

Resilience

Challenging and even highly stressful events can promote resilience when a child is surrounded by supportive relationships and a safe environment.¹ Research from the 2017 Health Outcome of Positive Experiences (HOPE) study emphasizes the importance of positive experiences in day-to-day relationships, which has been shown to have lasting impacts on physical and mental health.² Additional research indicates that positive and supportive relationships provide the buffering that allow children and youth to withstand and recover from adverse experiences.³ In Wisconsin, 72% of high school students feel that they have someone at school they can talk to.⁴

Adverse Childhood Experiences (ACEs)

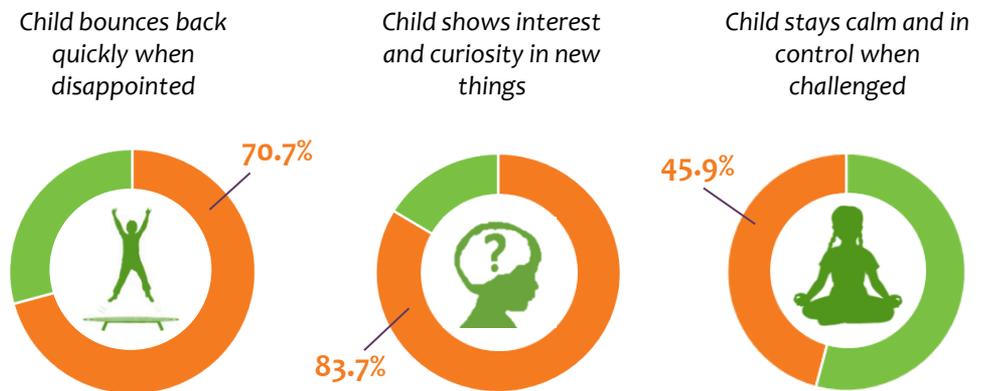
An ACE is a negative childhood event that can include experiences such as neglect or abuse, living with a parent who has substance use issues, or being exposed to domestic violence. These experiences are correlated with many negative social outcomes and physical health issues. In 2015, 56% of Wisconsin adults had one or more ACEs, and 14% had four or more.⁵

Promoting Family Resilience through Problem Solving

- Talking about the problem as a family
- Working together to solve the problem
- Knowing and identifying family strengths
- Remaining hopeful when facing a problem

In Wisconsin, 78% of children live in families engaged in all four of the above activities.⁶ Wisconsin families are particularly good at recognizing their strengths and staying hopeful when facing problems.

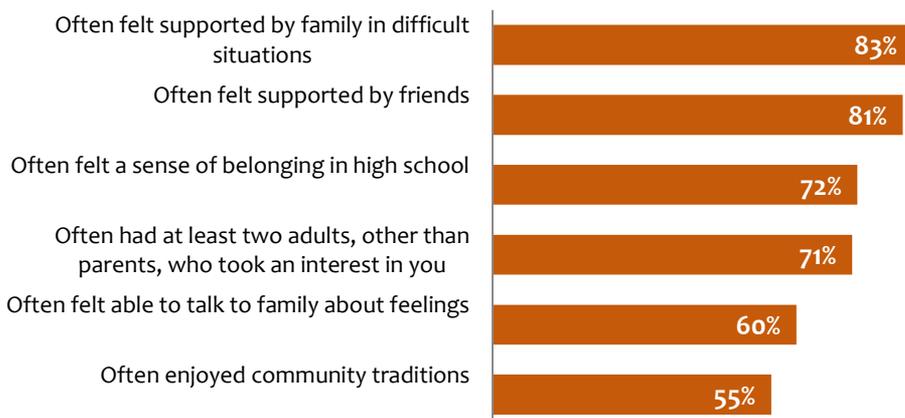
Measures of childhood resilience⁷



Resilience in Wisconsin's Adults

Social support is defined as “having friends and other people, including family, to turn to in times of need or crisis to give you a broader focus and positive self-image.” Social support improves quality of life and acts as a buffer against adverse life experiences.⁸

Percent of Wisconsin adults reporting the following social supports⁹



Resilience Factors

Two powerful protective factors include:¹⁰

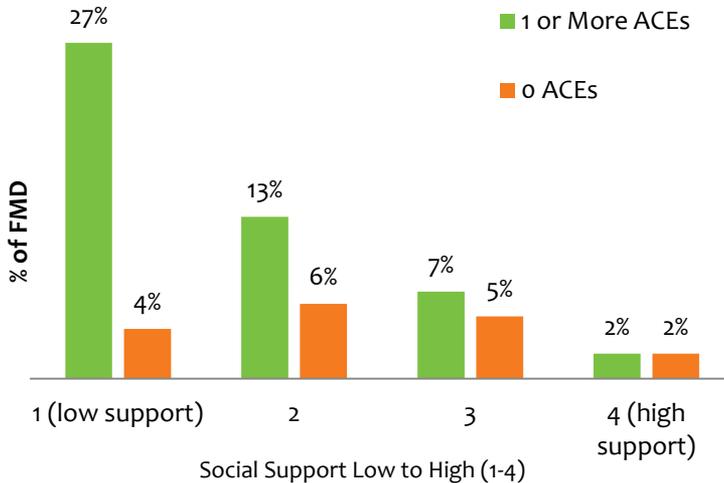
- Feeling that family stands by you in hard times
- Having someone to talk with about difficult feelings

Most Wisconsin adults feel supported by family (83%) and by friends (81%).¹¹

Social Support Protects against Mental Distress

Frequent Mental Distress refers to the experience of stress, depression, or emotional problems for 14 or more days within the previous 30 days. In 2015, 10% of Wisconsin residents experienced frequent mental distress. Data from the Wisconsin Behavioral Risk Factor shows the correlation between social support and ACEs on the impact of frequent mental distress, demonstrating how individuals with higher ACEs have lower frequent mental distress in the presence of more social support. This suggests that access to strong social support enables individuals, regardless of an ACEs score, to experience less frequent mental distress, and have better outcomes overall.^{12,13}

Percent of Wisconsin individuals with frequent mental distress by social support for those with and without ACEs¹⁴



Agencies serving youth can do the following to promote resilience:

- Develop caring interpersonal interactions based on respect, empathy, strengths, attentive listening and positive feedback.
- Engage in meaningful participation by recognizing young people's values and contributions.
- Promote high expectations with accompanying support.
- Empower young people to identify and master skills of interest.
- Listen.
- Promote creative expression.
- Capitalize on individuals altruism and willingness to support and serve others.
- Support individuals in embracing cultural identity.

Parent and Youth Voice¹⁵

Focusing on a child and parent's strength goes a long way to build trust and deepen relationships.

Reframing challenges as opportunities builds confidence and motivation.

Listening without judgement helps rejuvenate a youth or parent who has been struggling.

References

1. Sege, R., Bethell, C., Linkenbach, J., Jones, J., Klika, B. & Pecorac, P.J. (2017). *Balancing adverse childhood experiences with HOPE: New insights into the role of positive experience on child and family development*. Boston: The Medical Foundation. Accessed on 9/20/17 at www.cssp.org.
2. IBID
3. Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health. (2016). *National survey of children's health* [Data query]. Retrieved 11/3/17 from <http://childhealthdata.org/browse/survey?q=4616&r=51>.
4. Centers for Disease Control and Prevention. (2017). *Wisconsin 2017 Youth Risk Behavior Survey Summary Tables*. Retrieved 11/7/2017 from <https://dpi.wi.gov/sspw/yrbs>.
5. Wisconsin Department of Health Services. (2015). *Wisconsin behavioral risk factor survey* [Data file]. Retrieved from <http://dhs.wisconsin.gov/stats/BRFS.htm>.
6. Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health. (2016).
7. IBID
8. Office of Children's Mental Health Resiliency Workgroup. For more information please visit <https://children.wi.gov/Pages/Integrate/Resilience.aspx>
9. Wisconsin Department of Health Services. (2015).
10. Sege, R. (2017).
11. Wisconsin Department of Health Services. (2015).
12. IBID
13. University of Minnesota. (2016). *Taking charge of your health and wellbeing: Social support*. Retrieved on 10/9/17 from <https://www.takingcharge.csh.umn.edu/social-support>
14. Wisconsin Department of Health Services. (2015).
15. Children's Mental Health Collective Impact Parent and Youth Partners. For more information visit <https://children.wi.gov>.