Resilience and Protective Factors for Mental Health Difficulties in Young People with Complex Needs: A Thematic Analysis

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Introduction

- Background
  - Service Context: Tier 4 CAMHS.
  - A “negatively skewed narrative” (Rashid, 2015) within adolescent mental health services.
  - Policy: The Department of Health’s ([DoH], 2015) Children and Young People’s Mental Health and Wellbeing Taskforce:
    - “We need to value the importance of recognising and promoting good mental health and wellbeing in all people, not just focusing on mental illness and diagnosis” (p. 33).
    - They suggested that this should be done through early intervention and the promotion of resilience.

- Resilience
  - Resilience is a dynamic process; the capacity for an individual to recover from difficulties (Werner, 2001); overlap with recovery? (Jessor, 1993)

- Aim
  - To explore the meaning of resilience and protective factors for young people with complex mental health needs in the context of specialist CAMH services.
Method

- Design
  - Qualitative Study
- Data Collection
  - 3 group interviews and 1 individual interview
- Participants
  - 10 young people aged between 15 and 17
- Data Analysis
  - Thematic Analysis (Braun & Clarke, 2006)
## Results

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1. Relationships and Support

- Developing strength through positive relationships with the ‘right kind of people’
  - Understanding, reliable and supportive people who really knew the young person and what they needed

- Mutuality and reciprocity
  - ‘Feeling needed and needing others’
    - “If you’re at the stage where you don’t want to get better for yourself you stay strong for them” (Sarah)
  - Growing together; helping others
    - “I want to share my experience with my kids [in the future] and inspire others, help them learn from my mistakes, you have to learn it the hard way, like, try to make other people’s life easier by trying to explain it to them, like being a role model” (Major)

- Meeting other young people with mental health difficulties
  - Not feeling like ‘the only one’
    - “It just gave me a balanced view of the world knowing that I wasn’t the only one suffering these things, I would have doctors say I sympathise with you, I understand, but they don’t, whereas the people I have around me do understand, they’re going through it themselves” (Billie-Joe)
2. Perspectives on Recovery and The Self

- **Relationship to the Self**
  - Developing a positive self-to-self relationship
    - “You have to forgive yourself and don’t be so hard on yourself... become a better person than yesterday” (Major)
    - “You’ve got to believe in yourself really, and that’s a difficult thing to do” (Leah)
  - Regaining a sense of identity
    - “True friends and family, they knew you before and they can tell you exactly who you was and what you were like, I feel like you can lose your identity but the true, inner self of you, you can never change, it’s always there, you can never lose yourself, and with the right support there is a way back” (Major)
2. Perspectives on Recovery and The Self

- **Acceptance and Hope**
  - Acceptance of the present situation and the road to recovery
    - "I think after a while you just build resilience when you have to deal with something on a daily basis, you kind of just adapt to accept the circumstances, and I think that’s really what was the turning point for me, so accepting my circumstances, ok, I’m in this mess, I don’t care how I got in this mess, but I’m in this mess now and I need to get out of it, I think when you can just, snap into that, into that mentality, then you can get yourself better" (Billie-Joe)
  - Hope in recognising small achievements
  - Finding purpose and looking towards the future

- **Striving and Taking Control**
  - Developing a sense of control and actively striving
    - "You have to stick with it and fight it and I think, like, people with mental illnesses don’t get enough credit for how difficult it is and they definitely don’t get enough credit for how much they have to fight" (Leah)
3. The Process of Learning

- Recovery as an Individualistic Process of Learning
  - Protective factors as unique for each person
  - Process of learning contributing to resilience

- Specific protective factors for some young people:
  - Structure and routine
  - Activities and distractions
  - Professional support and spiritual guidance
  - Emotional expression
    - “Probably because I think if you don’t let it out, it’s just gonna stay inside you and make you feel like crap” (Anthony)
    - “If you listen to something when you’re angry, you listen to angry music, it gets you less angry because you’re expressing” (Ginger); “yeah Minecraft, get some TNT, take masses out of the landscape, it makes me feel a lot better destroying things [laughs]” (Billie-Joe)
Clinical Implications

- Terminology to develop a strengths-based narrative
  - ‘Coping’ and ‘staying strong’

- Importance of positive relationships and support from ‘the right kind of people’
  - Attachment theory to inform the design and delivery of services in relation to the ways in which to cultivate these positive relationships

- Being with others with experience of mental health difficulties as protective
  - Implications for employing peer support workers within adolescent mental health services

- Individualistic process of learning
  - Protective factors used to inform the provision of opportunities and availability of resources (as oppose to a set of prescriptive factors)
References


