

Resilience: Strong at the Broken Places

Gabriella Hangiandreou, MD

Child/Adolescent Psychiatrist

Medical College of Wisconsin/Children's

Hospital of Wisconsin

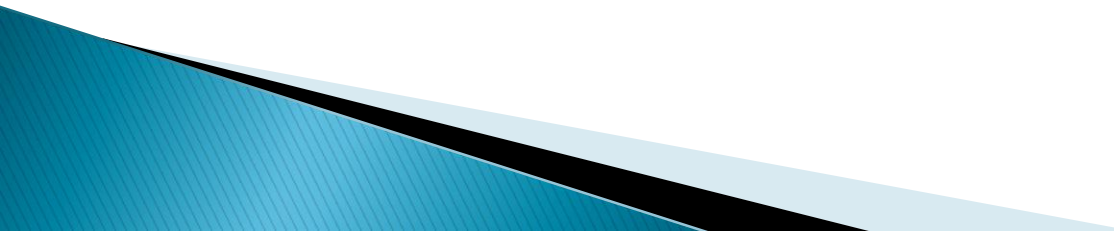
Child Psychiatry Consultation Program (CPCP)

**“The world breaks
everyone and afterward
many are strong at the
broken places.”**

Ernest Hemingway



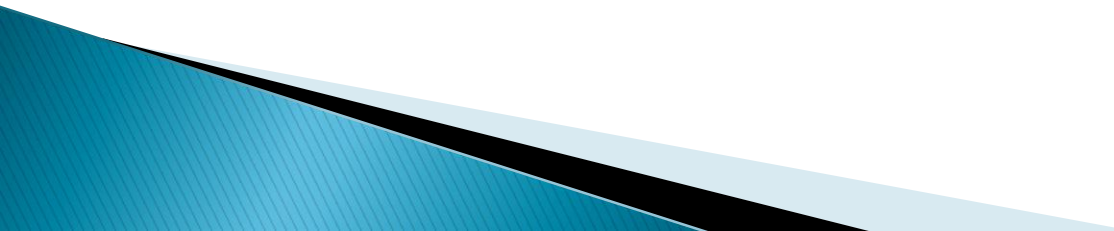
Training Objectives

- ▶ Review the possible impact of trauma
 - ▶ Learn the concept and definitions of resiliency
 - ▶ Discuss current resiliency research
 - ▶ Learn specific strategies to develop and support resiliency in youth, families, and communities
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What is Trauma?

*Trauma is the **emotional, psychological and physiological residue** left over from heightened stress that accompanies experience of threat, violence and life changing events*

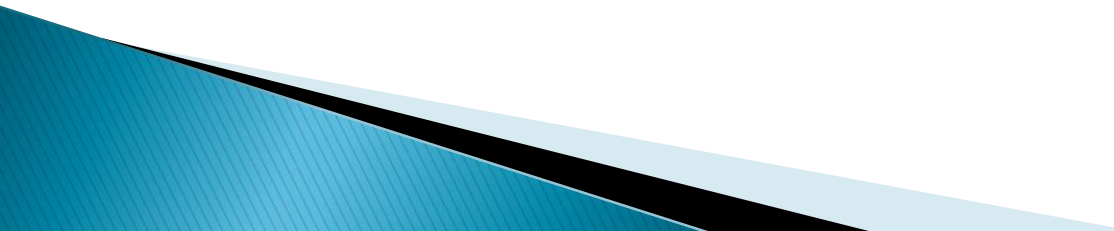
Source: Australian Childhood Foundation, *Making Space for Learning: Trauma Informed Practice in Schools*, 2010, <www.childhood.org.au>



Examples of Childhood Trauma

- ▶ Car Accident
 - ▶ Death of a Family Member
 - ▶ Failing a test
 - ▶ Death of a Pet
 - ▶ Personal Illness or Surgery
 - ▶ Family Illness
 - ▶ Witnessing Family Violence
 - ▶ Being Physically Abused or Neglected
 - ▶ Emotional Abuse
 - ▶ Sexual Abuse
 - ▶ Poverty
 - ▶ Fire
 - ▶ Moving
 - ▶ Family Member in Military
 - ▶ Divorce
 - ▶ Drug Use in the Home
 - ▶ Family Member in Jail
 - ▶ Surgery
 - ▶ Bullying
 - ▶ CPS Removal
 - ▶ Natural Disasters
 - ▶ Mental Illness within the Family
 - ▶ Fleeing home as a refugee or immigrant
 - ▶ Witnessing Community Violence
 - ▶ Being Held Back in School
 - ▶ Repeated Doctor Appointments
 - ▶ Loss of Family Income
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Three Kinds of Responses to Stress

- ▶ Positive Stress
 - ▶ Tolerable Stress
 - ▶ Toxic Stress
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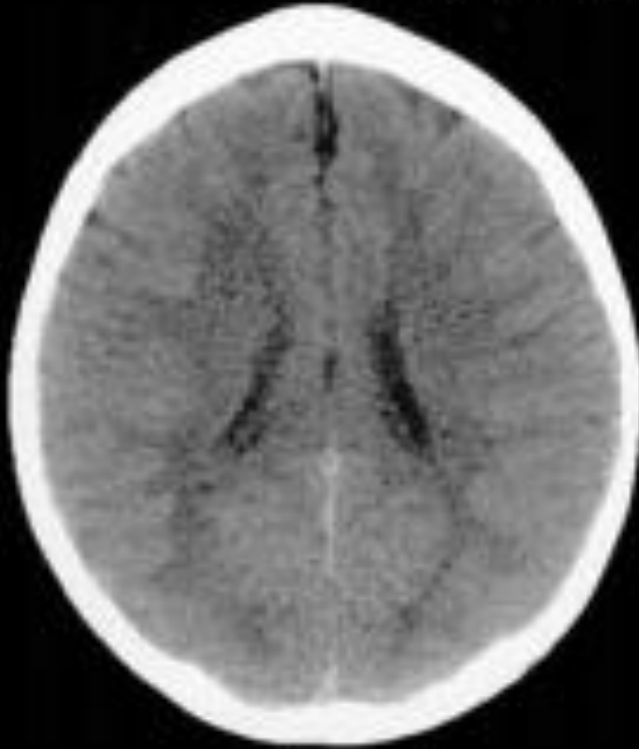
How Does Trauma Affect the Child's Brain Structure ?

The child's **stress response** is exaggerated and prolonged, resulting in changes in the child's brain :

- ▶ Larger, more active Amygdala
- ▶ Smaller Hippocampus
- ▶ Smaller, less active Frontal Lobes
- ▶ Smaller Corpus Callosum



3 Year Old Children



Normal



Extreme Neglect



Source: Perry, BD., 2002, Childhood Experience and the Expression of Genetic Potential: What Childhood Neglect Tells Us About Nature and Nurture, *Brain and Mind* Vol 3: pp 79-100.

What Will We See Behaviorally?



Frontal Lobe Functions

- ▶ Impulse Control
- ▶ Organization
- ▶ Time Orientation
- ▶ Reading Social Cues

Corpus Callosum

- ▶ Not well-integrated, having problems using words to solve problems

Amygdala Functions

- ▶ Problems w/emotional control
- ▶ Delays in cause and effect thinking
- ▶ Difficulty w/empathy
- ▶ Inability to describe own emotions
- ▶ Hyper-arousal, anxiety

What Will We See Behaviorally ?

Hippocampus Functions

- ▶ Impaired learning
 - Less ability to store memories
 - Less ability to retrieve memories
 - More impulsiveness

Abused children often struggle with complex, goal-directed behaviors, and have trouble adapting to transitions, changes and demands...



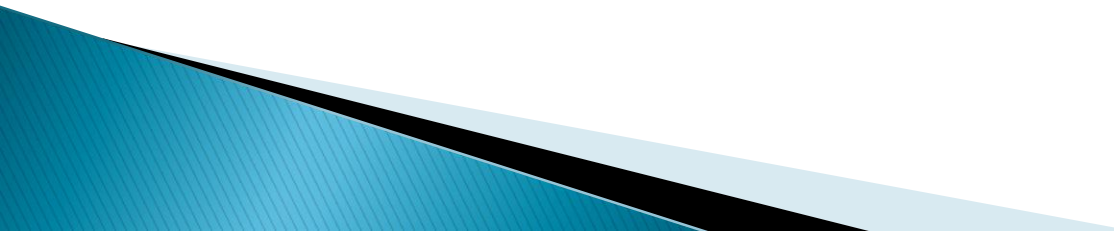
The Effect of Trauma on Children

It is important to remember that abuse, neglect and other trauma have different impacts on different children – and that while we have to take seriously the negative impacts of trauma we cannot underestimate the strength of human resilience

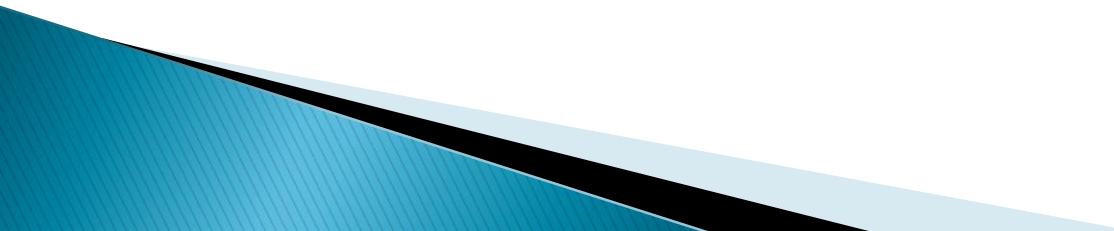
Source: Child Safety Commissioner, 2009, *From isolation to connection: a guide to understanding and working with traumatised children and young people*, <www.kids.vic.gov>

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Do you know this child?

- ▶ Parents divorced last year
 - ▶ In a car accident over the summer
 - ▶ Gets bullied due to size
 - ▶ Difficulty concentrating
 - ▶ Seems fatigued
 - ▶ Often complains they are sick or don't feel well – frequent visits to the nurse
 - ▶ Low self esteem
 - ▶ Grades continue to drop
- 

How about this child?

- ▶ Grandfather died last year
 - ▶ Diagnosed with cancer last month and going through chemo
 - ▶ New baby in the home
 - ▶ Keeping up with homework & excelling in school
 - ▶ Good attention span
 - ▶ Does not let negative comments from peers bring them down
- 

What is the difference in the two?

RESILIENCY!!



What is Resilience?

- ▶ The ability to overcome challenges and bounce back
- ▶ The skill of being able to have minimal impact from the damages of adversity
- ▶ Resilience in childhood is defined as **typical development in the face of adverse circumstances that propel others to deleterious outcomes**

(Deater-Deckard, Ivy, & Smith, 2005).



Children are Not Born With Resilience

- ▶ It is produced through the **interaction** of biological systems and protective factors in the social environment.

How Does Resiliency Work?

BALANCE:

Protective experiences and coping
versus
significant adversity



Why Study Resiliency?

- ▶ No one is exempt from facing some adversity
- ▶ It is important that children and adults are able to face and overcome struggles in life

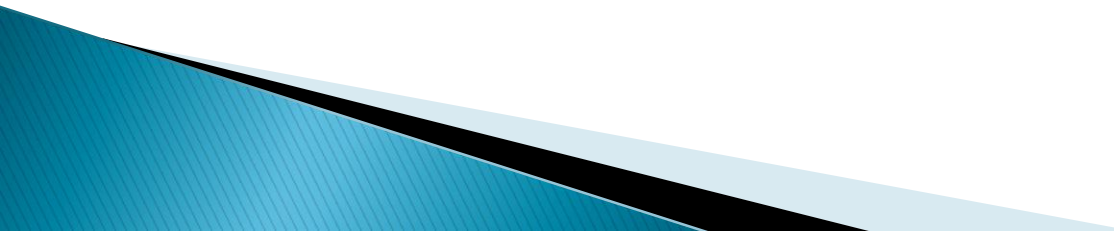


Background of Resiliency Research

Goals, starting 40 years ago:

- ▶ -----Understand, prevent, and treat mental illness
- ▶ -----Understand the etiology of mental illness
- ▶ -----Evaluate consequences of major threats to development

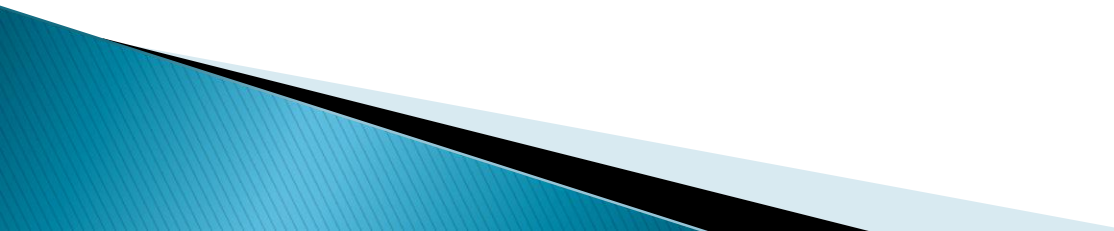
In this process, researchers recognized *unexpectedly positive adaptation or recovery after adversity* in the lives of the young people they studied



Prominent Research Studies

- ▶ Longitudinal Study in Kauai (Werner, 1995 & 1996)
 - 698 individuals born in 1955, followed through age 32
 - 1/3 high risk (poverty, perinatal stress, family discord, divorce, parental alcoholism, or mental illness)
 - 2/3 developed serious learning or behavior problems by age 10 or delinquency records, mental health problems or pregnancies by age 18.
 - 1/3 competent adults (who had experienced 4 or more risk factors)

Kauai Study

- ▶ Protective Factors within the Individual
 - ▶ Protective Factors within the Family
 - ▶ Protective Factors Within the Community
- 

Summary of Kauai Findings

- ▶ Clusters of protective factors—internal and external
 - Individual Temperament
 - Skills and Values
 - Sought out Emotional Support
 - Supportive Adults
 - One Special Teacher
 - Chose Compatible Life Opportunities



Research Studies (cont.)

▶ Longitudinal Study in Chicago

- 1539 individuals born around 1940, followed through age 24; low income, minority children
- Key Result
 - Educational attainment prevents unwanted health outcomes (reduces smoking, substance abuse, depression)

▶ Project Competence

- 205 individuals, 3rd-6th grades, followed over 10 years
- Key Result
 - If reasonable good resources are present, competence outcomes are generally good, even in the context of severe stressors

Research Studies (cont.)

▶ Isle of Wight

- 571 individuals, ages 9 and 10 in 1964; followed through adolescence
 - Prevalence and pattern of handicaps during the last 50 years with marked changes in social and material conditions

▶ Isle of Wight (follow-up study, child abuse, 1998-2000)

- 378 of original group, ages 42-46
- Key Results
 - Good quality relationships across childhood, adolescence, and adulthood important for well-being
 - Factors for resiliency included having one caring parent, positive peer relationships, stability of adult love relationships
 - Positive attachment throughout life support resilience

Key Points in Resiliency Model

- ▶ When individuals experience adversity, they also experience protective factors
- ▶ These internal and external protective factors **buffer** the effects of adversity
- ▶ Without protective factors, some individuals develop maladaptive coping mechanisms such as substance abuse, loss of self-worth, or an increase in risky behaviors

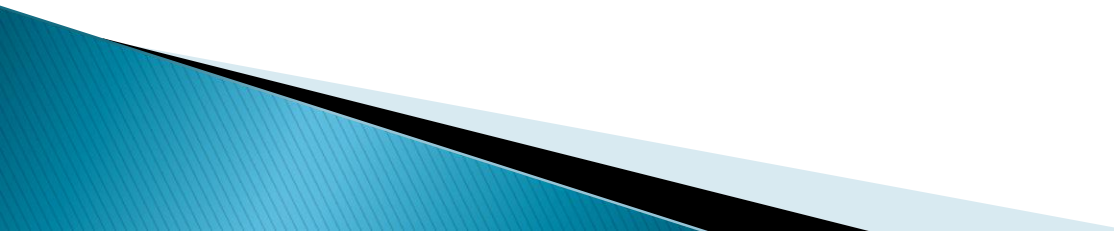


Key Points in Resiliency Model

- ▶ The single most common factor for children who develop resilience is at least **one stable and committed relationship** with a supportive parent, caregiver, or other adult.

Key Points in Resiliency Model

Children who do well in the face of serious hardship typically have a **biological resistance to adversity** *and* strong relationships with the important adults in their family and community.

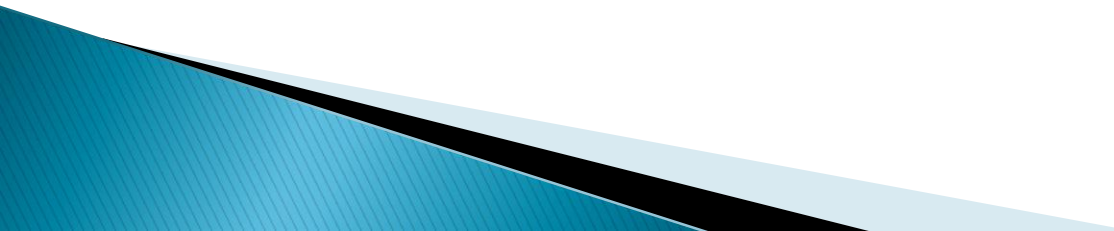


Key Points in Resiliency Model

- ▶ **Learning to cope** with manageable threats is critical for the development of resilience.



After a two year loan to the
United States ,
Michelangelo's David is
being returned to Italy.





What Can We Do to Promote Resiliency?

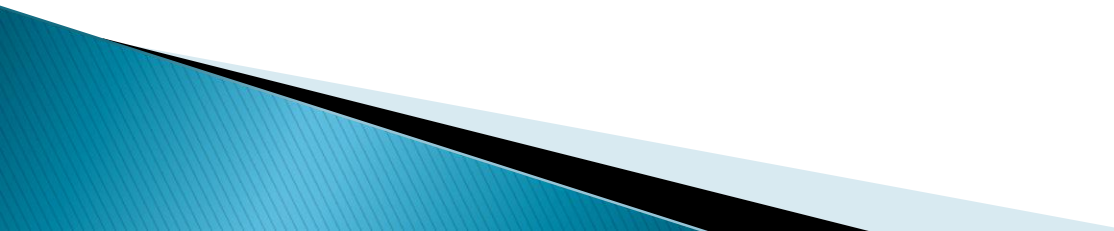
Intervention at the **Individual Child** Level



Personal Resilience is related to:

- Biological factors
- Attachment
- Control

Child Risk Factors

- Low self esteem
 - Poor social skills
 - Poor problem solving
 - Difficult temperament
 - Lack of empathy
 - Homelessness
 - Early school leaving
- 

Child Protective Factors

- Social competence
- Attachment to family
- Empathy
- Problem solving
- Optimism
- School achievement
- Easy temperament
- Good coping style



Figure 1
The Resiliency Wheel



Three Sources of Resilience

To overcome adversities, children draw from three sources of resilience :

I HAVE

I AM

I CAN

(International Resilience Project)



I Have

The resilient child has:

- People in their life whom they trust – they love the child unconditionally
- People who set limits and boundaries so they will know how to avoid danger
- People who will assist them if they are in trouble, sick, or in need of help/guidance
- People who want them to learn to be independent and self-sufficient as able
- People who will guide them and lead by a positive example



I Am

- ▶ These are a child's personal strengths that are internal
- ▶ Incorporates beliefs, attitudes, and feelings



I Can

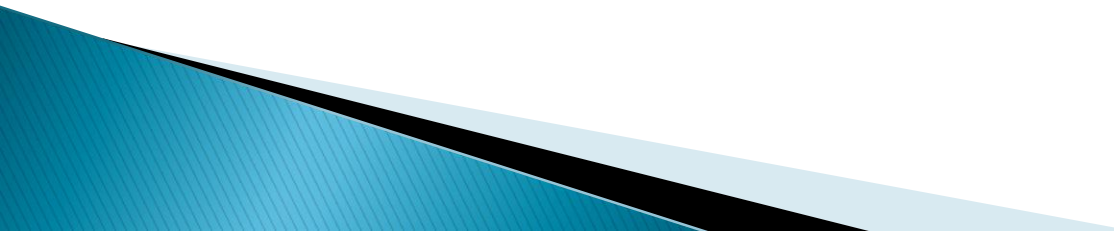
- ▶ These factors incorporate social and interpersonal skills
- ▶ These skills are learned by interacting with others and from those who teach them



Sources of Resiliency

- ▶ A child may not have all three sources – I have, I am, and I can, but they need more than one – resiliency comes from a combination of these traits.

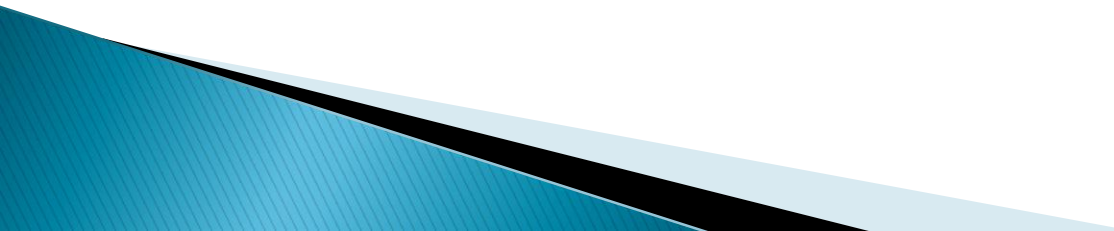
How Can Resiliency Be Promoted at Home or in the Classroom?

- ▶ Skills can be taught to all ages
 - ▶ Younger children rely more on the “I have” and later switch to “I can” – it is a continually process of learning the “I am”
 - ▶ Actively refer to resilient skills
 - ▶ Build up the child
 - ▶ Talk through situations as they occur
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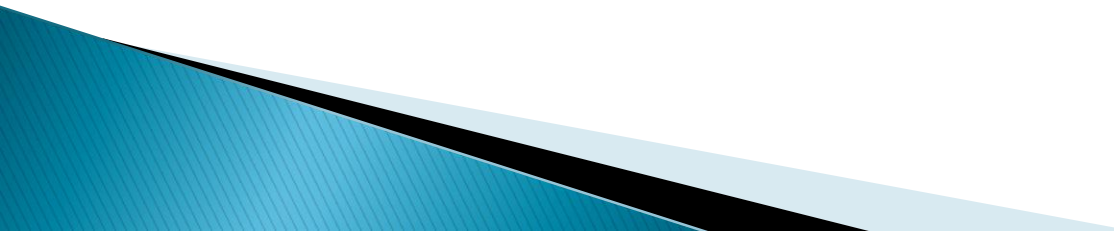
What Can We Do to Promote Resiliency?

Intervention at the **Family** Level

Family Risk Factors

- Family violence
 - Poor supervision
 - Harsh or inconsistent discipline
 - Lack of warmth or affection
 - Abuse or neglect
- 

Family Protective Factors

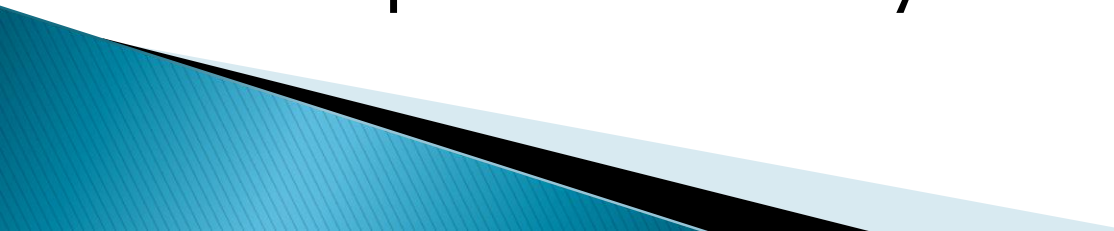
- Supportive caring parents
 - Family harmony
 - Secure and stable family
 - Supportive relationship with an adult
 - Strong family norms and morality
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Why Wait Until Something Bad Happens to Teach Resiliency?

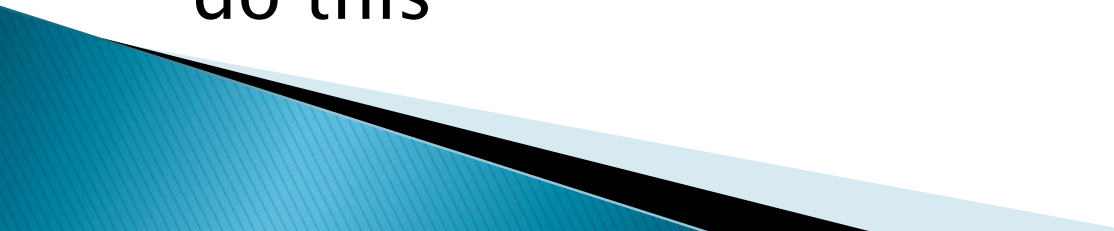
- ▶ Resilience should be promoted in children **before** a traumatic or challenging situation occurs so that they have necessary skills in place to handle things



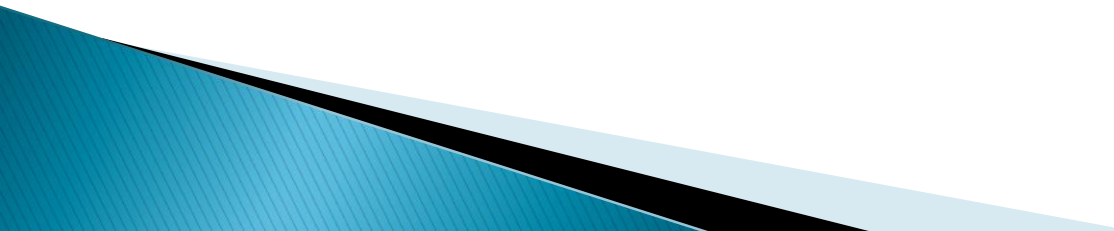
Talking about Resiliency

- ▶ Teach a vocabulary of resiliency: Discuss the “I have,” “I am,” and “I can.” Make lists of what the child has that falls in each category.
 - ▶ Some children simply don’t realize they have these things in place and need them to be identified.
 - ▶ Use “feeling” words and use yourself as an example – Tell how you overcame adversity
- 

Teaching Strategies

- ▶ Be resilient and be a role model. Don't pretend that you don't have problems. Model how to deal with adversity and changes.
 - ▶ Don't try to protect children from problems, changes, or difficulties. Instead, teach them how to cope.
 - ▶ Teach how to problem solve.
 - ▶ Help to identify emotions
 - ▶ Model communication skills and teach how to do this
- 

Teaching Strategies

- ▶ Offer choices and support decisions
 - ▶ Teach and model empathy and kindness
 - ▶ Give opportunities to try new things – be supportive
 - ▶ Believe in children and convey this to them.
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Remind Children...

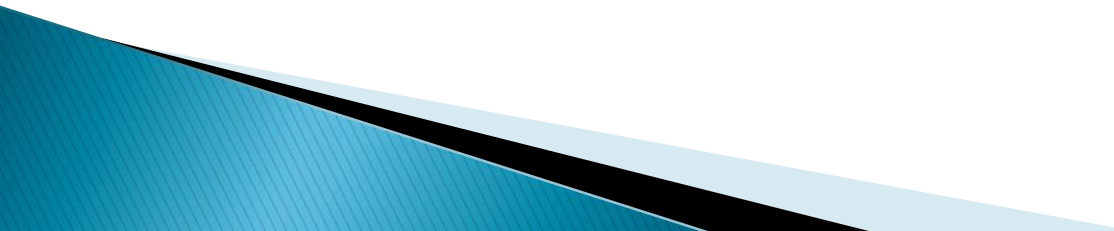


"You have everything you need to be successful
– and you can do it."
--Roger Mills

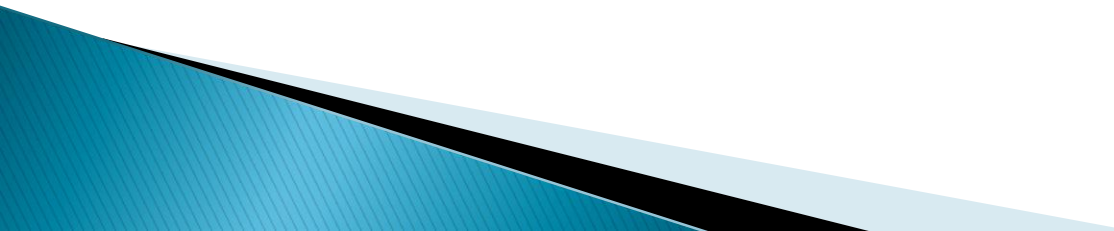
What Can We Do to Promote Resiliency?

Intervention at the **School** Level

School Risk Factors

- School failure
 - Bullying
 - Peer rejection
 - Poor attachment to school
 - Deviant peer group
- 

School Protective Factors

- Positive school climate
 - Pro-social peer group
 - Sense of belonging
 - Opportunities for success at school and recognition of achievement
 - School norms regarding violence
- 

Teaching Strategies

- ▶ Present a possible adverse situation and ask these questions for a single child or group to discuss:
 - What would you do?
 - How would you feel if this happened?
 - What resilience factors could be used?
 - How do you think the situation ends?



Teaching Strategies

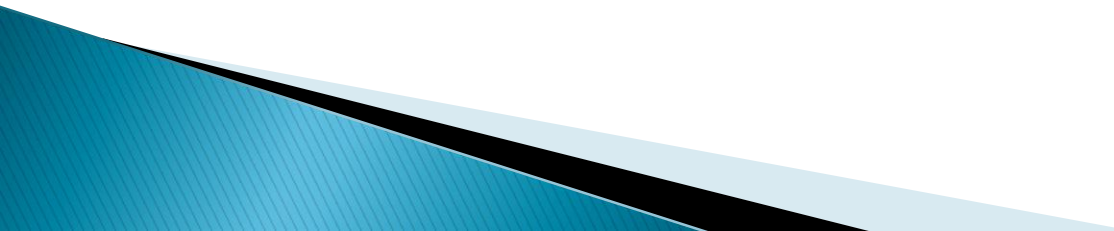
- ▶ Help children identify who is there to support them. Ensure they know they can come to you. When they do come – listen and be supportive.

What Can We Do to Promote Resiliency?

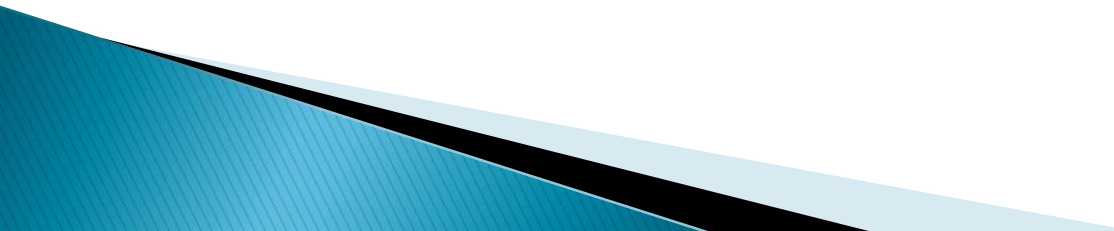
Intervention at the **Community** Level



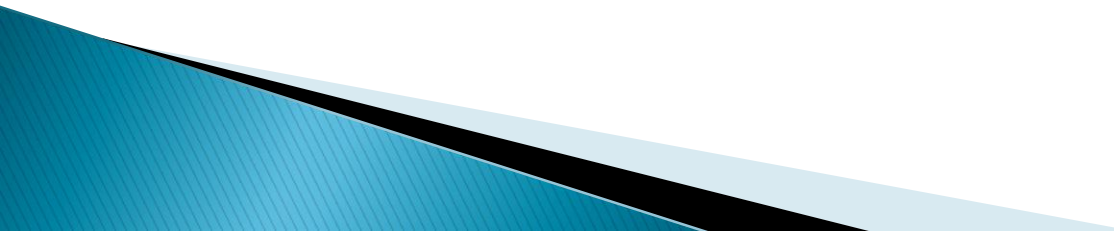
Community and Cultural Risk Factors

- Neighborhood violence and crime
 - Lack of support services
 - Social or cultural discrimination
 - Community norms concerning violence
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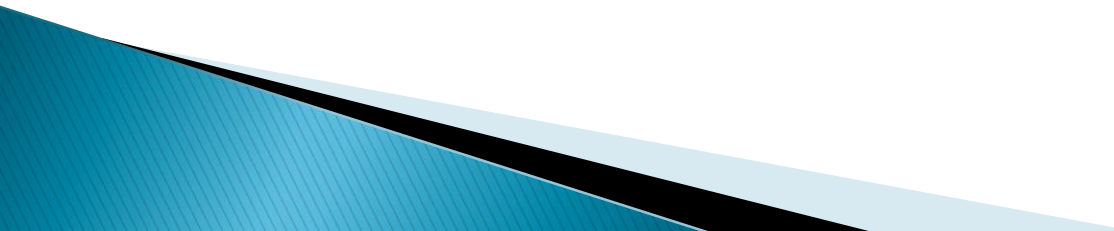
Community and Cultural Protective Factors

- Access to support services
 - Community networking
 - Attachment to the community
 - Participation in community groups
 - Community/cultural norms against violence
 - Strong cultural identity/ethnic pride
- 

Elements Important to Building Resilience Include:

- Connectedness, commitment and shared values
 - Participation
 - Structure, roles and responsibilities
 - Support and nurturance
 - Critical reflection and skill building
 - Resources
 - Communication
- 


Key Ingredients For Community Connectedness

- ▶ Public meetings
 - ▶ Walk the talk
 - ▶ Presenter network
 - ▶ Educate, present, educate, repeat!
 - ▶ Local ACEs survey
 - ▶ Feedback
 - ▶ Summits, Learning circles
 - ▶ Media outreach
- 

Strong Community Connectedness Results In:

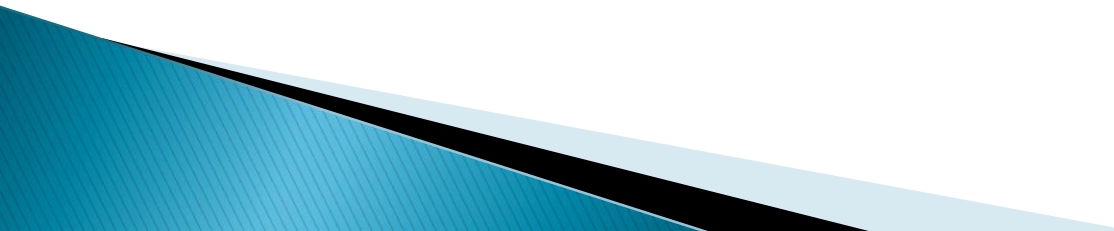
- Increased trust in community leaders
- Increased adherence to messages and instructions in the event of an emergency
- Decreased conflict among diverse groups and individuals in the community

“The work is not the result of a top-down initiative or single funder’s vision for change. It is, instead, the **gradual flowering** of multiple seeds, planted by activist leaders in pediatrics, public health, behavioral health, child welfare, justice and education.”



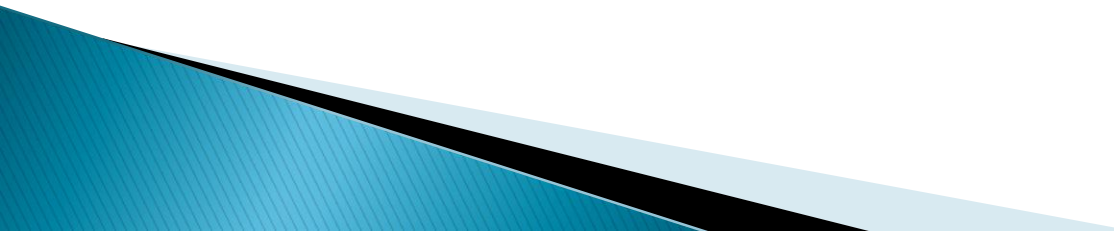
Building Resilient Communities:

Examples:

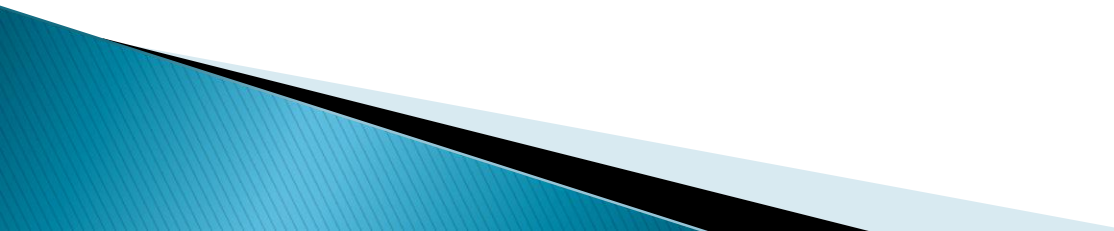
- Home-visiting programs that coach new parents on how to interact positively with children
 - Accessible therapeutic interventions for substance abuse or mental illness
 - High-quality early child care and education.
- 

To Sum Up....

The Resilient Child:

- ▶ Has a positive sense of self
 - ▶ Has low degrees of defensiveness and aggressiveness and high degrees of cooperation, participation and emotional stability
 - ▶ Has a sense of personal power rather than powerlessness
 - ▶ Has an Internal locus of control (belief that one is capable of exercising control/impact over the environment)
 - ▶ Thinks everything will be okay in the end
 - ▶ Trusts that family/friends/teachers will be there if they need them
 - ▶ Does kind things for others
 - ▶ Has someone that loves and supports them unconditionally
 - ▶ Has a trusted adult to talk to/Good role model(s)
 - ▶ Receives praise for being autonomous
- 

What Characterizes Resilient Children?

- ▶ Positive sense of self
 - ▶ Low degrees of defensiveness and aggressiveness and high degrees of cooperation, participation and emotional stability
 - ▶ Sense of personal power rather than powerlessness
 - ▶ Internal locus of control (belief that one is capable of exercising control/impact over the environment)
 - ▶ Positive peer and adult interactions
- 

To Sum Up....

Adults Around a Resilient Child:

- Provide supportive adult-child relationships
- Scaffold learning so the child builds a sense of self-efficacy and control
- Help strengthen adaptive skills and self-regulatory capacities
- Use faith and cultural traditions as a foundation for hope and stability

“We know that **connection** is the most valuable thing [for children]. When parents don’t give that, other adults have to chime in.”

Dr. Kenneth Ginsburg



Questions?



Making a Difference...

“Shifting the balance or tipping the scales from vulnerability to resilience may happen as a result of one person or one opportunity.”

- F. Benard



References

- ▶ *Ginsburg, Kenneth (2011). A Parent's Guide to Building Resilience in Children and Teens: Giving Your Child Roots and Wings, American Association of Pediatrics*
- ▶ Goldman, Linda (2004). *Raising Our Children to Be Resilient: A Guide to Helping Children Cope with Trauma in Today's World*, Routledge
- ▶ Nan Henderson: www.resiliency.com

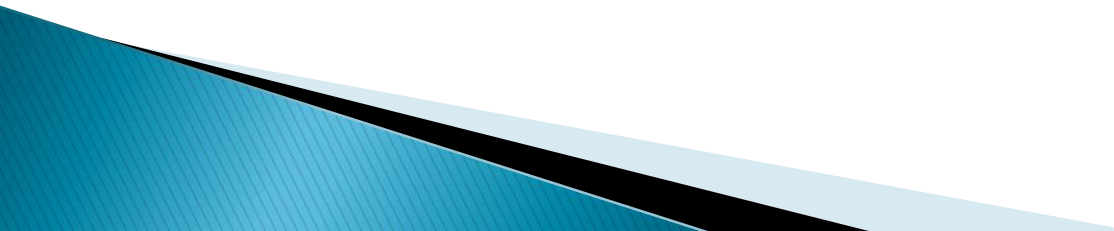
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- ▶ Resilience Project:
<http://resilienceresearch.org/research/projects/international-resilience>
- ▶ Center on the Developing Child at Harvard University (2015). *Supportive Relationships and Active Skill-Building Strengthen the Foundations of Resilience: Working Paper No. 13*. Retrieved from www.developingchild.harvard.edu.

Resiliency Game

- ▶ <http://developingchild.harvard.edu/resources/resilience-game/>

Resources

- ▶ www.acestoohigh.com: network with updates about what is happening nationwide to address ACEs
 - ▶ www.fosteringresilience.org: videos on brain development and addiction
 - ▶ www.raisingresilientchildren.com
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Ernest Hemingway

