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Building Resilience in School Children: Need of The Hour

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ABSTRACT   *Global economic depression and the ensuing downsizing of industries and organizations associated with rising unemployment have compounded stress among the youth. Many young adults with their poor coping ability are taking recourse to substance abuse, self-harm and even suicide. Ability to succeed despite adversities stems from resilience, the ability to deal with life's challenges in a positive manner.*

Positive human functioning is perhaps most remarkable when evident in contexts of significant life challenge and adversity. Schools are one of the most important developmental contexts in young peoples' lives, and can be a key source of the skills and competencies that support their capacity for successful adaptation (Hamilton & Hamilton, 2009). This paper explores the necessity of marrying building resilience with best-practice teaching and with educational paradigms to promote optimal development and flourishing in the school setting so as to equip the children, develop the necessary resilience not only to overcome adversity, but to flourish in their academic functioning, physical health, social competence, achievements, and behavioural engagement as they grow.

KEYWORDS : Resilience, Positive Schooling, Fostering Resiliency in school

Introduction

Around the world, every day, young children experience/get exposed to stress or trauma. Many children are exposed to crises such as neglect, abuse, natural disasters, community violence, and sometimes separation from or death of loved ones. Many young children also experience the more common stresses of harassment from a sibling, rejection by peers, or adjusting to multiple caregivers the latter particularly in western world. These events can cause young children to feel worried, vulnerable, fearful, sad, frustrated, or lonely. Further, it is worth noting that Global suicide rates among adolescents in the 15-19 age groups, according to the latest World Health Organization (WHO, 2014) Mortality Database stands at 9.1%. Notably, suicide is the second leading cause of death in 15-29 year-olds globally. In low- and middle-income countries, young adults have higher rates of suicide than their counterparts in high-income countries. Now is the time to act (Saxena, 2014). Also, alcohol drinking continues to be widespread among adolescents, as shown by nationwide surveys as well as studies in smaller populations. According to Monitoring the Future (MTF, 2005) study, an annual survey of U.S. youth, three-fourths of 12th graders, more than two-thirds of 10th graders, and about two in every five 8th graders have consumed alcohol. And when youth drink they tend to drink intensively, often consuming four to five drinks at one time. MTF data show that 11 percent of 8th graders, 22 percent of 10th graders, and 29 percent of 12th graders had engaged in heavy episodic (binge) drinking (The National Institute on Alcohol Abuse and Alcoholism (NIAAA) defines binge drinking as a pattern of drinking alcohol that brings blood alcohol concentration (BAC) to 0.08 grams percent or above). For the typical adult, this pattern corresponds to consuming five or more drinks [men], or four or more drinks [women], in about 2 hours). Research also shows that many adolescents start to drink at very young ages. In 2003, the average age of first use of alcohol was about 14, compared to about 17 1/2 in 1965 (Adeyi, et al 2005**,** SAMHSA 2003). People who reported starting to drink before the age of 15 were four times more likely to also report meeting the criteria for alcohol dependence at some point in their lives (Grant and Dawson, 1998). The prevalence of drug use has increased all over the world over the past decade, and the age of initiation of abuse is progressively falling. Early initiation of alcohol and drug use is usually associated with a prolonged pattern of deceit and irresponsible behaviour and poor prognosis (Tripathi and Lal, 1999). The causes of attempt to/ successful commission of suicide, early age initiation to alcohol/substance abuse are very many but mental wellbeing and ability to face adversities in life are definitely important factors which can help in preventing such maladies affecting our younger generation. The aforesaid facts prod us to appreciate the importance of developing children's and adolescents' resilience towards preventing suicide, substance abuse and ensure fulfilling growth of the younger generation of our society.

Resilience

It is widely recognised that good mental and physical health consists of the presence of wellbeing in addition to the absence of pathology and illness (Keyes, 2006), and the emergence of the Positive Psychology movement has seen a significant redirection of scientific inquiry towards the exploration of optimal human functioning (Rusk & Waters, 2013). The increase in momentum of the Positive Psychology movement has seen tremendous growth in research in positive mental health and adaptive functioning. Positive Education attempts at combining principles of Positive Psychology with best-practice teaching and with educational paradigms aiming at achieving optimal development and flourishing in the school setting. Interest in Positive Education is continuing to grow in line with increasing recognition of the important role played by schools in fostering wellbeing. Today, when we consider success and development - academic or otherwise among children and youth there is one question that is often asked—by researchers, clinicians, parents, teachers and young people themselves and that is - "What enables some young people to do well in school, to form meaningful relationships and feel hopeful about the future, in spite of adversity, while others become depressed or self-destructive"? The answer lies in resilience.

Resilience is a term used to describe a set of qualities that foster a process of successful adaptation and transformation despite risk and adversity (Benard, 1995). Resilient persons have the capacity to withstand, overcome, or recover from serious threat (Masten, 2001). The American Psychological Association (APA) defines resilience as "the ability to adapt well to adversity, trauma, tragedy, threats, or even significant sources of stress" (APA 2011). According to Edith Grotberg, (1995) a developmental psychologist, "Resilience is important because it is the human capacity to face, overcome and be strengthened by or even transformed by the adversities of life". Developing this capacity relies on protective factors within individuals as well as in the family and community. Resilience helps children (and adults) "overcome adversity with courage, skills, and faith" (Grotberg, 2009). Other studies have found additional factors to be associated with resilience in young children. For example, Breslin, (2005) has studied children who seem to be adequately "adapting and surviving," despite the negative life events and stress they experience. She has identified four characteristics that resilient children exhibit: heightened sensory awareness, high positive expectations, a clear and developing understanding of one's strengths relating to accomplishment, and a heightened, developing sense of humour (Breslin 2005).

Resilience: Important Facts and Factors

We need to appreciate some additional important facts about resilience and these are:- Resilient individuals, families and commu-

nities are more able to deal with difficulties and adversities, and are therefore more likely to experience conditions which are positive for health. In the face of adversity, resilient individuals, families and communities may show better outcomes than those who are more vulnerable, including - lower incidence of unhealthy or risky behaviours (Friedli, 2009), higher attainment at school, qualifications, and skill levels (Challen, Noden, West, Machin, 2011), better employment prospects (Hammond, Feinstein, 2006), higher mental wellbeing and flourishing (Hammond, Feinstein, 2006), improved recovery from illness (Berkman, Leo-Summers, Horwitz, 1992).

Evidence shows that resilience could contribute to healthy behaviours, higher qualifications and skills, better employment, better mental well-being, and a quicker or more successful recovery from illness. This applies to health outcomes and affects success in a range of areas of life across the life course (Gutman, 2013).

Resilience is not an innate feature of some people's personalities. Resilience and adversity are distributed unequally across the population, and are related to broader socioeconomic inequalities which have common causes – the inequities in power, money and resources that shape the conditions in which people live and their opportunities, experiences and relationships (Friedli, 2009).

There are inequalities in the chances of people experiencing adversity, and inequalities in the resources and protective factors that are necessary to build resilience and reduce vulnerability. Inequalities in both adversity and resilience have common causes – the inequities in power, money and resources that shape the conditions in which people live. This means that there is likely to be a 'double burden', as those who face the most adversity, and therefore need resilience most, are least likely to have the resources needed to build resilience. This 'double burden' contributes to health inequalities (Allen, 2014).

Actions to increase resilience can be targeted at different levels - they can aim to increase achievements of pupils; to support them through transitions and encourage healthy behaviours; to promote better interpersonal relationships between people – particularly parents or carers and children; and to create more supportive, cohesive schools that support both pupils and the wider community (Hill, Stafford, Seaman, Ross, Daniel, 2007) & (Bonell, Harden, Parry, et al., 2013).

Several **Personal Characteristics** are seen repeatedly in the resilience literature as especially powerful individual or internal protective factors and these are (Henderson, 2012) :-

- Relationships: Is sociable; able to be a friend; able to form positive relationships.
- Service/Helpfulness: Gives of self in service to others or a cause.
- Life Skills: Uses life skills, including good decision making, assertiveness, and impulse control.
- Humor: Has a good sense of humor, can laugh at difficult situations.
- Inner Direction (Internal Locus of Control): Bases choices and decisions on internal evaluation.
- Perceptiveness: Has insightful understanding of people and situations.
- Independence: Can distance himself or herself from unhealthy people and situations. Has autonomy and is able to go his or her own way.
- Positive View of Personal Future: Is optimistic; expects a positive future.
- Flexibility: Can adjust to change; can bend as necessary to positively cope with situations.
- Love of Learning: Shows capacity for and connection to learning.
- Self-motivation: Has internal initiative and positive motivation from within.
- Competence: Is good at something; has personal competence.
- Self-Worth: Has feelings of self-worth and self-confidence.
- Spirituality: Has personal faith in something greater.
- Perseverance: Keeps on despite difficulty; doesn't give up.
- Creativity: Demonstrates expressiveness through artistic endeavour and/or by using imagination and creative thinking or other processes.

Researchers have emphasized that one is not expected to have all of these strengths; rather one with a handful of these strengths can make them the lifelines for one's resilience (Henderson, 2012).

The key Environmental Protective factors identified for fostering Resiliency are:-
- Teach life skills.
- Set clear and consistent boundaries.
- Provide opportunities for meaningful participation.
- Set and communicate high expectations.
- Increase pro-social bonding.
- Provide caring and support - is the single most powerful environmental protective factor.

All of the other conditions are actions that grow out of providing genuine caring and support.

Resilient Personalities

Researches on childhood have been conducted on longitudinal studies of personality. Jack Block (1971); Block & Block (1980), has described the "ego-resilient" among adolescents and young adults as those who were well-adjusted and interpersonally effective. Other personality studies (Robins, John, Caspi, Moffitt, & Loeber, 1996) had described resilient personality profiles as assertive, verbally expressive, energetic, personable, dependable, open-minded, smart, and self-confident. They explored implications of such characteristics for subsequent developmental problems and outcomes and had found that those with resilient personalities were found to be successful in school, unlikely to be delinquents, and relatively free of psychopathology. Luthar (1991) in his studies had also focused on high-risk adolescents, defining risk both in terms of negative life events and socio-demographic variables (e.g., family size, ethnicity, parents' education, and occupation). The central question was why some young teenagers with high profiles of risk were able to maintain socially competent behaviours (measured by teacher ratings, grades, peer ratings). Investigation was then directed against moderator variables such as intelligence, internal locus of control, social skills, ego development, and positive life events. Ego development was found to be a compensatory factor directly related to competence, whereas locus of control and social skills emerged as interactive, moderating factors. (Luthar, 1991)

Resilience is not necessarily an attribute or personality trait that some children possess and others do not, but rather a developmental process. Resilience is definite: Children who meet the criteria for resilience may not necessarily be doing well continually, in every possible circumstance, and in totality. Children may experience resilience yet still suffer from the residual effects of trauma. Resilience does not mean invulnerable. Rather, resilience is demonstrated by adaptive behaviors and life patterns. In this sense, resilience is a process that can be modified as new risks and/or strengths emerge with changing life circumstances (Gutman, 2008). In a summary, resilience is not a permanent capacity but a dynamic construct (Winfield, 1991).

Importance of Schools in fostering Resilience

It has been rightly argued that achieving improvement in some parts of a young person's life may have important positive spill-over effects into other parts, and may often yield more ultimate benefit in terms of resilience in the young person than 'all or nothing' approaches (Gilligan 1997). `Catch them young' is the appropriate phrase that should be linked to building resilience. Schools are one of the most important developmental contexts in young peoples' lives, and can be a key platform to help develop source of the skills and competencies that support their capacity for successful adaptation (Hamilton & Hamilton, 2009). Furthermore, schools provide accessible and relatively stable sites which could be ideal places to locate interventions to promote wellbeing (Bond et al., 2007), and represent a common setting for children and adolescents, thus facilitating universal promotion-based interventions (Short & Talley, 1997). Hence, schools are uniquely placed to promote the wellbeing of young people and of school communities more broadly (Seligman, Ernst, Gillham, Reivich, & Linkins, 2009). Alongside their homes, schools are one of the most important developmental contexts in students' lives (Gilman, Huebner, & Furlong, 2009). Evidence suggests that relationships with peers and school

staff (Chu, Saucier, & Hafner, 2010; Hawker & Boulton, 2000), and the

overall school climate and culture (Way, Reddy, & Rhodes, 2007), are integrally linked with a range of student wellbeing and mental health outcomes. As schools are central to students' physical and mental health, a whole-school commitment to creating a nourishing environment cultivating wellbeing and resilience is imperative. A focus on building resilience in schools is particularly important because adolescence is a pivotal stage of development that carries implications for functioning over the life-course. Adolescence is often viewed as a critical stage in the emergence and trajectory of mental illness (Paus, Keshavan, & Giedd, 2008), and rates of mental health problems, especially depression and anxiety, are consistently reported as problematically high (Sawyer et al., 2007).

Positive Schools

Notwithstanding the various factors involved in development of resilient personalities, when children quickly adapt to new environments that may require them to learn new skills, to be patient, to cope effectively with some challenges, frustrations and maybe even anxiety we say they are responsible and resilient. Researchers have discovered that these positive coping skills are learned and dependent upon the child having a bond with a caring adult who models, teaches and reinforces these positive skills. Resilience is dependent upon experience and is necessary for learning. Many children entering school have different degrees of resilience just as they have different degrees of experience in reading and numeration. Expecting these skills to be innate and hard wired in the brains of children would rather be too much to expect (Dwyer, 2007)

According to research sponsored by the Council of Urban Boards of Education (CUBE) and the National School Boards Association (NSBA), the key elements of positive school climate include (1) feelings of safety among staff and students; (2) supportive relationships within the school; (3) engagement and empowerment of students as valued members and resources in the school community; (4) clear rules and boundaries that are understood by all students and staff; (5) high expectations for academic achievement and appropriate behavior; and (6) trust, respect, and an ethos of caring (Bryant & Kelly, 2006; Elfstrom, Vanderzee, Cuellar, Sink, & Volz, 2006; Perkins, 2006).

Researchers have shown that schools are filled with the conditions that promote resilience (Werner, 2003). These include caring, encouraging relationships, role models, and mentors (Theron & Engelbrecht, 2012; Thomsen, 2002; Walsh, 2012); clear and fair boundaries and structure (Benard, 2004; Theron & Engelbrecht, 2012); exploration of other worlds and possibilities (Birdsall, 2013); stories of overcoming adversity in literature, films, and history (Walsh, 2012); and basic human respect and dignity that too many kids do not find in their troubled homes (Benard, 2004; Thomsen, 2002).

Just as schools teach and establish the classroom structures for learning to read they can do the same for building and supporting resilience, a proactive skill in all our students. Schools can effectively capitalize on their power to promote resilience - a student's resilience is fostered when his or her internal and environmental protective factors are strengthened. These protective factors can buffer, ameliorate, and mitigate the effects of risk and stress, propelling the student to academic and life success (O'Dougherty Wright, Masten, & Narayan, 2013). All caring adults in a school can notice and reinforce students' internal protective factors—such as "easy temperament, good reasoning skills, self-esteem, and internal locus of control" (Benard, 2007). By engaging students in conversations and other interactions, they can help them recognize and grow these traits. Second, they can create classroom and school cultures that are infused with environmental protective factors stated above like—regular structures, routines, civility, and caring. When teachers and schools will establish resilient classrooms they will support memorable experiences for children and higher academic achievement. According to the Institute of Medicine (2004) & (Doll, 2010) caring schools that foster high expectations and self autonomy have higher academic achievements too.

Child welfare academics have focused on developing models for the practical application of resilience theory identifies three **Fundamental Building Blocks of Resilience** (Fiona, 2011):-

•   A secure base, whereby, the child feels a sense of belonging and security

•   Good self-esteem, that is, an internal sense of worth and competence

•   A sense of self-efficacy, which is a sense of mastery and control, along with an accurate understanding of personal strengths and limitations.

Alternatively, these can be expressed as "I Have…, I Am…, I Can… ". Attention to different domains in children's lives - secure attachment relationships, education, friendships, talents and interests, positive values and social competencies can help practitioners to appraise and identify ways to strengthen these building blocks. It is argued that such resilience frameworks unify and expand upon developmental, attachment, and ecological approaches and can enable a more holistic focus on what children and young people need to fulfill their potential (Fiona, 2011).

Researchers have developed many "best-practices" that can be integrated into classrooms to enhance resilience. Several good guides for teachers and schools to use are available and no school should be without one since there are powerful connection between resilience and academic learning (Doll, Zucker & Brehm 2007). The value of focusing on resilient classrooms enables teachers to connect with the constructs of positive education and the powerful influence of the learning environment on life-long brain functioning. Yes, it's the environment – what we do - that actually changes brains. Students will persist in problem solving if schools support that persistence. Students will become more confident in their skills when it is conveyed to them that they are capable and up to the challenge.

Conclusion

Positive human functioning is perhaps most remarkable when evident in contexts of significant life challenge and adversity. It is then, when individuals are being tested, that much becomes known about human strengths—what they are, how they come about, how they are nurtured or undermined. The growing literature on human resilience addresses this juxtaposition of being well in the face of difficulty. We appreciate that it is a dynamic construct and that positive schooling can help in developing resilience amongst the children. We have examined how the key components of a positive school climate align well with the six key environmental protective factors of resiliency and can be of great help in developing resilience amongst children or youth. The schools can use the key components of positive school climate identified by CUBE and NSBA and the key environmental protective factors identified in resiliency to assess how well they are supporting student resilience. Educators need to regularly ask all stakeholders in the school community as to how they are doing in classrooms and school wide in each of these areas. Practically by claiming their roles as agents of protective factors, educators and in fact all caring adults in schools can create schools that are havens in which resilience can flourish and thus boost the success of all students as they encounter the inevitable adversities of childhood and adolescence.

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