Building Resiliency – Individual, Relational, Community

Building Positive View
• Deliberate Acts of Kindness (Seligmann, 2011)
  o The most powerful and simple way to momentarily increase your well-being daily is to do 1 deliberate act of kindness for someone else
• Cultivating Gratitude: 3 Good Things (Seligman, Steen, Park & Petersen, 2005)
  o For 1-2 weeks before bed, write down 3 good things that happened to you that day and what your role was in them. This gives you a mental health boost for 6-12 months!
    ▪ Example: The sunset was amazing with all its colors! My role was taking the time to stop and notice it.
• To offset our negative bias, which we all have as a survival mechanism, we must experience 3 good things for every 1 negative experience for our mood to “break even.” To cultivate greater positive emotion, we must have a 6:1 ratio; for every bad experience, we must have 6 positive experiences.
  o Be intentional about what you watch, listen to, and who you spend time with. (Fredrickson, 2009)
  o HEAL Model (Hardwiring Happiness, Hansen, 2013): Take in the good using this pneumonic HEAL: Have a positive experience, Enrich, Absorb it, and (optional) Link the positive experience in negative circumstances in order to soothe and even replace it

Building Self-Regulation
• Meditation & Mindfulness
  o Reduces rumination and stress (Chambers et al., 2008; Hoffman et al., 2010; Farb et al., 2010)
  o Boosts working memory and focus (Jha et al., 2010; Moore & Malinowski, 2009)
  o Lessens emotional reactivity and boosts cognitive flexibility (Ortner et al., 2007, Siegel, 2007)
  o Creates greater relationship satisfaction and increases happiness (Barnes et al., 2007, Waschs & Cordova, 2007)
  o Boosts the immune system (Davidson et al., 2003, Grossman, Neimann, Schmidt & Walach, 2004)
    ▪ Note: Prayer and crafts like beading, sewing, woodworking, etc. also put the brain in a meditative state
• Yoga & Exercise
  o Low intensity exercise or yoga decreases cortisol levels, the stress hormone (Hill et al., 2008)
  o Improves brain function and focus (Ratey & Hagerman, 2013)
  o Improves sleep (Singh, Clements, Fiatarone, 1997)
  o Increases dopamine levels and other “feel good” neurotransmitters, which improve mood (Fields, 2011)
• Adequate sleep
  o Improves willpower, focus, and memory (McGonigal, 2013)
  o Helps with mood regulation (Peterson & Benca, 2006)
  o Most adults should be getting between 7-9 hours of sleep a night; teens, 8-10 hours; preteen, 9-11 hours; 3-5 years, 10-13 hours; 1-2 years, 11-14 hours; and one-year-olds and younger, up to 17 hours a day (National Sleep Foundation)
• Healthy Eating:
  o Lowers inflammation (Willett & Skerrett, 2005)
  o Improves overall health and decreases risk of heart disease, stroke, cancer, obesity, and other ailments (Willett & Skerrett, 2005)
  o Helps with mood stabilization. The food we eat impacts our body’s ability to make serotonin, a neurotransmitter that stabilizes our mood; 80-90% of it is produced in the digestive tract! (Kim & Camilleri, 2000)

Building Self-Efficacy
• Set mini-goals (too small to fail): When we reach a goal, it increases our sense of self-efficacy, the belief that you can perform a task or manage a situation. It also gives our brain a dopamine hit.
  o Examples: 1 push-up a day, 1 mindful breath an hour, read 30 words a day, etc.
• For children: Parents/caregivers can nurture realistic self-efficacy in children by praising honestly, setting short-term goals, and helping children learn from setbacks. Having children complete meaningful tasks around the house or school can also help build self-efficacy by making them realize they have an important role to play in their communities.

Caring and Competent Relationships
• Competency in adults means we can regulate our emotions/ reactions and we have a good understanding of child development so that we do not mistake normal developmental behavior for disobedience or a child being “bad.”
Practicing and modeling self-regulation will go much further than telling kids to manage their emotions and expecting them to do it on their own.

- Emotions can transfer, so check your mood! Be intentional. What do we want to pass along to our children? (Bourg Carter, 2012)
- Positive touch can go a long way (Kuchinskas, 2009)
  - Holding a handshake or a hug for at least 6 seconds releases oxytocin, the neurochemical that helps us feel connected and loved, for both individuals.
- Our words are powerful! Shame is not the same as guilt. (Brown, 2013)
  - Shame says, “I am bad,”; guilt says, “I did something bad.”
    - **Shame** focuses on the individual. **Guilt** focuses on the behavior.
  - When children are shamed (i.e. “you are stupid,” “why can’t you do anything right,” “you are lazy,” etc.) they begin to believe something is wrong with them.
  - When children are talked to in a way that focuses on their behavior, (i.e. “it doesn’t seem you thought through that decision very well”; “it was not a good idea to stay up until 3am playing video games when you knew you had a big test to take today”; etc.) they are more likely to feel guilty instead of ashamed and will want to change their behavior.
  - **Shame is highly correlated with addiction and depression whereas guilt is inversely correlated.** What this means is the more shame an individual feels, the more likely they will be depressed or struggle with addiction. On the other hand, when someone feels guilty, they are less likely to feel depressed or develop addictive behavior.
  - Guilt can motivate us to change because guilt focuses on our behavior!
- Fixed vs. Growth mindset (Dweck, 2007)
  - Fixed mindset: I am good at something or I am not good at something
  - Growth mindset: I can get good at something if I work hard, have good strategies for improving, and ask for help
  - Fixed mindset focuses on the product (“that is a beautiful picture,” “you are very smart,” and “you are a great singer”)
  - Growth mindsets focuses on the process (“tell me about your picture and how you made decisions about what colors and shapes to use”; “you must have studied really hard to get that A”; and “you have a beautiful voice and I can tell you practice.”)
- Relational health is a better predictor of outcomes than ACEs! (Perry, 2016)
  - We all need people we can talk to. Having someone to “dose” with (share with) and then space to process more on our own is powerful
  - Someone with good relational health and a high ACE score will have fewer physical, mental, emotional, and social issues than someone with poor relational health and an ACE score of 0

**Community, Culture, and Spirituality:** (ACE Interface, 2013)

- Fostering thriving communities is about empowerment and includes:
  - Expanding leadership: Go beyond the elected officials and department heads. Tap into the leadership of those most impacted by ACEs to get a better idea of how to make meaningful change
  - Coming together: Bring the community together often to build relationships and share stories
  - Creating shared meaning: Having a common language and understanding of ACEs, trauma, resiliency, and previously effective strategies from the community, will go a long way in generating powerful “next steps.”
  - Working towards meaningful results: Everyone in the community has a role in reducing ACES in the next generation, and supporting adults and children with high ACEs in the community. Figure out the role of the school, the clinic, the after-school programs, the housing department, etc.
- Cultural activities, clubs, organizations, afterschool programs, churches and spiritual practices, social supports, and safety nets are all important factors in building a healthy community
- Help that Helps: Research about Washington State communities has shown that feeling supported and hopeful, and having at least 2 people to call on for concrete help can have a powerful impact
  - Feeling supported dramatically improves mental and physical health, ability to work, etc.
  - Having at least 2 people to call on for concrete support improves diabetes outcomes, decreases depressive symptoms, and improves mental illness symptoms