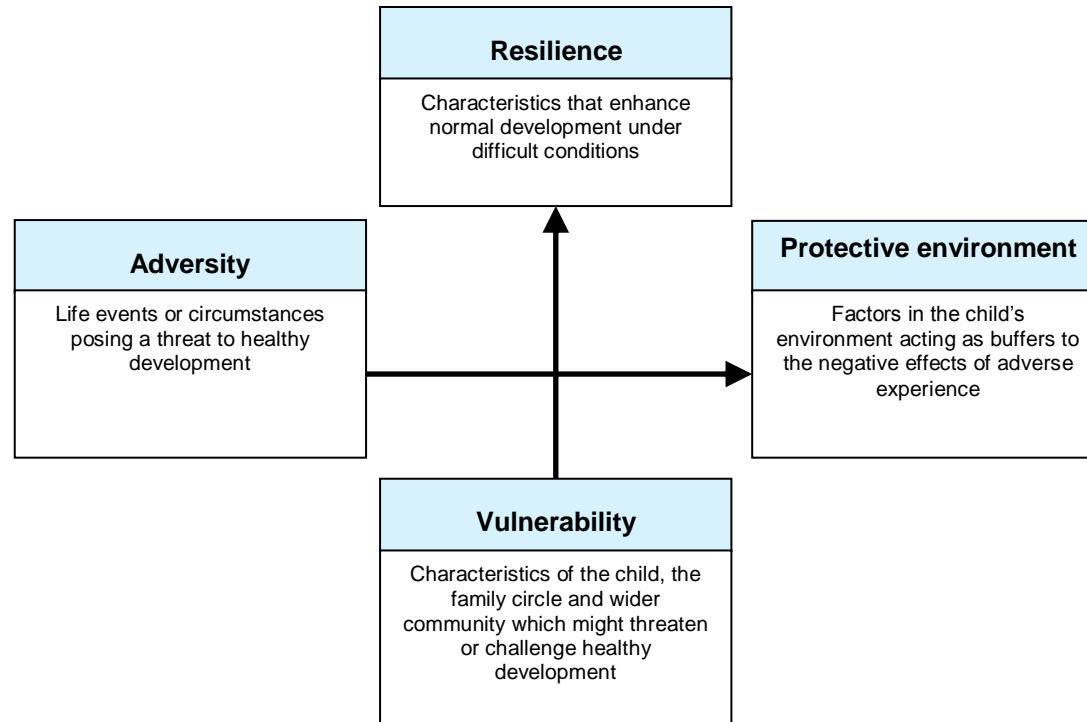# Assessing risk and resilience factors

The Resilience Matrix, developed by Daniel and Wassell[1] provides practitioners with a framework to begin to weigh up the particular risks against protective factors. The Matrix enables practitioners to weigh up the strengths and risks already identified from the Common Assessment Framework and any other specialist assessments. The Matrix is used to assist practitioners in making sense of the relationship between the child's vulnerability or resilience and the world around them, which in turn may highlight areas of risk requiring more comprehensive or specialist assessment and analysis. The Matrix can be used to examine and weigh factors in relation to:

- Vulnerability and unmet needs.
- Adversity.
- Strengths or protective factors.
- Resilience.



**Resilience**
Characteristics that enhance normal development under difficult conditions

**Adversity**
Life events or circumstances posing a threat to healthy development

**Protective environment**
Factors in the child's environment acting as buffers to the negative effects of adverse experience

**Vulnerability**
Characteristics of the child, the family circle and wider community which might threaten or challenge healthy development

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[1] *Daniel and Wassell, (2002) Assessing and Promoting Resilience in Vulnerable Children Vols. 1, 2 & 3, London & Philadelphia, Jessica Kingsley Publishers Ltd. See also:* Daniel, B., Wassell, S. and Gilligan, R. (1999) *Child Development for Child Care and Child Protection Workers*, London and Philadelphia, Jessica Kingsley Publishers Ltd.
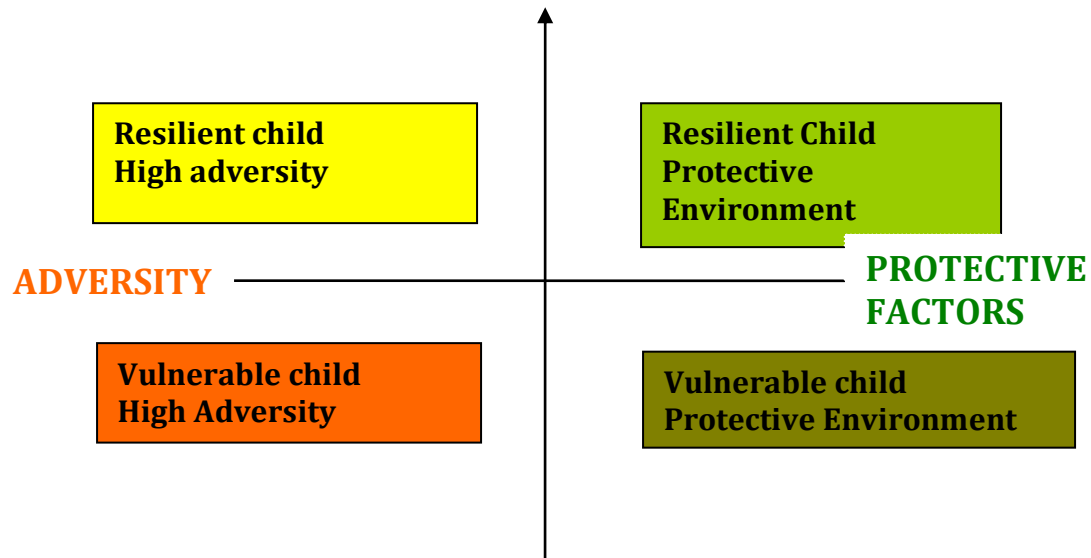
## RESILIENCE

- Good attachment
- Good self-esteem
  - Sociability
    - High IQ
- Flexible temperament
- Problem solving skills
  - Positive parenting
    - Attractive

**Variables**
- Timing & age
- Multiple adversities
- Cumulative protective factors
- Pathways
- Turning points
- A sense of belonging

**Intervention**
- Strengthen protective factors and resilience
- Reduce problems and address vulnerabilities
- Achieve initial small improvements

| Resilient child High adversity | Resilient Child Protective Environment |
|---|---|

**ADVERSITY** — **PROTECTIVE FACTORS**

| Vulnerable child High Adversity | Vulnerable child Protective Environment |
|---|---|

**Adversity**
- Life events/crisis
- Illness loss bereavement
- Separation/family breakdown
- Domestic violence
- Asylum seeking status
- Serious parental difficulties e.g.: drug abuse/alcohol misuse
- Parental mental illness

## VULNERABILITY

- Poor attachment
  - Minority status
    - Young age
      - Disability
  - History of abuse
- Innate characteristics in child/ family that threaten /challenge development
  - A loner/isolation
  - Institutional care
- Early childhood trauma
- Communication differences
- Inconsistent/neglectful care

**Protective Factors**
- Good school experience
- One supportive adult
- Special help with behavioural problems
- Community networks
- Leisure activities
- Talents and interests

*Gordon, R. et al, (2000) The Child's World Training & Development Pack, NSPCC*

# Risk and resilience factors identified by research literature

| Resilience | Protective environment |
|---|---|
| Good attachment | One consistent supportive adult |
| Good self-esteem/positive outlook | A mentor or trusted adult with whom the child is able to discuss sensitive issues |
| Goals and aspirations | Supportive older sibling |
| Sociability. Social networks outside the family. Belonging to organised, out of school activities | Special help with behavioural problems |
| Peer acceptance and friendship | Community networks |
| High IQ (attainment as proxy) | Sympathetic, empathic and vigilant teachers |
| Good school experience | Sufficient income support and good physical standards in the home |
| Regular attendance at school | Practical and domestic help |
| Flexible temperament | Regular, long-term support for the family from services |
| Problem solving skills | Parent acknowledges the difficulties and is able to access and accept treatment |
| Positive parenting | An alternative, safe and supportive residence for mothers subject to violence and the threat of violence |
| Leisure activities | Regular medical and dental checks including school medicals |
| Talents and interests | Factual information about puberty, sex and contraception |
| Cognitive ability to rationalise drug/alcohol problems in terms of illness | |
| Being taught different ways of coping and being sufficiently confident to know what to do when parents are incapacitated | |
| An ability to separate, either psychologically or physically from the stressful situation | |

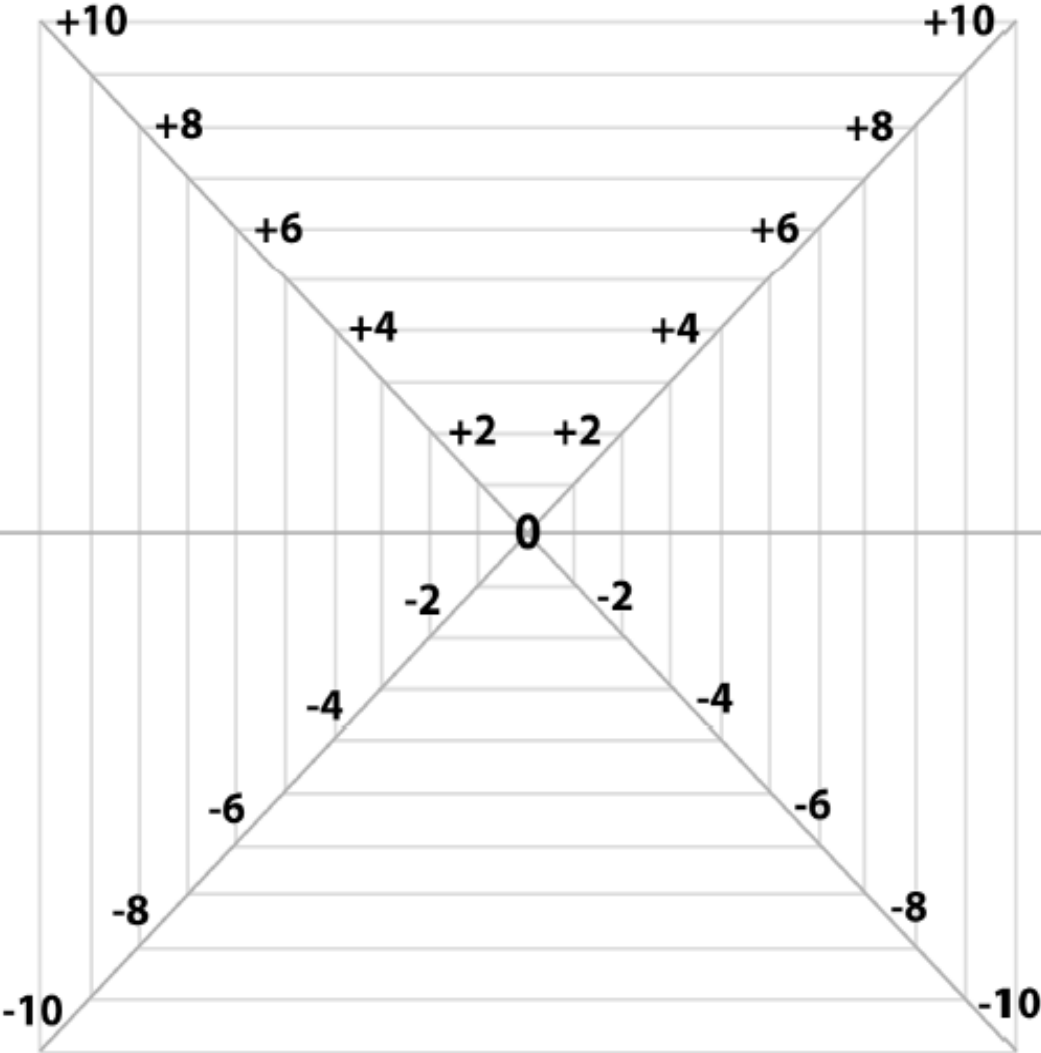| Adversity | Vulnerability |
|---|---|
| Life events/crisis | Poor attachment |
| Illness/loss/bereavement | Young age (under 6) |
| Separation/family breakdown | History of abuse |
| Domestic violence | Innate characteristics in child/family that threaten/challenge development |
| Asylum seeking status | A loner/isolation |
| Serious parental difficulties e.g. drug abuse/alcohol misuse | Institutional care |
| Parental mental illness | Early childhood trauma |
| Bullied | Communication differences/problems |
| | Inconsistent/neglectful care |
| | Physical disability/learning disability/behavioural problems |
| | Perceptions of provocative behaviour by child |
| | Powerless (highly dependant and susceptible to others) |
| | Defenceless (unable to defend self against aggression) |
| | Non assertive/passive |

Key:   Blue = Data may be available to measure          Green = Interventions that could be put in place
         Purple = Could be measured through assessment or collection of information about child's life

RESILIENCE
(Internal)

PROTECTIVE FACTORS
(External)

+10    +10
+8     +8
+6     +6
+4     +4
+2  +2
0
-2  -2
-4     -4
-6     -6
-8     -8
-10    -10

ADVERSITY
(External)

VULNERABILITIES
(Internal)