

The Resilience Doughnut - A Research Snapshot

Two streams of research now dominate the field of resilience: the emergence of individual resiliency skills (emotional regulation, social skills, empathy, and optimistic thinking) and the ecological and protective factors that influence a child's development (community, family, parents, schools and peers). The past two decades have seen a stronger shift towards researching strengths and protective factors that build resilience in children, young people and adults in adverse situations. This research consistently shows, that being engaged with positive, intentional relationships and connections builds resiliency skills in children and young people and continues to sustain adults through inevitable difficulties. These positive relationships, in various contexts, contribute to a healthy self-esteem, self-efficacy and an awareness of resources (Armstrong, Birnie-Lefcovitch, & Ungar, 2005; Masten & Wright, 2010; Sanders, Munford, Thimasarn-Anwar, Liebenberg, & Ungar, 2015). Findings from the international Resilience Project (Sanders, et al., 2015) note the dynamic interaction of the families and communities with the child's emerging social skills is of utmost importance. Thus universal and targeted intervention that develop and strengthen the interaction and characteristics of these protective factors will be most significant in order to promote the wellbeing of children.

A practical, ecological model of resilience, The Resilience Doughnut, shows the interaction of seven contexts commonly known to contribute to a child's development (Worsley, 2011). The model developed in response to intervention work with children and youth in a range of environments from clinical psychological practice, youth work, corrective services, and pediatric medicine and education facilities. After examining research into the ecological and developmental assets, which build a child's healthy self esteem and social competence that contribute to building resilience (Bronfenbrenner, 2005; Masten & Wright, 2010; Sharkey, You, & Schnoebelen, 2008; Tol, Jordans, Reis, & de Jong, 2009; Ungar & Liebenberg, 2009) a self report and conversational tool was further developed. From research into resilience programs it was observed that the most useful interventions (Domínguez & Arford, 2010; Riley & Masten, 2005; Steinhardt & Dolbier, 2008) took into account *where and with whom* the young person was more likely to develop the navigation and negotiation skills, in order to help cope with their difficulties. From observation in clinical practice it became more obvious that in order to help vulnerable children develop resilience it may be more useful to work with the potential pathways and contexts where resilience can develop, than to work individually (Ben-Arieh, 2005; Burgin & Steck, 2009; Whitten, 2010).

Three aspects of resilience development have been highlighted by the application of the model over the past 10 years. These aspects are (a) resource activation (Tol, et al., 2009), (b) the development of social competence (Durlak, Weissberg, & Pachan, 2010), and (c) emotional regulation in response to adversity (Bauer & Park, 2010)

Based on the Resilience Doughnut model, a whole school program, and two intervention programs have been developed to build on these three aspects. The whole school program seeks to bring in a strength based, solution focused approach and encourage engagement and interaction of the key factors in the children's lives, through the delivery of seminars and workshops (eg; teachers, parents, families', community and peers). Two intervention programs, *Connect-3* for primary aged children and *Linked-up* for secondary aged children have been designed to promote engagement with existing strong relationships and contexts, highlight the changes in empathy and social skills and to practice skills of emotional regulation in the process of a social service activity.

The programs have been used in both clinical practice and primary and secondary schools. To date an assessment in clinical practice (participants aged from 7-16 years) has been conducted by the School of Psychology at Newcastle University (Massey, Worsley, Hanstock, & Valentine, 2016). Results demonstrate a significant shift in social competence and a reduction in emotional and social difficulties experienced by the participants. An assessment of the whole school program, using six measures of wellbeing, across three Australian high schools demonstrated a significant increase in resilience for students experiencing depression, anxiety and emotional difficulties, which was maintained 12 months after the program was completed (Worsley, 2014).

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