Nurturing Motivation and Resilience in Children with Special Needs: A Strength-Based Approach

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A commencement speech at Stanford University
Highlighting the importance of connecting the dots backwards: What events in our past have had a major impact on our present lives?
This perspective resonated with the questions I was asking in my professional activities and prompted me to look more closely at the significant dots in my life.

Connecting the dots backwards
Key events that led to my speaking here today
The publication of Bruno Bettelheim’s book The Empty Fortress in 1967 during my internship year. Were parents really to blame for causing their child’s autism? It was a difficult position for me to fathom.

Connecting the dots backwards
Temple Grandin in her book The Autistic Brain wrote, “Bettelheim argued that an autistic child was not biologically predetermined to manifest the symptoms of autism. Instead the child was biologically predisposed towards these symptoms. The autism was latent—until poor parenting came along and breathed life into it.

Connecting the dots backwards
“But the problem wasn’t a psychic injury and Mother knew it... Mother assumed she couldn’t do anything about the cause of my behavior, so her approach was to concentrate on dealing with the behavior itself. In this respect, Mother was ahead of her time. It would take child psychiatry decades to catch up.”

Connecting the dots backwards
And it wasn’t just in terms of autism that child psychiatry had to catch up. Early views about the etiology of special needs—as one example:
The letter “c” reminds the child of an open mouth and distracts the needy child from reading effectively.
Children labeled as “resistant”
Connecting the dots backwards
A major dot in my professional life: The seeds of the strength-based approach I was to adopt were essentially planted in 1973—encouraged by my obvious lack of success with the population of children and adolescents I was serving.

Connecting the dots backwards
“Kids on the spectrum tend to get fixated on things they like. You need to use those fixations to teach kids different subjects. If the child is fixated on airplanes, the teachers might use planes to illustrate lessons in physics, engineering, history, and more.”

Connecting the dots backwards
What a boy obsessed with the weather taught me and my staff. An invaluable shift in perspective. And Grandin had something to say about this 40 years later:

Thus, my initial experiences at McLean Hospital, while very challenging at first, prompted my interest in the concept of resilience and my shift from a deficit model to an approach that focused on identifying and reinforcing strengths or what I was to label “islands of competence.”

Connecting the dots backwards
The poignant comment of a mother of a five-year-old daughter with special needs that highlighted the power of mindsets: “I have been punishing a suffering child.”

Connecting the dots backwards
Mindsets: The assumptions and expectations we have for ourselves and others that guide our behavior. Many children and adolescents with special needs possess a negative mindset that compromises success in school and life: What are some of the main features of this negative mindset?
The negative mindset of many children with special needs

Helplessness: Lack of control or influence about events that happen in one’s life
Hopelessness: Nothing will ever change
Others don’t understand and can’t help me

The power of mindsets

Two key questions for consideration during this presentation:

What is the mindset of children and adolescents who are more confident and resilient, who demonstrate the capacity to bounce back from adversity and overcome the challenges they face?

Features of a positive mindset

To recognize the day-to-day courage displayed by children with special needs and to believe in their capacity to overcome adversity and become resilient: The importance of a “charismatic adult”

“I want to be a charismatic adult. What do I do?”

The negative mindset of many children with special needs

I make little, if any, positive difference in this world
General feeling of things not being fair
I feel unaccepted and unloved

The power of mindsets

What is the mindset of adults who are effective in changing negative into positive mindsets in children and adolescents with special needs, thereby increasing motivation, learning, hope, and resilience? This touches on the question, “What is your theory of motivation?” or “How do you create ‘motivating environments’?”

Features of a positive mindset

To believe that all children from birth want to learn and be successful
To believe that all children are motivated, but unfortunately, some are dominated by “avoidance motivation.”
If there is an inborn need to succeed, why does avoidance motivation arise?
Features of a positive mindset
Children may seem to be avoiding when in fact they do not understand the demands of the situation: a likely explanation for many children with problems in social thinking. And/or they may avoid when they believe the situation will lead to failure and humiliation.

Features of a positive mindset
Thus, rather than asserting that children are lazy or unmotivated or don’t care, we should ask, “How do we lessen avoidance motivation in children who use it? What skills must we develop and what outlook must we promote with these children so that they are more likely to be optimistic and engage in the tasks that they encounter?”

Features of a positive mindset
To believe that if the strategies we are using with children with special needs are not effective we must ask, “What is it that we can do differently to help the situation?” rather than wait for the child to change first: This should not be seen as blaming but rather empowering ourselves, especially to think outside the box.

Features of a positive mindset
To be empathic: We must strive to see the world through the eyes of children with special needs and consider how they perceive and understand their world, and how they communicate about their experiences.

Features of a positive mindset
In attempting to be empathic we can reflect upon the following questions:

What words do I hope children with special needs use to describe me?
What have I said done so they are likely to use the words I hope they use?

Features of a positive mindset
What words would they actually use to describe me?
If the words I hope they would use are different from the words they would actually use, what changes must I make to bring the descriptions closer together?
Some additional exercises to nurture empathy
To use empathic communication:
Additional questions to consider as we attempt to touch both the hearts and minds of our students
Am I communicating in ways and/or helping children to communicate in ways to reinforce their Social Thinking and other skills? Or, worded a little differently:

Features of a positive mindset
To understand the main characteristics of the mindset of resilient children and adolescents so that we can have guideposts for reinforcing this mindset in all of our interactions with children and adolescents who are burdened with negative mindsets: Let’s look at several of the main features of a social resilient mindset, which parallel components of intrinsic motivation

The social resilient mindset
To possess skills for solving problems and making decisions, which promotes a sense of intrinsic motivation, responsibility, and personal control

The social resilient mindset
Given deficits in executive functioning that many children with special needs have, these problem-solving skills, which involve planning and implementing short and long-term goals and considering different options, are typically lacking
The social resilient mindset

However, as Jeremy Sicile-Kira noted in *A Full Life with Autism*, “All individuals need to be more independent. Freedom to make choices is very important. Having the opportunity to make choices helps people grow. You need to learn self-advocacy.”

The social resilient mindset

To be able to identify and engage in one’s interests and “islands of competence” without denying those areas that require reinforcement. Educators and clinicians must pose questions about strengths as a major part of our interventions.

The social resilient mindset

As Jeremy asserted, “Teach your children to have the courage to follow their dreams. . . . Help him discover his strengths, because often people focus on his deficits.”

The social resilient mindset

To engage in “contributory activities” that reinforce purpose and meaning in one’s life—a basic component of a social resilient mindset throughout the lifespan.

Jeremy provided his thoughts about this theme:

The social resilient mindset

And Grandin offered her insights about contributing:

“ Teach your child how to volunteer. She will learn to give back to the community and make some connections who might become friends.”

“Dog walking. Volunteering at a soup kitchen. Shoveling sidewalks, mowing lawns, selling greeting card. When I was 13 Mother arranged for me to get a seamstress job for two afternoons a week. . . . I liked feeling useful. And I liked making money.”
The social resilient mindset

To reflect upon the possible consequences of one's behavior before acting and to demonstrate self-discipline—as research has indicated, self-discipline is a key dimension of leading a more accomplished, satisfying, resilient life.

The social resilient mindset

To believe that mistakes are expected and accepted—that mistakes are experiences from which to learn rather than feel humiliated: How best to prepare children with special needs to cope effectively with setbacks?
The Power of Mindsets: Nurturing Student Engagement, Motivation, and Resilience in Students

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Abstract

In this chapter three interrelated concepts—student engagement, motivation, and resilience—are examined through the lens of “mindsets.” Mindsets are assumptions that we possess about ourselves and others that guide our behavior. The mindset that educators hold about the factors that contribute to student engagement, motivation, and resilience determines their expectations, teaching practices, and relationships with students. We identify the key components of these three concepts, highlighting those that overlap. We distinguish between extrinsic and intrinsic motivation and the ways in which the latter is more closely attuned with student engagement and resilience than the former. We encourage the ongoing discussion of mindsets at staff meetings so that teachers become increasingly aware of the mindset of engaged, motivated learners and consider how to nurture this mindset in the classroom. We offer many strategies to facilitate the enrichment of this mindset in all students.
The Power of Mindsets: Nurturing Student Engagement, Motivation, and Resilience in Students

In this chapter we will describe the close link among three interrelated concepts: motivation, student engagement, and resilience. We will examine these concepts through the lens of “mindsets.” Mindsets may be understood as assumptions that we possess about ourselves and others that guide our behavior. The mindsets that educators hold about the basic components of motivation and engagement will determine their expectations, teaching practices, and relationships with students (Brooks, 2001; 2004; Brooks & Goldstein, 2001, 2004, 2007; 2008; Goldstein & Brooks, 2007).

The concept of mindsets has become an increasingly prominent area of study, especially with the emergence of the field of “positive psychology.” As examples, Carol Dweck authored a book titled Mindset (2006) in which she distinguished between a “fixed” and “growth” outlook; the research of Martin Seligman and his colleagues about “learned helplessness,” and “learned optimism” as well as resilience (Reivich & Shatte, 2002; Seligman, 1990) have underpinnings in attribution theory, which is basically about mindsets, examining how we understand the reasons for our successes and setbacks (Weiner, 1974).

Educators bring assumptions about student behavior into all of their interactions with those in their classrooms and schools. The more aware they are of these assumptions, the more they can change those beliefs that may work against the creation of a positive classroom environment. Even those assumptions about which we may not be cognizant have a way of being expressed to students. For example, a teacher may be annoyed or frustrated with a child without realizing that the anger is rooted in the teacher’s assumption that the child’s constant asking of questions is an intentional ploy to distract the class. In addition, the teacher may not be aware that his annoyance is not as disguised as he believes, and is being communicated through facial expressions and tone of voice.

In contrast, another teacher with the same student may assume that the child’s ongoing questions represent an attempt to understand the material being presented. This teacher is more likely to express positive verbal and nonverbal messages and to offer assistance, perceiving the child as being vulnerable and motivated rather than being oppositional.

The impact that the mindset of educators has in determining their approach to students and the extent to which they nurture motivation, student engagement, and resilience is apparent in the following example:

Parents of a high school student, John, contacted the first author several years ago. They asked Bob to serve as a consultant to John’s school program. An earlier evaluation revealed that John was struggling with learning disabilities and academic demands. When Bob met with John’s teachers and requested that they share their perceptions of him, one immediately responded with obvious anger, “John is one of the most defiant, oppositional, lazy, unmotivated, irresponsible students we have at this school!”

Another teacher seemed surprised by the harshness of this assessment. In a manner that maintained respect of her colleague’s opinion, she said, “I have a
different view. I think John is really struggling with learning and he feels very vulnerable every day when he enters the school. I think that as a staff we should figure out a different way of teaching him because what we are doing now is a prescription for failure.”

In listening to these two descriptions of the same student, one could not help but conclude that the teachers were offering opinions of two distinctly different youngsters. It would not be surprising to discover that these vividly contrasting opinions or mindsets and the teacher behaviors they triggered would likely contribute to John having markedly different mindsets and responses to each of these two teachers. In fact, this was the case.

After the meeting Bob interviewed John and asked him to describe his teachers, not revealing what they had said about him. In describing the teacher who had portrayed him very negatively, John said with noticeable force, “She hates me, but that’s okay because I hate her. And I won’t do any work in her class.”

John continued, “And don’t tell me that I’m only hurting myself by not doing work (he must have heard that advice on numerous occasions). What you don’t understand, Dr. Brooks, is that in her eyes I am a failure. Whatever I do in her class is never going to be good enough. She doesn’t’ expect me to pass, so why even try?” He said that from the first day of class he felt “angry vibes” from her.

“She just didn’t like me and soon I didn’t like her. I could tell she didn’t want me in her class just by the way she spoke to me. Right away she seemed so angry at me. I really don’t know why she felt that way. So after a while I knew there was no way I could succeed in her class so I just decided that I wouldn’t even try. It would just be a waste of time. She told me I was lazy, but if she was honest she would have to admit that she doesn’t think I could ever get a good grade in her class.”

John’s face lit up as he described the teacher who thought that the primary issues that should be addressed were his struggles with learning and his sense of vulnerability. He said, “I love her. She went out of her way the first week of school to tell me something. She said that she knew I was having trouble with learning, but she thought I was smart and she had to figure out the best way to teach me. She said that one of the reasons she became a teacher was to help all students learn. She’s always there to help.”

In hearing John’s perception or mindset of these two teachers, it is not difficult to appreciate why he was a discipline problem with the first teacher but not the second. His behavior with each of them reflected what he believed were their mindsets and expectations for him. We recognize that it typically takes “two to tango” and most likely at some point John bore some responsibility for adding fuel to the “angry vibes,” thereby confirming the first teacher’s negative perceptions of him. However, it is essential for educators to identify and modify those features of their mindset that work against student motivation and student engagement and serve as barriers to students becoming more optimistic and resilient.
Guiding Questions for Consideration
Given the power of mindsets in determining the social-emotional and learning climate created in classrooms, several key questions can be raised:

- What are the characteristics of the mindset of students who are motivated and engaged?
- What are the characteristics of the mindset of resilient students? How do resilient students see themselves differently from their peers who are not resilient? In what ways does a “resilient mindset” overlap with the mindset of motivated, engaged students?
- What are the characteristics of the mindset of educators who are most effective in nurturing motivation, engagement, and resilience in students?
- What specific strategies or interventions can teachers with positive mindsets develop and implement to nurture motivation, engagement, and resilience in their classrooms?

To answer these questions, one must also examine the following related question: What are the main components housed in the concepts of motivation, student engagement, and resilience?

Characteristics of Students

The Mindset of Engaged, Motivated Students
Goldstein and Brooks (2007) have identified five major characteristics of the mindset of motivated students. They include:

1. To perceive the teacher as a supportive adult. We place this first to capture the essential relationship that teachers form with students in promoting motivation. As has often been expressed, “Students don’t care what you know until they first know you care.” Motivated students feel that teachers genuinely care about them as individuals and want them to learn and to succeed (Klem & Connell, 2004; McCombs & Pope, 1994; Middleton & Pettit, 2010; Wagner, Kegan, Lahey, & Lemons, 2005). When struggling with an academic task or with nonacademic issues, the successful student feels comfortable in taking the initiative and asking the teacher for assistance. They do not perceive requesting help as a weakness, but rather as an integral feature of the classroom environment.

2. To believe that whether they learn as students is based in great part on their own motivation, perseverance, and effort (Adelman & Taylor, 1983; Brooks, 1991; Deci, Hodges, Pierson, & Tomassone, 1992; DiCintio & Gee, 1999; Seligman, 1995; Weiner, 1974). This does not minimize the role that teachers play, but if students do not view themselves as active participants in the learning process, but rather as passive recipients of what is being taught, their interest, enthusiasm, and involvement for learning will be greatly diminished.

3. To recognize that making mistakes and not immediately comprehending certain concepts or material are expected features of the learning process. Students who persist when confronted with challenging learning tasks, are those who believe that mistakes serve as the basis for future learning, that mistakes invite new learning strategies (Andrews & Debus, 1978; Canino, 1981; Dweck, 1986, 2006). This outlook is in sharp contrast to students who interpret their mistakes as an indication that they are not very intelligent and thus, they are incapable of correcting the situation. If they believe that any
efforts they make to learn will not eventuate in success, they will not persevere in that activity, demonstrating what Seligman (1990) labeled as “learned helplessness.

4. To have a clear understanding of their learning strengths and learning vulnerabilities. It is essential that learning strengths and vulnerabilities be identified for students (Levine, 2003). As students gain insight into their learning profile, the more they can develop and apply effective strategies to learn successfully (Schunk & Rice, 1993). When students don’t understand why they are struggling with learning or when they believe they are dumb or stupid or lazy, they are more vulnerable to engage in self-defeating ways of coping represented by non-compliant behaviors.

5. To treat classmates with respect and avoid teasing or bullying, recognizing that such behaviors work against a positive school climate and adversely affect the learning of all students (Davis, 2003; Olweus, 1994). Students must realize that maintaining a caring, respectful classroom and school is the responsibility of each member of that classroom and school.

The Mindset of Resilient Children and Adolescents

Brooks and Goldstein (2001) have defined resilience as the capacity to cope effectively and positively with past or present adversity. They have identified the outlook and skills associated with a “resilient mindset.” They include:

1. To be able to set realistic goals and expectations for themselves.

2. To believe that they have the ability to solve problems and make thoughtful decisions and thus are more likely to view mistakes, setbacks, and obstacles as challenges to confront rather than as stressors to avoid.

3. To rely on effective coping strategies that promote growth and are not self-defeating.

4. To be aware of and not deny their weaknesses and vulnerabilities. They do not view these vulnerabilities as flaws but rather as areas for improvement. They also realistically accept when certain tasks may be beyond their abilities at the present time but open to change in the future.

5. To recognize, enjoy, and engage in their strong points and talents.

6. To possess a self-concept that is filled with images of strength and competence or what we have referred to as “islands of competence” (Brooks. 2004; Brooks & Goldstein, 2001).

7. To feel comfortable relating with others and to rely on effective interpersonal skills with peers and adults alike. This enables them to seek out assistance and nurturance in a comfortable, appropriate manner from adults who can provide the support they need.

8. To believe that there is a purpose to their existence, that they are making a positive difference in the lives of others.

9. To define the aspects of their lives over which they have control and to focus their energy and attention on those rather than on factors over which they have little, or any, influence.

Numerous researchers and clinicians have studied and articulated different features of this mindset (Masten, 2001; Masten & Coatsworth, 1998; Rutter, 1987; Seligman, 1995; Sheridan, Eagle, & Dowd, 2005; Shure, 1996, 2003; Werner & Smith, 1992, 2001; Wright & Masten, 2005). As will be apparent many of these features overlap with those associated within the mindset of motivated learners.
It is our belief that educators can nurture mindsets associated with increased motivation, engagement, and resilience as a natural part of their classroom teaching practices. It is important to note that reinforcing social-emotional skills should not be perceived as an “extra curriculum” that ciphers already limited time from teaching academic subject matter. In fact, our position is that the more secure and engaged students are, the more motivated they will be to meet academic requirements.

Let’s turn now to examining the concepts and components of motivation and student engagement before identifying the mindset and practices of teachers who are skilled in nurturing these qualities in students.

Motivation, Student Engagement, and Resilience

**Motivation: Intrinsic or Extrinsic—Autonomous or Controlled**

There is no simple answer to the question, “What is the relationship between student engagement and motivation?” As we shall see not only is the concept of student engagement multi-dimensional (Appleton, Christenson, & Furlong, 2008; Appleton, Christenson, Kim, & Reschly, 2006; Christenson & Anderson, 2002), but so too is motivation, which without wishing to simplify things has primarily been cast as residing in two broad camps, namely, motivation that is intrinsically or extrinsically driven.

To capture the key dimensions of intrinsic and extrinsic motivation, psychologists Edward Deci and Richard Ryan at the University of Rochester in New York have advanced “self-determination theory” (SDT) (Deci & Flaste, 1995; Deci, Koestner, & Ryan, 2001; Deci & Ryan, 2000). Instead of the words intrinsic and extrinsic they prefer to use the concepts autonomous and controlled.

They distinguish autonomous from controlled in the following way (Deci & Flaste, 1995):

*To be autonomous means to act in accord with one’s self—it means feeling free and volitional in one’s actions. When autonomous, people are fully willing to do what they are doing, and they embrace the activity with a sense of interest and commitment. Their actions emanate from their true sense of self so they are being authentic. In contrast, to be controlled means to act because one is being pressured. When controlled, people act without a sense of personal endorsement. Their behavior is not an expression of the self, for the self has been subjugated to the controls. In this condition, people can reasonably be described as alienated.*

(p. 2)

As we attempt to understand the relationship between motivation and student engagement and consider the two main types of motivation spotlighted by Deci and Ryan, we might be better served to ask the questions, “Does intrinsic (autonomous) or extrinsic (controlled) motivation contribute more to the enrichment of student engagement? Or, is there any difference at all? Or can aspects of intrinsic motivation be applied even when extrinsic motivation is used?”

We would argue that the variables associated with intrinsic motivation are much more closely aligned with both student engagement and resilience than those embedded within extrinsic motivation. To take this argument a step further, it is our belief that practices predicated upon extrinsic motivation may, at times, actually work against students becoming more engaged with learning tasks or becoming more resilient unless features of intrinsic motivation are incorporated within the practices of extrinsic motivation.
Lepper, Greene, and Nisbett (1973) conducted a study in the early 1970s that generated much dialogue about those factors involved in motivating children to engage in particular activities. Their research is often cited in the literature about motivation, not simply as a result of the topic it examined, but because their findings were counterintuitive to what many anticipated.

Lepper, Greene, and Nisbett observed a preschool class and identified those children who chose to draw during their “free time” play. Then they designed an experiment to discover what happens when you reward an activity that the children already enjoyed doing. The researchers divided the children into three groups. The first was called the “expected-award” group. They showed each of the children in this group a “Good Player” certificate featuring a blue ribbon and the child’s name; they told these children that they would receive an award for drawing. The second group was designated the “unexpected award” group. These children were asked if they wanted to draw and if they did, they were given one of the “Good Player” certificates when the session concluded. They did not know in advance that they would receive an award. The third group was the “no award” group. These preschoolers were asked if they wanted to draw, but they were neither promised a certificate prior to drawing nor given one at the end.

Two weeks later the teachers of the preschoolers put out paper and markers during the “free play” period while the researchers secretly observed the students. A central question being studied was whether being involved in one of the three groups two weeks earlier would have any impact on the child’s behavior now. If so, what would it be? One prediction was that an award given two weeks earlier would not impact appreciably or at all on the child’s behavior today. Another possibility, strongly rooted in what Pink (2009) called “The Motivation 2.0 Operating System,” would be that the children who received awards for engaging in drawing would display even greater interest in and motivation to draw since they were rewarded for that behavior. Motivation 2.0 is based on the premise that the way you motivate people to do what you want is to reward them for the behavior you seek and punish them for behavior you do not want to appear. It is predicated on extrinsic motivation.

The tenets of Motivation 2.0 would lead one to assume that those children told in advance they would receive a reward for drawing would be most motivated two weeks later to engage in this activity since it had been rewarded previously. This seemed to be a logical conclusion, based on the notion that providing external rewards for accomplishing particular tasks would increase involvement in these tasks. It was basically the model articulated by famed psychologist B. F. Skinner in which the occurrence of certain behaviors was either increased or decreased by the use of rewards and punishment.

However, what those subscribing to an extrinsic motivation model may have hypothesized was not in keeping with what Lepper, Greene, and Nisbett discovered. Children in the “unexpected-award” and “no award” groups drew just as much and with the same enthusiasm as they had before the experiment. But children in the first group—the ones who had expected and then been given an award—displayed much less interest and spent much less time drawing. Even two weeks later, the prizes—so common in many classrooms—had seemingly transformed play into work. It is important to point out that it wasn’t necessarily the rewards themselves that reduced the children’s interest since when children didn’t expect a reward, receiving one had little impact on their
intrinsic motivation. Only *contingent* rewards—if you do this, then you’ll get that—had the negative effect.

The results of this study invite the question of why didn’t the so-called “extrinsic motivators” heighten interest in drawing? Also, do the results represent an anomaly not to be replicated in other studies? Pink (2009), in reviewing the literature, cited many other examples of the negative impact of rewarding particular behaviors.

An explanation for these unexpected findings may be found in the position advanced by Deci and Ryan (2000) who contended that there are three basic, innate, psychological needs that we all possess: the need to belong or feel connected, the need to feel competent, and the need for autonomy or self-determination. Deci and Ryan asserted that when these needs are satisfied, motivation and productivity are increased, but when they are not met motivation and satisfaction are diminished.

Ryan observed, “This is a really big thing in management. When people aren’t producing, companies typically resort to rewards or punishment. What they haven’t done is the hard work of diagnosing what the problem is. You’re trying to run over the problem with a carrot or a stick” (Pink, 2009, p. 72). Deci added that self-determination theory does not unequivocally oppose the use of rewards. “Of course, they’re necessary in workplaces and other settings, but the less salient they are made, the better” (Pink, 2009, p. 72).

Pink (2009) summarized the limited conditions under which extrinsic motivation may be beneficial. “For routine tasks, which aren’t very interesting and don’t demand much creative thinking, rewards can provide a small motivational booster shot without harmful side effects. In some ways, that’s just common sense (p. 62).” Pink recommended that even routine tasks can be made more enticing by lessening control and introducing autonomy. “Allow people to complete the task their own way. Think autonomy not control. State the outcome you need. But instead of specifying precisely the way to reach it, give them freedom over how they do the job” (2009, p. 64).

Appleton and colleagues (2008) captured the complexity of both SDT and the concepts of extrinsic and intrinsic motivation. They highlighted at least two features of SDT that are especially relevant for educators. First, similar to Pink’s contention that even seemingly external demands can be offered in a way that provide a modicum of internal control, SDT posited that in those situations in which the catalyst for behavior is external to oneself, aspects of internal control can be established (Ryan & Deci, 2000). In support of this position Appleton et al. (2008) wrote, “The theory (SDT) specifies qualitative differences in the level of self-determination associated with external motivation; situates these levels along a continuum; and contends that external expectations can be internalized, integrated, and result in highly autonomous functioning” (p. 378).

The second aspect of SDT Appleton et al. (2008) identified that is highly relevant for teaching practices is related to the first feature. It highlighted the importance of contextual factors and suggested that teachers have greater power than they may recognize to accentuate and reinforce autonomous behaviors in the school environment even when external demands appear to dominate the school arena. In the face of educational requirements and curricula that seem fixed or perhaps rigid, teachers are empowered to ask, “How can I implement teaching strategies that integrate intrinsic motivation principles within a more controlled environment?” This question encourages
educators to reflect upon and appreciate the impact they have on enhancing student 
motivation and engagement even within a more restrictive educational milieu.

Appleton et al. (2008) provided some guidance for moving towards greater autonomy regardless of the environmental restraints. “Educators can facilitate student self-determination with extrinsically motivated tasks by using relationships, setting up students for success in course tasks (via scaffolding of lessons and attention to developmental level), and orchestrating student opportunities for decision making and other authentically autonomous experiences” (pp. 378-379). Support for this position is found in a number of research studies (Grolnick, Ryan, & Deci, 1991; Maehr & Meyer, 1997; Miserandino, 1996; Vansteenkiste, Simons, Lens, Sheldon, & Deci, 2004).

In considering SDT, Pink (2009) reframed to some extent Deci and Ryan’s three basic needs of autonomy, belonging, and competence, casting autonomy as the essential component, but describing “mastery” and “purpose” as two other dimensions of intrinsic motivation. Mastery is viewed as the pleasure that accrues from being engaged in a task that is exciting and challenging. Czikszentmihalyi (1975, 1998) introduced the concept of flow, a state in which people are absorbed and challenged by what they are doing. A key quality producing flow is the level of the challenge of the task. A task that is either too easy or too difficult given the skills of the individual will not permit the experience of flow to emerge.

The concept of flow as proposed by Czikszentmihalyi is linked to both motivation and engagement and houses major implications for the teaching style and curriculum presented by teachers. If students are to experience flow, they must be challenged to move beyond their current levels of competence in activities that are interesting and relevant to them and that encourage their input and feedback.

In addition to autonomy and mastery, the third nutriment of motivation emphasized by Pink is purpose, which relates to commitment, meaning and the belief that one’s activities are of benefit to others. This sense of purpose and commitment has been identified as a notable feature of resilience (Rutter, 1980; Werner, 1993) and of a resilient mindset (see point #8 above and Brooks & Goldstein, 2001). As we shall see later in this chapter, purpose and commitment also serve as a foundation for becoming stress hardy (Kobasa, Maddi, & Kahn, 1982). Pink (2009) wrote, “Autonomous people working toward mastery perform at very high levels. But those who do so in the service of some greater objective can achieve even more. The most deeply motivated people—not to mention those who are not productive and satisfied—hitch their desires to a cause larger than themselves” (p. 133).

Earlier we expressed our position that in comparison with extrinsic or controlled motivation, the components of intrinsic or autonomous motivation were most in accord with nurturing resilient, engaged students. Let us turn our attention to the concept of “student engagement” to understand the basis for this position.

**Student Engagement: A Multi-dimensional Concept**

Christenson and her colleagues articulated the various dimensions of engagement in schools and developed the Student Engagement Instrument (SEI) (Appleton et al., 2008; Anderson, Christenson, Sinclair, & Lehr, 2004; Appleton et al., 2006; Christenson et al. 2008). They noted that the distinction between motivation and engagement remains an ongoing issue. As a point of illustration they identified one conceptual framework in which motivation is cast in terms as the direction and intensity of one’s energy (Maehr &
Meyer, 1997). In this framework motivation is linked to underlying psychological processes such as autonomy, belonging or connectedness, and competence and is perceived to answer the question of “why” for a given behavior.

In contrast, engagement has been described as “energy in action, the connection between person and activity” (Russell, Ainley, & Frydenberg, 2005, p.1), and reflects a person’s active involvement in a task or activity. Appleton et al. (2006) wrote, “Although motivation is central to understanding engagement, the latter is a construct worthy of study in its own right” (p. 428).

Engagement, achievement, and school behavior were found to be associated with each other. Low student engagement heightened the likelihood of students dropping out of school. Check & Connect is one illustration of a targeted intervention program designed to promote student engagement (Appleton et al., 2006; Christenson & Thurlow, 2004; Sinclair, Christenson, & Thurlow, 2005). Key components of Check & Connect are closely related to the features of a resilient mindset, perhaps the most important of which is a mentor who works with students and their families for a minimum of two years. Mentors promote problem-solving skills, persistence, and learning within a supportive relationship. Mentors also focus on nurturing their mentee’s sense of autonomy, belonging, and competence, which parallel the main ingredients of SDT proposed by Deci and Ryan (2000).

Finn (1989) advanced the view that engagement can be conceptualized as being comprised of two main components, behavioral (e.g., participation in school activities) and affective (e.g., identifying oneself with the school, having a sense of belonging and connectedness). More recent reviews of the literature have posited that engagement is made up of three variables: behavioral (e.g., appropriate demeanor, effort, active participation), cognitive (e.g., self-regulation, developing and adhering to learning goals), and emotional or affective (e.g., showing an interest in and positive attitude towards learning, having a sense of belonging and connectedness) (Fredricks, Blumenfeld, & Paris, 2004; Jimerson, Campos, & Greif, 2003).

Christenson and her colleagues (Betts, Appleton, Reschly, Christenson, & Huebner, 2010; Christenson & Anderson, 2002; Reschly & Christenson, 2006) proposed a taxonomy for defining student levels of engagement as well as for identifying the goodness-of-fit between the student, the learning environment, and factors that impact upon the fit. They viewed engagement as comprised of four subtypes: academic, behavioral, cognitive, and psychological. Appleton et al. (2006) elaborated on this taxonomy:

There are multiple indicators for each subtype. For example, academic engagement consists of variables such as time on task, credits earned toward graduation, and homework completion, while attendance, suspensions, voluntary classroom participation, and extra-curricular participation are indicators of behavioral engagement. Cognitive and psychological engagement includes less observable, more internal indicators, such as self-regulation, relevance of schoolwork to future endeavors, value of learning, and personal goals and autonomy (for cognitive engagement), and feelings of identification or belonging, and relationships with teachers and peers (for psychological engagement). (p. 419)
Appleton et al. (2006) also emphasized the importance of the context in which these subtypes occur such as relationships with adults at school, encouragement from family members, and support from peers. In addition, they wrote that while the majority of research has been directed towards the academic and behavioral components of student engagement since they tend to lend themselves to more precise observation, “measuring cognitive and psychological engagement is relevant because there is an overemphasis in school practice on indicators of academic and behavioral engagement. Such overemphasis ignores the budding literature that suggests that cognitive and psychological engagement indicators are associated with positive learning outcomes, related to motivation, and increase in response to specific teaching strategies” (p. 431). The Student Engagement Instrument was developed to measure both cognitive and psychological engagement, which has subsequently been labeled affective engagement (Appleton et al., 2008).

The International Center for Leadership in Education (ICLE), which researched and developed a model of teaching based on the concepts of rigor and relevance, advanced the view that student engagement is an essential underpinning of these dimensions of the learning process (Jones, Marrazo, & Love, 2007). Jones (2009) asserted that while student engagement is not an exact science, it can be planned, measured and enriched. He described student engagement as the:

Positive behaviors that indicate full participation by the student in the learning process. When students are engaged, we can hear, see, or feel their motivation in completing a task, taking pride in their work, or going beyond the minimum work required. Engaged students demonstrate a feeling of belonging by the way they act, the positive things they say about school, and through their passionate involvement in class activities. (p. 1)

Based on a review of the literature and research conducted by ICLE Jones identified those factors that contribute to a school milieu in which student engagement is nurtured. Many of these factors are similar to those described above for the mindset of motivated, resilient learners. They include:

1. Interactions between and among students, teachers, administrators, parents, etc. are respectful, collegial, and warm.
2. There is an atmosphere of mutual accountability; people feel a sense of responsibility to one another and to the larger school community.
3. Signs of positive community identify and a sense of belonging permeate the school.
4. Students take leadership roles in representing and “owning” the school, exhibiting energy and enthusiasm about their institution.
5. The physical space is clean and safe.
6. Regular forums, structures, and interactions acknowledge and celebrate school and individual success.
7. The school actively involves and engages family and community members in the life of the school.
8. The school promotes and supports student activism by helping students engage in community change. (pp. 37-38)
Commonalities Among Motivation, Engagement, and Resilience

If educators are to nurture motivation, engagement, and resilience in students, they should attend to and reinforce the common components associated with the mindset of each of these concepts. There are many commonalities, especially if the underpinnings of intrinsic motivation as opposed to extrinsic motivation are used in the comparison. A summary of the common beliefs (mindset) are included in Table 1.

* * * Table 1 belongs here * * *

It is important to emphasize that each of the beliefs listed in Table 1 are part of the foundations of student engagement, motivation, and resilience. They are also part of a student’s mindset and therefore open to reinforcement. Teachers who are most effective in reinforcing these beliefs in students and thereby creating a school climate in which motivation, engagement, and resilience are nurtured are guided by their own specific beliefs and mindsets, a topic to which we now turn.

**Educators Beliefs and Practices:**

The Mindset of Effective Educators

A consideration of the mindset of students who are motivated, engaged, and resilient invites several other questions, including two listed earlier: What are the characteristics of the mindset of educators who are most effective in nurturing motivation, engagement, and resilience in students? What specific strategies or interventions can teachers with positive mindsets develop and implement to nurture motivation, engagement, and resilience in their classrooms?

It is essential for educators to appreciate that the assumptions they hold for themselves and their students, often unstated, have profound influence in determining effective teaching practices, the quality of relationships with students, and the positive or negative climate that is created in the classroom and school building. It is also essential that teachers discuss and examine the mindsets of effective, motivated learners and consider how to nurture this mindset in the classroom.

The following are assumptions and beliefs held by educators about students that appear most likely to eventuate in practices that nurture student motivation, engagement, and resilience (Goldstein & Brooks, 2007):

1. To appreciate that they have a lifelong impact on students, including on their sense of hope and resilience.
2. To believe that the level of motivation and learning that occurs in the classroom and the behavior exhibited by students has as much, if not more, to do with the influence of teachers than what students might bring into the situation.
3. To believe that all students yearn to be successful and if a student is not learning, educators must ask how they can adapt their teaching style and instructional material to meet student needs.
4. To believe that attending to the social-emotional needs of students is not an “extra-curriculum” that draws time away from teaching academic subjects, but rather a significant feature of effective teaching that enriches learning.
5. To recognize that if educators are to relate effectively to students, they must be empathic, always attempting to perceive the world through the eyes of the student and considering the ways in which students view them.
6. To appreciate that the foundation for successful learning and a safe and secure classroom climate is the relationship that teachers forge with students.
7. To recognize that students will be more motivated to learn and more engaged in the classroom when they feel a sense of ownership or autonomy for their own education.

8. To understand that one of the main functions of an educator is to be a disciplinarian in the true sense of the word, namely, to perceive discipline as a teaching process rather than as a process of intimidation and humiliation. Disciplinary practices should reinforce self-discipline, which is a critical behavior associated with resilience.

9. To realize that one of the greatest obstacles to learning is the fear of making mistakes and feeling embarrassed or humiliated and to take active steps to minimize this fear.

10. To subscribe to a strength-based model, which includes identifying and reinforcing each student’s “islands of competence.”

11. To develop and maintain positive, respectful relationships with colleagues and parents.

**Themes and Exercises to Nurture a Positive Mindset in Educators**

Information can be imparted to teachers and exercises can be introduced to articulate and reinforce these beliefs associated with nurturing student motivation, engagement and resilience. The goal is for all faculty and staff in a school to share within reason a common perspective or mindset. The following are suggested themes for discussion and exercises to facilitate this task:

**The focus on a student’s social/emotional development and well-being is not an extra curriculum that takes time away from teaching academic skills and content.** As we noted earlier in this chapter, it is unfortunate that a dichotomy has arisen in many educational quarters prompting some educators to perceive that attending to a student’s emotional and social health is mutually exclusive from the goal of teaching academic material. This dichotomy has been fueled, in part, by the emergence of high stakes testing and an emphasis on accountability. The following refrain is heard in many schools: “We barely have time to get through the assigned curriculum. We really don’t have the time to focus on anything else.”

We are not opposed to assessment or accountability. We welcome research conducted to define effective teaching practices. However, what we question is relegating a student’s emotional life to the background and not appreciating its important role in the process of learning. This attitude was captured at one of our workshops. A high school science teacher challenged our viewpoint by contending: “I am a science teacher. I know my science and I know how to convey science facts to my students. Why should I have to spend time thinking about a student’s emotional or social life? I don’t have time to do so and it will distract me from teaching science.”

While many teachers and school administrators would take issue with the views expressed by this science teacher, others might not. We believe that strengthening a student’s feeling of well-being, self-esteem, and dignity is not an extra curriculum. If anything, a student’s sense of belonging, security, and self-confidence in the classroom provides the scaffolding that supports the foundation for enhanced learning, engagement, motivation, self-discipline, responsibility, and the ability to deal more effectively with obstacles and mistakes (Brooks, 1991, 2004; Cohen, 2006; Cohen & Sandy, 2003; Elias, Zins, Gracyzk, & Weissberg, 2003).
To highlight this point, educators can be asked to reflect on their own teachers and think about those from whom they learned most effectively. It has been our experience that the teachers they select are those who not only taught academic content but, in addition, supported the emotional well-being of students and were interested in the “whole child.” Very importantly, as educators reflect upon their teachers as well as their own teaching practices, they can be asked to consider the following question: “Do you believe that developing a positive relationship with your students enhances or detracts from teaching academic material? Please offer examples.”

Examples should be encouraged whether the answer is yes, no, or maybe. It is important for educators to give serious consideration to this question. In our experience, most educators are able to offer examples of “small gestures” on their part (or on the part of their teachers) that took little, if any, time, but communicated to students a message of respect and caring (Brooks, 1991). If teachers contend they would like to develop more meaningful relationships with students, but are unable to allot the time to do so, other educators who have been able to accomplish this task can offer specific suggestions.

**Educators have a lifelong impact on students and their resilience.** Closely associated with this previous point is the belief of teachers that what they say and do each day in their classroom can have a lifelong influence on their students (Brooks, 1991; Brooks & Goldstein, 2001). While most teachers appreciate that they are and will continue to be influential in the lives of their students for years to come, many are not aware of the extent of their impact.

It is important that teachers are acquainted with research findings from the resilience literature to highlight this impact. Such knowledge will add meaning and purpose to their role as teachers and lessen disillusionment and burnout. In the past 25 years there has been an increased effort to define those factors that help children and adolescents to deal more effectively with stress, to overcome adversity, and to become resilient (Brooks, 1994; Brooks & Goldstein, 2001; Goldstein & Brooks, 2005; Katz, 1997; Werner & Smith, 1992). We highlight that schools have been spotlighted as environments in which self-esteem, hope, and resilience can be fortified, frequently quoting the late psychologist Julius Segal (1988) who wrote:

> From studies conducted around the world, researchers have distilled a number of factors that enable such children of misfortune to beat the heavy odds against them. One factor turns out to be the presence in their lives of a charismatic adult—a person with whom they can identify and from whom they gather strength. And in a surprising number of cases, that person turns out to be a teacher. (p. 3)

It is important for teachers to recognize that they are in a unique position to be a “charismatic adult” in a student’s life and that even seemingly small gestures can have a lifelong impact. A smile, a warm greeting, a note of encouragement, a few minutes taken to meet alone with a student, and an appreciation of and respect for different learning styles are but several of the activities that define a “charismatic teacher” (Brooks, 1991).

Teachers are often unaware that they are or have been “charismatic adults” in the life of a student. To emphasize this issue, faculty can be asked if they have ever received unexpectedly, a note from a former student thanking them for the positive impact they had on the student’s life. While many have been fortunate to be the recipient of such a note, others have not although they are equally deserving of such feedback.
We frequently ask participants at our workshops if there are teachers who had a significant influence on their lives whom they have failed to acknowledge via a note or letter. It is not unusual for many teachers to voice regret they have not thanked several such “charismatic adults.” Some have written notes to the latter following the workshop.

We use these exercises to suggest that while we may not receive formal confirmation that we have worn the garb of “charismatic adults,” if we approach each day with the belief that today may be the day we say or do something that directs a student’s life in a more positive path, we will be more optimistic about our role, and our students will be the beneficiaries of more realistic, hopeful expectations. The belief that we can serve as “charismatic adults” serves as one of the major motivating forces described by Pink (2009) in his elaboration of SDT, namely, the existence of “purpose” in our lives.

**All students wish to learn and to succeed and if they seem unmotivated or disengaged, they may believe they lack the ability to achieve in school.** We often hear teachers refer to students as lazy or unmotivated. As we have noted, once these accusatory labels are used and a negative mindset dominates, educators are more likely to respond to these students with annoyance. The mindset of an effective educator constantly echoes, “I believe that all students come to school desiring to learn. If they are disinterested and feel defeated, we must figure out how best to reach and teach them.”

Subscribing to this view has a profound impact on the ways in which we respond to students, especially those who are struggling. When students lose faith in their ability to learn and when feelings of hopelessness pervade their psyche, they are vulnerable to engaging in counterproductive or self-defeating ways of coping. They may quit at tasks, clown around, pick on other students, or expend little time and effort in academic requirements. When a student feels that failure is a foregone conclusion, it is difficult to muster the energy to consider alternative ways of mastering learning demands.

Teachers who observe such counterproductive behaviors may easily reach the conclusion that the student is unmotivated or lazy, or not caring about school. As negative assumptions and mindsets dominate, teachers are less likely to consider more productive strategies for reaching the student. Instead, thoughts turn to punitive actions; e.g., what punishments would finally get through to the student. However, if educators subscribe to the belief that each student wishes to succeed, negative assumptions are less likely to prevail.

A shift in perspective was obvious in a consultation Bob did about Sarah, a problematic high school student. One of her teachers began by asking, “Don’t you think it’s okay for a 16 1/2-year-old to drop out of school?” The agenda was clear. These teachers, who typically displayed a caring and encouraging attitude, were very frustrated and angry with Sarah to the extent of wishing her to drop out of school. The teachers elaborated that Sarah was a student who “sabotaged” all of their efforts. “Even if Sarah agrees to do something, she doesn’t follow through. It’s obvious that she dislikes school and she’s disruptive and disrespectful. She couldn’t care less about how she does in school.”

As we shall see, Sarah cared a great deal about wanting to achieve in school, but entertained little hope for doing so. It was only when her teachers truly accepted that each student desperately wants to succeed that a positive mindset emerged, which permitted them to consider new solutions. A turning point occurred when Bob
empathized with the teachers about their frustration but then asked, “Can anyone tell me how you think Sarah feels each day when she enters the school building?”

After several moments of silence, one teacher responded, “How Sarah feels. I never really thought about that before.” Another teacher followed, “I never really thought about that before either, but as I’m doing so now, only one word comes to mind, defeated. I think everyday when Sarah comes in to the school building she feels defeated.”

As this teacher shared her observation, the shift in mindset that permeated the room was palpable, highlighted by one teacher asking Bob, “You’ve written a lot about helping kids be more confident and resilient in the school setting. So what can we do to help a student who feels defeated begin to feel less defeated?” A lively, creative discussion ensued, filled with ideas that had not been considered previously, including having Sarah, who relished being helpful, assist in the office. The teachers also shifted their focus from what punitive action to take to a desire to “get to know” Sarah, not via a tense, confrontational meeting but rather by having lunch with her.

This new approach prompted Sarah to be more responsible and a positive cycle was set in motion. The catalyst for this new cycle was when her teachers shifted their mindset, no longer viewing Sarah’s behaviors as oppositional, but rather as a reflection of the despair and defeatism she experienced. They adopted the assumption that students wish to succeed, but at times obstacles appear on the road to success—obstacles that teachers working in concert with students could remove.

If our strategies are not effective, we must ask, “What is it that I can do differently?” rather than continuing to wait for the student to change first. A basic underpinning of motivation and resilience is the belief of “personal control,” namely, that we are the “authors of our own lives” and it makes little sense to continue to do the same thing repeatedly if our actions are not leading to positive results (Brooks & Goldstein, 2004). While many educators and others say they subscribe to this assumption, their actions frequently belie their assertion. For example, it is not unusual to hear the following statements offered by educators at consultations we have conducted: “This student is unmotivated to change. She just won’t take responsibility for her behavior.” Or, “We’ve been using this strategy with this student for five months. He’s still not responding. He’s resistant and oppositional.” We believe in perseverance, but if a staff has been employing the same approach for five months without any positive outcome, one can ask, “Who are the resistant ones here?”

As one perceptive teacher emphasized, “Asking what is it that we can do differently should not be seen as blaming ourselves but rather as a source of empowerment.” She continued, “Isn’t it better to focus on what we can do differently rather than continue to wait for someone else to change first? We may have to wait forever and continue to be frustrated and unhappy.” This same teacher summarized her belief with the statement, “If the horse is dead, get off.” We have found that there are many dead horses strewn on the grounds of a school.

The assumption of personal control should be addressed directly at staff meetings. Teachers should recognize that a change in strategy on their part is not the equivalent of “giving in” (this is a belief that often crops up), but rather as a sign that we are seeking a more productive intervention. If change on a teacher’s part is interpreted as acquiescing to the student, any new strategy will be tainted by feelings of resentment.
A helpful exercise to illustrate the power of personal control and the need to change “negative scripts” that exist in our lives is to ask educators to think about one or two instances when they changed their usual script and to consider what resulted as a consequence of their new script. Many educators, such as those involved with Sarah, are able to describe very positive results. Unfortunately, others report less satisfactory results, often believing that they had gone out of their way for students, but the students did not reciprocate. When the outcome of a change in script is not positive, a problem-solving attitude should be introduced by asking, “With hindsight, is there anything you would do differently today to lessen the probability of an unfavorable result?”

The possibility that a modification of a script may not eventuate in a positive outcome should be addressed. When a new script is implemented educators should have one or two back-up scripts in mind should the first prove ineffective. Having a back-up script conveys the positive message that if a strategy that sounds promising does not yield the results we wish, rather than feel exasperated or defeated, we should learn from the experience and be prepared with alternative actions. We must keep in mind that a new script may create the conditions that encourage students to change their behaviors.

**Empathy is an essential skill for effective teaching and relationships with students as well as parents and colleagues.** Empathic educators are able to place themselves inside the shoes of their students and others and perceive the world through their eyes, just as Sarah’s teachers attempted to do, eventually understanding that she felt defeated. Goleman (1994) highlighted empathy as a major component of emotional intelligence.

Being empathic invites educators to ask, “Would I want anyone to say or do to me what I have just said or done to this student (or parent or colleague)?” or “Whenever I say or do things with students (parents or colleagues), what is my goal and am I saying or doing these things in a way that my students will be most likely to hear and respond constructively to my message?”

As an example, a teacher may attempt to motivate a student who is not performing adequately by exhorting the student to “try harder.” While the teacher may be well-intentioned, the comment is based on the assumption that the student is not willing to expend the time and energy necessary to succeed. Thus, such a remark is frequently experienced as accusatory and judgmental. When students feel accused, they are less prone to be cooperative. Consequently, the teacher’s comment is not likely to lead to the desired results, which, in turn, may reinforce the teacher’s belief that the student is unmotivated and not interested in “trying.” In contrast, an empathic teacher might wonder, “If I were struggling in my role as a teacher, would I want another teacher or my principal to say to me, ‘If you just tried a little harder you wouldn’t have this problem’?” When we have offered this question at workshops, many teachers laugh and say they would be very annoyed if they were accused of not trying. The question prompts them to reflect upon how their statements are interpreted by their students.

There are several exercises that can be introduced at staff meetings to reinforce empathy. A favorite is to have teachers think of a teacher they liked and one that they did not like when they were students and then to describe each in several words. Next, they can be reminded, “Just as you have words to describe your teachers, your students have words to describe you.” They can then consider these questions: What words would you hope your students used to describe you? What have you done in the past month so they
are likely to use these words? What words would they actually use to describe you? How close would the words you hope they use parallel the words they would actually use? (One teacher jokingly said, “I would love my students to use the word ‘calm,” but I don’t think they would since I feel I have been raising my voice a great deal the past month or two and not showing much patience.”)

Another exercise that educators have found useful in reinforcing empathy revolves around our own memories of school. Teachers can be requested at workshops to share with their colleagues their response to the following questions:

- Of all of the memories you have as a student, what is one of your favorite ones, something that a teacher or school administrator said or did that boosted your motivation and self-dignity?
- Of all of the memories you have as a student, what is one of your worst ones, something that a teacher or school administrator said or did that lessened your motivation and self-dignity?
- As you reflect upon both your positive and negative memories of school, what did you learn from both and do you use these memories to guide what you are doing with your students today?

Recounting one’s own positive and negative memories of school with one’s colleagues often proves very emotional and leads teachers to ask: What memories are my students taking from their interactions with me? Are they the memories I would like them to take? If not, what must I change so that the memories they will take will be in accord with the memories I hope they take? These exercises to nurture empathy often prompt teachers to consider how best to obtain feedback from students to gain a realistic picture of how they are perceived. We will address this question in the next point.

**Ongoing feedback and input from students enhances empathy and promotes a sense of engagement, responsibility, and ownership in students.** Effective teachers not only welcome the input of students, but they appreciate that such input must be incorporated on a regular basis. When students feel their voice is being heard, they are more likely to be engaged in academic requirements, work more cooperatively with teachers, and demonstrate greater motivation to meet academic challenges. Eliciting student opinion reinforces a feeling of personal control and responsibility—essential ingredients of a positive school climate; encouraging student input is also a basic feature of motivation, engagement, and resilience (Adelman & Taylor, 1983; Cohen, 2006; Deci, Hodges et al., 1992; DiCintio & Gee, 1999; Henderson & Milstein, 1996; Jacobson, 1999; Thomsen, 2002).

There are various ways for teachers to obtain student feedback and input. For instance, teachers can request anonymous feedback from students. One high school teacher asked students to draw him, describe him, list what they liked about his teaching style and the class, and what they would recommend he change. While one of his colleagues scoffed at this practice, contending that such feedback was not important and took valuable time from teaching, the outcome of the exercise proved the colleague wrong. The exercise actually increased achievement scores and cooperation; this was not surprising since the students felt respected. Another teacher requested that students complete a one-page report card about him whenever he filled out report cards on them. The students actually developed the report card, which evaluated the teacher on such
dimensions as discipline style, response to student questions, teaching style, and fairness towards all students. Recommendations for change were elicited.

Ownership in students can also be reinforced by engaging students in a discussion about the benefits or drawbacks of educational practices that are typically seen as “givens,” including such activities as tests, reports, and homework. In addition, educators can strengthen a feeling of student ownership by incorporating a variety of choices in the classroom, none of which diminishes a teacher’s authority but rather empowers students to feel a sense of control over their own education.

Choice and ownership can also be applied to disciplinary practices by asking students to consider such questions as:

- What rules do you think we need in this classroom for all students to feel comfortable and learn best? (It is not unusual for teachers to report that the rules recommended by students often parallel those of the teacher.)

- Even as your teacher I may forget a rule. If I do, this is how I would like you to remind me. (Teachers can then list one or two ways they would like to be reminded.) Now that I have mentioned how I would like to be reminded, how would you like me to remind you? (When students inform teachers how they would like to be reminded should they forget a rule, they are less likely to experience the reminder as a form of nagging and more likely to hear what the teacher has to say. It is easier for students to consider ways of being reminded if teachers first serve as models by offering how they would like to be reminded.)

- What should the consequences be if we forget a rule? (We have heard teachers report, especially when asking these questions to angry students, that the consequences suggested by the students are more severe than any teacher would use.)

These questions pertaining to disciplinary practices encourage a sense of ownership for rules and consequences, thereby promoting responsibility and self-discipline in students.

The second author regularly reinforces a sense of control in her therapy sessions with children who have problems in school. For instance, Anna, an 8-year-old, was burdened by social anxiety. Although she was willing to talk with Suzanne about her interests, she became frozen whenever the discussion turned to friends and school. Her teacher told Suzanne that Anna frequently struggles to enter groups of two or more children, particularly on the school playground. Suzanne applied a very effective, well-known therapeutic technique involving the use of “displacement.” She told Anna that she knew a little boy who was having a problem talking with friends and didn’t know how to help him. Anna immediately replied, “Does he have a hard time on the playground?” Suzanne responded, “Yes, the playground is where he has the most trouble.”

Anna continued, “Is he scared to talk with other children?” Eventually, the discussion led her to assert, “I think he might be worried they will make fun of him.” Once this worry was verbalized, Suzanne engaged Anna in considering strategies for helping the boy deal with his problems, which, of course, were the same strategies that Anna could implement to deal with her own problems. In essence, Anna was placed in a position of control, which encouraged her to discuss her own struggles more directly, leading to a lessening of her anxiety.
Each student has different “islands of competence” and learning styles that must be identified, respected, and reinforced. This belief is at the core of a strength-based approach to education and overlaps with many of the other points reviewed in this chapter. Effective teachers appreciate that one must move beyond a philosophy that fixates on a student’s problems and vulnerabilities and affords equal, if not greater space, to strengths and competencies.

Researchers and clinicians have emphasized the significance of recruiting selected areas of strength or “islands of competence” in building self-confidence, motivation, and resilience (Deci & Flaste, 1995; Katz, 1994; Rutter, 1985). Rutter (1985), in describing resilient individuals, observed, “Experiences of success in one arena of life led to enhanced self-esteem and a feeling of self-efficacy, enabling them to cope more successfully with the subsequent life challenges and adaptations” (p. 604). Katz (1994) noted, “Being able to showcase our talents, and to have them valued by important people in our lives, helps us to define our identities around that which we do best” (p. 10).

Understanding how you learn best. One of the most obvious guideposts for assisting students to feel competent is to teach them in ways in which they can learn best. Educators must appreciate that each student has different learning strengths and vulnerabilities (Gardner, 1983; Levine, 2002). This requires that teachers familiarize themselves with such topics as multiple intelligences and learning styles.

At the beginning of the school year, teachers can meet with each student for a few minutes and ask, “What are you interested in? What do you like to do? What do you think you do well?” While some students will respond eagerly, others may simply say, “I don’t know.” In that case, teachers can respond, “That’s okay, it often takes time to figure out what you’re good at. I’ll try to be of help.”

When the second author evaluates students referred for learning difficulties, she always asks them how they prefer to learn. Some students are not able to answer immediately and many are surprised by the question, perhaps expecting that testing will only highlight their weaknesses. To encourage students to reflect upon their learning style, Suzanne often raises more specific questions. For example, she asked Noah, a 15-year-old high school freshman who was described by his parents as “highly intelligent and curious but completely unmotivated in school and often distracted in class,” if he had ever gone on a trip that he really enjoyed and still thinks about.

Noah’s expression, which had previously been rather flat and tired looking, lit up as he began to describe his trip to China with his family last summer. He talked about the landscape, the culture, and the people with much excitement. Suzanne used his response to discuss the different ways we learn and to note that he appeared to be an “experiential learner.” Noah, with obvious excitement in his voice, said, “That’s it. Is that why I’m so bored in class all the time?” Suzanne explained that although most of our learning occurs in the classroom, we could consider ways to supplement his learning with hands on experiences once he reaches high school to make school feel less boring. Noah loved this idea and as it turned out, the high school he will attend has a practicum option for students, which connects what they are learning in the classroom with real life experiences. By asking Noah how he learned best, Suzanne was not only able to understand his struggles more clearly, but in addition was able to develop a plan that would in essence adapt more traditional teaching methods to fit with his learning style.
By encouraging his input, she also reinforced his sense of ownership in the school environment.

A high school teacher noted that given all of the students attending his classes, he did not have the time to meet with each individually at the beginning of the year. Instead, he devised a questionnaire that he sent out to each student a week before school began. He told them that it was not mandatory that they complete the questionnaire, but if they did it would help him to be a more effective teacher. The questionnaire focused on a number of areas, several of which asked students to list what they perceived to be their strengths and weaknesses and how they learned best. In the seven years in which he has sent out the questionnaire, not one student has failed to return it. This teacher found the information he obtained to be an invaluable resource in connecting with students.

Providing opportunities to help others. Another strategy to enhance a sense of competence is to provide students with an opportunity to help others. Students experience a more positive attachment to school and are more motivated to learn if they are encouraged to contribute to the school milieu (Brooks, 1991; Rutter, 1980; Werner, 1993). Examples include: older students with learning problems reading to younger children; a hyperactive child being asked to assume the position of “attendance monitor,” which involved walking around the halls to take attendance of teachers while the latter were taking attendance of students; and the use of cooperative learning in which students of varying abilities work together as a team bringing their own unique strengths to different projects.

Lessening the fear of failure. One of the most powerful approaches for reinforcing a feeling of competence in students is to lessen their fear of failure. Many students equate making mistakes with feeling humiliated and consequently, will avoid learning tasks that appear very challenging. There are students who would rather be bullies or quit at tasks or assert the work is dumb rather than engage in a learning activity that they feel may result in failure and embarrassment. In a desperate attempt to avoid failure, they journey down a path that takes them farther away from possible success.

The fear of making mistakes and failing permeates every classroom and if it is not actively addressed it remains an active force, compromising the joy and enthusiasm that should be part of the learning process. Effective educators can begin to overcome the fear of failure by identifying and openly addressing it with students. One technique for doing so is for teachers to ask their class at the beginning of the school year, “Who feels they are going to make a mistake and not understand something in class this year?” Before any of the students can respond, teachers can raise their hand as a way of initiating a discussion of how the fear of making mistakes affects learning.

It is often helpful for teachers to share some of their own anxieties and experiences about making mistakes when they were students. They can recall when they were called upon in class, when they made mistakes or when they failed a test. This openness often invites students to share some of their thoughts and feelings about making mistakes. Teachers can involve the class in problem solving by encouraging them to suggest what they can do as teachers and what the students can do as a class to minimize the fear of failure and appearing foolish. Issues of being called on and not knowing the answer can be discussed.

One middle school English teacher frequently uses a method he refers to as “playing dumb” when he is seeking their responses to a book that was read. He starts by
saying, “I completely forgot what happens in the end, does anyone remember?” He has found that this question is typically followed by an enthusiastic show of hands with students explaining the ending to their teacher. Although his questioning may seem contrived, this technique empowers students to take risks through the acknowledgement that even teachers can forget information and make mistakes. Effective teachers recognize that when the fear of failure and humiliation are actively addressed in the classroom, students will be more motivated to take realistic risks and to learn.

To realize that one must strive to become stress hardy rather than stressed out. At the conclusion of one of our workshops, a teacher said, “I love your ideas, but I’m too stressed out to use them.” While the remark had a humorous tone, it also captured an important consideration.

At first glance the remark seems paradoxical since numerous educators have informed us that the strategies we advocate do not take time away from teaching, but rather help to create a classroom environment that is more conducive to learning and less stressful. Yet, we can appreciate their frustration that change requires additional time, a commodity that is not readily available. Some are hesitant to leave their “comfort zone” even when this zone is filled with stress and pressure. They would rather continue with a known situation that is less than satisfying than engage in the task of entering a new, unexplored territory that holds promise but also uncertainty.

If educators are to be effective in applying many of the ideas described in this chapter for nurturing motivation, engagement, and resilience in students, they must venture from their “comfort zone” by utilizing techniques for dealing with the stress and pressure that are inherent in their work. Each teacher can discover his or her own ways for managing stress. For instance, some can rely on exercise, others on relaxation or meditation techniques, all of which can be very beneficial. In addition to these approaches there has been research conducted by Kobasa and her colleagues (Kobasa et al., 1982; Kobasa & Puccetti, 1983) under the label of “stress hardiness” that examines the characteristics or mindset of individuals who experience less stress than their colleagues while working in the same environment. Kobasa’s work has been applied to the teaching profession (Holt, Fine, & Tollefson, 1987; Martinez, 1989).

This mindset involves three interrelated components: commitment, challenge, and control (“3C’s”). When we describe them at our workshops we encourage educators to reflect upon how they might apply this information to lessen stress and burnout.

The first C represents “commitment.” Stress hardy individuals do not lose sight of why they are doing what they are doing. They maintain a genuine passion or purpose for their work, which as we have seen is a critical dimension of intrinsic motivation. While we may all have “down” days, it is sad to observe educators who basically say to themselves each morning in a resigned way, “I’ve got to go to school. I’ve got to see those kids.” Once a feeling of “I’ve got to” or “being forced to” pervades one’s mindset, a sense of commitment and purpose is sacrificed, replaced by feelings of stress and burnout. As an antidote to burnout, a staff meeting might be dedicated to sharing why one became a teacher, a school administrator, a counselor, a nurse, or a psychologist. Such an exercise helps staff to recall and invigorate their dreams and goals.

The second C is for “challenge.” Educators who deal more effectively with stress have developed a mindset that views difficult situations as opportunities for learning and growth rather than as stress to avoid. For example, a principal of a school faced a
challenging situation. Her school was located in a neighborhood that had changed in a few short years from a middle class population with much parent involvement to a neighborhood with a lower socioeconomic make-up and less parent involvement. There were several key factors that contributed to the decrease in parent involvement, including less flexibility for many parents to leave work in order to attend a school meeting or conference as well as many parents feeling unwelcome and anxious in school based upon their own histories as children in the school environment.

Instead of bemoaning this state of affairs and becoming increasingly upset and stressed, this particular principal and her staff realized that the education of their students would be greatly enhanced if parents became active participants in the educational process; consequently, they viewed the lack of involvement as a challenge to meet rather than as a stress to avoid. Among other strategies, they scheduled several staff meetings in the late afternoon and moved the site of the meetings from the school building to a popular community house a few blocks away. These changes encouraged a number of the parents to attend the meetings since the new time was more accommodating to their schedules and the new location helped them to feel more comfortable since it was held on their “turf.” The relationship between parents and teachers was greatly enhanced and the children were the beneficiaries.

The third C is “control” or what we earlier referred to as “personal control” since some individuals may mistakenly view the word control as a form of controlling others. Control, as used in stress hardiness theory, implies that individuals who successfully manage stress and pressure focus their time and energy on factors over which they have influence rather than attempting to change things that are beyond their sphere of control. Although many individuals believe they engage in activities over which they have influence or control, in fact, many do not. We worked with a group of teachers who were feeling burned out. We reviewed the basic tenets of stress hardiness theory and asked if they focused their energies on factors within their domain of control. They replied in the affirmative.

We then asked them to list what would help their jobs to be less stressful. Their answers included, “If the students came from less dysfunctional families, if they came to school better prepared to learn, if they had more discipline at home.” After a few moments one of the teachers smiled and said, “We first said that we focus on what we have control over, but everything that we are mentioning to help us feel less stressed are things over which we have little control.” After the teacher said this, the group engaged in a lively discussion focusing on what educators might do to create classroom climates that nurtured learning and engagement even if the students came from home environments that were less than supportive of education. One teacher astutely noted, “We are expecting our students to come to school excited about learning and when they do not we get frustrated and annoyed. Instead, what I’m hearing is that we must ask, ‘What can we do differently to help motivate students who are not motivated and what can we do to help students who feel hopeless about learning to feel more hopeful.’” As the discussion continued, the teachers recognized that by focusing on what they could do differently to improve the learning environment was empowering and lessened stressful feelings. The mood of pessimism and burnout that had pervaded the room began to change.
Concluding Thoughts

The concept of mindsets can help us to understand the underpinnings of three interrelated concepts: motivation, student engagement, and resilience. Future research can evaluate the outcome of implementing within the school culture different components of the mindset that cut across these three concepts. For instance, educators can examine the impact of introducing a mentoring system and the specific activities of the mentors (such as offered by the Check & Connect program; Sinclair et al., 2005), increasing student input and ownership by having students regularly attend parent-teacher conferences, or engaging students to contribute to the welfare of others.

When these interventions are introduced, researchers can study changes in a number of variables including: learning and achievement, student attendance, dropout rates, acts of bullying, occurrence of behavioral problems, and teacher retention. Well-researched and field-tested assessment instruments such as the Comprehensive School Climate Inventory (CSCI) developed by the National School Climate Center (formerly the Center for Social and Emotional Education—CSEE) can be used to obtain input from students, parents, and school personnel to measure changes in school climate when mindsets for motivation, student engagement, and resilience are reinforced in a systematic way (Cohen, 2006).

The more aware educators are of the mindset of motivated, engaged, resilient students and the more aware they are of their own mindset, the more capable they will be in implementing strategies to develop this mindset in all students. The result will be classroom environments filled with excitement, safety, eagerness to learn, engagement, self-discipline, respect, and resilience. Both faculty and students will thrive in such an environment.
References


Table 1
*Common Components or Beliefs (Mindset) Associated with Student Engagement, Motivation, and Resilience*

- I believe that adults are encouraging and supportive rather than judgmental and accusatory.
- I am connected to and welcome in the school environment.
- My opinion is respected, that I have, within reason, some say or input into my own education.
- I am accountable for my actions.
- My interests and strengths (“islands of competence”) are identified and reinforced.
- Academic demands are challenging but in keeping with my abilities; my teachers and I are aware of my learning strengths and vulnerabilities.
- Mistakes are perceived as *expected* and *accepted*. I never feel criticized because of these mistakes, but rather I use mistakes as the basis for future learning.
- I am provided with opportunities to contribute to the well-being of both the school community and beyond.
- All members of the school community are respectful towards each other.
In this chapter we will examine two key concepts that guide our therapeutic interventions with children and adolescents: resilience and mindsets. These concepts serve as a foundation for the strength-based approach to which we subscribe. They are not restricted to one theoretical position (e.g., psychodynamic or cognitive behavioral), but rather can be applied to various therapeutic models and strategies, including the play therapy techniques that are the subject of this book.

Four “Waves” in the Study of Resilience

During the past 25 years there has been a heightened interest in the study of resilience in children and adolescents and the ways in which this concept might be applied to both clinical and nonclinical populations (Beardslee & Podorefsky, 1988; Brooks, 2011; Brooks & Brooks, 2014; Brooks & Goldstein, 2001, 2007, 2011; Crenshaw, 2010; Goldstein & Brooks, 2012; Goldstein, Brooks, & DeVries, 2013; Masten, 2001; Prince-Embury & Saklofske, 2012; Werner & Smith, 2001). This interest has included an interactionist perspective to understand the role parents play in fostering resilience and managing risks in the lives of their children (Skinner, Pitzer, & Steele, 2013; Taylor & Conger, 2014). Concomitantly, there has also been an increased interest in identifying factors involved in the neurobiology and physiology of resilience and adaptation in children (Karatereos & McEwen, 2013).

Masten has described four distinct phases or “waves” in resilience research (Wright, Masten, & Narayan, 2013). Initially, the emphasis was on understanding those factors within individuals who had encountered and coped successfully with significant adversity in their lives. A second wave examined developmental processes that contributed to resilience and paralleled the emergence of the field of developmental psychopathology. This phase is represented by increased attention to contextual and developmental variables and not simply to factors residing within the individual.

Masten termed the third wave “intervening to foster resilience,” which encompassed both intervention and prevention approaches. Wright, Masten, and Narayan (2013) noted, “Using lessons from the first two waves, investigators of the third wave began to translate the basic science of resilience that was emerging into actions intended to promote resilience” (p. 27). The
current fourth wave is focused on “multilevel dynamics and the many processes linking genes, neurobiological adaptation, brain development, behavior, and context at multiple levels” (p. 30). It involves the study of resilience from many vantage points, including genes, gene-environment interaction, and social interaction.

The content of this chapter is most identifiable with the third wave with obvious roots in the first two waves. However, we recognize that the fourth wave involves an exciting multidisciplinary, multilevel approach that will provide increased information about the many forces that contribute to resilience in children and adolescents.

While the focus of this chapter is on therapeutic interventions, the framework we propose can also be applied within a prevention perspective. The principles we outline about nurturing a resilient mindset in youth in treatment can be extended to environments outside the therapy office such as in our homes and schools to assist all youth to manage current and future problems more effectively.

In articulating the dimensions of our work, we strongly advocate that as an integral part of the treatment process, therapists interact closely with parents and teachers, unless there is contraindication for doing so given the particular dynamics of the situation. Close collaboration between the therapist and significant adults in the child’s life affords the therapist an opportunity to articulate the tenets of a strength-based approach with these other caregivers so that they might facilitate the development of resilience in the child.

Invulnerable Children?

Prior to introducing the other essential concept of our work, namely, mindsets, it is important to describe a shift that has occurred in our understanding of resilience, a shift that we believe can contribute to an enhanced sense of encouragement and hope for therapists in their work with challenging youth.

The earliest studies of resilience examined the lives of children who had experienced significant adversity (e.g., emotional, physical, or sexual abuse; being parented by an adult with an emotional disorder) but now as adolescents or adults were faring well. This population was frequently given the label “invulnerable” (Anthony & Cohler, 1987), which could easily be interpreted to imply that they were “superboys” or “supergirls” who possessed unusual inborn powers that allowed them to overcome the hardships they encountered. To apply this label to a small, selected group of children could lead to the incorrect conclusion that the vast majority of children who were not born with these super-like powers would be incapable of overcoming childhood hardship and trauma.

Masten (2001), in an often-quoted article that parallels her description of the different waves of the study of resilience, eloquently challenged the notion of extraordinary powers involved in displaying resilience. She stated:

Resilience does not come from rare and special qualities, but from the everyday magic of ordinary, normative human resources in the minds, brains, and bodies of children, in their families, and in their communities. . . . The conclusion that resilience emerges from ordinary processes offers a far more optimistic outlook for action than the idea that rare
and extraordinary processes are involved. The task before us now is to delineate how adaptive systems develop, how they operate under diverse conditions, how they work for or against success for a given child in his or her environmental and developmental context, and how they can be protected, restored, facilitated, and nurtured in the lives of children. (p. 235)

Masten’s view, to which we enthusiastically subscribe, offers a more hopeful perspective that questions the assumption that only a small number of children possess certain extraordinary attributes necessary to master adversity. The shift from the notion of invulnerability to one of “ordinary magic” has far-reaching implications for clinicians as they assess the potential for resilience of each child they see in therapy.

This shift in perspective is not only confined to children. Bonanno (2004) has arrived at a conclusion similar to that of Masten, primarily from his study of adults who have experienced trauma and loss. He observed:

A review of the available literature on loss and violent or life-threatening events clearly indicates that the vast majority of individuals exposed to such events do not exhibit chronic symptom profiles and that many and, in some cases, the majority show the type of healthy functioning suggestive of the resilience trajectory. (p. 22)

In his thought-provoking book *The Other Side of Sadness* (2009), Bonanno offered this opinion:

What is perhaps most intriguing about resilience is not how prevalent it is; rather it is that we are consistently surprised by it. I have to admit that sometimes even I am amazed by how resilient humans are, and I have been working with loss and trauma survivors for years. (p. 47)

Masten and Bonanno’s position supports the belief that all individuals and not just a small few possess the capacity to become resilient. Such a belief offers as Masten noted, an “optimistic outlook.” It also serves as a challenge to therapists to identify and implement strategies to bring this ordinary magic to fruition in all youngsters.

Most, if not all, child therapists would express as an important treatment goal their patients becoming increasingly resilient. Different clinicians and researchers may possess varying definitions of resilience (Goldstein & Brooks, 2013), but generally resilience has been understood as a child’s achievement of positive developmental outcomes and avoidance of maladaptive outcomes when confronted by adverse conditions (Rutter, 2006; Wyman et al, 1999).

Brooks and Goldstein (2001) offered the following as characteristics of resilience: the capacity to deal effectively with stress and pressure, to cope with everyday challenges, to rebound from disappointments, mistakes, trauma, and adversity, to develop clear and realistic goals, to solve problems, to interact comfortably with others, and to treat oneself and others with respect and dignity.

A guiding principal in each interaction that adults have with children, whether in homes or schools or the office of a therapist, should be to strengthen these attributes, which we subsume
under the concept of a resilient mindset. This leads us to the topic of mindsets and its relevance for therapists.

**The Power of Mindsets**

The concept of mindsets has become a prominent area of study, especially with the emergence of the field of “positive psychology.” As examples, Dweck authored a book titled *Mindset* (2006) in which she distinguished between a “fixed” and “growth” outlook; the research of Seligman and his colleagues about “learned helplessness” and “learned optimism” as well as resilience (Reivich & Shatte, 2002; Seligman, 1990, 1995) have underpinnings in attribution theory, which is basically about mindsets, examining how we understand the reasons for our successes and mistakes (Weiner, 1974).

Brooks and Goldstein (2001) noted that resilient children possess certain qualities and/or ways of viewing themselves and the world that are not apparent in youngsters who have not been successful in meeting challenges. The assumptions that children have about themselves and others influence the behaviors and skills they develop. In turn, these behaviors and skills influence the set of assumptions so that a dynamic process is constantly operating. This set of assumptions may be classified as a mindset.

Identifying the components of a resilient mindset, which are described in greater detail below, provides invaluable guideposts for therapists as they initiate interventions with their child patients and/or with the significant caregivers in these children’s lives. Adults who utilize these guideposts are equipped with a compass that directs them as they strive to nurture resilience in children. While the outcome of a specific situation may be important, even more vital are the lessons learned from the process of dealing with each issue or problem. The knowledge gained in the process provides the nutrients from which the seeds of resilience will flourish (Goldstein, Brooks, & DeVries, 2013).

In discussing the concept of mindsets it is important to appreciate that not only do we possess assumptions about ourselves, but whether we realize it or not, we are constantly making assumptions about the behavior of others. These assumptions, even if unstated, have a significant impact in determining the quality of our relationships with children and the positive or negative climate that is created in home, school, therapeutic, and other environments. We believe that a main task of therapists is to replace negative mindsets in children and their caregivers with mindsets that nurture resilience and hope.

As therapists, we must be open to examining our own mindsets about particular youth. How do we understand the various behaviors of children? What emotions do different children evoke in us? In our workshops we often ask, “Have parents ever called you to say that their child is ill and won’t be able to come in for his/her appointment and after you reply that you hope the child feels better, you feel a sense of relief that the appointment has been cancelled?”

Many clinicians laugh when hearing this question since most have experienced that emotion, thought, and response. We then inquire, “But why would you feel that sense of relief?” Typical answers have to do with an uncertainty of what one is doing in therapy with a patient, or that there has been little if any treatment progress, or that the child is very provocative and elicits
anger. Whatever the reason, it is important to realize that children can sense the negative (or positive) mindset of their therapist or other adults.

“Punishing a Suffering Child”

The following is a vivid illustration of the impact of mindsets in determining a mother’s behavior towards her five-year-old daughter and the significance of therapeutic interventions to change counterproductive childrearing mindsets and practices. It involves Janet Norton, a single parent of five-year-old Amanda. She contacted the first author and said during the initial phone call, “I’m desperate.” She described how prior to becoming a parent she told herself that she would never resort to corporal punishment as a disciplinary tactic. Yet, she was currently spanking Amanda several times a day, asserting, “It’s the only way she’ll listen to me and even that doesn’t last too long.”

In her first appointment Janet described Amanda as a very challenging child to satisfy from birth, one who often had tantrums, especially when she did not get what she wanted. “Everything is a struggle with Amanda. Nothing pleases her. Things would be so much easier if only she would cooperate more with what I ask her to do. I don’t think I’m asking too much of her.”

In listening to Janet’s description of Amanda and guided by an appreciation of the influence that mindsets have on our reactions to different people and situations, Bob asked, “How do you understand Amanda’s behavior or why she acts the way she does?”

Janet hesitated and then replied, “I would tell you, but I think you would think I was crazy.”

“Crazy for telling me how you understand Amanda’s behavior?”

“Yes.”

Again, directed by the ways in which mindsets influence our behaviors, Bob inquired, “Do you know why I asked about how you understood Amanda’s behavior?” (We often pose this kind of question with patients, both as a way of beginning a discussion about mindsets as well as developing a collaborative relationship in which ideas and comments are shared and understood.)

Janet thought for a moment and answered, “I’m not certain.”

Bob responded, “In my experience how we understand or interpret someone else’s behavior, what I often refer to as our mindset, will determine how we respond to that person.”

“That certainly makes sense, but what I’m going to say may still seem crazy. Sometimes I feel that Amanda has a personal vendetta against me, that it’s like she’s always thinking of ways to upset me.”

Bob’s initial response was to tell Janet that he knew it took a great deal of courage for her to share this view with him—the moment he used the word courage Janet seemed to become more relaxed—and while a personal vendetta might be one explanation, there might be other explanations as well. (Aware of Janet’s anxiety that Bob would indeed experience her personal vendetta interpretation as a sign of her being crazy, he was careful not to judge this explanation but rather to offer another possibility.)
Janet was eager to hear Bob’s alternative explanation, which involved a discussion of the different temperaments with which children are born. He cited the seminal work of Chess and Thomas (1996). He said that while some children are born with what researchers have labeled *easy* temperaments, others possess temperaments that are seen as *difficult*. Bob told Janet that from her description, Amanda met many of the criteria for this latter label.

As the discussion continued, Janet wondered that if a child like Amanda is born with a difficult temperament, would she always display this kind of temperament even into her teen and adult years. Bob offered realistic reassurance by noting that once adults are aware that a child has certain challenging temperamental qualities, there are techniques they can use to lessen these negative qualities.

Janet then plaintively said, “So I guess that many of the things I’ve spanked her about were really things she did not have control over.”

“Yes, but that doesn’t mean we can’t help her to gain more control and be more cooperative now without having to spank her.”

Janet teared up and offered a very poignant comment, “As I think of all we’ve talked about, all I can think about is that I’ve been *punishing a suffering child.*”

Bob empathized with Janet and added, “But that’s before you really knew about temperament or different strategies to deal with children who are more difficult to parent. We can begin to consider other strategies for interacting with Amanda that do not involve spanking.”

Janet was very motivated to learn these other strategies. As she did, her confidence as a parent and her relationship with Amanda noticeably improved. She no longer spanked her daughter, observing, “Why would anyone want to spank a suffering child?”

The shift in mindset from a *personal vendetta* to a *suffering child* prompted an entirely different parental approach, which would not have been possible without this change in perspective. In turn, the shift in mindset was reinforced with the positive changes that occurred in Amanda’s behavior. Janet developed a more understanding, satisfying relationship with her daughter and Amanda responded in kind.

**The Characteristics of a Resilient Mindset**

Given the impact of mindsets in determining our behavior, we propose that a major goal for psychotherapists is to reinforce a mindset in patients that is associated with hope and resilience. This goal will be facilitated if therapists identify the attributes of what Brooks and Goldstein (2001) have labeled a *resilient mindset* and nurture these attributes both in the therapy session and in consultation with significant adults in the youth’s life.

The mindset of resilient children is comprised of a number of noteworthy characteristics that are associated with specific skills. Resilient children:

--- Feel loved and accepted
--- Have learned to set realistic goals and expectations and goals for themselves
--- Are able to define the aspects of their lives over which they have control and to focus their energy and attention on those, rather than on factors over which they have little, if any, influence
Believe that they have the ability to solve problems and make informed decisions
Take realistic credit for their successes and achievements but acknowledge the input and support of adults for these successes
View mistakes, setbacks, and obstacles as challenges to confront and master rather than stressors to avoid
Recognize and accept their vulnerabilities and weaknesses, seeing these as areas for improvement, rather than unchangeable flaws
Recognize, enjoy, and use their strengths or what we call their *islands of competence*
Feel comfortable with and relate well to both peers and adults
Believe that they make a positive difference in the lives of others.

**To Serve as a “Charismatic Adult”**

A key to being an effective therapist (or parent or teacher) is to view each interaction with a child as an opportunity to reinforce one or more of these characteristics. As noted above, these characteristics serve as guideposts in our therapeutic interactions with children. We must never underestimate the impact that any of our interactions, including those through play therapy, can have on a child. A basic research finding is that resilience is rooted in the relationship that children experience with caring adults (Brooks & Goldstein 2001, 2004). The late psychologist Julius Segal, whose work focused on factors that assisted children to master adversity, eloquently noted (1988):

*From studies conducted around the world, researchers have distilled a number of factors that enable such children of misfortune to beat the heavy odds against them. One factor turns out to be the presence in their lives of a charismatic adult—a person with whom they can identify and from whom they gather strength.* (p. 3)

Segal’s notion of a *charismatic adult* is thought-provoking. It prompts therapists to ask themselves: “At the end of each therapy session, is my patient stronger because of things I’ve said or done or is my patient less strong and hopeful? Has my patient gathered strength from me?” It also highlights what many clinicians and researchers have found, namely, that resilience is rooted in the relationship and connections that children have with caring adults in their lives.

The power of the relationship a child can develop with a therapist, even in the face of limited therapeutic progress, is well exemplified in the work of the second author with Steven. Steven was a bright but impulsive and extremely oppositional nine-year-old. He and his siblings had been abandoned by their parents who were schizophrenic and subsequently placed in foster care. Steven’s coping strategies were such that he quickly burned out foster parents due to his strong-willed opposition to even the most minor requests combined with his verbal precocity and ability to quickly frustrate even the most well-meaning adult. On his first visit to see Sam, he was sitting in the waiting room reading a book. Sam soon learned that reading was a powerful protective factor for Steven. He could withdraw into his book when the stresses around him became excessive. The examiner invited Steven to come into his office to which Steven responded, “Sure, when I finish this book.”
Steven was about half way through what appeared to be a very large novel in the Harry Potter series. Rather than confront Steven, Sam asked him a question.

“Well, that’s fine, I have some reading to do also. Do you mind if I pull up a chair and sit here and read with you until you are ready to come in?”

This comment took Steven by surprise (novelty and the unexpected often draws reflection and attention). Steven responded affirmatively. Steven kept glancing at Sam as the latter read a magazine. After a few minutes, Steven closed the book and exclaimed,

“This isn’t a very interesting book, let’s go into your office.”

Steven proceeded over the first few visits to repeatedly test the examiner by sitting in the examiner’s chair, opening the examiner’s drawers, and asking questions about the examiner’s personal life. All of these questions and actions were responded to patiently. Basic rules were set that Steven agreed to and were followed during weekly therapy visits. Even after multiple visits, when the examiner would ask questions about Steven’s week or activities, he would respond:

“That’s private.”

Nearly everything the examiner sought to talk about or discuss Steven considered “private.”

Yet Steven quickly attached to Sam even though he would not talk nor participate very much in therapeutic play. His mother reported that he never forgot a visit, often reminding her the night before. When Sam had to miss a week after approximately eight to ten visits due to travel, Steven immediately complained that this was “his time” and he wanted to be seen. Eventually Steven’s attachment to Sam adhering to their schedule progressed to his willingness to share his thoughts and feelings. This willingness also resulted in an improvement in Steven’s behavior. Sam had very clearly become a charismatic adult in Steven’s life.

Therapists, in explaining the notion of charismatic adult to the child’s parents and/or teachers, can ask these caregivers to consider similar questions:

“When I put my children to bed at night, do I ask, ‘Are my son and daughter stronger because of things I’ve said or done today or are they less strong? Have they gathered strength from me?’”

“At the end of the school day, do I as a teacher ask, ‘Are all of the students in my classroom stronger because of things I’ve said or done today or are they less strong? Have they gathered strength from me?’”

These are not easy questions to answer, especially since the concept and measurement of strength are far from precise. However, when parents, educators, and therapists consider whether they are serving as charismatic adults, it elicits the question, “What do I say or do to serve in that role?”

One answer resides in identifying and applying those strategies that reinforce the attributes of a resilient mindset. We believe that a commonality among therapists, even those holding different theoretical positions, can be found in an understanding and reinforcement of the characteristics of a resilient mindset in their patients. For example, Crenshaw and his colleagues
have demonstrated that the use of play therapy represents one therapeutic approach with children that can be used to reinforce resilience in the face of hardship and trauma (Crenshaw, 2008, 2010; Malchiodi & Crenshaw, 2014).

**Strategies for Nurturing a Resilient Mindset**

We have selected several of the main attributes of a resilient mindset that can provide guideposts for therapists to follow as they strive to have their patients gather strength from them.

**To believe that adults can be supportive and helpful.** The relationship therapists develop with children is of paramount importance in helping the latter feel safe, secure, accepted, and loved, prerequisites for the emergence of resilience. This statement may appear so obvious that some may question the necessity for its inclusion. However, our purpose in emphasizing this point is to promote consideration of the different actions therapists can initiate to help children feel safe and accepted in their offices. If children do not perceive adults as caring and supportive, if they sense that adults can be harmful and judgmental, it will be difficult for them to accept adults into their lives, thereby robbing them of an opportunity to become resilient.

A major skill for adults to demonstrate if they are to foster positive feelings in children towards caregivers is to demonstrate empathy, always attempting to see the world through the child’s eyes. In our clinical practices and workshops we invite therapists, parents, and educators to reflect upon particular questions to help bring focus to the concept of empathy, including:

“How would I feel if someone said or did to me what I just said or did to my patient (child, student)?

When I say or do things with my patients (children, students), do I communicate in a way that will help them realize I care about them so that they will be more receptive to listening to me?”

“How would I hope my patients (children, students) described me?”

“What have I done on a regular basis so that my patients (children, students) are likely to describe me in the ways I hope they would?” (This particular question encourages adults to consider a specific plan of action that they can assume to enrich their relationship with children they are raising or with whom they are working.)

“How would my patients (children, students) actually describe me and how close is that to how I hope they would describe me?”

“If there is a discrepancy between the hoped for and actual descriptions, what steps must I take to lessen that discrepancy?” (Another question to prompt a plan of action.)

An example of the way in which the first author used these questions to help parents become more empathic and charismatic adults in the life of their child took place with Sally, a shy, 8-year-old. Sally was frequently reminded by her parents Sue and Alan to say hello to people. The first question that greeted Sally after school was, “Did you speak with anyone in school today? If you don’t make the effort, you’re not going to have any friends.” These kinds of comments backfired, prompting Sally to become increasingly anxious.

Sue and Alan were understandably worried about Sally and desired her to be more outgoing. However, they failed to appreciate that Sally’s cautious demeanor was an inborn
temperamental trait that could not be overcome by exhorting her to say hello to others or make friends. Each reminder on their part intensified Sally’s discomfort, increased her feeling that she had disappointed her parents, and compromised the development of a warm, supportive relationship between Sally and her parents.

Parent counseling focused on changing their mindset about Sally so that she would experience her parents as supportive rather than critical. They were asked to consider how their current actions and words impacted on their daughter. If they were shy, how would they feel if someone said to them, “You have to make an effort to speak with other people or you won’t have friends and you’ll be lonely”? Reflecting on these questions at first startled Sue and Alan, but then served as a catalyst to help them develop a more empathic stance towards their daughter.

They asked how they might approach Sally and if they should avoid saying anything at all about her shy behavior. They were encouraged not to avoid the subject but rather to help Sally by expressing empathy and by having her feel they were on her side rather than judging her. In parent counseling they learned to inform Sally that they knew it was not easy for her to say hello to people she didn’t know, adding it was not easy for other children as well. Such a statement, expressed in a genuine fashion, conveyed empathy and also, helped to normalize the problem she faced. Normalizing a problem permits children as well as adults to feel that they are not alone—a very reassuring feeling.

Sue and Alan then created a problem-solving atmosphere, which as we will highlight below is a major component of resilience. They suggested to Sally that perhaps the three of them working together could figure out small steps that she could begin to take to make it less difficult for her to greet others. They also offered realistic hope by asserting, “Many kids who have trouble saying hello when they’re young, find it easier as they get older.”

These changes contributed to a more positive relation between Sally and her parents and encouraged Sally to take the “small steps” Sue and Alan had suggested. Sally’s perception that her parents were supportive rather than judgmental was a significant shift in her mindset that allowed her to venture forth more confidently in her daily interactions with others.

In conducting therapy, clinicians can offer comments that represent their wish to be empathic and to understand the perspective of their patients. These comments, timed for the appropriate moments, frequently lessen defensiveness and enrich the alliance between the therapist and the patient. They include:

“If you ever feel I’m not understanding something you’re trying to tell me, please let me know.”

“If you ever feel I’m being critical of you or judging you, please let me know since that would never be my intention.” (We have found this comment to be very powerful with children as well as their parents who are often poised to feel that they are being judged.)

“If I ever ask you a question and you’re not certain why, don’t hesitate to ask me why I’m asking the question.” (The first author used a similar statement with Janet Norton as he inquired about what her understanding was of her daughter’s behavior.)
These and similar statements should not be seen as rigid scripts to be produced indiscriminately but rather as a sincere reflection of the therapist’s wish to develop a warm, caring, and empathic relationship with children and their families.

In addition, as Brooks and Brooks describe in Chapter 3 of this book, many of the empathic communications with children can be expressed very effectively via play, storytelling, and metaphors.

Before leaving the theme of the therapist-patient relationship, it is important to consider the possible obstacles to being more empathic and nurturing this relationship. Therapists must recognize that it is usually easier to be empathic and caring towards patients who are cooperative and eager to enter into a warm relationship. As we have often noted in our writings and workshops, a significant challenge is to be empathic and to reach out towards individuals with whom we are upset or disappointed or who push us away when we attempt to be helpful. To gain their trust will require acceptance and time—trust cannot be acquired overnight.

To appreciate that we have more control over our reactions to events than we may realize. Developing an outlook of personal control in children is an essential feature of resilience. In identifying personal control as a key ingredient of a resilient mindset, Brooks and Goldstein (2004) offered the following description of this concept:

Taking ownership of our behavior and becoming more resilient requires us to recognize that we are the authors of our lives. We must not seek our happiness by asking someone else to change, but instead always ask, What is it that I can do differently to change the situation? Assuming personal control and responsibility is a fundamental underpinning of a resilient mindset, one that affects all other features of this mindset. (p. 7)

While this statement focused primarily on resilience in adults, it is equally relevant for our interventions with children. As therapists, we should be sensitive to assessing whether children and/or their families are burdened by a victim’s mentality. Such a mentality is dominated by thoughts and feelings associated with a sense of helplessness and hopelessness. Or, do they entertain the notion that while negative events over which they have little, if any, control have transpired in their lives, what they do have control over is their attitude towards and reaction to these events?

Seth, a nine-year-old boy with a diagnosis of ADHD, was not only struggling in school but with the recent divorce of his parents. In one session, frustrated and angry, he asked, “Why did God choose me to be the one with ADHD?”

It is not unusual for children or adults faced with adversity to ask, “Why me?” or “Why my child?” The problem is exacerbated when the “Why?” question continues to dominate one’s thinking year after year. Eventually, feelings of helplessness and a victim’s mentality may become the prominent features of a person’s mindset. Gerber, Ginsberg, and Reiff (1992) studied adults with learning disabilities and found that those who were more successful in different arenas of their lives had adopted the outlook, “I had no control over being born with learning problems, but I do have control in terms of how effectively I cope with those problems.”
The less successful adults kept bemoaning, “Why did I have to be born with learning disabilities?”

So how might a therapist respond to Sean’s question, “Why did God choose me to be the one with ADHD?” When asked what he thought, Sean could offer no explanation. Gerber, Ginsberg, and Reiff’s (1992) findings offer direction. A resilience-based response might include the following: “We’re not sure why some kids have ADHD and some don’t, but the encouraging news is that now that we know you have ADHD, there are things that can be done to help kids like yourself and others with ADHD to be more successful.”

It is important for the therapist to understand both a child as well as a parent’s notion of personal control. This understanding may be facilitated using a particular mindset model that was mentioned earlier in this chapter, namely, attribution theory (Weiner, 1974). Children who struggle with self-esteem and are not very hopeful or resilient believe that any success that comes their way is based on luck or chance or fate. They attribute success to factors that are outside their control, which lessens the probability of future accomplishment. In contrast, youngsters with a more positive outlook will give the adults in their lives credit for their assistance, but they basically believe—and not in an narcissistic way—that their success is predicated in great part on their own effort and resources.

In terms of setbacks and mistakes, children with low self-esteem are prone to attribute mistakes to things they cannot change (e.g., low intelligence), prompting feelings of hopelessness and the emergence of self-defeating coping strategies (e.g., quitting at difficult, not even attempting certain challenges, blaming others). Children who are secure attribute mistakes to situations from which they can learn rather than feel defeated. They are more likely to use mistakes to establish realistic goals and strategies for success.

An understanding of a child’s beliefs about personal control can begin during the assessment phase. Samantha, a 12-year-old girl was referred to the first author given her feelings of sadness and loneliness coupled with low self-esteem and learning problems in school. During the first interview she immediately described her distress and obvious sense of hopelessness and helplessness. “I’m not very popular, I have trouble in school, and I’m terrible at sports. That’s why I stay in my room a lot.”

In response to Bob’s questions, Samantha acknowledged that she wished things were different. Bob inquired what would she like to change.

Samantha readily responded, “I wish I was as pretty as the other girls and that I was popular and could play sports and get good grades in school.”

As the discussion continued, Bob wondered if there was ever a time that Samantha felt more successful. Her reply could have been taken directly from a book illustrating the tenets of attribution theory. Samantha talked about a time another girl complimented her, but she dismissed this gesture by contending, “She felt sorry for me.” She also minimized a good grade she received on an English paper with the comment, “I think the teacher felt sorry for me.”

Therapy with Samantha focused on changing these self-defeating attributions or assumptions. Bob, as he frequently does with children and adolescents, explained in language
that Samantha could understand, the concept of mindsets and their impact on her behavior. A therapeutic goal was to modify Samantha’s mindset by incorporating a more hopeful outlook. As this goal was being realized, Samantha attempted new scripts (Brooks & Goldstein, 2001, 2004) that led to positive outcomes. She “rehearsed” in therapy, including through the use of dolls and play, different ways of approaching a couple of girls with interests similar to her own. She also received assistance from a tutor, especially about preparing for tests, which led to improved grades. In place of sports, she cultivated an interest in painting and enrolled in an art class in a museum.

With each positive result, Bob was very active in asking, “Why do you think that what you did was successful?” Samantha understood why Bob was asking and soon in a playful manner would say, “I know what you’re going to ask me.”

“You do?”

“You were going to ask why I thought I was successful?”

With humor Bob replied, “Wow! I must be really predictable. But let me ask, ‘Why do you think you were successful?’”

While the use of humor was involved in this dialogue, an important shift in Samantha’s outlook occurred when she could acknowledge that her success was based not only on the help of others but, as importantly, on her own effort.

Therapists can offer suggestions to parents and teachers of how best to reinforce personal control in children. For instance, these adults can call attention to a child’s efforts in determining the outcome of an event. The following are but a few examples of such feedback:

“You really put in a lot of time and effort to learn those spelling words and it showed on how nicely you did on this test.”

“I know it wasn’t easy for you to memorize the lines for the school play, but all the hours you spent memorizing your part really paid off.”

“Do you remember that the last time we went to the restaurant, it wasn’t easy for you to wait for the meal and you started to yell? We spoke with you about it and this time you waited so nicely. We appreciate how you behaved.”

Since we believe that when indicated, parents and teachers should be active participants in the treatment program, therapists should also be sensitive to reinforcing personal control within these caregivers. As children show progress, therapists must offer genuine credit to the role that parents and teachers have played. Simple comments such as: “Your changing your discipline approach has certainly led to a change in your child’s behavior” or “Your allowing the student to read to younger students has really led to a boost in the student’s self-esteem and motivation.” In essence, the significant role of the adult in modifying the child’s behavior is spotlighted.

To believe that problems are for solving rather than being overwhelming. Intimately tied to the task of reinforcing a belief in personal control but deserving special attention is the acquisition and use of problem-solving skills. If children act before they think and if they don’t consider the consequences of their behavior, they will have difficulty developing effective
coping strategies and a sense of personal control. Many of our patients demonstrate difficulties
with problem solving and as a result, feel lost and confused. In contrast, resilient youngsters are
able to identify problems, consider different solutions, select what they believe will be the most
effective solution, and learn from the outcome (Shure, 1996; Shure & Aberson, 2013).

Shure (1996), one of the foremost experts on reinforcing problem-solving abilities in
children, has found that even preschool children can be assisted to develop and apply these skills.
Shure as well as other professionals believe that well-intentioned adults often rush in too quickly
to tell children what to do rather than to enlist their input when faced with challenges. When
children are afforded an opportunity to initiate their own plans of action with the guidance of
adults, their feelings of ownership and personal control are reinforced.

The ability to solve problems at a young age was evident with six-year-old Carl, a boy
diagnosed with ADHD. In his attempt to make friends, he often invaded the space of his peers
by giving them hugs, an action that not surprisingly backfired.

The first author asked Carl if he thought his behavior was a problem (this is a question
that should always be posed since if children or adolescents do not perceive certain behaviors as
problems, then they will not be motivated to change; if a child denies that a problem really is a
problem, the therapist can engage in a discussion about why the behavior in question might be
problematic). When asked this question, Carl looked sad and replied, “Big problem. I might not
have any friends. But I just forget and I hug kids.”

When asked if he could think of a way to begin to solve the problem, Carl did not hesitate
to say, “I need reminders.”

Bob inquired, “What do you mean by reminders?”

Carl said, “I think if the teacher reminded me each morning not to hug another kid, it
would help me to remember.”

“That’s a great idea.”

With the permission of Carl’s parents, Bob arranged a meeting with Carl, Carl’s teacher,
and himself. His teacher in an empathic and supportive way began the meeting by telling Carl
she was very pleased that he could tell Bob what he thought would be helpful. This comment
immediately put Carl at ease.

To reinforce his problem-solving skills, she asked, “How would you like to be
reminded?”

Carl said that he noticed that sometimes she would touch children on their shoulder and
he thought if she did the same to him at the beginning of the day, it would be a good reminder.

She complimented him on this suggestion and then inquired, “How often would you like
me to remind you?”

Carl’s response was what the teacher later referred to as “precious.” He was just learning
to tell time and he jumped off his chair and held one hand up and said, “When the big hand is up
and when it is down,” which was accompanied by his moving his hand from an up to a down
position.
The decision was made to start this intervention the next day with reminders given every 30 minutes. At the end of the following day, Carl’s mother called Bob to provide feedback. She said, “Carl came home very excited and said he thought the reminders were really going to work, but then he added that he thought he needed the reminders every 10 minutes.”

Carl’s teacher followed this suggestion and within a few weeks the reminders that were offered every 10 minutes were spaced out to every 30 minutes, and then every hour, and finally not needed at all.

It was Carl’s input that led to this problem-solving strategy, a strategy that proved very successful.

We are often asked, “What if a child or adolescent patient is not able to say what might be helpful or has difficulty thinking of different solutions to problems?” It is not unusual for this to occur. When it does, we suggest that a therapist respond by saying, “Let’s try to figure this out together” and by asking certain questions the therapist can engage the child in a dialogue that will eventually produce solutions.

As Shure (1996) has advocated, beginning at an early age, parents can nurture their children’s problem-solving abilities by first providing simple choices (e.g., “Do you want to wear the blue dress or the green dress?” “Do you want to take a bath first or memorize your spelling words first?”), and then moving to more complex choices and decisions. Countless situations arise in which the input of children can be encouraged. The same can be done in schools, such as by inviting children to attend part or all of a parent-teacher-student conference or by having them select what two of three homework questions to answer that they believe will help them to learn best.

Shure and Aberson (2013) quoted the words of a parent who discovered the benefits of applying their problem-solving program. “I learned that I as a parent can be part of the solution for my child rather than adding to the problem. Before using this approach I was trying to take power and felt powerless. Now we solve problems together” (p. 500). In this example, both parent and child had become more resilient.

**To appreciate that we all have strengths even when struggling with problems.** Resilient children do not minimize or deny problems that they have. Denial runs counter to mastery. However, in addition to acknowledging and confronting problems, youngsters who are resilient are able to identify and use their strengths or their islands of competence (Brooks & Goldstein, 2001). This metaphor represents a symbol of hope and resilience, a reminder that all children have strengths.

We regularly ask our child and adolescent patients what they judge to be their strengths or islands of competence. If they are not certain, we reply, “That’s okay, it can take time to figure out what we’re good at, but it’s important to figure out.” We always ask the parents and teachers of our patients to identify the strengths of their children or students and discuss ways to reinforce these strengths. It is also important to ask parents what they see as their own strengths, including in the parental role. We must move from a so-called “deficit model” in which the
focus is on fixing problems to paying more than lip service to the strengths that reside in all children and adults.

The first author saw 10-year-old Madison, a shy fourth-grader with very low self-esteem. She was often teased by other girls. Madison’s mother, Abby, commented, “Sometimes I wish that Madison would stand up for herself. She always seems to live in the background.” When Bob asked Abby what she saw as Madison’s strengths, she responded quickly, “She has a beautiful singing voice. I wish she would try out for a school play.”

In a meeting with Madison, Bob asked her what activities she enjoyed doing and what she thought she did rather well. Madison quickly answered she didn’t know but after further discussion she said that her mom told her she had a nice voice. She added that when her class was singing a group song, her teacher told her afterwards that her she couldn’t help but notice what a “strong singing voice” Madison had. Bob asked Madison if she would sing a song during one of their sessions. She replied that she would feel more comfortable singing and recording it at home and bringing in a copy. She did so and Bob told her how impressed he was listening to her.

This led Bob to encourage Madison to audition for a school play. Madison took it a step further and auditioned for a musical being sponsored by a community group that Abby had located. Madison was awarded the part she coveted and invited Bob to attend one of the performances, which he did. Madison appeared so confident as she sang and this experience proved to be a significant turning point in her life.

The power of the therapeutic relationship in serving as a foundation for the positive changes in Madison’s life was captured years later when she contacted Bob after reading an article in which he was quoted in a local newspaper. She said that she had been intending to get in touch with him for a while to let him know how she was doing. She reported that she was happy in her career and marriage and loved her role as a mother of two children, 6 and 8 years of age. She reminisced about her sessions with Bob and said, “I will never forget that you came to hear me sing. You really encouraged me to find and use my strengths.”

If children are to be resilient not only must they perceive that they have strengths but, as importantly, they must believe that their strengths are appreciated and supported by the significant adults in their lives, including their parents and teachers.

**To believe that we make a positive difference in the world.** When Bob was collecting material for his book *The Self-Esteem Teacher* (1991), he requested approximately 1,500 adults to complete an anonymous questionnaire. The first question asked them to report on a positive memory of school when they were students, something an educator said or did that boosted their self-esteem. Bob had not anticipated the content of the most commonly reported positive memory, namely, being asked to help out in some fashion. The following are a few examples:

“I remember when a teacher asked me to pass out the milk and straws.”

“I felt so good when a teacher asked me to tutor a younger child.”

“I remember when a teacher told me I was a good artist and asked me to draw some signs as part of an anti-litter campaign.”
When concluding psychotherapy with a child, the second author appeals to the child for help during their closing visit. Sam explains that there will be other children coming to see him who may share similar problems and that the support from someone who is now feeling, doing, and behaving better will be very important to children first entering therapy. Sam then asks the child to consider drawing a picture, writing a note or making a poster that could be given to another child. Below is a poem written by sixteen-year-old Devin about his feelings living with Autism. He wrote this for Sam when he completed a course of supportive psychotherapy:

**Were They But There At Night**

There is a boulder field where every stone
Is a glazed, glittering gem, like stars fallen from the sky.
All except one, a plain grey rock alone in the center
Feeling excluded and shunned.
People come, tourists, painters, photographers, collectors
To view each shining boulder, a pleasure to the beholder.
Ooh! Ahh! Look at this one! Come quick!
Pockets bulge with fragments and paint cans run dry
But the grey rock remains ignored
An ugly blotch on a sweeping mural.
The sun sets, everyone leaves,
And they miss the centerpiece of the field.
For when night falls, the grey rock in the center
It glows in the dark.

Brooks and Goldstein (2001, 2004)) proposed that there is an inborn need to help that continues to be a powerful force throughout our lifespan. As Werner (1993) captured in her longitudinal research, resilience was nurtured when children were provided opportunities to help others, an activity that Brooks and Goldstein (2001) have called “contributory activities.” Involvement in these activities nurtures a very important belief in a child, one that reinforces a sense of purpose, namely, “What I am doing adds to the well-being and happiness of others.”

We observe that too often adults preach to children about being more caring and compassionate. There should be less lecturing about these admirable qualities and more opportunities to display them. Situations occur that allow therapists to emphasize “contributory”
actions. For example, when children arrive at impressive strategies for solving particular problems, a therapist can call attention to the effectiveness of the strategy. We have said to our child patients, “That’s such a good idea, I’d love to use it with other kids. I think it will really be helpful to them.”

We are frequently asked by parents at our workshops what they can do to develop compassion and responsibility in their children. One response we offer is to ask parents to consider how their children would reply to the following questions:

“What are the ways you have seen your parents help other people in the past few months?”

“What activities have you been involved with together with your parents in the past few months in which you have helped other people?”

Children are more likely to become altruistic and caring if they not only observe their parents helping others but if they are enlisted in such roles themselves. When involving their children we advise parents to say, “We need your help” rather than “Remember to do your chores.” Not surprisingly, most children do not like to do “chores,” but are especially willing to engage in the same activities when they are cast in terms of helping others. Parents who encourage their children’s participation in charitable endeavors, such as walks for hunger or AIDS or breast cancer research, are supporting a resilient mindset.

In our consultation with parents and teachers we have emphasized that charitable activities can be used to reinforce other components of a resilient mindset such as problem-solving (e.g., what charity to support, how to raise money for the charity), empathy (e.g., taking the perspective of the people you are assisting), and applying one’s islands of competence (e.g., Madison singing in a play).

To recognize that mistakes are not only expected but also accepted. As we noted earlier in our discussion of attribution theory, resilient children, while not thrilled when making mistakes, view setbacks as opportunities for learning. For example, resilient children who fail a test will ask for help and/or problem solve about more effective ways of studying. In sports, resilient children will take extra batting or fielding practice to improve their batting and defensive skills. These youngsters attribute mistakes to variables they can correct.

The picture is much different for children who are not resilient. They attribute mistakes to factors that they cannot change, whether it be their intelligence or an inborn lack of skills. They believe that regardless of what they do, nothing will ever change. Eventually, not wishing to face additional failure and its accompanying sense of humiliation, they often adopt self-defeating ways of coping. A boy in therapy revealed, “I’d rather hit another kid and be sent to the principal’s office than have to be in the classroom where I feel like a dummy.”

The powerful negative mindset children develop about mistakes was very well illustrated in the second author’s work with a very bright, impulsive, inattentive six-year-old, first grader. During the course of a clinical interview Jeremy told Sam,

“Teachers don’t like when children make mistakes.”

Sam inquired, “why not?”
Jeremy responded, “They put red marks all over your paper and what’s even worse, they tell your mother.”

Sam attempted to engage Jeremy in a discussion about the benefits of making mistakes but Jeremy was adamant that mistakes were “bad.”

Therapists are in an excellent position to reinforce a positive attitude towards mistakes and lessen self-defeating behaviors in children and adolescents. They can assess a child’s mindset and attributions about mistakes through direct questions or via play activities. Therapists can inquire of children the reasons they thought they were not successful at a task, what they might do differently next time (this, of course, also engages a child’s problem-solving skills), and who might be available to help.

A favorite technique in our therapy or consultation activities occurs when we have helped to develop a plan of action with our child patients and/or their parents and/or their teachers. Given the particular situation, we might say, “This plan sounds great, but what if it doesn’t work?” Some might wonder if posing such a question represents a self-fulfilling prophecy for failure. It might if we did not immediately add, “What is our back-up plan if it doesn’t work?”

The reason for asking about a back-up plan was prompted by the reaction of some of our patients or those with whom we were consulting when a plan of action proved unsuccessful. Many became frustrated and angry. It was not unusual for us to hear from teachers or parents, “We went out of our way to change things, but the child is still not willing to change” or one parent lamented, “I guess this works for most parents, but I must really be doing something wrong.”

We learned that if people are to have a more positive attitude about mistakes, which is an essential characteristic of resilience, we must build in the possibility of failure occurring accompanied with the message that if one strategy is unsuccessful, we can learn from that setback and then initiate other strategies.

In our consultations with teachers, we encourage them to share with their students some of their own anxieties and experiences about making mistakes when they were students. They might even discuss a time when they were embarrassed or humiliated by something one of their teachers said (students love to hear these accounts). They can turn the discussion into a problem-solving exercise by asking, “What can I do as your teacher and what can you do as a class so that no one will ever feel humiliated in this class and no one will be afraid to make mistakes?”

Teachers have reported very positive results when using this exercise. One teacher informed us, “After I openly discussed the issues of mistakes and humiliation, it was the most discipline-free year I’ve ever had.” She discovered that when children are not afraid about making mistakes, they are less likely to engage in negative behaviors in the classroom.

Parents are in an excellent position to help children from a very early age develop the belief that we can learn from mistakes. If children can incorporate this attribution for mistakes, they will become more resilient and better equipped to face challenges. To assist parents with the goal of helping their children to be less fearful of making mistakes, we ask them to consider what their children’s answers would be to the following two questions:
“When your parents make a mistake, when something doesn’t go right, what do they do?”
“When you make a mistake, how do your parents respond?”

In terms of the first question, parents serve as significant models for handling mistakes. It is easier for children to learn to deal more effectively with setbacks if they see their parents doing so. It is very reassuring to children when they observe their parents model a problem-solving attitude towards mistakes, communicating the message through their words and actions, “What can I learn from this mistake? What can I do differently next time to be successful?”

The second question invites parents to consider whether their response to their children’s mistakes generates a healthy attitude towards mistakes or if it leads to greater insecurity and ineffective ways of coping. Asking children to consider other options or strategies when faced with a setback is far more effective than expressing such judgmental comments as: “I told you it wouldn’t work!” or “You really have to begin using your brains!”

**Concluding Comments**

We believe that as therapists one of our most important roles is that of a charismatic adult. Our assumption of this role will be facilitated if we identify and reinforce the characteristics of a resilient mindset in our patients, allowing them to lead more hopeful, responsible lives. Though our formal relationship with our therapy clients may come to an end, we should always recognize that the emotional and psychological ties we create with our patients may last a lifetime. Both Sam and Bob routinely receive correspondence from former patients. Sam recently received an email from a young woman he worked with during her teenage years. At the time she was struggling with depression as well as complex medical problems. She was on the verge of dropping out of school and began to engage in a variety of self-destructive behaviors. More than twenty years later she emailed Sam to let him know that she came across his website while looking for some articles for some of her patients. She eventually returned to school, stabilized her life, obtained a medical degree, married, had a family of her own and now was a pediatrician. She thanked Sam for his confidence in her and remembered that Sam told her she could gather the strength to be happy and make good choices.

In a note to Sam, another youth wrote during his young adult years:

You’ve always been kind and considerate of me. I appreciate your work and efforts on my behalf. I am proud to say that I am still doing very well thanks to people like you.”

One of Bob’s patients, Julie, whom he had not seen in 25 years, attended an evening presentation he was giving for parents in a suburb of Boston. When he saw Julie as a 10-year-old girl she was very anxious, socially shy, and insecure. During two years of therapy, Julie demonstrated impressive progress, becoming increasingly self-assured and resilient. Bob and Julie kept in touch on a periodic basis for a few years and he knew that she was doing very well. When she came up after Bob’s presentation she informed him that she was happily married, had two children, and had a high level position in the world of business. Julie then added, “I meant to write you long before tonight, but when I saw that you were speaking here I thought it would be the perfect time to come up and thank you.” She paused and with much emotion said, “I’m not certain you ever knew how important my therapy sessions with you were. I felt so accepted
by you and I will always remember the confidence you showed in me and your encouragement to face rather than run away from challenges.”

Interestingly, several weeks later when Bob was speaking in a neighboring town, a man approached him and said, “My wife told me I just had to come and hear you, that you meant so much to her year’s ago.” It was Julie’s husband, who in his brief conversation with Bob appeared very warm and caring.

And Bob will never forget the time when one of his former child patients who was now a mental health professional, gave Bob two books he had recently written, one in which he thanked Bob in the Acknowledgements and the other in which he wrote a truly beautiful inscription that ended with the words, “You help so many find permission to learn from what is hard for them. I have tried to write this book in that spirit.” What a succinct description of how therapists, in their role as charismatic adults, nurture resilient mindsets in their child patients and help them go down more hopeful, accomplished paths in life!

As therapists we can also engage children’s parents, teachers, and other caregivers to become charismatic adults. When all caregivers work in concert to nurture a resilient mindset in a child, the latter will be better prepared to overcome current difficulties and face new challenges with greater courage, skills, and perseverance.

References


