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Supporting children's mental resilience – guidance for parents and carers

Wspieranie odporności psychicznej dzieci – wskazówki dla rodziców i opiekunów

Abstract

Aim. The issue of the mental resilience of children and young people has recently been widely analysed and discussed by various scientific bodies. The mental condition of the youngest generation appears to us in rather dark colours. Anxiety disorders and depression are increasing exponentially every year. Young people often speak of experiencing high levels of stress, insecurity, and lack of self-confidence. The relatively recent Covid-19 pandemic significantly worsened the psycho-social functioning of children and adolescents by marking them with forced isolation, feelings of loneliness and emptiness, excessive stress, and the experience of multiple losses. Researchers and specialist practitioners working in therapy practices on a daily basis are intensively looking for new solutions, and different ways to support and help the younger generation.

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Methods and materials. The topics of the presented article are about supporting children's mental resilience. The following issues were theoretically analysed: the understanding of mental resilience in different scientific concepts – models of mental resilience, protective factors and risk factors for the healthy mental development of the child, characteristics of the mentally resilient child, and the importance of how the child is cared for.
Results and conclusion. Much attention has been paid to emphasising the huge role of parents and carers in shaping and strengthening children's mental resilience. Therefore, the final section of the article provides tips for parents and carers on how they can support resilience in their children.

Keywords: children's mental resilience, mental resilience model, family, parents, help and support.

Abstrakt

Cel. Zagadnienie odporności psychicznej dzieci i młodzieży jest w ostatnim czasie szeroko analizowane i dyskutowane w różnych gremiach naukowych. Kondycja psychiczna najmłodszego pokolenia jawi się nam w dość ciemnych barwach. Co roku obserwujemy lawinowy wzrost zaburzeń lękowych i zachorowań na depresję. Osoby młode często mówią o doskwierających im: dużym stresie, poczuciu niepewności, braku wiary w siebie. Miniona pandemia Covid-19 znacznie pogorszyła psychospołeczne funkcjonowanie dzieci i młodzieży, doświadczyły przymusowej izolacji, poczucia osamotnienia i pustki, nadmiernego stresu, wielu strat. Badacze i specjaliści – praktycy pracujący na co dzień w gabinetach – intensywnie poszukują nowych rozwiązań, różnych sposobów wsparcia i pomocy młodemu pokoleniu.
Metody i materiały. Tematyka prezentowanego artykułu dotyczy wspierania odporności psychicznej dzieci. Analizie teoretycznej poddano następujące zagadnienia: rozumienie odporności psychicznej w różnych koncepcjach naukowych – modele odporności psychicznej, czynniki ochronne i czynniki ryzyka dla zdrowego rozwoju psychicznego dziecka, charakterystyka dziecka odpornego psychicznie, znaczenie sposobu sprawowania nad nim opieki.
Wyniki i wnioski. Dużo uwagi poświęcono zaakcentowaniu ogromnej roli rodziców i opiekunów w kształtowaniu i wzmacnianiu odporności psychicznej dzieci, miedzy innymi podkreślając zasadę „odporni rodzice – odporne dzieci", wskazując na ogromny wpływ zasobów psychicznych rodziny w kształtowaniu odporności psychicznej dziecka. Ostatnią część artykułu stanowią z kolei wskazówki dla rodziców i opiekunów odnośnie do sposobów, w jakie mogą wspierać odporność u swoich dzieci.

Słowa kluczowe: odporność psychiczna dzieci, model odporności psychicznej, rodzina, rodzice, pomoc i wsparcie.

Introduction

The world we live in is described by numerous researchers as hectic and filled with overwhelming stress, as being fragmented, fluid or highly uncertain and risky. Never before have mental health professionals observed such a large increase in the number of anxiety disorders and cases of depression in children and adolescents compared to previous decades. There is also evidence of a worrying increase in the number of suicide attempts (1,496 attempts in 2021, including 85 by children under 12) (Szredzińska, 2022), as well as the poor and insufficient psychiatric and psychotherapeutic care still aimed at the youngest generation of Poles. Young people often say that they are bothered by:
   - high stress,
   - feeling of uncertainty,
   - lack of self-confidence,
   - low mental well-being,
   - dissatisfaction with one's life.

It should not be forgotten that the recent Covid-19 pandemic also had an impact on the above situation. It has (to varying degrees) affected the psychosocial functioning of children and young people, who have experienced forced isolation, feelings of loneliness and emptiness, excessive stress, many losses, but also an increase in unhealthy behaviours (Pyżalski, 2022). In the context of the above information, it can be concluded that the mental health of the contemporary generation of children and young people in Poland is a cause for great concern, which is reflected in the growing interest of researchers and specialists working in therapy practices in the issue of mental resilience and their search for effective ways to build and strengthen it. In my daily work as a child and adolescent psychotherapist and community therapist, I meet young people experiencing a mental health crisis and their parents. I observe the struggles of adult carers, often feeling a great sense of helplessness and powerlessness, as they try to support their children on the road to recovery. In my experience, both working with the child in the office and proper psychoeducation of parents regarding their influence on the shaping of their offspring's mental resilience can bring fruitful results. Emphasis on increasing and strengthening the mental resilience of children and teenagers should become a priority in the health education of society and be essential in ensuring an optimal start in life. Parents' knowledge and skills on how to support their child's mental health should form the basis of their daily parenting activities, beneficial to their offspring's growth and development.

Based on the above reflections, I came up with the idea of writing a text on building, supporting and strengthening the resilience of children and young people. In addi-

tion to discussing the theoretical basis of the phenomenon of mental resilience, I also wanted to show the important role of parents in the process of shaping it. Finally, I have included some practical tips and suggestions for parental interventions to strengthen the immune system of children.

Resilience – what exactly is it?

The topic of *mental resilience* is a field of interest for medicine, psychiatry, psychology (health, social and developmental), and health education. Long before the concept of mental resilience was developed, researchers were wondering what makes some people who have experienced serious crises, challenges and events in their lives able to adapt to their environment and function optimally and harmoniously. What mechanisms enable these people to cope with the adversities that come their way? What makes some individuals vulnerable to the negative consequences of such experiences, while others are somehow better protected from them? (Masten, 2018). The experiences of past generations, particularly those marked by the Great Depression, wars and the numerous losses suffered by children and entire families, inspired researchers to explore this topic even more intensively in search of answers to their questions. At the time, people who experienced traumatic events (including catastrophes, violence, war conflicts, economic crises, torture, separation, or homelessness) were subjected to research. The researchers were interested in the patterns of typical reactions, ways of regaining balance, as well as individual differences in the studied individuals (Masten, Narayan, Silverman, & Osofsky, 2015). Four strands of research into the phenomenon of resilience can be identified. The first, dating back to the 1970s, was a pioneering strand of research that assumed that an individual who can cope and develop properly despite adverse conditions that realistically threaten their optimal functioning (such as the mental illness of a parent, violence, a family with alcohol or drug problems, a family after a divorce or a low socio-economic status of the family) can be described as mentally resilient. During this time, researchers focused on both risks and the identification of protective factors (i.e., factors that reduce or neutralise the effects of risk factors) that promote good coping in difficult circumstances. During this time, attention was also paid to the internal resources of children and young people (Sikorska, 2016; Sikorska, Sajdera, & Paluch-Chrabąszcz, 2017).

The second research trend treated the phenomenon of resilience as a dynamic process in which risk factors interact with protective factors (individual and social). Researchers searched for mechanisms that could modify risk factors in the lives of children and adolescents. Theoretical models explaining the aforementioned interactions between risk and protective factors as well as specific intervention strategies aimed

at supporting resilience processes among minors from high-risk groups were described (Borucka, Pisarska, 2024).

The third line of research focused on the practical application of the idea of resilience. Strengthening the mental resilience of children and young people through promotion, prevention, intervention and the creation of a protection system. The research indicated a significant contribution of both internal and external resources to the phenomenon of resilience. The programmes that were developed were aimed at children and their families from high-risk groups. It was important for the programmes to activate or strengthen the processes of resilience by improving the relationships between children and their parents, increasing the educational skills of adult carers and strengthening family ties. Some programmes were addressed to specific recipients, considering the specificity of racial affiliation and ethnic origin (Borucka, 2011).

The latest, fourth trend in research on mental resilience, which is the result of knowledge gained and experience gathered during previous research, has enabled the creation of interdisciplinary models to explain the phenomenon of resilience. The research, which is based on biological, neurological and social sciences, has deepened our knowledge of the phenomenon, its underlying processes and interrelationships, paving the way for cooperation between many scientists (Borucka, Pisarska, 2024).

As Anna Borucka (2011) points out, there has been a lively discussion around the concept of resilience for several decades, including "[...] an attempt to explain the phenomenon of an individual functioning well despite unfavourable living conditions, adversity or traumatic events" (p. 11). The common denominator (goal) for all research endeavours is to find an effective way to prevent psychopathology and "[…] actively support the positive psychosocial development of children from high-risk groups" (Borucka, 2011, p. 12). The concept of resilience comes from the Latin verb *salire,* which means to spring, to arise, or *resilire* (Latin) – to bounce back, to return to a previous state (Junik, 2011). According to the *Słownik Języka Polskiego* (2024) [Dictionary of the Polish Language], resilience is "1. the ability to cope with sudden problems; 2. endurance, resistance to various forces" (*Słownik Języka Polskiego*, online).

When analysing Polish literature in this field, a clearly outlined terminological dilemma concerning the concept of *resilience* in question can be seen. Some authors, such as Anna Borucka and Krzysztof Ostaszewski (2008), stick to the English word resilience, while others (such as Wioletta Junik, 2011) polonize (put into Polish) it and use the term *rezyliencja*. Other terms that appear include resilience, which can be found in the works of Nina Ogińska-Bulik (2011) and Zygfryd Juczyński (2012). In Polish studies, one can also find the terms *sprężystość psychiczna* (Kaczmarek, Sęk, Ziarko, 2011) and *odporność psychiczna* (Grzegorzewska, 2011b, 2013; Opora, 2008). I consider the last term to be the best one to describe the idea of resilience and will use it in the rest of the text, as I consider it to be the most appropriate in the context

of the psychological understanding of "[…] the phenomenon of an individual's ability to develop positively despite adverse life events" (Grzegorzewska, 2013, p. 43). When analysing the various definitions of mental resilience, it can be seen that some authors regard it as a certain permanent characteristic found in children. However, the vast majority of researchers favour the understanding of the phenomenon of mental resilience as "[…] a multidimensional process of coping with adverse developmental conditions and leading to positive adaptation" (Grzegorzewska, 2011a, p. 135). In this process, unfavourable risk factors interact with individual, family and non-family protective factors, reducing or offsetting the negative impact of the former.

Risk factors and sources of resilience (protective factors) for children and adolescents

Traumatic experiences are among the risk factors, i.e., threats to the healthy psychological development of children and adolescents. It is worth outlining the main groups of such factors here. The first refers to factors related to the family environment of young people. These include:

– families with alcohol, drug and other mental health problems,
– families with low socio-economic status,
– families after the parents have separated (divorce),
– children after traumatic experiences (sexual abuse),
– children growing up in care institutions (Borucka, Okulicz-Kozaryn, & Pisarska, 2006).

Another large group of risk factors are traumatic life events, stress and various misfortunes. This group includes long-lasting events (e.g., war) as well as sudden, one-off accidents and disasters. The occurrence of these factors is independent of the child and his or her relatives, but the effects of these situations make themselves felt in the form of post-traumatic stress disorder. In turn, when considering the factors on the part of the child itself that fall under the risk category, i.e. individual factors, the following can be indicated:

– poor health,
– low intellectual potential,
– difficult temperament,
– insecure attachment to parents/carers (Sikorska, Sajdera, & Paluch-Chrabąszcz, 2017).

Protective factors are "[...] elements in a person's life that work to reduce the negative effects of stress and support their positive development" (Kuzawińska, 2024, p. 26). Many researchers emphasise the importance of external and internal factors that favour

the processes of positive adaptation of an individual, despite unfavourable conditions. Researchers of the phenomenon of mental resilience, including Norman Garmezy and Ann S. Masten (as cited in Sikorska, Sajdera, & Paluch-Chrabąszcz, 2017), have identified basic groups of protective factors. These are:

– individual factors of the child (including optimal cognitive functioning, sociability as a temperamental variable, sense of humour, positive self-image, belief in one's abilities and effectiveness, well-developed social mechanisms, verbal abilities, high level of motivation in terms of life and educational plans and goals),

– characteristics of the family environment (compatibility, family cohesion, warmth, parents' involvement in raising children, good relations between family members, good financial situation),

– characteristics of the non-family social environment (local community, characteristics of the society's politics and culture), such as the school climate, support from adults, teachers, or other educational institutions (Ryś, Trzęsowska-Greszta, 2018; Sikorska, 2016; Sikorska, Sajdera, &Paluch-Chrabąszcz, 2017).

Longitudinal studies have identified personal factors of resilience that make children brave and strong. These are:

– the ability to solve problems at an age-appropriate level,
– positive self-determination,
– good self-esteem,
– self-confidence,
– an age-appropriate self-image,
– the ability to self-regulate and manage oneself,
– a sense of internal control,
– high social competence and the ability to accept help from others,
– a flexible and proactive approach to stressful situations,
– behaviour indicating secure attachment,
– a sense of internal control,
– high social competence and the ability to accept help from others,
– a flexible and proactive approach to stressful situations,
– behaviour indicating secure attachment,
– an optimistic outlook on life,
– physical health resources (Sikorska, 2016).

Mental resilience is a multidimensional process. When raising children and young people, we need to remember to strengthen protective factors and the resources of individuals and try to eliminate or reduce the harmful effects of risk factors. Taking

into account the position promoted by David H. Barlow, who claimed that a person's mental health "[...] is not a resource that some people are born with and others are not – that it needs to be built, cared for and supported every day" (Khanna, Kendal, 2024, p. 11) it is important to pay attention to the capabilities and resources of the family, especially parents and carers, in the process of supporting the mental resilience of their children, and to analyse them in detail.

The important role of parents and carers in the development of mental resilience in children and young people

The family environment is an incredibly important area of a child's life in which the foundations of their mental resilience, or lack thereof, can be sought. The influence of this environment on the functioning of children and adolescents "[...] can be positive, by supporting the development of the individual, or negative, by being a source of pathology" (Grzegorzewska, 2011a, p. 136). Edith Grotberg (2000) indicates that the strategies and ways of reacting that parents choose in different situations, as well as how they help children react to events, allow for the division of caregivers into those who support the development of resilience in their children and those who destroy it. This environment, and especially parental influences, have a huge impact on the occurrence of various types of disorders in children.

Two categories of factors building the mental resilience of children and adolescents related to the family environment can be identified. The first concerns the nature and specificity of the parent-child relationship (or other close relationships in the immediate family). The literature on the subject indicates two important dimensions of parental influence for this category, i.e., support and parental control, which are important for the good adaptation of children. The second concerns the structure of the family. In particular, the maintenance of family rules and rituals, a clear division of household chores, and distinct roles (Grzegorzewska, 2011a, 2013). As numerous studies have shown, family rituals are of particular importance in the process of building children's resilience. Having and practising family rituals characteristic of a given system plays an important role in organising the life of the family, and during times of rapid change, they strengthen its cohesion and stability (Grzegorzewska, 2011a).

The important factors that build a child's mental resilience related to the home environment include, above all, the emotional closeness of family members. These are nothing more than emotionally warm relationships that build a child's sense of ontological security. This support and help, interest in the child, expressed in the parents' concern for their needs, as well as in their sensitivity to them.

In the process of shaping a child's resilience, a good relationship with parents, a strong and stable bond, positive parental attitudes, or showing trust in the youngest family members play a significant role. In the context of the phenomenon discussed here, the ability to create conditions for children to develop initiative, independence, trust in others and optimism also becomes important (Grotberg, 2000). As Maria Ryś and Elżbieta Trzęsowska-Greszta (2018) indicate, the more parents provide their child with mature love, ensuring their acceptance and facilitating their independent actions, the more likely it is that the child will be able to cope with difficulties effectively.

Other areas of influence are intra-family communication, spending time together, and awareness of boundaries in upbringing. The importance of family communication in building a child's mental resilience takes on a special dimension. Healthy, open communication that is sensitive to the needs of all family members is the basic foundation for the positive development of children and adolescents. It creates space for sharing thoughts and emotions (both pleasant and unpleasant) and builds a space for growing in the belief that one is important, unique and loved. Therefore, high-quality parenting and positive relationships with the child are one of the strongest factors protecting against the development of problem behaviour.

Research on families (especially on how they cope with stress) has led to the extremely important conclusion in the context of the above considerations that "[...] a resilient family shapes a resilient child" (Sikorska, Adamczyk-Banach, Polak, 2021, p. 102). So what is it, and what are the characteristics of systems described as resilient? Family resilience can be defined as the family's ability to respond positively to adverse life events, from which the family emerges stronger, more stable and resourceful (Simon, Murphy, & Smith, 2005). Thus, it becomes an optimal environment for the development of a resilient child. In the literature (cf. Sikorska, Adamczyk-Banach, Polak, 2021), it can be found that family resilience is related to the way it reacts to stress. According to Walsh (as cited in Sikorska, Adamczyk-Banach, & Polak, 2021), three important areas can be identified in a family's response to a difficult situation. The first area covers beliefs and assumptions. This criterion consists of three areas:

– the family's beliefs about the adversity they have encountered, i.e., whether they perceive it as a threat or a challenge;
– optimism, understood as the mobilisation of the family's potential in the face of adversity;
– transcendence and spirituality, understood as the ability to find support through faith, social contact or contact with nature.

The second area consists of family functioning patterns, which the author includes:
– plasticity is understood as the family's ability to change,

- internal cohesion (mutual support),
- family economic resources (support from relatives, institutions, financial security).

The last area concerns communication and problem-solving in the family. In resilient systems, the following become important:

– open communication, the message of which is characterised as coherent and clear,

– open expression of emotions, the possibility of revealing one's own experiences,

– cooperation in solving problems, which is expressed in joint decision-making and creativity (Sikorska, Adamczyk-Banach, & Polak, 2021).

The resourcefulness of the family system is therefore transferred to the child. How important is the parent's own mental resilience for the child's development? In the specialist literature on this subject, the *mental resilience of the parent* is defined as the ability to be a competent parent, despite adverse conditions related to the child, family or community (Taylor, Conger, 2017). The characteristics of a resilient parent and their functioning can be summarised in four factors. The first is the parent's sense of self-efficacy, the belief in having an impact on their own life and the willingness to take on challenges. The second concerns the sense of mental well-being and satisfaction with one's life. The third includes a sense of social belonging and a network of friendly and supportive relationships. The last one concerns the quality of family functioning. All four areas have an impact – direct or indirect – on the quality of parenting and the mental resilience of an adult.

When analysing the important role of parents in shaping the resilience of their children, the style and standards of parenting and the constitution of a child's resources are important issues that cannot be ignored. Norman Constantin and his team (as cited in Sikorska, Adamczyk-Banach, & Polak, 2021) discovered that three forms of parental influence are linked to three factors of children's mental resilience. Firstly, supportive relationships with carers translate into the development of a child's social competence (their ability to communicate effectively, cooperate, show empathy, responsibility and flexibility in social situations). The second external parental influence is high expectations. Believing that the child is capable of meeting the challenge stimulates the development of inner strength and self-esteem as well as autonomy and a sense of self. The third form of influence is the expectation that the child will participate in relevant activities or events (competitions, charity events). These activities influence the development of a sense of purpose and meaning, the child's own belief that their life has meaning.

The above-mentioned and discussed parental behaviours become an important element in the process of building a child's mental resilience. Their role cannot be

overestimated. Below are some practical tips and suggestions for parental interventions aimed at building, increasing and supporting children's resilience.

How to support the mental resilience of children and young people – tips and inspiration for parents and carers

There are many ways to build and strengthen the mental resilience of children and young people. Below, I indicate those that, in my opinion, can be successfully practised in the family environment every day and bring benefits not only to the development of children's mental resilience but also to the whole system in the form of strengthening bonds, relationships and intra-family communication.

By way of introduction, I would like to point out a few general recommendations which, in my opinion, form the basis on which parents can build further activities aimed at strengthening the child's mental resilience. These are:
– self-awareness of the parent,
– constant presence and availability,
– mindfulness,
– acceptance and active listening,
– readiness to recognise individual protective factors and strengthen them in everyday life.

I will expand on these general recommendations below by proposing various parental interventions that are worth undertaking to build the mental resilience of children and adolescents.

Intervention 1 – Strengthening key resources for mental resilience using the concept of Edith Grotberg (2000)
According to the author, children use three sources of resilience to overcome difficult situations:
– I have,
– I am,
– I can.

The factors in the first category include "[...] external sources of support for the child that promote the development of resilience"(Grotberg, 2000, p. 24). Before children realise who they are (I am) or what they can do (I can), they need external support to develop a sense of security, which is the anchor for building the foundations of resilience. This support is extremely important throughout childhood. The factors in the I am

category consist of "[...] the child's own personal characteristics – feelings, attitudes, beliefs" (Grotberg, 2000, p. 26). The factors in the I can category, meanwhile, "[…] include the child's social and interpersonal skills. Children learn these through contact with others and from those who teach them" (Grotberg, 2000, p. 27). Thus, a resilient child will say as follow:

I have:
–   trusting relationships with others (which give a sense of security),
–   a clear structure and rules of conduct at home (in the form of clear and understandable boundaries),
–   social role models (showing the child desirable and accepted behaviour),
–   encouragement to be autonomous (space to be independent),
–   access to healthcare, education, social services and services guaranteeing public safety (creating an environment for the proper development of children).

I am:
–   loved, and my temperament attracts the friendly attention of others (the child is aware that others like and love them),
–   loving, empathetic and altruistic (the child loves others and shows this love in various ways),
–   proud of myself (the child knows that they are an important person),
–   independent and responsible (the child can perform various activities independently and bear the consequences),
–   full of hope, faith and trust (in themselves and their immediate environment).

I can:
–   communicate (to create healthy relationships with others, the child can express his/her thoughts, feelings, and needs),
–   solve problems (the child can assess the problem and knows what to do to solve it),
–   deal with their feelings and impulsivity (the child recognises their feelings, can name them, can self-regulate),
–   assess their own and others' temperament (ability to recognise and understand their own and others' character traits),
–   establish trusting relationships with others (the child can find an adult and ask for help, talk about feelings and problems, and look for solutions) (Grotberg, 2000).

Each of the above factors categorised into the three areas of "I have," "I am," and "I can," indicates an opportunity for adults and children to take action to develop and strengthen mental resilience. A psychologically resilient child does not always

have to display all the resilience resources from the three categories, but resilience is the result of their appropriate combination (Grotberg, 2000).

So how can this knowledge be put into practice? I suggest two ways. The first is self-reflection by the parent and taking conscious steps to support mental resilience. When analysing the individual categories, the following questions should be asked: "How can I develop a given resource in a child? What can I influence? What actions am I already taking and what results are they bringing? What do I need to develop resilience in myself and my child?"

The second way is to work with the child, to give them opportunities to strengthen key mental resilience resources, and to suggest exercises to help the child under-stand their abilities and resources. A perfect example is the "Resource tree" exercise. The materials needed are a sheet of paper and paints, crayons or felt-tip pens. Ask the child to paint a tree. The roots represent the category I am, the trunk represents the area I have, and the branches symbolise everything I can do. Younger children can paint, and older children should be encouraged to write down the resources (cf. Kuzawińska, 2024). This exercise perfectly illustrates a map of the child's strengths and skills, which can be the beginning of a conversation about resilience to difficult situations in their life. An interesting variant of this exercise can be a joint work of a par-ent and a child, during which each of them makes their own resource tree, and then discusses and compares them, looking for differences and similarities.

Intervention 2 – emotional education by parents and carers
In the process of building, strengthening and supporting a child's mental resilience, emotional education becomes extremely important. A child entering the world of emotions needs a mentor and interpreter in the form of an adult carer. Emotional education means developing the child's emotional intelligence in terms of recognising emotions, shaping emotional vocabulary, understanding the causes of emerging emo-tional states, knowing how to express emotions safely and constructively, learning self-regulation, developing empathy and building satisfying relationships. The role of parents in this regard mainly refers to modelling children's emotional behaviour, e.g. through messages that demonstrate the experience of various emotional states and creating an environment conducive to their expression.

It is extremely important to provide the child with tools and strategies to help them deal with emotions. This can be done through daily conversations (which can be seen as a ritual) in which each member of the household talks about what pleasant and unpleasant things happened to them today and what emotions were associated with these situations. In this way, children learn that all feelings can be discussed at home and that they are "welcome." This allows them to experience a sense of understanding, develop empathy and build a willingness to look for coping strategies. Another sug-

gestion for parents to use as part of emotional education can be various board games about emotions. The modern publishing market offers many aids in this regard. Games such as *Emotions*, *Discoveries* or *Mountain of Feelings* invite children to explore the world of their own and other people's emotions and motivate them to reflect on their resources. They become an excellent opportunity to build a relationship between parent and child, supporting mutual communication and understanding. Good tools for supporting emotional intelligence are emotion cards. They can be bought or made by yourself with your child (by drawing emoticons or searching for suitable pictures of adults or children expressing a given emotion). The cards can be used in many different ways, to help create stories about emotions, to recognise emotions in oneself and others, to tell stories and to find ways to deal with them constructively. For slightly older children, metaphorical cards can be suggested and used to invite the child to talk about emotions. An interesting proposal to strengthen the parent-child relationship is to use the rich literature for children and young people in this area. Books that deal with emotions, such as *Kolorowy potwór* [Colourful monster] (2021) or *Kolorowy potwór. Doktor od emocji* [The colourful monster. Doctor of emotions] (2023) by Anna Llenas can inspire parents to do many interesting activities and talk to their children about their emotional states. For older children, it is worth suggesting the series by Tina Oziewicz with wonderful illustrations by Aleksandra Zając: *Co robią uczucia?* [What feelings do?] (2020), *Co lubią uczucia?* [What do feeling like?] (2022), and *Co uczucia robią nocą?* [What feelings do at night?] (2023). It is also worth thinking about a film screening together. The cartoons *W głowie się nie mieści* [Inside Out] and *W głowie się nie mieści II* [Inside Out II] will enrich the emotional education of children and their carers.

Intervention No. 3 – promoting stress management skills

Every child will experience situations in which he or she feels overwhelmed. Numerous difficulties and challenges arise in the course of a child's psychosocial development. Children need support and understanding for their emotions and the optimistic support of an adult who knows how to deal with these difficulties. In this area, the tasks of parents can consist of providing information and knowledge about the symptoms of stress in a child, supporting them in confronting their fears and anxieties, and teaching the child various breathing and relaxation techniques to help them cope with stress. From this point of view, it is important to talk about what makes a child feel safe, comfortable, happy and relaxed. Literature for children and young people can also become a tool to support their mental resilience. The book and workbook in one by Urszula Młodnicka and Agnieszka Waligura *Odwagi Pinku. Książka o odporności psychicznej dla dzieci i dla rodziców trochę też* [Be brave, Pinku. A book about mental resilience for children and parents too]

(2023) is a great source of information on how to deal with the difficulties a child encounters in life. The cute blue creature Pink guides young readers through numerous stories from his life, similar to those experienced by children daily as they face problems and difficult moments. The book teaches how to deal with adversity, build courage and achieve goals despite fear. Another interesting proposal is the book with exercises and an appendix called a toolbox for parents and therapists entitled *Mopsik i poczucie bezpieczeństwa* [Pug and a sense of security] (2023) by Dr Karen Treisman. This book introduces children in an accessible way to the world of regulation, relaxation and self-soothing in situations where they feel insecure, worried, upset, stressed and overburdened.

Using the books is only part of the job. The parent must become a role model for their child in similar stressful situations in their life, not only talking to the child about these techniques but also practising deep breathing, relaxation or visualisations themselves and inviting the child to do the exercises and games together. The parent was open to discussing the child's difficulties with them and was able to recognise and accept the child's feelings and the world of their inner experiences.

Conclusion

In the context of growing health challenges, such as the increase in anxiety and depressive disorders among children and adolescents, research on mental resilience demonstrates its crucial role in ensuring the mental health of the younger generation. A review of the literature has allowed for the identification of significant risk and protective factors. The analysed material indicates that positive family relationships, emotional support and the stability of the family structure play an important role in shaping children's mental resilience. Emotional closeness, parental involvement and the structure of family rituals and rules have also proved significant.

In practical terms, the results of the analysis indicate the need to invest in health education and psychoeducation for parents so that they can effectively support the mental resilience of children and adolescents. Support programmes aimed at families should focus on strengthening family relationships, developing parenting skills and supporting the positive adaptation of children in changing conditions. The interventions described in the text that build, strengthen and support the child's development of mental resilience are only a fraction of the rich repertoire of existing possibilities available to every parent in this area. In the future, it is worth continuing research into protective factors and strategies that strengthen mental resilience, taking into account new challenges such as climate change and global health crises.

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