Demystifying 'resiliency' and exploring how to assess and enhance the adaptive self-capacities of youth with disabilities

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Background

A holistic, life-course approach to pediatric rehabilitation and care considers how to support and prepare children and youth with disabilities to navigate unique environmental or contextual challenges (e.g., participation restrictions, transition issues) in addition to addressing their biomedical needs and goals (e.g., improving function, reducing impairment).

Resiliency is the process of adapting to challenging circumstances in life.

Context-specific interventions that foster the development of **resilient** capacities and mindsets can prepare children and youth to navigate adversities commonly experienced in pediatric rehabilitation contexts. However, no measure of such self-capacities and mindsets currently exists.

Objective

Our resiliency framework (King et al., 2018) outlines four 'adaptive selfcapacities', or ASCs, associated with empowered, optimistic, adaptive, and hopeful mindsets in pediatric rehabilitation contexts:

- 1) activity self-efficacy,
- 2) the capacity to marshal resources and supports to achieve goals,
- 3) the capacity to adapt to changing life situations, and
- 4) the capacity to envision a positive future.



We are now developing a new **Resiliency-related Adaptive Self-Capacities (RASC) measure to** assess resiliency-related adaptive self-capacities specific to pediatric rehabilitation contexts.

Developing resilient self-capacities and mindsets may support children and youth with disabilities to navigate adversity and adapt to challenges

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Methods and Progress

- Integrated KT (iKT) approach: multidisciplinary team from 4 universities and from 4 service organizations.
- that support the development of resilient mindsets.

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Resiliency-Related Adaptive Self-Capacities

RASCs are characteristics that help a person adapt to challenges in life. These four adaptive ways of feeling, thinking, and acting include:





or continuing to strive, and either **readjusting** goals or continuing to

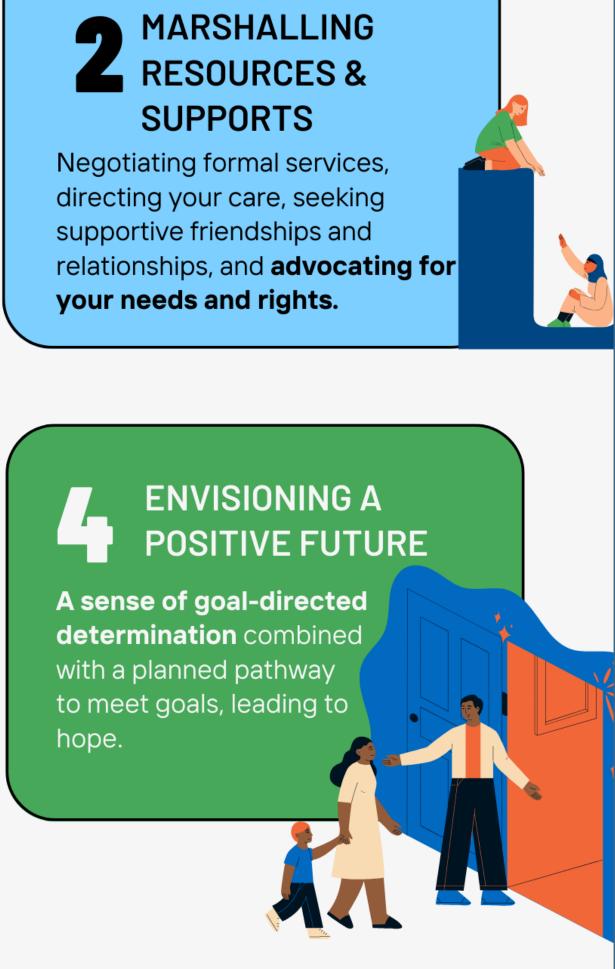
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composed of researchers and knowledge user partners **Research Phase 1:** Clients with disabilities, caregivers, and service providers have described factors and processes Preliminary draft: Pilot version of RASC measure created.

Next Steps

- RASC measure's psychometric properties.
- transitions programs; King et al., 2018).





Research Phase 2: Next, we will collect data on the We will also examine the RASC's ability to capture change in ASCs after children/youth participate in clinical programs that are likely to enhance resiliency (e.g., life skills, therapeutic recreation, and