RESILIENCE

1. **A summary of existing figures within national adult education systems concerning the national perception of resilience or other related terms**.

Desk and field research was conducted between January and March 2013 to review the current situation in the UK regarding resilience perceptions and training for adults. See Sections 5 and 6 for more detail on research methodology.

Research has shown that the focus for using resilience theories in the UK has been on helping children and families often living in deprived communities; on helping the unemployed in disadvantaged communities; in universities to reduce high dropout rates particularly in the first year and in the workplace to develop resilient individuals and organisations in difficult economic circumstances. It is in these areas that there is a higher perception of resilience and wellbeing.

To understand the context in the UK, it is useful to look at statistics relating to the problems which a resilient approach can help to address.

1.1 Dropouts from education

According to OECD statistics (2013) around 18 per cent of young people in Britain failed to remain in education beyond the standard school leaving age of 16. This is only slightly lower than the average drop-out rate among 35 developed nations, which stands at 19 per cent. Students from low socio-economic backgrounds were twice as likely to be low performers, implying that personal or social circumstances are obstacles to achieving their educational potential. In the report, Equity and Quality in Education (2012), Britain was placed 25th out of 35 countries in terms of the number of adults who failed to stay in education up to the age of 18.

In England in October 2012, 1.03 million 16-24 year olds (NEET Quarterly Brief 2012) were not in education, employment or training (they are referred to as NEETs). Many of these were early school leavers or commenced further training and dropped out.
Attainment at age 16 is seen as the single most
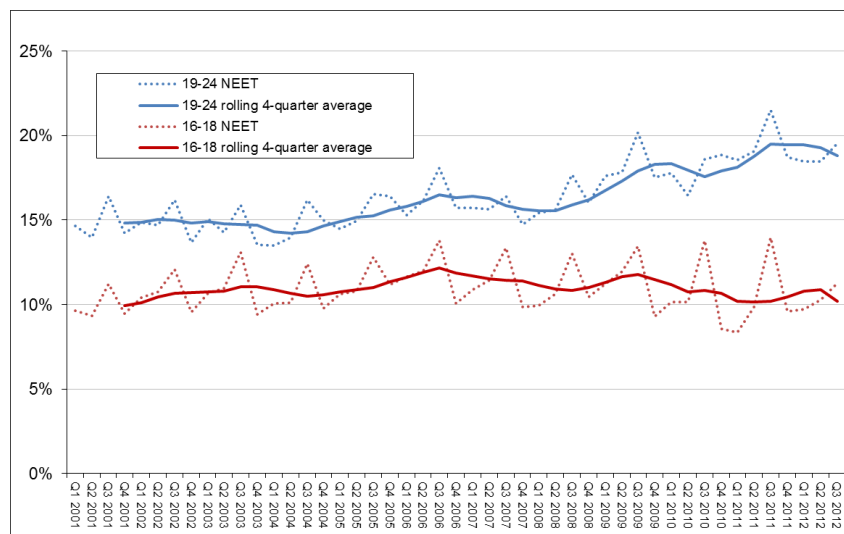
important factor in determining young people's participation and achievement in post-16 education. There has been a rising trend in the number of NEETs. According to the OECD Economic Survey (2013) 'NEETs face a risk of lasting exclusion from work causing permanent scars for the individuals involved, weakening the long term economic growth potential as

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human capital erodes, and undermining social cohesion. High unemployment and inequality are likely to have adversely affected well-being.'

Interviews with staff at Norton Radstock College confirmed that parents and families play a crucial role in helping young people to form realistic and ambitious aspirations for their future. Low self-esteem was identified as common particularly for students from disadvantaged backgrounds.   Schools have a key role in identifying and supporting pupils who are at greatest risk of disengagement and ensuring that they receive the support and advice they need to move on into a successful post-16 destination.

Whilst UK unemployment rates have risen due to the global economic crisis, they are still low in comparison to some other EU countries, although approximately 1 million 16-24 year olds are currently unemployed (about 17%).

According to the Higher Education Statistics Agency (2012), there was a rise of almost 13 per cent in terms of university dropouts in Britain in 2011 from 28,210 to 31,755 despite the Government spending £1bn on initiatives designed to improve student retention. 8.6 per cent of students left higher education after 12 months compared with 7.9 per cent a year earlier. Some 21.6 per cent were expected to fail to complete their degree. The wrong choice of course and poor use of study time are considered to be factors when dropping out and there has also been a rise in demand for counselling.

1.2 The workplace

The UK continues to perform poorly compared to other countries such as the US, France and Germany (OECD, 2013) in terms of lower productivity. Almost a fifth of the gap with key competitors is explained by lack of skills in the working age population and leadership and management practices. Increasing participation in adult education and skill development including resilience approaches could make a significant contribution to economic growth.

131 million days were lost due to sickness absences in the UK in 2011 (ONS, 2012). The cost of this sickness absence to the economy through lost output is estimated to be up to €17 billion. Whilst the number of days lost has improved by 26 per cent since 1993, there is scope to reduce sickness absence further through the encouragement of resilience programmes and positive health promotion. Field research has shown that five years ago there was a focus on stress management at work. This is being replaced by a growing interest in resilience programmes which are perceived to offer a more positive approach (see section 3 for more detail).

1.3 Health and wellbeing

Field research showed that wellbeing as a term, in association with health, appears to be more widely recognised than resilience. There was some confusion about what resilience means with the most common definition being the ability to bounce back from adversity. Emotional intelligence was also perceived to be closely linked to resilience.

A national survey conducted with adults in 2011 – 2012 on 'Measuring subjective well-being in the UK' (ONS, 2012) showed that 80% of the sample gave a medium to high score for overall life satisfaction. 21.8% reported an anxiety rating of over 5 out of 10. 45% of unemployed people rated their life satisfaction as below 7 out of 10. Among employed people the figure was 20%. See appendix for more detail.

Whilst life expectancy has increased by 4.2 years in the UK since 1990, research (The Lancet, 2013) indicates that more needs to be done, including positive health strategies, to reduce preventable deaths related to smoking, alcohol and obesity (UK ranked 14 out of 19 countries).

2. **Present national strategies for implementation of emphasizing strengths and capacity that support physical, social, mental and spiritual wellbeing in the educational curricula in adult and lifelong learning education.**

The statistics in the previous section demonstrate the opportunities to introduce resilience into adult educational curricula in the UK. In terms of national strategies, there have been several initiatives as follows:

2.1 UK Resilience Programme (UKRP)

In line with the 'Every Child Matters' agenda which stressed the duty to promote students' wellbeing, the UKRP (Department for Education, 2011) was conducted between 2007 and 2010. Whilst the programme was aimed at a younger age group (11-12 year olds), the findings are useful when considering integrating resilience into adult education. Weekly workshops were used to build resilience and results compared to a control group. Key findings showed that there were short term improvements in depression symptom scores, attendance and academic attainment in English. The impact was generally greater with students from disadvantaged backgrounds. Students had gone on to use the skills in real life situations. Facilitators were positive about the ideas and training received and had used the skills themselves demonstrating the personal benefit to teachers and trainers.

2.2 Healthy Further Education

In 2008, a Healthy Further Education (FE) programme was funded by the Department of Health and delivered in partnership with LSIS (Learning and Skills Improvement Service). According to the FE Steering Group, the aim was "to create a learning environment where positive wellbeing is the expectation for all to produce learners and staff who are confident, healthy, safe, emotionally resilient and personally fulfilled." There is a Healthy Further Education Award from the Director of Public Health for colleges which meet health and wellbeing criteria.

Interviews with staff at Norton Radstock College showed that positive health promotion continues to be included as part of tutorials and support services such as the school nurse who can refer students for help to other organisations including counselling. Pastoral and spiritual support is also provided. Exercise is offered as part of enrichment activities although participation can be low and obesity is a major problem. Other issues such as

drugs, teenage pregnancy, self-harming and eating disorders are discussed during tutorials and support is available although it was felt that it would be useful to have more trained counsellors. It is likely that there will be less time for enrichment from September 2013 when work experience will be introduced into all full time courses. Health and wellbeing events are run by Health and Social Care students and teachers for all students and staff.

2.3 Health and wellbeing initiatives at work

'Health, Work and Wellbeing' is a Government initiative which began in 2005 to protect and improve the health and wellbeing of working age people involving employers, unions, healthcare professionals and other partners. A range of resources and case studies are available on the website to help more people with health conditions to stay in work or enter employment.

Sponsored by the Department of Health, the Emotional Resilience Toolkit aims to help employers develop individual and team resilience in the workplace through a health and emotional wellbeing programme. This includes research, resources and training for managers to recognise conditions which can cause stress and take early action.

The University of Brighton is conducting a Higher Education Authority (2013) funded study and workshop on 'Building resilience in practice through the supervisory relationship: An exploration of opportunities to develop practitioner resilience in the preparation of practice based educators.'   A resilience framework and map to plot risk and protective factors are used to help practice based educators to support health and social care learners in practice. See Appendix for poster and more detail of the approach.

2.4 Health and wellbeing boards

From 1st April 2013, local authorities will be responsible for public health. Health and wellbeing boards have been established with representatives from education, the National Health Service, the private health sector, local government and charities to implement local strategies for positive health promotion and training. Norton Radstock College plans to discuss resilience at the local health and wellbeing board meeting in April 2013.

2.5 Other resilience strategies

A report 'Improving Young People's Lives: The role of the environment in building resilience, responsibility and employment chances' (Department for Education, 2010) recommends ways in which the environment can be used to help young people who have dropped out of education and employment to develop a positive attitude, build self-esteem and re-engage in learning.

Another report 'Teaching approaches that help to build resilience to extremism among young people' (Department for Education, 2011) provides guidance within education for helping young people not to be influenced by extremist terrorist groups by providing safe spaces for dialogue and positive interaction.

Four recovery colleges have been established in the UK providing education as part of the recovery process (Centre for Mental Health, 2012). Programmes help individuals to develop hope that they can pursue their goals, maintain a sense of control over their lives, develop support networks and find work.

3   Present activities of non-governmental sector concerning the introduction of resilience into lifelong education (associations, foundations, campaigns, projects, etc.)

3.1 Resilience organisations and charities

The BoingBoing organisation works with young people, families and adults from disadvantaged backgrounds using resilience theories to help them bounce back when facing difficulties. It includes academics from the University of Brighton, parents, young people, practitioners and service users in resilience forums, communities of practice and training. From research, a resilience therapy approach and a resilience support framework for adults is being developed by Angie Hart, Derek Blincow and Josh Cameron covering the broad areas of basics, belonging, learning and work, coping and core self. The resilience framework has been tested in one secondary and one special (primary and secondary) school and they are compiling a tutor time toolkit and a framework for special needs students. They also have a fostered young person and carer leavers project to develop an aspiration for later life toolkit based on their resilience framework.

The Centre for Confidence in Glasgow, Scotland has worked with Napier and Glasgow universities to introduce positive psychology, confidence building and personal development initiatives with students and teachers to improve attainment and reduce dropouts. The Centre also offers a range of resources and research on building resilience in young people, detecting depression in young people, reducing crime through resilience training and resilience at work.

The Young Foundation working with Mind, the national mental health charity, has developed a resilience intervention for the unemployed in economically disadvantaged communities called 'Who is going to employ me?' Five of the nine projects funded are with unemployed men aged 45 to 60. The programme is designed around three pillars for resilience and wellbeing: enhanced coping strategies, improved social networks and capital and participation in wellbeing activities.

The programme is delivered informally in a group setting to encourage support within the local community. There are 4 stages: promotion and outreach linking with other organisations to engage participants; resilience training using cognitive behaviour and positive psychology to support individuals to enter or re-enter the labour market; community based activity to share and learn new skills and next step action plans. Male only discussion groups with a skilled facilitator were used in five of the projects. There are some

useful visual action plans in the report which illustrate the journey map of individuals during the initiative and what further actions are planned.

The Young Foundation has also researched the concept of developing community resilience in the current climate of austerity and public sector cuts. The report 'Rowing against the tide: making the case for community resilience' (December 2012) clarifies the definition of community resilience, draws on examples of communities in Spain and Sweden, considers migrants within communities and challenges the concept that little or no state intervention is needed. Three scales that contribute to community resilience are considered:

Promotion and outreach

Community based activity

Next step: skills development or employment support

Core module: facilitated discussion group

- Self: the way people feel about their own lives
- Support: the quality of social supports and networks within the community
- Structure and systems: the strength of the infrastructure and environment to support people to achieve their aspirations and live a good life.

The University of Manchester Neuroscience and Psychiatry Unit is currently conducting research into why some adults are more resilient whilst others become depressed when faced with difficulties and possible interventions to prevent and treat depression. They are considering vulnerability factors such as bereavement at a young age, unemployment and no confiding relationships in three different groups. They are also conducting cognitive and scientific tests to identify neurobiological markers and preventative approaches to promote resilience.

Research by Windle, Bennett and Noyes (2011) reviewed nineteen resilience measures and concluded that there was currently no 'gold standard.' There is a growing interest in developing resilience training in response to the ageing society and how people cope with ill health.

3.2 Resilience at work

As mentioned in section 1.2, there has been a growing interest in developing resilience at work in challenging economic times.   The entire issue of 'Counselling at work' (Winter 2012) is dedicated to the topic. In their article 'The challenge of stress in turbulent times' Weinberg and Cooper (2012) explain how resilience can provide 'a psychological buffer' and 'internal locus of control' along with an optimistic approach to create opportunities from challenges. In her article 'Being resilient' Jane Drapkin explains how resilience at work may be 'the most effective way to maintain and increase an employee's productivity and commitment to their organisation, whilst also promoting their mental, emotional and physical health.'
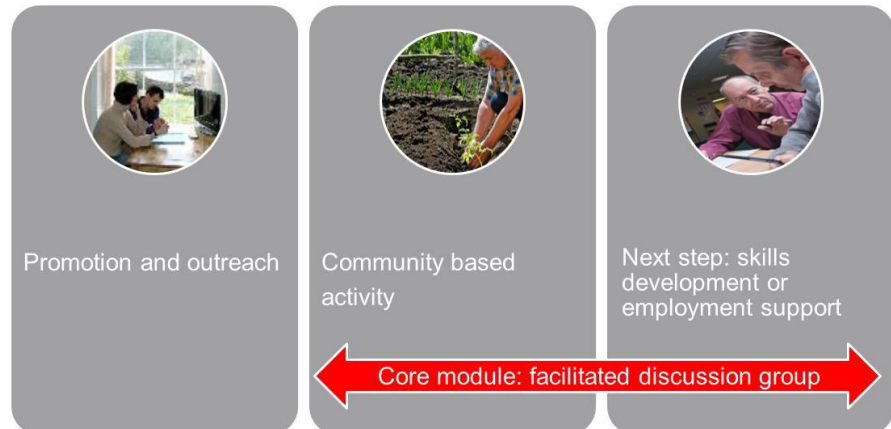
Richardson (2002) applies resilience research in three waves which build on each other: identifying the qualities of resilient individuals which can be used in recruitment; focusing on the process of making positive adaptations in times of adversity and motivating individuals and teams to foster resilient approaches.

Emotional Intelligence 4 Change Ltd offers an approach which builds resilience and emotional intelligence. The concept and benefits of a resilient approach are explained in their 'lightbulb' moments. Robin Hills and Doug Haynes (2013) offer a visual concept of 16 'images of resilience' or metaphors to help individuals and teams consider their resilience in terms of developing skills and qualities, exploring change and relationships and planning for the future. They select the visuals which help them to understand resilience, tell their story and through coaching, develop an action plan. The concept has been tested in the workplace and can also be used in education e.g. for exam preparation. This offers an alternative approach to psychometrics which has sometimes been misused in recruitment. Training for in-house trainers is also offered. The toolbox of resilience images is available from RSVP Design.

4 Brief description of existing courses, seminars, workshops for wide public and for expert public with focus on their methodology and target groups (both commercial and non-profit)

The Royal Society for Public Health offers an accredited Level 2 course 'Understanding Mental Health and Wellbeing' for those who work with individuals and families in local authorities, housing associations, voluntary organisations, sports centres, care homes, colleges and schools. The course covers the impact of negative attitudes on mental health and wellbeing; models (including resilience theory) and how these can be used to help people; the 'five ways to wellbeing' and identifying and using local opportunities to improve wellbeing.

The Robertson Cooper Organisation offers resilience training within organisations for individuals, teams and leaders and also train the trainer programmes. Models such as the '6 Essentials of workplace well-being' and the i-resilience tool are used to develop individual and team resilience and wellbeing. The i-resilience report is a freely available self-diagnostic psychometric tool which helps individuals to build on their strengths and manage potential areas of risk. This has been introduced into organisations such as the National Health Service.

The Resilient Graduate blog also produced by Robertson Cooper uses resilience to help graduates make the transition to employment. It applies the i-resilience concept to key attributes to develop including be sociable, confident, flexible and open and in control.

Robin Hills will be presenting 'Images of Resilience' as described in the previous section at the Nexus EQ online conference on June 24 13.15 at Harvard University.

Other courses and seminars identified in research include Emotional Intelligence 4 Change runs seminars linking resilience with emotional intelligence to develop individual and organisational resilience.

Private organisations such as Mind Matters which run employee wellbeing workshops to help build individual and organisational resilience.

An online course 'The Resilient Mindset' is available from Skillboosters and helps employees to manage change and restructuring in a positive way.

5   List of possible stakeholders who are responsible for educational content within the educational structures

To produce this paper, field research interviews* were conducted with managers and support staff at Norton Radstock College and resilience experts between January and March 2013. Many thanks to all who participated. From the interviews and desk research, possible stakeholders have been identified in two categories as shown below:

5.1 Stakeholders and decision makers (public bodies responsible for financing national and regional training measures, local authorities, community organisations and NGOs)

Bath & NE Somerset Health & Wellbeing panel Contact: Margaret Fairbairn* **British Association for Counselling and psychotherapy** Contact: Damian Stoupe

Gloucestershire County Council, Employee assistance advisor Contact: Nick Wood **1170 Local Authority organisation**, offers group support for young people and families to find solutions to problems and develop plans to meet goals and aspirations. Contact: Chris Hunt

Royal Society for Public Health, Curriculum development and examiner Contact: Rob Woollen*

Sirona Care and Health, Healthy lifestyle service Contact: Lisa Fry and Simon Pitman

5.2 Training & education institutions, counsellors and training professionals who run vocational courses and studies, language courses, IT courses, courses for the unemployed, migrants, etc.

Norton Radstock College - vocational training for 14-18 year olds and adults. Contacts: Penny Routledge*, Senior Manager – Student Services; Jim Hall*, Senior Curriculum Leader, Health & Social Care; Linda Robey*, Lecturer Health and Social Care; Shirley Parker*, College Nurse (employed by Sirona Healthcare)

City of Bath College -vocational training for 14-18 year olds and adults. Contact; Gwyn Chamberlain*, Teacher Educator, Rob Heyes, Student Support and engagement manager (Healthy FE Award)

City Of Bristol College –vocational training for 14-18 year olds and adults. Contact: **City of Bristol College** – vocational training for 14-18 year olds and adults. Contact:

University of Manchester, Neuroscience and Psychiatry Unit. Contact: Rebecca Elliott*

University of Brighton, Faculty of Health and Social Science and boingboing organisation Contact: Angie Hart* and Caroline Hudson*, Practice Teacher Module Leader

Emotional Intelligence 4 Change Ltd, Emotional intelligence training and i-resilience tool Contact: Robin Hills

Rightway Employee Wellbeing Solutions, Employee Wellbeing Specialist; Let's Get Healthy, Senior Health Leader; NW Health & Physical Activity Forum, Chair Contact: Rob Woollen

Robertson Cooper, Employee wellbeing services for private and public sectors Contact: Cary Cooper

6   List of literature in national language concerning resilience (including scientific articles and popular science)

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7   Appendix

7.1 Extract from Office for National Statistics, First Annual ONS Experimental Subjective Well-being results, 2012.

Section 1: Overall results

The differences between the four overall subjective well-being questions introduced on ONS social surveys in April 2011 can be examined, as shown in Table 1.1.

Table 1.1 Average (mean) rating and percentage of adults reporting very low, low, medium, high and very high ratings for each subjective well-being question (1), 2011-12 (2, 3, 4) United Kingdom

					Percentages
	Very low (0-4)	Low (5-6)	Medium (7-8)	High (9-10)	Average (mean)
Life satisfaction	6.6	17.5	49.8	26.1	7.4
Worthwhile	4.9	15.1	48.6	31.4	7.7
Happy yesterday	10.9	18.0	39.3	31.8	7.3
	Very high (6-10)	High (4-5)	Medium (2-3)	Low (0-1)	Average (mean)
Anxious yesterday	21.8	18.1	23.5	36.6	3.1

Table source: Office for National Statistics Annual Population Survey

Table notes: Adults aged 16 and over were asked 'Overall, how satisfied are you with your life nowadays?', 'Overall, to what extent do you feel the things you do in your life are worthwhile?', 'Overall, how happy did you feel yesterday?' and 'Overall, how anxious did you feel yesterday?' where nought is 'not at all' and 10 is 'completely'.

1. Data from April 2011 to March 2012.
2. All data weighted.
3. Non-respondents not included.

7.2 Poster - Resilience practice teachers provided by Caroline Hudson, University of Brighton (see attached pdf document)