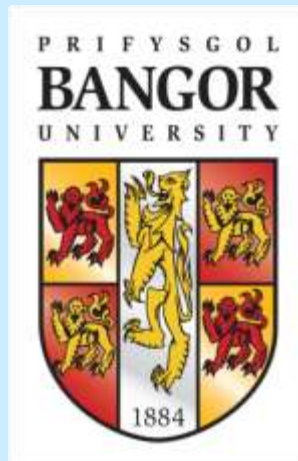


Challenges and healthy ageing: the role of resilience across the life course



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Brighton
2011

Resilience and Healthy Ageing Research Network

- Background to the development of the network
- Outline of the work programme and methods
- Summary of work results
- Forthcoming research and future plans

Aim: To unite and build upon previous work and existing evidence on resilience, strengthen this with new perspectives and collaborations, enhance research capacity and development

- Bangor University
- Liverpool University
- Swansea University
- Imperial College London
- ISER, Essex University
- University College London
- **Staffordshire University**
- **International Resilience Research Centre, Dalhousie University, Canada**
- **Brighton University**
- **Care Co-Ordination Network UK**
- National Public Health Service
- Age Concern
- ACT
- Whizz-Kidz
- Care and Repair
- Local Authorities (health and well-being strategy advisors)
- Lay members

LIFE COURSE PERSPECTIVE

Research Questions

- How can resilience best be defined and measured in order to inform research, policy and practice?
- To what extent is resilience determined by community, individual and biological characteristics?
- How can resilience be developed, maintained and enhanced to reduce health and social inequalities and achieve healthy ageing across the life-course?
- How do life course experiences influence health and resilience?

Method

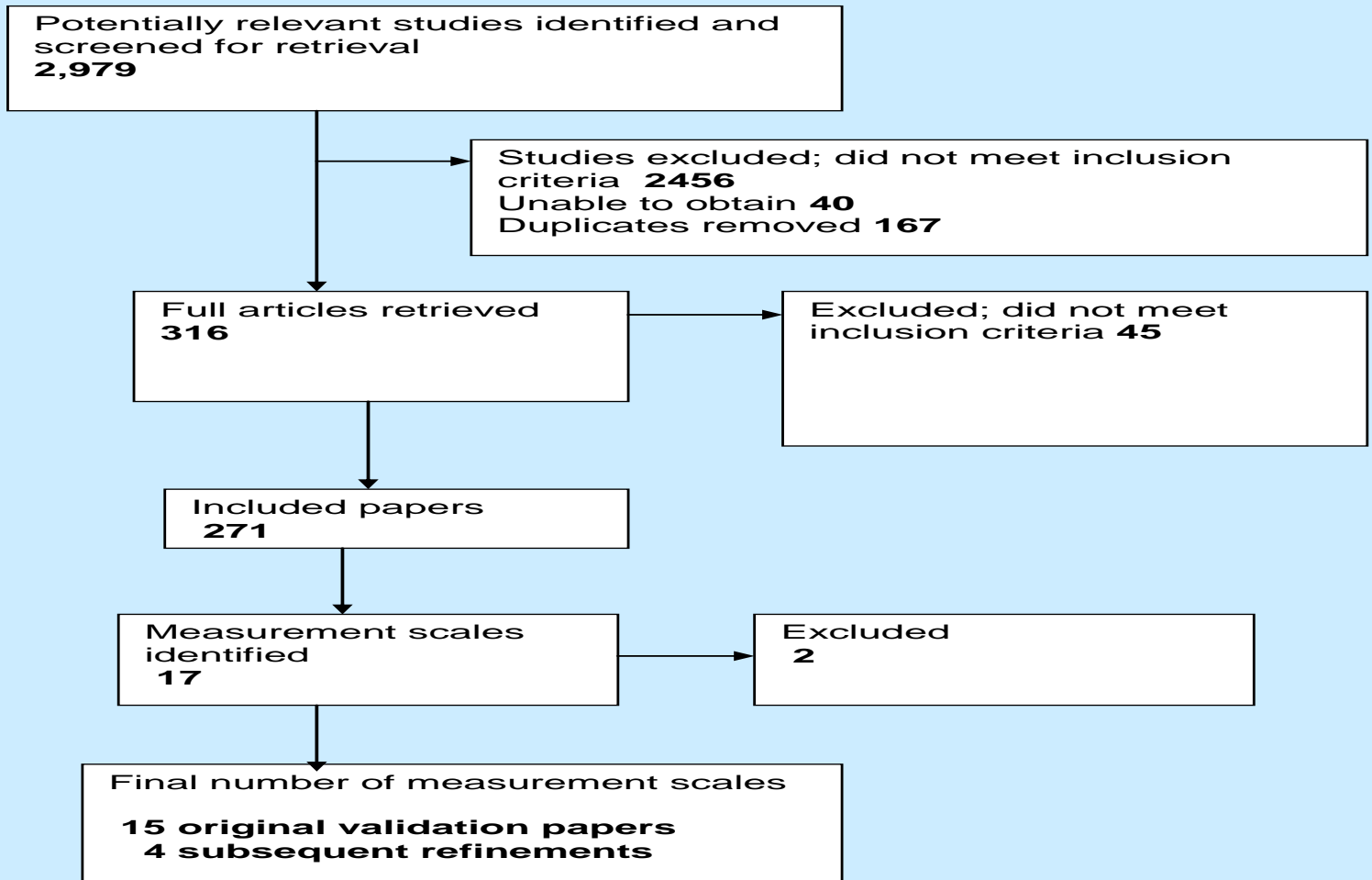
How the evidence was obtained

Literature Review using systematic principles – searched academic journals, policy documents, internet.

- Looking for - Research papers where resilience is a key focus and/or is assessed (NOT papers that are just picking up the word in the discussion) ; the population is human (not animal research); All age groups considered
- 1989 onwards; English language only
- **Applied concept analysis to clarify the definition of resilience**
What is resilience? (2011). A review and concept analysis. *Reviews in Clinical Gerontology*, 21 (2), 151-16.
- **A quantitative methodological review of resilience measurement scales** Windle, G., Bennett, K. and Noyes, J. (2011). A methodological review of resilience measurement scales. *BMC Health and Quality of Life Outcomes*. 9 (8), doi:10.1186/1477-7525-9-8
- Stakeholder consultation and scientific meetings

Results

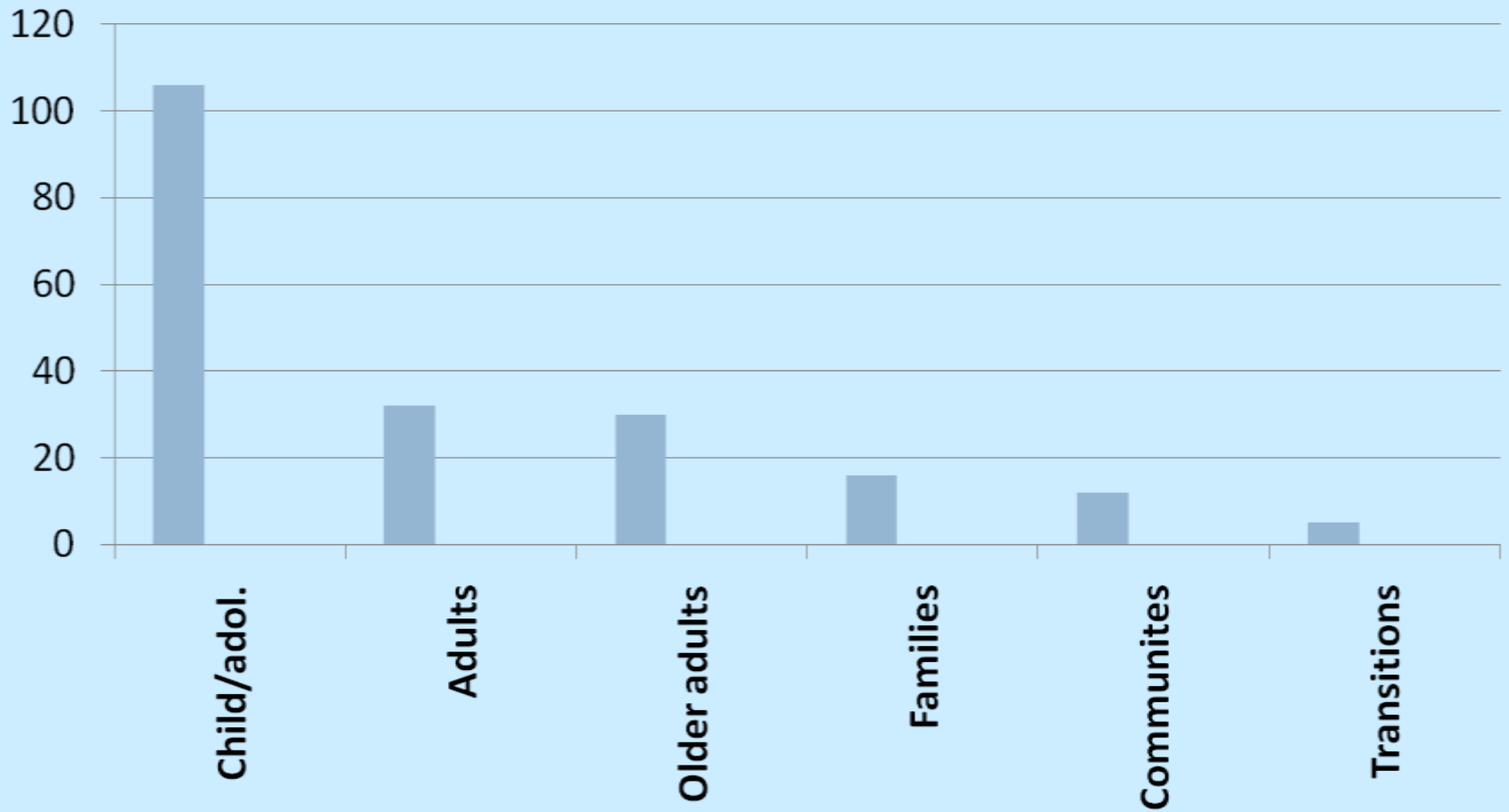
Flow diagram of review process



Results

- Far more resilience research has been undertaken with children and adolescents – less with older adults
- Primary research is mainly cross-sectional
- Discussion papers
- Not much longitudinal research
- Lack of multi-disciplinary approaches – bio-psycho-social
- Context of adversities differs according to population
- Very few peer reviewed evaluations of interventions

Resilience research x population



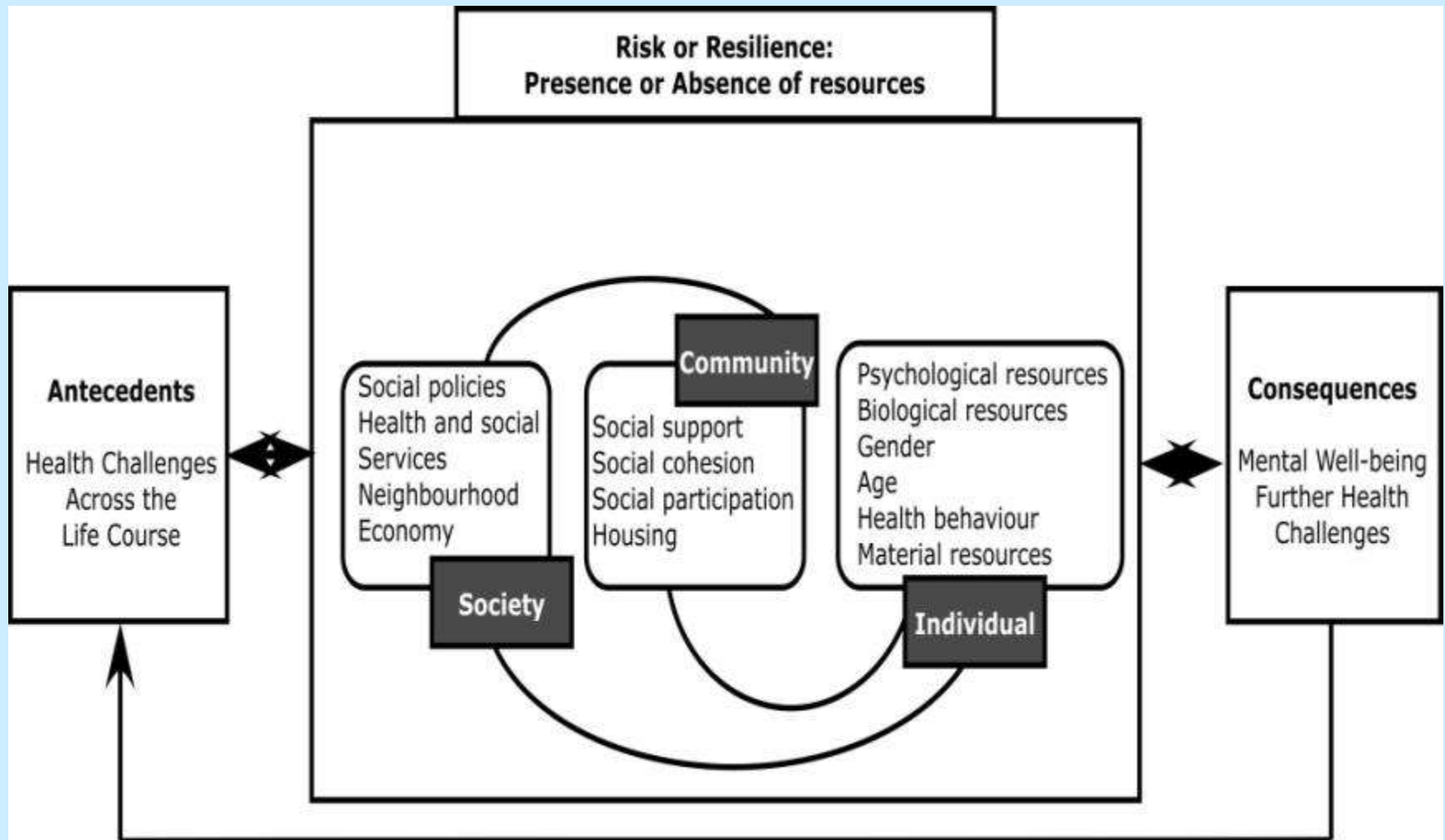
Comments from first meeting

- “Resilience is like a bouncing ball – a resilient person bounces back and keeps going”.
- “Resilience is the ability to overcome difficulties and move on”
- “Enhancing resilience may need good health, resources and a certain amount of risk taking.”
- “Resilience can be developed through exposure to a difficulty - you have to fight for everything – it gives you a different perspective”
- “Whether you become resilient may depend on how the difficulties currently being experienced are socially acceptable within your culture at that moment in time.”
- “Motivation is part of resilience – not feeling too old to try something new – People may not feel motivated because they conform to societal stereotyping, which can lead to social isolation, therefore it is important to be open to new ideas and experiences”
- “For disabled children, families/support networks are important.”
- “Health problems are a challenge to resilience”
- “Collective exposure to strife, e.g. wars may foster a collective sense of resilience – *‘everyone’s in it together’*”
- “The support structures available for church goers can be important when faced with adversity – the church community *‘will wrap round’*”

What is resilience? A review and concept analysis

‘Resilience is the process of negotiating, managing and adapting to significant sources of stress or trauma. Assets and resources within the individual, their life and environment facilitate this capacity for adaptation and ‘bouncing back’ in the face of adversity. Across the life course, the experience of resilience will vary.’

An example of a resilience framework



Methodological Review

- Conceptual adequacy - only five measures examine resilience across multiple levels of functioning (the Child and Youth Resilience Measure, the Resilience Scale for Adults, the Resilience Scale of the California Healthy Kids Survey, the Resilience Scale for Adolescents and Youth Resiliency: Assessing Developmental Strengths)
- Protective factors only
- Culturally appropriate – the CYRM
- The quality assessment criteria

Source; Windle, G., Bennett, K. and Noyes, J. (2011). A methodological review of resilience measurement scales. *BMC Health and Quality of Life Outcomes*. 9 (8), doi:10.1186/1477-7525-9-8

Methodological Review

- Limited due to lack of psychometric information.
- None scored highly – *this does not mean they are poor scales* – need further validation work
- What do you want to do with it?
- Responsiveness analyses are especially important for evaluating change in response to an intervention – only 1 measure (the CD-RISC) has been used to look at change in response to an intervention (individual level measure).
- Six measures scored high on at least 2 of the assessment criteria

Future R&D

The progress to date highlights a number of gaps in the research:

Multi-level/multi-disciplinary study of resilience

- There is less resilience research with adults and older adults
- Life course approach – transitions across all developmental stages, especially from adolescence onwards (longitudinal approaches)
- Biological approaches
- Interventions and robust evaluations
- Further validation of measurement scales
- The nature of the adversity – health



Longitudinal study (n=5000) of Resilience from age 65+ in relation to illness, disability and cognitive impairment (ESRC £3.3m)



RCT of a health promotion intervention (n=400). Promoting resilience age 65+ (MRC LLHW £1.3m)

Thank You

LLHW Resilience and Healthy Ageing Network

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