

Cultivating resilience in adolescent girls who have experienced Trauma: A systematic literature review

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Abstract

This systematic literature review explores the resilience factors for adolescent girls who have experienced trauma. It focuses on their perspectives, to assist counsellors to provide effective support. Sub-questions are: What adaptive coping strategies could counsellors teach or encourage? What other resources could counsellors encourage adolescent girls to use? Ten international peer-reviewed qualitative studies were identified. They were assessed using the modified Critical Appraisal Skills Programme (CASP) tool and the findings were analysed using thematic analysis. Five themes were identified: fostering active agency; nurturing internal strengths and resources; building interpersonal connection; engaging with community; and connecting with their Indigenous culture, as appropriate. Resulting recommendations for counsellors included fostering adolescent girls' agency, facilitating conversations regarding future planning, and encouraging young Māori wāhine (women) to connect with their culture. The author identifies a need for further qualitative resilience research in Aotearoa New Zealand with adolescent girls who have experienced trauma.

Keywords

resilience, adolescent girls, trauma, counsellors, Aotearoa New Zealand

Background

This article is an abridged version of the systematic literature review that was conducted in 2023 in partial fulfilment of the Master of Counselling Studies Degree at Massey University.

In Aotearoa New Zealand, many adolescent girls have experienced adverse childhood events (Fleming et al., 2021). Adverse events can lead to the development of trauma symptoms, which can negatively impact adolescents (Lewis et al., 2019; Sourander et al., 2024). Adolescent girls who demonstrate resilience following childhood trauma are less likely to be adversely affected and are more able to adapt positively (Nilsson et al., 2023). This systematic literature review focuses on adolescent girls' perspectives, to assist helping professionals to provide relevant support. Appropriate early interventions may reduce adolescent girls' mental health struggles (Stapley et al., 2023) and empower them to journey through adolescence and adulthood with confidence and resilience.

Adverse childhood events can have devastating effects on adolescents (Lewis et al., 2019). Adverse events are wide-ranging and include natural disasters; war; serious accidents; physical mistreatment, including bullying by peers; the loss or death of a caregiver; sexual maltreatment; and witnessing acts of violence in the home (Hawes et al., 2021). These can lead to the potential development of trauma symptoms, which can have a detrimental impact on adolescents (Lewis et al., 2019; Sourander et al., 2024). Trauma is difficult to define and is often explained with regard to the event(s) that caused it (Levine, 1997). Traumatic events, according to McLaughlin and Lambert (2017), are those that “involve harm or threat of harm” (p. 29). Experiencing multiple traumatic events during childhood can have significant implications for adolescents (Jones et al., 2022).

Traumatic events can disrupt adolescents' social, emotional, behavioural and cognitive development (Lansing et al., 2017; Lewis et al., 2019). Cognitive and emotional difficulties can ensue, such as the inability to mentalise, for example, to understand others' motives; emotional dysregulation and maladaptive emotion regulation strategies such as catastrophising, self-blame, and rumination; and sleeping and concentration difficulties (Lansing et al., 2017; Lee et al., 2018; Rojo-Wissar et al., 2021; Sundermann & DePrince, 2015; Wais et al., 2024; Wei et al., 2021). Mental health symptoms that can occur include anger, depression, and dissociation, as well as post-traumatic stress disorder (PTSD) symptoms such as hyper-alertness to threat, re-experiencing the traumatic event(s), and the

avoidance of people or places associated with the traumatic exposure (Lansing et al., 2017; Sundermann & DePrince, 2015; Zhang & Wang, 2024). Detrimental long-term consequences include substance abuse, binge-eating disorder, anxiety, and depression. There is also a high correlation between traumatic events and self-harming behaviours, anger, and violence (Chu et al., 2022; Dixson et al., 2018; Hu et al., 2023; Lewis et al., 2019; Sourander et al., 2024; Zhang & Wang, 2024). Furthermore, childhood trauma has a direct influence on suicidal thoughts, which are the highest predictor of suicide (Fan et al., 2023; Lee et al., 2018; Sourander et al., 2024).

In 2019, the Youth19 Rangatahi Smart Survey (Clark & Fleming, 2019) was conducted with almost 8,000 adolescents across the North Island of Aotearoa New Zealand. According to the findings from *Safety and Violence: A Youth19 Brief* (Fleming et al., 2021), a large number of adolescent girls had experienced a range of adverse childhood events. More than 25% of adolescent girls reported non-consensual sexual experiences, abuse, or violence; 14% reported being physically hurt by a parent within the last year; and 7% had observed adults physically harm other adults in the home within the previous 12 months. These data indicate the scale and urgency of the issue.

Adolescent girls' responses to multiple childhood trauma exposure may include symptoms of anxiety, depression, suicidal ideation, and PTSD. Early substance abuse, self-harming behaviours, delinquency, and acts of aggression can also develop (Jones et al., 2022; Kobulsky, 2017; Lansing et al., 2017; Lee et al., 2018; Martínez et al., 2018; Russotti et al., 2023; Sourander et al., 2024; Wei et al., 2021; Xu et al., 2023). In the emotional and mental health findings of the Youth19 Rangatahi Smart Survey (Fleming et al., 2020), almost a third of adolescent girls reported "significant depressive symptoms" (p. 4), and 24% of adolescent girls reported suicidal thoughts. Since 2012, when the last Youth2000 survey was conducted, there has also been a significant decline in the mental health and wellbeing of adolescent girls. Of note, there was a 12% increase in adolescent girls reporting "significant depressive symptoms" (Fleming et al., 2020, p. 5). Alongside the findings from *Safety and Violence: A Youth19 Brief* (Fleming et al., 2021), these data suggest that appropriate early interventions for adolescent girls are needed to prevent the possible development of trauma.

Not all distressing events lead to trauma and trauma-related mental health issues. Individuals who demonstrate resilience are less likely to be negatively influenced and are more able to adapt positively after childhood trauma (Nilsson et al., 2023; Ungar, 2013; Wei et al., 2021). Resilience is complex and dynamic, so it is challenging to define and assess. Early studies focussed on the identification of personal traits, which is considered to be limiting, as commentators argue that an individual's capability is contingent on both internal and external systems (Masten, 2016; Ungar, 2013; Van Breda, 2018). Van Breda (2018) defines resilience as: "the multilevel processes that systems engage in to obtain better-than-expected outcomes in the face or wake of adversity" (p. 4). Examples of systems include individuals, their families, communities, and organisations, the climate, and the economy.

Several resilience theories have been proposed. The socio-ecological theory of resilience is based on Bronfenbrenner's (1979) ecological systems model, which emphasises the influence of different environments on a child's development. The child's immediate environment, such as their family and school, is the most influential, followed by the child's extended family, neighbours, and community. Socio-ecological theory asserts that resilience is "a set of behaviours over time that reflects the interactions between individuals and their environments, in particular the opportunities for personal growth that are available and accessible" (Ungar, 2012, p. 14). The probability that these interactions will enhance one's wellbeing following adverse events is contingent on how meaningful the opportunities are, and the value of the resources provided.

Numerous resilience factors have been identified in the literature, although there are limited findings related to adolescent girls who have experienced trauma. Haffee and Theron (2017) conducted a scoping literature review on the resilience of adolescent girls who had experienced child sexual abuse (CSA). Their key themes were: "the ability to find meaning or purpose in all experiences" (p. 32); self-regulation and self-efficacy; optimistic future perspectives; agency and motivational mastery; attachment relationships; cultural and religious traditions; and supportive social, community, and educational systems. Attachment relationships encompassed support from parents, peer relationships, and agencies, such as the police. This study emphasises that both internal resources, such as emotions, cognitions, and agency, and external systems, which include relationships, culture, religion, and education,

are all important resilience factors that enhance the wellbeing of adolescents who have experienced trauma.

Research rationale and aim

International studies have focussed on the resilience of adolescents and young adults in the face of adversity. Participants in these research studies have included all genders (e.g., Kuo et al., 2022; Thakur & Cohen, 2022). Few studies have focussed solely on adolescent girls (between the ages of 12 and 19, or secondary school age), and even fewer studies have included their perspectives (Haffejee & Theron, 2017). Hence, this systematic literature review focuses on studies that centre the viewpoints of adolescent girls of secondary school age, in order to enable helping professionals to provide appropriate support. Early interventions may lessen adolescent girls' mental health struggles, prevent possible suicidal thoughts (Lee et al., 2018; Stapley et al., 2023), and enable them to confidently navigate their journeys through adolescence and beyond.

Research questions

The focus research question is: How can counsellors enhance resilience in adolescent girls who have experienced trauma? Sub-questions are as follows:

- What adaptive coping strategies should counsellors teach or encourage?
- What other resources can counsellors encourage adolescent girls to use?

Method

Research design

A systematic literature review was selected as it produces a detailed, critical appraisal of evidence-based research that yields more in-depth data than other methods (Boland et al., 2017). This review focuses on qualitative studies, to capture participants' diverse perspectives on their experiences of trauma. Qualitative studies on resilience ensure participants have agency over the outcomes that are important to *them* (Van Breda, 2018) and will offer counsellors relevant guidance on how best to support them.

Search strategy

In April 2023, keyword searches were carried out in two electronic databases, Scopus and Discover, which thoroughly searched MEDLINE, CINAHL Complete, APA Psych Info, Academic Search Premier, and Complementary Index. After consultations with subject librarians, the keywords were refined: “resilience” or “coping” or “healing” or “recovery” or “protective [factors]”; and “trauma” or “abuse” or “violence” or “maltreatment”; and “adolescent” or “teen” or “youth”; and “female” or “girl”; and “qualitative”.

Eligibility criteria

Only scholarly, peer-reviewed articles were selected. Additionally, only studies that were published in English were selected, as this was the researcher’s spoken language. To ensure contemporary relevance, only qualitative studies published within the last 10 years were considered. Only those studies that reported data for adolescent girls between the ages of 12 and 19 who had experienced trauma were included. An exception was made for one study that contained reports from participants who were under the age of 12, as these girls could not be distinguished from older participants. Lastly, it was imperative that articles contained stories of resilience.

Critical appraisal

Ten studies were critically appraised using the modified Critical Appraisal Skills Programme (CASP) tool (Long et al., 2020). This tool is a review checklist based on the original CASP (Critical Appraisal Skills Programme [CASP], 2018). The studies were assessed using a set of 11 questions that highlighted any concerns. These questions centred around research design, recruitment strategy, data collection, ethical issues, data analysis, and how valuable the research was for *this* study. “Deciding criteria” (Long et al., 2020, p. 37), which were the implications for helping professionals, were then employed to determine the quality of the studies, for example, high, medium or low quality.

Synthesis procedure

The data were analysed using thematic analysis, which involved systematically classifying and examining the data for themes or “patterns of meaning” (Braun & Clarke, 2023, p. 65). Braun and Clarke’s (2023) six-phase approach was chosen for its simplicity and flexibility.

This involved generating initial codes from the findings using NVivo, a data analysis software, reviewing the codes, and creating themes and subthemes. The themes were then reviewed and the relationships between them were analysed. Codes that were not significant were discarded. No new codes for the lower quality studies were generated, as the findings from these were only used to support ideas that emerged from the other studies (Long et al., 2020).

Ethical considerations

This is a systematic literature review, which means any ethical issues would have been addressed in the peer-reviewed published empirical studies. Nevertheless, potential ethical issues (e.g., the avoidance of harm) were examined during the critical appraisal process and discussed with research supervisors. A “low-risk notification” was approved by Massey University’s Research and Ethics Committee.

Personal and cultural position

I recognise that my cultural identity has influenced my worldview and therefore affected my role as a researcher (Bourke, 2014). My cultural identity includes being a woman and a Pākehā (a person with European ancestry living in Aotearoa New Zealand). These aspects shaped the lens through which I conducted this research. Due to my personal history and employment as a high-school guidance counsellor, I acknowledge that my compassion towards adolescent girls who have been through trauma has motivated my research.

Results

Table 1: Summary of study characteristics

Study	Country setting	Research design	Sample size	Sample ages	Participant characteristics	Adverse circumstances
Chang et al. (2020)	Cambodia	Grounded theory; ethnographic case study	20	6–19 years old	Cambodian (Khmer) adolescents living in an NGO (Non-government organisation) facility	Complex histories of abuse including intergenerational trauma
Dhunna et al. (2021)	Aotearoa New Zealand	Kaupapa Māori	6	14–19 years old	Māori adolescent mothers	Intimate partner violence (IPV); intergenerational trauma
Dumont et al. (2022)	Canada	Qualitative	15	16–18 years old	Adolescents living in foster families or residential care units	Adolescent girls living in out-of-home placements
Haffejee and Theron (2019)	South Africa	Multiple instrumental case study	7	15–18 years old	Black African adolescents living in two Child and Youth Care Centres (CYCCs)	CSA
Kaiser and Sinanan (2020)	Bangladesh	Phenomenological	12	13–14 years old	Street adolescents receiving support from an NGO in Bangladesh	CSA as well as violence and neglect
Levey et al. (2018)	Liberia	Narrative	2	18 years old	Two Liberian students who attended a private senior high school	Separation and loss from family members during/after the war
Lys (2018)	Canada	Participatory	41	13–17 years old	90% of participants identified as Indigenous to the Northwest Territories of Canada	Intergenerational trauma
Shalanski and Ewashen (2019)	Canada	Interpretive phenomenological	5	15–16 years old	Adolescents living in a psychiatric unit in Western Canada	Post-traumatic stress disorder, addictions and depression
Sigad et al. (2015)	Israel	Phenomenological	20	15–18 years old	Israeli adolescents	At least one type of abuse: emotional, physical, sexual or neglect
Walmer and Hyers (2022)	Germany and Poland	Historical: archival diary study	2	13–15 & 15–18 years old	Anne Frank was born in Germany (b. 1929); Renia Spiegel was born in Poland (b. 1924)	Lived experiences during a historic traumatic event

Characteristics of the studies

Ten qualitative studies met the inclusion criteria for this review (Table 1). The publication dates ranged from 2015 to 2022. Three studies were located in different parts of Canada and the remainder were situated around the world including South Africa, Bangladesh, Cambodia, Liberia, Israel, Germany, and Poland. One study was located in Aotearoa New Zealand. This geographic information indicates that the participants' ethnicities were diverse and included Indigenous peoples. The sample population included 130 participants aged between six and 19 years old. Participants' adverse circumstances included sexual, physical, and verbal abuse, neglect, intergenerational trauma, PTSD, addictions, depression, loss and separation of family members, and war trauma.

Synthesis of the findings

From the perspectives of adolescent girls, the key themes for cultivating resilience are fostering active agency; nurturing internal strengths and resources; building interpersonal connection; engaging with community; and connecting with their Indigenous culture, when appropriate. Each of these themes and their associated sub-themes are discussed below.

Fostering active agency

Fostering active agency refers to participants making decisions and taking responsibility for their own protection or healing. It involves taking action, which demonstrates strength and self-determination. Within this theme, two sub-themes have been identified: protecting self/family from harm, and actively moving towards goals.

Four studies identified protecting self/family from harm, which involved participants striving to keep themselves, their children, or their younger siblings safe (Dhunna et al., 2021; Haffejee & Theron, 2019; Kaiser & Sinanan, 2020; Sigad et al., 2015). Some adolescent girls cut off communication with the abuser or called the authorities, such as the police. Some left the abuser altogether and sought a safe space by moving in with family, moving into their own home or seeking refuge with a friend, thus demonstrating strength and self-determination. "I had fights with my father that got to the level of hitting ... After a few times, I just picked myself up and walked out of the house" (Sigad et al., 2015, p. 624).

Actively moving towards goals was a prevalent sub-theme in five studies (Chang et al., 2020; Dhunna et al., 2021; Haffejee & Theron, 2019; Levey et al., 2018; Shalanski & Ewashen, 2019). Participants moved towards their goals in a range of ways, which included training towards their chosen vocation, moving into their own accommodation, taking responsibility for their own mental health (e.g., through seeking professional support), or studying. “Youth often mentioned studying hard and succeeding in school as markers of healing” (Chang et al., 2020, p. 27). Other participants realised that a change was required, which is an important step towards taking action.

Nurturing internal strengths and resources

This was a dominant theme throughout the literature and was broken down into sub-themes of hope, aspiring to help others, belief in oneself, avoiding fear, processing emotions and reframing thoughts, expression through creativity, journalling, and nurturing spiritual wellbeing (Dhunna et al., 2021; Dumont et al., 2022; Haffejee & Theron, 2019; Kaiser & Sinanan, 2020; Lys, 2018; Shalanski & Ewashen, 2019; Sigad et al., 2015; Walmer & Hyers, 2022).

Hope was a pervasive sub-theme in eight studies and was divided into two further groups: hope for a better future, and having goals and dreams (Dhunna et al., 2021; Dumont et al., 2022; Haffejee & Theron, 2019; Kaiser & Sinanan, 2020; Lys, 2018; Shalanski & Ewashen, 2019; Sigad et al., 2015; Walmer & Hyers, 2022). Having hope gave participants strength and enabled them to dream and have aspirations.

Imagining a better future gave participants hope that life would improve. This was visualised in a variety of ways: envisioning a better future for themselves and/or their children, envisioning becoming a confident or more resilient person, or yearning to have autonomy over their own lives. “I want to earn enough so that I can rent a place and live the way I want to, fearlessly and peacefully” (Kaiser & Sinanan, 2020, p. 564).

Having goals and dreams meant that participants had aims to achieve and, hence, something to look forward to. Goals included being financially secure, being in a healthy relationship, having children, changing their current lifestyle (e.g., eliminating drug use), having someone to confide in, or progressing into their chosen career.

“Having goals and dreams ... can also help [you] know what you want and know what you want to achieve” (Haffejee & Theron, 2019, p. 698).

In five studies, participants discussed aspiring to help others (Chang et al., 2020; Dhunna et al., 2021; Dumont et al., 2022; Kaiser & Sinanan, 2020; Levey et al., 2018). Having their own positive experiences, for example through therapy, inspired some participants to consider taking on that helping role in the future. “She [her counsellor] made me realize that I might like that. You know, just to see the kind of understanding that I had with her, I could see myself in that role” (Dumont et al., 2022, p. 6). One Liberian participant was aware of the opportunities she had compared with other young people and had already begun helping others in her community:

For me, I have the opportunity and I need them to have the opportunity like me. So the only thing I can do is to encourage them to know that their voices can be heard out there and [that] they can go and ask for help. (Levey et al., 2018, p. 953)

Belief in oneself was a prevalent sub-theme in six studies (Dumont et al., 2022; Haffejee & Theron, 2019; Levey et al., 2018; Shalanski & Ewashen, 2019; Sigad et al., 2015; Walmer & Hyers, 2022). Participants displayed self-efficacious beliefs by identifying their own strengths and showing a determination to succeed. They believed in their ability to bounce back after a setback and adopted an empowered mindset: “I’m a survivor; I’ll do what it takes in order to live” (Sigad et al., 2015, p. 627).

Participants demonstrated avoiding fear in two studies (Dumont et al., 2022; Lys, 2018). Like self-efficacious beliefs, aspiring to avoid certain fears motivated participants and gave them strength. Participants’ fears included being dependent on others, being in a toxic relationship, relying on welfare, not being able to meet their own needs (e.g., being homeless), their children having the same childhood as theirs, and being like their own parents. “I’ve got expectations of myself. That I will never treat her [my daughter] anything like how I got treated” (Dhunna et al., 2021, p. 6202).

Participants in six studies discussed processing emotions and reframing thoughts (Chang et al., 2020; Haffejee & Theron, 2019; Lys, 2018; Shalanski & Ewashen, 2019; Sigad et al., 2015; Walmer & Hyers, 2022). Learning new ways to process feelings enabled participants to feel stronger, and hence, better able to cope with difficult situations. “One young lady’s comment captured the essence of all participants when she shared that she was ‘feeling more free...free on the inside’” (Chang et al., 2020, p. 27).

Alongside processing emotions, reframing thoughts enabled participants to change their self-perceptions and let go of self-blame. “I thought that I was the reason that I had done something that was not good ... After a lot of talks, I understood that I am not the core of the problem” (Sigad et al., 2015, p. 628). Participants processed emotions and reframed their thoughts in various ways including through creative expression and journalling.

Lys (2018) and Walmer and Hyers (2022) explored expression through creativity, in other words, through art, poetry and music. Some participants used drawing as a tool not only to process their feelings but also to identify their internal strengths and to express themselves. Using creativity empowered these adolescent girls and helped them to cope with stress. “If I ever needed something to get my mind off things, I would go straight to art and go draw this crazy drawing with black and purple and all the emotion in it” (Lys, 2018, p. 7).

In three studies, participants employed journalling as a therapeutic tool to reflect on their thoughts and feelings and to understand their intrapersonal strengths (Haffejee & Theron, 2019; Sigad et al., 2015; Walmer & Hyers, 2022). They also used journalling to make sense of their experiences and to self-regulate. Renia Speigel (1924–1942), an adolescent girl who lived in Poland and journalled during World War II, yearned for someone to confide in:

I want somebody I can talk to about my everyday worries and joys. Somebody who will feel what I feel, believe what I say and never reveal my secrets... that’s why I have decided to look for a confidant in the form of a diary. (31 January 1939, cited in Walmer & Hyers, 2022, p. 384)

In the study by Lys (2018), participants exhibited nurturing spiritual wellbeing via grounding oneself in nature and through a connection with God. Several participants discussed feeling grounded and safe outside in nature, which was a source of strength.

“I always feel so much peace outside, like there’s nothing that can hurt me” (Lys, 2018, p. 5). Some of the adolescent girls expressed that being in nature prompted them to disconnect from technology as well.

Many participants discussed their Christian beliefs and their connection with God, which helped guide them when they were struggling emotionally. This connection also gave them feelings of strength and safety. “The Fear Not Bible quote from Isaiah 41:10. It just makes me feel safe and like I can do anything” (Lys, 2018, p. 6).

Building interpersonal connection

Building personal relationships was a common theme across the studies. The sub-themes were friendships, support from family, and connection with others who had been through similar experiences.

The importance of friendship was discussed in four studies (Chang et al., 2020; Haffejee & Theron, 2019; Lys, 2018; Sigad et al., 2015). For participants, their friends were sources of strength, connection, and emotional support. “They make me feel really good about myself. They make me laugh, and whenever like I’m sad or something, they are always there for me” (Lys, 2018, p. 8). Some friends even provided safety and shelter when things got tough at home.

Support from family was examined in five studies and was a source of strength and protection for participants (Dhunna et al., 2021; Haffejee & Theron, 2019; Levey et al., 2018; Lys, 2018; Shalanski & Ewashen, 2019). Family provided emotional support, gave them a sense of belonging and often helped them to make positive decisions. Some studies noted the particular importance of female relatives. “My step-mom ... she’s the only person who’s been so supportive of me” (Haffejee & Theron, 2019, p. 699).

In three studies, participants discussed connecting with others who had also experienced traumatic events (Dhunna et al., 2021; Haffejee & Theron, 2019; Sigad et al., 2015). Listening to and reflecting on others’ stories fostered connection and enabled participants to see that they were not alone. It was also beneficial to see others coping. “I thought I was the only one but only to find that I’m not the only one. There are also people who [have] been

through the same thing but they ... are still healthy and nice” (Haffejee & Theron, 2019, p. 700).

Engaging with community

Seven articles discussed participant engagement within the community, which was illustrated through a growing trust in helping professionals, including social workers, teachers, nurses, psychologists and school counsellors (Dhunna et al., 2021; Dumont et al., 2022; Haffejee & Theron, 2019; Kaiser & Sinanan, 2020; Lys, 2018; Shalanski & Ewashen, 2019; Sigad et al., 2015). Participants expressed that learning to trust a helping professional required a considerable, conscious effort and openness to vulnerability. “Like some of the things I’ve progressed with is just being able to open up to nurses easily ... without feeling as vulnerable” (Shalanski & Ewashen, 2019, p. 496). Some participants spoke about one particular teacher who gave them emotional support, advice, or extra academic assistance. Others spoke about the value of their therapist, who helped them make sense of their thoughts and feelings, assisted them with issues such as self-harm, and encouraged them to discover their strengths. Trusting helping professionals meant participants were able to confide in them, as a result becoming stronger, confident and more self-aware.

Connecting with own Indigenous culture

Dhunna et al. (2021) and Lys (2018) examined Indigenous participants’ connection with their culture. This connection was identified by participants as a sense of belonging, source of strength and mana, or “inherent power/authority and potential” (Dhunna et al., 2021, p. 6192). It helped them maintain relationships with their elders, as knowledge is passed down through the generations. “For many of the women, Nans (grandmothers) and whānau members were key facilitators and sources of Māori knowledge” (Dhunna et al., 2021, p. 6202).

Discussion

This review will now discuss the research question: How can counsellors enhance resilience in adolescent girls who have experienced trauma? Sub-questions are as follows:

- What adaptive coping strategies should counsellors teach or encourage?
- What other resources can counsellors encourage adolescent girls to use?

The findings, including recommendations from the reviewed articles, will now be explored to address the research questions, alongside wider literature (Table 2).

Table 2: Summary of key recommendations

How can counsellors enhance resilience in adolescent girls who have experienced trauma?	Foster adolescent girls' agency
	Encourage adolescent girls to recognise their internal strengths and resources
What adaptive coping strategies should counsellors teach or encourage?	Emotion regulation
	Cognitive reappraisal
	Expression through creativity
	Journalling
	Nurturing their spiritual wellbeing: helping adolescent girls explore their own spiritual or religious beliefs; encouraging them to spend daily time outside
What other resources can counsellors encourage adolescent girls to use?	Discussion around future planning
	Encouragement of adolescent girls to connect with individuals who they feel are positive social supports
	Offer support for young Māori wāhine to connect with their culture
Further considerations and recommendations	Educating adolescents and their families on what to do if a young person discloses abuse
	Reaching out to Māori therapists, with client consent, to support young Māori wāhine
	Helping professionals should be trauma-informed
	Collaboration between sectors
	Helping professionals should be culturally responsive and listen attentively to the stories of young Māori wāhine

How can counsellors enhance resilience in adolescent girls who have experienced trauma?

Recommendations for counsellors within the reviewed studies were identified (Table 2). These include fostering adolescent girls' agency, facilitating future planning, and encouraging young Māori wāhine (Indigenous young women in Aotearoa New Zealand) to connect with their culture. Further considerations include that helping professionals should be trauma-informed and that there should be collaboration between the sectors.

Foster adolescent girls' agency

Adolescent girls who have experienced trauma often exert their agency, for example by protecting themselves or their family from harm (Dhunna et al., 2021; Haffejee & Theron, 2019; Kaiser & Sinanan, 2020; Sigad et al., 2015). Supporting this, Haffejee and Theron (2017) identified that demonstrations of agency and resourcefulness were “resilience-enabling factors” (p. 34) in adolescent girls who had experienced CSA. Furthermore, Chang et al. (2020) recommended that adolescent girls are given choice and a voice in their intervention, in other words, the chance to say “no” to certain aspects of what is offered, as this can foster empowerment. Hence, it is vital that counsellors actively encourage and value agency in their practice.

Encourage adolescent girls to recognise their internal strengths and resources

Many adolescent girls with experiences of trauma have developed internal resources such as hope and self-efficacy (e.g., Haffejee & Theron, 2019; Lys, 2018; Sigad et al., 2015). As Sigad et al. (2015) noted, “it is important to understand that victimhood and survival coexist in their experiences and this [idea] needs to be integrated as an underlying assumption in intervention” (p. 630). Hence, counsellors should encourage adolescent girls to recognise their own internal strengths and resources and provide interventions that foster a positive self-concept, self-efficacy, and hope (Haffejee & Theron, 2019; Lys, 2018; Shalanski & Ewashen, 2019; Sigad et al., 2015). As one girl stated, there is always a “rainbow after the storm” (Haffejee & Theron, 2019, p. 698). Letting adolescent girls know this may contribute to building hope and resiliency.

What adaptive coping strategies should counsellors teach or encourage?

Emotion regulation

Processing emotions enabled some adolescent girls to feel stronger, and more able to cope with challenging situations (Chang et al., 2020; Shalanski & Ewashen, 2019; Sigad et al., 2015). Thus, interventions could include teaching emotion regulation strategies (Chang et al., 2020; Lys, 2018; Shalanski & Ewashen, 2019). Teaching these skills to adolescent girls who have experienced trauma is also recommended by wider literature, as emotion regulation strategies are a “fundamental aspect of youth development” (Sui et al., 2020, p. 156). Helpful strategies include acceptance, distraction and cognitive reappraisal (Wante et al., 2018).

Cognitive reappraisal

Cognitive reappraisal, which involves reframing thoughts or events, enabled adolescent girls who had experienced trauma to alter their self-perceptions and contributed to letting go of self-blame (Chang et al., 2020; Haffejee & Theron, 2019; Sigad et al., 2015). Consistent with this, cognitive reappraisal was found to have a positive impact on the self-efficacy of adolescent girls who had experienced CSA (Haffejee & Theron, 2017). Hence, cognitive reappraisal could be taught as an adaptive coping strategy. Importantly, counsellors need to ensure the new narrative is meaningful, without diminishing the significance of the event.

Expression through creativity

Expression through creativity, for example art, poetry and music, was used to process feelings and help some adolescent girls who had experienced trauma cope with stress (Lys, 2018; Walmer & Hyers, 2022). Kay and Wolf (2017) also found that art therapy, which involved visual art and creative writing, promoted several benefits for these girls, such as agency, collaboration skills, a connection with others, a sense of pride, and a stronger self-image. Thus, counsellors could encourage adolescent girls to create on their own or in art therapy.

Journalling

Three studies examined the use of journalling as a therapeutic tool to reflect on thoughts and feelings (Haffejee & Theron, 2019; Sigad et al., 2015; Walmer & Hyers, 2022). Supporting this, Pytash (2016) observed that poetry and journalling helped adolescent girls who had backgrounds of risk-taking behaviours cope with life events including challenging relationship events such as breakups. Hence, counsellors could suggest that adolescent girls try journalling as a therapeutic tool.

Nurturing spiritual wellbeing

Some adolescent girls who had experienced trauma nurtured their spiritual wellbeing through a connection with God, which was a source of strength and safety (Lys, 2018). Similarly, Gower et al. (2020) found a correlation between divine support, meaning support from a higher power or god, and resilience. Counsellors could therefore facilitate exploration of adolescent girls' spiritual or religious beliefs (Chang et al., 2020).

Lys (2018) observed that grounding oneself in nature was another source of strength for some adolescent girls who had experienced trauma. This corresponds to the findings of Barton et al. (2016), whose study focused on adolescents participating in wilderness expeditions, in other words, full-immersion educational experiences conducted in the “wilderness”, away from technology. Positive outcomes included an improvement in self-esteem alongside a “connection to nature” (p. 8). Hence, encouraging adolescent girls to spend daily time outside is an additional recommendation for counsellors. Taking this time to disconnect from technology may also be beneficial.

What other resources can counsellors encourage adolescent girls to use?

Facilitate future planning

Having goals and dreams gave adolescent girls hope, and actively moving towards these goals and dreams demonstrated agency. These two aspects of resilience were observed across all the reviewed studies. Haffejee and Theron (2017) also reported that future planning by adolescent girls who had experienced CSA was correlated with a “positive perception of the world” (p. 35). Thus, counsellors could facilitate conversations regarding future planning (Haffejee & Theron, 2019).

Encourage adolescent girls to connect with individuals who they feel are positive social supports

Supportive relationships with friends and family were important for some adolescent girls (e.g., Dhunna et al., 2021; Haffejee & Theron, 2019; Shalanski & Ewashen, 2019). Other studies found similar results for adolescent girls who had experienced trauma. Guerra et al. (2018) identified the importance of perceived family support, Russotti et al. (2023) found that the maternal attachment relationship moderated depressive symptoms, and Thomas et al. (2022) reported that friendships enhanced the resilience of adolescent girls. Furthermore, adolescents were more likely than children to disclose abuse to friends, and girls were more likely to than boys (Manay & Collin-Vézina, 2021). Considering these findings, counsellors could encourage adolescent girls who have experienced trauma to connect with individuals who they feel are positive social supports, such as female relatives, but importantly, who *they* know they can reach out to (Lys, 2018; Shalanski & Ewashen, 2019). Additionally counsellors could educate adolescents and their families on what to do if a young person discloses abuse.

Support young Māori wāhine to connect with their culture

For Indigenous adolescent girls who had experienced trauma, having a connection with their own culture was recognised as a source of strength and mana and gave them a sense of belonging (Dhunna et al., 2021; Lys, 2018). This is consistent with other findings. For rangatahi Māori (young Māori), connecting with their culture was found to reduce self-

harming behaviours (Kingi et al., 2017). Hence, the literature recommends supporting young Māori wāhine to connect with their culture. For those who strongly identify as Māori, counsellors could suggest they reconnect with their whenua (land) by going “back home to their marae, swimming in their awa (river) and walking up their maunga (mountain)” (p. 142). For those who do not identify strongly as Māori, if the young woman is receptive, counsellors could encourage learning a waiata (Māori song), a simple karakia (prayer), or their pepeha (an expression of their connections to their whenua and tāngata [people]), or joining their school kapa haka group.

Furthermore, Dhunna et al. (2021) suggested the value for young Māori wāhine of having a Māori counsellor, as they “greatly enhanced the quality of counselling” (p. 6207). To foster tino rangatiratanga (a Māori concept of self-determination), youth services for young Māori wāhine should be “led by Māori, designed by Māori, and intended to cater for the unique needs and aspirations of rangatahi Māori” (Lindsay Latimer et al., 2022, p. 298). Counsellors could therefore reach out to Māori therapists, with client consent, to support young Māori wāhine.

Further considerations

Helping professionals should be trauma-informed

Many adolescent girls who had experienced trauma commented on their growing trust in helping professionals who gave them assistance, for example by encouraging them to recognise their own strengths (e.g., Haffejee & Theron, 2019; Lys, 2018; Shalanski & Ewashen, 2019). Thus, several studies recommended that helping professionals be trauma-informed (Chang et al., 2020; Haffejee & Theron, 2019; Lys, 2018; Shalanski & Ewashen, 2019). This includes *all* helping professionals who work with adolescents such as teachers, nurses, counsellors and social workers. Being trauma-informed involves attending training to gain specific knowledge of how to support and respond to individuals who have experienced trauma. Supporting this, Bullard (2021) advocated that teachers should have knowledge of adverse childhood experiences and use trauma-informed approaches in the classroom. Thus, school counsellors could advocate for the provision of trauma-informed training for their teacher-colleagues.

Collaboration between sectors

Multiple sectors such as education, mental health and social services, can influence adolescent girls who have experienced trauma, and hence they could be working together to support them (Dhunna et al., 2021; Haffejee & Theron, 2019). This is consistent with previous recommendations (Sanders et al., 2014). Providers should collaborate to make sure that interventions are empowering and respectful across services for youth who have experienced trauma. In a school setting, this may look like counsellors, nurses, social workers and teachers working together to support young adults.

Moreover, it is imperative that helping professionals are culturally responsive and listen attentively to the stories of young Māori wāhine so that they “have the freedom to be themselves and reclaim their identity/identities in a society that is at once both ‘modern’ and colonial” (Dhunna et al., 2021, p. 6214).

Study limitations

There are limitations in reviewing only small qualitative studies because the findings in them have limited transferability, as they are culturally and contextually specific (Stapley et al., 2023). Thus, there is a need for gathering the voices of adolescent girls who have experienced trauma in an Aotearoa New Zealand context.

Additionally, there were limitations of utilising Long et al.’s (2020) modified CASP tool. The archival diary study could not be rated, as many of the critical appraisal aspects were not appropriate to a historical study. Furthermore, the fact of my being a Pākehā researcher utilising a Western approach to assess a Kaupapa Māori study raises the issue of possible researcher or assessment bias. Therefore, a cultural advisor was contacted, who confirmed that my analysis was culturally responsive.

Recommendations for future research

More qualitative resilience research is needed with adolescent girls who have experienced trauma in the multicultural context of Aotearoa New Zealand. Understanding what they consider to be helpful will assist counsellors to provide relevant support. Importantly, the

voices of these girls can inform relevant interventions, which will help to address the negative effects of trauma.

Conclusion

This systematic literature review explored the resilience factors for adolescent girls who have experienced trauma. It focused on their perspectives to enable counsellors to provide effective support. The key derived themes were fostering active agency; nurturing internal strengths and resources; building interpersonal connection; engaging with community; and connecting with their Indigenous culture, as appropriate. The findings also emphasised the socio-ecological nature of resilience, in other words, the systems that influence the resilience of adolescent girls. Their interpersonal systems (e.g. friends and family), community systems (e.g. helping professionals), and societal systems (e.g. the individual's Indigenous culture) promoted resilience-enabling behaviours, such as hope, self-efficacy, strength, and self-determination.

More qualitative resilience research is needed in Aotearoa New Zealand with adolescent girls who have experienced trauma. Gathering their voices will inform relevant interventions, which may reduce the negative effects of trauma. Recommendations emerging from the literature for counsellors included encouraging adolescent girls to recognise their internal strengths and resources, facilitating conversations regarding future planning, and encouraging young Māori wāhine to connect with their culture. Additionally, all helping professionals should be trauma-informed, collaborative and culturally responsive.

Importantly, adolescent girls who have experienced trauma need help to realise they are “resourceful, surviving, and even thriving despite at times [having] very limited resources” (Shalanski & Ewashen, 2019, p. 498). When adolescent girls who have experienced trauma are supported in ways that are empowering, they will not only survive, but flourish.

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