Resilience and marginalized youth: Making a case for personal and collective meaning-making as part of resilience research in public health

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ABSTRACT

The public health research community has long recognized the roles of discrimination, institutional structures, and unfair economic practices in the production and maintenance of health disparities, but it has neglected the ways in which the interpretation of these structures orients people in overcoming them and achieving positive outcomes in their lives. In this call for researchers to pay more – and more nuanced – attention to cultural context, we contend that group identity–as expressed through affiliation with an oppressed group–can itself prompt meaningful role-based action. Public health's study of resilience, then, must consider the ways that individuals understand and, in turn, resist discrimination. In this article, we briefly outline the shortcomings of current perspectives on resilience as they pertain to the study of marginalized youth and then consider the potential protection offered by ideological commitment. To ground our conceptual argument, we use examples from two different groups with whom the authors have worked for many years: indigenous and sexual minority youth. Though these groups are dissimilar in many ways, the processes related to marginalization, identity and resilience are remarkably similar. Specifically, group affiliation can provide a context to reconceptualize personal difficulty as a politicized collective struggle, and through this reading, can create a platform for ideological commitment and resistance.

Introduction

The public health research community is in a unique position to address health disparities among marginalized populations. Public health professionals have long recognized the roles of discrimination, institutional structures, and unfair economic practices in the production and maintenance of health disparities. However, researchers have overlooked the ways in which the interpretation of these structures orients people in overcoming such disparities and achieving positive outcomes in their lives. Previous research has studied resilience—the process of overcoming on-going and acute difficulties—mainly as a function of individual risk and protective factors leading to outcomes whose meanings are presumably fixed as either resilient or not. This approach neglects the differences in meanings embedded in both circumstances and outcomes, especially as these differences relate to groups whose meaning systems or values diverge from the dominant society.

This paper is a call to researchers to consider also the cultural and political context of resilience, the ways in which distinctive meaning frameworks orient actors. Although culture is often included in resilience research as a variable or factor, we suggest that too often it is used as a proxy for discrimination, and as such is presumed to be a risk factor. Instead, research must investigate the ways in which individuals – youth, in particular – interpret and adaptively respond to the discrimination and prejudice they may encounter as members of marginalized groups; and collaterally, how these interpretive constructions and reconstructions situate them as actors in the world. People's experiences of ongoing and acute hardship based on their marginalized status and group affiliation can have real health consequences – but in ways that are not uniformly negative (Chandler & Lalonde, 1998; LaFromboise, Hoyt, Oliver, & Whitbeck, 2006). Group affiliation can provide stabilizing resources from which youth can craft a clear cultural identity, a process that has been shown to have positive health consequences (Phinney, 1991; Wakefield & Hudley, 2007).

In this article, we will briefly outline the shortcomings of current perspectives on resilience as they pertain to the study of marginalized youth and then consider the potential protection offered by ideological commitment. Our point of departure is work emerging from conflict psychology that demonstrates how a politicized sense of identity can provide young people with ways to understand

personal experiences of trauma as part of a broader struggle. Our discussion widens the construct of resilience and posits that it is essential to understand the multiple ways in which identity, group membership, and ideological commitment situate people's health behaviors and mental health.

To ground our conceptual argument, we will use examples from two different marginalized groups with whom the authors have worked for many years[1]. Both Indigenous and sexual minority youth have an extremely high occurrence of suicidality (Borowsky, Resnik, Ireland, & Blum, 1999; D'Augelli, Hershberger, & Pilkington, 2001; Eisenberg & Resnick, 2006; Kirmayer, Fletcher, & Boothroyd, 1998; Meyer, Dietrich, & Schwartz, 2008; Russell & Joyner, 2001; Wexler, Hill, Bertone-Johnson, & Fenaughty, 2008), indicating group-level outcomes that are the opposite of resilience. Yet, some youth from these groups demonstrate remarkable resilience, in part, we propose, because of their identity as Native or as gay, lesbian, bisexual or transsexual (GLBT). Even though these groups are dissimilar in many ways, we find the processes related to marginalization, identity and resilience to be remarkably similar. Specifically, group affiliation can help a young person reconceptualize personal difficulty as a collective struggle. In so doing, ideological commitment and resistance against oppression may foster positive health outcomes.

Current conceptualizations of resilience

Resilience is often conceptualized as a result of an amalgam of discrete risk and protective factors (Olsson, Bond, Burns, Vella-Brodrick, & Sawyer, 2003; Ungar, Lee, Callaghan, & Boothroyd, 2005). "Risk" factors are experiences of acute hardship (e.g. victimization) or forms of sustained stress (e.g. poverty, historical trauma, discrimination) that have been associated with "poor" behavioral or health outcomes; resilience is then defined by those who defy the odds and show "positive" outcomes. Based on this understanding, researchers develop prevention and intervention strategies targeted at individuals considered to be at "high-risk," and specifically aimed at increasing the "protective" factors that presumably make better-than-expected outcomes possible.

As the field of resilience research matures, it has begun to investigate the dynamic interaction of risk and protective factors (Roosa, 2000) and to acknowledge a more active role for family and community on individual functioning (Garmezy, 1987; Werner, 1993). These studies tend to measure the number and degree of risk variables and their relation to protective factors, attempting to identify specific buffering effects through individual resiliency measures (Masten, 2001).

The subtext of this literature is the idea that risk and protective factors are similarly experienced by all who share them, ignoring the influence of social context and systems of domination on personal experience and meaning (Massey, Cameroon, Ouellette, & Fine, 1998). Thus, resilience research tends to neglect the heart of the matter: the value people and their communities place on various factors, especially when they do not fit within society's dominant paradigms. Resilience research has not adequately acknowledged different communities' meaning systems or described the reciprocal processes taking place at the intersection of personal and community meaning-making (Ungar, 2003, 2004).

In particular, developing a distinct identity and crafting a collateral sense of purpose has been found to be an important element in healthy youth development (Erikson, 1968; Hunter &

Csikszentmihalyi, 2003), but to date few researchers have investigated the ways that this might be important in the study of resilience for individuals who are not part of the dominant society and who may be at risk for serious health consequences (e.g. suicide, substance abuse, or depression) because of their marginalization. To the extent that power imbalances based on socially constructed categories are recognized, they are considered individual risk factors. The interpretive moment – and the possibility of individuals interpreting their circumstances and their group affiliations in protective ways – are cut off.

To sum up, research has framed resilience as a fixed state that can be assigned to a person or a group of people based on 1) a status that confers risk, such as non-dominant group membership, and 2) better-than-expected outcomes based on a matrix of time-limited criteria (e.g. graduation, self-esteem scores, absence of substance use/abuse) that are defined and allotted to participants by researchers. Thus are individuals separated into two distinct groups, those who are considered resilient and those who are not. However, we contend that resilience—rebounding after experiencing hardship—is a process involving personal and collective meaning-making and negotiation, which should *not* be assumed to be a steady state. Understanding the mechanisms involved in this process can widen the scope of resilience inquiry to account for the standing of groups within the dominant society and the meaning of such positioning for marginalized group members. We turn next to an example of such a process.

When "poor" outcomes indicate resilient processes

The notion of risk-thus-resilience assumes a particular cause and effect rationality that is not necessarily shared by those living through the circumstances under study. This can make the positive outcomes used to define resilience problematic. If the meanings of various resilience indicators are socially produced and reflective of the dominant society, assigning a particular valence to events may lead to misconceptions when the research is focused on marginalized groups (Ungar, 2004).

For example, graduation from high school has been identified as an unequivocally positive outcome, both in its own right and as associated with other positive outcomes (i.e. prosocial behaviors) (LaFromboise et al., 2006). But the meaning of this accomplishment varies for individuals and communities. For peoples for whom schools have been primary colonizing agents—as for many Indigenous peoples—school success can be a community marker that aligns individuals with the dominating culture (Dehyle, 1992). Equally problematic, schools are often unsafe and threatening spaces for young people who identify as lesbian, gay, bisexual or transgender, which makes graduation difficult (Bontempo & D'Augelli, 2002; Gross, Aurand, & Adessa, 1988; Smith, 1998).

In such a context, leaving school or acting against cultural/behavioral regulation can be seen as acts of resistance and resilience (see critical theorists such as Freire, 1970; McLean, 1997; Ryan, 1989; Ryan, 1991). An outcome such as school leaving, defined by researchers as unfavorable, could instead reflect empowerment on the part of the individual participant, their family or community; and could be understood as exhibiting personal agency and affiliation. By intentionally[2] embracing one's

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[1] Wexler and Burke have worked with different groups of Alaska Native young people since the early- to mid-1990s; DiFulvio has worked with lesbian/gay/bisexual/transgender youth since the early 2000s.

[2] It is important to distinguish between the experience of actively categorizing oneself as a member of a group versus resignedly accepting others' identification of oneself as a member of a marginalized group. The former implies a process of exploration and then commitment (Phinney, 1989; Phinney & Chavira, 1995) to one's identity while the latter is often experienced as discriminatory or marginalizing. We suggest that an active process of identification and ideological commitment are key constructs associated with resilience among these groups.