Over the past few years, a number of articles have appeared warning about the serious decline in student resilience. Not just what Robin Wilson calls an “epidemic of anguish,” but what Peter Gray describes as a remarkably limited ability to deal with even minor stresses. We have no hard numbers to go by yet; for that we’ll need to wait for the emergence of a “non-resilient disorder” in DSM-6! But in the meantime we are faced with the paradox that at a time when psychologists have made huge strides in our understanding of the nature of resilience and social scientists have made significant advances in our understanding of how to promote resilience, we are nonetheless seeing an increase in the number of students unable to cope with the challenges that they face at school.

Not surprisingly, there is a tendency here, as with all “behaviour” issues, to view this worrying trend through the lens of self-control: as if what we are seeing is some sort of “deficiency” or a “lack of grit,” with all the moral implications that this carries in our culture. This attitude underlies the suggestion that the problem is due to “helicopter parenting” or a lack of “character-building” experiences growing up: i.e., children need to be “toughened up” if they are going to be able to “tough it out.” But resilience is a much more complicated matter, so the first step is to understand the complexity that’s involved.

There’s no more illuminating place to start than with the distinction Michael Ungar draws between resiliency and resilience, where the former refers to internal processes or traits and the latter to what James J. Gibson referred to as “affordances:” resources that enable the student to cope with stress and adversity. In Ungar’s terms, a student must have the capacity to access the resources that sustain wellbeing, and we have to ensure that such resources are culturally-sensitive and relevant. But then, this presents us with an interesting variation on the question behind Emmy Werner’s original study of 698 at-risk infants in Hawaii. Werner found that two-thirds of these children developed self-destructive traits, yet one-third of them thrived. Werner’s question was: What were the “protective factors” that characterized these “resilient” children? Our new question is: Why is it that only some and not all students can negotiate for and navigate their way to these resources, and what can we do to help those who lack these “protection-seeking factors”?

Our own Executive Director of TMC Susan Hopkins did fascinating research on three major “types” of at-risk students, showing how there have to be different kinds of resources to match these different profiles. This sort of “ecological differentiation” marks a significant advance in our understanding of how we set about to develop appropriate resilience resources. But the same question will still arise in regards to those within each of these streams who are able to navigate their way to resilience and those who still struggle. What is it that the growing number of students with poor resilience need in order to be able to benefit from the resources that we put in place?
The Self-Reg View on: Resilience

by Dr. Stuart Shanker

Ungar has shown how a vital component is “connectedness.” Rates of suicidal ideation in kids that were abused drop dramatically when they report feeling connected to their school. But for students to experience this sort of connectedness they need to feel safe, and that involves more than just policies to promote a “safe school environment.” Ungar has shown that what is especially important is that they have a strong relationship with an adult or mentor who not only nurtures their sense of safety and security, but can help them capitalize on the system of supports that is in place. In other words, the need for social engagement is of paramount importance for resiliency; and as Ungar himself touched on in The Social Ecologies of Resilience, it is precisely here that self-regulation is so important.

The starting point for understanding this Self-Reg point is, yet again, to be found in the work of Steve Porges. In Porges’ mind, the real “founders” of the science of resilience were not Norm Garmezy or Emmy Werner but Claude Bernard and Walter Cannon. The reason is: we can’t talk about resilience without talking about homeostasis. The more effectively we can recover from the energy expended to deal with a stressor, the more primed we are to deal with the next stress, and the next, and the next...

Resilience, then, according to the Self-Reg view, rests on how well we can stabilize after a challenge, serious or otherwise. That’s what an “adaptive response” to stress or adversity consists of: the ability to get back to our optimal state of equilibrium. And resiliency starts early: quite literally at the moment of birth, if not well before. That story of the “rescuing hug” that so mesmerized the world two years ago is, in fact, a story about neonatal resilience: how preemie Kyrie Jackson was so much more physiologically resilient than her twin sister Brielle, and how, by putting her arm around Brielle, who was struggling to breathe, Kyrie helped her sister’s vital signs quickly normalize.

The nurse who proposed this version of “Kangaroo Care” was well aware of the beneficial effect of skin-to-skin contact on premature babies. This increasingly common practice in the NICU serves as a reminder that we need to look at resilience across all five of the “stress-domains” of Self-Reg, beginning with the biological. Indeed, what really stands out here is the importance of the biological domain when trying to understand why even the most innocuous of challenges can seem overwhelming: an experience that we are all familiar with.

One and the same challenge can seem overwhelming when we’re in a low-energy/high-tension state and not just surmountable, but even exhilarating when we’re in a high-energy/high-tension state. But then, the better we self-regulate, the better we recognize that our very feeling of helplessness is a signal that we need to rest and recover. And if a student’s feeling of helplessness is persistent, this is a very important sign, not simply that their stress-load is excessive, but that they are locked in just the sort of dysregulated stress system that I’ve been writing about in my past few blogs: i.e., a situation where they are no longer able to return to their optimal homeostatic range.

Such a student is functioning within a “sub-optimal” homeostatic range, characterized by a higher “set point.” That is, they have a revved-up “idling speed”: their resting heart-rate may be faster or stay elevated after dealing with any kind of stress. The result of this physiological load is that recovery is compromised and stress-reactivity is heightened. In the consequent state of chronic arousal, the student’s “limbic alarm” is kindled, sending him constantly into fight-or-flight, and, over time, leading to immobilization or “freeze.” When that happens, the prefrontal cortical systems needed for obtaining help are seriously dampened. The student may
be perfectly well aware of the resources that are right within his reach, yet still incapable of accessing them.

Porges talks about how the goal of every one of us in life is to be safe. But we are first and foremost mammals, which means that our goal is not to be “safe by ourselves” but rather, “safe with others.” In Porges’ famous line, “we didn’t evolve to be singletons!”: we need social engagement in order to feel safe. But what we might call the “paradox of resilience” is that it is only when we feel safe that we are able to utilize social engagement; when we don’t feel safe we resort to the “pre-social” strategies of fight-or-flight or freeze. So the very first thing we have to do in order to bolster the non-resilient student’s capacity for “connectedness” is help him turn off a kindled alarm.

We do this in all sorts of unconscious ways: through the prosody of our speech, our facial expressions, eye gaze, body language, gestures, even something as basic as proximity. But as Porges repeatedly reminds us, “neuroception” works both ways: our affect cues can signal threat or they can signal safety. The problem is, when we view a student’s behaviour through the “cognitive blinder” of self-control, our irritation or frustration “leaks” into our affect cues. Far from helping the student to “connect,” we inadvertently entrench the pre-social strategies that undermine resilience. But the deeper our thinking is grounded in Self-Reg, the more empathy takes over and our unconscious affect cues send messages of safety, enticing and enabling a student to return to social engagement.

There are, of course, all sorts of things that we can consciously do as well to help a student turn off a kindled alarm. For example, we can pay close attention to the environmental factors that add to students’ stress-load. We might remove the use of alarms to signal class transitions; reduce the presence of the low-frequency sounds like an HVAC, which a student experiencing limbic arousal finds exceptionally draining; reduce visual noise and strong smells; provide different kinds of seating and desk arrangements; making calming prosthetics and apparatuses available. In short, all those aspects of the Self-Reg that I talked about in Calm, Alert and Learning. But this isn't enough: we need to address both sides of Ungar's resiliency/resilience equation.

What is absolutely vital for all students, and not just supposedly “at-risk” students, is to learn how to read the internal signs that tell them when they are slipping out of their optimal homeostatic range: i.e., when they are plunging into low-energy/high-tension and need to rest and restore. It is by recognizing and responding in a positive—i.e., energizing and restorative-manner to these internal signals that they become capable of social engagement. Through social engagement the student can then learn, not just how to self-regulate, but how to negotiate and navigate.

Porges often talks about the importance of recruiting the new branch of the vagus nerve (the myelinated branch that occurred in the transition from reptiles to mammals) so as to enhance the restorative functions of the much older, unmyelinated vagus. In essence what he is talking about is how we can consciously influence—e.g., through breathing exercises, music, sports, drumming, handgames, … — the “sub-diaphragmatic” metabolic functions needed for recovery and repair. What is essential is that students learn when they need to engage in “R&R” activities: that is, they need to recognize the signals of when they are or are becoming over-stressed, know what the stressors are, how to reduce them, and what they themselves find truly restorative. In other words, they need to do Self-Reg.

The result of “turning off” or quieting a kindled alarm is that this augments the functioning of the prefrontal systems needed to inhibit the limbic system, and what’s more, the systems
needed for:

- hearing and processing language and information,
- planning and reappraising; mindreading,
- seeking out social interactions,
- for negotiating and navigating the system of supports that will help children develop the sense of identity, the locus of control and the grit that are critical for resilience.

Ungar has this great line that: “WE create resilience in people.” Nowhere could this be truer than in the case of schools doing Self-Reg. But the goal here is not to go down the road of creating “helicopter institutions,” it is quite the opposite. It is to help students—all students, and not just the ones thought to be at-risk—develop the skills that they need to understand and manage the stresses in their lives. What the “epidemic of anguish” is really telling us is that students need this kind of coaching more than ever because, for far too many of them, the stress-load has become more than they can bear.