Understanding resilience
To understand how to nurture resilience in children and youth, we need to first understand its link to mental health and mental health promotion. The following are key concepts used in the book.

**Resilience**

*Resilience* involves being able to recover from difficulties or change—to function as well as before and then move forward. Many refer to this as “bouncing back” from difficulties or challenges.

People who are resilient can effectively cope with, or adapt to, stress and challenging life situations. They learn from the experience of being able to effectively manage in one situation, making them better able to cope with stresses and challenges in future situations. In other words, dealing with challenges can make us grow and can make us stronger. Rather than merely bouncing back, we’re better prepared than we were before to face challenges that lie ahead.

Resilient children tend to be empathic; that is, they can understand and sympathize with the feelings of others. They tend to be good communicators who are able to solve problems. They have a strong interest in school, and are dedicated to learning. They’re driven to achieve goals. They’re involved in meaningful activities. They’re hopeful
about the future. They have a solid relationship with one or more adults. And they live in safe and well-functioning families and communities.

**Mental health**

Part of being resilient is having good mental health. Mental health involves balancing the different aspects of life: the physical, intellectual, social, emotional and spiritual. It involves our ability to think, feel, act and interact in a way that we can enjoy our lives and cope with the challenges that arise. Mental health also involves how we think about and appraise ourselves, our lives and the people we know and care about. It involves our ability to make realistic sense of—and react meaningfully to—the world around us. It affects our ability to make choices and decisions.

**Mental health promotion**

As its name suggests, mental health promotion is about promoting mental health. Promoting mental health encourages the development of resilience. The reverse is also true: promoting resilience leads to better mental health. In fact, resilience is a central concept within the mental health promotion framework. According to the Centre for Health Promotion (1997), mental health promotion (MHP) improves the ability of people and the communities they live in “to take control over their lives and improve their mental health.” MHP strategies nurture individuals and families and the communities they live in; build on their strengths; provide them with opportunities; create safe spaces for them; and support each to become resilient. More specifically, MHP strategies encourage cultural sensitivity and awareness, together with respect for people’s differences, regardless of their age, gender, sexual orientation, culture, socio-economic situation or abilities.

MHP benefits everyone in his or her everyday life—whether the person is healthy; is at risk for developing difficulties (such as a substance use problem); or has an existing health problem (such as depression). That’s because MHP is a holistic, or ecological, approach to health that focuses on the physical, mental, emotional and spiritual well-being of individuals, families and communities. And it does so in ways that create
environments that are respectful to everyone and that enhance people's capacity to adapt and grow from challenges.

In using this book to take steps to building resilience in the children and youth in your life, you will also be involved in the exciting arena of mental health promotion.

Mental health problems and resilience

Can a resilient child or youth develop a mental health problem? And, conversely, can a young person with a mental health problem be resilient? The answer to both of these questions is yes. Not all health problems are avoidable, and even the most resilient young people can have mental health problems, such as anxiety or problems with aggression. Furthermore, being resilient does not guarantee that young people will always have happy and productive lives.

One in five children in Canada has a mental health problem. These problems can show up in different ways. Children may be frequently sad, anxious or rebellious; have difficulty paying attention; have problems eating, sleeping or getting along with schoolmates; or they may skip school. As adolescents, they may use alcohol or other drugs.

While these difficulties can lower a person's resilience, there are many things that can be done to help improve their resilience, as outlined in the tips listed at the end of each section on individual, family and environmental factors. These tips are strategies that parents, teachers and front-line workers can use in their interactions with young people: they are not meant to address more challenging issues that may require the help of a trained health care provider.

Risk and protective factors

Mental health professionals speak about risk and protective factors as the key to understanding resilience. Risk and protective factors are characteristics of individuals, their families and their communities or environments that either increase (protective factors) or decrease (risk factors) the likelihood that a young person will be resilient. In essence, protective factors help to protect children and youth from the negative effects of risk factors.
Human beings are complicated. For example, there likely isn’t a simple reason as to why one person (or even one sibling) will be resilient, and another not so resilient, even though they are both brought up under the same circumstances.

Risk and protective factors do not occur in a vacuum, nor do they exist independently of one another. Young people’s resilience is determined by the interplay of individual characteristics, the characteristics of the families within which they live, and the characteristics of their physical and social environments. For example, living with both parents is considered a protective factor for children and youth; however, if one parent is abusive to the child or to the other parent, then living with that parent could be a risk factor and not living with that parent could be a protective factor.

The tables of protective and risk factors presented at the end of chapters 3, 4 and 5 might give the impression that they are opposite sides of the same characteristic, and
that they carry the same weight in a young person’s life. Fortunately that’s not the case. Even though there may be risk factors or challenges in young people’s lives that cannot be changed, protective factors can be fostered or nurtured (if they’re not already there) to help children and youth adapt and function better and become more resilient.

We can’t always foresee how resilient someone will be based solely on risk and protective factors, because no formula exists for predicting human behaviour. What may be a risk factor for one child may be a protective factor for another. And what may be a risk factor for one youth in one situation or at one time may be a protective factor for the same youth in other situations or at other times.

For example, young people sometimes take on parental roles when the parent has a mental health or substance use problem. The challenge—of being confronted with adult problems, of having to take care of themselves, of having to take care of a parent, and of being denied a normal childhood—will be a risk factor for some young people who struggle to cope with roles they are not ready for. For other young people, however, taking on adult responsibilities may develop in them the ability to multi-task, organize, problem-solve and make decisions.

Some young people with many risk factors will be resilient. Other young people with many protective factors might not manage as well. For example, some youth live in troubled family situations in neighbourhoods where the sale of illegal drugs and other crimes are common. Yet they still manage to help raise brothers and sisters, make good friends, graduate from high school and contribute to their communities. Still other youth have loving parents and live in safe, well-resourced communities yet have low self-esteem and develop behavioural problems that compromise their resilience. Even within the same family, one child may be resilient while others are not.

Studies indicate that risk and protective factors are usually cumulative: the more protective factors in young people's lives, and the fewer risk factors, the greater the probability that these children or youth will be resilient. The reverse is also true: the more risk factors and the fewer protective factors in young people's lives, the greater the likelihood that they will not be resilient and will develop a range of problems. These problems can include failure at school, aggressive and criminal behaviour, injuring themselves or others, substance use problems and mental health problems.

The good news is that introducing even a few protective factors can shift the balance and help many children and youth flourish. For example, for young people
growing up in families with low incomes, and with little money to pay for extra-curricular activities, the building of a neighbourhood recreation centre offering free or low-cost activities could serve as a protective factor. So could the launching of a youth choir or an amateur-theatre program in a small town or rural church.

The development of resilience

Young people are like trees. They come in various shapes and sizes and grow up in most parts of the world. Families can be thought of as the soil and water at the base of trees. Schools, neighbourhoods, communities and society at large can be compared to the sun, rainfall, insects, birds and animals. The different characteristics of trees, qualities of soils and weather conditions (such as the amount of sun and rainfall) can affect the health and growth of trees. In a similar way, the varying traits of young people, and the characteristics of their families and environments, can positively or negatively affect young people's health and growth.
Trees go through developmental stages as they mature from young saplings to full-grown specimens. Children also go through developmental stages on their way to adulthood, and what happens to them at various stages of development can affect their outcomes. Resilient children and youth grow, branch out and flower when systems supporting their healthy development (such as well-functioning families and environments) work together. Such young people are more likely to withstand and overcome challenges, learn from them, and develop and succeed in healthy ways.

No one can guarantee children and youth lives free from challenges. All young people need protective factors to help cushion them from problems they may encounter. Caring and socially responsible adults (such as parents, family members, neighbours, daycare workers, teachers and other school staff, spiritual leaders, health care providers, social service providers, police, storekeepers and coaches) can support and facilitate young people’s resilience.

In the following chapters, we discuss ways to strengthen individuals, families and environments to build resilience in children and youth. We present ways to reduce the presence and impact of risk factors but put more emphasis on how to create and build protective factors that will nurture young people’s strengths. We recognize that resilience is a complex concept and that we need to include multiple ways of promoting it.

Resilient children can be encouraged to become more resilient. And children who seem to have less resilience can be helped to develop it.