

Encouraging the Growth of Resilience in Children and Adolescents: A Postmodern Therapeutic Perspective

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Abstract

The growing mental health concerns of children and adolescents have led to the rise of the need for effective interventions by mental health professionals. The dominant explanation for this increase includes psychosocial stressors and chemical imbalances. Additional explanations include the overutilization of social media and potential bullying, which has detrimental effects on children and youth. This article argues that despite the daunting fact that there are a variety of factors that negatively impact the mental health of this population, children and youth are resilient. With the support of counselors trained in postmodern approaches, these individuals can be aided in developing adaptive coping skills that promote their ability to regain agency, so that they can live meaningful and productive lives.

Keywords

Mental Health, Postmodern, Narrative Therapy, Resilience

1. Introduction

The mental health of children and adolescents has been an area of research that is becoming more popular within the field of psychology. The Centers for Disease Control and Prevention in the United States reported that in 2021, nearly one-third of students (29%) had poor mental health, and more than four in ten (42%) reported feeling symptoms consistent with the criteria for a diagnosis of depression. Additionally, during that same time span, more than one in five students (22%) experienced suicidal ideation, and one in ten students (10%) engaged in suicidal behavior (Centers for Disease Control and Prevention, 2021). This along with the influence of recent events, such as the COVID-19 epidemic,

has only served to exacerbate this pattern (Loades et al., 2020).

The cognitive and psychosocial development of children and adolescents can be significantly impacted by mental health issues. These problems frequently prevent youth from making the most of their educational and social life, which arguably should be full of opportunities to learn, grow, and make meaningful connections (DeSocio & Hootman, 2004; Kratt, 2016). There are a variety of risk factors that, when combined, increase the probability of a child or adolescent developing a mental health condition that is causing them to struggle in their daily lives and their overall development (Rabinowitz et al., 2019). Youth struggle with a wide variety of problems related to their mental health.

The risk factors for mental health disorders appear at different rates in different populations, and the prevalence of these disorders varies across all demographics (Anthony & Robbins, 2013; Johnson et al., 2011). For instance, the rates of anxiety and depression among adolescents who belong to gender and sexually diverse groups are significantly greater. In addition to this, they have a higher risk of having suicidal thoughts, making plans to commit suicide, and attempting suicide than youth who do not identify as gender or sexually diverse (López et al., 2021).

There is a wide range of contributing factors to the onset of mental health disorders in youth. These risk factors include the mental health background of parents, trauma, abuse, neglect, brain chemistry imbalances, and others. In addition, there are risk factors that are more systemic in nature, such as parental incarceration and poverty (Phillips et al., 2002). There are a number of interventions and approaches that can assist counselors in addressing the underlying problems that cause distress in the lives of children and adolescents to promote resilience. This is true despite the fact that mental health problems and the factors that cause them can manifest in a variety of ways (Colizzi et al., 2020).

2. Mental Health in Youth

Children and adolescents experiencing mental health challenges frequently exhibit disruptions or dysfunctions within their familial structure to varying extents. The significance of the family is frequently underestimated in scholarly investigations and discourse surrounding mental health disorders in children and adolescents. Research indicates that children who are raised in households where parents have substance use issues exhibit a higher propensity for experiencing mental health stressors and developing subsequent disorders compared to children raised in households without substance use disorders (Lipari & Van Horn, 2017).

Research conducted by Alcan et al. (2021) suggests that children residing in single-parent households, characterized by reduced paternal involvement, are more prone to exhibiting symptoms of anxiety. While it would be inappropriate to simply assign blame to parents, it is clear in research that parents play a significant role in the emotional and psychological development of their children

(Bethell et al., 2019; Bogdan et al., 2022). Nevertheless, parents have the potential to assist their children in managing and addressing mental illness, provided that they acquire the necessary support and guidance to effectively respond to their children's needs.

One notable requirement is the provision of a nurturing environment for children ensuring their emotional and physical safety. When children are provided with a secure and nurturing environment within their households, they are more likely to navigate the challenges of development with the necessary assistance, thereby reducing the likelihood of encountering mental health concerns (Bethell et al., 2019). Family-centered therapeutic approaches have been found to yield positive outcomes in addressing these issues, ultimately resulting in improved outcomes for children (Mogil et al., 2021).

Socially, bullying can heavily impact a child's life (Krusell et al., 2018). With the development of technology, smartphones, and social media, children and adolescents have the potential to be bullied whilst not being in proximity to their bully. The utilization of social media by children and adolescents can be seen as an endeavor to establish or experience a sense of connection with individuals in their local and global communities. However, it is important to note that such digital platforms do not offer an equivalent level of connection as compared to in-person interactions. According to Canady (2019), the utilization of social media platforms and electronic devices engenders an illusory sense of connection that lacks substance, ultimately resulting in feelings of loneliness and depression among children. The irreplaceability of human contact and genuine connections is undeniable (Mantovani et al., 2019). The impact of social media on individuals, particularly on children and adolescents, is a subject of concern as it has been observed to potentially hinder the development of positive mental health by distorting their perception of reality and impeding the formation of genuine interpersonal connections (Canady, 2019).

To effectively address the escalating prevalence of mental health concerns among children and adolescents, it is imperative to prioritize the cultivation of genuine human relationships and connections (Mantovani et al., 2019). While there is an increasing societal apprehension regarding the mental well-being of young individuals, it is important to acknowledge the various advantageous aspects associated with appropriate support during development that can potentially mitigate these concerns.

3. Resilience in Youth

Children's development is greatly impacted by their surroundings. Unfortunately, it is not uncommon for many children to endure high-risk environments that can subject them to a multitude of traumas. Those who experience maltreatment in their childhood are at a greater risk for depression, and anxiety, and have higher levels of aggression, lower school attendance, and a lower likelihood of attending college (Lansford et al., 2002). To combat these risks, it is imperative

to understand children's resilience. Resilience is defined as the ability to recover or return to a baseline or stabilized mental health state after enduring traumatic or difficult experiences (Lee et al., 2013). When individuals harbor resilience, they have the ability to cope with and overcome adversity or trauma (Jaffee et al., 2007).

Resiliency is a well-researched topic that is studied throughout many disciplines (Hu et al., 2015). Understanding how resiliency is commonly measured throughout studies sheds light on how researchers conceptualize resilience. Although there are myriad ways to measure and define resilience, there are certain measurements and definitions that are widely accepted. Two frameworks for understanding and measuring resilience are the buffering approach and trait resilience (Johnson et al., 2011; Maltby et al., 2017). The buffering approach examines how psychological processes engage with negative events to act as a "buffer" to the risk these negative events pose to the individual's mental health (Maltby et al., 2017). Trait resilience characterizes resilience as a personal trait that individuals can acquire to manage and cope with adverse events (Hu et al., 2015).

Through the use of assessments and surveys, researchers have examined resiliency in youth. One research study examined school-aged children and the relationship between adverse childhood experiences (ACEs) and resilience in a school setting (Kasehagen et al., 2017). AFEs, similar to adverse childhood experiences (ACEs), survey school-aged children's adversity in their personal lives. However, instead of surveying children, parents are surveyed. AFEs ask questions to assess hardship within the family or household. The questions examine if there are any deaths in the family, substance abuse, divorce/separation, incarceration, mental illness, and other hardships.

Kasehagen et al. (2017) found that children who experienced three or more hardships were found to struggle in exhibiting resilience as evidenced by their difficulty and inability to complete required homework assignments. In another study that examined at-risk homeless youth, researchers found that lack of resilience was accompanied by feelings of hopelessness, life-threatening behaviors, loneliness, and a sense of not belonging (Rew et al., 2001). In contrast, children surveyed in the same study who did not have similar maladaptive symptoms or behaviors were found to be more resilient (Rew et al., 2001).

Researchers have found that attaining resiliency in at-risk youth is possible and can be promoted through a variety of interventions (Lee et al., 2013). Studies show that having a mentor in a child's life helps to promote resiliency. Mantonani et al. (2019) studied the impact of mentorship on adolescent girls who were within governmental or foster care. Many of these girls were experiencing adverse experiences and were in high need of support. The girls were paired with older mentors who went through similar experiences of being in foster care. These mentors provided social support for a one-year period and after this timeframe, the youth reported feeling more emotionally stable, less engagement in high-risk

or violent behaviors, and an increase in social support (Mantovani et al., 2019).

In Yancey et al. (2011), researchers surveyed over 4000 Californian adolescents. It was found that students with a positive role model in their lives were less likely to engage in alcohol, smoking, and drugs in comparison to adolescents without a positive role model in their lives (Yancey et al., 2011). Youth who have a strong sense of social s are more likely to be resilient, yet for many youth, positive social support and role models are not always accessible. Understanding certain traits or coping mechanisms that support resiliency is crucial to understanding its development.

4. Adaptive Coping

There are a multitude of adaptive coping skills youth can engage in that promote resilience. Coping strategies have been found to coincide with other factors to best increase resiliency in youth (Rabinowitz et al., 2019; Ungar et al., 2015). Much of the research has covered several areas of coping including self-compassion, emotional-focused, problem-focused, and avoidant coping (Munroe et al., 2022). Interactions between subcategories of coping such as active coping, instrumental support, and positive reframing were also studied. Active coping occurs when individuals actively seek out support and advice for managing their stressors.

Instrumental support is utilized when an individual seeks out support or advice from a trusted individual to help navigate the coping. Positive reframing occurs when an individual attempts to reframe a problem in their mind and understand it in a positive light. It was found that youth who engaged in self-compassion also were more likely to interact with instrumental support, positive reframing, and active coping.

In DiClemente and Richards (2019), researchers investigated African American students who were in the 6th - 8th grades for over a 3-year period. These children were located in a community that exposed them to a high level of violence. The purpose of the study was to develop a deeper understanding of which coping methods could best help African American youth who are in communities with a high level of violence. Researchers separated both male and female self-identified participants and found differences in both groups. They found that no particular coping style was truly adaptive when children were exposed to community violence, however, the most used coping method was problem-focused coping.

The effects of problem-focused coping varied for both male and female participants. Girls were found to engage in less delinquency over time when utilizing this coping method, whereas boys engaged in more delinquency over time, the more they utilized problem-focused coping. The results of this study need to be analyzed thoroughly; it does not confirm that problem-focused coping is not effective, but that external factors such as culture, community support, socioeconomic status, and other factors contribute to the effectiveness of an individu-

al's coping strategy. Socialization, as well as culture, are two important factors that play a role in garnering children's resiliency.

A cross-sectional study by [Bethell et al. \(2019\)](#) investigated the personal and social patterns found in resilient, or flourishing children. It was found that children in supportive familial environments were more likely to be resilient. This was even the case when children faced particular adverse events. [Bogdan et al. \(2022\)](#) investigated the impact the Alberta Flood, a natural disaster, had on families in the area. Although some families struggled with their resiliency, other families did not. The families that found themselves the most resilient were those who openly communicated, discussed their struggles, and felt supported. Particularly, when parents were open with their children about their emotions and attempted to collaboratively problem-solve, the children had an easier time coping.

5. Concluding Treatment Considerations for Counselors

When searching for therapeutic interventions that foster resilience, post-modern therapies can be used to assist in reclaiming an individual's agency while reauthoring their story to the response to trauma ([Merscham, 2000](#)). With a post-modern perspective, counselors guide clients through the externalization of negative feelings, discovering stories of resistance and reclaiming agency in the face of trauma. While the effects on resilience and trauma through the use of post-modern therapy are still emerging within research, there is ample support that demonstrates intervention effectiveness ([Beaudoin et al., 2016](#); [German, 2013](#); [Karibwende et al, 2022](#)).

From a postmodern narrative perspective, [White and Epston \(1990\)](#) suggested that adolescents often experience "problem-saturated narratives" and the more they dwell on these narratives, the more their negative self-perception becomes ingrained. This leads to a loss of hope and a sense of powerlessness, which perpetuates their self-esteem and causes them to withdraw from society. It is crucial for counselors to help youth transition from a "problem-saturated" narrative to one that emphasizes resilience. When youth can recall instances in which they demonstrated resilience, they can then reflect on these experiences, derive meanings from them, and construct their narratives where their voices are prominent aspects of their story.

According to [Sahin and McVicker \(2011\)](#), employing narrative therapy allows for a shift from viewing oneself as a victim to identifying as a survivor. This shift highlights the strength, bravery, and resilience demonstrated by those who have overcome adversity. Counselors are encouraged to help children and adolescents perceive challenges as opportunities for growth while acknowledging the impact the challenges have had in their lives. Interventions and strategies that can be systematically implemented to support at-risk adolescents should be focused on identifying times of resistance, providing agency, and identifying unique and positive outcomes. However, before this, the problem must be clearly identified as

separate from the individual. Discussing the problem as separate from the client's identity provides an opportunity for survivors of child abuse to benefit from this external perspective (White, 2002). During conversations, it is essential to consider the holistic well-being of the individual. Survivors of child abuse may experience emotions such as anger, guilt, or helplessness during therapy sessions (Sahin & McVicker, 2011).

Miguel Fernandez, a narrative-informed counselor, published a case study in 1999 in which he provided therapy to a young girl named Amy. She had experienced a traumatic event where she was brutally assaulted on her way home from school and sustained neck injuries as a result. Initially, when Amy began therapy, she was grappling with the emotional aftermath of the trauma, characterized by feelings of anger and self-blame. Fernandez employed narrative therapeutic techniques in multiple sessions, including mapping the problem, externalization of the problem, and composing a letter addressed to the problem. Amy externalized the problem by naming it "The Pain".

Externalizing problems is a central technique in narrative therapy as it reminds clients and counselors that "The person is not the problem, the problem is the problem" (White, 1988). In Amy's opinion, The Pain was the basis for other harmful emotions such as "Blame" and "Anger". Furthermore, Amy wrote a letter addressing "blame" and made an intention to no longer allow these maladaptive feelings to control her life. Upon returning for a follow-up appointment after completing the therapy sessions, Amy reported a significant improvement in her well-being. She expressed that she no longer struggled with the trauma and felt a sense of normalcy restored in her life. It is important to note that this study represents a single case, but it serves as an example of narrative therapy as an intervention following a traumatic experience. This empowers youth to regain agency over their trauma, enabling them to return to what they consider a normal life (Fernandez, 1999).

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

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