Resiliency
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September 2011

NMAIMH competencies addressed
Theoretical Foundations:
• Infant/very young child development & behavior
• Family relationships & dynamics
Direct Services Skills:
• Observation & listening
Working with Others:
• Building & maintaining relationships
• Empathy & compassion
Reflection:
• Contemplation
• Curiosity

“Resilience is the ability to ‘bounce back’ from life’s inevitable pressures and hard times. It helps us handle stress, overcome childhood disadvantage, recover from trauma and reach out to others and opportunities so we can grow and learn” (Masten and Coatsworth, 1998). The roots of resilience and the capacity to withstand emotionally aversive situations are found in the sense of being understood by and existing in the mind and heart of a loving, attuned and self-possessed other (Foscha, 2000). Attachment is essential to the development of well-being and resilience. If the attachment relationship is healthy and sensitive, the child gains a sense of security which can sustain him in the face of adversity. In addition, positive and supportive interactions between the primary caregiver and the child build self-esteem, which is an important factor in resilience. Attachment also supports a child’s ability to self-regulate. Self-regulation is developing the capacity to regulate our arousal level which ultimately helps a child to deal with stress; and how we deal with stress refers to resiliency.

This is interesting information but what does this have to do with us in our work as home visitors and supervisors? As a relationship-based program supporting a healthy parent/child relationship, it has everything to do with our work! Anytime we have the opportunity to observe and comment on:
• a parent responding to an infant’s cues,
• moments of mutual competence where parent and child both feel good as a result of an interaction,
• and/or a child using their parent as a safe base to refuel before she continues to
explore, we are supporting a healthy attachment … and ultimately, resiliency. At this point in our work, the discussion of attachment may be a common one with your staff, colleagues and even with parents. Yet, how often does the concept of resiliency come up? Do you talk about it in reflective supervision? Do you talk about it with parents/caregivers? If so, how does it get talked about? If not, how would you talk about it?

Another aspect to think about in terms of resiliency is ‘thinking’. “The way we ‘think’ about life’s challenges can affect our ability to cope with them. We tend to develop ‘thinking habits’ that can either help or hinder our responses to stressful situations. People who can think about a situation flexibly and accurately are better able to identify the root of the problem and find options to deal with it. Challenging our thinking habits helps us develop our flexibility and accuracy and thereby supports our resilience” (Reivich and Shatte, 2002).

Relationships are complex; they include a combination of approaches to relating which is based on how we think about (make meaning out of) relationships and experiences in the past. Working with families in a variety of situations with a number of different life challenges, what do you notice about how different families ‘think' about their situation? Are some parents/caregivers more resilient than others? How does their ‘thinking’ impact how they relate to their child?

Talking points for supervisors…
- How do YOUR ‘thinking habits’ impact you in your work?
- Within the parallel process and in the context of resiliency, what is your role in supporting a parent’s ‘thinking habit’?
- How do ‘thinking habits’ and attachment correlate?

References/Additional Resources