Delinquent or simply resilient?
How "problem" behaviour can be a child's hidden path to resilience
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We see it in our classrooms and on the evening news: an endless stream of children and teenagers who act with seemingly senseless disregard for themselves and others. But there is another side to this. Dr. Michael Ungar's work with troubled youth has shown him that the behaviours that worry us most as parents, caregivers, police, counsellors and educators, are those that are sometimes a young person's best strategy for survival—in short, what we see as negative and even dangerous behaviour is actually hiding a positive and healthy search for resilience. In this report, Dr. Ungar untangles "problem" behaviours and provides new ways for us to recognize, understand and strengthen hidden resilience.

Introduction
Parents, social workers, teachers, counsellors, police and other adults in our communities are demanding a better way to understand children who are mired in problem behaviours. Why is it that some children, despite experiencing adversity, manage to bounce back in what we consider positive, socially acceptable ways such as maintaining good grades or not getting into trouble?

We call these children resilient. But resilience, the capacity to overcome adversity, is not just a measure of how well some children behave in ways we approve of. The paradox is that resilience is equally present in young people whom we have labelled as dangerous, delinquent, deviant and/or disordered. Resilient youth take advantage of whatever opportunities and resources that are available—even those we consider negative or destructive. That negative behaviour shown in troubled young people can actually signal a pathway to hidden resilience that is, just like the one chosen by their well-behaved peers, simply focused on the need to create powerful and influential identities for themselves.

For many children and youth, the ability to demonstrate resilience in positive ways is a reflection of the capacity of their homes, schools and communities to provide them with the resources they need to grow into well-adjusted adults. Despite our best intentions, we will not be able to influence how seemingly troubled children behave until we appreciate that what we characterize as problem behaviours may well be our children's hidden pathways to resilience.

The Four D's of 'problem' children

Children who receive the most attention in our communities are those who are dangerous, delinquent, deviant or disordered. Often they carry more than one of these labels. The label bonds to the child, on the one hand limiting the child's options, on the other, providing a perfect script for how to act out his or her vulnerability:

- *Dangerous children* scare us with the risks they take, potentially harming themselves or others. Dangerous children have thus far avoided jail or the stigma of a mental health diagnosis.
- *Delinquent children* are associated with the justice system, likely to be involved with police and the courts. The delinquent child has broken a law, or is dangerously close to breaking the law.
- *Deviant children* are social misfits who break social norms. They may have also broken the law, and have a mental health problem. More often, they simply do things the rest of their community finds objectionable.
- *Disordered children* either have a diagnosis as mentally ill or are likely to be diagnosed with a mental health problem. Disorders are frequently used to explain the child's deviance, delinquency and dangerous behaviour.

In my practice, I encounter many children and youth whose behaviour fits into one of the above categories, who, despite a lack of positive and healthy resources, are demonstrating a remarkable resiliency in trying to forge their own strong and individual identities. Jessica is one such young woman.

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> Dr. Michael Ungar, August 2005

Delinquence or resilience? *Jessica's story*
Most days, Jessica, 17, comes home to an empty house. Her mother, Pauline, struggling with an addiction to alcohol, prefers the Bingo Halls to being at home. Jessica says she knows her home is different from those of her classmates, but she accepts it as normal. Her younger brother, 14-year-old Campbell, spends his time away from home. He drinks, commits crime, skips school. When I finally meet him, he says that beyond his front door he finds the fun and relationships that make his life something he can be proud of. Jessica's survival strategies are very different.

She'd like more contact with her parents. She'd like to have her accomplishment of staying in school recognized. Instead, she tells me she's ignored. Her father, Carl, when he's back from his time on the road as a truck driver, gets into frequent arguments with Pauline, sometimes leading to pushing and shoving. When this happens, Jessica usually leaves, "couch surfs" at her friends' homes for a few days, and waits until the situation at home calms. Occasionally she

numbs out with drugs. She looks for affection from boys, though confides that sex makes her feel uncomfortable. She's never sure, she says, that she measures up to the expectations of her partners.

At school, she tries to be invisible. Her marks are fine and no one thinks she needs any special help.

Jessica is finally noticed when she asks her guidance counsellor to help her leave home. Jessica tells the counsellor she's been thinking of moving in with some friends, or maybe her boyfriend. Once she is labelled as a youth-at-risk-of-leaving-home, Jessica's presentation of herself as the most capable one in her family begins to unravel. The invisible child now becomes visible for what she is *doing wrong*.

When Jessica's parents appear for counselling, they are polite, sober, concerned. They are also surprised and embarrassed by Jessica's behaviour. They argue a bit about how uncooperative the girl is, about how she doesn't take any responsibility at home, about how she locks herself in her room. They say it's easier with Campbell. He's busy with "extra-curricular activities." Their story about Jessica tells of a child whom they worry is going to get pregnant, who smokes and likely does drugs. As Jessica becomes more visible to her parents, teachers and counsellors, her own story about her success is overshadowed by their interpretation of her actions as a failure.

How do we account for Jessica's way of coping with her life? If we were to think only in terms of Jessica's problems, we would be quick to diagnose multiple disorders, the effects of abuse and neglect, her low self-esteem, and even think about things like attachment disorders, sexual promiscuity, conduct disorder—all labels common to children in similar situations (Romer, 2003; Willms, 2002). Instead, we could look at Jessica's choices as part of her search for resilience.

The role of resilience in a child's quest for a powerful identity
Thinking about resilience, as it applies to an individual's ability to overcome adversity, is relatively new. There was heady excitement in the late 70s and early 80s when a small group of researchers, followed by counsellors and community workers, began to talk of children as resilient individuals who could grow up under great stress and survive—even thrive (Murphy & Moriarty, 1976; Rutter, Maughan, Mortimore & Ouston, 1979). Previously, children and their families who coped with problems like poverty, mental illness, abuse, unemployment, depression, addictions and any other situation that put them "at-risk" were looked at through the lens of psychopathology—as exhibiting symptoms of mental disorders or abnormal behaviours.

Ann Masten (2001), a leading resilience researcher and psychologist, is today as enthralled with these troubled-yet-resilient children as was her mentor, Norman

Garmezy (Garmezy, Masten & Tellegen, 1984), two decades earlier. Masten says that resilience isn't something exceptional, but in fact occurs in the "ordinary magic" of lives lived well under stress. Small decisions, mild acts of courage, unnoticed efforts to survive are often the pathways that children take to achieve health.

Researchers like Masten have discovered that a number of these children, anywhere from 10 to upwards of 60 per cent, depending on how resilience is defined and outcomes measured, show a surprising capacity to cope well (Kaplan, 1999; Werner & Smith, 1992). In fact, parents of teens "at-risk" may be comforted to know the odds are in their child's favour of turning out just fine. Terrie Moffit (1997) and her colleagues have shown that as many as 95 per cent of troubled youth desist from their problem behaviours after turning 18-years-old.

The trouble is, as children's parents, caregivers, educators, mentors and even, (when things go terribly wrong) jailors, we haven't fully appreciated the way children create an identity for themselves as resilient *from the resources they have available*. When these resources are scarce, children and youth turn to problem behaviours to find a powerful way to assert a preferred identity as a survivor (see Boyden & Mann, 2005; Gilgun, 1999; Ungar, 2005).

Uncovering hidden resilience
Until we better understand children's strategies for resilience we will mistake our children's efforts for survival to be signs of dangerous, delinquent, deviant or disordered behaviour. Children have shown me that problematic behaviours are still a *search for health*. These youth tell me that despite appearances to the contrary, they are all waking up each morning committed to surviving. Some youth practice keeping one story about themselves going without interruption. They are stuck with one identity and are content to use it to their advantage. That one identity might drive adults crazy with its seemingly tenacious hold on the child, but it is this story which children say is their salvation when confronted with overwhelming risks and challenges.

To uncover this hidden resilience, we need to:

- Understand the importance of parents and other caregivers, not just peers, to children who do well despite adversity.
- Invite young people's street identities (and the peers who support them) into our homes and classrooms to better understand who they are when they are beyond our control.
- Hear our children's truths about a world they perceive as denying them the opportunities for both acceptance and excitement.
- Provide substitutes for the problem behaviours that troubled children and youth say give them powerful identities as "problem kids."

Of these strategies for uncovering hidden resilience, *providing substitutes for problem behaviour* is a crucial—and challenging—step to helping a child forge a positive, strong identity.

Substitute rather than suppress
In Jessica's case, both of her labels, as either "dutiful child" or "out-of-control teen," show equal signs of resilient behaviour. Children tell me they only change when we offer them a substitute that brings with it the same advantages as their "problem" identity. They have taught me it is better to *substitute than suppress* problem behaviours.

The quality of the substitutes we offer is the fulcrum upon which children's choices pivot. After all, dangerous, delinquent, deviant and disordered behaviours all bring with them a particular kind of solution to life's problems. When the substitutes we offer meet young people's needs for a powerful and socially acceptable identity, they are far more likely to take advantage of them. They are quite willing to express their problem behaviours in socially acceptable ways—the drug dealer can be entrepreneurial; the gang member loyal to family; the sexually promiscuous teen caring of others.

Problem behaviours as diverse as bullying, drug use, sexual promiscuity and truancy are all attractive to children because they satisfy the child's need for power, recreation, acceptance, or a sense of meaningful participation in his/her community. These are just a few of the benefits that come from behaving badly, as both children's testimony confirms and research supports (Hagan, 1991; Hagan & McCarthy, 1997; Rahey & Craig, 2002; Robinson, 1994; Ungar, 2002).

Not surprisingly, these same factors form the foundation of resilience (Kaplan, 1999; Luthar, 2003) although we seldom acknowledge that dangerous, delinquent, deviant and disordered behaviours can lead to health-related psychosocial outcomes such as feeling powerful, being accepted or participating in a meaningful way. To help children move away from problematic behaviours we must understand the good things that children say they gain from playing at being bad (Ungar, 2002, 2004). We can move further when we offer youth substitute behaviours that reward them with the same power and control they find when they act in ways that trouble us.

Why can't kids appreciate the same things about themselves that we adults appreciate about them? Often, this is because what we see in youth reflects what *we* value rather than what *they* value. For Jessica, moving out, taking drugs, having sex with her boyfriend, all meant control over her body and eventually her life. To judge Jessica's behaviour as a failure overlooks the power of her solution. She found attachments, recognition, and status as an adult in ways socially determined for young women by a society that limits their choices (Brown, 1998).

In Jessica's case, family counselling that moved the focus from the "problem child" to the family's problems played an important role in helping Jessica to display fewer negative behaviours. Suddenly, she was back in control, helping her parents to receive the attention they needed. Even better, with the counsellor as her advocate, Jessica was able to tell her parents *she* needed more attention. She wanted them to appreciate her more, and in time they did. But even if they hadn't, there were other adults who were willing to play their roles as parent-substitutes, and act as witnesses to Jessica's efforts at being "normal."

It was only in the absence of these adults that Jessica had turned to peers for the recognition she craved. Many youth like Jessica are not so fortunate. Parents drag them to counsellors demanding they "stop" their problem behaviours without understanding the purpose of the behaviour, nor offering a substitute that brings with it an identity that is just as powerful.

Jessica's brother, Campbell, needed a very different intervention. He wasn't seeking his parents' recognition. He had no academic achievements to boast about. Meeting Campbell's needs meant understanding the adventure he was finding beyond his front door. Campbell, modelling his life on his father's, wanted to be respected for what he could do. It surprised his parents that what Campbell really wanted was to help his father work on his truck, to travel with his father, and even get a job. Understanding Campbell's world as he saw it, his markers of success were similar to those of his parents, but his access to the means to achieve that success was largely unavailable.

Strategies for finding substitute behaviours
Making the right match between the substitute and the problem behaviour demands an appreciation for what is really important to the youth and how problem behaviours sustain his/her resilience. A number of strategies are useful when seeking effective and more socially acceptable substitutes:

- ***Don't tell, share***. Caregivers, formal or informal, who model alternative pathways to resilience and share information about their own struggles through life are also those who most often have the greatest influence on their children.
- ***Not knowing is a good place to start***. The caregiver who inquires with sincere interest (rather than adult-centric bias) about the child's life, what he or she likes and dislikes, feels and thinks, is the caregiver who will find the clues to what the child is achieving through problem behaviours.
- ***Favour choice over advice***. Offering children realistically achievable choices with the resources to make each one happen is most likely to provide at-risk children with powerful alternatives to problem behaviours.
- ***Be there, now and forever***. Caregivers who offer continuity in

relationships, witnessing the child's powerful performance of identity across different settings of school, home and community, will help the child sustain resilience in more than one part of his/her life.

Performing resilient identities

In my therapeutic work, I encourage youth to take advantage of opportunities that allow them to perform their new identities, identities they experience as signs of resilience. In this regard, I am guided by the Russian Philosopher Mikhail Bakhtin's (1986) work on how we perform our identities, as if we are all together under one big circus tent, each an extraordinary illusionist, making others believe what we believe about ourselves. Bakhtin emphasizes that for our identity story to take hold it must be performed. As others recognize us, so too do we better recognize ourselves as powerful.

Children will continue to seek out ways to become confident, powerful people. Drawing on the resources at hand, they will find their own pathways to resilience, even if they are misguided or lacking in our approval. Our challenge is to provide all young people with positive, consistently available opportunities and resources to help them become healthy, well-adjusted individuals. When we don't meet this challenge, our duty is to recognize and work *with* "problem" behaviours in a young person's quest for success.

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Resources and Links

The International Resilience Project (IRP) is an international research project that is using different types of research methods to examine what helps children and youth cope with the many challenges that they face in life. It looks at this from the perspective of youth, elders and others in each community that participates. The project is working with children, youth, and elders in 11 countries and on five continents around the world.
http://www.resilienceproject.org/

ResilienceNet provides the single, most comprehensive world-wide source of current, reviewed information about human resilience http://resilnet.uiuc.edu/

The Reaching In…Reaching Out Project is based in Ontario and takes new human knowledge about resiliency promotion and adapts and evaluates the Penn Resilience Program (PRP) school-age model for use with children six years and younger. The PRP is based on many years of systematic research on depression prevention by Dr. Martin Seligman and his colleagues at the University of Pennsylvania. This program helps children learn to **Reach In** to think more flexibly and accurately and to **Reach Out** to take on new opportunities. http://www.reachinginreachingout.com/

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Michael Ungar, Ph.D. is both a social worker and marriage and family therapist with experience working directly with children and adults in mental health, educational and correctional settings. Now an Associate Professor at the School of Social Work at Dalhousie University, Halifax, Canada, he continues to supervise and consult extensively with mental health professionals in Canada, the United States and overseas. He has conducted many workshops internationally on resilience-related themes relevant to the treatment and study of at-risk youth and has published dozens of peer-reviewed articles on resilience and work with children and their families. He is also the author of three books: *Playing at Being Bad* (Pottersfield Press), a book for parents; *Nurturing Hidden Resilience in Troubled Youth* (University of Toronto Press), a book for family therapists; and an edited volume, the *Handbook for Working with Children and Youth: Pathways to Resilience Across Cultures and Contexts* (Sage Publications). Dr. Ungar holds numerous research grants from national funding bodies and is a collaborator on several international research projects. Currently he leads a study titled: "Methodological and contextual challenges researching childhood resilience: An international collaboration" that includes researchers from 11 countries on five continents.

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