Resilience and Disability: Creation of an On-line Course for Counselors and Allied Helping Professionals

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Introduction

Resilience is a term often associated with some sort of traumatic or challenging life event. It has been described as an ability or personal trait that helps people deal with loss, natural disasters, death and bereavement, lack of resources and support (i.e., family, low SES), and personal crisis. Yet, resilience is a term that has rarely been associated with disability or the experience of living with a disability.

Professionals who counsel and work with persons with disabilities have been trained to focus on helping people adjust to one’s disability, improve personal functioning, live independently, become employed, and obtain the best life possible. Much of this work involves assessing peoples’ strengths and abilities, but throughout this process, the notion of resilience has been either overlooked or inadequately captured as a part of the rehabilitation and counseling process. As a result, rehabilitation counseling professionals may not be fully accessing the power and value of resilience, resilience-based skills, and all they have to offer as key components of successful living. Related is the notion that some rehabilitation professionals may not be as comfortable as they could be in utilizing resilience as an essential component of one’s rehabilitation. However, the Commission on Rehabilitation Counselor Certification (CRCC) has recently found there is an increased interest within the profession, as reported by rehabilitation counseling professionals, in learning about resilience and how it can be incorporated into the rehabilitation and counseling process. In an effort to address this professional need, the following course was developed by the author. Thus, the presented article is an introduction and overview of the on-line resilience course offered by the Commission on Rehabilitation Counselor Certification e-university program.

Rationale for the Course

Resilience is a construct that has much applicability and relevance to persons with disabilities (Stuntzner & Hartley, 2014; White, Driver, & Warren, 2008) and can be used by persons with disabilities and applied to several life domains and issues. According to Stuntzner and Hartley (2014), resilience interventions and approaches can help people work on issues they face in one’s personal life, family relationships, friendships and social support net-
work, adjustment to disability process, and in learning to self-advocate. Furthermore, resilience can help people address employment-related concerns, financial and insurance needs, personal situations, and discomfort related to societal and attitudinal barriers (p. 17).

Related are the disability-related issues that often accompany living with a disability. Some of these include unemployment, changes in physical or mental functioning, loss of friendships and social support, changes in family relationships, changes in health care and finances, negative societal attitudes, and marginalization (Hartley & Tarvydas, 2012; Marini, Glover-Graf, & Millington, 2012) – all of which have the potential to lead to some sort of hurt or loss. Resilience can help people learn or enhance skills to help them effectively cope with such changes.

Given the multiple changes and obstacles that occur when living with a disability, it is evident that interventions and strategies are essential to help people cope with the disability and situations that often accompany it. Furthermore, professionals working with this group of individuals may need additional training or resources to help them be more effective. Prior to the development of this course, the Commission on Rehabilitation Counselor Certification (CRCC) surveyed Certified Rehabilitation Counselors and rehabilitation counseling professionals about topic areas they felt would be beneficial in their work with persons with disabilities. One such topic that emerged was resilience and how it could be applied to persons with disabilities. Due to this emerging interest and professional need, the author was asked to develop such a course.

Course Structure

The on-line course offered by the CRCC is available for 13 CEUs to rehabilitation counselors, allied helping professionals, and professionals interested in learning about resilience and its applicability to persons with disabilities and positive coping. The course is entitled, “Resilience and Disability: Enhancing Rehabilitation Professionals’ Understanding and Application of Resilience to Rehabilitation Counseling” and can be accessed at the CRCC’s website (i.e., https://www.crccertification.com/stuntzner-susan?sid=185).

The course was developed to follow a linear sequence so that each unit sets the foundation for the one that follows. Collectively, the course is comprised of seven units. Each unit provides the learner with unit objectives, learning objectives, key points, and content related to the topic presented. Each unit ends with one or more opportunities to express what people learned. Learning opportunities vary based on the unit and come in the form of multiple choice questions with feedback provided for chosen answers, short answer questions, application exercises (i.e., What Does Resilience Look Like to Me?, Development of a Professional Model to Cultivate Resilience), and case studies. At the conclusion of each unit is a list of resources used to create the course and for professionals to learn of other materials they might want to access in their pursuit of learning about resilience.

Resilience Course Content

Unit 1

Unit 1 is entitled, “Understanding Resilience and its Application to Persons with Disabilities.” The intent of the unit is to introduce counselors to the concept of resilience, so they can learn what resilience means and how it is related to the needs of persons with disabilities. People are encouraged to consider the likelihood that resilience will be defined and understood somewhat differently from person-to-person and based on peoples’ life experiences.

Unit 1 begins with the introduction of resilience and explains the evolution of resilience and its rise in popularity since the 1970’s when research was being conducted on at-risk youth who were found to be resilient despite their life circumstances (Grothe, 1996; Werner, 1982). Since that time, resilience has gained momentum in counseling and psychology with the advent of the Positive Psychology Movement.

Next, the course defines and explains resilience and introduces Stuntzner and Hartley’s (2014) definition of resilience which is specifically tailored to persons with disabilities and the experience of liv-
ing with a disability. From these scholars’ definition, resilience is described as a set of skills that can be learned and people may have but for some reason are not working or have become inaccessible due to lack of use. Resilience is also viewed as a construct that can be applied to multiple parts of peoples’ lives, help improve their insight and coping abilities, and can be used to improve emotional and psychological functioning (Stuntzner, 2016). Following, content is provided to explain the relevance of resilience to disability and the needs of persons with disabilities. For instance, resilience may be used to help people adjust to the disability, deal with bias and societal attitudes, and cope with life changes that occur following a disability (Stuntzner & Hartley, 2014). People are encouraged to decide how and where resilience is to be applied and cultivated within their lives.

The unit concludes with multiple choice questions so the learner demonstrates mastery and learning. Unit 1 and each one that follows contains such questions as a part of the curriculum format. To help facilitate learning and understanding, counselors receive feedback about their answers as a part of the course. Following these questions, counselors are asked to reflect, consider, and apply resilience to their own life. The intent of this exercise is to encourage people to examine their thoughts, beliefs, and knowledge of resilience and the ways they currently practice it within their own lives. Starting with one’s own understanding is considered important because it is through the process of knowing how to apply and practice a particular skill that counselors can more effectively model it and assist the people they serve in cultivating it.

**Unit 2**

Unit 2 builds on the foundation provided in the previous unit. This unit focuses on the benefits of and barriers to resilience cultivation and the initial pursuance of resilience as a way of life. Therefore, the title of Unit 2 is called, “Barriers to Resilience and Cultivation of the Resilient Life.”

Unit 2 begins with encouraging counselors to assist persons with disabilities in recognizing what part of their life they would like to apply resilience to. Having a specific focus is suggested because oftentimes people may feel or become overwhelmed about where to start or how to apply resilience, especially in situations where it seems there is much to improve (Stuntzner & MacDonald, 2014a). Suggestions provided include picking one life domain or part of a person’s life where the person is having difficulty and would like to improve (i.e., personal life, family relationships, employment situation).

Next, learners are introduced to the benefits of resilience followed by the barriers to cultivating resilience. Learning about the benefits of resilience and barriers that may be experienced in the cultivation of resilience is essential as this information may serve as both an educational learning device and as a means to help people move forward. More specifically, some people may need additional learning and insight before fully embracing resilience, and the content provided gives people helpful information they can use and consider while deciding if they are or are not going to work on developing and building resilience-based skills.

Finally, the unit concludes with information about the pursuance and cultivation of resilience. Of particular interest is the idea that resilience cultivation involves multiple paths; thus, people can develop resilience and resilience-based skills in a number of different ways. Counselors working with people on resilience are encouraged to explore strategies and techniques that work for the people they serve as well as those they believe would be of value in the work they do.

Following the conclusion of Unit 2, learners are asked to complete multiple choice questions and apply the content they learned to a professional model. As a part of the professional model, counselors are to brainstorm three places in the rehabilitation process in which they feel resilience could be initially introduced. Next, they are asked to consider barriers people might encounter or experience that inhibit the resilience-building process, strategies to reduce the barriers, and techniques the counselor can infuse and integrate into one’s own life so they can more effectively model resilience as a key component of their life and work.
Unit 3

Unit 3 is entitled, “Introduction to Factors Associated with Resilience and their Application to Person with Disabilities.” As the title implies, the focus of this unit is to introduce various factors and skills associated with resilience and to educate counselors further about the ways they help people with disabilities. Because Units 4 to 6 discuss resilience-based factors in depth, this unit gives an overview of resilience-based factors and provides the learner with a framework that divides these factors into three categories: skills related to a person’s thoughts and feelings (i.e., locus of control, mental and emotional regulation), skills pertaining to spirituality and spiritual practices (i.e., forgiveness, self-compassion, meaning-making), and skills understood as a mixture of approaches but ones that can be intentionally cultivated or improved (i.e., social support, humor, hardness) (see CRCC, 2016).

A second essential feature of this unit is to help counselors reflect on and consider ways they can actively recognize resilience-based skills used by persons with disabilities. As indicated previously, but reinforced by Stuntzner and Hartley (2014) as a part of this unit, are the multiple ways resilience-based skills can help people with disabilities (i.e., adjust to the disability, learn to self-advocate, increase self-confidence). While the list provided should not be considered exhaustive, it provides the learner with examples of the numerous issues of importance and relevance to which resilience can be applied.

In an effort to provide further clarity, counselors are exposed to content and examples of how resilience and resilience-based skills are related to employment concerns and can be infused into the rehabilitation counseling process. Counselors are then given a case scenario to help illustrate ways they can train themselves to identify and recognize resilience-based skills discussed as a part of the rehabilitation counseling process. When counselors are able to see the skills and abilities people have, they are then able to assist the people they serve in recognizing them within themselves. A key feature of identifying a person’s resilience-based skills lies in the counselor’s ability to ‘listen’ to peoples’ stories and recount of how they have successfully gotten through and/or overcame difficult and challenging life events. Some of the skills and strategies identified through these personal recollections serve as an initial starting place from which to discuss, build, or enhance resilience, especially given the fact that people learn to recognize the abilities they have within themselves to overcome and move past challenging life events.

Counselors completing this course are provided with additional learning and reinforcement opportunities by applying the content learned to multiple choice questions and to a case study. The case study encourages counselors to think about the resilience-based skills someone has, barriers that might be encountered as a part of the resilience-building process, and ways they can help someone recognize the resilience-based skills a person has and can access.

Unit 4

Unit 4 focuses on resilience-based skills related to a person’s thoughts, feelings, and behaviors. Identifying one’s thoughts, feelings, and behaviors is essential because each of these is related to and affect one another. More specifically, when people have negative thoughts and beliefs, these beliefs are often accompanied by negative feelings (i.e., anger, depression, anxiety) which then lead to undesired behaviors (i.e., inaction, passiveness, withdrawal) (Beck, 2011). People who recognize the presence of negative thoughts, feelings, and behaviors are in a position to change them and improve their coping style, abilities, and level of resilience. In an effort to capture the essence of these as crucial resilience-based skills, Unit four is entitled, “Understanding Resilience Factors Associated with Thoughts, Feelings, and Behaviors: Identifying and Changing those that are Negative.”

Unit 4 begins with a discussion of resilience-based factors associated with a person’s thoughts, feelings, and behaviors. Resilience skills covered include attitudes and beliefs, locus of control, mental and emotional regulation, flexibility, and problem-solving skills (CRCC, 2016). Many of these have been cited throughout the literature as factors that enhance or lead to resilience and/or are
associated with positive coping following disability (Black & Lobo, 2008; Dunn & Brody, 2008; Horn, 2013; Kumpfer, 1999; Miller, 2003; Moore, 2014; Waugh, Thompson & Gotlib, 2011); oftentimes such skills are an essential feature of both which adds further strength to the fact that these skills help people cope, bounce back, and be resilient following a major life change such as acquiring or living with a disability.

Learning to be resilient following disability involves more than recognition of one’s thoughts, feelings, and behaviors and the ways people cope with adversity or difficult life events. Resilience also includes the ability to identify barriers that may impede or hinder the resilience-building process. Barriers experienced may be self-induced or other-induced (Stuntzner, 2014, 2015). Self-induced barriers are those things people believe, feel, or do, intentional or not, that make an already difficult situation worse; while, other-induced barriers include external situations or individuals that create the hurdle which must be overcome by the person with a disability (Stuntzner, 2015). Neither one of these are pleasant to deal with and overcome; yet, it is through the process of being honest with oneself about the origin of barriers and whether or not someone is contributing to the issue that helps the person with a disability decide on his or her next course of action. In essence, by understanding where the barrier originates, people can decide what they need to change within themselves or their situation to overcome those they are currently experiencing.

Related but different is the notion of self-regulation and its role in resilience. Being able to self-regulate one’s thoughts and feelings is an important component of living a well-balanced and resilient life. People learning about resilience and how to apply it to their lives and specific set of circumstances, sometimes uncover parts of themselves they never knew they had, many of which are hard to look at and self-examine (Stuntzner & MacDonald 2014a, 2014b). For this reason, it is imperative that people learn how to self-regulate their thoughts and emotions and improve their overall functioning. Strategies to help people do that are covered as part of this course.

Counselors completing this unit are given an opportunity to apply the content by learning how to identify a number of resilience-based factors. Thus, the unit closes with a number of statements which may reflect some of those stated by people with disabilities. Counselors are asked to read each statement and decide if it is positive or negative followed by if it reflects a person’s thoughts, feelings, or behaviors. Next, counselors are asked to go back and identify the specific type of resilience-based skill the statement is associated with so they can help the person determine if it is or is not a useful coping skill. Following this practical exercise, counselors have another opportunity for applied learning through the completion of multiple choice questions and an applied case study. By the end of this unit, learners are given the opportunity to learn about numerous resilience-based factors associated with a person’s thoughts, feelings, and behaviors as well as much practice in identifying them as a part of the counseling relationship.

Unit 5

Spirituality and individualized spiritual practices have long been cited as an important component of positive coping and adjustment to disability (Gaventa, 2014; Willoughby, Brown, King, Specht, & Smith, 2003). More recently, spirituality has been reported as a component of resiliency (Moore, 2014; Southwick & Charney, 2012). Spirituality and chosen spiritual practices are individually tailored to each person’s beliefs, values, and view of the world; it may or may not include specific religious beliefs (Tanyi, 2006). For this reason, it is imperative that counselors approach this aspect of people’s lives from their understanding, perspective, and set of beliefs. Regardless of a person’s beliefs and practices, several factors and skills associated with resilience are relevant and can be used in the cultivation and pursuit of resilience.

Unit 5, entitled, “Spiritual and Personal Factors Associated with Resilience: Knowing what is Helpful throughout One’s Life” educates counselors about those spiritually-based factors related to resilience. Resilience-based factors comprised of spiritual practices include: spirituality and the practice of spirituality, forgiveness, gratitude, compassion and
self-compassion, hope, meaning-making and finding purpose, and personal growth or transcendence (CRCC, 2016). Each of these are introduced and discussed as a part of Unit 5.

Counselors exploring the presence and practice of spirituality in people’s lives may feel uncomfortable approaching this topic as a part of the counseling or the rehabilitation process. Nonetheless, given the importance of spirituality, it is imperative that counselors examine their own issues or potential barriers in allowing spirituality to be a part of the counseling process. Understanding one’s own comfort or discomfort and personal obstacles in discussing spirituality and spiritual practices is essential as the people they serve may have a need to examine some of their own barriers associated with spirituality and personal growth. Counselors can be instrumental in helping people recognize any negative thoughts, feelings, or behaviors they have associated with this part of their life so they can address them and focus on identifying skills and techniques that help them overcome these barriers and move forward with one’s own spiritual and personal growth.

Related, but somewhat different, is the exploration and use of forgiveness, compassion, and self-compassion as part of the rehabilitation and counseling process. In an effort to aide counselors in improving their comfort with these three approaches, information is provided to help them make the connection in understanding the role each of these have in relation to people with disabilities, positive coping, and the benefits they hold for the person actively pursuing one or more of these areas. Also of relevance is the fact that improvement in one area (i.e., self-compassion) may lead to improvement in another (i.e., forgiveness) (Stuntzner, Dalton, & MacDonald, 2017).

Unit 5 concludes with an opportunity to practice identifying the presence, effect, and use of spirituality within people’s lives. Similar to Unit 4, counselors are given multiple examples and opportunities to recognize spirituality and spiritual practices in the lives of the people they serve. In essence, counselors are given a number of statements that reflect someone’s thoughts, feelings, or behaviors in relation to spirituality. Learners, on separate occasions, are asked to determine if the statement is positive or negative, whether it gives the counselor insight into a person’s thoughts, feelings, or behaviors; and to identify the resilience skill category the statement might fall into (i.e., forgiveness, gratitude, hope). Such practice helps reinforce the content covered throughout the unit as well as increase the counselor’s ability to correctly identify the specific resilience-based skill the person is using. Additional learning and reinforcement opportunities are provided through the use of multiple choice and application questions and a case study. By the time counselors complete this unit, they will have had a lot of exposure and practice at recognizing and using resilience-based factors associated with spirituality and hopefully, feel more comfortable in the exploration of this area in peoples’ lives.

Unit 6

The third category of resilience-based skills covered throughout this course are those that can be enhanced or cultivated. For this reason, the title of Unit 6 is “Resilience Factors That Can Be Enhanced, Cultivated, or Improved: Consideration of Other Useful Skills.” Unit 6 discusses a mixture of skills that can be improved over time. Resilience-based skills discussed include building social and family support, being exposed to positive role models, developing hardiness, positive character traits, and humor; and becoming more optimistic. Some of these are related to relationships while others focus on personal traits and personality features. Because there is a composite of resiliency skills that differ but can be developed, those listed are categorized based on the commonality that they can be cultivated despite a person’s beginning point (CRCC, 2016).

Understanding and fully appreciating that people can improve their coping abilities and resilience is essential. Having the ability to develop, build, or enhance one’s skills gives people a sense of hope and some insight into the fact that they can do something to improve their situation and the ways they cope. As is evident throughout the course, people become stronger and more resilient when they have numerous resilience-based skills to choose from. Part of this is because having multiple resiliency skills gives
people options to select and use those that are most relevant to one's situation, but part of it is because some skills don't do what people need them to in a particular situation so they need to do something else (Pulley & Wakefield, 2001; Stuntzner, 2017). Related is the fact that no one set of resiliency skills works in all situations nor can people be resilient in all areas of their life all the time (Southwick & Charney, 2012); thus, the more skills people have to choose from and cultivate the better their chances of being resilient when faced with difficult life events.

Following a discussion of the seven skills presented in this unit, counselors are given another learning opportunity to identify resiliency-based skills through the stories and experiences of the people they serve. People working with persons with disabilities can learn much about their coping abilities and resiliency-based skills when they listen to their experiences and engage in further dialogue. Counselors may use specific points in the rehabilitation process to help them recognize the skills people use. Examples include the “initial interview, counseling sessions, planning phases of the rehabilitation plan, job development phase, and any crucial planning point prior to case closure” (CRCC, 2016, p. 118). Being aware of the times or places counselors can listen and explore resiliency-based skills is only one component; the remaining features involve being able to identify the skills used, whether they are positive or negative, and if any of these skills are ones the individual wants to build or improve.

In the next section, counselors are given a number of examples and strategies they can use to help people with disabilities build and improve their resiliency-based skills. For instance, as a part of this section, learners are exposed to a personal intake form. What is unique about this form, is the fact that it asks people to rank order from 1 to 7 the resiliency/coping skills that are most useful to them. Next, they are asked to describe how those they ranked as useful helped them overcome a challenging situation. People are also asked about those they would like to learn about or improve as a part of the rehabilitation or counseling process (CRCC, 2016). While professionals may find some of the strategies useful to implement as a part of their own practice, the author also encourages them to consider ones they could develop and use that fit their specific situation and the needs of the people they serve. Finding approaches and strategies that people can use that are specifically tailored to their situation is essential as this will help counselors better meet the needs of people with disabilities.

Unit 6 concludes with a case study and another opportunity for counselors to apply what they learned. Following the case study, learners are exposed to statements the person said throughout the case study. Each of these are categorized into a resilience skill domain (i.e., social support, positive role models), along with feedback about whether or not it represents a skill the person has or could improve upon. The applied example is given to help learners recognize the depth of information they can glean from personal interactions and counseling sessions as it relates to resilience. Following the case study, learners are given more learning opportunities to apply what they know and includes answering multiple choice questions, completing exercises, and working through another case scenario. Similar to the example provided earlier, learners are asked to identify and categorize statements according to the resiliency-based skill it belongs to.

Unit 7

Unit 7 is the final section and is entitled, “Applying the Knowledge and Skills Learned.” As indicated by the title, this unit provides learners with an opportunity to review content presented throughout the course, apply it to counselors’ specific employment situation, and develop a “working model” from which counselors could address and help others learn about resilience and resiliency-based skills. In essence, Unit 7 is a review of the information learned followed by a period of personal and professional reflection. Making time for reflection is essential as it helps people recognize the relevance of what they have been learning and the content's utility to their life and that of persons with disabilities. More specifically, the unit challenges counselors to think about skills they learned, those they want to explore further, resilience-based skills they do or don’t use as a part of their daily life, as well as their own ideas of how to cultivate it in their lives while
they assist others in doing the same. Additionally, counselors are asked to consider a working model they could use to help build and promote resilience within the people they serve (CRCC, 2016). Having a working model from which to conceptualize and teach resilience can be an instrumental tool as it may provide clarity about the counselor’s view of resilience and strategies they can use to assist people in learning about and utilizing resilience as a key component of their lives.

Similar to previous sections, the unit concludes with multiple choice questions and application exercises. An essential feature of the application exercises includes counselors crafting a model or plan to increase resilience among the people they serve. For some, conceptualization and development of such a model may be daunting; thus, the author provided a visual model as an illustration of one way to conceptualize and build resilience. However, learners are encouraged to consider what they have learned and to develop their own. Having a meaningful model or approach to building resilience is important, particularly given the fact that there is not “one right way” to do so (Boss, 2006). Of most importance is for counselors to find one along with specific strategies that are of relevance and meaning to persons with disabilities and their particular situation.

**Professional Implications**

Counselors completing the aforementioned course are afforded an opportunity to learn about resilience, resilience-based skills, information about how resilience is relevant to persons with disabilities, benefits of and barriers to cultivating resilience, ways they can identify and assist others in recognizing resilience-based skills, and strategies they can use to initiate discussions and exploration of resilience-based skills. Counselors are also able to reflect on their own use of resilience, its applicability to their own lives, and ways they might conceptualize resilience and model it in their work amongst persons with disabilities. By the end of the course, professionals are encouraged to come full-circle with their learning and consider how they might develop a working model for approaching and assisting people with disabilities in learning about and accessing resilience-based skills in their own lives (see CRCC, 2016).

Second, counselors are likely to find that the course is fairly easy to follow and understand. The course was developed so that each unit builds upon the previous one, is applied in nature, focuses on resilience and resilience-based skills as it relates to people with disabilities, and provides counselors with several opportunities to improve their skill and comfort as it relates to the topic of resilience. It was designed to improve peoples’ knowledge and comfort with resilience and how it could be used as a part of the rehabilitation and the counseling process. Being comfortable with a new skill or topic, such as resilience, is essential because the more competent counselors feel when working with it, the easier it will be for them to help others learn about and integrate it in their own lives.

Third, counselors are encouraged to use the information and examples as a starting point, while also earning CEUs, to expand their knowledge of resilience and the role of resilience as a key component of positive functioning throughout and following the rehabilitation counseling process. In an effort to help counselors understand potential ways to utilize and integrate resilience into the rehabilitation or the counseling process, specific strategies and examples are outlined in Unit 6. While these approaches are not all encompassing, they do provide learners with the opportunity to see and brainstorm methods they might use as a part of their employment environment.

Finally, counselors completing this course may use it as a foundational platform and decide to further their knowledge and competence as it relates to resilience and resilience-cultivation. Since there are multiple pathways to building resilience, counselors can continue their learning about resilience in various ways. For instance, they may elect to attend additional trainings and workshops at state and national conferences (i.e., ACA, ARCA, NCRE, and NRA). Some may decide to explore the use of existing resilience-based interventions (e.g., Stuntzner and Hartley’s Life Enhancement Intervention: Developing Resiliency Skills Following Disability) as a part of their counseling practice. Related is the idea that counselors may use the course as a springboard to develop a resilience skill-building program as a
part of their agency or professional practice. Still others, might choose a more informal route such as to improve their knowledge and understanding of resilience by accessing books and articles pertaining to resilience. As a part of this course, counselors are exposed to a number of those utilized as part of the course development and some of these may be of interest to professionals wanting to learn more about resilience. Counselors also have the option to read other books that focus on the topics of resilience and disability, some of which include: Chronic Resilience: Ten Sanity Saving Strategies for Women Coping with the Stress of Illness (Horn, 2003), Resilience: Learning from People with Disabilities and the Turning Point in their Lives (King, Brown, & Smith, 2003), Reflections from the Past: Life Lessons for Better Living (Stutzner, 2014), Resilience and Coping with Disability: The Family After (Stutzner, 2015), and Resilience in Deaf Children: Adaptation through Emerging Adulthood (Zand & Pierce, 2011).

Regardless of the path chosen to enhance and refine one’s knowledge of resilience, counselors are reminded that there are multiple pathways of doing so. The key is for people, counselors, and persons with disabilities to find one that works them and is useful in helping them build and maintain resilience and later strengthen it. Strengthening resilience, once cultivated is encouraged because life often brings unexpected changes. Some of these changes require people to access and draw upon new or existing resilience-based skills to cope with the situation at hand. Sometimes, resilience involves the cultivation of other skills because people may find that resilience-based skills other than those previously used are required to positively cope with the situation. For these reasons, it is important that people understand the notion that resilience cultivation, maintenance, and improvement is a never ending process; rather, it is a continual journey, but one that gets easier with conscious practice.

References


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