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Emotional Resilience in Children and Adolescence: Implications for Rational-Emotive Behavior Therapy

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That before coming here, everything went wrong. I used to blame it on myself. I used to say I was no good at anything and why don't I just kill myself. I didn't know the meaning of Rational or ERational thoughts-they have slowly changed the way I think, so I don't get upset as I used to. I used to think of my bad points but know I also think of my good points, so now I don't go off my rocker. I am lucky to be able to think Rational thoughts.

(words of a 14-year-old boy referred for to a REE-based group counseling for depression)

The above anecdotal description of an adolescent who attended 12 weekly rational-emotive education (REE) oriented group counseling sessions attests to the positive effects of rational-emotive behavior therapy (REBT) methods in bringing about emotional self-management in youth (e.g., Bernard and Keefauver, 1979). Since the 1970s, I (Bernard) have witnessed in my clinical practice the extraordinary empowerment that Ellis' ABC model, disputation and rational beliefs have on young people's ability to modify their intense negative emotions in response to adverse events. That being said, recent non-REBT theory and research into children's developing capacity for emotional regulation (termed in this chapter "emotional resilience") leads to the identification of new cognitive and behavioral emotional resilience skills (e.g., Brenner and Salovey, 1997) that can bring about emotional regulation and which, when incorporated within REBT, can enhance the combined effects of these new skills and REBT.

A reading of the literature on rational-emotive behavior therapy (REBT) and its applications with children and adolescents (e.g., Bernard and Joyce, 1984; Bernard, 2004a) as well as research investigating irrational beliefs in children (Bernard and Cronan, 1999) points to the role of children's irrational beliefs as being major contributors to their emotional distress.

In therapy, REBT-oriented practitioners assess the intensity of children's emotional reactions (anger, anxiety and down) to adverse activating events. When extreme levels of emotional upset are identified (e.g., rage, panic and/or very down/depressed), children's inferences (predictions, conclusions) and evaluations (absolutes, awfulizing, I can't stand it, it is, global rating) are examined including a focused assessment of Ellis' major categories of irrational beliefs:

1. I must do well and be approved of by significant others, and if not, then it's awful, I can't stand it, and I am a hopeless person, People should treat me fairly and considerately.
2. People should treat me fairly and well, it's awful and I can't stand it when they don't, and they (such people) are bad and deserve to be punished.
3. My life should be comfortable and easy and conditions must be the way I want and when they are not, it's awful and I cannot stand it.

Irrational beliefs are deemed a major catalyst for extreme anger, anxiety and depression whereas rational beliefs are associated with more moderate negative feelings of annoyance, concern and sadness. According to REBT theory, children and adolescents who manifest irrational beliefs are more likely to demonstrate poor emotional regulation and control in comparison with young people who evaluate adverse events from a more rational viewpoint.

Rational-emotive education (REE), the educational derivative of REBT (e.g., Knaus, 1974; Vernon, 1989) has been developed for use in classroom and clinical settings to teach young people emotional problem solving and resilience through helping them to recognize their emotions that they experience in the face of adverse events, how rational and irrational beliefs contribute to their emotions and behaviors, how to recognize, challenge/dispute irrational beliefs and restructure them as more rational beliefs. It is proposed that recent research investigating emotional regulation and resilience in children point to additional methods for helping children develop emotional resilience.

Conceptualizing Emotional Resilience

Emotional regulation is a construct that researchers have been interested in for many years. However, it has only been since the early 1960s, that cognitively oriented behavioral researchers began to examine the extent to which human behavior is moderated by thought processes and associated with emotional states (Landy, 2002). Child developmental research has begun to focus on the extent to which children are able to moderate their emotions and behaviors when faced with stressful events. The construct that has been studied, emotional resilience, sometimes called emotional regulation or affect regulation, has been found to contribute to children's ability to prevent stressful

levels of negative emotions and maladaptive behavior from occurring (Landy, 2002). It has been argued that failure to develop sufficient emotional resilience is largely responsible for the development of behavior problems and can lead to a variety of serious psychopathologies.

Definition of Emotional Resilience

Saarni (1999) indicates that emotional regulation refers to one's ability to manage one's subjective experience of emotion, especially in terms of intensity and duration of the emotion, and how one manages the expression of emotions while communicating it to others. Landy (2002) refers to emotional resilience as the process by which people control or self-regulate internal reactions to emotions as well as their outward expression of the emotion in terms of behaviors. Emotional resilience or emotional regulation in children has been defined by Bernard (2004b) as children's developing capacities to use coping strategies (e.g., distraction, changing thinking, exercise, seeking support, etc.) that help them regulate the intensity of negative emotions they experience in the presence of adverse events. According to Bernard's view, children's differences in the level of coping capability they present are governed by many factors, including the biologically driven temperament of children, parenting practices, and the emerging belief system of each child.

According to emotional regulation theorists, when children experience intense negative emotions, they utilize three systems or processes to make sense of and react to the emotion (e.g., Brenner and Salovey, 1997). These processes are (1) the physiological reactions, which include nervous system activity, such as activity of the heart, stomach, brain and hormonal secretions, (2) cognitions or subjective experiences to the emotional response, which include the explanations one gives the self for the adverse events one experiences, and (3) action responses, which include the behaviors one presents in response to the emotions experienced.

Bernard (2004b) defines emotional resilience as the ability to stay calm when confronted with adverse events, maintain behavioral control, and to, when upset, calm down in a developmentally appropriate period of time. The following is a list of examples of emotional resilience:

- Not getting down when your friends seem to understand their schoolwork and do better on tests than you.
- Not getting overly frustrated and angry with yourself when you do not understand something.
- Not getting overly upset from mistakes in your work or when you have not been as successful as you would like to be.
- Avoiding getting extremely worried before an important test or event in which you have to perform in public.
- Avoiding excessive worry concerning your popularity with peers.
- Not getting overly angry when peers are mean to you.

- Remaining calm and in control when an adult treats you unfairly or disrespectfully.
- Not getting too down when being teased or ignored by friends.
- When meeting someone new, not getting extremely nervous and being calm.
- Stopping yourself from getting extremely worked up when you want to stand up and say "No" to someone who is putting pressure on you to do the wrong thing.
- Not losing your cool when you have lots of homework to do.
- Staying in control when your parents say "No" and the parents of your friends seem to be saying "Yes."

Emotional Resilience Strategies or Coping Skills

Over the first five years of life, a child gradually changes from relying primarily on caregivers or external support for coping with intense negative emotions to learning to control or manage emotions alone through the use of a variety of emotional resilience or coping skills (Landy, 2002). Coping skills in children have been described as (1) efforts by the child involving trying to alter external or behavioral factors such as the environment or the individual's behavior, by for example, deciding to study hard for a difficult test that is coming and doing physical exercise to alleviate tension, or as (2) efforts of the child trying to alter his or her cognitions or internal emotional experience, by for example, substituting positive thoughts for negative ones, learning to put things into perspective, using distraction and relaxation techniques (Brenner and Salovey, 1997; Landy, 2002). Strategies that exist in the middle of this continuum involve the child trying to alter both, external and internal factors (Brenner and Salovey 1997).

Researchers have used different dimensions to portray the different types of stressors that children face (Brenner and Salovey, 1997). The degree of controllability a child has over a stressor also becomes an important feature of the coping process as children mature and learn to distinguish between controllable and uncontrollable stressors. As further described in the next section, children learn to match coping strategy to stressor as they mature. At one end of the continuum are the stressors that are largely within the child's control (e.g., an upcoming test) and at the other end are stressors that are largely outside the child's control (e.g., the need for medical surgery).

Child Development Research on Children's Emotional Regulation

In order to deal with daily frustrations and other strong emotions, children develop a number of coping strategies to deal with stressors. Children who can effectively cope with stressors get along better and are more accepted by their peers. These children are friendlier in their interactions, have a greater

ability to deal with conflicts without becoming overwhelmed by their emotions, and therefore are capable of accepting others' perspectives. Children who are successful at coping do not utilize aggression and venting and can focus away from an emotionally arousing stimulus in order to view the situation from a positive aspect (Landy, 2002).

When children continuously attempt to cope with stress by using maladaptive skills or when they constantly fail to cope, underachievement, violent behavior, daydreaming, and psychosomatic illnesses are some of the sequelae that can be left, as encountered in the literature in the area of coping. Children who are not successful at coping with adverse emotions become emotionally overwhelmed by stressful situations they experience are therefore are more likely to exhibit difficulties concentrating, problem solving, and difficulties with memory (Landy, 2002).

Understanding how typical children cope with life hassles and regulate their emotions provides us with a practical way of communicating with children about the things that they can do to manage their emotions when faced with unpleasant experiences and helps us understand developmental changes in the types of strategies that children in different developmental stages employ.

During the past twenty years the amount of research on children's regulation of emotion has increased. Much of what we know about the development of children' emotional regulation comes from studies in which children of different ages are asked to report what they would do to cope with a stressful situation. In this type of research, coping is seen as a process containing two main elements: stressor and strategy to cope with stressor. According to this line of thought, successful coping can be interpreted as having a diversified repertoire of coping strategies (e.g., use of positive self-talk, relaxation, and perspective taking), having the ability to select strategies that meet the demands of the particular stressor in question, and having the ability to implement the chosen strategy (Brenner and Salovey, 1997).

A review of literature in the area of development of emotional regulation and coping conducted by Brenner and Salovey (1997) yielded three age-related, developmental trends. The first developmental trend revealed that children's use of internal or cognitive strategies increases as they get older while their use of behavioral strategies remains relatively constant throughout development. This trend is illustrated in a study by Altshuler and Ruble (1989), in which 8 and 11 year-old children were more likely to identify cognitive strategies to cope with negative emotions than were 5-year-old children, while there were no significant age differences reported in respect to the usage of behavioral techniques by the three groups of children.

The second developmental trend is the children's ability to cope by using solitary strategies (e.g., coping without the assistance of another person) increases throughout development. This trend is illustrated in a study by Kliewer (1991) who found that 7-year-old-children relied more on support from others than did the 10-year-old children (see also Garber et al., 1991).

Brenner and Salovey (1997) suggested that there is an age related increase in children's use of cognitive coping strategies, while behavioral strategies were reported as being used relatively constantly throughout all stages of development. The researchers also discussed that as children develop, they start relying more upon cognitive, or emotion focused, strategies such as substituting positive thoughts for negative ones to reduce sadness. Research has also found some differences in girls' and boys' use of regulatory strategies. Some studies suggest that girls are more likely to seek and rely on social support and guidance to cope with negative emotions (e.g., Dise-Leiws, 1988). Other studies have found that girls are more likely to use emotion-focused strategies, such as distraction (e.g., Wierzbicki, 1989) and that boys are more likely than girls to use physical exercise to manage negative emotions (e.g., Kurdek, 1987).

The way parents socialize with their children and display emotions, such as being generally positive rather then displaying constant anger, anxiety, or depression has been related to the child's capacity to emotionally regulate. Children who experience high levels of negative affect, such as fear, anger, sadness, and anxiety from caregivers, have fewer coping strategies in comparison to those who experience more positive displays of affect. When family life is loaded with tension, negative moods, unpredictable parenting, and marital conflict, children's capabilities to cope may be hindered, leading children to have a strong propensity to tend to use externalizing and maladaptive coping (Saarni 1999).

Teaching Emotional Resilience to Young People: Integrating REBT with Emotional Resilience Skill Training

Based on the review of REBT methods and the child developmental literature of emotional, coping strategies that children naturally develop over time, the following methods can be taught to individual, small or large groups of children and adolescents to strengthen their emotional resilience.

1. Help young people construct a list of events that can occur at school or home that can be considered adverse, bad or negative. Leave off the list any events that are life threatening. Include examples of lack of achievement, including mistakes in class assignments, rejection including teasing, not being invited to play, being yelled at by parents, etc.
2. Introduce the idea that there are three negative emotions that people can have when they are confronted with these negative events. Ask for and acknowledge suggestions and list the following three on the board: anger, worry and down.Discuss differences in these three feelings in terms of things that can happen that lead to one or more of these feelings. Have students portray/role play how the different feelings look and how people sound when they experience a feeling. You can have students search for

illustrations of people who demonstrate these three feelings in magazines/newspaper and cut them out.

3. Introduce the Emotional Thermometer that represents a 10-point scale of emotions (1 = feeling a little bit upset . . . 10 = could not feel any more upset). Explain that it measures how strongly one feels. Explain that all feelings vary in intensity from strong to weak. Give students practice in evaluating how strong someone is feeling employing the Emotional Thermometer and using cut out pictures of people displaying different emotions (see Fig. 1).
4. Make the point that when something bad happens, people have options in how strongly they feel. Ask: Does everyone feel the same way about different things? Ask: Can people feel different degrees of the same feeling (e.g., when someone calls you a name, can you feel different degrees of anger or feeling down)? Illustrate using the events listed in Step 1 how people can feel different about the same negative events.

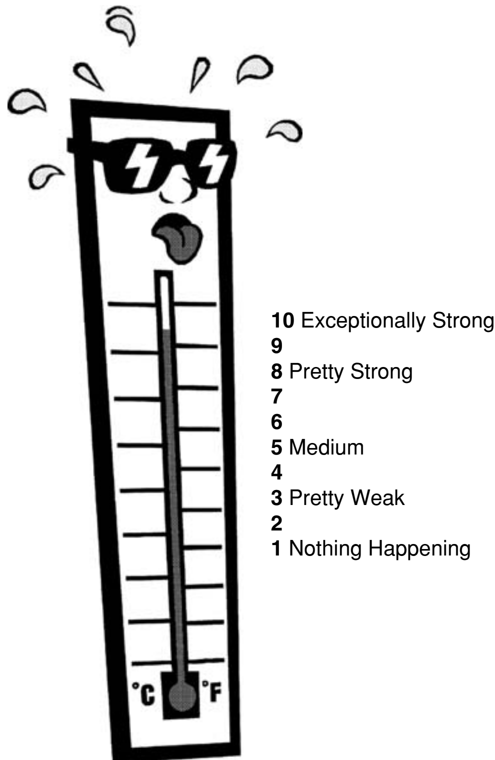

FIGURE 1. The Emotional Thermometer (Bernard, 2001)

5. Explain the relationship between how strongly one feels, their behavior, and different types of negative consequences that are associated with different levels of emotions and behaviors. Help young people see that, generally speaking, extremely high levels of anger, worry and feeling down are harmful to them because of the effects extremely high emotions have on their behaviors and ensuing consequences. Provide plentiful examples so that students appreciate that getting overly upset is not good and that they do have options in how strongly they feel when something bad happens.
6. Explain to young people that while it is very natural to feel upset when something bad happens, getting *extremely* upset (extremely angry, highly nervous, very down) is *not* generally good. Explain that very high degrees of negative emotions not only can feel bad, but also can lead people to behave in unhelpful ways. For example, when someone is extremely angry with someone who may have acted badly, s/he can say or do things in an aggressive fashion (e.g., yell, scream, swear) that can get him/her into trouble. Or too much worry about a test can lead to a loss of memory during the exam. Feeling very down can cause the child to withdraw from others and lose motivation to work. Use the Emotional Thermometer and Anger Thermometer (see Figs. 1 and 2) to illustrate these relationships

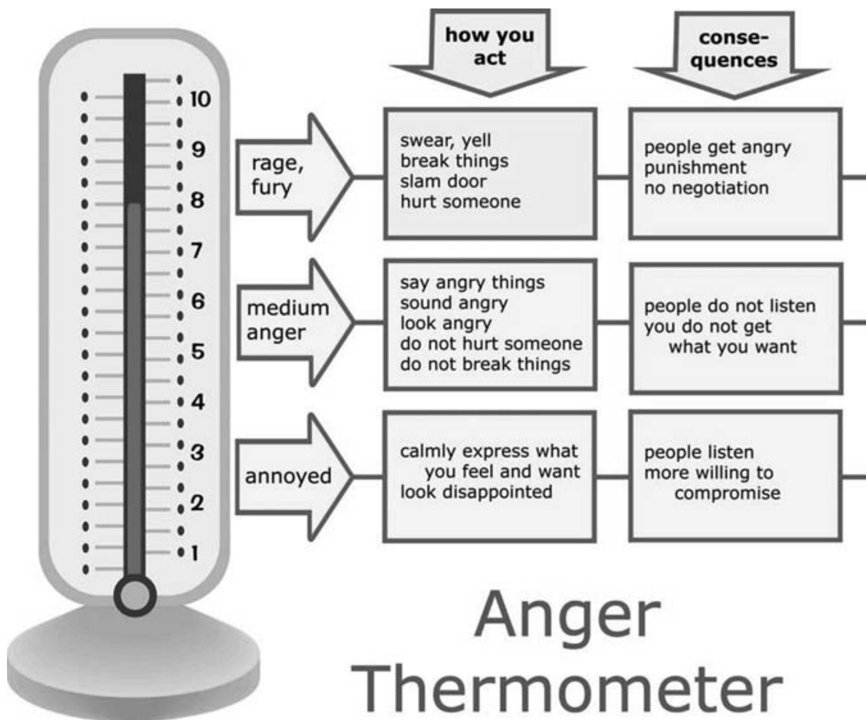

FIGURE 2. The Anger Thermometer (Bernard, 2004a)

7. Introduce the term "Emotional Resilience." Explain that Emotional Resilience means knowing how to stop yourself from getting extremely angry, down or worried when something "bad" happens—for example, by thinking positively rather than negatively and not thinking that the "bad" thing is the worst thing in the world that could happen if it is not really that bad. It means knowing what you can do when you are very upset to calm down including talking about what happened to a trusted friend or adult and learning to relax. Provide examples of Emotional Resilience as related to the adverse circumstances listed in Step 1.
8. Explain that people vary in their degree of Emotional Resilience and that over one's life; it is good to continue to develop Emotional Resilience as a way to help cope with adversity when it happens.
9. Provide young people with the following questions to survey their own Emotional Resilience:

- When someone treats me unfairly or is mean to me, I am good at controlling my temper.
- I have someone I can talk with when I get really upset.
- When I find myself getting very stressed, I know how to relax.
- I am good at thinking positive thoughts when bad stuff happens.
- I am someone who does not take mistakes or disappointments personally.

Discuss how some young people will have marked all the boxes, while others may have not marked any. Emphasize that Emotional Resilience can be learned and is very helpful.

10. Teach Emotional Resilience Skill: Keeping Things in Perspective.
    Introduce the human tendency to blow the "badness" of events out of proportion by explaining that there are different degrees of badness: things that are "a bit" bad (someone pushes in front of you in line, someone breaks your pencil, careless spelling mistakes), things that are "medium" bad (failing a class, being called a bad name by the class bully), things that are "very, very" bad (natural disaster, being terminally ill, something horrible happening to your parents). Give young people practice in categorizing bad things that happen during the school day and at home, as well as events they read about in the news into these three categories. Encourage students not to blow events out of proportion.

    Build/display a Catastrophe Scale that goes from 1 to 100 in your room that illustrates events that are 90–100 "catastrophic" (natural disaster, death, terminal illness), events that are 50–90 "very bad" (house burns down, car accident, losing lots of money, best friend moves away), and events that are 10–50 "bad" (making mistakes on a test, being teased, someone steals your lunch money). Refer to the Catastrophe Scale during the year to help students keep hassles and other adverse events listed in Step 1 in proportion.

11. Teach Emotional Resilience Skill: Positive vs. Negative Self-Talk.
    Introduce the concept of "self-talk" as the way we think about events and how our self-talk can be negative and positive. Provide illustrations of how when something adverse happens, it is easy to get into a negative mode of thinking using negative self-talk. Explain that Emotional Resilience and becoming calm can be achieved by countering negative self-talk with positive self-talk.
12. Teach Emotional Resilience Skill: Challenge/Dispute Irrational Beliefs and Replace with Rational Beliefs.
    You can have young people complete a survey to determine which irrational beliefs hold (see Table 1).

    - Self-Downing: thinking you're hopeless when something bad happens (replace with Self-Acceptance).
    - Needing to Be Perfect: thinking you must do everything perfectly and that it's horrible to make mistakes (replace with Responsible Risk Taking).
    - Seeking: believing you must have the approval of peers (or adults) for everything you do and being thought to be silly or stupid by others cannot be endured (replace with Non-Approval Seeking).

TABLE 1. Negative Ways of Thinking Checklist (Bernard, 2003).

Instructions: Place a mark to indicate how often a child tends to think in a particular negative way.

	Rarely	Sometimes	Often
1. *Self-Downing* – Does the child think that s/he is totally useless or a failure *when* she/he is has been rejected or has not achieved a good result?	☐	☐	☐
2. *Needing to Be Perfect* – Does the child think that she/he must be successful or perfect in everything important that I do and that it's horrible when s/he is not?	☐	☐	☐
3. *Needing Approval* – Does the child think that she/he needs people (peers, parents, teachers) to approve of him/her and that when they do not, it's the worst thing in the world?	☐	☐	☐
4. *Pessimism* – Does the child think when s/he has not been successful at something that s/he is no good at anything and never will be?	☐	☐	☐
5. *Low Frustration Tolerance* – Does the child think that life should always be fun and exciting and that s/he can't stand it when things are frustrating or boring?	☐	☐	☐
6. *Being Intolerant of Others* – Does the child think that people should always treat him/her fairly, considerately and the way s/he wants and when they do not, they are rotten and s/he has a right to get back at them?	☐	☐	☐

- Pessimism: thinking that when something is difficult, you'll be more likely to fail than to be successful (replace with Optimism).
- Low Frustration Tolerance: believing that everything in life should be fun and exciting and that you cannot stand to do things that are not fun or easy (replace with High Frustration Tolerance).
- Being Intolerant of Others: believing that people who are unfair, inconsiderate or different, or inferior or bad people who deserve punishment (replace with Unconditional Acceptance of Others).

13. Teach Emotional Resilience Skill: Explicit Teaching of Rational Beliefs
    Discuss with young people in a variety of ways how the following beliefs can lead to less emotional misery and more emotional control.

    - Accepting Myself: knowing that I have many good qualities and a few that could be improved, and accepting myself warts and all.
    - Taking Risks: knowing that it is good to try new things even if I make mistakes.
    - Being Independent: knowing that it's good to speak up even if others think I'm silly or stupid.
    - I Can Do It!: trusting myself when I'm doing something hard that I will be more likely to be successful than to fail.
    - Working Tough: knowing that in order to be successful, I sometimes have to do things that are boring and not fun.
    - Being Tolerant of Others: accepting that people make mistakes and have differences from me and that while I might not like their behavior, they are not totally bad or deserving of punishment when they do the wrong thing.

14. Teach Emotional Resilience Skill: Relaxation.
    Explain to young people that when they are faced with pressures or other adverse circumstances and notice they are getting uptight, they can learn to cut their stress down to size by learning to relax. There are a variety of relaxation skills that young people can be taught.
    For example, you can teach the 5-3-5 Relaxation Technique. In using this deep breathing technique, young people can be taught to use the following instructions:

    "To begin with, rapidly exhale all the air from your lungs. Next, slowly to a count of five, inhale . . . one . . . two . . . three . . . four . . . five. Hold your breath of air for a slow count of three . . . one . . . two . . . three. Now slowly, very slowly, exhale the air to a slow count of five . . . one . . . two . . . three . . . four . . . five. You have just completed one repetition. To continue to relax, breathe in slowly to a count of five, hold for a count of three, and again exhale to a slow count of five."

15. Teach Emotional Resilience Skill: Assertive Behavior.
    Explain that in the face of pressure by peers to do something they do not want to do (e.g., drink, smoke) or when faced with someone treating them

badly, it is common for emotions to run high. You can indicate that "assertiveness" can help all people reduce levels of negative emotions by helping to change the circumstances that helped create the emotions in the first place. Discuss how when you're assertive, you state clearly and directly your honest feelings and wishes. Rather than raising your voice or mumbling, you use a warm and yet firm tone of voice. You wear a relaxed expression and look directly at the person who is pressuring you or treated you with disrespect. Explain the differences between acting assertively to being too aggressive or passive/shy.

16. Teach Emotional Resilience Skill: Find Someone to Talk To. Discuss with students how when things are not going well and you've tried everything to remain positive and not blow things out of proportion, sometimes it is good to seek out someone you trust and who is a good listener. Make the point that trusted friends and adults are never too busy to not have time. Brainstorm types of people whom students would trust to talk to. Make sure that everyone has identified a source of support.

An Example of Rebt-based Emotional Resilience Group Counseling

What follows is a summary of a small group counseling program introduced to a group of primary age children attending regular, general education classes in two different public schools in Southern California who were identified through the use of a screening procedure as having social, emotional, behavioral and/or achievement problems. The schools where the study took place are mainly composed of students ranging from middle to low socioeconomic backgrounds. The effects of the program were evaluated as part of the second author's mater's thesis (Major Area: Educational Psychology).

Students attending the program were not randomly selected from the whole schools' population. All 4th, 5th and 6th graders of two elementary schools, approximately 547 students, were rated by their teachers on the Teacher Survey: Student Social Emotional Behavioral Functioning (TS-SSEBF) (Bernard, 2003), an eight-item screening instrument that measures teacher perceptions of four dimensions of student adjustment (two items for each dimension): educational under-achievement, social problems, behavioral problems, and emotional problems. On this 5 point Likert scale, a rating of 5 meant that the student is almost always displaying adaptive and well adjusted behaviors and emotions, and a rating of 1 meant that the student does not display adaptive and adjusted behaviors and emotions. Sixty-one of these 4th, 5th, and 6th grade students, ranging in age from 9 to 12 years, who were designated as having significantly low levels of social emotional well-being and/or significantly high levels of underachievement as measured by the TS-SSEBF—students who received a total rating of 15 or less from their respective teachers—were selected to receive services to be provided by school counselors.

All 61 children selected to receive counseling services from school counselors were then randomly assigned to experimental and control groups. Thirty students were invited to participate in 8 weeks of emotional resilience training while the other 31 students were invited to receive 8 weeks of counseling sessions that were delivered by licensed school counselors who adopt eclectic approaches to counseling. The experimental group consisted of 12 boys and 10 girls and the control groups consisted of 16 boys and 14 girls. Students were participating in general education classes only, had no diagnosed disability, and ranged from 9 to 11 years of age. The ethnic composition of the sample was 50% Hispanic or Latino, 41% Caucasian, 4.5% Asian and 4.5% Other.

The Cognitive Behavioral Emotional Resilience Lessons

During eight weeks, the investigator taught lessons on emotional resilience that were adapted from Bernard's (2002, 2003b) Program Achieve curriculum to students in the experimental group. The curriculum was designed for elementary school children and judged to be appropriate for the children in this sample. Once a week over a period of 50 minutes, students met the investigator in the counselor's office in groups of 5–7 children to participate in the group sessions. Each session covered a specific content. All sessions' content was presented in a continuous and logical format. The following is a list of the concepts that were taught in the sessions. A conceptual description of what the goals of every session were was included.

Session 1. Introducing Emotions

The content in this session is designed to help students become more familiar with each other, with rules and expectations that surround participating in group sessions and, above all, to help students build an emotional vocabulary and to become aware of their own emotions and emotions on others. Through activities and role-plays, students become acquainted with and explore the meanings of the words angry, sad/down, worried/anxious, the accompanying physiological feelings of tension that one might encounter when extremely angry, down, or worried, what a person looks like when feeling such emotions, and how one might react when experiencing different degrees of anger, sadness, or worry.

Session 2. Adversity: Bad Stuff that Happens

The content in this session is designed to help students identify the different degrees of anger, sadness and anxiety that different children can experience. Children help the facilitator name common adverse circumstances that can make a child very angry, down or worried. The concept that we all go through "tough times" is carefully explored and children are presented with the

"Emotional Thermometer" (see Fig. 1). The Emotional Thermometer is a picture of a thermometer that measures emotions. Children learn to rate the degree, ranging from 1 to 10, of emotion they think they would feel in the face of several adverse events. As the lesson progresses children understand that (a) there are different intensities of emotions that one might feel when faced with adversity, and (b) people display different behavioral and emotional reactions when experiencing different intensities of anger, sadness and worry (e.g., when feeling angry at a level ten a child may scream at and hit a friend but feeling angry at a level 5 a child might be assertive and express his negative experience of emotions in a more rational form).

Session 3. Introducing Emotional Resilience: Do Not Let Your Emotions Rule You

The content in this session is designed to help students understand that getting upset is a normal part of human existence, however, getting too upset works against one's and others' personal interests and well-being. The facilitator leads students in a discussion about the fact that when /one experiences high levels of emotion, one will find it very difficult to make responsible and wise choices and make good decisions. During this session students are referred back to the Emotional Thermometer and are guided to explore how different intensities of the same emotion can make a person react differently in the face of an adverse situation. The facilitator helps the students understand that high levels of anger, sadness, or worry hinder one's ability to successfully solve problems and can make the problem much more difficult to cope with. The students and the facilitator discuss the difference between being assertive and aggressive. Last, during this session, students are presented with the first emotional resilience coping skill covered in this curriculum: talking to someone you trust. Students participate in an activity that shows the importance of talking to someone you trust when experiencing strong negative feelings, and how talking to others can help one calm down and, perhaps help one discover solutions to his or her problems. Students role-play talking to each other about personal or made-up problems and the listener in each role play dyad is guided to carefully listen, validate the person's feelings, and offer comfort and "advice," if possible.

Session 4. Do Not Sweat the Small Stuff

The content in this session is designed to help students: (a) understand that not all thoughts that a person has are always and necessarily true, and (b) learn about the thought, feeling, and behaving connection, which is core to dealing with irrational thoughts according to Rational-Emotive Behavioral Therapy, and (c) not to blow adverse, bad events out of proportion. In this session students participate in an activity in which they learn to rate the level of "badness" of many different adverse circumstances and learn about putting things in perspective. They learn about the Catastrophe

Scale, in which students rate different adverse situations by their level of difficulty in terms of coping with the situation in question. Students learn to put things in perspective and realize that most bad situations encountered daily should not be viewed as terrible and impossible to cope with. Students realize that there are many adverse circumstances that they were currently rating as awful and terrible, that in reality do not appear so bad, once you put in perspective many other things that could happen in one's life. For example, students are asked to rate a situation as really bad, medium bad, or "bit" bad. When given scenarios such as, all my family but me died in a car accident (something really bad) and I tripped on the hall in front of many people this morning, students rate both situations in terms of how hard it would be for one to cope with it and how the situation should be categorized; really, medium or just "bit" bad. The facilitator models to the children coping with adverse situations by using many different rational thoughts, such as, "This is bad but it could be worse" and "I do not like it but I can deal with it." Last, the children are invited to choose a coping statement and are given scenarios to role-play successful coping by using the statements. They are asked to identify the intensity of emotions they felt when successfully coping and are directed to adopt this approach to their personal lives when facing difficult situations.

Session 5. Increase Your Tease Tolerance

The content in this session is designed to help students realize that after one learns to put things in perspective, one should not categorize teasing as the worst thing that could happen and as something impossible to cope with. During the session students review the Catastrophe Scale and appraise where teasing would fit in: really, medium, or "bit" bad stuff. The facilitator subsequently introduces the children to the Happening→Thinking→Feeling→Behaving Chart (HTFB). The children think of a typical situation where a child is being teased. Together, the children and the facilitator write down what is happening, what the person—who is having a hard time being teased—is feeling, how the person is behaving and what the person is likely to be thinking. The facilitator writes all this information down in the HTFB chart. The children are guided to evaluate the original thoughts experienced by the child, who is experiencing high intensities of emotions, and to decide if the thoughts are rational, positive and make sense. The children think of more rational and positive thoughts to substitute the original irrational ones and a new HTFB chart is created with the new, more effective and logic thoughts that better help in coping with teasing. The facilitator and the children explore the concept that one cannot control the teaser but one can control how one chooses to think about the teasing. Each child chooses a coping statement that can be used when facing teasing and the children and facilitator role play different teasing situations in which students are capable of coping by using rational and positive coping statements.

Session 6. More Coping Skills and Positive Habits of the Mind

The content in this session is designed to help students identify and practice the skills that they already have for coping with stressful situations, practice the new coping skills that they have learned, to learn to identify the negative habits of the mind they are currently engaging in, and to learn the positive habits of the mind that replace the negative ones. Emotional Resilience coping skills covered are: (a) use of positive vs. negative self-talk, (b) talking to someone you trust, (c) doing some type of physical activity, (d) using relaxation techniques such as breathing deeply and slowly repetitively, (e) putting things in perspective, (f) being assertive, (g) any other coping techniques already available to the children that they have been using and find it to be effective. After covering the emotional resilience skills, the facilitator engages the children in an activity that leads them to identify which negative habits of the mind they have been engaging in. The facilitator models to the children some of the negative habits of the mind, namely: self-downing, needing to be perfect, needing approval, I cannot do it, I cannot be bothered, being intolerant of limits, acting without thinking, giving up, and being intolerant of others inside several scenarios. While presenting the scenarios the facilitator asks the children to write down on a piece of paper the scenarios they identify with and the types of negative habits of the mind they have been engaging in. The children in the group identify the negative habits of the mind and the irrational thoughts that they have being engaging in and together with the facilitator they write down new positive habits of the mind and accompanying thoughts that can be used to substitute the negative habits of the mind. Last, the facilitator spends more time creating scenarios that go with the negative habits of the mind that the children identified and together the children and the facilitator role play using the positive habits of the mind and its accompanying rational thoughts when trying to cope with the hypothetical situations.

Session 7. Rethink

During the week prior to this session, the facilitator collects information from the children's teachers. The facilitator asks the teachers to share some real examples of situations that lead to students in the experimental group to become really angry, sad or worried. During the session the facilitator tells the students she knows about some bad things that have been happening to them, without revealing the children's identity or linking any child to a specific situation. The children and the facilitator choose a scenario from the examples collected from the teachers and together they build a Happening→Thinking→Feeling→Behaving (HTFB) chart. The children choose the Happening, among the options they have from the situations collected with the teachers' help, and then identify the Feelings the person in question might be experiencing, how the person is likely to be Behaving, and with help from the facilitator, the children hypothesize how the child in

question is likely to be Thinking. The facilitator collects the hypothesized irrational thoughts that are making the child in question feel so bad and together the children and the facilitator create alternative thoughts that are more rational. Last, a role-play of the situation takes place by having the children practice the rational thoughts.

Session 8. Emotional Resilience at Work

The content in this session is designed to help students understand that they can use positive self-talk to do better at school. Students learn that by using positive self-talk they can acquire the attitude and thinking that can help motivate them to do work they find difficult or boring. Students and the facilitator create a list of homework and classroom activities that students find to be very difficult or boring and which might cause students to feel very angry, sad or worried. The facilitator models negative irrational thinking when faced with boring and difficult classroom tasks and asks students why it does not help to think this way. Students are shown the Emotional Thermometer and rate how the facilitator is likely feeling while thinking negatively and irrationally. The facilitator asks the students what could be done in order for the facilitator not to get so high in the Emotional Thermometer and for the facilitator to better solve the problem. Together, the children and the facilitator transform the irrational thoughts the facilitator had previously modeled into more rational ones. The facilitator then models having to do the same boring or difficult classroom tasks, but now using positive self-talk and the children rate the new level of emotion the facilitator is likely experiencing, now that the more rational thoughts are being used. During this final session students are given handouts that summarize and illustrate the coping skills that they have learned about and practiced in sessions. The techniques described in the handout are: (a) use of positive and rational self-talk (b) talking to someone you trust, (c) doing physical activities, (d) use of relaxation breathing techniques, and (e) putting things in perspective—the Catastrophe Scale. The students are then asked which techniques they could use when they do not understand something during a lecture, when they get a bad grade, and when they have to do boring or difficult school work. Last, students role-play talking to each other about what they can think and do when they have to do boring or difficult schoolwork, and when they get a bad grade.

As a matter of interest, results indicated a statistically significant increase in social competence and school adjustment of students who received both eclectic forms of group counseling as well as cognitive-behavioral resilience training as measured by pretest to posttest differences on the Walker-McConnell Scale of Social Competence and School Adjustment Elementary Version (1988).However, only students who participated in the resilience-training groups in comparison with students receiving eclectic forms of group counseling showed increases in emotional resilience (teacher rating and self-perception) as measured by a sub-scale of the Well-Being Surveys (Bernard, 2004d).

Conclusions

It is surely reassuring to know that children develop as a result of maturation a range of coping skills that enable then to manage their emotions that arise from different adverse circumstances. However, research into individual differences amongst children of the same age reveals a range of differences. Children with lower levels of development of emotional resilience have been found to at greater risk for poor educational achievement than children with higher levels of development (e.g., Bernard, 2004c). Intervention and prevention programs based on principles and practices of REBT that include a range of adaptive emotional regulation strategies hold the promise of influencing the developmental trajectories of "at risk" young people.

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