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20 November 2014

Dear Friends,

Here at Firelight, we conceptualize resilience as child protection, child rights, and children's psychosocial well-being. Families and communities play fundamental roles in building and supporting children's resilience. In this week's edition of Newsflash, we'd like to share with you some resources that may be helpful in your work supporting children's resilience through families and communities.

Sincerely,

The Firelight Team

*(Resource) Responsive Parenting - Publication and Webinar from the Bernard van Leer Foundation*

*(Paper) Strengthening Birth Registration in Africa: Opportunities and Partnerships (UNICEF - ESARO)*

*(Resource) Research policy brief: Positive parenting in families affected by HIV and AIDS*

*(Resource) A Guide to Promoting Resilience in Children: Strengthening the Human Spirit*

*(Call for Conference Presentation Proposals) Inaugural Conference of the Institute for Human Development, Aga Khan University (Nairobi)*

*(Call for Project Proposals) Air France Foundation*

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*(Resource) Responsive Parenting - Publication and Webinar from the Bernard van Leer Foundation*

**Publication - Responsive parenting: a strategy to prevent violence (Early Childhood Matters, June 2014, 68 pages, ISSN1387-9553)**

This edition of Early Childhood Matters addresses the theme of responsive parenting, and in particular the potential for responsive parenting programmes to reduce the incidence of violence against young children. Articles examine the state of research, experiences in adapting parenting programmes to new cultural contexts, and the experiences of particular projects, with contributions from Jordan, Jamaica, Canada, the Netherlands, Brazil, Peru, Israel, Turkey and the United States.

Read online or download here: <http://bit.ly/1oDPttF>

### **Webinar on Responsive Parenting**

Three authors from the above mentioned edition of Early Childhood Matters - Jennifer

Lansford (the Better Parenting Programme in Jordan), Adrienne Burgess (Reaching out to fathers: 'what works' in parenting interventions?) and Catherine Ward (Parenting for Lifelong Health: from South Africa to other low-and middle-income countries) - present their articles in this hour-long webinar, which includes an audience Q&A. You can also download the webinar presentation.

View the webinar or download the presentation here: <http://bit.ly/1zfLbcY>

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(Paper) Strengthening Birth Registration in Africa: Opportunities and Partnerships (UNICEF - ESARO)

Birth registration is a human right as it represent the starting point for the recognition and protection of every child's fundamental right to identity and existence. It is also closely linked to the realization of other children's rights such as school enrolment, immunizations, and humanitarian assistance when needed, as well as protection from early marriage and hazardous child labor. This paper by UNICEF ESARO reviews the current status of civil birth registration in many countries, challenges faced in implementing this process, and interim and long-term solutions.

Read the paper here (PDF): <http://uni.cf/1tzXR9I>

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(Resource) Research policy brief: Positive parenting in families affected by HIV and AIDS

*Citation: Lachman, J.M., Cluver, L., Boyes, M., Kuo, C., Casale, M., Impact of HIV/AIDS on parenting behavior in South Africa: the mediating role of depression and poverty. AIDS Care: Psychological and Socio-medical Aspects of AIDS/HIV, 2013.*

This study examined the relationship between HIV/AIDS and positive parenting, and explored poverty, caregiver depression, perceived social support, and child behaviour problems as potential mediating factors of this relationship. The study aimed to answer the questions: Do families with AIDS-ill caregivers or children orphaned by AIDS experience reduced positive parenting? And, if yes, what might be causing this? A parenting questionnaire was administered to 2477 pairs of caregivers and children in South Africa.

The main findings of the study indicated that:

- Families with AIDS-ill caregivers and those with children orphaned by AIDS were associated with less positive parenting in comparison with non-affected families.
- Familial HIV/AIDS's association to reduced positive parenting was mediated by poverty, caregiver depression and child behavior problems but not social support.

Read the policy brief here: <http://bit.ly/1EmA3Mh>

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(Resource) A Guide to Promoting Resilience in Children: Strengthening the Human Spirit

by E. H. Grotberg, *International Resilience Project*; published by the Bernard Van Leer Foundation

The International Resilience Project was a global research study aiming to understand resilience across cultures, that is, what do families and communities do around the world that supports children to cope with adversity. The findings indicate that there may be a common set of factors across cultures which are used to promote resilience in children; however there was a lot of variation among individuals. This guide, based on the initial findings of the project, is a work-in-progress document looking at what we know internationally about how resilience can be promoted in children. Among other things, the guide lists things that parents and caregivers can do to promote resilience in children from birth to three years of age, from four to seven years of age, and from eight to eleven years of age.

Read the full-text publication here: <http://bit.ly/1GJrFuo>

**EXCERPT BELOW:**

*The I HAVE, I AM and I CAN categories are drawn from the findings of the International Resilience Project which identified 36 qualitative factors that contribute to resilience. These can be divided into three major categories, each consisting of five parts.*

**I HAVE:** *The I HAVE factors are the external supports and resources that promote resilience. Before the child is aware of who she is ('I AM') or what she can do ('I CAN'), she needs external supports and resources to develop the feelings of safety and security that lay the foundation, that are the core, for developing resilience. These supports continue to be important throughout childhood. The resilient child says... I HAVE:*

- **Trusting relationships:** *Parents, other family members, teachers, and friends who love and accept the child. Children of all ages need unconditional love from their parents and primary care givers, but they need love and emotional support from other adults as well. Love and support from others can sometimes compensate for a lack of unconditional love from parents and care givers.*
- **Structure and rules at home:** *Parents who provide clear rules and routines, expect the child to follow them, and can rely on the child to do so. Rules and routines include tasks the child is expected to perform. The limits and consequences of behavior are clearly stated and understood. When rules are broken, the child is helped to understand what he or she did wrong, is encouraged to tell his or her side of what happened, is punished when needed, and is then forgiven and reconciled with the adult. When the child follows the rules and routines, he or she is praised and thanked. The parents do not harm the child in*

*punishment, and no one else is allowed to harm the child.*

- **Role models:** *Parents, other adults, older siblings, and peers who act in ways which show the child desired and acceptable behavior, both within the family and toward outsiders. These people demonstrate how to do things, such as dress or ask for information, and encourage the child to imitate them. They are also models of morality and may introduce the child to the customs of their religion.*
- **Encouragement to be autonomous:** *Adults, especially parents, who encourage the child to do things on her own and to seek help as needed, help the child to be autonomous. They praise the child when he or she shows initiative and autonomy, and help the child, perhaps through practice or conversation, to do things independently. Adults are aware of the child's temperament, as well as their own, so they can adjust the speed and degree to which they encourage autonomy in their child.*
- **Access to health, education, welfare, and security services:** *The child, independently or through the family, can rely on consistent services to meet the needs the family cannot fulfil — hospitals and doctors, schools and teachers, social services, and police and fire protection, or the equivalent of these services.*

**I AM:** *The I AM factors are the child's internal, personal strengths. These are feelings, attitudes, and beliefs within the child. The resilient child says... I AM:*

- **Lovable and my temperament is appealing:** *The child is aware that people like and love him or her. The child does endearing things for others that help make him or her lovable. The child is sensitive to the moods of others and knows what to expect from them. The child strikes an appropriate balance between exuberance and quietness when responding to others.*
- **Loving, empathic, and altruistic:** *The child loves other people and expresses that love in many ways. He or she cares about what happens to others and expresses that caring through actions and words. The child feels the discomfort and suffering of others and wants to do something to stop or share the suffering or to give comfort.*
- **Proud of myself:** *The child knows he or she is an important person and feels proud of who he or she is and what he or she can do and achieve. The child does not let others belittle or degrade him or her. When the child has problems in life, confidence and self-esteem help sustain him or her.*
- **Autonomous and responsible:** *The child can do things on his or her own and accept the consequences of the behavior. There is the feeling that what he or she does makes a difference in how things develop and the child accepts that responsibility. The child understands the limits of his or her control over events and recognizes when others are responsible.*
- **Filled with hope, faith, and trust:** *The child believes that there is hope for him or her and that there are people and institutions that can be trusted. The child feels a sense of right and wrong, believes right will win, and wants to contribute to this. The child has confidence and faith in morality and goodness, and may express this as a belief in God or higher spiritual being.*

***I CAN:*** *The I CAN factors are the child's social and interpersonal skills. Children learn these skills by interacting with others and from those who teach them. The resilient child says... I CAN:*

- ***Communicate:*** *The child is able to express thoughts and feelings to others. He or she can listen to what others are saying and be aware of what they are feeling. The child can reconcile differences and is able to understand and act on the results of the communication.*
- ***Problem solve:*** *The child can assess the nature and scope of a problem, what he or she needs to do to resolve it, and what help is needed from others. The child can negotiate solutions with others and may find creative or humorous solutions. He or she has the persistence to stay with a problem until it is indeed solved.*
- ***Manage my feelings and impulses:*** *The child can recognize his or her feelings, give the emotions names, and express them in words and behavior that do not violate the feelings and rights of others or of himself or herself. The child can also manage the impulse to hit, run away, damage property, or behave otherwise in a harmful manner.*
- ***Gauge the temperament of myself and others:*** *The child has insight into his or her own temperament (how active, impulsive, and risk-taking or quiet, reflective, and cautious he or she is, for example) and, also, into the temperament of others. This helps the child know how fast to move into action, how much time is needed to communicate, and how much he or she can accomplish in various situations.*
- ***Seek trusting relationships:*** *The child can find someone — a parent, teacher, other adult, or same-age friend — to ask for help, to share feelings and concerns, to explore ways to solve personal and interpersonal problems, or to discuss conflicts in the family.*

*Each of the I HAVE, I AM, and I CAN factors suggests numerous actions children and their care givers can take to promote resilience. No one child or parent will use the entire pool of resilience factors, nor need they. Some use many; others use few. However, the larger the pool of possibilities before them, the more options children, parents, and care givers have and the more flexible they can be in selecting appropriate responses to a given situation.*

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(Call for Conference Presentation Proposals) Inaugural Conference of the Institute for Human Development, Aga Khan University (Nairobi)

The newly established Institute for Human Development (IHD) at the Aga Khan University invites proposals for presentations at its inaugural conference to be held in Nairobi, Kenya from February 12-14, 2015. IHD is dedicated to the pursuit of knowledge with direct relevance for policies, programmes, and practices that enhance life experiences at all stages of human development. In its foundational years, IHD will focus particularly on generating and disseminating knowledge about the earliest years of children's

development—with a strong emphasis on the use of such knowledge to shape policies and interventions to give all children a strong start in life.

This conference presents opportunities for participants to learn about some of the most recent advances in the science of early human development and about innovations in the design and evaluation of community-based programmes and services delivered in low-resource regions of the world. IHD is an entity devoted to interdisciplinary research and integrative, cross-sector approaches to programme design and service delivery. For this reason, this conference is aimed at people from all disciplines/fields, professions, and service delivery sectors associated with knowledge, policies, and interventions on early human development.

Competitive proposals are invited for the following presentation categories: symposia, single papers, and poster or media displays. See the Call for Papers for details.

**Deadline for submissions is Friday 21 November 2014**

IHD Conference 2015 - Call for Conference Presentation Proposals: <http://bit.ly/1uV5VYS>

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(Call for Project Proposals) Air France Foundation

Created in 1992, the Air France Foundation supports programs helping children and young people who are sick, disabled, or highly vulnerable, in France and in countries where Air France operates. The Foundation's support can help to jumpstart a new project or broaden the scope of an existing one. In general, the Foundation will support a project for one year.

**SELECTION CRITERIA:**

**AN ASSOCIATION**

The Foundation finances only projects conducted by non-profit associations. All proposals must include administrative and legal documents proving the not-for-profit status, as well as a copy of the financial statements.

**A PROJECT**

The Air France Corporate Foundation contributes only to projects which correspond to its field of activity: education and training for children and young people who are ill, disabled or in distress.

The geographical location of the project must be:

- Either in a country where there is an Air France station,
- Or in the French region chosen by the Board of Directors of the Foundation for its annual program.

The Foundation's support can jumpstart a new project initiated by an association or enable broadening the scope of an existing project.

The Foundation follows a project for one year and can renew its support only to enable grounding the association's work more firmly in its socio-cultural context.

The Foundation encourages the involvement of Company personnel in associative projects. Projects presented and supported by Air France staff are given particular consideration.

## EXPERTISE

Experience and professional excellence:

Those sponsoring projects are experts in dealing with children and managing projects, and are fully familiar with the regions in which they work. The Foundation accords great importance to ensuring that sponsors are well-versed in the socio-economic and socio-cultural context on both a national and a local level. Even when sponsors are volunteers, they use professional tools and their experience gives them the needed perspective on their work.

Continuity:

Projects financed by the Foundation must be long-term initiatives. The Foundation chooses to support projects which are structurally capable of reaching administrative and financial autonomy when its financing ceases. It is therefore particularly attentive to budgetary planning and to all attempts to seek further financing and partnerships.

## WHAT AIR FRANCE DOES NOT FINANCE

The Foundation does not finance:

- occasional events (festivals, galas, exhibits, concerts, lectures, etc.)
- youth exchange programs
- academic expenses for individual students
- transportation and freight facilities
- projects outside the framework of associations and individual projects
- audiovisual or publishing projects
- projects in the context of a natural catastrophe during the period of emergency
- so-called operating, expertise, consultancy or local support expenses (expenses for a head office, office rental, head office staff salaries, etc.)

Non-profit organizations with projects supporting vulnerable children can **apply for funding from 1 December 2014 to 2 March 2015**.

See details here: <http://bit.ly/1tVGTpm>

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As part of the Firelight Foundation's Capacity Building Program, Firelight provides "Newsflashes" to share relevant resources and information with our active grantee-partners via weekly emails and via post on a monthly basis. We hope that by facilitating access to information for grassroots, community-focused organizations, programming for children and families, as well as organizational development, is enhanced. Past editions of the Firelight Newsflash can be found on our website:

<http://www.firelightfoundation.org/resources/newsflash>

We welcome your comments, feedback and ideas for upcoming Newsflashes at [newsletter@firelightfoundation.org](mailto:newsletter@firelightfoundation.org)

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