

To Appreciate Acts of Courage in Our Children

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As a psychologist who has written extensively about the concept of *resilience* during the past 30 years, I have been impressed by the increasing use of that term in our daily conversations and in the media. *Resilience* has been applied to describe an individual, a small group, or even an entire nation in response to certain events. Examples run the gamut from the reaction of people to horrifying, devastating situations such as 9/11 or Hurricane Katrina, to individuals who cope with dignity and perseverance when faced with life-threatening illnesses, to children who have suffered abuse but choose a path filled with hope, and to a sports team that has overcome adversity to win a championship. The surge in prominence of this concept is apparent if one “googles” the word *resilient*. Thousands upon thousands of citations appear, many of which contain accounts of people who have overcome significant obstacles in their life journeys.

Paralleling the diversity of examples that have been designated under the umbrella of resilience are the different definitions of the concept. As I have noted in previous writings and seminars, the research conducted to study resilience has focused primarily on youngsters who have coped successfully with trauma and hardship. However, several researchers and clinicians have raised important questions, such as, “Does a child have to face adversity to be considered resilient?” or “Is resilience reflected in the ability to bounce back from adversity or is it a product of adversity?”

My colleague Sam Goldstein and I have advocated that the concept of resilience be broadened to apply to every child and not restricted to those who have experienced significant adversity. We argue that all children have faced or will face challenges and stress in the course of their development and even those who at one point would not be classified as “at-risk” may suddenly find themselves placed in such a category given unforeseen events that come their way. The model we propose is based on the premise that resilience involves the possession of particular attitudes and skills, what we label a *resilient mindset*. It is imperative that parents and other caregivers constantly reinforce this mindset regardless of the amount of adversity confronting the child.

Similar to our position, other mental health specialists have also expanded the definition or scope of resilience to go beyond bouncing back from adversity. Karen

Reivich and Andrew Shatte contend in their book *The Resilience Factor* that “everyone needs resilience,” asserting, “Resilience is the capacity to respond in healthy and productive ways when faced with adversity and trauma; it is essential for managing the daily stress of life. But we have come to realize that the same skills of resilience are important to broadening and enriching one’s life as they are to recovering from setbacks.”

A Mother’s Recognition of Courage

In a number of workshops as well as in some of my writings, I have highlighted another concept that is closely aligned with resilience, namely *courage*. One of my favorite examples is that of Lisa, a 10-year-old child I saw in therapy. I will never forget one of the first sessions I had with Lisa and her mother, Jan, a session that dramatically and poignantly captured themes that are such an integral part of my work, namely, hope, courage, and resilience.

Lisa was burdened with several hardships, including struggles with learning, poor peer relationships, and a growth hormone deficiency. Because of this last problem, she appeared several years younger than her actual age and required growth hormone shots five times a week (eventually they were administered each day of the week).

In a beginning session that included both Lisa and Jan I attempted to apply the strength-based approach to which I subscribe. I asked Lisa what she enjoyed doing and what she perceived as her strengths or what I often refer to as “islands of competence.” I believe strongly as a therapist that we cannot and should not ignore the vulnerabilities or struggles of children, but to truly foster their lifelong resilience we must strive to identify and nurture their strengths.

When asked to define her islands of competence, Lisa emphatically answered, “Nothing.”

I asked her again and received the same answer. I was ready to say, “Sometimes we don’t know what our strengths are, but it’s something we can try and figure out.” Before I could express this thought, Lisa, appearing somewhat exasperated, replied, “Dr. Brooks, do you know what it feels like every day in school to be chosen last when the other kids choose up teams? I don’t even know why the other team cheers when they beat my team, look who they’ve beaten.”

Her words laid bare the pain of feeling that she possessed few, if any, strengths and was an outcast among her peers. Not surprisingly, both Lisa and Jan looked very sad about these expressed beliefs. As I struggled with what I might say that would be helpful, Lisa began to smile. I wondered to myself, “Why is she smiling?”

Then Lisa’s smile broadened and with obvious delight she said, “I never really thought about your question before. I just thought about something I do better than anyone in the whole school.”

This comment was intriguing. In just a few seconds Lisa had made the leap from saying she felt worthless to voicing the belief that there was something she did better than anyone else in her school.

I inquired, “What do you think you do better than anyone else in the school?”

With sparkling eyes Lisa answered, “I take shots better than anyone in the school.”

Jan’s face filled with joy. She looked at Lisa and then at me and conveyed an observation that was so simple and yet incredibly powerful and moving.

“Dr. Brooks, you will find as you work with my daughter that she is one of the most courageous children you will ever work with. She has gone through so much, but has not lost hope.”

Lisa warmly clutched her mother’s arm, clearly demonstrating an appreciation for what her mother had said.

Jan’s use of the word *courageous* had a profound impact on me. I realized more than I ever had before the *courage* that many children display day in and day out as they encounter challenges in a variety of situations including those that transpire in school, in their sports activities, or even at birthday parties. I also thought of many of my adult patients who learned to confront their own struggles with courage, dignity, and determination. Courage abounded in their actions.

I worked and kept in touch with Lisa and Jan for several years. At the beginning of my final therapy session with Lisa, she exclaimed, “Guess what, I’m off my growth hormone shots. Do you know how tall I got?”

“No, how tall?”

“Four feet, 11 inches. My goal was five feet.”

I was ready to reply, “Well, that’s only one inch.” However, before I could utter a word Lisa said in a comforting voice, “Don’t worry, it’s only an inch.”

Lisa and I reminisced about our initial sessions together, reflecting upon the problems she faced that brought her to therapy. We discussed her impressive progress from a sad child who had difficulty in school, with peers, and with self-worth to a teenager who had a number of friends, excellent grades, and renewed confidence (she even joined the drama club so that she could perform in plays).

As we talked about the changes that had taken place since we first met, Lisa expressed a belief that any adult would love to hear from a child since it vividly highlighted the impressive positive impact we can have on children. While Lisa’s comment was directed at me, it certainly included the influence of her parents and other supportive caregivers in her life.

“We really showed them, Dr. Brooks. We really showed them. Thank you.” This was said with warmth and appreciation. It was also accompanied with a hug. It was what I refer to as a “magical moment” in our lives.

Impressive Courage on a Seemingly Small Scale

People are very moved when I recount Lisa’s story in my presentations, especially when I mention Jan’s use of the word *courageous*. Just as the broader definition Sam Goldstein and I have adopted for *resilience* has triggered people to re-think their view of this concept, my description of Jan’s application of the word *courageous* has prompted an examination of what behaviors fall under *courage*.

For example, a few people came up to speak with me at the conclusion of one of my workshops. A woman said with tears in her eyes, “I have a daughter with special needs. Lisa reminds me of her except that my daughter doesn’t have a growth hormone problem. My daughter constantly struggles with learning but doesn’t give up. She’s often bullied by other kids. She knows she’s not very good in sports, but she insists upon playing. Before I heard what Jan said I would never have used the word *courageous* to describe my daughter, but I realize that’s what she is, *courageous*. My mindset has certainly shifted about her.”

A man listening to this woman’s comments observed, “When I think of courage I think of members of the military serving in war zones or policemen and women or

firemen and women facing danger each day. Hearing about Lisa gives me a new perspective about my son who's fifteen. I'm often on his back about things he forgets to do, about his not so great grades. Too often I focus on what seems to be his lack of effort. But I haven't given him enough credit for things that I realize take a lot of courage."

I asked, "Like what?"

"He tried out for his school play and even landed a singing role. I'm not certain I could have done that at his age. I'm not sure I could even get up on stage now. My son did a really nice job in the play. I complimented him on his performance, but he probably deserved a bigger compliment than I gave."

The Courage to Risk Failure

Jan's comment as well as those offered by these other parents highlights an important issue. I believe the definition of *courage* should not be restricted to those people who regularly risk their lives in the service of others or battle with dignity a life-threatening illness or perform/compete in a sports event in front of hundreds or even thousands. Certainly the term *courage* applies to all of these individuals. However, in our attempts to raise resilient children I think it is beneficial that we recognize that courage comes in various forms and packages. It appears when a child has the courage to take appropriate and realistic risks.

I know that it is not easy to place oneself in a situation that may result in failure, but one may ask if such situations can really be avoided without consequence. I have conducted therapy with patients in their 40s and 50s who with sadness bemoan the fact that they have spent their entire lives avoiding possible failure. They awaken one day with regret as they wonder, "What has my life been about?" Borrowing a term that typically has been used in the investment or financial world, too many individuals conduct their lives guided by *risk aversion*. They may experience temporary relief as they avoid challenging situations, but at some point they will realize that there is more emotional pain in fleeing from a difficult task than in attempting and failing at the task.

Mark Twain captured this situation when he wrote, "Twenty years from now you will be more disappointed by the things that you didn't do than by the ones you did do."

Author Anais Nin expressed a similar sentiment. “And the day came when the risk it took to remain tight insides the bud was more painful than the risk it took to blossom.”

If we want our children to blossom, to demonstrate perseverance and resilience, we must recognize and acknowledge the small acts of courage they display each and every day just as Jan did with Lisa. We must refrain from negative comments when their efforts fall short or they do not meet our expectations. Instead, we must encourage them to take even small actions that may result in failure, but if that be the case it will help them to appreciate that setbacks are experiences from which to learn rather than retreat. In almost all of my presentations I ask parents to consider the ways in which their own reactions to possible failure serve either to promote or discourage risk-taking in their children. I remind parents that they are significant models for their children and they must ask what behaviors they desire to model.

Concluding Thoughts from Two Poets

In ending, I should like to quote two well-known poets. Ralph Waldo Emerson wrote, “Do not go where the path may lead, go instead where there is no path and leave a trail,” while T.S. Eliot observed, “Only those who will risk going too far can possibly find out how far one can go.”

As Lisa expressed to me about her journey of courage and resilience, “We really showed them, Dr. Brooks. We really showed them. Thank you.” Isn’t this the attitude we want to cultivate in all of our children as they encounter the inevitable challenges that are posed in our ever changing, ever stressful world?

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