The Value of Resilience as a Concept for Practice in Residential Settings

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Introduction

Resilience is a concept that is increasingly gaining currency as a basis for practice with children and young people. The concept, however, is not easy to define and the term is often used loosely or uncritically so that the implications for practice are unclear. This paper will give a brief overview of the concept, describe some of the pitfalls of its uncritical use and set out a framework for practice. Resilience will be described both as a concept that can help assess a child's potential strengths and as a framework for practice. Much of what is indicated for practice is what practitioners and carers already do; however, the concept of resilience helps to set a conceptual framework around that work and provides a theoretical basis for what, in many cases, seems like common sense (Daniel, Wassell and Gilligan, 1999).

Resilience

Resilience is a slippery term and is used in different ways by different people. Sometimes it is defined as an *outcome*, as in Fonagy's frequently quoted definition: 'normal development under difficult conditions'(1994). This definition, of course, begs a number of questions, not least what is 'normal'. Gilligan (1997) gives a definition that begins to address resilience as a *process*:

> '… qualities which cushion a vulnerable child from the worst effects of adversity in whatever form it takes and which may help a child or young person to cope, survive and even thrive in the face of great hurt and disadvantage'. (Gilligan, 1997, p.12)

For residential child care staff and social workers, the key word in this definition is 'thrive'. It provides practitioners with the aim of aspiring to assist young people to achieve their full potential despite their circumstances.

Masten et al. (1990) focus on resilience as 'the process of, capacity for, or outcome of successful adaptation despite challenging or threatening circumstances'. Here it is an adaptive quality that is highlighted, as Schofield (2001) suggests, resilient people have both an internal and external adaptive quality. For example if a young person has a failure at school he or she can reflect upon that internally and see it as a temporary set-back and can also seek external support, for example

by asking a teacher for help with the next essay. It is this adaptive quality that appears to be an essential aspect of resilience. Resilient people, therefore, are those whose mental well-being is far better than might have been predicted given the adversities that they have encountered. Resilience is not simply an absence of psychological symptoms despite having experienced adversity, it is the possession of a positive adaptive ability that enables a person to feel competent despite risky living conditions (Sagy and Dotan, 2001).

In summary, therefore, as stated in a recent comprehensive review of resilience as a concept for practice:

> '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, p. 12)

Resilience is the ability to know where, how and when to use your energies to improve things for yourself and how to recruit help in that endeavour.

Pitfalls of an uncritical approach

It is important to consider some of the potential problems with an uncritical approach to resilience. First, the concept can be criticised as being a very complex way of expressing 'good parenting'. Effective parenting should enable children to develop the qualities that equip them to cope with difficulties but such parenting is not usually described as a process of 'promoting resilience'. Nonetheless, the concept of resilience does resonate with professionals who work with children who have been abused or neglected. Practitioners can identify differences in vulnerability amongst the young people they encounter and are often struck by the specific quality of resilience that some young people appear to possess that seems to be have developed despite the absence of 'good parenting'.

Second, expressions such as 'children are resilient' and 'children bounce back' are often used, but can be unhelpful when they negate the extent of upset and hurt that children can experience. As Rutter (1985) indicates, resilience is a relative concept. It is important to avoid assuming that it is a fixed attribute, and children who appear to cope in some circumstances may not cope with others. For example, a child may adapt to a change in school, but not with moving away from a close friend. It is also dangerous to make the assumption that just because a child appears to be coping well he or she is not in fact suffering internal distress and developing unhelpful coping strategies and defences. Luthar (1991) carried out some important research in this area that showed that some adolescents who appeared to be coping well showed, when carefully assessed, some signs of depression and anxiety. So, the important message is that assumptions should not be made that a child is coping and it should certainly

not be assumed that children are, or indeed *should*, be resilient.

Conceptual framework

Many factors have been shown to be associated with resilience and coping, some intrinsic and some extrinsic (Werner and Smith, 1992). Resilience is a dynamic concept that refers to an interaction between stresses and adversity and the buffering features within the child (Rutter, 1985), and it can be helpful, when assessing a young person's circumstances, to separate these.

Extrinsic factors

The extrinsic protective factors that help to promote resilience can be located on a dimension of:

Adversity ⟷ Protective factors

Young people who enter residential settings will, by definition, have experienced adversity such as abuse, neglect, disruption, bullying, poverty and so on. At the same time, for any young person, there will be some protective factors that can be capitalised upon. Three such protective factors that have been shown to be associated with better outcomes for a young person are:

- at least one secure attachment relationship
- access to wider supports such as extended family and friends
- positive nursery, school and or community experiences.

When assessing attachment there is still a tendency for social workers to focus on the relationship with the mother, but there is evidence that children can have different attachment relationships with each parent (Fox, Kimmerly and Schafer, 1991). It is, therefore, equally important to find out who is important to the young person without making assumptions. For some young people the father may be an important attachment figure, even if he is not resident in the family (Daniel and Taylor, 2001).

There may also be other people who are important to the young person such as members of the extended family, neighbours, friends and their parents. It is known to be protective for young people to have a network of people around them, but too often their importance is not recognised by professionals who often focus on immediate family relationships.

Similarly, it is essential to assess the quality of the school experience. Even if a young person does not achieve at a high academic level they can still derive considerable support from positive school experiences. School is often also a bridge into other community resources such as clubs and activities.

Intrinsic factors

Intrinsic factors fall on a dimension of:

Vulnerability ⟷ Resilience

A number of intrinsic factors such as temperament and sense of humour are known to be associated with levels of vulnerability or resilience, three key features that have been identified are (Gilligan, 1997):

- secure base
- self esteem
- self efficacy.

The notion of secure base indicates the extent to which the child feels a sense of security and belonging. There is considerable evidence that having a secure attachment base is protective. The concept of resilience is compatible with attachment theory, which stresses the importance of relationships in the building of a young person's sense of him or her self and of interactions with others. It is important to assess the child's experience of the attachment relationship because even when a parent says that they love the child and describes the relationship as close it may not feel that way to the child. For example, a parent can love the child, but his or her behaviour may be erratic and he or she may be inconsistent in availability to the child; this will not promote feelings of security, but rather can lead to anxiety. There is great potential for a residential unit to act as the secure base for a young person. Young people can form a number of attachments and therefore the staff team can become part of a network of support for young people if it is experienced as reliable and caring.

If a young person has high self-esteem he or she has an internal sense of worth and competence. However, self-esteem is a more complex characteristic because it is also an interpersonal feature, therefore good self-esteem should entail the young person also having an appreciation of the worth of others. Good self-esteem is best fostered by achievement in things that matter to the young person rather than simple assertions of worth. As Masten and Coatsworth (1998) point out, attempts to boost self-esteem with the aim of raising competence without enhancing competence itself can lead to young people who misbehave 'but think highly of themselves.'

Self-efficacy is concerned with the extent to which a person has an accurate knowledge of his or her own limits and strengths, an accurate understanding of what things he or she can or cannot influence and how to have some control over events. For example, two young people may fail a maths test: the one with a good sense of self-efficacy can think 'well, the test was hard, but perhaps I didn't revise enough, next time I'll try harder.' The one with poor self-efficacy

is likely to think, 'everyone else did all right, I am useless at maths, there is nothing I can do about it.'

In summary, these three intrinsic qualities have been summed up by researchers of the International Resilience Project as enabling resilient young people to say:

'I HAVE'……..for example, 'people I trust and love.'

'I AM'……for example 'a loveable person.'

'I CAN'…..for example 'find ways to solve problems.'

(Grotberg, 1997, pp. 22 - 23)

Framework

When put together these two dimensions provide a framework for a balanced approach to practice. Whilst much residential child care and protection practice focuses on vulnerability and risk, resilience-led practice not only considers problems and difficulties, but draws on strengths and nurtures positives.

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                    Protective Factors


Vulnerability ————————————|———————— Resilience


                    Adversity
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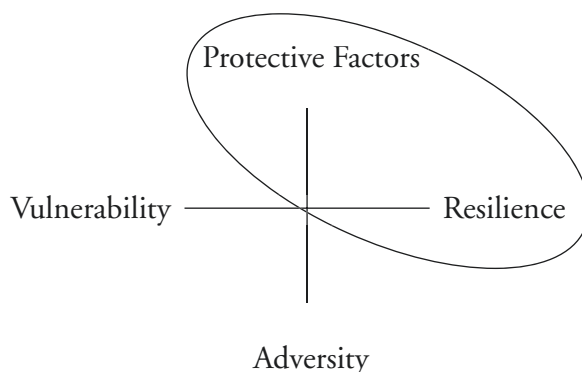
The framework provides a starting point for assessment and intervention that aims to

- **capitalise** on those protective factors that promote resilience and
- **nurture** the adaptive, coping process that enables the young person to make use of the protective factors.

Intervention

The starting point for effective intervention with a young person who has experienced abuse, neglect or disrupted family relationships is detailed assessment of his or her specific needs. Such an assessment should chronicle the events of the young person's life, carefully evaluate the quality of all relationships and detail the extent to which the young person is making appropriate developmental

progress. The Looking After Children (LAC) materials provide a structured basis for information-gathering and a systematic approach for collating data from different sources. But they lack detailed guidance about what should be done with all the material that is gathered and how to formulate a plan for intervention. The skill, which requires considerable professional judgement, is to make sense of the information and develop a clear plan for intervention, linked with measurable outcomes. The concept of resilience is entirely compatible with the LAC materials and provides a framework for developing a carefully targeted plan for intervention that aims to improve the likelihood of better outcomes for the young person in the short and longer term (Daniel and Wassell, 2002). It cannot be stressed enough, however, that such planning requires time and coordination of the formal and informal network around the young person. No one member of the network can be expected to do it all; effective assessment, intervention planning and implementation requires a collective approach that involves the young person as much as possible. The aim of such intervention should be to enable to young person to be able to say 'I have, I am and I can.'

Five strategies have been identified for intervention aimed at nurturing resilience:

1. Reduce vulnerability and risk

2. Reduce the number of stressors and 'pile-up'

3. Increase the available resources

4. Mobilise protective processes

5. Foster resilience strings (where an improvement in one domain has a positive knock-on effect in other domains) (Masten, 1994).

1. Reduce vulnerability and risk

The focus of current child care and protection practice is already often on risk-reduction. Sadly many looked after and accommodated adolescents have already experienced many of the situations that they were 'at risk' of when younger. Indeed, as these young people enter young adulthood the risks are likely to emanate more and more from their own behaviour. As the recent Child Protection Review in Scotland indicated, young people who are looked after and accommodated have a higher mortality rate than children in the general population with suicides, substance misuse and road accidents (often as a result of stealing cars) being the main causes of death (Scottish Executive, 2002).

When young people engage in such risky behaviour it can indicate that they lack a sense of future and purpose. As a result of his research with young men who had committed serious violent crime, including murder, in the US, Garbarino (1999) highlighted the extent to which such young men lived in the

'here and now'. They were unable to engage in discussions about the future and certainly did not see the point in changing their lifestyles because they could not visualise themselves having a future. The message from such findings is that bombarding a young person with messages about the riskiness of their behaviour if they have no regard for their own safety and no sense of future can be counterproductive. Instead the focus of work must be in helping them to develop a narrative of their lives that foresees some future. In other words, such young people need to develop a sense of hope. Part of the key to a young person being able to develop a narrative for the future is to support them in having a narrative about their past. As attachment theorists have indicated, people who have experienced poor attachments in their childhood are more likely to overcome them when they have the opportunity to reflect upon their experiences and to develop a 'coherent story' of their lives (Main and Goldwyn, 1984). The aim is to encourage young people towards a position where they want to protect themselves from risky situations.

2. Reduce the number of stressors and 'pile-up'

Adolescents cope best when they can deal with issues one by one (Coleman and Hendry, 1990). Looked after young people, though, are often bombarded with a number of life stresses at once. For example, a move in placement will also entail losses of previous attachments and connections. Even the most resilient of people can be overwhelmed when the number of stressors multiplies. When assessing and planning, therefore, it is important to look at ways that potential stresses can be staggered. For example, it will not be helpful for a young person to negotiate a return to school at the same time as re-establishing contact with an estranged family member.

Paradoxically, however, it is also important that young people are not overly protected from risk. The development of resilience is helped if young people are allowed to experience risk and be supported to cope with it (Newman and Blackburn, 2002). Currently society is risk-averse, and there is a strong emphasis on protecting children. The disadvantage of this is that young people are often deprived of opportunities to learn from experience. Within residential settings, therefore, the challenge is to enable positive risk-taking that provides young people with opportunities to learn coping strategies. Outdoor activities with an element of challenge are particularly effective for this.

3. Increase the available resources

Residential staff, in conjunction with field social workers, can play a major role in increasing the available human resources for a young person. As key workers, staff will be a resource in themselves and the potential for these relationships cannot be underestimated. There is evidence that young people can learn new patterns of attachment on the basis of positive relationships (Feeney and Noller,

1996). Through the opportunity to experience different types of relationships with adults young people can experience:

- trust
- having their views listened to
- being given choices
- being appreciated for their individuality
- the chance to talk over their options
- support.

Staff can also work with young people to identify other people in the formal and informal network who can offer support. Many of the young people will have experienced a number of moves and placements. They may well also have a large extended family. Their ability to maintain contacts is likely to be impaired and key workers can act as a bridge to re-establishing contacts.

4. Mobilise protective processes

As suggested above, it is the ability to adapt and cope with difficult experiences that underpins resilience. When mobilising protective processes the aim is to build the young person's sense of self-efficacy so that he or she can say 'I can…'. There are two main approaches to coping with difficult situations, problem-focused or emotion-focused (Smith and Carlson, 1997). Problem-focused approaches can be used when it is possible to have some influence over events, in other words, problem-solving strategies can be used. Emotion-focused approaches can be used when there is nothing that can be done to influence events and instead involve changing the way one thinks and feels about them. Many young people who have experienced abuse and/or neglect do not make accurate appraisals of situations and are not clear about the kind of strategies they can adopt., Focused intervention, however, can help young people to improve their ability to appraise situations and choose appropriate strategies. For example, a young woman who frequently finds herself in conflict with others might believe that 'everyone is out to get me.' A skilful helper can help her to identify her own part in such conflict and help her to devise strategies to defuse it. A young man whose mother drinks to excess and blames him for her drinking can be assisted to recognise the limits of his own power in the situation, to stop blaming himself and to cease attempting to stop his mother from drinking.

5. Foster resilience strings

There are a number of domains of a young person's life where intervention can be targeted including:

- secure base
- education

- friendships
- talents and interests
- positive values
- social competencies.

Current practice often concentrates on the establishment of a secure base. However, such attempts should not eclipse the other aspects of a young person's life (Gilligan, 1997). Indeed, improvements in other aspects of the young person's life may enhance their ability to make attachments. For example, if a young person develops a better sense of self-esteem because of achievements in a pursuit or hobby that interests him or her, he or she is likely to feel more worthy of attention and love.

Aspects of one domain can be used to boost another: for example, if a young person has a strong attachment to a member of the extended family (secure base = strong), but takes part in no activities or hobbies (talents and interests = weak), the attachment figure can be encouraged and supported in helping the child to take part in an activity. Similarly, if a young person has a good friend (friendships = strong), but misses a lot of school (education = weak), consideration could be given to involving the friend in encouragement to attend, perhaps by arranging for them to travel together.

It is particularly important to encourage pro-social behaviour and positive values towards others. Just as self-esteem entails an appreciation of the worth of others, so resilience is boosted when young people have the opportunity to contribute to others and society.

Young people must understand that other people have feelings, be able to empathise with those feelings, and have the ability to act kindly towards others. It is important, therefore, to explore ways in which young people can help others, for example through peer support, buddying, volunteering and so on. The main influences on the development of positive values are adult role models, so staff have a major role to play in creating an ethos of mutual respect and caring. Within such an ethos it is also possible to encourage social competence and the group situation can be used to good advantage as a locus for learning how to interact with others.

A resilience-based approach

The concept of resilience increasingly offers an alternative framework for intervention, the focus being on the assessment of potential areas of strength within the young person's whole system. The approach focuses on maximising the likelihood of a better outcome for young people by building a protective network around them. As suggested, much of the practice that is indicated by taking a resilience-led approach may not be markedly different

from the kind of activities that residential staff are carrying out already; however, it is often the kind of work that is 'squeezed in' or seen as a luxury. If staff are armed with the evidence base that the concept of resilience presents, they are in a stronger position to make the case for the time and resources to incorporate such approaches into the heart of their work with young people.

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