

Roots of Empathy

RESEARCH SYMPOSIUM

TORONTO, CANADA

APRIL 28-29, 2016

PROCEEDINGS



Roots of Empathy
Racines de l'empathie

www.rootsofempathy.org

Introduction

The 2016 Roots of Empathy Research Symposium in Toronto, Ontario, Canada was our fifth annual symposium and a celebration of our 20th anniversary as an organization. Over two days, scientists from Canada, the US, the Republic of Ireland, Scotland and New Zealand came together to discuss and connect on the overarching theme of youth violence. Dr. Ed Tronick opened the symposium with a fascinating exploration of how infants make meaning on their own, but more powerfully when interacting with others. Pat Dolan, Mark Brennan, Dr. Jean Clinton, Dr. Ian Lambie, Dr. Peter Donnelly, Dr. Karen McCluskey, Dr. Philip Herman and Dr. Michael Fullan shared their leading edge research and experiences with youth violence, understanding the adolescent brain, at-risk young people, public health approaches to violence reduction, approaches to youth violence in Scotland, culturally responsive research and leadership in education. Mary Ito, host of CBC's Fresh Air, moderated a panel discussion with Dr. Karen McCluskey, Dr. Ian Lambie and Dr. Jean Clinton on issues of youth violence policy and practice. The Honourable Carolyn Bennett, Minister of Indigenous and Northern Affairs, brought greetings from the federal government and spoke about our shared responsibility to enact the findings of the recent Truth and Reconciliation Commission report.



Carolyn Bennett
Minister of Indigenous and Northern Affairs

“We have this unfortunate legacy...this sordid chapter in Canada’s history that we all need to understand, so when I get self-proclaimed as the Minister of Reconciliation, it really is about empathy, about understanding what it means to have been in that situation of residential schools where you were told that your language and culture was wrong... the intergenerational trauma that happens because of a situation that people weren’t able to talk about and also what happens in our relationships with our children and grandchildren if we were not allowed to express our emotions, were never hugged or smiled at, this is a very serious problem and I guess we all know that the band aid solutions won’t work.” – Honourable Carolyn Bennett, Minister of Indigenous and Northern Affairs



Mary Gordon
Founder/President



Lisa Bayrami, PhD
Director of Research

Multilevel psychobiological meaning making and empathy

ED TRONICK, PhD

*Developmental and Clinical Psychologist
University Distinguished Professor of Psychology
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Ed Tronick

“Humans are meaning makers” (J.Bruner). Meaning is made of situations and interactions with each other in order to understand the world and our self within it. This meaning making is an active, bidirectional co-creation, a dyadic relationship. Shared knowing, or empathy, develops with that relationship. When we share and create new meanings with each other a shared state of consciousness is formed. This is very important for everyone but particularly for infants as they grow and develop their sense of self and their place in the world. Infants cannot use language and so rely on psychobiological meaning making processes including behavior, autonomic system, and genetics.

Meaning making is important to an infant’s/child’s overall emotional, mental and physical health as well as the development of empathy. In studying the interactions between infants and caregivers a better understanding of this relationship is developed. The idealized parent-child interaction is a simultaneous and synchronised ‘dance’ that is filled with positive emotion. In

working with mother-infant dyads the importance of mutual gaze (eye to eye contact) and feedback is found. In experimental situations with the parent or caregiver using a ‘still face’, the lack of feedback was noted as stressful for the infant/child and the child can be seen to escalate the behaviour, looking for a response. This lack of response creates a disconnect and a ‘mismatch’. Mismatches, which are seen in normal parent child interactions (eg. when parents are completing tasks and being with their other children), are part of the process of meaning making

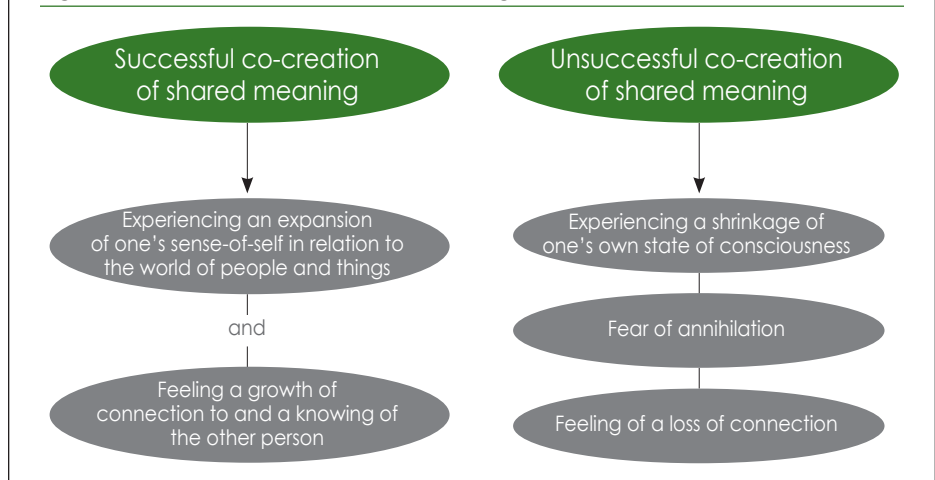
and the match – mismatch dance leads to synchrony by way of reparations. If reparations are made and connection re-established shared knowing and co-creation of meaning is successful. Successful co-creation of meaning making leads to an experience of an expansion of one’s sense-of-self in relation to the world and feeling a growing connection to and a knowing of the other person. Unsuccessful meaning making however creates fear, stress and loss of connection.

Meaning making is done in several ways:

- there is symbolic meaning such as names, objects, and is used by adults
- emotional meaning, such as fear/danger and the autonomic system of flight, fight or freeze; children rely on this
- bodily meaning, referring to wholeness and safety

Empathy, the bringing together of cognitive and emotional processes, develops in children through the emotional meaning making system.

Figure 1. Co-creation of Shared Meaning



Not only does biopsychological meaning making involve the limbic system, and mirror neuron system which underscore the importance of the shared knowing and dyadic relationship of caregiver and infant but meaning making also involves a genetic component that is impacted by stress. The gene for stress reaction in both children and mothers plays a role as well as epigenetics, or the ability of environment and experiences to 'turn on or off' a gene. The role of epigenetics and stress have been shown in maternal/infant studies where high levels of stress experienced by mothers, and thus high cortisol levels, were seen to have effects on childhood behaviour such as poor attention and dysregulation of behaviour in childhood and a decreased ability to connect and to make sense of the world in infancy.

“Successful meaning making is an active process of reparation of mismatching or messy meanings into matching or more coherent forms of meaning. This perspective on meaning making has implications for empathy.”

While there remain many unknowns about the process of meaning making, two particularly important concepts to remember are that working on co-creating new meaning establishes the relationship, it is not the relationship that establishes new meaning. Second, that “being with, ‘being empathic,’ ‘being present’ may be necessary, but they are not enough to create a relationship or therapeutic change. Active co-creating dyadic states of consciousness, making new meaning is the process of change, the process of establishing a relationship, and of knowing the other.

Perspectives of learning

MICHAEL FULLAN, PhD, OC

Professor Emeritus

OISE/University of Toronto

Toronto, Ontario



Michael Fullan

I want to share the work that my colleagues are doing around the new pedagogy of deep learning. We began to study the process of deep learning 5 years ago; how you go about it and what you learn from it. Our starting premise was that traditional learning was incredibly boring because it is not relevant enough to engage students. Earlier research demonstrated that engagement declines from kindergarten to grade 10. This is not a criticism of traditional schooling but simply that it is not fit for the current purpose. For teachers, it is difficult to engage and teach bored students.

About 2 years ago we started the New Pedagogy of Deep Learning network consisting of schools from 7 countries around the world (Australia, Canada, Finland, Netherlands, Uruguay and the USA). These schools use the Deep Learning agenda and act as a living laboratory of over X students in Y schools.

Deep learning is defined as a shared depth of understanding about the nature of the work and is fully and only subjective. You cannot achieve this by reading a book or a PD day but only by working on it day after day.

The focus of Deep Learning is:

1. Whole system improvement – 100% of schools in a district, province/state or country
2. Pedagogy – for example programs like Roots of Empathy, where how to learn things is more important
3. Causal pathway – we want to look at causal pathway for measurable student learning outcomes for clarity

What are the right drivers for whole system change? They are about coherence and a function of shaping and reshaping good ideas as they build capacity and ownership. The wrong drivers are a policy that doesn't work but they are chosen because they can be legislated and made to appeal to the public.

Right drivers	Wrong drivers
<ul style="list-style-type: none"> • Capacity building (leader) • Competencies/leadership • Teamwork 	<ul style="list-style-type: none"> • Accountability (punitive)
<ul style="list-style-type: none"> • Collaborative work • Focused and specific 	<ul style="list-style-type: none"> • Individual teachers and leadership qualities (if we could only get better individuals it would be better – wrong)
<ul style="list-style-type: none"> • Pedagogy (the driver and technology is the accelerator) 	<ul style="list-style-type: none"> • Technology
<ul style="list-style-type: none"> • Systemness • Promote individuals that contribute and are part of a bigger system 	<ul style="list-style-type: none"> • Fragmented and disconnected strategies (create fatigue)

How do we engage students? With exciting new learning that needs to be irresistibly engaging and elegantly efficient for ease of use and access. It should be steeped in real life problem solving and involve deep learning.

Deep learning involves the 6C's:

- | | | |
|------------------|----------------------|----------------|
| 1. Creativity | 3. Critical thinking | 5. Character |
| 2. Communication | 4. Collaboration | 6. Citizenship |

The first 4 Cs have been present in education for 20 years, but character and citizenship are relatively new additions that have made the other 4Cs light up.

The Roots of Empathy program has all of the 6Cs. The babies are the change agents and learning partnerships are formed between the students, families, teachers.

Student control in deep learning involves three aspects:

- My learning – how do you get the best learning/ how do you best learn
- My belonging – caring/relationship
- My aspiration – what do I want to do and be

Deep learning enables students to be the catalysts for pedagogical change by forcing the teacher to change their style of teaching. Students become partners in organizational change both in the school and in their community. And ultimately, students become forces for societal change; they want to help humanity because that is what they think they should do.

Deep learning calls on both students and teachers to show leadership that must listen, learn, leverage and lead. An equal measure of leading and learning is needed to help crystallize and act on emerging solutions.

Leadership in the learning age is a cycle of trying things and making meaning. The new job description is to help humanity by being a better citizen, a problem solver, and social justice through entrepreneurship.

In the educational system, leadership from the middle is one way to maximize change when the middle gets mobilized and there is collaboration within. The middle wants the group above to like what they are doing but not run them. A strategy that increases the capacity of the middle as it becomes a better partner both upward and downward, thus both interactive and collaborative will maximize change.

Connecting activated social empathy in youth: An emerging agenda for education

Co-presenters

PROFESSOR PAT DOLAN

*Joint Founder & Director of the UNESCO
Child and Family Research Centre,
School of Political Science and Sociology,
Institute for Lifecourse and Society,
National University of Ireland Galway*



Pat Dolan

PROFESSOR MARK BRENNAN

*UNESCO Chair for Rural Community,
Leadership, and Youth Development
Professor of Leadership and
Community Development,
Pennsylvania State University*



Mark Brennan

With half of the world's population under 25 and a third under the age of 15, it is crucial that we have a moral, ethical awareness of the younger population and work to support the power of youth. Youth are often portrayed as apathetic but youth today are in fact interested in social change, eager to engage and concerned about inequities. The key however, and what has been lacking, is youth engagement. If we do not engage youth and build empathy, there are significant impacts including substance use, crime, violence and poverty. Engaging youth and activating empathy not only builds stronger young adults but stronger communities.

What is community? Community, defined not as a static space but as a dynamic process, is integral to youth engagement and activated empathy. Community can be seen as a large continuous relationship and, like relationships, it requires work to make strong. Community is not a given; it is hard to build up and easy to lose along with empathy, capacity and caring. There must be connection, communication and shared needs. The combination of interaction and empathy is very potent in building strong communities which are essential for building stable, productive, civil and just societies.

Empathy can be viewed as between sympathy and apathy. Empathy can be static or active and there is a clear difference between having empathy and using it. A bias to action for creating social change requires activated empathy.

To move youth from static to active empathy requires not only engagement but also youth leadership. The Big Brothers Big Sisters programme in Ireland is an excellent example of a program that has met both these requirements. Empathy improves with youth engagement and leadership, when youth understand and befriend, they then show empathy. There is also a connection between youth's activated empathy and resilience.

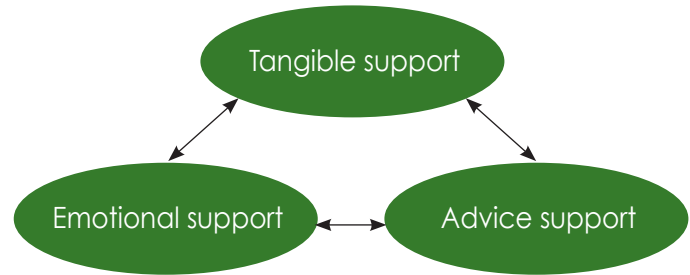
*"Engaging youth and activating empathy not only builds stronger young adults
but stronger communities."*

Resilience is defined as having a positive outcome or effective functioning despite adversity. Creating resilience in youth requires five core components (the 5 R's): responsiveness, relationship, reciprocity, ritual, and routine. Within models of resilience, social support is seen as key to developing resilience and activated empathy. There are 3 types of social supports that have been identified: tangible support, emotional support and advice support. (Figure 1)

Activated empathy among youth also develops in response to chance events such as natural disasters. This was seen with the Tsunami in Thailand, Hurricane Katrina and the earthquake in Nepal. Activated empathy however can also be fostered through programs and workshops. Examples include video projects and youth directed research projects both which provide youth an opportunity to tell their stories and teach others through that telling.

Empathy education plays a critical role in providing youth with a respite from the problems of Self and the realisation that you are not the only one in the world with a problem. We need to make an active effort to change community structures that create an "apathetic" view of youth and instead engage their empathy and acknowledge and value youth that are strong in all areas, not just athletics or academics.

Figure 1. 3 types of social support



Classroom teacher, Tom Veenstra and his grade 7/8 students, Daniela Chow, Breanna Gregg, Ammar Salem and Thadee Sidyumunsi, from our Centre of Excellence school, shared their powerful reflections on experiencing the Roots of Empathy program.



The Research Symposium offered many opportunities for the presenters to discuss their research.

Understanding the adolescent brain

JEAN CLINTON, PhD

Clinical Professor

*Department of Psychiatry and
Behavioural Neurosciences*

*McMaster University, Division of Psychiatry
Hamilton, Ontario*



Jean Clinton

Across the world, young people are viewed from different perspectives. In North America, our youth are frequently seen as “trouble”, not contributing much and having very little intergenerational connection. When I give a talk on adolescents, the room is packed because people are so worried about this time in a child’s life.

We need to think about adolescence in a different way.

What is going on in the adolescent brain?

The brain is not fragile but rather is adaptive because of neuroplasticity and is shaped by the environment that it is exposed to. In effect, children develop strategies and behaviours to survive in their environment.

Typical adolescent behaviour occurs as the brain is under construction. They don’t behave this way to drive parents crazy, they are developing and learning and it is during this period that we need to give kids more of our time not less.

Why should we care about the brain?

The brain is our master organ, it’s who you are and is produced by the interaction of genes with the environment and is sculpted by a lifetime of experiences

Clearly we want to build the architecture of the brain as strongly as we can but if childhood was not ideal, because adolescence is a time of huge growth and maturation of the brain, it presents an opportunity to “RIGHT” the child’s story and change life outcomes.

“We need to approach adolescence with more empathy”

As a culture, we often confuse the physical maturity of adolescence with psychosocial maturity. There is a large discrepancy between biological and psychosocial maturity when compared to earlier generations. In the past, the age between the first period and getting married used to be very close—biology and sociology were well matched—this is not the case anymore, and there is widening gap between these two milestones. Adolescents are not adults in waiting but rather are in a stage of development.

“In North America, we need to ask ourselves – are we honoring our adolescents and their unique abilities?”

In the last 10-15 years, new scientific discoveries using fMRI scanning have found that brain sculpting and remodeling occurs throughout the adolescent years. Different systems of the brain mature at different timepoints and rates. It is these varying developmental timetables of the different regions of the brain that create the unique characteristics of adolescence.

The prefrontal cortex (executive function) and the limbic system (emotional system) are 2 areas of the adolescent brain that develop at different times and illustrate the complexities of adolescence. The limbic system is the emotional centre of the

brain and is responsible for the hyperrationalization in adolescence (thrill seeking behaviour) and the hypersensitivity to behavioural cues as the process of emotion is under construction. The prefrontal cortex is the area of the brain that acts as the executive director and is responsible for judging, organization, emotional regulation and impulse control and acts as the brakes for the limbic system. The implications of immaturity in the prefrontal cortex are shown in Table 1.

Table 1. Some implications of immaturity in the prefrontal cortex

- Adolescents are less likely than adults to consider the future consequences of their actions
- Adolescents are less likely than adults to plan ahead
- Adolescents are less able than adults to control their impulses
- Adolescents are less able than adults to simultaneously consider the risks and rewards of a decision

Implications for adolescent custody facilities

Based on knowledge of brain development, custody facilities that are oriented towards punishment are sculpting the brain negatively. If focus instead is on relational custody, re-integration and rehabilitation, the brain is being sculpted in a positive fashion.

In 2003, the Youth Criminal Justice Act redefined Canadian Youth Justice policy. These changes were made partly in recognition of adolescence as a developmental stage and implemented strategies focused on reintegration and rehabilitation instead of custody and probation with \$28.7 million reinvested in community alternatives by reducing custody capacity.

Since 2003/2004, there has been a 72% decrease in custody and with over 400+ evidence –informed programs and 200+ community partnerships, almost 9 out of every 10 youth served receives community-based programming.

Summary

We need to think of our adolescents in a different way and recognize that their brains are under development and approach our youth with more empathy. The brain is under construction and there is an ability to change if someone is treated with an empathetic heart.

The First Nations have a philosophy that children are the sacred ones, the heart of the nation, and it is the sacred responsibility of the community to raise our children. If we, as non-indigenous people, can embrace this philosophy, this way of going, our children will do far better.



Peter Donnelly, Jean Clinton and Karyn McCluskey discuss UK and Canadian perspectives on the youth justice system.

A snapshot of what's happening with high risk young people in New Zealand

PROFESSOR IAN LAMBIE

Associate Professor in Clinical Psychology at the University of Auckland, New Zealand

It is important to begin by understanding the New Zealand context. The history of New Zealand continues to affect today's society. In 1840, the Māori signed a treaty with the British and there were fundamental differences in each side's understanding of their relationship with the land. The British thought they were now land owners, the Māori understanding that they would remain custodians of the land. This disconnect points to differences in cultural ways of understanding the world. The Māori have shown incredible resilience in the face of adversity and have shown alternatives to the western conceptualizations of not just our relationship with the land but other concepts such as health.

The Māori concept of health incorporates spiritual, mental and physical health and family. Family holds a particularly important position. It is the foundation upon which all else is built, the fundamental basis of Pacific Island social organisation. Family history and genealogy tie people to titles, land, environment, sea and the Gods of the Pacific.

So what of young offenders in New Zealand and why the focus on youth? Children with chronic conduct/behavioural problems are the single most costly group of adolescents to society. They have poor response to routine treatment (20-40%) and are at increased risk of poor outcomes including further criminal activity as an adult, antisocial personality disorder, poor psychological and physical health. Additionally, these outcomes have been shown to be inter-generationally transmitted. There is an "age-crime curve" that shows that adolescents are disproportionately represented with Māori youth further disproportionately represented with on average 50% of all cases before the courts being Māori youth and in some regional courts as high as 90%.



Ian Lambie

"Every generation seems to believe that those who follow, are somehow less righteous, less moral and more poorly educated than they are. In almost every case they are wrong."

There are two types of offenders, those whose offenses are limited to their adolescence and those who persist throughout their lives. The former tend to commit crimes later, after age 13, and tend to stop around their mid 20s. The latter often begin when younger, as early as 8 or 9; engage in a higher number of and more violent crimes, are 80% male, 70% of whom are not in school and most have histories of abuse, trauma and mental health concerns with 80% of youth in the justice system having a history of being in the Care & Protection system as children.

It is important to prioritize a Māori response given the high numbers of Māori before the youth courts. This includes such things as engaging in culturally appropriate, respectful practices and culturally responsive services through agencies such as Iwi social services – "by Māori for Māori". Continuing to encourage and support the role of education in youths' lives is another priority considering that 70% of life persistent offenders were not even enrolled in secondary school.

"The kids who need the most love will ask for it in the most unloving ways"

We also know that interventions are more successful when done early – prevention is more powerful than intervention after the cycle of crime has begun. Families are a key ingredient in intervention and this requires a whole family approach

as families are our coaches, co-therapists and barometers. Concrete steps in New Zealand have been accomplished with a focus on positive parenting practices (Table 1) and providing resources, support and training that is culturally responsive including the input of the community, cultural advisory boards and cultural advisors on clinical teams and Māori and Pacific specific services, court systems and academic health research centres.

Table 1. Parenting/practitioner practices

• Model empathy	• Supportive
• Genuine	• Flexible & yet containment
• Respectful	• Humorous
• Honest	• Find and focus on strengths
• "Do as you would be done by"	• Laugh & laugh more

A public health approach to violence reduction

PETER DONNELLY, MD

President & CEO

Public Health Ontario Professor

Dalla Lana School of Public Health

University of Toronto

Violence is a major cause of death globally comparable in scale with many more widely publicised causes. In 2008, the WHO Global Burden of Disease estimated 1.77 million deaths from HIV/AIDS and 1.51 million deaths due to violence. Only a fraction of these violent deaths are due to war, the majority caused by homicides. Violence is an epidemic and should be treated as such. It is a public health concern of the same magnitude as tuberculosis or HIV/AIDS and, similarly, it is a disease of poverty and inequality.



Peter Donnelly

Non-fatal violence is largely underreported and disproportionately affects women and children. Interventions to address violence that have been successful include the work being done in Glasgow – the Community Initiative to Reduce Violence (CIRV). This gang intervention project found that poverty and social exclusion were predictors of gang involvement and violence and that improving access to education, health and social services reduced gang involvement and violence. The project had many successes including: acts of violence reduced by 50%; weapon carrying reduced by 85%; homicide rates at a 35-year low.

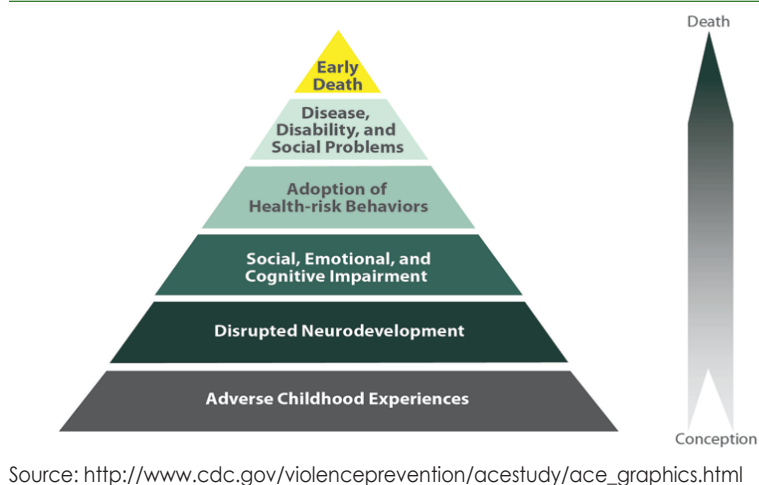
Understanding the precursors and predictors of violence are important in order to develop interventions. The connection between childhood poverty and trauma and health is well documented, but there is also a connection with social wellbeing. Children who undergo adverse childhood experiences (ACE) are at risk for poor outcomes and this risk increases with the number of ACEs. Health and well-being throughout the lifespan is affected by ACEs starting in childhood with disrupted neurodevelopment. This leads to social, emotional and cognitive impairment leading to the adoption of health-risk behaviours, subsequent disease, disability and social problems and ultimately the potential for early death. Fortunately, there is also good evidence that early interventions that aim to develop empathy in children build resilience and resilience mitigates the affects of ACEs.

What is also important to focus on is early parenting and supporting parents to practice positive parenting and create safer, supportive homes. Despite the evidence that investing in parents and early childhood will lead to a 7-10% return on investment in expenses saved, governments have been reluctant to fund this work whether it be because they fear being seen as a 'nanny state' or the difficulty in procuring funds today to save tomorrow.

"Good parenting is the social equivalent of vaccination"

And yet, if violence is framed as a public health epidemic and early intervention as the inoculation could it be done? Vaccinations are the single most effective public health intervention. Programs that focus on good parenting including listening/interacting with the child, appropriate physical interaction of both parents and consistent parenting, building empathy and early years' intervention are the social equivalent to vaccines, building resilience the same way a vaccine builds immunity. Our dialogue can and needs to change in order to ensure an investment in prevention against the violence epidemic.

Figure 1. Mechanism by which adverse childhood experiences influence health and well-being throughout the lifespan



“... Roots of Empathy does important work in helping our kids become all that they can be, which is absolutely at the heart of health and happiness in our society.”

Doing it differently

KARYN McCLUSKEY

Director

Scottish Violence Reduction Unit
Glasgow, Scotland

Scotland was the most violent place in Europe and Glasgow the most violent city. The work of the Scottish Violence Reduction program and the Community Initiative to Reduce Violence (CIRV) has seen reduced violence to a 42-year low. In sharing lessons from this work, it is first important to say, never give up, keep going until apprehended and do what you need to make change happen. Great things happen when you have great people working in the same direction, but you need to see things differently.

In Glasgow there was a criminal justice model in place, CCTV throughout and high conviction rates yet things weren't changing. There was a significant violence problem and it is both complex and complicated with poverty and fear, vulnerable families in poor communities, and a cycle of perpetual violence all pieces of the problem. The model needed to change, and so a public health model was taken and violence reframed as an infectious disease, so you can “catch it” and we need to work together as a community to stop it.



Karyn McCluskey

“If you raise children in a war zone you are going to raise warriors”

When looking at a timeline of one person's life you can see all the places where opportunities to intervene were missed; a lack of community and social services when they were most needed. Combine this with the violence that was all around from family to neighbours to friends and the cycle was perpetuated.

We know from research that early childhood experiences matter and that with increased adverse childhood experiences (ACE), the risk of violent outcomes increase but we also know that if there were no ACEs, there would be a 60% reduction in violence. “It is who is behind the front door that matters” and if we see this it becomes an economy of interest.

In Scotland, the government bought land to build a new prison based on future projection of capacity needs. They spent millions of pounds to purchase and clear the land but then realized that building a prison for a predicted 15 year capacity was admitting that you had failed the children who are 5 years old today. So they stopped... and reinvested in prevention.

The approach to changing the cycle of violence must be multi-pronged, involve many people and aim at early intervention, prevention and taking advantage of teachable moments. Examples include working with emergency department doctors who see youth who are injured from violence, working with dentists to teach them how to recognise signs of violence and ask if they are safe, working with former gang members and having them speak with youth. And perhaps most importantly, working with parents because if violence is a disease then parenting is the inoculation.

Children are Scotland’s most important resource and parenting the most important job but it needs to be supported. In Finland, for example, parents are supported until their children are 8 when they begin school. Furthermore, Finnish schools don’t have any tests or qualifying exams, they focus on building the skills children need to become the type of citizens who will best meet the needs of their nation: team work, compassion, problem solving, empathy. When asked how this shift was accomplished the answer is political will, the political will to reinvest in the right places.

“Not just about money (Scotland has little) it is about great people doing the right things and investing in the right places”

In Scotland, early intervention and focusing on parenting are the primary prevention strategies used. Secondary prevention strategies in place include work within schools that addresses truancy and exclusion. There are ‘no exclusion’ policies in place for when children are being the most trying that is when they need to be included the most. Connection is key and when children are excluded it leads to alienation. Mentorship programs are another means of building connections and empathy, encouraging kids to look out for one another and support one another.

Adam Smith was a Scottish philosopher in the 1700s and he said that empathy is the glue that holds society together. This is no less true today than it was then.

Culturally responsive research and development in the Pacific

PHILLIP HERMAN

REL Pacific Director

(Regional Educational Laboratories)

Honolulu, Hawaii

McREL is a nonprofit, nonpartisan mission-driven organization that is dedicated to helping students, teachers, and leaders flourish. The Regional Educational Laboratory Pacific (REL Pacific) administered by McREL International, is one of ten RELs, the other nine located throughout the USA, and is funded by the US government’s Department of Education. The REL program’s ultimate goal is to help make education a more evidence-based practice.



Phillip Herman

REL Pacific serves American Samoa, the Commonwealth of the Northern Mariana Islands, the Federated States of Micronesia (Chuuk, Kosrae, Pohnpei, and Yap), Guam, Hawai'i, the Republic of the Marshall Islands, and the Republic of Palau. The mission of the REL program is threefold: 1) conducting rigorous relevant research; 2) deepening capacity; 3) dissemination. This is done through research, technical assistance, and program evaluation. The priorities of REL Pacific are teacher effectiveness, family and community engagement in schools, Pacific indigenous education, college and career readiness and success, and increasing the use of data in school improvement efforts.

The Pacific is often viewed as a vast expanse of water with small dots peppered throughout. But to someone from the Pacific it is seen as a sea of islands with historic connections through trade and language. The islands that REL Pacific serves also share a history of colonialism and imperialism. While there is much that connects the islands, they are each unique and have unique needs, priorities, challenges and opportunities. The importance of culturally responsive education in order to meet the needs of learners cannot be understated.

“Culturally responsive education is critical and it is important to remember that it is evolving from, not fixed in, the culture. It offers a way forward that honours the past.”

The US model of education and curriculum does not necessarily meet all the needs in the region. REL Pacific works with schools locally to identify areas of concern, priorities, needs, and also capacities and assets. It is important to begin with what there is and deepen capacity. One area of concern that was raised by stakeholders on the islands was the lack of emphasis on interpersonal connection and intergenerational relationships in the US curriculum, which are very important locally. Collaborating with people and groups locally is necessary to do this work and to provide culturally based education, which is defined by Dr. Shawn Kanaiaupuni of Kamehameha Schools in Honolulu as “Culture-based education includes approaches to teaching and learning evolving from (but not fixed in) the languages, values, norms, knowledge, practices, beliefs, and places that are foundational to a group.”

An example of the work of REL Pacific is culture-based education in Hawaii. The Hawaii Department of Education, a culturally responsive framework, “Nā Hopena A’o (HĀ):

This department-wide framework aims to develop the skills, behaviors and dispositions that are reminiscent of Hawai’i’s unique context, and to honor the qualities and values of the indigenous language and culture of Hawai’i”. The HĀ framework incorporates strengthening the sense of: Belonging, Responsibility, Excellence, Aloha, Total well-being, and Hawaii. Aloha in this sense does not refer to the western depiction of greetings and good times, it is a concept of welcoming and empathy and connection and it is deeply rooted in the Hawaiian culture. A pedagogy of Aloha includes not just building this sense of welcoming and empathy but teaching with empathy.

Figure 1. Nā Hopena A’o (HĀ) – A Department-wide framework to develop the skills, behaviors and dispositions that are reminiscent of Hawai’i’s unique context, and to honor the qualities and values of the indigenous language and culture of Hawai’i.



Credit: Hawaii State Department of Education.

Panel discussion

Moderated by Mary Ito, host of CBC Radio's Fresh Air

KARYN McCLUSKEY, JEAN CLINTON & IAN LAMBIE

A panel discussion was led by Mary Ito with Dr. Jean Clinton, Professor Ian Lambie and Karyn McCluskey on the topic of How can we be agents of change? The first topic was on the specific youth groups they work with; Dr. Clinton with the First Nations in Canada, Professor Lambie with the Maori in New Zealand and Karyn McCluskey with the gangs in Scotland.

Dr. Clinton spoke of First Nations youth who while born with the same potential as other children, if they experience adverse conditions (abuse, substandard living conditions), the poverty and stress affects their ability to think and problem solve and leads to despair.

Karyn McCluskey and Prof. Lambie spoke of young men from chaotic families, generations of non-workers who have underlying factors that drive them to gangs. Prof. Lambie spoke of the impact of the mother in the family and how their level of engagement is key to keeping things together for the youth. Karyn spoke of the need for empathy when working with gangs and the need to find people with empathy who can be the tipping point for change.

All panelists agreed that any intervention with youth requires a multi-partner approach and must include a focus that expands beyond the youth to their family and the community including early parenting and prevention.

The panel discussed the challenges that are faced in securing buy-in from the youth and community when working to bring about change. All panelist spoke of looking at the problem from a different perspective. They thought about the opportunities that were possible, not the challenges they faced. They had to do this differently from what had been done in the past, because what was being done wasn't working.

Dr. Clinton and Professor Lambie spoke of the need to respect the culture they were working with. The indigenous community response needs to be respected and valued in all programs of change. Dr. Clinton spoke of how the First Nation youth are not being nurtured to become adults and this needs to be addressed. Professor Lambie discussed the need for programs to pass on the power of change to the Maori and trust they can continue effecting change.

The panel also discussed the need to begin working with the siblings of the youth targeted for programs of change and that this type of extended reach is beginning to happen. The resilience of youth will find the resources to excel and the presence of relationships can help with self-efficacy and act as a dynamic catalyst.



Perspectives are shared from work with youth gangs in Scotland, First Nations youth in Canada and Maori youth in New Zealand.



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