Module 11 – Exploring Resilience

Content Overview

11.1. Concept of Resilience

What is resilience?

- Resilience is commonly referred to as an ability to draw on strengths and assets to cope or thrive in adversity – be that a severe or acute life event or the chronic stresses of everyday life

- Resilience is not just an individual trait or capability, but is largely developed from children's' interactions with others and their environments, as in the ecological model of child development shown in Phase 1 of this Health Needs assessment.

- Resilience is a **modifiable** set of qualities, which includes both **intrinsic** (e.g. individual coping strategies which can be biological, psychological, or behavioural processes) and **extrinsic** factors (e.g. social networks, healthy relationships extending across families, schools and communities, and social and cultural links). Rather than one single element being of more importance, it is this combination of internal and external assets which are needed for resilience
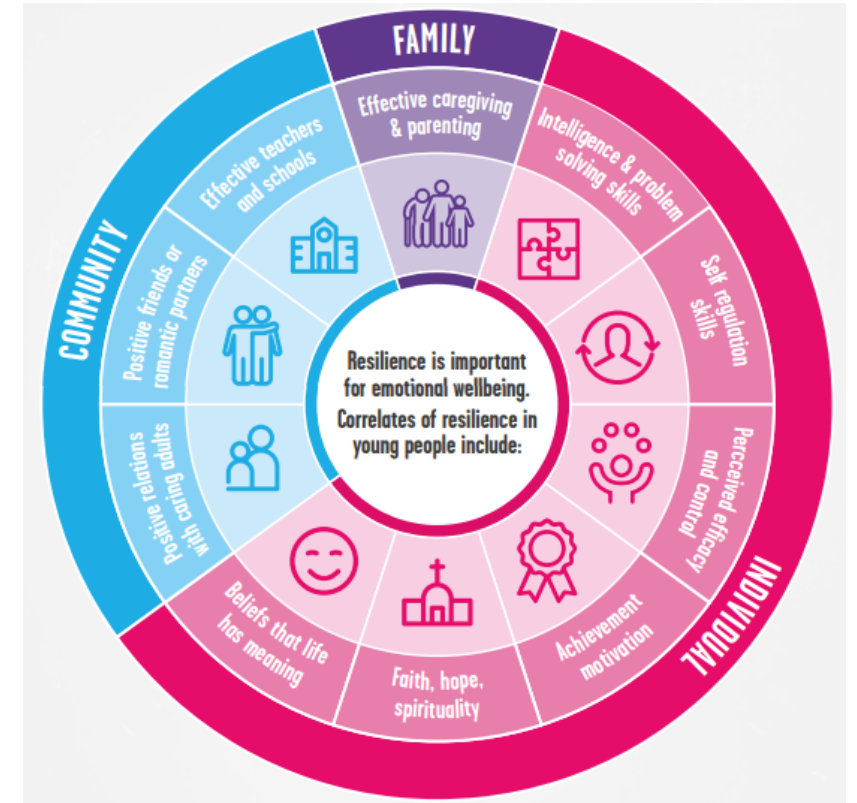
Young Minds (2018) Addressing Adversity, Prioritising adversity and trauma-informed care for children and young people in England

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust.
https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/
Young Minds (2018) Addressing Adversity, Prioritising adversity and trauma-informed care for children and young people in England
https://youngminds.org.uk/media/2715/ym-addressing-adversity-book-web-2.pdf

How is resilience shaped?

Building resilience is essential to overcoming adversity and change in childhood and later life; and resilience has been shown to protect against poor childhood health, educational absenteeism and mental ill-health in later life.

- The single most common factor for children who develop resilience is **at least one stable and committed relationship with a supportive parent, caregiver, or other adult**. Therefore, having a supportive and loving relationship and secure attachment with a parent, family member, **or trusted adult** are of significant importance to building resilience in childhood and adolescence.

- Supporting healthy attachment and development of **positive relationships** with others, have also been shown to support building resilience in childhood and adolescence.

- Evidence also shows that embedding whole-system approaches **across schools, families, services, and local communities** reinforce skills in children, are beneficial for resilience and may be of specific benefit to children who require more support.

- Also, supporting good psychological functioning, healthy development, and protection **against adversity** are shown to support building resilience in childhood and adolescence.

- Emotional wellbeing as a child is an **important determinant** of adult wellbeing.

Find out more

Bellis MA, Hughes K, Ford K, Hardcastle KA, Sharp CA, Wood S, et al. Adverse childhood experiences and sources of childhood resilience: a retrospective study of their combined relationships with child health and educational attendance. BMC Public Health. 2018;18(1):792. https://www.ncbi.nlm.nih.gov/pubmed/29940920
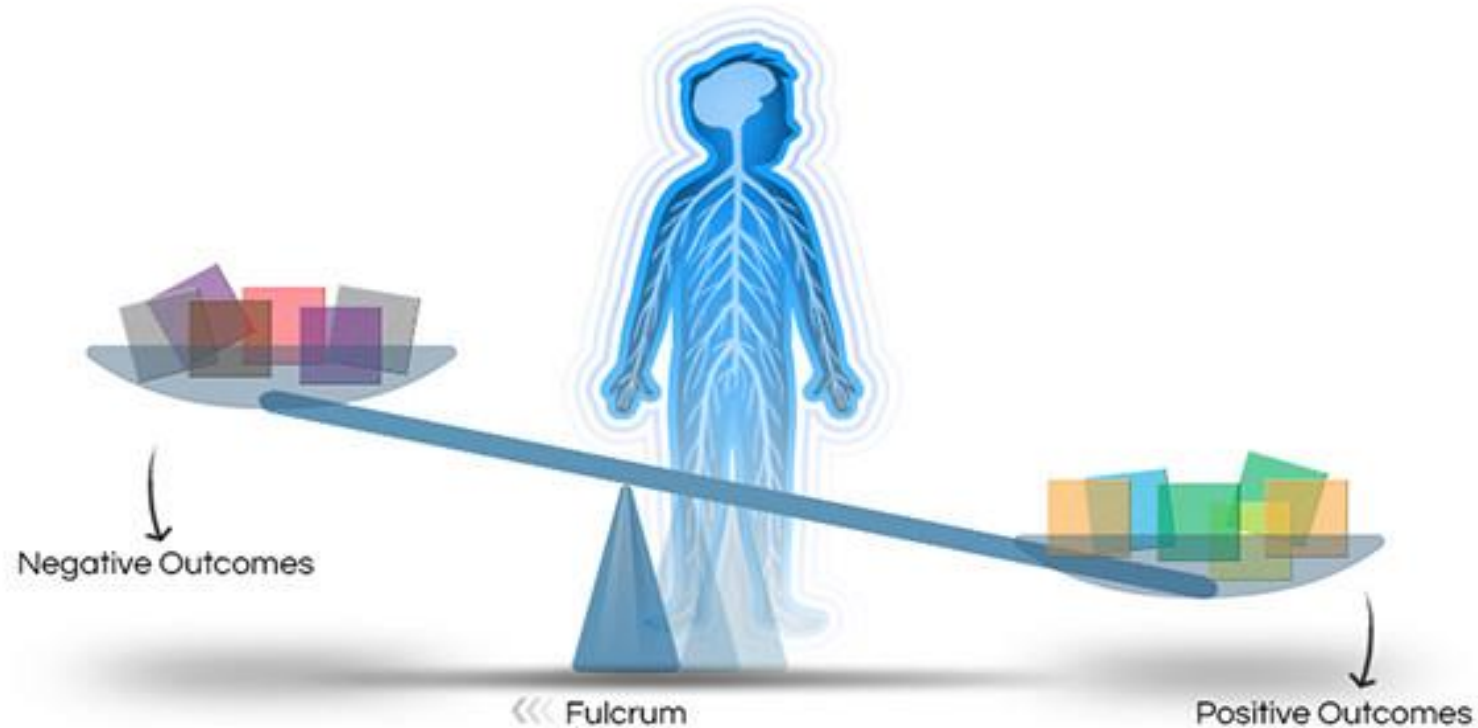
Bellis MA, Hardcastle K, Ford K, Hughes K, Ashton K, Quigg Z, et al. Does continuous trusted adult support in childhood impart life-course resilience against adverse childhood experiences - a retrospective study on adult health-harming behaviours and mental well-being. BMC Psychiatry. 2017;17(1):110. https://www.ncbi.nlm.nih.gov/pubmed/28335746

Centre on the Developing Child HARVARD UNIVERSITY: Resilience: https://developingchild.harvard.edu/science/key-concepts/resilience/

Developing resilience: A balancing act

Resilience is evident when a **child's health and development** tips toward positive outcomes — even when a heavy load of factors is stacked on the negative outcome side.

Negative Outcomes

«« Fulcrum

Positive Outcomes

Find out more ➡ https://developingchild.harvard.edu/science/key-concepts/resilience/

Assets contributing to individual resilience – 3 core overlapping categories

Psychological factors (cognitive and emotional regulation)

Mental capital

Wellbeing

Feeling good

Functioning well

Positive family Peer and social relationships

RESILIENCE

Social capital

Community engagement/support

Source: MIND and Mental Health Foundation. *Building resilient communities: making every contact count for public mental health*. 2013.
https://www.mentalhealth.org.uk/publications/building-resilient-communities

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust. https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

11.2 What Works - Promoting/Strengthening Resilience in Children & Young People:

Types of evidence-based approaches to building children's resilience (discussed in this section)

	Wellbeing	Social capital	Mental capital
Building caring relationships (Section 5.1.1) • Parenting programmes • Strengthening wider relationships		✓	
Health and wellbeing promotion (Section 5.1.2) • Promoting physical health • Promoting mental wellbeing	✓		✓
Strengthening mental capital (Section 5.1.3) • Building self-esteem, social and emotional skills, problem-solving, coping skills, adaptive cognitive approaches			✓
Community-based approaches (Section 5.1.4) • Whole school approach • Whole-system approaches (family, school and community) • Enhancing participation through community engagement	✓	✓	✓

Find out more (sections referred to above can be found in the reference below)

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust. https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

11.2.1 Building caring relationships

A. Parenting programmes

Many parenting interventions have been shown to improve parenting practices and to enhance the child's emotional and cognitive development (particularly those focusing on early years). **This can be formal parenting programmes, mindfulness-based parenting programmes or peer support interventions.**

1. **Formal programmes** supporting positive parenting practices include:

- **Parents as First Teachers (PAFT) –** This programme is for parents with a child aged three or under, typically living in a disadvantaged community, aiming to develop family resilience and promote positive parenting behaviours that will persist after the family's engagement in the programme has ended.
- **Incredible Years (IY)** for more vulnerable families – This programme has been shown to **improve** parenting practices and to enhance the child's emotional and cognitive development (particularly those focusing on early years).
- **Resourceful Adolescents Programme for Parents (RAP-P)** – This is for highly vulnerable young people – This reports **improvements** in parental self-esteem, better management of negative emotional reactions to their children, and promoting supportive family environment for healthy adolescent development.
- **Triple-P Positive Parenting Programme** – This is a universal, multilevel family intervention specific to children with behavioural difficulties. Variations of this programme exist (depending on programme's focus (e.g. children with challenging behaviour; conduct disorder).

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust. https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

2. Mindfulness-based parenting programmes also show potential benefits in increasing parental emotional awareness and regulation, reducing parental stress, and decreasing symptoms in children associated with mental health problems, such as hyperactivity. These programmes include:

- **Mindfulness-based Strengthening Families Program (MSFP) –** This programme teaches parenting skills and mindfulness to parents and their **children aged 10-14** years old. The programme has shown improvements in parenting practices, parent-child wellbeing, and parent-child relationship quality.
- **Mindfulness-based Stress Reduction (MBSR)** and **Turning Into Kids (TIK) –** These interventions target **parents of pre-schoolers** and have shown wider benefits including reduction in parental stress, and in some cases a reduction of hyperactivity symptoms in children.

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust. https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities

3. **Peer support interventions - These include**:

- **Community Mothers Programme (CMP)** - This is a peer support programme established in Ireland in 1983. The CMP represents a unique 'home grown' community based **early intervention and prevention** programme. It has been an important resource throughout Ireland in providing early and valued support to families in their own homes and communities. In this programme, Community Mothers reach out to the communities and provide **valuable resources through parenting groups, provision of information, antenatal classes and a variety of other similar services**. The response from parents has been positive around the impact it had both personally and on the community.

- **The Solihull Approach** (also known as Understanding Your Child's Behaviour) - This is a universal parenting intervention for any parent with a child between the **ages of 0 and 18**. The Approach emphasises **containment, reciprocity and behaviour management.** It is based on the assumption that emotional containment is necessary for parents to understand their own behaviour and the behaviour of their child. Parents learn strategies for containing their emotions and the emotions of their child. Parents also learn to respond reciprocally to their child's needs.

- **Breastfeeding Peer Support -** Breastfeeding is a **positive way** to improve public health, maternal and infant well-being and mother and infant attachment. Breastfeeding peer support aims to fill a gap by linking mothers who want to breastfeed to others who have **personal experience and some training**. Example of such programme is the UNICEF UK Baby Friendly Initiative Programme; an accredited programme for improving the role of maternity services which organisations, projects and wards can apply to achieve.

- The **UNICEF UK Baby Friendly Initiative Programme –** This programme is designed to support breastfeeding and parent infant relationships by working with public services to improve standards of care. Baby Friendly's new standards support feeding and relationship building for all mothers and babies, whether breastfeeding or bottle feeding, recognising the importance of the mother-baby relationship as the basis on which all other relationships are built.

Benefits of peer support for breastfeeding to breastfeeding women and their families include:
- increasing breastfeeding initiation and sustainability
- improved mental health, increased self esteem, parenting skills and improved family diet
- playing an important role in helping to attain targets such as reducing obesity and postnatal depression.

Find out more

The Community Foundation for Ireland & Katharine Howard Foundation: A national review of the Community Mothers Programme 2019
https://www.communityfoundation.ie/insights/news/community-mothers-programme-review-launch
Early Intervention Foundation: The Solihull Approach (Understanding Your Child's Behaviour) https://guidebook.eif.org.uk/programme/the-solihull-approach-understanding-your-childs-behaviour#about-the-programme
Public Health England 2016: Commissioning infant feeding services: a toolkit for local authorities (Part 2)
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/538344/Commissioning_infant_feeding_services_a_toolkit_for_local_authorities__Part_2_.pdf
NICE (2012) Social and emotional wellbeing: early years. October. NICE Public Health Guidance 40 (http://guidance.nice.org.uk/PH40).
NICE (2013) Postnatal Care. NICE quality standard 37. July. (http://publications.nice.org.uk/postnatal-care-qs37/qualitystatement-5-breastfeeding)
UNICEF UK Baby Friendly Initiative   https://www.unicef.org.uk/babyfriendly/
Breasting peer support: are there additional benefits?
https://www.researchgate.net/publication/40999754_Breastfeeding_peer_support_are_there_additional_benefits/link/56797c5f08ae40c0e27dc666/download
Breastfeeding peer support: What Works? https://www.unicef.org.uk/babyfriendly/breastfeeding-peer-support-what-works/
UNICEF UK 2013: The evidence and rationale for the UNICEF UK Baby Friendly Initiative standards
https://www.unicef.org.uk/wpcontent/uploads/sites/2/2013/09/baby_friendly_evidence_rationale.pdf

B. Strengthening wider relationships

In early years, positive relationships with others (**e.g. between a child and their primary caregiver**) can provide nurturing environments, enabling wider positive health outcomes and resilience.

- A **resilient family environment** reflects the presence of adults acting as positive role models, demonstrating healthy positive relationships, promoting healthy behaviours, and with strong social networks, providing a stable living environment for the child.
- In **adolescence**, when peer relationships become more developmentally significant, **supportive friendships** can be an important protective element of resilience.
- **Mentoring and life skills interventions**, as well as **school-based and community-based programmes** can help build positive relationships with others, through positive role modelling and have shown improvements in academic achievements, social and emotional development; and the potential to also protect against the negative impact associated with ACEs (e.g. reduction in health-harming behaviours).
- Existing relationships with **community services** can also have broader benefits in enhancing family and children's resilience.
- **Pre-school programmes** such as nurseries, playgrounds and children centres play an important role in enhancing early protective factors in children, such as helping to develop good **communication skills** and foster **emotional development** and **language** through play and interaction with others.
- Having a **good community provision of support services and information** available to families about childcare, or special educational needs can also be resilience-enhancing. In schools, **positive relationships with teachers** can offer support guidance, especially beneficial for children who may lack supportive family environments.

Find out more

Public Health England (2014) Local action on health inequalities: Building children and young people's resilience in schools
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/355770/Briefing2_Resilience_in_schools_health_inequalities.pdf
Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust.
https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

11.2.2 Health and wellbeing promotion

Resilience interventions in schools commonly target the development of resilience-enhancing skills in children, with a **central focus** on the development of cognitive and emotional skills, social competence, self-esteem and autonomy. With the intervention taking place in a school setting presenting an opportunity to **simultaneously** address multiple protective factor.

School-based health promotion approaches contribute towards building resilience, through universal health promotion and embedding healthy behaviours in children and leading to longer term positive impacts in adulthood. This includes **promoting physical health and mental wellbeing and building mental capital**.

Find out more ⬇

A. Promoting physical health

Regular participation in sport groups has been shown to be protective resilience resource in childhood, as well as in later adulthood – Examples of interventions that promote physical health include:

- **World Health Organization's Health Promoting Schools** framework. Adapting this framework showed improvements amongst young people (age four to 18 years) in specific health areas (e.g. increase in physical activity and fitness levels, decrease in smoking, increase in fruit and vegetable consumption and reduction in reports of being bullied)
- **Healthy Schools Schemes – P**rogrammes such as these play a key role in promoting health of children and young people.

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust. https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

National Institute for Health and Care Excellence. Schoolbased interventions: health promotion and mental well-being: NICE quality standard;2018.

Langford R, Bonell CP, Jones HE, et al. The WHO Health Promoting School framework for improving the health and well-being of students and their academic achievement. *Cochrane Database of Systematic Reviews*. 2014; vol. 4.

B. Promoting mental wellbeing

Universal school-based interventions promoting mental wellbeing typically focus on enhancing social and emotional development. Programmes are commonly based on Cognitive Behavioural Therapy (CBT) principles, targeting multiple protective factors for resilience. These programmes have been shown to be effective at reducing depression, anxiety symptoms and general psychological distress amongst school children (in comparison to a control group). Example of such programme is:

- The **US Penn Resiliency Programme (PRP***)* with its UK implemented adaptation - the **UK Resiliency Programme (UKRP) -** This programme was designed for primary school children to build their resilience and promote realistic thinking and adaptive coping. Children are taught skills and coping strategies designed to contribute towards a number of resilience competencies, such as emotional intelligence and flexible and accurate thinking. Children also learn techniques for positive social behaviour, including assertiveness and negotiation.

Results from the evaluation of the implementation of **UKRP in 22 schools across the UK** show a reduction in depression and anxiety symptoms within a two-year follow up period, with greater benefits reported for children with lower academic achievements and higher vulnerability at baseline.

Find out more

11.2.3 Strengthening mental capital

Resilience interventions in schools commonly target the development of resilience-enhancing skills in children, with a **central focus** on the development of cognitive and·emotional skills, social competence, self-esteem and autonomy. Examples of such programmes implemented in the UK include:

- **Social and Emotional Aspects of Learning (SEAL) programmes** implemented in the UK across primary and secondary schools. SEAL programmes can include a number of programmes, typically focused on developing social and emotional competencies in children to strengthen resilience, by building self-awareness and self-management, and decision-making skills. The SEAL programmes have been widely implemented and evaluated, and have shown improvements in children's social and emotional competencies.
- Programmes addressing social and emotional learning (SEL) in schools to prevent conduct disorder e.g. the well-evidenced **Promoting Alternative Thinking Strategies (PATHS**) which have shown a positive impact on children's social and emotional skills.
- **Interventions based on CBT principles**, targeting the development of *cognitive skills* i.e. the development of children's problem-solving, decision-making, positive thinking, and relationship-building skills which are also effective at improving overall resilience. These are important in children to enable effective psychological functioning and coping strategies to enhance capacity to deal with challenges presented.

Also,

- In schools, there is a great value in **enhancing teachers' understanding and skills** in promoting resilience and emotional wellbeing, as these are reflected in the teacher's ability to create supportive environments for promoting resilience in children and improving their wellbeing. This approach is particularly beneficial when working with children facing disadvantage or poverty.

Examples of programmes include:

- **YoungMinds -** Programme ran in schools aimed at those with behavioural, emotional or social difficulties. Programme was shown to cause improved pupils' overall emotional stress, relationships with parents, teachers and peers, pupils' behaviour, and a decrease in exclusion. In addition, positive outcomes were seen in the home-school relationship, parental engagement, and engagement and confidence in reading.
- **Creative Confident Kids** and **Aiming for Hig**h – These programmes are specifically designed to increase resilience in young people during times of transition. This includes building confidence and self-esteem among pupils, including through peer support.

These programmes have specifically been designed to improve resilience.

Find out more

Public Health England (2014) Local action on health inequalities: Building children and young people's resilience in schools
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/355770/Briefing2_Resilience_in_schools_health_inequalities.pdf
Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust.
https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

11.2.4 Community-based approaches

The physical and social environment, and spaces in which children exist are essential to their wellbeing. Therefore, community based interventions are essential to support resilience in children and young people. These could be whole school approaches, whole-system approaches or interventions enhancing participation through community engagement.

- Family and schools are key settings for establishing foundations for children and young people's resilience, and the wider community is also important for building strong relationships and providing a sense of belonging, contributing to social capital.
- The school can act as a key community hub, helping to reinforce community networks and links with key services and community activities. Therefore, interventions to support resilience in children and young people have greater gains when they are whole-system approaches **-** simultaneously targeting individual, family and community levels.

A. Whole-school approach

- Adopting a whole-school approach (embedded across the school curriculum and ethos, and supported by all staff), has been shown to have a positive effect on enhancing children's wellbeing and resilience. This includes universal promotion of health and embeds emotional intelligence, life skills, social and emotional learning and emotional literacy for the benefit of all children.
- The **key challenge** for school-based interventions is embedding approaches that work equally well for main stream children, but are also inclusive of marginalised or more vulnerable young people, such as children with complex learning difficulties who may be at even greater need.

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust.
https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/
Public Health England (2014) Local action on health inequalities: Building children and young people's resilience in schools
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/355770/Briefing2_Resilience_in_schools_health_inequalities.pdf

B. Whole-system approach (individual, family, school, community)

Strengthening resilience through a **whole-system approach spanning school and home life** helps develop resilience competences in children, as well as facilitate links between school and home life.

- The strongest evidence for a positive effect of resilience-based intervention in schools has been reported for schools with a **joined-up approach**, working at multiple levels (individual, family and community) and focusing on developing key skills in children across the three levels (i.e. problem solving, communication and relationship skills). An example, adopted in Wales, the UK, and worldwide is the:

    - **Families and Schools Together (FAST) programme** - This programme focusses on strengthening resilience through **building strong bonds and relationships** between families, schools, and the local community. It supports families to get involved in their child's education and is typically implemented in areas of high deprivation, delivered in school setting, and has shown improvements in child's academic outcomes, as well as reduction in anxiety.

- A **joined-up approach** targeting school and home life is particularly beneficial for improvements in health and wellbeing outcomes of young people with complex needs, yet requires a more high intensity intervention tailored to individual needs rather than a universal approach.

- Other **effective examples** include running an intervention in parallel for parents, children and teachers, focused on developing communication skills, conflict and stress management. This may involve applying similar reward systems (at home and in school), but can also embed softer connecting approaches, such as organising school-family-community vegetable gardens.

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust.
https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

C. Enhancing participation in community based activities

Building connections with the community are important for enhancing social capital in children, as well as creating bonds that can contribute towards wider collective resilience.

- **Creating opportunities** for participation and meaningful engagement, such as involvement in art or sport activities, can positively contribute to children's resilience through the development of social skills, as well as improvement of children's broader psychosocial outcomes.
- **Engaging children** in community-based art activity programmes (e.g. dance; drama; music; visual arts) is beneficial for strengthening resilience in children. It shows positive improvements in psychosocial outcomes (e.g. improved confidence and self-esteem; sense of mastery, problem solving), as well as social skills (e.g. feeling part of a group; developing trust, building positive relationships) factors associated with positively contributing to children's wellbeing and resilience.
- **Community-based creative arts activities** provide a broader social environment, involving experiences of supportive peers, positive role models and as such creating opportunities to experience a sense of mastery and success; all characteristics positively associated with resilience in adolescence.
- Improvements in the **above factors** can have a much broader behavioural impact, leading to a reduction in behavioural incidents, as well as improvements in academic achievements
- **Having opportunities to choose** is a critical factor for successful engagement of children.
- **Exposure to nature** can also act as a moderator or resilience protective factor in children experiencing stressful life events; with evidence showing that children with increased exposure to nature seem to be more protected from impacts of stressful events. One study suggests that the strongest effect is visible for those most at risk, experiencing the highest levels of life stress.

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust.
https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/
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11.3 Key messages

- **Early intervention** including establishing a healthy family environment, early positive parent-child relationships (or with trusted adult), are critical for setting the foundations of resilience in childhood through to later life.
- **Programmes supporting positive parenting practices** can help foster healthy attachment and development, through building parental knowledge, skills and support, demonstrating improvements in child and parental emotional awareness and regulation, child's behaviour, and their wellbeing.
- **Supporting the development of positive relationships with others**, e.g. through peer relationships, positive mentors and role models, have also been shown to support building resilience in childhood.
- There are a number of programmes focused on building a supportive school environment for children promoting positive health and wellbeing. **School based health promotion approaches** have been shown to enhance social and emotional development, cognitive skills, mental wellbeing and reducing depression and anxiety symptoms – potentially setting foundations for healthy behaviours, and healthy social and emotional development in later life.
- **Embedding whole-system approaches across schools, families, services, and local communities** has been shown to reinforce skills in children beneficial for resilience (e.g. problem solving, communication and relationships skills), and may be of specific benefit to children who require more support.
- **Providing community-based activities** (e.g. sport, art, music, dance), offers the opportunity to participate and can build wider social networks, provide a sense of belonging, and benefit social capital.

- Interventions should be **targeted** to child's appropriate developmental needs.
- For adolescents facing adversities, **a joined-up resilience approach** can be central to change, as it helps emphasise resources and assets available.

Find out more

Davies AR, Grey CNB, Homolova L, Bellis MA (2019). Resilience: Understanding the interdependence between individuals and communities. Cardiff: Public Health Wales NHS Trust. https://phw.nhs.wales/files/research/resilience/resilience-understanding-the-interdependence-between-individuals-and-communities/

11.4 Suggestions for future focus

- Ensure all schools **embed the new Personal, Social, Health and Economic (PHSE) curriculum**

- Ensure children and young people **have positive mentors and role models**

- Ensure community based activities are **equitably available and proactively targeted** to those in greatest need

- Key stakeholders to **assess the current offer around resilience in relation to point above and use the findings (evidence**) develop a plan to strengthen our approach to resilience for implementation

- Develop the **intelligence agenda with a view to developing resilience profile** e.g. aggregating data in the Strength and Difficulties Questionnaire (SDQ)

- Brief Resilience Scale (BRS) to be **included in the Adolescent Lifestyle Survey (ALS)**.