The Power of Resilience: Guidelines for School Psychologists in Difficult Times: A Call to Action

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Relevant Disclosure

• My expenses and compensation for this talk are supported by NASP.
• I have developed tests marketed by Multi-Health Systems, Pro-Ed and Western Psychological Services.
• I am Editor in Chief of the Journal of Attention Disorders (Sage) and Co-Editor of the Encyclopedia of Child Development (Springer)

Learner Objectives

1. Understand and apply the scientific evidence of resilience and resilience strategies in working with students of all ages.

2. Develop a set of strategies to better understand and evaluate behaviors associated with resilience in students of all ages.

3. Begin to develop a set of guidelines, strategies and suggestions to foster resilience and a stress hardy mindset in ourselves and all students.
Goals for This Presentation

• Develop an understanding of protective factors in the lives of youth.
• Develop an appreciation of the trends in mental health assessment from one sided risk focused to a holistic strength/risk focused model.
• Begin a discussion about improving the lives of all youth including those with the riskiest behavior and history.
• Offer a set of guidelines for School Psychologists.
• Stimulate a Call to Action.

The Future

The purpose of life is to prepare the next generation for their future.
Survival of the Species

- Salmon and snakes are born with sufficient instincts to survive.
- Bear cubs require at least one or two years with their mother to insure survival.
- Higher primates require three or four years.
- Humans require at least ten years.

COVID-19 Impact on Youth

- Since the Coronavirus disease 2019 (COVID-19) pandemic was announced, we had an unprecedented change in the way we organize ourselves socially and in our daily routine.
- Children and adolescents were also greatly impacted by the abrupt withdrawal from school, social life and outdoor activities.
- The stress they are subjected to directly impacts their mental health on account of increased anxiety, changes in their diets and in school dynamics, fear or even failing to scale the problem.
- Although youngsters appear to be less vulnerable to COVID-19, the side effects of the pandemic can be devastating.
- Children and adolescents may be highly exposed to biopsychosocial stressors generated by the pandemic and once population containment measures to reduce virus spread are required, they could be potentially affected by the disruption in daily life routine as a result of social isolation and their unseasoned ability to conceive and comprehend the short- and long-term consequences of this outbreak.

COVID-19 Impact on Youth

- Recently, an early published study evaluated 1036 quarantined children and adolescents in China in an age range from 6 to 15 years, of which 112, 196, and 68 presented depression, anxiety, and both, respectively.
- Another study demonstrated a high prevalence of psychological distress in quarantined children and adolescents due to the COVID-19 pandemic in India. These children experienced helplessness (66.11%), worry (68.59%) and fear (61.88%), compared to non-quarantined children.
- It was also reported in China that children and adolescents aged 3–18 years presented symptoms of inattention, clinging, worry and irritability during this pandemic.
Why are These Data a Concern?

- Stress and neuroinflammation.
- Social isolation and diet.
- Brain plasticity: social behavior; social inequalities, neglect and distress.
- Diminished opportunity for play and access to the community environment.
- Reduced public health and support.
- It is the nature of human beings to be social and, despite the need for these restraint measures, it is of great concern how this pandemic period can affect the young brain under development.
- Therefore, the search for strategies to mitigate a harmful long-term impact on it should be sought. This knowledge will bring information and guide us in the future should we have to face another world wide like the COVID-19 pandemic.
We have perpetuated the nineteenth century perception that raising children is a process by which information is dumped into a black box lying mysteriously within the human brain.

We have also assumed a Stepford Wives model that all black boxes are identical.

Through the Eyes of Innocence
We have done a very good job of marketing the concept of school to young children.

We have been successful in doing so because they possess Intuitive Optimism and Intrinsic Motivation, two of the Seven Instincts of Tenacity.

Instincts
- In some species instincts are fixed patterns of behavior leading to a certain outcome such as a bird building a nest for the first time or a salmon returning upriver to its birthplace to spawn.
- We believe that in our species instincts represent an intuitive way of thinking and/or acting that increase the chances of survival and success.
- In viewing instincts in this way we appreciate that knowing what to do and doing what you know are not synonymous.
- Ultimately success very much dependent on experience.
These instincts are:

- intrinsic motivation
- intuitive optimism
- simultaneous intelligence
- compassionate empathy
- virtuous responsibility
- genuine altruism
- measured fairness

“The secret of education lies in respecting the student”

Ralph Waldo Emerson

The experience of growing up absent success for some students steals away opportunities to develop a resilient mindset.
We fail to appreciate that children are genetically endowed with certain patterns of behavior and thought.

Caregivers are the architects of the way in which experience influences genetically preprogrammed but experience dependent brain development.

Daniel Siegel
The Developing Mind

Biology is not destiny but it does effect probability. In every risk group there are those who manage to transition successfully into adult life despite their adversities.
Resilience
• A process leading to good outcome despite high risk
• The ability to function competently under stress
• The ability to recover from trauma and adversity

“...I'm not afraid about my girlfriends and myself, we'll squeeze through somehow, though I'm not too certain about my math.”

Anne Frank
June 21, 1942

“I have lots of courage, I feel so strong and as if I can bear a great deal. I feel so free and so young! I was glad when I first realized it, because I don’t think I shall easily bow down before the blows that inevitably come to everyone.”

Anne Frank
July 15, 1944
The pathways that lead to positive adaptation despite high risk and adversity are complex and greatly influenced by context therefore it is not likely that we will discover a magic (generic) bullet.

Resilient children are not simply born that way nor are they made from scratch by their experiences. Genetic and environmental experiences loom large as protectors against a variety of risks to healthy development ranging from resistance to bacteria and viruses to resilience to maltreatment and rejection.

Success in childhood and adult life comes from harnessing assets and strengths.
Resilience is Predicted By Factors Within:

- The Child
- The Family
- The Culture

Risk and Protective Factors: In the Individual

**Risks**
- Female gender
- Early puberty
- Difficult temperament: inflexibility, low positive mood, withdrawal, poor concentration
- Low self-esteem, perceived incompetence, negative explanatory and inferential style
- Anxiety
- Low-level depressive symptoms and dysthymia
- Insecure attachment
- Poor social skills: communication and problem-solving skills
- Extreme need for approval and social support

**Protection**
- High IQ
- Positive social skills
- Willingness to please adults
- Religious and club affiliations
- Positive physical development
- Academic achievement

Reference:
Substance Abuse and Mental Health Services Administration (2009). Risk and protective factors for mental, emotional, and behavioral disorders across the life cycle. Summarized from:
http://dhss.alaska.gov/dbh/Documents/Prevention/programs/spfsig pdfs/IOM_Matrix_8%205x11_FINAL.pdf
### Risk and Protective Factors: In the Family

<table>
<thead>
<tr>
<th>Risks</th>
<th>Protective</th>
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<tbody>
<tr>
<td>• Inadequate or inappropriate child rearing practices</td>
<td>• Participation in shared activities between youth and family members</td>
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<td>• Income discord</td>
<td>• Provide opportunities for social and emotional development</td>
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<td>• Malnutrition and abuse</td>
<td>• Offer access to resources that can help youth overcome challenges</td>
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<td>• Large family size</td>
<td>• The presence of a positive adult(s) in the family to mentor and support</td>
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<td>• Parental antisocial history</td>
<td>• Foster positive relationships between family members</td>
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<td>• Poverty</td>
<td>• Clear expectations for behavior and values</td>
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<td>• Exposure to repeated family violence</td>
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<tr>
<td>• Substance abuse</td>
<td></td>
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<tr>
<td>• Parental psychopathology</td>
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<tr>
<td>• Teenage parenthood</td>
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<tr>
<td>• A low level of positive parental involvement</td>
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<td>• Family dysfunction</td>
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<td>• A high level of parent-child conflict</td>
<td></td>
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<td>• Poor parent supervision</td>
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### Risk and Protective Factors: In Peers

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<th>Risks</th>
<th>Protective</th>
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<tr>
<td>• Spending time with peers who engage in delinquent or risky behavior</td>
<td>• Positive and healthy friends to associate with</td>
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<td>• Gang involvement</td>
<td>• Engagement in healthy and safe activities with peers during leisure time</td>
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<tr>
<td>• Less exposure to positive social opportunities because of bullying and rejection</td>
<td>[e.g., clubs, sports, other recreation]</td>
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### Risk and Protective Factors: School and Community

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<th>Risks</th>
<th>Protective</th>
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<td>• Poor academic performance</td>
<td>• Enrollment in schools that address not only the academic needs of youth</td>
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<tr>
<td>• Enrollment in schools that are unsafe and fail to address the academic, social and emotional needs of children and youth</td>
<td>but also their social and emotional needs and learning</td>
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<td>• Low commitment to school</td>
<td>• Schools that provide a safe environment</td>
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<td>• Low educational aspirations</td>
<td>• A community and neighborhood that promote and foster healthy activities</td>
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<tr>
<td>• Poor motivation</td>
<td>for youth</td>
</tr>
<tr>
<td>• Living in an impoverished neighborhood</td>
<td></td>
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<tr>
<td>• Social disorganization in the community in which the youth lives</td>
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<td>• High crime neighborhoods</td>
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The Mindset of a Resilient Person

- Optimistic and hopeful.
- Feel special and appreciated in the eyes of others.
- Able to set realistic goals and expectations.
- View mistakes, hardships and obstacles as challenges.
- Solve problems and make decisions.
- Internal locus of control.
- Believe you can and set out to solve problems.
- Possess empathy.

The Road to Resilience: Building Islands of Competence

- Examine your assumptions about your choices and successes.
- Challenge self-defeating attributions.
- Help students find passionate interests and islands of competence and pursue them.
- Listen and learn first before advising. Sometimes students just want to be heard.
- Let them learn from their experiences.
- Be proactive in the face of true problems.
- Take a long term view.

Focus on Well Being!

- COMPETENCE in academic, social and vocational areas
- CONFIDENCE or a positive identity
- CONNECTIONS or healthy relations
- CHARACTER or positive values, integrity, and values
- CARING and compassion

((Lerner et al., 2000))
Five Strategies To Foster a Resilient Mindset

- Teach empathy by practicing empathy.
- Teach responsibility by encouraging contributions.
- Teach decision making and problem solving skills that foster self-discipline.
- Offer encouragement and positive feedback.
- Help children deal with mistakes.

Four Strategies to Reduce Teen Risk Taking Behavior

- Support positive behaviors of non-risk-taking individuals. Declines in risk-taking mean that the share of students taking no risks has increased. These youth need support and expanded opportunities to continue making responsible and healthy decisions as they mature.
- Target efforts to reduce specific risk behaviors toward multiple-risk students. Recent public health and policy efforts to reduce the prevalence of key risk behaviors, such as smoking or violence, cannot address these behaviors in isolation from other risk-taking.
- Encourage positive behaviors of risk-taking youth, such as time spent on extracurricular or faith-based activities. These behaviors connect students to adults and social institutions and offer opportunities to prevent risk-taking among some students or reduce risk-taking among others.
- Expand efforts to reach multiple-risk youth in nontraditional settings. Teen participation in settings such as the workplace, the criminal justice system, and faith-based institutions offers innovative opportunities for health services and education programs and the development of personal relationships with positive adult role models that can reduce risk-taking.

School Wide Programs
General Conclusions

- An early history of developing competence, along with supportive, consistent care, serves as a powerful and enduring buffer throughout childhood and increases probability of resilience.
- The pathways that lead to resilience are complex.
- There is a great need to map the interaction of personal and environmental factors.

General Conclusions

- Longitudinal research needs to be conducted on a large scale and gene–environment focused.
- We require a broader cross-cultural perspective.
- We need to know more about individual dispositions and temperament as well as sources of family support.
A Past Pandemic Example

- The pandemic influenza A H1N1 2009 virus (A/2009/H1N1) arrived in 2009, causing the first pandemic influenza of the new millennium, which affected over 214 countries and caused over 18,449 deaths.
- The pandemic influenza A H1N1 2009 virus (A/2009/H1N1) caused the first pandemic influenza of the new millennium, which has affected over 214 countries and caused over 18,449 deaths.
- In contrast COVID-19 has thus far caused 2.5 million deaths worldwide.
- A PubMed search using the keywords "pandemic influenza virus H1N1 2009" yielded over 2,500 publications, which markedly exceeded the number published on previous pandemics.
- Not a single study was located dealing with mental health issues!

A Call To Action

- NASP has to treat this pandemic as a long term public health issue, not as an event whose outcome is short-lived.
- NASP must create a work group to guide and coordinate research over the next five years to evaluate the impact of COVID-19 pandemic stressors on developing brains, so we can prevent or mitigate adverse mental health outcomes by offering support and/or proper treatment.
- NASP must advocate the need to follow all children, adolescents as well as their families in order to develop strategies that will mitigate, in the long term, the COVID-19 pandemic social, educational and mental health effects.

Only then will we begin to know what makes the young of our species survive and thrive despite life's adversities.

Emmy Werner
DEAR GOD, 
I wish I could be better in school. Can you help me.

Adopt a Learning to Ride a Bicycle Mindset!

Through intelligent and ethical educational and therapeutic practices, we can foster self-discipline, mental health, resilience and build educational proficiency in all children without stealing away their dignity and hope.

Goldstein's Axiom
May our philosophies keep pace with our technologies. May our compassion keep pace with our powers. And may love, not fear, be the engine of change.

Dan Brown

Questions?

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Tenacity in Children
The Power Of Resilience

TEDx