FAMILY RESILIENCE

Reflection Note #1: Resilience

AVSI People for development

What is “Family Resilience”?

In 2015, AVSI Foundation developed the Family Resilience project in Uganda responding to a specific concern: knowing that family based care is by far the best environment for children to thrive within, how can children be prevented from unnecessarily separating from their families in the first place, and how to facilitate reintegration of children back into family care in a way that will endure over time?

In other words, we observe that a resilient family is capable of withstanding the inevitable challenges and stresses that life brings, so is it possible to strengthen the capacities of a family to avoid breakdown or to facilitate a process of re-building when it is in the best interest of the child?

AVSI's Learning Trajectory from Psychosocial Support to SCORE to FARE

Psychosocial Support and Recovery from Trauma

AVSI's long history in Uganda continues to be shaped by the experiences and learning that came from the early years. During the period 1985 – 2000, AVSI accompanied the people of northern Uganda through two dramatic crises: the war with the LRA including the traumatic effects on the population and decades of displacement, and the outbreak of the HIV/AIDS pandemic. During those years, AVSI's sensitivity to the person by having a **holistic approach** able to consider all his/her needs (material, psychological, social), and in particular of children, led to deep reflection on the psychological effects of these crises and corresponding means to mitigate and address trauma. This holistic approach FARE takes embraces the entire family and community around vulnerable children is holistic and flexible to meet the needs of individual cases. The approach draws on the innovative method developed by AVSI's Sustainable COmprehensive REsponses for the Vulnerable Children and their Households (SCORE) project. Like SCORE, FARE does research to find ways to strengthen households economically and conducts interventions to make families more resilient so that children will not be separated from their parents.

AVSI Foundation

This Reflection Note is intended as a means for AVSI staff and implementing partners on the FARE project to capture emerging learning as relates to the theory of change elaborated during project design. The methodology used for this background note was desk review of project proposal documents and reference materials, complemented by semi-structured interviews with AVSI and FARE staff.

QUICK PROJECT FACTS:

Program Name: Family Resilience
Country: Uganda
Time Frame: 2015-2018
Budget: US$1.35 million
Donors: ASPIRES funded by FHI 360, USAID
Beneficiaries: 2,400 children, 650 HH
Districts: Wakiso and Kampala

Together with a wide range of experts from multiple fields, AVSI being inspired by the work of the psychologist Edith Grotberg, developed a concept of Resilience Pyramid which captures the three dimensions of the world of the person: “I am” (psychological, spiritual and cultural values); “I can” (skills, capacity and action); and “I have” (relations and bonds)/ Resilience derives from the interaction of the resources that the person develops in his/her three dimensions. Weaknesses on one or more sides make the structure vulnerable to external shocks and less stable.

Reflecting on years of community level work in northern Uganda, as well as related experiences in post-genocide Rwanda and elsewhere, AVSI further expanded the conceptual framework to include the social dimension which includes family, and in particular the parental relationship, and community: “I am/We are”; “I can/We can”; “I have/ We have”.

AVSI's approach to **Psychosocial Support interventions** emphasized a number of central principles that reflect this understanding of **individual and community/family resilience**:

- Re-construction of bonds of affection, confidence and trust are essential for a child's recovery, well-being and growth.
- Personal reflection and communication skills are essential to face critical and traumatic events and to begin a process of recovery.
- Through a participatory approach methodology, beneficiaries play an active role in their process of recovery since they are the best experts of their needs and resources
- Parents and adult caregivers play an essential and irreplaceable role that must be supported and not substituted by any intervention focused on children
- Social network and bonds at the community level are essential, which means working with existing groups from formal to informal; schools have an important role to play.
- Economic activities are important for rebuilding a future orientation and sense of normalcy and hope, but cannot be a substitute for attention to other dimensions; the risk is to create relationships of dependence.

Sustainable Comprehensive Responses (SCORE) for OVC Children

AVSI built on the early years of psychosocial support to vulnerable populations in Uganda and actively incorporated this learning into future projects. With funding from USAID under PEPFAR, the SCORE project (2011-2018) introduced a comprehensive approach to poverty reduction and social support for families of young children affected by HIV/AIDS. SCORE was designed with a family centered approach that incorporated a strong conviction that family economic strengthening activities, together with social protection and family and social support interventions, could enable families to transition from conditions of high vulnerability towards greater stability and reduced vulnerability to risk factors, with improved outcomes for children. SCORE integrated interventions such as child protection, health and nutrition, and positive parenting with economic strengthening activities targeting caregivers.

SCORE integrated interventions such as child protection, health and nutrition, and positive parenting with economic strengthening activities targeting caregivers. The economic strengthening pathway was savings-led, with the mobilization of and support to VSLA groups featured as the primary and initial activity for all participants. Basic financial literacy skills building and more advanced business skills training and linkages to formal financial services were introduced as VSLA groups matured. Consumption support was given only in cases of emergency.

The success of this integrated family centered approach and the rapid rate of "graduation" of participating households led AVSI to consider other applications for this vulnerability-to-resilience graduation model. One emerging lesson from SCORE is that family strengthening activities –such as counseling, parenting skills, and community dialogues on key issues—are strongly correlated to the resilience of graduated households up to two years following their exit from the project. In other words, the more a household participated in family strengthening activities, the more likely they were to maintain low vulnerability scores up to two years after graduation out of the project.

Definition of Resilience

Family Resilience: "The family's ability to withstand and rebound from crisis and prolonged adversity, strengthened and more resourceful" (Walsh, 2010).

Resilience: "The ability of people, households, communities, countries and systems to mitigate, adapt to, and recover from shocks and stresses in a manner that reduces chronic vulnerability and facilitates inclusive growth." (USAID, 2012).

Resilience Pyramid (AVSI): "Resilience is more than the capacity of a person to address, prevent and overcome the negative effects of external difficulties and end up reinforced by negative experiences. It is the result of the interaction of resources that develop in a person along three dimensions, which form the sides of a pyramid: "I am", "I can", and "I have." It is not a static quality, but a set of qualities, skills and understandings that unfold and change in response to circumstances and relationships." (Galli, et all, 2017).

Graduation (AVSI – SCORE definition): "Graduation refers to that moment when project beneficiaries who have vulnerability score below enrollment threshold for two consecutive measurements (annual measurements) are exited from direct project support. Graduation is part of the case management process and is preceded by pre-graduation." (SCORE, 2016).

Family Resilience (FARE) Project

Designed in 2015 with support from the ASPIRES project led by FHI360, FARE provided AVSI with the opportunity to expand upon the concept of "family resilience" and explore it more deeply.

Child well-being has always been the central focus of AVSI programs and the years of experience described above taught that child well-being cannot and should not be separated from family well-being.

Internationally, significant evidence has accumulated to fortify the argument that strengthening the family environment (caregiver psychological and physical health, capacity to provide for basic needs, stable place of belonging and love, etc.) is essential to addressing child well-being outcomes over the long run. Economic skills and capacities are a central part to the family environment, but how does "economic resilience" interact with the other dimensions of individual and family resilience?

What is Family Resilience?

Family resilience is a conceptual framework that integrates individual coping capacities with family dynamics that enable members to deal with stressful situations or shocks. Economic capacity is a part of the framework, but even here the optic of the family enables us to appreciate the economic asset and potential of all members of the household and not only the caregivers. Important elements of economic resilience at the family level are assets, means of protecting assets and mitigating risk, sustainable livelihoods, investments in skills for livelihoods, and positive outlook are also integral components of a resilient family. Positive social networks, informal safety nets, social capital and access to information are also essential. (Béné, C. 2013)

The concept of "family resiliency" has been used in the field of psychiatry and family therapy, largely in the United States, to move beyond diagnosis of individual coping capacity and family deficits, to look at the dynamic interactions of families living in stressful environments and to uncover family strengths. Walsh's comprehensive framework for family resilience (Walsh, 2006, 2002), as outlined in "Key Processes in Family Resilience," identified three domains of resilient families: (a) belief systems and positive outlook; (b) family organizational patterns, caring relationships and connecting the family to a larger community; and (c) communication processes that include knowing how to be clear, open, and collaborative with one another.

The family economic situation is absent from this framework, yet it is widely acknowledged and support by evidence that situations of extreme poverty cause "toxic stress" and anxiety which affect the family environment. AVSI's and her partners' experience in Uganda confirm this conclusion.

FARE Theory of Change and Conceptual Framework – How will this project aim to strengthen family resilience of vulnerable Ugandan families?

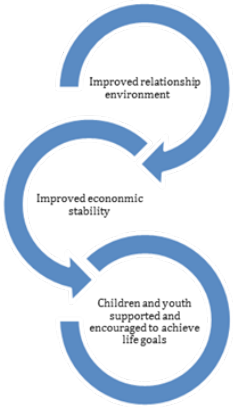
FARE is funded by the Accelerating Strategies for Practical Innovation and Research in Economic Strengthening (ASPIRES) project implemented by FHI360 and funded by the Displaced Orphans and Children Fund (DCOF), an office within USAID.

FARE's Theory of Change rests on the concept of pathways from vulnerability toward greater resilience with the family (or household) as the unit of analysis and intervention entry point. Pathways suggest the multiple sets of assets which, it is theorized, can be built or strengthened in progression. The simplified diagram to the right does not imply strict sequencing but rather the interconnectedness of the various assets and dimensions of family life.

From a starting point of household and child vulnerability as assessed on multiple dimensions, project interventions will address specific vulnerabilities and drivers of child-family separation. As families become more resilient, they become less vulnerable to shocks and children's outcomes improve.

As a result, preventative measures at the community level will mean that fewer children are separated from family care and those that do are able to be reintegrated back into family care.

The two main pathways toward family resilience are through interventions which address the relationship environment and those addressing economic stability. Given that each family reflects a unique set of assets as well as constraints, the "package" of interventions needed is not likely to be standardized.



For the FARE project, the entry point to reach vulnerable families will be through children already separated and living either on the streets or in institutions, or in communities identified as being at high-risk of unnecessary child-family separation. In the first instance, FARE's role will be reintegration, while in the second instance FARE will play a preventative role. The prevention and reintegration activities will merge at the community level, as the resilience capacities of families to ensure sustained reintegration and family well-being will be built.

Assessment and Learning – What do we expect to learn

Reintegration Hypothesis: More resilient families with stable livelihoods and good communication skills will be better equipped to receive separated children back home. At the same time, separated children will benefit from strong case management while in transitional care and will gain important life skills..

Prevention Hypothesis: Economic strengthening interventions will relax household resource constraints and family strengthening interventions will build the relationship and communication skills of caregivers and household members, together addressing the drivers of separation.

Project Monitoring

FARE has a robust internal M&E system that tracks child and household level vulnerability and assets from baseline through the end of the project. The main indicators, which will give us a picture of reduced vulnerability include:

- % of families that improve their overall vulnerability score (and components of economic vulnerability, children protection and psychosocial vulnerability).
- % of reunified children who remain in family care for at least 12 months post-placement.
- % of prevention households which did not experience child-family separation during the project period

Qualitative research

Overseen by the ASPIRES team at FHI360, qualitative research will uncover more information on the dynamics of a small sample of FARE households and will reveal nuances of resilience capacities, strengths and weaknesses of the approach.

Initial Learning from FARE:

At the conclusion of the first year (December 2016), the following points of learning emerged, as they relate to family resilience:

- Reintegrating children back into family care is always a process, and one which is never standardized since every family is different with its own particularities (strengths as well as challenges). Therefore, the resilience capacities which need to be strengthened will vary from household to household.
- Parenting, youth life skills, and community and family dialogues with trained social workers seem, to project staff, to be essential glue holding together the project and reinforcing the benefits from the economic strengthening activities, including savings groups. FARE aims to strengthen the household environment and relationships as one key component of family resilience.
- The Household Development Plan is an important tool which opens up space for dialogue with caregivers on their aspirations and goals as well as fears and concerns.
- FARE offers primarily group-based activities which reinforce social capital among highly vulnerable individuals but can also be challenging for the same population. FARE social workers found that the most destitute individuals held trouble joining group activities due to lack of self-confidence and concern over their reputation in the community due to limited ability to meet their household's basic needs.

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