



# Resilience and Conscious Discipline

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## Introduction

In their daily lives, many children encounter family, home, or community-based adverse circumstances or events such as abuse, chronic neglect, homelessness, violence, poverty, and caregiver mental illness or substance abuse (Zolkoski & Bullock, 2012). In response to such adversities, children may experience stress. Stress can negatively affect a child's development, beginning in utero, and the effects of stress can accumulate as the child grows older (Evans, Li, & Whipple, 2013). That said, children respond differently to the adversities they face; although some struggle to adapt and cope, other children flourish. This ability to adapt positively, despite the odds, is often referred to as *resilience*.

This paper explains the conditions that put children at risk for negative outcomes, describes factors that can reduce risk and buffer the effects of stressors, reviews how social and emotional learning (SEL) curricula can foster resilience, and introduces the Conscious Discipline (CD) curriculum. CD is a comprehensive, trauma-informed program, based in neuroscience, that integrates SEL with discipline to create an optimal learning environment and climate for children and adults in both school and home settings.<sup>1</sup>

## How adversity and relationships affect the developing child

The human brain undergoes its most rapid and dramatic changes in the first few years of life, and is continuously shaped by these early childhood experiences. Early exposure to chronic stress in the absence of supportive relationships can create long-term changes in the areas of the brain that support behavioral control and emotional health (Perry, 2002). Following a stressful event, a child's body handles the perceived threat by activating the stress response system, a biological 'emergency response' that involves the release of stress hormones that can cause increased heart rate, muscle tension, trembling, and other (hopefully temporary) symptoms (Harvard Health Publishing, 2018; Fink, 2016). However, when a child's stress response system is activated for a long time, that response becomes *toxic* (National Scientific Council on the Developing Child, 2014). With a toxic response, those same physiological changes that normally prepare and protect the body instead become harmful, wearing down

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<sup>1</sup> For an overview on the topic of childhood adversity and trauma, see <https://www.childtrends.org/adverse-childhood-experiences-different-than-child-trauma-critical-to-understand-why>

the body's major systems (i.e., neurological, cardiovascular, immune, and metabolic) (National Scientific Council on the Developing Child, 2015).

For children who experience adversity, including chronic stress and hardships, receiving support from adults and learning to cope with these challenges is essential for healthy development (Center on the Developing Child at Harvard University, 2007). The presence or absence in children's lives of adults with whom they have supportive relationships can determine whether stress associated with adverse experiences is damaging to their development. Social interactions with parents, caregivers, and teachers particularly influence children's development of executive function skills (e.g., planning and organization, focus and attention, working memory, emotional regulation). Children exposed to adversity frequently experience delays in developing these skills (Ackerman & Friedman-Krauss, 2017; Raver, Blair, Willoughby, & Family Life Project Key Investigators, 2013). Stress can substantially reduce children's abilities to regulate emotions and positively adapt to challenging situations (Center on the Developing Child at Harvard University, 2011). These delays can affect children's ability to respond in healthy ways if they experience future adversities, thus creating a continuous cycle of maladaptation.

Children who experience long-term stress are also more likely to suffer from mental health problems (e.g., depression, anxiety, substance use) and physical health problems (e.g., diabetes, heart disease) in adulthood (National Scientific Council on the Developing Child, 2015). Despite the potential for many negative outcomes, some children who have grown up experiencing significant disadvantage and ongoing adversity continue to develop remarkably well and even thrive despite their challenges (Luthar, Cicchetti, & Becker, 2000; Center on the Developing Child at Harvard University, n.d.2). Researchers have examined this phenomenon, known as *resilience*, and the factors that contribute to it (Wright, Masten, & Narayan, 2012).

### **What is resilience?**

Resilience refers to the *process* of positive adaptation in the context of stressful and adverse conditions (Luthar, 2006; Masten & Barnes, 2018; Zolkoski, & Bullock, 2012). The Center on the Developing Child at Harvard University (n.d.1) uses a balance scale to illustrate this process of positive adaptation. For instance, imagine one side of the scale weighted with stressful events (e.g., trauma, violence, divorce) that may tip the scale in the direction of negative outcomes, while the other side is weighted with protective factors and coping mechanisms (i.e., supportive relationships with adults, high self-esteem, emotion regulation skills) working to offset the effects of these stressful events. For many children, the scale is weighted toward negative outcomes, but the more protective factors the children develop along the way, the more likely the scale will tip them in the direction of positive adaptation.

An individual's personality traits, intelligence, and reasoning skills can support adaptive processes, but it is important to note that resilience itself is not a trait (Masten & Barnes, 2018). There is no specific "resilience gene," and it is not "individual grit" or strength of

character that sets some individuals apart from the rest (National Scientific Council on the Developing Child, 2015). According to Masten (2001), resilience is *not* the result of unique and distinct human qualities; rather, it develops from common “human resources” found in the “minds, brains and bodies of children” (Masten, 2001, p. 235).

### **The role of protective factors in fostering resilience**

Children who function well in the face of adversity do so with the help of positive social interactions, caring relationships, and exposure to supportive interventions (Center on the Developing Child at Harvard University, 2011; Hurlington, 2010; Masten & Barnes, 2018; Perry, 2002). We refer to the positive influences that foster resilience as *protective factors*. Protective factors are conditions that decrease or eliminate risk, thereby increasing the health and well-being of children and families (Children’s Bureau, n.d.). Numerous studies have identified protective factors that help children adapt positively to adverse life events (Glantz & Johnson, 2002; Luthar, 2006; Masten & Barnes, 2018). These factors include family, health, educational, and other community systems (e.g., faith-based or food security supports) that are embedded in children’s lives and can boost children’s ability to cope and be protected from harmful stressors (Masten & Barnes, 2018).

Protective factors can exist at the levels of the individual, the family, and the broader environment (Bandura, 1994; Bronfenbrenner & Morris, 2006; Masten, 2006; Masten & Barnes, 2018; Moore, 2016; Werner, 1995). *Individual-level* protective factors include self-efficacy (i.e., an individual’s belief in their ability to affect the events of their life); strong communication skills; and executive function, self-regulation, and emotion management skills. *Family-level* protective factors include emotionally secure connections and supportive relationships with caring family members; a stable family environment with structure, routines, and traditions or rituals; and effective parenting skills. Notably, Masten’s research (2001) suggests that effective parenting can reduce the negative outcomes associated with adverse experiences and increase the possibility of positive adaptation. *Environmental-level* protective factors include supportive, well-functioning schools and early learning programs; teachers, coaches, and mentors who serve as positive role models; connections to positive social groups (e.g., clubs, teams, religious organizations); and access to community support systems (e.g., emergency services, food pantries).

In healthy families and communities, protective factors occur in the context of warm relationships with primary caregivers, stable home environments, and strong schools, but they can also be experienced through interventions and supports provided in program or school settings (Masten, Herbers, Cutuli, & Laffavor, 2018). Notably, well-functioning, growth-promoting schools and early learning programs can serve as crucial support systems for children seeking refuge from challenging environments and circumstances.

## The role of social and emotional learning in promoting resilience and student success

Schools and early learning programs promote healthy child development by fostering not only children's intellectual growth but also their social and emotional knowledge and skills (Durlak, Weissberg, Dymnicki, Taylor, & Schellinger, 2011; O'Connor & McCartney, 2007). The Collaborative for Academic, Social, and Emotional Learning (CASEL) defines SEL as "the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions." (CASEL, n.d.2). CASEL recognizes five core, school-supported social-emotional competencies as fundamental to the well-being of children: (1) self-awareness, (2) social awareness, (3) self-management, (4) relationship skills, and (5) responsible decision making (CASEL, n.d.1). These competencies align closely with skills identified as key individual-level protective factors that foster resilience. In well-functioning schools and early learning programs, children develop new relationships with adults outside their family, experience dynamics related to group learning, and begin to make social comparisons with one another through peer-to-peer interactions. These experiences help children expand their social knowledge, learn and practice social and emotional skills, and develop additional key protective factors such as self-awareness and self-efficacy regarding their own capabilities (Bandura 1994; Cleary, 2008; Zimmerman, 2001).

Children exposed to trauma and adversity may have difficulty engaging in the classroom. While some signs of stress may be very noticeable (e.g., acting out or extreme emotionality), others are more subtle (e.g., withdrawal from activities or difficulty with learning tasks) (National Child Traumatic Stress Network, 2008). SEL programs are interventions and curricula specifically designed to help children navigate social situations, deal with daily stresses, and learn how to respond constructively to challenges. SEL curricula provide a pathway for teachers and schools to help foster resilience in young children. Schools implementing SEL programs provide children with opportunities to understand, develop, practice, and apply the social, emotional, and relational competencies necessary to be successful in life (Oberle, Domitrovich, Meyers, & Weissberg, 2016). Specifically, SEL programs can help children develop the executive function and self-regulation skills they can apply to both social and academic experiences. In fact, interventions that promote social competencies and executive function skills have been associated with academic success (Diamond, 2012; Zelazo & Carlson, 2012).

School-based SEL programs are more likely to promote resilience and overall well-being when they are offered as a universal intervention involving all children, rather than as a fragmented, add-on approach (Cefai & Cavioni, 2014). A systemic, school-wide approach to SEL programming can also improve implementation quality and support program sustainability. Schools that prioritize children's social-emotional competence and allocate the appropriate

funding and resources necessary for high-quality SEL programming are more likely to implement their SEL programs successfully (Oberle, et al., 2016).

A school-wide, systemic approach to SEL programming encourages collaboration among all staff members, peer mentoring (as age appropriate), and parental involvement (Cefai & Cavioni, 2014). Dusenbury and Weissberg (2017) found that partnering and engaging with families also enhances SEL programs. To achieve this, schools can support families by sharing the SEL practices and language so families can use them at home. In turn, families can support the school's SEL efforts by sharing their home practices, asking children about their school experiences, and using ideas shared by the school at home (Oberle et al., 2016). Promoting consistency and continuity in these ways can create a sense of belonging, connection, and enhanced well-being for both students and their families.

### **How Conscious Discipline promotes resilience**

Since young children have not yet fully developed the capacity to process intense emotions such as anger or fear, caregivers play an important role in shaping children's self-regulation abilities (Denham, 2007). Through a process called "co-regulation," adults help children manage their thoughts, emotions, and behaviors and promote their self-efficacy, all of which contribute to children's ability to adapt to adverse experiences (Rosanbalm & Murray, 2017). For co-regulation to be effective, adults must routinely manage their own emotions and model healthy self-regulation abilities. They must also be willing to connect with children and be a source of trust and comfort during times of distress.

Conscious Discipline (CD) is an SEL curriculum that promotes the ability of all children to demonstrate resiliency by enhancing caregiver support and promoting both caregivers' and children's self-regulation. While the curriculum was initially developed and used in early childhood and elementary school classroom environments, it has been adapted for use across a broad age span—from infants and toddlers all the way to middle school—as well as for use by parents and other caregivers outside of the school setting (e.g., home-based providers). CD focuses primarily on transforming how adults respond to stress and developing strong adult-child relationships; in turn, these relationships can positively influence how children react to adverse experiences.

Adults create the environments in which children learn and grow. These environments reflect adults' overall mindset and beliefs about children, including how adults respond to different behaviors and administer discipline. Jennings (2015) found that early childhood teachers' self-reports of well-being, mindfulness, and self-compassion were associated with levels of emotional and instructional support provided to students. To that end, CD intentionally teaches adults about the importance of their own mental health and well-being, which can positively influence how they treat the children in their care.

The CD curriculum also provides adults with practical self-regulation strategies to help them handle frustration and prevent emotionally driven reactions, such as hitting or yelling at children. Adults who practice healthy emotional regulation are better prepared to approach disciplining children in a non-threatening manner, respond calmly to challenging situations, and use these experiences as teachable moments. Children can use the same self-regulation strategies modeled by adults to deal with their physiological and emotional responses to traumatic and stressful events. For example, slow breathing strategies like those taught by CD activate the parasympathetic nervous system, which is responsible for calming the body. Kim and colleagues (2013) found that the use of such strategies was linked to decreased symptoms of anxiety and post-traumatic stress disorder (PTSD).

### Conscious Discipline core principles

The CD curriculum framework is based on neuroscience research that supports the importance of helping individuals navigate three brain states: survival, emotional, and executive (Conscious Discipline, n.d.; Institute of Medicine, 2000; Schore, 2015; Siegel, 2015). CD helps both adults and children move from the lower-level survival state—which leads individuals to react instinctively—toward the higher-level executive state that helps them regulate their emotions and manage their behaviors effectively. CD seeks to accomplish this goal by shifting away from a culture of reward and punishment toward one that emphasizes the principles of *safety*, *connection*, and *problem-solving*. These three core principles are woven throughout all components of the curriculum. CD’s method is framed around seven “powers”<sup>2</sup> that describe the optimal state of awareness and emotional intelligence on the part of the adult. These seven powers are paired with seven complementary practical skills<sup>3</sup> and an array of concrete structures, strategies, and tools (referred to as “tools” going forward). Together, these powers, skills, and tools help adults override their own reactive tendencies and become more conscious, present, attuned, and responsive to the needs of children and others. With this knowledge and these skills, adults are better equipped to form strong, positive relationships with children and help them develop the executive function skills necessary to buffer the negative effects of stress and trauma in their lives. The following sections provide an overview of these core principles and some examples of practical applications.<sup>4</sup>

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<sup>2</sup> The seven core CD powers are: Perception, Unity, Attention, Free Will, Acceptance, Love, and Intention. For more information, see <https://consciousdiscipline.com/methodology/seven-powers/>.

<sup>3</sup> The seven core CD skills are: Composure, Assertiveness, Encouragement, Choices, Empathy, Positive Intent, and Consequences. For more information, see <https://consciousdiscipline.com/methodology/seven-skills/>.

<sup>4</sup> Some strategies and examples that may seem most appropriate for preschool or early elementary school age children can be adapted for use with younger or older children.

### Survival state: Safety

Feeling safe in one's environment is foundational to all other life functions. By teaching adults a key phrase to use with children ("My job is to keep it safe; your job is to *help* keep it safe."), CD promotes safety as the first and greatest priority. In addition to helping adults serve as "safe-keepers" and healthy emotion regulation role models, CD offers various structures and supports to help children develop a sense of safety and practice steps to self-regulation. For example, the CD Safe Place offers children a physical space (featuring comforting dolls, books, and images) where they can calm themselves when they are upset. Unlike a time-out, which is punishment in the form of isolation, the Safe Place is part of the classroom. An adult or peer can accompany a child to the Safe Place to facilitate CD's five-step process of recovery (I am, I calm, I feel, I choose, and I solve).<sup>5</sup> In time, the child may begin to visit this space independently.

CD also encourages the establishment of routines, especially across multiple settings (e.g., home and school). Routines support emotional safety by offering consistency and predictability to children who may otherwise be experiencing chaotic lives. This kind of structured and stable environment facilitates children's understanding of what to expect, as well as what is expected of them, in that setting (Centers for Disease Control and Prevention, 2017). Additionally, visual displays (i.e., picture guides) activate areas of the brain that are related to self-regulation development, thereby helping children to recall and follow routines (Siegel, 2010). Children who feel safe can successfully explore and interact with others, and begin to build trusting relationships with adults who are willing to guide and care for them. This kind of support promotes resilience and serves as a protective factor, healing and empowering children who have been exposed to stressful or traumatic events.

### Emotional state: Connection

As children increasingly trust and connect with adults, they move away from the survival state toward the emotional state. They become more responsive to guidance from adults, willing to share their feelings and experiences, and able to learn new, constructive ways to deal with their feelings, rather than resisting help or continuing to misbehave. Expressing empathy is one way adults can build this connection with children, gain their trust, and support them during challenging times. In a research study by Stern et al (2015), parental expression of empathy was associated with protective factors such as children's attachment security, emotional openness, and perceptions of parental warmth. When adults apply the skill of

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<sup>5</sup> According to CD: "The 'I Am' step involves the initial upset when the child becomes the emotion. "I am angry!" ... The 'I Calm' step requires active calming, featuring the four main breathing techniques, access to a Friends and Family book, and other calming activities. The 'I Feel' step includes identifying the feeling with the *Feeling Buddies* or a *Feeling chart*. The 'I Choose' step requires the child to consciously choose additional calming activities utilizing the *Brain Smart Choice Cube*, *I Choose Self-Control Board* and/or class-made choice boards. The 'I Solve' step involves the child solving the original problem before returning to work or play, often through the use of the *Conflict Resolution Time Machine*."

Retrieved from: <https://consciousdiscipline.com/free-resources/shubert/principal-clinic/safe-place/>

empathy, they reflect and validate how children are feeling in the moment, so they can guide them through the process of dealing with their emotions, thereby supporting their resilience.

The CD strategy “D.N.A.”—Describe what you see, Name the feelings, and Acknowledge the desire—helps adults accomplish this goal; using this strategy, adults identify children’s emotions and the source of conflict for them, and “download calm”<sup>6</sup> during times of upset. CD also seeks to strengthen the bonds between caregivers and children. CD’s *I Love You Rituals* are interactive songs and fingerplays designed to promote one-on-one connections via eye contact and coordinated gentle touches. Such warm, sensitive interactions provide important physical contact and convey adults’ affection and care for young children. Positive touch has biological benefits, including calming children’s arousal systems and strengthening the adult-child connection, which can serve as protective factors (Bai, Repetti, & Sperling, 2016; Brauer, Xiao, Poulain, Friederici, & Schirmer, 2016; Duhn, 2010).

Strong adult-child connections enhance individual-level protective factors by positively shaping children’s perceptions of themselves and providing children with the confidence and preparation to face challenges that arise. For example, CD classroom practices designed to enhance connection and provide a sense of unity and belonging include special rituals like wishing students well when they are absent from school (and noting those absent children on a “wish well board” classroom display). These practices serve to remind children that they are noticed, loved, and cared for, even when they are not physically present. Similarly, through intentional, positive encouragement, adults notice children’s actions or words; these acknowledgements describe (vs. praise) what the child did, thus contributing to their self-efficacy and internal motivation to succeed in the future. CD recognizes children’s need for freedom and control over some aspects of their lives, so when adults face children’s challenging behaviors, CD promotes the practice of offering two positive, viable choices. For example, an adult may offer an upset child the choice of finding a quiet space to calm down alone or sitting on an adult’s lap; similarly, for a child who grabbed a toy from another child, the adult can offer the choice of a different toy or another activity, instead of simply admonishing the child. These kinds of opportunities help support adult-child connection, build child self-efficacy, and support children’s ability to demonstrate resilience as they become more confident and better able to overcome hardships (National Scientific Council on the Developing Child, 2015).

## **Executive state: Problem-solving**

Children who feel safe and connected are better able to access the higher-level, executive state brain processes responsible for managing emotions and behaviors and solving problems. These skills are not present at birth; they develop over time and are shaped by early experiences and social interactions (Center on the Developing Child at Harvard University,

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<sup>6</sup> For more information, see <https://consciousdiscipline.com/free-resources/book-portal/chapter-4-composure/#5downloadingcalm>.

2011). Drawing on the various powers, skills, and tools that make up the CD curriculum, adults can model and guide children through the multi-step process of problem solving, which includes pausing to notice or reflect, evaluating the situation, taking responsibility for what happened, and planning appropriate actions. These steps all engage the higher-level executive brain state.

Specifically, CD teaches adults to apply three types of consequences (natural, logical, and problem solving) to help children recognize, accept, and learn from their own actions throughout the day. Everyday interpersonal conflicts (e.g., grabbing, pushing, name calling) are transformed into teachable moments in the context of daily living, as opposed to prescriptive lessons without meaning. *Natural* consequences, such as when a child trips on a shoelace they did not tie, help motivate connected children<sup>7</sup> to learn new skills. Adults can also apply *logical* consequences to motivate connected children to use the socially acceptable skills they have already learned (e.g., if a child grabs an item from someone, the adult reminds the child to ask for what they want, warns that a repeat offense will result in being moved to a seat away from the group, and follows through if the child grabs again). Lastly, *problem solving* is a consequence that teaches disconnected children the skills they lack; problem solving encourages higher-level thinking to brainstorm solutions to issues at hand. Such problem-solving opportunities—in the context of a safe and connected environment—influence whether children will choose to change the behavior and do it differently (and better) in the future. In any case, the emphasis on taking responsibility for one’s choices and learning from mistakes or mishaps (referred to in CD as an “oops!”), strengthens the self-efficacy of adults and children alike.

The CD curriculum gives children a problem-solving toolbox of practical skills and strategies they can apply when they encounter difficult situations. For example, children learn a breathing strategy that uses the simple acronym “S.T.A.R.” (Smile, Take a deep breath, And, Relax) and has an accompanying visual to guide users in keeping their composure during difficult and frustrating times. CD also teaches children when to be assertive and use their “big voice” to set clear, respectful boundaries. Children learn to focus on and express what they *do* want from others (e.g., “Please say ‘excuse me’ to get through.”) instead of communicating unclear signals of what they *do not* want (e.g., “Stop pushing!”). The CD Time Machine is a tool or structure that aids children with conflict resolution by taking them through the steps of talking through a problem with a peer, sharing their feelings, and working together toward a solution. Together, the various CD powers, skills, and tools not only promote individual growth, but also create positive and supportive learning environments that foster qualities of resilient functioning. These include a sense of belonging, freedom to make and learn from social and behavioral mistakes, and a focus on each individual’s value and abilities.

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<sup>7</sup> “Connected children” are children who have secure connections with adults who teach and care for them. That connection helps elicit or facilitate positive behavior.

## Conclusion

Childhood adversity can negatively affect children’s social and emotional development and, in turn, other indicators of well-being such as academic success. SEL programs can help build protective factors (e.g., self-regulation skills and strong relationships between students and staff) and teach children acceptable coping strategies (e.g., how to manage strong emotions or approach problem solving). These factors and skills can help buffer children from the negative effects of serious challenges in their lives. CD is a healthy school and family model focused on creating supportive environments that foster resilient patterns of functioning in the face of adversity. Adults—including parents and school staff—play an important role in promoting physically and emotionally safe environments for children to learn and grow. CD also helps adults learn to focus on their own reaction to stressors and approach to discipline, shifting their view of children’s emotional and behavioral challenges to a more positive mindset. This shift—in the context of positive relationships and a supportive school community—enhances children’s ability to demonstrate resilience and builds a strong foundation for healthy individual development.

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