

Resilience as a concept for child welfare and protection practice

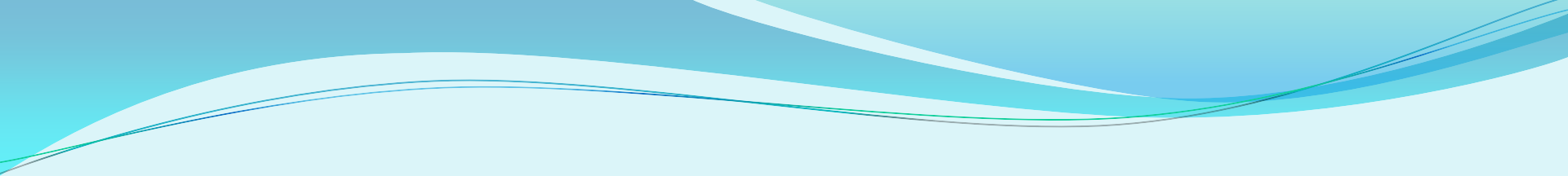
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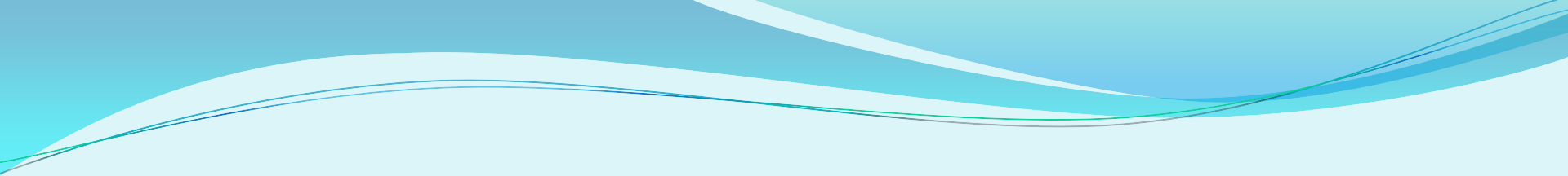
With thanks also to Sally Wassell, Robbie Gilligan and
Cheryl Burgess

- My research on resilience focuses on drawing from the clinical research to develop messages for practice and exploring how people put it into practice:
 - Promise – it resonates with practice, you see it
 - Pitfalls – lots of messy messages, too many ‘ifs’ and ‘buts’
- ‘Resilience’ has become over-used and over-simplified.



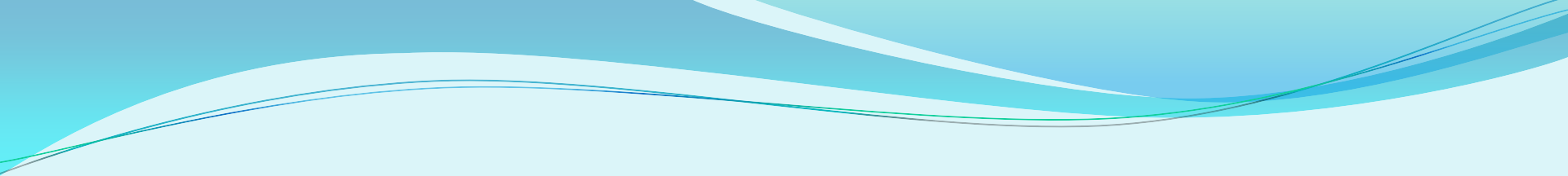
a phenomenon or process
reflecting relatively *positive*
adaptation despite experiences of
adversity or trauma.

(Luthar, 2005)



Resilient children are better equipped to resist stress and adversity, cope with change and uncertainty, and to recover faster and more completely from traumatic events or episodes.

(Newman and Blackburn, 2002)



Resilience is not a trait of an individual, though individuals manifest resilience in their behaviour and life patterns

(Masten and Powell, 2003)

In the context of exposure to significant adversity, resilience is both the capacity of individuals to navigate their way to the psychological, social, cultural, and physical resources that sustain their well being, and their capacity individually and collectively to negotiate for these resources to be provided and experienced in culturally meaningful ways.

(Ungar, 2008)

Foundations in infancy

- Attachment to caregivers
- Development of language
- Differentiation of self from environment
- Self-control and compliance

Masten and Coatsworth (1998)

During school years

- Resilience associated with sense of self-efficacy, mastery and appropriate autonomy.
- Need to avoid developing unhelpful combination of attributions that are internal, stable and global -
“Its my fault, it’s going to last forever, and its going to affect everything I do.”

In adolescence

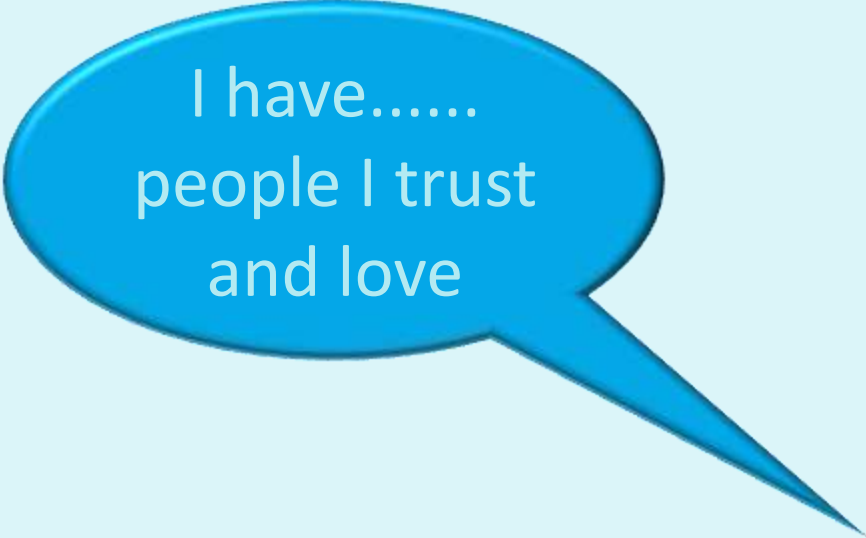
- In adolescence attachments are still very important
- Patterns of behaviour will have become more entrenched
- Young people are likely to have developed their own repertoires of coping
- 'Some ways of 'escaping' are beneficial, but others are costly in terms of an unplanned and problematic transition to adulthood and an unsettled or unstable early adult life'

(Velleman and Templeton, 2003).

Three building blocks of resilience

- Secure base / sense of security and attachment
- Self-esteem
- Self-efficacy

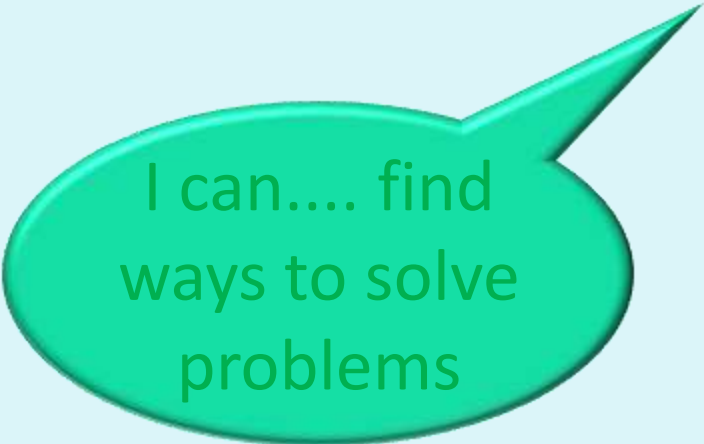




I have.....
people I trust
and love



I ama
loveable
person



I can.... find
ways to solve
problems

(Grotberg, 1997)

'I have...'

Resilience rests, fundamentally, on relationships. The desire to belong is a basic human need and positive connections with others lie at the very core of psychological development; strong, supportive relationships are critical for achieving and sustaining resilient adaptation.

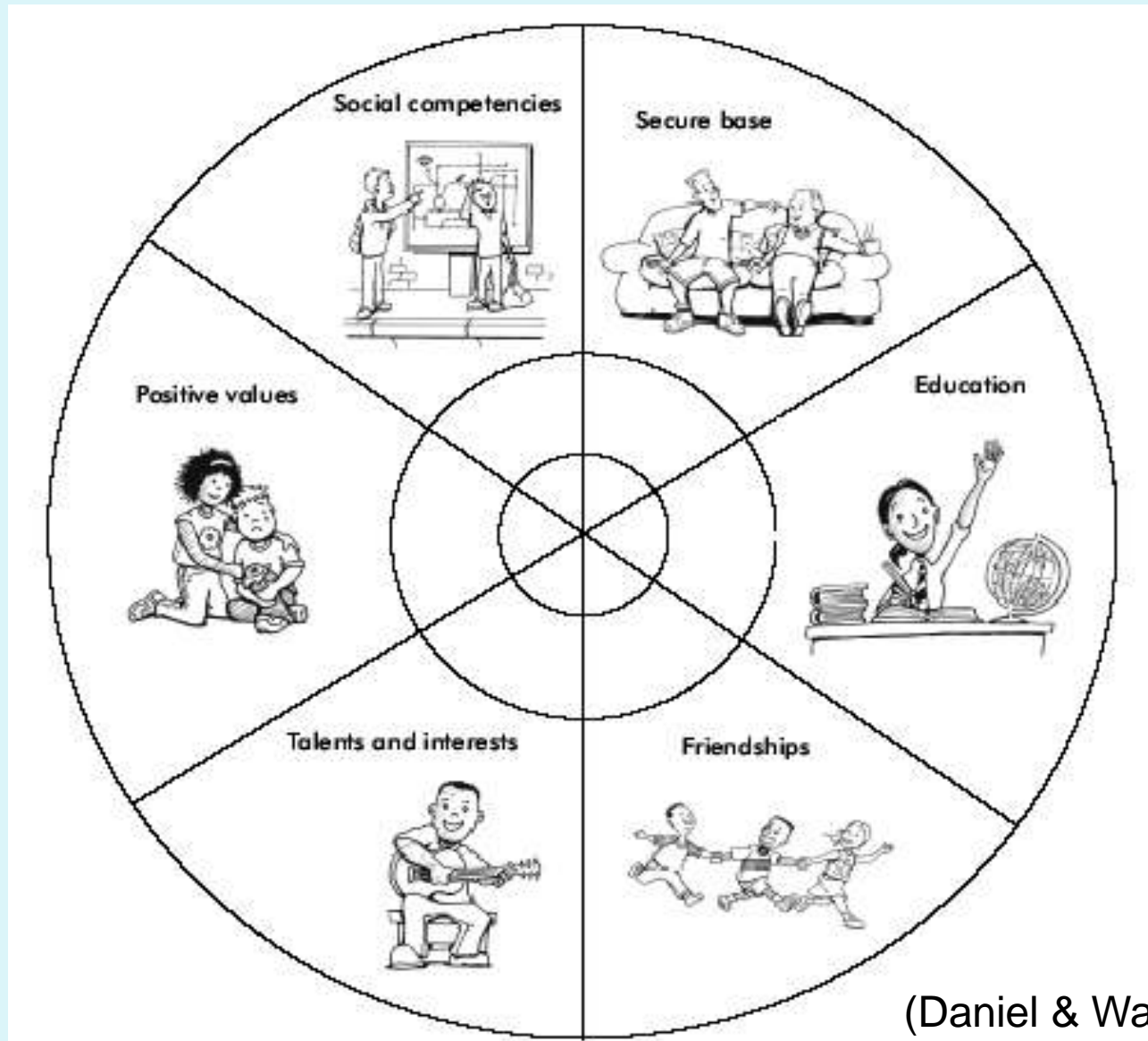
(Luthar)

'I am...' and 'I can...'

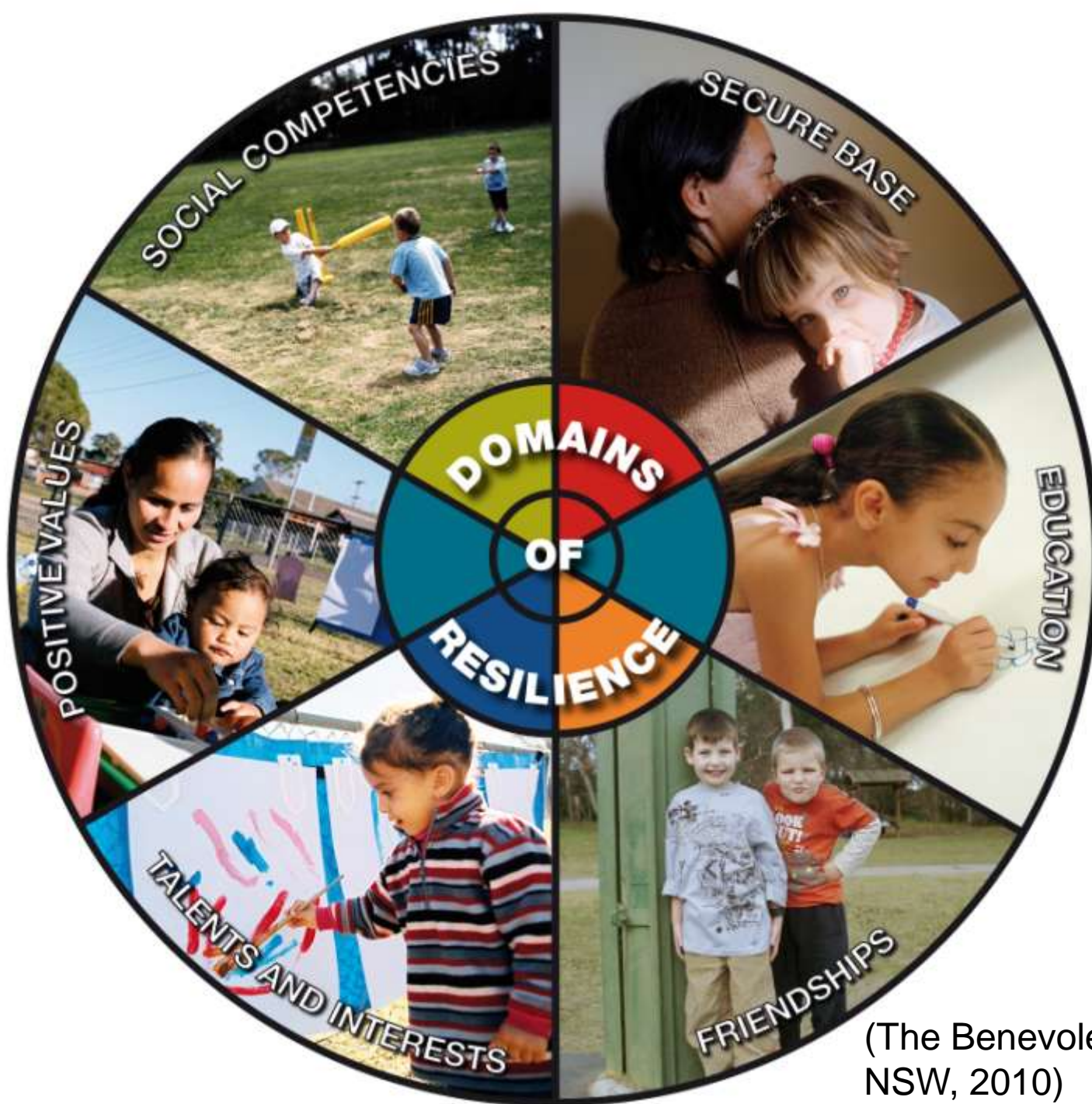
- Main theories of self-esteem can be grouped into two categories that focus on:
 - self-worth or
 - self-competence.
- Mruk (1999) brought them together arguing that people need to *both*:
 - feel good about themselves *and*
 - feel that they can meet challenges they may face.
- He proposed 4 categories.

1. *Medium* to high self-esteem - a positive sense of self-worth and a positive sense of self competence.
2. *Low* self-esteem - a low sense of self-worth and low self competence = classic low self-esteem.
3. *Defensive* self-esteem, in two types –
 1. Type 1 – a high sense of self-worth but low self competence
 2. Type 2 – a low sense of self-worth, and a positive self-competence.

Resilience domains



(Daniel & Wassell, 2002)



(The Benevolent Society, NSW, 2010)

'Resilience Matrix'



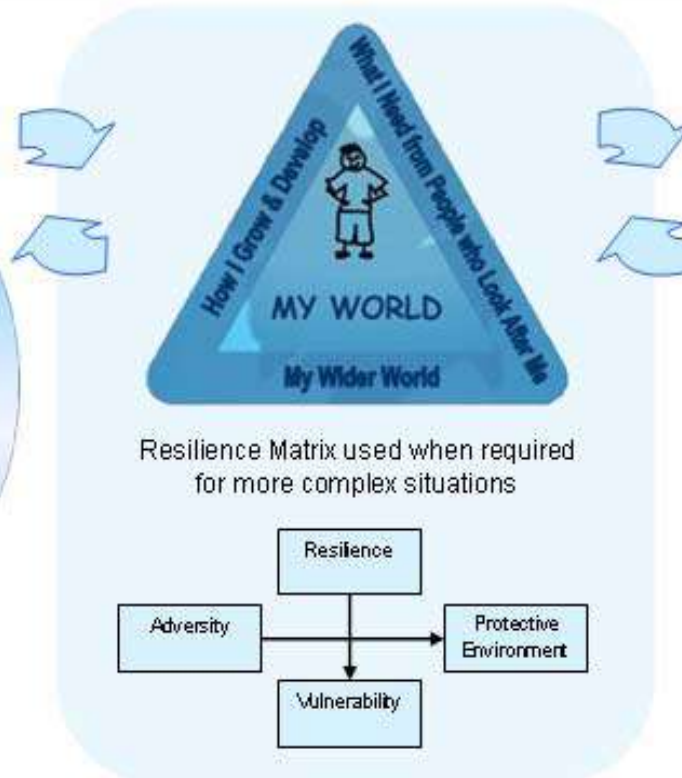
Devised in collaboration with Sally Wassell and Robbie Gilligan

Well-being



Assessment

Appropriate, Proportionate, Timely



Well-being



Observing & Recording
Events/Concerns/Observations/Other Information

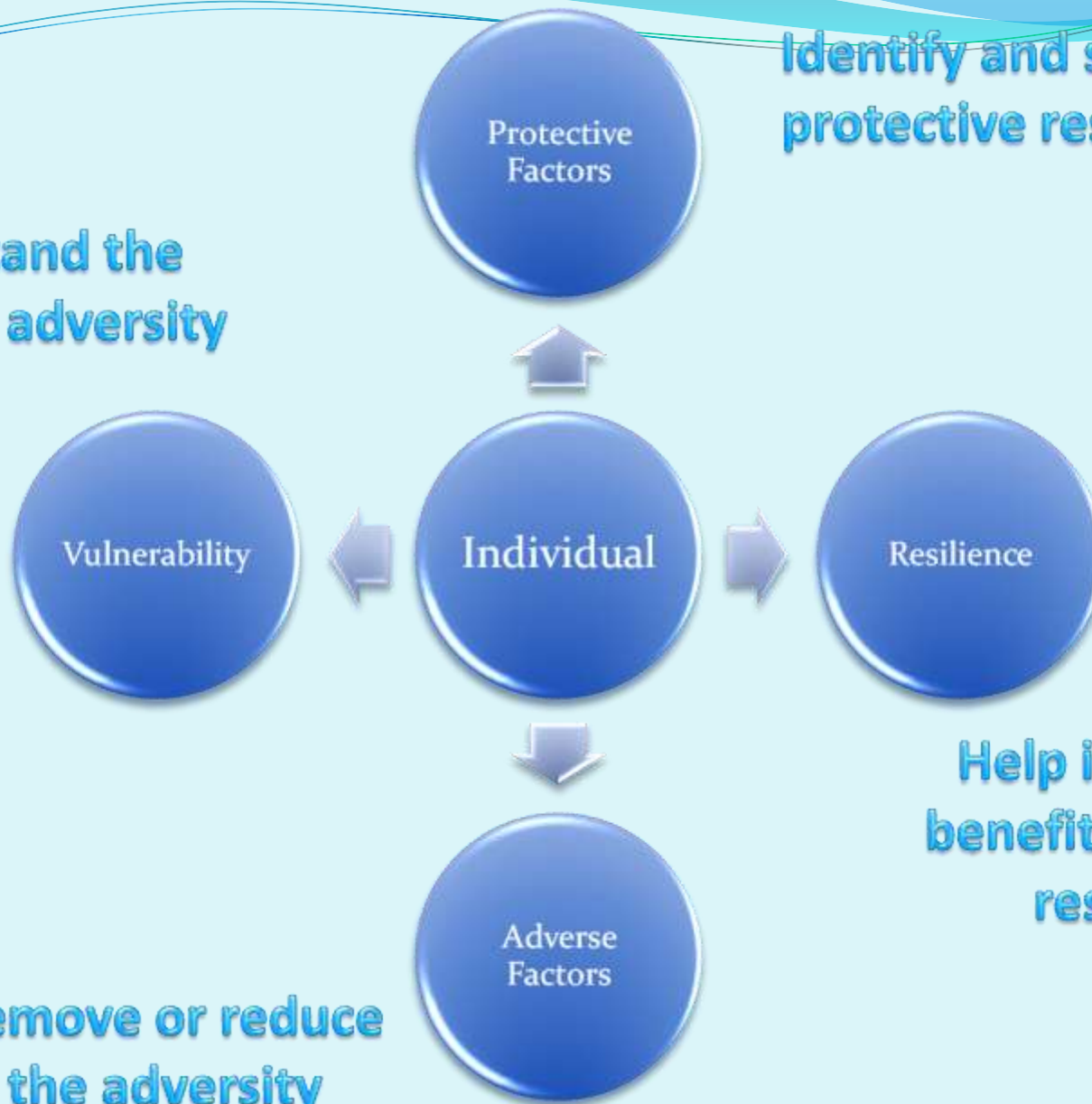
Gathering Information & Analysis

Planning, Action & Review

Scottish Government (2008) A Guide to 'Getting it right for every child'

Scottish Government, *Getting it Right for Every Child*

**Understand the
impact of adversity**



**Identify and support
protective resources**

**Remove or reduce
the adversity**

**Help individuals
benefit from these
resources**

When an organisation has the explicit aim of nurturing resilience in vulnerable children:

- how do practitioners translate that aim into practice and
- how congruent is the described practice with the principles indicated by the existing literature on resilience?
- Survey of 201 practitioners (108 in the UK; 93 in Australia) and
- 32 case studies (18 in the UK; 14 in Australia)

(Daniel *et al*, 2008)

Case studies

- UK 15 boys and 3 girls;
 - 15 children were white and 3 of mixed race.
 - interviews with 12 children, 12 parents/carers, the project workers for all 18 case children and where there was a parent worker
- Aus 14 families – relating to 14 girls and 14 boys
 - 9 months to 18 years. All families, but one, were Caucasian or white Anglo-Australian.
 - Interviews with 11 parents/carers interviewed, the project workers for all 14 case families and 3 other professionals.

UK- majority referred to processes that enable a person to cope with and adapt to adversity

The qualities that enable you to deal with the ups and downs of life

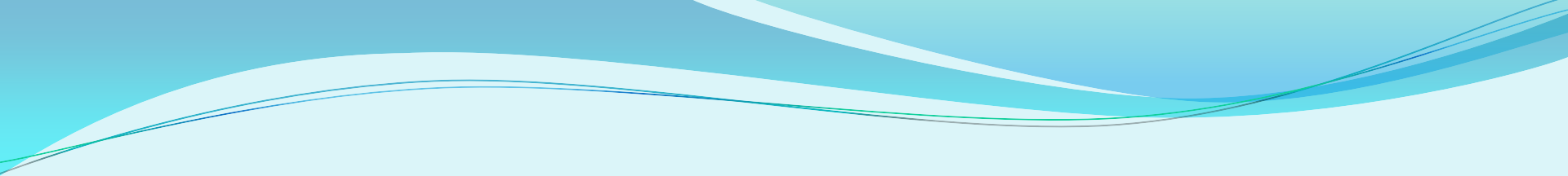
... an individual having the ability to cope and make positive adaptation in difficult circumstances whether this be personal, familial or environmental... This is something that is a process rather than a character trait, which children may or may not be lucky enough to have

Australia – similar definitions

Resilience is the way a person bounces back and gets on with life after a disadvantaged beginning or traumatic start to life

Being able to 'bounce back', achieve developmental milestones and wellbeing in spite of abuse, neglect, hardship

The ability to bounce back from life's adversity's and adopt and develop coping strategies in dealing with life's ups and downs



Practitioners link it with
principles for practice –

how congruent are they with the literature?

Respectful engagement with, and involvement of service users

- Not exclusively associated with a resilience-based approach

HOWEVER

- by engaging with children in a way that involves them in assessment and planning, that encourages them to contribute to decisions about their lives and that provides them with positive choices, practitioners could help to create the conditions for the development of better **self-efficacy**.

Use of solution focused and strengths based approaches

- It may be that these terms are being used as ‘shorthand’ for more positive approaches to practice that counteract the preoccupation with risk and problems that can characterise bureaucratic systems
- Further research needed to examine whether the adoption of optimistic discourses can lead to better outcomes for children over and above the specific model for intervention that is used.

The need to target all ecological levels

- UK services focused heavily on the coping and skills of the individual child with associated support for the parents or carers, and the Australian services were dedicated to improving the well-being of parents and family unit and placing that unit within the best possible community network.
- The research showing factors at different ecological levels to be associated with resilience suggests should target all levels (Werner & Smith, 1992).

The need for a multi-disciplinary approach

- The role of schools can be crucially important and therefore it is important that strategies are developed with consistent and complementary approaches across the professional network (Gilligan, 1998).
- As Newman and Blackburn (2002) indicate, interventions that build on naturally occurring resources in the child's network are likely to be more effective and enduring.

Case studies - UK

- improvement of self-esteem / to like self more
- improvement of peer relationships
- improvement in school experience / behaviour
- control of anger / managing disagreements
- naming feelings / emotional literacy.

STRATEGIES

anger control / emotional intelligence



INTENDED OUTCOMES

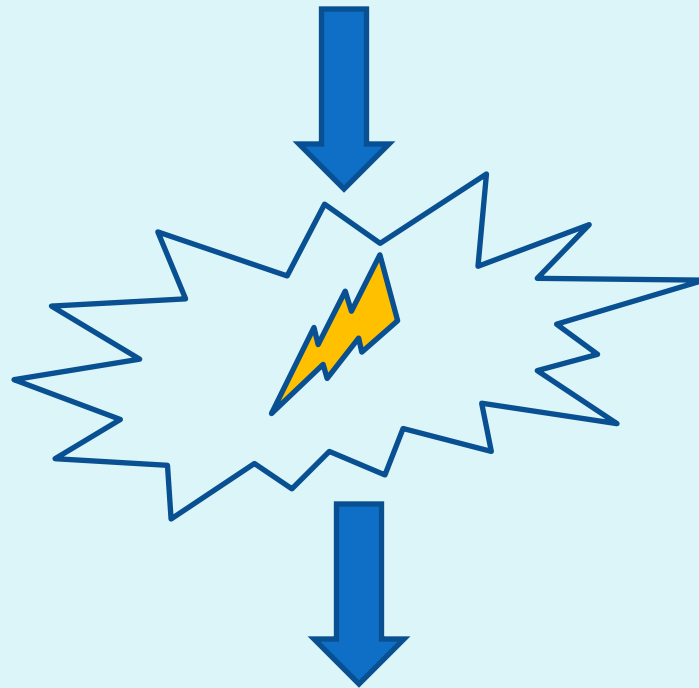
raised self-esteem / better peer relationships / improved school experience

Potential pitfall - circularity

- Improved self-esteem was described by some as an intended outcome but by others as a route to intended outcomes.
- Improvement in peer relationships was described both as a positive outcome, and as a route to better outcomes.
- We need to be clear about whether we are targeting underlying processes.
- Self-esteem should be linked with the development of mastery and with achievement through effort (Seligman, 1996).

'Resilience'

Experience of **adversity** – chronic and / or acute



Better well-being than might be expected in all or some domains

Adversity

- Stressful life events can be chronic or acute and may be non-independent or independent
 - batteries of measures used
 - ‘Project Competence’ as children grow older there are more non-independent adversities
- (Garmezy; Masten & Powell, 2003)

Adversity

- The higher the number of risk factors the more the problems – *cumulative risk*
 - chronic adversity is corrosive eg neglect or poverty
 - cumulative harm.

(Masten & Powell, 2003)

Adversity – potential pitfalls.

- Definitions of adversity vary according to who is defining it, for example researchers, practitioners, policy makers or service users.
- Situations which may be experienced as adverse or negative by some people may be perceived as relatively positive or less challenging for others
 - e.g. living in homeless accommodation could be a positive improvement if there was abuse in the family home.

(Burgess and Daniel, 2009)

- Frequently insufficient attention is given to structural factors, e.g.

‘...the risks posed to Aboriginal children were, and are, often the result of structural decisions made by those outside their communities’

(Blackstock and Trocmé, 2003, p. 106)

Implications for practice

- Do not make assumptions on people's behalf – listen to people.
- Try to disentangle the chains of adversity that can occur.
- Pay proper attention to the range of structural factors that may be having a direct and indirect adverse impact on people.

What is a good outcome?

- Some look for *better* than average functioning.
- Some suggest that children who are showing developmental delay or problems may still be defined as showing signs of resilience if the delay is *not as much* as predicted

(Ungar).

What is a good outcome?

- Some look for *absence* symptoms e.g. for children who have suffered significant abuse or neglect is it more about their ability to cope or function reasonably well than an expectation that they will thrive?

(Kinard, 1998; Bolger & Patterson, 2003)

Outcomes – potential pitfalls

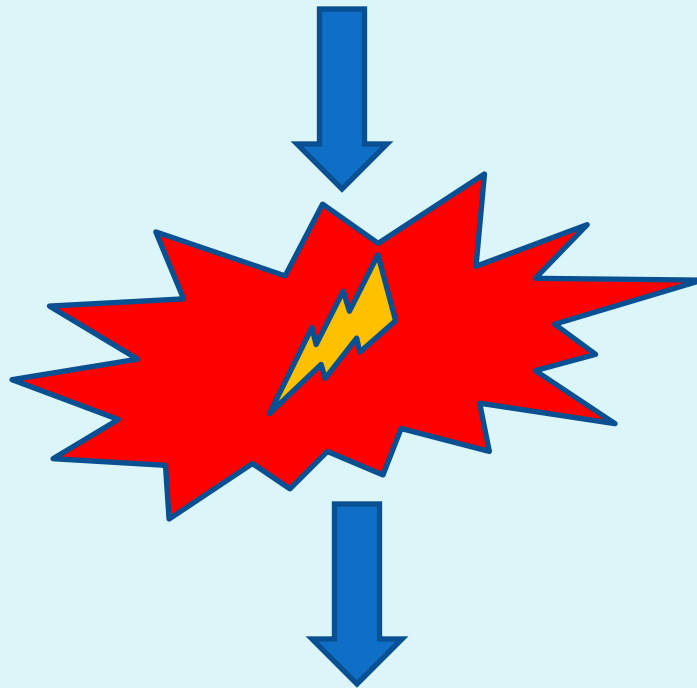
- In practice there may be different definitions.
- There may be different levels of aspiration within the helping network.
- Practitioners and service users may have different ideas about what is a good outcome.
- Things such as social conformity, wealth, success can be seen as a good or bad thing depending on your perspective and culture.

Implications for practice

- Hold high aspirations for **all**.
- Find out what people themselves value.
- Rare is the person who shows positive adaption to all circumstances and in all domains – so build on the areas of strength.
- Work with the grain of adaptive strategies that are specific to very limited circumstances.
- Be clear what you are working towards and that you are not thwarting what might be legitimate resistance.

What goes on in the middle?

Experience of adversity – chronic and / or acute



Better well-being than might be expected in all or some domains

Adaptive qualities

- In the context of adversity
 - the individual has access to internal and external **resources**
 - and has the **adaptive** ability to make use of those resources to buffer the effects of adversity.

Resource factors can be:

- Additive / compensatory
- Protective / moderating
- Challenging / Innoculatory

‘...protective processes that are advantageous to those experiencing risk, but that have no influence on those in low-risk environments; promotive or compensatory processes that have an equally beneficial effect on children in both low- and high-risk environments; and a challenge model of resilience where the benefit of the process is dependent on the level of risk exposure...’

(Ungar, 2011, p.2).

Challenging / innoculatory

- The risk factor is also the protective factor
- A moderate amount of adversity protects from negative effects of future adversity
- Currently two extremes:
 - abused, neglected, severely structurally disadvantaged individuals and communities
 - over-protected, pampered 'cotton-wool kids'.

Protective / moderating

- Especially effective under circumstances of risk
 - Good parenting is especially beneficial in contexts of high-risk (strictness can be helpful)
 - High-quality child care is especially helpful for children living in at-risk families
 - Good relationships with teachers and positive school experiences are especially helpful for young people facing risks at home or in the community

(Luthar)

Protective – potential pitfalls

- Many complex studies have tried to tease these out, but research is still developing
- Can be difficult to translate specific findings into general practice
- May link with confusion about outcomes – eg ‘street-wise’ children

Additive / compensatory

- Independent effect from the risk factor.
- Co-exist with the risk factor.
- Convey benefits whatever the level of adversity.
- ‘Lifting all the boats’.

Additive – potential pitfalls

- It's obvious
- It's circular
- It's just common sense
- Etc....

‘The conclusion that resilience arises from *ordinary magic* ...refers to the idea that human individuals are capable of astonishing resistance, coping, recovery and success in the face of adversity, equipped only with the usual human adaptational capabilities and resources, functioning normally...there are some fundamental systems characteristic of human functioning that have great adaptational significance across diverse stressors and threatening situations.’

(Masten & Powell, 2003, p. 15)

Implications for practice

- Be clear whether focusing on general population-wide additive factors or targeting specific risk situations with specific moderating factors.
- Take time to understand the processes.
- Focus on 'modifiable modifiers'.
- Take account of culture.

Conclusion

- The concept of resilience has considerable face validity.
- It appears to provide a structure for some creative, and apparently effective work with children and families.
- A wide range of interventions are described as being focused on 'promoting resilience'.
- Far more precision is needed if we are to be able to research the efficacy of 'resilience-promoting' practice in more detail.