

## Understanding Resilience

- This handout summaries key findings from UK based research to understand how children of different ages can be affected by parental problems; what we know about key protective factors; & how resilience can be evidenced in these children and young people.
- This handout has been informed by the following references:
  - Cleaver H, Unell I & Aldgate J (2011). Children's Needs – Parenting Capacity. Child abuse: Parental mental illness, learning disability, substance use, and domestic violence. London: HM Stationery Office.
  - Moe, Johnson & Wade (2007). Resilience in Children of Substance Users: In Their Own Words. Substance Use & Misuse 42: 381-398.
  - Sawyer (2009). Building Resilience in Families Under Stress. Supporting families affected by parental substance misuse and/or mental health problems: A handbook for practitioners. London: National Children's Bureau.
  - Velleman, R & Templeton, L (2007). Understanding and modifying the impact of parents' substance misuse on children. Advances in Psychiatric Treatment 13: 79-89.
- You may also find Velleman & Templeton's follow-up article to their 2007 paper helpful.
  - Velleman R & Templeton L (2016). Impact of parents' substance misuse on children: an update. British Journal of Psychiatric Advances 22: 108-117. doi: 10.1192/apt.bp.114.014449

The following lists are taken from Cleaver, Unell & Aldgate, 2011 (copied from pages 155-156, 179-180, 193-195)

### Key problems for children aged 5-10 years

- \* Increased risk of physical injury; children may show symptoms of extreme anxiety and fear.
- \* Academic attainment may be negatively affected and children's behaviour in school can become problematic.
- \* Identity, age and gender may affect outcomes. Boys more quickly exhibit problematic behaviour but girls are also affected if parental problems endure.
- \* Poor self-esteem; children blame themselves for their parent's problems.
- \* Inconsistent parental behaviour may cause anxiety and faulty attachments.
- \* Unplanned separation can cause distress and disrupt education and friendship patterns.
- \* Embarrassment and shame over parents' behaviour. As a consequence children may curtail friendships and social interaction.

### Protective Factors for children aged 5-10 years

- \* The cognitive ability to rationalise drug and alcohol problems in terms of illness. This enables children to accept and cope with parents' behaviour more easily.
- \* The presence of an alternative, consistent caring adult who can respond to the cognitive and emotional needs of children.

- \* Sufficient income support and good physical standards in the home.
- \* Regular supportive help from a primary health care team and social services and community-based resources, including respite care and accommodation.
- \* Regular attendance at school.
- \* Positive school climate and sympathetic, empathic and vigilant teachers.
- \* Attendance at school medicals.
- \* An alternative, safe and supportive residence for mothers and children subject to violence and the threat of violence.
- \* Peer acceptance and friendship.
- \* A supportive older sibling.
- \* An effective anti-bullying policy within schools.
- \* Social networks outside the family, especially with a sympathetic adult of the same sex.
- \* Belonging to organised out-of-school activities, including homework clubs.
- \* Being taught different ways of coping and being sufficiently confident to know what to do when parents are incapacitated.
- \* An ability to separate, either psychologically or physically, from the stressful situation.

#### Key problems for children aged 11-15 years

- \* Coping with puberty without support.
- \* Increased risk of mental health problems, alcohol and drug use.
- \* Education and learning not supported by parents.
- \* Education adversely affected by worries about the safety and welfare of parents and younger siblings, which mean adolescents find it difficult to concentrate.
- \* School is missed to look after parents or siblings.
- \* Education disrupted because of changes at school.
- \* Greater likelihood of emotional disturbance, including self-harm.
- \* Increased risk of social isolation and being bullied.
- \* Increased risk of conduct disorders including bullying.
- \* Increased risk for adolescent boys of being sexually abusive.
- \* Poor or ambivalent relationships with parents.
- \* Lack of positive role models.
- \* Poor self-image and self-esteem.
- \* Friendships restricted or lost.
- \* Feelings of isolation and having no one to turn to.
- \* Increased responsibilities of being a young carer.
- \* Denial of own needs and feelings.

### Protective Factors for children aged 11-15 years

- \* Sufficient income support and good physical standards in the home.
- \* Practical and domestic help.
- \* Regular medical and dental checks including school medicals.
- \* Factual information about puberty, sex and contraception.
- \* Regular attendance at school.
- \* Sympathetic, empathic and vigilant teachers.
- \* Participation in organised, out-of-school activities, including homework clubs.
- \* A mentor or trusted adult with whom the child is able to discuss sensitive issues.
- \* An adult who assumes the role of champion, is committed to the child and “*acts vigorously, persistently and painstakingly on their behalf*” (Cleaver, 1996 page 24).
- \* A mutual friend.
- \* The acquisition of a range of coping strategies and being sufficiently confident to know what to do when parents are incapacitated.
- \* An ability to separate, either psychologically or physically, from the stressful situation.
- \* Information on how to contact relevant professionals and a contact person in the event of a crisis regarding the parent.
- \* Non-judgemental support from relevant professionals. Some children derive satisfaction from the caring role and their responsibility and influence within the family. However, many feel that their role is not sufficiently recognised.
- \* An alternative, safe and supportive residence for mothers and children subject to violence and the threat of violence.

### Key problems for children aged 16 years and over

- \* Inappropriate role models.
- \* Increased likelihood of early drinking, smoking and drug use.
- \* Greater risk of poor health, injuries and accidents as a result of early substance misuse.
- \* Pregnancy and teenage motherhood.
- \* Problems related to sexual relationships.
- \* Failure to achieve their potential because of a lack of parental support and difficulties in concentration.
- \* Absence from school due to caring for parents and younger siblings.
- \* Increased risk of school exclusion.
- \* Poor life chances due to exclusion and poor school attainment.
- \* Emotional problems as a result of self-blame and guilt.
- \* Increased risk of self-harm and suicide.

- \* Greater vulnerability to conduct disorders and crime.
- \* Low self-esteem as a consequence of neglect and/or inconsistent parenting.
- \* Increased isolation from both friends and adults outside the home.
- \* Young men at greater risk of taking an aggressive and abusive role within intimate sexual relationships.
- \* Inappropriate and extremes of dress and body ornamentation, and inappropriate behaviour alienating other young people and adults and jeopardising educational and work careers.
- \* Young carers' own needs and wishes sacrificed to meet the needs of their parents and young siblings.

#### Protective factors for children aged 16 years and over

- \* Sufficient income support and good physical standards in the home.
- \* Practical and domestic help.
- \* Regular medical and dental checks and prompt attention for any injuries or accidents.
- \* Factual information about sex and contraception.
- \* A trusted adult with whom the young person is able to discuss sensitive issues, including how to act effectively in sexual and other close relationships.
- \* Regular attendance at school, further education or work-based training.
- \* Sympathetic, empathic and vigilant teachers.
- \* For those who are no longer in full-time education or training, a job.
- \* An adult who acts as a champion for the young person.
- \* A caring adult who establishes a relationship characterised by mutual trust and respect.
- \* A mutual friend.
- \* The acquisition of a range of coping strategies and sufficient confidence to know what to do when parents are ill or incapacitated.
- \* An ability to separate, either psychologically or physically, from the stressful situation.
- \* Information on how to contact relevant professionals and a named contact person in the event of a crisis regarding the parent.
- \* Un-stigmatised support from relevant professionals who recognise and value their role as a young carer.
- \* Assessments under the Children Act 1989 for young carers.
- \* Access to young carers' projects.
- \* Specialist support for 'older' young carers.
- \* An alternative, safe and supportive residence for mothers and children subject to violence and the threat of violence and those who wish to leave home at an early age.

### Summary of Key Protective Factors and Resilience

[Taken from: Sawyer (2009 – Chapter 3 pages 27-35); Velleman & Templeton (2007 – page 83); Moe, Johnson & Wade (2007)]

Individual factors that enhance resilience	Familial & parenting factors that enhance resilience	Community factors that enhance resilience	Evidence of resilience
<p>Positive relationship with family member or parental figure</p> <p>Influence of another stable adult figure or figures</p> <p>Positive social support networks &amp; a social role</p> <p>Positive school experiences</p> <p>A sense that one's own efforts can make a difference</p> <p>Personal or 'inherent' qualities e.g. expression of feelings, knowledge, life choices</p> <p>A child's own coping skills</p> <p>A child's view of themselves</p> <p>Plans for the future</p> <p>Early and compensatory experiences</p> <p>Positive opportunities at times of life transition</p> <p>Perceptions of 'substance abuse' behaviour</p> <p>Not taking drugs or drinking</p>	<p>Small family size, larger age gaps between siblings</p> <p>A confiding relationship with a partner or with others</p> <p>Cohesive parental relationships</p> <p>Parental self-esteem</p> <p>Social life, rituals and routines</p> <p>Adequate finances and employment opportunities</p> <p>Constructive coping styles and deliberate parental actions to minimise adversity for children</p> <p>Receiving treatment</p> <p>Openness and good communication</p> <p>A knowledge of 'protective' factors</p> <p>Absence of 'substance abuse' behaviour</p>	<p>Cultural connectedness, values and identity</p>	<p>Deliberate planning by the child that their adult life will be different</p> <p>High self-esteem and confidence</p> <p>Self-efficacy</p> <p>An ability to deal with change</p> <p>Skills and values that lead to good use of personal ability</p> <p>A good range of problem-solving skills</p> <p>Feeling that there are choices</p> <p>Feeling in control or own life</p> <p>Previous experience of success and achievement</p>