Recalibrating Resilience

William had multiple flags for poor outcomes, and Margaret, his claims manager, noticed that every time there was the least hiccup in the progress of his claim William seemed to fall apart and need extra attention to calm him down. Margaret suggested that William take a "resilience" course and William reluctantly agreed. The course attempted to show William techniques from a well-known "positive psychology" approach to resilience. William stopped listening to the lecture halfway through - he later told his friends that it was too "touchy-freely".

After a particularly tough week, one of Margaret's co-workers noted that she was acting particularly stressed. Margaret was a bit hostile to some of her claimants and was heard muttering, "Why can't they just get on with their lives like I do". Margaret had heard about a resilience-building practice that was offered through work. It featured a "mindfulness" meditation practice. She signed up for a class and tried to fit the technique she learned into her daily routine. But she had always been a busy person, and housework, her kids, and her husband took up all the energy she had after work. She had precious little "me time" anyway, and making time for meditation just didn't happen.

The problem with both Margaret and William isn't that they were given bad advice. They were just given advice that wasn't sufficiently specific to their personalities and situations. Because it was too general, it didn't become enough of their lives to make it real and useful. A new understanding of what resilience is and how it actually works to help people "bounce

back" from adversity recognizes that "one-size-fits-all" doesn't work for many people. What is needed is a better understanding of how to use the mind's reaction to challenges in an individualized way.[1]

What's wrong with "resilience?"

It seems pretty obvious that we'd all be better off if we were a little more personally resilient. It would be great for injured workers. They'd be less likely to be adversely affected by their experience of the compensation system and less likely to suffer secondary psychological impacts from their injury. Resilient people who suffer an injury are less likely to miss work, less likely to have time off from injury, less likely to believe someone else was at fault in the accident, more likely to recover and return to work quickly and more emotionally and physically able to cope with the return to work process[i]

It'd be great for claims staff too. Sometimes we forget what a difficult job claims adjusting is, and take high absence and turnover rates, presenteeism and burnout as necessary evils. A more resilient claims staff is more engaged and productive, less likely to be adversely affected by the work and more likely to treat claimants appropriately.

The trouble is that "resilience" has been elusive in at least two ways. First, it's a characteristic that isn't generally well-described, except by its effects. We know what resilience does, but we have no description of how resilience works. Without a definition of what resilience is, the phenomenon is in a "black box" that is not helpful for making use of the concept.

Second, the advice given regarding resilience suffers from circularity, generality and difficulty in application. Common advice like, "If you want to be more resilient, be more optimistic" sounds a little too much like "If you want to be wealthy, just get more money." It's not very helpful. *Of course* we'll be able to bounce back from things better if we're optimistic. The conundrum is how someone becomes more optimistic, especially when they are stressed by being in the middle of recovery from an injury.

---

[1] Many thanks to the people who read earlier drafts of this article and made excellent suggestions for improvements. Since a few don't want to be mentioned by name, I'll just thank you all collectively.

Back in the 1980s and 1990s researchers in child development appropriated the term "resilience" from materials science to describe the phenomenon of vulnerable children from disadvantaged environments who somehow managed to thrive and succeed. Lots of correlation studies were done to discover traits that appeared most frequently in that population. Correlation studies are useful for looking at a whole population, but not particularly helpful in understanding the impact on individuals. For instance, we know that smoking is correlated with increased incidence of certain diseases, but that information doesn't tell us what health impacts an individual smoker will have. Notwithstanding this limitation, the correlation studies became the source of advice for individuals. Naturally enough, many people didn't feel as though they "fit" the resilience advice they were being given, and resilience training has been inconsistent in its uptake.

Where there is a promise of a silver bullet, a cottage industry will usually develop. Several programs have been developed and sold as "resilience training". They may be supported by research that shows that, amongst those who participated in the study and did what they were told, good things happened.[2] For example, we're told that mindfulness meditation will improve resilience[ii], and that's correct for those who practice it and make it part of their lives. The trouble is that the research doesn't measure the results on those people for whom mindfulness meditation is not something that they are willing to consistently practice. Those resistant people aren't studied, or don't enter or stay in the research program, and are therefore excluded from consideration in the reporting of results. The studies only show that the technique works for the people who are willing to devote themselves to the approach, and is silent with regard to the rest of us. And a quick survey of people around you will show that some people like the idea and will try it, some people (like William) think it's "not for them" , some people (like Margaret) simply won't make the time for consistent practice,

The same is true with numerous other programs. The positive psychology movement has its resilience program, and it works just fine – for those to whom positive psychology is a comfortable way to look at the world. The rest of us are likely to be turned off, and if we try

---

[2] Let's leave aside, for the moment, the concern that the instruments that measure "resilience" actually measure something else – we can't measure resilience directly, because we haven't yet defined what it is or how it works.

it at all, fail to incorporate the practice into our ongoing "resilience toolbox". There's a good reason for this. We aren't all the same, and the skills of resilient people aren't all the same. One-size-fits-all approaches to resilience are inherently flawed, not because they are wrong – but rather because they are not suitable for everyone. Approaches that "go against the grain" will not be practiced enough to become the engrained and automatic responses to distress that build personal resilience in the real world.

What we need is a more personalized approach to resilience. Most of us have some resilience skills and William and Margaret are no exception. Sometimes those skills aren't enough to insulate us from difficulty. The key is to build up "fallback" skills in our toolbox so that we have something to try when the usual strategy isn't working. To do that, we have to assess what skills we have and what other skills might fit in with the way we look at the world. Then we can pick a resilience skill that suits us to try to further develop.

The process of building resilience skills is just like building any other skill, and we do it according to principles that have become better understood as the understanding of the mind has advanced.

What is individual resilience?

To understand what's going on, we have to look at how we process information and learn. Our brains are incredible parallel processors of information. William takes in all of the inputs from the external world (sensory data, events of all kinds, interactions with others) and all of our internal data (thoughts, emotions, sensations within the body) and have to link them together for the not-so simple task of focusing on that which is most important at the time. We've all experienced this focus when we are able to shut out things that normally would attract our attention. (Remember having gotten a cut or bruise and not being able to recall when or how?) We know what happens when we lose the focus ("we are distracted") and find ourselves doing something other than what we started out intending to do. The important part to understand is that all the things that happen at one time are connected in the mind so that we are able to make choices about what attracts and holds our attention.

William has a flood of inputs surrounding his claim – pain, anxiety and a sense of loss of control arising from his injury, a separation from his identity as a worker, economic stress,

messages about what he's supposed to do from his claims manager, doctors, lawyer, family and friends (that may be conflicting) and the weight of all the expectations from his own life and the cultural environment. All these inputs (and notice that many of them are negative) are presented at the same time and so William's mind has to link them together to focus and stay present.

When the moment passes, the connections may persist for a while, until the brain recycles the connection capacity to process new experiences. But suppose the connections between some thoughts, emotions, sensations and experiences of the outside world repeat over time. It may be that William experiences some repetition of the connections in the course of telling his claims manager, doctors and lawyer all about it, but most of William's repetition of the connections will come through his ruminating over what's he's experienced. Claims may sit for weeks on hold while liability is determined. Healing takes time. Litigation (if there's a dispute) takes a lot more time. The repetition of negative messages continues through ruminations and internal "self-talk", and William isn't given the opportunity for the messages to just fade away.

With enough repetition, physical changes occur in the connections within the brain and those repeated connections become "wired-in" - faster, more automatic and less likely to be subject to conscious consideration. We say "practice makes perfect" to describe how a musician learns to play their instrument, how a worker learns to be efficient and effective in his or her job or how we learn the "reflexes and instincts" to make us react appropriately when something unexpected happens when we drive. This process occurs with much more complicated actions than just physical skills, as when we learn to "read" another person's moods, use heuristic tools to make quick judgements or invoke selection, confirmation and other biases.[iii] William learns, in the same way to associate his pain, his sense of helplessness and his reactions to the system in which this is all happening.

When we repeatedly associate the same thoughts, emotions and sensations, all of them get linked together in a sort of web of association. The process takes time and repetition, which is why it's hard to make or break a habit. The neuroscientists might call the resulting associated thoughts, emotions and sensations a "facilitated neural network". One characteristic of such networks is that the stimulation of one part of the linked network has

a tendency to stimulate the whole linked set of experiences. It's not unusual for Margaret to say or do something she thought was innocent and trigger a disproportionate or inappropriate reaction from a worker like William. Margaret may have inadvertently said something similar to words that his wife used when they had an argument at home the night before. The argument was associated with anxiety worry and a flare-up in William's pain. We say Margaret "pushed William's button" and mean that she inadvertently invoked a web of associations and that William literally felt the pain as a result and lashed out at her. The expression of anger that followed wasn't even really directed her – Margaret is just the trigger for associations between pain, anxiety and tension at home (a psychosocial factor) made at another time and place.

The ability of the mind to make facilitated networks of thought, emotion and sensation may also create maladaptive responses. Current neuropsychological research suggests that chronic pain and PTSD may be examples of such maladaptive systems. [iv]

A new definition of Resilience

If repetition is the key to this kind of learned association between the things that we experience, we have to wonder how the repetition occurs. Many times we physically repeat the same actions over and over, as in taking the same route to work each day. Most of us have experienced starting out on that route, intending to go elsewhere, but in a moment of distraction accidentally taking a familiar turn toward the workplace. The route to work has become engrained, and we follow the familiar route unless we consciously override the habit. Neuroscientists suggest that it takes about 12 weeks of focused effort to engrain a habit so that it becomes engrained – which, *not* coincidently, is the same amount of time it takes for an injured worker to become significantly less likely to return to work.

But sometimes we "learn" things in a powerful way that haven't been repeated over and over. William might only have been told that he "will never work again" by his doctor on one occasion. Nonetheless, the message may become a mantra, repeated over and over until it

becomes a self-limiting belief.[3] So, how does this unrepeated message get "wired in" with the rest of the experience of recovery?

While the message may only be uttered once by the doctor, repetition still occurs. The message may be repeated to his lawyer, a claims manager, family members and friends. More importantly, the message becomes part of the inner dialogue or "self-talk" that we all experience. We tell ourselves, over and over, what we have heard, repeating it at the speed of thought.[4] It becomes our explanation for what we do and do not do. It's especially common for such repetition to occur at night, while William is lying in bed trying to fall asleep.

Our self-talk also becomes a perceptual filter that influences how we perceive the events going on in the world, so that everything is interpreted as being consistent with the message. Our repetition through self-talk becomes part of what and who we perceive ourselves to be. "Victim", "disabled person", "loser", "survivor", "worker", and "winner" are all labels that we give ourselves. The labels come from our self-talk and express a reaction to the retention or loss of a sense of control over the circumstances that confront us. If William is able to maintain his important sense of being in control, he maintains his identity and is likely to make strong effort to get back to "normal". If he becomes overwhelmed and loses his sense of personal control, the return to normalcy may become too hard to achieve. Some people give up. William's red flags suggest that he has a lot of negative inputs already, and that he may be closer to being overwhelmed than others. His self-talk is already negative before he started the claims process and he is likely fairly close to losing control already.

If self-talk is the principle mode of repetition that creates mental habits, interpretations of events and the limitations and labels we apply to ourselves, then it follows that self-talk has

---

[3] The research on adverse childhood events (ACE) documents the potency of messages of powerlessness or worthlessness on children. Educational researchers have shown us that the opposite is true as well – a strong familial or mentorship relationship can help a child overcome the influences of seriously disadvantaged developmental environments.

[4] This is particularly true when trying to get to sleep – and many injured workers have sleep disruption as part of their symptoms.

a huge influence on our ability to "bounce back" from adversity. That leads to a functional definition of how resilience actually works:

> *Individual resilience is the ability to quiet, change or modulate self-talk about events and situations.*

If Margaret or William can calm or change their negative self-talk it will not get sufficient repetition to become part of a network of automatic beliefs, interpretations of experience or perceptual filters. Without the undue influence of negative messages on perceptions of what's happening now, they will be able to experience the world as they would have before the negative event – and for most of us, that means that they will "bounce back" and cope as they did before.

Most of us have fairly well-developed skills around shutting down the adverse voices in our heads. For all of us, there are circumstances that have the ability to overwhelm the defenses we have in place. Self-doubt, indecision, anxiety, depression and other symptoms follow when negative self-talk is inadequately controlled. The trick to being a "resilient person" is having a set of behaviors that will work in a wide variety of circumstances to change or quiet the inner voice. One resilience skill doesn't provide defense in depth – if it's overwhelmed by events, we need another skill to fall back upon. Resilient people have multiple strategies for quieting adverse self-talk.

Styles of resilience

Look around at resilient people[5]. They don't look the same. There's the entrepreneur, who lost a fortune but is unconcerned because he or she can always make more money. There is the Zen master, for whom none of the troubles of this world are of great concern. They are both very resilient, yet their approaches are significantly different. The single mom, working two jobs and studying at night is resilient too. Yet she doesn't look at all like the entrepreneur, the Zen master or the eternal optimist who is sure that something good is just around the corner.

---

[5] These comments apply in Western cultures but would need to be re-examined with cultural sensitivity in other cultures.

Different people have different styles or strategies for their favored way of calming adverse self-talk. The preferences and mix of resilience skills that they possess are a function of what life has taught them – lessons learned from the person's upbringing, formal training, life challenges overcome and failures experienced. There are no "right" or "wrong" preferences amongst these styles and most people have some skill in more than one style. An understanding of our preferences amongst these skills is merely a guide to what is comfortable for us at this life stage. If we try to build a skill that is in the "preferred" range there is a better chance that it will be practiced enough to become habitual. Try to learn a resilience strategy that doesn't appeal, and the chances of practicing it enough to "make it you own" are diminished.

The listing of resilience "styles" that follows is not absolute. It is a convenient way of understanding and classifying resilience skills that appears to lead people to better understanding. [6]

There is also a continuum of focus within each skill category. Each skill can be focused internally, where someone relies on their own resources. An entrepreneur has great belief in his or her ability to master a business situation. Strong belief can be focused externally, as in a person of great religious faith. Each of the styles described has a range of approaches differentiated by this dimension of "internal" and "external" focusing, which can lend additional assistance in selecting a suitable new resilience skill to build.

Believer **skills**

Strong belief can calm or drown out negative messages from the world, allowing the possessor of that belief to continue on as if the negative message was not present. Entrepreneurs and politicians are classic examples of people that appear to have great faith in their own abilities. They often can shrug off or fail to credit external criticisms. People with this preference may assess a wide range of life challenges as being well within their capabilities, with varying degrees of accuracy. Internally focused believer skills can quiet self-doubt, allowing decisive action.

---

[6] Results of a survey of 113 people who participated in the beta testing of the Resilience Styles Preference profiling tool administered to the Mayo Clinic Impairment Without Disability conference, October 2015.

Believer skills can also be externally focused. Strong spiritual faith or strong belief in a cause or ideal can allow people to persevere in the face of nearly overwhelming opposition. The focus on an external belief does at least two things – it creates a confirmation bias, where we interpret events as confirming what we already thought would happen. If William has a belief that the insurer is going to act inappropriately he will see every decision that doesn't favor him as confirming that belief. He has no need to look for another explanation, so there is no inner doubt or conflict. Where the belief is in an external source of intervention or protection it can provide strong reassurance in the face of doubt and anxiety. [7]

William suffered a shoulder injury while working. Through a combination of circumstances the injury left him with permanent limited use of that shoulder. The work that was known to him is now unavailable, and he's gone through a difficult period where he lost his identity as a worker and his sense of purpose. William became able to let go of the experience and move on with his life when he realized that he had a deep and abiding belief in the power of individuals to help others. He now runs a food bank for injured workers and their families, has established a memorial for deceased workers and actively counsels injured people that the system has "thrown on the scrap heap of life". His own life is now full and fulfilling, and when there are dark days they are quickly lightened by the recollection of the importance of his work.

Reframer skills

Sometimes the negative message from the world can be tamed if there is a way of understanding what is happening that makes sense of the world. For people relying on reframer skills, the ability to find an explanation or a lesson to be learned puts them comfortably back in control of the situation. The externally focused reframer will replay an unpleasant event for the purpose of finding a meaning. Once having found a "silver lining" to the cloud or a lesson from the event, the inner voice is quieted and the event can be safely filed away without a disruption of the reframer's sense of self or place in the world.

---

[7] Adverse childhood events are probably so devastating because of the betrayal of the externally focused belief that the parent will protect the child from harm.

The internal manifestation of reframing is optimism. Stability is achieved by focusing on the best of people and the unfolding of events in the face of adversity.[8] When something unpleasant happens, the internal reframe holds onto the underlying principle and creates an explanation that explains the event as an aberration. If an optimist is disappointed by someone's behavior, they can quiet the concern by defining saying that "people are still good, but that person must be having a bad day". With the explanation in place, the belief system remains and the optimist's sense of control over his or her life is unshaken.[9]

Margret was having a meeting with several colleagues when she mentioned the point of view of the claimant with regard to an action. One of the colleagues virtually yelled the word "Irrelevant!" in response. A few moments later the Margaret tried to raise the issue again and got the same vehement response. She lost sleep that night, playing the scene over and over in her mind, trying to understand what had gone wrong. When she realized that she had inadvertently triggered in the colleague a set of established associations that included significant anger she was able to get to sleep and seek help for the colleague the next day. It turned out the colleague had herself been previously injured and harbored a lot of anger at the treatment she had received. Margaret was able to regain her personal control in the situation and quiet her reaction to the confrontation.

Achiever skills

The Achiever uses constant activity to remove the opportunity for negative messages to be considered. While engaged in activity, planning or preparation, the achiever can push out concerns about success, consequences and appropriateness. The externally focused achiever may fill their time with work, study, parental duties, activities or a combination of them. The single mom, who works two jobs, takes care of her children and studies in the evening simply leaves no room or energy for rumination about anything but the tasks at hand.

---

[8] The various "positive psychology" approaches to resilience fit into this category.

[9] You will have noticed that the behaviours of the externally focused reframer and the externally focused believer look very similar. There are practical differences between them. The reframer is focused on an overriding principle to maintain a sense of control, where the believer is focused on an external entity or mission. The reframer uses the creation of an exception to the principle as an explanation, where the perceptual filters of the believer provide comfort through confirmation. Both deep faith and optimism can be hard to achieve.

Achievers who are internally focused tend to set aside their concerns when engaged in activities that have been determined by primarily internal motivations. People "driven" to achieve their own goals, such as amateur musicians, sportsmen, and craftsmen can ignore their concerns and regain a measure of their sense of control while engaged in their activity. People who have retired from working life are told to "get a hobby" to deal with their sense of lost purpose.

There was a female bodybuilder in the news recently. She didn't start out with bodybuilding in mind. In fact, she was an injured worker who detested the gym. Her injury required physical rehabilitation after healing and the gym her therapist utilized had a strong emphasis on physical development. The social situation got her to try to fit in. One day she realized that the "hated" exercises had resulted in a positive change in her physical appearance. Suddenly, the gym sessions were more rewarding and became a motivating force in her life. Her sense of doubts and desperation concerning returning to work disappeared as she threw herself into her exercise and the social aspect of gym participation. After recovery and return to work she continued her new-found routine and eventually became a competitive bodybuilder at a sufficiently high level to attract media attention.

Distancer skills

The distancer is able to avoid the negative messages of the inner voice by selectively focusing on something else. The quieting of the inner voice, relative to the object of focus, creates a "breathing space" allowing the restoration of a sense of control. By creating this "time out" the distancer is able to get perspective and act going forward in a more considered manner.

A distancer focused on inner resources presents an outwardly calm image, although he or she may be expending significant effort in maintaining the state. Images of the Zen master, or the yoga practitioner in the *savasana* pose come to mind. The practice of mindfulness meditation is a more common manifestation of internal distancer practice[10]. Internal visualisation practices used by athletes and others also fit into this category, and they are

---

[10] There are elements of positive psychology in the approach as well.

shown to have to positively impact performance, suggesting that visualisation is a form of neuroplastic repetition. In this way, the practice of internal distancer techniques also serves to train new pathways and engrain new behaviours.

The external distancer uses outward focus to achieve the same sort of result. Computerized video games are designed to provide a focus for attention, and are addictive precisely because they allow the creation of space between the person and the messages that self-talk is attempting to deliver. More benign forms of external distancing include many hobbies and activities such as golf, gardening and fishing.

I moved from the American southwest to a climate that could best be described as "maritime" with long periods of cloudy, cool and wet weather. After a period, I developed signs of seasonal affective disorder, with mood alterations during the extended winter months. One day I stopped and noticed a particularly beautiful landscape and took a few minutes to appreciate it. I noticed that my mood was lifted, and that the effect lasted the entire day. After practice, I learned that "stopping to smell the roses" was more than just a saying. I practiced it enough to make it part of my resilience toolbox and the seasonal mood swings can be easily tamed when they occur by using that technique.

Now, what do we do with it?

The key to understanding individual resilience skill development is that people's individual experience and personality organization gives them a natural "preference" for some styles over others. Telling Margaret that she needs to do mindfulness meditation is unlikely to be helpful. She considers herself too busy to fit it in, and she isn't likely to really try. It's not bad advice, but it's bad advice for Margaret, because she will resist practicing the technique to the extent necessary to create the facilitated neural networks that make it a viable approach to increased resilience.

You'll detect a conflict between the resilience skill offered and the individual's resilience skill preferences by their responses. Margaret might just say that she's too busy. William will react to positive psychological approaches by saying that it's too "touchy-feely". Some will simply deny that they need additional help. What is being expressed is discomfort with the

13

approach being offered. One size truly does not fit all when it comes to resilience skills training.

The trick then is to individualize the approaches offered and give the individual something comfortable enough to practice and internalize. Once the preferences of the individual are known, training for specific skills can be offered that builds their "resilience toolbox". For most of us, life will have taught us one or more skills fairly well. The trick then is to pick a secondary preference amongst skill sets and build that approach. Then, when life overwhelms our usual defenses, we have a developed skill to fall back upon. Development of these backup resilience skills develops the "defense in depth" that we value when observing highly resilient people.

Fortunately, it is fairly easy to ask a few questions and get a good indication for the current preferences an individual has amongst resilience skills. With that knowledge, it's much easier to offer William or Margaret a skill building program that is more likely to be successful because it is chosen to work within their existing preferences.

That isn't to say it's easy or automatic. A new skill must be practiced, with focused attention, on a consistent basis over time to be internalized. Making new resilience habits is no harder, and no easier, than the development of any other habit or skill. It takes practice, and commitment to learn to recognize the signs of failure of normal resilience techniques and to automatically reach for the appropriate skill set for the circumstance.

Using it to change outcomes

Resilience skill development can be utilized in many ways. It could be an intervention for flagged workers like William, with the aim of preventing secondary psychological overlay on the original injury that may turn it into an expensive long tail claim. If William has more skills in his resilience toolbox, he's less likely to be overwhelmed by the process, and less likely to become long-term disabled.

Since the experience of processed in workers' compensation systems is highly stressful for claims managers as well, it could be used as a prophylactic intervention to minimize burnout, turnover and presenteeism. Moreover, when Margaret is less stressed, she's less likely to "inflict" her notions of what someone "ought" to do on the injured workers in her

portfolio.[11] She will be better able to appreciate the idea that different workers have different resilience skills and different ways of coping in the world. She will be more effective because she will be better able to take each claimant as she finds them and respond appropriately.

In workers' compensation system design, we can use the understanding of how resilience is overwhelmed to design systems that create less secondary psychological overlay to the original injury.

Achieving balance

Resilience isn't a universally positive skill. We have words for unhelpful resilience – "stubbornness", "obsessiveness" and "lack of insight". When an injured worker is consistently misinterpreting the attempts of the system to provide high quality and necessary care, they are tenaciously holding on to their beliefs and drowning out the positive messages that the workers' compensation system is trying to send. The writer of long detailed complaining emails may be using achiever techniques. The belligerent claimant may be reframing what was presented to them in a way that "twists the words" of the claims manager. The disengaged claimant may be using distancer techniques.

Disability can become a way of life and a new identity to replace the identity that the former worker lost. The probability of return to work diminishes as neuroplastic changes replace the habit of being a worker with the habits associated with a new reality. Resilience in such instances may become an active blocker to efforts to resumption of the worker's former identity.

Fortunately the brain engages in what the neuroscientists call "competitive neuroplasticity"[v]. That is, an old engrained pattern can be recycled and a more adaptive response engrained in its place. This is the equivalent of breaking an old habit and replacing it with something better. The old behavior becomes less automatic as a new behavior becomes increasingly engrained and takes its place. It's not easy and takes focused

---

[11] Many thanks to Renee Harley, a senior injury management specialist with a large personal injury insurer, for the insightful observation that claims managers may project their own personal resilience styles on claimants, resulting in unnecessary misinterpretation, misunderstandings and friction.

15

attention and practice over time.[vi] The point is, that practice makes perfect, even in giving up old maladaptive behaviors.

The point is that there is hope, even for long term claimants that have solidified networks of association that hold them in a state of needless disability. The science is there. We just have to break through our old habits of thought and learn to use it.

A free Resilience Styles preference profiling tool can be found at:

> http://www.uncommonapproach.com/resilience

---

[i] "Four factors that influence resilience in the workplace"
https://www.comcare.gov.au/promoting/Creating_mentally_healthy_workplaces/building_a_resilient_workforce/four_factors_that_influence_resilience_in_the_workplace

[ii] John Meiklejohn , et. al., Integrating Mindfulness Training into K-12 Education: Fostering the Resilience of Teachers and Students, Mindfulness, V3, I 4 pp 291-307; Tom Jacobs, Evidence Mounts that Mindfulness Breeds Resilience, Greater Good in Action,
http://greatergood.berkeley.edu/article/item/evidence_mounts_that_mindfulness_breeds_resilience

[iii] Daniel Kahneman, Thinking Fast and Slow, Macmillan. ISBN 978-1-4299-6935-2., 2011

[iv] Norman Doidge, The Brain's Way of Healing – Stories of Remarkable Recoveries and Discoveries from the Frontiers of Neuroplasticity, Viking Press, ISBN-13: 978-0670025503
ISBN-10: 067002550X, 2015.

[v] Dodge, The Brain's Way of Healing, *supra*.

[vi] Norman Doidge, The Brain that Changes Itself - Stories of Personal Triumph from the Frontiers of Brain Science, Viking Press., ISBN 978-0-670-03830-5 (hc.) / ISBN 978-0-14-311310-2 (pbk.), 2007.