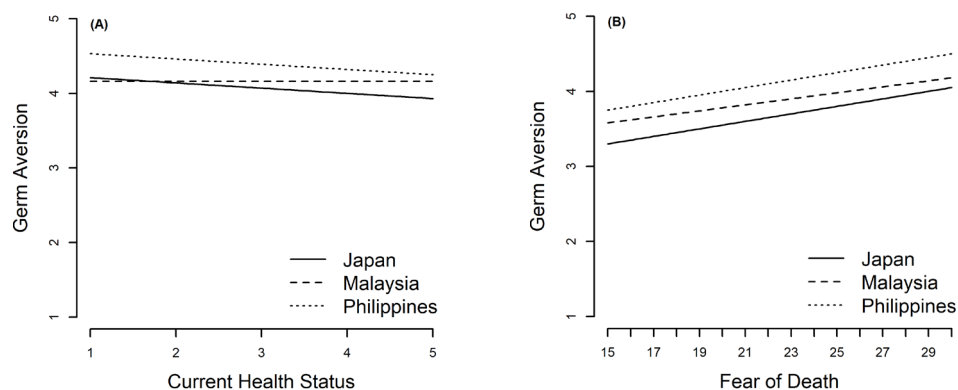


Figure 2 illustrates the regressions of current health status and fear of death on germ aversion. Regarding current health status (A), the estimated coefficients (β) were -0.07 (95% HDI: -0.16 to 0.01), 0.00 (95% HDI: -0.11 to 0.11), and -0.07 (95% HDI: -0.19 to 0.05) for the Japanese, Malaysian, and Filipino samples, respectively. All 95% HDIs included zero, indicating little to no relationship between health status and germ aversion across the samples. Conversely, the estimated coefficients for fear of death on germ aversion (B) were 0.05 (95% HDI: 0.02 to 0.08), 0.04 (95% HDI: 0.01 to 0.07), and 0.05 (95% HDI: 0.02 to 0.08) for the Japanese, Malaysian, and Filipino samples, respectively. None of these intervals included zero, indicating a significant positive association between fear of death and germ aversion in all three countries.

Figure 2.
Regression lines showing the associations of germ aversion with (A) current health status and (B) fear of death in each of the three countries.



5. DISCUSSION

The primary aim of this study was to examine demographic (sex) and geographic (cross-national) differences in behavioral immune system, as assessed by the Perceived Vulnerability to Disease Questionnaire (PVD-Q). Consistent with our hypotheses and prior research (Haidt, McCauley, & Rozin, 1994; Rozin et al., 1999; Prokop, 2010; Curtis et al., 2004), females scored significantly higher than males on the germ aversion subscale across all countries examined. This finding aligns with the widely observed trend that females generally exhibit greater disgust sensitivity than males (Curtis, de Barra, & Aunger, 2011), suggesting a potentially universal pattern. Oaten, Stevenson, and Case (2009) provide a plausible evolutionary explanation for this sex difference, proposing that (1) females face greater reproductive costs if they select an unhealthy mate who subsequently dies, potentially leaving them solely responsible for offspring care, and (2) as primary caregivers, females are under selective pressure to protect their offspring from infectious diseases. Given this heightened risk, it is unsurprising that females demonstrate elevated germ aversion. In contrast, no significant sex differences were observed for perceived infectability. While germ aversion pertains to emotional and behavioral avoidance of pathogen cues, perceived infectability reflects a cognitive appraisal of one's susceptibility to disease (Lieberman & Patrick, 2014). Notably, females generally mount stronger innate, humoral, and cellular immune responses to viral infections compared to males (Ruggieri, Malorni, & Ricciardi, 2016). This physiological advantage may contribute to females' comparatively lower perceived infectability, despite their heightened behavioral avoidance.

Consistent with our predictions, participants in Southeast Asian countries (Malaysia and the Philippines) scored higher in germ aversion than their Japanese counterparts. This finding supports the disease prevalence hypothesis (Schaller & Duncan, 2007), which posits that in regions where the threat of infectious disease is more salient, reactivity of BIS tends to be heightened. Although Japan benefits from a well-developed healthcare infrastructure, Southeast Asia is recognized as a global hotspot for the emergence of novel infectious diseases. Its tropical climate, socioeconomic factors, and abundant domestic animal reservoirs facilitate the persistence and transmission of a wide variety of pathogens (Cao, Zhou, & Kimura, 2017; Paris & White, 2017). In a cross-national study spanning 71 geopolitical regions, Schaller and Murray (2008) reported that populations from historically pathogen-rich environments tend to exhibit more restricted sexual behaviors and lower average levels of personality traits such as extraversion and openness. However, Asian countries were not represented in their analysis. To our knowledge, the present study is the first to examine geographic differences in attitudes and behaviors related to pathogen threat within this region. As with sex differences, no significant cross-national differences were observed in perceived infectability among the three countries. This aligns with prior findings by Skolnick and Dzokoto (2013), who reported that although individuals in Ghana exhibited higher germ aversion compared to those in the USA, no significant differences emerged in perceived infectability. These authors argued that perceived infectability reflects beliefs about one's own health status rather than disgust or contamination sensitivity, which may account for the absence of cross-national variation in this subscale.

The second aim of our study was to examine the relationships between physical and psychological correlates (current health status and fear of death) and BIS. We hypothesized that poorer health status and stronger fear of death would be associated with higher BIS scores. However, the results revealed a somewhat complex pattern. Germ aversion was positively associated with fear of death but showed no significant relationship with health status. Conversely, perceived infectability was positively associated with poorer health, but

not with fear of death—except in the Filipino sample. The reason why a significant association between perceived infectability and fear of death emerged only in the Filipino group remains unclear. According to terror management theory, fear of death is closely related to the cultural worldviews of the region in which people live, particularly religion (Solomon et al., 1991). Thus, to correctly interpret the results of the present study regarding the relationship between perceived infectability and fear of death, it may be necessary to examine differences between Christian views of death in the Philippines and those in Japan (Buddhism) and Malaysia (Islam). Although this observation warrants further empirical validation, overall, a clear inverse pattern emerged in the associations of health status and fear of death with the two PVD-Q subscales. Duncan et al. (2009) suggest that germ aversion reflects responses grounded in intuitive appraisals of pathogen transmission risk, whereas perceived infectability reflects responses informed by more deliberative appraisals. Supporting this distinction, germ aversion has been found to correlate more strongly with implicit negative associations toward individuals exhibiting physical abnormalities (Park, Faulkner, & Schaller, 2003), whereas perceived infectability correlates more strongly with implicit negative associations toward individuals perceived as immuno-compromised, such as the elderly (Duncan & Schaller, 2009). These differing cognitive mechanisms underlying the two PVD-Q subscales may have contributed to the asymmetric pattern of findings observed in the present study. Nevertheless, the dual nature of pathogen-avoidance cognitions remains incompletely understood, highlighting the need for further empirical research to substantiate and refine this theoretical framework.

6. FUTURE RESEARCH DIRECTIONS

In this study, a single-item measure of participants' current health status and a measure of fear of death were used as indicators of the psychophysiological correlates of BIS. However, caution is warranted regarding the appropriateness of selecting these measures. Future research could employ more comprehensive instruments, such as the SF-36, to assess the relationship between BIS and quality of life in a more detailed and accurate manner.

Second, future research should investigate the interplay between the physiological and behavioral immune systems. While the former maintains bodily health by preventing viral invasion, the latter mitigates viral impact via disgust. Importantly, disgust - a psychological manifestation of the behavioral immune system - affects salivary components and heart rate differently from fear (Gilchrist, Vranceanu, Béland, & Ditto, 2016; Stevenson, Hodgson, Oaten, Barouei, & Case, 2011). This finding highlights the need to examine these mind-body correlations from a behavioral immune perspective (Ackerman, Hill, & Murray, 2018).

Finally, this study examined differences in BIS traits among university students. A series of studies by Schaller and colleagues suggests that adolescents' heightened BIS sensitivity can foster discrimination and prejudice toward outgroups, including the elderly, individuals with disabilities, obese persons, and foreigners (Duncan & Schaller, 2009; Faulkner, Schaller, Park, & Duncan, 2004; Park et al., 2003; Park, Schaller, & Crandall, 2007). Although such aggressive tendencies in adolescents may biologically function as adaptive strategies to overcome competition during the reproductive period, they are more likely to be perceived as antisocial intolerance in contemporary society. Future research on BIS targeting adolescents should yield insights that are crucial for professionals responsible for supporting adolescents across healthcare, education, and industry.

7. CONCLUSION

This paper identifies theoretically grounded patterns of association between BIS and demographic, geographic, physical, and psychological factors. The results suggest that perceived infectability is associated with individuals' current health status, as well as their history of infectious diseases. In contrast, germ aversion appears to be linked to sex-specific attitudes operating at a largely unconscious level, as well as to the climatic conditions of the individuals' residing region. Thus, it can be argued that perceived infectability reflects proximate health-related beliefs or conditions, whereas germ aversion represents ultimate evolutionary adaptations internalized in the mind—both serving as distinct proactive defenses against disease-causing pathogens. Further cross-national research is necessary to replicate these findings and to examine their broader implications.

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*References to sex in this study are standardized as male/female rather than men/women, regardless of the terminology used in the cited literature.

Chapter # 13

THE ROLE OF MATERNAL AND PATERNAL AUTONOMY SUPPORT IN YOUNG ADOLESCENT ALCOHOL CONSUMPTION

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ABSTRACT

Self-esteem (SE), descriptive normative beliefs (DNB), and alcohol availability (AA) have been identified as salient gender-specific risk factors for alcohol use (AU) among young adolescents. However, empirical research examining dyadic associations between maternal and paternal autonomy support and adolescent AU, both directly and indirectly via these risk factors, remains limited. The present study therefore investigated the relationships among perceived parental autonomy support, SE, AA, DNB, and lifetime AU using parallel mediation analyses in a sample of 1,125 adolescents (M age = 12.99, SD = 0.77; 50.1% girls). Among boys, maternal autonomy support was associated with higher SE but not with AU, whereas paternal autonomy support was indirectly associated with a lower likelihood of AU through higher SE and less favorable DNB regarding peer drinking. Among girls, both maternal and paternal autonomy support were indirectly associated with a lower likelihood of AU. Specifically, maternal autonomy support was linked to higher SE and lower AA, which were in turn related to reduced odds of AU. Similarly, paternal autonomy support was associated with lower AA and less favorable DNB, both of which were linked to a decreased likelihood of AU. These findings underscore the importance of parenting and perceived social context in adolescent alcohol-related behavior.

Keywords: parental autonomy support, self-esteem, alcohol availability, descriptive normative beliefs, lifetime alcohol consumption, adolescents.

1. INTRODUCTION

Parental autonomy support has consistently been linked to a range of positive outcomes, including increased intrinsic motivation, enhanced interest, reduced pressure and tension, greater creativity, improved cognitive flexibility, deeper conceptual understanding, more positive emotional experiences, higher self-esteem, increased trust, greater persistence in behavior change, and improved physical and psychological well-being compared to controlling approaches (Deci & Ryan, 1987). An autonomy orientation reflects an individual's ability to initiate and regulate behavior based on personal goals and interests, emphasizing a sense of volition rather than responding to external pressures or constraints (Deci & Ryan, 1985).

Research from the 1970s and 1980s indicated that boys generally received more parental autonomy support, whereas studies from the 1990s showed a slight shift toward greater support for girls (Endendijk, Groeneveld, Bakermans-Kranenburg, & Mesman, 2016). As these authors noted, although gender stereotypes may influence some families, a systematic review suggests minimal overall differences in the upbringing of boys and girls. Another review suggested that differences in parenting based on gender may be driven

more by societal stereotypes than by actual behavioral differences in children. While many parents aim to raise their children in a gender-neutral manner, research on how parenting influences gender role development remains limited, despite its importance for counseling and intervention practices (Morawska, 2020). Morawska's literature review suggests that parental responses often vary according to the child's gender, potentially shaping developmental outcomes in domains such as emotional expression, pain responsiveness, compliance, toy play, and aggression.

Research has highlighted the vital role of parental autonomy support in children's mental health (Ma, Ma, & Wang, 2022). The authors examined the relationship between parental autonomy support and adolescents' mental health, including life satisfaction and emotional symptoms, while also exploring the mediating role of self-esteem. Their findings indicated that parental autonomy support was positively linked to life satisfaction and negatively linked to emotional symptoms, with self-esteem partially mediating both associations. The child's self-esteem is the key mechanism driving the impact of parenting strategies (Yang, Schaninger, & Laroche, 2013). Self-esteem is crucial for understanding how individuals perceive, value, and evaluate themselves, providing insight into their behavior (Sarkova et al., 2006). During adolescence, teens may distance themselves from family to test their independence while relying on peers for self-definition and self-esteem. Despite craving independence, they also seek nurture and friendship, grappling with self-doubt, belonging, and self-image (Plummer, 2014).

Autonomy support, together with parental monitoring and warmth are essential parenting dimensions that significantly impact adolescent health behaviors, although the mechanisms through which they exert influence may vary (Kwon & Wickrama, 2014). Children whose parents grant them autonomy may have greater control over their own behavior due to being listened to and trusted; however, this supportive dynamic may also make them more open to parental influence (Lenne et al., 2019). Alcohol consumption is one of the most common health-related behaviors during adolescence. Delayed alcohol use was linked to parental modeling, monitoring, communication, and restricted access. Lower drinking was associated with similar factors, including disapproval and support (Ryan, Jorm, & Lubman, 2010). The findings suggest that adopting stricter alcohol-specific parenting practices, such as setting more rules about alcohol use and limiting its availability at home, may help protect children from alcohol consumption (Van den Eijnden, R., Van De Mheen, D., Vet, R., & Vermulst, 2011).

However, previous studies suggest that the link between parental autonomy support and alcohol use remains unclear, with inconsistent findings potentially due to differences in samples and measurement approaches (Wolff & Crockett, 2011). Additionally, the authors suggest a reciprocal relationship between autonomy granting and risk behavior, adolescents who avoid risks may receive more autonomy, while others use their autonomy to engage in risky behaviors. If these effects counterbalance each other, the overall association between autonomy granting and risk behavior may weaken.

Previous research by Sicilia, Águila, Posse, and Alcaraz-Ibáñez (2020) indicated that social factors that promote a sense of autonomy, where individuals perceive little or no pressure regarding their intentions or behaviors, can enhance motivation to engage in health-related activities. In contrast, social influences characterized by pressure, such as subjective or descriptive norms, may discourage future engagement in such behaviors. Chatzisarantis, Hagger, and Smith (2007) identified a positive association between descriptive norms, defined as individuals' perceptions of the prevalent behaviors enacted by the majority within their social group (Lapinski & Rimal, 2005), perceived social support, and perceived autonomy support. Considering the influence of various social factors from

different sources may provide deeper insights into how social contexts shape health-related intentions and behaviors (Sicilia et al., 2020). Although understanding the processes and predictors of adolescent substance use and risk behaviors is essential, existing research has largely emphasized individual-level factors over family dynamics, and mothers over fathers (Adamsons & Russell, 2023). It was found, that the significance of family structure, parent-child relationships, and role behaviors differs depending on the gender composition of the dyads and the specific outcome variables under study. The findings highlight that these associations are conditional and emphasize the importance of examining both the generalizability and the specificity of results across different outcomes and distinct groups of individuals (Vanassche, Sodermans, Matthijs, & Swicegood, 2014).

The design of this study was informed by two main considerations: (i) the need to better understand parenting-related factors that contribute to delaying adolescents' initiation of alcohol consumption, given its high prevalence. Data from ESPAD countries indicate that 73% of adolescents report lifetime alcohol consumption, with 33% initiating use at age 13 or younger; prevalence rates are slightly higher among girls (74%) than boys (72%) (ESPAD Group, 2025). (ii) the research-based need to investigate the gender-specific association between parental autonomy support and lifetime alcohol consumption. This study examines the association between perceived autonomy support from fathers and mothers and lifetime alcohol consumption among boys and girls, using mediation analyses. It is hypothesized that self-esteem, descriptive normative beliefs, and perceived alcohol availability will mediate the relationship between parental autonomy support and adolescents' lifetime alcohol consumption.

2. MEASURES

2.1. Sample and Procedure

The research sample consisted of 1,125 young adolescents (mean age = 12.99 years, SD = 0.77), with 50.1% being girls. The data was gathered using paper-and-pen questionnaires from seventh-grade adolescents attending primary schools in Slovakia during September and October 2017. Prior to data collection, informed consent was obtained from all participants. Twelve primary schools across various regions in Slovakia participated, aiming to represent schools from diverse areas and towns of varying sizes. At each school, all seventh-grade pupils took part in the study. The questionnaires were completed during two class periods in the presence of a trained research team member, with teachers absent to ensure confidentiality. The study received ethical approval from the university's ethics committee.

2.2. Measures

The Autonomy Support subscale of the Perceptions of Parents Scale (Grolnick, Ryan, & Deci, 1991) measured the extent of autonomy support provided by mothers (7 items) and fathers (7 items) as perceived by young adolescents. Participants completed the scale separately for each parent using a 5-point Likert scale (1 = strongly disagree to 5 = strongly agree). The Autonomy Support subscale demonstrated Cronbach's alphas of 0.64 for mothers and 0.70 for fathers.

Self-esteem was measured using the Rosenberg Self-Esteem Scale (RSE) (Rosenberg, 1965). The scale consists of 10 items that assess respondents' perceptions of themselves, such as "At times I think I am no good at all," "I feel that I am a person of value, at least on an equal plane with others," and "I take a positive attitude towards myself." The scale

includes 5 positive and 5 negative statements, each rated on a 4-point Likert scale (1 = strongly agree to 4 = strongly disagree). The total self-esteem score ranges from 10 to 40, with higher scores indicating greater self-esteem. Cronbach's alpha for RSE total score was 0.73.

Lifetime alcohol consumption. A simple question was used: "Have you ever consumed alcohol, even just one sip? (any beverage containing alcohol)". For the purposes of statistical analysis, the response scale was dichotomized into: 0 = No (No, never), 1 = Yes (I've tried it, I've consumed alcohol multiple times, I drink alcohol regularly, at least once a month, I drink alcohol regularly, at least once a week).

Descriptive normative beliefs were assessed using one item: "According to your estimation, how many of the pupils at your school use alcohol?" (Elek, Miller-Day, & Hecht, 2006). The item was scored on a 4-point scale ranging from 1 = almost none to 4 = most.

Perceived alcohol availability was assessed by asking respondents to rate its accessibility using the question: "How difficult do you think it would be for you to get alcohol if you wanted to?" Responses were recorded on a five-point scale: 1 = Impossible, 2 = Very difficult, 3 = Fairly difficult, 4 = Fairly easy, 5 = Very easy.

2.3. Statistical Analyses

The chi-square test and Mann-Whitney U test were used to analyse the data. Mediation models were examined using the PROCESS macro Model 4 for SPSS (Hayes, 2017), also performed separately for boys and girls. The bias-corrected 95% confidence interval (CI) was calculated with 5,000 bootstrap samples. A mediating effect was considered significant if the value zero was not included in the 95% CI. Statistical significance was defined as a two-tailed value of $p < .05$. All analyses were performed using SPSS 25.0.

3. RESULTS

A chi-square test for independence indicated a significant association between gender and lifetime alcohol consumption, $\chi^2 (1, n = 1125) = 9.82, p = 0.002$. Specifically, 63.3% of boys and 54.1% of girls reported alcohol consumption.

A Mann-Whitney U test revealed significant gender differences in fathers' autonomy support, self-esteem, descriptive normative beliefs, and perceived alcohol availability, all with small effect sizes (Table 1). Compared to girls, boys reported significantly lower levels of autonomy support from their fathers and descriptive normative beliefs, but higher levels of self-esteem and perceived alcohol availability.

A Mann-Whitney U test was conducted separately for boys and girls to determine whether those who reported no lifetime alcohol consumption differed from those who reported lifetime alcohol consumption in terms of maternal autonomy support and paternal autonomy support. The results of the U test revealed: (i) a significant difference in maternal autonomy support levels among girls who reported no lifetime alcohol consumption ($Md = 4.00, n = 252$) and those who reported lifetime alcohol consumption ($Md = 3.86, n = 293$), $U = 30,986.50, z = -3.25, p = 0.001, r = 0.14$. (ii) a significant difference in paternal autonomy support levels among girls who reported no lifetime alcohol consumption ($Md = 3.86, n = 188$) and those who reported lifetime alcohol consumption ($Md = 3.71, n = 238$), $U = 17,910.00, z = -3.55, p < 0.001, r = 0.17$.

Girls who reported no lifetime alcohol consumption received more autonomy support from both mothers and fathers, all with small effect sizes. In contrast, the results of the *U* test revealed no significant differences in maternal autonomy support and paternal autonomy support between boys who reported no lifetime alcohol consumption and those who reported lifetime alcohol consumption.

3.1. Mediation Analyses

The parallel mediation analyses conducted separately for boys and girls examined the associations between maternal autonomy support and paternal autonomy support (as independent variables), self-esteem, alcohol availability, and descriptive normative beliefs (as mediators), and alcohol consumption (as the dependent variable).

Table 1.
Results of Mann-Whitney U tests by gender of explored variables.

				Boys			Girls						
	M	SD	Median	M	SD	Median	M	SD	Median	<i>U-test</i>	<i>z</i>	<i>p</i>	<i>r</i>
MAS	3.86	0.59	3.86	3.83	0.58	3.86	3.88	0.58	4.00	153120.0	1.66	ns	
PAS	3.71	0.67	3.71	3.66	0.70	3.71	3.77	0.64	3.86	103951.5	2.41	0.016	0.08
SE	2.69	0.41	2.70	2.79	0.38	2.80	2.60	0.42	2.60	115086.0	-7.81	<0.001	0.23
DNB	2.50	0.86	2.00	2.42	0.84	2.00	2.57	0.87	3.00	170410.0	2.91	<0.01	0.09
PA	2.70	1.45	3.00	2.79	1.48	3.00	2.61	1.42	2.00	143327.0	-2.00	<0.05	0.06

Note: MAS = Maternal Autonomy Support, PAS = Paternal Autonomy Support, SE = Self-Esteem, DNB = Descriptive Normative Beliefs, PA = Perceived Alcohol Availability.

3.1.1. Maternal Autonomy Support and Alcohol Consumption among Boys

Maternal autonomy support was positively associated with self-esteem, such that higher maternal autonomy support was related to higher self-esteem (Figure 1). However, maternal autonomy support was not significantly associated with perceived alcohol availability and showed a non-significant negative association with descriptive normative beliefs about alcohol use (Figure 1).

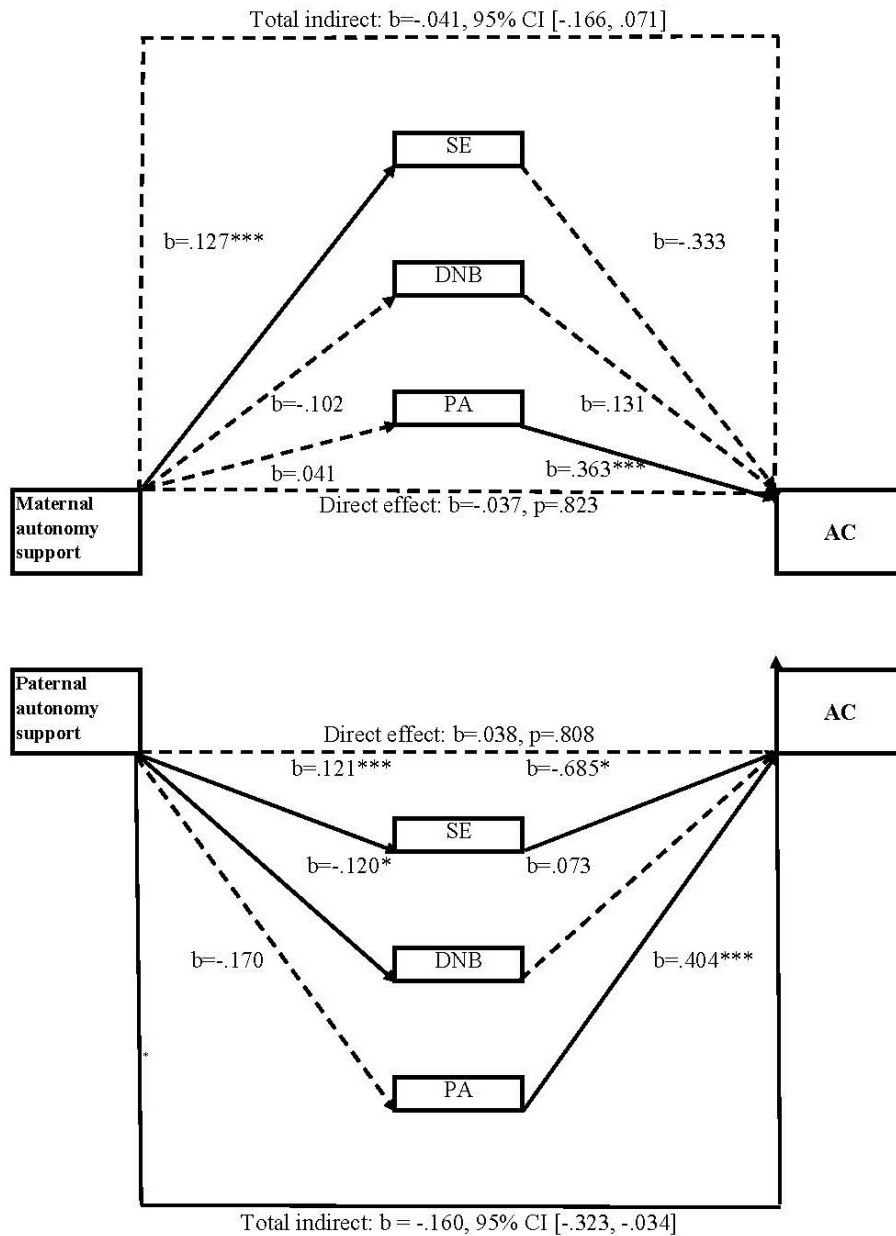
In relation to alcohol consumption, only perceived alcohol availability was significantly positively associated with alcohol use among boys (Figure 1). Maternal autonomy support ($b = -0.04$, $p = .82$), self-esteem, and descriptive normative beliefs were not significantly associated with alcohol consumption.

Indirect associations of maternal autonomy support with alcohol consumption through self-esteem, alcohol availability, and descriptive normative beliefs were also non-significant, as confidence intervals for all indirect paths included zero.

These results suggest that maternal autonomy support is related to boys' self-esteem but does not have a significant association with alcohol consumption either directly or indirectly through the proposed mediators. Instead, perceived alcohol availability appears to be a more proximal correlate of alcohol use in this sample.

3.1.2. Paternal Autonomy Support and Alcohol Consumption among Boys

Figure 1.
Parallel Mediation Models for Boys.



Note: SE = Self-Esteem, DNB = Descriptive Normative Beliefs, PA = Perceived Alcohol Availability, * $p < .05$, *** $p < .001$, Dashed lines represent paths that were not statistically significant.

Paternal autonomy support was positively associated with self-esteem, indicating that higher autonomy support related to higher self-esteem. Autonomy support was negatively, but not significantly, associated with perceived alcohol availability. It was also significantly negatively associated with descriptive normative beliefs about alcohol use, suggesting that greater paternal autonomy support related to less favorable normative beliefs regarding alcohol consumption (Figure 1).

Regarding alcohol consumption, self-esteem was negatively associated with alcohol use, suggesting that boys with higher self-esteem were less likely to consume alcohol. Perceived alcohol availability was positively associated with alcohol consumption. Paternal autonomy support and descriptive normative beliefs were not significantly associated with alcohol consumption (Figure 1).

The total indirect association of paternal autonomy support on alcohol consumption through self-esteem, alcohol availability, and descriptive normative beliefs was significant (Figure 1). The indirect association via self-esteem was significant (95% CI $[-0.185, 0.008]$), whereas the indirect associations via alcohol availability and descriptive normative beliefs were not.

These findings suggest that paternal autonomy support was associated with higher level of self-esteem and less favorable descriptive normative beliefs about alcohol use. Self-esteem, in turn, is associated with a lower likelihood of alcohol use. Although paternal autonomy support was not directly associated with alcohol consumption, it was indirectly linked to a lower likelihood of alcohol use through its positive association with self-esteem.

3.1.3. Maternal Autonomy Support and Alcohol Consumption among Girls

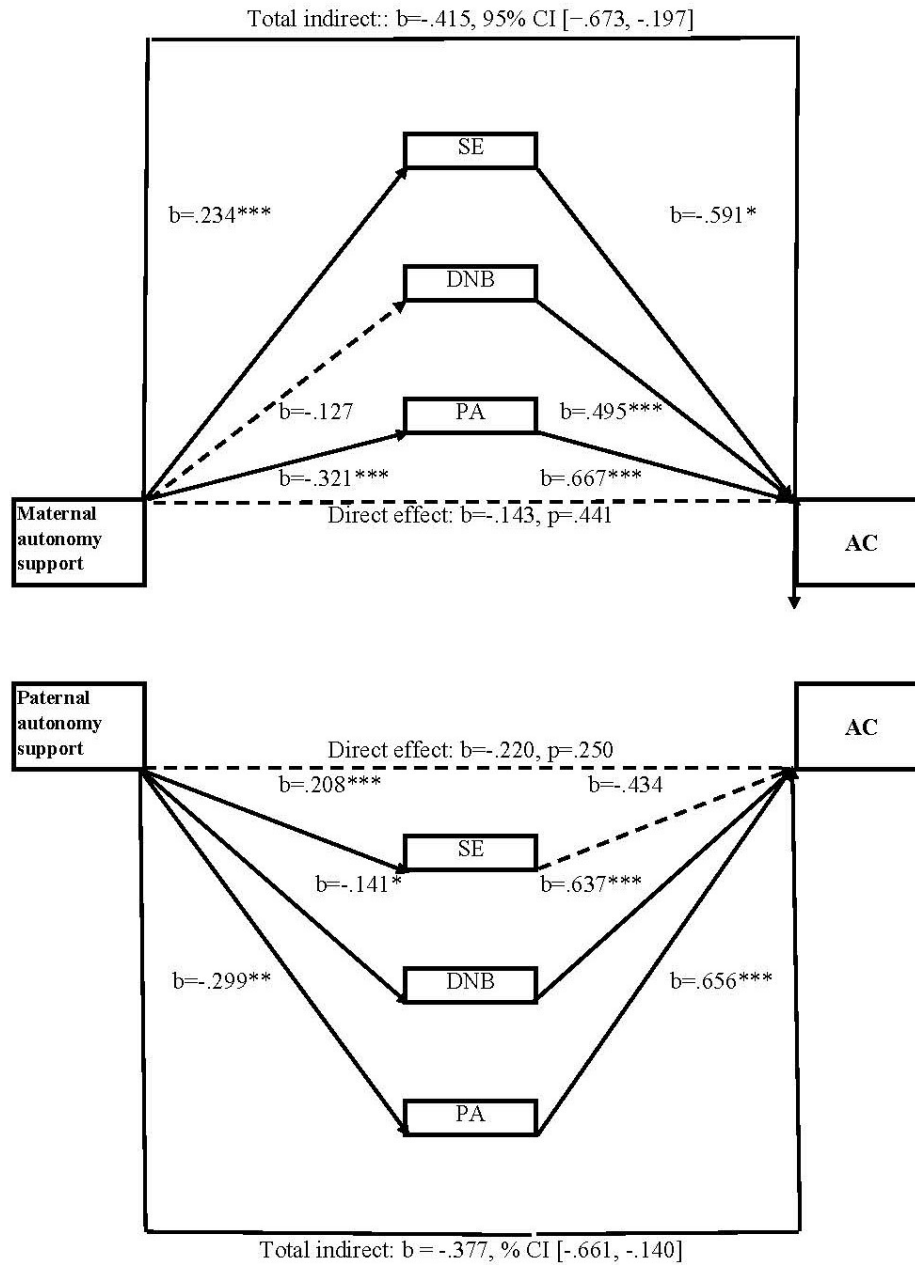
Maternal autonomy support was positively associated with self-esteem, suggesting that higher levels of maternal autonomy support correspond to higher self-esteem (Figure 2). It was also negatively associated with perceived alcohol availability, suggesting that girls who perceived more maternal autonomy support reported lower alcohol availability. The association between maternal autonomy support and descriptive normative beliefs was also negative but marginally significant, reflecting a trend toward less favorable perceptions of peer drinking norms with greater autonomy support (Figure 2).

In the final logistic regression model, self-esteem was negatively associated with alcohol consumption, indicating that higher self-esteem was linked to a lower likelihood of alcohol use. In contrast, alcohol availability and descriptive normative beliefs were both positively associated with alcohol consumption. However, maternal autonomy support was not directly associated with alcohol use (Figure 2).

The total indirect association of maternal autonomy support with alcohol consumption through the mediators was significant, with a 95% bootstrap confidence interval excluding zero (Figure 2). Specifically, the indirect associations through self-esteem ($b = -0.14$, 95% CI $[-0.27, -0.02]$) and alcohol availability ($b = -0.21$, 95% CI $[-0.39, -0.07]$) were significant. The pathway through descriptive normative beliefs ($b = -0.06$) approached significance, with a 95% CI $[-0.15, 0.001]$.

In summary, among girls, maternal autonomy support was associated with reduced alcohol consumption indirectly through higher self-esteem and lower alcohol availability. These findings underscore the importance of maternal autonomy support as a contextual factor in adolescent girls' alcohol-related behaviors, despite the absence of a direct association with alcohol use.

Figure 2.
Parallel Mediation Models for Girls.



Note: SE = Self-Esteem, DNB = Descriptive Normative Beliefs, PA = Perceived Alcohol Availability, * $p < .05$, ** $p < .01$, *** $p < .001$, Dashed lines represent paths that were not statistically significant.

3.1.4. Paternal Autonomy Support and Alcohol Consumption among Girls

Paternal autonomy support was positively associated with self-esteem, indicating that greater paternal autonomy support was linked to higher self-esteem among girls (Figure 2). It was also negatively associated with alcohol availability and with descriptive normative beliefs, suggesting that girls who experienced more autonomy support perceived less access to alcohol and believed their peers engaged less frequently in drinking.

In the final logistic regression model, alcohol availability and descriptive normative beliefs were both positively associated with alcohol consumption among girls. Self-esteem was not significantly associated with alcohol use. The direct association between paternal autonomy support and alcohol consumption among girls was also non-significant (Figure 2).

However, the total indirect association of paternal autonomy support with alcohol consumption through the mediators was statistically significant (Figure 2). Among the indirect pathways, two were statistically significant: the path through alcohol availability, $b = -0.20$, 95% CI $[-0.38, -0.05]$, and the path through descriptive normative beliefs, $b = -0.09$, 95% CI $[-0.20, -0.01]$. The path through self-esteem was not statistically significant, $b = -0.09$, 95% CI $[-0.22, 0.03]$.

In summary, among girls, greater paternal autonomy support was associated with reduced alcohol use indirectly through lower alcohol availability and weaker descriptive normative beliefs about peer drinking, although no direct link with alcohol consumption was observed. These findings highlight the importance of the perceived social and environmental context in the relationship between parenting and alcohol use.

In sum, maternal autonomy support was associated with boys' self-esteem but not with their alcohol consumption, while paternal autonomy support showed an indirect association with alcohol consumption through self-esteem. Among girls, maternal autonomy support was indirectly linked to alcohol consumption via higher self-esteem and lower alcohol availability, and paternal autonomy support via lower availability and weaker peer drinking norms, with no direct effects observed.

4. DISCUSSION AND CONCLUSIONS

Boys reported significantly lower levels of paternal autonomy support compared to girls, although the effect size was small. This outcome appears to be not fully consistent with self-determination theory (Vrolijk, Van Lissa, Branje, Meeus, & Keizer, 2020), which asserts that the need for autonomy is equally important for both genders. Nonetheless, previous studies have indicated that women generally exhibit a higher autonomy orientation (Deci & Ryan, 1985). Boys in this study also reported significantly higher self-esteem than girls. While adolescent girls often experience a slight decline in self-esteem, research suggests this decrease is small and comparable to that of boys (Twenge & Campbell, 2001). A meta-analysis by Orth, Erol, and Luciano (2018) indicates that self-esteem generally increases during childhood, stabilizes in adolescence, and rises again in young adulthood. Although some studies, as noted by the authors, report a slight self-esteem advantage for boys, others find no significant gender differences, suggesting that gender is not a direct determinant of changes in self-esteem. The psychosocial influences related to the onset of puberty may partly account for the differences in alcohol consumption and self-esteem between boys and girls (Glozah, 2014).

Our study found that maternal and paternal autonomy support are differently associated with adolescent alcohol use across genders. Mediation analyses revealed a significant indirect effect of maternal autonomy support on alcohol use through self-esteem

for girls only, and a similar indirect effect of paternal autonomy support through self-esteem for boys. These results align with evidence suggesting that parenting can have different effects on boys and girls (Zheng & Chen, 2025). At the same time, as Leaper (2005) summarized, adolescents' relationships with their mothers tend to be more intense, involving both greater closeness and more frequent conflict, whereas father-daughter relationships are generally more distant, with daughters often perceiving their fathers as detached authority figures. Although sons seek support from their fathers more than daughters do, father-son relationships remain less intimate than those with mothers. Female adolescents also reported viewing their parents as less controlling but simultaneously less supportive of autonomy, reflecting potential gender differences in parenting practices or differences in how adolescents perceive these practices (Young & Tully, 2022). Our mediation models further emphasize the role of same-gender dyads (mother-daughter, father-son). While both maternal and paternal autonomy support were linked to adolescents' self-esteem, self-esteem mediated the relationship between parental autonomy support and lifetime alcohol consumption only in same-gender dyads. Similarly, these findings align with evidence that the father-child relationship exerts a stronger positive influence on reducing risk behaviors in male adolescents than in female adolescents, providing robust support for the link between paternal involvement, parenting styles, and adolescent behavior (Bronte-Tinkew, Moore, & Carrano, 2006).

Nargiso, Friend, and Florin (2013) found that peer normative beliefs were the strongest and most consistent predictors of adolescents' current and lifetime alcohol use, as well as their intentions to start drinking. Poor parent-child relationship quality also increased the likelihood of alcohol use. Additionally, greater perceived alcohol availability was associated with higher odds of use, even after accounting for peer and family factors. Community risk factors, as noted by the authors, were linked to intentions to initiate use, with gender differences observed: poor family relationships had a greater influence on girls, while permissive community norms more strongly affected boys. Our results indicate that perceived alcohol availability and descriptive normative beliefs mediate the relationship between paternal autonomy support and alcohol use, and that perceived alcohol availability mediates the link between maternal autonomy support and alcohol use, both effects occurring only in girls. These findings underscore the importance of gender-specific parenting and adolescents' perceived social context in shaping alcohol-related behaviors.

This study sheds light on how parenting styles influence the initiation of drug use and highlights the importance of family-based programs that consider both parent and child gender. However, reliance on self-reported measures of parental autonomy support and lifetime alcohol use limits a deeper understanding of the role of gendered autonomy support in adolescent health-risk behaviors. Finally, the lower Cronbach's alpha value for the mothers' Autonomy Support subscale indicate a need for more precise cultural adaptation in future research. Future research should incorporate analyses that account for children from divorced and remarried families.

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Chapter # 14

HATE, EQUALITY, OR NEUTRALITY? PSYCHOLOGICAL AND MORAL DETERMINANTS OF POLITICAL SPEECH PREFERENCES

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ABSTRACT

This study examines voters' perception of hate language in political communication by investigating its psychological, moral, and demographic correlates. Using a sample of 706 participants from Georgia, the study explores how variables such as cognitive style, moral foundations, emotional reactivity, intellectual humility, and social comparison influence attitudes toward political speeches containing hate language, equality-oriented language, or neutral discourse. Results reveal that individuals with higher cognitive openness, intellectual humility, and individualizing moral foundations are less accepting of hate speech. Conversely, those with closed-mindedness, and binding moral foundations demonstrate greater tolerance for hate-based rhetoric. Evaluation patterns varied by gender, generation, and education, reflecting broader socio-cultural dynamics. The findings underscore the importance of cognitive, emotional, and moral dimensions in public receptivity to divisive political narratives and offer theoretical implications for mitigating hate language through education, critical thinking, and moral engagement.

Keywords: hate language, equality, perception, political behavior.

1. INTRODUCTION

In the era of polarized politics, populist rhetoric, and mass communication, the use of hate language in political discourse has become a powerful and concerning tool. While some forms of political speech aim to mobilize, inspire, or unite, others exploit societal divisions by employing dehumanizing, discriminatory, or emotionally provocative language targeting groups based on identity—such as gender, ethnicity, sexual orientation, or age. The spread of such discourse, particularly in transitional democracies, poses a critical challenge to civic cohesion and democratic values (Ahmed, Madrid-Morales, & Tully, 2022). This study investigates how voters perceive and respond to hate language embedded in political communication, with a particular focus on the psychological, moral, and social mechanisms that shape this evaluation. Drawing on theories of cognitive style (Stanovich & West, 2007; Pennycook & Rand, 2019), moral foundations (Keefer, 2012), social comparison (Festinger, 1954), and intellectual humility (Krumrei-Mancuso & Rouse, 2016), the research explores not only who is more likely to tolerate hate speech—but more importantly, why.

With the growing body of literature on hate speech and political polarization, the present research addresses the intersections between cognition, morality, emotion, and social influence, through an interdisciplinary, empirically grounded study conducted in Georgia—a country with a unique socio-political landscape shaped by post-Soviet transition, democratic development, and intense political polarization. While, political science may focus on ideological affiliation, psychology emphasizes personality traits (Marcus, Neuman,

& MacKuen, 2000). Yet these approaches alone cannot fully account for the complex variations in public responses to hate-based rhetoric, particularly across different demographic or generational groups. By analyzing how voters react to three types of political speeches—hate-based, equality-oriented, and neutral—this study provides a dynamic, data-driven understanding of how and why individuals accept, reject, or remain ambivalent toward divisive language in political messaging.

In particular, the study focuses on a series of key psychological constructs: cognitive style, including actively open-minded thinking and preference for effortful thinking, as predictors of critical evaluation (Baron, 2008; Stanovich & West, 2007); moral foundations, distinguishing between binding (loyalty, authority, purity) and individualizing (care, fairness) values in shaping moral intuition (Graham, Haidt, & Nosek, 2009; Keefer, 2012); social comparison, especially the extent to which individuals seek normative alignment or evaluate their opinions through societal cues (Festinger, 1954; Ahmed et al., 2022); intellectual humility, which reflects openness to reconsidering views and recognizing limits to one's knowledge (Krumrei-Mancuso & Rouse, 2016); emotional reactivity, particularly the role of affect in amplifying or dampening the appeal of provocative speech (Frijda, 1986; Marcus et al., 2000). Furthermore, the study examines the role of demographic variables—age, gender, education, and generational cohort—to contextualize these psychological dynamics within broader sociocultural patterns. Of particular interest is the construct of reversed hate language (e.g., hostility toward dominant groups such as the elderly, heterosexuals, or men), a concept rarely studied yet relevant in discussions of identity politics and societal backlash. The main objectives of this research are therefore to assess the level of acceptance or rejection of political hate language among Georgian voters, to identify psychological and moral predictors of this evaluation, to examine how these patterns vary across demographic lines and over time. By integrating these layers of analysis, the study seeks to contribute to academic and practical conversations about the ethics of political communication, the psychological defense against manipulative rhetoric, and the resilience of democratic values in increasingly fragmented societies.

The present study focuses on critical thinking, social comparison, intellectual humility, and emotional reactivity as key psychological attributes influencing the acceptance or rejection of hate speech. These constructs were selected because they represent complementary dimensions of cognitive, social, and affective functioning that together shape how individuals interpret, evaluate, and emotionally respond to morally charged or divisive communication. While previous studies have often examined prejudice or aggression as outcomes of broad personality traits such as authoritarianism, openness to experience, or agreeableness (Sibley & Duckitt, 2008), the current research emphasizes contextually responsive cognitive-affective mechanisms that are more sensitive to contemporary forms of hate expression—especially those encountered in online and political communication.

Critical Thinking and Related Cognitive Traits: Critical thinking involves the deliberate evaluation of arguments and evidence through reasoning and reflection (Facione & Facione, 2013). It differs from stable personality traits like openness to experience in that it reflects an intentional cognitive stance rather than a dispositional preference. Whereas openness captures curiosity and receptivity to new ideas, critical thinking entails effortful analysis, metacognition, and resistance to cognitive biases (Stanovich & West, 2000). Individuals who engage in critical thinking are better equipped to identify manipulative or fallacious content in hate-based messages, reducing the likelihood of uncritical acceptance or emotional contagion. The study employs measures of open-minded and effortful thinking to operationalize this active cognitive engagement.

Social Comparison as a Social-Cognitive Moderator: Social comparison processes shape how people align their attitudes with perceived group norms (Festinger, 1954). In the context of hate speech, individuals may compare their opinions to those dominant in their online communities, using such comparisons as cues for what is socially acceptable. In contrast, social comparison of abilities relates more to self-evaluative competitiveness and is less directly tied to moral or normative conformity. Thus, this study focuses primarily on opinion-based comparison as a potential normative buffer against hate language acceptance. Compared with other social constructs such as conformity or social desirability, social comparison reflects a more dynamic, bidirectional process that can both reinforce or challenge prejudiced discourse depending on contextual cues.

Intellectual Humility as a Meta-Cognitive Regulator: Intellectual humility refers to the awareness of the limits of one's knowledge and the willingness to revise beliefs when faced with new evidence (Krumrei-Mancuso & Rouse, 2016). It extends beyond traditional humility by emphasizing epistemic flexibility and open dialogue. Individuals high in intellectual humility are less likely to react defensively when confronted with opposing views and more capable of engaging respectfully in moral or political discussions (Porter & Schumann, 2018). Compared to general agreeableness or tolerance, intellectual humility represents a meta-cognitive virtue, enabling reflection on the quality of one's reasoning processes. It therefore serves as an important cognitive-moral safeguard against the internalization of hate language and rigid ideological thinking.

Emotional Reactivity and Affective Responses to Hate Language: Emotional reactivity captures how strongly and how quickly individuals experience emotions, as well as how long these responses persist (Preece, Becerra, Robinson, Dandy, & Allan, 2018). Affective sensitivity plays a dual role in responses to hate speech. Unlike the stable trait of neuroticism, which broadly reflects emotional instability, emotional reactivity emphasizes situational intensity and affective regulation, making it a more precise predictor of real-time reactions to hate content.

Together, these constructs represent a multidimensional framework encompassing cognitive evaluation (critical thinking), social alignment (social comparison), meta-cognitive flexibility (intellectual humility), and affective responsiveness (emotional reactivity). Examining them jointly provides a more holistic understanding of how individuals process and respond to hate language, capturing the interplay between cognition, emotion, and social context. This integrative approach allows for identifying not only individual differences in tolerance of hate speech but also potential psychological resources that can buffer against its normalization and spread.

The proliferation of hate speech represents not only a communication issue but also a systemic social threat, undermining the essence of democratic dialogue and mutual respect within societies. On a large scale, hate speech contributes to the normalization of prejudice, leading to desensitization, moral disengagement, and increased societal tolerance for discrimination and violence. The spread of hate language across digital platforms affects social cohesion by polarizing communities and fostering a climate of mistrust, resentment, and fear among marginalized groups. In political contexts, persistent exposure to hate rhetoric can distort public opinion, influence electoral behavior, and legitimize extremist ideologies, thereby threatening democratic pluralism and civic participation.

2. BACKGROUND

Hate language, particularly in political contexts, has become a salient concern for democratic societies. Critical thinking, the ability to analyze and evaluate information systematically, plays a crucial role in countering the spread of hate speech. It enables individuals to identify logical fallacies, recognize bias, and challenge the underlying assumptions of harmful rhetoric (Facione & Facione, 2013). Educational interventions that foster critical thinking skills have shown promise in reducing susceptibility to hate speech and misinformation (Kahne & Bowyer, 2017). Media literacy programs that incorporate critical thinking principles have proven effective in equipping individuals to discern the intent and credibility of online content (Ennis, 2013). Such programs emphasize the importance of evaluating sources, understanding the influence of algorithms, and engaging in respectful dialogue. By promoting critical engagement, these interventions reduce the likelihood of individuals contributing to or passively endorsing hate speech. This study draws from dual-process theories of cognition, which distinguish between heuristic (System 1) and analytical (System 2) modes of thought (Stanovich & West, 2007). Individuals with an actively open-minded thinking style (AOMTS) are more likely to engage in deliberate, critical reflection and show resistance to manipulative rhetoric. In contrast, a closed-minded style tends to rely on cognitive shortcuts and exhibit lower tolerance for ambiguity—factors that increase susceptibility to ideological messaging (Baron, 2008). Preference for effortful thinking also serves as a cognitive buffer, as it reflects willingness to engage in cognitive taxing tasks such as evaluating ethical nuances in speech (Pennycook & Rand, 2019).

Social comparison theory, introduced by Festinger (1954), posits that individuals evaluate themselves by comparing their abilities, achievements, and attributes to those of others. In the digital age, social media platforms have intensified this phenomenon by curating idealized representations of others' lives. This intensified social comparison can influence individuals' perceptions and behaviors, including their engagement with hate speech. Research indicates that upward social comparisons, where individuals compare themselves to perceived superiors, can lead to feelings of inadequacy and resentment (Vogel, Rose, Roberts, & Eckles, 2015). Conversely, downward social comparisons, involving perceived inferiors, may reinforce biases and prejudices. In the context of hate speech, social comparison dynamics can either perpetuate hateful ideologies or provoke critical reflection, depending on individual and group factors.

Moral Foundations Theory (MFT) provides a framework for understanding individual differences in moral reasoning (Keefer, 2012). It categorizes moral intuitions into two broad types: individualizing foundations (care and fairness) and binding foundations (loyalty, authority, purity). Prior research shows that conservatives prioritize binding foundations, while liberals value individualizing ones (Graham et al., 2009). This study tests how these moral orientations shape acceptance of hate speech. Those who score high on care and fairness are expected to reject hate language, while high scores on authority and purity may predict acceptance due to loyalty to in-group norms or traditional values.

Intellectual humility is the recognition of one's cognitive limitations and openness to revising beliefs in light of new evidence (Krumrei-Mancuso & Rouse, 2016). It is closely associated with tolerance, empathy, and metacognition. People with high intellectual humility tend to resist dogmatic and polarizing rhetoric. The current study explores how this trait predicts preferences for political speech types, hypothesizing that high humility would align with greater endorsement of equality language and rejection of hate speech.

Affective responses to political content also shape speech evaluation. The Affective Intelligence Theory (Marcus et al., 2000) posits that emotions such as fear, enthusiasm, and

anger influence political judgment. Emotional reactivity, especially high positive intensity, may amplify the allure of charismatic or provocative rhetoric. While some emotional engagement promotes civic participation, excessive reactivity can increase vulnerability to emotionally charged hate speech (Frijda, 1986).

Previous research suggests that women exhibit greater sensitivity to hate language and moral violation (You, Maeda, & Bebeau, 2011), possibly due to socialized empathy and perspective-taking. Educational attainment, particularly exposure to higher education, correlates with tolerance, media literacy, and critical thinking (McLaren, 2005). This study investigates whether such demographic factors modulate acceptance of political hate language.

3. INTERSECTION

The present study underscores the complex interplay between cognitive styles, moral foundations, social comparison, emotional reactivity, and intellectual humility in shaping voter perceptions of hate language within political discourse. By intersecting these psychological and social dimensions, the findings illuminate not only who tolerates or rejects hate speech, but also why such evaluations vary across demographic and cultural contexts.

Intersecting Cognitive and Moral Dimensions: A central contribution of this research lies in demonstrating how cognitive styles and moral intuitions jointly influence the acceptance or rejection of hate language. Specifically, individuals exhibiting a closed-minded thinking style tend to endorse hate language more readily, aligning with prior research indicating that cognitive rigidity correlates with ideological dogmatism and intolerance (Stanovich & West, 2007; Baron, 2008). Conversely, actively open-minded thinkers and those with a preference for effortful cognitive engagement show stronger resistance to hate speech, reflecting their capacity for nuanced ethical reasoning (Pennycook & Rand, 2019).

These cognitive tendencies intersect meaningfully with moral foundations. The binding moral foundations—loyalty, authority, and purity—are positively associated with acceptance of hate language, consistent with findings that these foundations sustain group cohesion even at the expense of outgroup tolerance (Graham et al., 2009; Keefer, 2012). Meanwhile, individualizing foundations, particularly care and fairness, correlate with rejection of hateful rhetoric, highlighting the protective role of empathic moral reasoning in democratic deliberation.

The Role of Social Comparison and Intellectual Humility: Social comparison of opinion emerges as a pivotal social mechanism affecting hate language perception. Individuals who strongly align their views with perceived community norms tend to reject direct hate speech, possibly as a response to evolving societal sanctions against overt discrimination (Ahmed et al., 2022). This finding suggests that social context and the desire for normative conformity can foster sensitivity to hate speech, particularly in increasingly connected digital and civic environments. Intellectual humility further moderates these dynamics by promoting openness to new perspectives and decreasing dogmatic certainty. Higher intellectual humility correlates with greater preference for equality-oriented speech and less tolerance of hate language, supporting its theorized role in fostering democratic dialogue and reducing polarization (Krumrei-Mancuso & Rouse, 2016).

Emotional Reactivity and Gendered Sensitivities: Emotional reactivity, specifically positive intensity, shows a nuanced relationship with political speech evaluation. While emotional engagement can enhance political participation, it may also amplify the appeal of provocative rhetoric, including hate speech (Frijda, 1986; Marcus et al., 2000). Gender differences indicate that women are generally less tolerant of hate language and more

sensitive to moral violations, likely reflecting socialization processes that encourage empathy and relational awareness (You et al, 2011).

Demographic and Generational Implications: The study's findings regarding age and education level offer important insights into how demographic factors shape political language evaluation. Older individuals and those with lower educational attainment show greater acceptance of hate language, which may reflect generational differences in social norms and critical media literacy (McLaren, 2005). This has implications for targeted civic education and engagement strategies that promote critical thinking and inclusivity across diverse voter segments.

Practical and Theoretical Implications: Theoretically, this research advances an integrative model of hate language perception that bridges cognition, morality, social influence, and emotion. Practically, it suggests multiple intervention points for reducing tolerance of hate speech: enhancing critical thinking skills, fostering intellectual humility, and cultivating individualizing moral values through education and public discourse.

Understanding individual-level moral and cognitive mechanisms underlying hate speech acceptance provides valuable guidance for designing targeted interventions and informed policy strategies. Traditional anti-hate approaches often emphasize legal regulation, content moderation, or mass awareness campaigns, which address societal-level manifestations but may overlook the psychological roots of prejudice and intolerance. By identifying factors such as critical thinking, moral foundations, emotional reactivity, and intellectual humility, this study highlights modifiable individual traits that can be strengthened through education and training. For instance, fostering open-minded thinking and intellectual humility in school and university programs could enhance citizens' resilience against manipulative rhetoric and online hostility. Similarly, emotion regulation interventions—such as mindfulness-based or cognitive-behavioral techniques—could reduce impulsive affective reactions that fuel hate expression. At the policy level, integrating psychological insights into media literacy, civic education, and community dialogue initiatives can create a more sustainable framework for combating hate language. Such evidence-based, person-centered strategies complement structural and technological solutions, offering a more holistic response to polarization and hostility in contemporary societies.

4. DATA ANALYSIS

4.1. Participants

A total of 706 participants were recruited for this study, with 250 participating during the first stage and 456 during the second stage of data collection. The overall sample consisted of 64.7% female respondents. The participants ranged in age from 18 to 75 years, representing a wide span of developmental stages. In terms of educational background, 35% of participants held a bachelor's degree, while 25% were university students at the time of the study. Geographically, 40% of the sample were born in Tbilisi, the capital of Georgia, while the remaining participants originated from various regions across the country, reflecting diverse sociocultural backgrounds.

4.2. Measures

This study employed a correlational survey design using a set of standardized psychological measures aimed at assessing cognitive styles, moral reasoning, emotional reactivity, and openness to hate language. The following instruments were administered:

Comprehensive Thinking Style Questionnaire (CTSQ): The CTSQ contains 24 items where respondents rate statements on a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The scale comprises four subscales, each demonstrating good reliability in the current sample: Actively Open-Minded Thinking ($\alpha = .812$; $M = 2.8$, $SD = 0.8$); Close-Minded Thinking ($\alpha = .826$; $M = 3.0$, $SD = 0.9$); Preference for Intuitive Thinking ($\alpha = .879$; $M = 3.32$, $SD = 0.8$); Preference for Effortful Thinking ($\alpha = .813$; $M = 3.35$, $SD = 0.9$).

Iowa-Netherlands Comparison Orientation Measure (INCOM): The INCOM measures social comparison using 11 items rated on a five-point Likert scale (1 = strongly disagree; 5 = strongly agree). The scale differentiates between two dimensions of social comparison: Social Comparison of Abilities ($\alpha = .813$; $M = 2.9$, $SD = 0.9$); Social Comparison of Opinions ($\alpha = .753$; $M = 3.34$, $SD = 0.6$). Each dimension includes a reverse-coded item (Items 5 and 11) to control for acquiescence bias.

Moral Foundations Questionnaire (MFQ; Graham et al., 2011): The MFQ assesses endorsement of five core moral domains: Care/harm, Fairness/cheating, Loyalty/betrayal, Authority/subversion, and Sanctity/degradation. The Georgian version of the MFQ was used, previously adapted for cultural relevance and linguistic clarity ($\alpha = .884$; $M = 3.41$, $SD = 0.6$). Responses were rated on a 6-point Likert scale. Higher scores indicate stronger endorsement of the corresponding moral foundation.

Perth Emotional Reactivity Scale (PERS; Becerra, Preece, Campitelli, & Scott-Pillow, 2017): The PERS measures emotional reactivity across three dimensions: Activation, Intensity, and Duration of emotional responses. The scale consists of 30 items, scored on a 5-point Likert scale. The validated Georgian version was used in this study, which has shown good reliability in previous research (Cronbach's $\alpha > .80$).

Intellectual Humility Scale (Leary et al., 2017): This scale measures the tendency to acknowledge the limits of one's knowledge and openness to differing viewpoints. The 16-item version was used, scored on a 5-point Likert scale. Georgian adaptation of the scale demonstrated adequate internal consistency in the current study ($\alpha = .81$).

Hate Language Scale (adapted): A 32-item scale assessed attitudes toward hate language. The scale comprised four subscales addressing hate language directed toward different groups: elderly individuals, women, religious communities, and LGBTQ individuals. Each subscale included two types of items: Direct Hate Language; Reversed Hate Language. Respondents rated statements on a five-point Likert scale (1 = strongly disagree; 5 = strongly agree) (Cronbach's $\alpha > .70$).

4.3. Data Collection Procedure

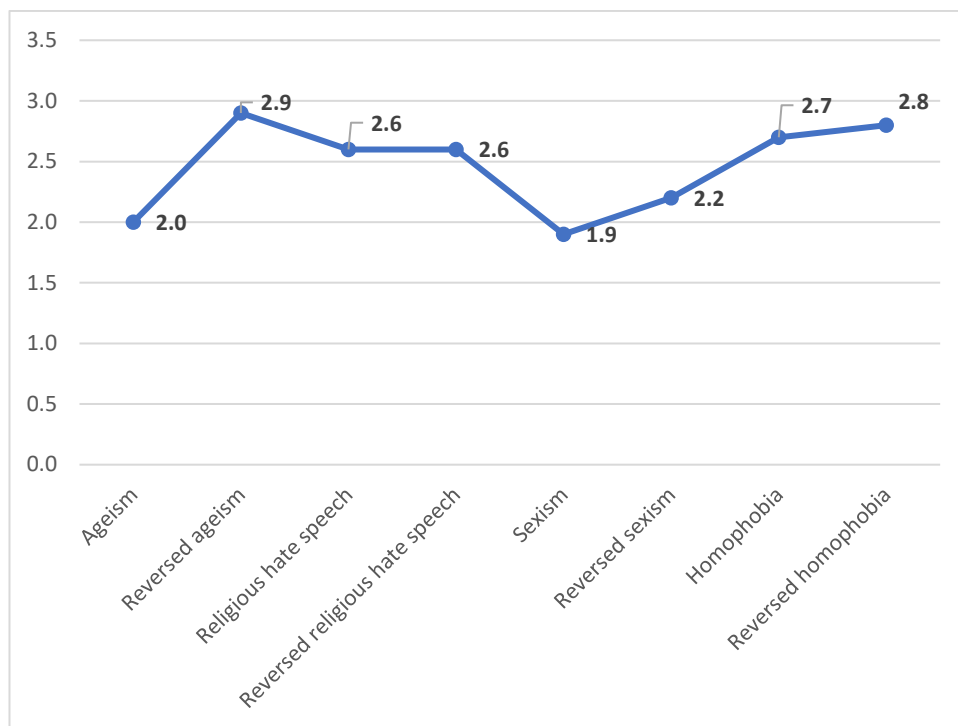
The research was conducted in two stages. In the first stage, respondents completed a hate language scale designed to assess how accurately they could identify hate expressions and how acceptable they found them when directed at different social groups. Their responses were analyzed in relation to social comparison orientation and comprehensive thinking style to explore cognitive and social factors influencing moral evaluation. In the second stage, participants evaluated three examples of political speeches representing hate-based, equality-oriented, and neutral discourse. They indicated which candidate they would vote for first, second, and third, and completed questionnaires on thinking style (CTSQ), social comparison (INCOM), moral foundations (MFQ), emotional reactivity (PERS), and intellectual humility. Data were collected through individual interviews across urban and regional areas of Georgia and analyzed using established statistical procedures suitable for testing relationships among psychological variables.

Data were collected using face-to-face self-report interviews, conducted in both urban and regional areas across Georgia. Interviews took approximately 45–60 minutes to complete. Participants were informed about the voluntary and anonymous nature of the study and provided informed consent prior to participation. Quantitative data were analyzed using descriptive and inferential statistical methods. Gender and education-level differences were assessed through one-way ANOVA, and associations between continuous variables were explored using Pearson’s correlation coefficients. Statistical significance was established at $p < .05$, and all analyses were performed using SPSS (Version 23). The decision to use ANOVA and correlation analyses was based on their robust applicability for testing group differences and linear relationships among psychological constructs.

4.4. Perception of Hate Language

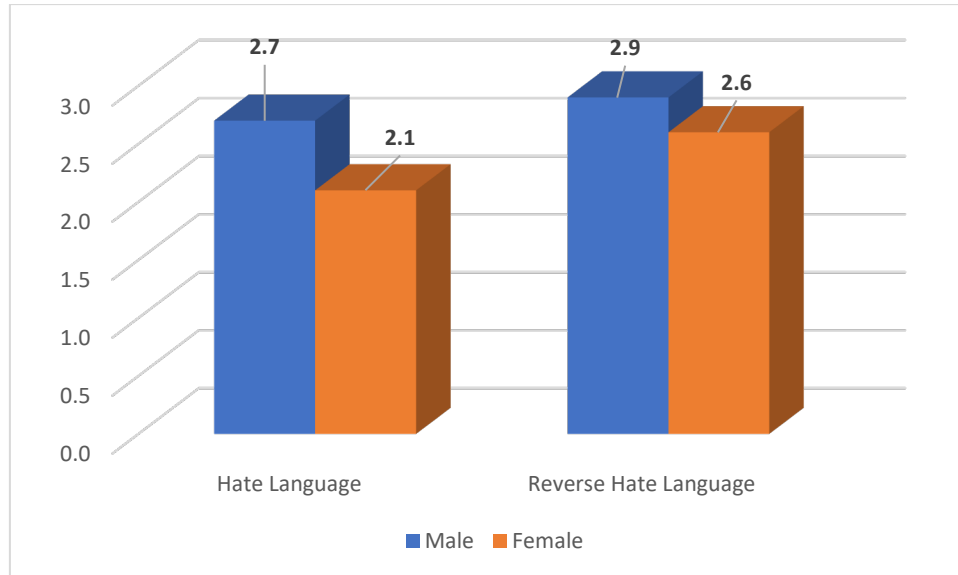
Across both stages, participants showed *low tolerance for hate language* and a clear preference for *neutral or equality-oriented political communication*. Only a small minority favored hate-based messages, reflecting growing societal awareness of their divisive nature.

Figure 1.
Attitudes towards different forms of hate language.



Women ($M = 2.9$; $F = 6.152$, $df = 4$, $p < .05$) and participants with higher education levels were less accepting of hate speech, suggesting that empathy and critical literacy contribute to moral sensitivity and resistance to discriminatory content.

Figure 2.
Attitudes towards different forms of hate language.



The ANOVA revealed that education level significantly influenced attitudes toward ageism ($F = 3.269$, $df = 3$, $p < .05$). Post hoc analysis using the Tukey HSD test indicated that respondents with higher education found hate speech less acceptable ($M = 1.9$) compared to those with secondary education ($M = 2.6$).

4.5. Comprehensive Thinking Style and Social Comparison

Cognitive style emerged as a strong predictor of hate language acceptance. Respondents who demonstrated actively open-minded and effortful thinking reported lower acceptance of both direct and reversed hate language, indicating that reflective and analytical thinking reduces susceptibility to manipulative or prejudiced communication. In contrast, closed-minded thinking was associated with higher tolerance for hate-based messages, highlighting that cognitive rigidity and reliance on intuitive reasoning promote uncritical acceptance of ideological rhetoric. Social comparison of opinions moderated this relationship: participants who valued alignment with community norms tended to reject explicit hate speech, suggesting that socially reinforced standards of tolerance can counteract divisive discourse.

Table 1.
Hate language and its correlation with age, social comparison and comprehensive thinking style.

		Hate Language	Reversed Hate Language	Age	Social Comparison of Opinion	Close Minded Thinking Style	Actively Open Minded Thinking Style
Hate Language	Pearson Correlation						
	Sig. (2-tailed)						
Reversed Hate Language	Pearson Correlation	.845**					
	Sig. (2-tailed)	.000					
Age	Pearson Correlation	.264**	.252**				
	Sig. (2-tailed)	.001	.002				
Social Comparison of Opinion	Pearson Correlation	-.172*	.080	-.120			
	Sig. (2-tailed)	.035	.329	.144			
Close Minded Thinking Style	Pearson Correlation	.414**	.383**	.330**	-.178*		
	Sig. (2-tailed)	.000	.000	.000	.030		
Actively Open Minded Thinking Style	Pearson Correlation	-.260**	-.273**	-.083	.073	-.402**	
	Sig. (2-tailed)	.001	.001	.315	.374	.000	
Preference for Effortful Thinking	Pearson Correlation	-.435**	-.370**	-.166*	.006	-.196*	.237**
	Sig. (2-tailed)	.000	.000	.042	.943	.017	.004

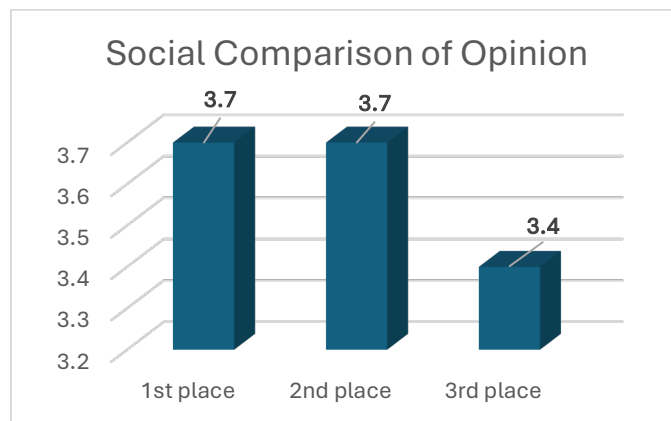
4.6. Moral Foundations and Speech Evaluation

Moral orientation provided additional explanatory insight ($t = 2.283, p < .05$). Participants who emphasized *binding moral values*—loyalty, authority, and purity—were more accepting of hate language, reflecting moral reasoning focused on in-group protection and traditional norms. Conversely, endorsement of *individualizing values*—care and fairness—predicted stronger preference for equality-oriented and inclusive discourse. This pattern confirms that moral intuitions play a central role in shaping attitudes toward political speech and in distinguishing empathic from exclusionary moral outlooks.

4.7. Social Comparison and Evaluative Behavior

Gender differences were again evident in social comparison tendencies: men scored higher on ability-based social comparison ($t = 2.929, p < .05$), though this dimension did not predict speech evaluations. In contrast, opinion-based social comparison significantly influenced responses to hate speech ($F = 5.8, p < .05$), with individuals scoring high on this scale more likely to rank hate speech either first or last—possibly indicating conflict between internal values and perceived social norms.

Figure 3.
Social comparison and evaluation of political discourse.



4.8. Intellectual Humility and Emotional Reactivity

Evaluation of neutral speech was positively correlated with overall intellectual humility ($\rho = .149, p < .05$), while acceptance of hate language was negatively associated with both openness to changing opinions and lower intellectual overconfidence. These results underscore the importance of metacognitive traits in resisting polarizing rhetoric (Krumrei-Mancuso & Rouse, 2016). Finally, preference for hate language was positively correlated with the positive intensity subscale of emotional reactivity ($\rho = .153, p < .05$), suggesting that individuals prone to intense emotional experiences may be more reactive to provocative language—though the direction of this relationship warrants further investigation.

5. FUTURE RESEARCH DIRECTION

The current study offers a multifaceted analysis of voters' perceptions of hate language in political communication by integrating psychological, moral, emotional, and demographic factors. While the findings contribute valuable insights into the underlying mechanisms of hate language acceptance, they also open numerous avenues for further inquiry. Future research can expand upon this foundation in the following key directions:

The present research provides a snapshot of attitudes toward hate language at a specific historical moment. However, political climates and social norms evolve over time, especially in transitional democracies. Longitudinal studies are needed to track changes in the perception, normalization, or rejection of hate speech across electoral cycles, public crises (e.g., war, pandemics), and generational shifts. Such studies could assess whether interventions in education, media literacy, or policy yield sustainable reductions in hate speech tolerance.

Given that social comparison and opinion alignment were significant predictors in this study, future research should directly examine the role of digital platforms in shaping attitudes toward political speech. Investigating the influence of algorithms, echo chambers, and online disinhibition could reveal how digital environments amplify or mitigate exposure to hate speech. Studies might also analyze the emotional contagion effects of hate language and the spread of related content across social networks.

The findings suggest that critical thinking, intellectual humility, and moral sensitivity buffer against hate speech acceptance. Future research should develop, implement, and evaluate educational interventions—especially within formal education settings—to foster these traits. Studies could compare the efficacy of different pedagogical strategies (e.g., debate-based learning, empathy training, media literacy workshops) in enhancing democratic resilience and resistance to divisive language.

A subset of participants in the study exhibited ambivalence or neutral responses toward hate or reversed hate language. Understanding the psychological, cognitive, or sociocultural factors contributing to this neutrality is essential for addressing the silent normalization of prejudice. Future qualitative research could investigate the inner narratives, justifications, or disengagement strategies used by such individuals.

6. CONCLUSION/DISCUSSION

The present study offers a multifaceted analysis of attitudes toward hate language by examining its psychological, demographic, and moral correlates. The findings confirm that sociocognitive factors—including thinking style, social comparison tendencies, emotional reactivity, and intellectual humility—play critical roles in shaping individuals' susceptibility or resistance to hate speech. From a cognitive perspective, the results align with dual-process models of reasoning (Stanovich & West, 2007), which distinguish between automatic, heuristic-driven processing and deliberate, reflective thought. Closed-mindedness and a preference for cognitive ease were associated with greater tolerance for hate language, suggesting that more effortful, open-minded cognition serves as a buffer against prejudiced discourse. This supports the argument that critical thinking is an essential tool for recognizing and rejecting manipulative rhetoric. Given the dynamic nature of political communication, especially in post-Soviet societies undergoing rapid social transformation, these findings highlight the need for policies and media practices that encourage ethical political expression and mitigate the polarizing effects of hate language. Social media platforms and civic

organizations can leverage these psychological insights to design campaigns that promote empathy, reasoned debate, and awareness of the social costs of hate speech.

Moral Foundations Theory (Keefer, 2012) proved highly informative in explaining divergent moral sensitivities that underpin speech evaluation. Individuals endorsing binding moral foundations (loyalty, authority, and purity) were more prone to tolerate hate language, potentially reflecting in-group loyalty and aversion to perceived threats to social cohesion. In contrast, those guided by individualizing foundations (care and fairness) were more likely to support messages promoting equality. These patterns are consistent with prior research on the moral underpinnings of political ideology (Graham et al., 2009).

Social comparison, particularly of opinions, influenced respondents' evaluations, suggesting that public discourse and peer norms shape individual attitudes. High scorers on opinion-based comparison may be more attuned to socially acceptable viewpoints, explaining their rejection of overt hate speech. This finding intersects with theories of social identity and normative influence (Tajfel & Turner, 1986).

Moreover, intellectual humility emerged as a protective trait against hate language acceptance, with higher humility correlating with a preference for neutral and equality-based discourse. This reinforces the value of intellectual virtues in public reasoning and civic engagement (Krumrei-Mancuso & Rouse, 2016).

Lastly, emotional reactivity—particularly the experience of intense positive affect—was linked to increased tolerance for hate language, which may reflect the emotional appeal and mobilizing power of such rhetoric in political communication (Marcus et al., 2000).

This study underscores the complexity of attitudes toward hate speech by integrating cognitive, moral, and emotional dimensions. The results indicate that educational attainment, cognitive openness, moral sensitivity, and intellectual humility serve as protective factors against the normalization of hate language. Conversely, reliance on heuristic processing, emphasis on authority-based morality, and emotional reactivity may increase susceptibility. These findings have important implications for interventions aimed at reducing the acceptance of hate language. Promoting critical thinking, media literacy, and moral reflection—especially within educational contexts—may cultivate more resilient, empathetic, and democratically engaged citizens. Future research should explore longitudinal dynamics of hate speech tolerance and further investigate the psychological profiles of individuals who remain neutral or ambivalent toward disguised or reversed hate language, which may still perpetuate harmful ideologies under the guise of neutrality.

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Chapter # 15

IDENTITY, RELIGION, AND THE POLITICS OF KHAWA-KHAWAⁱ: ALGERIAN CHILDREN'S PERCEPTIONS OF COEXISTENCE WITH REFUGEESⁱⁱ

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ABSTRACT

This chapter explores how Algerian children sharing spaces with refugee children imagine and negotiate questions of coexistence, belonging, and diversity in a national context marked by colonial memory, religious heritage, and contemporary migration. Drawing on an arts-based participatory study in three public schools in eastern Algeria, it examines how children frame coexistence through everyday practices and moral geographies. Guided by Sociocultural theory and Social-Cognitive Developmental Theory, the chapter considers how children develop understandings in response to their environments and shared narratives. Play emerged as a rich terrain for ethical negotiation, where inclusion was expressed through invitations to games and acts of sharing, and exclusion was marked by denying access to communal spaces. Younger children tended to frame inclusion through immediate, relational gestures, while older children engaged more critically with inherited discourses and structural inequalities. These varied responses invite a closer look at how children's reasoning is shaped not only by developmental factors but also by religious, historical, and national influences. Rather than provide a definitive account, the chapter introduces children's perspectives as complex and evolving, offering insights into how coexistence is imagined, contested, and sometimes resisted within the everyday moral worlds of childhood.

Keywords: children's voices, refugee inclusion, social attitudes, khawa-khawa, co-existence, arts-based-methods.

1. INTRODUCTION

Across regions affected by migration and displacement, scholarship on refugee-host relations has predominantly framed coexistence through institutional and policy lenses, linking it to processes of integration and inclusion focused on service access, social cohesion, and measurable outcomes (Ager & Strang, 2008; Fiddian-Qasmiyeh & Greatrick, 2021) Phillimore, D'Avino, Papoutsi, Strain-Fajth, & Ziss, 2022). Parallel strands of research in social psychology have drawn on contact theory to examine how intergroup interaction can reduce prejudice (Allport, 1954; Lutterbach & Beelmann, 2020; Pettigrew & Tropp, 2006), while sociological perspectives have often conceptualised social connectedness through notions of trust and civic participation (Coleman, 1988; Putnam, 2000). More recent work in migration and refugee studies has turned toward relational and affective approaches that consider how belonging is felt and enacted in everyday life (Hyndman & Giles, 2016; Wise & Noble, 2016; Mahmud, 2021). In some European contexts, studies of conviviality and everyday multiculturalism have similarly shown that encounters between refugees and host communities are mediated by affect, routine interaction, and moral ambivalence, where empathy coexists with exclusion (Cabot, 2023; Gilroy, 2004; Ticktin, 2011; Wise & Noble,

2016). Other studies conducted in Lebanon, and Jordan, similarly highlight how children and families navigate coexistence through informal encounters in schools, neighbourhoods, and care networks that both reproduce and challenge existing hierarchies (Dryden-Peterson, 2016; Hart, 2008; Kamruzzaman, Al-Shanableh, & Albanna, 2025). Yet while much of this scholarship has focused on contexts in the Global North or humanitarian borderlands, far less is known about how coexistence unfolds in North African settings (Norman, 2021; Betts, Stierna, Omata, & Sterck, 2022).

Algeria offers a particularly revealing case, where children's encounters with refugee peers occur within a complex moral and political terrain shaped by colonial memory and state ambivalence. State practices fluctuate between symbolic fraternity and security-driven exclusion. The absence of a clear national asylum framework leaves refugee status determination, particularly for individuals from sub-Saharan Africa, under the mandate of the UNHCR, resulting in a protection regime that is largely informal and precarious (El-Naggar, 2020; Fargues, 2013). Norman (2020) characterises such contexts as embodying politics of "reluctant reception" (p. 341), where hospitality and control coexist uneasily. Access to education and healthcare remains inconsistent, with fear of arrest shaping refugees' mobility and service use (UNHCR, 2024a; 2024b). Civil-society action is similarly constrained by strict association laws, limiting sustained inclusion initiatives (El-Naggar, 2020; Knoll & Teevan, 2020). These ambivalences are inseparable from Algeria's postcolonial nation-building project, in which discourses of solidarity, rooted in the legacy of anti-colonial struggle, continue to inform public attitudes toward migration (Silverstein, 2004). Meanwhile, frequent waves of migration from sub-Saharan Africa and neighbouring countries have introduced new dimensions to the national conversation on identity, borders, and responsibility (Bernard, 2024; Norman, 2020).

Algerian children, growing up amid these layered narratives, often encounter refugee peers in informal and socially mediated ways, particularly within shared public spaces such as markets and neighbourhoods. Schools are rarely among these sites, as enrolment for refugee children remains administratively complex and often restricted. This chapter therefore explores how children and young people in parts of eastern Algeria make sense of these encounters. Rather than focusing on policy or formal integration, the emphasis is placed on how inclusion and exclusion are negotiated in everyday spaces. These moral negotiations, expressed through play, speech, and symbolic practices, offer a unique window into how children process wider social dynamics (Aboud, 2008; Hickey-Moody, Palmer, & Sayers, 2021). By centring children's voices, the chapter contributes to broader debates on refugee inclusion, intergroup relations, and the development of social reasoning in contexts of uncertainty and change.

2. THEORETICAL FRAMEWORK

This study draws on two complementary theoretical perspectives to understand how Algerian children make sense of their interactions with refugee peers: Sociocultural theory and Social-Cognitive Developmental Theory (SCDT). From a Sociocultural perspective, learning and moral development are seen as socially situated processes. Rooted in the work of Vygotsky (1978), this approach emphasises the importance of guided interaction, language, and cultural tools in shaping children's understanding of the world. In the context of this study, public spaces and neighbourhoods serve as key environments where children are exposed to shared values and social norms regarding inclusion, fairness, and identity. These interactions often take place informally and are mediated through everyday practices

such as play, storytelling, and community engagement (Bernard, 2024; El-Naggar, 2020; Hickey-Moody et al., 2021).

In parallel, SCDT offers a developmental lens through which to examine how children's intergroup attitudes change with age and cognitive capacity. Initially formulated by Aboud (1988; 2008) and later expanded by Rutland and Killen (2015), SCDT suggests that younger children tend to rely on visible markers such as skin colour, dress, or language to categorise others. These early distinctions often inform simplistic judgements about fairness or difference. As children grow older, they are increasingly able to incorporate social, historical, and cultural information into their reasoning, allowing for more nuanced understandings of inclusion and exclusion. In contexts like Algeria, where narratives of colonial resistance and national sovereignty are prominent, these developmental trajectories are also informed by collective memory and political discourse (Silverstein, 2004).

The chapter also engages with Islamic ethics of hospitality, particularly Dawn Chatty's (2010) work on the concept of "karam" (generosity) in similar contexts, to contextualise how religious and cultural teachings infuse moral expectations and inform refugee-host relations. These frameworks help to capture the layered and evolving nature of children's attitudes toward refugee inclusion. They provide a means of interpreting how children navigate symbolic boundaries and express their views through culturally embedded practices, particularly in informal settings. By bridging developmental psychology with a sociocultural understanding of learning, the chapter situates children as active meaning-makers within the broader moral and political landscapes of contemporary Algeria.

3. METHODOLOGY

This study adopted an exploratory qualitative design grounded in participatory, arts-based inquiry to examine how Algerian children conceptualise coexistence with refugee peers. The exploratory design offers flexibility in contexts where empirical knowledge is limited, allowing meanings to emerge inductively from children's experiences rather than from predefined hypotheses (Creswell & Poth, 2016; Stebbins, 2001). The arts-based approach provided expressive avenues beyond verbal communication. Drawing and collage invited children to communicate emotion, imagination, and social understanding which are forms of knowledge that are often inaccessible through interviews (Barone & Eisner, 2012; Leavy, 2020; Malchiodi, 2018). These creative processes were followed by focus group discussions, enabling participants to elaborate collectively on the meanings embedded in their artwork and reinforcing the participatory ethos of shared interpretation (Gauntlett & Holzwarth, 2006). Throughout the process, fieldnotes were maintained to document contextual detail, nonverbal interaction, and researcher reflexivity, forming an essential complement to verbal and visual data. Fieldnotes offer a crucial "scaffolding" of context that audio transcripts alone cannot capture (Phillippi & Lauderdale, 2018, p. 382).

Fieldwork was conducted in three public schools in eastern Algeria, each representing a distinct age cohort (5-7, 8-10, and 11 years and above). 60 children participated, with approximately 20 in each school. Data collection took the form of workshops lasting between 90 minutes and 2 hours. Each workshop followed a consistent structure comprising an introduction, drawing activity, collage-making, and a focus group discussion. The visual activities functioned primarily as prompts to stimulate discussion on coexistence and belonging. Open-ended questions, such as "How would you describe your community?" and "What does it mean to live together?", encouraged peer dialogue and collaborative reasoning during the focus group discussions. All sessions were audio-recorded and transcribed verbatim.

Sampling was purposive and criterion-based (Patton, 2015), ensuring variation in age, gender, and exposure to refugee peers. Gender balance was prioritised in the two younger groups, while adolescent participants were predominantly female, reflecting regional patterns of early male withdrawal from schooling for military or vocational training (Laaredj-Campbell, 2023). The region's geographical and historical complexity, situated along the Tunisian border and Mediterranean migration routes to Europe, made it an especially dynamic site of contact between Algerian and refugee communities. The choice of this geographical focus was not intended to generalise attitudes toward refugees across Algeria but to foreground a context that remains underrepresented in existing scholarship, offering insight into children's perspectives within a region rarely examined in the literature.

Data analysis followed reflexive thematic analysis (Braun & Clarke, 2021; Braun, Clarke, Hayfield, Davey, & Jenkinson, 2023). Visual artefacts (drawings, collages) were not analysed directly; instead, analysis centred on the children's verbal interpretations of their images. This strategy aligns with participatory and arts-based principles that seek to avoid adult-imposed readings of children's representations and privilege participants' own accounts of meaning, affect, and intent (Clark & Moss, 2011; Gauntlett & Holzwarth, 2006). Transcripts were repeatedly reviewed and coded inductively to capture both explicit and underlying meanings related to coexistence, inclusion, exclusion and belonging. Codes and themes were refined across age groups to trace developmental and cultural patterns. Reflexive journaling ensured transparency in interpretive decisions and awareness of positionality. The SCDT and the sociocultural theory frameworks informed the data analysis and positioned children's visual and verbal accounts as situated forms of moral reasoning shaped by both developmental and sociocultural conditions.

Ethical protocols adhered to Swansea University's procedures and international standards for child-centred research (Alderson & Morrow, 2020; Harcourt & Sargeant, 2012). Written consent was obtained from parents and schools, and repeated oral assent from children. All activities took place within school grounds under teacher supervision, and participants were reminded of their right to withdraw. The study upheld participatory ethics of respect and reciprocity, positioning children as co-constructors of meaning rather than subjects of inquiry (Christensen & James, 2017; Gallagher, 2008).

4. FINDINGS

4.1. Coexistence as Moral Simplicity and Acts of Playful Inclusion (5-7 Years Old)

Younger children predominantly framed coexistence through acts of inclusion anchored in Islamic teachings. Many of their drawings depicted mosques as welcoming spaces, often showing people gathered outside as symbols of togetherness. These visual representations prompted focus group discussions around the strong internalisation of religious messages about compassion and unity. The children who drew mosques were all boys, which may reflect gendered patterns of early religious socialisation, as boys are more likely to attend mosques with their fathers from a young age. The mosque, along with the concept of Muslim brotherhood or Unity, emerged in these drawings as a key representation of coexistence. For example, in Figure 1, Emyr drew two children standing beside an Algerian flag in front of a mosque. He wrote, "I went with my friend Leith to the mosque to perform Friday prayers". Leith is drawn with a different skin colour, signifying his status as a refugee according to Emyr's interpretation of his drawing.

Figure 1.
Mosques as shared spaces for co-existence (Emyr, age 6).



When confronted with questions about societal and religious diversity, younger children predominantly embraced it. They often shifted their imagery from mosques to football terrains as inclusive and neutral spaces where diversity could be comfortably accommodated through play. This was particularly evident in drawings explicitly inviting refugee children to join football games to prevent feelings of exclusion or sadness. Figure 2 below captures a dialogue among children considering inviting a *newcomer*. This interaction highlights children's active consideration of inclusion through everyday play.

Figure 2.
“Football gathers us” (Murad, age 7).



Murad captioned his drawing: “No to racism. Yes to humanity. Football gathers us”. The speech bubbles translate as follows:

Child on left: “I wish I could play with them”

Child in middle: “Shall we invite that kid to play with us?”

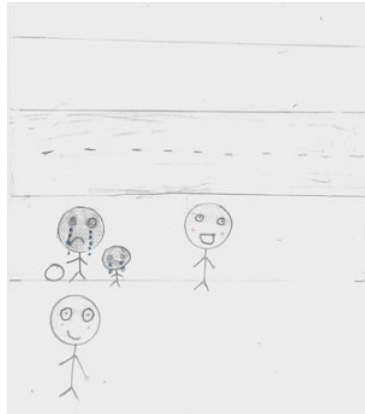
Child on right with the ball: “Yes, we will let him play with us so he does not feel sad”.

Similarly, in figures 3 and 4, Rami and Omar show a refugee child represented as sad and distinctively coloured, highlighting the children's sensitivity to emotional and visual markers of difference.

Figure 3.
"I wish you [all] a happy and fun life" (Rami, age 7).



Figure 4.
Sad and happy faces (Omar, age 5).



While football often featured in depictions of inclusion among boys, girls expressed similar values through different forms of play. Their drawings frequently illustrated rope-skipping and the traditional Algerian game *buff*ⁱⁱⁱ, highlighting a gentler mode of interaction where inclusion was communicated through cooperation and shared enjoyment. Sana's and Rula's drawings shown in figures 5 & 6, underscore the principles of kindness and solidarity through gendered play practices. In children's play invitations, boys tended to include male refugee peers, while girls extended invitations to female refugee peers,

reflecting both religious and cultural norms of gendered interaction and the social boundaries that shape children's everyday moral reasoning. Across these depictions, play emerged as a moral language through which empathy and fairness were enacted and understood.

Figure 5.
 "...and suddenly a girl from Niger joined us..." (Sana, age 6).



Figure 6.
Rope-skipping with a girl from Mali. (Rula, age 6).



These expressions of play reinforced broader moral values, particularly around empathy and fairness. Alongside these affirmations of inclusion, children also used their drawings to address the obstacles to coexistence, most notably, bullying. Several illustrations reflected moral teachings learned from teachers and parents, often linking acts of exclusion to broader ethical concerns. For instance, in figure 7, Wafa drew three girls with different skin colours, accompanied by the caption: “We never bully one another because God created each person with the colour of their skin”. This drawing along with the discussion around it, explicitly links anti-bullying messages to religious principles of equality and dignity.

Figure 7.
Anti-bullying message emphasising equality (Wafa, age 5).



This theme is developed further in Figure 8 below, which presents a dialogue explicitly addressing racial bullying and concluding with an ethical appeal to Islamic teachings:

Figure 8.
Scenario addressing racial bullying (Amna, age 7).



Amna added speech bubbles to her drawing, which translate as follows:

Girl on the left: "I want to play with you".

Girl in the middle: "No, no, she is black".

Girl on the right: "There is no need to mock. Yes, you are welcome with us. My religion taught me not to mock others, because there is no difference between white and black except in piety and good deeds".

Beyond challenging exclusion, many children also expressed proactive care and emotional solidarity with refugee peers. Acts of kindness and compassion were visibly articulated, highlighting empathy as a central value in their moral worlds. Figure 9, for instance, includes a heartfelt message shared by Yumna: "I wish you happiness and warmth in the winter". She explained that she offered oranges to the sad-looking refugee child to help them feel happy and warm during the cold season, describing this gesture as an act of coexistence and care.

Figure 9.
"I wish you happiness and warmth in the winter" (Yumna, age 7).



4.2. Emerging Social Awareness and Historical Reflection (8-10 Years Old):

Drawings by children in this group expressed a deepening sense of empathy, often infused with both religious values and emerging awareness of social dynamics such as exclusion, bullying, and disability. While Islamic values of compassion and hospitality remained a moral anchor for many, these were accompanied by growing concerns about identity, community safety, and belonging. Figure 10 below features a scene of refugee arrival. The caption reads: "Refuge is painful feeling. My picture represents the feeling or the state of refugees in a country and land that is not theirs, and at the same time it shows us the kindness of the Algerian people toward refugees". It blends acknowledgement of the emotional hardship of displacement with an appreciation of local hospitality.

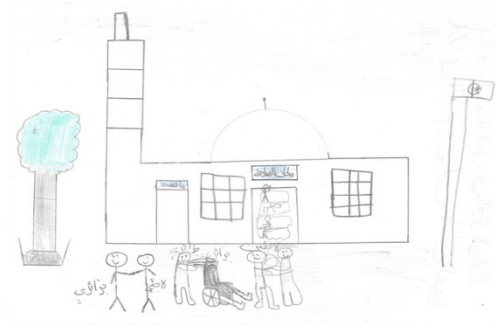
Figure 10.
"Refuge is painful" (Leena, age 8).



Building on this empathetic framing of refugee arrival, the following drawing in figure 11 shifts the focus from the emotional experience of displacement to the everyday visibility of diversity within shared communal spaces. It depicts a mosque with a group of figures standing outside, among them individuals who appear to have physical disabilities.

The characters are labelled, from left to right: *Algerian, refugee, Algerian, Algerian, two refugees*. This labelling suggests a more nuanced understanding of coexistence, where difference is not only defined by refugee status but also by physical ability. Notably, the refugee figure in this and other drawings from the same age group is not depicted with a different skin colour, potentially suggesting a shift away from racialised distinctions. By portraying the mosque as an inclusive space, Ahmed extends the principles of hospitality and belonging, previously tied to national and religious identity, toward a wider ethic of care. Here, coexistence becomes not just about accepting those from other places, but also about recognising and respecting the diverse needs and bodies that make up the community.

Figure 11.
Expanding the circle of acceptance (Ahmed, age 7).



As children's representations of coexistence became more socially attuned, some turned their attention to the barriers to inclusion found not only in physical spaces, but also in peer dynamics and digital environments. Several drawings in this group directly addressed bullying, reflecting a growing sensitivity to the ways in which difference, particularly in relation to race, body image, and visibility, is policed and stigmatised among children. Figure 12 below offers a clear ethical stance through the caption: "No to bullying, we were all created from the same clay", accompanied by diverse figures with different skin tones, body shapes, and facial expressions. This visual narrative presents a universalist message, rooted in shared humanity and moral equality.

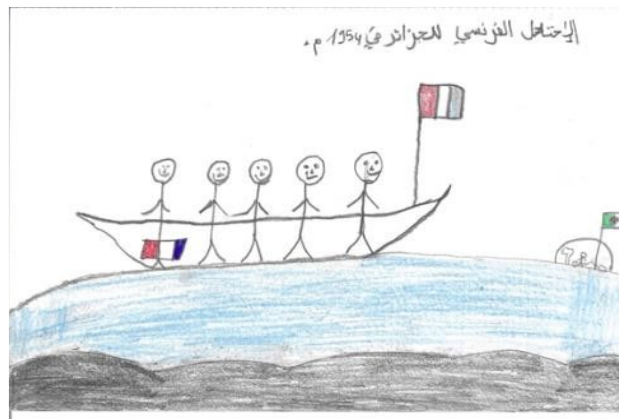
Figure 12.
"No to bullying, we were all created from the same clay" (Rami, age 9).



Alongside their growing interpersonal awareness, some children also drew on historical and nationalist narratives to make sense of refugee displacement. In this age group, references to Algeria's colonial past, particularly the Algerian war for independence (1954-1962), surfaced in several drawings and group discussions, revealing how collective memory informed their moral reasoning. During the focus groups, some children expressed fears that the arrival of refugees might bring conflict into Algeria, rendering the country vulnerable to instability or even recolonisation. These anxieties reflected a belief that war travels with displaced people, and that Algeria, having already endured the trauma of colonial rule, might once again become a target.

For others, the legacy of the War of Independence was interpreted as a moral benchmark: just as Algerian ancestors had stayed to resist foreign occupation, they believed refugees should remain in their own countries and fight for liberation. Several children explicitly discussed that refugees should “stay and fight”, linking their exclusion to Algerian ideals of self-determination and sacrifice. The drawing presented in Figure 13 offers a visual representation of French colonisation, depicted without detailed explanation but strongly resonant with the nationalist sentiment expressed in the discussions.

Figure 13.
The French colonisation (1954) (Ameen, age 9).



Children in this age group also displayed a more structured approach to social and political challenges. Their contributions often resembled mini-projects that identified problems, explained causes, and proposed solutions. Topics such as drug-use in schools and the ongoing Palestinian struggle for justice and freedom, were brought forward with striking conviction. In one instance, a child used the term “Djaza-estine”, a creative fusion of “*Djazair*” (Algeria) and “*Falastine*” (Palestine), to express a sense of shared struggle and solidarity. This conceptual innovation illustrates the group's capacity to synthesise complex ideas across national and cultural boundaries.

Figure 14.
Visual Case Studies of Conflict, Struggle, and Solidarity (Shams, age 9).

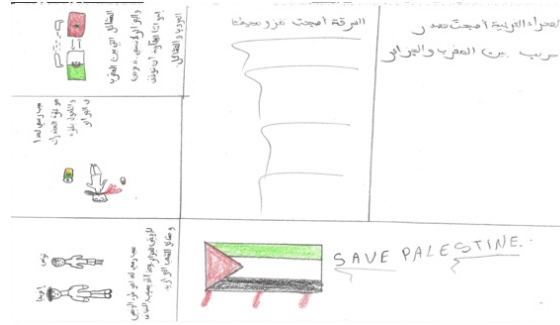
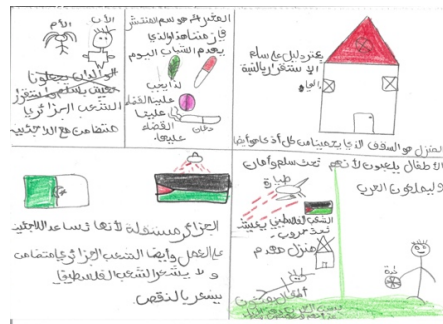


Figure 15.
Drawings of community, struggle, and hope (Walid, age 10).



4.3. Adolescents' Reflections on Co-existence (11+ Years Old):

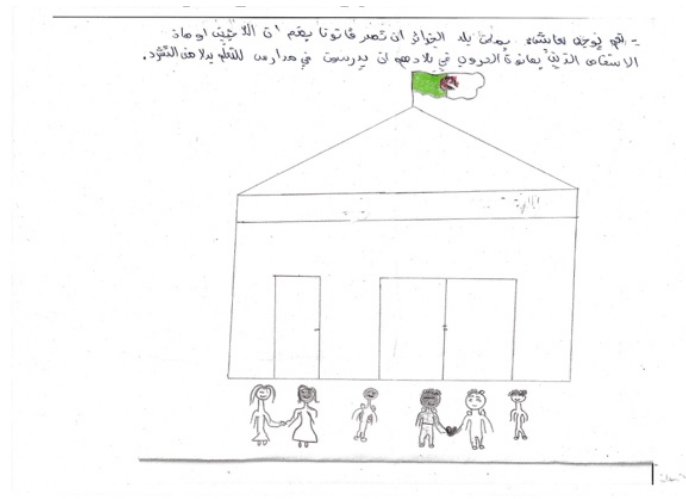
Adolescents participating in the study demonstrated a marked increase in critical consciousness, drawing upon complex moral, political, and religious ideas to articulate their understandings of co-existence. Their contributions, mostly verbal, were notably analytical and, at times, self-reflective or contradictory, engaging with local, national, and global contexts. Adolescents in this group expressed acute awareness of the moral dissonance between Islamic teachings and their lived realities. While earlier age groups often used religious principles to advocate for inclusion, adolescents questioned the consistency between such ideals and the treatment of refugees within Algerian society. They pointed to discrepancies between Islamic values of “*rahma*” (compassion), “*karam*” (generosity) and “*ukhuwwa*” (brotherhood) and the exclusionary practices observed by individuals in markets, neighbourhoods, and public institutions. Themes of structural inequality and denied access were particularly prominent among this group. Participants identified limited access to education, healthcare, and employment as critical obstacles preventing meaningful integration for refugees.

Figure 16 depicts a public library as a site of coexistence, where 2 figures referred to in the picture as *Black* and *White* stand together, referring to an explicit commitment to racial inclusion and cultural plurality. Figure 17 presents a public school, with a caption linking access to education to the prevention of homelessness for refugees.

Figure 16.
Institutions, Access, and the Boundaries of Belonging (Asia, age 15).



Figure 17.
Appeal for refugee children's right to education (Isa, age 16).



Young people in this group also began to interrogate the moral and cultural ideals that had shaped their earlier understandings of coexistence. One such ideal was the concept of khawa-khawa “brothers, brothers”, which, while celebrated by younger children as a symbol of religious brotherhood, was approached with greater scrutiny by older participants. Rather than accepting it as a given, adolescents questioned its practical application. Several

participants questioned whether this sense of brotherhood extended to all Muslims, only Arabs, or only Algerians, and whether it could truly be inclusive when institutional practices appeared to contradict it. In focus group discussions, khawa-khawa and Muslim brotherhood were described as ideals that are widely professed but rarely enacted, revealing adolescents' growing awareness of the dissonance between moral discourse and social reality.

Figure 18.
The politics of khawa-khawa (Ousama, age 16).



5. DISCUSSION

5.1. Play as a Moral Landscape

For younger children, play was the primary mode through which coexistence became visible and tangible. In this sense, play operated not merely as recreation but as a developmental and moral space, a dynamic process through which children construct meaning, rehearse social relationships, and explore moral possibilities, an understanding that underscores the need to attend to children's own perspectives on play as contextually situated and creatively expressive (Howard, 2020; Whitebread et al., 2017). Football and traditional playground activities served as inclusive spaces where the presence, or absence, of refugee peers was keenly felt. Their moral logic aligned with early stages of SCDT: perceptual cues like skin colour or sadness were noted but not necessarily interrogated. Instead, difference was met with concrete gestures, such as inviting others to play, what Aboud (1988) frames as affect-driven moral action rooted in fairness, empathy and generosity. These acts were not politically naive. As Hart (2008) and Doná & Veale (2022) note, children use everyday encounters to reconfigure social boundaries. Here, mosques and playgrounds operated as "moral laboratories", where Islamic teachings and peer norms intersected with embodied experiences of inclusion.

5.2. Gendered Dimensions of Moral and Spatial Inclusion

Children's expressions of inclusion were similar in intent but gendered in form. Boys depicted coexistence through football and mosque attendance, public, performance-oriented arenas, while girls centred cooperative games such as rope-skipping or *buff*, where inclusion was communicated through care and turn-taking. This mirrors playground ethnographies showing that children learn and police gender through spatially distinct game cultures (Corsaro, 2012; Thorne, 1993), with football fields operating as masculine moral territories of visibility and contest and skipping circles as relational spaces where fairness and coordination are rehearsed. Religious exposure reinforced these patterned moral geographies. Boys frequently referenced Friday prayers with fathers, aligning coexistence with public religiosity; girls did not mention mosques, locating moral practice mostly in domestic play. This aligns with jurisprudential and sociological accounts: men are strongly expected to attend prayers in congregation, whereas women's attendance is welcomed but not required, and in many settings practically less accessible (Megahed, 2022). In our data, that obligation produced a male-coded moral apprenticeship in mosque space, while girls' ethical imagination developed in relational domains.

5.3. Moral Development and Social Awareness

As older groups of children were engaged, their reasoning about coexistence shifted from relational immediacy to broader social awareness. Middle childhood brought with it a more deliberate engagement with ethical contradictions and group dynamics. While invitations to play continued, they were increasingly accompanied by questions around loyalty, safety, and belonging. This transition reflects the developmental coordination that SCDT highlights, wherein children learn to negotiate tensions between moral ideals and social conventions (Killen & Rutland, 2011; Rutland & Killen, 2015). Yet rather than representing a universal cognitive progression, the Algerian case shows how this coordination is profoundly shaped by cultural and historical context. The emergence of colonial history, religious duty, and national pride in the reasoning of older children shows how individual cognition becomes increasingly shaped by macro-level narratives. Comparable studies have observed similar culturally embedded moral coordination, where children's judgments draw simultaneously on moral, social, and group-identity domains (Abrams & Killen, 2014; Chatty, 2010; Nesdale, 2017).

The data revealed that Algerian national identity and colonial memory served as powerful moral frameworks through which older children interpreted the legitimacy of refugee presence. References to the War of Independence were frequent, with some echoing adult discourses that refugees should "stay and fight in their country like we did". Children were mobilising collective moral vocabularies rooted in postcolonial history, national pride and religious discourse. This extends Silverstein's (2004) argument about postcolonial nationalism shaping imaginaries of belonging into the realm of childhood, showing that these narratives are already embedded within pre-teens' moral reasoning. Consistent with sociocultural theory (Rogoff, 2003; Vygotsky, 1978), their judgments did not emerge in isolation but drew on local histories, political slogans and Islamic ethics of compassion and responsibility (Chatty, 2010). Together, these insights suggest that while SCDT helps explain the developmental structure through which children coordinate moral and social concerns, sociocultural theory illuminates the cultural content of that reasoning, demonstrating how Algerian children's moral awareness is shaped through the interplay of age, history and faith.

5.4. Identity and the Expansion of Moral Horizons

For the adolescent group, questions of coexistence were filtered through more complex identity work. Unlike younger children, who grounded inclusion in immediate relationships and shared play, adolescents drew on broader social, religious and political categories when making sense of refugee presence. Their discussions revealed an active interrogation of inherited identity labels. Questions such as Are we Arabs? Muslims? Africans? highlighted how continental, religious and national affiliations were mobilised differently to include or exclude. This mirrors Bernard's (2024) findings that young people in North Africa experience identity not as fixed, but as plural, layered and continually negotiated. Alongside these debates around identity, adolescents, also displayed a growing capacity for moral abstraction and transnational empathy. The use of terms like "Djaza-estine" exemplifies their ability to synthesise local and global struggles into shared narratives of injustice. This finding echoes research by Hickey-Moody et al. (2021), who argue that children are not only capable of moral learning but also of moral innovation. Through such expressions, young people demonstrated the potential to move from a framework of coexistence based on proximity or sameness to one rooted in solidarity, shared struggle, and ethical imagination. Together, these insights show how adolescence marked a shift from concrete moral practices to more abstract, politically attuned reasoning. The interplay of identity, history and global consciousness enabled young people to move beyond proximity-based inclusion towards more reflective forms of moral alignment.

5.5. Politically-charged Ethics of Brotherhood & Inclusion

One recurring theme across all age groups was the invocation, and problematisation, of khawa-khawa (brotherhood). Younger children adopted it as a moral slogan, often accompanying their drawings with captions like "A Muslim is a brother of a Muslim". In contrast, adolescents approached the concept with critical distance. Their interrogation of whether khawa-khawa truly applied to refugees reflected an emergent moral consciousness that both absorbed and challenged prevailing discourses. This echoes Mahmood's (2005) notion of ethical agency, where individuals negotiate the distance between moral ideals and social reality. Adolescents' remarks such as "It's a word we hear, not what we live" expose the performative nature of public ethics and reflect young people's growing awareness of hypocrisy in adult discourse. These debates around khawa-khawa did not unfold in isolation but were continually shaped and tested within the everyday spaces where inclusion and exclusion were enacted.

While policies and political discourses undoubtedly shape the broader context, this study confirms that co-existence is negotiated in ordinary spaces, mosques, streets, and especially playgrounds. These spaces were not neutral backdrops but active stages where social hierarchies were enacted, resisted, and sometimes reimaged. As the children's artwork and conversations revealed, play was both a method of moral expression and a site where inclusion could be felt, practiced, and withheld. In this regard, the findings strongly affirm Doná and Veale's (2011) assertion that children's social worlds are ordinary and politically charged. While younger children used play to construct belonging, older children used discussion and drawing to contest or complicate it.

5.6. Future Recommendations

Taken together, these findings suggest a number of directions for practice and research that could further cultivate inclusive moral reasoning and everyday coexistence.

- Future work could build on the findings of this study by examining how ordinary contexts such as playgrounds and other public spaces in host

communities might be more intentionally designed to cultivate ethical engagement and inclusive belonging.

- At a practical level, efforts to foster coexistence should adopt age-sensitive and contextually grounded approaches. Younger children in this study conveyed inclusion through immediate acts of empathy and invitation, whereas older participants mobilised moral vocabularies rooted in religion and national history. Interventions should therefore align with developmental capacities: for younger children, mixed play opportunities and rule-light cooperative activities can facilitate encounters between host and refugee peers; for adolescents, dialogue-based programmes linking cultural and religious values to everyday practices of fairness can help translate moral ideals into action.
- Inclusion initiatives must also ensure gender-responsive access to spaces and recognise that moral expression is shaped by gendered forms of agency. As Mahmood (2005) and Paechter (2007) note, both public forms of solidarity and relational practices of care constitute meaningful moral engagement. Future research could extend this inquiry by examining how gendered access to religious and recreational spaces informs children's moral and social reasoning in other postcolonial and Muslim-majority settings.
- Future research could extend this work through comparative studies across different Algerian regions, particularly those hosting refugees from diverse national and cultural backgrounds. Such comparisons would illuminate how local histories, linguistic environments, and religious traditions shape children's moral reasoning about coexistence. Examining how younger children interpret differences such as skin colour or faith, as both distinctions and possible points of connection, would deepen understanding of how inclusivity and belonging are imagined in varied sociocultural settings.

6. CONCLUSION

This chapter set out to explore how Algerian children imagine and negotiate coexistence with refugee peers who share their community spaces. Algeria, shaped by religious values, postcolonial legacies, and shifting demographics, offers a complex and important context for such inquiry. Rather than producing a singular or unified answer, the children's narratives reveal coexistence as a fluid and contested process, shaped by developmental stage, everyday interactions, and access to shared moral vocabularies. What emerges most clearly is that young children do not engage with refugee peers through abstract concepts such as "integration" or "diversity", but through lived, embodied encounters, through games, spaces, stories, and visual representations. These interactions often take place in informal settings such as playgrounds, where social boundaries are both made visible and open to negotiation. Children enter these spaces carrying inherited moral frameworks, but they also test, stretch, and at times subvert them, sometimes reinforcing group loyalties, and at other times imagining solidarities that adults have not yet realised. Rather than offering a prescriptive account of how children should behave, this chapter has foregrounded the ways in which children themselves make sense of difference. These perspectives are often contradictory, occasionally exclusionary, but just as often generous, surprising, and ethically imaginative. This complexity resists reductive narratives of either childhood innocence or mimicry of adult ideologies. Instead, it positions children as active participants in the moral and political life of their communities, capable not only of absorbing social discourses but also of interrogating and reworking them. This Algerian case study forms part of a wider

global initiative examining how children in different socio-political and cultural contexts conceptualise coexistence. Comparative data from additional sites, each marked by distinct intersections of migration, history, and identity, will further illuminate how children's experiences of coexistence are shaped not only by age, but by environment, context, and exposure to diverse social norms. Together, these studies aim to develop a richer, more situated understanding of how children worldwide navigate the ethical and emotional demands of living with difference.

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ⁱ "Khawa-khawa" (خاوة خاوة) is a colloquial Algerian expression meaning "brothers, brothers" or, more broadly, "we are all brothers". Rooted in values of solidarity, unity, and shared identity, it is commonly used in everyday speech to affirm collective belonging. In the context of this study, it signifies a culturally specific discourse of coexistence and moral obligation, particularly as it relates to inclusion, difference, and the ethics of living together.

ⁱⁱ This chapter is an extension of a paper first presented at InPACT 2025 and subsequently published in the conference proceedings (Boukhari & Howard, 2025). It expands the original analysis by offering a deeper examination of children's perspectives on coexistence with refugees in Algeria. In doing so, it builds on a growing recognition of the need to engage with children not merely as passive recipients of adult ideologies but as active social participants whose interpretations of inclusion, difference, and community carry meaningful social and ethical weight (James & Prout, 1997; Hart, 2008).

ⁱⁱⁱ Buff is a game played in Algeria, mostly by girls, involving a soft ball made from old fabric or socks tied together with plastic bands. Players take turns throwing the ball while others try to avoid being hit.

^{iv} In Islamic tradition, the Qur'an describes humans as being created from clay, symbolising shared origin and inherent equality. The child drew on this religious understanding to express that message of equality (Figure 12).

Section 4

Health Psychology

Chapter # 16

THE JAPANESE VERSION OF THE BRIEF RESILIENCE SCALE

Translation, Reliability and Construct Validity

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ABSTRACT

Resilience as a positive psychological construct has recently attracted considerable attention. However, a consensus on the definition of resilience has not yet been reached; as a result, numerous measures have been developed to address this concept. This study examined the reliability and construct validity of a new Japanese translation of the Brief Resilience Scale (BRS-J) to assess the ability to bounce back or recover from stress, an important conceptualization shared by many definitions of resilience. Data were collected from 276 college students in Japan (40.1% women; mean age 20.81 years, SD = 0.67). Although exploratory factor analysis revealed a one-factor structure with all items, confirmatory factor analysis supported a bifactor structure with a general resilience factor and a method factor for negatively worded items. The internal consistency reliability and test-retest reliability over a 1-month period were good. Construct validity was supported by the hypothesized correlations with scores for three types of dispositional coping, grit, hedonic and eudaimonic well-being, perceived stress, depression, and anxiety. These preliminary findings support the idea that the BRS-J is a valid measure of resilience among Japanese-speaking people.

Keywords: resilience, brief resilience scale, Japanese version, reliability, construct validity.

1. INTRODUCTION

1.1. The Concept and Definition of Resilience Today

Resilience has long been used in various disciplines and practices (Herrman et al., 2011; Hiebel et al., 2021; Cutuli, Herbers, Masten, & Reed, 2021; Sisto et al., 2019). Within this context, the concept of resilience as a positive psychology construct, which refers to positive adaptation to adversity (Chmitorz, et al., 2018a; Price, 2023; Sánchez, Estrada-Hernández, Booth, & Pan, 2021; Vella & Pai, 2019), has received increasing attention from researchers, practitioners, and policy makers. It has generated considerable research in different academic disciplines over the past couple of decades (Denckla et al., 2020; Fletcher & Sarkar, 2013; Masten, Lucke, Nelson, & Stallworthy, 2021; Salisu & Hashim, 2017; Stainton et al., 2019), driven by a shift from disease-oriented to health-oriented research (Kalisch et al., 2017; Ungar & Theron, 2019; Vella & Pai, 2019; Windle, 2011). Numerous reviews of the literature on resilience have theoretically and empirically substantiated its potential impact on health and well-being (Hiebel et al., 2021; Judijanto, 2025; Sisto et al., 2019; Stainton et al., 2019; Windle, 2011).

However, most of these literature reviews have highlighted a lack of consensus on the definition and conceptualization of resilience (e.g., Denckla et al., 2020; Luthar, Cicchetti, & Becker, 2000; Troy et al., 2023; Vella & Pai, 2019). Many researchers have underlined the complex nature of resilience (Judijanto, 2025; Sisto et al., 2019; Southwick, Bonanno,

Masten, Panter-Brick, & Yehuda, 2014) and proposed different definitions in many contexts (Hiebel et al., 2021; Jones, 2019; Sisto et al., 2019) and manifold theories (e.g., Fletcher & Sarkar, 2012; Fullerton, Zhang, & Kleitman, 2021; Liu, Reed, & Girard, 2017). Moreover, there are several types of resilience in diverse contexts, including psychological, academic, organizational, team, and emergent (Southwick et al., 2014). Numerous studies have revealed different aspects or dimensions of resilience and various factors that affect it such as contextual, individual, and social factors (Fletcher & Sarkar, 2013; Hiebel et al., 2021).

Researchers have conceptualized resilience in various ways, including traits, states, outcomes, and processes (Herrman et al., 2011; Pangallo, Zibarras, Lewis, & Flaxman, 2015). Generally, the definition of a concept evolves as scientific knowledge expands (Herrman et al., 2011). Resilience is no exception to this trend (Sisto et al., 2019). In early research, the adapted conceptual approach to resilience tended towards a trait-oriented approach, which primarily conceptualized resilience as a personal trait. Subsequent research, however, proposed and utilized an outcome- or process-oriented approach that considers resilience by focusing on outcomes or processes (Hiebel et al., 2021; Jacobs & Horsch, 2019; Luthar et al., 2000; Pangallo et al., 2015). Research interest has shifted from static and stable traits to dynamic interactions with environmental and systemic factors (Chmitorz, et al., 2018a; Denckla et al., 2020; Herrman et al., 2011; Judijanto, 2025). Moreover, although the concept of resilience has been questioned owing to its ambiguity (Jones, 2019), there is a consensus on the core components of resilience underlying various definitions: adversity or risk, assets or resources to protect individuals, and positive adaptation (Fletcher & Sarkar, 2013; Stainton et al., 2019; Windle, 2011).

The ambiguous definition of the construct adversely affects its research, including impediments to shared definitions, comparisons of research results, and objective measurements (Fletcher & Sarkar, 2013; Stainton et al., 2019; Troy et al., 2023). Problems with the definition of resilience may impede the validity and progression of research involving resilience (Hiebel et al., 2021; Sisto et al., 2019). It is likely that many researchers share a way of conceptualizing (outcome- or process-oriented) the core components (adversity, assets, and positive adaptation) of resilience. Nonetheless, its conceptual ambiguity remains; thus, an essential comprehension of resilience is not yet sufficient (Hiebel et al., 2021; Sisto et al., 2019). A debate on the concept and definition of resilience is ongoing (Bardoel & Drago, 2021; Bertsia & Poulou, 2023; Denckla et al., 2020; Sisto et al., 2019).

1.2. Measures of Resilience

Heterogeneity in the definition of resilience has resulted in the development of numerous measures (Bonanno, Romero, & Klein, 2015; Chmitorz, et al., 2018a; Hiebel et al., 2021; Kalisch, Muller, & Tuscher, 2015; Stainton et al., 2019). Reflecting on the lack of consensus on its definition, there is no consensus among researchers regarding its measurement (Denckla et al., 2020; Salisu & Hashim, 2017; Troy et al., 2023; Vella & Pai, 2019). This lack of consensus on measurement has also been observed in other latent psychological constructs (Pangallo et al., 2015).

Most existing measures of resilience focus on either resilience as a personality trait or resilience factors (e.g., self-efficacy and social support) that modify the impact of adversities on mental health (Chmitorz, et al., 2018a). Among the scales repeatedly used in past studies (Chmitorz, et al., 2018a; Pangallo et al., 2015; Windle, Bennett, & Noyes, 2011), the Resilience Scale (Wagnild & Young, 1993) was developed in earlier phases. This 25-item measure was designed to rate resilience as a stable personality trait (Chmitorz, et al., 2018a) and comprises the two dimensions of personal competence and acceptance of self and life. The Connor-Davidson Resilience Scale (Connor & Davidson, 2003), which has also been

frequently used in research, is a 25-item measure with five subscales used to assess the availability of various resilience factors (Chmitorz, et al., 2018a). A 10-item short form of this scale, the Connor-Davidson Resilience Scale 10 (Campbell-Sills & Stein, 2007), is a unidimensional measure that assesses the ability to bounce back from various negative experiences. As a resilience measure designed for adolescents, the Resilience Scale for Adolescents (Hjemdal, Friborg, Stiles, Martinussen, & Rosenvingeet, 2006) is a 28-item measure to assess five resilience factors (e.g., personal competence and social resources). The Resilience Scale for Adults (Friborg, Hjemdal, Rosenvinge, & Martinussen, 2003), a 33-item scale designed for adults, assesses five resilience factors (e.g., personal structure and social support).

1.3. The Brief Resilience Scale

Apart from these measures of resilience, another frequently used measure is the Brief Resilience Scale (BRS; Smith et al., 2008), a brief self-report measure developed to assess the ability to bounce back or recover from stress. The BRS is the only measure that assesses resilience dynamically as the ability to bounce back (Hiebel et al., 2021). This ability is considered the closest to the original and most basic meaning of the term “resilience” (Smith et al., 2008) and an important conceptualization shared by many of the existing definitions of resilience (Bonanno et al., 2015; Herrman et al., 2011; Hiebel et al., 2021; Vella & Pai, 2019), including the American Psychological Association’s definition (American Psychological Association, 2014). Emphasizing this ability allows for the differentiation of resilience from related concepts such as adaptation, thriving, and stress resistance (Jacobs & Horsch, 2019; Smith et al., 2008).

BRS consists of six items (e.g., “I tend to bounce back quickly after hard times.”), which include three reverse-scored items, responded on a 5-point Likert scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). The scale scores are calculated based on the mean of the six items. Higher scores indicate greater resilience, which is a greater ability to bounce back from stress. BRS has good psychometric properties (Pangallo et al., 2015) and has been evaluated as the best measure in a systematic review to assess the psychometric rigor of existing resilience measures (Windle et al., 2011). It has been translated and widely used in many languages, including French (Jacobs & Horsch, 2019), German (Chmitorz, Wenzel et al., 2018b), Dutch (Soer et al., 2019), Spanish (Rodríguez-Rey, Alonso-Tapia, & Hernansaiz-Garrido, 2016), Turkish (Haktanir, Lenz, Can, & Watson, 2016), Arabic (Baattaiah, Alharbi, Fayaz Khan, & Aldhahi, 2023), Chinese (Lai & Yue, 2014), Korean (Kim et al., 2023), and Japanese (Tokuyoshi & Moriya, 2015).

The results of the initial validation study with four separate samples (Smith et al., 2008) showed that BRS had a one-factor structure obtained using exploratory factor analysis and adequate internal consistency reliability (Cronbach’s α s = .80 to .91). The test-retest reliability over 1 month for one sample and over 3 months for another sample was adequate (intra-class correlations = .69 and .62, respectively). Among some or all samples, convergent validity was supported through significant correlations with scores for optimism, pessimism, purpose in life, alexithymia, social support, negative social interactions, various coping strategies, and health outcomes, including perceived stress, anxiety, depression, positive and negative affect, physical symptoms, fatigue, and pain. These correlations were positive for positive constructs, such as optimism, and negative for negative constructs, such as anxiety.

BRS scores were highly correlated with scores on other resilience measures (r s = .49 to .59), such as the Connor-Davidson Resilience Scale (Connor & Davidson, 2003) and the Ego Resiliency Scale (Block & Kremen, 1996). However, even after controlling for scores on the two resilience measures or scales of resilience resources (e.g., optimism and social

support), BRS scores were significantly correlated with scores for several health outcomes, supporting discriminant predictive validity. In addition, BRS scores also showed utility in distinguishing between healthy and clinical samples, including patients with fibromyalgia and those undergoing cardiac rehabilitation.

The existing Japanese version of the BRS (Tokuyoshi & Moriya, 2015) also showed adequate reliability and validity including unidimensionality using exploratory and confirmatory factor analyses, internal consistency (Cronbach's $\alpha = .86$ and coefficient $\omega = .87$), and construct validity based on correlations with scores for coping strategies, life satisfaction, and personal growth initiative (Tokuyoshi & Moriya, 2015). In addition, the Japanese version yielded appropriate results from item response theory analyses for scale items and showed high correlations ($r = .57$) with scores on the Japanese version of the Ego Resiliency Scale (Block & Kremen, 1996; Hata & Onodera, 2013). However, the Japanese version contains a few inaccurate translations. BRS is regarded as a useful and excellent measure for assessing resilience and has been adopted in various countries and regions worldwide. Therefore, developing an appropriately translated Japanese version would significantly contribute to resilience research and practice in the Japanese population.

The original English and Japanese versions of the BRS confirmed the one-factor structure as hypothesized (Smith et al., 2008; Tokuyoshi & Moriya, 2015). However, the results of the exploratory factor analysis supported both the one- (e.g., Jacobs & Horsch, 2019; Lai & Yue, 2014; Sánchez et al., 2021) and two-factor structures represented by positively and negatively worded items (e.g., Ahmad Sabki et al., 2023; Baattaiah et al., 2023; Soer et al., 2019). Furthermore, factor structures obtained from confirmatory factor analysis of other non-English versions were inconsistent, with variations including a one-factor structure (e.g., Jacobs & Horsch, 2019; Haktanir et al., 2016), one-factor structure with method effects on negatively worded items (e.g., Furstova, Kascakova, Polackova Solcova, Hasto, & Tavelet, 2021), correlated two-factor structure (e.g., Baattaiah et al., 2023; Soer et al., 2019), two-factor structure with a higher-order factor representing resilience (e.g., Rodríguez-Rey et al., 2016; Kim et al., 2023), bifactor structure consisting of a general factor of resilience and a method factor for negatively worded items (e.g., Chmitorz, et al., 2018b; Broll et al., 2024), and bifactor structure consisting of a general factor of resilience and two method factors for negatively and positively worded items (e.g., Hidalgo-Rasmussen & González-Betanzos, 2019; Sánchez et al., 2021). In these factor structures, the correlated two-factor and two-factor structures with a higher-order factor were mathematically equivalent (Duckworth, Quinn, & Tsukayama, 2021; Muenks, Wigfield, Yang, & O'Neal, 2017). Moreover, the two-factor and method factors reflect the positive (items 1, 3, and 5) and negative (items 2, 4, and 6) wording of the BRS items. Although this wording serves to mitigate acquiescence bias (Baattaiah et al., 2023), it induces a wording effect (Gu, Wen, & Fan, 2017; Xu & Leung, 2016; Yang & Jones, 2008), thereby rendering these specific factor structures (Ahmad Sabki et al., 2023; Baattaiah et al., 2023; Broll et al., 2024; Rodríguez-Rey et al., 2016). Most previous studies have identified the wording effect rather than the construct of resilience as the source of these factor structures and, as such, have not developed subscales of the BRS based on these findings. Furstova et al. (2021) supported a one-factor structure with method effects but did not test the bifactor structure. Furthermore, these distinctions in the factor structure of the BRS may stem from the target cultures or populations (Jacobs & Horsch, 2019; Sánchez et al., 2021). In addition, several studies (e.g., Coelho, Cavalcanti, Rezende, & Gouveia, 2016; Minh Nguyen, Tran, & Hoang Le, 2023) removed Item 5 ("I usually come through difficult times with little trouble.") on the BRS because of low factor loading of the item.

1.4. Purpose of the Study

This study aimed to translate the BRS into Japanese (BRS-J) and evaluate its reliability and construct validity using data collected from Japanese college students. By examining the reliability and construct validity of the BRS-J, this study seeks to provide a valuable tool for researchers and practitioners working with the Japanese population in resilience research. Based on previous studies, it was expected that the exploratory factor analysis of the BRS-J would identify one (e.g., Jacobs & Horsch, 2019; Smith et al., 2008) or two factors (e.g., Baattaiah et al., 2023; Soer et al., 2019). Moreover, four factor models supported by previous studies (e.g., Baattaiah et al., 2023; Chmitorz, et al., 2018b; Hidalgo-Rasmussen & González-Betanzos, 2019; Jacobs & Horsch, 2019; Rodríguez-Rey et al., 2016) were examined using confirmatory factor analysis: (1) a one-factor model that included all the items, (2) a correlated two-factor model with positively and negatively worded items in separate factors, (3) a bifactor model with a general resilience factor and a method factor for negatively worded items, and (4) a bifactor model with a general resilience factor and two method-effect factors for negatively and positively worded items. This study also carefully examined the factor loading of Item 5.

The BRS-J was expected to have satisfactory internal consistency and a high to very high test-retest correlation over a 1-month interval, similar to the interval in the study that developed the BRS (Smith et al., 2008). The construct validity of the BRS-J was evaluated by examining its correlation with scores on related measures. BRS-J scores would be positively correlated with cognitive and behavioral coping scores and negatively correlated with avoidance coping scores. Based on previous findings (Smith et al., 2008; Smith, Tooley, Christopher, & Kay, 2010; Smith, 2021), BRS-J scores would be positively correlated with scores for life satisfaction and experiences of positive affect as two components of the tripartite model of hedonic (Diener, Suh, Lucas, & Smith, 1999) and eudaimonic well-being, including optimism, supportive relationships and meaning, and purpose in life, and negatively correlated with scores for experiences of negative affect as the other component of hedonic well-being. In addition, a positive correlation was hypothesized between BRS-J and grit scores; grit is defined as trait-level perseverance and passion for long-term goals (Duckworth, Peterson, Matthews, & Kelly, 2007) and thus can also be regarded as a similar construct of resilience (Cheng, Kam, & Cui, 2023; Duckworth, 2017; Stoffel & Cain, 2018; Wang, 2021). In contrast, there would be negative correlations between BRS-J and ill-being scores, including perceived stress, depression, and anxiety. All these correlations were expected to be significant but not very high because although resilience and these constructs are closely interrelated, they are conceptually distinct (Datu, 2021; Fletcher & Sarkar, 2013; Hiebel et al., 2021; Smith et al., 2008; Troy et al., 2023).

2. METHOD

2.1. Participants

The participants included 276 college students (40.1% women) from two different colleges in two large cities in Japan, with a mean age of 20.81 ($SD = .67$) ranging from 20 to 23. All participants were informed of the purpose of this study, anonymity, and confidentiality. The participants agreed to voluntarily participate in two questionnaire sessions 1 month apart (Time 1 and Time 2) and completed the measures. At Time 1, all questionnaires were administered. At Time 2, all the participants from the Time 1 session completed only the BRS-J. Ethical approval for the survey was obtained from the ethics committee of the author's institution.

2.2. Measures

(1) Japanese translation of the Brief Resilience Scale

The original English version of the BRS was translated into Japanese with the permission of Dr. Bruce W. Smith (personal communication, October 4, 2021). The translation was carried out per the translation and back-translation procedures outlined in various guidelines (e.g., Beaton, Bombardier, Guillemin, & Ferraz, 2000; Brislin, 1986; Sousa & Rojjanasrirat, 2011). The original BRS was translated into Japanese by a bilingual professor and then back-translated into English by another bilingual professor. Subsequently, two researchers compared the translation with the back-translation in detail. This process was repeated until translation and back-translation reached a satisfactory level of consistency. During the translation, great attention was paid to ensuring that the Japanese phrases were simple and appeared natural. Five Japanese graduate and undergraduate students approved the final translation. The six items of the BRS-J were rated on the same 5-point scale as the original BRS.

(2) Coping

Coping was assessed using the Coping Inventory for the Japanese (Sumi, 2007b), a brief Japanese measure used to assess three dimensions of dispositional coping: (a) cognitive approach coping, which refers to cognitively approaching a problem and making active efforts to resolve it; (b) behavioral approach coping, which involves behavioral efforts to approach a problem and resolve it; and (c) avoidance approach coping, which refers to efforts to avoid a problem and focus mainly on managing the emotions it evokes. This measure has three subscales corresponding to the dimensions and comprises five items for each subscale (e.g., “Seeking advice from others.”). These items were rated on a 5-point frequency scale ranging from 1 (*not at all*) to 7 (*very much*). The Coping Inventory for the Japanese has a three-factor structure corresponding to the subscales, internal consistency reliability (Cronbach’s α = .65 to .73), test-retest reliability over a 3-week period (r = .25 to .46), and convergent validity based on correlations with scores for perceived stress, size of the support network, satisfaction with actual support, optimism, and self-esteem. Convergent validity was supported by correlations with scores on the active-cognitive, active-behavioral, and avoidance coping subscales of the Japanese version of the Coping Responses Scale (Billings & Moos, 1981; Sumi, 1999).

(3) Grit

Grit was measured using the Japanese version of the Short Grit Scale (Duckworth & Quinn, 2009; Sumi, 2024) which consists of eight items (e.g., “I am diligent.”) rated on a 5-point scale ranging from 1 (*not like me at all*) to 5 (*very much like me*). The Japanese version has a two-factor structure, internal consistency (Cronbach’s α = .82 and .89), test-retest reliability over a 4-week period (r = .77), and convergent and discriminant validity based on correlations with scores for self-control, Big-Five personality traits, vitality, hedonic and eudaimonic well-being, and psychological stress, depression, and anxiety.

(4) Hedonic well-being

Life satisfaction was assessed using the Japanese version of the Satisfaction with Life Scale (Diener, Emmons, Larsen, & Griffin, 1985; Sumi, 2020) which consists of five items (e.g., “I am satisfied with my life.”). The items were scored on a 7-point scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The Japanese version has a unidimensional structure, internal consistency reliability (Cronbach’s α = .78 to .82), test-retest reliability over a 1-month period (r = .73), and construct validity through expected correlations with scores for experiences of positive and negative affect, and eudaimonic well-being (Sumi, 2020).

Experiences of positive and negative affect were measured using the Japanese version of the Scale of Positive and Negative Experience (Diener et al., 2010; Sumi, 2013, 2014), with subscales for positive and negative affect. Both subscales consist of six items that assess recent experiences of affect (e.g., happy and sad). The items were rated on a 5-point frequency scale, ranging from 1 (*very rarely or never*) to 5 (*very often or always*). The Japanese versions showed a two-factor structure corresponding to the subscales, internal consistency reliability (Cronbach's α s = .86 to .93), test-retest reliability over a 1-month period (r s = .60 and .57), and construct validity through acceptable correlations with scores for positive and negative feelings, life satisfaction, subjective happiness, dispositional optimism and pessimism, perceived stress, depression, and anxiety (Sumi, 2013, 2014).

(5) Eudaimonic well-being

Eudaimonic well-being was assessed using the Japanese version of the Flourishing Scale (Diener et al., 2010; Sumi, 2013, 2014), which consists of eight items that tap into positive functioning in areas important for psychological well-being, including supportive relationships, self-acceptance, optimism, and meaning and purpose in life (e.g., "I lead a purposeful and meaningful life."). The items were scored on a 7-point scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The Japanese version has a unidimensional structure, internal consistency reliability (Cronbach's α s = .94 to .95), test-retest reliability over a 1-month period (r = .87), and construct validity based on correlations with scores for positive and negative feelings, life satisfaction, subjective happiness, dispositional optimism and pessimism, perceived stress, depression, and anxiety (Sumi, 2013, 2014).

(6) Perceived stress

The Japanese version of the 10-item form of the Perceived Stress Scale to assess perceived stress (Cohen, Kamarack, & Mermelstein, 1983; Cohen & Williamson, 1988; Sumi, 2007a) was used. The items measure the perception of psychological stress over the past month (e.g., "In the last month, how often have you felt that you were on top of things?"), including four negatively worded items scored on a 5-point scale ranging from 0 (*never*) to 4 (*very often*). The Japanese version has the same two-factor structure as the original measure, internal consistency reliability (Cronbach's α = .71), test-retest reliability over a 3-week period (r = .72), and discriminant and predictive validity based on correlations with scores for daily hassles, depression, anxiety, and psychosomatic symptoms using longitudinal data over a 3-week period (Sumi, 2007).

(7) Depression and anxiety

The Japanese versions of the two subscales of the Hopkins Symptom Checklist (Derogatis, Lipman, Rickels, Uhlenhuth, & Covi, 1974; Sumi, 1997) were used to assess depression and anxiety. The depression and anxiety subscales consist of 11 (e.g., "Feeling no interest in things") and seven items (e.g., "Feeling tense or keyed up."), respectively. Both subscales measure the frequency of symptoms during the past seven days on a 5-point scale ranging from 0 (*not at all*) to 4 (*extremely*). The Japanese version of the subscales has a separate factor structure for each subscale, internal consistency reliability (Cronbach's α = .84 for both), test-retest reliability over a 4-week interval (r s = .83 and .75, respectively), and construct validity through correlations with scores for perceived stress (Sumi, 1997, 2007a, 2022).

3. RESULTS

3.1. Factor Structure

To conduct a factor analysis of the BRS-J, participants were randomly and equally divided into two groups (n s = 138 each): Samples A and B. Samples A and B were used for

exploratory and confirmatory factor analyses, respectively, to avoid overfitting. There was no significant difference between the samples in sex, $\chi^2(1, N = 276) = .20$, *ns*, and age, $t(232) = .09$, *ns*. For Samples A and B, the Kaiser-Meyer-Olkin test of sampling adequacy were .84 and .86, respectively, and Bartlett's test of sphericity was 454.65 and 5446.59 ($dfs = 15$, $ps < .01$), respectively. These results indicated that the data collected were appropriate for factor analysis. An exploratory factor analysis using principal axis factoring was conducted on Sample A. The eigenvalues of the first four factors were 3.61, 0.91, 0.71, and 0.38, in that order. The results showed that only one factor was extracted with an eigenvalue greater than 1.0. This factor accounted for 60.16% of the total variance. As shown in Table 1, all items had absolute factor loadings of .39 or higher.

Table 1.
Factor Loadings for Exploratory and Confirmatory Factor Analyses.

Item	Exploratory Factor Analysis of Sample A	Confirmatory Factor Analysis of Sample B
1	.83	.92
2	-.76	-.67
3	.90	.91
4	-.86	-.81
5	.54	.63
6	-.39	-.49
Method Factor		
2	–	.96
4	–	.18
6	–	.15

Note: Confirmatory factor analysis was conducted for the bifactor model with a general factor and a method factor (negative wording). All standardized factor loadings shown in the confirmatory factor analysis are significant at $p < .01$.

Confirmatory factor analyses were performed on Sample B to evaluate the four-factor models of the BRS-J. Table 2 shows the goodness-of-fit indices of the models. According to the goodness-of-fit criteria (Brown, 2006; Byrne, 2001), the bifactor model with general and method factors provided an acceptable fit to the data, as indicated by the RMSEA, NFI, CFI, AGFI, and SRMR values (.077, .971, .985, .906, and .046, respectively). Moreover, this model had the lowest AIC and BIC values (42.279 and 80.333, respectively) among the models. The other models showed goodness-of-fit indices indicating a poor fit, with RMSEA value exceeding .10 and AGFI value below .90. Table 1 also showed that all standardized factor loadings were significant ($ps < .01$). The factor loadings of Item 5 were sufficient for both exploratory and confirmatory factor analyses (.54 and .63, respectively).

3.2. Reliability

Table 3 presents the mean, standard deviation, and reliability coefficient. BRS-J scores ranged from 1.33 to 5.00. Both Cronbach's α and McDonald's ω of the BRS-J showed high values (.88 and .89, respectively). The test-retest correlation between the BRS-J scores at Times 1 and 2 was high ($r = .58$, 95% CI [.50, .66], $p > .01$).

Table 2.
Values of Goodness-of-Fit Indices in Confirmatory Factor Analyses.

Model	χ^2 (df)	RMSEA	NFI	CFI	AGFI	SRMR	AIC	BIC
1	29.99 (9) **	.130	.946	.961	.854	.042	53.992	89.119
2	19.85 (8) *	.104	.964	.978	.885	.040	45.851	83.905
3	16.28 (8) *	.077	.971	.985	.906	.046	42.279	80.333
4	15.35 (6) *	.107	.972	.983	.879	.039	45.350	89.259

Note: Model 1 = one-factor model; Model 2 = correlated two-factor model; Model 3 = bifactor model with a general factor and a method factor (negative wording); and Model 4 = bifactor model with a general factor and two method factors (negative and positive wording).

* $p < .05$. ** $p < .01$.

Table 3.
Means, Standard Deviations, Reliability Coefficients, and Correlations between Scores on the BRS-J and the Other Measures.

Measure	<i>M</i>	<i>SD</i>	α	ω	<i>r</i>	95% CI
BRS-J	3.15	0.87	.88	.89	—	—
Cognitive Approach Coping scale	17.98	3.99	.80	.80	.28	[.19, .37]
Behavioral Approach Coping scale	14.46	4.34	.77	.76	.30	[.21, .39]
Avoidance Approach Coping scale	12.95	4.10	.73	.73	-.19	[-.28, -.09]
Short Grit Scale	3.04	0.80	.89	.87	.29	[.18, .40]
Satisfaction with Life Scale	19.46	5.69	.77	.77	.33	[.22, .43]
Positive Affect scale	22.25	4.59	.93	.93	.41	[.30, .50]
Negative Affect scale	15.50	4.83	.84	.83	-.41	[-.50, -.30]
Flourishing Scale	36.94	7.45	.82	.81	.50	[.40, .58]
Perceived Stress Scale	19.71	6.38	.79	.72	-.41	[-.51, -.31]
Depression scale	15.33	9.08	.88	.88	-.47	[-.55, -.37]
Anxiety scale	7.31	5.74	.86	.86	-.35	[-.45, -.24]

Note: α = Cronbach's α . ω = McDonald's ω . All correlations are significant at $p < .01$.

3.3. Construct Validity

Table 3 also includes the correlation coefficients between scores on the BRS-J and other related measures. Overall, these correlation coefficients supported the hypothesized relationships between the scores, indicating the construct validity of BRS-J. As expected, BRS-J scores were weakly positively correlated with the scores on the Cognitive and Behavioral Approach Coping scales (r s = .28 and .30, respectively). Furthermore, they were weakly negatively correlated with the Avoidance Approach Coping scale (r = -.19). There was a weak positive correlation between BRS-J and Short Grit Scale scores (r = .29). BRS-J scores were moderately positively correlated with scores on the Satisfaction with Life Scale and Positive Affect scales (r s = .33 and .41, respectively) and moderately negatively correlated with scores on the Negative Affect scale as a hedonic well-being measure (r = -.41). A high positive correlation was found between the scores on the BRS-J and the Flourishing Scale as a measure of eudaimonic well-being (r = .50). There were moderate and negative correlations between the BRS-J, Perceived Stress Scale, Depression scale, and Anxiety scale scores (r s = -.47 to -.35).

4. DISCUSSION

This study explored the reliability and construct validity of a new Japanese version of the BRS. The results of the data analysis from a Japanese college student sample preliminarily support the psychometric properties of the BRS-J. The exploratory factor analysis of the BRS-J supported a one-factor structure, similar to the original BRS (Sánchez et al., 2021; Smith et al., 2008) and non-English versions (Coelho et al., 2016; Jacobs & Horsch, 2019; Lai & Yue, 2014). Although several studies have identified two factors corresponding to positively and negatively worded items through exploratory factor analysis (e.g., Ahmad Sabki et al., 2023; Baattaiah et al., 2023; Soer et al., 2019), the present study identified one factor comprising all items.

However, the results of the confirmatory factor analysis supported the bifactor model with a general resilience factor and method factor, and not the one-factor model. This bifactor model was confirmed in the German version of the BRS with a German general population sample (Chmitorz, et al., 2018b), in the same version with a clinical sample with mental disorders (Broll et al., 2024), and in the original version with an Australian general population sample (McKay, Skues, & Williams, 2021). Variations in the factor structure of the BRS can be attributed to cultural, language, and population factors (Jacobs & Horsch, 2019; Sánchez et al., 2021). A bifactor model might have been identified because of some common underlying factors across various studies. The method factor in this bifactor model reflected the wording effect in the BRS-J, including reverse items, rather than the concept of resilience itself (Ahmad Sabki et al., 2023; Baattaiah et al., 2023; Broll et al., 2024; Rodriguez-Rey et al., 2016). In addition, although several previous studies excluded Item 5 (e.g., Coelho et al., 2016; Minh Nguyen et al., 2024), the results of the factor analysis found no grounds for omitting Item 5. Therefore, the BRS-J scores were calculated using all items based on the general resilience factor.

The internal consistency reliability of the BRS-J was good (DeVellis & Thorpe, 2021; Nunnally & Bernstein, 1994). The test-retest reliability was adequate based on the high test-retest correlation over a 1-month interval. BRS-J showed satisfactory internal consistency and temporal stability over a shorter period.

Correlations between BRS-J and the related scale scores, including their directions, were generally as expected for construct validity. BRS-J scores were weakly correlated with coping scores, which are especially important for the ability to recover from stress (Smith et al., 2010), and with grit, which is closely related to resilience (Cheng et al., 2023; Duckworth, 2017; Stoffel & Cain, 2018; Wang, 2021). Correlations between the scores for the components of hedonic and eudaimonic well-being were moderate to high. The scores for ill-being, specifically perceived stress, depression, and anxiety, were moderately and negatively correlated with BRS-J scores. All correlations indicated convergence and discrimination between BRS-J and the related measures.

Although this study provides a new Japanese version of the BRS, several limitations must be noted that will guide future research. The first is the use of only a sample of college students. Generalization of the present findings to other populations should be performed with caution. It is necessary to further examine other populations, such as workers, older adults, and clinical samples. The second limitation is the time interval for test-retest reliability. Further studies are needed to confirm the temporal stability of BRS-J at intervals longer than 1 month. The third limitation involves evaluating construct validity by examining correlations with related constructs. Additional studies should explore other forms of validity, such as predictive and concurrent validity. Although the limitations of this study should be carefully considered, the results provide preliminary support for BRS-J as a reliable and valid

measure for assessing the ability of Japanese-speaking people to bounce back or recover from stress. This brief measure will contribute to future research on resilience in Japan, including clinical screenings, educational settings, and cross-cultural studies.

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KEY TERMS & DEFINITIONS

Following Cohen (1988) and De Vaus (2013), correlation coefficients were classified as low (0.10 to 0.29), moderate (0.30 to 0.49), high (0.50 to 0.69) very high (0.70 to 0.89).

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Chapter # 17

PREVENTIVE PSYCHOLOGY IN REFUGEE MENTAL HEALTH

Trust-Building between traumatized individuals, experts, and responsible authorities

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ABSTRACT

The full-scale invasion of Ukraine on February 24, 2022, led to an unprecedented refugee crisis in Europe, necessitating the development of effective preventive psychological support strategies. In response, a trauma-focused group intervention program called "Hälsoskola" (in Swedish) was developed and implemented for 100 Ukrainian refugees in Sweden, predominantly women. The program, grounded in trauma-informed principles, aimed to create a framework for building trust in dialogue and for cultural sensitivity. Over five weeks, participants met with local experts to discuss topics of stress management, somatic and mental health literacy, human rights, employment, and social support. The results showed that the face-to-face dialogue between the participants' needs and the experts' responses was promising, leading to increased trust and somatic and mental health literacy. We provide a key concept in the field of trauma and explain how a participatory approach can be used to develop tailored "Train-the-trainers" programs for refugees of various origins. The book chapter also considers the key challenges associated with assisting refugees, including methodological and ethical difficulties such as language barriers, cultural differences, ensuring informed consent, and community involvement.

Keywords: Ukraine war, health literacy, mental health, refugees, language barriers, trauma-informed care, trust-building.

1. INTRODUCTION

The full-scale invasion of Russia into Ukraine on February 24, 2022, led to a massive displacement of the population and resulted in tremendous losses, including the loss of family members, health, possessions, security, and social status (Frankova & Sijbrandij, 2025). About 4 million people became internally displaced people, and 6.9 million refugees, of whom approximately 40,000 arrived in Sweden (UNHCR, 2022). This crisis has had a profound stress, uncertainty, and negative impact on the mental health of Ukrainians, both children and adults, increasing feelings of helplessness, depression, and anxiety (An, Wang, Chen, & Oleksiyenko, 2025; Pinchuk et al., 2024). Refugees face trauma, instability, and the disruption of social ties, which is exacerbated by living in a "state of limbo" in a new country (Anjum, Aziz, & Hamid, 2023). These outcomes are recommended by policymakers to give priority to introducing work opportunities and ensuring a safe living environment to help innocent people recover from war conflicts.

According to the American Psychiatric Association (2013), DSM-5, the concept of trauma is described as a sudden, unexpected, horrifying event apart from normal experience during a day. Trauma may be a "man-made" event that involves actual or threatened death

or serious injury, or a threat to the physical well-being of the person or of others. The person's response has been intense fear, helplessness, or horror, e.g., violence, war, torture, rape, accidents, or natural disasters such as fires, earthquakes, water floods.

One of the critical challenges in providing psychosocial support is the deep mistrust of people and institutional structures that develops as a result of trauma and forced migration. This mistrust, compounded by the fear of stigmatization of mental illness, can significantly reduce the effectiveness of interventions, making trust-building a key component of successful support. Further, results from a video conference interview highlighted the significant problems faced by refugees and other migrants and include extrinsic barriers, symptoms of psychological distress, coping and help-seeking behaviors, and interpersonal relationships (Akef, Poyrazli, & Quintero, 2024). Survey data among forced Ukrainian migrants in the U.S. showed that individuals reported various psychological factors and cultural experiences, revealing high resilience and low stress tolerance along with a strong correlation between their adopted acculturation strategies and their resilience and levels of traumatization (Andrushko & Lanza, 2024).

1.1. Six principles of a Trauma-Informed Approach

According to SAMHSA (2014), a trauma-informed approach includes the following six key principles, which have linkage to resilience and recovery and can be generalizable and used in different settings; however, application may be sector or setting-specific.

1.1.1. Safety

The target group needs to feel physically, psychologically, socially, and morally safe; that means that the physical setting is safe, and interpersonal interactions promote a sense of safety. Therefore, we must ask the target group what safety means to them, and we have to create safety for those who have different life experiences from our own.

1.1.2. Trustworthiness and Transparency

Every operation and decision in the organization is performed with transparency, with a culture of connection in relationships with the aim of building and maintaining trust with clients and relatives, among staff, and others included in the organization.

1.1.3. Peer Support/“Trauma Survivors”: With Individuals Having Lived Experience of Trauma

This peer support and mutual self-help are central for building trust, safety, and hope, as well as promoting collaboration to promote healing and recovery.

1.1.4. Collaboration and Mutuality

Healing is promoted in relationships and in a meaningful sharing of power and decision-making. Everyone feels they have a role to play in the trauma-informed approach.

1.1.5. Empowerment, Voice, and Choice

Strengths and experiences of the individual's voice and choice are recognized and built upon, as well as the belief in the possibility of recovery from trauma. Empowerment means that the organization continues to support an individual's inner resilience. It is common that individuals with past trauma experience coercion and choice if significant as the individual always feels they have a choice.

1.1.6. Cultural, Historical, and Gender Issues

Cultural stereotypes and biases are actively moved past, and access to gender responsive services is paid attention to, as well as the individual's unique racial, ethnic, and cultural needs due to historical trauma. Particular attention is paid to the problem of stigma, which exists on several levels: self-stigma, stigma by association, public stigma, and structural stigma. These barriers often prevent refugees from seeking help.

Therefore, our intervention is based on the principles of trauma-informed and culturally safe practice. Trauma-informed practice involves an awareness of the prevalence of trauma and its impact, as well as creating an environment that helps to avoid re-traumatization. Culturally safe practice requires specialists to respect the cultural identities of others, recognize their own biases, and ensure that the needs, expectations, and rights of participants are met safely. The goals of such trauma healing and recovery practice include restoring a sense of safety and control, as well as promoting connections with other people and a sense of belonging.

This is in accordance with European policy for refugee mental health (European Union Agency for Asylum, 2024) and WHO action plan for refugee and migrant health in the WHO European Region 2023-2030 (2023) intending to support countries to make health for all, including refugees and migrants a reality and integrating mental health into primary care, providing flexible and culturally sensitive services and promoting human rights protection, social inclusion and support for vulnerable groups.

2. BACKGROUND

The present study relies on several key works that shape the modern understanding of refugee mental health issues. An et al. (2025) and Pinchuk et al. (2024) provide fundamental data on the impact of the war on the mental health of the Ukrainian population, confirming the relevance of preventive interventions. The work of Anjum et al. (2023) introduces the important concept of "life in limbo," which accurately describes the state of uncertainty experienced by refugees and emphasizes the need for programs that restore a sense of control.

The methodological basis of our research is supported by the works of Seagle et al. (2020) and Minas, Diocera, & Colucci (2025), which highlight the ethical and practical challenges in working with migrants, such as the need to build trust, respectful engagement, and overcome language barriers. Our trauma-focused group intervention (Ekblad, Gramatik, & Suprun, 2024) is a direct response to these challenges. The theoretical understanding of the six principles of the trauma-informed approach described above by SAMHSA (2014) formed the basis for creating a safe and unbiased environment in our target groups. Another theoretical model for working with resilience is Salutogenesis (Antonovsky, 1979). This model focuses on factors that promote health. The key concept is the "Sense of Coherence," which consists of three components:

- **Comprehensibility:** The belief that events are predictable and understandable.
- **Manageability:** The belief that resources are available to cope with problems.
- **Meaningfulness:** The feeling that life has emotional meaning and that challenges are worth addressing.

3. OBJECTIVES, DESIGN, METHODS, AND RESULTS

3.1. Objectives

Explore whether a brief trauma-focused group intervention for traumatized participants, followed by psychosocial support on mobile, promotes health behavior, resilience and trust?

3.2. Study Design and Participants

The study is a mixed-method design with a group intervention using a participatory methodology. The program involved 100 Ukrainian refugees (predominantly women) who arrived in Sweden under the European Union activated the Temporary Protection Directive (Council Directive 2001/55/EC). A workshop was held before among potential participants to explore the needs and content of each session.

3.3. The Trauma-Focused Group Intervention

The program consists of five weekly two-hour sessions, is a voluntary gathering of participants affected by the war to acquire knowledge, skills, and mutual support. The group size is approximately 10 participants and with a moderator, interpreter, and expert for each topic below. Each meeting was dedicated to one of the key topics identified based on the participants' needs:

- Stress management and recovery: basics of psychological first aid, relaxation techniques, a dialogue with psychologists (the authors).
- Human rights and the law enforcement system: a dialogue with a police representative.
- The health literacy, including the healthcare system: a dialogue with a representative from medical services.
- Employment and education: a dialogue with an employment manager from the municipality and a school representative.
- Social support: a dialogue with a social worker.

Each session included a presentation from a local Swedish expert and a subsequent Q&A session, which ensured a direct dialogue. The meetings were held in Ukrainian/Russian with the participation of a professional interpreter and were supervised face-to-face and online by two Ukrainian psychologists and a Swedish project manager (the three authors).

To create a safe and trusting atmosphere, eight key rules were established and strictly observed:

1. Full confidentiality of the interpreter.
2. The "four walls rule": everything said remains within the group.
3. No mobile phones during the session.
4. Full presence "here and now."
5. Exclusion of sensitive topics (politics, religion) from the discussion.
6. An organized order for questions (by raising a hand).
7. A closed group format.
8. Voluntary participation and confidentiality of information.

3.4. Outcome Measures: Indicators

3.4.1. Quantitative and Qualitative Measures (Mixed Methods) Target Group of Participants

- Participants: demographic background (age, gender, education, family status, children, native language, residence, work, leisure)
- Screening questionnaire at baseline measuring users' perceived health and lifestyle habits based on the severity of worry/anxiety/stress symptoms
 - Pre-post perceived health immediately and 3 months after
 - Group dynamics operationalized by estimating the activity of participants during dialogue within an expert in trauma-focused group intervention
 - Evaluation of psychosocial support on mobile after 3 months
 - Acceptance and usability based on needs and perceived health measured with WHO's Wellbeing Survey (WHO-5, 2024) after 3 months for follow-up

3.5. Ethical Considerations

The project received approval by the Swedish Ethical Review Authority (2023-00092-02). All participants gave their written informed consent in accordance with the Declaration of Helsinki (World Medical Association, 1964). Participation was completely voluntary.

The project is low-risk and consists of a series of semi-structured interviews. There were no medical procedures, interventions, or patient involvement. The risk of psychological or emotional distress is low, but some participants may experience mild discomfort when reflecting on their life experience. However, this is expected to be minimal and transient. To eliminate the risk of privacy breaches, all data is anonymized during transcription, and any identifiers are removed from the interview transcripts. The data is stored securely with limited access; all interview content reported in publications will be anonymized. Participation was completely voluntary; participants could withdraw at any time without giving a reason, and they could choose not to discuss or answer specific questions during the interview. The process follows the principle of proportionality according to the Ethics Review Act. The potential minimal risks to the well-being and integrity of the informants are outweighed by the scientific and societal value of the project. The project will develop new knowledge that can benefit both healthcare professionals and the public.

3.6. Results

The trauma-focused group intervention demonstrated high effectiveness and feasibility. For detailed results, see Ekblad, Gramatik, & Suprun, (2024). The direct dialogue between the participants' needs for knowledge and the local experts' answers contributed to a noticeable strengthening of trust and an increase in health and mental health literacy. The participants gained practical knowledge that helped them better navigate Swedish society and reduce their stress levels.

An important result was that about a third of the participants required subsequent individual psychosocial support, organized via mobile phone. This indicates the program's ability not only to provide preventive care but also to effectively identify individuals in need of more in-depth therapeutic work. In our experience, it was personal, direct interaction that was critical in building trust. It was noted that, in contrast to face-to-face meetings, building and maintaining trust online was significantly more challenging (Ekblad, Gramatik, & Suprun, 2025). This difference was felt in both individual and group sessions, as we worked with different groups both offline and online. Similar difficulties arose when using

telephone interpreters, which also hindered the establishment of deep contact and mutual trust in the group. These observations confirm that when working with traumatized people who have experienced loss of safety, physical presence, and direct dialogue are key to creating the safe and predictable environment necessary for successful intervention.

3.7. Discussion

The success of the trauma-focused group intervention ("Hälsoskola") program can be attributed to its ability to directly address the fundamental challenges of mistrust. These observations have deep theoretical underpinnings related to the principles of a trauma-informed approach. Face-to-face interactions directly enabled the principle of "Safety" to be realized, creating a physically and psychologically protected space that was difficult to replicate online. Moreover, it facilitated the principle of "Mutual Support," as the immediate presence of a group increased the sense of community and belonging, which is critical for trauma recovery and the development of a "Sense of Coherence" (Antonovsky, 1979).

The creation of a safe, structured, and predictable environment, the use of the native language, and the involvement of reputable local experts made it possible to overcome the barriers that often prevent refugees from receiving help. The program empowered these participants by providing them with knowledge and agency, which facilitated the transition from a passive "newcomer" identity to an active role in their own integration.

These results are consistent with findings in other studies that emphasize the importance of social connections, inclusive interventions, and respectful engagement for the psychological well-being of refugees (Rizzi et al., 2023; Minas et al., 2025). The program effectively countered stigma by normalizing discussions of problems and seeking help in a safe group environment.

Conducting such research is associated with several methodological challenges. Minas et al. (2025) identified the necessary knowledge, skills, and engagement strategies for working with migrants. These include respectful interaction skills, knowledge of the context, and the ability to speak the participants' language. Practical difficulties include language barriers, limited resources, and ensuring safety.

Moreover, acute survival needs, fear of stigma, and traumatic experiences can create direct or indirect obstacles to obtaining meaningful informed consent and establishing trust (Seagle et al., 2020). The language barrier and the lack of previous medical records are key constraints in providing medical care to refugees (Biesiada, Mastalerz-Migas, & Babicki, 2023), which further emphasizes the need for tailored approaches like trauma-focused group intervention.

The systematic review by Rizzi et al. (2023) confirms that social connections and inclusive community interventions play a vital role in improving the psychological well-being of Ukrainian refugees. Tailored approaches are needed, including both face-to-face and digital interventions based on the principles of psychological first aid (mobile applications).

The target group and the content in this model are always recommended to be clarified for consideration when generalizing the results. In this model, most of the Ukrainian refugees coming to Sweden were women and children, and in the meantime, the husbands were soldiers in Ukraine and had restrictions on leaving the country if no disabilities.

4. FUTURE RESEARCH DIRECTIONS

4.1. Goals and Objectives of the Training Program

The Ukrainian health and mental health care system is unable to meet the enormous present demand, especially due to a shortage of resources and staff. The whole generation of the Ukrainian population is traumatized. In the project “train-the-trainer”, knowledge transfer is planned to be held for local psychologists in Ukraine. The overall goal of the research program is to develop, implement, and evaluate a training program for local psychologists using the "train-the-trainer" method. The specific objectives are:

- To provide local psychologists with the necessary skills, tools, and intervention strategies to effectively address core mental health problems at the individual, family, and community levels.
- To help local psychologists develop new strategies for health promotion, prevention, and early intervention at the community level.
- To establish a training model that promotes a commitment to ongoing skills enhancement, documentation, and outcome evaluation.

4.2. Principles of Partnership and Mutual Learning

- The training program should be designed in consultation with local organizations to ensure that the mental health model it promotes is consistent with the needs of the beneficiaries.
- A partnership model is created in which external experts collaborate closely with existing staff in a spirit of mutual learning, where all participants play an active role.
- It is necessary to recognize that local Ukrainian psychologists also live in traumatic conditions, and both the content and style of the training must be designed with their psychosocial needs and professional development in mind.

4.3. Training Structure

- Local psychologists will be trained by experts in a one-week seminar on-site or online, followed by annual support over 3 years.
- Knowledge tests will be conducted at the end of each training week, and detailed feedback will shape the content of the next session.
- Mechanisms will be established to maintain contact with all local psychologists and Master's students in psychology (internet, email, Teams/Zoom meetings) to ensure close project monitoring.

4.4. Practical Organization of Supervision

Supervision is an integral part of supporting trained psychologists. It is conducted by the project experts in the format of regular group online meetings. Additionally, supervision can be provided on an ad-hoc basis upon request if a group of psychologists has an urgent need.

4.5. Involving Psychology Students

Involving senior psychology students (bachelor's and Master's) is a valuable resource. Possible roles for students (under mandatory supervision):

- Assisting with the organization of meetings and preparation of materials.
- Helping to organize activities and support for the children of participants who attend the meetings.

- Assisting in the collection and analysis of anonymous data to evaluate program effectiveness.

4.6. Outcome Measures

4.6.1. Quantitative and Qualitative Measures (Mixed Methods)

- Actor (e.g., NGO, university) background data.
- Local psychologists' and Master students in psychology: job satisfaction is operationalized by measuring a satisfaction scale of 1-5 with comments and internal and external motivation to implement the trauma-focused group intervention.
- Acceptance and usability of trauma-focused group intervention and psychosocial support on mobile.
- Perceived qualitative experience of local psychologists and Master's students in psychology participation on mobile.
- Measures of satisfaction with the collaboration and local NGOs after dissemination are measured, with online questions on a satisfaction scale of 1-5 and comments.

4.7. Development of Hybrid Models of Support

Our future work plan includes the development and testing of a hybrid model that combines the effectiveness of face-to-face meetings with the accessibility of online formats. The aim is to overcome the limitations of pure online interactions and provide sustainable support. This approach will use a dedicated digital platform that will allow participants to self-select and implement mental and physical exercises at their own convenience. Such a tool aims to empower people by allowing them to actively participate in their mental well-being and self-healing, in line with the principle of "Empowerment, Voice and Choice".

5. CONCLUSION/DISCUSSION

The trauma-focused group intervention is an effective, scalable, and culturally sensitive model of preventive mental health support. Group interventions based on participation and trust-building are a vital tool for promoting resilience, well-being, and social integration of refugees. While participation is essential in societal development, it needs to be managed with care, according to the level of trust in society (Hirai, 2020). Further, how experiences with corruption and conflict challenge the establishment of transfer of institutional distrust from their home country to the governmental institutions of the host country remains insufficiently explored in academic literature; it is a critical knowledge gap. Although the trauma-focused group intervention requires further empirical validation and adaptation to evolving circumstances, its implementation is promising for reducing institutional distrust and strengthening social cohesion.

We recommend integrating such models into Master students in psychology at universities, primary psychosocial care systems, and community organizations. The "train-the-trainer" approach, described in detail in our Handbook guide (Ekblad, Gramatik, & Suprun, manuscript), allows effective scaling of this program and its adaptation for different refugee groups and settings.

6. LIMITATION OF OUR STUDY

An important limitation of our study is that the target group was predominantly female. Recruiting men to participate in the program was difficult, which is likely due to the demographic situation in the first months after the outbreak of a full-scale war, when most refugees were women with children. This is an important factor to consider when interpreting our results, and future studies should aim for a more representative sample that includes both men, including war veterans, and women.

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Section 5
Psychoanalysis and Psychoanalytical
Psychotherapy

Chapter # 18

CONTEMPORARY VICISSITUDES OF THE OEDIPUS COMPLEX IN ADOLESCENCE

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ABSTRACT

This study explores contemporary expressions of sexuality through the theoretical articulation of the Oedipus and Castration complexes. Drawing on data from the Ambulatory for Transgender Care at a public university hospital and clinical observations with five adolescents, it examines how unconscious determinations operate in current experiences of adolescence. The research is organized around three axes. The first is theoretical, based on a psychoanalytic reading of adolescence as a crucial moment in the structuring of sexual difference and subjective identity, revisiting Freud and Lacan to question binary identifications. The second is clinical, presenting five vignettes that illuminate how adolescent sexuality – intersected by issues of identity and self-construction – challenges and reaffirms psychoanalytic conceptions of sexuality. The third axis emphasizes the enduring relevance of classical psychoanalytic concepts in addressing new forms of subjectivity emerging today. By linking the Oedipus Complex to the theory of castration, the study highlights how psychoanalysis remains capable of interpreting experiences that were not visible in Freud's time, reaffirming its theoretical and clinical vitality in contemporary contexts.

Keywords: psychoanalysis, Oedipus complex, castration complex, adolescence, transgender care.

1. INTRODUCTION

Freud's first reference to Oedipus implies tragedy, long before the complex. Placing it is fundamental to our argument, for two reasons: 1) because it allows us to demonstrate that the reduction of the Oedipal novel – and we refer to the novel to distinguish it from tragedy –, as it came to be read after this first reference, greatly reduced the force and relevance of what led Freud to make that reference, as we will explain below; 2) because to revisit Oedipus in the context of tragedy – where it has emerged since Sophocles – is to assert it as a structure of what never ceases to be written, is to assert it as necessary. Now, “the necessary is linked (conjugué) to the impossible”, as Lacan (1999, p. 59) observes in his 20th Seminar.

It was in the letter of October 15, 1897, to Fliess that Freud, for the first time, refers to the tragedy *Oedipus Rex*.

Being totally honest with oneself is a good exercise. A single idea of general value dawned on me. I have found, in my own case too, being in love with my mother and jealous of my father, and I now consider it a universal event in early childhood [...]. If this is so, we can understand the gripping power of *Oedipus Rex*, despite all the objections that reason raises against the presupposition of fate; and we can understand why the later “drama of fate” was bound to fail so miserably. Our feelings rise against any arbitrary individual compulsion [...]; but the Greek legend seizes upon a

compulsion which everyone recognizes because he senses its existence within himself. (Freud, 1985, p. 272)

It was the association of the Oedipal novel with Sophocles' tragedy that allowed Freud to recognize it as predetermined as tragic, that is, inherent to subjective constitution. It derives from what Freud defined as sexuality: also universal to human beings, it begins in childhood – which greatly scandalized the time – and

if the child has in the mother its greatest and first reference, the mother will also be its first object of sexual investment. In reality, there is nothing very strange about this; what is strange is that the child does not remain in this sexualized connection with the mother. (Alberti, 2004, p. 17)

Something necessarily intervenes in the child's relationship with the mother in order to allow the child to make other libidinal investments, find other objects, and experience itself as the object of other relationships. What intervenes is defined by Freud as castration. If the clinical cases Freud had access to in his time identified the father as the agent of castration – leading generations of psychoanalysts to reduce the Oedipus complex to love for the mother and hatred for the father – what psychoanalytic practice points today is that the theoretical reference to the tragedy *Oedipus Rex* has deeper roots than the possible repetition of a binary determination of universal sexual constitution. Rereading Freud's first mention of Sophocles' tragedy makes it clear that the tragedy resides in the miserable result of the "later 'drama of fate'", as Freud refers to the outcome of incestuous love: *Oedipus Rex* blinds himself, castrating himself, and Jocasta takes her own life.

At the origin of culture lies the tragic, that pound of flesh that needs to be lost, that castrates itself. "To be an object of desire is something essentially different from being an object of any need". This is what is masked and repressed so that a subject can constitute itself in culture without remaining in the sexualized connection with the mother. For it is not this connection that would be strange, but the impossibility of advancing towards something else as a subject of desire.

It is this subsistence of the object as such, of the object in desire, in time, that it has taken the place of what to the subject remains masked by its very nature. This sacrifice of himself, this pound of flesh engaged in its relationship to the signifier, it is because something comes to take the place of that, that this something becomes object in desire. (Lacan, 1958-1959, p. 283)

At the origin of desire lies this tragedy, this dead end that tragedy, as portrayed in Sophocles' writings, so definitively captured, and which is so difficult for each of us to overcome – a difficulty that adolescence witness to anyone who wants to, or can, see how much the subjective constitution of each individual is absolutely dependent on what Freud called the malaise in civilization.

In the text *Adolescence and the Assertion of Anticipated Certainty: Sex, Lies, and Rock'n'Roll*, Costa-Moura (2023) states that there is an impasse arising from the need to speak and to make an assertion about oneself – and it is precisely there that the crisis we call adolescence takes place. We define adolescence as 1) "a long process of elaborating choices and 2) a long process of elaborating the lack in the Other" (Alberti, 2004/2016, p. 10). For choice to occur, indicators, directions, and determinants are essential, which are provided by the culture of an era, by social designs, and by the desire that the Other has for their children.

The subject receives them throughout their childhood, from parents, educators, peers, the media, the world around them, through what is transmitted to them by language, spoken, written, visual, communicative, or even by silence, which is also a form of language. And one can continue receiving these same indications, directions, and determinants throughout the entire adolescent process, provided that there is no lack in someone who can transmit them. (ibid., p. 12)

Now, psychoanalytic practice imposes that “give the psychoanalytic practice up whoever cannot meet at its horizon the subjectivity of his time” (Lacan, 2006, p. 264). Today’s teenagers don’t live in the same cultural immersion as those of Freud’s time. Even so, they face the same challenge those teenagers faced: to accomplish what Freud, in his own words, identified as the work of the adolescent subject: after latency,

[...] one of the most significant, but also one of the most painful, psychical achievements of the pubertal period is completed: detachment from parental authority, a process that alone makes possible the opposition, which is so important for the progress of civilization, between the new generation and the old. (Freud, 1905, p. 227)

The psychoanalysis founded by Freud and taken up again by Lacan in his project of rereading, articulated with an epistemology that respects the singularity of its ethics, demands that we situate ourselves, as researchers and psychoanalysts, on the sharp edge of the clinic, considering that, according to this epistemology, there is no possible psychoanalysis that is not guided by the clinic itself. Now, Lacan identifies the clinic as the real that surprises the psychoanalyst, and clinical work with adolescents is perhaps one of the most striking experiences in which this is experienced. Probably because the adolescent himself, when he comes to talk to the psychoanalyst, is experiencing his encounter with the unnamable and enigmatic reality regarding his place in the world. The real, which never ceases to not be written, is associated with the impossible we initially referred to when we said it was combined with the necessary. The impossibility of endure for the subject, inherent to psychoanalysis, and the impossibility of resistance for the social body, are present in the clinical setting with transgender adolescent subjects. Moreover, “trans adolescence” is not only a phenomenon neglected by science but also one that remains inexplicable to it. In this sense, these are elements that produce a rupture in knowledge. To be relegated, therefore, is an expression of a “not wanting to know anything about it” (Ferreira da Silva, 2021).

We hypothesize that it is through questions about sexual positioning that the adolescent subject today seeks to deal with what needs to lose in order to move towards something else as a subject of desire.

Sophocles’ tragedy revolves around the fundamental enigma that every adolescent faces. If Freud originally associated it with the childhood question “where do babies come from?” – which, in the tragedy, appears in the question Oedipus answers to the Sphinx, “what is man?”, that is, the deadly enigma of origin – the question about sexual positioning implies the enigma of sexual identity with which adolescents confront themselves. Today, however, they find multiple ways to answer it, as will be discussed in the Discussion section.

2. DESIGN

Our research is based on therapeutic interaction, approaching action research in which analyst and patient work together on the issues that emerge from each patient's speech. The research is developed within the interdisciplinary team of the Identity-Transdiversity Service PPC/UERJ. Two fundamental rules guide this care, identified by Sigmund Freud (1912/2025) in "Recommendations to Physicians Practicing Psychoanalysis": free-floating attention on the part of the analyst, and free association on the part of the patient, family member, or team member. No other rule is considered for the simple reason that there is no psychoanalytic research that goes beyond those two rules.

3. OBJECTIVES

This study aims to investigate contemporary developments in sexuality through a theoretical lens grounded in both the Oedipus Complex and the Castration Complex. By exploring how adolescent sexuality, with its contemporary issues of identity and self-construction, contributes to new perspectives on psychoanalytic theories of sexuality, we seek to deepen our understanding of these evolving concepts.

4. METHODS

The methodology used in constructing this qualitative theoretical-clinical research with transgender adolescent subjects is based on clinical experience at the Identity-Transdiversity Service PPC/UERJ, which we have been conducting since 2022, and on a detailed review of psychoanalytic literature and bibliographies related to the topic. The clinical vignettes we present, focus on the narratives of adolescents attending the Ambulatory. We also examine how these cases provide insights into the continued applicability of psychoanalytic concepts to contemporary clinical realities.

Based on a qualitative and interdisciplinary approach, centered on psychoanalytic listening and dialogue with medicine and other disciplines, this methodology aims to explore the subjective experiences of transgender adolescents, articulating them with the theoretical formulations of psychoanalysis. This provides a solid theoretical foundation for investigating the complex dynamics involving castration, transgenderism, and adolescence.

5. DISCUSSION

Adolescence is marked by puberty and, in addition to the accompanying bodily transformations, involves a process of separation from parental authority. Alberti (2009) describes this process as follows: "the adolescent subject experiences himself in attempts to elaborate the castration of the Other and the encounters he has with the real, now without the childhood illusion that parents can protect him" (Alberti, 2009, p. 276).

This is where psychoanalytic listening can intervene, inviting the adolescent to speak as another resource for dealing with dysphoria. It is evident in their discourse: "Do you think it's okay to look in the mirror and have a bulge there where there shouldn't be anything?", asks a transgender teenager, while a transgender teenager puts it this way: "this bulge [pointing to their breasts] shouldn't be here! I dream of the day I won't have this anymore and I can walk freely without a shirt". This "volume" that appears in the mirror blurs the image and throws the adolescent into a re-architecture of their being.

By articulating the issues of sex through the logical path of the real of castration, we can affirm with Lacan that castration is real: it is something one must go through. This makes it “unsustainable to remain in this duality, somehow as sufficient [...] This function of the *phallus* makes sexual bipolarity untenable henceforth, and untenable in a way that literally volatilizes what happens with what can be written about this relationship” (Lacan, 2006, p. 67). Being able to listen to adolescents from a different perspective than that dictated by medical discourse has already allowed us to hear an adolescent say: “It’s sad to talk about these things with people who minimize our pain. People who believe that all this will pass... I’m living through it and I know that what I feel won’t go away, but coming here to talk to you makes a difference because in your eyes it’s like a whole new world exists for me”. Thus, we ask ourselves: what space is there in our clinics to sustain the unrepresentable of sex, whatever age it may appear at? (Alberti & Ferreira da Silva, 2020).

Alberti and Ferreira da Silva (2019) point out that it is important to identify how psychoanalysis advances with the questions that different realities and different discourses weave into experiences and knowledge about being-for-sex, and to bet on the capacity of the speaking being to deal with the malaise in civilization. There is no single signifier that can account for enjoyment, and the sexual act itself is an experience of incompleteness: the partner is not there where I experience it, nor am I where he experiences me, which is why it remains enigmatic. The speaking being has a more elaborate relationship with *jouissance* than other animal species. This takes place from the fact that sexual *jouissance* emerges earlier than sexual maturity. The speaking being possesses a body of *jouissance* affected by language.

The issues of adolescence, therefore, paradigmatically imply that unease about one’s own sex is the rule for everyone. A transgender teenager, who has already begun his transition with hormone therapy, which gave him “a beard and a deeper voice”, still feels “an emptiness” and affirms: “nonconformity is inherent to identity”. In his words, regarding gender self-affirmation, we are all “dissatisfied”. This corroborates Lacan’s assertion that sexual meaning “indicates the direction in which it fails” (Lacan, 1999, p. 79). Lacan will say: “what analytic discourse brings forth is precisely the idea that this meaning is semblance”. In relation to *jouissance*, it is speech that guarantees the dimension of truth, however it can only half-say the relationship and with it “forge the semblance, the semblance of what is called a man or a woman” (Lacan, 1971-72/2011, p. 60).

Lacan (1973-74/2018) points out that in the face of these encounters with the real, which never cease to be written, “we all invent a trick to fill the hole of the Real. Where there is no sexual relationship, this produces, this produces a hole that traumatizes (*troumatisme*). We invent!” (p. 144). The adolescent subject, when confronted with the impossible to be said due to a lack of signifiers to express it, invents! By literally “naming themselves”, since they consider their given name a “dead name”, trans adolescents find a way of “knowing how to do” with it. “I don’t want to be called by my dead name”, a transgender teenager tells us with great sadness. In his words, hearing his dead name reminds him of everything he wants to forget. Another teenager emphasizes the profound disrespect felt when someone calls him by “the name of someone who doesn’t exist”: “I suffer when they call me by my dead name”.

Transgender adolescents who arrive at the clinic often find themselves in situations of great helplessness due to their histories of vulnerability, transsexuality, dysphoria, and all the experiences of daily transphobia. Being a teenager for them is more than a transition; they find themselves paralyzed, consciously or unconsciously, in the face of the question: “What if I were cis?” Many have been abandoned by their families and rejected by their parents who do not accept their condition. Young people who do not receive family support

experience transsexuality with more anguish and helplessness and often idealize a cisgender adolescence: “If I were cis, everything would be different”. Speech that veils the castration which the adolescent must deal with, as adolescence is a time when it’s impossible to avoid the loss of a pound of flesh, the object of their anguish. This ever-present real denaturalizes what can be conceived as man and woman and points out that “there is no sexual relationship”, meaning there is no proportion between the sexes, just as they do not complement each other.

A transgender adolescent, who says she is very satisfied with her body even in her first consultation, explains: it is society that considers it a “wrong body”, and that is why she needs to transition, so that she can “pass” as a woman, use the women’s restroom without risking being assaulted. In her words, if we lived in another society, a society that supports dissident and disruptive bodies in its structure, that “conversation” with a psychologist wouldn’t even be happening, because she could be a woman with a penis and a beard. This fragment makes evident the discursive shift that adolescents bring and transforms the old “I was born in the wrong body” into a denunciation: society does not accept my dissident body! Even less its form of enjoyment. In *The Seminar*, book 19: *...or worse*, Lacan (1971-72) declares that discourses imprison bodies. Sexual *enjoyment* is the enjoyment of body to body, but as long as there are two bodies, or more, it is impossible to say which one enjoys. “That is what makes it possible for there to be, in this story, several imprisoned bodies, even a series of bodies” (Lacan, 2011, p. 225, *Our translation*).

The imprisonment of bodies, which can be experienced both by adolescents involved with castration anguish by the need to lose something, and by those subjected to normative discourse, often leads to segregation. The adolescent who questions is segregated. This is not new; what is new are the different ways of questioning, which center on the issue, as mentioned, of sexual identity.

“Sexuality digs a hole in the real”, Lacan (2001, p. 562) will say only in the text preceding the staging of Wedekind’s play *The Awakening of Spring* (1891), which has as its central theme the sexuality of adolescents. *Troumatisme*, hole + trauma, the tragic as a hole in meaning penetrates the meaninglessness of the real. The subject is left speechless and seeks, through the act, in his own agitated body, to forge his response that separates him. However, finds the segregation of one’s own form of enjoyment, unacceptable to the social body that repels and violates it. The question then arises, deceptively, as to what would be an acceptable loss. What “volume” should let fall? What (trans)formation would bring back what was forever lost?

A transgender adolescent, who has undergone a good course of analysis, formulates the following metaphor: “I always hated this idea that being trans is like a butterfly! That doesn’t exist! No one is one thing and then becomes something completely different... I prefer to say that I have an exoskeleton. There’s something squeezing me and I need to let it go, but it’s not easy. I don’t fit in here anymore, but I don’t know what awaits me without this exoskeleton that’s already familiar. In any case, even changing my shell, I’ll continue to be myself. No chance of becoming something else”.

6. FINAL CONSIDERATIONS

Clinical work with transgender adolescents, marked by intense challenges related to gender identity and the body, requires attentive and interdisciplinary listening, in which analytical work plays a fundamental role in creating new meanings and possibilities for these subjects. It is when the adolescent questions what is conjugated from the necessary to the impossible that the tragedy of the speaking being condition can be elaborated, and for

this we can be willing to listen to them. The speeches of these adolescents reveal that transsexuality can be, at the same time, a source of suffering and a way of inventing a new form of life, in which name, body and gender take on a new meaning. Structural tragedy will always exist, the discourses that imprison change over time, and the adolescent is the one who awakens. Not like Oedipus who needs to gouge out his own eyes to avoid seeing, but like the one who reveals and questions.

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Chapter # 19

DRIVE FOR RESEARCH IN PSYCHOANALYSIS

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ABSTRACT

Freud distinguished between the drive for self-preservation and the drive for the preservation of the species, and later between the life and the death drive. Between 1908 and 1915, he wrote about *Wissbegierde* (the greed to know), but left the question of the instinctive longing for knowledge unresolved for two reasons: (a) what kind of satisfaction is connected with *Wissbegierde*; (b) how to reconcile passion and impartiality in the search for truth. Our aim is to determine whether there are arguments for accepting the hypothesis of a drive for research. If we have a theory of the development of libido (oral, anal, urethral, phallic), then what could constitute the development of the drive for research? We propose Winnicott's theories of development from the subjective object, through the transitional object, to the objective object. We could say that the prototype of the K (Bion's term) relationship is the mother–child relationship, while the exemplar is the analyst–analysand relationship in the psychoanalytic situation. Thus, the drive for research can be understood as a key personal motive in psychoanalysis, which strives to achieve a mature object relationship through object permanence, just as love is an expression of the development of the libido.

Keywords: drive, epistemophilia, K, object permanence, emotional relationship.

1. INTRODUCTION

Christopher Bollas described the arrival of psychoanalysis as the “Freudian Moment” (Bollas, 2007). He said that “there has been some failure on all of our parts to fully recognize this extraordinary moment” (Bollas, 2007, p. 2). The essence lies in the research method, the psychoanalytic method, which is based on the analyst–analysand pair and the analytic situation as a research situation that includes the free associations of the analysand and the free-floating attention of the analyst, where the analyst “must turn his own unconscious like a receptive organ towards the transmitting unconscious of the patient. He must adjust himself to the patient as a telephone receiver is adjusted to the transmitting microphone. Just as the receiver converts back into sound waves the electric oscillations in the telephone line which were set up by sound waves, so the doctor's unconscious is able, from the derivatives of the unconscious which are communicated to him, to reconstruct that unconscious, which has determined the patient's free associations” (Freud, 1912/1958a, pp. 115–116).

There is an element of passion in Freud's desire for knowledge, referred to by him as his “overpowering need to understand something of the riddles of the world in which we live and perhaps even to contribute something to their solution” (Freud, 1926/1959, p. 253).

It was through the study of Leonardo da Vinci that Freud tried to understand the passion for research. Freud first expressed his interest in Leonardo in a letter to Fliess dated 9 October 1898, and after gathering a great deal of information about Leonardo, he began to develop the subject further in November 1909, and published his book in May 1910

(Quinodoz, 2005). The instinct for research as a concept in Freud's writings was short-lived, appearing primarily between 1908 and 1915 (Blass, 2006). Freud used two terms: *Wissbegierde*, which is translated as "greed to know," "passion to know," or "instinctual longing to know," and *Neugierde*, which is translated as "greed to know" (or "greed for the new"). The English translation of *Wissbegierde* as curiosity blurred the difference between these terms. Freud wrote that in certain cases "the libido evades the fate of repression by being sublimated from the very beginning into curiosity and by becoming attached to the powerful instinct of research [German: *Wissbegierde*] as a reinforcement" (Freud, 1910/1957, p. 80). The drive for research is clearly stated here by Freud, but he did not find enough evidence to convince himself of its fundamental nature.

The aim of the chapter is to find out, by studying the psychoanalytic literature, how Freud's initial idea developed and whether there are arguments for accepting the hypothesis of a drive for research in psychoanalysis.

2. THE EMOTIONAL EXPERIENCE OF KNOWLEDGE

Fisher (2006, p. 1222) took "Bion's schema of L, H, and K to be a version of Freud's account of human experience in terms of instinctual impulses recast in terms of emotional experience." L represents X loves Y, H represents X hates Y, and K represents X knows Y (Bion, 1962, p. 43). Fisher starts "from the assumption ... in terms of instinctive impulses" (Fisher, 2006, p. 1222), proposing that "K (knowing) is related to feeling curious (the impulse to curiosity), the way L (loving) is related to feeling pleasure (the pleasure impulse, the impulse of attraction), and H (hating) is related to feeling pain (the pain impulse, the impulse of aversion)."

Here we have a kind of confusion in trying to differentiate between emotional experience, feelings, and instinctive impulses. Bion's contribution cannot be understood without Freud's two principles of mental functioning. Fisher (2006, p. 1222) compares "the tensions between the pleasure principle and the reality principle, as the dichotomy of tensions between the emotional experience of L/H and the emotional experience of K". For Bion, the importance lay in the function of comprehension (Bion, 1962, p. 4), which Freud (1911/1958b, p. 220) attached to "consciousness [which] now learned to comprehend sensory qualities in addition to the qualities of pleasure and unpleasure."

Bion goes on to resolve the contradiction that arises from attributing comprehension to consciousness, and he found support in "Freud's later conceptualization" (1962, p. 4): "But what part is there left to be played in our scheme by consciousness, which was once so omnipotent and hid all else from view? Only that of a sense-organ for the perception of psychical qualities" (Freud, 1900/1953, p. 615). Freud went on to say: "A special function was instituted which had periodically to search the external world, in order that its data might be familiar already if an urgent internal need should arise—the function of attention" (1911/1958b, p. 220).

For Freud, when we are in a position of "the non-occurrence of the expected satisfaction ... that led to the abandonment of this attempt at satisfaction by means of hallucination," then "the psychical apparatus had to decide to form a conception of the real circumstances in the external world and to endeavor to make a real alteration in them" (1911/1958b, p. 119). For Fisher, there is a conceptual gap here, and for him the decision to form a conception of the real world presupposes the existence of an impulse of curiosity (2006, pp. 1224–1225).

It is advisable here to remind oneself of Tolman's experiments (Tolman & Honzik, 1930) with rats, which led to the concept of latent learning. Even though there is no external reinforcement, the rat actively learns while exploring the maze. When food is later placed in the maze, the rat learns based on only one reinforcement. The explanation offered by researchers is that the satisfaction of natural curiosity represents internal reinforcement (Wang & Hayden, 2021).

3. THE DRIVE FOR RESEARCH

We propose the term drive, following the argument given by André Green (1991) in *Instinct in the Late Works of Freud*. Freud used the term *Trieb*, which is translated into French as *pulsion*. The English translation was *instinct*, although the word *drive* is closer to the meaning of *Trieb*. Green stated that the concept of instinct has its operational value "because, on a simple descriptive level, the hypothesis of instinct accounts better for the clinical facts than the alternative theses of object relations, meaning, adaptive function, and so on. All these alternatives leave hardly any place in their explanatory development for the impression that a part of psychic life has succeeded in seizing control of the direction of all of this life, either by dragging it along an undesired path or by paralyzing its course, against the wishes and interests of the individual concerned" (Green, 1991, p. 136). We use the term research because it is observable in the behavior of children that they explore the environment around them, without assuming what the motive behind it is be it curiosity, activity, or something else.

3.1. The Significance of the Drive for Research for Psychoanalysis

We already mentioned the Freudian moment at the beginning, as well as the importance of the discovery of the psychoanalytic method. What is the *differentia specifica* of psychoanalysis? The central tool of the psychoanalyst is interpretation, and thus psychoanalysis is a research method (and a method of cure) by insight. Bion (1963, p. 69) expressed it in his own manner: "The peculiarity of a psychoanalytic session, that aspect of it which establishes that it is a psychoanalysis and could be nothing else, lies in the use by the analyst of all material to illuminate a K relationship." As Blass stated (2006, p. 1273), it is part of the "psychoanalytic legacy that there is intrinsic value to this search for truth."

3.2. Paradox Passionate – Impartial

Through analyzing the inherent tensions in Freud's text on Leonardo, Blass (2006) came to the conclusion that Freud left the question of the instinctive longing for research unresolved for two reasons: (a) what kind of satisfaction is connected with *Wissbegierde*—what is the object of the drive, and could truth be seen as an object that brings satisfaction, and (b) how to reconcile passion and impartiality in the search for truth. Blass (2006, p. 1272) found a resolution in the workings of Eros: "We can desire truth passionately without it serving some need or wish and without it distorting our perception of reality because Eros is a striving towards unity that is universal and does not necessarily seek personal gratification".

We will approach the paradox of passionate–impartial from a different angle. If the drive and the object of the drive are in a relationship, we could ask: in what kind of relationship are they? If the object comes from the outside and the drive is satisfied, we have a perfect match and no need for development. If the object does not come, the psyche is able to hallucinate the object and thus satisfy the psychic wish—but not for long if we are

talking about nourishment for the organism. There is a need for a mediator between the drive and the object, between internal and external reality, between the pleasure principle and the reality principle. This mediating role is assigned to the Ego in Freud's structural model of the mind. The Ego develops through the struggle between the pleasure and reality principles. When the pleasure principle is dominant, the Ego will hallucinate, be prone to bias and subjectivity. When the reality principle is dominant, the Ego will observe, be prone to impartiality and objectivity.

But how does the Ego develop? What is the ideal of Ego development? Is it impartiality and the conception of reality that provides the best solution for satisfying the drives? It is not easy to give a straightforward answer to these questions. Libido development has been convincingly documented, and libido reaches its maturity with genital love. But libido is not the only ingredient of genital love. There is a complex relationship between two persons in a mature love relationship. The Ego also has a part in it—which is not surprising, because part of the libido is present in Ego development, according to Freud. But does that give us the right to ask whether the drive for research also participates in a similar way in the development of the Ego? Let us try to find out what a development of the drive for research would look like.

3.3. The Development of the Drive for Research

We propose to use Winnicott's theory of the use of the object (Winnicott, 1969), which describes the developmental progression from the subjective object, through the transitional object, to the objectively perceived object. The subjective object is one that has not yet been repudiated as a not-me phenomenon and is therefore under omnipotent control. The transitional object is a 'not-me' possession—something simultaneously created by the infant and provided by the environment. The objectively perceived object is recognized as an entity existing independently, with a clear sense of otherness. In this way, the reality principle is inherently involved in the development of the object from the subjective object to the objectively perceived object.

When Freud discovered infantile sexuality, it was relatively easy to differentiate the developmental stages of libido, or the drive for the preservation of the species. Freud faced difficulties in gaining public acceptance of his theory, because until then, sexuality was associated exclusively with adults. What makes the drive for the preservation of the species evident is the prototype embodied in sexual intercourse. Now we can ask: what is the prototype of the drive for research? We propose that the prototype for the drive for research is the mother-child relationship, and, because this relationship is embedded in the psychoanalytic setting, we propose taking the psychoanalytic process, which develops in the psychoanalytic setting, as an exemplar of the drive for research.

During that process, participants (analyst and analysand) could recognize three main relationships, or emotional experiences: L (love, appetitive experience, positive transference), H (hate, aversive experience, negative transference), and K (experience of knowing, reverie). Reverie is the mother's function of containing the experience of the baby, digesting and detoxifying it so that it can become mental and find a form. The same is done in psychoanalysis by the analyst, who contains and digests what is put into him/her by the analysand.

During the psychoanalytic process, we can observe changes from the subjective object toward the object objectively perceived, from omnipotence to independence, from part-objects to whole-objects, and so on. In this way, the K experience is connected with strivings toward object constancy or object permanence. The psychoanalytic setting has elements of permanence, stability, regularity, fixity, and durability, which enable

experiences of reverie, holding, and containment to help foster development in the analysand. Interpretation is a verbal upgrade of the experience of knowing. In this way, psychoanalysis is truly an exemplar of the drive for research, and there is an intimate connection between psychoanalysis, K, and growth.

4. THE DRIVE FOR RESEARCH AND THIRDSNESS

The essence of the Oedipal drama is the sacrifice of sexuality (Perelberg, 2009). Oedipus, who survived filicide, darkened by the difference between the two parental couples (the one who created him and the one who raised him), committed parricide without being aware of it. While living as the king of Thebes, he is tormented by the desire to discover the truth about the king's killer. Although this truth is within reach, Oedipus and the other participants in the drama turn a blind eye (Steiner, 1985) to the fact, which can be easily concluded. After the truth was revealed to him in its full extent, Oedipus blinded himself. This symbolic act indicates the deceptiveness of appearances and the turning to the inner light that alone reveals the true path to truth. There is also another view that Oedipus blinded himself because he could not bear either to face external reality or to realize that he had previously been 'blind' (Quinodoz, 1999, p. 26).

Starting from the universality of the Oedipus myth, Freud takes us back to the beginning of history through the story told in *Totem and Taboo* (Freud, 1912–13/1955a). It is his construction of the myth on the basis of which culture arose as a necessity to prevent the father of the primitive horde from acting as an omnipotent, narcissistic father who had possessed all the women and ruled through terror. By killing the father of the primitive horde, a narcissistic father who thinks only of himself—a symbolic father is introduced, represented through a totem, who is respected but also prohibits further killing (within the community) and incestuous relations. A myth is a symbolic representation of the psychological, and wider social, culture in which man lives today.

Freud's personal life was such that it "forced" him to face his homicidal desires. Immediately after his father's death, he conducted a self-analysis through which he laid the foundations of psychoanalysis as a method and of dreams as a medium between the past deposited in the unconscious and the future movement of the individual towards revival and self-knowledge through others. The psychoanalytic method works both through the mother–child dimension (analyst–analysand) and through the paternity dimension (the rule of abstaining from sexuality and violence). These dimensions carry a number of other symbolic functions that are present during the psychoanalytic process and cannot be reduced simply to the mother–child relationship and prohibition.

What is more important to point out is that, as we clearly see, sexuality is repressed, displaced, sublimated, denied, and similar; it is more difficult to see how research is inhibited, deformed, or obscured in its function. Bion perhaps expressed this most clearly with his thesis on attacks on linking (Bion, 1959), pointing to the mechanism of hallucination, barely perceptible during a session with a patient (Bion, 1958), and the patients' need to escape from the truth (Bion, 1970).

The murdering of the father of the original horde "inaugurates thirdsness, open time and genealogy" (Perelberg, 2009, p. 78). For Freud, the individual is by definition excluded from the primal scene. He wrote: "These scenes of observing parental intercourse, of being seduced in childhood, and of being threatened with castration are unquestionably an inherited endowment, a phylogenetic heritage, but they may just as easily be acquired by personal experience" (Freud, 1918/1955b, p. 97). The primal scene opens the enigma of femininity and masculinity, of creation, of thirdsness. With the drive for research, we are continuously looking for the hidden truth in all this. As Civitarese (2016, p. 493) said, "Truth, so to speak, coincides with being."

5. CONCLUSIONS

Freud developed the psychoanalytic method as a method for the research of the psyche and, in parallel, as a method of cure. As a method of research, it has even greater value, especially today, when we are faced with the enormous potential for the destruction of the human race. Now, more than a hundred years after Freud's discovery of the psychoanalytic method, we can also follow the history of psychoanalysis as a history of the development of psychoanalytic ideas, various schools of thought, conflicts among them, and so on. This history is not much different from history in general, because we are all human and, as such, prone to destruction, falsification, and wrong interpretation. That is exactly why we think it is important to extract the drive for research and give it a proper place in the psychoanalytic oeuvre.

Nevertheless, psychoanalysis is a method that interprets psychic processes and human behavior. It is of enormous value to cultivate in the psychoanalyst a research attitude through training in the observation of psychic phenomena during the psychoanalytic process. With the drive for research in mind, psychoanalysts engaged in the education and training of new psychoanalysts should examine the personal motives of candidates in training. Among these should be motives connected with a passion for the research of the psyche.

Psychoanalysis, through research, leads us to mature object relations, which are characterized by more love than hate (an expression of the development of libido) and more objects objectively perceived than subjective objects (an expression of the development of the drive for research). We are in constant dialogue with thirdness, extracting truth from the unknown.

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Section 6

Cognitive Experimental Psychology

Chapter # 20

PRICED AND PRESSED: EMPLOYED FEMALES' COPING STRATEGIES FOR THRIVING AMIDST CHALLENGES IN A DEMANDING WORLD

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ABSTRACT

Financially empowered women play vital roles in supporting their families and communities, contributing to broader societal benefits, including improved education, better health outcomes, and reduced child mortality. Employed females (EFs) face the challenge of balancing work, household responsibilities, and other commitments, which can impact their overall well-being. This study explores the challenges EFs encounter and the coping strategies they adopt, particularly during purchasing decision tasks. The results presented were part of a larger research project that included similar independent qualitative and quantitative studies. An exploratory qualitative study involved four EF focus groups that identified and described challenges and coping strategies until data saturation was achieved. Furthermore, an exploratory quantitative study (N = 255) was conducted among EFs using online questionnaires, providing descriptive insights. Across both phases, time and financial constraints emerged as the primary challenges. While many EFs utilised adaptive coping strategies—such as seeking support, planning purchases, and shopping online—some resorted to less sustainable behaviours, including overpaying for convenience, relying on fast food, and exhibiting fight-or-flight responses. These findings underscore the need for strategies that foster psychological well-being, potentially enhancing EFs' ability to manage stress, maintain productivity, and strengthen self-efficacy, ultimately supporting psychological and social well-being.

Keywords: employed females; challenges, coping strategies, well-being, women.

1. INTRODUCTION

An ever-increasing number of females have continued to enter the workforce over the past few years due to the need for increased financial support in families, while also attending to their psychosocial needs. This enables employed females (EFs) to contribute to their families and communities, promoting wider social benefits (HSRC, 2024). Although the female employment rate in South Africa (SA) is only 55,8%, this is a 38% increase from 1995 (StatsSA, 2024). However, regardless of employment status, more than 60% of women are considered the primary household purchasers of various household products, such as clothing, food, and appliances, as well as household services (IQBusiness, 2020; Kinnear & Naidoo, 2024). Additionally, the family and homemaking responsibilities of EFs have remained relatively unchanged, and EFs are consequently expected to balance dual roles regarding work, home, and other responsibilities, which add to stress and lower overall well-being levels (Commission of Gender Equality, 2024). Stressors may include work-related expectations and dual role responsibilities, such as working second shifts as a mother, wife, caretaker, or homemaker on returning from a day's work as an employee (Muis, Nai'em, Arsin, Darwis, Thamrin, & Hans, 2021). These stressors, along with education,

income and even age (Bertocchi, Brunetti, & Torricelli, 2014), negatively affect the overall well-being of EFs (Poms, Fleming, & Jacobsen, 2016).

With more than 42% of South African households being female-headed (StatsSA, 2023), female health is of utmost importance, as healthy females serve as a foundation for healthy societies. South African EFs work an average of 42 hours per week, exceeding the European average, while managing domestic responsibilities (IOL, 2019). Local cultural norms and societal expectations thus shape the specific challenges EFs face and the coping strategies they adopt, which may differ from those observed in other countries. Considering the physical and emotional burden of EFs to meet all the set responsibilities along with various challenges such as lack of time, work-life conflict and long work hours both at work and at home, EFs experience increasing levels of stress and anxiety, which may result in burnout and emotional exhaustion, all of which could influence their ability to make informed purchase decisions (Kinnear & Naidoo, 2024; Van der Merwe, Dreyer, du Preez, de Beer, Mielmann, & Wyma, 2020).

2. INFORMED DECISION-MAKING OF EMPLOYED FEMALES, THEIR CHALLENGES AND COPING STRATEGIES

Consumer decision-making is complex and influenced by psychological, social, and marketing factors, many of which are often unconscious (Šostar & Ristanovic, 2023). It is therefore not a simple task to understand different consumers, as the way each consumer thinks and makes purchase decisions differs (Fernandes & Londhe, 2014). Hence, decision-making processes are intricate, and the psychological, social, and marketing factors influencing consumer decision-making are not always considered. These influential factors are not all consciously applied to the several simultaneous processes involved during need recognition, evaluation, selection, purchase, and post-purchase evaluation of products (Schiffman & Wissenblit, 2023). Therefore, the circumstances in which consumers, such as EFs, find themselves and the accompanying challenges majorly contribute to their purchase decisions.

2.1. Challenges Experienced by Employed Females Influencing Informed Decision-Making

When compared to unemployed females, EFs often spend less time in physical stores and are less likely to devote time and effort to their shopping trips (Huddleston & Minahan, 2011). This hinders informed decision-making and is often aggravated by in-store challenges (Granot, Greene, & Brashear, 2010). Employment occupies a significant portion of the time and energy of any person's life (Devi & Rani, 2016). However, it has been found that EFs are time-constrained, as they must attend to household chores even after a day at work (Miley & Mack, 2009). EFs are thus often referred to as "time-buying-customers" (Huddleston & Minahan, 2011), as purchases frequently occur in haste to attend to various chores and roles (Schueller-Weidekamm & Kautzy-Willer, 2012). This lack of time, work, and role overload experienced by most EFs contributes to higher levels of stress and anxiety, which ultimately results in work-life conflict (Devi & Rani, 2016).

Role overload is defined as an equation where the volume of behaviour demanded by the role exceeds the time and energy available to do so (Kinnear & Naidoo, 2024), leading to role conflict, described as the demands of a role making it challenging to fulfil the demands of another (Anastasopoulou, Vraimaki, & Trivellaset, 2023). Consequently, EFs attempt to fulfil multiple roles simultaneously (Cavagnis, Russo, Danioni, & Barni, 2023) while still

aiming to thrive in their workplace (Farradinna & Halim, 2016). Nevertheless, continuous role overload and limited time experienced by EFs (Miley & Mack, 2009), along with the inconsistency between the demands placed on EFs and their capability to handle these demands (Poms et al., 2016), trigger heightened levels of anxiety and stress (Anastasopoulou et al., 2023). Stress theories concerning role expectations suggest that women's role evaluation demands and experiences of role overload are more critical than those of men. Consequently, women may experience heightened stress, ranging on a continuum from acute to chronic, increasing their vulnerability to mental health issues such as burnout, depression, and anxiety (Gonzalez-Mulé, Kim, & Ryu, 2021; Li, Shaffer, Wang, & Huang, 2021). Therefore, continuous work pressure tends to negatively influence psychological health, leading to chronic emotional problems (Farradinna & Halim, 2016; Mollart, Skinner, Newing, & Foureur, 2013), as often experienced by EFs. Burnout can be a challenge for women who play multiple significant roles and is characterised by emotional exhaustion, feeling stressed and drained, depersonalisation, and a reduced sense of personal accomplishment (Mollart et al., 2013; Farradinna & Halim, 2016). However, as women still often take primary responsibility for being the dependent caretaker, mother, and wife, burnout is more likely to occur in their lives compared to their male counterparts (Cavagnis et al., 2023; Muis et al., 2021). Therefore, EFs are more susceptible to increased levels of stress due to being exposed to stressors and frustration in everyday life (Anastasopoulou et al., 2023). Hence, EFs must have ways, such as coping strategies, to manage the challenges they face at work and home, which cannot always be controlled, before they negatively impact their well-being (Van der Merwe et al., 2020).

2.2. Coping Strategies of Employed Female Consumers

Coping strategies are efforts individuals use to manage stress and maintain progress toward personal goals, typically following challenging experiences (Bakker & de Vries, 2021). For EFs, coping strategies are essential in managing role conflict and maintaining a functional work-life balance (WLB) (Cavagnis et al., 2023). The literature distinguishes between problem-focused and emotion-focused coping (Nikolaev, Lerman, Boudreaux, & Mueller, 2023). Problem-focused strategies aim to resolve the source of stress, such as planning, task management, and seeking practical solutions. In contrast, emotion-focused strategies aim to alleviate emotional distress, often through avoidance behaviours like venting, denial, or distraction, which may not address the root problem (Nikolaev et al., 2023).

Despite the growing interest in stress, challenges, and coping (Cavagnis et al., 2023), research on how EFs in emerging economies manage household purchasing decisions alongside work-life demands is limited. Consumers, particularly EFs, adopt coping strategies to reduce stress, simplify decision-making, and regain control over their time and energy (Bakker & de Vries, 2021; Cavagnis et al., 2023). These include seeking support, outsourcing, multitasking, flexible work arrangements (Anastasopoulou et al., 2023), brand loyalty, and online shopping (McGowan, Redeker, Cooper, & Greenan, 2012). While work-life imbalance poses significant health risks (Leineweber, Baltzer, Hanson, & Westerlund, 2012), a better balance has been linked to improved psychosocial well-being, job satisfaction, and overall health (Yang & Jo, 2022; Hariri, Othman, Anuar, Lin, & Zainudin, 2024). This study examines the specific challenges and coping strategies employed by South African EF respondents in a household purchasing context.

3. METHOD

This research chapter employed a mixed-methods approach by integrating qualitative and quantitative data from two separate research studies, focusing on a similar topic, as part of a larger project to present a comprehensive exploration in a South African context. Both studies received ethical clearance from the Health Research Ethics Committee (HREC) (XXX-00003-19-S1; XXX-00079-23-A1) at the involved tertiary institution in SA and were executed according to the ethical guidelines. A concise description of each study's methodology will be presented, after which the findings of both will be integrated with the results and discussions to enhance the depth of the overall insights on this matter.

3.1. Qualitative Research Study

Non-probability, purposive, and snowball sampling methods were suitable for the qualitative study. Data saturation was reached after four focus group discussions, each with a minimum of six South African EF consumers (N = 26), to explore challenges and coping strategies when making household purchasing decisions. An interview guide ensured that participants remained focused throughout the interview. An inductive, manual content analysis was conducted to code data and identify emerging themes with categories and sub-categories. The participants also completed a brief demographic questionnaire to sketch a demographic profile of the sample population and provide context for interpreting the data. Most participants were between the ages of 18 and 35 (65.4%), and the majority (69.2%) had obtained a university degree. All participants were employed and involved in their household's purchasing decisions, as stipulated by the study's inclusion criteria. Almost half of the participants (46.1%) reported making such decisions daily. More than half of the participants (57.7%) had dependents living in their household, i.e., children or relatives, and only 29.2% were the sole providers of income in their households.

3.2. Quantitative Research Study

For the quantitative study, convenience sampling was employed to recruit South African EF respondents to participate in an online questionnaire. This questionnaire was advertised for participation on social media platforms (Facebook, Instagram, and WhatsApp) as part of a larger, descriptive, cross-sectional survey. Furthermore, a social media expert assisted in advertising the research project through paid, targeted advertisements, thereby employing convenience sampling. This chapter will focus on the EFs' challenges and coping strategies encountered when making daily purchases. Quantitative data were analysed using descriptive (frequencies, percentages, and mean ranking of factors) and inferential statistics (Exploratory factor analysis) in IBM® SPSS® Version 22. Respondents (N = 255) primarily spoke Afrikaans (43.5%), followed by English (25.9%). They were married or living with a partner (55.3%) and were relatively young (18-44 years; 71.3%). Most respondents were employed full-time (77.8%), and 64.3% had children. Although the findings of these studies cannot be generalised to the entire EF population of SA, they are deemed appropriate for the exploratory purposes of this study to shed light on this matter and guide future research on this topic.

4. FINDINGS

Table 1 presents the related themes, categories, and subcategories from the qualitative findings, alongside the quantitative factors ranked by mean scores, from most to least agreed upon, for an integrated interpretation of the findings from both studies. The qualitative findings were affirmed with the quantitative factors, and clusters of five collective challenges and six coping strategies were identified from the combined results.

Financial pressures were highlighted as a significant challenge, with rising product prices complicating the purchasing of healthy, high-quality, and eco-friendly products while adhering to a strict budget and addressing the diverse needs of households. Participants with **children** reported a distinct set of challenges, such as undertaking independent shopping excursions without their children's accompaniment or planning their shopping around their children's schedules or emotional states, which resulted in unsatisfactory and challenging shopping experiences.

Long work hours and high workload also emerged as a challenge, as they affected participants' WLB. Extended working hours restrict participants to shopping at specific retail establishments within designated time slots and days. This leads to increased expenditure and temporal store limitations, such as depleted stock levels and in-store traffic congestion, all contributing to feelings of frustration, stress, and being overwhelmed. The demanding challenge of **limited time** for household purchases is further aggravated by in-store challenges, including unavailable products, changing store layouts, poor organisation, crowded stores, and substandard customer service, which hinder efficient product procurement and contribute to heightened stress levels among EFs. Women are often the primary household purchasers and usually conduct most of their shopping independently, without assistance, highlighting the **lack of support** that exacerbates their time constraints.

To address the noted challenges, EFs revert to various coping strategies. **Familiarity** was identified as a coping strategy, helping participants save time and reduce challenges. This approach involved purchasing familiar brands from familiar stores located nearby or en route, and utilising stores with familiar layouts and preferred product offerings to minimise in-store frustrations and optimise time management. **Executive functioning support** and **cognitive flexibility** also emerged as a coping mechanism. Participants realised that specific challenges are unavoidable and, therefore, displayed a **fight-or-flight** response.

Table 1.

*Summary of the **challenges** experienced by employed female consumers and the **coping strategies** used when making household purchases, from a qualitative (themes, categories and sub-categories from four focus groups) and quantitative (N=255; factors according to Exploratory Factor Analysis) study.*

Qualitative study: Themes, categories and sub-categories			Quantitative study: Extracted factors					
Themes	Categories	Sub-categories	Factor name and items	¹ α	Inter-item correlation	² Mean factor score	³ SD	
Challenges of employed females			Challenges of employed females: (⁴ KMO = 0.904)					
Challenge 1: Finances								
Cost of living	Price increase of food. Strict budget.		Internal struggles regarding informed decisions	0.864	0.480	3.499	0.894	
			My budget is straining.					
			I often find that quality products are too expensive.					
			I feel emotional when I struggle to cope.					
			I find it hard to visit new shops/centres.					

Qualitative study: Themes, categories and sub-categories			Quantitative study: Extracted factors				
Themes	Categories	Sub-categories	Factor name and items	¹ α	Inter-item correlation	² Mean factor score	³ SD
			I find it hard to buy eco-friendly products due to high prices. I find it hard to buy healthy products. I find it hard to make purchases due to the different needs in my household.				
Challenge 2: Children influencing shopping							
Children	Limited to certain shopping times. Unsatisfying shopping experience.	Children's moods. Children's school hours.	Lack of alone time	0.725	0.472	3.360	0.998
			I have to do shopping alone; I prefer to do the shopping alone. I struggle to do shopping with my children.				
Challenge 3: Long work hours and high workload							
Work hour limitations	Certain stores.	More expensive store.	Work-life balance struggles	0.817	0.471	3.033	1.042
	Certain times.	Empty shelves. Congested traffic. Limited space.	I often experience stress; I find it hard to maintain a work and family balance. My workload is overwhelming.				
	Certain days.	Unable to compare prices.	I do not have enough time to do shopping. My work hours are straining.				
Challenge 4: Time and product availability							
Lack of time	For household purchases. Cannot plan purchases. Affects quality purchases. High volume of purchases.		Product and time availability	0.688	0.359	2.956	0.894
In-store challenges	Changing the store layout or revamping.	Untidy. Unable to find needed products. Time-consuming.	Online deliveries or purchases are not available in the town or area I live in. I find it hard to buy eco-friendly products due to a lack of availability.				
	Incorrect allocation of store products.		I do not have time to do proper research on new products or clothes.				
	Unorganised store.		I buy the first product I see due to time constraints.				
	Busy stores.	Long queues.					
	Unsatisfied service.	Employees not trained well.					
	Employees' attitude.						
Challenge 5: Lack of support							
Insufficient support	Forced to purchase products on their own.		Lack of support system	0.705	0.545	2.738	1.097
			I do not have any support from my family. I do not have any support from friends.				
Qualitative study: Themes, categories, and sub-categories of coping strategies of EFs			Quantitative study: Extracted factors of coping strategies of EFs (² KMO = 0.904)				
Coping strategy 1: Familiarity							
Shopping at specific stores	Close by.	Walking distance.	Buy familiar brand	0.711	0.460	4.034	0.654
	On the usual route. Stores with familiar layouts save time. With specific needed products. With a variety of products. Less in-store frustration.		I buy familiar products when doing necessary purchases. I buy familiar brands or products. I buy certain brands or products I know.				
Coping strategy 2: Executive function support and cognitive flexibility – emotional management							
Manage attitude by creating a mental shift	Circumstances.	Children's moods. Children's school hours.	Fight or flight response	0.662	0.342	3.838	0.736
	Poor services.		I have to multi-task. I work overtime to get my work done. When I am stressed, I suppress my feelings/emotions and continue with my work.				
Mood	Postpones shopping.	In-store frustrations.	I buy the cheapest options.				
	Good mood.						
	Bad mood.						

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Qualitative study: Themes, categories and sub-categories			Quantitative study: Extracted factors				
Themes	Categories	Sub-categories	Factor name and items	¹ α	Inter-item correlation	² Mean factor score	³ SD
Coping strategy 3: Home management support							
Shopping support	Arranged for someone to do their shopping for them.	Spouse. Family member. Others.	Relying on External sources for help and information	0.609	0.248	3.380	0.752
			I have people (e.g. husband/flat mate) to help me with household tasks. I have employees (e.g. domestic workers) to help me with household tasks. I ask advice from family/friends when I need to purchase an unknown product. I research unknown products before I buy them. I rely on recommendations of products from friends/family.				
Coping strategy 4: Pro-active behaviour							
Planned purchases	List.	Make own lists; Assistance with lists	Higher-order holistic approach	0.709	0.333	3.177	0.792
	Plan purchases for specific days.	Weekly basis. Weekends. Monthly basis. Seasonal basis.	I resort to activities such as exercise to distract me from stressful situations. I see a therapist to help me deal with stressful situations.				
	Plan purchases for specific times.	During lunch breaks. During work hours. Less traffic. Flexitime. Around children's schedules.	I plan shopping in advance. I buy eco-friendly products because it is better for the environment. Eco-friendly labelled products make purchasing decisions easier for me .				
	Check prices of items before making purchases.						
	Check for specific products before making purchases.						
	Well-thought-through purchases.	Plan to go shopping. Think about what is needed at home before shopping.					
	Bulk purchases.	Save money. Save time. Avoid daily shopping.					
	Specials to save money.	Monthly basis. Bulk purchases.					
	Cheaper products.	Easy disposal.					
	Budget.	Additional expenses.					
Meals	Advance preparation.						
Coping strategy 5: Childcare							
Childcare support	Arranged someone to look after their children.		Strategies to cope with children	0.599	0.333	2.785	0.929
			I take my children with me to do shopping to spend time with them. I take my children with me to do shopping because I do not have anyone to look after them while I do shopping. I rely on family members to look after my children when I do shopping.				
Coping strategy 6: Time and frustration-saving strategies							
Willingness to pay more	Better quality. Time-saving. Better fit. Better service.	Brands	Short-cut heuristics to save time	0.782	0.374	2.761	0.882
	I do online shopping for clothing to save time.						
Rewards to feel good	Deserved rewards.		I do online shopping for food to save time. I buy the most expensive option of the product/clothing I need. I buy take-away food because I do not have time to prepare food myself.				
Meals	Convenience food.	Cheaper. Time-saving. Effortless	I buy take-away food because I do not have time to prepare food myself.				
	Look for alternative options.	Convenience	I buy ready-made meals because I think it is healthier than take-away food.				
Shopping online	Positive towards online shopping.	General products; Clothing and cosmetics					

Qualitative study: Themes, categories and sub-categories			Quantitative study: Extracted factors				
Themes	Categories	Sub-categories	Factor name and items	¹ α	Inter-item correlation	² Mean factor score	³ SD
	Convenience.	Any time of day; Greater stock availability; Time-saving; Effortless; Specials					
	Detailed product information.	Reviews; Product comparison; Price comparison					

¹ Cronbach alpha (α)

² Likert Scale: 1: Strongly disagree; 2: Disagree; 3: Neutral; 4: Agree; 5: Strongly agree

³ SD – Standard deviation

⁴ Kaiser-Meyer-Olkin Measure of sampling adequacy (KMO)

By creating a mental shift, participants may opt to postpone shopping when experiencing negative emotional states or difficulty with children. Alternatively, they may endure in-store frustrations and substandard services, multitask while shopping, extend their working hours, suppress their emotional responses, or select the least expensive products to expedite the process.

To manage their shopping tasks efficiently, participants utilise their **home management support** — unpaid assistance from family members and spouses, or paid assistance from employees or domestic workers — to assist with shopping-related activities and product recommendations. To meet obligations effectively, participants adopt **proactive behaviours** such as compiling lists, planning meticulous shopping trips, comparing prices and products, making bulk purchases, and strictly adhering to budgets. They also identified meal preparation as a time-efficient practice, prioritised environmental sustainability by selecting eco-friendly products, and engaged in preventative behaviours, i.e., regular exercise and therapy sessions to manage stress and support their psychological well-being. Since shopping with children often leads to unsatisfactory shopping experiences, participants arrange for **childcare** support; however, some opt to face the challenge of store visits to prioritise spending quality time with their children. Participants also employ time-saving and frustration-reducing **strategies** using various shortcut heuristic approaches, such as paying premium prices, shopping online, or purchasing convenient foods to save time and avoid potential frustrations. Additionally, some participants regard purchases as a form of emotional regulation to enhance their mood.

5. CONCLUSION

Among the most prominent challenges for EFs in SA are financial pressures and time scarcity, which contribute to mental and emotional fatigue and can influence purchasing behaviour. According to Dzomonda, Neneh, and Jaiyeoba (2025), women who employ a combination of emotion-based and problem-based coping strategies tend to be more resilient and navigate challenges more effectively, thereby enhancing their subjective overall well-being. However, it is evident from our findings that although participants implement both these coping strategies, mainly to address time-related challenges, they also frequently employ unhealthy and unsustainable behaviours. These include suppressing emotions, working excessive hours, opting for the cheapest products or overspending, and relying on convenience, which often leads to unhealthy meals. EFs also indicate coping strategies; even though it is the only limited choice they must make, i.e., taking children with them to do shopping due to the lack of a solution. Even though these coping mechanisms may provide temporary short-term emotional coping by alleviating stress or helping to achieve a

short-term goal, in the long run, they ultimately reinforce unhealthy habits, exacerbating EFs' challenges. Consequently, over time, this adds to heightened stress, a diminished sense of self-efficacy, and a reduction in overall psychological and social well-being among EFs. Therefore, it is essential to promote and advance problem-focused coping strategies such as supportive employment environments, proactive behaviour, effective home management support systems, and the use of supportive technological advancements. These strategies foster sustained psychological resilience, assist with emotional regulation, and enhance subjective overall well-being.

With "priced and pressed" becoming the norm across SA and the broader global landscape, females are under pressure and struggling to cope with WLB, while increasingly joining the workforce out of necessity due to the high costs of today's economy. Although females in the workforce can reflect societal advancement, most females need to navigate a double burden of career and caregiver roles. Female burnout severely impacts all levels of society, and healthy coping strategies are not a luxury anymore but a lifeline to ensure the overall well-being of EFs. Accordingly, encouraging sustained, constructive coping mechanisms – encompassing both problem- and emotion-focused strategies – is critical for fostering and safeguarding the overall well-being of EFs.

6. IMPLICATIONS AND RECOMMENDATIONS

Although this study highlights key challenges and coping strategies, the findings are context-specific and not generalisable to the global EF population. Therefore, further research across diverse settings, both within SA and globally, is essential to gain a deeper understanding of sustainable, healthy coping strategies. These strategies can alleviate the challenges EFs face and enhance their overall well-being, guiding more targeted and sustainable interventions.

One significant issue reported by EFs is the frustration caused by frequent changes to store layouts. While intended to meet retail industry goals, these changes often increase stress and deter engagement, prompting avoidance rather than participation. Retailers should critically assess the actual benefits of such changes.

Another key concern is the lack of flexible working hours. Despite growing awareness of its importance, the industry essentially maintains rigid schedules and shows limited support for EFs' family responsibilities. This issue, highlighted by Kinnear and Naidoo (2024) in the South African context, underscores the need for employers to prioritise flexible work arrangements. Doing so would empower EFs to manage their roles more effectively, reduce stress, boost productivity, and improve their overall quality of life.

Promoting WLB for EFs is also aligned with broader societal goals. Sustainability, which aims to improve living standards and ensure a better future, is central to this. The United Nations' 17 Sustainable Development Goals (SDGs) reflect this commitment, particularly SDG 3 (Good Health and Well-being), SDG 5 (Gender Equality), and SDG 8 (Decent Work and Economic Growth) (Anastasopoulou et al., 2023). Addressing WLB challenges through evidence-based research and industry reform will thus contribute to a healthier, more equitable, and sustainable future for both EFs and society.

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Section 7

Legal Psychology

Chapter # 21

RESISTANCE TO THOSE HARMFUL COMMENTS: How Métis youth resist and cope with online hate

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ABSTRACT

Understanding how Indigenous youth cope with negative online experiences remains largely unexplored. In this study, the concept of the *warrior*, as articulated by Alfred (2005), serves as a metaphor for resilience, strength, and courage. The objective of this study was to honour the voices of Indigenous youth and to understand how they navigate the challenges of online hate as "warriors" in a digital world. All four participants self-identified as Métis or First Nations and resided in British Columbia, Canada and were between the ages of 18 to 21 years of age. In sharing circles, youth created an online empathy map to collaboratively develop a persona or narrative representative of their experiences. The 'Online Warrior' identity involved standing up for oneself, practicing self-care, and using social media to promote positive messages about Indigenous culture and people. Indigenous youth actively engaging in cultural revitalization by defending and honoring their Indigenous ways of knowing. Study findings highlight the need for support from emotional connections with family and peers. A need for educational support to help navigate online life in a balanced way and the importance of social and emotional learning programs that emphasize community, cultural identity, and resilience were also emphasized.

Keywords: Indigenous methodology, online hate, social and emotional development, adolescents.

1. BACKGROUND

Indigenous youth are increasingly turning to digital spaces to explore their identity and build community. Yet, these same spaces are sites of risk, where racism and colonial ideologies continue to circulate unchecked. While literature on adolescent cyberbullying identifies problem-focused and emotion-focused coping strategies (Lazarus & Folkman, 1987), such frameworks often fail to capture Indigenous youths' holistic ways of coping, which interweave relational, community, and cultural supports. In what ways do Indigenous youth experience and cope with online hate? *Online hate* is defined as "any communication that disparages a person or a group on the basis of characteristics such as race, color, ethnicity, gender, sexual orientation, nationality, religion, or political affiliation" (Castaño-Pulgarín et al., 2021, p. 1). Through internet and social networks, online hate can be "repeatedly, systematically, and uncontrollably" directed toward marginalized groups due to power imbalances in digital spaces (Castaño-Pulgarín et al., 2021, p. 1).

High levels of ethnic victimization among adolescents were risk factors for low levels of positive peer relations, school bonding and school motivation (Strohmeier & Gradinger, 2024). Recent Canadian statistics show that 71% of youth aged 15 to 24 have encountered online hate, substantially higher than the national average of 49% (Statistics Canada, 2024).

Although many studies describe general risks and coping strategies for youth exposed to online hate (Ng, Chua, & Shorey, 2022; Hutson, Kelly, & Militello, 2018), these frameworks often overlook the relational, intergenerational, and culturally resurgent practices that promote resilience among Indigenous youth. This high prevalence was especially concerning for Indigenous youth whose social media use was closely tied to oral traditions and relational forms of connectedness (Rice et al., 2016). For instance, online hate directed toward Indigenous people often took culturally specific forms, such as defacing digital images of deceased kin and sharing them on social media (Carlson & Frazer, 2018). This study addresses a gap in the literature by exploring online hate experienced by Indigenous adolescents in British Columbia, Canada.

1.1. Colonial Legacies and Online Hate in Indigenous Adolescents' Digital Lives

Positioned within broader exploration among Indigenous young people, this study specifically centered on Métis adolescents. This distinction-based approach recognizes the traditions, identity and historical experiences of Métis people in Canada (Paul, Monchalin, Auger, & Jones, 2023), which may shape their technology use. Throughout the paper, the terms *Métis* and *Indigenous* were used to situate the study among Indigenous peoples while also connecting to the contexts in Canada. Paul et al. (2023) found that Métis individuals, particularly women and Two-Spirit persons, are disproportionately exposed to racism and exclusion in both online and offline contexts. This discrimination, rooted in social determinants of health factors such as racism and colonization, often increase biopsychosocial-spiritual wellbeing concerns (Czyzewski, 2011).

The impacts of online hate extend beyond devices and technology, contributing to increased rates of hate crimes, discrimination, and gender-based violence (Castaño-Pulgarín et al., 2021). These cyberdeviant harms are especially detrimental to adolescents, who may suffer from greater internalizing and externalizing problems (Wachs et al., 2022a; Brewer et al., 2023). Despite these known risk factors, few studies have explored how Indigenous youth navigate and cope with online hate (Broll, Dunlop, & Crooks, 2018). This is critical oversight, given that Indigenous youth frequently use social media to reclaim and celebrate their identities, which are a powerful form of cultural resurgence (Molyneaux et al., 2014). Indeed, their coping strategies in the face of online hate remain underexplored. The present study aims to fill this gap by examining online hate experiences and coping mechanisms of Métis adolescents. By exploring Indigenous youth experiences, the present study extends cyberbullying literature, highlighting culturally resurgent strategies that interweave relational support, intergenerational teachings, and Indigenous epistemologies.

This research was especially timely considering the Truth and Reconciliation Commission of Canada's (2015) Call to Action #62, which urges educators to bring Indigenous ways of knowing into the public education system. This call emphasizes the importance of working with Indigenous people in ways that respects their knowledge systems. Similarly, the Government of British Columbia (2019) enacted legislation to implement the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), requiring educators to create culturally safe environments and raise awareness about the enduring impacts of colonization. In online contexts, this may mean facing the challenge of "settler gaze" or dismissing non-Indigenous audiences scrolling social media with hostility often experienced by Indigenous youth (Carlson & Frazer, 2020). Ensuring the safety and wellbeing of Indigenous youth in digital spaces is a vital step toward addressing these historical and ongoing social injustices.

1.2. Emotional Wellbeing, Coping, and Indigenous Youth

Coping strategies in adolescence are often categorized into two developmental functions: *problem-focused coping*, which aims to change the stressful situation, and *emotion-focused coping*, which seeks to regulate emotional responses (Lazarus & Folkman, 1987). As social media becomes integral to young people's daily life, the concept of empathy is central to how cyberaggressors and victims experience online interactions. That is, empathy may involve young people's ability for perspective-taking, empathetic joy, and empathic stress in online settings (Segura, Estévez, & Estévez, 2020). Study findings indicate that deficits in empathy are associated with higher rates of cyberaggression (Segura et al., 2020). Intervention studies show mixed results with some studies report improvements in self-efficacy and empathy, while others find little to no reduction in cybervictimization or mental health problem outcomes (Ng et al., 2022; Hutson et al., 2018). Yet, developmental frameworks often overlook Indigenous peoples' worldviews of holistic wellbeing, which center the interconnectedness of individual, community, and land. Research suggests social networking sites can support Indigenous youth in reclaiming identity and traditional teachings amid colonial aggression (Molyneaux et al., 2014). In one study, nearly 80% of Indigenous participants reported using social media to celebrate their culture, highlighting its role in cultural resurgence (Molyneaux et al., 2014). Despite this promise, little is known about how Métis youth, in particular, cope with online hate in culturally resurgent ways. This study seeks to understand Indigenous ways of knowing, being, and doing to explore the online experiences of Indigenous youth.

1.3. Indigenous Resilience: Online Warriors and Indigenous Storywork

The concept of the *warrior*, as shared by Alfred (2005), was used in the present study as a metaphor for Indigenous resilience, strength, and courage. In many Indigenous cultures, the warrior was a protector – someone who faces adversity with bravery and upholds community values (Louie, 2021). Past research drew on the Indigenous metaphor of the “new warrior” to examine how Indigenous youth experienced and responded to educational challenges (Hare & Pidgeon, 2011). Their new warrior experiences showed that racism shaped their schooling, and they relied on Indigenous cultural strengths and supports, such as family and community, to address the inequalities they encountered (Hare & Pidgeon, 2011). In the current study, the *online warriors* metaphor was applied Indigenous adolescents who navigate the challenges of online hate and cyberaggression. To be an online warrior was not only to endure harmful digital encounters but to actively resist and transform the narratives that target their identities. This framing allows Indigenous youth to share their experiences in ways that reflect both the harm they face and their roles as agents of resistance and empowerment. It also emphasizes the importance of collective identity and relational resilience, as youth see themselves as connected to a larger effort to uplift others in online spaces.

This research is grounded in *Indigenous Storywork*, an Indigenous methodology developed by Archibald (2008), which offers a culturally resurgent framework for involving Indigenous youth and their stories. Storywork is guided by principles of respect, reciprocity, reverence, responsibility, holism, interrelatedness, and synergy. It affirms oral traditions as a method for knowledge transmission, healing, and identity among Indigenous people. In this study, online Sharing Circles, a cultural practice of gathering in safe, egalitarian, communal spaces, were used to involve Indigenous youth. Storywork may enable Indigenous youth to express how they cope with online hate in ways that honour and respect their voices and storied epistemologies. This approach highlights the importance of strength-based,

Indigenous methodologies to explore how Indigenous youth navigate online hate, bridging cyberbullying research with Indigenous knowledge systems.

1.4. Study Aim

The aim of this study was to centre the voices of Indigenous youth and explore how they navigate online hate as *warriors* in a digital world. This research was guided by two questions: 1) What types of online hate do Indigenous youth experience; and 2) How do Indigenous youth conceptualize being a "warrior" to cope with online hate? Through these questions, the study sought to highlight the challenges Indigenous youth faced online and the strategies they use to cope with adversity.

2. METHODS

2.1. Positionality Statement

This study was shaped by a team of Indigenous and allied researchers working within a relational paradigm grounded in Indigenous oral protocols. Our team included professors, assistant professors, PhD and MA students from the Faculty of Education, spanning Human Development, Learning, and Culture; Language and Literacy Education; Counselling Psychology; and Educational Studies. One team member is a proud nonbinary mestizx from Mexico. We are united by a commitment to social justice, youth wellbeing, and the co-creation of culturally safe digital spaces. Our diverse positionalities, as educators, scholars, and community members, informed all stages of the research. Reflexive thematic analysis was guided by principles of Storywork, centering Indigenous youth voices in the meaning-making process.

2.2. Participants

Participants met the following eligibility criteria: they were between 18 to 25 years of age, proficient in English, and users of technology. Four Métis youth, aged 18 and 21, were recruited from British Columbia (B.C.), Canada. Three resided on the mainland of Southern B.C. region and one on Vancouver Island. All participants identified as young women; three identified as bisexual or pansexual and one as heterosexual.

2.3. Data Collection

The study was conducted in partnership with the Métis Nation of British Columbia (MNBC). The research team engaged in discussions with the MNBC Provincial Youth Manager and the Youth Events and Communications Coordinator to share the study's purpose and obtain governance approval. Recruitment was led by MNBC through digital outreach (e.g., email listservs and social media) and further promoted during in-person Métis community gatherings and events (e.g., word of mouth). In alignment with Indigenous relational ethics, informed consent was offered orally or in writing, with oral consent documented by recording the date, time, and location (CIHR, 2015). Ethical approval was obtained from a university behavioural research ethics board (certification: H21-02364). Each participant received a \$40 gift card in recognition of their time and contributions to the Sharing Circle.

Sharing Circle. Participants engaged in a two-hour Sharing Circle held via an online video conferencing platform (e.g., Zoom). The research team collaborated with participants to determine a suitable time for the session. At the outset, consent procedures were reviewed, and a permission to video and audio record the discussion was obtained. Facilitation was led

by three researchers (one doctoral student, one master's student, and one faculty member), who rotated roles across activities. Each activity was introduced with a clear explanation of its purpose with guidance provided as needed. To maintain confidentiality, participants were informed that they would be assigned pseudonyms. The session was opened and closed by the MNBC Provincial Youth Manager, adhering to oral protocols. The Sharing Circle followed a semi-structured format to foster dialogue, reflection, and collective storytelling (see Table 1).

Table 1.
Sharing Circle Activities.

Topic areas	What youth will do	Time
Opening the Sharing Circle	Participant Informed Consent	30 minutes
	Land Acknowledgements and MNBC welcome	
(Zoom waiting room enabled)	Research Team Introductions Respectful Sharing Circle Protocols	
	Introductions Ice-Breaker Group Activity	
Participatory Design Activity	Online demographic questionnaire	40 minutes
	Create Persona Story	
Break		10 minutes
Mobile app design	Demonstrate Qualtrics survey app	25 minutes
	Circle discussion on how to be inclusive of Indigenous ways of knowing on the survey app and in data collection	
Break		5 minutes
Closing the Circle	Know-Wonder-Learned Chart activity	10 minutes
	Thank you and \$40 online gift card preferences	

The session commenced with an interactive icebreaker activity, followed by a brief online questionnaire that consisted of two sections: (i) demographic information and (ii) online experiences and device use. Following the questionnaire, an online empathy map was employed to gain insights into the lived experiences of Indigenous youth, with the objective of collaboratively developing a persona or narrative representative of their experiences.

The *persona story* was a collective storytelling technique that synthesizes participants' insights into a fictional yet relatable character embodying shared experiences, challenges, and aspirations (Sam, Richardson, & Currie, 2022). This technique allows researchers to explore complex adolescent behaviors and attitudes in a more accessible, trauma-informed

manner to understand participants' experiences. In this study, the persona story was intended to reflect the collective experiences of Indigenous youth in online spaces.

Research team members introduced a Miro board, an online collaborative whiteboard tool, to facilitate the visual construction of the persona story. To ensure accessibility and protect participant privacy, research assistants input the information shared verbally by participants, eliminating the need for participants to create their own Miro accounts. Participants were invited to contribute demographic characteristics (e.g., name, age, gender, family life) that would embody the persona. The empathy map was organized into multiple quadrants, each labeled to capture sensory aspects of the persona's experience: "How do they spend time online," "How have they experienced someone being mean online," "How are they a warrior," "What do they see," "What do they say," "What do they do," "What do they hear," "What do they think," and "What do they feel?"

At the conclusion of the Sharing Circle, participants engaged in a debrief discussion facilitated by a learning assessment. A *K-W-L chart* graphic organizer was comprised of three columns: the first column (K) represented participants' prior knowledge about online interactions; the second column (W) inquired about what participants "Wanted" to learn regarding the Online Warriors topic; and the third column (L) prompted participants to reflect on what they had "Learned." The research team systematically compiled a master list of all participant responses from the Sharing Circle discussion to capture the collective insights generated during the session.

2.4. Data Analysis

Analysis was led by the Primary Investigator and supported by Graduate Research Assistants, who examined the full dataset. We used reflexive thematic analysis (Braun & Clarke, 2021) to interpret data, guided by Indigenous methodologies particularly cyclical, relational, and iterative processes of data meaning making (Kovach, 2021). Reflexive thematic analysis was conducted as an active and interpretive process rather than a mechanical coding exercise. We began by immersing ourselves in the transcripts, listening to and reading participants' words with attention to emotion, story, and nuance. Initial coding was conducted inductively and flexibly, with codes reflecting both semantic and latent meanings related to our research focus. We then moved iteratively between codes and the full dataset to construct potential themes captured meaningful patterns of shared experience. Themes were reviewed, refined, and redefined through collaborative discussion, with attention to relational and Indigenous ways of knowing of the stories shared. Our reflexive engagement recognized that meaning was co-constructed through our analysis, shaped by our diverse positionalities, and the commitments we bring as education and health researchers. The final themes are presented with illustrative quotes, honouring the voices and experiences of participants.

3. RESULTS

The use of persona stories during the Sharing Circle created a culturally safe and imaginative space for participants to explore experiences of online hate while maintaining confidentiality. Grounded in relational storytelling, the persona framework paired with an online empathy map supported participants in sharing their insights with depth and intention. This method encouraged focused reflection while also allowing participants to speak indirectly about personal experiences through the shared lens of a fictionalized Métis youth. The persona of Sara emerged as a central narrative figure, embodying collective themes and

emotional truths drawn from participants' contributions. Their story is presented in detail to reflect the layered perspectives shared by participants to honor the generative potential of co-created Storywork. Verbatim excerpts from the Sharing Circle are included throughout to foreground participants' voices and to illustrate themes that were generated from the analysis.

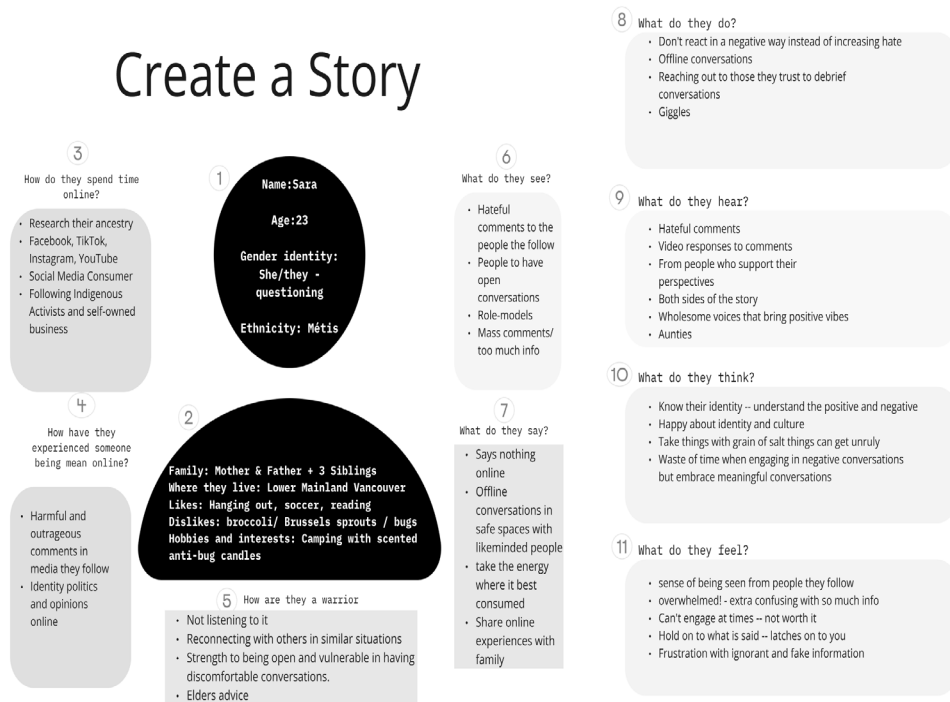
3.1. Findings from Persona: Sara's Story

Figure 1 shows Sara who identifies themselves as a 23-year-old Métis female. Although she goes by the pronouns of, she and her, Sara is questioning her gender identity and also goes by they and them. They live with their family consisting of three siblings, mom, and dad who reside in Southern British Columbia in the city of Vancouver. Sara likes hanging out, playing soccer, and reading. They dislike broccoli, brussels sprouts, and bugs. One of their hobbies and interests include camping with scented anti-bug candles. When online, they spend their time on Facebook, TikTok, Instagram, and YouTube. They enjoy researching their Indigenous ancestry online. Sara follows Indigenous activists and Indigenous self-owned businesses on social media. They mostly consume social media rather than create content. While engaging online, they have experienced people being mean by coming across harmful and outrageous comments in the social media accounts that they follow. They witness problematic identity politics and opinions online, for instance they may be cyberattacked about their "Indianness." This includes them seeing hateful comments directed at the Indigenous people, communities, and groups that they follow on social media. They hear hateful comments and video responses to comments on social media. Sara will seek out people who support their perspectives online. Their social support were wholesome voices that show positive vibes, including family members like their Aunties and Elders. Sara was a warrior against these mean online interactions by not listening to the comments, connecting with others in similar situations, seeking Elders' advice, and gaining strength through being open and vulnerable to having uncomfortable conversations with others regarding difficult topics. They see role-models and other trusted adults being open to having these difficult conversations about online interactions. They do not say anything online, rather, they save their energy where it can be best utilized. Sara has these conversations offline with likeminded people and their family members. Likewise, they do not react in a negative way that could increase hate. Instead, they chose to have offline conversations to debrief with adults and peers who they can trust while laughing it off. They know about their Indigenous identity and culture. Sara embraces her Indigenous identity and culture. They understand both the positive and negative, take things with a grain of salt, and know things can get unruly online. They do not waste their time engaging in negative conversations, rather they embrace meaningful ones. However, Sara sometimes feels overwhelmed and confused with all the information readily available online and cannot engage in online interactions. They cannot help but latch on to online hate. Sara gets frustrated with ignorant and fake information. Overall, Sara feels it is not worth it. Sara has a sense of being seen from the trusted adults and peers as well as the Indigenous activists they follow online.

The persona story illustrated the complexities of both positive and negative online experiences faced by Métis youth. Participants described multiple manifestations of online hate, including derogatory comments targeting Indigenous social media accounts, the circulation of harmful video content, and weaponization of identity politics by anonymous users. These experiences were not perceived as isolated from offline life; rather, participants expressed a sense of continuity between their digital and physical realities. In response to online harms, they emphasized the role of familial and peer relationships as key sources of support. Reconnection with Indigenous knowledges through stories, teachings, and

community practices were also identified as a vital strategy for restoring balance, coping, and strengthening resilience in the face of online adversity.

Figure 1.
Persona Story of Sara.



3.2. Online experiences and device use questionnaire findings

Participants described their online habits through a questionnaire exploring device use, social media engagement, and digital content consumption. All four participants reported having sufficient data for their online usage. Three indicated that they spend somewhat more time on their devices than their friends and peers, with social media representing a substantial portion of their activity. Two participants stated that 50% of their online time is dedicated to consuming content on social media platforms such as Instagram, Snapchat, and TikTok, while the other two participants reported spending a smaller proportion of their time on these activities. All participants indicated that they allocate either some (50%) or no time (50%) to uploading, sharing, or posting personal content (e.g., photos, videos, or information about others) on social media. All participants reported spending either no time (50%) or some time (50%) engaging in online gaming with others. Three participants (75%) reported spending most or all of their online time watching television shows or movies.

In terms of social media engagement, three participants (75%) maintained some public profiles across various platforms (e.g., Instagram, Snapchat, TikTok, Facebook, YouTube). One participant had over 1,000 followers on their most popular social media site, while the other three had follower counts ranging from 200 to 500. All participants expressed no desire for additional followers. Three participants reported knowing all of their followers in person

on their most popular platform, while one participant indicated familiarity with approximately half of their followers.

Participants provided text responses to an open-ended question, “How have you tried to cope with others being mean online? Please share.” One participant noted, “Spending time off my phone. Sharing stories with my friends and hearing I’m not the only one.” Another participant stated, “Only having followers that I know [or] have met.” A third participant reported, “Ignore it. Not using Facebook/Instagram often.” Another participant shared that being an Online Warrior means, “Knowing how to take care of oneself and using the internet in a way that we need (either not using it, or using it often), but just using it in a way that benefits our individual needs.” One participant described being an Online Warrior as follows:

Posting and sharing anything online that makes you happy, no matter if you know someone might be rude. When you see other people being rude online, you stand up for them because that little bit of support can mean a lot to someone. If you do accidentally offend someone online, apologize for it and make sure to avoid doing it again. Spreading good messages and understanding the impact your media has on others.

Participants characterize an Online Warrior as someone who was mindful of how online behaviors (e.g., posting, internet use, and comments) affect their own feelings and those of others. This conceptualization suggests that Online Warriors utilize technology and the internet to promote positive content and support within online communities. These findings illustrate the proactive role Indigenous adolescents play in supportive digital spaces while balancing their wellbeing in the face of online negativity.

3.3. Know-Want-Learned Chart Findings

A review of participants’ responses during the debrief activity revealed that they have “grown up online.” There was little distinction between online and offline life; instead, technology was seamlessly integrated into their daily lives. Participants indicated a familiarity with social media to consume content, such as memes, and expressed a desire to follow Indigenous rights advocates and learn about Indigenous knowledges through online platforms.

Participants expressed concern about how to assist others in coping with online hate, particularly where they “cannot walk away from hurtful” expressions of racism and political hate speech. They grappled with the challenge of maintaining balance as a form of self-care, discussing strategies such as implementing screen time limits and social media restrictions.

Participants reported learning from the Sharing Circle that they are “not alone in what [they] are feeling.” They recognized the importance of seeking out trusted adults and peers as online and offline support systems for engaging in vulnerable conversations. Participants acknowledged that not all online experiences are negative, actively seeking out and engaging with positive Indigenous social media accounts that foster a sense of community. Table 2 provides an overview of the insights shared by participants, reflecting their collective experiences and strategies for navigating the complexities of online experiences.

Table 2.
K-W-L Chart.

K What did I already know about the topic?	W What do I still wonder about the topic?	L What have I learned?
• Grew up online (e.g., funny memes, personal relaxing, know people who following) • How bad online communities can me (including Indigenous social media account comments) • Grew up online whole life and know do not take it personally • Indigenous people advocate for youth and share activism online	• How to respond to people and educate people • Take care of self and one's energy • How much is it worth it to engage (e.g., fake fun lives online) • Living it every day and cannot walk away from hurtful cyberattacks on our identity • Balance engaging when to respond to hurtful comments but also not feeling responsibility to take on everything (e.g., balance with scree time - restrictions, how to cut down screen time?)	• Not alone in what you are feeling and what we have gone through • Find people with similar opinions to have vulnerable conversations and support systems • Not worth my time and/or energy • Not everything online is negative • Find Indigeneity • Other people have similar online experiences • There are people who care

4. DISCUSSION

Findings from this study highlight the resourcefulness of Indigenous youth in navigating and coping with online hate. Participants marshalled a range of strategies that involved both physical and psychological distancing from harmful content, including taking breaks from social media and refusing to engage with cyber-aggressors. A key concept that emerged was the notion of the *online warrior*, which participants used to describe their acts of agency, resilience, and Indigenous knowledges. This identity was not only about self-preservation but encompassed the responsibility to stand up for oneself and one's community, to practice self-care, and to use digital spaces for affirmation and celebration of Indigenous peoples. Unlike prior studies on cyberbullying, this chapter highlights how Indigenous youth actively mobilize intergenerational support and community networks in real time to counter online hate, an approach not previously foregrounded in the literature. Together, these findings emphasize that digital spaces function simultaneously as sites of vulnerability and cultural resurgence for Indigenous youth. Study findings show that

Indigenous youth use digital spaces to express community care, resistance, and identity affirmation.

Previous research shows that youth who use active coping strategies were better able to mitigate the emotional effects of online victimization (Poh Chua et al., 2022; Peker & Yalçın, 2023). In alignment with this, our findings demonstrate how participants leaned on emotional support from family, peers, and community as protective factors. Indeed, these emotional support factors may act as buffers against online hate (Bedrosova et al., 2022). Many participants in the current study spoke of reconnecting with their Indigenous culture and knowledges as part of their strategy to cope with online hate, often describing this process as advocacy. This extends prior research by showing that cultural resurgence strengthens not only identity affirmation but also functions as an active psychological regulation strategy that intertwines community supports with digital engagement. These findings align with Price and Dalgleish (2010) work showing that social media can function as a tool for Indigenous cultural resurgence, allowing youth to reconnect with traditions and languages in meaningful ways. Our research adds to this body of work by providing a persona story of how Indigenous youth blend problem-focused and emotion-focused coping strategies in the face of online hate, showing the interconnectedness of cultural pride, community belonging, and digital literacy. Our findings further indicate that how youth mobilize problem-focused, emotion-focused, and culturally resurgent coping strategies simultaneously, highlighting a unique intersection of traditional knowledge with contemporary digital behaviour.

A recurring theme in the present study findings was the importance of reconnecting with culture and seeking guidance from trusted adults—coping strategies that were central to how participants processed and responded to online hate. This study shows how participants interweave guidance from Elders, Aunties, Knowledge Caretakers alongside digital strategies, which connects Indigenous ways of knowing with online behaviour. This was evident in Sara's story, a Métis youth questioning their gender identity, who drew strength from both online and offline communities to navigate harmful online interactions. Sara's experience highlights how Indigenous youth balance social media use with cultural, relational, and community resources to balance wellbeing. Unlike broader trends where many young people hesitate to involve adults (fearing they may not understand digital complexities), Sara and other Indigenous young people actively sought out parents, Elders, Aunties, and Knowledge Caretakers.

These findings reflect relational, intergenerational approaches to help-seeking that challenge dominant assumptions within cyberbullying literature. They demonstrate how Indigenous youth draw on community-based coping strategies that reduce psychological harm, foster a sense of emotional safety, and maintain connection to culture. *Culturally resurgent resilience*, as illustrated here, is conceptualized as a form of resilience rooted in traditional teachings, relationality, and intergenerational kinship. Rather than being solely an individual skill, it emerges through participation in kinship networks, connection to Indigenous knowledge systems, and engagement with community values. Surrounded by affirming voices from family members and Indigenous activists on social media, Sara exemplified culturally resurgent resilience. Their story highlights the psychological impacts of online hate while showing community support and Indigenous knowledge systems foster identity safety, emotional regulation, and empowerment. Participants were acutely aware of the pervasiveness of online hate targeting Indigenous people. Indigenous youth face divergent challenges in this regard, as their online experiences are shaped by historical trauma and the ongoing negative impact of colonialism (Carlson & Kennedy, 2021; Paul et al., 2024). Feelings of isolation, overwhelm, and vulnerability were reported in the current study findings, echoing previous findings that link cyberhate to increased psychological stress

among marginalized youth (Wachs et al., 2022b; Gelber & McNamara, 2016; Arshad-Ayaz, Naseem, & Hizaoui, 2022). Although the study focuses on resilience and coping, participants' encounters with online hate were intertwined with reported emotional impacts, including anxiety, distress, and increased vigilance while navigating digital spaces. Importantly, this study shows that Indigenous youth actively resist these harms by rejecting assimilationist narratives and engaging in cultural resurgence, positioning digital participation as a site of political, cultural, and psychological resilience. This aligns with Alfred's (2005) concept of the warrior – defined not by violence or confrontation but cultural strength, resistance, and responsibility. Participants described defining Indigeneity on their own terms and using digital tools to protect and uplift Indigenous people. This reframing of “warrior” situates online engagement as a contemporary form of Indigenous resistance and community care. Participants' actions indicate how identity-affirming digital engagement can counteract internalized harm and promote psychological resilience. These culturally resurgent strategies reflect experiences that are not typically captured in cyberbullying research, marking a unique contribution of this study.

Online privacy and platform awareness also generated as important themes. Participants demonstrated a nuanced understanding of the risks and benefits of digital engagement, often modifying their privacy settings and follower interactions to ensure emotional safety. Rather than responding to online aggression with confrontation, many chose to disengage from negativity and seek meaningful offline conversations with trusted individuals. Our findings were also consistent with other studies showing that Indigenous youth and their communities experienced a shared recognition of the harmful colonialist attitudes and associated trauma but also realized the potential to challenge hurtful narratives on social media and use digital spaces to promote discursive shifts and positive social change (Carlson & Frazer, 2020; Carlson & Kennedy, 2021). By linking these individual coping strategies to broader social and systemic implications, this study provides guidance on how platform providers, educators, and policymakers could ground interventions in Indigenous knowledges to reduce online hate. These findings point to systemic implications, particularly the need for digital platforms to attend to online hate specifically targeting Indigenous peoples, and to develop content moderation practices that reflect Indigenous ways of knowing. Participants expressed a desire for greater educational support to help them navigate online environments in ways that protect their wellbeing. Consistent with UNESCO (2021), which emphasizes the role of education in responding to online hate speech, participants in this study called for curricula that reflect their lived experiences. The findings suggest a need for reimagined Social and Emotional Learning (SEL) programs that center Indigenous worldviews and directly address racism and exclusion (Goforth et al., 2024). This study emphasized that culturally resurgent, community-led SEL programs could serve as systemic interventions that go beyond individual coping and address structural roots of online hate. Such programs must move beyond universal frameworks by grounding in Indigenous pedagogies, land-based learning, and community-led approaches to digital citizenship. SEL programs that are community-led and culturally affirming could play an essential role in helping Indigenous youth develop strategies for resilience in both online and offline life. This implies that mainstream SEL models may be insufficient without Indigenous knowledges that honour land-based learning, collective responsibility, and relationality.

While the experiences shared in this study were situated within distinct cultural and geographic contexts, they highlight broader patterns of strength and resistance among Indigenous youth. Indeed, the perspectives of male and non-binary youth, youth from other Indigenous Nations, or those living in other regions may differ, highlighting the need for future research that incorporates diverse voices. Responses to online hate may vary across

Nations, geographies, access to technology, and community supports, highlighting the need for localized approaches. Future research could also explore the potential long-term psychological and social impacts of repeated exposure to online hate, as well as the influence of structural conditions such as platform types, data governance, and access to culturally resurgent services.

While technology and social media shaped the lives of adolescents, participants emphasized that traditional teachings, family support, and community connections that were key aspects of culturally resurgent resilience. By drawing on family networks and Indigenous teachings, participants mitigated the emotional toll of online hate, affirmed their identities, and sustained a sense of safety and belonging. These findings call for educators, health professionals, and youth-serving systems to prioritize partnerships with Indigenous peoples rather than short-term or one-size-fits-all programming. Further, these study findings indicate the critical role of educators, health professionals, youth service providers, working in true partnership with Indigenous people to develop relational, culturally resurgent supports in response to online hate. This research advances understanding of the intersecting identities of Indigenous and gender-diverse youth and highlights their capacity to transform digital spaces as empowered online warriors.

4.1. Limitations

This study had several limitations. First, the sample size was small and drawn from a specific region, which limits generalizability across diverse Indigenous Nations and peoples. Additionally, all four participants were young Métis women, and three identified as bisexual/pansexual; the experiences and coping strategies of male, non-binary, or youth from other Indigenous Nations may differ. Second, participants self-selected into the study, meaning those most willing to speak about online harm may differ from youth who experience these issues but remain silent or untrusting of research processes. Third, the study focused primarily on coping strategies and did not examine long-term psychological, social, or developmental impacts of repeated exposure to online hate. Finally, although digital spaces were central to participants' stories, this study did not analyze platform-specific mechanisms, algorithms, or privacy tools that shape youth experiences, an area that warrants future attention. Future research would benefit from multi-site, Nation-specific, and mixed-method designs that account for the diversity of Indigenous young peoples' digital experiences.

4.2. Conclusion

Indigenous youth in this study actively reshaped online spaces through digital self-protection, engagement with traditional teachings, and intergenerational support, turning them into sites of care, identity affirmation, and cultural resurgence. These findings advance scholarship on cyberbullying and digital resilience by showing how youth draw on relational, cultural, and intergenerational knowledge to resist online harm. The study also highlights the power of a persona story-based methodology for centering youth voices and Indigenous epistemologies, offering a model for future research that approaches digital experiences with relationality, cultural resurgence, and respect for lived experience.

The findings highlight that Indigenous youth navigate digital environments within broader socioecological and structural contexts, where support from family, Elders, and community networks interacts with digital platform policies and broader societal systems. This highlights the need for systemic interventions, including culturally resurgent SEL curricula, community-led digital literacy initiatives, and platform governance practices that attend to the experiences of Indigenous youth.

Indigenous youth in this study weave resilience, identity, and care for community into the digital spaces they inhabit, turning online worlds into sites of cultural resurgence. Through digital self-protection, uplifting traditional teachings, and intergenerational support, youth carry forward knowledge, nurture wellbeing, and uphold responsibilities to family, community, and culture. By centering Indigenous ways of knowing, relational practices, and storytelling methodologies, this research honors youth voices and offers pathways for better understanding adolescent digital engagement, socioemotional growth, and culturally resurgent approaches to mental health. These findings point to the importance of nurturing relationships with Indigenous peoples that are guided by reciprocity, relationality, and lived experience. Through these connections, youth are supported as they move through both the challenges and the possibilities of online life.

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