Why is it that if ten people experience basically the same loss, major change or life threatening event, some end up developing depression, anxiety or posttraumatic stress disorder, while others aren’t affected much at all, and might even grow from the experience? The answer, says Sam Goldstein, has to do with resilience.

“Resilience” may seem like a straightforward concept, but it turns out to be quite complex. Goldstein’s first run at defining resilience is “the ability to manage adversity without becoming overwhelmed or experiencing significant impairment.” To the extent a person is resilient, Goldstein says, a person manages to function well in the face of stress, manages to overcome adversity to some extent, and can move on with life when the stressor passes. It’s a pattern of positive adaptation during a history of past adversity or in the face of present adversity. In the face of difficult events, resilience serves as a buffer. Goldstein uses the term “psychosocial competence” as a general descriptor of a person’s ability to call upon personal or environmental resources to accomplish what needs to be done. For example, a child with a reading disability who is psycho-socially competent manages to enlist the help of people around him or her and manages to do well, while another child with the same reading disability who isn’t psycho-socially competent throws their hands up. So resilience is something within a person—or how that person interacts with the environment—that predicts a better outcome.

Given this, it would make sense for school psychologists, teachers or physicians to have kids and teens sit a test of resilience. That way, parents and professionals alike would know whether someone was already resilient, or whether they needed help in developing a healthier mindset. A resilience questionnaire would theoretically predict the future, Goldstein says, by identifying the degree to which kids are vulnerable to experiencing a bad outcome when the heat gets turned up. As he sees it, a measure of resilience would assess the way personal attributes and environmental contexts weave together to shape the course of somebody’s life. But even though many mental health professionals are
interested in this, he says, nothing’s been developed yet. He’s well aware of problems facing researchers who try to apply scientific principles to resilience. He says it’s still hard to predict peoples’ responses to adversity, and he says it’s possible that there is no reliable way to quantify or measure resilience. He describes three general waves of research into resilience. The first wave identified variables that predict a good outcome. For example, if a child is living in poverty with a serious medical problem, he is likely to do better if he has two parents than if he has one, and if his family is part of a religious community.

This research ended up with a kind of recipe. In other words, if such and such conditions are in place, a person is more likely to do well. The second wave of research asked about what happens when these protective factors interact with the larger world. For example, how would the outcome of the child living in poverty with a medical problem change depending upon the style of parenting used in his home? Also, this second wave of research looked at resilience factors that were benign until adversity came along, at which time they turned out to insulate and protect a person. Sam Goldstein’s research in resilience is part of a third wave, he says. The work of this wave is to figure out how to apply what we know. As he puts it, the big issue is not so much measuring resilience but predicting it.

So how do parents, physicians and teachers know when a child or teen is resilient? Sam Goldstein suggests that maybe it’s a matter of interacting with a child and just knowing it when you see it. How does a person develop resilience only by going through adversity? Or can children and adults develop resilience without going through hard times? Goldstein acknowledges that there are different opinions about this, but believes that children, teens, and adults can build a resilient mindset—that is, learn to think, feel and behave in certain ways identified with resilience—and then call upon this healthy mindset as a resource when adversity comes.

In fact, the resilience books by Sam Goldstein and Robert Brooks have a lot to do with the things parents and other concerned grown-ups can do to foster resilience in kids. Goldstein says that, even though resilience isn’t yet a well-defined phenomena, it’s part of a larger move in the mental health professions away from treatment of illness toward prevention of illness. He argues that psychology, psychiatry, and social work remains too focused on symptom relief. As he sees it, each of us has the capacity to develop a resilient mindset, so that if adversity comes our way, we can maintain competence.

When talking about the need for innovation in psychological services for children, Goldstein retells a parable of a man out fishing on a beautiful day. The man sees a boy in the river drowning, picks up the boy, and puts him in the boat. As he starts to row to shore, he’s a little annoyed that his day has been disrupted but he’s a Good Samaritan and the boy thanks him. As they row toward shore, he suddenly
sees another boy drowning. He stops to pick him up and puts him in the boat too. As he nears the shore, he goes around a bend in the river, looks upstream, and sees thousands, if not tens of thousands, of children floating down the river, every one of them drowning. He keeps rowing ashore.

One of the boys yanks on his arm and he says, “Mister, Mister, we can put more kids in the boat,” to which the man responds, “We don’t have the time. We have to row to shore and I’ve got to go upstream to find out who’s throwing kids in the river and make them stop.” As Goldstein sees it, any review of statistics about kids shows that kids are much worse off today than they’ve ever been.

He feels a sense of urgency to this. He laments the fact that mental health professionals have become so associated with the ability to measure symptoms and suffering, and so little with the ability to influence systems and protect and insulate people at risk. It’s not enough to concentrate on relieving symptoms, he says. But he points to signs that mental health is shifting toward the positive. Whereas we used to put most of our energy into describing how people are unwell, he says, we’re spending more time studying people who negotiate difficulties well, trying to figure out how they do it, and applying what we know to others.

So resilience building is part of a larger shift in mental health toward strength building instead of symptom-relieving. When kids go to see Dr. Goldstein, he likes to point out to them that when they grow up nobody is going to be cheering about their worst subject in school or their most annoying behaviour. He tells them that when they grow up, they’ll get some place when they figure out how to make the most of their strengths. “You’re having trouble now,” he says to his clients.

“Our job now is to figure out where your best strengths and abilities are, and how you can use them.” Goldstein’s and Brooks’ writings say a lot about the skills and qualities that grownups need to model and teach kids in order to help them build a resilient mindset.

Goldstein gives the following suggestions, not necessarily in order of importance:

- Help kids to feel special and appreciated. So many parents tell you that they accept their child unconditionally when this isn’t really the case. It’s essentially important for a child to know that his or her parents hold them in special places in their hearts. A child who knows he or she is loved and appreciated has access to a wellspring of strength to face daily challenges and to develop a resilient mindset.

- Accept kids for who they are. Don’t set the bar too high. Make sure you have a realistic understanding of a child’s or teen’s ability to process information and solve problems. One of the gifts of psychological evaluation is that it gives a family information about what is reasonable to expect from their child when they start telling him or her how they should
• Foster empathy. Parents need to take the time to understand and experience their child’s perspective. It’s important to walk in a kid’s shoes before jumping to conclusions about the nature of his or her problems. Parents need to develop and fine-tune their own capacity for empathy and allow their child to feel genuinely listened to and appreciated. Families function better, communicate more effectively, and children are more resilient when everyone in a household starts with and practices empathy every day.

• Teach and model communication. Listen, learn, and influence. Make sure you understand before you seek to be understood. Any good salesperson will tell you that if you want to influence people, you have to listen to them and understand where they are coming from before you can influence them.

• Value mistakes. It’s important to help kids to feel comfortable making mistakes, and to understand that mistakes are opportunities for learning.

• Teach problem-solving and decision making, two basic components of a resilient mindset. Every day, parents have countless opportunities to engage with their kids in activities that involve problem-solving and decision making. Making the most of these opportunities helps kids to gain a sense of control and mastery in their lives.

• Discipline in ways that promote self-discipline. The aim of discipline, Goldstein says, should be to help a child to behave more consistently in appropriate ways. The goal should be to help a child toward more independence and needing less supervision.

• Promote responsibility. Help children to develop responsibility, compassion, and a social conscience. Model ways of dealing with the world that demonstrate connectedness. Help kids to stay connected to people.

