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Revisiting Childhood Resilience Through Marginalised and Displaced Voices

Revisiting Childhood Resilience Through Marginalised and Displaced Voices

Perspectives from the past and present

Wendy Sims-Schouten



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Contents

	st of figures and boxes	vi
A	cknowledgements	ix
1	Introduction: counter-voices of resilience	1
2	Waifs, strays and care-experienced young people: compliance, defiance and morality	21
3	Eclectic resilience: child migration through children's eyes	45
4	Bullying and resilience within a neoliberal framework	75
5	Resilience in light of discrimination, stigmas and othering	99
6	Resisting internalised failure and deficiency: (specific) learning difficulties and differences in children and young people	123
7	Intergenerational/transgenerational trauma, lived experiences and resilience	147
8	Eclectic resilience: tell me your story!	173
	eferences dex	193

List of figures and boxes

Figure	S	
3.1	Self–Other constructions of belonging	63
3.2	'Survivors guilt' and 'Never feeling fully English'	64
3.3	'Worried', 'Confused', 'Frustrated' and 'Feeling indecisive'	65
3.4	Pets as a support system	67
3.5	Positive experiences and emotions	68
3.6	Happy events and memories	69
6.1	Young person's doodle	139
Boxes		
4.1	Newspaper reports into bullying, from case file 15491	85
7.1	'German Jews pouring into this country'	163

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Introduction: counter-voices of resilience

Be more resilient!

While completing my PhD, back in 2004/2005, I taught psychology in a number of local secondary schools in the Southwest of England. On one occasion, after explaining that I saw myself as an advocate for wellbeing, two boys came up to me. They told me they had been the unfortunate focus of bullying for a number of years, always outside the school, at the end of the day, when other kids threw rocks at them calling them the 'nerdy twins'. I asked if they had addressed this with other teachers (this was my first session with them) and they said they had, but were told to 'be more resilient', and that they were 'big, tall boys', plus there were two of them, so surely, they could deal with this themselves. I took the bullying issue to one of the Assistant Heads, who was overseeing safeguarding and pastoral care in the school. Two days later, the Assistant Head approached me and told me that he had caught kids in the act of throwing rocks at the boys after school and had dealt with the issue. The boys also approached me, saying that following the intervention of the Assistant Head, the bullying had stopped, thanking me for taking this further.

This experience made me ponder the concept of 'resilience', how it is used and viewed. Years later, when embarking on a study of bullying in schools, I was once again confronted with this, when teachers were discussing resilience in terms of 'manning up' (Sims-Schouten and Edwards, 2016). Moreover, I observed flawed perceptions of resilience in other settings, such as social work and social care, and in practice with children from marginalised, disadvantaged and displaced communities (e.g., Sims-Schouten and Hayden, 2017; Sims-Schouten, 2021a; Sims-Schouten and Thapa, 2023). For example, between 2017 and 2022 I worked with a charity supporting children, young people and adults

who had been on the receiving end of racism. One girl from a mixed-race background was mocked for having 'messy hair' and told to 'go back to your own country', yet, when resisting this treatment by shouting back, she was the one who got blamed for being aggressive, rather than resilient (Sims-Schouten and Gilbert, 2022).

In addition, my historical and contemporary research of children who were taken into care between 1880–1918 and 2015–22 highlights that children who resist(ed) the care system and challenge(d) care decisions were and are treated as poorly behaved, and lacking in resilience (Sims-Schouten and Riley, 2019; Sims-Schouten 2021; 2022). Finally, my research regarding historical 'child rescue' and migration schemes, such as the pre-WWII (mostly Jewish) child rescue scheme, the Kindertransport, and the Windrush (named after the HMT *Empire Windrush*, which has become symbolic of the generation of Commonwealth citizens who came to live in the UK between 1948 and 1970), show examples of great resilience on the part of the children in the schemes, yet this was rarely acknowledged (Sims-Schouten and Weindling, 2022). Take for example, the story of a former Kindertransport child (see Chapter 3), whose attempt to comply and fit in with her foster family in the UK fell on deaf ears – instead, she was treated as 'difficult to handle', rather than resilient:

They said 'do you play the piano' and I said 'Oh yes!', thinking they might like me more – so they asked me to play and I could not play, I was tone deaf and felt foolish for saying I could play and they were not impressed and told me I lied.

Thus, resilience needs rethinking. This book is the culmination of 10 years of research and publications around childhood resilience, and draws upon data collected from and coproduced with children, young people and adults from marginalised, disadvantaged and displaced communities. Not only are their voices included in the various chapters of this book, their voices, opinions, thoughts and feedback also played a crucial role in shaping the book itself, as without their feedback and ongoing input this book would be meaningless!

One hundred years of resilience research and practice

Resilience, defined as 'the dynamic process that leads to positive adaptations within the context of significant adversity' (Werner and Smith, 2001, p. 3), first used by Werner in the 1970s, has become a popular term

in research and practice with disadvantaged and marginalised groups, centralising the role of 'positive emotions', 'successful traits' and coping mechanisms in adapting to life despite great odds. Although not used in research and practice until the 1970s, there are examples of associations with resilience in earlier publications, such as the books *Self-Help* and *Character* published by the Scottish author and government reformer Samuel Smiles in 1859 and 1871 respectively.

Recent scholars who advocate resilience in their research (e.g., Luthar et al., 2014; Masten, 2019; Rutter, 2012; Ungar and Theron, 2020) are driven by three core questions – 'What are the challenges?', 'How is the person doing?' and 'What processes support success?' resulting in numerous resilience scales/questionnaires/tools, as well as informing early intervention practices with vulnerable children. Yet, the term resilience has also provoked scepticism, and at present there is little consensus on the referent of the term, standards for its application or agreement on its role in explanations, models and theories (Hart et al., 2016; Siller and Aydin, 2022). Some of this is linked to the fact that key terms, such as 'success' and 'positive adaptations', are not clearly defined, other than being measured in terms of education success, an 'ability to achieve goals' and having a 'positive attitude', to name a few, whilst 'resistance to change' and 'disordered behaviours' are equated with a lack of resilience. Within this, the emphasis is on individual responsibility at the expense of systemic oppression. An added element is that resilience research is largely located within psychology and public health disciplines, framing this through (deficit) models of health and abnormality. In this section I will provide an overview of resilience research, including the meaning of resilience, and how this has been applied in research and practice with children, in Western and global contexts.

Resilience research: processes, outcomes and protective factors

Werner's seminal research and first known study on resilience in children, taking place in the 1970s, was centred on a group of deprived children in Hawaii whose parents were alcoholics and had mental health problems (Werner and Smith, 2001). Werner and Smith (2001) found that two-thirds of the children who grew up under those circumstances showed 'destructive' behaviour, while one-third demonstrated more 'positive' traits; they called the latter group 'resilient'. Here the 'positive traits' of the 'resilient' children were described in terms of particular individual characteristics that they exhibited, namely they were 'reflective' rather

than 'impulsive', they used 'flexible' coping strategies to overcome adversity and were liked by peers and adults.

Since Werner and Smith's seminal work, significant research has been undertaken on childhood resilience (e.g., Garmezy, 1991; Luthar et al., 2014; Masten, 2019; Rutter, 2012; Ungar and Theron, 2020), mostly with a focus on 'positive emotions', 'successful traits' and coping mechanisms that allow children and young people to be more or less resilient in the face of adversity. That is not to say that other meanings of resilience have not been debated. For example, Ungar (2004b) highlights that 'problem behaviours', rather than 'positive emotions' may well be children's hidden pathways to resilience. Yet, what this entails, for example, in light of resistance and defiance as possible resilient strategies, has gained little attention and traction in research. Since the 1970s there have been several waves of resilience research and theory, each building on the other. The first wave focussed on the individual, and on descriptions of resilience and related methodologies; the second wave adopted a developmental systems approach to theory and research; the third wave was directed at interventions with a focus on changing developmental pathways; the fourth wave integrated multiple levels and systems, including epigenetics, biology and culture (Masten, 2019; Wright et al., 2013).

The role of resilience has become increasingly prominent in the fields of psychiatry, psychology and education. For example, Rutter, described as the 'father of child psychiatry', established several principles for resilience theory based on his extensive research (Rutter, 1993; 2007; 2012; 2013). One of Rutter's principles was that childhood resilience is not related to individual psychological traits or superior functioning, but is instead a form of adaptation occurring when a child is presented with the 'right' resources, referring to external support available in their environment. He also noted that individual differences between children and young people in resilience may be due to genetic effects, making some children more or less susceptible to environmental change or physiological responses to environmental hazards. Yet, he stressed it is the environment, and not the child, that is the catalyst for these differences, and rather than looking at 'coping in light of adversity' as a one-off event, Rutter (2012; 2013) adopted a lifespan approach to resilience. The latter meant he acknowledged that resilience may be more or less evident at different times in one's life or in relation to different events (Rutter, 2007). For example, a child might show resilience in light of the death of a parent or grandparent, but less so when it comes to failing academically or vice versa.

Like Rutter, Luthar also asserted that resilience 'is never an acrossthe-board phenomenon' (2006, p. 741). The latter refers to the fact that resilience, as a process, is dependent on context, referring to broad social/ environmental conditions such as socioeconomic status, geography, culture and so on (see also Fleming and Ledogar, 2008). Resilience research is centred on the processes to achieve this and the role of protective factors, as well as outcomes - although the latter is less clearly defined, other than referring to success and adaptation. Protective factors are generally conceptualised as mental features/operations (planning, selfcontrol, self-reflection, sense of agency, self-confidence) within the child, as well as social relationships, including parental warmth as an external protective factor. Both are viewed as intersecting and leading to having control and success in changing events. For example, Rutter (2012) suggested that it may be the individual's mental features that alter how they deal with adversity, rather than any possible protective environmental effects. 'Resistance' is also discussed in resilience research, not as a form of resilience, but rather in relation to how particular protective factors interact with risk factors and with other protective factors to support relative resistance. For example, Rutter highlighted that exposure to lowlevel risk can lead to better resistance and coping, as opposed to avoiding low-level risk factors (2013).

Taking an ecological view of resilience, Garmezy (1991), clinical psychologist and founder of the longitudinal study into positive outcomes in at-risk children, Project Competence, contended that protective factors at the individual and familial levels, and external to the family, all influence resilience, with a focus on stress resistance and competence. Again, resistance is included in the process of being or becoming resilient, rather than as a possible expression of resilience. Garmezy developed three models that explained resilience (Garmezy et al., 1984). Firstly, the compensatory model, where stressors that lower competence are compensated by personal attributes and external relationships. For example, a child may experience a high-conflict home environment and a warm, close relationship with a grandparent, where the latter compensates for the home environment. Second, the protective versus vulnerability model (immunity vs. vulnerability), which is centred on the interactive relationship between stressors and personal attributes, whereby the association of stress with the outcome varies depending on the level of the attribute under consideration. For example, a child living in poverty may have a cohesive home environment which interacts with the poverty to decrease risk. Finally, the challenge model, which suggests a curvilinear relationship between stressors and adjustment, suggesting that some

stress is helpful for children and young people as it can develop coping skills and encourage them to mobilise internal and external resources.

In recent years, increased concerns regarding the consequences of disasters, political violence, disease, malnutrition and maltreatment on children and young people's wellbeing have sparked an interest in a more integrated and global science of resilience (Miller-Graff, 2020; Pillay, 2023; Popham et al., 2022; Theron, 2020). The latter coincides with a move towards a focus on resilience as a dynamic relationship between the individual and their social and cultural context, suggesting that while there may be certain traits, skills and attitudes associated with resilience, these are also mediated by the environment in which they occur (Rose and Palattiyil, 2020). Below I will discuss this further.

Resilience in a global context

Discussing resilience from a developmental systems perspective, Masten (2019) argues that resilience research is now more multidisciplinary, multilevel and developmental than ever before, with profound implications for defining and investigating resilience, as well as for translating evidence into practice. Currently there are many resilience tools and surveys in place that measure children's positive adaptation (including positive emotions and relationships) in light of adversity, which have been tested and refined through randomised trials. Variations in the way children at risk for psychopathology achieve different outcomes, and the fact that many individuals with risk factors for mental health problems (e.g., maltreatment, poverty) nonetheless develop well, are the starting points for resilience interventions, with the aim to mitigate risk and promote positive development (Cichetti, 2016). Yet, within this the meaning of positive adaptation and 'developing well' remains elusive. Instead, the focus is on protective factors and the fact that the capacity of a developing child to respond to challenges and adversities depends on a range of protective factors, varying from neurobiological stress-regulation systems to families, schools, community safety and healthcare systems, and numerous other sociocultural and ecological systems (Garmezy, 1991; Rutter, 2012).

Masten (2014; 2019), like others before her, stresses that it is important to acknowledge that resilience of an individual is not limited to the capacity that a person can muster alone, as much of human resilience is embedded in relationships and social support. Here, resilience reflects resources and processes that can be applied to restore equilibrium, counter challenges or transform the organism. Yet, although Masten indicates

that definitions of resilience have evolved to reflect insights on developing systems, the definition that she describes as the current one, namely 'the capacity of a system to adapt successfully to disturbances that threaten the viability, function, or development of the system' (Masten, 2018, p. 1), does not differ much from the one proposed by Werner and Smith in the 1970s.

Examples of other frameworks, models or theories that have been applied to childhood resilience include Bronfenbrenner's bio-socialecological systems model of human development as well as Seligman's positive psychology (Bronfenbrenner, 2005; Seligman, 2011). The first highlights the benefit of a multisystemic understanding of personenvironment reciprocal processes in making sense of childhood resilience, with a focus on: (1) equifinality (the fact that there are many proximal processes associated with expressions of human development and wellbeing). (2) differential impact (referring to the nature of the risks children face, as well as their perceptions and quality of the resources available to mitigate those risks), and (3) contextual and cultural moderation (i.e., different contexts and cultures provide access to different processes associated with resilience as it is defined locally) (Ungar et al., 2013). The second, positive psychology, emphasises the study of human strength and virtue with the aim of understanding and facilitating positive developmental outcomes, with a focus on the study of positive emotions (e.g., joy and hope), positive character (e.g., creativity and kindness) and positive institutions (e.g., family, communities and the workplace) (Seligman, 2011). Whilst most resilience research presupposes exposure to extreme adversity, positive psychology concerns all individuals, not just those who have experienced major risks (Luthar et al., 2014).

In recent years there has been a rise in research looking at applications of resilience theory to different global contexts, placing special emphasis on the psychological, social and physical ecologies for child resilience globally (Asante, 2019; Dow et al., 2018; Popham et al., 2022; Ungar and Theron, 2020). At the forefront of this movement is the understanding that resilience is driven both by intrinsic factors of the individual, and factors that exist in the individual's contextual realities, including the cultural norms that influence their resilience processes. The latter requires engagement with the varied contexts of children and young people, including how resilience processes may differentially impact them, depending on these unique contexts (Theron, 2020).

Children live in a complex world, surrounded by global concerns such as climate change, economic instability, threats of terrorism and war, and may face different challenges based on their global context. For example, children in South Africa may face several additional challenges, compared to Western children, such as exposure to HIV/AIDS and high levels of orphanhood (Isaacs et al., 2018; Pillay, 2023). Moreover, while in Western and Eurocentric contexts prominence may be given to the psychological constructs of self-regulation and self-efficacy to promote individual agency of children, in non-Western contexts, psychological empowerment of children may lie in the interaction between children and their social and cultural context (Abdullay et al., 2020; Theron, 2020). Faith (also referred to as spirituality and religion) can be an important factor here as well (Mhaka-Mutepfa and Maundeni, 2019). Global research highlights the need to investigate the intricate and relevant interconnections between the psychological, familial and religious value of the child, in resilience development longitudinally (Qamar, 2022; Sahar, 2012).

The latter also has implications for resilience interventions. Given that most of the resilience literature tends to focus on Western contexts, it is imperative to acknowledge that applications and interventions may have limited applications for policy and preventions in non-Western societies. For example, in an African context, interventions to promote child resilience place more emphasis on the external role of caregivers, families and local communities, while in a Western context, the focus is more on the internal focus of control (Abonga and Brown, 2022; Masten, 2018; Pillay, 2023). This means that from an African perspective child resilience may depend more on the people and society they interact with.

Thus, child resilience interventions must take psychological, social and physical ecologies into consideration. Not only that, interventions should also be embedded within individuals, relationships, communities and society, and include not just parents and family but also teachers, religious leaders and community-based organisations (Qamar, 2022; Mhaka-Mutepfa and Maundeni, 2019). Studying resilience in an Asian context, Yeung and Li (2021) stress the importance of education as a key vehicle for individuals' social mobility, and highlight that factors from the school, home and community may increase students' chances of success by buffering the effect of some of the stressors from family on academic and personal success. The latter is supported by Zhu et al. (2023) who studied resilience and adverse childhood experiences in young Chinese children, highlighting that age-specific interventions should be provided to enhance young children's resilience when exposed to adversity.

It is clear that while some define resilience based on available resources, others focus on developmental outcomes of a putative process of resilience (i.e., manifested resilience, see also Miller-Graff, 2020). Yet, the process and outcome of adapting to adversity can take different trajectories and forms, including how 'positive outcomes' are conceptualised. It is here, where voices from children and young people from marginalised, disadvantaged and displaced communities are seldom heard. Instead, resilience research remains *about* the child and young person, rather than *with* the child and young person; other than asking them to fill in standardised questionnaires, surveys and self-reports in relation to resilience, their voices are largely absent from core definitions and conceptualisations of resilience (Sims-Schouten and Gilbert, 2022; Joseph-Salisbury, 2018).

The paradox is that resilience may be equally present in children and young people labelled as 'dangerous', 'delinquent', 'deviant' and/or 'disordered'. Yet the focus on positive adaptations and adapting successfully in current definitions of resilience leaves little room for nuance, the possibility that resistance and defiance may be alternative forms of resilience. Instead, the behaviour of the child/young person is being judged, and their capacity to develop resilience within this is not recognised. There is a need to revisit resilience, centralising voices, stories and memories from children from marginalised, disadvantaged and displaced communities. Which is what this book aims to do.

Tell me your story! A need to revisit resilience research and practice

Resilience as a concept has been the property of researchers with a specific focus on defining a particular set of outcomes, behaviours and processes as indicative of wellbeing and orientation to life, as can be seen from the previous section. Within this, marginalised and displaced children's voices are seldom heard – instead practitioners and researchers make judgements about their behaviour, capacity, capability and adaptations within the context of adversity (which is defined as resilience) (Moss et al., 2020). One of the ongoing challenges in resilience science, which the current book tackles, is developing definitions that reflect the dynamic complexity of the concept, including defiance, resistance and compliance as resilient acts, placing marginalised and displaced children's (counter-)voices, stories and memories at the centre.

INTRODUCTION

Viewing children as agents and experiencers and treating childhood as personal, fluid and relational, recognising the inherent interdependence of children's worlds, this book engages with two core questions:

- 1. What can over 100 years of children's voices, memories and experiences tell us about resilience?
- 2. What role can children's (counter-)voices play in revisiting resilience and coproducing new thinking around resilience?

My previous research (e.g., Sims-Schouten and Edwards, 2016; Sims-Schouten, 2021b; 2022) highlights that childhood resilience research and practice are linked with capabilities and compliance, emphasising individual responsibility in the context of systemic oppression. Marginalised, disadvantaged and displaced children who adopt 'resistance' and 'defiance' strategies in the face of adversity and discrimination are often accused of behaving badly and considered to be lacking in resilience. For example, my research on homeless and/or parentless young people sent to Canada by the Waifs and Strays Society as part of the British Home Child scheme (1883–1937) highlights how children/young people who resisted the care system and emigration, by running away and 'behaving badly' (such as 'being rude' and 'disruptive'), were described as lacking in stamina, self-control and with no strength of character, all traits linked to lack of resilience (Sims-Schouten, 2022).

Similarly, my research highlights that in relation to the Kindertransport, the focus was largely on the end result, how children survived with a focus on 'being grateful' (for being rescued), rather than how they coped (Sims-Schouten and Weindling, 2022). The expectation was that they would make themselves useful, help in the household and behave well with little margin for resistance and defiance, and children who did not conform were labelled as 'difficult to handle' (see also Homer, 2020).

Furthermore, research and archives regarding the Windrush migration scheme highlight how Windrush children were often stigmatised and labelled as 'withdrawn', 'uncommunicative' and 'acting out' upon arrival in England (Crawford-Brown, 1999; Lowenthal, 1972). A more recent example of research undertaken during the Covid-19 pandemic highlights how through racism and flawed perceptions and interpretations of resilience and 'othering', children from minority ethnic groups were defined as lacking and in need of resilience support, whilst at the same time their experience of structural racism, for example, in relation to mental health support, social/healthcare practices and school exclusions, was ignored (Phoenix, 2020).

Thus, displaced and marginalised communities are frequently positioned within a lower social class/hierarchy, and the inherent construction of them as victims at best and cultural and security threats at worst, not only assists in their dehumanisation, it also legitimises actions taken against them through the perpetuation of a particular discourse on the *Self* and the *Other*, leading to discrimination, labelling and racism (Crafter and Iqbal, 2022; Hopkins et al., 2018; Kootstra, 2016; Saijad, 2018).

I bring together and centre historic and contemporary marginalised, disadvantaged and displaced children's voices, stories and memories of coping in light of displacement, migration, bullying, racism, discrimination, learning difficulties/disabilities and intergenerational/transgenerational trauma. I argue that there is a need to acknowledge that resistance, defiance and (non)compliance may be pathways to resilience in circumstances where children/young people are not heard, listened to or taken seriously, reflecting agency, identity and ownership of their own life and choices within this (Waechter et al., 2019). I address three structural gaps: 'absence' (under-representation, and lack of engagement with children's voices/experiences), 'difference' (stigmatic labelling, e.g., in relation to poverty, ethnicity, character and self-control) and 'threat' (in relation to 'bad behaviour' and 'undesirable traits') (see also Chauhan and Foster, 2014).

It is a commonly held belief that the concept of childhood did not emerge until the eighteenth and nineteenth centuries, and that the twentieth and twenty-first centuries are 'centuries of the child' (Prout, 2019; Stryker et al., 2019) – but is that true? Within contemporary society the needs of the child supposedly take central place in policy and practices of welfare, medical and educational institutions. Yet, any complacency about childhood and children's in society is misplaced, as the very concept of childhood has become problematic during the last few decades (Stryker et al., 2019; Thomas, 2019). Some even argue that 'childhood is disappearing' (Hendrick, 1997; Spyrou, 2019).

Debates about child protection, safeguarding, and mental health and wellbeing are now deeply embedded in discourses about childhood—what it is, what it means (Cradock, 2014; Stryker et al., 2019). Yet, the dominant overarching image of the 'vulnerable child' that is implied here does not allow any room for a more nuanced understanding of the experiences of individual children, such as behaviours resulting from trauma, neglect, disadvantage and displacement (Morgan, 2020). As such, the taken for granted and expected innocence and vulnerability of children is central to the overarching discourse, and fails to consider the muddled category of childhood, youth or adolescence (McLaughlin, 2018).

Embracing interdisciplinary inquiry, grounded in critical realist childhood wellbeing research, centralising historic and contemporary voices (Sims-Schouten, 2021b; Sims-Schouten et al., 2019), the power of story research (Phoenix, 2020; 2023) and affective/empathic phenomenology (Stein, 2000), I will provide new ways of looking at resilience. Foregrounding marginalised, displaced and disadvantaged children and young people's counter-voices of resilience, I thus facilitate autonomy, power and influence, stimulating memories of the previously forgotten beginning with one question: *Tell me your story!*

An interdisciplinary research framework: critical realism and empathic/affective phenomenology

Drawing on Edith Stein's (2000) radical intersubjective phenomenological concept of empathy and affect, namely 'to feel within' what the other 'I' is experiencing from a first-person perspective, I investigate stories, memories and voices of childhood resilience as meaningful experiences that can both transpire between people, and within persons. Moreover, grounded in the critical realist stance proposed by Bhaskar (1989) and developed in my own research (Sims-Schouten and Riley, 2014; 2019), I apply retroductive reasoning, testing proposed explanations for counternarratives and making (nonlinear) inferences about underlying structures/mechanisms that may account for the phenomena involved.

Critical realism is useful when it comes to revisiting and redefining resilience as it highlights how the world is differentiated and stratified and that in order to make sense of social life, we must engage with and understand the interplay between human agency (meaning-making, motivations, intentionality) and social structures (enduring patterns, social rules, norms and laws) (Bhaskar, 1989; 2014). I will discuss this further below.

Childhood resilience through a critical realist lens

Critical realism, an ontological framework introduced by Roy Bhaskar (1989; 2014) provides an interdisciplinary opportunity to shed light on interpretations and applications of resilience. It does so through the search for generative mechanisms and causal factors, which combined might have influenced a phenomenon over time and within this stimulating particular outcomes and practices. Here critical realism's central premise is to promote awareness as a key strategy, providing fundamental

insight into the causal factors in the individual agent, the cultural sphere and the wider society. Within this, causal or generative powers are key, which are regarded as necessary tendencies of agents, social contexts and structures, that may or may not be activated depending on conditions. From this vantage point, it is imperative to view 'childhood resilience' through the intersection between embodied (e.g., trauma, mental health and wellbeing), material (e.g., access to funding and resources) and institutional realities (e.g., the power of organisations and governments) as causal and discursively mediated factors. This involves centralising the lived experiences of children and young people from core and affected communities and groups at a range of levels, namely the 'real' (exploring causal mechanisms of events), the 'empirical' (experienced events) and the 'actual' (events and processes that occur) (Bhaskar, 1989; 2014).

Contemplating childhood resilience, this means taking account of the following. Firstly, causal factors and generative mechanisms in the individual and community, for example, in relation to (intergenerational) trauma, wellbeing, racism and discrimination (referred to as the real). Second, culturally embedded understandings of resilience, and how children from a range of communities make sense of this (the empirical, also referred to as the 'experiential'). Third, practices and support mechanisms currently in place, both supportive ones as well harmful perceptions, processes, stigma, bias and racist viewpoints and practices currently in place (the actual). Critical realism adopts an interdisciplinary approach, combining a general philosophy of science with a philosophy of social science to describe an interface between the natural and social worlds. As such, whilst proposing that there is an (objective) world that exists independently of people's perceptions, language and imagination, critical realism also recognises that part of that world consists of subjective interpretations that influence the way in which the world is perceived (Vincent and O'Mahoney, 2018).

It is here that critical realism provides a middle way between relativism and naïve realism. While the first views all accounts as equally valid, thereby negating the possibility of distorted perceptions tainted by bias and misconceptions, the latter assumes simplistically and erroneously that we can observe and measure aspects of reality in a nonproblematic way. Instead, the tenets of critical realism encourage a focus on the interaction between structure and agency in stratified entities, viewing context or situational influences as crucial to an understanding of processes and emergent outcomes. Here deeply embedded structures and practices are viewed in light of the stratified nonlinear dynamics of embodied experiences, material/institutional forces and social relationships,

that co-constitute subjectivity, as well as having an ongoing influence on body-brain systems (Bhaskar, 2014). This is different to the focus on generalisable laws postulated by positivists, or the emphasis on lived experiences or beliefs of social actors inherent in interpretivism.

Yet, whilst critical realism provides an interdisciplinary lens through which to view childhood resilience, bringing together knowledge from humanities and social sciences, it has also received some criticism. One such criticism is that critical realism employs a dualist perspective in which causal mechanisms (i.e., nondiscursive factors) are associated with 'closed' systems while actual concrete events operate in 'open' systems (Bhaskar, 2014; Scambler and Scambler, 2015). In response to this, Bhaskar introduced the concept of 'dialectical critical realism', suggesting that there is continuous and mutual interaction and feedback between individuals, dyads and social systems, which also includes historical processes and concrete events (Roberts, 2014; Scambler and Scambler, 2015). In line with this, Bhaskar (1989; 2014) refers to the importance of 'absence', that is, the fact that looking at what is missing in a social context or entity/institution/organisation provides insight into how that situation is going to or needs to change. In addition to this, he refers to the 'epistemological dialectic', which represents inconsistencies in cognitive or practical situations, suggesting that something has been left out of the theoretical or practical mix. It is these issues that I contend are important when revisiting childhood resilience.

Affective and empathic phenomenology: 'to feel within' what the other 'I' is experiencing

Linking the above to Edith Stein's (2000) affective and empathic phenomenology, which centralises sensations and sensibilities in meaning-making, I will provide contextual and temporal insights into resilience, centralising over 100 years of counter-voices, memories and experiences of children from marginalised, disadvantaged and displaced communities. Stein (2000), a phenomenologist and philosopher, highlights how meaningful experiences can transpire both between people, and within persons. She describes the first as a 'mental phenomenon', referring to the 'sameness of meaning' requiring an interpersonal matrix, and the second as a 'sentient phenomenon', referring to sensations, sensibilities and emotions that require an intrapersonal matrix (Stein, 2000, p. XIII). Furthermore, Stein refers to the 'influence of simultaneously occurring experiences' (2000, p. 14). This can be seen to be at play in the causal conditionality of experiences; here Stein makes a distinction

between mechanical causality and experiential causality (Stein, 2000, p. 15). Mechanical causality refers to originating and originated occurrences – here an originating occurrence, such as the movement of a ball, triggers an originated occurrence, like the movement of a second ball. Yet, these events are themselves subject to the determination and effect of both events/occurrences, as well as the particular kind of 'substrate' of the events. Experiential causality on the other hand refers to a shift entering the life sphere – here it is the life feeling, the 'experience' of the moment, that corresponds to the originating event, leading to originated experiences.

Reframing resilience thus means taking account of multifaceted and interactive effects of personal, material, institutional and political factors that impact on behaviour, wellbeing and resilience, as well as acknowledging that the way in which 'behaviour' is received is by default flawed, if this is largely informed by an oppressive White middle-class and male viewpoint. From this vantage point, it could be argued that resilience can also mean resistance, for example, resisting bad treatment and racism, as well as reflecting agency, identity and ownership of one's own life and choices. Here, in addition to asking core questions posed in resilience research, namely 'What are the challenges?', 'How is the person doing?', 'What processes support success?', I ask how the issues are experienced by individuals, what their underlying social realities and identities are, and how they define 'coping in light of adversity' (Sims-Schouten, 2021b). I refer to this as 'eclectic resilience', which embodies the dynamic complexity of childhood resilience, including defiance, resistance and compliance as resilient acts, placing marginalised and displaced children's (counter-)voices, stories and memories at the centre.

Thus, in my analysis of the various datasets presented below, I draw on interdisciplinary ontology grounded in the critical realist stance proposed by Bhaskar (1989) and Stein's (2000) work on the interface between the material, personal world and causal constraints. Using 'power of story' inquiry I analyse historic and contemporary voices from children and young people from marginalised, disadvantaged and displaced communities and draw out examples of eclectic resilience. Power of story inquiry involves taking account of 'plot', 'causality' and 'consequence' within this, including power, values, positioning and agency (Haste, 2014; Phoenix, 2022). The starting point is that a story never 'is', but always 'becomes' as we perceive it. This involves awareness of the incompleteness of any storyline or narrative mode, taking this incompleteness – the becoming of the story – as its actuality, and rather than perceiving this as a defect, recognising its intrinsic transitionary

force: a process. Within this, 'process' should not be understood as a procession of forms – beginning, middle and end – but rather as 'forms of process': 'we' become subjects as situated writers/readers/tellers/listeners within the premises of a story and when we move away, we 'become other' (Tamboukou, 2016). It is in the interplay of positive and negative prehensions that narratives are felt, and it is possible to feel the force of a story without necessarily following a sequence of events or statements. Below I provide an overview of the chapters and related datasets.

Chapters and datasets: over 100 years of children's voices

This book addresses the gaps in childhood resilience research, discussed above, such as the fact that there is little consensus on the referent of the term and lack of clarity regarding key terms, such as success and positive adaptations. Some of this is down to the fact that resilience research is largely about, rather than with, children and young people from marginalised and disadvantaged communities. Centred around a number of core chapters, I will provide an in-depth critical analysis of applications and interpretations of resilience that cuts through historical and contemporary narratives around safeguarding, wellbeing and disadvantage. Taking my own research as a starting point, I will shine a light on over 100 years of displaced and marginalised children's voices and experiences in relation to resilience. Centralising disadvantaged and marginalised voices from the past and present (such as care leavers, young people who have been bullied, members from minority ethnic communities, children with learning difficulties/disabilities and former child migrants/refugees) this book revisits and redefines resilience by including notions such as defiance and resistance (e.g., resisting racism), as well as 'compliance'.

Each chapter draws links between historic and contemporary voices, practices and perceptions, with the aim to provide a broad overview of coping mechanisms and strategies and propose/provide a new way of looking at resilience. Moreover, each chapter ends with a reflection on applications and implications for practice. It should be noted that it is not the aim of this book to provide a detailed overview of the topics at hand (i.e., social work, child migration, bullying, racism, learning difficulties and trauma); instead, I provide news ways of looking at resilience within the areas researched. Below is an overview of the datasets drawn upon in the chapters. Ethical approval has been obtained for all

the research, which includes informed consent from the participants (and their guardians, where relevant), as well permission to use the data for further research and publications.

Chapter 2: Waifs, strays and care-experienced young people: compliance, defiance and morality

This chapter compares historical data and practices relating to children in care in the UK, encompassing 1881–1918, with contemporary data and practices, drawing on archival data from the Waifs and Strays Society, a philanthropic 'child rescue' organisation established in 1881 (currently known at the Children's Society) and contemporary interviews with care-experienced young people. Drawing on two datasets – first, 108 historic children's case files from the Children's Society, highlighting the perception of custodians, doctors, professionals, as well as children and parents; and second, current data from 42 interviews with young care leavers and safeguarding practitioners, collected between 2015 and 2022 – this chapter centres resilience of the most disadvantaged children with complex needs and damaging (pre)care experiences.

Chapter 3: Eclectic resilience: child migration through children's eyes

The chapter centralises historic and contemporary narratives in relation to child migration, drawing on a range of sources. Firstly, archival data from the Wiener Library in London, as well as books, articles, newspaper items in relation to the Kindertransport and Windrush migration schemes. Second, semi-structured interviews and multisensory activities with children and adults undertaken between 2016 and 2023, as follows. Firstly, I undertook one semi-structured interview with a former Kindertransport child, aged 94 years old, in 2023, as well as 20 interviews with members from minority ethnic communities in the South of England (between 2016 and 2023). Secondly, a total of 56 children, aged 10-16 years old (mixed gender and ethnicity), from four schools across the South of England participated in interviews and multisensory activities, including doodling, listening, touching and looking at objects, artefacts and memories of former child migrants linked to the Windrush and Kindertransport schemes. Three of the schools were secondary schools and one was a primary school. All schools were state schools and of the three secondary schools one was a school for children with autism. It should be noted that none of the children who participated in the study were child migrants themselves.

Chapter 4: Bullying and resilience within a neoliberal framework

This chapter draws on historic archival data, namely letters from children, carers and educational officers between 1880 and 1920, collected from the Children's Society Archives (formerly known as the Waifs and Strays Society; see also Chapter 2), England's largest children's charity, and contemporary data collected via semi-structured interviews and focus groups with young people, parents and teachers between 2015 and 2017. The contemporary data consists of eight focus groups with a total of 40 participants, of which four were with young people, two were with parents and two with teachers. All focus groups consisted of between four and six participants, lasting for roughly one hour. Participants in all focus groups were mixed gender; the focus groups with parents and students consisted of White British participants, whilst the teacher focus groups were a mix of White and minority ethnic British participants (see also Sims-Schouten and Edwards, 2016; 2018).

Chapter 5: Resilience in light of discrimination, stigmas and othering

This chapter provides examples of how the concept of resilience can be and has been applied in ways that are biased, stigmatising and pathologising. The chapter draws on data from archives and museum collections, namely the Amsterdam Rijksmuseum 'Slavery' and 'Look at Me Now' exhibitions, running from 2021 to 2022, the 'Black Cultural Archives Exhibition' and archives of 'Over a Barrel: Windrush Children, Tragedy and Triumph', as well as books, articles and 20 interviews with members from minority ethnic communities in the South of England, undertaken between 2016 and 2023.

Chapter 6: Resisting internalised failure and deficiency: (specific) learning difficulties and differences in children and young people

This chapter critically analyses narratives of (internalised) failure and deficiency as attributions of learning difficulties, comparing historical data collected from the Scottish National Institution for the Education of Imbecile Children (SNI), founded in 1862, and the Waifs and Strays Society, and contemporary data of children attending special education institutions. A total of 175 files were accessed at the SNI archives at the University of Stirling, dated from 1862 till 1922, when it started catering for adults, taking the applications to the SNI as the starting point of the search, specifically the questions 'When was the imbecility first observed?'

and 'What is the cause?' In addition to this, a total of 110 children's case files were accessed in the Waifs and Strays archives in London, with a specific focus on archives and records from its inception in 1881 through to 1921. The contemporary dataset consists of multisensory activities, including doodling, talking and listening with 22 young people aged 12–14 years old (mixed gender and ethnicity) enrolled in two schools in the South of England, one a school for children with social, emotional and behavioural difficulties and the other a school for children with autism; the data was collected between 2020 and 2023.

Chapter 7: Intergenerational/transgenerational trauma, lived experiences and resilience

This chapter draws on a number of datasets. Firstly, archival data (correspondence, case files, emigration paperwork, reports and magazines) associated with the British Home Child scheme - children and young people sent to Canada in the late 1800s by the Waifs and Strays Society and the Fegan Homes – accessed at two sites, the Children's Society Archives in London and Library and Archives Canada (LAC) in Ottawa, Canada. A total of 100 children's case files associated with the Waifs and Stravs Society were accessed at the Children's Society Archives. In addition to this, 42 microfilm reels (consisting of roughly 1,500 images each), comprising minute books, emigration papers and correspondence between receiving and sending homes, associated with both the Fegan Homes and Waifs and Strays Society, were accessed at the LAC. Secondly, the chapter draws on discussions (N=5) with descendants of children who were sent to Canada in the early 1900s, as well as descendants of the child migrant 'adopters'. The third and final dataset comprises archives and museum collections (accessed via Museum Maluku in the Hague. Netherlands), books and news items in relation to the Moluccan community in the Netherlands. Moluccans are a subgroup of Indonesians – from the Maluku islands, one of the Indonesian islands and a former Dutch colony – who found themselves in the Netherlands, against their wishes, when Indonesia became independent from the Netherlands in 1949.

Chapter 8: Eclectic resilience: tell me your story!

Be more resilient?

Chapter 8 starts with the same quote as the current chapter – yet, this time with a question mark, rather than an exclamation mark. This chapter pulls together the key findings from the previous chapters, culminating

in new and eclectic definitions of resilience that incorporate narratives of defiance, resistance and compliance. Moreover, this chapter provides insight into the benefits of viewing resilience through an interdisciplinary lens, drawing on the humanities as well as (social) science. Adopting an interdisciplinary approach, this chapter provides new and innovative ways of viewing resilience that is coproduced with, rather than about, members from marginalised and disadvantaged communities, such as (child) migrants and care-experienced people.

As such, this chapter highlights the benefits of centralising meaningmaking and validating voices and agency when it comes to (re)conceptualising and (re)defining resilience. At the same time, it draws attention to the danger of viewing resilience through predefined and standardised tools that negate individual voices and experiences. This has implications for practice and this chapter ends with recommendations and practical applications of the tools and learning from each of the individual chapters. Foregrounding over 100 years of marginalised, displaced and disadvantaged children and young people's counter-voices of resilience, I thus facilitate autonomy, power and influence, stimulating memories of the previously forgotten, beginning with one question: Tell me your story!

20

2

Waifs, strays and care-experienced young people: compliance, defiance and morality

Introduction

This chapter takes the view that contemporary perceptions and practices regarding resilience of children in care and care-experienced young people in the UK need to be seen in light of the late nineteenth-century child rescue movement and the 'deserving versus undeserving' paradigm it birthed, which continues till the current day. At a time of curbs in public spending, a shift in attitude can be seen towards children's welfare, eventually leading into social work as we know it today. There are similarities in the social, institutional and legal contexts, between the nineteenth century and today, centralising 'deservedness', that determined and determines children's access to services.

Although the term resilience was not used in research/practice until the 1970s, there are examples of associations with resilience in earlier work, for example, the books *Self-Help* and *Character* published by the government reformer Smiles in 1859 and 1871 respectively. Smiles stressed the importance of character, self-control, home power and temper as successful traits and coping strategies in light of adversity. This chapter compares historical data and practices relating to children in care in the UK, encompassing 1881–1918, with contemporary data and practices, drawing on archival data from the Waifs and Strays Society (currently known at the Children's Society) and contemporary interviews with care-experienced young people, collected between 2015 and 2022.

While there are a great many studies with a focus on child safe-guarding and child welfare, either with a slant on historic practices (e.g., Delap, 2015; Gingell, 2001; Stewart, 2011) or contemporary practices

(e.g., Bouma et al., 2018; Hood, 2016), there are few studies that compare past and current practices and related conceptualisations simultaneously. Taking the voices of children from the past and present and related social, institutional and legal contexts in the nineteenth century and today as the starting point, this chapter shows how deservedness and 'self-responsibility' take centre stage in practices and perceptions regarding resilience in childhood. Here, an inability to support certain children is justified by referring to their complex needs and mental health and behavioural problems.

In this chapter I will show how compliance in a social work setting (e.g., complying with care decision, placements, etc.) is often confused with resilience, and non-compliance and defiance (e.g., resisting care decisions, placements and related practices by 'acting out') are treated as problematic in this context. Moreover, the child is blamed and held accountable for not complying, acting out and lacking in resilience, highlighting a need for awareness, and reflective and reflexive practice among practitioners/professionals. This chapter will start with an overview of the development and establishment of social work practices in England over the past 150 years, and the legacy of the deserving versus undeserving paradigm therein. Following this, I will review resilience in a social work context, specifically in light of notions to do with compliance, defiance and morality. I will develop this further in subsequent sections, by providing children's voices from the past and present and show how children and young people in care, then and now, negotiated perceptions and expectations of resilience.

Setting the scene: social work and the deserving versus undeserving paradigm

'The deserving or undeserving poor?' reads a BBC News item on 18 November 2010, asking whether the welfare state can ever distinguish between those who deserve help, and those who do not. 'Are all poor children undeserving now?' is the title of a letter to the *Guardian* on 13 January 2021 in relation to the pandemic and the impact lockdown and online learning has on children and young people. The development of social work in England needs to be seen in light of the deserving versus undeserving paradigm introduced by the New Poor Law in 1834, which marked a major overhaul of the more generous support system that had been in place following the Old Poor Law established in 1601 (King, 2018; Rudling, 2022). The New Poor Law of 1834 imposed a more

punitive relief system than previously existed, restricting welfare support available to people who were unable to work through no fault of their own (e.g., the old, infirm, widows and children) and reducing the cost to ratepayers (Atherton, 2011; King, 2019; Royden, 2017; Rudling, 2022). At the same time, those who were capable of working but chose not to do so were regarded as undeserving and were ineligible for support; although it should be noted here that in the past, just as it is presently, judgements around work 'capability' and 'choice' were largely subjective (Sales, 2002; Skinner and Thomas, 2018).

It was the New Poor Law (covering England and Wales, as this developed slightly differently in Scotland, where the New Poor Law came into existence in 1845) that 'legalised' the notion of deservedness, representing a system of poor relief that was in existence until the establishment of the modern welfare state in 1948; the legacy of which can still be seen today (King, 2003; MacKinnon, 1987). Here, the 'deserving' received support through outdoor relief, where claimants were allowed to continue to live in their own homes, whilst indoor relief in the form of workhouse admission was reserved for the 'undeserving' (Carter et al., 2019). Under the leadership of George Goschen, president of the Poor Law Board, a system of personal social work was developed to increase effectiveness amongst charities and to organise charitable giving for the deserving, whilst the Poor Law itself was supposed to deal with the undeserving (Hurren, 2015; Thane, 2012). This shift in cost-cutting can be seen as foundational to the social work that grew from it and, perhaps, even as an early example of the state outsourcing care of children to private interests.

The latter half of the nineteenth century saw the rise of the child rescue movement and philanthropic voluntary agencies providing institutional care and support for the poor, destitute and orphaned young. At this time, child safeguarding in the UK was organised through a combination of state support and philanthropic voluntary agencies; one example of a voluntary organisation was the Waifs and Strays Society (currently known as the Children's Society) established in 1881 by Edward Rudolph (Higginbotham, 2017; Taylor, 2015; 2016). Yet, whilst child philanthropy developed, providing childcare services as an alternative to the workhouse, government welfare policy continued to focus on separating the deserving from the undeserving, encouraging self-help and changing behaviour (Sohasky, 2015; Skinner and Thomas, 2018; Taylor, 2015). Perceptions of morality, behaviour and compliance were central in judgements around deservedness/undeservedness. For example, the notion of deservedness was used to distinguish the lazy, idle poor from the poor

who had come upon misfortune (e.g., the death of a husband, disability, etc.), yet the interpretation was essentially subjective.

The institutions of Britain's welfare state were consolidated in the aftermath of WWII, coinciding with the establishment of the NHS (National Health Service) in 1948. Social care, social welfare and social work are often used in the same breath, and, as with the child rescue movement, involve and incorporate informal networks of support and assistance as well as services funded following assessments by social work and other professions (Cylus et al., 2018; Dixon and Mossialos, 2002). The last 150 years have seen numerous changes, policy initiatives and Acts concerning children's services (e.g., the National Society for the Prevention of Cruelty to Children (NSPCC), 1884 and the Children's Charter, 1889, to give two examples), instigated by various and differing catalysts, some known and some unknown. For example, the Royal Society for the Prevention of Cruelty to Animals (RSPCA) was established in 1824, well before the NSPCC (Flegel, 2006). It was through the forum of the RSPCA and the American counterpart, the American Society for the Prevention of Cruelty to Animals, that the first child cruelty cases were successfully brought to court (Creighton, 1993; Markel, 2009).

More recently, the 1980s saw a rise in child sexual abuse reports and increased public concern about the way this was dealt with, culminating in the publication of the United Nations Convention on the Rights of the Child in 1989; the latter marked a key turning point, highlighted the need for agencies to work together in meeting the needs of children (Cottrell and Kraam, 2005). When it comes to child safeguarding, protection and mental health support, there continues to be a complex mix of teams involved, with evidence of poor integration of welfare, mental health services and social care (Action For Children et al., 2018; Frost et al., 2021). A coordinated strategy for safeguarding and mental health provision in childhood was not formulated until the second half of the twentieth century. Until then and influenced by a range of approaches, from older traditions of morality (influenced by the child rescue movement), such as 'common sense' or deservedness, to psychoanalytic influences (e.g., Freud, and later, Bowlby's attachment theory), child welfare and mental health practices were unorganised (Cradock, 2014; Delap, 2015; Hacking, 1991; Raines, 2014). This resulted in a patchwork of practice with the testimony of children from 'respectable' homes more likely to be heard than those from 'bad' or 'wretched' backgrounds, the legacy of which continues today.

When it comes to children who grow/grew up in the care system, voices from the community (and to a lesser extent, research) increasingly

draw attention to the importance of using language that is inclusive (Coram, 2020; Independent Care Review, 2020; Jones et al., 2020). For example, while 'looked after children' is an official government term for children in care in the UK, and something that is widely used by professionals and practitioners, it is also often shortened to the unhelpful acronym 'LAC', which can make children feel like they are 'lacking' in one way or another. Young people leaving the care system are often referred to as 'care leavers'. Inclusive definitions are important here, and the Care Leaver Association (a charity and network of care leavers) highlights that the simple definition of 'any adult who has spent time in care' is more inclusive when it comes to taking account of the experience of being in care and the long-term impact this has, than the legal definition put forward by The Children (Leaving Care) Act 2000 (Care Leavers Association, nd). The latter states that a care leaver is someone who has been in the care of the Local Authority for a period of 13 weeks or more spanning their 16th birthday. The importance of using correct and inclusive language when it comes to care-experienced people also extends itself to how resilience is used, which will be discussed in the next section.

Resilience in a social work/care context: compliance, defiance and morality

Since the late nineteenth century, the adversities faced by children and young people in care have become increasingly recognised (Sims-Schouten and Hayden, 2017; Foley, 2021). Both UK-based and global research on adverse childhood experiences and trauma, highlight that, with no exception, children in care will have experienced trauma in one way or another: for example, roughly 69 per cent of children in care have experienced neglect, 48 per cent physical abuse, 37 per cent emotional abuse and 23 per cent sexual abuse (Chambers, 2017; Zarse et al., 2019). Moreover, official data from the UK shows that the rate of mental health difficulties amongst children in care is about four times that of the general population of young people, and this, as well as related issues around loneliness and poverty, has been exacerbated by the Covid-19 pandemic, and the issues last well into adulthood (Munro et al., 2021; NSPCC, 2019). Yet, despite this there is evidence that care-experienced people in need of extra help from the state to safeguard their wellbeing do not reliably get the support or access to the services that their needs demand; some of this is down to cuts to services as well as the fact that often their voices are not heard and/or listened to (Baines and Van den Broek, 2017).

Since its inception in the late 1800s, influenced by the child rescue movement and the deserving versus undeserving paradigm, the profession of social work has been plagued by numerous contextual, structural and systemic issues, including budget cuts, serious case reviews of practice where a child has died and abuse or neglect is known or suspected, and numerous revisions of Acts and related practices (King, 2018; 2019; Skinner and Thomas, 2018). Yet, such contextual, systemic and structural issues also have implications for how resilience is conceptualised, especially in light of the core questions that drive recent scholars who advocate resilience in their research (e.g., Luthar, 2006; Masten, 2019; Rutter, 2012; Ungar, 2004a): 'What are the challenges?' – 'How is the person doing?' – 'What processes support success?'

The term resilience is often used to reflect the successful transition during key turning points across the life-course, focussing on internal psychological processes as they interact, as well as making sense of (and drawing on) external resources within the environment (Masten, 2019; Rutter, 2012). Yet, children and young people in care experience more transitions than the average child, not least due to moving from one care system to another, as well as when it comes to 'transition[ing] out of care' (Sims-Schouten and Hayden, 2017). Since the introduction of the Children (Leaving Care) Act 2000 in England and Wales and the 'Corporate Parenting Model', in 2017, both with the aim to provide the best possible care and safeguarding for children in care and beyond, there is a sense that quality of care and extended support when leaving care have improved. Despite this, research has found that care leavers are more likely than young people in care to give a lower score to the 'corporate parenting' they received whilst in care, indicating a greater tendency to be dissatisfied with their corporate parents (Dixon et al., 2015).

Agency and representation (or lack of) and self-worth are often cited as predictive of resilient functioning (Furey and Harris-Evans, 2021; Rutter, 2012). Care-experienced people are highly likely to have experienced traumatic life events, as well as being overwhelmed by the scale of the demands they face while in care and beyond, compromising their self-esteem, sense of self and development of agency. Moreover, for young people leaving the care system, experiences during emerging adulthood may be particularly important in countering previous adverse experiences and enhance resilience, which is particularly important in the context of relationship discontinuities that undermine the development of trusting relationships and successful transitions between life stages (Munro et al., 2021; Zarse et al., 2019). Resilience in this context is located in a complex interaction between a resilience-enabling

environment and, crucially, emotionally supportive networks. Yet, despite evidence that emotional support, enabling environments and networks are key factors in successful outcomes for young people, research has underplayed this aspect in favour of more tangible resources (e.g., housing, employment) (Furey and Harris-Evans, 2021). Thus, the fact that internal agency, emotional support and environmental assets are key enablers to help care leavers navigate towards support is currently not given sufficient consideration in research and practice.

It follows that despite the advances in social work provision, the legacy of the deserving versus undeserving paradigm lives on. It is specifically notable in controversial and contradictory concepts, such as compliance, defiance and morality, which are often used or assumed in talk around children in care. Firstly, compliance in a social work context is often misconstrued as resilience – complying or even 'putting up' with the choices made for you, in relation to foster care or residential care is not the same as resilience (Sims-Schouten and Thapa, 2023). The difference here lies in choice and agency. Being autonomously motivated involves feeling a sense of choice and volition, fully endorsing one's own actions or decisions. In contrast, compliance, or controlled motivation, involves engaging in a certain action because one feels there is no other choice (Leigh et al., 2020; Reder et al., 1993). Rather than being about objective choice, the distinction is about how the person experiences an action: Does it feel like something I want to do, denoting voluntary compliance, or something I have to do, denoting pressured compliance (Martela et al., 2021)? This is also evident from how 'disguised compliance' is constructed (see next section below on 'Voices of Compliance').

This leads to the next concept: defiance. Defiance can be described as challenging the status quo, resisting the expectation to comply, and as such is an exercise of agency in adverse social contexts (Bottrell, 2009). Thus, recognising the value of defiance contributes to social justice by redefining marginalised and socially excluded individuals as people endeavouring to overcome adversity, racism and bias. A focus on agency and structure is important, with agency reflecting the power that individuals exercise over their lives and social environment, and structure the macro systems that constrain the choices and opportunities of individuals. This is not something new; for example, Bottrell (2009) researched the experiences of young people on a public housing estate in Sydney and asked the question: How much adversity should resilient individuals endure before social arrangements, rather than individuals, are targeted for intervention? So, defiance needs to be viewed as the mediating process of resilience targeted at challenging the adversity, rather than accommodating to it.

As well as compliance and defiance, 'morality' is also a term that can potentially lead to problematic interpretations regarding resilience of an already vulnerable group, such as care-experienced young people. Definitions of resilience centralise 'positive emotions' and 'strength of character', and notions of morality and immorality can be seen to be used to show how care leavers are lacking in this area (Sims-Schouten, 2021b; Sims-Schouten and Thapa, 2023). Perceptions to do with morality and behaviour are highly influential in past and present conceptualisations of childcare and child protection and are often used to refer to a relationship of mind, body and social environment (Fong et al., 2018; Jones et al., 2020; Sohasky, 2015). The focus here is largely on a reductionist or isolated notion of the individual, who is blamed for their 'bad' behaviour and 'inherited tendencies', rather than on large-scale social structures (Dagnan, 2007; Toms, 2012). In practice, this translates into assessments and interventions at various levels, from individual experiences and behaviour through to dynamics in the immediate social context, essentially locating 'problems' within the child and their family background (Chettiar, 2012; Singh and Tuomainen, 2015; Slack and Webber, 2008). Below I provide voices from the past and present to show the impact of compliance, defiance and morality in past and current social work and social care practices.

Voices of compliance

As mentioned earlier on, despite an obligation and intention of social work practitioners to put children and young people at the centre of their practice and incorporate their insights into care decisions, there are a number of barriers that may prevent this from happening (Morley et al., 2023). Barriers include practitioners holding adult-centric perspectives or having a lack of expertise and confidence when it comes to working effectively with children, as well as positioning children as incapable and/or vulnerable (McCafferty, 2017; Harkin et al., 2020; Toros, 2021; van Bijleveld et al., 2015). In practice this means that children may have little chance to participate in care decisions, as well as having insufficient or inconsistent opportunities to express their views on matters affecting them while in care and/or are excluded from, ignored or overlooked in decision-making and planning processes (van Bijleveld et al., 2015; Morley, 2023; Munro, 2011).

Not only that, but children may also feel that they cannot speak out, either because they are not listened to, or worse, that this may affect how

they are being treated, especially if this involves a complaint about their foster carer and/or social worker. As such, they may on the surface be seen to comply, because they feel that they do not have another choice. Compliance – defined as adherence to a specific directive, request or rule to be followed – can be a tricky term to navigate in a social work context, especially when expecting a child or young person in care to adhere to a specific care decision or environment (Martela et al., 2021; Reder et al., 1993). The latter is especially complex in light of the previous trauma the child/young person may have experienced, and when there is potential for further trauma if the voices or needs of the child are not centralised.

Some years ago, I attended a child abuse and neglect conference in the Netherlands where a situation around a breakdown in a foster care arrangement was discussed. The child in question had experienced sexual abuse and was placed with a family who started punishing the child for their sexualised behaviours, as this went against their strong faithbased evangelist ethics. Here the expectation was that the child should comply with the family norms and values, with little regard for the child's underlying trauma and experiences, and the fact that sexualised behaviours are a common feature in children with such history of abuse and neglect (Hackett et al., 2013; Slavin et al., 2020). Another example is Gretchen (not her real name), a former Kindertransport child, who came to the UK aged 10 in 1939 (see Chapter 3). I interviewed her in February 2023 when she was aged 94 years old. After arrival in England, she was taken into care by a non-Jewish family in Wales. Compliance was a big part of her life with them. One example of this was how she was expected to comply with the rules of keeping the curtains in the living room closed at all times and was told off when peeping through the curtains to see what was happening out on the road.

Of course, both examples above also raise questions in relation to how qualified the foster carers were in these situations, and what support they themselves received before taking on those vulnerable children. Yet, in both cases there was an expectation of compliance put upon the child. Here, the issue, as Martela et al. (2021) argue, lies in how the particular action is formulated, as well as how this is perceived. If someone, in this case a child or young person, feels like they have a choice then this denotes voluntary compliance, whereas if this is something that is put upon them, this is pressured compliance.

Compliance as a concept has been used in many guises in social work. For example, disguised compliance was first used in social work in 1993 by Reder et al., to make sense of major child abuse inquiries that had occurred in England since 1973, and to provide practitioners with tips on

what they could look for when working with cases of suspected abuse and prevent future tragedies from occurring. Disguised compliance emerged as a term to describe the way a family would respond once a practitioner adopted a more controlling stance, showing a sudden increase in school attendance, attending appointments, engaging with professionals, such as health workers, for a limited period of time and cleaning the house before receiving a visit from a professional (Leigh et al., 2020). Thus, disguised compliance, also referred to as 'disguised non-compliance', was introduced to describe the behaviours of adults responsible for the care of their child who appeared to undermine child protection procedures and who sought to reduce professional involvement. Compliance can also be mistaken for resilience in a social work context: being a well-behaved and complying child, who follows the rules, lives and behaves well with their foster parents or in their care setting and does not cause problems – yet, the child is effectively surviving.

Below I will show two examples of how compliance, or the expectation to comply, can become problematic in a social work/care context. Firstly, a girl admitted into the care of the Waifs and Strays Society (Soares, 2016). The girl, called Hannah (case file, 7884), was born in 1890 and taken into care in 1900, aged 10 years old and described as 'wilfully refusing to conform to the rules'. A letter to Edward Rudolph (founder of the Waifs and Strays Society), dated April 1904, refers to Hannah being found wandering the streets and goes on to say:

Hannah is inclined to be very tiresome at present and was very much unsettled by a little play the children acted at Christmas. In fact, although it was beautifully acted I have greatly regretted having allowed it to take place. Hannah has always had a very wild look in her eyes as if her mind is not perhaps well-balanced and says and does the oddest things. She threatened to take her own life. It may have been bravado but she repeated this over and over again describing various methods by which suicide might be committed.

Then, after discussing the probability of there being a family history and the need to keep her isolated and on 'low diet' and that the doctor has sent her some 'soothing medicine for her nerves', the following is said: 'Hannah is *very* quiet and docile and has promised the doctor *never* to talk like that again'. This is followed by a letter from Hannah, in October 1904, writing that she has been a naughty girl again for the last three days, but that the mistress has given her one more chance: 'I am going to church, going for walks and working in the mistresses kitchen.'

Thus, Hannah is expected to comply – and she does. After some talking to and 'soothing medicine', Hannah becomes quiet and docile. This complying behaviour is not only seen and evidenced by the matron of the Home where she resides, it is also Hannah herself who confirms this by writing about going to church, going for walks and working in the 'mistresses kitchen'. So, has Hannah now become resilient? Both contemporary definitions and historic perceptions of resilience (such, as Smiles's reference to 'self-help' and 'character') make mention of 'positive emotions' and 'strength of character'. Taking this back to Hannah: in addition to her 'bad and tiresome behaviour', her case notes also refer to 'her temper is always cropping up'. So, from this perspective it could be argued that Hannah does not comply, but is she resilient?

I found similar examples of references to 'good behaviour' and compliance in interviews with young care leavers that I undertook between 2015 and 2022. Below are two examples. The first example is a young woman (aged 18 years old), who has been in care for a number of years and is about to leave the care system. In the extract below she is talking about navigating new and unfamiliar territory, like going to the dentist by herself, opening a bank account, looking for a job, etc. Here, she is receiving some assistance from a support worker. She reflects on herself in this context: 'I used to be quite aggressive and quite horrible and stuff like that and needed to learn to speak properly and not to get wind up and say things in the right way'.

Instead of reflecting on the difficulties of leaving care and having to do this with little support, she looks inward at herself and highlights that she needs to learn to comply, 'speak properly' and 'say things in the right way'. The same approach can be seen below. This is a 17-year-old male, who is studying at a local college and is moving into shared supervised accommodation. He is not keen and wants to live independently, but has been told that he is not ready. Below he reflects on his relationship with his social care support worker in the supported housing facility.

Interviewee: Uhh they've like it's helped me with like emotion skills

a bit better

Interviewer: Yeah? What have you learnt on this front?

Interviewee: Umm doing different things to stop getting angry.

Interviewer: Okay, yep. So did you used to get angry if things didn't

work out?

Interviewee: I still work out what the thing [is], and if they're

doing it, but it's helped like a little bit not a lot but a

little bit.

Here, again, reference is made to having to comply – 'stop getting angry' – yet, there is no mention of how this person's needs are met or whether he is even listened to. The reference to needing help with emotions and 'stop getting angry' in relation to care arrangements and the social work context, creates space for inadequacy and lack of self-worth – quite the opposite of what social work practices principally argue for. Such labels have the tendency to generate feelings of shame and guilt, both of which have a negative impact on those with lived experience of trauma (Frost et al., 2021). Social work practice and policy tend to label children in care and their families, and again here the legacy of the deserving versus undeserving paradigm can be seen, where poverty and underprivileged circumstances affect individuals and families, leading those to lose self-respect and, thus, reducing self-worth (Sims-Schouten, 2021b). Indeed, social services and welfare benefits support individuals and provide means where there are none. Yet, the acceptance of that offer can simultaneously create the space for shame and feelings of inadequacy, which both emotionally and psychosocially can be detrimental (Frost et al., 2021).

Thus, there are potential harmful side-effects of adopting the concept and expectation of compliance as a form of 'enforced resilience', specifically in relation to human motivation and the social environments facilitating or undermining it (Martela et al., 2021). For example, in light of the difference between autonomous and controlled types of motivation, and the different implications for sustained behavioural change and wellbeing in this context (Ryan and Deci, 2000; Hagger et al., 2020; Moller et al., 2006). This links to having a sense of agency, choice and volition, where the person is autonomously motivated, as opposed to controlled motivation, where someone engages in a certain action because of feeling forced and pressured to do so. Thus, the difference here is how the person experiences an action, as either something they want to do, denoting voluntary compliance, or something they have to do, denoting pressured compliance (Martela et al., 2021).

As such, compliance and the motivation behind it are to a significant degree determined by the interaction with the social environments and the styles of communication used. The key issue here is whether the expected action and behaviour is promoted in a way that supports self-initiation and internalisation or whether this is communicated in a controlling way, thus pushing and pressuring children and young people towards compliance (Soenens and Vansteenkiste, 2010). Here compliance in and of itself is not the issue, especially when this is voluntary, and the young person experiences a sense of connection and mutual bond,

both with those communicating the guidelines as well as with those in their immediate surroundings and the society at large, including trusting their support workers (Ryan and Deci, 2020). Furthermore, children and adolescents who feel well connected and are part of an inclusive community to which they belong, are typically more willing to internalise and accept their norms and guidelines (e.g., Graça et al., 2013).

Yet, the compliance can become problematic when this is the result of expectations put upon, rather than agreed with, the child and young person. The latter has the danger of turning into disguised compliance, a form of non-engagement where the person appears cooperative when working with professionals to reduce concerns and professional involvement (Leigh et al., 2020). Disguised non-compliance/compliance, often associated with highly resistant and hard-to-reach parents, can also be applied to how children and young people engage with the care system, as a form of self-protection (Smithson and Gibson, 2017; Forrester et al., 2012; Shemmings et al., 2012; Turney, 2012). Thus, concepts such as disguised compliance are misleading, as they do not improve social workers' abilities in detecting resistance or compliance (Leigh et al., 2020). Instead, there is a need for caution when using popular mantras that on the surface appear effective in describing certain behaviours but, in reality, conceal concerns relating to risk, accountability and blame.

It follows that there is a need to shift the emphasis away from a focus on compliance and non-compliance, towards acknowledging the power such discursive activities can have on practice. Dominated by care reviews and budget cuts, the care system in the UK is always caught between transformative aspirations and bureaucratic constraints. From this vantage point it should perhaps not come as a surprise that compliance is embraced as a way forward, which includes the expectation for the person to cope and ultimately become self-reliant and self-responsible. Non-compliance or disguised compliance may take the form of defiance, which is discussed below.

Voices of defiance

Defiance, also described as 'non-effective compliance' is generally viewed as a non-resilient act, something that may take the form of aggression, manipulation, blaming and/or avoidance (Leigh et al., 2020). In this section, I will argue that defiance can be viewed as an act of resilience, for example, when it comes to refusal to accept bad treatment and poor care arrangements/decisions (in this case in a social work context),

reflecting agency, identity and ownership of one's own life and choices (Sims-Schouten and Gilbert, 2022). Children and young people may be reluctant to disclose and share information, and behaviours that are a response to abuse, neglect and being in a risky situation, such as running away from foster care, are often misunderstood as them acting out and misbehaving, rather than them being at risk (Waechter et al., 2019; Zarse et al., 2019). Here, their complex mental health issues and related behaviours are labelled as risky, rather than a consequence of being at risk. Yet, something that is presented as problematic because of the complex and varied symptoms and behaviours often has underlying histories of abuse, neglect and trauma as part of the pattern, which are often not recognised (Baldwin et al., 2019; Waechter et al., 2019). Moreover, this may be exacerbated by characteristics of the care system, intensifying a sense of being out of control, powerless, judged and pathologised (Leigh et al., 2020).

Interestingly, the concept of defiance is not completely alien in resilience research. Yet, this is generally approached in terms of negotiating protective factors, in light of the fact that the process of developing and maintaining resilience is linked to both internal factors within the person (such as positive emotions and strength of character) and external factors and context (such as support systems, and social/environmental conditions, e.g., socioeconomic status, geography, culture) (Fleming and Ledogar, 2008). For example, in her work on different styles of monitoring and regulation of adolescent behaviour by parents according to race, socioeconomic status and geography, Luthar (2006) highlights that very strict monitoring might be excessive and overcontrolling and could result in opposition and defiance among adolescent children. Yet, Luthar does not necessarily view this as a resilient act, and instead emphasises that resilience 'is never an across-the-board phenomenon' (2006, p. 741). Here, she uses the example of an academically successful adolescent who quietly suffers emotional distress and social isolation, arguing that this young person may be educationally resilient but not emotionally or socially resilient.

Research highlights that positive 'relatedness to others', including positive relationships with an adult figure outside of the immediate family, predicts resilience and leads to fewer acts of defiance (Gartland et al., 2019). Yet, judgements and assessments in relation to resilience and related outcomes are often derived from surveys and questionnaires (filled in by adults around the child and/or the child and young person), focussing on 'positive emotions' and 'positive behaviour', without providing qualitative insight into what the child or young person is actually experiencing (Waechter et al., 2019; Zarse et al., 2019). It follows that

their voices are largely absent. Below I will give examples, drawing on historical and contemporary voices of children in care.

The first example is in relation to a girl (case file 28837) taken on by the Waifs and Strays Society. The girl was born in 1913, and her mother died in 1922, after which she was found roaming the streets in 1925 and was subsequently taken into care, as described in a letter from West London Children's Rescue Committee in 1925: 'The mother of the child died in 1922 and for a year she ran wild as the father was of course out all day at work'. The child spends the next couple of years in the care of the Waifs and Strays Society, after which a letter appears, in June 1928 (from the Vicarage): 'She is short but strong and has a good deal of character I imagine which makes her "up against things". Here an element of defiance can be seen, yet instead the focus is on the fact that she is 'strong and has a good deal of character'. Thus, up until this point it appears that, in line with Smiles's book Character (1870), her 'strength of character' and temper are viewed as successful traits and coping strategies in light of adversity. Yet, this changes in 1929, when her 'defiance' interferes with her work obligations, that is, she is refusing to work. A letter in March 1929 from the Vicarage indicates the following in relation to this:

I had to phone up today and hasten their taking M as she was quite violent and was taken in a car to Balham. She told me last night if she went to a Home she would soon show them what she could do. Ever since she knew I would not keep her she has behaved like a lunatic refusing to work.

A further letter (in the same year) equates the girl's non-compliance and defiance in the form of 'insubordination' with her not being 'normal', despite having an ability to be 'good, affectionate and work splendidly when she likes': 'I begin to think the girl is not normal – she can be so good and affectionate and works splendidly when she likes but gets these fits of absolute insubordination'.

Internal factors, such as strength of character, as well as external support, in the form of positive relatedness to others, have all been equated to resilience (Gartland et al., 2019; Masten, 2015; Rutter, 2012). In a care system this can be complex – for example, it can be decided that a child needs to be taken into care for their safety, despite the fact that they may have formed an attachment with their parent. Below is an example of this. This is regarding a boy (case 2835), born in 1882, who was taken into care in 1890. The application to the Waifs and Strays Society refers to the fact that his father died, and his mother is of ill health. A letter in 1895 from the Rectory indicates that he has stolen 'two small things', a

prayerbook and a box of dominoes, and that 'He will not prosper after such deceit'. The boy finds himself in foster care from 1895 and makes several attempts to escape. On one occasion he caught a train to see his mother. A letter from 1895 from the Rectory says the following about this: 'He was very happy and comfortable at Mrs Patterson's and the latter can in no way be blamed, as he put her off the scent by asking if he could have his breakfast early as the foreman was very busy and wanted him to help him'. So, here is a child who defies his care arrangement and wants to see his ill mother, yet is equated with not being able to 'prosper', or lacking in resilience. I found similar examples of dismissal of defiance as bad behaviour in my contemporary interviews, again highlighting a gap in engaging with eclectic pathways of resilience.

The next example is in relation to a care-experienced person in her early thirties (White, female) who has a mixed-race teenage daughter, aged 12 years old. I interviewed both the mother and the daughter several times between 2018 and 2022. The mother was taken into care when she was a teenager herself and has since had regular contact with social workers and social services. Below she explains how she approached the constant change in social workers allocated to her and the fact that she does not cope well with change. She tried to address this head on by indicating that this 'was a bit wrong' and resisting and defying the way she was treated – yet, her voice was not heard and instead she felt as though she was treated like someone who is aggressive, rather than resilient.

Interviewer: What do you feel about resilience and your resilience

here in light of what you told me?

Interviewee:

So [um] I tried to bring that up and say that, 'that was a bit wrong' and that they should treat me better and not just change social workers without consulting me. I told the social worker at the time. Nobody would help me, they just sort of ignored it. I think because of my life, and maybe the way I look, and I think that they think I'm more [um] aggressive than I am, Which I find quite odd. I had three different social workers in the time they were working with me, because they kept leaving. They wouldn't talk to me and let me know if they ... that they were leaving, or nobody would. I'm ... I don't cope well with change, or I don't like it when people don't turn up. And I mean, I know we're all human, that things happen and stuff, but I don't think they should be letting us down really.

Thus, it could be argued that this person is powerless in light of the characteristics of the care system, ongoing risk assessments and check-ups which pathologise her (Leigh et al., 2020). Here her defiance could signify a hidden pathway to resilience, through the only means available her (Ungar, 2004b). Yet, both in the current example as well as the historical examples above, there is a strong sense that how children act out their trauma and associated behaviour becomes the problem, rather than the trauma itself and what caused this (Burchell, 2019).

Moral versus immoral

Both in the present and in the past, there is evidence of children and young people missing out on support and interventions due to their complex needs, budget cuts and ever-changing thresholds (e.g., see Fong et al., 2018; Morrison, 2016; Rivett and Kelly, 2006). Here, there is a tendency to ignore underlying causal factors and generative mechanisms (e.g., material and institutional, such as financial cuts and failures in multidisciplinary teamwork) in favour of a focus on deservedness/undeservedness. Morality and immorality feature strongly in the relevant narratives, which are largely centred around a reductionist or isolated notion of the individual, who is blamed for their bad behaviour, rather than acknowledging the role of previous (and ongoing) trauma and large-scale social structures of inequality (Dagnan, 2007; Toms, 2012). An example of this was the response of agencies and professionals (e.g., the police and social services) in relation to the sexual exploitation scandals in different cities in the UK (Rotherham, Derby, Oxford and elsewhere), where girls as young as 13 years old were abused and described as 'out of control', 'streetwise' and 'akin to prostitutes' (Delap, 2015; Ellis, 2019; Morrison, 2016).

The focus on the 'immorality' of certain children/young people (e.g., children in care) combined with neoliberal viewpoints centralising individual behaviour and self-responsibility, can be traced back to practices enforced by the Charity Organisation Society (established in 1869), which worked with the Poor Law authorities in developing a system of personal social work grounded in deservedness (Skinner and Thomas, 2018). Below is an example of a girl taken on by the Waifs and Strays Society in 1904 (case file 7784), who is referred to as having 'immoral tendencies' in a letter dated November 1904: 'We all feel that this girl requires hard work to take all the nonsense out of her. She is not an unmanageable girl, but one with strongly developed immoral

tendencies.' Budget cuts and caps on resources were a feature of the nineteenth-century child rescue movement, much like they are today – underpinning a tendency to embrace a type of deserving/undeserving philosophy in over 150 years of care decisions (see Sims-Schouten, 2021; Sims-Schouten et al., 2019). Moreover, in light of these budget cuts and caps on resources, social services may prioritise provision to younger children, because they consider older children to be more resilient and more able to cope with the effects of abuse (Action for Children et al., 2018; Sims-Schouten and Hayden, 2017).

Here the inherent danger is that neglect of teenagers and adolescents is ignored. Furthermore, practitioners may assume that children and young people are making choices relevant to their chronological age, when in fact it should be acknowledged that children who have experienced trauma, neglect and abuse tend to function at a younger emotional or developmental age (Waechter et al., 2019; Zarse et al., 2019). This means that there may be more of a tendency to judge older children's bad behaviour, leading to exclusion from practices/support. The latter is evident from the position that Jack (not his real name), aged 21 years old, found himself in, after spending most of his life in care having a fractured relationship with his mother and father (his parents divorced when he was little). After being in and out of care until he was 16 years old, and spending time living rough on the streets, he was offered supported housing at the age of 18 years old. It was also around this time that he was grieving for his dad, who had recently died. Below he discusses how his approach to smoking (first cannabis, followed by cigarettes), as a way of coping with adversity, was equated with him being immoral:

I was kicked out twice. First time I was kicked out for using cannabis. I literally ... the one that tipped me over the edge was my, keyworker. Opened the door, walked across the room and opened a window and by the time they got back to the door I was stoned. That's how much I smoked, on a daily basis I was always setting the fire alarms off cause of the amount of the thickness of smoke.

And the second time was because of ... I had a mental breakdown. Cause umm, I was smoking legal cause I thought hang on a minute ... it's like drinking, you can't tell somebody off for drinking in their home so you can't tell somebody off for smoking legal in their home. They're both legal substances. So on and so forth. But they put it down to immoral behaviour.

But, isn't drinking immoral behaviour? But that wasn't my \dots Anyway, that kind of happened. So, they started telling me they are

going to kick me out and so on and so forth. So, I just flipped out one morning cause I had grievance problems and everything else going on and I flat packed the room and smashed everything up and they came up to say, 'oh by the way, we're kicking you out tomorrow.' So, it was just like, that's alright, you can pay for the damages and I just sort of walked out of there. You know, I took the time to get my head straight by walking to [town].

This young person is judged and punished for his bad behaviour (smoking cannabis and cigarettes indoors) and treated as disordered and immoral, whilst in fact it could be argued that he is demonstrating remarkable resilience in the face of adversity, coping with the death of his dad and his ongoing mental health issues. Here is an example of something that may seem to be bad behaviour amongst older children, such as smoking indoors, but may in fact mask underlying problems and be a symptom that a child is at risk. Rather than constructing these young people as 'beyond help', the role of social care support workers, social workers and charities should be as a critical friend and challenge the initial judgements and dig beneath the presenting behaviour.

Thus, there is a need for greater awareness of the fact that older children may also be vulnerable and be a 'child in need', which includes the need to assess the needs of those children and to offer support. The same can be said about the example below, which is an extract from an interview with a young person who spent her teenage years in care after arriving in the UK from Jamaica. She highlights how by being treated as 'manipulative' and judged as being a 'bad mum, black female, crack cocaine addict' her traumatic past and care experiences are completely negated:

It was like when I went in there, I was no longer a person, I was just a black female crack cocaine addict that was manipulative, you know. And that – it was like I had no other identity any longer apart from bad mum, black female, crack cocaine addict. Manipulative. That's what people always say about people who have been in care. You know, [um] and [uh] basically, I found that ... you know they don't wanna put in place any support. They don't want to help you. They want to sit and judge you and they mirror exactly what's happened and then they turn on you just like our parents have. And they think they know lots of things, they – they think they know what a child in care is. They think we're manipulative. No, we're not we've just had to grow up way too quickly.

It is clear from the above that judgements about immoral behaviour and morality, that is, the ability to distinguish between choosing 'good' and 'bad', mean that the child/young person is automatically treated as lacking in resilience, thereby problematically directing attention away from underlying trauma and structural explanations, including political and economic causes (Horley, 2014; Moss et al., 2017). Here the positioning of children and young people as immoral drives the neoliberal assumption that children should take personal responsibility for their social condition, as much as adults. Moreover, this is exacerbated by constructing resilience in terms of 'strength of character', where immoral tendencies are equated with the opposite, and therefore as not being resilient (Lynch, 2016; Sims-Schouten, 2021b). As can be seen from the voices and experiences above, this also gives a sense that certain groups are irredeemable, because they are too morally polluted to be capable of being purified, symbolically constructing them as 'others' (Chauhan and Foster, 2014; Roberts and Schiavenato, 2017). Furthermore, the perceived civic and moral threat posed by these children was, and is, also grounded in the broader moral frame of them being a potential threat to others, who are in danger of becoming morally tainted, through exposure to them or particular kinds of social environments (Bean and Melville, 1989; Coldrey, 1999).

The above feeds into framings of the child as 'capable of change' and the 'hard-to-manage child', as well as judgements around 'sensitivities' and strength of character, which can be analysed in light of Smiles's historical publications *Self-Help* and *Character*, as well as contemporary interpretations of resilience (Moss et al., 2020; Ungar, 2004a; 2004b). It could be argued, however, that resilient young people take advantage of whatever opportunities and resources are available to them, even those considered, on the surface, negative or destructive (Ungar, 2004a; 2004b). The latter could be seen as strategies of resistance, in light of having few means and methods of recourse.

Putting the onus upon the child: compliance, defiance and morality

In this chapter I have critically discussed and analysed the development of social work and associated practices, stigmas and labels regarding resilient and non-resilient children and young people, in light of the nineteenth-century child rescue movement and the related deserving versus undeserving paradigm, and its legacy. As a society, we create situations and environments for practice with vulnerable children; these

practices evolve, slowly, but can also be ambivalent and contradictory (Lawrence et al., 2022). For example, whilst we recognise and respond to sexual abuse, treating this as a child protection and safeguarding issue, there are also cases, such as the sexual exploitation cases in Rotherham and other cities in the UK, where the victims are blamed and too little is done too late (Delap, 2015; Ellis, 2019; Morrison, 2016).

Thus, practices evolve slowly and with ambivalence, and suffer reversals of fortune, as well as varying widely. The latter also affects how resilience is approached in a social work context, especially when stigmas and labels are embraced, leading to contradictory portrayals of imperfect and vulnerable children and young people, who need help and support, whilst also being judged in terms of their morality, behaviour and intentions. Moreover, this is made worse when being 'imperfect' and 'problematic' (i.e., non-complying, defying and immoral) is equated with being undeserving. Such perceptions are underpinned by strong and powerful discursive labels that support the case that some young people are simply not resilient, ignoring the role of underlying structural mechanisms and inequalities (Sales, 2002; Sims-Schouten and Riley, 2014).

Linking this to resilience, and in particular the issues around compliance, defiance and morality discussed in this chapter, I argue that current and past practices and perceptions are impaired by an ongoing focus on good/bad behaviour and good/bad intentions. The latter goes at the expense of a critical engagement with underpinning structural issues and mechanisms that stimulate those labels in the first place (e.g., cuts to services, lack of engagement with children's voices). What current and past ideologies, and related social care practices involving children and young people, have in common is a location of problems in the child and families (the fact that some children have immoral tendencies, either by nature or as a function of parental issues, such as alcoholism) (Delap, 2015).

By putting the 'blame' and onus on families, structural and political causes of these patterns were (and still are) too easily dismissed. Moreover, there is evidence that certain children and families consistently miss out on the support they so desperately need. For example, both during the period of the child rescue movement and in contemporary society there is evidence of cutbacks on resources to support vulnerable children and families (Action for Children et al., 2018; Sims-Schouten et al., 2019). Additionally, both in past and current times, children are categorised in terms of 'well-behaved/badly behaved' or 'clean minded' and 'foul minded' as antithesis to resilience, with often little recognition for the fact that institutional environments might also be sites of abuse.

Thus, it would be argued that the focus on strength of character and positive emotions in current and past resilience definitions (e.g., think about Smiles's book on *Character*, published in 1871, as well as more recent definitions of resilience, put forward by key resilience researchers, such as Rutter, Masten, Luthar, Werner) has potential harmful impacts on children in care, especially when their past and ongoing trauma, experiences and voices are dismissed in favour of judgements regarding compliance, defiance and morality.

Implications for theory and practice

This chapter has highlighted a need to revisit interpretations of resilience in a social work/care context, especially in light of the compliance/non-compliance mantra discussed earlier on, and stigmas and labels around defiance and immorality. All of this means that eclectic pathways to resilience and voices of marginalised and disadvantaged children and young people are negated or ignored in favour of a 'pass the buck' narrative. The latter can often be seen to be happening in a multiagency context, like the care system, when there is a perceived risk of being accountable and/or possibility to be blamed for a bad outcome (Morrison, 2016). Instead, rather than reflecting on where practice may have gone wrong, leading to vulnerable young people being labelled as lacking in resilience and/or missing out on the support they so desperately need, the debate more often than not revolves around poor engagement and bad behaviour of said young people.

This chapter, as well as my previous research (see Sims-Schouten and Hayden, 2017; Sims-Schouten and Thapa, 2023), highlights the value of coproducing knowledge through consulting and engaging with (young) people in order to better reflect the complexity/plurality of children's resilience needs and developing systems of formal/informal support. Yet, despite calls for greater involvement of young people in services that affect them, in reality this is often tokenistic or a 'tick box' exercise (Critchley et al., 2019).

Thus, there is a need to centralise children and young people's needs and their voices. Moreover, judging the complex behaviour and mental health issues of the child, rather than the child's background and early experiences, appears to be a feature of state agencies and is something that needs to be picked up with professionals and managers working in social care (Hood, 2016; Munro, 2011). This also includes the acknowledgement that non-compliance and defiance may simply be

pathways to resilience in circumstances where children and young people are not heard, listened to or taken seriously, rather than exhibiting bad behaviour and immorality, and children and young people deserve our understanding and support (Baldwin et al., 2019; Waechter et al., 2019).

Here, cuts to services and resources may have additional consequences, as discussed earlier on. Firstly, it may push the focus more on to interventions with a focus on self-management and self-responsibility, such as online help or support, with individualised and neoliberalist self-improvement of children and adolescents (Choudbury and Moses, 2016, p. 592). This focus on 'individual-oriented practice' becomes the dominant intervention over alternative solutions for young people within welfare and education policy, at the expense of a focus on systemic oppression. Secondly, in light of budget cuts and a cap on resources, social services may prioritise provision to younger children because they consider older children should be more resilient and more able to cope with the effects of abuse (Action for Children et al., 2018).

The inherent danger here is that neglect of this age group is ignored. Furthermore, practitioners may assume that children are making choices relevant to their chronological age, when in fact it should be acknowledged that children who have experienced trauma, neglect and abuse tend to function at a younger emotional or developmental age (Cowie, 2019; Zarse et al., 2019). This means that there may be more of a tendency to judge older children's bad behaviour, leading to exclusion from practices/support. For example, what may seem to be bad behaviour amongst older children, such as non-engagement, being 'manipulative' and 'aggressive', may mask underlying problems and be a symptom that a child is at risk.

Rather than constructing these young people as lacking in resilience, the role of social care support workers, social workers and charities should be to be a critical friend and challenge the initial judgements and dig beneath the presenting behaviour. This involves greater awareness of the fact that older children may also be vulnerable and a 'child in need', which requires assessing the needs of those children and offering support. Government spending priorities also need to be reviewed here as it is all too easy to point the finger at 'failing disciplines and practices', which may obscure the need to look at the larger picture.

Note

1. See Chapter 1 for details about the datasets and methodological approach taken in this book.

3

Eclectic resilience: child migration through children's eyes

Introduction

Against the backdrop of the rise in child refugees and migrants across the world, this chapter advances understanding of the transformative potential of presenting children's stories and experiences in accessible and creative ways, to disrupt, counter and draw critical attention to the impact and legacy of displacement and related narratives of resilience. It does so by presenting voices of children from the past and present. Centralising experiences, memories, artefacts and stories of former Kindertransport children and Windrush children, this chapter illuminates examples of an eclectic range of resilient behaviours and expressions.

Here, rather than drawing on adult perspectives, this chapter takes the child and young person perspective as the starting point, focussing both on voices, stories and memories of former child migrants and contemporary children as agents, experiencers and sense makers to coproduce knowledge and understanding in relation to resilience in light of displacement (Sims-Schouten, 2021b; Sims-Schouten and Weindling, 2022). Here, I take the view that children are experiencers and constructors of their own life, as well as acknowledging the meaningfulness of interpersonal and intrapersonal experiences and sensemaking (see also Stein, 2000).

Ultimately the aim of this chapter is to expose the lived experiences and legacies regarding resilience of two historic migration schemes through the eyes of former and contemporary children.¹ Here I treat children's stories, voices and memories as carriers of complex sensory, cultural and social meanings generating multiple narratives and interpretations. Moreover, this chapter is based around the premise that

listening to children's ideas and opinions on matters that affect them is central to ideas of participation, social justice, democratic practice and agency, and treat childhood as personal, fluid and relational, recognising the inherent interdependence of children's worlds. As such, this chapter centralises children's meaning-making and validates children's voices as agents and experiencers and considers: How do children construct meaning in relation to resilience? What role can historic and contemporary children's voices, stories, experiences and objects play in making sense of resilience in light of displacement?

This chapter is divided into a number of sections. The first section sets the scene by introducing the Kindertransport and Windrush migration schemes. Following this, I provide examples of eclectic resilience, by presenting voices from the past, the former Kindertransport and Windrush children. The section that follows sheds a light on concepts around 'othering' and 'belonging', followed by sensemaking in the present through contemporary children and young people's doodles in light of former child migrants' memories, stories and artefacts. It should be noted that while the 'voices from the past' relate to Kindertransport and Windrush children arriving in the UK as part of migration and refugee schemes, the 'sensemaking in the present' is undertaken by children and young people (mixed gender and ethnicity) with no migrant experience, as introduced in Chapter 1, and discussed further below.

Setting the scene: a tale of two historic (child) migration schemes

They found me difficult to handle.

The above quote comes from a former Kindertransport child who arrived in England in 1939, as part of the WWII child rescue scheme.² She was 10 years old when she arrived, on her own, without her parents and sister – the latter all perished in a concentration camp in 1944. The quote represents her childhood in England, first living with non-Jewish foster parents in Wales for two years, after which she spent a year living with a rabbi and his family; following this she was sent to a boarding school. She was 94 years old when I interviewed her, having lived in the same area in the South of England since she met her (non-Jewish) husband when she was 17 years old, and had a successful career as a social worker.

The world is now witnessing the highest levels of displacement on record, with about 43.3 million children living in forced displacement,

which is more than at any other time (UN, 2022; UNHCR, 2023). History is often used (and abused) in contemporary debates around child migration and child refugees, reinforcing the Western world's image as 'protector of vulnerable children' using historic migration schemes, such as the Kindertransport, as examples of good practice (Kushner, 2012). Yet, in reality the history of child migration, emigration and refugee children is long and fraught with scandals, mixed motives/reception and there is little research on the long-term legacies, experiences and benefits for the children involved (Constantine, 2013; IICSA, 2018; Lynch, 2016).

Migrants and refugee children and young people are often received with suspicion and positioned within a lower social class/hierarchy and stigmatised as less important than other children (Ala, 2018; Kootstra, 2016; Kushner, 2012). The latter is exacerbated by media coverage around how the influx of foreigners might affect the harmony, strength and cohesion of public and social life, thereby constructing migrants as the 'other' (Kushner and Knox, 2012). For example, a number of child refugees entered the UK following the Dubs (Labour Peer Lord Alfred Dubs) amendment to the UK's immigration Act of 2016, and this was widely documented in the news (McLaughlin, 2018). Moreover, the campaign highlighted an element of scrutiny and suspicion towards 'unchildlike' children and the criminalisation of undocumented migrants. Thus, whilst there is evidence that pictures of vulnerable and dying child refugees evoke feelings of compassion, there is also a sense of hostility towards child refugees who may not be 'genuine', either due to their perceived age (too old to be a child) or behaviour (Ala, 2018; Kuschner and Knox, 2012; Lawrence et al., 2022).

It follows that the dominant overarching image of vulnerable child refugees does not allow any room for a more nuanced understanding of the experiences of individual children, such as behaviours resulting from the trauma of being separated from their families or being abused in their new homes (Kidron, 2009; Kushner and Knox, 2012). As such, the taken for granted and expected innocence, vulnerability and gratitude of these children is central to the overarching discourse, and fails to consider the muddled category of childhood, youth or adolescence (McLaughlin, 2018). The construction of migrants as victims at best, and as cultural and security threats at worst, not only assists in their dehumanisation, it also legitimises actions taken against them through the perpetuation of a particular discourse on the European *Self* and the non-European *Other*, which will be discussed later on in this chapter (Kootstra, 2016; Saijad, 2018). Yet, there is limited research examining resilience and the impact and legacy of discrimination and oppression on child migrants,

despite the fact that it is clear that discrimination (othering, racism, bias) features in the resettlement experiences of a significant number of child migrants (Shi et al., 2021; Ziersch et al., 2020).

In this chapter I present voices of eclectic resilience, such as compliance, repression, defiance, from children and young people associated with the Kindertransport and Windrush migration schemes. Despite the different incentives of the schemes – the Kindertransport a child rescue scheme, the Windrush a voluntary migration scheme – what both have in common is the mixed reception and experiences of children involved, marked by marginalisation and discrimination on the one hand and support and gratefulness (i.e., the expectation to be grateful) on the other, the (emotional) legacy of which can still be seen today (Ala, 2018; Kushner, 2012; Lynch, 2016). In addition to this, there is evidence that both migration schemes intersect at different points. For example, the *Windrush*, a German ship by origin (then called the *Monte Rosa*) was used in 1942 to deport 46 Norwegian Jews to Poland, all but two of them subsequently killed in Auschwitz.

Both schemes are contentious in a number of ways, for example, the Kindertransport is a scheme that, as the name suggests (Kinder means children), was only for children, exposing children and young people to the trauma of being separated from their parents, family and main carers. In addition to this, a number of children were excluded from the scheme and generally only 'mentally and physically able' children (which excluded 'bedwetters' and children with learning difficulties), as well as children whose families could afford the journey to England, were included (Sims-Schouten and Weindling, 2022). The Windrush scheme is marked by discrimination, racism and marginalisation, lasting until the current day, with the Windrush generation being denied basic citizenship rights (Arnott, 2019; Seybold, 1998). Writing about her Windrush suitcase performance and dramatherapy, centred around the suitcase she inherited from her mother, a former Windrush child, Samantha Adams (2020, np) highlights: 'I am a survivor. I know this because I come from a line of African-Caribbean people who survived slavery.' Moreover, like the Kindertransport, Windrush children were also often without their parents at various points - with the Kindertransport during and after migration, with the Windrush before migration, as in a number of cases parents travelled to the UK leaving their children behind, until they found an element of financial security (Campbell, 2022). Thus, it goes without saying that both schemes had and have implications for generations to come, including second-generation experiences. A letter from a former Kindertransport migrant summarises this well: 'I think it is interesting how many unresolved problems still very much plague so many people after all these years and if anyone thinks that everything has been resolved they are very much mistaken' (Wiener Library, Collection 1368). This also hints at the implications of intergenerational and transgenerational trauma, something that will be addressed in more detail in Chapter 7. Whilst issues around intergenerational and transgenerational trauma have been studied in relation to both groups (e.g., posttraumatic slave syndrome, the passing on of psychological and emotional trauma from slavery, as well as intergenerational trauma in relation to the Holocaust, see Adams, 2020; Baum, 2000; Kidron, 2009), there is little research regarding post-migration experiences and resilience, also in light of the discrimination that Kindertransport and Windrush children experienced as part of their child migrant status. Despite the abundant scholarship on post-traumatic stress disorder (PTSD) and the 'memoropolitics' entailed by testimonial accounts of trauma in relation to war, displacement and genocide, little is known of everyday experiences of descendants (Kidron, 2009). Moreover, survivor silence can be misconstrued as resilience, whilst this in fact might signify psychological or political repression and the 'unspeakability' of a traumatic past and present, as will be discussed in more detail below (Homer, 2020). At the same time, it is suggested that the everyday lives of trauma victims and their descendants entail only the 'absence of presence' of the past and the absence of descendant knowledge of that past, while the familial social milieu is thought to foster only the wounds of transmitted PTSD (Kidron, 2009).

Yet, as with definitions of resilience, there is a need for caution when equating intergenerational/transgenerational trauma with 'syndromes'. This is because diagnosing someone with a syndrome can in and of itself be a sign of oppression by means of labelling them as psychologically disordered, and thus blaming them for not coping in an oppressive environment, thereby diminishing society's role in their functioning (Hicks, 2015). As with the term resilience, a large body of scholarship in public health and the social sciences has framed cases of intergenerational trauma through deficit models of health and the theoretical lens of social suffering (e.g., Betancourt et al., 2020; Bryant et al., 2018; Kazlauskas et al., 2017). There is a need to move away from framing cases of transgenerational/intergenerational trauma through deficit models of health, and instead provide a framework for making sense of meaningful and deeply embedded histories of segregation, stigma and political violence that otherwise get erased (Shi et al., 2021). Definitions of 'normal' and 'abnormal' are established and implemented by the dominant

culture, and when the dominant culture happens to be an oppressive, abusive and torturesome one, conceptions of normal and abnormal can become misleading (Matheson et al., 2019).

The same can be said in relation to resilience. Recent research highlights that migrant adolescents show greater resilience resources than non-migrants, and although child migrants experience more traumatic events, the impact of trauma on mental health outcomes appears to be greater in the non-migrants (e.g., see Gatt et al., 2020). Yet, there is a danger that resilience is assumed here. For example, while the Kindertransport's experience has become generalised as one of resilience, regarding the emotional strength shown by the Kinder and the subsequent successful lives of this group of child refugees, it is also clear that their experience of being child refugees is much more complicated than the word resilience implies (Homer, 2020).

Describing and generalising child migrants, such as the Windrush and Kindertransport children, as resilient is problematic, because it focusses on the end result, that is, how they 'pulled through' and were 'fine' in the end, without really providing insight into what resilience means in this context. The next section will shed light on this by presenting eclectic examples of resilience drawing on Kindertransport and Windrush children's voices, stories and memories that better reflect the complexity and plurality of children's resilience. The latter will be discussed and unpacked further in the subsequent section, where I will give examples of how contemporary children, as coproducers, agents and experiencers of childhood, make sense of the historic child migrants' voices, memories and stories.

Voices from the past: eclectic resilience

Resilience research (e.g., Masten 2019; Rutter, 2012) approaches resilience as something that requires the presence of a risk factor or challenge, followed by some defined measure of positive outcome. Yet, as mentioned before, there is little agreement on the referent of the term, including what constitutes 'resilient behaviour' and how to best measure this type of behaviour and outcomes (Zolkoski and Bullock, 2012). Moreover, resilience is not one-dimensional, and instead involves the possession of several skills, in varying degrees, that help a person cope, as Bernard (1993, p. 44) argues: 'resilient children work well, play well, love well, and expect well'. Here is where the term resilience is (or becomes) problematic, because it focusses on the end result in light of a risk factor and

protective factors that a child/young person may have been exposed to, ignoring the fact that most youth may be exposed to multiple risks and assets and may have access to multiple resources (Sims-Schouten and Gilbert, 2022; Sims-Schouten and Thapa, 2023). In addition to this, to 'play well, love well and expect well' may suggest an element of compliance, as was suggested in Chapter 2. It may also reflect repression rather than resilience, as Martha Blend (1995), a former Kindertransport child refers to in her memoir, *A Child Alone*, where she points to 'repression', rather than resilience, as a key coping mechanism, employed to maintain her stability and sanity (see also Homer, 2020).

It is a common belief held by society that former child migrants, such as Kindertransport and Windrush children, are resilient, as they were seen to quickly adapt to new situations. Yet, when considering the term resilience, in this context, the focus is largely on how these displaced children pulled through a tough time, how they were fine in the end, and were able to make something of their lives – thereby ignoring how they overcame difficulties during a turbulent period. There are two concerns when coupling or confusing resilience with survival. Firstly, there is a danger of not engaging with issues around compliance and repression, discussed earlier on. Second, it constructs children who made it to Britain as the 'resilient survivors' in opposition to the 'victims' or, in other words, the children who were not given the opportunity to escape (Kushner, 2012). Moreover, using the term resilience to describe how child refugees and migrants cope, eclipses the traumatic aspects of their experience and masks the misery, confusion and dislocation faced by many. As Adams (2020) argues in her article on the Windrush suitcase performance and dramatherapy, there is a need for dialogue about racism in relation to the Windrush, including systemic oppression and concepts around 'archetypal grief', to accrue a significant definition of resilience. The same can be said about the Kindertransport, which was permeated by classist and discriminatory attitudes. For example, the expectation of domestic help from teenage girls reflected societal attitudes about refugees, status and gender, and labour was treated as a fair recompense for rescue - the natural lot of charity cases who had been rescued by the good graces of British people (Craig-Norton, 2014; McDonald, 2018).

In the context of child migration, resilience often indicates the child's ability to adjust to a new environment and post-migration life. Yet the term also has connotations of strength and toughness, an ability to 'cope' and an absence of weakness and ongoing suffering, which is problematic as it is likely to simplify their experience, constructing resilience

as just another kind of post-traumatic reaction (Homer, 2020). Homer (2020) argues that referring to a 'stable state' here is less problematic than the idea of a 'recovery' found in dictionary definitions. Thus, children's post-migration experiences raise questions regarding how resilience is defined, especially in relation to the suggestion that they 'adapt', 'pulled through', 'are fine in the end', and 'able to make something of their lives' (Canning, 2021; Carswell et al., 2011). There is growing evidence of the impact of post-migration factors, such as discrimination, racism, marginalisation and issues around resettlement, on the mental health of migrants, yet to date, few UK studies have been conducted (Pollard and Howard, 2021; Shi et al., 2021).

This focus on 'being okay in the end' (as with the Kindertransport and Windrush children), negates distressing experiences upon arrival and hostilities and environmental challenges in host countries (e.g., poor living conditions, integration difficulties, discrimination) (Shi et al., 2021; Theisen-Womersley, 2021). The latter is exacerbated for unaccompanied child migrants, such as Kindertransport children, who have a higher risk of developing mental health problems than those who arrive in host countries with family members (Wood et al., 2020). Additionally, these children lack the social and emotional support to cope with adversity that could be provided by accompanying parents, adding to the danger that compliance and repression are confused with resilience (Edwards, 2023). Below is an example of this, which comes from the book by Gershon (1966, p. 65), *We Came as Children*, and draws on voices of Kindertransport children:

As a girl of fifteen I went into a non-Jewish foster home together with my brother, aged twelve, and my little sister, aged eight. We came from an orthodox background. I can still hear the taunts of 'Your own don't want you, so we took you in'. They received payments for our keep. I did the work, and later worked full time, handing in my wages intact, as did my brother at fourteen. The Refugee Committee did on rare occasions come to see us. 'Well, how are you my dear?' (This in their [the foster parents'] presence, in a nice, comfortable room.) 'I can see you are well looked after here. Do you need any clothes? No, I can see they keep you all well dressed.' The thought never seemed to occur to the visitor that we paid for all our clothes. And, so she went happily on her way, unaware of the silent heartbreak.

Here, the focus on external factors, such as being 'well dressed' and seemingly 'well looked after', is at the cost of a more meaningful engagement

with the child's personal experiences. In other words, the child is viewed as doing well, surviving and adapting, because 'they look fine'. Moreover, confusing resilience, survival, compliance and adaptation, also has the intrinsic danger of judging children who use different strategies, such as Gretchen below (Sims-Schouten and Weindling, 2022).

I interviewed Gretchen (not her real name), a 94-year-old former Kindertransport child, in February 2023. Gretchen was 10 years old when she arrived in the UK leaving behind her parents and 12-year-old sister. Her sister could not join her, because the family was unable to secure funding for her to come along. Gretchen's parents and sister all died in a concentration camp. On talking to Gretchen about her experience as a Kindertransport child, it is clear that what has stuck with her most are not her experiences prior to moving to England, the trauma of war and leaving behind her family, but how she was received and treated, upon and after arrival. She lived with a non-Jewish family for two years and was frequently told off for her 'non-English' manners, for example, she was not polite enough and not discreet enough (she opened and peeked through the net-curtains in the living room, to see what was happening in the neighbourhood and was told that this was not appropriate): 'The things I did is what I would have normally done at home, like peeking out of the window'. Moreover, her attempts to comply and fit in with the family's expectations fell on deaf ears:

They said 'do you play the piano' and I said 'Oh yes!', thinking they might like me more – so they asked me to play and I could not play, I was tone deaf and felt foolish for saying I could play and they were not impressed and told me I lied.

When she was a bit older her school did a collection for the Waifs and Strays Charity for orphaned and destitute children – after reading up on this, she felt that she was a 'waif and stray' herself, and as such kept some of the money that she collected, which resulted in quite a scolding. Thus, it is clear that resistance and defiance as forms of resilience, survival and adaptation were frowned upon in Gretchen's case (Moss et al., 2020). Yet, this negates the fact that children and young people, like Gretchen, may be reluctant to disclose how they feel, and their related behaviours and adjustments in response to trauma and the situation they find themselves in are misunderstood as them acting out and misbehaving, rather than being at risk (Waechter et al., 2019; Zarse et al., 2019). As such, their complex behaviours and mental health issues are labelled as risky, rather than a consequence of being at risk (Myles et al., 2018; Wood

et al., 2020). As can be seen from Gretchen's quote that I used at the start of this chapter: 'They found me difficult to handle'.

Yet, something that is presented as problematic because of the complex and varied symptoms and behaviours, often has underlying histories of neglect and trauma as part of the pattern, which are often not recognised (Waechter et al., 2019; Zarse et al., 2019). The latter can also be seen from the experience of the 13-year-old Kindertransport child below.

The family to which I went as a boy of thirteen was a young couple with a baby daughter. They lived in a semi-detached house in a Glasgow suburb and owned a chemist's shop in a slum area. I must have been quite a handful! I had been brought up to expect it as natural that I should go to school until I was eighteen and then University – it had been so drilled into me as a pre-ordained career that the existence of other possibilities never entered my mind. They were not prepared for this and aghast that anybody should expect them to pay out that sort of money to a perfect stranger. I stayed with them for only about two months.

(Gershon, 1966, p. 62)

In the example above, the defiance and resistance of the child resulted in him leaving the family in question. As mentioned before, the dominant overarching image of vulnerable child refugees does not allow any room for a more nuanced understanding of the experiences of individual children, such as behaviours resulting from the trauma of being separated from their families, or misunderstood and neglected in their new homes (Kidron, 2009; Kushner and Knox, 2012). As such, the taken for granted and expected innocence, vulnerability and gratitude of these children is central to the overarching discourse, and fails to consider the muddled category of childhood, youth or adolescence (McLaughlin, 2018). In this way, the construct of the 'ungrateful' (child) migrant can be seen as a further instance of what Elizabeth Brown (2011, p. 362) calls the 'fracturing of childhood', stigmatising them as less important than other children (McLaughlin, 2018; Hopkins and Hill, 2010).

Windrush generation children, unlike Kindertransport children, either arrived with their parents or (as was often the case) stayed behind until their parents had secured a living in the UK and sent for them (Campbell, 2022). As with the Kindertransport children, Windrush children and young people also experienced challenges in relation to discrimination and marginalisation, as well as having to navigate

intergenerational and collective trauma, as seen from Adams's (2020, np) account below in relation to her parents and her own experiences of the Windrush:

My mother was sent to England, aged 17, in 1964, as part of the latter Windrush Generation. The only object that accompanied her was a small attractive trunk-like suitcase that put me in mind of a period drama. The suitcase had been in my parents' attic for over 50 years. The collective trauma that accompanied colonialism, aptly symbolised by the volcano and directly rooted in the Transatlantic Slave Trade is still held in much of the landscape. In my view, it is also held in the psyche of those like myself, descendants of the West African people forcibly taken to the Americas, as this part of the world was once named. Suitcase. Heritage. Crying. I excused myself from the living room. I knew my parents would not immediately understand the reason for my tears as I clutched my mother's suitcase. Crying resists language. I was with my childhood response. To Black. Sorrow. Pain. Trauma. Not knowing. Knowing.

Adams's mother was 17 years old when she arrived in England with her small trunk-like suitcase, whereas other children and young people arrived at a younger age and some later, like David (not his real name), who arrived in the Southwest of England from Jamaica in the 1950s as a 19-year-old. David was one of a number of people from minority communities who I interviewed between 2016 and 2023 in relation to their experiences of arriving and living in England. David told me that he had fond memories of Jamaica, his country of birth, but when asking him about his migration experience, what stuck with him most was not the fact that he left behind his elderly relatives and extended family to come to the UK and start a new life. What affected him and stuck with him most were his experiences upon arrival in England, namely being told by many people that he was not welcome to stay or rent a room, as well as the fact that he was not allowed to join the young people's dances in the Town Hall. David dealt with this by 'just getting on' with things – 'It didn't bother me that much' he said, 'as they didn't know any better and hadn't met many people like me.' Thus, again on the surface David shows great resilience, but in reality, he is merely complying with expectations, and repressing his poor experiences upon arrival in the UK (see also Homer, 2020).

Another Windrush child/young person, Val Benjamin, indicates that her father came to the UK in 1952 and she joined him in 1965, at age 13. She says the following about her experiences:

I would love to demonstrate, with likeminded people, our ups and downs and our personal experiences.

I would like to take back the experience, to share within the community, how far we have come and how our continuous contributions made some differences to the way we used to live. Being one of only 3 black children, in the entire school, I was made to feel less than, bullied, excluded, from relevant and productive events, marginalised and inadequate.

When I arrived in England, May 1965, I stayed in London for one year. When my father took me to school in London, I was asked to read a book. The teacher, asked, 'Did you say that this child has just arrived from Jamaica?' My dad replied, 'Yes'. The teacher then responded, 'How did she read so eloquently?', implying that Jamaica could not produce such quality of intelligence.

After leaving school with no qualifications, I am now proud to say, that I fought my way through, attended University, was ordained as minister of Religion, became a qualified life coach, Ambassador for Peace and founder of a voluntary organisation which empowers young, and old, to turn adversity into opportunities.

(Extracare, Charitable Trust)

Again, above we see examples of compliance and repression, but also of intergenerational trauma, when Benjamin refers to how the hostilities that her parents experienced reflected in their treatment towards her (Homer, 2020; Edwards, 2023). Thus, definitions of normal and abnormal are established and implemented by the dominant culture, but when the dominant culture happens to be an oppressive, abusive and torturesome one, conceptions of normal and abnormal can become misleading (Adams, 2020; Gatt et al., 2020). Yet, there is a danger that resilience is assumed here, and this section has highlighted how describing and generalising child migrants, such as the Windrush and Kindertransport children, as resilient without properly exploring the meaning of resilience is problematic because it focusses on the end result, without providing insight into what resilience means in this context (Homer, 2020). The latter is also fuelled by (as well as fuels) the way in which child migrants are viewed through an othering lens, leading to representational absence and representations of difference, which will be discussed further below (Chauhan and Foster, 2014).

Othering and unothering

There is evidence that migrants arriving in the UK through both the Kindertransport and Windrush schemes were received with suspicion, reflecting current debates about (child) migration in the UK and beyond. For example, in relation to the arrival of the *Windrush* in 1948, 11 Labour MPs warned Prime Minister Clement Attlee that: 'An influx of coloured people domiciled here is likely to impair the harmony, strength and cohesion of our public and social life and to cause discord and unhappiness among all concerned' (Windrush Foundation, 2020). In response to this, Arthur Creech Jones (British trade union official and politician) reportedly offered the following 'reassurance': 'Do not worry. These people are just adventurers. They will not last longer than one British winter.'

Similarly, driven by demographic considerations the British authorities treated the Jewish child refugees as temporary immigrants, and were reluctant to 'replenish that good white stock with Jewish racial material' (Grenville, 2012, p. 4). This mirrors contemporary debates about migrants. For example, in March 2023 Suella Braverman, Home Secretary, wrote in the *Daily Mail*: 'The British people have had enough. I have had enough. Tens of thousands of illegal migrants pouring across the Channel every year, and in ever greater numbers. We cannot sustain it. Moreover, it makes us less safe.' Although Braverman is talking about 'illegal' migrants here, there are nevertheless clear ideological agendas at work, resulting in othering and disfavouring refugees and migrants, similar to narratives around the Windrush and Kindertransport roughly 80 years ago. Thus, post-migration experiences are marked by sociopolitical hostilities and migrants find themselves in hostile environments (Canning, 2021; Pollard and Howard, 2021). Both Windrush and Kindertransport migrants were received with suspicion, fuelled by media coverage around how the influx of foreigners might threaten the harmony, strength and cohesion of public and social life, thereby constructing migrants as the 'Other' (Kushner and Knox, 2012).

Self–Other distinctions are central to social and temporal spaces and identities, and research shows that specific social groups, such as (child) refugees, are often presented as the Other (e.g., in relation to culture, religious practice and community values) (Alcoff, 2023; Chauhan and Foster, 2014). Here, othering is achieved through three distinct representational pathways: through representational absence, through representations of difference, and through representations of threat (Chauhan and Foster, 2014). For example, Kushner and Knox (2012) argue that the image of the Kindertransport that has survived in British public memory

(i.e., the notion that the Jewish child refugees were welcomed) is selective and flawed, and instead the Kindertransport was marked by marginalisation, refused entry and exclusion (see also McDonald, 2018). The same can be said about the Windrush generation. For example, in his book *Home Coming. Voices of the Windrush Generation*, Colin Grant (2019) provides examples of interviews with men and women who came to Britain from the West Indies between the late 1940s and the early 1960s. In and among the voices from the Windrush generation are also voices from White English men and women, interviewed by researchers linked to the Mass Observation project conducted in 1939 (Grant, 2019), about how they felt about people from the West Indies:

Miss Patricia Jones:

I think they seem to be an imaginative rather than intellectual race, essentially religious, with great creative gifts, but a certain childlishness [sic] of outlook. I don't think they would *ever fit in successfully into the commercial world of present-day Western life*.

(Grant, 2019, p. 68)

R. Westgate:

I always feel I have to be especially polite to them, as I am conscious of the rudeness with which the average person treats them. I should not mind in the least being seen in public with negro. [They're] a race who have never had a square deal either from the British or any other nation who have had dealings with them.

(Grant, 2019, p. 69)

Whilst the first quote engages with flawed and now debunked constructions of White people as intellectually superior (see Eysenck, 2000; Kühl, 2001; Miele, 2002; Richards, 1997), the second provides a reflection of the poor treatment received by Black people. Yet, both highlight a form of othering in one way or another, foregrounding social classifications to categorise the relevant groups into binaries or opposing pairs, namely migrants and non-migrants, White and non-White (Akbulut and Razum, 2022). In his book *Black Looks. Race and Representation* Hooks (1992, p. 45), remarks that: 'no one speaks of the pain that our ancestors endured; it is carried in our hearts and psyches, shaping our contemporary worldview and social behaviour'.

Importantly, racialised discourse is expressed in many ways, but all serve to support patterns of domination, exclusion and marginalisation (Henry et al., 2002). Yet, if one relies on 'colour', it becomes obvious that

race is not static, and not everybody who is considered 'White' today was considered White in the past, and racial differentiation continues to affect many areas of social interaction, as can be seen from the experiences and narratives around Kindertransport and Windrush children. So, even though the notion of race is a construction, it has endured as real, with often devastating effects. These devastating effects attributed to racism are defined by Parker and Lynn (2002, p. 84) as: 'more than just acts of individual prejudice. Rather, race and racism are an endemic part of life, deeply ingrained in the education system through historical consciousness and ideological choices about race.' This also includes the notion of how education systems and related curricula suppress knowledge, of what is told and what remains invisible (such as in history curricula across Europe, which until recently made little mention of slavery and colonialism), and subsequently who belongs and who doesn't. Not only that, in February 2022 the Department for Education in England posted a statement urging teachers to be 'balanced' in their teaching about the British Empire and to be careful about teaching children about the Black Lives Matter movement, as this may cover partisan political views (DfE, 2019). Othering is just one term to describe who belongs, and who does not belong, to a group by centralising constructs of difference, thereby signifying non-belonging (e.g., in relation to ethnicity) (Chauhan and Foster, 2014).

Yet, othering is a powerful process that goes beyond concepts of discrimination based on mere categorisation processes – it also captures interconnected and intersectional knowledge structures, power relations and categorisation processes highlighting their effects at different levels (Remedios and Snyder, 2018). For example, from a social psychological perspective of ingroup and outgroup formations, a term such as 'prejudice' can be viewed as synonymous with othering. From a postcolonial perspective, 'otherness' can be aligned with historically and discursively grown power relations. Moreover, from an intersectional and race theory perspective othering can be seen to stimulate inequality at several dimensions (intersectionality) – for example, migrants experience unequal treatment on different levels and along different categories (gender, migration status, religion, race, etc.) (Collins, 2019; Crenshaw et al., 1996).

Categorising attributions of othering and (non-)belonging in relation to migrants provides powerful tools for social positioning informed by distorted perceptions around their number, socioeconomic situation and motives (Hall, 2017; Smith, 2016). The latter informs flawed representations of threat and morality, turning people *at* risk into people who *pose* a risk, for example, to social resources, society at large and public

safety (Canning, 2021). Moreover, this perception of migrants, shaped by a form of othering where the migrant voice and experience is absent, has a powerful impact on evaluating individual migrants based on imagined attributions and characteristics allegedly linked to integration and cultural problems (Akbulut and Razum, 2022). The mechanisms of evaluation and hierarchisation involved in turn could lead to legitimisation of disadvantageous institutional structures and social practices. Othering is therefore structural and embedded in discourses of power and representation.

There is evidence that children take cues from Self-Other constructions in society and attach meaning to subtle and not so subtle messages about the relative desirability of belonging to one social group as opposed to another (Hirschfeld, 2008; Katz, 2003; Patterson and Bigler, 2006). Thus, the biases that children exhibit are not random (Sullivan et al., 2022). Moreover, social psychological research shows that racial biases and stereotypes are difficult to change in adulthood (Stangor and Schaller, 2000), providing a strong rationale for understanding these attitudes in childhood, when change is more feasible. At the same time, research has disproved the popular belief that children only have racial biases if they are directly taught to do so, as well as showing that children's racial beliefs are not significantly or reliably related to those of their parents (Patterson and Bigler, 2006). This may seem counterintuitive, yet as children are learning to conform to the broader cultural and social norms, they will gauge these 'community norms' from a wide range of sources – not just their own families. Thus, children collect information from the world around them in order to actively construct their own beliefs and often attach meaning to race without adults directly telling them to do so (Hirschfeld, 2008; Katz, 2003). In other words, children pick up on the ways in which whiteness is normalised and privileged.

Yet, the fact that few studies have examined the effects of intergroup contact on perceptions of otherness and belonging among children and adolescents represents an obvious void in the literature (for exceptions, see McGlothlin and Killen, 2006; Rutland, et al., 2005). Research and practice highlight that object-based interactions have impact on children's learning and perceptions (e.g., examples), increasing what they know about others (i.e., the outgroup) and, thus, increasing the likelihood of seeing members of the outgroup in individuated and personalised ways (Chatterjee, 2015). The next section provides examples of children's thoughts in the form of doodles when presented with former

Windrush and Kindertransport children's objects, artefacts, stories and memories (in the form of books, a suitcase, a sweater, cards, letters and interview extracts). The doodles highlight moments of disruption, questioning and dialogue facilitated by the objects, memories and stories, providing news ways of viewing resilience through former and current children's eyes (Sims-Schouten and Wingate-Gray, 2024).

Eclectic resilience: sensemaking in the present

As part of a university-funded and ethically approved pilot project, myself and a research team presented children and young people at four schools across the South of England with objects, artefacts, stories, memories and voices from former Kindertransport and Windrush children (see Chapter 1 for details regarding the sample and dataset). Sharing the material with the children and young people, namely a suitcase, a sweater, a doll, books, letters and first-hand accounts, we asked them to make sense of this, specifically in relation to how they, as children/young people, felt about the objects and the Kindertransport and Windrush children's experiences and how they would have felt going through this themselves.

The project followed the principles of embodied research, inviting the children (in this case aged between 10 and 16 years old, mixed gender and ethnicity, with no migration background) to use a physical, tactile activity in order to explore and generate knowledge (Spatz, 2017; Thanem and Knights 2019; Vachelli, 2018). Using this approach provided spaces and opportunities to reflect on the topic matter in-depth and in conversation with each other, whilst undertaking a relevant activity that could also act as an affective resonator to generate further discussion (Hackney and Hill, 2022). Centralising children's voices, the research adopted a participatory and democratic approach to creativity – foregrounding children's meaning-making, resourcefulness, agency and knowledge production (Yates and Szenasi, 2021). Connecting objectbased learning, art and pedagogy, the doodle activity created moments of disruption, through questioning and dialogue facilitated by the objects, stories and memories presented to the children and young people (Chatterjee, 2015; Pringle and Dewitt, 2014; Rademaker et al., 2020).

Furthermore, as well as facilitating learning opportunities the activity also elicited uncertainty and discomfort, rather than being an effortless, continuous process. By looking at the representation of memories in

individual memories, artefacts, objects, books and stories it shows how the identity of a group is formed through these memories. Memory also points at the relationship between history and politics. It shows how collective memory shapes identity, which in turn shapes politics (Muzaini, 2022). Discussions with the children elicited three core themes, with particular relevance to development and constructions of resilience, namely 'belonging', 'emotions' and 'tentative constructions of resilience'. This will be discussed further below.

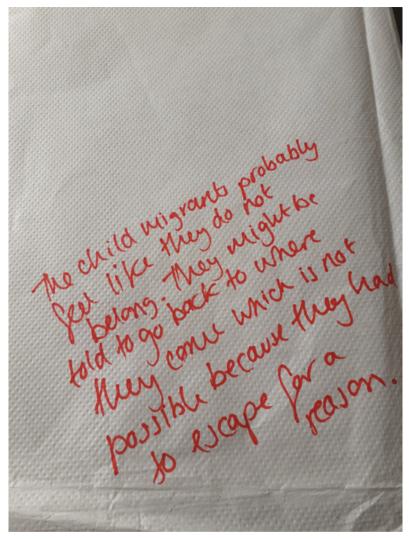
Belonging

Belonging (or not belonging) and othering are closely linked, as discussed in the previous section. Both represent something that is counterproductive to developing resilience, where resilience refers to external (as well as internal) sources of strength – being othered and not belonging are contrary to those external support systems, especially in situations where there is no parental support to fall back on. There are various terms that describe who belongs, and who does not belong, all linked to constructs of difference, categorising certain groups into binaries or opposing pairs, such as migrants and non-migrants, White and non-White, British and non-British (Akbulut and Razum, 2022).

Categorising attributions of belonging and not belonging, such as in relation to migrants, arises from the distinction between the Self and the Other and is significant in relation to social positioning and power (im)balance between people (Hall, 2017; Smith, 2016). The latter is also what the children who engaged with the objects, artefacts and memories had picked up on, referring to how 'the child migrants probably feel like they do not belong' (see Figure 3.1). This also highlights how children take cues from Self–Other constructions in society and attach meaning to subtle and not so subtle messages about the relative desirability of belonging to one social group as opposed to another (Katz, 2003; Patterson and Bigler, 2006).

Figure 3.1 shows that children as agents, experiencers and sense makers (evident from the reference to 'the child migrants probably feel like') collect information from the world around them in order to actively construct their own beliefs, namely that 'They might be told to go back to where they came from' (see also Patterson and Bigler, 2006). Here implicit reference is made to othering and not belonging and the representations of difference and threat inherent in this (Chauhan and Foster, 2014).

Not only that, not belonging can also lead to othering the Self, that is, internalising the sense of not being part of things, not deserving to be



 $\begin{tabular}{ll} Figure 3.1 & \it Self-Other constructions of belonging @ Wendy Sims-Schouten and Sara Wingate-Gray \\ \end{tabular}$

there and ultimately feeling powerless, all things that negatively affect the development of resilience (Remedios and Snyder, 2018). The latter is also evident from the group doodle in Figure 3.2, where reference is made to 'survivors guilt' and 'never feeling fully English'.

By referring to 'feeling guilty for the people that were left back at home', the group doodle in Figure 3.2 dismisses the notion of child migrants as 'resilient survivors' as opposed to the 'victims' or children who were



Figure 3.2 *'Survivors guilt' and 'Never feeling fully English'* © Wendy Sims-Schouten and Sara Wingate-Gray

not given the opportunity to escape, and instead highlight the negative impact this has on the 'survivors' (Kushner, 2012). Moreover, reference is made to 'identity' here as well, both in relation to identity 'being revoked' and the 'shame' related to where they originated from. Memories are crucial here, as (collective) memory is shaped by history and in turn shapes identity and related emotions (Muzaini, 2022). The latter will be discussed in more detail in the next theme, emotions.

Emotions

Core definitions of resilience refer to strength of character and positive emotions as assets when it comes to coping with adversity (e.g., Luthar 2006; Rutter, 2012). Here, the suggestion is that being able to bounce back from negative events demonstrates psychological resilience – effective coping and adaptation despite loss, hardship or adversity (Tugade and Frederickson, 2004). Tugade and Frederickson (2004) refer to 'humour' and 'optimistic thinking' as positive emotions. Yet, the danger here is that individual responsibility (to be optimistic and positive) is emphasised at the expense of systemic oppression, ignoring personal

marginalised voices and experiences of discrimination, racism and othering (Sims-Schouten and Gilbert, 2022).

Here, as can be seen from the voices of Kindertransport and Windrush children, the requirement 'to be positive' too easily morphs into something where compliance and repression are mistaken as positive emotions and resilience (see Homer, 2020). Engaging with the objects, artefacts, stories and memories from former Windrush and Kindertransport children, the children and young people who participated in our project, doodled about 'negative emotions', such as being 'worried', 'confused', 'frustrated' and 'feeling indecisive – not too sure how you want to feel', as can be seen from Figure 3.3.

Here the focus is on being powerless in light of the migration experience, reflecting on the journey ('lots of suspense on the journey') and after ('worried about what people are saying'; 'worried about whats in the future'), thus highlighting different levels and categories of experiences (Collins, 2019; Remedios and Snyder, 2018). Furthermore, lack of control and feeling powerless can also lead to feelings of frustration: 'frustrated that you may not be able to communicate'.

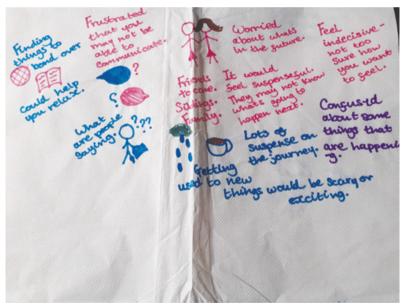


Figure 3.3 *'Worried', 'Confused', 'Frustrated' and 'Feeling indecisive'* © Wendy Sims-Schouten and Sara Wingate-Gray

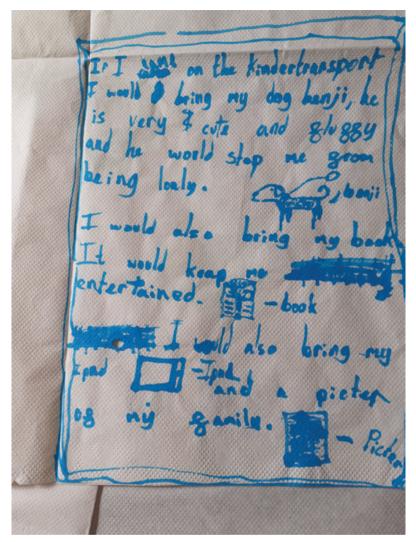
Here, as discussed earlier on, there is a danger that the child or young person is blamed for their frustration (and the behaviour that comes with this) and 'lack of resilience', rather than taking seriously the trauma that they may have experienced or are experiencing (Demers et al., 2022; Hicks, 2015). Moreover, as can be seen from the section on 'sensemaking in the past', the expectation of 'playing well, loving well and expecting well' (Bernard, 1993, p. 44) can eclipse the traumatic aspects of child migrants' experiences, masking their misery and dislocation, ultimately leading to repression and compliance (Adams, 2020; Homer, 2020). Through their doodles, the children from the present engage with child migrant experiences and voices from the past, highlighting that as children, agents and experiencers, they are not afraid to show that they would feel out of control (Sims-Schouten and Wingate-Gray, 2024; Stryker et al., 2019). Furthermore, centralising the objects, artefacts, memories, stories and voices of former child migrants, the children also showed examples of emerging resilience, which is discussed below.

Tentative constructions of resilience

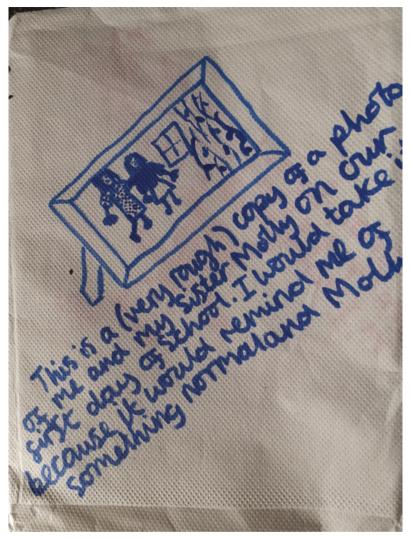
Artefacts, object and memories not only represent identity and narratives of migration, they can also provide a way to express resilience (Kabel et al., 2016; Pahl and Pollard, 2008). One of the questions we asked the children who participated in the project was 'What would you take, and why?' Referring to their meaningful objects and artefacts, the children provided tentative insight into support systems and constructions of resilience. For example, the individual doodle in Figure 3.4 highlights the importance of pets ('my dog banji') as support system against being lonely, as well as material objects, such as books to 'keep me entertained', an iPad and a picture of the family.

Research consistently highlights the link between parenting, positive family relationships and resilience in childhood, which is also evident from the fact that children in care (see Chapter 2) tend to suffer more with issues around resilience than children not in care (Gartland et al., 2019). Access to positive experiences and emotions can be sources of resilience and objects and materials, such as a photograph (see Figure 3.5), a sweater commemorating a memory event, such as Christmas, or 'my mum's glasses' (see Figure 3.6) can play a crucial role here (Dobbin and Ross, 2018).

Thus, strength, positive emotions and elements of coping in light of adversity, all associated with definitions of resilience, can be seen to be



reflected in the children's engagement with memories and objects that they would embrace if they were a child migrant. Here, family, pets and happy memories and related artefacts are synonymous with belonging, identity, growth and purpose, thereby representing tentative constructions of resilience, through agency, power and social positioning (Hall, 2017; Smith, 2016).



 $\begin{tabular}{ll} \textbf{Figure 3.5} & \textit{Positive experiences and emotions} @ Wendy Sims-Schouten \\ and Sara Wingate-Gray \\ \end{tabular}$

Difficult to handle

I would like to end this chapter with the quote that I presented at the start of this chapter, as it highlights the complex realities that child migrants have to navigate post-migration, in a country that should be welcoming and understanding, but is instead marked by social, political and

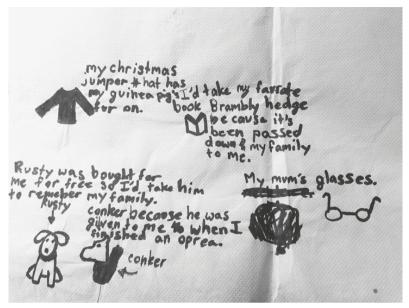


Figure 3.6 *Happy events and memories* © Wendy Sims-Schouten and Sara Wingate-Gray

psychological hostilities (Canning, 2021; Pollard and Howard, 2021). Pre- and post-migration trauma and stress have long been documented, yet the respective impact of these factors on resilience and mental health continue to be the subject of increased debate.

Whilst some scholars argue that exposure to pre-migration stressors, such as war and displacement, is the strongest predictor of mental health issues and PTSD, others have found that it is the impact of post-migration stressors upon resettlement in the host country (Dajani et al., 2023; Theisen-Womersley, 2021). With the number of migrant and refugee children entering and resettling in the UK and other European countries continuing to grow, there is a pressing need to understand the nature and extent of adversity that these children suffer, both in their lives before arrival, and as they navigate their new environments and circumstances (Edwards, 2023).

Revisiting definitions of resilience is crucial here, as this chapter has shown, which includes the need to understand and engage with the links between the traumatic experiences and discrimination among members of socially marginalised groups, including the specificities associated with each of the groups. As can be seen from the Kindertransport and Windrush children and young people's voices presented in this chapter,

discrimination, low status, acculturation due to language differences and enculturation, were key challenges and stressors, significantly impairing their ability to be resilient and show positive emotions, as required by standard definitions of resilience (Masten, 2019; Rutter, 2012; Theisen-Womersley, 2021).

Resilience research (e.g., Garmezy et al., 1984; Luthar, 2006) approaches resilience as something that requires the presence of a risk factor or challenge followed by some defined measure of positive outcome, where positive emotions and strength of character play a key role. Yet, as mentioned before there is little agreement on the referent of the term, including what constitutes resilient behaviour and how to best measure this type of behaviour and outcomes (Zolkoski and Bullock, 2012). Moreover, resilience is not one-dimensional, and instead involves several external and internal support mechanisms, in varying degrees, that help a person cope.

By focussing on the end results, namely how they 'survived', 'looked fine' and 'were okay in the end', there is the danger that resilience is assumed and mistaken with repression and compliance (Gatt et al., 2020; Homer, 2020). For example, while the Kindertransportees' experience has become generalised as one of resilience, regarding the emotional strength shown by the Kinder and the subsequent successful lives of this group of child refugees, it is also clear that their experience of being child refugees is much more complicated than the word resilience implies (Homer, 2020). Definitions of normal and abnormal are established and implemented by the dominant culture, and when the dominant culture happens to be an oppressive, abusive and torturesome one, conceptions of normal and abnormal can become misleading (Matheson et al., 2019). Here, viewing migrants through an othering lens leads to representational absence and representations of difference and threat (Chauhan and Foster, 2014).

It is clear that child migrants and unaccompanied refugee children have a higher risk of developing mental health problems than those who arrive in host countries with family members. These children are more likely to have experienced a greater number of traumatic events, including loss of a parent, and may experience additional challenges with discrimination and social positioning following migration (Wood et al., 2020). Additionally, these children lack the social and emotional support to cope with adversity that could be provided by accompanying parents. Thus, it is fine to acknowledge that child migrants may struggle with resilience and show negative emotions as opposed to positive emotions, as the contemporary children above discussed: 'anxious', 'overwhelming',

'angry because they are being forced to move despite all the changes they are going through personally'. The latter also highlights the powerful impact of inviting children, as agents, experiencers and experts on childhood, to make sense of other children's memories, stories and artefacts, as it gives deep and meaningful insight into emotions and belonging, providing tentative constructions of resilience (Stryker et al., 2019).

Here, artefacts, stories and memories not only provide insight into experiences and identities, they also facilitate an element of coping and resilience, representing loved ones and precious events, showing the powerful impact of object-based sensemaking and disruption as a way to revisit established definitions of resilience (Sims-Schouten et al., 2022). Migrants and refugee children are frequently positioned within a lower social class/hierarchy, and stigmatised as less important than other children (Ala, 2018; Kootstra, 2016; Kushner, 2012). By not just focussing on the end result and instead addressing systemic oppression, including sociocultural and political-economic barriers and hostile environments, it is possible to see wider issues that impact the development of resilience here, including how resilience is viewed (Pollard and Howard, 2021).

Resilience definitions centralise the importance of internal and external support factors, but the current UK and wider European post-migration environment provides very limited potential enablers (Pollard and Howard, 2021). Yet, despite the fact that it is now more acknowledged in academic and practitioner discourse that migrant and asylum systems across Europe can be hostile environments, little has been written about the implications for resilience development and coping mechanisms here (Canning, 2021). Moreover, hostile environments are nothing new and as the historic research in this chapter has shown, the way in which Kindertransport and Windrush migrants were received with suspicion, is mirrored in contemporary debates about migrants. Thus, there is a need for rigorous research, coproduced with children, rather than about children, which is currently lacking. Despite increased visibility of child migrants in academic and political discourse, more research is needed to centralise their voices and experiences.

Implications for theory and practice

As organisations, such as charities, the education system and local governments, move toward policies of cultural safety, as well as programmes and practices that are trauma-informed, it is clear that culturally appropriate and sensitive support and interventions, including reflective

practice are key (Shi et al., 2021; Theisen-Womersley, 2021). This chapter and the children's voices within this highlight that there is a need for coproduced holistic interventions and support at different levels, namely at the individual level, as well as at social-policy and global levels.

Firstly, at the individual level, it is important to acknowledge that repression and 'survival', as well as compliance are merely surface-level coping mechanisms, covering power imbalance where the child is unable to speak out, rather than representing resilience (Shi et al., 2021). Furthermore 'anger', defiance and resistance should be viewed as normal reactions and coping mechanisms in light of the situation children and young people may find themselves in, and 'being difficult to handle' (as Gretchen, former Kindertransport child refers to) should not feature in this. Here, moving away from a focus on the end result is crucial, and rather the focus should be on a continuous process, allowing children to be children, rather than survivors or victims. Engaging with and making sense of cultural idioms of distress is one part of a larger effort to build cultural competency and reflection into practice, which should also include addressing racial and ethnic disparities.

Thus, individual engagement, coproduction and cultural competency are core parts of interventions with child refugee and migrant communities, seeking to be culturally sensitive and culturally immersive. This leads to the next level, namely a move from cultural competency to structural competency, recognising that disparities are not only due to cultural barriers, but also due to economic, sociopolitical and systemic forces. At a social policy level, this means acknowledging that othering and the mechanisms of evaluation and hierarchisation inherent in this, in turn lead to legitimisation of disadvantageous institutional structures and social practices. Othering is therefore structural and embedded in discourses of power and representation, which need to be addressed at local and global levels.

Interdisciplinary collaborations are crucial here and critical for creating a network of continuous medical, social and legal support for migrants and refugees. Furthermore, there is a gap in research and practice regarding UK-wide assessment of access and delivery of mental healthcare for (child) migrants and refugees (Canning, 2021). Timesensitive and culturally appropriate approaches are needed, with greater funding and resource support from the UK Government.

This chapter and the voices therein highlight a need to relax hostile environment policies, and for asylum seeker and refugee (ASR)specific resilience interventions and mental health services and support to be considered within the UK. Further research is needed to assess implementation of guidelines across the UK (Pollard and Howard, 2021). It is clear that centralising post- as well as pre-migration experiences in resilience tools and interventions are critical for improving child migrants' outcomes (Shi et al., 2021). This includes developing needsbased, coproduced and child-led structurally competent tools for assessing trauma, developing interdisciplinary models for care and creating an inclusive healthcare environment that welcomes migrants and recognises them for their strengths and resilience.

Notes

- It should be noted that I am not suggesting here that the experiences of Windrush and Kindertransport children are on a par, the same or in any way comparable. Instead, this chapter is centred around the eclectic resilience and related experiences of children linked to the relevant migration schemes (see also Chapter 5 for a discussion of resilience in light of discrimination and racism).
- This data comes from a former Kindertransport child who I interviewed in February 2023; relevant permissions were obtained to use the data and information in this chapter (anonymised).
- 3. See also Chapter 5 for a discussion around additional challenges experienced by Windrush children, in relation to racism and being classed as 'educationally subnormal'. Moreover, see Chapter 7 for an additional discussion in relation to intergenerational/transgenerational trauma and how 'German Jews' were received in Britain in 1938.
- 4. I interviewed David in 2020. He came to England as a 19-year-old, as part of the Windrush migration scheme.

4

Bullying and resilience within a neoliberal framework

Introduction

The fact that bullying can have deep and long-lasting consequences is nothing new. For example, Charles Dickens makes reference to bullying in his book Oliver Twist, published in 1838, highlighting that Oliver is bullied because he is seen as lower class. At the same time an article in The Times, dated 1885, gives significant attention to an incident where a 12-year-old boy in the King's School in Cambridge died from bullying behaviour by an older group of boys. Looking at historic and contemporary examples of bullying, this chapter investigates perceptions in relation to resilience, with a particular focus on discussions around bullying. This chapter draws on historic archival data, namely letters from children, carers and educational officers between 1880 and 1920 collected from the Children's Society Archives (formerly known as the Waifs and Strays Society, see also Chapter 2), England's largest children's charity, and contemporary data collected via semi-structured interviews and focus groups with young people, parents and teachers between 2015 and 2017.

Common interpretations of bullying incidents and interventions in the UK are located in a collaborative relational and 'whole-school' context (Ponsford et al., 2022; Smith et al., 2019). Yet, this chapter shows that despite the wealth of anti-bullying policies and interventions, informed by extensive research over the decades (e.g., Cowie and Myers, 2018; Olweus, 1978; Sapouna and Wolke, 2013; Temko, 2019), the link with resilience can be a complex and insidious one, sometimes placing the responsibility for coping with bullying and 'standing up for oneself' on the individual.

This chapter highlights how, grounded in neoliberalist constructions of self-responsibility and individual empowerment, current narratives around bullying interventions suggest that resilience in relation to bullying is a skill that can be taught and acquired (see also Sims-Schouten and Edwards, 2016). A key assumption within this is that resilience skills constitute a knowledge repertoire, a learned skill, as well as a prescribed notion of autonomous individuation and Self, with its intrinsic acceptance of responsibility for self-care (Bauman, 2000). Here the focus is not on how an environment free from bullying and fear might be created, but instead on individual accountability and responsibility for developing resilience. The danger is that long-term implications of bullying are negated in favour of a neoliberal approach towards self-responsibility in the here and now. This has implications for strategies in relation to bullying and supporting young people in building resilience.

The first section sets the scene by providing an overview of core research in bullying, as well as defining 'bullying' and 'resilience' and critically discussing the link between bullying and resilience. The next section provides examples of voices from the present and past, highlighting how now, just like in the past, bullying and related interventions are linked to a person's ability to be resilient, stick up for themselves and 'Man up!' The final section views bullying and related interventions, including whole-school approaches, in light of neoliberal viewpoints and perspectives. As with the other chapters, the chapter ends with a discussion section and a reflection on implications for practice.

Setting the scene: bullying and resilience?

A quick google search using the terms bullying and resilience reveals that much advice from charities and government websites, as well as academics, across the world, in relation to how to tackle bullying, is centred around being or becoming resilient. Yet, what this really means and how this type of resilience is achieved is rarely explored here, other than referred to in general terms. For example, the Anti-bullying Ambassadors' site (UK) describes resilience in the context of bullying as 'the ability to understand and overcome stressful situations' (Antibullyingpro, n.d.), whereas in a blog entitled 'Help Your Child Develop Resilience' the US site Stopbullying.gov refers to resilience as 'the ability to overcome serious hardship and adapt well when faced with adverse experiences, including bullying' (Stopbullying, 2021). Furthermore, in their article entitled 'Resilience to bullying victimization', Sapouna and Wolke (2013) state

that resilient individuals are those who manifest positive outcomes over time, despite facing significant adversities. Here, they point to not being depressed as an indicator of emotional adjustment, performing well at school as an indicator of academic adjustment and not being delinquent as an indicator of behavioural adjustment (Sapouna and Wolke, 2013, p. 998). Sapouna and Wolke highlight that relationships with parents and siblings play an important role in promoting emotional and behavioural adjustment among victims of bullying, and conclude that interventions that target both the psychosocial skills of adolescents and their relationships with their family are more likely to be successful.

The above is supported by recent research and studies across the world (e.g., Calvete et al., 2022; Fang et al., 2022; Lin et al., 2022). For example, in their longitudinal study taking place in Taiwan, Lin et al. (2022) found that resilience has a protective effect on depression among adolescents who have experienced bullying, and suggest that interventions to reduce negative effects of bullying victimisation should start with increasing an individual's resilience during adolescence. Similarly, a randomised controlled trial in Spain tested the effects of an online growth mindset intervention aimed at building resilience in victims (Calvete et al., 2022). Calvete et al. (2022) conclude that the resilience intervention reduced the predictive association between online peer victimisation and online peer aggression and social anxiety, and it increased the association between online peer victimisation and attitude towards defending the victims.

Yet, the studies cited above are quite vague about what resilience in the context of bullying actually entails and how this is achieved, other than referring to this in general terms as 'positive adaptation in light of adversity', 'emotional adjustment', 'positive outcomes' and the role of relationships. At the same time, the research/studies are much more specific when it comes to conceptualising and defining the term bullying. For example, Sapouna and Wolke (2013, p.1997) refer to bullying as:

a form of aggressive behaviour that is repeated over time against a person who feels powerless to defend him or herself and can take many forms such as hitting, name calling, social exclusion, spreading nasty rumours and/or sending insulting messages by phone.

Furthermore, Fang et al. (2022) define bullying as repeated and deliberate aggression, using physical or emotional means to control or harm another person and as a form of damaged peer relationship. Charities and governmental websites reference similar explanations of bullying. For

example, the UK government site (Gov.uk, n.d.) indicates that although there is no legal definition, bullying is usually defined as behaviour that is repeated, intended to hurt someone either physically or emotionally, often aimed at certain groups, for example, because of race, religion, gender or sexual orientation, and can take many forms including physical assault, teasing, making threats, name calling, cyberbullying (bullying via mobile phone or online). At the same time the website for the National Centre Against Bullying, Australia (Antibullyingcrusader, n.d.) defines bullying as an ongoing and deliberate misuse of power in relationships through repeated verbal, physical and/or social behaviour that intends to cause physical, social and/or psychological harm. Finally, the World Health Organization (WHO) defines bullying as the intentional use of physical or psychological force against others (Bonell et al., 2018).

Interestingly, like resilience, while bullying and related behaviour have been discussed for many years, bullying has only been addressed in empirical research since the 1970s, with the earliest studies by Dan Olweus emerging in Scandinavia (Hymel and Swearer, 2015; Olweus, 1978; Smith, 2023). The English word 'bully', initially used as a term of endearment originating from the old Dutch term 'boele' (= 'lieve' or sweetheart), acquired negative connotation during the seventeenth century as a noisy, blustering person who is cruel to others, possibly influenced by 'bull' (i.e., male cattle) (Harper, 2013; see also Vries, 1971). Olweus, former research professor at the University of Bergen, Norway, who is widely recognised as pioneer in the field of bullying prevention, defined bullying as unwanted aggressive behaviour that is repeated over time and involves an imbalance of power or strength (1978). Olweus developed the Olweus Bullying/Victim Questionnaire in 1983, an evidencebased prevention programme, which has become one of the most widely used instruments worldwide to measure the prevalence of bullying (Ossa et al., 2021; Salmivalli and Peets, 2018; Smith et al., 2016). The questionnaire provides students with a definition of bullying that includes three essential characteristics, namely intent to cause harm to another person; repetitive conduct; and power imbalance between the victim and the perpetrator (Olweus, 1978; Salmivalli and Peets, 2018). It should, however, be noted that the Olweus Bullying Prevention Program has been criticised for labelling students either as bullies or victims, ascribing these groups particular (character) traits, thereby sidelining issues of bias, and at times reproducing norms that foster bullying, whilst at the same time overlooking the sociostructural environment that creates and maintains it (Temko, 2019).

Since Olweus's seminal work, numerous studies have been undertaken in relation to bullying, with a focus on causes of bullying and characteristics of bullies and bullied children, as well as introducing interventions ranging from peer support to restorative justice, including teaching social skills such as friendship, empathy and anger management, either adopting the whole-school approach or as individual interventions (Myers and Cowie, 2019; Smith et al., 2019). Yet, definitions of bullying have not changed much over time since Olweus's research in the 1970s, and researchers largely continue to refer to bullying as unwanted aggressive behaviour that is repeated over time and involves an imbalance of power or strength. Moreover, in the past decades, cyberbullying has emerged as a phenomenon – vet, researchers differ in how they define it. For example, while some view cyberbullying as a new form of traditional bullying, following Olweus's classical definition of bullying, others view it as different from traditional bullying, due to its ability to invade all aspects of a target's privacy day and night, both at home and at the educational institution where the target studies (Larranaga et al., 2019; Myers and Cowie, 2019).

In his paper 'On bullshit and bullying', Jacobson (2010) takes a slightly different approach, viewing bullying through a philosophical, rather than an empirical, lens to better understand the intentionality of bullying by considering the satisfaction derived in the tears of another, suggesting that the bully is 'bullshitting' us and her/his project is far bigger than the victim s/he targets. Jacobson concludes that bullying has more to do with the perception of others, and is bullshit aimed at manipulating perception, rather than the victim, as the target of its activity. Here, the bully's actions are aimed at manipulating what others think of him or herself. It follows, as Jacobson argues (2010), that education requires taking seriously those we educate, listening to their 'I like', and learning to recognise when we are being bullshitted and when we are not.

Regardless of its definition, it is clear that school bullying is a major risk factor for children's emotional health and wellbeing and something that continues to plague students across the globe (Cowie and Myers, 2018; Johander et al., 2023). Since the Children Act 1989, bullying is perceived as a child protection concern in the UK, and schools are expected to draw on a range of services to tackle this. The mental health consequences of bullying can be severe and long-lasting, and bullying affects children's educational attainment, attendance and social relationships (Arseneault, 2018; Bonell et al., 2018). Not only that, with the upsurge in cyberbullying, the potential threat and impact is day and

night, in children's homes, on their way to and from school and in their communities (Cowie and Myers, 2018).

It is, therefore, not a surprise that resilience has been identified

as a core coping mechanism here. For example, Mamlok and Chang-Kredl (2019) refer to reflectiveness, agency and relatedness as aspects of resilience, which involve a holistic approach. The latter, they argue, means that anti-bullying efforts should not be confined to responding to specific cases, rather, schools or parents should consider children's socio-emotional lives and help students to critically reflect on their assumptions and feelings about aspects of identity, like race, gender and social class, or their own positions in society and their own behaviour. This also includes dialogue with the bullied students, as well as with the perpetrators, in order to build resilience in individual students and in school communities (Mamlok and Chang-Kredl, 2019). Similar to Jacobson's points earlier on, Mamlok and Chang-Kredl (2019) also refer to the need to explore and deconstruct social and cultural narratives and how students see themselves and others and can support each other, through dialogue and role-play. Here they also advocate for the need for parents and educators to pay attention to children's development of resilience and empathy, with the ultimate goal of better preparing children and youth to understand and counter hateful messages in online spaces.

What this means in practice is perhaps best explained by Cefai (2018), who argues that the resilience perspective is concerned with protection from bullying, abuse, disadvantage, discrimination and other barriers by focussing on children's strengths and assets. Rather than an extraordinary process bouncing back to pre-trauma level (surviving), it is 'ordinary magic' and 'ordinary responses' focussing on strengths and moving forward (thriving), a process of growth (see also Masten, 2019). Thus, resilience in light of bullying means being able to benefit from positive contextual, social and individual variables that influence the developmental trajectories from adversity to problematic behaviours, mental distress and poor health outcomes. These positive contextual, social and individual variables, known as protective factors, work in opposition to adversity, and help youth to overcome negative effects of adversity exposure (Lin et al., 2022). While the operational definition of resilience varies, it generally includes hardiness, optimism, competence, self-esteem, social skills, achievement and absence of pathology in the face of adversity (see Luthar, 2006; Masten, 2019; Rutter, 2012).

Yet, measuring resilience in the context of bullying is complicated due to the potential number of intersecting factors (protective and nonprotective factors), which include both a child's personal situation, abilities and circumstances, as well as environmental factors and family factors (Ungar and Theron, 2020). Moreover, while critical in facilitating the development of resilience in children and young people, it should also be noted that environmental and social contexts are mediated through an individual's perception and interpretation. For example, while antibullying approaches, such as restorative justice and peer support, have been identified as useful in this context, some argue that this may deny students the opportunity to develop resilience to bullying, as resilience may evolve from confronting and coping with stressful experiences (Moore and Woodcock, 2017). The latter, like Cefai above (2018), argue in favour of considering bullying from a resilience (or strength-based) perspective as a better lens compared to some anti-bullying approaches, which are based on a deficit-based model of bullying, which explicitly focus on the bully's deficits, while also making implicit inferences about the victim's deficits (Moore and Woodcock, 2017).

Padesky and Mooney's (2012) strengths-based approach to resilience, which is grounded in cognitive behavioural therapy with a focus on resilience as a process, rather than an end product, is useful here as well. Here the focus is on searching for and identifying general strengths within the individual that can then be applied to a range of problem areas in need of resilience, such as bullying. Yet, while resilience-based approaches to bullying may be an alternative to more conventional antibullying interventions, there is a need to move away from general phrases around strength of character and positive emotions, as there is a danger that this becomes an accusation, accusing children who do not cope with bullying (or other adversities) as lacking, weak and in need of improvement. Below, I will put this in perspective by providing voices from the past in relation to bullying.

Voices from the past: individual strengths and responsibility

As mentioned earlier on in this chapter, although there was little or no empirical research around bullying till Olweus's research in the 1970s (Olweus, 1978), bullying as a concept has been discussed for many years. One example of this is the archives of the Waifs and Strays Society, introduced in Chapter 1 and discussed in Chapter 2. The Waifs and Strays Society offered a Home and support to children from deprived and pauper families, in most cases where a parent had died, was unable to work due to no fault of their own and/or found themselves in a mental health

asylum (Soares, 2016). Details about the children in question are kept in case files held at the Children's Society Archives in London, consisting of correspondence from custodians, educators, medical officers, church reverends, practitioners linked to asylums and industrial schools, as well as parents and children (Sims-Schouten, 2021b, 2022).

The Children's Society Archives are vast – as an example, about 22,500 children were cared for between 1881 (when the Society was founded) and the end of the First World War (1918). The Waifs and Strays' Society became the Church of England Children's Society in 1946 and is now known as the Children's Society. A number of the Children's Society Archives refer to bullying behaviour, in one way or another, and below I present relevant examples.

The first example (case file 5058) relates to a boy, born in 1884, who was taken into care by the Waifs and Strays in 1895, aged 11 years old. The application, dated 1895, refers to the father as a 'good husband and father, liked by his work companions', yet the children were 'grossly neglected by their mother, and in a ragged and dirty condition' and 'other children called after them, and the boy Charles in particular, resented this, and played truant several times'.

It could be argued that in light of bullying definitions discussed in the previous section, the above reference to 'other children called after them' is an example of this, and the boy, Charles, who was on the receiving end of this, 'played truant several times'. Research highlights that the (mental health) consequences of bullying can be severe and long-lasting and bullying affects children's educational attainment, attendance and social relationships (Arseneault, 2018; Cowie and Myers, 2018). As such, it is not a surprise that Charles played truant to avoid the bullying that he was on the receiving end of. Since the Children Act 1989, bullying is perceived as a child protection concern in the UK, and schools are expected to draw on a range of services to tackle this, but no such policies and practices were in place in the late 1800s.

That is not to say that bullying was not discussed and acknowledged in the nineteenth century. For example, the novel *Tom Brown's Schooldays*, by Thomas Hughes, published in 1857, contains examples of bullying in school, including a letter from a friend of the author drawing attention to the harm bullying can do (Hughes, 1913; Koo, 2007). Thus, although bullying was a recognised phenomenon in Victorian England, it was not officially reported and there is little talk and acknowledgement of anti-bullying interventions. What is interesting in the extract above is the focus on the boy (Charles) 'resenting' children calling after him

and consequently playing truant – the latter, rather than the bullying, is frowned upon.

Contemporary definitions of resilience that adopt strength of character and positive emotions as the main characteristics of a resilient person, would class Charles as lacking on this front – after all, his strategy is avoidance in the form of avoiding school altogether. Of course, Charles is not exactly able to draw on the protective factors that underpin the development of resilience, as he is 'grossly neglected' by his mother and 'in a ragged and dirty condition'. What happens next is why Charles is eventually taken on by the Waifs and Strays, namely the suicide of his father, as a result of his children's truanting. In 1870 the Elementary Education Act was established, which was the first of a number of Acts of Parliament passed between 1870 and 1893 to create compulsory education in England and Wales for children aged between 5 and 13; the latter was extended by the Elementary Education Act 1880 (Carlen et al., 1992: Daglish, 1996). The Act allowed school boards to rule that children aged between 5 and 13 should attend school. It did not make all education free or compulsory but did order, for the first time, that a school be placed in reach of every child (Davison, 1986; Ellis, 1973; Farrington, 1980). It was the 'disgrace' that the truancy of the children caused the father and the warnings by the School Board Office, leading to a summons issued against him, that triggered his suicide:

they [the children] were repeatedly punished by their father who had been warned by the School Board Office – Eventually a summons was issued against him. The poor fellow was so broken hearted about the disgrace that he hanged himself in the warehouse where he worked.

There is no mention in the Waifs and Strays of how this affected the children, other than that they were taken on by the institution following the suicide of their father. Instead, care is taken to highlight that the father was a 'good husband and father, liked by his work companions'. The latter is interesting in light of Scottish author and government reformer Smiles's influential books on *Self-Help* and *Character*, published in 1859 and 1871 respectively, in which he talks about self-help and character in terms of work, courage, self-control, duty, manners and conduct (Smiles, 1859; 1871). Viewed as early discussions and expressions in relation to resilience, it could be argued that by referring to the father's 'good character' the suggestion is that his ability to engage in self-help

(and resilience?) is impaired by the poor conduct and behaviour of his wife (as someone who neglects her children) and children (who play truant). Yet, the fact that playing truant may in and of itself be a coping skill, an element of resilience and cry for help by the boy (Charles), is not acknowledged here.

The next case file (case 16338) refers to a boy, born in 1897, who was taken on by the Waifs and Strays in 1911; his mother is described as dead and his father alive. The application to the Waifs and Strays highlights that since the mother's death 'the children have all run very wild and became most unmanageable' and 'the father cannot get anyone to stay as housekeeper, owing to this particular lad who is one of the greatest bullies and strikes the housekeepers ... [and] his language is filthy'. Here, it is the boy himself who is described as 'one of the greatest bullies'. Yet, as discussed in previous chapters, resistance and defiance can in and of themselves be signs of resilience, and perhaps the fact that he is 'unmanageable' is an example of that. Furthermore, his language is described as 'filthy' and he has 'terrible fits of temper', as can be seen below. Yet, as Cowie and Myers (2018) highlight, the mental health and wellbeing of bullies should not be negated and it is imperative to address issues that the bully, as well as the bullied, may face. However, in this case the child is judged by his behaviour and not what may underlie this and a letter from Valley Hotel, dated 1914, requests for the boy to be taken away: 'I really cannot put up with him, he has such terrible fits of temper, Saturday he went out of the house saying he was going to drown himself, so had to send one of my maids after him' and 'I tried my best but it is no use, I don't think he can help himself'. A further note from 1914 indicates that he drowned himself, which sadly highlights that the young boy's issues were not addressed. Again, the behaviour of the child discussed above may well be a cry for help and a way of defying and resisting the situation he finds himself in – that is, an element of resilience – yet, this is not viewed this way and he eventually commits suicide, aged 17 years old, in 1914.

The next example (case file 15491) also ends in suicide – in this case, as a consequence of severe bullying, which resulted in the drowning of the victim. The case file is relating a girl, born in 1897, who was taken on by the Waifs and Strays in 1910 when she was 13 years old. The application to the Waifs and Strays indicates that the father is an alcoholic, and the mother is described as terrified of him. The girl is described as 'a very nice girl and bears an excellent character at school'. Sadly, in 1918 the girl commits suicide. The case file contains a letter from the Matron of Wilton Lodge (a Home; also responsible for placing girls in domestic

service), who expresses that they cannot be found responsible (here 'not' is underlined):

And regards poor G, grieved as we are at her sad death, we do <u>not</u> acknowledge that we are responsible; the poor girl was curiously reserved and did not give her confidence [i.e., she did not confide in people] as all the other girls do to the matron; we do not think that a girl of 20 should need visiting.

The above is in relation to the bullying and abuse the girl experienced at the hand of the housekeeper in Bilting House, Wye, which ultimately led to the suicide. The latter is also referenced in two newspaper articles of the time, that were included in the case file. The sources for the clippings are not recorded, but the text of the reports is reproduced in Box 4.1 (note the different spelling for the housekeeper's name).

Box 4.1 Newspaper reports into bullying, from case file 15491

Cruelty to a girl in a country house

Woman sentenced to two months' hard labour

Isabella Ruth Nairne, housekeeper, Bilting House, Wye, was sentenced at Ashford (Kent) yesterday to two months' hard labour for assaulting a 16-year-old maid, Dorothy Miller.

It was alleged that Nairne frequently boxed the girl's ears, and that she struck her on several occasions with brush handles.

A doctor who examined the girl said he counted 25 bruises.

Nairne, who denied hitting the girl, admitted being censured by a coroner's court for her treatment of a girl who drowned herself.

Maid thrashed with brooms

Hard labour for brutal housekeeper: a tragedy recalled

Convicted of assaulting a 16-year-old maid, Isabella Ruth Mairne, housekeeper to Miss Knight of Bilting House, Wye, was, at Ashford (Kent) sent to prison for two months' hard labour.

It was shown that she frequently boxed the girl's ears, and struck her on several occasions with brush handles.

A doctor found twenty-six bruises on the girl's body.

Mairne, who denied hitting the girl, admitted having been censured by a coroner's jury for her treatment of a girl serving under her who drowned herself.

In line with Jacobson's argument regarding 'bullying and bullshit' (2010), it could be argued that the housekeeper, as a bully, is bullshitting us and her project is far bigger than the victim she targeted, because when one victim disappears (through the suicide of the girl above), she simply moves on to someone else. Thus, her bullying has more to do with the perception of others, and is bullshit aimed at manipulating perception, rather than the victim, as the target of its activity (Jacobson, 2010).

The reports in Box 4.1 are not the first examples of a newspaper referencing bullying and abuse. For example, in 1885 *The Times* gave significant attention to an incident where a 12-year-old boy in the King's School in Cambridge died from bullying behaviour by an older group. It was a former student of the school who wrote a letter to the editor of *The Times*, after the death of the boy on 27 April 1885, reporting on the incident and flagging the ignorance of the teachers about the phenomenon. The accident prompted people to write letters to the council, urging them to investigate the death. Yet, the inspectors of the council saw the bullying as a misadventure and announced that this behaviour could be a normal part of a boy's school life (Koo, 2007).

Voices from the present: 'man up!'

Common definitions of resilience in childhood embrace internal assets (e.g., strength of character, personality) and external support factors (e.g., extended family, friends, supportive adults) as facilitative forces when it comes to coping in light of adversity (Masten and Barnes, 2018). The 'voices from the present' below (drawing on semi-structured interviews undertaken between 2015 and 2017; see Chapter 1) highlight that now, just as in the past, there is an element of confusion around what resilience in light of bullying actually means, which sometimes results in blaming the person who is on the receiving end of the bullying for not having the strength of character or for not being resilient enough, as well as pointing

the finger at parents. As with the girl who committed suicide because of bullying and abuse, discussed in the previous section, with the Matron absolving herself from any responsibility ('we do <u>not</u> acknowledge that we are responsible; the poor girl was curiously reserved'), the extract below also suggests that the responsibility lies with the child, because they are 'feeding into it'.

The extract comes from a focus group discussion with teachers, which took place in 2016, and is part of a conversation about a girl who had been bullied in the school of one of the teachers:

Teacher1 (male): Of course, if you are being bullied, its nasty and then

you're almost doing it to yourself I think, feeding

into it, aren't they?

Teacher 2 (male): Yeah, it's like, I'm sorry you feel this way, Man Up!,

in the nicest possible way, you need, need to teach

that resilience.

Here resilience is addressed as something that can be taught, as is evident from the phrase 'need to teach that resilience'. Not only that, resilience is gendered and equated with 'manning up'. Both the reference to 'teaching that resilience' and 'Man Up' are problematic. To man up, as an action-oriented discourse, embodies idealised masculinity, which serves to position and construct men, or being male, as being strong enough not to need to worry or care (as opposed to women, as 'womanning up' does not exist as a phrase) (Bhana et al., 2023; Ging and Neary, 2019; Knight et al., 2012).

Teaching a child to man up (even if, as the teacher above says 'in the nicest possible way') is not just problematic because it reinforces gendered perceptions of coping and resilience, it also suggests a deficit approach, where the person on the receiving end is viewed as having to be taught to be stronger, like a man! Social media and 'do-it-yourself' resilience or wellbeing sites or news items feed into this deficit approach. For example, an article in the *Guardian* (5 January 2019) entitled 'Six ways to raise a resilient child', refers to the need to teach delayed gratification and that 'resilience means understanding you can't always have what you want as soon as you want it'. Yet, this negates the focus on the strengths the person already has or may have. Research highlights the benefits of considering bullying and related responses in light of someone's strengths, rather than explicitly and implicitly focussing on the bully's and victim's deficits (Cefai, 2018; Padesky and Mooney, 2012; Moore and Woodcock, 2017).

Not only do children and young people sometimes get blamed for not being resilient enough to deal with bullying, blame is also extended to parents, with parents constructed as being responsible for making children 'targets' (as can be seen below) and the fact that 'other children called after them' (as can be seen from the previous section). The following comes from a parent and is part of a focus group discussion with other parents around bullying: 'Sometimes the bigger kids get bullied; it is usually the parents from a certain background, and they give their kids junk food and stuff, and then those kids get targeted at school' (Sims-Schouten and Edwards, 2018). Referring to parents 'from a certain background' the extract above makes a direct link between parents' socioeconomic background (or class), their skills and behaviour as parents and how these impact upon the child, that is, the fact that they become targeted and a victim of bullying. There is a large body of research around stigmas and labels in relation to class in a UK context (e.g., Goffman, 1963; Rich and Lupton, 2022; Tyler, 2020; Wilson and McGuire, 2022). For example, in his seminal 1963 book Stigma: Notes on the Management of Spoiled Identity, Goffman defined the experience of stigma as 'an undesired differentness', something that can lead to an individual being viewed by the general population as 'lesser in some way' (Goffman, 1963, p. 3). Since then, stigma has been reviewed and developed significantly in relation to societal inequality. For example, Wilson and McGuire (2022) found that working-class mothers feel judged negatively by teachers and the school system, based on their marginalised (and sometimes multiple) social identities, expressing feelings of powerlessness and in some cases internalisation of stigmatised traits. Moreover, there is evidence, from UK-based research as well as international research, that parents' socioeconomic class and migration background/status and ethnicity all increase the likelihood of being bullied (Caravita et al., 2021; DfE, 2023; Ent et al., 2020; Wang et al., 2021). Thus, there is a greater need for a focus on structural factors that may lead to stigmas, labelling and bullying (Tyler and Slater, 2018).

Relationships with parents and siblings remain key focal points in promoting emotional and behavioural adjustment (i.e., resilience) among victims of bullying, including the need for interventions that target the psychosocial skills of children/young people (both bullies and victims) (e.g., Calvete et al., 2022; Fang et al., 2022; Lin et al., 2022). Thus, as well as being viewed as potential facilitators of bullying, by being responsible for children becoming 'easy targets', parents are also constructed as instrumental in 'teaching children to deal with it' as can be seen from the extract below, which comes from a focus group with

parents: 'Some children are easy targets, for example children with disabilities or children from an ethnic minority background, so the parents need to be aware of that and teach children to deal with this, but also that children need to be kind to each other'. Yet, this negates the fact that for some children, either due to being in the care system or being an unaccompanied child migrant, this parental resource is not available (Mires et al., 2018; Samara et al., 2019). Research highlights that interventions with a focus on internal strengths, problem-solving and bystander support can play a positive role here (Cefai, 2018; Leff et al., 2020). Yet, the danger of focussing on internal strengths is that it may facilitate an expectation to be self-responsible, like a switch that can be turned on and off, pushing children into a position where they feel they have to justify their actions in response to bullying. The latter is evident from the extract below, which comes from a focus group with young people: 'I'm a midget. And I'm, and I, so this kid tried bullving me, and he's a fat shit. I punched him, broke his nose and I knocked him out and I got excluded for four days for it, but I was sticking up for myself'. By explaining how he, as a small person ('a midget'), was sticking up for himself by breaking the nose of the bully, described as 'a fat shit', this young person suggests that the ability to stick up for oneself is superior to any other action, even violence, physically harming the 'bully' to the extent that he knocked him out, and was excluded for four days. It is not uncommon for parents, and even teachers, to recommend hitting back (Frisen et al., 2007). Yet, research also highlights that of children who are bullied, those who hit back are more likely to be bullied six months later, than children who don't retaliate (Healy, 2015). Nevertheless, the focus on 'I was sticking up for myself' reinforces self-responsibility and a focus on internal strength and ability – the latter are all concepts promoted by common definitions of resilience (Masten, 2019; Rutter, 2012).

Thus, a focus on internal strength (i.e., strength of character) encourages individuals to describe their experiences as freely and deliberately chosen, bearing full responsibility for their choices, regardless of the degree to which social forces constrain their behaviour, and as such is closely aligned with common definitions of neoliberalism (Bauman, 2000; Meyer, 2016). The latter is also evident from the individual interview examples below – the first coming from a male and the second female (see also Sims-Schouten and Edwards, 2018): 'Nah I don't need help with that. I am well capable to deal with this myself' and 'You can stand up to them, that is what you should do, sticking up for myself'. By centralising the need to stick up for oneself, as with the extract above, and linking this to 'being capable', the focus is on judging one's ability

when it comes to dealing with bullying, rather than on ending bullying or removing structural barriers – again, something that closely mirrors the punitiveness intrinsically linked with neoliberalism, which will be discussed further below (Bauman and Donskis, 2013; Harvey 2007).

Bullying within a neoliberal framework: whole-school setting versus individual approach?

Although understandings and definitions of resilience have identified that external protective factors, such as relationship with parents, siblings and teachers, may enhance resilient functioning in light of bullying, it is clear that more often than not individual attributes, such as the ability to stick up for oneself and man up are focussed upon as a core buffer. This focus on individual skills and responsibility is also propagated by neoliberal viewpoints. Neoliberalism is a political ideology that advocates for the market to foster economic growth and innovation, through deregulation, austerity, privatisation, capitalism and individualism (Bauman, 2000; LaGuardia and Oelke, 2021). Here 'individualism' refers to a focus on individual choice at the cost of environmental and societal institutions and structures, both as facilitative and limiting factors.

Set against a backdrop of neoliberalism, it could be argued that resilience in light of bullying involves seeking out opportunities and protective factors. Yet, it also means that notions of collective responsibility and actions are replaced by notions of self-responsibility and determinism, but without adequate tools for the task; thus, 'individualisation is a fate not a choice' (Bauman, 2000, p. 34). By stigmatising 'certain parents' (see previous sections) for making their child more vulnerable to becoming targets of bullies and centralising the child's ability to stick up for themselves through manning up and being taught resilience, there is a danger that educational settings merely reproduce the culture of ignorance and instrumental rationality inherent in neoliberal attitudes (Sims, 2017).

Moreover, there is a danger of accusing children of lacking in resilience if they are not coping well with bullying, telling them to 'Man up!' and expecting them to be self-responsible. Given the role of education in shaping both thinking and behaviour, it could be argued that education professionals have a crucial role in leading resistance here; as Giroux (2015, p. 200) argues 'resistance is not a luxury but a necessity'. The latter involves the need for educational settings to focus professional conversations around the rights of each individual child and family, and only when they have determined the most appropriate actions to support those rights

should they identify how these choices meet the required outcome (Sims, 2017). Yet, this requires confidence and buy-in from teachers and school leaders. A national UK survey undertaken by the DfE (2023, p. 84) in 2021/ 22 found that school leaders felt more confident in addressing almost all 'types of bullying', compared to teachers (here 'types of bullying' are defined as: bullving based on disability/special needs, looks/appearance, race/ethnicity, religion/belief, nationality, sex, sexuality and gender reassignment). Over 90 per cent of school leaders felt confident in addressing each type of bullying, except bullying based on sexual orientation (85 per cent) or gender reassignment (66 per cent) (DfE, 2023, p. 83). Primary school leaders were more likely than secondary school leaders to report feeling confident in addressing bullying based on a pupil's looks/appearance (87 per cent vs. 84 per cent). In turn, secondary school leaders were more likely than primary school leaders to report feeling confident in addressing bullying based on a pupil's sexual orientation (81 per cent vs. 76 per cent) and gender reassignment (67 per cent vs. 59 per cent) (DfE, 2023, p. 84).

Since Olweus's seminal research in the 1970s, several anti-bullying interventions and programmes have been developed, designed to prevent and decrease bullying behaviour and impact. Most of these interventions are multifaceted packages that combine intervention components. For example, combining a focus on cognitive-emotional skills to improve peer support and bullies' emotion regulation, and increase empathy for victims with social-emotional education addressing victims' (and sometimes bullies') social skills, and 'teach' them how to cope with negative feelings and situations (Ganesan et al., 2021; Goldberg et al., 2019). At the same time, other programmes focus on individual behaviours, group norms and promoting a positive social climate in schools (Lodi et al., 2022; Ponsford et al., 2022). Several countries have launched national initiatives that adopt a school-wide approach to social and emotional learning (e.g., see Hensums et al., 2022). Whole-school interventions are aimed at modifying overall school policies and systems to address bullying and improve wellbeing, rather than merely delivering classroombased lessons, and are viewed as efficient ways of improving outcomes in children and young people and promoting student wellbeing and antibullying (Bonell et al., 2018; Ponsford et al., 2022). Yet, for whole-school interventions to be successful, it is imperative that they are tailored to school cultures and structures, with key enablers of school interventions identified as strong institutional capacity (e.g., supportive senior management), alignment of the intervention with school ethos and priorities, and positive pre-existing student and teacher attitudes and parental support for interventions (Ponsford et al., 2022).

Many school-based programmes have targeted an interrelated set of skills that fall under the headings of mental health promotion, character education, social and emotional learning (SEL), bullying prevention, life skills, strengths-based approaches and youth development (Hensums et al., 2022). For example, KidsMatter Primary, developed in Australia, is a mental health and wellbeing whole-school framework that supports primary schools in implementing social and emotional learning school-wide (Golberg et al., 2019). The 'Learning Together' intervention, developed by Bonell et al. (2018), is an example of a UK school-based intervention that draws on the 'whole-school approach', combined with restorative practice and social and emotional education. A key element of the Learning Together intervention is to increase student engagement with school as a social determinant of health, particularly for the most socially disadvantaged students. Here restorative practice is used to prevent or resolve conflicts between students or between staff and students. by enabling victims to communicate to perpetrators the effects of the harm, and for perpetrators to acknowledge and amend their behaviour. At the same time the Learning Together approach utilises social and emotional education to teach young people the skills needed to manage their emotions and enhance social relationships, improve mental health and reduce bullying. Initial findings indicate that the approach is instrumental in reducing student reports of bullying victimisation, compared with schools continuing their standard practice, although there appears to be no reduction in overall student reports of aggression (Bonell et al., 2018).

Although restorative approaches and social and emotional education can be useful in tackling bullying and improving student (and staff) wellbeing, there are a few potential issues here. Firstly, it should be noted that there is limited evidence-based research in relation to the effectiveness of restorative practices in schools. Secondly, while some studies have found a positive outcome of restorative practice, the latter is subject to the approach being carried out sensitively and carefully, making sure that participants are empowered and enabled (Lodi et al., 2022). The latter can be achieved by integrating psychology of affect theory, as an alternative to the punitive approaches often used by schools, maximising positive affect through proactive practices, such as restorative circles aimed at developing closer bonds and relationships among youth, and encouraging free expression of emotion through training in practices such as affective statements and questions (Acosta et al., 2019). Thus, restorative practice requires training, empathy and understanding in order to apply this correctly – if not, then there is simply the danger that this reinforces neoliberal viewpoints, namely for young people to get on with it, and sort things through talking to each other. Finally, the same can be said about social and emotional education. In line with what the teacher said in the previous section, when talking about the 'need to teach that resilience', there is a danger that social and emotional education once again reinforces neoliberal structures and ideologies, ultimately putting the onus on the individual to become more resilient and capable in light of bullying behaviour.

Despite many years of bullying research and anti-bullying programmes and interventions, there is no clear solution to the problem. and whilst the Covid-19 pandemic marked a relief from school bullying for many, there is also evidence of increased prevalence of cyberbullying during the pandemic (Armitage, 2021; Forsberg and Thorvaldsen, 2022; Vaillancourt et al., 2021). This chapter highlights a number of limitations of interventions that focus on resilience in light of bullying, most notably because it puts the onus on the victim to be stronger and more capable when it comes to dealing with this. Moreover, it also negates the issues that the bully themself may be facing. For example, research highlights links between bullying and behavioural, emotional, educational and social problems, suggesting that anti-bullying programmes and interventions aimed at reducing conduct problems could benefit from greater integration (Cowie and Myers, 2018; Ganesan, 2021). Finally, the focus on making victims more resilient and constructing them as 'easy targets' and 'feeding into it', as the participants in the previous sections suggested, ignores the fact that there may be multiple unrelated reasons for why bullying is happening. As Jacobson (2010) says, the bully may simply be bullshitting us and the bullying has more to do with the perception of others, and is bullshit aimed at manipulating perception, rather than the victim, as the target of its activity.

According to the UK National Behaviour Survey Report (DfE, 2023, p. 78) 22 per cent of pupils across primary and secondary schools reported that they had been bullied in 2021/22. The most common perceived reason reported for being bullied was the way they looked (45 per cent for those bullied in person; 52 per cent for those bullied online), followed by their sexual orientation (16 cent in person; 17 per cent online), disability or special educational need (12 per cent in person; 18 per cent online), their gender (9 per cent in person; 15 per cent online), their race or ethnicity (9 per cent in person and online), their nationality (6 per cent in person; 11 per cent online) and their religion or beliefs (3 per cent in person; 2 per cent online). There is evidence that biases that children exhibit are not random – children take cues from Self–Other constructions in society and attach meaning to subtle and not so subtle messages

about the relative desirability of belonging to one social group as opposed to another (Sullivan et al., 2022). As children are learning to conform to the broader cultural and social norms, they will gauge these 'community norms' from a wide range of sources – not just their own families, but also social media and other outlets. Thus, this highlights the need for a closer look at harmful practices and perceptions in the wider society, when it comes to racism, discrimination and marginalisation, rather than just focussing on building resilience. This will be discussed in Chapter 5.

This chapter highlights that while resilience has a role to play in bullying, both for the victim and bully, more often than not resilience is underexplored and used to label children as lacking in one way or another. For example, by telling them to 'Man up!', if they are not coping well with bullying, and expecting them to be self-responsible, as can be seen from the voices from the past and present above. Some of this may be related to the fact that resilience is poorly defined and understood. Much of the research on bullying and resilience presented in this chapter does not clearly specify what resilience in light of bullying really entails, other than referring to this in general terms, as psychosocial skills and emotional and behavioural adjustments, and the ability to overcome stressful situations, through internal strength and external support mechanisms (Calvete et al., 2022; Cefai, 2018; Sapouna and Wolke, 2013). At the same time, bullying itself is much more clearly defined. For example, see the earlier reference to the work by Sapouna and Wolke (2013, p.1997), who define bullying as: 'a form of aggressive behaviour that is repeated over time against a person who feels powerless to defend him or herself and can take many forms such as hitting, name calling, social exclusion, spreading nasty rumours and/or sending insulting messages by phone'.

Resilience in light of bullying means being able to benefit from positive contextual, social and individual variables, as a way of countering the immediate and long-term implications of bullying. These positive contextual, social and individual variables, known as protective factors, work in opposition to adversity, and help children and young people overcome negative effects of adversity exposure (Lin et al., 2022). Yet, in practice this is complicated by the neoliberal assumption that one can just tap into this if and when needed. The latter can feed into a deficit-based model of bullying, both with an explicit focus on the bully's deficits, while also making implicit inferences about the victim's deficits, for example, in relation to lacking in strength, confidence and ability to stick up for themselves (Moore and Woodcock, 2017). A strength-based resilience perspective may be more appropriate here, especially if this focusses on already existing strengths and capabilities (Cefai, 2018; Padesky and

Mooney, 2012). For example, Padesky and Mooney's (2012) strengths-based approach to resilience, mentioned earlier on in this chapter, which is grounded in cognitive behavioural therapy with a focus on resilience as a process, rather than an end product. Padesky and Mooney (2012) advocate for the need to search for and identify general strengths within the individual that can then be applied to a range of problem areas in need of resilience, such as bullying. Yet, while resilience-based approaches to bullying may be an alternative to more conventional anti-bullying interventions, there is a need to move away from general phrases around strength of character and positive emotions, as there is a danger that this becomes an accusation, accusing children who do not cope with bullying of being weak and negative.

'Man up!': structural factors and failings

This chapter shows that despite several decades of practice and research (the latter, largely since the 1970s) regarding resilience and bullying, there is a striking resemblance between the voices from the past and present, shared earlier on. Despite being over 100 years apart, the sections 'Voices from the past' and 'Voices from the present' highlight that both in the past and present bullying issues are located with the child/young person, who is on the receiving end, constructing them as 'feeding into it' and 'being curiously reserved and not giving confidence', advocating for a need for this person to become more resilient. Here resilience is viewed as external (something that can be taught), as well as signifying internal strength and character (being able to stick up for oneself). Within this, parents are constructed as both facilitating and hindering factors – the first by providing support and the second by being responsible for children becoming targets, for example, due to 'allowing' children to become overweight. At the same time, bullies are solely judged by their behaviour, and potential underlying factors and trauma are overlooked here, with sometimes severe consequences, such as the suicide of the bully discussed in the section on 'Voices from the past'. Yet, structural factors are ignored here, thereby sidelining issues of bias, and at times reproducing norms that foster bullying, whilst at the same time overlooking the sociostructural environment that creates and maintains it (Temko, 2019).

As mentioned in the previous section – neoliberal perspectives and ideologies with a focus on self-determinism, sometimes also referred to as 'freedom', feed into this, placing responsibility of dealing with bullying incidents on the individual. Yet as Bauman (2000, p. 34) indicates,

'individualisation is a fate not a choice'. In contemporary practices in the UK aimed at tackling bullying, the focus on building resilience as a strategy for coping with bullying often appears alongside whole-school interventions, and are located in a collaborative relational context, highlighting that successful schools should create an environment that prevents bullying from being a serious problem in the first place (see Bonell et al., 2018; Cowie and Myers, 2018; Ponsford et al., 2022). Creating an inclusive environment, which engenders respect for individuals and an understanding of how actions affect others, is central to this strategy. Yet, as with the focus on resilience, there is a sense of individual accountability and responsibility here, putting the onus on the individual to take advantage of the collaborative relational interventions and context (e.g., peer support, restorative justice, social and emotional education) as enablers, and become more resilient and capable in light of bullying behaviour.

In addition to this, there is the danger that issues around bullying (both in relation to the bully and the victim) are located in the here and now, making the young person, their parents and the school accountable, with a specific focus on support and 'learning to be confident', thereby negating the long-term implications and impacts. For example, think about the young person in the section on 'Voices from the past' mentioned above, who was discussed in terms of his bullying and 'filthy' behaviour, yet underlying causes and long-term implications were ignored, and he ended up committing suicide. Manning up appears to be pervasive across the narratives here. Examples of this are the talk in the section on 'Voices from the present' referring to 'not needing help', 'sticking up for oneself' and 'learning to be confident'. This though, highlights a further underlying assumption, namely that individuals have the capacity and relational infrastructure available to support the development of these skills, which they may not have (Bauman, 2000; Bauman and Donskis, 2013). Thus, there is a greater need for a focus on structural factors that may lead to stigmas, labelling and bullying, including socioeconomic situation and the ability to access resilience support and resources (Tyler and Slater, 2018). This has implications for bullying interventions and policies, which will be discussed next.

Implications for theory and practice

There is evidence that current bullying interventions are variable in effectiveness. One reason for this is because the cost/benefit ratio does not necessarily address the problem of bullying itself, or the resilience

of the victim *and* bully within this. For example, a focus on manning up may lead to the perpetuation of the bullying itself, rather than solving the issue. Putting the responsibility on the individual (i.e., the victim), lets other players off the hook, and as such the bullying problem itself is not dealt with. Researchers such as Olweus (1978) have pointed to power imbalance as the major distinguishing feature of bullying. Asking children and young people to man up is untenable in a situation where victims of bullying cannot rectify the situation on their own – the latter can lead to revictimisation, as they simply do not have the power or resources to deal with this.

Nevertheless, if we want to tackle issues in relation to bullying, a consensus is needed on how to approach this. This includes the role of resilience, as the current chapter suggests that notions of resilience are used to an extent to place responsibility of dealing with bullying, and further mental health and wellbeing implications within this, with the young person. Rutter (2012) discusses mechanisms that protect children and young people against the psychological risks associated with adversity (i.e., resilience) in terms of four main processes, namely reduction of risk impact, reduction of negative chain reactions, establishment and maintenance of self-esteem and self-efficacy, and opening up of opportunities. As such the focus of policies should be on creating an environment where the holistic needs of the child are considered, and not just those which require immediate attention in order to fulfil academic goals.

It follows that successful change is more likely to arise from collaborative effort – the latter means coproducing knowledge with children and young people, not just around bullying interventions, but also around what resilience means in light of this. Working collaboratively, facilitates agency, power and a choice – to decide what works for whom and what action(s) best suit circumstances and strengths. For some, restorative practice/justice may work, whereas for others it may be perceived as too intimidating – yet, often children and young people are not consulted here; instead they are merely told that this is the intervention adopted in their school, whether it works for them or not.

Thus, educators have a duty to choose and develop learning opportunities that best address children's rights, and only when these have been identified, match them to the required curriculum documents. Yet, the latter is only possible when children are frequently consulted, not just as a one-off tick box exercise, but something that is common practice. The latter also involves working more closely with families, supporting the development of their strengths and harnessing these to benefit not only the family but the wider (school) community. This includes working with

families and community members to forefront the voices that are often silenced (such as families who are living in poverty or who are migrants or from minority communities). Sometimes this may involve challenging the boundaries and status quo.

The responsibility to resist a neoliberalist approach towards bullying and resilience does not just rest solely on the shoulders of teachers and school settings. This is something that all of us in society are responsible for, and includes identifying and reflecting on areas where things are done because they have always been done in a particular manner: asking why this is and whether there are other ways or new ways of looking at things, creating new understandings and meanings.

5

Resilience in light of discrimination, stigmas and othering

Introduction

Voices from a range of communities are absent from and underrepresented in resilience research and practice, both in the UK and in global contexts, such as children from minority ethnic communities. This is despite the wealth of anti-racist research that centres the role of resilience in achieving against the odds, particularly in relation to education, and which highlights ways in which communities are resilient in the context of discrimination and racism (see Rhamie, 2012; Wright et al., 2016). Drawing on historical and contemporary data from archives, books and interviews with children and adults from minority ethnic and disadvantaged communities in England, this chapter provides examples of how the concept of resilience can be and has been applied in ways that are biased, stigmatising and pathologising.

Centralising marginalised voices from the past and present, I argue that current definitions of resilience need to be redefined and reconceptualised, particularly in settings dominated by (White) middle-class voices that define what positive emotions, 'successful traits' and 'coping mechanisms' entail. Here, through flawed perceptions and interpretations of resilience and othering, voices are marginalised, and people are defined as in need of resilience support, whilst at the same time experiences of discrimination, disadvantage, labels and stigma, such as in relation to safeguarding, mental health needs/practices and school exclusions, are being erased. Here, again, as with the previous chapters, I argue that resilience can also mean defiance and resistance – as a way to resist bad treatment, as well as reflecting agency, identity and ownership of one's own life and choices within this. Reframing resilience thus means

taking account of multifaceted and interactive effects of personal, material, institutional and political factors that impact on behaviour, mental health and wellbeing. The latter also means acknowledging that the way in which behaviour is received and judged requires further reflection and conversations, centralising voices from affected communities.

The first section sets the scene by providing a critical discussion and overview of individualistic models of resilience, viewing this in light of barriers, such as systemic oppression. The next section reflects on historic and contemporary narratives of collective victimhood and resilience, through examples of documented accounts of Black history, such as evidence of resistance and revolts against institutionalised slavery (Brown, 2016). The section that follows puts this in perspective, by providing examples of voices from the Windrush community, specifically with a focus on multifaceted and intersectional effects of personal, material, institutional and political factors (Arnott, 2019; Crenshaw, 2011; Seybold, 1998).

After this, as with previous chapters, I report and reflect on contemporary voices from the community, providing examples of narratives of resisting discrimination, stigmas and bad treatment (see also Sims-Schouten and Gilbert, 2022). The chapter ends with a critical analysis and appeal to revisit core concepts and definitions of resilience, namely positive emotions, successful traits and coping mechanisms, coproducing knowledge with core communities. Here, rather than being about them, (re)defining resilience should occur in *collaboration with* children and adults from a range of communities.

Setting the scene: individualised models of resilience versus systemic oppression

White entitlement can't abide Black voices' and 'Raise your hand if you're Black and have also been called "difficult," "rude," or "abrasive"' writes Rev. Dr. Jacqui Lewis in relation to Prince William labelling his sister-in-law Meghan Markle as 'rude and abrasive', a stereotype recognised by many Black people (The Voice, 2023). This is echoed in my research on perceptions of members from ethnic minority communities regarding social care, social services and education (Sims-Schouten and Gilbert, 2022). See, for example, the quote below, which comes from an interview with a woman who arrived in England from the Caribbean as a young person. I interviewed her in 2018, as part of a project on social care and related support in her local area; her elderly husband was very unwell at the time and received daily home care support from a care

assistant: 'They say "oh you're shouting" or they said that when you were talking to them, you were shouting, you're raising your voice. We're Caribbeans they don't realise that Caribbean people have a very high pitch tone!' It is situations such as these that feed into narratives around good/bad behaviour, positive emotions, strength of character, leading to judgements about 'poor'/'strong' resilience, influenced by prespecified linear models of resilience that centralise specific predictors to a specific outcome, rather than engaging with how individuals make sense of such incidents (Burack et al., 2007; Samaraweera, 2020). For example, research undertaken during the pandemic highlights how through racism and flawed perceptions and interpretations of resilience and othering, children from ethnic minority communities were defined as lacking and in need of resilience support, whilst at the same time their experience of structural racism, for example, in relation to mental health support, social/healthcare practices and school exclusions, was being erased (Phoenix, 2020, 2022, 2023).

An example of the latter is a young person I worked with between 2016 and 2021, in my role as consultant and volunteer of a Racial Equality Council (see Sims-Schouten, 2021a). The child in question was a 14-yearold mixed-race girl who had been suspended from her local secondary school for a year, due to 'aggressive behaviour' towards staff and fellow students. The local Racial Equality Council was approached by the child's mother, who felt that her daughter was the victim of racist bullying, triggering her bad behaviour. As a consultant for the relevant Racial Equality Council, I was invited to participate in meetings at the school, as well as organise diversity and inclusion training for staff, as it turned out that the school had not received training in this area. No other services were involved at the time, as the child was not deemed an at-risk child. With support from the Racial Equality Council, the girl slowly started to return to school, when the Covid-19 lockdown resulted in her, once again, not being able to attend school. Not only that, due to the lockdown rules and police presence in town, she was afraid to walk to school to pick up the free school lunch that she was entitled to – once again the Racial Equality Council mediated, discussing strategies for supporting this young person with the police and school. When schools opened again after the pandemic, the girl ended up being excluded again, for lashing out (in the form of swearing) at students and staff after children made fun of her hair and she was told (by teachers) to ignore this. Moreover, rather than listening to her and taking her claim of being bullied and marginalised by students and staff in the school seriously, she was referred for 'resilience interventions'.

It follows that current definitions of resilience need to be redefined and reconceptualised, particularly in settings dominated by White middle-class voices that define what positive emotions, successful traits and coping mechanisms entail (Joseph-Salisbury, 2018). This means opening up the debate about what resilience actually means for different people, and how to make sense of real-life complexities of members from varying cultural and ethnic communities, by incorporating a relational, rather than merely a linear, worldview. Below I will reflect on resilience in light of this.

As mentioned in earlier chapters, resilience is a phenomenon observed in contexts of high risk, with a focus on overcoming, adapting and adjusting in the face of adversity and attaining good mental health, despite difficulties (Llistosella et al., 2022; Luthar, 2006; Masten, 2019; Rutter, 2012). Yet, what all definitions of resilience have in common is the focus on the capacity and ability of an individual or group, which are not clearly defined concepts, and can largely be linked back to potentially problematic perceptions around strength of character and positive emotions, discussed earlier on. For example, Ungar (2008, p. 225) defines resilience as: 'The capacity of individuals to navigate their way to the psychological, social, cultural and physical resources that sustain their wellbeing, and their capacity individually and in groups to negotiate for these resources to be provided in culturally meaningful ways'. At the same time, Masten (2019, p. 494) refers to resilience as 'the capacity of a dynamic system to withstand or recover from significant challenges that threaten its stability, viability or development', where 'system' encompasses individuals, as well as families, communities and ecosystems. It should be noted here that risk factors, as well as protective factors, are located both within the individual or the environment that can (negatively) impact adjustment outcomes (Llistosella et al., 2022).

How this works is perhaps best explained by Bronfenbrenner's biosocial-ecological model, which has been used to make sense of resilience within the broad context of reciprocal processes between the different social environments around the child (Bronfenbrenner and Morris, 2007). The environments consist of the child's individual microsystem (groups/institutions around the child, such as family, school, neighbourhood), mesosystem (interactions between microsystems), exosystem (links between social settings that do not directly involve the child, such as a parent's employment status/situation), macrosystem (the overarching culture that influences the developing child) and chronosystem (pattern of environmental events and transitions over the life course, as well as changing socio-historical circumstances) (Bronfenbrenner and Morris, 2007; Ungar et al., 2013). The bio-social-ecological interpretation of resilience means taking account of three broad principles (see also Ungar et al., 2013). Firstly, equifinality, which refers to the fact that many proximal processes can lead to different, yet equally viable, expressions of human development associated with wellbeing. Second, differential impact, referring to the nature of risks children face, combined with their perceptions of the resources available to mitigate those risks and the quality of the resources that are accessible. Finally, contextual and cultural moderation, namely the fact that different contexts/cultures provide different processes/opportunities associated with resilience. Here resilient processes can be compensatory (i.e., a protective factor that operates in the opposite direction of the risk factor), protective (i.e., a resource or factor that reduces the effect of the risk element), as well as challenging (a curvilinear model based on the association between the risk factor and outcome) (Llistosella et al., 2022; Luthar, 2006).

To date there have been four broad 'waves' of resilience research and theory, each building on the other (Kuldas and Foody, 2022; Masten, 2007; Wright et al., 2013); see also Chapter 1 for a more detailed discussion of resilience. The first wave centralised descriptions of resilience and related methodologies, the second wave adopted a developmental systems approach to theory and research, the third wave focussed on interventions directed at changing developmental pathways, and the fourth wave integrated multiple levels and systems in line with Bronfenbrenner's approach discussed above (epigenetics, biological and cultural) (Wright et al., 2013). It could be argued that by incorporating culture and social-ecological aspects of resilience, the fourth wave has come some way in (at least) acknowledging the crucial role of community and culture in making sense of resilience, including a focus on health resources and individual experiences.

Yet, despite the four waves, there is no universally accepted theory of resiliency/e, that is, no consensus about what resiliency/e is, and no consensus as to how to conceptualise and operationalise it (Kuldas and Foody, 2022; Lou et al., 2018). Moreover, at present resilience research is (still) marked by a lack of engagement with systemic oppression and social and economic policies that (may) shape and are shaped by resilience. Within this, voices from marginalised, disadvantaged and displaced communities are often not heard. Instead, as I have argued above and elsewhere (Sims-Schouten and Gilbert, 2022; Sims-Schouten and Thapa, 2023), it is through discrimination and labelling and flawed perceptions and interpretations of resilience and othering that members of marginalised, displaced and ethnic minority communities are defined as

in need of resilience support, erasing their experience of structural racism, such as in relation to access to healthcare and school exclusions. I will discuss this further below by providing examples of collective victimhood and resilience.

Incorporating systemic oppression in narratives of collective victimhood and resilience

As can be seen from the previous section, there is a need to incorporate systemic oppression in narratives around resilience. Research on education and attainment in the UK consistently highlights a number of inequalities in relation to teacher support/expectations, language barriers, socioeconomic disadvantage and institutional racism, affecting children and young people from a wide range of ethnic minority communities (Demie and McLean, 2017; Strand, 2015). For example, Mixed White/ Black, Black and Gypsy/Roma pupils are nearly three times as likely to be permanently excluded, compared to White British pupils; at the same time Gypsy/Roma pupils have the highest rates of overall absence and persistent absence, and Black pupils the lowest (Campbell, 2019; Myers, 2018; DfE, 2019). These considerable educational inequalities were exacerbated by the Covid-19 pandemic, due to racial biases of educators, and a focus on 'predicted' exam grades, rather than real exam grades, putting students from ethnic minority backgrounds at a disadvantage (Bhopal and Myers, 2023). Moreover, as my earlier example highlights, the increased power of the police to detain people during the pandemic negatively affected disadvantaged and marginalised students from Black and Asian communities in their confidence to walk to school and collect a free school lunch, as they were more likely to be stopped and searched (Bradford, 2017).

In their study on young Ghanaians' mobility between Ghana and the Netherlands and their related educational resilience, van Geel and Mazzucato (2021) highlight a number of challenges that ethnic minority youth face. Firstly, there are the challenges in relation to the new curricula, didactical cultures and language. Secondly, ethnic minority youth face discrimination, and the abilities of students with migrant backgrounds are often underestimated by their teachers. Here, there is a lack of engagement with young people's perspectives and voices on this matter. Instead, educational inequalities are reproduced and exacerbated, due to a lack of engagement with the needs and challenges that families from a variety of ethnic minority communities may face, as well

as cultural insensitivity and exclusive practices on the part of educational settings (Campbell, 2019; Viner et al., 2020). Van Geel and Mazzucato (2021) argue in favour of the need to investigate young people's transnational relationships and how mobility shapes their ability, or lack thereof, and draw from these relationships to build educational resilience. As mentioned in previous chapters, the increased use of resilience language and narratives in social policy is problematic, as it embraces a neoliberal discourse, promoting self-help and individual responsibility. By doing so, this enables policymakers to neglect broader societal structures and path-dependencies that cause adversity, in favour of a focus on individual responsibility (Hickman, 2018). Here, commonly used concepts, such as 'thriving', 'succeeding', 'overcoming' need to be revisited, as they do not reflect the realities of people whose lives are more accurately described as 'getting by', 'surviving' and 'enduring', because they are unable to exercise any form of transformative agency.

Research on how marginalised and disadvantaged groups make sense of their in-group's history of victimisation suggests that elements of resilience are often intertwined with victimisation narratives (Selvanathan et al., 2023; Vollhardt et al., 2020). Examples of this can be seen in the context of Indigenous groups that have faced violence and displacement, where narratives of survival and resilience represent the many ways in which in-group members 'fought back'. The latter supports a strength-based discourse and highlights a need to move beyond viewing marginalised and minority groups, in this case Indigenous communities, as mere victims (of colonialism) (Neufeld and Schmitt, 2019; Padesky and Mooney, 2012). Thus, historical narratives of collective resilience can develop alongside historical narratives of collective victimhood. Whilst the first encompasses the variety of ways that people make sense of their group's victimisation, the latter refers to the shared trauma as a result of facing severe harm from other groups (Ramirez and Hammack, 2014; Selvanathan et al., 2023).

Here, including systemic oppression in definitions of resilience allows for an additional layer of sensemaking. The latter means viewing the ability to cope in light of adversity against added challenges or threatening circumstances that undermine a group's survival or vitality, with a focus on empowerment, agency and strength by responding to trauma through post-traumatic growth, benefit-finding and thriving. Moreover, for groups that have faced collective marginalisation, discrimination and disadvantage, a key element of resilience is the resistance efforts undertaken by in-group members in the past, which are transmitted within families from one generation to the next (see Adams, 2020; Chapter 3).

There is evidence that the latter is not only important as a cultural legacy, but also a long-term intergenerational coping mechanism in response to discrimination. For example, documented accounts of Black history provide significant evidence of resistance and revolts against institutionalised slavery (Brown, 2016).

An example of this is the story of Wally who was enslaved on a plantation in Suriname, a former Dutch colony, in the eighteenth century and led a revolt, which ultimately resulted in his death by immolation (Riiksmuseum Amsterdam Archives 'Look at me now': Sint Nicolaas and Smeulders, 2021). Telling the story of Wally, former kickboxing champion Remy Bonjasky, whose ancestors worked on the same plantation as Wally, highlights that: 'The might with which Wally and other enslaved people on the Palmeneribo Plantation revolted is still in my blood. It has been passed down through generations and is one of the reasons why I was able to become kickboxing world champion three times' (Riiksmuseum Amsterdam Archives 'Look at me now'). Yet, research to date has tended to overlook the ways in which marginalised, displaced and minority communities' histories include collective resilience in light of systemic oppression. Nevertheless, a victimised group's history of resilience may be intricately tied to the group's present-day mobilisation in response to ongoing oppression. As such there is a need to deploy a form of intersectionality, taking account of relationality, social context, power relations, social justice and inequalities (Crenshaw, 2011; Hopkins, 2019). Only when we move beyond a focus on individual or group 'capacity' and view 'systemic oppression' and neoliberalism as additional barriers can we really make sense of different acts of resilience, including defiance and resistance. The latter also involves acknowledging 'difference', and rather than embracing a form of 'colour blindness', often wrongly applied in certain 'inclusive practices', I argue in favour of a race-conscious approach to transformation (Crenshaw, 2011; Elder and Migliarini, 2020). Below are voices in light of this.

Examples from the Windrush: multifaceted and interactive effects of personal, material, institutional and political factors

As a young boy in 1962, I remember arriving in England from Jamaica on a BOAC jet plane. It seemed to me like I was going to the moon – the air hostess who accompanied me was one of the first white people I had ever seen. My father greeted me eagerly

at London's Paddington station, amid the swirling smoke of steam trains. It had been two years since we last met, but I recognised him immediately.

(Johnson, 2023, np)

The Windrush scheme has become symbolic of the generation of Commonwealth citizens who came to live in the UK between 1948 and 1970 (Arnott, 2019; Seybold, 1998). See also Chapter 3 for a more detailed discussion of the Windrush migration scheme and related experiences. At present Waterloo station in London hosts a sculpture, commemorating the Windrush's arrival in England. The sculpture represents a mother, father and child dressed in travel clothes, arriving in the UK from the Caribbean, each of them facing in a different direction, perhaps reflecting different experiences/expectations. The reality is that a large number of Windrush children did not arrive with their parents. Instead. they arrived later, either by boat or plane, like Johnson above. Research highlights that an estimated 90,000 children were left behind and only 6,000 children travelled with their parents to the UK (Lowenthal, 1972). Despite the recent increased coverage (also regarding the Windrush scandal, concerning people from the Windrush generation who were wrongly detained, denied legal rights and deported), and celebrations to commemorate 75 years since the first Windrush arrival in 1948, Windrush history was until recently not included in the UK school curriculum, resulting in an incomplete view of Britain's history of cultural diversity.

Yet, the Windrush story is an integral part of British history, and it is clear that Windrush children had mixed experiences upon arrival, including how they coped (i.e., their resilience), in light of multifaceted and interactive effects of personal, material, institutional and political factors. The Commonwealth Immigrants Act, which came into force on 30 June 1962, made it harder for Commonwealth subjects to settle in the UK, and families realised that if they did not send for their children before the Act came into force they risked being separated indefinitely, resulting in an influx of children from the Caribbean (Black Cultural Archives, 2023). It goes without saying that the abrupt separation from familiar people and surroundings and reunion with parents, who they had not seen for years, was distressing for the children, made worse by overt racism upon arrival and a biased curriculum and approach from teachers: 'Many of the "problem children", I would contend, are suffering a temporary emotional disturbance due to severe culture and family shock' (Bernard Coard, 1971, cited by The Black Cultural Archives, Barrell Children Exhibition, 2023).

In his book *My Path of Life* (2022) Donald Campbell, founder of 'The Forgotten Generations CIC' reflects on his experiences upon arrival in England in 1965 when he was 13 years old. His dad left for the UK when he was four years old, in 1955, and his mother left three years later. He describes his memories of his childhood in Jamaica, with an abundance of fruit, nuts and warm weather, as 'wonderful' and 'heavenly' and his experiences at school as 'memorable and eventful' (Campbell, 2022, p. 21). His life in England was marked by a number of changes and challenges:

The other noticeable change was some people's reactions to me. I remember seeing net curtains twitch as I walked past some homes. When I looked at a twitching curtain I was often met by the unwelcome glare of a pair of eyes, followed by the individual touching his or her nose, which I found peculiar. I was bewildered at this behaviour, which happened on many occasions. So, I plucked up the courage to ask my mother what it meant and why people were doing it. Her explanation was that we were not liked by everyone because of the colour of our skin, and the action of touching the nose with the finger meant I was being nosey by looking into their home. Mother tried her best to ease the situation by telling me not to take any notice of them. However, I found it all very strange and bewildering because I had not encountered it before, ever, and the fact that I had done nothing wrong made it even worse.

(Campbell, 2022, p. 52)

Campbell's reference to 'the fact that I had done nothing wrong made it even worse' needs to perhaps also be seen in light of the fact that back in Jamaica he had to abide by strict rules in relation to behaviour, and his fear of being punished when stepping out of line. Yet, he had not stepped out of line, but was simply treated differently due to the colour of his skin. It is clear that the Windrush generation and their offspring did not have a straightforward experience in the 'Motherland', as Colin Grant (2019) highlights in his book *Home Coming*, 'England Was No Muma to Me'. The *Windrush* marked a key episode in the history of the Caribbean people and their long, complex and torturous relationship with the UK, forged by over 400 years of history spanning slavery, colonisation and decolonisation, with their arrival in England shadowed by racial prejudice and discrimination (Hall, 1998). In his book on the culture trap, Wallace (2023) highlights that culture is often 'loosely defined and strategically deployed to frame ethno-racial minorities in flattening, stereotypical ways' (p. 5).

Here, culture and ethnic expectations inherent in this shape meaning-making and everyday social actions that in turn produce and reproduce inequalities, leading to unequal treatment (see also Hall, 1999; 2017).

Unequal treatment also extended to school settings, as Campbell (2022, pp. 71–2) highlights below:

My last class at school was named 4X, as an afterthought. Oh! 'We have an excess of pupils, the majority of them from foreign backgrounds, what are we going to do with them? I know, we will make up an extra class and call it 4X.' That certainly was my recollection of how it went. I also believe there were very low expectations of us as pupils in that class. The teachers had no plans for us to even attempt any end-of-year exams to achieve national grades. It was not good, considering that it was our final year before taking up employment as young adults and, as always, qualifications matter. I therefore left school with no qualifications and nothing to show for all my years of learning. I certainly believed I had the ability to achieve more but, somehow, lost out. Or was I never on the path to that achievement? The good thing was I had learnt enough basics to build on, to aid my future journey.

For much of the twentieth century, representations of Black Caribbean young people as an underachieving minority in schools have been anchored in the minds of the British public (Wallace, 2023). Here, as Wallace (2023) argues, prejudice and culture trap students and teachers in a number of ways. Firstly, it is used to reproduce dominant cultural beliefs and make inferential judgements about student achievement for example, the notion that specific ethnic groups are either hardworking or lazy, high-achieving or underachieving and so on. Second, ethnic expectations regulate behaviour, by either expecting less or more from people - for example, regarding preconceptions of Black Caribbean underachievement. Finally, ethnic expectations reinforce categorisation of children and young people into 'ability' groupings. It follows that racial and ethnic inequalities in schools remain stubborn barriers to equity and justice in society (see also Bhopal and Meyers, 2023). Upon arrival in the UK, Windrush children, like Donald above, were often classed as 'educationally subnormal'. For example, the exhibition 'Over a Barrel: Windrush Children, Tragedy and Triumph', hosted by the Black Cultural Archives in London in 2023, notes that the temporary emotional disturbance experienced by the children, as a result of their traumatic upheaval, was not taken into account when testing them. Rather, it tended to be seen as an

ingrained character flaw and the criteria applied were riddled with racist assumptions and testing systems that set up Black children to fail.

Thus, it should not come as a surprise that the children reacted to their situation with anxiety and hostility, and many were observed to be withdrawn and uncommunicative or expressed their feelings by 'acting out' - yet, their trauma was not widely recognised, understood or addressed (The Black Cultural Archives, Barrell Children, 2023). Instead, they were judged by their behaviour, and their acting out as a form of resisting and defying racism, discrimination and labelling was simply used to reinforce existing prejudices. As can be seen from the examples earlier on in this chapter, the same is happening today. Moreover, despite significant evidence challenging Black Caribbean underachievement as a fixed formula and reflection on the cultural character of Black Caribbean people, conceptions of Black Caribbean underachievement remain prominent and powerful in British schools and society (Phoenix, 2020; 2023). Black Caribbean children in Britain are more than three times as likely to be permanently excluded from schools as their White counterparts, and they continue to be disproportionally identified as having special educational needs and emotional and behavioural difficulties (Bhopal and Myers, 2023; Myers, 2018).

It is important to acknowledge the role of historical narratives and experiences as part of a group's collective memory, referring to the ways in which groups remember their past, which has strong implications for a group's identity and sense of who they are (Selvanathan et al., 2023). As an example, Gloria Wekker a mixed-race Dutch emerita professor, born in Suriname (former Dutch colony), and raised in the Netherlands, reminisces about her childhood and upbringing in the book Slavery by Sint Nicolaas and Smeulders (2021), recollecting the eighteenth-century song about defending Paramaribo against the return of the English, that her grandfather used to play on his guitar: 'Peroen, Peroen mi patron ... Ingrisiman sa tjari pranga go na jobo pran (Peronne, Peronne my commander ... I will send those Englishmen back to the sea on the wrecks of their ships)' (Sint Nicolaas and Smeulders, 2021, p. 294). Aged 18 Wekker travelled to Illinois as an exchange student and was taught about history and sociology. When Jesse Jackson gave a talk at her college, Black students were invited to sit in the front and the White in the back, prompting her to ask herself 'Am I Black or White?' She chose Black, eventually becoming the first Black female professor at the University of Utrecht in 2001, being responsible for a breakthrough public debate on racism and colonialism in the Netherlands, through her book White Innocence: Paradoxes of Colonialism and Race (Wekker, 2016).

Thus, it could be argued that the shared values, ideas and practices of a group, including their history, and factors, such as racism, discrimination and colonialism, provide inroads for individuals to make sense of their social environment and, therefore, create a shared understanding of one's social reality and resilience within this. Social representations of history and resilience are, therefore, intertwined with the broader political and social system within which an individual lives. In the case of oppressed groups, it is their history of collective resilience, typically revolving around positive sentiments of empowerment, strength and survival as a way of living with a marginalised group identity, which provides a sense of collective continuity in the context of responding to ongoing experiences of oppression (Selvanathan et al., 2023). Whitedominated representations and narratives around difference, behaviour and achievement continue to plague students from minority communities in the present day, reproducing dominant cultural beliefs and inferential judgements (Wallace, 2023). The next section provides examples of this.

Resisting discrimination, stigmas and bad treatment: voices from the community

'A gang of girls'

In 2022 I was invited to deliver equality and diversity training in a school in the South of England, together with a colleague from the Racial Equality Council. This was following a complaint from a member from the local community, whose daughter, who is Black, and her group of friends (all mixed-race and Black students) were referred to as a 'gang of girls', for no other reason than that they were a group of friends, spending time together during lunchtime at school and after school. It should be noted here that the gang of girls were the only Black and mixed-race students in the school, and had been subjected to significant racist comments regarding their hair and appearance, none of which had been dealt with sufficiently. By sticking together and supporting each other, the girls were labelled negatively as a gang, yet their stories of being victimised and being on the receiving end of racism were not heard, for the simple reason that racist remarks had not been noticed or observed by the teachers. Instead, the focus was on their behaviour as a group, rather than their voice and how they, as individuals, made sense of what they were exposed to in school, dominated by White middle-class voices that

define what positive emotions, successful traits and coping mechanisms entail (Joseph-Salisbury, 2018).

The latter can also be seen from the quote below, which comes from a 12-year-old girl who I interviewed in 2018, as part of a project on child safeguarding and protection of children from minority communities (Sims-Schouten, 2021a; Sims-Schouten and Gilbert, 2022). The girl in question had been expelled from school due to swearing at teachers and students. Below she explains how she was made fun of and how nobody listened to her, as 'there was not enough evidence':

I was happy on my first day, and then like, I had problems with other like students, when they were being horrible to me. And ... but then, when I would tell the teachers, they wouldn't do anything, or they would do like punishments that weren't suitable. Well, like this boy who was in my class, who I never really liked, but I was kind of friends with him. And then he said to me. I remember he was like threatening to pour water on me. It was like, I made you a little shower. I was like, no thanks, I had a shower this morning, or something like that. And he was like, oh, it doesn't look like it. And then he was making fun of my hair as well. They said my hair was messy and stuff. And like he's always, he's just saying stuff like that. And when I told them [teachers], they were like ... they just didn't do anything. Like they didn't give him any punishment at all, because there were no witnesses, or because they said, because there wasn't enough evidence. I wanted him to move out of the class. And they were like, okay, we won't move you, and then they just moved me without telling me, or telling my mum. They just moved me, and then I wasn't happy. And now like there's so many problems. Like if they'd have just not moved me and moved him, then like we wouldn't have any problems, it would be fine.

The girl highlights that she is resisting being moved from the group, because it portrays her as a culprit, rather than victim, and ends up having arguments with teachers about this, which eventually leads to her being expelled for being angry and aggressive (see extract below, which comes from her mother):

Well, that is what I think, XX has had quite a few problems and been told off for being angry, or being called aggressive, or being ... because she's quite ... XX is very clever and her language and vocabulary is quite big. So she ... I don't think the adults like being told

things by a 12-year-old, which I sort of understand, but I don't, because they need to know these things, you know. It's important to XX, so she should be allowed to say how she feels. We don't like casual racism. She's been asked by her peers if they are allowed to ... call her the 'N' word.

The above reinforces Wallace's (2023) point that ethno-racial minorities are often framed in flattening, stereotypical ways that reproduce inequalities, leading to unequal treatment (see also Hall, 1999; 2017). It is stereotypes in relation to how Black people behave, and should behave, dominated by White middle-class voices, that define what positive emotions, successful traits and coping mechanisms entail, that feed into flawed perceptions of resilience (Joseph-Salisbury, 2018). Here, rather than centralising their voices and engaging with how individuals make sense of incidents, such as people making fun of their hair and using the 'N' word, they are punished and blamed for using inappropriate coping mechanisms, that is, the fact that they get angry because nobody listens. The latter subsequently feeds into narratives around good/bad behaviour and poor/strong resilience, influenced by prespecified linear models of resilience that centralise specific predictors to a specific outcome (Burack et al., 2007; Samaraweera, 2020).

The notion of behaviour, capabilities and positive emotions is a common thread in discussions with members from minority communities. Below is a mother (from a Black Caribbean community), interviewed in 2021, who is talking about how her son was treated in school:

The school said that my son had no manners whatsoever, now actually it turned out he just had Asperger's, so he was really socially awkward, and he just sat there and went 'he's got no manners', [um] they said [ah] '[participant's name] is really difficult blah blah blah' and they painted a really bad picture of me.

The discussion above revolves around how her son was getting on at primary school, where he was struggling to make friends and was falling behind in his learning, and how in the end he was diagnosed with Asperger's, currently known as Autistic Spectrum Disorder (Motlani et al., 2022). Yet, here again the child's experiences are dismissed, and instead the focus is on his behaviour and that 'he's got no manners'. The latter is used to explain why he is not coping, that is, he is lacking in the core elements of resilience, namely strength of character and positive emotions (Llistosella et al., 2022). Thus, educational inequalities are reproduced

and exacerbated, due to a lack of engagement with the needs and challenges that children from a variety of ethnic minority communities may face, as well as cultural insensitivity and exclusive practices on the part of educational settings (Campbell, 2019; Viner et al., 2020; Wallace, 2023).

There is a need to open up discussions around resilience in light of the above – for example, anti-racist scholars and activists have highlighted resilience as a necessary response by racialised minorities to minimise the impact of systemic White supremacy (Joseph-Salisbury, 2018). Here the focus should be on the processes by which individual, family and community resources are enacted to counter the experiences of racism, such as the pathologising of mixed-race families, negative experiences and 'underachievement' at school, and damaging stereotypes of Black masculinity (Shaikh and Kauppi, 2010). Research highlights that resilient processes can be compensatory, protective and challenging (Llistosella et al., 2022; Luthar, 2006). Yet, this does not take into account that resilience processes can also be reactionary and resistant, and there is a need to contextualise/position resilience as part of a larger process, such as in the example below, which comes from a Black Caribbean childminder (interviewed in 2018) and is in relation to someone using the 'N-word':

There was another black lady, her son was being taunted and called the N-word and she kicked off ... the school are supposed to nip that in the bud straight away, she kicked off at the school, and they told her that they will call the police to get her arrested.

Earlier on in this chapter, I highlighted how for marginalised and disadvantaged groups resilience is often intertwined with victimisation narratives, where narratives of survival and resilience represent the many ways in which in-group members 'fought back' (Selvanathan et al., 2023; Vollhardt et al., 2020). The latter supports a strength-based discourse and highlights a need to move beyond viewing marginalised and minority groups as mere victims (of racism and discrimination) (Neufeld and Schmitt, 2019; Padesky and Mooney, 2012). For groups that have faced collective marginalisation, discrimination and disadvantage, a key element of resilience is the resistance efforts (Crenshaw, 2011; Hopkins, 2019). Resisting being taunted and called the N-word by 'kicking off', as in the extract above, means that the person above is coping by 'fighting back'.

At present, resilience research is (still) marked by a lack of engagement with voices from marginalised and disadvantaged communities, and within this their experiences of structural racism are being erased,

for example, in relation to being called names, being taunted with the N-word and their hair made fun of. A lot of this comes down to flawed and White middle-class-dominated constructions of positive emotions, successful traits and coping mechanisms, which will be discussed further below.

A need to revisit positive emotions, successful traits and coping mechanisms

The link between the concept of resilience and neoliberal individualism was discussed and problematised in the previous chapter, highlighting the negative connotations of the focus on individual responsibility, with the potential to further disadvantage specific groups and ignore structures of power and inequalities. The same can be said about the focus on positive emotions, strength of character and successful traits in resilience definitions, which are largely conceptualised and dominated by oppressive White middle-class voices and viewpoints (Sims-Schouten and Gilbert, 2022). This can lead to flawed interpretations of what resilience entails. In her study on the experiences of young people on a public housing estate in inner-city Sydney, Bottrell (2007) reframes their relations to schooling, truancy and participation in the illicit activities of the local youth network, as resistances and necessary identity work, given the context of their marginalisation. Here, for the young people, the margins are an alternative 'centre' where they obtain status, positive reputation and a sense of belonging to their people. As such, she reframes resilience through the eyes of young people and how they perceive coping in light of adversity, that is, how they are resilient in the context of their current life experiences and identity.

Voices from a range of communities continue to be absent from and are under-represented in resilience research and practice, including from Black, Asian and minority ethnic communities in the UK, as well as in global contexts. This is despite the wealth of anti-racist research that highlights the role of resilience in achieving against the odds, particularly in relation to education, showing ways in which communities are resilient in the context of discrimination and racism. For example, a study on sources of resilience among immigrant Muslim women facing adversity after the events of 9/11, shows how the mass media were distorting the realities of Islam, as well as altering the public image of Muslim identity (Sahar, 2012). The research highlighted that the main contributory sources of the women's resilience were their spiritual beliefs

and cultural contexts, together with collective supportive relationships, both inside and outside their families. At the same time, in a study on resilience of young Black males in light of school 'failure', Wright et al. (2016) show how the young men utilised 'aspirational', 'resistant' and 'familial' capital to 'turn around' the expectations placed on them, (re) engage with education and achieve successful personal and educational outcomes. Moreover, in a study of African Caribbean educational success, Rhamie (2012) found that the opportunity to develop resilience, in the form of protective factors stemming from family and community support, was pivotal in the different educational outcomes experienced by the research participants, all of whom had had negative experiences, impacted by racism and stereotyping, in school.

Yet voices from a range of minority communities continue to be ignored, while the focus remains on 'strengthening' and 'building' resilience in minority ethnic communities. This effort pathologises these communities, by failing to recognise how they are already developing resilience, and by suggesting they are in need of transformation (South et al., 2020). For example, during the Covid-19 pandemic, the UK government identified ethnic minority groups, especially members from Black and Asian communities, as some of the most affected groups, resulting in a range of 'BAME' resilience recovery groups being established (here 'BAME' stands for 'Black, Asian and Minority Ethnic', a contested term). I was invited to be part of such a group, called the 'BAME Resilience Group', as advisor, run by a local authority in the South of England (see also Sims-Schouten and Gilbert, 2022). During one of the BAME Resilience meetings, organised by the local council, a representative from a local charity asked why it is 'so hard' to get members from 'BAME communities' to engage with the support and services offered. The response from a Black woman and chair of the local Race Equality Council, namely that members from ethnic minority communities may look for help in their own family and/or community first, and may be reluctant to look for external help, either due to 'shame' or lack of trust in said agencies (something that is also supported by research, e.g., Chand, 2015; Theron, 2016), was dismissed and met with the response that this is the same for White families. It follows that the concept BAME resilience embodies ignorance and inherent racism, not only through the construction of BAME groups as lacking and in need of transformation, but also through treating this group as one group on the one hand and 'White' on the other, thereby failing to acknowledge, as well as celebrate, differences between different groups and ethnicities (Sims-Schouten and Gilbert, 2022).

At the same time, by focussing on 'competencies', 'capacities' and 'positive' functioning, the term resilience has become something of an accusation against those who are perceived as not having the 'right' competencies and capacities. Here it is worth drawing attention to the process—outcome debate in resilience theory, with some theorists focussing on the processes involved in resilience (e.g., the capacity to adapt or adjust), and others solely centralising the outcomes (e.g., achieving positive outcomes) (Fraser et al., 1999; Masten, 2015; Van Breda, 2018).

For example, if we look back at the quote by Rev. Dr. Jacqui Lewis presented at the start of this chapter – 'Raise your hand if you're Black and have also been called "difficult," "rude," or "abrasive"' (The Voice, 2023) – it is clear that there are potential issues on both fronts, that is, the process and outcomes of resilience, when it comes to engaging with voices from minority communities in light of systemic oppression, racism and marginalisation. Thus, in light of the way in which 'adjusting/ adapting' and positive outcomes are defined here, it is clear that this can only lead to a rise in othering, 'absenting' and under-representation and as such facilitate racism and stigmatised practices (Chauhan and Foster, 2014).

Rather, a focus on agency and structure is needed, in order to shed a light on three connected components: adversity, outcomes and mediating factors. Here there is a need to engage with people, rather than about people, and make sense of how the three interconnected components feed into perceptions, behaviours and outcomes. Without this, there is not only the danger of absenting or othering, but a further danger of actively viewing people as resistant and a threat. In addition to this, definitions of strong and poor resilience are established which can lead to blaming members from ethnic minority communities for not coping in an oppressive environment (Hicks, 2015). Here, by constructing their behaviours and responses in relation to racism, discrimination and marginalisation as 'threatening' and 'different', the focus is largely on a reductionist, moralistic and isolated notion of the individual, who is blamed for their bad behaviour, rather than on large-scale social structures. In practice, this, once again, translates into one-sided exclusionary assessments and judgements regarding resilience, with 'problems', 'shortcomings' and deficiencies located in the individual and their community, rather than the dynamics of the immediate social context.

Thus, resilience research, starting with Werner's research in the 1970s, is largely 'about' people, rather than 'with' people, and marked by absenting, absences and othering. It follows, that only when individuals and communities are heard, taken seriously and their needs engaged

with, is it truly possible to make sense of what resilience entails and what support is required to facilitate the development of resilience in different social and cultural groups. The latter also involves a race-conscious approach to transformation, rather than embracing a form of colour blindness/evasion, often wrongly applied in certain inclusive practices (Crenshaw, 2011). Social identity, including what is 'chosen', claimed and desired, as well as 'unchosen', ascribed and positioned, is central when it comes to countering negative stereotypes, discrimination and disadvantage (Bottrell, 2007).

It is here, again, where we need to take account of past as well as present voices and experiences, both as an example of how acts of resistance and defiance have been part of resilience for a long time, but also as a way to show that despite this, little has changed. For example, Rosa Parks, also called the 'Mother of the Modern Day Civil Rights Movement', for sparking the Montgomery Bus Boycott, was arrested in 1955 for refusing to give up her seat to a White woman on a public bus. Her act was a strong symbol of resilience and resistance in the face of racism. Yet, Parks's resilience and resistance led to her being arrested and briefly locked up, handcuffed by the stigmatisation of segregation. Summing up her feelings in her autobiography, *Rosa Parks: My Story* (1992), Parks says:

I was not tired physically, or no more tired than I usually was at the end of a working day. I was not old, although some people have an image of me as being old then. I was 42. No, the only tired I was, was tired of giving in.

Similarly, the story of the Leesburg Stockade Girls is an example of great resilience. It refers to a group of 12–15-year-old girls who were arrested in July 1963, at the height of the Civil Rights Movement in the USA, simply because they walked to the theatre and tried to buy movie tickets at the window designated for White customers. What followed was their incarceration for nearly 60 days, with no opportunity to bathe, change clothes or interact with their families. Shirley Reese, one of the girls in the group, highlighted decades later (Kaye and Clifford, 2023) how she felt that the experience made her stronger; she would go on to earn a Masters as well as a PhD: 'My mother wanted me to get an education. And as strong as I was at that time as a child when I was there, I was broken ... I really didn't want to do anything. But I had to refocus my mind.' And the time incarcerated 'should have made me bitter. But I stand here today to tell you it made me better and it continues to make me better.' Thus, many of the issues that concern contemporary research and practice in relation

to childhood resilience have a historical trajectory that informs the present. Yet, as was mentioned earlier on in this chapter, research to date has tended to overlook the ways in which marginalised, displaced and minority communities' histories include collective resilience in light of systemic oppression. Nevertheless, a victimised group's history of resilience may be intricately tied to the group's present-day mobilisation in response to ongoing oppression. As such there is a need to deploy a form of intersectionality, taking account of relationality, social context, power relations, social justice and inequalities (Crenshaw, 2011; Hopkins, 2019).

Human agency and intersectionality

The voices presented in this chapter call strongly for the need to revisit and redefine resilience, especially in light of the inherent bias and racism associated with concepts, such as BAME resilience. The latter suggests that Black, Asian and minority ethnic communities are one entity on one end of the spectrum, with White communities on the other, masking potential disparities between different ethnic groups and creating misleading interpretations of data. Dominated by White middle-class voices, the very concepts of positive emotions and successful traits, as coping mechanisms, have become counterproductive in decisions and discussions around who is resilient or not. Instead, the concepts have become accusations to highlight that some people are not as 'positive', 'successful' and 'strong' as others. This is well-summed up in Dr. Jacqui Lewis's quote cited earlier at the start of this chapter: 'White entitlement can't abide black voices'.

In order to move forward, we first need to take a step back and take a closer look at resilience as a concept and phenomenon. It is clear that for groups that have faced collective marginalisation, discrimination and disadvantage, a key element of resilience is the resistance efforts undertaken by in-group members in the past, which are transmitted within families from one generation to the next. Take, for example, the quote by former kickboxing champion Remy Bonjasky, presented earlier on in this chapter, whose ancestors worked on a slave plantation in Suriname (Rijksmuseum Amsterdam Archives 'Look at me now': Sint Nicolaas and Smeulders, 2021). Here he refers to the fact that it 'is still in my blood' and is 'why I was able to become kickboxing champion three times'. Another example is Shirley Reese's response in relation to her arrest and incarceration as a teenager in 1963 when trying to buy movie tickets at the window designated for White customers: 'it made me better and it continues to make me better'.

Despite four waves of resilience research, since Werner's seminal study with a group of children in Hawaii, research and practice regarding resilience remains largely *about* people, rather than *with* people, and is marked by absenting, absences and othering. Despite showing great coping mechanisms in light of adversity (i.e., resilience), as this chapter has evidenced, voices from a range of minority communities are absent from and under-represented in resilience research and practice, in the UK as well as in global contexts. Instead, current definitions of strong and poor resilience feed into the blaming of members from ethnic minority communities for not coping in an oppressive environment. An example of this is how Windrush children were treated as 'educationally subnormal' and observed to be withdrawn and uncommunicative, or expressed their feelings by 'acting out' – yet, their trauma, both in relation to separation from their parents and starting a new life in an unwelcome environment, was not widely recognised, understood or addressed (Phoenix, 2020; 2023).

Not only that, by constructing behaviours and responses as threatening and different, the focus is largely on a reductionist, moralistic and isolated notion of the individual, who is blamed for their bad behaviour, rather than on large-scale social structures. An example of this is the quote from the Black Caribbean childminder in the section on 'Voices from the community': 'There was another black lady, her son was being taunted and called the N-word and she kicked off … the school are supposed to nip that in the bud straight away, she kicked off at the school, and they told her that they will call the police to get her arrested.'

In practice this, once again, translates into one-sided exclusionary assessments and judgements locating problems in the individual and their community, ignoring the dynamics in the immediate social context. Critical realism's central principle is to promote awareness as a key strategy for tackling oppression, providing fundamental insight into the causal factors in the individual agent, the cultural sphere and the wider society (Bhaskar, 1989). Applying this to resilience means taking account of relationality, social context, power relations, social justice/inequalities.

Rather than embracing a narrow and exclusionary definition of resilience centred on White middle-class definitions of what 'coping in light of adversity' means and looks like, there is a need to acknowledge the complex interplay between human agency (meaning-making, motivations, intentionality) and social structures (enduring patterns, social rules, norms and laws). This involves critically engaging with distorted perceptions, tainted by bias and misconceptions, and naïve realism (i.e., the notion that aspects of reality can be measured in a non-problematic

way). It also means taking account of absences, that is, lack of representation or engagement with core voices, for without absences being real, everything would already be in the best possible shape, with no desires left unfulfilled and no ills in existence (Sims-Schouten, 2021b).

Reframing resilience thus means taking account of multifaceted and interactive effects of personal, material, institutional and political factors that impact on behaviour, wellbeing and resilience, as well as acknowledging that the way in which behaviour is received is by default flawed, if this is largely informed by an oppressive White middle-class viewpoint. Rather than embracing a form of colour blindness/evasion, often wrongly applied in certain inclusive practices, there is a need for a race-conscious approach to transformation (Crenshaw, 2011) to amplify the forgotten beginning with one question: *Tell me your story!*

Implications for theory and practice

It is clear that resilience can also mean resistance, that is, resisting bad treatment and racism, as well as reflecting agency, identity and ownership of one's own life and choices within this. Yet, in light of dominant constructions of resilience, resistance tends to be viewed negatively and equated with bad behaviour, positioning the victim of racism as the Other.

I would like to end this chapter by returning to one of the examples referred to earlier on in this chapter, which was one of the many examples that inspired me to engage in resilience research, especially when it comes to how resilience is conceptualised in theory and practice, namely the mixed-race girl who had been excluded from school due to 'aggressive behaviour' towards staff and fellow students. On closer inspection it turned out that this young person had experienced racist bullying (centred around her appearance, skin colour and hair) for a number of years, which was not dealt with, despite her asking for help from teachers several times. When she finally had enough and resisted the racist bullying, by disengaging and shouting back, she was labelled as out of control and in need of a resilience-building programme.

Thus, there is a need to revisit/redefine resilience, as well as take seriously the methods and strategies employed by people from diverse communities, to express resilience, in light of racism and bias. For example, by equating the 'touching of hair' (which is what happened to the young person in the example above) with 'being liked', the popular mantra of 'kindness' (e.g., slogans such as 'be kind' can be seen across schools in the UK) is effectively being used to curtail any claims of racism here.

Rather, by not engaging with this 'kindness' narrative, this young person is treated as lacking – in her understanding, her tolerance, but also her resilience.

It follows that by focussing on competencies, capacities and positive functioning, the term resilience has become something of an accusation against those who are perceived as not having the right competencies and capacities. A direct consequence of this, as can be seen from the quotes presented in this chapter, is othering and absenting – not engaging with people's voices and identities, but instead focussing on where they are lacking. Here it is worth drawing attention to the process—outcome debate in resilience theory, with some theorists focussing on the processes involved in resilience (e.g., the capacity to adapt or adjust), and others solely centralising the outcomes (e.g., achieving positive outcomes) (see also Llistosella et al., 2022; Masten, 2015; Van Breda, 2018).

Yet, in light of the way adjusting/adapting and positive outcomes are defined, it is clear that this can only lead to a rise in othering, absenting and under-representation and as such facilitate racism and stigmatised practices. Rather, a focus on agency and structure is needed here in order to shed a light on three connected components: adversity, outcomes and mediating factors. Here, there is a need to engage with people, rather than it being about people, in order to make sense of how the three interconnected components feed into perceptions, behaviours and outcomes. Without this, there is not only the danger of absenting or othering, but a further danger of actively viewing people as resistant and a threat, rather than resilient.

Moving forward, it is imperative to engage with a number of factors in order to develop and improve resilience theory and practice in light of the voices presented in this chapter. Firstly, there is a need for culturally embedded understandings of resilience, which includes centralising the voices of members from a range of communities, not only in relation to their experiences, but also how they make sense of this. Second, there is a need for critical reflection to review harmful perceptions, processes, stigma, bias, and racist viewpoints and practices currently in place. Only when individuals and communities are heard, taken seriously and their needs engaged with, is it possible to truly makes sense of what resilience entails and what support is required to facilitate the development of resilience in different social and cultural groups.

6

Resisting internalised failure and deficiency: (specific) learning difficulties and differences in children and young people

Introduction

From the second half of the nineteenth century, perceptions and treatment of children with learning differences and/or difficulties (as well as mental health issues) in Britain underwent radical change (Borsay and Dale, 2012; McDonagh et al., 2018). Although it should be noted that it is not possible to equate historic diagnoses of childhood 'deficiency' and 'imbecility' (to name a few) with recognisable contemporary diagnoses. The latter half of the nineteenth century saw the rise of the child rescue movement, and philanthropic voluntary agencies in Britain providing institutional care and support for the poor, destitute and orphaned young, including children with learning difficulties (Hurren, 2015; Thane, 2012). At a time when child philanthropy developed, with a focus on supporting neglected and vulnerable children, child psychiatry started to develop with a focus on (biological, early trauma) causal factors in abnormal development in childhood and child psychopathology (Stewart, 2009; 2011).

Children and young people considered mentally ill and labelled 'deficient', who the Victorians referred to as 'idiots', 'imbeciles', and the 'feebleminded' (representing points on a continuum from the most to the least incompetent), saw a steadily mounting hysteria about their dangerous influence on society among some segments of Britain's ruling elements, as well as amongst the middle and professional classes (Jackson, 2000). The fear was that left unchecked, this group that lay on the margins of normality and might pass for normal, would bring civilisation to ruin, due to their loose morals, lack of forethought and promiscuity.

Up until current times, there is a lack of engagement with intersectional realities of children and young people with learning differences, leading to stigma, marginalisation and hate crime. This has implications for resilience. This chapter critically analyses narratives of (internalised) failure and deficiency as attributions of learning differences and difficulties/disabilities, comparing historical data collected from the Scottish National Institution for the Education of Imbecile Children, founded in 1862, and the Waifs and Strays Society, established in 1881, and contemporary data of children attending special education institutions, collected between 2020 and 2023.

In this chapter I highlight that both now and in the past, children with learning differences are and were judged and labelled by 'able' standards, as 'unable', 'unadjustable' and deficient. Resilience rarely features in these narratives, and instead lack of resilience is assumed, thereby ignoring unique pathways to resilience that these young people may exhibit, as well as the fact that this focus on deficiency inhibits and counters the resilience the child may develop if given the opportunity. Drawing on historical and contemporary data, I will view the perceived resilience of these children in light of complex interactions between actions centred on care and support on the one hand, and control, stigmas and labels on the other. The first section sets the scene by critically analysing and discussing core terminology, that is, (specific) learning 'difficulties' and 'disabilities', in light of historical and contemporary perceptions, for example, in relation to eugenics and care in the community, as well as by examining the meaning of learning difficulties, disabilities and special learning difficulties in different (cultural) contexts. I will also explain practitioner perceptions and education, as well as hate crime and scapegoating by the wider society in light of this. Following this, I will delve deeper into resilience of children and young people with (specific) learning disabilities, also in light of internalised failure and the meaning of 'challenging behaviour' here. As with the other chapters, this chapter will draw on voices of resilience, presenting this through sections on 'Voices from the past' and 'Voices from the present'.

Setting the scene: learning difficulties/disabilities, hate crime and scapegoating

A decade after the Tories demonised disabled people on benefits, it's happening again. Few things are ever really new: British politics – and the media ecosystem that maintains it – effectively regurgitates

the same talking points on repeat, a kind of Groundhog Day where the key players may appear different but familiar destructive patterns are ever-present.

(Guardian, 30 May 2023)

'Am La retard' is the controversial title of British comedian Rosie Jones's documentary about the ableist abuse she and others with disabilities receive on a daily basis (broadcast in July 2023). The aim of the documentary was to raise awareness of the hate crime and abuse directed at disabled people. Yet, while hailed as drawing attention to the dreadful abuse that disabled people receive daily, the documentary has also been accused of hypocrisy by promoting a hierarchy of disability. Specifically, in relation to the attention that is drawn to the fact that Jones, who has cerebral palsy, but not learning difficulties, and is so evidently intelligent rather than a 'retard', suggesting that anyone who calls her one is guilty of the worst kind of ableism; thereby adding to stigmas and labels of learning difficulties and being (called a) retard. Disability is stigma and labels, a 'blemished person' as Goffman (1968, p. 11) writes. Stigma can lead to hate crime, which is what Rosie Jones has experienced and refers to in her documentary. In this section I will start with a discussion of the history and meaning of definitions and conceptualisations of learning difficulties/disabilities and deficiencies in light of eugenics and related fears, and how this has influenced current approaches and ideas across the Western world. I will then move on to discussing how this still impacts perceptions and practice today – leading to hate crime and scapegoating.

It is not possible to equate historic diagnoses of childhood deficiency and imbecility (to name a few) with recognisable contemporary diagnoses. Although there is evidence that some children in every era have shown emotional, behavioural and cognitive problems (e.g., the first Western writings about abnormal behaviour in childhood can be seen in early Greece), up until the nineteenth century failure to learn did not necessarily indicate cognitive deficits, and instead could result in a marginalised existence, for example as a village idiot (Sohasky, 2015). Common diagnoses for those under the age of ten included 'idiocy' and imbecility, but rather than referring to cognitive deficits, idiocy was seen as an example of reversion to a lower type on the evolutionary scale. Here, the general view was that children's minds and their ability to reason would develop gradually as they grew into adults (Dale and Melling, 2006; Taylor, 2016; 2020). Moreover, regardless of the full meaning of imbecility and the possible overlap between this and 'insanity' and 'madness', it is evident that 'abnormality' in children was largely ascribed to physical causes and heredity in the nineteenth century (Parry-Jones, 1972). For example, in his book *The Pathology of Mind*, Maudsley (1879), a leading British psychiatrist of the time, dedicated a chapter to 'the insanity of early life'; while Griesinger, a leading German psychiatrist of the time, noted in his book *Mental Pathology and Therapeutics* (1867) that mania and melancholia did occur in children. In the early 1900s, there was a growing understanding of the multiple factors involved in child development, although the emphasis was predominantly on heredity (Rey and Schleimer, 2015).

One of the most prominent movements applying genetics to the understanding of social and personality traits and related behaviour was the eugenics movement, rooted in the biological determinist ideas of Sir Francis Galton, which started to gain momentum from the 1880s onwards (Garland, 2018). Influenced by the eugenics movement, ideas and fears regarding the genetic threat of feeblemindedness became more prevalent (Buss, 1976; Garland, 2018). G. Stanley Hall, an American psychologist with a specific interest in child development and eugenics, made studying children a priority in science (Partridge, 1912; Stewart, 2009). Hall's book on adolescence, published in 1904, was widely read across the Western world, including in Britain, and drew attention to the role of heredity and environment in moral development and psychopathology in childhood (Hall, 1904). For example, Hall made a link between 'degenerate children' and children who experienced fluctuating moods, showed aberrant tendencies under stress, or were sexually perverted or extremely shy. Furthermore, he linked poverty to starvation of body and mind, leading to delays in the development and modification of physical structures and psychic powers (Hall, 1904).

Historiographical trends in the history of learning disability are largely centred around three major waves of historical approaches, beginning with a medicalised analysis, which emerged in the early twentieth century (Burchell, 2019; Jarrett and Tilley, 2022). Building on the asylum movement and medical progress of the nineteenth century, this wave objectified idiots using the medicalised gaze and lens. The next wave, appearing later on in the twentieth century, challenged these assumptions, focussing instead on giving a voice to people with learning disabilities and their families and criticising the iniquities of institutionalisation and the eugenics period. A cultural history movement which followed, challenged the very idea of learning disability as a fixed universal concept over time, suggesting that the idea of learning disability (in all its different linguistic iterations) is contingent on time and place, and a product of the culture within which it is framed (Sims-Schouten,

2021b). It should however be noted that not all work fits neatly into one of these categories, sometimes they overlap and sometimes they cannot be easily categorised.

In his assessment of the development and implementation of social policy to deal with the 'problem' of the 'mentally deficient' in Britain between 1870 and 1959, Thomson (1998) shows how the politics of the legislature and the demands of central government resulted in a wide and varied distribution of medical, institutional and community care in different parts of the country. Adding to the debate, Dale and Melling (2006) highlight that there have been a wide range of factors impacting on the care and confinement of the insane since 1850, including entities like the Poor Law authorities, local government and the voluntary sector. Questioning the notion that institutions were generally 'benign' and responsive to the needs of households, research also emphasises the important role of the diversity of interests in shaping institutional facilities (Dale and Melling, 2006; McDonagh et al., 2018).

Thus, against the backdrop of the nineteenth-century institutional landscape, definitions and medical terminology around 'mental deficiency' (now obsolete and considered insulting) engineered through legislation, gave way locally to more nuanced understandings resulting in a dense and ever-expanding panoply of descriptors and organising principles (Sutherland, 1984; Wynter, 2015). As a result, 'care' and 'control' were fused by the late Victorian/Edwardian period (see also Jackson, 2000). In practice, this meant that although designated institutions started to develop for imbecile children, for various reasons, including finance, benevolence and eugenics, these children ended up in a range of institutions, such as the Scottish National Institution for the Education of Imbecile Children, an institution that served as a training school, hospital and asylum for imbecile children in Scotland, and the Waifs and Strays Society, a philanthropic institution for destitute children based in England and Wales.

Fast-forward to the present day, it is clear that although understanding and engagement around children with specific learning needs and delays has developed, there is still a long way to go when it comes to language and labels used. When it comes to language, definitions and labels, there remain inconsistencies and conflicts between key terms. For example, while in the UK, the term 'learning disability' refers to a range of developmental disabilities or conditions that are almost invariably associated with more severe generalised cognitive impairments, the United States uses the term to cover a range of learning difficulties including dyslexia and dyscalculia (Holland, 2011; Kataoka et al., 2004; Rourke,

1989). The latter are referred to as 'specific learning difficulties' in the UK. Students with specific learning difficulties (SpLD) constitute a significant portion of students considered to have diverse educational needs, and in the UK context students with SpLD are recognised as having average or greater than average intelligence, and are believed to have 'deficits' (or differences) in their cognitive processing, which can influence their learning and achievement (see Johnson et al., 2010; Scanlon, 2013; Sonuga-Barke et al., 2024). These difficulties, also referred to as different and unique ways of cognitive processing, can be life-long and are usually identified following academic performance, which is below developmental expectations, and following the elimination of other potential causes of underachievement, such as hearing, vision or intellectual impairment, or factors associated with the student's environment (see Fletcher et al., 2024; Johnson et al., 2010; Kirby and Cleaton, 2020).

While the term learning disability was first coined by Samuel Kirk in 1963, in the USA, in other countries, such as Japan, acknowledgement and support for students with learning disabilities has been a fairly recent development (Shifrer et al., 2013). Kirk introduced the term learning disability as a phrase to refer to children with normal intellectual ability, but afflicted by a covert, brain-based disability that affected their learning (Robaey, 2013). Putting these children with covert disabilities on a par with others with overt disabilities allowed for legislation, policies and funding to be established to help them. This concept of learning disability has now endured for decades, yet there are still no satisfactory answers to the question 'What is a learning disability/difficulty, and how do you know that a child has it?', leading to and exacerbating conflicts for access to services between families, advocacy groups and the school system. The term 'learning disability' is still the most widely used and accepted term in the UK. Yet, as mentioned before, unlike in the USA, in Britain this term implies lower intellectual capacity (usually an IQ of less than 70), as well as significant impairment of social or adaptive functioning, and onset in early childhood (NICE, 2015).

Bearing in mind the conflicting and contradictory definitions and concepts around learning difference, difficulty and disability, as well as uniqueness and individual differences of children and young people within this, it should not come as a surprise that catering for the full diversity of students' needs can be particularly challenging (Woodcock et al., 2019). In the year 2018/19 up to 30 per cent of school children in the UK and USA received additional support for learning-related difficulties (DfE, 2019; National Center for Education Statistics, 2021). Referrals for support typically begin with parent or teacher reports of

slow rates of progress in learning, and/or behavioural difficulties, such as problems paying attention. In some cases, referrals result in a diagnosis of one or more neurodevelopmental disorders, such as attention deficit/hyperactivity disorder (ADHD) and autism, following a psychological or psychiatric assessment that draws heavily on subjective reports and observations of a child's behaviour.

Yet, subjective reports of difficulties can be inconsistent with performance on task-based measures of cognition (Williams et al., 2022). Moreover, subjective cognitive difficulties occurring in the absence of any task-based performance deficits may be a functional problem arising from mental health problems. In school settings it is clear that teachers' perceptions of inclusion are significant to its successful enactment, yet research shows that positive perceptions of inclusion tend to decline after teachers' first teaching year (Boyle et al., 2014; Woodcock et al., 2019). Furthermore, teachers' perceptions have also been found to vary depending on the educational needs of the student (Avramidis and Norwich, 2002; Gillard, 2018). The latter not only affects children and young people with learning disabilities, who have below average intellectual functioning, but also children with SpLD, who (in the UK context) represent students recognised as having average or greater than average intelligence, and have deficits in their cognitive processing, which can influence their learning and achievement (see Johnson et al., 2010; Scanlon, 2013).

In the UK, approximately 15 per cent of the population are believed to have SpLD (British Dyslexia Association, 2019). Children and young people with a SpLD label may encounter additional obstacles due to teachers holding lower expectations compared to non-SpLD peers (Shifrer, 2013). Thus, it is clear that children and young people on the large spectrum of learning difficulties can be severely affected by stigmas, labels and low expectations of adults around them. In addition to labelling and obstacles in schools and related settings, there are factors in society at large that affect children and young people on the wide spectrum of learning disabilities/difficulties which can lead to hate crime. With the move from institutionalisation to supporting people with learning disabilities and difficulties to live in the community, personal safety has become a concern, and individuals have been speaking out about how they have been badly treated by strangers, neighbours and others they regard as friends (Richardson et al., 2016). In a study on prevalence of interpersonal violence and victimisation of people with autism, Pearson et al. (2023) found examples of victimisation, experiences of othering, including trauma, masking and burnout, as well as structural inequalities in power dynamics and support.

In the context of political and popular discourse of disabled people as welfare benefit 'scroungers', this once again (as was discussed in Chapter 2) shows the lasting impact and legacy of the deserving versus undeserving paradigm introduced by the Poor Law of 1834 (Hall, 2019; King, 2019). This bad treatment and discriminatory, oppressive or abusive behaviour and scapegoating, also referred to as 'disablism' or 'ableism' can, over time, escalate into more serious victimisation that sometimes leads to tragedies – an example of which is the death of Fiona Pilkington and her disabled daughter Francesca Hardwick (Quarmby, 2011). Also described as one of the 'defining moments' for disability hate crime, and prominently detailed in the media, following years of sustained harassment from a small number of people in their Leicestershire village, Fiona Pilkington killed herself and her daughter Francesca Hardwick (Quarmby, 2011). A subsequent IPPC investigation revealed that police had not responded properly to repeated calls by the family reporting harassment (Walker, 2011). The case and the inquiry led to the inclusion of disability in the legislative response to hate crime, alongside 'race', religious belief, sexuality and transgender.

Thus, reducing barriers to support and recovery are contingent on reducing structural inequality, and providing better training about people with learning disabilities and neurodevelopmental disorders to frontline professionals (Pearson et al., 2023). At present there remain distinct differences between police and victim support responses to victims of hate crime. Moreover, research highlights that hate crime incidents recorded are wide-ranging, from verbal abuse/harassment, through to violence and criminal damage (Macdonald, 2015). Owing to specific disabling barriers experienced by people with learning difficulties, this group was, is and remains at increased risk of being victimised and is less likely to receive support from criminal justice agencies.

Resilience in the context of learning difficulties/ disabilities/differences

As mentioned in earlier chapters, theories and research around risk and resilience, such as the work by Garmezy et al. (1984), Masten (2019), Rutter (2012) and Ungar (2011), provide a framework for understanding the complex factors that influence the adjustment of children with learning difficulties (LD). It is clear that children with LDs experience a number of risk factors, one being the presence of the learning difference, disability or difficulty itself, which is a risk factor regarding school

failure and dropping out, because students with LD often experience a multitude of difficulties throughout their academic careers (Harðardóttir et al., 2015). It should be noted that the mindset of teachers also plays a significant role in how successfully students learn and thrive in schools. This includes teacher expectations, as well as teachers' input in children's social-emotional development and a whole-school approach to wellbeing and resilience (see also Chapter 4), which also includes teachers' own mental health (Ofiesh and Mater, 2023). Other risk factors are located in society and perceptions and treatment of children with LDs, including hate crime and scapegoating, as can be seen from the previous section.

From an ecological perspective, resilience researchers define protective factors associated with resilience both as consisting of inner personal strengths and external protective contexts and processes, such as support provided by families, school systems and communities, which reduce the likelihood of risk (Bronfenbrenner 1979; Jenson and Fraser 2011; Ungar, 2011). Yet, as has been argued before, notions of personal strengths and protective factors need revisiting, as these often do not centralise the voice of the person who is affected (Sonuga-Barke, 2024). Instead, there is a danger that unjustified judgements are made in relation to behaviour and intentions. For example, the National Institute for Health and Care Excellence (NICE, 2015) makes reference to 'challenging behaviours' of children with LDs, such as in relation to the interaction between personal and environmental factors which can include aggression, self-injury, stereotypic behaviour, withdrawal, and disruptive or destructive behaviour. These challenging behaviours, as NICE highlights, are relatively common for children with learning disabilities, and more common for children with more severe learning disabilities, with prevalence rates of around 5–15 per cent in educational, health or social care services. Rates are higher in teenagers and people in their early 20s, and in particular settings (for example, 30-40 per cent in hospital settings) (NICE, 2015). Moreover, research highlights that children and young people with a learning disability who also have communication difficulties, autism, sensory impairments, sensory processing difficulties and physical or mental health problems (including dementia) may also be more likely to develop behaviour that challenges (Absoud et al., 2019). It should be noted here that this so-called challenging behaviour can appear in only certain environments, and the same behaviour may be considered challenging in some settings or cultures but not in others.

Yet, rather than treating this as challenging, it may also be good to look at this from the young person's perspective, for example, the behaviours may function as sensory stimulation, or as a way to ask for help or avoid demands, where they are non-verbal (Sims-Schouten et al., 2022). Moreover, it could be in response to a care environment that does not cater for their needs, for example, one with limited opportunities for social interaction, lack of choice and sensory input, or excessive noise, as well as care environments that are crowded, unresponsive or unpredictable, and those characterised by neglect and abuse (Absoud et al., 2019; NICE, 2015).

Thus, researchers and practitioners need to explore the capacity of their environment to deliver resources and respond to the individual needs of children and adolescents (Rutter, 2012; Ungar, 2011). The latter also involves reflecting on how children with learning differences, difficulties and/or disabilities are perceived. Bandura's notion of perceived self-efficacy is also relevant here, relating to the belief in one's capabilities to organise and execute the course of actions required to produce given attainments, and once formed, regulate the choice of behavioural courses, maintenance of effort and affective reactions to the environment (Woodcock et al., 2019). These beliefs are context-specific, resilient and resistant to change – yet, they are also potentially impacted upon and threatened by pre-existing or preconceived attitudes held (by others) towards one's capabilities (Bandura, 1997; Tschannen-Moran and Johnson, 2011).

The latter, of course, is an issue that many young people with (specific) learning difficulties/differences have to engage with. As such, it could be argued that preconceived ideas and expectations, as well as wider stigmas in society, negatively impact two fundamental aspects of self-efficacy. Firstly, efficacy expectation, which encompasses an individual's belief in their capacity to generate the necessary actions to achieve a desired outcome (Chan and Lam, 2010). Second, outcome expectation, which refers to the belief that specific actions or behaviours will necessarily result in a desired outcome (Palmer, 2006). Additionally, Bandura (1997; 2011) posits that perceived sense of self-efficacy is based on and bound to four sources of information: vicarious experience, verbal persuasion, psychological and affective states, and mastery experiences. Early experiences, perceptions, bullying, and stigmas and labels, as well as dropping out of school, may have permanent consequences on an individual's quality of life and standard of living, which increases the risk of encountering social difficulties and reliance on welfare systems (Harðardóttir et al., 2015). Poor academic school performance and low educational achievement are one of the strongest predictors of school dropout (Blondal and Adalbjarnardottir, 2009; Rumberger, 2011). All the above can impact the development of resilience in children and young people with (specific) learning difficulties/differences.

Among the array of protective factors that have been identified to promote resilient functioning in development, is the presence of a secure relationship with an adult caregiver (Bowlby, 1969; 1980; 1988). Bowlby (1988) postulated that although attachment style is formed during early interactions with primary caregivers, every meaningful interaction with significant others throughout life may affect the individual's beliefs about others' availability and supportiveness. The latter also shapes a child's self-esteem and sense of Self, including in relation to their abilities, as the link between children and young people's social relationships and their level of self-esteem is truly reciprocal in all developmental stages across the life span, reflecting a positive feedback loop between the constructs (Harris and Orth, 2020).

When children reach school age, they have developed a general appraisal of their self-worth (self-esteem) at the time of school entry. Self-esteem develops out of the extent to which the child experiences success and failure in their life, from the value that is attributed to the activities at which they succeed or fail, and the responses they get from parents and schools about their performance (Holopained et al., 2020). Therefore, it is important that children fully experience life's developmental challenges, at home and in school, otherwise there is a chance that they may experience feelings of inferiority, which will impact their ability to cope in light of adversity and develop resilience. Yet, this also requires engagement with their specific needs and reflecting on how challenging behaviour is perceived and conceptualised in this context. The latter also means acknowledging that resilience of children with learning differences, may both be misunderstood and misconstrued as challenging behaviour, as well as undermined, by expecting little of them, exacerbating feelings of inferiority. Below I discuss this further by providing examples of voices from the past and present.

Voices from the past: resisting internalised failure and deficiency

Perceptions and treatment of learning difficulties/disabilities in children in the late 1800s/early 1900s in Britain (also referred to as imbecility and feeblemindedness) need to be viewed in light of dominant conceptualisations embraced by different generations of professionals/practitioners, theorists and social classes, stimulated by social, economic, religious and political challenges of their respective eras, which set the stage for various viewpoints and practices (Sims-Schouten, 2021b). As mentioned at

the start of this chapter, from the second half of the nineteenth century treatment of the mentally ill, mentally deficient and insane in Britain underwent significant change; this included the care for imbecile children (Campbell, 2017). At this time, the terms imbecile and defective were loosely used for conditions associated with weakness of mind, as well as congenital defectiveness, whilst 'lunacy' and 'insanity' were used, equally loosely, for the whole of what is now termed 'mental disorder' (Carson, 2014).

Regardless of the full meaning of imbecility and feeblemindedness and the possible overlap between this and insanity and madness, it is evident that two overarching causal factors were ascribed to abnormality in children in the late nineteenth century. Firstly, there were physical causes, including epilepsy and infectious fevers, such as typhoid and measles, as well as congenital and inheritable inflictions; and secondly, psychological, emotional and behavioural causes, like grief, neglect and parental mental health/nervousness/behaviour (Parry-Jones, 1972). Alongside developments in the treatment of the mentally ill and deficient were the development of distinct practices in relation to care of vulnerable children, which later developed into social work and psychiatry. As mentioned earlier on in this book, social work in the UK is born from the late nineteenth-century child rescue movement and has historically aligned itself with a pragmatic form of sociology, whilst child psychiatric services evolved from very different roots, influenced by medical naturalism or biomedical approaches (Sims-Schouten, 2021b).

Notwithstanding the distinct practices between different disciplines, it is clear that there was a universal obsession with the perceived threats to the social order (e.g., in relation to promiscuity and criminality) from conditions such as imbecility and feeblemindedness (MacKenzie, 1976). For example, it was agreed that 'defectives' posed a moral threat to society, such as by being abnormally promiscuous (in practice, this usually meant 'defective women'), violent and generally poorly behaved and unable to be educated and put out to work (Barker, 1989). It is here where the legacy of the deserving versus undeserving paradigm that influenced social care practices and the child rescue movement in Britain can be seen, including the influence of eugenics and biological determinism, underpinning medical and psychiatric practices and perception; see also Chapter 2. The terms 'weak-minded', idiot and imbecile were often used interchangeably, and alongside a new classification that was popular by the late nineteenth century, the feebleminded (Jackson, 1998). One marker of imbecility was a lack of verbal language skills: those who were born deaf often remained 'dumb', and this inability to communicate was assumed to be associated with underlying intellectual deficit. Considered a life-long condition, medical professionals paid far less attention to the imbecile than the insane. Until they were confronted by criminal cases involving imbeciles, lawyers were generally only interested in imbeciles in the rare instances when the property or inheritance rights of the wealthy were at stake (Foyster and Holligan, 2020).

Although designated institutions started to develop for imbecile children, for various reasons, including finance, benevolence and eugenics, these children ended up in a range of institutions, such as the Scottish National Institution for the Education of Imbecile Children (SNI) in Larbert, Stirlingshire, founded in 1862 (and officially opened in 1863), and the Waifs and Strays (W&S) Society for destitute children, established in London in 1881. Both institutions had reach and influence across Scotland and England/Wales respectively, and for both the object was to educate the children in their care, assist them to grow up with good behaviour and the skills to help themselves and gain employment (as much as possible) (Hutton, 2000; Skinner, 2017).

As well as giving way to more nuanced understanding of mental deficiency, The Mental Deficiency Act of 1913 also created a whole new category of 'disabled' person – namely the moral imbecile. The categories of 'moral imbecile' and 'moral defective' survived until 1959. Here, disability was little to do with the shape of a person's body or their intellectual capacity, instead it was about how a person thought and behaved and the potential threat this caused to the population integrity (influenced by eugenics and related beliefs) (Galton, 1877). Amid a wave of social reform, asylum building and child rescue movements in the nineteenth century, mentally deficient, 'retarded' and destitute children were identified and institutionalised. While some of this was fuelled by benevolent and charitable intentions, there was also the influence of eugenics and the notion that the feebleminded and imbeciles posed a social threat to society (Goodheart, 2004).

Thus, practice and perceptions regarding learning differences, difficulties/disabilities in the nineteenth century were ruled by stigmas and labels around threat, failure and deficiency, rather than being centred around developing resilience (or self-help and character as propagated by Smiles, 1859; 1871). Below is an example from the Waifs and Strays Society, which is about a girl born in 1896 (case file 12526). The girl was taken on by the Waifs and Strays in 1907 and sent to one of their Homes. Yet, shortly after this (in 1908), a letter is sent by the Home in question, requesting for her to be removed: 'The girl is undoubtedly an imbecile and dangerous to the other children and the removal from the home became

necessary'. Simultaneously the child is given an Order for Detention in a Certified Industrial School in 1908, on account of: '[the girl] has been found wandering and not having any proper guardianship'.¹ In 1908 it is highlighted that 'The above girl developed hysterical/suicidal mania – the girl was sent off by the proper authorities' and in 1910 the Waifs and Strays Society indicate that she 'has been certified as of unsound mind'. The Medical Officer writes the following about the girl in 1910:

I was called to see the above-named girl aged 14 and found her to be suffering from acute mania, and a dangerous person to the other inmates of the Home. She was at first sullen and refused to answer any questions put to her; but on being asked why she had seized a knife and had threatened to kill everyone who came into her presence she said that she had no reason for doing so. When asked why she had thrown a hatchet at one of the girls she admitted she had done so but said she had no reason for the act.²

Furthermore, in 1911 when residing in West Riding Asylum, she is referred to as an 'imbecile':

the above-named patient is of low grade of intelligence and inclined to be pert and disobedient and impulsive. As a whole her conduct is satisfactory, but her mental type is such as necessitates her detention in an Institution.

I certify that Mary Ann Hampson, a patient in this Institution, is suffering from Imbecility.

The next is another example from the Waifs and Strays Society where links are made with neglect, poor behaviour and imbecility. This is regarding a girl born in 1897, taken on by the Waifs and Strays in 1907 and described as: 'painfully neglected, undisciplined and in moral danger'.³ The written material in relation to the girl moves back and forward from discussing her 'imbecility' and 'low grade of intelligence' to describing her as 'undisciplined' and 'disobedient'. Going by definitions of resilience, including character and self-help (Masten, 2019; Rutter, 2012; Smiles, 1859; 1871), it is clear that the girl is lacking here. In fact, she is not even given a chance, as the narrative is dominated by the perceived threat of her very being. Yet, what is negated here is that her behaviour could merely be a response to a care environment that does not cater for her needs, one with limited opportunities for social interaction, lack of choice and sensory input or excessive noise; a care environment that is crowded, unresponsive and

unpredictable. Here, her challenging behaviour, namely by being 'disobedient', 'sullen' and 'impulsive', could be a reaction to a situation or setting that contributes to or causes her internalised failure.

Another example is a case file (3271) relating to a girl born in 1886; the paperwork from the Waifs and Strays is dated 1892. The child's mother died of cancer and the father was sentenced to three months for neglect. Included in the case file of the child, which is extensive, is talk about the girl developing a mental illness and having suicidal tendencies and being depressed, and that:

It seems very clear that the poor girl is more or less of weak intellect.

I am afraid, as much as I regret it, the case is one that will inevitably have to be dealt with by the Poor Law Authorities.

There is also talk about her being 'insane' and in 1907 she ends up in West Sussex County Asylum, which is followed by a letter to the Waifs and Strays indicating that: 'she is however weakminded, silly and childish in behaviour and very idle ... [and] congenitally deficient'. Again, talk in relation to being weak-minded appears alongside talk around the child's poor behaviour, with little regard for the fact that the behaviour may be a consequence of, or indeed a reaction to, stigmas, labels and internalised failure, due to low expectations and poor treatment. A similar approach can be seen in the Scottish National Institution for the Education of Imbecile Children, an institution that served as a training school, hospital and asylum for imbecile children in Scotland. For example, the below is from a letter about a young person in their care (dated 1921):

I am sorry to have to report that there is a deterioration in the condition of XX who has for so long been an inmate of this Institution. He has of late become very irritable and, I have reason to fear, dangerous to the other inmates. I have no definite evidence as yet of insanity, but he has been heard muttering to himself a great deal and I am told that he has threatened to commit suicide. If these symptoms do not rapidly disappear it will be necessary to place him under better control than is possible here and we should have to consider his removal to an asylum. In case of such a need arising I shall be glad to know what you would wish me to do.⁴

Here, again being 'very irritable' is viewed as problematic behaviour, rather than as a possible cry for help. Within this 'threatening to commit

suicide' was viewed as an immoral act, as was common in those days (Sims-Schouten, 2021b). Yet, it also highlights that children with learning difficulties were expected to comply, and anything less than that, such as resisting care arrangements, by 'being irritable' was viewed as 'challenging behaviour' exacerbating the already negative expectation placed upon them. Below I provide voices from the present.

Voices from the present: resisting internalised failure and deficiency

It is clear that stigmas, labels and preconceived ideas in relation to how children and young people with learning differences (should) behave, as well as the learning difficulty/disability itself, can have a profound impact on resilience, both in relation to how said young people may be viewed as lacking on that front, but also due to the internalised failure that comes with it. As mentioned earlier on in this chapter, referrals for support typically begin with parent or teacher reports of slow rates of progress in learning, and/or behavioural difficulties such as problems paying attention. Yet, subjective reports of difficulties and differences can be inconsistent with performance on task-based measures of cognition, and subjective cognitive difficulties occurring in the absence of any taskbased performance deficits may be a functional problem arising from mental health problems (Williams et al., 2022). In addition to this, whilst teachers' perceptions of inclusion are instrumental in shaping equality, diversity and inclusion (EDI) practices in schools, research highlights that teachers' positive perceptions of inclusion tend to decline after their first teaching year and vary depending on the educational needs of the student (Boyle et al., 2014; Woodcock et al., 2019).

It should, therefore, not come as a surprise that children with learning differences, difficulties/disabilities may suffer from the consequences of this, leading to internalised failure. Herbert Marsh's extensive research on academic self-concept is also relevant here, highlighting the negative link between below average school achievement, or the 'little fish big pond' effect, on academic self-concept (Marsh, 2016; Marsh and O'Mara, 2010). The latter can also be viewed in light of Bandura's notion of perceived self-efficacy, with learning disabilities/difficulties negatively impacting upon a child or young person's beliefs in their own capability and actions that are crucial to perform, attain and achieve, as well as maintenance of effort, and affective reactions to the environment (Bandura, 2011; Woodcock et al., 2019).

Below I provide examples of internalised failure at play and possible strategies that children and young people use to resist this, drawing on data collected in two schools for children with learning difficulties between 2020 and 2023. The first and third examples come from a study on conceptualisations and perceptions of mental health and mental health issues of children in a school for social, emotional and behavioural difficulties (Sims-Schouten et al., 2022). The second example is part of a study on resiliency in light of disadvantage and displacement, as part of which knowledge was coproduced with pupils at a school for children with autism (Sims-Schouten and Wingate-Gray, 2024). See also Chapter 1 for details regarding the datasets. Both schools catered for children aged 12-16 years old and both studies adopted a form of participatory research, where the children/young people, as informants and active participants, were put in charge of decisions around methodology and core definitions (see also Andersen et al., 2023). The latter is in line with the UNCRC (United Nations Convention on the Rights of the Child) article 12, stating that children have a right to participate and to be listened to in all matters concerning themselves (Convention on the Rights of the Child, 1989). In both studies, the children decided about the questions to be asked and data collection methods, leading to a range of approaches including doodling, talking, walking, writing and painting.

The first example is a doodle made by a young person with physical and learning disabilities (Figure 6.1). This person had given permission for the doodle to be used for research, but did not want her conversation



Figure 6.1 *Young person's doodle* © Wendy Sims-Schouten, Emma Maynard and Megan Pound 2022

around this to be recorded; as such the discussion below solely revolves around the doodle itself and the language used within this.

The doodle above is centred around the brief that was put together by a steering group of children in the school. The research itself was about mental health and wellbeing of children in the school, and after consulting the steering group it was decided to structure the questions around 'what makes you happy' and 'what makes you sad', rather than using the terms mental health or wellbeing. In addition to this, based on the advice of the steering group, it was decided to offer doodling, writing, painting and discussion opportunities, allowing the children and young people, aged 12–16 years old, to engage with the topic.

In the doodle the words 'my disability makes me sad', 'backwards' and '90% weird 10% normal', are striking as examples of internalised failure. This is accompanied by numbers and maths, highlighting this young person's skill in arithmetic, as well as her love for voice acting, voiceovers and SpongeBob. Here it could be argued that she is resisting the internalised failure by highlighting her skills to counter stigmas and labels of being 'backward' and 'weird'.

As well as resisting internalised failure, by drawing attention to skills and abilities, as in the arithmetic example above, children/young people may also show this in their behaviours. Earlier on in this chapter I highlighted that behaviours that defy the norm of how one should behave in a classroom setting, such as moving about, not listening, not sitting still, withdrawal, and disruptive or destructive behaviour, are often viewed as challenging and in need of change in the context of children with learning difficulties/disabilities. Yet, it should be noted here that this so-called challenging behaviour may only appear in certain environments, and the same behaviour may be considered challenging in some settings or cultures but not in others. Moreover, rather than treating this as challenging, it may also be good to look at this from the young person's perspective, for example, the behaviours may function as sensory stimulation, or in order to get help or to avoid demands, where they are non-verbal. Below are examples.

The first example comes from a discussion with young people (aged 12–16 years old) at a school for children with autism. The discussion below revolves around artefacts that the children are presented with, representing former children's experiences and memories of migration to England as part of the Kindertransport and Windrush migration schemes between 1938 and 1960, such as a sweater, a book, a doll and stories (see also Chapter 3). The young people in the focus group below are reflecting on what it might be like to leave a country as a child refugee, without

your parents. Whilst one child considers what it might be like to have people tell you what to do 'whilst you don't understand and your mum is not there', another child leaves the group:

Child 1: Suddenly you've got people telling you what to do, you don't really understand and your mum is not there.

Child 2: Miss, X is heading to the gate!Child 3: Oh, is that where he's going?Child 2: Yes, he'll be going to the gate.Child 1: He's trying to escape again.

The above – the running away of one of the children – is meaningful, because it provides insight into the positionality of this child in the group and the complex and nonlinear interplay between this child's agency (i.e., his meaning-making, motivations, intentionality) and the task at hand, namely making sense of disadvantage and resilience in light of migration (see also Sims-Schouten et al., 2022). In line with the critical realist approach discussed in Chapter 1 of this book, absence, anomalies and resistance are meaningful, as what is missing in a social context or situation can provide insight into complexity and the layered nature of reality, and how this reality is understood by different agents (Bhaskar, 1989; Haigh et al., 2019). Instead of viewing this as challenging and disruptive, it could be argued that this young person chooses to leave a situation that is, at this point, too confrontational.

Even though all young people in the group agreed to taking part in the study and the project was explained to them, and their (and their parents/carers') informed consent was obtained and they had input in the structure of the project/data gathering, this does not mean that they could not change their mind or adjust how they engaged with the project. By running away the young person not only resists the project, but the school context as a whole (evident from the fact that this is not the first time: 'He's trying to escape *again*'). There is no space in this chapter to talk about defiance in light of school contexts, and whether school as a whole (or in this case, the alternative education provider) is by default the right place for some children, yet what the running away shows is that this young person takes charge by leaving a situation that is not catering for his needs at this very point.

The final example is a young person who took part in the school project around mental health (Sims-Schouten et al., 2022). After the project was discussed with the group, and their approval was obtained, it became clear that one young person preferred to abstain from getting involved

and instead of taking part in the group discussion and doodles around 'what makes you happy' and 'what makes you sad', she painted beautiful faces in her sketchbook. While visual methods have been celebrated for minimising the power relationship between the adult researcher and young person (Elden, 2012; Farmer et al., 2017), it should be added that visual participatory methods can only reduce power imbalance if there is a choice when it comes to engaging in this activity, and how to engage with this (Dare et al., 2021).

By giving her approval to participate in the project, whilst at the same time resisting the particular activity of drawing/doodling with felt pens, this young person reinforced the fact that children are not, and should never be, perceived as passive beings in research (Heath et al., 2009). Moreover, this young person's resistance in engaging with the tablecloths and felt pens also provides insight into her agency, positionality and resilience in relation to mental health and wellbeing (Harre et al., 2009; Rikala, 2020). Rather than doodling/drawing and chatting about this, she preferred to quietly represent this in her paintings. One of the researchers walked over to her table, admiring her paintings, prompting this young person to get out her sketchbook and explain the meaning of the paintings. All represented her own personal turmoil, from hearing voices to mood changes, depression and eating disorders, in the form of stunningly painted distorted faces of young women.

Thus, by respecting the agency and positionality of children and young people, combined with the reciprocal approach of coproduction, it is possible to gain insight into their resilience, in sometimes unexpected yet powerful ways! Centralising children and young people's voices and perspectives thus allows the promotion of awareness as a strategy for tackling inequality and uneven practices/perceptions, providing insight into the complex and nonlinear interplay between human agency (meaning-making, motivations, perceptions) and social structures (enduring patterns, social rules/norms, laws and mechanisms) (Houston, 2010).

Unique pathways to resilience and counter-voices

In this section I return to the question at the start of this chapter 'Am I a retard?', posed by the British comedian Rosie Jones as part of a documentary on ableism in 2023, highlighting that people like her who have physical disabilities are often treated as having cognitive disabilities too. Here being called a retard, whilst she is in fact an intelligent woman, is conceptualised as the biggest offence of all. Yet, herein also lies the

quandary that is resilience and related 'counter'-voices in light of disability: being perceived as 'less' in every way – less able, less clever, a lesser human – leaves little room and opportunity for coping in light of adversity (which is what resilience stands for), with sometimes dire consequences. An example of this is Fiona Pilkington, who after years of being taunted about her child's disability by neighbours and local youth, killed herself and her daughter (Quarmby, 2011). Fiona Pilkington and her family had become the 'best game in town', and the abuse and torment was left largely unchallenged by social services, the police and council (Quarmby, 2011). With the move from institutionalisation to supporting people with learning disabilities/difficulties and differences (such as autism) to live in the community, personal safety has become a concern and individuals have spoken out about how they have been badly treated by strangers, neighbours and others they regard as friends (Richardson et al., 2016). Failed by a 'safeguarding' system, which was in fact nothing more than a plethora of unconnected units, officers and agencies, none of whom necessarily spoke to each other, Pilkington had no chance.

Then, why didn't she move, someone might say? As someone living in council-supported accommodation, Fiona Pilkington did not have much choice in this matter. This was brought home to me, quite literally, some years ago, when I was collaborating with colleagues in a local council in the Southeast of England on a project on safeguarding members from minority communities. I was invited to the council building for a meeting. After arrival at the council building, which is a big building with multiple floors, I was told to go upstairs and wait for someone to let me into the relevant corridor. On arrival, I noticed that there were a number of corridors, some locked and some with queues of people lined up. I joined one of the queues, which turned out to be the housing queue. In front of me was a small, skinny elderly man wearing lots of layers of clothes. When he got to the front of the queue, he asked if he could be moved to different housing, because he was being bullied and targeted by his neighbours; his request was very quickly dismissed, and he was told that he needed to go on a waiting list and that this was not the right queue. I was left baffled by the reaction to this man, even more so, when I got to the front of the queue and indicated that I was here to meet X for a safeguarding project, and was met with a very pleasant response telling me that X would be called and asking whether I wanted coffee or tea. Thus, people's resilience is undermined here, because the means that they are using to reach out for support are closed down with no alternatives.

It is clear that children with (specific) learning differences and/or difficulties/disabilities experience a number of risk factors, one being the

presence of the learning disability itself, which is a risk factor regarding school failure and dropping out, because students with learning differences often experience a multitude of difficulties throughout their academic careers (Harðardóttir et al., 2015). Other risk factors are located in society and perceptions and treatment of children with learning differences, difficulties/disabilities, including hate crime and scapegoating. As with the other chapters, it is clear that the legacy of the deserving versus undeserving paradigm from the past lives on, which can also be seen in the similarities between the voices from the past and present across all chapters.

This also raises the point of unique and alternative pathways to resilience and counter-voices. Think for example about the girl discussed earlier on in the chapter, who was taken on by the Waifs and Strays in 1907 and described (in 1908) as 'an imbecile and dangerous to the other children and the removal from the home became necessary'. Or think about young people who end up in the criminal justice system, 23 per cent of whom have a very low IQ of less than 70; and 25 per cent of young offenders have special educational needs, according to the Prison Reform Trust, an independent UK charity, founded in 1981. It should therefore not come as a surprise that children with learning difficulties/disabilities suffer from the consequences of internalised failure.

This chapter highlighted that students with learning differences and disabilities/difficulties continue to experience significant obstacles and barriers to inclusion and resilience, which is down to issues around conceptions of inclusion, the level of positivity in the teaching community, resilient legacy attitudes embedded in education systems, as well as the underlying drive or political enthusiasm for change (Woodcock et al., 2019). Ultimately, therefore, developing and sustaining an educational environment, which *celebrates* the diversity of *all* learners, is limited by the particular political-social environment, as well as the capacity of school communities and individual teachers to confidently embed inclusive attitudes and practice into their everyday actions.

In addition to this, identifying and accounting for the various dynamics, which influence and impact the implementation of inclusive practice (as aligned to the concepts of equal recognition, social justice and equity), is fundamentally bound to the diversity or disability encountered in the classroom. This also involves accessible (specific) learning support and provision, as well as reducing barriers. It follows that in school settings, among other settings, practitioner perceptions of inclusion are significant to its successful enactment, yet research shows that positive perceptions of inclusion tend to decline after teachers' first

teaching year (Boyle et al., 2014; Woodcock et al., 2019). Furthermore, teachers' perceptions have also been found to vary, depending on the educational needs of the student (Avramidis and Norwich, 2002).

Thus, disability is stigma and labels, a 'blemished person' as Goffman (1968, p. 11) writes. Moreover, it is here, it seems, that resilience is not even considered or expected, as if it is part of their disability: being unable in every way, so no expectations regarding resilience are applied here. Yet, it is clear from this chapter that these perceptions and considerations are wrong, unjustified and unfair. Moreover, as has been argued before, notions of personal strengths and protective factors need revisiting as this often does not centralise the voice of the person who is affected, instead there is a danger that unjustified judgements are made in relation to behaviour and intentions. The same can be said about the notion that children and young people with learning difficulties have challenging behaviours.

Implications for theory and practice

It is hard to discuss implications for practice, without pointing the finger at the practice itself for being flawed, biased and discriminatory. As is evident from the Pilkington case, multiagency working is problematic when agencies don't speak to each other or see something as someone else's problem. And the Pilkington case is not the only example of flaws and problems in the system here. Another case is that of Michael Gilbert (Quarmby, 2011). Dubbed vulnerable from an early age, Michael Gilbert spent much of his life in care and was released into the 'care' of a criminal family, who robbed him, mocked him, tortured him, filmed him for entertainment and eventually killed him. The family in question had been known to police and other agencies for a decade.

It is clear that the implications for practice are huge here. If agencies are not working together to protect vulnerable people, then the system falls apart and people die – as was the case with Pilkington and Gilbert. What does this mean for resilience – as the topic of this book and chapter? Pilkington approached support services many times, making them aware of the issues that she and her family were experiencing. Yet, her resilience was ignored. Thus, there appear to be issues with children and young people with learning difficulties/disabilities, where their resilience is either negated and ignored or their behaviour is perceived as challenging, as was the case with some of the children and young people's voices expressed earlier on in this book.

Inclusive practice, which celebrates the unique academic, social, emotional and physical characteristics of *all* children and young people, is central, which includes striving to unite and synergistically align all components of the education and social care system in meaningful ways. Here the 'transformative' approach of inclusion connects and unites young people with learning difficulties within the community, irrespective of ability, disability or special educational, cultural differences, sexuality or gender identity.

Yet, the challenges for a multiagency society lie in the way that the different systems, organisations, councils and agencies come together to listen to and centralise young disabled people's voices, rather than embracing the neoliberal narrative of individual failings, turning the issue of scapegoating and hate crime into something that the young person needs to deal with, either by reporting this to the police or by ignoring this. As it stands, disability hate crimes are still not properly recorded or dealt with. For example, data from the charity Disability Rights UK highlights that although disability hate crime reports have risen by 43 per cent, in 2022, compared to previous years, in reality only 1 per cent of hate crime reports led to prosecution and more than 11,000 reports (99 per cent of cases) went no further after reporting.

Thus, improving practice, as well as theory, requires self-reflection of practitioners as well as equality and diversity training. Finally, this also requires revisiting perceptions around challenging behaviours, acknowledging that multiple factors are likely to underlie behaviour that challenges, including resistance and defiance as acts of resilience. Here, thorough assessment of, and engagement with, the person and their environment is needed, to make sense of triggers and improve the young person's overall quality of life, and within this their resilience.

Notes

- 1. Waifs and Strays Society, Children's Society Archives, London, Case File 13747.
- 2. Waifs and Strays Society, Children's Society Archives, London, Case File 13747.
- 3. Waifs and Strays Society, Children's Society Archives, London, Case File 12526.
- 4. Waifs and Strays Society, Children's Society Archives, London, Case File 12526.

7

Intergenerational/transgenerational trauma, lived experiences and resilience

Introduction

As with resilience research, a large body of scholarship in public health and the social sciences has framed cases of intergenerational and transgenerational trauma through deficit models of health and the theoretical lens of social suffering (Demers et al., 2022; Morgan, 2020). The fact that intergenerational trauma can also be linked to collective resilience, as was the case with former Dutch kickboxing champion Remy Bonjasky (see Chapter 5), has been ignored here. In this chapter I argue that there is a need for caution when equating intergenerational and transgenerational trauma with 'syndromes'. Diagnosing someone with a syndrome can in and of itself be a sign of oppression, by means of labelling a person as psychologically disordered, and thus blaming them for not coping in an oppressive environment, thereby diminishing society's role in their functioning (Hicks, 2015).

Thus, there is a need to move away from framing cases of transgenerational/intergenerational trauma through deficit models of health, and instead provide a framework for making sense of meaningful and deeply embedded histories of segregation, stigma and political violence that otherwise get erased (Shi et al., 2021). This also means taking account of the fact that, as argued in Chapter 3, survivor silence can be misconstrued as resilience, whilst this in fact might signify psychological or political repression and the 'unspeakability' of a traumatic past and present, as will be discussed in more detail below (Homer, 2020). Moreover, despite the abundant scholarship on post-traumatic stress disorder (PTSD) and the memoropolitics entailed by testimonial accounts

of trauma in relation to war, displacement and genocide, little is known of everyday experiences of descendants.

This chapter looks at intergenerational and transgenerational trauma through a socio-ecological lens, incorporating culture and socialecological aspects of trauma and resilience and acknowledging the crucial role of community and culture in making sense of lived experiences, including with a focus on health resources and related experiences (Bronfenbrenner, 1977; Ungar et al., 2013). Current approaches to transgenerational/intergenerational trauma are centred on the premise that trauma is passed on to children through epigenetic inheritance, parental mental health/history, family structure, attachment quality and additional stress/life events (Dajani, 2022; Kim, 2020; Sangalang and Vang, 2018). Here the focus is on how intergenerational trauma affects the health and wellbeing of descendants, leading to behavioural issues, anxiety and PTSD (e.g., see Dekel and Goldblatt, 2008; Yehuda and Lerner, 2018). While this provides opportunities for treatment and support, it also supports a narrative of pathologising certain groups. Moreover, it suggests that certain events, such as 'perceived' discrimination, marginalisation, racism (e.g., in the case of post-traumatic slave syndrome), may be triggers of trauma, leading to 'certain' (pathological) reactions and bad behaviours (Matheson et al., 2019). This does two things: 1. it puts the onus on the person experiencing the trauma (and their familial history), and 2. ignores the real and lasting impacts of oppression, marginalisation and racism that are still very much alive in society today.

Drawing on historic and contemporary narratives of (intergenerational/transgenerational) trauma in relation to marginalisation, discrimination and disadvantage, this chapter revisits resilience and proposes a multidimensional definition of trauma and related interventions, with a focus on intrapersonal, interpersonal, organisational, environmental, cultural, societal and public policy factors (Harvey, 1996; Kilanowski, 2017). This involves placing the person–community relationship and 'ecological fit' within individually varied recovery contexts at the core. The role of social structures of inequality, marginalisation, disadvantage and discrimination at the root of trauma will be extracted through a critical discussion and analysis of a number of examples of (child) migration.

The first section sets the scene, building on and expanding the discussions in Chapters 3 and 5, by critically discussing and analysing the meaning of 'trauma' in intergenerational and transgenerational trauma, as well as what this means in relation to resilience. This is put into perspective in the sections that follow, providing examples of voices from the

British Home Child and Moluccan migration schemes. The British Home Child scheme refers to the mass migration of children from the British Isles to Canada, between 1869 and the late 1930s; whilst the Moluccan migration scheme refers to a subgroup of Indonesians, who found themselves in the Netherlands, against their wishes, when Indonesia became independent from the Netherlands in 1949. In this chapter I will also raise questions in relation to barriers to resilience caused by poor understanding of and engagement with (intergenerational/transgenerational) trauma. I will do this in the final section, by critically discussing the need to move away from pathologising trauma survivors and their descendants and instead shed a light on the pathological impact of society here.

Setting the scene: intergenerational /transgenerational trauma and resilience

The body of a survivor marks trauma on the descendants in the simple fact of its being.

(Baum, 2013, np)

In this section I will explore the meaning of trauma and intergenerational/transgenerational trauma, as well as what resilience means in this context. Some of this was also touched upon in Chapter 5, where I gave the example of former Dutch kickboxing champion Remy Bonjasky, whose ancestors were slaves working on a Dutch plantation in Suriname and who highlights that the plantation revolt by enslaved people in the eighteenth century (see also Sint Nicolaas and Smeulders, 2021): 'has been passed down through generations and is one of the reasons why I was able to become kickboxing world champion three times'. Here, the reference to resilience in the face of a history of systemic oppression, provides a sense of empowerment, agency and strength by responding to trauma through post-traumatic growth, benefit-finding and thriving, something that is transmitted from one generation to the next (Ramirez and Hammack, 2014; Selvanathan et al., 2023). At the same time resilience in light of intergenerational/transgenerational trauma is hard to define, as can be seen from the quote by Baum (2013, np) at the start of this section 'The body of a survivor marks trauma on the descendants in the simple fact of its being'. Using the example of Holocaust survivors, Baum (2013) refers to trauma as something that forces a temporal splitting between present and past, in which the trauma event continues to replay in an interminable present.

The definition of trauma has evolved and expanded over the past four decades, as knowledge regarding life experiences that cause psychological distress has grown (Gradus and Galea, 2022). Currently there are numerous definitions of trauma. For example, WHO (2018) defines trauma as:

A delayed or protracted response to a stressful event or situation (either short or long-lasting) of an exceptionally threatening or long-lasting nature, which is likely to cause pervasive distress in almost anyone.

The DSM-5 definition of trauma requires:

actual or threatened death, serious injury, or sexual violence.

At the same time, the UK charity Mind (n.d.) defines trauma as something that occurs:

when we experience very stressful, frightening or distressing events that are difficult to cope with or out of our control, which could be one incident, or an ongoing event that happens over a long period of time.

Moreover, the World Bank (n.d.) provides the following definition of trauma:

Trauma is like a wound, left untreated, it may fester and eventually it impedes our ability to achieve our goals and enjoy life.

Whatever the definition of trauma, research highlights the multifaceted impact of trauma – material, physical, social, cultural – on people and communities (Berman et al., 2022; Nicholl, 2019). Drawing on a social-ecological framework, recent research provides a more holistic understanding of the effects of trauma at different time points, before, during and after the traumatic event (including issues around discrimination, disadvantage, poverty, such as in relation to migration), as well as at different levels of institutions and systems (Dajani et al., 2023; Shi et al., 2021; see also Chapter 5). The socio-ecological framework proposes a multidimensional definition of trauma and related interventions, with a focus on intrapersonal, interpersonal, organisational, environmental and public policy factors (Bronfenbrenner and Evans, 2000; Bronfenbrenner

and Morris, 1998; Harvey, 1996; Kilanowski, 2017). At the core of the model is the person–community relationship and ecological fit within individually varied recovery contexts. The latter highlights that individual differences in post-traumatic response and recovery are the result of complex interactions among person, event and environment factors (Harvey, 1996).

The same can be said about transgenerational and intergenerational trauma. Whilst intergenerational trauma refers to the specific experience of trauma across familial generations, transgenerational trauma refers to shared group trauma (George et al., 2016; Pearrow and Cosgrove, 2009). Both are controversial terms, used to highlight that chronic and acute trauma can be long-lasting and can be transferred from one generation or community/group to another, via complex post-traumatic stress disorder mechanisms. So far the field of research around transgenerational trauma has predominantly focussed on symptoms and treatment of concentration camp syndrome, in response to the observation that large numbers of children of Holocaust survivors were seeking treatment in psychiatric clinics (Baum, 2013; Fossion et al., 2003), as well as posttraumatic slave syndrome, the passing on of psychological and emotional trauma from slavery (George, 2015; Leigh et al., 2017). Moreover, a number of studies have looked at intergenerational trauma in Indigenous populations, for example, in relation to the residential schools in Canada, a network of boarding schools (1870s-1990s) for Indigenous people created for the purpose of cultural genocide, by removing children from the influence of their own culture and assimilating them into the dominant Canadian culture (George et al., 2016; Leigh et al., 2017; Matheson et al., 2019). Students in the residential school system were faced with harsh discipline and abuse from teachers and administrators, including sexual and physical assault; the legacy of which can still be seen today.

Even though scientists have only recently documented the intergenerational impacts of trauma on human health and wellbeing, this is not something new and communities across the globe have long witnessed the lingering impacts of historical traumas on subsequent generations (Andermahr, 2016; Gobodo-Madikizela, 2016). At present research around intergenerational and transgenerational trauma is largely located within medical and psychological frameworks and disciplines, focusing on how historic trauma is passed on to children through epigenetic inheritance, parental mental health/history (including 'silence' about the events), family structure, attachment quality and additional stress/life events (see also Dajani et al., 2023). For example, whilst some studies have looked at epigenetic transmission (the notion that one's

environment and external experiences can impact on cellular activity) (e.g., Blake and Watson, 2016; Dajani, 2022), others (e.g., Rodríguez-Soto et al., 2021) have studied pregnancy, as well as psychological and social causes and consequences (Cowan et al., 2020). Intergenerational trauma can manifest itself in health-related issues, such as cardiovascular diseases, as well as diagnoses of mental health issues, such as anxiety and depression, particularly in systematically marginalised groups (Dajani, 2022; Yehuda et al., 2008).

Thus, the majority of studies around intergenerational and transgenerational trauma so far focus on the (negative) health-related impacts of the trauma on descendants, thereby treating intergenerational/transgenerational trauma as a syndrome, putting the onus on the person experiencing the trauma and their familial history. For example, Ancharoff et al. (1998) identified four possible mechanisms and causes associated with transgenerational trauma. Firstly, 'silence', where the parent/caregiver does not vocalise what they have been through, but the child nevertheless senses the parent/caregiver's fragility, and/or is taught to avoid topics or stimuli that might upset the parent/caregiver. As a consequence, the child's anxiety accelerates as she/he is unable to seek out help or comfort from the parent. Secondly 'over-disclosure', where a parent/caregiver overwhelms the child by explaining their trauma in graphic detail, leaving the child terrified. Thirdly, 'identification', which happens when a child is continuously exposed to the post-traumatic symptoms of their parent/caregiver, and begins to identify with and imitate the symptoms in order to connect with the parent. Finally, 'reenactment', which refers to the mechanism associated with transmission, where the child is engaged in re-enacting some aspect of the parent/caregiver's traumatic experience (see also Pearrow and Cosgrove, 2009; Slack and Webber, 2008).

Yet, the above ignores the role of the wider society in ongoing trauma that groups of people may experience, for example, due to racism, marginalisation and discrimination, such as when it comes to how migrants are treated post-migration. For example, the Kindertransport, as part of which Britain took in 10,000 (mostly Jewish) children, is often used to reinforce Britain's image of 'protector of vulnerable children'. Yet there is plenty of evidence to the contrary, highlighting that driven by demographic considerations the British authorities treated the Jewish child refugees as temporary immigrants and were reluctant to 'replenish that good white stock with Jewish racial material' (Grenville, 2012, p. 4; see also Chapter 3). Migrants and refugee children and young people were and are often received with suspicion and positioned within a

lower social class/hierarchy and stigmatised as less important than other children (Ala, 2018; Kootstra, 2016). However, the fact that systemic oppression, racism and marginalisation that child refugees/migrants may experience post-migration can lead to additional trauma has only recently become the focus of research (e.g., Dajani et al., 2023).

There is a need to critically analyse and revisit the notion of syndrome, such as in relation to intergenerational trauma linked to slavery, also referred to as 'post-traumatic slave syndrome'. In this vein, some have argued that the so-called syndrome is merely symptomatic of the oppressive and dominating White society's sociopathy and psychopathy (St Vil et al., 2019). For example, talking about the United States, Wilson (1996, p. 91) states that, 'The society is sick', stressing that African Americans are simply stomaching the sickness of their long-term oppressors, rather than suffering from a syndrome. To understand intergenerational consequences of trauma an integrative perspective is needed. This perspective needs to include sociological and societal characteristics, as well as psychological, family system and biological factors. The latter also involves acknowledging that intergenerational consequences do not necessarily lead to psychological symptoms (Dashorst et al., 2019; Van IJzendoorn et al., 2003).

Although it is difficult to pinpoint specific factors that 'cause' intergenerational trauma, it is possible to identify mechanisms that play a role here. For example, while each Holocaust survivor's developmental story is unique, it is, however, linked to the others' by the common experience of negotiating an identity between countries, cultures and religions, against the background of unparalleled political upheavals, and as such also sheds light on, and offers ways out of, the traumata suffered in present-day contexts of enforced migration and displacement (Sangalang and Vang, 2018). Moreover, greater recognition of the longterm consequences of historical trauma has given meaning to various complex family dynamics, such as 'generational curses' and 'intergenerational cultural dissonance' (see also Ajatnoah-Gyadu, 2004; Kane et al., 2019; Vuong, 2019; Wooyoung Kim, 2020). For example, talking about the Ghanaian context, Ajatnoah-Gyadu (2004) refers to the debilitating effects of generational curses resulting from the sins of one's ancestry. At the same time Kane et al. (2019) found that intergenerational cultural dissonance (referring to the difference in acculturation between children and caregivers) is a significant predictor of alcohol abuse among youth from Asian immigrant families in the USA.

With evidence that the second generation can be affected by parental trauma, there are also a growing number of studies aiming to analyse intergenerational resilience. Research on intergenerational resilience identifies parenting style and communication as protective factors in light of intergenerational trauma (Field et al., 2013; Giladi and Bell. 2012; Kazlauskas et al., 2017). Moreover, research points to the role of humour, fictional recreation and other forms of artistic output and realisation as means of resilience reported by the second generation of Holocaust survivors (Braga et al., 2012; Yilmaz et al., 2023). Conversely, research shows that experience of trauma is increased, and intergenerational resilience reduced, in offspring of survivors that do not speak of their traumatic experiences, keep them as a secret or relay them in an indirect, fragmented manner (Ancharoff et al., 1998; Betancourt et al., 2020). Other research has started to focus on the positive impact of trauma on resilience, and how this can be transferred across generations through epigenetics signatures, including the role of adopting healthy metacognitive beliefs (see Dajani, 2022; Hett et al., 2022). Furthermore, research highlights that personal involvement in collective, universal values, transcending the particulars of one's family history, may be a means of escaping the traumatic experience (Ali et al., 2023; Reinschmidt et al., 2016). Finally, it is suggested that by not identifying themselves as 'heirs' of a unique traumatic history, descendants give themselves more favourable conditions for developing resilience (Hett et al., 2022; Kazlauskas et al., 2017). Yet, as mentioned earlier on, the role of wider societal factors in relation to the traumatic history itself, including individuals' perceptions, experiences and appraisals of discrimination, marginalisation and disadvantage, should not be negated here (Matheson et al., 2019).

Below I will explain intergenerational trauma and resilience further, drawing on voices from the British Home Child scheme to Canada. Between 1869 and the late 1930s, over 100,000 juvenile migrants were sent to Canada from the British Isles as part of the child emigration movement. Motivated by social and economic forces, churches and philanthropic organisations sent orphaned, abandoned and pauper children to Canada. Many believed that these children would have a better chance for a healthy, moral life in rural Canada, where families welcomed them as a source of cheap farm labour and domestic help (Soares, 2016). After arriving by ship, the children were sent to distributing and receiving homes, and then sent on to farmers in the area. Although many of the children were poorly treated and abused, others experienced a better life in Canada than if they had remained in the urban slums of England (Sims-Schouten, 2021b; Sims-Schouten and Weindling, 2022). Yet it is clear that the legacy lives on.

Voices from the British Home Child scheme to Canada

When I was young, my grandparents had a big farm. There was a boy who lived with them on the farm and helped out with the animals. He was not allowed to sleep in the house and slept in the cowshed with the cows. I played with him sometimes. He lived on the farm all his life, and when he died, he was buried next to my grandparents. It was not until much later that I found out that he had come to Canada through the British Home Child scheme.

(Descendant of Canadian farmer who 'adopted' a British Home Child)

The history of the British child migration schemes to different countries, including Canada and Australia, starting in the late 1800s and lasting until the 1970s, is long and fraught with scandals, contradictory motives, mixed reception and political pragmatism (see IICSA, 2018). In November 2019, I was invited to give a talk at a British Isles Family History Society event in Ottawa, Canada, sharing my work on the British Home Child scheme to Canada (see also Sims-Schouten, 2021; Sims-Schouten and Weindling, 2022). At the end of my talk, which took place in a large auditorium and was attended by around 100 people, a queue of descendants (both descendants of former child migrants, as well as descendants of Canadians who adopted child migrants, such as in the quote above) lined up to share their experiences. Below I will give examples of communication and voices regarding the Canadian child migration schemes, taking place over 100 years ago, as well as how current descendants make sense of this.

By the late nineteenth century, children became a commodity that could be plucked from one location to another and readily transplanted (Sims-Schouten and Weindling, 2022). Motivated by social and economic forces, churches and philanthropic organisations sent orphaned, abandoned, and pauper children to Canada (and other countries, such as Australia and Rhodesia) between 1869 and 1970 (Constantine, 2013). The Canadian child migration schemes, also known as the British Home Child scheme, were run by philanthropic agencies – two such voluntary institutions, which this section will focus upon, were the Fegan Homes and the Waifs and Strays Society. The first was responsible for sending 3,200 boys to Canada, between 1884 and 1915; and the latter for sending 3,500 children (both boys and girls) to Canada between 1883 and 1937 (Fegan and Fullerton, 2013; Kohli, 2003).

The reception of children in Canada by child welfare societies was couched in phrases professing the needs of the child, while at the same time negotiating the needs of the prospective foster home. Yet, in essence, British boys and girls were sent unaccompanied to Canada to work as agricultural labourers and domestic servants. Decisions around which children and young people could and could not be included in the child migration schemes to Canada were centred around specific outcomes (e.g., 'passed' or 'deferred' for various reasons, including physical ailments/disabilities, 'mental deficiencies', 'not strong enough' or 'not to be trusted') (Sims-Schouten, 2021b). It was clear that an ability to work was a prerequisite for the one-way passage to Canada. Parr (1980, p. 82) highlights that this is also something that was openly admitted by participating officials: 'We are not so young and unsophisticated as to imagine that the farmers take our boys for love. ... The primary object of the farmer in taking a boy is that his services be useful to him.' The certification and confirmation of 'mental and physical fitness' were important in light of the opposition to the scheme in Canada, where child migrants were largely condemned as degenerate 'slum kids', and strict records were held (Constantine, 2013; Lynch, 2016, p. 1). For example, a letter dated 29 August 1929, highlights some trouble and discontent in the receiving homes in Canada, especially when it comes to the mental and physical fitness of some of the young girls:

if this is to continue greater care must be exercised in the selection of girls, and all candidates should be examined by our own doctor to see if they are mentally as well as physically fit. There is no doubt about it, girls have been sent out because they have had undesirable relatives. Also, in filling up reports some matrons have not always been truthful, and a troublesome girl is pushed through. In the last party a girl who for years must have been a 'bedwetter' was sent out.²

There is no doubt that ongoing scrutiny and judgements regarding 'troublesome behaviour', such as bedwetting, which started before and continued after migration, including the way in which the migrants were treated upon arrival, left its mark, afflicting any resilience they may have had (Lynch, 2019). Moreover, children who resisted migration, by voicing their opinion and/or running away, were perceived as 'rude' and poorly behaved, and described as lacking in stamina, self-control and with no strength of character, all traits linked to lack of resilience (Moss et al., 2017). The Canadian child migration schemes came to an end in

1930 (although the scheme continued in other parts of the world, such as Australia, till the 1970s), when Canada ruled that no child under 14 years would be admitted to the country, unless accompanied by parents. This legislation was the result of changes in Canadian economic conditions and dissatisfaction with the labour provided by the children/young people, as well as increased criticism from child welfare societies against the 'philanthropic abduction' of children/young people (Constantine, 2013; Hammerton, 2017).

It should not come as a surprise that given the traumatic experiences of many British Home Children (BHC), some of this was passed on to the next generation in the form of intergenerational trauma. Yet, despite increasing research on intergenerational and transgenerational trauma, little is known about the everyday experience of descendants of trauma survivors. As mentioned in the previous section, silence, over-disclosure, identification and re-enactment are all possible mechanisms associated with transgenerational trauma (Ancharoff et al., 1998; Pearrow and Cosgrove, 2009). At the same time, parenting style (supportive rather than harsh parenting), communication, humour, fictional recreation and other forms of artistic output mechanisms are associated with resilience (Field et al., 2013; Kazlauskas et al., 2017; Sangalang and Vang, 2018; Yilmaz et al., 2023). Using examples of the Canadian child migration schemes and voices from descendants of children who were sent to Canada, I will show that identity, public discourse and personal memory all play an important role, and go beyond parenting style and communication (Murphy, 2010). The latter is also relevant in light of my earlier point that by focussing solely on parenting style and individual responses, there is an inherent danger of pathologising certain groups, by putting the onus on the person experiencing the trauma (and their familial history). Moreover, this ignores the role of the wider society in ongoing trauma that groups of people experience, post migration, due to racism, marginalisation and discrimination.

Thus, there is need to focus on the varied and developing child welfare practices in different international contexts, in order to provide greater understanding of the evolution and conceptualisation of the role migration played in childcare provision across Britain and imperial contexts (Soares, 2016). Narrative identity and 'power of story' is key here (Haste, 2014; Phoenix, 2020). Specifically, the notion of talking the past 'back into existence' reflects the experience that narrative identity is developed and maintained through dialogue, in the telling of our stories (Matheson et al., 2019). Dialogue and communication between trauma survivors and descendants are key when it comes to making sense of

the wounds from the past, as can be seen from the extract below which comes from a descendant of a BHC:

When I was quite young, on a family picnic, we went swimming and I asked my father what happened to his feet. He simply said, 'I damaged my feet when I was working on a farm.' His feet troubled him all his life and were a daily reminder of his time in care. He tried to enlist in WWII in order to get back to England but was refused because of his feet. Decades later, he confided that his feet were stunted because he had to wear inappropriate boots that were too small, while he was in foster care in England before being sent to Canada.

As mentioned in previous sections, silence, over-disclosure, identification and re-enactment are all possible mechanisms associated with intergenerational trauma. Yet, regardless of this, everyday lives of trauma victims and their descendants entail only the 'absence of presence' of the past and the absence of descendant knowledge of that past, with the familial social milieu pathologised and thought to foster only the wounds of transmitted PTSD (Blake and Watson, 2016; Cowan et al., 2020; Kidron, 2009). The quote above highlights that what happened to this child migrant before migration to Canada, and his experience of being in the care system (having to wear women's boots in foster care), affected him for the rest of his life, something he could only talk about later on in his life. As mentioned in Chapter 3 survivor silence can be misconstrued as resilience, whilst this in fact might signify psychological repression and the unspeakability of a traumatic past and present, as will be discussed in more detail below (Homer, 2020). The latter is also relevant when it comes to intergenerational trauma. One descendant of a BHC migrant, who approached me after my lecture for the British Isles Family History Society in Ottawa in 2019, indicated that her mother's shame of being a child migrant, and the subsequent abuse experienced while in domestic service in Canada, only became evident after her death, when they found a diary reporting on her trauma.

For a long time, work on trauma and migration has suggested that trauma 'ends' when refugees arrive at a host location. Yet, more recent research now acknowledges that there is a continuum of trauma, which continues after migration (Dajani et al., 2023; Matheson et al., 2019; Sangalang and Vang, 2018). However, just what this means, and what the traumas of this continuum look like, have been less studied. While some research has looked at how this continuum extends into post-refugee/

migration experiences where hostile immigration and asylum regimes, destitution, discrimination and racism generate additional traumas (Pertek and Phillimore, 2022; Phillimore et al., 2022), more is called for to get a full sense of the scope of this host-site trauma perpetuation, and understand what can be done at a micro and macro scale (Dajani et al., 2023). Recent research focusses on how migration trauma should be divided into pre-migration, migration and post-migration experiences (Dajani, 2022; Shi et al., 2021). The first (pre-migration trauma experiences) includes higher risk of poor developmental and long-term health outcomes, due to childhood exposure to trauma, especially due to intrafamilial and extrafamilial issues. The second, the migration itself, refers to forms of trauma that continue during migration, with the added element of being vulnerable to stress and injury during the migratory process. Finally, post-migration trauma focusses on the distress that continues and arises after migration and during resettlement (Dajani, 2022; Shi et al., 2021).

Socio-ecological perspectives are helpful here in providing insight into the real and lasting impacts of oppression, marginalisation, racism and related post-migrant/refugee experiences, highlighting a need to look at the social and structural, as well as personal, contexts of migrants in new host contexts (Bronfenbrenner and Evans, 2000; Bronfenbrenner and Morris, 1998; Harvey, 1996; Kilanowski, 2017). The quote from a BHC descendant below reinforces this, by referring to both her mother's lack of communication and roots. Like the previous quote, it took years before this person's mother started to open up:

I believe I was born into trauma – my mother's childhood trauma was passed down to her children – I felt out of place – with no roots and angry that my mother wouldn't talk about her past – it took her until she was well into her 70s before she started opening up.

There is very limited research examining responses to poor treatment and discrimination of migrants and the impact of this on their health and wellbeing. There is some evidence of avoidance as a key strategy – for example, in avoidance behaviour, including avoiding social encounters, though this has not been examined specifically in relation to health impacts (Ziersch et al., 2020). Yet, it is clear from the experiences of BHC descendants and their parents that poor treatment and discrimination have long-term impacts: 'Many BHC in care carried their physical scars as well as emotional in silence all their lives. Patterns of behaviour were inadvertently passed on to their children as inter-generational trauma'

(BHC descendant). This, once again, highlights the impact of wider societal mechanisms, in this case in relation to the harmful care system and subsequent migration to Canada, both leaving their marks. By using the word 'inadvertently' in relation to the intergenerational trauma that is passed on from parent to child, this descendant does not put the onus on the parent. Rather, it is the care system, the poor support and flawed societal mechanisms that fuelled the scars and silence. This also raises the question of what resilience is in this context, or better, what barriers to resilience have been created by poor understanding of and engagement with (intergenerational/transgenerational) trauma. I will explore this further in the next section, by critically discussing the need to move away from pathologising trauma survivors and their descendants.

Moving away from deficit models: narratives, counter-voices and memories of segregation, survival and resilience

I think it is interesting how many unresolved problems still very much plague so many people after all these years and if anyone thinks that everything has been resolved they are very much mistaken.

(Kindertransport; Letter sent to Wiener Library in 1988)³

Poor assessment of psychosocial experiences like 'stress' and intergenerational and transgenerational trauma can obfuscate deeply embedded societal mechanisms and political dimensions, presenting missed opportunities and ultimately biasing the search for empirical 'truth', as the person in the quote above highlights. A large body of scholarship in public health and the social sciences has framed cases of intergenerational trauma through deficit models of health and the theoretical lens of social suffering (Bryant et al., 2018; Kim, 2020; Sangalang and Vang, 2018). Operationalising stress, trauma and resilience in light of migration (such as the Canadian migration scheme discussed in the previous section) can be a difficult endeavour when taking account of complexities around pre- and post-migration experiences, as well as the migration itself (Dajani, 2022; Shi et al., 2021). The latter can range from trauma experienced due to war and conflict prior to migration, to racism, discrimination and marginalisation upon arrival and beyond. Moreover, all those factors may also impact the trauma and resilience passed on to descendants. Using standardised measures of trauma, informed by public health and psychology frameworks/disciplines, can obscure complex social constructs and flatten the complexity of lived experience and social and political realities (Adams et al., 2016; Sangaramoorthy and Benton, 2022). Thus, there is a need to move away from framing cases of transgenerational/intergenerational trauma through deficit models of health, and instead to provide a framework for making sense of meaningful and deeply embedded narratives, counter-voices and memories of segregation, survival and resilience.

Some impactful research is already starting to take shape on this front. For example, with their 'counter-exhibition' 'Into the Light', Kelly et al. (2021) expose, disrupt and show the impact of deeply embedded histories and legacies of twentieth-century 'race betterment' pedagogies taught in Ontario's postsecondary institutions. Centralising voices, memories and objects of a range of people, including Anishinaabe, Black, and other racialised populations, as well as disabled and poor people. Kelly et al. (2021) show the transformative potential of centralising marginalised stories in accessible and creative ways to disrupt, counter and draw critical attention to the brutal impacts of oppressive knowledge. Prioritising stories, memories and artefacts of groups unevenly targeted by such oppression, Kelly at al.'s counter-exhibition thus contests and defies singular narratives circulating in institutional knowledge systems of what it means to be human. The latter has important implications for conceptualising trauma and resilience, using multisensory and creative methods to make sense of experiences in light of oppression. The role of multisensory experiences and practices in making sense of trauma is also highlighted by Kidron (2009). Kidron (2009) found that ethnographic accounts of Holocaust descendants depict the survivor's home as embedding the non-pathological presence of the Holocaust past within (silent) embodied practices and person-object and person-person dialogue representing personal and familial 'lived memories'.

As mentioned in the previous section, narratives and power of story provide powerful opportunities for reflection here (Haste, 2014; Phoenix, 2020; 2023). This includes how people compose their life stories and memories in light of pre- and post-migration trauma (Murphy, 2010). For example, Baum (2013) found that Holocaust survivors who were met with rejection or denial more likely experienced retriggered trauma responses than those met with warmth and support. Furthermore, Baum indicates that in the context of descendants, particularly because of the way Jewishness is conceived in terms of a collective unconscious and memory, one can extrapolate the injury from individuals to entire communities, present and future. Memory is a deposit or process, and the

past 50 years saw a revival of interest in narrative and its relationship to memory and identity. For example, American literary historian Hayden White (1975) saw narrative as a pattern imposed by historians on a chaotic state of affairs, whilst others such as French philosopher Ricoeur (2004), considered narrative to be implicit in the human experience of time (see also Murphy, 2010). At the same time sociologist Somers (1994) described narrative identity as a shift of focus from 'representational to ontological narrativity', where narrative is viewed as an 'ontological condition of social life'. Narrative is critical to identity and is the form in which memory comes. For example, in her work on intersectionality, Crenshaw (1991) refers to an absence of narratives and images portraying a fuller range of Black experience, including where power comes and collides, where it interlocks and intersects, advocating for the need to challenge cultural narratives that undermine voices from minority communities.

Other disciplines contributing to a revival in the use of narrative analysis include psychology, criminology, medical sociology and feminist theory. Power of story is relevant here as well, which involves taking account of 'plot', 'causality' and 'consequence' within this, including power, values, positioning and agency (Phoenix, 2020). The starting point is that a story never 'is', but always 'becomes' as we perceive it. This involves awareness of the incompleteness of any storyline or narrative mode, taking this incompleteness - the becoming of the story as its actuality, and rather than perceiving this as a defect, recognising its intrinsic transitionary force: a process. Here, process should not be understood as a procession of forms – beginning, middle and end – but rather as 'forms of process': 'we' become subjects as situated writers/ readers/tellers/listeners within the premises of a story and when we move away, we 'become other' (Tamboukou, 2016). It is in the interplay of positive and negative prehensions that narratives are felt, and it is possible to feel the force of a story without necessarily following a sequence of events or statements. As Somers (1994) argues, human lives are themselves 'storied', stressing the ontological necessity of narrative for understanding the Self. Narrative is not only the shape a life takes; it is also the condition of our understanding of identity.

By looking at the representation of memories in individual and collective stories, narratives, traditions and the media, it shows how the identity of a group is formed. Collective memory shapes identity, which in turn shapes and is shaped by politics. It can thus do serious harm when the history of a minority is not included in the official history of a country, because collective memory is the defining factor for the identity of a

group, such as with the Windrush history, which was until recently not included in the UK school curriculum, resulting in an incomplete view of Britain's history of cultural diversity (see also Chapter 5). Furthermore, when it comes to trauma and intergenerational trauma in light of migration, as can be seen from the previous section on the British Home Child migration scheme above, as well the Kindertransport and Windrush experiences discussed in earlier chapters, stories, narratives and memories are fragmented and part of a complex history (Campbell, 2022; Homer, 2020).

For those who see themselves reflected in public narrative, the emotional resonance is that they may feel some justice that the injuries of their childhood are being recognised, and their story being rendered in public. Yet, some of this may in and of itself hold some complexities. For example, while around 10,000 children arrived in the UK as part of the Kindertransport child rescue scheme, they were also at times met with hostility due to their German roots, as can be seen from the text of a 1938 article printed in the *Daily Mail*, reproduced in Box 7.1.

Box 7.1 'German Jews pouring into this country'

"The way stateless Jews from Germany are pouring in from every port of this country is becoming an outrage. I intend to enforce the law to its fullest."

In these words, Mr. Herbert Metcalfe, the Old-street magistrate yesterday referred to the number of aliens entering this country through the "back door" — a problem to which *The Daily Mail* has repeatedly pointed.

Soon caught

The number of aliens entering this country can be seen by the number of prosecutions in recent months. It is very difficult for the alien to escape the increasing vigilance of the police and port authorities.

Even if aliens manage to break through the defences it is not long before they are caught and deported.

Source: *Daily Mail*, 1938, https://commons.m.wikimedia.org/wiki/File:German_Jews_Pouring_Into_This_Country.jpg

The role of a history of traumatic events, as the triggering factor that either generates discrimination experiences that undermine wellbeing (mediated relation) or sensitises (moderates) individuals' perceptions and appraisals of discrimination, might depend on the nature of the characteristics associated with a given marginalised group (Matheson et al., 2019). A related question here is whether intergenerational or transgenerational traumatic events and stress-related psychological outcomes (depressive or post-traumatic stress symptoms) emanate from a proliferation of discrimination stressors engendered by traumatic events (mediation model), or whether a history of traumatic events sensitises group members so that later stressor encounters exacerbate negative psychological outcomes (moderation model) (Matheson et al., 2019). Crucial here is listening to stories of the people affected, their eclectic experiences and coping mechanisms within this; and acknowledging the role of community and culture in making sense of lived experiences. including with a focus on health resources and experiences.

Contributing factors are social status, how they have been differentially targeted by historical trauma, variation in the visibility of the features that define their group belonging and hence their ability to pass within the dominant group (with concurrent implications for the proliferation of stressors rooted in discrimination), and qualitatively different intergroup relationships based on social norms and roles. These features might contribute to differences in how group members react to traumatic events and discrimination. Taking this back to the socio-ecological framework discussed earlier on in this chapter, means putting personcommunity relationships, including intrapersonal, interpersonal, organisational, environmental, cultural, societal and public policy factors, at the centre (Bronfenbrenner and Evans, 2000; Bronfenbrenner and Morris, 1998; Harvey, 1996; Kilanowski, 2017). I will discuss this further in the next section by shedding a light on the potentially pathological impact of society, by providing examples of the Moluccan migration scheme to the Netherlands following WWII.

A pathological society? The story of the Moluccans in the Netherlands

Hier leefden zij met Ambon in hun hart, fier in hun aard en onafhankelijkheid, als vreemdelingen onder autochtonen, twee werelden in afgezonderheid. [Here they lived with Ambon in their hearts, proud in their nature and independence, as strangers among natives, two worlds apart.]

(Poem by Koos Geerds in Souhoka, 2019, p. 145)

In this section I will provide examples of narratives, counter-voices, memories of segregation, survival and resilience of the Moluccan generation in the Netherlands. Moluccans, a subgroup of Indonesians from the Maluku islands (most of whom have an Ambonese background), found themselves in the Netherlands, against their wishes, when Indonesia, a former Dutch colony, became an independent nation in 1949 (Hulsbosch, 2014; Souhoka, 2019). The Moluccans had supported the Dutch army during WWII and the Dutch promised that they could form an independent nation. This did not happen, and they found themselves in a hostile environment when Indonesia became independent, and as such were temporarily moved to the Netherlands. The group, consisting of about 12,500 persons, nearly all Ambonese, awaited their repatriation to Indonesia in the near future; the latter never happened (Amersfoort, 2003). Upon arrival, the Moluccans were segregated from Dutch society and housed in former concentration camps, such as Westerbork transit and concentration camp, which had housed Jewish refugees, before and during WWII. The Moluccan scheme represented a temporary scheme, yet the hope and expectations of Moluccans of returning to their home country were squashed and they lived a marginalised existence for many years in the Netherlands (Muzaini, 2022; Voort, 2014). Their reception and experiences were marked by marginalisation and discrimination, the (emotional) legacy of which can still be seen today.

When it comes to trauma and intergenerational trauma in relation to migration, as can be seen from the Moluccan migration scheme, stories, narratives and memories are fragmented and part of a much larger, and far more complex history than most Dutch people will remember (Manuhutu, 1987; Steijlen, 2012). Yet, it is a history that most Moluccans will be able to retell instantly (Akihary, 1991; Voort, 2014). It is almost impossible to give a neutral or nuanced recollection of the history of the Moluccan minority in the Netherlands, because even the starting point of the history is politically sensitive. For example, while Moluccan protests and (violent) actions in the 1970s need to be seen in the context of a postcolonial migration regime of racism and marginalisation, they have also been viewed as the result of radicalisation among a group of youths in the Netherlands (Chauvel, 1990; Muzaini, 2022). When the Moluccans arrived in the Netherlands after WWII, the Dutch government

did not want them to feel too much at home. As with the Jewish refugees in the 1930s, it was deemed undesirable for them to be integrated in Dutch society (Steijlen, 2013; Voort, 2014). Writing about his experience arriving in the Netherlands as a 12-year-old, living in former concentration camp 'Kamp Conrad' in the Northeast of the Netherlands, Mathijs Souhoka (2019, p. 109), indicates 'we were called blacks' and that they were viewed as 'weird', 'aggressive' and 'untrustworthy'.

The collective memory of the Moluccans in the Netherlands has become imbedded in the context of repression, postcolonialism and postmigration repression and discrimination, more so than in the context of WWII or Dutch history (Oostindie, 2011). The development of this collective memory is very complex, because it is partly based on actual facts and partly based on the perception of historical events, such as the expectation that the Moluccans would receive a warm and grateful welcome in the Netherlands, as they had supported the Dutch army in WWII. and the subsequent disappointment when this did not happen. In fact, as with the newspaper item from the *Daily Mail* in the previous section, about the influx of German Jews in 1938 (see Box 7.1), Dutch newspapers also problematised the arrival of the Moluccans. For example, the Dutch newspaper the Eindhovensch Dagblad refers to 'the Ambonese [Het Ambonnezen] problem' in a news item published in February 1956. In addition to this, the Dutch government categorically ignored the call for recognition from the Moluccan side (Muzaini, 2022). Furthermore, there was a kind of amnesia in the Netherlands, which prevented a postcolonial debate, until recently.

In 1986 the Dutch Government offered the Moluccan community a museum, entitled Museum Maluku, as a living monument of the history, art and culture of the Moluccan community in the Netherlands. Yet, despite this, it was not until 2023 that Dutch King Willem Alexander formally apologised for the Netherlands' 250-year-long colonial history and the way the country profited from it. The semi-permanent exhibition (2023–27) entitled 'Kaleidoscopic Netherlands' hosted by Museum Maluku presents the visitor with stories, photographs, artefacts and memories of Moluccans and their descendants in relation to their arrival and reception in the Netherlands, highlighting that: 'The conversation about (de)colonialisation is difficult. Insidious racism keeps rearing its head. It is because of this that it is important to keep the conversation going' (Museum Sophiahof, n.d.). This highlights a need to include oppression and colonialism in intergenerational consequences of trauma, rather than just focussing on psychological, familial and biological factors (Babalola et al., 2017). As Wilson (1996, p. 91) says: 'The society is sick', referring to the impact of systemic oppression. Although well-integrated in Dutch society, Moluccans continue to have lower socioeconomic status compared to the Dutch population, as well as higher rates of obesity, hypertension, ischemic heart disease and increased all-cause mortality compared to the Dutch (Bodewes et al., 2020; Van der Wal et al., 2015). Despite their long residence in the host country, equal utilisation of healthcare services has not been achieved for Moluccans in the Netherlands. Demand-based factors (e.g., family networks, health beliefs and use of traditional medicine), as well as systemic racism and marginalisation may contribute to the persistence of such differences.

Ample cross-cultural evidence has highlighted the existence of different idioms of distress as well as explanatory models around health and illness across the world. For instance, many individuals, especially those from non-Western cultures, make sense of illness within a spiritual framework (Babalola et al., 2017). These distinct explanatory models do not only indicate different understandings of health, pathology and 'normality' but also point at different ideas about what constitutes personhood. More cautious voices coming from medical anthropology fear that interventions blind to local contexts are not only wasteful, but also potentially harmful (Wooyoung Kim, 2020). For example, interventions designed to alleviate distress at the level of the individual when the damage is in fact centred at the societal level will struggle to prove relevant or useful. The globalisation of the Western explanatory model of psychopathology may not only threaten the perceived legitimacy of alternative understandings of distress and/or action to alleviate this distress, but also add to a perceived tendency to increasingly pathologise life experience (Babalola et al., 2017; Kohrt et al., 2024). The concern here is that social factors contributing to mental health difficulties in different parts of the globe remain unaddressed in the context of an overmedicalisation of issues such as poverty.

The latter also highlights the need to move away from pathologising trauma survivors and their descendants and instead adopt an alternative perspective exploring the dominant oppressive society's pathology. For example, in the case of the Moluccan migrants and their offspring, it could be argued that their experiences are merely symptomatic of the oppressive and dominating White society's sociopathy and psychopathy (Hicks, 2015; Sule et al., 2017).

Another example is the Papua community in the Netherlands. After Indonesia became independent from the Netherlands in 1949, it took until 1962 for Dutch New Guinea to become independent. Currently, the Western half of the island forms part of Indonesia and the eastern half

is the major land mass of the independent nation Papua New Guinea. Following independence from the Netherlands around 1,500 people from the Papua community (referred to as 'Papoeas') ended up in the Netherlands as political refugees (Anais et al., 2012; Drooglever, 2005). As with the Moluccan community, their experiences are marked by racism and marginalisation. Talking about being a 'Papoea woman', a member from the Papua community who arrived in the Netherlands in the 1970s says (Anais et al., 2012, p. 38): 'I used to be ashamed, but now I am proud of my heritage.' Others tell stories of confusion about their heritage, with the majority of Dutch people not having any knowledge of the Papua community or the role of the Dutch colonial empire here, confusing them with other former Dutch colonies, such as Suriname (Anais et al., 2012, p. 54). Thus, there is a need to include past and present narratives around systemic oppression, colonialism and racism in intergenerational/transgenerational trauma, to maximise engagement with people.

Making different traumas visible

It is clear from this chapter that new approaches are needed to make different traumas visible. With 'new' approaches, I mean interdisciplinary approaches grounded in the arts and humanities, in addition to psychology and health disciplines that have so far dominated research on trauma and resilience. Take for example, Kelly et al.'s (2021) counter-exhibition 'Into the Light', which exposed, disrupted and showed the impact of deeply embedded histories and legacies of twentieth-century race betterment pedagogies in Canada. By centralising voices, memories and objects of a range of marginalised, disadvantaged and displaced communities, Kelly et al. (2021) showed the transformative potential of centralising people's stories in accessible and creative ways to disrupt, counter and draw critical attention to the brutal impacts of oppressive knowledge. By doing so, they contest and defy singular narratives circulating in institutional knowledge systems of what it means to be human. The latter also involves acknowledging the role that intergenerational trauma can play in collective resilience.

Furthermore, there is a need for caution when equating intergenerational and transgenerational trauma with syndromes because diagnosing someone with a syndrome can in and of itself be a sign of oppression, thereby diminishing society's role in their functioning (Hicks, 2015). Drawing on a social-ecological perspective, I argue that an integrative

perspective is needed to understand intergenerational consequences of trauma. This perspective needs to include sociological and societal characteristics, as well as psychological, family system and biological factors. The latter also involves acknowledging that intergenerational consequences do not necessarily lead to psychological symptoms (Dashorst et al., 2019; Van IJzendoorn et al., 2003).

Thus, there is need to centralise voices and memories from core communities in order to provide greater understanding of intergenerational/transgenerational trauma *and* resilience. This involves, for example, how people compose their life stories and memories in light of pre- and post-migration trauma (Murphy, 2010). For a long time, work on trauma and migration has suggested that trauma ends when refugees arrive at a host location. Yet, more recent research now acknowledges that there is a continuum of trauma, which continues after migration (Dajani et al., 2023; Matheson et al., 2019; Sangalang and Vang, 2018). However, just what this means, and what the traumas of this continuum look like, have been less studied. Narrative identity and power of story are key here (Haste, 2014; Phoenix, 2020). Specifically, the notion of talking the past back into existence reflects the experience that narrative identity is developed and maintained through dialogue, in the telling of our stories (Matheson et al., 2019).

Socio-ecological perspectives are helpful here in providing insight into the real and lasting impacts of oppression, marginalisation, racism and related post-migrant/refugee experiences, highlighting a need to look at the social and structural, as well as personal, contexts of migrants in new host contexts (Bronfenbrenner and Evans, 2000; Bronfenbrenner and Morris, 1998; Harvey, 1996; Kilanowski, 2017). These features might contribute to differences in how group members react to traumatic events and discrimination. Taking this back to the socio-ecological framework discussed earlier on in this chapter, means putting person-community relationships, including intrapersonal, interpersonal, organisational, environmental, cultural, societal and public policy factors at the centre (Bronfenbrenner and Evans, 2000; Bronfenbrenner and Morris, 1998; Harvey, 1996; Kilanowski, 2017).

The latter also highlights the need to move away from pathologising trauma survivors and their descendants and instead adopt an alternative perspective exploring the dominant oppressive society's pathology and the fact that 'The society is sick', as Wilson (1996, p. 91) argues. The voices, memories and experiences presented in this chapter have the ability to collectively open up discussions around current perspectives that are limited by a sense of trauma's finiteness and tracing that

across generations. Instead, cases show that trauma across generations must be explored through a multitude of temporal perspectives, so that the many structures at work on individuals across contexts can come into perspective. The latter also involves acknowledging some of the limits to research on inter/transgenerational trauma and refugee communities, such as the natural limits of memory and the impracticability of coherent research across more than two or three generations and the fact that many contexts of trauma for refugee communities happen across several (or more) generations. Here, rather than asking 'Why are some people more resilient than others after experiencing a traumatic event?', the question should be centred around what resilience in the context of trauma entails, as well as what contextual factors play a role here. For example, while survivor silence can be construed as resilience, this may in fact signify psychological or political repression and the unspeakability of a traumatic past and present (see also Homer, 2020).

Past research indicates that resilience is strengthened by having adequate social support, as well as by having a tendency towards positive self-efficacy (i.e., believing that one has the capability to succeed; see Bandura, 1978), and by certain cognitive factors, such as having a positive appraisal style (i.e., a positive evaluation and interpretation of a situation) (see also Luthar, 2006; Rutter, 2012). Yet, the fact that societal factors, including racism, discrimination and systemic oppression, can play a significant role in hindering resilience is rarely acknowledged here. Thus, resilience in light of intergenerational and transgenerational trauma needs to be located beyond the child and young person's micro and macro systems and include a focus on the exosystem and chronosystem, that is, wider cultural, global and historical structures (Bronfenbrenner, 1977; Bronfenbrenner and Evans, 2000). For example, in the context of the experiences of the BHC and Moluccans discussed in this chapter, it is clear that given the combination of the historical trauma, systemic bias and ongoing marginalisation, this is likely to play a role in the proliferation of discrimination experiences, threat appraisals and severity of stress-related psychological symptoms. The voices, memories and narratives presented in this chapter demonstrate the negative associations between (perceived) discrimination and psychological symptoms, and further demonstrate the consistency between these relations across different marginalised populations. As organisations move toward policies of cultural safety, as well as programmes and practices that are trauma-informed, there is a pressing need to understand the nature of the links between the traumatic experiences and discrimination among members of socially marginalised groups, including the specificities associated with each of the groups.

Implications for theory and practice

Better measurement never hurts, and for practitioners and researchers with an interest in intergenerational and transgenerational trauma and resilience, this means engaging in interdisciplinary and reflexive practice, as well as deeper ethnographic theory and practice. Interdisciplinary research and practice, grounded in the arts, humanities and (social) sciences, provides unique opportunities for inclusive engagement with core communities, moving beyond narratives of health and deficiency. embraced by psychology and health disciplines, to centralising memories, voices, histories and multisensory experiences. Deeper ethnographic research on trauma and mental health, centralising voices, memories and experiences of core communities (e.g., see Kidron, 2009, discussed earlier on), can lead to the development of surveys that are more sensitive to the cultural realities of birth cohort study participants. For example. Kidron (2009) found that ethnographic accounts of Holocaust descendants depict the survivor's home as embedding the non-pathological presence of the Holocaust past within (silent) embodied practices and person-object and person-person dialogue representing personal and familial lived memories.

Stronger reflexive practice can also illuminate blind spots that previously obscured social, societal, political, cultural or biological factors that may be involved in intergenerational stress transmission. A thorough and critical understanding of the social, political, economic and historical dynamics of intergenerational trauma can allow scientists to more substantially contribute to public discourse on social health inequities, remembrance and memorialisation, and transitional justice.

Furthermore, as well as asking questions about what intergenerational and transgenerational trauma entail and how we can better measure this, we also need to ask: what is the meaning of intergenerational/transgenerational resilience here and can the 'positive impact' of trauma be transferred across generations? The latter usually encounters a negative response, but centralising the voices of core communities, children and young people, as well as refugee scientists, may lead to new insight. As Dajani (2022) highlights, things cannot get worse since they are the victims of the trauma and are searching for a positive way out and insist on proceeding (Dajani, 2022). Take, for example, Dutch kickboxing champion Remy Bonjasky, referred to earlier on in this chapter, whose ancestors were slaves working on a Dutch plantation in Suriname and who highlights that the plantation revolt by enslaved people in the eighteenth century: 'has been passed down through generations and is one of

the reasons why I was able to become kickboxing world champion three times'⁴ (see also Sint Nicolaas and Smeulders, 2021).

Here, the reference to resilience in the face of a history of systemic oppression, provides a sense of empowerment, agency and strength by responding to trauma through post-traumatic growth, benefit-finding and thriving, something that is transmitted from one generation to the next (Ramirez and Hammack, 2014; Selvanathan et al., 2023). However, as with all science, when one proposes novel approaches it does not find traction but slowly gains attention.

Notes

- Rijksmuseum Amsterdam Archives 'Look at me now': www.rijksmuseum.nl/en/whats-on/ exhibitions/past/slavery.
- 2. LAC, Waifs and Strays Society, Impressions of Toronto, 1929.
- 3. Wiener Library, Collection 1368.
- 4. Rijksmuseum Amsterdam Archives 'Look at me now': www.rijksmuseum.nl/en/whats-on/exhibitions/past/slavery.

Eclectic resilience: tell me your story!

Be more resilient?

I am starting this chapter with the same quote as Chapter 1 – yet, this time with a question mark, rather than an exclamation mark. Below I will explain why. The starting point for this book was that many of the issues that concern contemporary research and practice in relation to childhood resilience have a historical trajectory that informs the present and are marked by three structural gaps: absence (under-representation, and lack of engagement with children's voices/experiences), difference (stigmatic labelling, e.g., in relation to poverty, ethnicity, character and self-control) and threat (in relation to bad behaviour and undesirable traits) (see also Sims-Schouten, 2021b; Sims-Schouten et al., 2019; Sims-Schouten and Gilbert, 2022; Sims-Schouten and Thapa, 2023). For example, current and past concepts in relation to childhood wellbeing and resilience share a view of locating problems at the level of the family (e.g., the construction of problem families) and the child/young person (the fact that some children are lacking, e.g., in positive attitudes and successful traits). Here, rather than centralising their voices, needs and experiences, displaced, marginalised and disadvantaged children and young people (and their families, if relevant) are deemed as badly behaved, resistant, lacking in resilience and beyond help.

Viewing children as agents and experiencers and treating childhood as personal, fluid and relational, recognising the inherent interdependence of children's worlds, this book engaged with two core questions:

- 1. What can 100 years of children's voices, memories and experiences tell us about resilience?
- 2. What role can children's (counter-)voices play in revisiting resilience and coproducing new thinking around resilience?

Centralising the above questions, this book has taken a radical departure from current research which, largely located in public health and psychology disciplines, focusses on the end result, and instead provides insight into how current and former children view(ed) the related processes and experiences, including how they explain and explore their own behaviour, choices and strategies within this. Foregrounding over 100 years of marginalised, displaced and disadvantaged children and young people's counter-voices of resilience, I thus facilitate autonomy, power and influence, stimulating memories of the previously forgotten beginning with one question: *Tell me your story!*

The stories, voices and memories presented in this book highlight the problematic nature of the phrase 'Be More Resilient'. Firstly, it is a judgement statement suggesting that resilience is defined by predefined outcomes (e.g., largely with a focus on strength of character, positive emotions and success). Second, it is clear that the judgement statement Be More Resilient does not feature the voices and experiences of children from marginalised and displaced communities – it is about them, rather than with them. Centralising past and contemporary children's voices as narrative containers of emotions, sensibilities, conflict and resolution, this book instead reflects the complexity and plurality of children's resilience. Referring to this as eclectic resilience, I address significant gaps in current resilience research, which, largely driven by psychology and public health, frame resilience through individualist, reductionist models of health and abnormality.

Interdisciplinary opportunities in resilience research and practice

Adopting an interdisciplinary framework, drawing on humanities and social sciences, the chapters in this book have provided a new lens through which to view, revisit and redefine childhood resilience, examining generative factors and mechanisms operating across generations and timescales. Drawing on critical realist ontology, I centralised the lived experiences of children and young people from a range of communities and groups at multiple levels, including the real (exploring causal mechanisms of events), the empirical (experienced events) and the actual (events and processes that occur) (Bhaskar, 1989). For example, I identified causal and generative factors in the individual and community impacting childhood resilience, for example, in relation to (intergenerational) trauma, wellbeing, racism and discrimination (the real).

In addition to this, I addressed culturally embedded understandings of resilience, and how children from a range of communities make sense of this (the empirical, also referred to as the experiential). Furthermore, I shed light on practices, support mechanisms, perceptions, processes, stigma, bias and racist viewpoints currently in place that impact the resiliency of children from a range of marginalised and displaced communities in the past and present (the actual).

Each chapter centralised marginalised and displaced children from the past and present as agents, experiencers and narrators of their own lives, attending to their endeavours to overcome adversity, discrimination and bias, by whatever means available to them. Placing over 100 years of displaced and marginalised children's voices, memories and stories at the centre, I thus challenged current childhood resilience research and practice, which frames resilience through individualised models of health and abnormality. These models lack definitional clarity and emphasise individual responsibility at the expense of systemic oppression, ignoring personal marginalised voices and experiences and the contribution of appropriate needs-based assistance. Instead, offering an interdisciplinary perspective located at the intersection of the arts, humanities and social sciences, I centralised marginalised, displaced and disadvantaged children's stories, memories and voices in accessible and creative ways, thereby disrupting, countering and drawing critical attention to coping strategies in light of adversity and oppression.

Here I departed from individual disciplinary patterns of working in this field by adopting an interdisciplinary framework grounded in culture, history, sociology, psychology and health. Examining understandings of generative factors and mechanisms for childhood resilience that operate over a range of disciplines and historic timescales, I thus provided new ways of looking at childhood resilience, by: (1) challenging current perceptions and practices through positioning children's voices as containers of emotions, sensibilities, conflict and resolution which influence conceptualisations of resilience and related outcomes over time; and (2) coproducing examples of eclectic resilience, from the past and present, through stories, memories, voices, objects, doodles and interviews, centralising personal marginalised experiences to generate new thinking and novel insights.

The aim was to capture original, and previously unlooked for and unanticipated, research insights, thereby providing greater understandings of concepts of coping in light of adversity, disadvantage, displacement and marginalisation and the legacies of this. Presenting counter-voices of resilience through stories, objects and memories of children unevenly targeted by oppression, I also contest and defy singular narratives circulating in institutional knowledge systems of what it means to be a resilient child. See for example, the quote from a former Kindertransport child in Chapter 3, who indicated 'they found me difficult to handle' when recounting her memory of her resilience and coping on arriving in England on her own as a 10-year-old in 1939: 'They said "do you play the piano" and I said "O yes!", thinking they might like me more – so they asked me to play and I could not play, I was tone deaf and felt foolish for saying I could play and they were not impressed and told me I lied.'

Critical realism is helpful here, as it highlights how the world is differentiated and stratified and that in order to make sense of social life, we must engage with and understand the interplay between human agency (meaning-making, motivations, intentionality) and social structures (enduring patterns, social rules, norms and laws). In practice, this means that while critical realism accepts that there is an (objective) world that exists independently of people's perceptions, language and imagination, it also recognises that part of that world consists of subjective interpretations, that influence the way in which the world is perceived (Sims-Schouten et al., 2007). Here, critical realism's central premise to promote awareness as a strategy for tackling inequality and uneven practices/perceptions, is key to making sense of the complex and nonlinear interplay between human agency (meaning-making, motivations, perceptions) and social structures (enduring patterns, social rules/norms, laws and mechanisms) (Houston, 2010).

Linking this to Edith Stein's (2000) affective and empathic phenomenology, which centralises sensations and sensibilities in meaning-making, this book has provided contextual and temporal insights into resilience, centralising 100 years of counter-voices, memories and experiences of children from marginalised, disadvantaged and displaced communities. Stein (2000) highlights how meaningful experiences can both transpire between people, and within persons. She describes the first as a 'mental phenomenon', referring to the 'sameness of meaning' requiring an interpersonal matrix; and the second as a 'sentient phenomenon', referring to sensations, sensibilities and emotions that require an intrapersonal matrix (Stein, 2000, XIII). Central within this are the concepts of empathy and affect, namely 'to feel within' what the other 'I' is experiencing from a first-person perspective.

Reframing childhood resilience thus means taking account of multifaceted and interactive effects of personal, material, institutional and political factors that impact on behaviour, wellbeing and resilience,

as well as acknowledging that the way in which behaviour is received is by default flawed, if this is largely informed by an oppressive White middle-class viewpoint. From this vantage point, it could be argued that resilience can also mean resistance, that is, resisting bad treatment and racism, as well as reflecting agency, identity and ownership of one's own life and choices within this. Here, in addition to asking core questions posed in resilience research – 'What are the challenges?', 'How is the person doing?', 'What processes support success?' – I focussed on how the issues were experienced by individuals, taking account of their underlying social realities and identities and how they define coping in light of adversity within this. Referring to this as eclectic resilience, I thus provided insight into the dynamic complexity of childhood resilience, including defiance, resistance and compliance as resilient acts, placing marginalised and displaced children's (counter-)voices, stories and memories at the centre. I will discuss this in more detail below.

Coproducing new meanings of childhood resilience

It is clear that (re)defining childhood resilience should occur in *collaboration with* children and young people from a range of communities, *rather than being about them*. Despite this, children and young people's voices rarely feature in decisions about what resilience entails and what potential outcomes are. Instead, the latter are often the result of resilience scales/questionnaires/tools and (self-)reports that children and adults around the child are asked to complete, informing (early) intervention practice with vulnerable children. Coproduction does not feature much in this. Yet, children's rights to express themselves and their opinions is a fundamental part of the United Nations Convention on the Rights of the Child research adopted in 1989 (see also Graham et al., 2013). However, despite calls for greater involvement of young people in services that affect them, in reality coproduction is often tokenistic or a tick box exercise (Critchley et al., 2019; Sims-Schouten et al., 2022). So, what is coproduction?

Coproduction, first coined by Ostrom in the 1970s and defined as 'the role of individual choice on decisions influencing the production of public goods and services', is still a relatively new concept in research and practice (Ostrom, 1996, p. 1073). In essence, if executed well, coproduction allows for the redressing of power imbalances, providing a foundation for relational ethics and confronting complexities head on, centralising key principles, such as inclusivity/diversity, respecting knowledge

and reciprocity (Filipe et al., 2017; Tan and Fulford, 2020). Research and practice involving coproduction are generally centred around three broad premises (see Sims-Schouten et al., 2022). First, the right to be involved in decisions affecting oneself; second, the need to improve the value of a project; and third, the requirement to enhance knowledge on a topic (Sims-Schouten et al., 2018; Turakhia and Combs, 2017).

Thus, coproduction can promote justice, centralising the voices, memories and lived experience of children and young people as valued participants, leading to new knowledge, and thereby fundamentally democratising the relationships between different parties: researchers, children and young people, as well as practitioners (Graham et al., 2013; Watson et al., 2018). The latter also involves acknowledging the potential messiness of the process and results – yet engaging with these challenges has enormous potential for making sense of and disrupting current taken for granted interpretations and definitions of childhood resilience. Central to this is the notion that coproduction facilitates equal collaboration between 'experts by experience' and 'experts by qualification', culminating in knowledge and freedom of expression, and revealing positions and positionality (Rikala, 2020; Simpson and Murphy, 2020). Coproduction also requires reflexive engagement on the part of the researchers, considering several important issues, including the children and young people's readiness and capacity to conduct the research, the impact of lived experiences of wellbeing and resilience (of all parties involved in the research), and disparities in power and status between children and adults (Sims-Schouten et al., 2022).

Different disciplinary areas have adopted slightly different approaches towards coproduction. For example, in the social sciences coproduction is generally viewed as an immersive, user-led process throughout, treating the involvement of research participants in research/practice that affects them as necessary and relevant; whilst the medical sciences tend to focus on goal-setting and outcomes, and are less interested in the immersive approach itself (Filipe et al., 2017). Within the arts and humanities coproduction is described as a process that enables or encourages creativity in research and evaluation, generating creative solutions and dynamic representations that stir action (for example, MacGregor et al., 2022; Sherriff et al., 2019).

Below I provide examples of coproduction approaches used in this book. In Chapter 2 ('Waifs, strays and care-experienced young people'), I showed the value of coproducing knowledge through consulting and engaging with (young) people in order to better reflect the complexity/plurality of children's resilience needs and develop systems of formal/

informal support. The latter also involves taking the voices and actions of children and young people seriously. For example, while direct coproduction with children taken on by the Waifs and Strays Society in the late 1800s, who have since died, is not possible, one way of coproducing new knowledge here is by listening to their voices and taking their actions seriously. Take, for example, the following note of compliance written by Hannah in 1904 (see Chapter 2):

I am going to church, going for walks and working in the mistresses kitchen.

Or the action and behaviour of defiance and resistance of a girl taken on by the Waifs and Strays Society in 1925, with a letter (from the Vicarage, 1929) indicating that:

She told me last night if she went to a Home she would soon show them what she could do. Ever since she knew I would not keep her she has behaved like a lunatic refusing to work.

At the same time, discussing coping in light of adversity with current care leavers also provides inroads into new understandings – such as the quote below:

They think we're manipulative. No, we're not we've just had to grow up way too quickly.

In Chapter 3, on eclectic resilience and child migration, I provided examples of how contemporary children, as coproducers, agents and experiencers of childhood, make sense of the historical child migrants' voices, memories and stories. Here, knowledge around childhood resilience in historical child migration schemes, such as the Kindertransport, was coproduced with current people representing those voices, such as Gretchen, a former Kindertransport child, who I interviewed in 2023, aged 94. At the same time, I invited contemporary children, as experiencers of childhood, to coproduce knowledge around the stories, objects, voices and memories of former Windrush and Kindertransport child migrants, through doodling, drawing, talking and touching of objects. The latter methods of expression were also the result of coproduction – as it was decided by the children and young people themselves, that these were their preferred approaches.

Chapter 4, on bullying and resilience within a neoliberal framework, argued that successful change is more likely to arise from collaborative effort – the latter means coproducing knowledge with children and young people, not just around bullying interventions, but also around what resilience means in light of this. Again, as with Chapter 2, taking seriously the voices and actions of children and young people from the past and present is crucial here, such as the 11-year-old boy, who was discussed by the Waifs and Strays in 1895, as behaving badly due to playing truant, but who was in fact resisting the bullying that he was on the receiving end of: 'other children called after them, and the boy Charles in particular, resented this, and played truant several times'. Like the chapters above, Chapter 5, on resilience in light of discrimination, stigmas and othering, urges us to revisit key concepts and definitions of resilience, namely positive emotions, successful traits and coping mechanisms, coproducing knowledge with core communities. Here, I provided examples of adult and child voices, reflecting on how they and their resilience within this are perceived: 'They say "oh you're shouting" or they said that when you were talking to them, you were shouting, you're raising your voice. We're Caribbeans they don't realise that Caribbean people have a very high pitch tone!' Furthermore, I showed how collective trauma in light of racism and discrimination can also contribute to resilience: 'The might with which Wally and other enslaved people on the Palmeneribo Plantation revolted is still in my blood. It has been passed down through generations and is one of the reasons why I was able to become kickboxing world champion three times.'

Like Chapter 2, Chapter 6 on resisting internalised failure and deficiency, also engaged in child-led doodles, drawings and discussions, making sense of childhood resilience in light of (specific) learning disabilities/difficulties. Moreover, through my historical data I highlighted that actions of children from the past need to be acknowledged and revisited. For example, in relation to a boy taken on by the Scottish National Institution for the Education of Imbecile Children, where it was suggested (in 1921) that:

I am sorry to have to report that there is a deterioration in the condition of XX who has for so long been an inmate of this Institution. He has of late become very irritable and, I have reason to fear, dangerous to the other inmates. I have no definite evidence as yet of insanity, but he has been heard muttering to himself a great deal and I am told that he has threatened to commit suicide. If these symptoms do not rapidly disappear it will be necessary to place him

under better control than is possible here and we should have to consider his removal to an asylum. In case of such a need arising I shall be glad to know what you would wish me to do.

Here, while 'very irritable' is viewed as problematic behaviour, it could also be a possible cry for help. Within this 'threatening to commit suicide' was viewed as an immoral act, as was common in those days. Yet, it also highlights that children with learning difficulties were expected to comply, and anything less than that, such as resisting care arrangements, by 'being irritable' was viewed as challenging behaviour, exacerbating the already negative expectation placed upon them.

Finally, Chapter 7 on intergenerational/transgenerational trauma, lived experiences and resilience, centralised voices from the past and present to disrupt and counter current interpretations of resilience: 'I think it is interesting how many unresolved problems still very much plague so many people after all these years and if anyone thinks that everything has been resolved they are very much mistaken' (Kindertransport; Letter sent to Wiener Library in 1988).

All the above stresses and highlights the need to revisit childhood resilience, centralising counter-voices of children from core communities – see below.

Counter-voices of resilience

One of the ongoing challenges in childhood resilience science, which the current book has tackled, is developing definitions that reflect the dynamic complexity of the concept, including defiance, resistance and compliance as resilient acts, placing marginalised and displaced children's counter-voices, stories and memories at the centre. Summarising core messages from each of the different chapters, below I will provide examples of counter-voices of childhood resilience, placing displaced, marginalised and disadvantaged children's voices, stories, memories and experiences at the centre.

Care-experienced young people: compliance, defiance and morality

It was like when I went in there, I was no longer a person, I was just a black female crack cocaine addict that was manipulative, you know. And that – it was like I had no other identity any longer apart from bad mum, black female, crack cocaine addict.

Compliance, defiance and morality are important terms in the context of resilience. All have different connotations. For example, in a social work context, compliance (e.g., complying with care decision, placements, etc.) can be confused with resilience, while non-compliance and defiance (e.g., resisting care decisions, placements and related practices by acting out) tend to be treated as problematic in this context. Moreover, the child or young person is held accountable here, and the onus is put upon the child for not complying, acting out and lacking in resilience, highlighting a need for awareness, and reflective and reflexive practice among practitioners/ professionals.

There is a danger when it comes to misconstruing compliance as resilience – being a well-behaved and complying child or young person, who follows the rules, lives and behaves well with their foster parents or in their care setting, does not cause problems and puts up with the choices made for them is not the same as resilience; rather, it is survival. The difference here lies in choice and agency. Being autonomously motivated involves feeling a sense of choice and volition, as the person fully endorses one's own actions or decisions. In contrast, compliance, or controlled motivation, means that the person engages in a certain action because one feels there is no other choice (Leigh et al., 2020; Martela et al., 2021). Rather than being about objective choice, the distinction is about how the person experiences an action: Does it feel like something I want to do, denoting voluntary compliance, or something I have to do, denoting pressured compliance?

Defiance, which generally finds itself on the other side of the spectrum to compliance, can be described as challenging the status quo, resisting the expectation to comply, and as such is an exercise of agency in adverse social contexts (Bottrell, 2009). It could be argued that recognising the value of defiance, as an act of resilience, contributes to social justice by redefining marginalised and socially excluded individuals as people endeavouring to overcome adversity and bias. So, defiance needs to be viewed as the mediating process of resilience targeted at challenging adversity, rather than accommodating to it. While defiance, also described as non-effective compliance, is generally viewed as a non-resilient act, something that may take the form of aggression, manipulation, blaming and/or avoidance, I argue that defiance can be viewed as an act of resilience. For example, when it comes to refusal to accept bad treatment and poor care arrangements/decisions (in this case in a social work context), thus reflecting agency, identity and ownership of one's own life and choices within this.

As well as compliance and defiance, morality is also a term that can potentially lead to problematic interpretations regarding resilience of an already vulnerable group, such as care-experienced young people. Definitions of resilience centralise positive emotions and strength of character, and notions of morality and immorality can be seen to be used to show how children in care and care leavers are lacking in this area. Perceptions in relation to the moral or immoral child/young person, who lacks the ability to distinguish between choosing good and bad, can easily morph into judgements about their lack of resilience, thereby problematically directing attention away from underlying trauma and structural explanations, including political and economic causes.

Here the positioning of children and young people as immoral, drives the neoliberal assumption that children should take personal responsibility for their social condition, as much as adults. Moreover, this is exacerbated by constructing resilience in terms of strength of character, where immoral tendencies are equated with the opposite, and therefore as not being resilience. This also feeds into perceptions about certain groups, in this case children in care, as being irredeemable, because they are too morally polluted to be capable of being purified, symbolically constructing them as others. Moreover, the perceived civic and moral threat posed by these children was, and is, also grounded in the broader moral frame of them being a potential threat to others, who are in danger of becoming morally tainted, through exposure to them or particular kinds of social environments.

Yet, resilient young people take advantage of whatever opportunities and resources are available to them, even those considered, on the surface, negative or destructive. Thus, there is a need to acknowledge that non-compliance and defiance may simply be pathways to resilience, in circumstances where children and young people are not heard, listened to or taken seriously, rather than exhibiting bad behaviour and immorality; children and young people deserve our understanding and support here.

Eclectic resilience and child migration: surviving and resisting

I am a survivor. I know this because I come from a line of African-Caribbean people who survived slavery.

(Adams, 2020, np.)

It is a common belief in society that former child migrants, such as Kindertransport children, are resilient, as they were seen to quickly adapt to new situations. Yet, when considering the term resilience in this context, the focus is largely on how these displaced children pulled through

a tough time, how they were fine in the end and were able to make something of their lives – thereby ignoring how they overcame difficulties during a turbulent period. There are two concerns when coupling or confusing resilience with survival. Firstly, there is a danger of not engaging with issues around compliance and repression, discussed earlier on. Second, it constructs children who made it to Britain as the resilient survivors in opposition to the victims or, in other words, the children who were not given the opportunity to escape. Moreover, using the term resilience to describe how child refugees and migrants cope, eclipses the traumatic aspects of their experience and masks the misery, confusion and dislocation faced by many. For example, see the quote at the start of this section in contrast with the quote below – from a former Kindertransport child: 'They found me difficult to handle'. Notions of surviving and being a survivor, as well 'being difficult to handle' in the quote above, show the complex realities that child migrants have to navigate post-migration, in a country that should be welcoming and understanding, but is instead marked by social, political and psychological hostilities (Canning, 2021; Pollard and Howard, 2021). Pre- and post-migration trauma and stress have long been documented, yet the impact of these factors on resilience needs to be the subject of further debate, centralising children and young people's voices.

It is clear that the dominant overarching image of vulnerable child refugees does not allow any room for a more nuanced understanding of the experiences of individual children, such as behaviours resulting from the trauma of being separated from their families or experiencing overt and covert racism and discrimination in their new country. Furthermore, the construction of refugees and migrants as victims at best, and as cultural and security threats at worst, not only assists in their dehumanisation, it also legitimises actions taken against them through the perpetuation of a particular discourse on the European *Self* and the non-European *Other* (Kootstra, 2016; Saijad, 2018). Yet, there is limited research examining resilience and the impact and legacy of discrimination and oppression on child migrants/refugees, despite the fact that it is clear that discrimination (othering, racism, bias) features in the resettlement experiences of a significant number of child migrants (Shi et al., 2021; Ziersch et al., 2020).

Moreover, confusing resilience, survival, compliance and adaptation also has the intrinsic danger of judging children who use different strategies. Here, survivor silence can be misconstrued as resilience, whilst this in fact might signify psychological or political repression and the unspeakability of a traumatic past *and* present.

Revisiting definitions of resilience is crucial here, as the chapters in this book have shown, which includes the need to understand and engage with the link between the traumatic experiences and discrimination among members of socially marginalised groups, including the specificities associated with each of the groups. As can be seen from the Kindertransport and Windrush children and young people's voices presented in Chapter 3, discrimination, low status, acculturation due to language differences and enculturation are key challenges and stressors, significantly impairing children's ability to be resilient and show positive emotions, as required by standard definitions of resilience.

Bullying and resilience: resisting a neoliberal approach

And regards poor G, grieved as we are at her sad death, we do <u>not</u> acknowledge that we are responsible; the poor girl was curiously reserved and did not give her confidence [i.e., she did not confide in people] as all the other girls do to the matron; we do not think that a girl of 20 should need visiting.

I vividly remember sitting at a table in the archives of the Children's Society in London, when I came across the case file of the girl in the quote above. The quote is in relation to the bullying and abuse the girl experienced at the hands of the housekeeper in 1918, which ultimately led to her suicide. Reading her history of coming from an abusive background, with an alcoholic father, being taken into care when she was 13 years old – her being described as a quiet girl of good character who was well-behaved, sent out to work in domestic service and being so extremely bullied and mistreated that she drowned herself, it was sobering. In the previous sections I discussed how surviving and complying can sometimes be misconstrued as resilience. It can also, ultimately, have devastating consequences, as with the girl in the quote above – especially when the responsibility is placed with the young person to act and deal with the issue, in a situation where they are utterly powerless.

Grounded in neoliberalist constructions of self-responsibility and individual empowerment, it is clear that both current and past narratives around bullying interventions treat resilience in relation to bullying as a skill that can be taught and acquired. A key assumption here is that resilience skills constitute a knowledge repertoire, a learned skill, as well as a prescribed notion of autonomous individuation and Self, with its intrinsic acceptance of responsibility for self-care (Bauman, 2000). Here the focus is not on how an environment free from bullying

and fear might be created, but instead on individual accountability and responsibility for developing resilience. The danger is that long-term implications of bullying are negated, in favour of a neoliberal approach towards self-responsibility in the here and now. This has implications for strategies in relation to bullying and supporting young people in building resilience.

While resilience-based approaches to bullying may be an alternative to more conventional anti-bullying interventions, there is a need to move away from general phrases around strength of character and positive emotions, as there is a danger that this becomes an accusation, labelling children who do not cope with bullying (or other adversities) as lacking, weak and in need of improvement. For example, strategies, such as running away or playing truant may in and of itself be a coping skill, an element of resilience and cry for help, something that is often not acknowledged. Within this, the mental health, wellbeing and resilience of bullies should also not be negated, and it is imperative to address issues that the bully, as well as the bullied, may face.

Treating resilience as something that can be taught is also problematic, especially if this is gendered by equating this with 'manning up'. The latter is not just problematic because it reinforces gendered perceptions of coping and resilience, it also suggests a deficit approach, where the person on the receiving end is viewed as having to be taught to be stronger, like a man. Social media and do-it-yourself resilience or wellbeing sites or news items feed into this deficit approach. Thus, there is a need for a focus on structural factors that may lead to stigmas, labelling and bullying. Furthermore, there is a need to move away from treating resilience in the context of bullying as a tick box exercise, something that can be taught and switched on whenever needed.

Resilience in light of racism, discrimination and othering

Your research raises many, many questions about us as a people in a mixed society regarding perception and behaviour of each ethnicity. Education and understanding of each other is extremely important if we are going to blend and become more tolerant with differences that we naturally have, especially culturally.

I received the feedback above in relation to Chapter 5 from Donald Campbell, former Windrush child and founder of the Forgotten Generations. Donald's book *My Path of Life* (Campbell, 2022) is quoted

in Chapter 5, and I asked for his thoughts and feedback in relation to the chapter, to make sure that I was doing justice to his voice and voices of other former Windrush children. Voices from a range of communities are and remain under-represented in resilience research and practice, both in the UK and in global contexts, such as children from minority ethnic communities. This is despite the wealth of anti-racist research, cited in Chapter 5, that centres the role of resilience in achieving against the odds, particularly in relation to education, and which highlights ways in which communities are resilient in the context of discrimination and racism (e.g., see Rhamie, 2012; Wright et al., 2016).

It is clear that a victimised group's history of resilience may be intricately tied to the group's present-day mobilisation in response to ongoing oppression. As such, there is a need to deploy a form of intersectionality, taking account of relationality, social context, power relations, social justice and inequalities (Crenshaw, 2011). Only when we move beyond a focus on individual or group capacity and view systemic oppression and neoliberalism as additional barriers can we really make sense of different acts of resilience, including defiance and resistance. The latter also involves acknowledging difference, and rather than embracing a form of colour blindness, often wrongly applied in certain inclusive practices, I argue in favour of a race-conscious approach to transformation.

Research to date has tended to overlook the ways in which marginalised, displaced and minority communities' histories include collective resilience in light of systemic oppression. Furthermore, ethno-racial minorities continue to be framed in flattening, stereotypical ways, thereby reproducing inequalities and leading to unequal treatment (see also Hall, 2017). For example, it is stereotypes in relation to how Black people behave, and should behave, dominated by White middle-class voices – that define what positive emotions, successful traits and coping mechanisms entail – that feed into flawed perceptions of resilience (Joseph-Salisbury, 2018).

'A gang of girls' is what a group of mixed-race girls, who had been subjected to significant racist comments regarding their hair and appearance, were referred to as (see Chapter 5); none of which had been dealt with sufficiently. Thus, without taking seriously the voices of children and young people from core communities, and coproducing knowledge with them around what positive emotions, successful traits and coping mechanisms in light of racism, discrimination and marginalisation entail, systemic oppression will continue to rule dominant constructions of resilience and related interventions.

Resisting internalised failure and deficiency

she is however weakminded, silly and childish in behaviour and very idle ... [and] congenitally deficient

It is clear that children with (specific) learning difficulties/disabilities experience a number of risk factors, one being the presence of the learning difficulty or disability itself, which is a risk factor regarding school failure and dropping out. Other risk factors are located in society and perceptions and treatment of children with learning difficulties, including hate crime and scapegoating. Disability is stigma and labels, a 'blemished person' as Goffman (1968, p. 11) writes. Moreover, it is, it seems, that resilience is not even considered or expected, as if it is part of their disability: being unable in every way, so no expectations regarding resilience are applied here.

The same can be said about the girl in the quote above – going by definitions of resilience, including character and self-help (Masten, 2019; Rutter, 2012; Smiles, 1859; 1871), it is clear that the girl is perceived to be lacking here. In fact, she is not even given a chance, as the narrative is dominated by the perceived threat of her very being. Yet, what is negated here is that her behaviour could merely be a response to a care environment that does not cater for her needs, one with limited opportunities for social interaction, lack of choice and sensory input or excessive noise; a care environment that is crowded, unresponsive and unpredictable. Here, her challenging behaviour, namely by being 'disobedient', 'sullen' and 'impulsive', could be a reaction to a situation or setting that contributes to or causes her internalised failure. This also highlights that children with learning difficulties/disabilities are expected to comply, and anything less than that, such as resisting care arrangements, by 'being irritable' is viewed as challenging behaviour, adding to the already negative expectation placed upon them.

Herein also lies the quandary that is resilience and related countervoices in light of learning difficulties/disabilities – being perceived as less in every way: less able, less clever, a lesser human, leaves little room and opportunity for coping in light of adversity (i.e., resilience), with sometimes dire consequences. It follows that notions of personal strengths and protective factors need revisiting as they often do not centralise the voice of the person who is affected, instead there is a danger that unjustified judgements are made in relation to behaviour and intentions. The same can be said about the notion that children and young people with learning difficulties have challenging behaviours. Thus, by respecting

the agency and positionality of children and young people, combined with the reciprocal approach of coproduction, it is possible to gain insight into their resilience, in sometimes unexpected yet powerful ways! Centralising children and young people's voices and perspectives thus allows promotion of awareness as a strategy for tackling inequality and uneven practices/perceptions, providing insight into the complex and nonlinear interplay between human agency (meaning-making, motivations, perceptions) and social structures (enduring patterns, social rules/norms, laws and mechanisms) (Sims-Schouten, 2021b).

Lived experience and resilience in light of intergenerational and transgenerational trauma

In this section, I would like to return to a quote cited earlier on in this chapter and book: 'I think it is interesting how many unresolved problems still very much plague so many people after all these years and if anyone thinks that everything has been resolved they are very much mistaken' (Kindertransport; Letter sent to Wiener Library in 1988).¹ Although the above quote refers to intergenerational trauma in light of the Holocaust and Kindertransport child rescue scheme, it is clear that this can, in essence, be applied to all chapters and data regarding child-hood resilience presented in this book. It follows that there is a need to centralise voices and memories from children from core communities in order to provide greater understanding of trauma *and* resilience.

Taking this back to intergenerational and transgenerational trauma: for a long time, work on trauma and migration has suggested that trauma ends when refugees arrive at a host location. Yet, more recent research now acknowledges that there is a continuum of trauma, which continues after migration (Dajani et al., 2023; Matheson et al., 2019; Sangalang and Vang, 2018). However, just what this means, and what the traumas (and resilience!) on this continuum look like have been less studied. Narrative identity and power of story are key here (Haste, 2014; Phoenix, 2020). Specifically, the notion of talking the past back into existence reflects the experience that narrative identity is developed and maintained through dialogue, in the telling of our stories (Matheson et al., 2019).

It is the latter – 'narrative and narrated identity' and 'the telling of stories' – that formed a crucial part of this book and how the chapters in this book came together. An important part of this was to include voices, opinions, memories and experiences of members (children, young people and adults) from core communities, not only as data, but also as

coproducers and referees/evaluators of the chapter content (see for example, Chapter 5). I asked a descendant of a former Kindertransport child for feedback in relation to Chapters 3 and 7. Reflecting on the focus on 'gratefulness' and 'resilient survivors', below are her thoughts:

You refer to a construction of children who made it to Britain as resilient survivors in opposition to the victims – i.e., those not given the opportunity to escape. You will know that there is a 'hierarchy' among survivors, with those who survived Auschwitz at 'the top'. I wonder if this is why some of the Kinder remained silent too. After all they were the 'lucky survivors' and to say otherwise would both have been 'ungrateful' and to deny the suffering of others.

Complying with the dominant culture is of course a survival mechanism (as true for Jewish immigrants from 1780 as it is today). Also, I think for many Kinder, their parents would have drummed into them to 'be good'. My grandmother wrote a couple of times to my Mother in England soon after she arrived, encouraging her to study hard and to continue to practise the piano etc.

Yet:

My mother was so traumatised that she denied herself a core part of her identity and heritage. All her life she was terrified of identifying as Jewish – all she knew was that if you were Jewish you were murdered.

It is clear that new approaches are needed to highlight different traumas (and resilience within this) and make them visible.

What is next?

Over the course of writing this book, I have been mindful to continuously go back to the people represented in this book: former child migrants associated with the Kindertransport and Windrush schemes; children, young people and adults from minority ethnic communities; children and young people who have been bullied, have been or are in care and/or have learning difficulties. It is through their thoughts and feedback that this book has taken shape – it is also their voices that should continue to inform us when it comes to developing theory and practice around eclectic resilience in childhood. Here eclectic resilience embodies the dynamic

complexity of childhood resilience, including defiance, resistance and compliance as resilient acts, placing marginalised and displaced children's (counter-)voices, stories and memories as narrative containers of emotions, sensibilities, conflict and resolution at the centre.

By focussing on competencies, capacities and positive functioning, the term resilience has become something of an accusation against those who are perceived as not having the right competencies and capacities. A direct consequence of this, as can be seen from the quotes presented in this book, is othering and absenting – not engaging with children and young people's voices and identities, but instead focussing on where they are lacking. Here it is worth drawing attention to the process—outcome debate in resilience theory, with some theorists focussing on the processes involved in resilience (e.g., the capacity to adapt or adjust), and others solely centralising the outcomes (e.g., achieving positive outcomes) (see also Llistosella et al., 2022; Masten, 2015; Van Breda, 2018).

Yet, in light of the way adjusting/adapting and positive outcomes are defined, it is clear that this can only lead to a rise in othering, absenting and under-representation, and as such facilitate racism and stigmatising practices. Rather, a focus on agency and structure is needed here in order to shed a light on three connected components: adversity, outcomes and mediating factors. Here, there is a need to engage with children/young people, rather than it being about them, in order to make sense of how the three interconnected components feed into perceptions, behaviours and outcomes. Without this, there is not only the danger of absenting or othering, but a further danger of actively viewing people as resistant and a threat, rather than resilient.

Thus, moving forward and for practice to improve it is imperative to engage with a number of factors. Firstly, there is a need for culturally embedded understandings of resilience, which includes centralising the voices of members from a range of communities, not only in relation to their experiences, but also how they make sense of this. Second, there is a need for critical reflection to review harmful perceptions, processes, stigma, bias and racist viewpoints and practices currently in place. Only when individuals and communities are heard, taken seriously and their needs engaged with, is it possible to truly make sense of what resilience entails and what support is required to facilitate the development of resilience in different social and cultural groups.

Inclusive practice, which celebrates the unique academic, social, emotional and physical characteristics of *all* children and young people, is central, which includes striving to unite and synergistically align all components of social policy, education and wellbeing practices in

meaningful ways. This involves collaborative work between children and young people from a range of communities, as well as charities, government, schools and wellbeing institutions/organisations (e.g., the NHS). Yet, the challenges for a multiagency society lie in the way that the different systems, organisations, councils and agencies come together to listen to and centralise children and young people's voices, rather than embracing the neoliberal narrative of individual failings, turning resilience into something that the young person just needs to do (e.g., by manning up) or become (by being self-sufficient and seeking out support).

Better measurements never hurt, and for practitioners and researchers with an interest in childhood resilience, this means engaging in interdisciplinary and reflexive practice, as well as deeper ethnographic theory and practice. Interdisciplinary research and practice, grounded in the arts, humanities and (social) sciences, provides unique opportunities for inclusive engagement with core communities, moving beyond narratives of health and deficiency, embraced by psychology and health disciplines, to centralising memories, voices, histories and multisensory experiences. Deeper affective and empathic engagement – centralising voices, memories and experiences of children and young people from core communities – can lead to the development of resilience surveys and questionnaires that are more sensitive to the cultural realities of birth cohort study participants.

Stronger reflexive practice can also illuminate blind spots that previously obscured social, societal, political, cultural or biological factors. A thorough and critical understanding of and engagement with individual, social, political, economic and historical dynamics, memories, narratives and voices of childhood resilience can allow scientists and practitioners to more substantially contribute to public discourse on social health inequities, remembrance and memorialisation, and transitional justice, starting with one question: *Tell me your story!*

Note

1. Wiener Library, Collection 1368.

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205

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Index

ableism 125, 130, 142 adversity 2, 4–10, 15, 21, 27, 35, 38–9, 52, 56, 64, 66, 69–70, 77, 80, 86, 94, 97, 102, 105, 115, 117, 120, 122, 133, 143, 175, 177, 179, 182, 188, 191 African Americans 153 agencies 23–4, 37, 42, 116, 123–4, 130, 143, 145–6, 155, 192 archives 18–19, 82, 106–7, 109–10, 119, 146, 172 asylum 71–2, 82, 126–7, 135, 137, 159, 181 autism 17, 19, 129, 131, 139–40, 143	minority community 55, 98, 100–1, 103–20, 162, 187 teaching community 144 voices from the community 51 compliance 9–11, 15–17, 20, 22–3, 27–33, 35, 41–2, 48, 51–3, 56, 65–6, 70, 72, 177, 179, 181–4, 191 context 2, 5–6, 8–10, 13–14, 22, 26–34, 41–2, 50–1, 56, 75–7, 80, 88, 96, 99, 102, 105–6, 111, 115, 117, 119–20, 128–30, 132–3, 140–1, 149, 153, 160–1, 165–7, 170, 182–3, 186–7
behaviour 3, 9, 11, 15, 23, 28, 31–2, 34, 36–43, 47, 50, 58, 66, 75, 77–80, 82, 84, 86, 88–96, 100–1, 108–11, 113, 117, 120–1, 124–6, 129–31, 133–7, 140, 145–6, 156,	counter-voices 1, 160, 181 court 24, 85 creative 45, 58, 161, 168, 175, 178 critical realism 12–13, 120, 176
159, 173-4, 176, 179, 181, 183, 186, 188 bullying 1, 11, 16, 75-82, 84-98, 101, 121, 132, 180, 185-6	defiance 4, 9–11, 15–17, 20, 22, 27–8, 33–7, 41–2, 48, 53–4, 72, 84, 99, 106, 118, 141, 146, 177, 179, 181–3, 187, 191 deprived 3, 81
care 1, 2, 6, 10, 16–17, 20–33, 35–9, 41–3, 66, 73, 76, 82–3, 87, 89, 100–1, 104, 123–4, 127, 131–2, 134–8, 145–6, 152, 156, 158–60, 179, 181–3, 185, 188, 190 care leaver(s) 7, 52–5, 63 in the community 124 foster care 55, 58–60, 68 residential care 55 social care 51, 64, 82, 85–6 social work 11, 45–7, 73–6 of vulnerable children 134 care-experienced young people 17, 21, 25, 28, 183 child 2, 4–11, 16–17, 19–24, 26, 28–9, 33–6, 38–43, 45–54, 56–7, 62–3, 66–8, 70–3, 76, 79–84, 87–90, 95, 97, 101–2, 107, 112–13, 118, 123–4, 126, 128–9, 133–8, 140–1, 143, 148, 152, 154–8, 160, 163, 170, 173, 176–7, 179–84, 186, 189–90	deserving 21–3, 26–7, 32, 38, 40, 62, 130, 134, 144 disabled 124–5, 130, 135, 146, 161 disadvantage 11, 16, 80, 99, 104–5, 114–15, 118–19, 139, 141, 148, 150, 154, 175 disadvantaged 1–3, 9–12, 14–17, 20, 42, 92, 99, 103–5, 114, 168, 173–6, 181 discrimination 10–11, 13, 18, 47–9, 52, 54, 59, 65, 69–70, 73, 80, 94, 99–100, 103–5, 108, 110–11, 114–15, 117–19, 148, 150, 152, 154, 157, 159–60, 164–6, 170, 174–5, 180, 184–5, 187 displaced 1–2, 9–12, 14–16, 20, 51, 103, 106, 119, 168, 173–7, 181, 183, 187, 191 emotion 31, 91–2 empathy 12, 79–80, 91–2, 176 equality 111, 138, 146
childhood 2, 4, 7–8, 10–16, 22, 24–5, 46–7, 50, 54–5, 60, 66, 71, 86, 108, 110, 119, 123, 125–6, 128, 159, 163, 173–81, 189–90, 192 community 6, 8, 13, 19, 24, 33, 56–7, 60, 94, 97, 100, 103, 111, 113–14, 116–17, 119–20, 124, 127, 129, 143–4, 146, 148, 151, 164, 166–7, 169, 174 community relationships 148, 164, 169 family and community 114, 116 inclusive community 66 local community 8, 111	family 2, 5, 7–8, 28–30, 34, 46, 48, 52–5, 66–7, 70, 77, 81, 86, 90, 97, 102, 107, 114, 116, 130, 143, 145, 148, 151, 153–4, 158, 167, 169, 173 background 57 dynamics 153 foster family 12 members 101, 127 norms 59 relationship(s) 124 structure 148, 151

global 3, 6, 8 parents 3, 8, 17-18, 26, 30, 33-4, 38-9, 46, government 3, 21, 25, 76, 78, 83, 116, 127, 48, 52-6, 60, 70, 75, 77-8, 80, 82, 87-90, 95–6, 107, 120, 133, 141, 157, 182, 190 166, 192 phenomenology 12, 14, 176 hate crime 124-5, 129-31, 144, 146, 188 philanthropic 17, 23, 81, 123, 127, 154–5, 157 history 46, 47, 155, 158 poor 22-4, 33, 42, 52, 55, 58, 80, 83-5, 87, holistic 72, 80, 97, 150 101, 113, 117, 120, 123, 136-7, 149, Holocaust 49, 149, 151, 153-4, 161, 171, 189 159-61, 182, 185 humanities 14, 20, 168, 171, 174-5, 178, 192 poverty 5–6, 11, 25, 32, 98, 126, 150, 167, 173 practice 1, 3, 6, 10, 16, 20-2, 24, 26-8, 31-3, Indonesia 19, 149, 165, 167 40, 42-3, 46-7, 57, 60, 71-2, 76, 80, 92, interdisciplinary 12, 72, 171, 174, 192 94-7, 99, 115, 117-18, 120-2, 125, 127, intergenerational 11, 13, 19, 147, 149, 152, 134–5, 144–6, 171, 173, 175–8, 187, 190 prevention 24, 78 internalised failure 18, 123-4, 137-40, 144, psychology 3-4, 7, 92, 161-2, 168, 171, 180, 188 . 174–5, 192 public health 3, 49, 147, 160, 174 interpersonal/intrapersonal 14, 45, 129, 148, 150, 164, 169, 176 intersection 13, 175 racism 2, 10-11, 13, 15-16, 27, 48, 51-2, 59, intervention 1, 3, 27, 43, 77, 79, 91-2, 97, 177 65, 73, 94, 99, 101, 104, 107, 110-11, 113-19, 121-2, 148, 152, 157, 159-60, 165-70, Jamaica 39, 55-6, 106, 108 174, 176, 180, 184, 187, 191 and marginalisation 94 Kindertransport 2, 10, 17, 29, 45-54, 56-7, refugee 46-7, 69-72, 140, 152, 158-9, 59, 61, 65, 69, 71–3, 140, 152, 160, 163, 169-71 176, 179, 181, 183, 185, 189-90 resilience 1-22, 25-8, 30-7, 39-43, 45-53, 55-6, 61-6, 69-73, 75-8, 80-1, 83-4, 86-90, 93-107, 111, 113-22, 124, label 32, 94, 129 learning differences 123-4, 132-3, 135, 130-3, 135-6, 138, 141-9, 154, 156-8, 138, 143-4 160-1, 165, 168-192 learning difficulty 138, 188 resistance 3-5, 9-11, 15-16, 20, 33, 40, 53-4, lived experiences 13-14, 19, 32, 45, 147-8, 72, 84, 90, 99-100, 105-6, 114, 118-19, 161, 164, 174, 178, 181 121, 141-2, 146, 176, 179, 181, 187, 191 responsibility 3, 10, 22, 37, 43, 64, 75-6, 87, marginalised 1-3, 9, 11-12, 14-16, 20, 27, 42, 89-90, 95, 97-8, 105, 115, 175, 183, 185 56, 65, 88, 99, 101, 103-6, 114, 119, 125, 165, 168, 173-7, 181-2, 187, 191 school 1, 8, 10, 17, 19, 30, 46, 53-4, 56, memory 58, 62, 64, 66, 110, 157, 161-2, 166, 75-80, 82-4, 86-8, 91-3, 96-9, 101-2. 170, 176 104, 107-9, 111-14, 116, 120-1, 127-9, mental health 3, 6, 10-11, 13, 22, 24-5, 34, 131-3, 137-41, 144, 151, 163, 188 39, 42, 50, 52-3, 69-70, 72, 79, 82, 84, 92, attendance 60 97, 99, 101-2, 123, 129, 131, 134, 138-42, primary school 39, 164-5 148, 151, 167, 171, 186 secondary school 7, 11, 39, 164, 168 migrants 19, 46, 48-50, 54, 60, 66-7, 69, Scottish National Institution for the Education 71–2, 89, 104, 158–9, 169 of Imbecile Children 18, 124, 127, 135, migration 2, 10-11, 16-17, 45-9, 51, 55, 57, 137, 180 59, 61, 65-6, 68-71, 73, 88, 107, 140-1, self-help 3, 21, 31 slave 49, 119, 148, 151, 153 148-50, 152-3, 155-8, 160-1, 163-6, 169, 179, 184, 189 stigma 13, 49, 88, 99, 122, 124-5, 145, 147, Moluccans 19, 149, 164-8 175, 188, 191 moral 126, 134-6, 154, 183 stories 9, 11-12, 15, 45-6, 50, 61-2, 65-6, 71, morality 25, 37, 40, 181 111, 140, 157, 161-2, 164-6, 168-9, 174-5, 177, 179, 181, 189, 191 narratives 12, 16-18, 20, 37, 45, 57, 59, 66, strength 7, 10, 28, 31, 34-5, 40, 42, 47, 50-1, 76, 80, 96, 100-1, 104-5, 110-11, 113-14, 57, 62, 64, 66, 70, 78-9, 81, 83, 86, 89, 124, 148, 161-2, 165, 168, 170-1, 176, 94-5, 101-2, 105, 111, 113-15, 156, 172, 185, 192 174, 183, 186 neoliberal 18, 37, 75-6, 90, 92, 94-5, 115, survival 51, 53, 72, 105, 111, 114, 161, 165, 146, 180, 183, 186, 192 182, 184, 190 Netherlands 19, 29, 104, 110, 149, 164-7 transgenerational 11, 19, 49, 73, 147-9, organisation 14 151-2, 157, 160, 164, 168-71, 181, 189 trauma 11, 13, 16, 19, 25, 29, 32, 34, 37-8, organisational 148, 150, 164, 169 othering 10, 18, 46, 48, 56-9, 62, 65, 70, 40, 42-3, 47-50, 53-6, 66, 69, 71, 73, 80, 72, 99, 101, 103, 117, 122, 129, 180, 95, 105, 110, 120, 123, 129, 147-54, 184, 191 157-61, 163-72, 174, 180-1, 183-4, 189

UK 2, 17, 21, 23, 25, 29, 33, 37, 39, 41, 45–8, 52–7, 69, 71–2, 75–6, 78–9, 82, 88, 91–3, 96, 99, 104, 107–9, 115–16, 120–1, 127–9, 134, 144, 146, 150, 163, 187

voice 36, 46, 60, 100–1, 111, 117, 126, 131, 140, 145, 180, 187 voluntary 23, 27, 29, 32, 48, 56, 123, 127, 155, 182

Waifs and Strays 10, 18–19, 23, 30, 35, 37, 53, 75, 81–3, 124, 127, 135, 146, 155, 178–80 welfare 11, 21–4, 32, 43, 130, 132, 156–7

wellbeing 1, 6, 9, 11–13, 15–16, 25, 79, 84, 87, 91–2, 100, 102, 121, 131, 140, 142, 148, 151, 159, 173–4, 176, 178, 186, 191 Windrush 2, 10, 17–18, 45–6, 48–52, 54–9, 61, 65, 69, 71, 73, 100, 106–9, 120, 140, 163, 179, 185–6, 190

young 1-2, 4, 6-13, 15-23, 25-9, 31-4, 37-43, 45-8, 51, 53-6, 61, 65-6, 69, 72, 75-6, 81, 84, 88-9, 91-2, 94-7, 100-1, 104, 106, 109, 115-16, 121, 123-4, 128-9, 131-3, 137-42, 144-6, 152, 155-8, 170-1, 173-4, 177-80, 182-92 youth 11, 47, 51, 54, 80, 92, 104, 115, 143, 153

'This thought-provoking book revisits the concept of resilience through close interpretation of the moving stories told by marginalised children and adults across time, shining new light on the rebellious, resistant ones so often dismissed as "dangerous" or "deviant".'

Helen Cowie, University of Surrey

'Adopting an intriguing and eclectic perspective of resilience in understudied samples, this is a rare book that challenges the status quo. A must read for anyone seeking to gain unique insight into the concept of resilience.'

Nora Wiium, University of Bergen

Despite many decades of research into childhood resilience, it remains a contentious area with much still left to be resolved. Key terms are poorly defined, positioning marginalised and displaced children as objects rather than co-producers of knowledge. Research and practice frame resilience through individualised models of health and abnormality. These models emphasise individual responsibility over systemic oppression, ignoring personal marginalised voices and experiences, and the contribution of appropriate needs-based assistance. Resilience needs rethinking.

Revisiting Childhood Resilience Through Marginalised and Displaced Voices uses an interdisciplinary approach to challenge current childhood resilience research and practice. The culmination of ten years of research and publications around childhood resilience, the book draws upon data collected from and co-produced with children, young people and adults from marginalised, disadvantaged and displaced communities. In so doing, it highlights the transformative potential of stories told by marginalised and displaced children, past and present. When these narratives are prioritised, they disrupt, counter and draw critical attention to coping strategies in light of adversity and oppression, to inform creative research and policymaking. Focusing on the voices of care leavers, young people who are bullied, members of minority ethnic communities and former migrants/refugees, among others, Wendy Sims-Schouten gives centre stage to 150 years of marginalised voices and experiences in relation to resilience.

Wendy Sims-Schouten is Professor of Interdisciplinary Psychology and Head of UCL Arts & Sciences.



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