

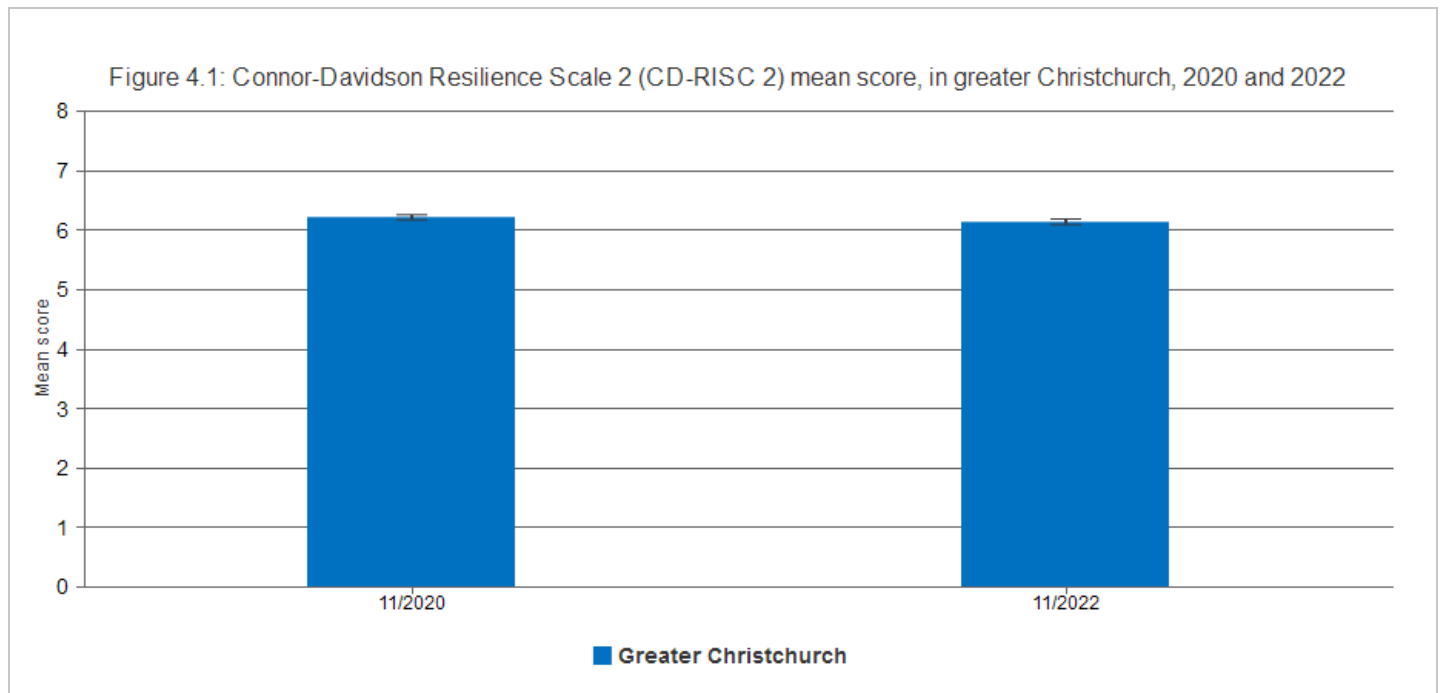
Subjective Wellbeing: Resilience

Downloaded from <https://www.canterburywellbeing.org.nz/our-wellbeing/subjective-wellbeing/resilience/> on 29/04/2024 5:17 AM

Psychological resilience is measured here using the two-question Connor-Davidson Resilience Scale (CD-RISC-2[®]) [19], a validated and widely-used tool for assessing resilience in the general population and in various healthcare settings [20]. The Connor-Davidson Resilience Scale was developed as a brief measure of 'bounce-back' and adaptability or how well one is equipped to cope with stressful events, tragedy, or trauma [19,21,22]. This perspective of resilience emphasises an adaptive process whereby people can build their capacity to overcome adversity [23]. The availability of material resources and emotional support from both family and community is considered important [20]. Resilience has also been described as an individual's capacity to adjust to adversity, as distinct from the process of recovery (with recovery being a gradual return to baseline following an isolated adverse event) [6,24-26].

Respondents to the Canterbury Wellbeing Survey were asked to respond to two items, or questions, that make up the CD-RISC-2[®]. The first of these questions relates to the ability to adapt to change and the second to the ability to bounce back after illness or hardship. The CD-RISC 2[®] is scored out of a total of 8, with 0 being the lowest level of resilience and 8 being the highest level of resilience. Note that for copyright reasons the CD-RISC-2[®] questions and response breakdowns cannot be described in full.

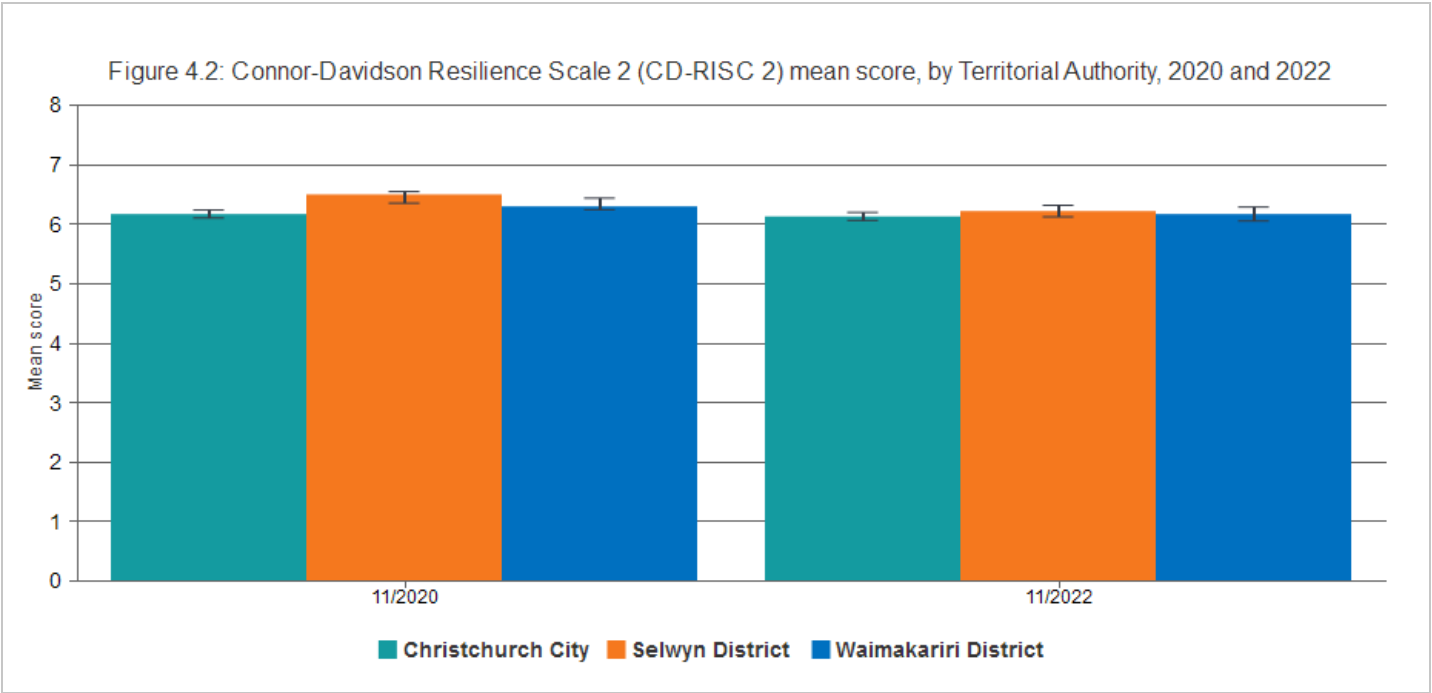
This indicator presents the CD-RISC-2[®] mean score for greater Christchurch respondents. The scale was included in the Canterbury Wellbeing Survey for the first time in 2020.



The figure shows similar mean resilience scores for greater Christchurch respondents, as measured by the Connor-Davidson Resilience Scale, in 2020 and 2022 (6.2 and 6.1 points, respectively). The CD-RISC-2[®] has not been used in any other population-based surveys of adults in New Zealand, therefore there is no New Zealand comparator for this indicator. However, a representative, population-based survey of adults in the USA found a mean score of 6.91 (SD 1.5) [19, 22]. Different cultural understandings of resilience may need to be taken into account when comparing resilience scores across countries and/or

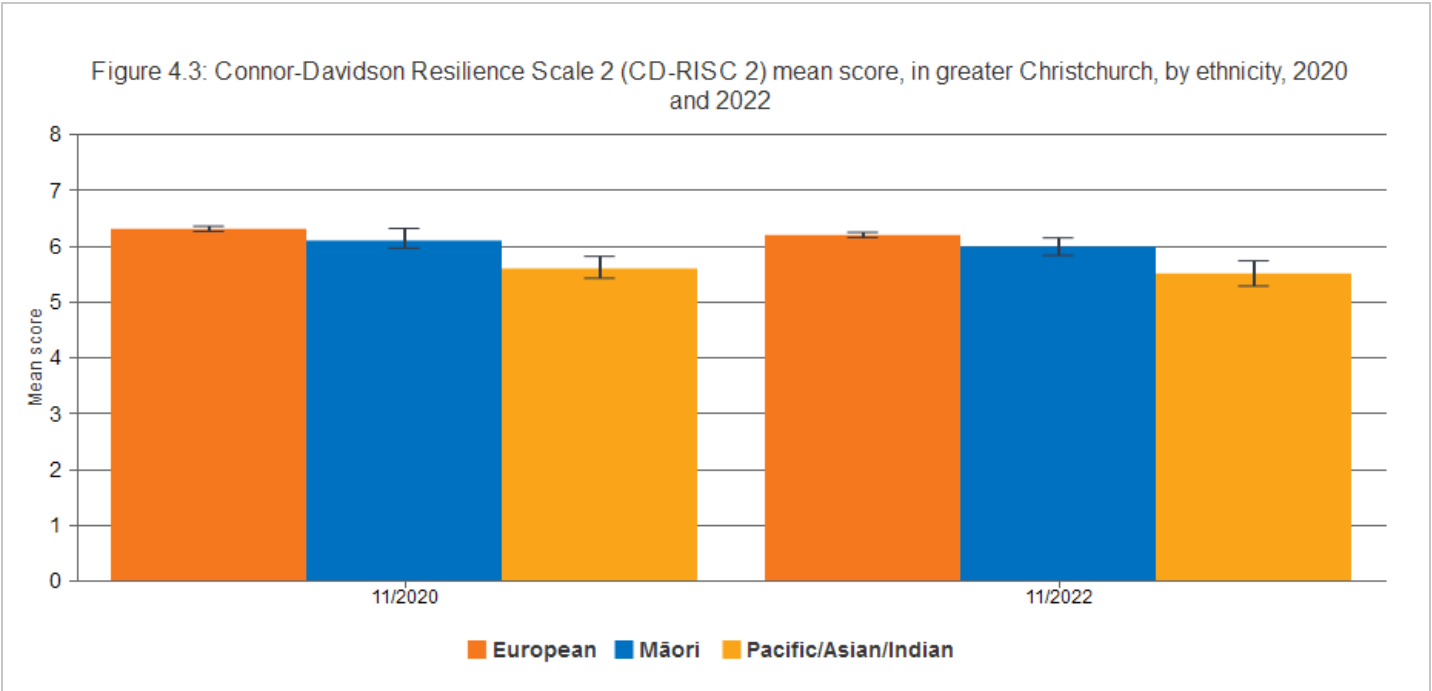
ethnic groups [21].

Breakdown by Territorial Authority



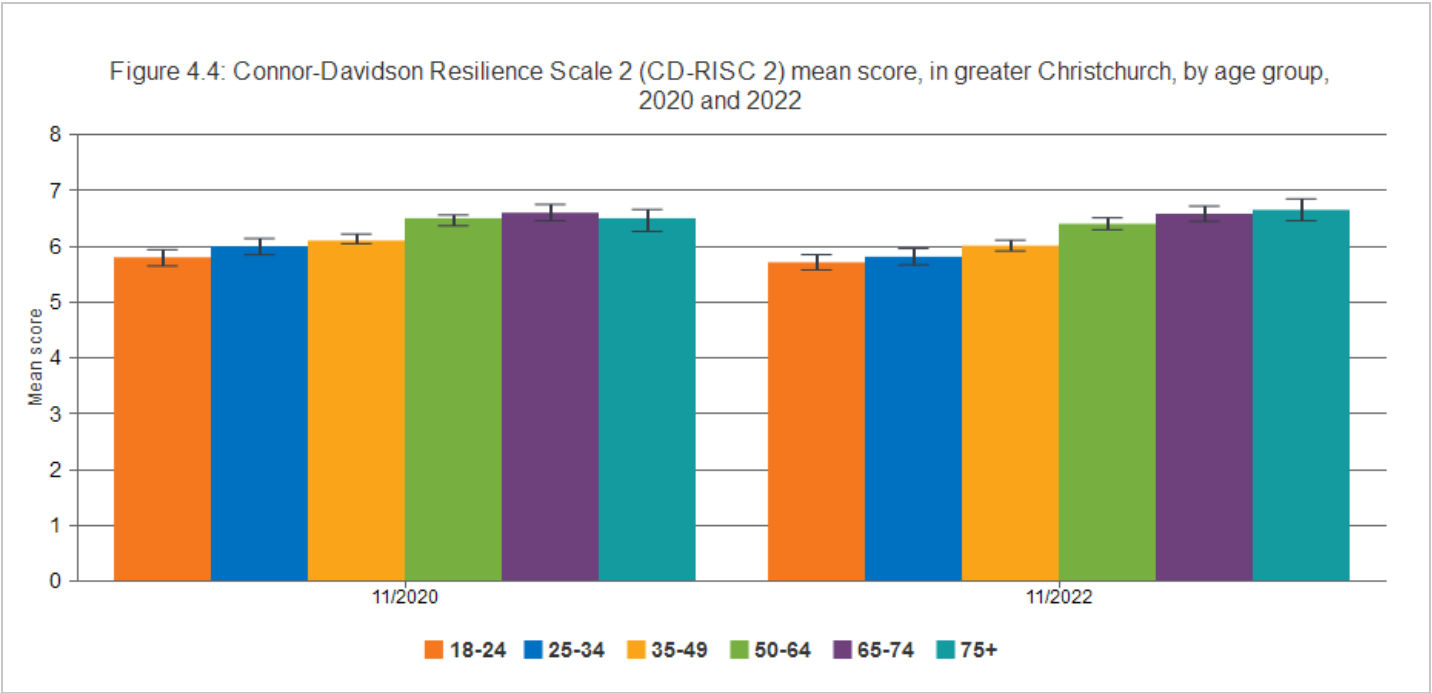
The figure shows that the mean resilience scores of Christchurch City, Selwyn District, and Waimakariri District respondents, as measured by the Connor-Davidson Resilience Scale, are similar for 2020 and 2022 (6.1, 6.2, and 6.2, points, respectively, in 2022). None of the differences between scores are statistically significant at either time-point.

Breakdown by ethnicity



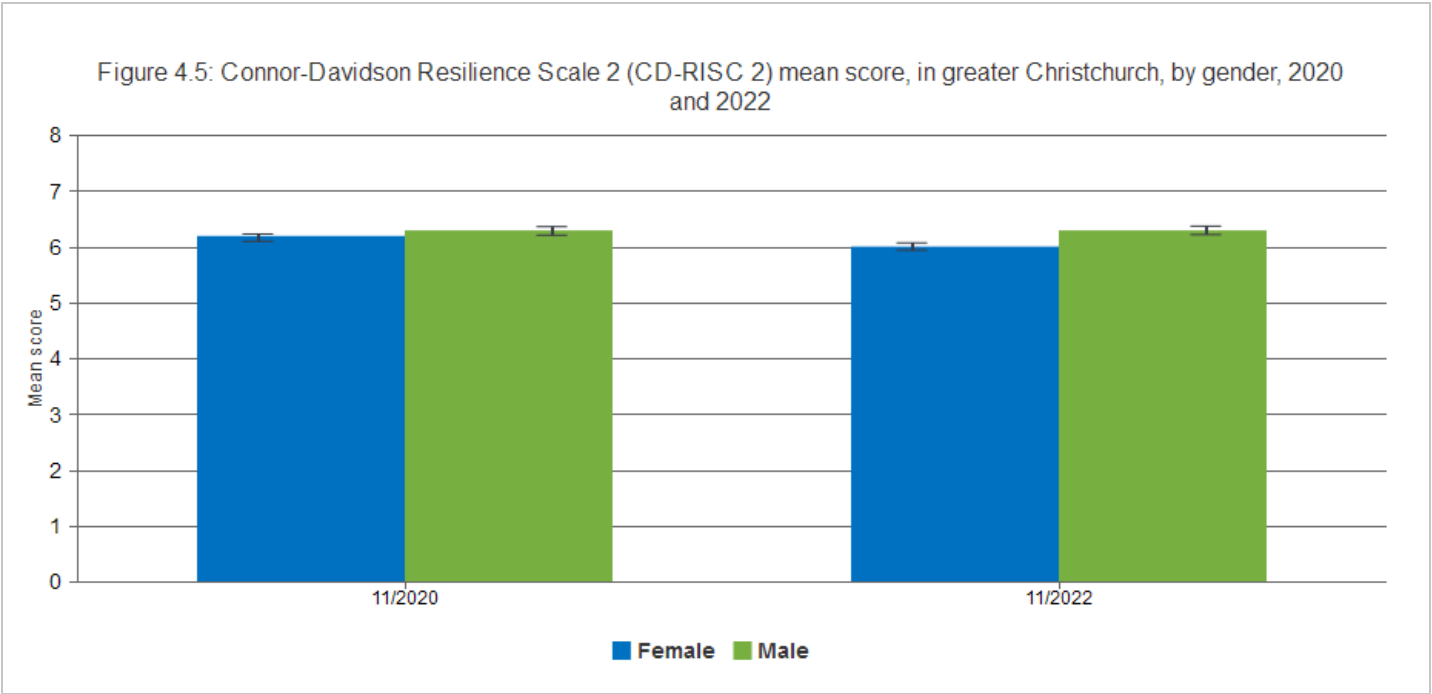
The figure shows higher levels of resilience (as measured by the Connor-Davidson Resilience Scale) for European respondents, compared with Māori and Pacific/Asian/Indian respondents, in 2020 and 2022 (statistically significantly higher for Europeans compared with Pacific/Asian/Indian in 2020 and 2022, with mean scores of 6.2 and 5.5, respectively, in 2022). Māori respondents also had a statistically significantly higher mean score than Pacific/Asian/Indian respondents in 2020 and 2022 (6.0 and 5.5, respectively, in 2022). Different cultural understandings of resilience may need to be taken into account when comparing resilience scores across countries and/or ethnic groups [21].

Breakdown by age



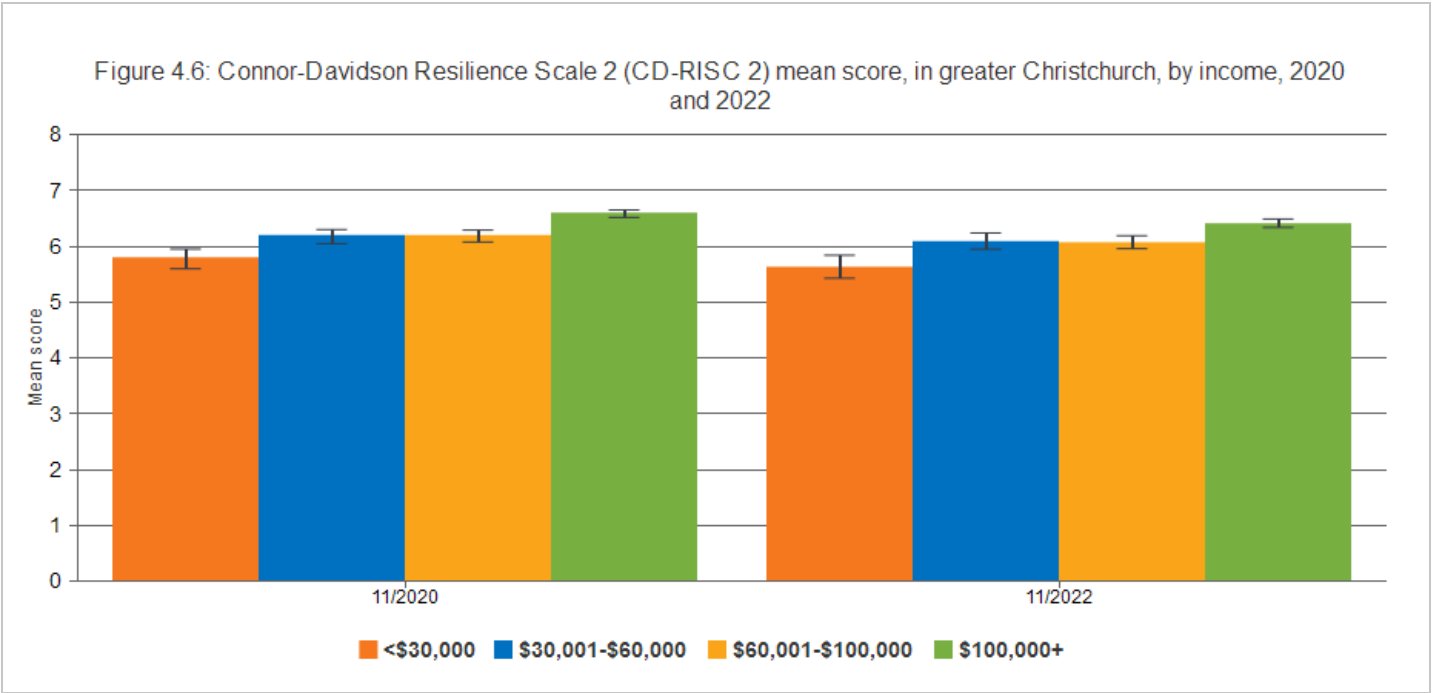
The figure shows a clear positive relationship between age and resilience (CD-RISC-2[®] mean scores), with resilience scores generally increasing with increasing age. The resilience scores of the three older age groups are each statistically significantly higher than the three lower age groups (18-24 years, 5.7; 25-34 years, 5.8; 35-49 years, 6.0; 50-64 years, 6.4; 65-74 years, 6.6; and 75+ years, 6.7), in 2022.

Breakdown by gender



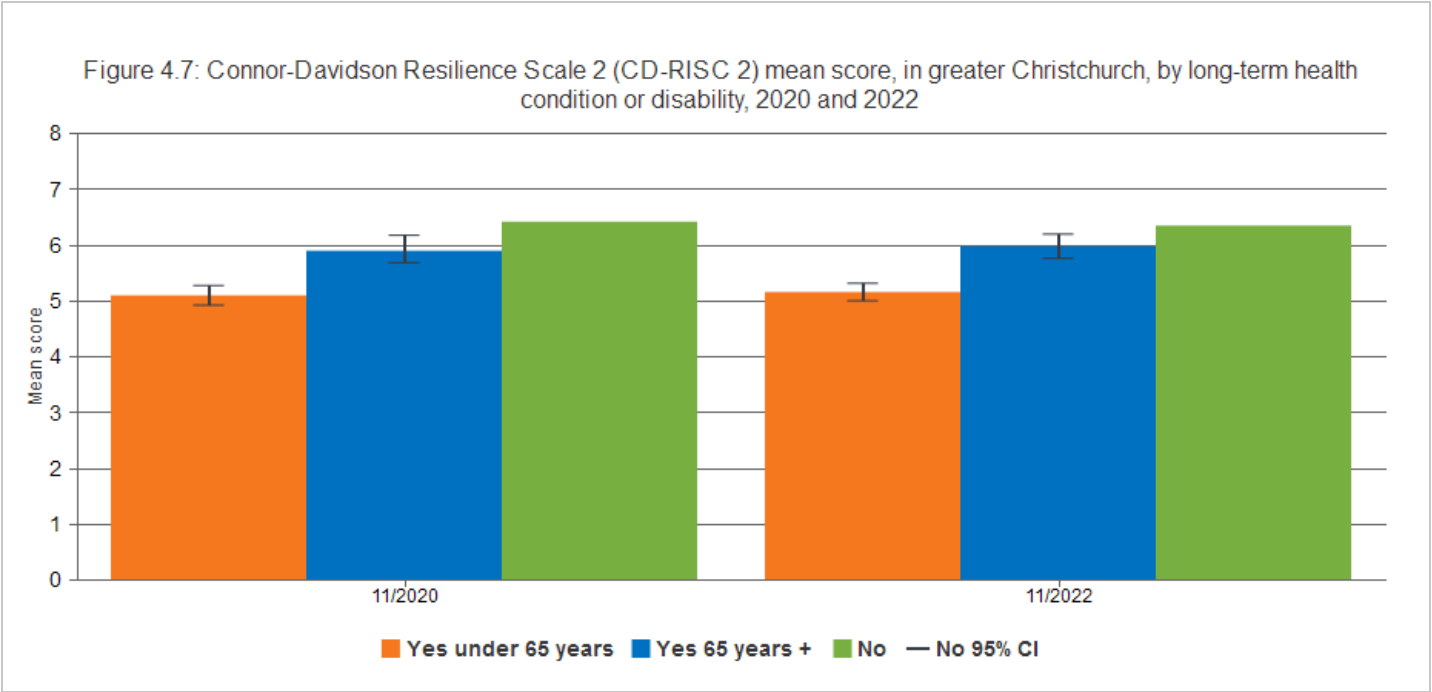
The figure shows similar levels of resilience (CD-RISC-2[®] mean scores) for female and male respondents in greater Christchurch, in 2020 (6.2 and 6.3, respectively). However, in 2022, male respondents had statistically significantly higher resilience scores compared with female respondents (6.0 and 6.3, respectively).

Breakdown by income



The figure shows a clear positive relationship between income and resilience (CD-RISC-2[®] mean scores), with mean resilience scores increasing with increasing annual household income. The mean scores of the three highest income groups shown are statistically significantly higher than the <\$30,000 income group in 2020 and 2022 (<\$30,000 group mean score 5.6 compared with the \$30,000-\$60,000 group, 6.1; \$60,001-\$100,000 group 6.1; and \$100,000+ group, 6.4, in 2022). Respondents from the \$100,000+ income group had statistically significantly higher mean resilience scores than all the other groups.

Breakdown by disability



The figure shows lower levels of resilience (CD-RISC-2[®] mean scores) for respondents with a long-term health condition or disability, compared with those without, in 2020 and 2022 (those with a long-term condition or disability and aged under 65 years, 5.2; those with disability and aged 65 years and over, 6.0; and those without disability, 6.4). Of note, the younger group with a long-term health condition or disability had lower mean resilience scores than those aged 65 and over with a long-term health condition or disability. The differences between the groups are statistically significant.

Data Sources

Source: Te Whatu Ora Waitaha Canterbury.

Survey/data set: Canterbury Wellbeing Survey 2020 to 2022. Access publicly available data from Te Mana Ora | Community and Public Health website www.cph.co.nz/your-health/wellbeing-survey/

Source data frequency: Annually.

Metadata for this indicator is available at <https://www.canterburywellbeing.org.nz/our-wellbeing/index-data>

REFERENCES

This is the full reference list for **Subjective Wellbeing**.

- 1 Aked J, Marks N, Cordon C, Thompson S (2008) *Five Ways to Wellbeing: A report presented to the Foresight Project on communicating the evidence base for improving people's well-being*. London: New Economics Foundation.
- 2 Diener E, Wirtz D, Tov W, Kim-Prieto C, Choi D (2009) New measures of well-being: Flourishing and positive and negative feelings. *Social Indicators Research* 39: 247-266.
- 3 UK Government (2010) *Confident communities, brighter futures: A framework for developing wellbeing*. UK Government: Department of Health and New Horizons.
- 4 Beaglehole B, Mulder RT, Frampton CM, Boden JM, Newton-Howes G, et al. (2018) Psychological distress and psychiatric disorder after natural disasters: Systematic review and meta-analysis. *The British Journal of Psychiatry*: 1-7.
- 5 Bidwell S (2011) *Long term planning for recovery after disasters: Ensuring health in all policies (HiAP)*. Community and Public Health for Healthy Christchurch. 4-5 p.
- 6 Bonanno GA, Diminich ED (2013) Annual Research Review: Positive adjustment to adversity -Trajectories of minimal-impact resilience and emergent resilience. *Journal of child psychology and psychiatry, and allied disciplines* 54: 378-401.
- 7 Galea S, Nandi A, Vlahov D (2005) The epidemiology of post-traumatic stress disorder after disasters. *Epidemiol Rev* 27: 78-91.
- 8 Lock S, Rubin GJ, Murray V, Rogers MB, Amlot R, et al. (2012) Secondary stressors and extreme events and disasters: A systematic review of primary research from 2010-2011. *PLoS Curr* 4.
- 9 Ramanathan CS, Dutta S, editors (2013) *Governance, Development, and Social Work*. London: Routledge Publishers (Taylor and Francis Group).
- 10 Bowling A (2001) *Measuring Disease. A Review of Disease-specific Quality of Life Measurement Scales*. Buckingham: Open University Press.
- 11 CERA (2012) *CERA Wellbeing Survey 2012 Report, prepared by AC Nielsen for the Canterbury Earthquake Recovery Authority*. AC Nielsen and the Canterbury Earthquake Recovery Authority.
- 12 Topp CW, Ostergaard SD, Sondergaard S, Bech P (2015) The WHO-5 Well-Being Index: A systematic review of the literature. *Psychother Psychosom* 84: 167-176.
- 13 Selye H (1936) A syndrome produced by diverse nocuous agents. *Nature* 138.
- 14 Chandola T, Britton A, Brunner E, Hemingway H, Malik M, et al. (2008) Work stress and coronary heart disease: What are the mechanisms? *European Heart Journal* 29: 640-648.
- 15 Selye H (1976) *Stress in health and disease*. Stoneham MA: Butterworth-Heinemann.
- 16 World Health Organization (2013) *Guidelines for the management of conditions specifically related to stress*. Geneva: WHO.
- 17 CDHB (2020) *Canterbury Wellbeing Survey, 2020: Report prepared by Nielsen for the Canterbury District Health Board and partnering agencies*. Christchurch: Canterbury District Health Board.
- 18 *The Quality of Life Project. Report prepared by Nielsen for the Auckland, Wellington, Christchurch, and Dunedin City Councils and partnering agencies*. Available from: www.qualityoflifeproject.govt.nz/survey.htm.
- 19 Vaishnavi S, Connor K, Davidson JRT (2007) An abbreviated version of the Connor-Davidson Resilience Scale (CD-RISC), the CD-RISC2: Psychometric properties and applications in psychopharmacological trials. *Psychiatry research* 152: 293-297.
- 20 Windle G, Bennett KM, Noyes J (2011) A methodological review of resilience measurement scales. *Health and Quality of Life Outcomes* 9: 8.
- 21 Davidson JRT (2020) Connor-Davidson Resilience Scale (CDRISC) Manual. Unpublished.
- 22 Connor KM, Davidson JR (2003) Development of a new resilience scale: The Connor-Davidson Resilience Scale (CD-RISC).
- 23 Windle G (2011) What is resilience? A review and concept analysis. *Reviews in Clinical Gerontology* 21: 152-169.
- 24 Bonanno G (2004) Loss, Trauma, and Human Resilience: Have We Underestimated the Human Capacity to Thrive After Extremely Aversive Events? *American Psychologist* 59: 20-28.

- 25 Richardson GE (2002) The metatheory of resilience and resiliency. *Journal of Clinical Psychology* 58: 307-321.
- 26 Richardson GE, Neiger BL, Jensen S, Kumpfer KL (1990) The Resiliency Model. *Health Education* 21: 33-39.
- 27 Statistics New Zealand (2016) *New Zealand General Social Survey 2016*. Wellington: Statistics New Zealand.
- 28 Families Commission (2013) *Families and whānau Status report: Towards measuring the wellbeing of families and whānau*. Wellington: Families Commission.
- 29 Wollny I, Apps J, Henricson C (2010) *Can government measure family wellbeing?* London: Family and Parenting Institute. Available from: <https://www.familyandparenting.org/Resources/FPI/Documents/CanGovernmentMeasureFamilyWellbeing.pdf>.
- 30 Cotterell G, von Randow M, Wheldon M (2008) *Measuring Changes in Family and Whānau Wellbeing Using Census Data, 1981–2006: A preliminary analysis*. Wellington: Statistics New Zealand.
- 31 Baker K (2016) *The Whānau Rangatiratanga Frameworks: Approaching whānau wellbeing from within Te Ao Māori*. Wellington: Social Policy Evaluation and Research Unit.
- 32 Fletcher M (2007) Issues in developing a conceptual framework for 'family wellbeing'. National Family Wellbeing Symposium, Canberra, 20–21 June 2007.
- 33 Statistics New Zealand (2006) *International developments in family statistics*. Wellington: Statistics New Zealand.
- 34 Statistics New Zealand (2007) *Review of official family statistics. Consultation Paper*. New Zealand: Wellington.
- 35 Statistics New Zealand (2013) *Te Kupenga 2013: A survey of Māori well-being questionnaire*. Wellington: Statistics New Zealand.
- 36 Statistics New Zealand (2018) *New Zealand General Social Survey 2018 data dictionary (version 29)*. Statistics New Zealand.