

Can Computer-based Training Enhance Adolescents' Resilience? Results of a Randomized Control Trial.

Author Bo De Long-Cotty is a developmental psychologist who has worked for WestEd since 1991. She has more than 20 years of research and development experience in social-emotional learning and PreK-12 education and professional development, including extensive research in educational and instructional technology. She currently serves as Director of several projects in two WestEd programs - Health and Human Development, and Math, Science and Technology. De Long-Cotty received an MA in developmental psychology from Teachers' College, Columbia University, and a PhD in developmental psychology from the University of California, Berkeley.

Author's note: This study was funded by a grant to WestEd from the Lucile Packard Foundation for Children's Health, Area 2: Promote Emotional and Behavioral Health in Preteens (ages 9 to 13).

ABSTRACT

It seems counter-intuitive that adolescents could gain resiliency through a computer program. A longitudinal, repeated measures, randomized controlled trial of a computerized, social-emotional learning intervention tested whether under real-world school conditions, self-regulated use of the intervention would result in higher scores for four key resiliency assets, and positively impact school outcomes. One hundred and fifty-four sixth graders from diverse backgrounds participated. Treatment group students completed 42 multimedia tutorials (about 12 contact hours), over seven weeks. Control group students received live instruction-as-usual. Resiliency assets were measured at pre, post, and five-month follow-up, using scales from the previously validated California Healthy Kids Survey. Attrition was low to moderate and dosage was uniformly high. The treatment group showed significantly higher mean scores from pre- to post- on two of four resiliency assets: empathy and problem-solving. The control group had significantly higher mean scores on connectedness. No effect was detected on autonomy. Treatment students had significantly more excused absences from pre- to follow-up. There were no other significant changes in mean scores for either group from post-testing to five-month follow-up. There were not significant differences in grades or discipline referrals. Principals reported the whole cohort had improved behavior. Social contagion may have been a factor in several outcomes.