As a guiding model for process-oriented and translational research (Cummings & Valentino, 2015), we posit that the tenets of developmental psychopathology can facilitate significant advancements in the study of youth affected by political violence and armed conflict (Cummings et al., 2017). Developmental psychopathology has the overarching goal of integrating the developmental and clinical sciences to study explanatory models of normal and abnormal development, including understanding positive trajectories, resilience, and to inform approaches to prevention and treatment (Cummings, Davies, & Campbell, 2000). A central concern is articulating the dynamic developmental processes that underlie negative outcomes, including but not limited to clinical psychopathology, as well as positive or resilient outcomes. Fundamental assumptions include the following: (a) psychopathology is not a disease (that is, a pathogenic entity within the individual) but rather reflects maladaptive processes of functioning; and (b) normal and abnormal processes develop over time, and are subject to change course; and (c) youth functioning must be understood in relation to developmental processes and other contextual elements (Cicchetti, 2006; Cicchetti & Cohen, 1995). That is, development is an ongoing interplay between an active, always changing child, and an active, changing context.

The developmental psychopathology perspective outlines how interplaying influences across multiple contexts (e.g., biological, social, and cultural) contribute to positive or negative development across the lifespan. From this perspective, the identification of a problem and its correlates—for example, the number of youth affected by political violence and armed conflict who develop psychological symptoms—only establishes that there is a problem that needs to be addressed, not why, how, when, and for whom the problem develops, nor how the problem should be addressed. Emphasis is thus placed on uncovering the processes underlying particular developmental outcomes, with the ultimate goal of translating this knowledge into interventions to promote healthier outcomes. Emphasis is also
placed on identifying contextual issues and individual differences that may help identify for whom or under what conditions prevention or intervention will be most effective. The latter goals may be accomplished in contexts of political violence by conducting research that is guided by developmental theory, that employs multiple methods and levels of analysis, and that uses longitudinal research designs (e.g., Boxer et al., 2013; Cummings, Goeke-Morey, Merrilees, Taylor, & Shirlow, 2014; Cummings et al., 2013; Cummings, Merrilees, Taylor, Goeke-Morey, & Shirlow, 2017; Merrilees, Taylor, Goeke-Morey, Shirlow, & Cummings, 2014; Dubow et al., 2012).

Finally, consistent with Bronfenbrenner’s (1977, 1979) social-ecological model and the developmental psychopathology perspective, another central emphasis necessary for substantial scientific advances is on relations between youth and the many contexts in which they develop. Thus, another direction emphasized in this book is the evaluation of the influence of risk and protective processes at multiple social-ecological levels on youth, including the family, school, and community (Elbedour, ten Bensel, & Bastien, 1993). This focus also informs our analysis of factors that may influence the effectiveness of interventions for youth.

**Fostering Cogent Scientific Bases for Prevention and Intervention: Translational Research**

Basic research conducted under the guiding model of developmental psychopathology is optimally positioned to serve as a foundation for subsequent translational research. The goal of translational research is to use basic research to inform prevention and intervention efforts and, consequently, improve developmental outcomes (Cummings & Valentino, 2015). The National Institutes of Mental Health have advocated for increased translational research, as reflected in a roadmap (National Advisory Mental Health Council, 2000) that prioritizes research that capitalizes on basic research findings in the prevention and treatment of disease (Zerhouni, 2003). From this perspective, prevention and intervention programs should not be constructed ad hoc, or merely reflect disciplinary fiat regarding approach. Rather, they should have firm and systematic bases in empirical work. This conceptualization of research with the purpose of improving public health is described in the medical field as reflecting the transition of research findings from “bench to bedside” (Insel, 2005). The “bench to bedside” direction emphasizes the application of knowledge gained from basic research to the development and evaluation of prevention or intervention approaches (Insel, 2009). Basic research that advances understanding of the causal processes underlying both adjustment and maladjustment is regarded as a particularly optimal foundation for translational work (Cicchetti & Toth, 2006).

There is also increasing emphasis on achieving a goal of bidirectional relations between basic research and research in clinical settings—that is, “bedside to
bench.” Hypotheses about mediating and moderating developmental processes can be tested during clinical evaluations of prevention or intervention programs in appropriate and scientifically valuable ways, thereby also contributing to knowledge of the nature and course of adjustment and maladjustment (Cicchetti & Toth, 2006). Interventions that generate data on causal processes and moderators may help to further refine program content and to target services to appropriate populations.

References


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