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## Promoting resilience in school-aged children

Sherry Rizzuto  
*University of Northern Iowa*

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### **Abstract**

This paper reviews the literature related to resilience in children who are considered at risk. The purpose of the paper is to describe common risk factors that put children at risk, what defines resilience, and what protective factors and processes develop resilience in these at-risk children. The paper concludes by examining interventions for school counselors to promote resilience in school-aged children.

PROMOTING RESILIENCE IN SCHOOL-AGED CHILDREN

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Sherry Rizzuto

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Linda Nebbe

Linda Nebbe  
Adviser/Director of Research Paper

12-07-09  
Date Received

Victoria Robinson

Victoria Robinson  
Head, Department of Educational Leadership,  
Counseling, and Postsecondary Education

## Abstract

This paper reviews the literature related to resilience in children who are considered at-risk. The purpose of the paper is to describe common risk factors that put children at risk, what defines resilience, and what protective factors and processes develop resilience in these at-risk children. The paper concludes by examining interventions for school counselors to promote resilience in school-aged children.

## Promoting Resilience in School-Aged Children

We often hear stories of children who, despite severe adversity in their lives, manage to adapt and succeed in our society. These children sparked an interest in researchers who wanted to know why some children can adapt to adversity, while others cannot. Since the 1970s, researchers have sought to understand the phenomenon of resilience in children who face hardships in life. Early research of resilience focused on the qualities of the individual child, such as autonomy or self-esteem (Luthar, Cicchetti, & Becker, 2000). However, with continued efforts, researchers have found several external factors that may contribute to the development of resilience. These factors are typically labeled as: a.) attributes of the child, b.) aspects of their family, and c.) characteristics of their wider social environments (Werner & Smith, 1992). Early research often described resilient children as remarkable and rare, labeling them as invulnerable. However, what has been found recently suggests that resilience is “a common phenomenon that results in most cases from the operation of basic human adaptational systems” (Masten, 2001, p.227).

We now know there are factors other than personal qualities that can develop resilience in children, and that resilience is a common phenomenon in children. This should alert the adults involved with at-risk children to the possibilities and opportunities they have to develop resilience in these children. This paper aims to describe what factors put children at-risk, what defines resilience, and what protective factors and processes develop resilience in these at-risk children. With this knowledge, I will discuss what school counselors can do to increase the likelihood of resilience in children.

### Who Is At-Risk?

In studies of resilience, children “at-risk” have been identified in a number of ways. According to Masten (2001), “risks are actuarially based predictors of undesirable outcomes drawn from evidence that this status or condition is associated with higher probability of a bad outcome in the future” (p. 228). Several researchers have identified children who come from families with socio-economic adversity as at-risk (Cicchetti & Rogosch, 1997; Kim-Cohen, Moffitt, Caspi, & Taylor, 2004; Osborn, 1990; & Schoon & Parsons, 2002). Socio-economic adversity is connected to a variety of other issues, such as poor living conditions and overcrowding (Schoon & Parsons, 2002). Child maltreatment has also been explored as a risk factor. Child maltreatment typically refers to physical, sexual, or emotional abuse and neglect (Cicchetti & Rogosch, 1997; Jaffee, Caspi, Moffitt, Polo-Tomas, & Taylor, 2007).

Most studies have combined a number of risk factors and labeled them as negative or stressful life events, or family adversity. These factors include: family turmoil, parent-child interactions, parental behaviors, marital conflict, separation or divorce, parental mental health, poverty, neighborhood disadvantage and violence, and death/ illness in the family (D’Imperio, Dubow, & Ippolito, 2000; Fergusson & Lynskey, 1996; Garmezy, Masten, & Tellegen, 1984; Luthar, 1991; Masten, Garmezy, Tellegen, Pellegrini, Larkin, & Larsen, 1988; Nettles, Mucherah, & Jones, 2000; Tiet, Bird, Davies, Hoven, Cohen, Jensen, & Goodman, 1998; & Wyman, Cowen, Work, Hoyt-Meyers, Magnus, & Fagen, 1999). The diversity of risk factors studied in resilience research makes it hard to compare results between studies. However, it is critical that researchers

explore all areas of risks. So far, studies have shown similar themes in regards to protective factors, despite obvious differences in risks.

### What is Resilience?

Over the decades, the definition of resilience has been somewhat varied. Now, most researchers agree that resilience generally refers to “manifested competence in the context of significant challenges to adaptation or development” (Masten & Coatsworth, 1998, p. 206). There are two identifying features or judgments to resilience. First, there must be a significant threat to an individual’s development. If an individual is deemed competent, but has no identified risk factors, they are not considered resilient. The second judgment involves the criteria by which the quality of adaptation or developmental outcome is evaluated as “good” or “adequate” (Masten, 2001). Arguments exist among researchers as to what criteria should be used to evaluate individuals.

Resilient children are identified as having competence despite hardships, but how do we define competence? According to Masten and Coatsworth (1998), competence can be defined broadly, as reasonable success with major developmental tasks, or more narrowly, in terms of specific domains of achievement. Researchers have measured competence in a variety of ways, usually using a narrower definition of competence in their studies. Most researchers have used a combination of measures of school-based competence, including academic achievement, behavioral competence, and/ or social competence (Cicchetti & Rogosch, 1997; D’Imperio et al., 2000; Garmezy et al., 1984; Kim-Cohen et al., 2004; Jaffee et al., 2007; Luthar, 1991; Masten et al., 1987; Osborn, 1990; Schoon & Parsons, 2002; & Wyman et al., 1999). Academic achievement is



usually measured in terms of GPA and/or standardized test scores. Behavioral and social competences are typically measured through teacher and peer ratings on a variety of assessment scales. In addition to school-based competences, some researchers have used the absence of externalizing problems (such as drug and substance abuse) or the absence of psychiatric diagnosis as measurements of competence. (Fergusson & Lynskey, 1996; Tiet et al., 1998). It is important to understand and respect the differences in measures of competence. Masten and Coatsworth (1998) explain that “both the child’s capabilities and the nature of the contexts in which the child lives will influence competence” (p.206). We must remember that cultures and communities can sometimes differ from the larger society, and those differences will influence how we define competence for those children.

### Protective Factors

Werner (1992) identified protective factors as “moderators of risk and adversity that enhance good, developmentally appropriate outcomes” (p.116). A protective factor is only relevant in combination with a risk factor (Werner & Smith, 1992). For example, if a child has a high IQ, it is not considered a protective factor unless the child also has a risk factor in their life, such as family turmoil. As mentioned earlier, researchers used to believe that resilient children had some internal attributes that helped them succeed. With the advancement of research on resilience, studies have now identified three general categories of protective factors. These factors are: a.) attributes of the child, b.) aspects of their family, and c.) aspects of the wider social context (Werner & Smith, 1992). Within each category exists multiple factors that have been found to enhance resilience in children.

### *Individual Attributes*

Masten and Coatsworth (1998) outlined several personal attributes that promote resilience in children. The list included good intellectual functioning, easygoing disposition, self-efficacy, and high self-esteem. It is worth taking a closer look at these factors to determine why they are considered protective factors.

#### *Intellectual Functioning*

A number of researchers have linked higher intelligence to better outcomes among children at risk (Fergusson & Lynskey, 1996; Garmezy et al., 1984; Jaffee et al., 2007; Luthar, 1991; Schoon & Parsons, 2002; & Tiet et al., 1998). For example, Jaffee et al., (2007) found that above-average IQ distinguished resilient from non-resilient maltreated children. Also, Fergusson and Lynskey (1996) found that resilient adolescents, those who did not show externalizing problems (such as drug or alcohol abuse), were distinguished from their peers by having higher intelligence. High intellectual functioning appears to be very important for children who are facing adversity. Masten and Coatsworth (1998) suggest several reasons IQ may be an important protective factor in at-risk children. Perhaps more intelligent children are able to problem solve to protect themselves better. The authors also suggested children with higher intellectual functioning may attract the interest of teachers or have better self-regulation skills that help them function in society. Whatever the case, high intellectual functioning appears to influence resilience in at-risk children.

#### *Temperament*

Kim-Cohen et al. (2004) characterizes a child's outgoing temperament "by the confidence and eagerness with which a child approaches and interacts with novel tasks

and with unfamiliar adults” (p.652). The researchers found that an outgoing temperament had significant correlations with cognitive resilience in their sample. Jaffee et al. (2007) described a sociable and self-controlled temperament as being desirable. However, the study found that this sociable temperament was only a protective factor when stressors were low. It seems that individual characteristics lost their influence when stressors became too high for the individual. Children with positive temperamental characteristics (good-natured, low-emotionality, sociable) appear to be successful in getting positive attention from other people, and are able to quickly recover from frustrating situations (Werner, 2000). For instance, if a child with a positive temperament is angry with a teacher, they will probably use appropriate coping skills to deal with the situation. If a child with a less positive temperament is in the same situation, it is likely the child will use inappropriate behaviors to deal with the situation. How a child responds in the classroom is crucial to the success of the child in school. Similarly, these abilities are important for succeeding in our society in general.

### *Self-Esteem and Self-Efficacy*

Masten, Best, and Garmezy (1990) believe that children who are at-risk fare better when “they have an area of competence and perceived efficacy, valued by themselves or society” (p. 438). Self-esteem comes from a person’s sense of self-worth and competence (Gilligan, 2000). Children with high self-esteem tend to “be positive, confident, optimistic, perseverant, and in control of their lives” (Dryden, Johnson, Howard, & McGuire, 1998, p. 28). During interviews with 9-12 year old children and their teachers, Dryden et al., (1998) found that both the children and the teachers indicated self-esteem and self-efficacy as factors that influence resilience. Cicchetti and Rogosch (1997) found

that high self-esteem was a significant predictor of adaptive functioning for maltreated children. Fergusson and Lynskey (1996) also found that high self-esteem in adolescents influenced the probability of resilience to externalizing problems. It is clear that feelings of self-worth and a sense of purpose in one's life are crucial factors that lead to more positive adaptations in at-risk children.

### *Family Influences*

Several family attributes have been identified as protective factors that influence resilience in at-risk children. These attributes include positive parent-child relationships, authoritative parenting style, and parental beliefs and behaviors.

#### *Positive parent-child relationship*

One of the most important protective factors for children at-risk appears to be a positive and caring relationship with at least one parent (Rutter, 1987). Characteristics of a positive parent-child relationship include, maternal warmth, perceptions of importance in the family, perceptions of love from family, empathy for the child's needs, etc. Kim-Cohen et al., (2004) found that maternal warmth appeared to promote children's resilience. Even children living in households with severe marital conflict appear to have better functioning if they have a stable relationship with one of the parents (Rutter, 1987). Dryden et al. (1998) identified relationships within the family to be "one of the strongest and most enduring themes in the dialogue of children and teachers" (p.12). During an interview, a 10 year old girl described her take on relationships and resilience, stating: "The ones who will probably succeed are the ones with support and the ones with a strong family relationship" (Dryden et al., 1998, p. 12).

### *Parenting Style*

An authoritative parenting style consists of a warm, caring environment that includes structure and rule consistency, as well as high behavioral expectations (Masten & Coatsworth, 1998). Researchers have found that this type of parenting style is the most appropriate for producing resilience. Authoritative parenting has been associated with academic, behavioral and social success from early childhood through adolescence (Masten & Coatsworth, 1998; Wyman et al., 1999). Osborn (1990), found that non-authoritarian attitudes and child-centered parenting contributed to resilience in children.

### *Parental Beliefs and Behaviors*

Parental involvement in their child's education, as well as future aspirations for their child have been described as important protective factors in some studies (Dryden et al., 1998; Nettles et al., 2000; Osborn, 1990; & Schoon & Parsons, 2002). Parents can affect achievement through their attitudes and behaviors by expressing educational values, encouraging academic success, helping the child with their homework, and having direct involvement with the schools (Masten & Coatsworth, 1998). Schoon & Parsons (2002) found that parental involvement with the child's education produced a protective-enhancing effect, and promoted academic and behavioral competence. Similarly, Osborn (1990) found that children of parents who were moderately or very interested in their education were more likely to be competent. The author also found that children whose parents' had aspirations for their child's education (the hope that their children would attend college) were almost 12 times more likely to achieve competence than their at-risk peers. Dryden et al., (1998) reported that teachers "often cited the lack of positive parental role models as a reason for children's limited

aspirations” (p. 26). These results clearly indicate the importance of parents’ beliefs and behaviors in regard to their children’s current and future school success.

### *Community Attributes*

There are a number of protective factors outside the home that can influence resilience in children at-risk. These factors include strong relationships with non-familial adults and peers, effective school environments, and involvement in extracurricular activities.

#### *Strong Relationships*

Studies show that children from high risk backgrounds who form attachments with a confiding adult outside their immediate family may be more resilient (Jenkins & Smith, 1990, as cited in Fergusson & Lynskey, 1996). Both teachers and students identified having caring and supportive relationships with either non-familial adults or peers as a protective factor (Dryden et al., 1998). Dryden et al. (1998) found that teachers often named adults in the school setting first, while children emphasized peer relationships in their descriptions of protective factors for children. In an interview, one teacher replied, “if they form an excellent relationship with an adult at school, I think that can make a huge difference” (p. 12). However, not all peer relationships are good. It is important that peer relationships be positive. If an at-risk child is involved in a relationship with a deviant peer (characterized by behavioral and social problems), it is likely the child will be influenced by the peer. Fergusson & Lynskey (1996) revealed that teenagers who reported or were described as having a low affiliation with delinquent peers were more resilient than those who had a high level of affiliation with delinquent

peers. This finding suggests that other factors outside the peer relationship could influence the ability of the relationship to be a protective factor.

### *Effective School Environments*

Masten and Coatsworth (1998) listed several characteristics of schools that effectively promote academic achievement. These characteristics include, a clear mission, high-quality instruction, staff development, and monitoring of student progress. Cotterell (1996, as cited in Gilligan, 2000) emphasized the importance of the school climate in increasing students' commitment to the school community. "A sense of belonging to school can enhance academic performance, motivation, and emotional well-being" (p. 41). Fergusson and Lynskey (1996) reported that resilient teenagers more often reported enjoying school. It seems that effective schools can provide a variety of areas for promoting resilience.

### *Involvement in Extracurricular Activities*

Involvement in extracurricular activities may include participating in sports, volunteering, participating at community organizations, or working (Gilligan, 2000). These extracurricular activities could pose as protective factors for several reasons. Being involved in extracurricular activities may enhance self-esteem and self-efficacy, develop a sense of belonging, introduce young people to a positive peer group, and may promote achievement and competence in the academic, behavioral, and social arenas (Gilligan, 2000; Masten & Coatsworth, 1998).

### Interventions for School Counselors

School counselors are in a unique position to apply effective intervention strategies that will enhance resilience in at-risk children. Rak and Patterson (1996)

believe that, “by evaluating both the at-risk issues and the resiliency factors of the client, the counselor can plan interventions that will either protect or activate the client’s resiliency factors” (p.371). Counselors can plan interventions within the three domains of protective factors described above. There are a variety of ways the counselor can work with at-risk youth to develop their individual, family, and community protective factors that promote resilience.

### *Individual*

Although counselors cannot change an individual’s intellectual functioning or temperament, they can influence the self-esteem and self-efficacy of the individual. One way to influence self-esteem is to create a positive and caring relationship with the student. A student’s self-worth may increase when he/she feels supported and understood by a positive adult role model. Counselors should also find ways to increase self-esteem by creating opportunities for the student to do well in a variety of areas at school (Dryden et al., 1998). For instance, counselors may identify areas of strengths in the student such as, acting, art, or sports, and encourage the student to become involved in these areas. Counselors should also find ways to enhance students’ self-concepts. Providing positive reinforcement, encouragement, and teaching and modeling the principles of a healthy self-concept may foster enhancement (Rak & Patterson, 1996).

### *Family*

School counselors can assist at-risk children by providing support to their families. Often, parents of at-risk children lack the parenting skills necessary to foster resilience. An important job for the school counselor is to provide individual and group consultation to parents (Rak & Patterson, 1996). Parents may need to be taught how to



provide an environment where children can prosper. Teaching parents how to communicate love to their children, while also providing clear expectations and appropriate boundaries may be necessary. Parents may also need to learn how to communicate effectively with their children, demonstrate appropriate support skills, and learn effective discipline techniques (Rak & Patterson, 1996). Often, parents may be experiencing overwhelming stressors dealing with personal or marital problems that may be negatively affecting their parenting abilities. Referring parents to outside counseling may be a powerful intervention that will be beneficial to the child in the long run (Rak & Patterson, 1996).

### *Environment*

“Consultation with teachers and other community supports is an essential responsibility of the counselor, and can enhance the development of resilience in young clients” (Rak & Patterson, 1996, p. 372). Counselors should communicate with the staff about the importance of facilitating caring and quality relationships with the students, especially those deemed at-risk. The counselor should emphasize that many at-risk children develop resilience because of the relationships they have developed outside of the home (Rak & Patterson, 1996). Counselors should work with teachers and staff to ensure everyone has the necessary skills to be a positive role model and mentor to their students. Counselors should also be familiar with the available outreach programs in their community. Many community supports provide additional opportunities for children at-risk to develop resilience. Counselors should consult and collaborate with these agencies to provide support for students at-risk (Rak & Patterson, 1996).

## Conclusion

Resilience is characterized by a person's competence, despite adversity in life. The definition of competence varies depending on the situation, but usually relates to achieving major developmental tasks, or competence in school (academic, behavioral, and social). This paper focused on school competence. The findings on resilience thus far have offered hope to school counselors who seek to improve the developmental outcomes and overall quality of life of children characterized as at-risk. Although there are a plethora of risk factors that threaten development, there are also a number of protective factors that seek to alleviate the threat. Despite the lack of consistency in resilience research, there are overarching themes in regard to protective factors for children deemed at-risk. These protective factors reside in the attributes of the child, their family, and their social community.

As Masten (2001) suggested, resilience is not an extraordinary phenomenon as once predicted. This would indicate that resilience can be promoted and enhanced in any child. It is up to the school counselor to first identify these at-risk children, and then apply the most effective strategies to develop protective factors at the individual, family, and community levels, and thus enhance resilience. Promoting resilience in children at a young age will not only benefit the child in the school setting, but will hopefully have continuing effects into adulthood.

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