

The Circle of Courage and Positive Psychology

Larry K. Brendtro, Martin Brokenleg, and Steve Van Bockern

The Circle of Courage identifies four universal needs of all children: Belonging, Mastery, Independence, and Generosity. When these needs are met, children grow and thrive. But when these growth needs are frustrated, multiple problems follow. The Circle of Courage defines problems of youth in terms of strengths and developmental needs. These principles are grounded in resilience science and positive psychology. The Circle of Courage provides a unifying theme to various strength-based interventions. Articles in this issue address strategies for meeting goals of the Circle of Courage.

From Deficits to Strengths

We can either smother the divine fire of youth, or we may feed it.
– Jane Addams (1860-1935)

In the early twentieth century, pioneers in youth work had a positive outlook on youth. They believed that all young people had potential for greatness, and it was the job of adults to cultivate this youthful spirit. But by mid-century, this optimism faded, and increasingly “professionalized” approaches focused on deficit and deviance. The drumbeat of the media also caused the public to take a very pessimistic view of youth.

Today there are signs that this early spirit of optimism is being revived. Traditional approaches are being transformed by a new *positive psychology*.¹ The focus is shifting from fixing flaws to building strengths (Peterson & Seligman, 2004). Strengths enable one to cope with difficult life challenges, a common definition of resilience. Even the concept of intelligence is being reformatted to a strengths perspective. Abandoning the bell-shaped curve notion of talent, practical intelligence is defined as the ability to meet pro-social goals by developing one's strengths and overcoming limitations (Sternberg,

2000). By that definition, every child can be remarkably intelligent and resilient.

Resilience is the ability to bounce back in spite of adversity. The classic resilience studies tracked children on their journey from childhood into adulthood. For example, for ten years British resilience expert Michael Rutter (1987) followed children with disrupted attachments from inner city London and the Isle of Wight. American researchers Werner and Smith (1992) produced an even more expansive multi-decade study of children at risk from the Hawaiian island of Kauai. Resilience science addresses the most important research question one can pose: *Over the long term, what experiences and pathways lead to positive outcomes?*

Initially many researchers thought resilience was a personality trait of a few “invulnerable” super-kids who could leap life's barriers in an effortless bound. Instead, the emerging view is that resilience is programmed into our DNA. We all are descendents of ancestors who overcame every manner of hardship and adversity. Children from terrible backgrounds can develop strengths to alter their life pathways.

In the words of one resilience expert, “Given sufficient support humans can defy the odds and become agents of history” (Ramphel, 2002, p.123).

Creating Circles of Courage

*He drew a circle to shut me out –
Heretic, rebel, a thing to flout.
But love and I had the wit to win:
We drew a circle that took him in.*
– Edwin Markham in “Outwitted”

A pilot has hundreds of instruments but, in times of crisis, is trained to focus on a few critical indicators of a plane’s condition. A physician has available thousands of tests to diagnose disease but begins with any patient by taking the “vital signs.” In like manner, the Circle of Courage marks the critical indicators, the vital signs for positive youth development. However complex our curriculum or counseling systems, we must never lose sight of basics: All children need opportunities to experience Belonging, Mastery, Independence, and Generosity (Brendtro, Brokenleg, & Van Bockern, 2002). We call these “universal growth needs.”

The Circle of Courage is depicted by Lakota artist George Blue Bird in scenes from the cover of this journal. Many traditional tribal communities were better equipped to meet the growth needs of children than is modern Western society. In such societies, children were considered to be “sacred beings” (Lakota) or “gifts of God” (Maori). Extended family kinship systems ensured that every child had many mothers, fathers, and grandparents. Older responsible peers aided in child rearing. Elders showed great respect to children who in turn reciprocated this treatment.

The Circle of Courage not only reflects traditional child caring wisdom but is attuned to the science of positive youth development. Elsewhere we have reviewed the evidence base of the Circle of Courage drawn from such fields as resilience science and the classic studies of self-worth in children (Brendtro & Larson, 2006). These principles are summarized in Table 1 on page 132.

In tribal and kinship cultures, natural social relationships insured that these growth needs would be met. But in go-it-alone modern society, the youth development infrastructure has collapsed (Benson, 1997). Using a Circle of Courage metaphor, many of today’s youngsters have “broken circles.”

- Instead of *Belonging*, fractured families, unfriendly schools, and rejecting peers can cause a sense of

alienation. Children alienated from positive adults and peers are emotionally and morally adrift.

- Instead of *Mastery*, schools play a competitive zero-sum game by enthroning “winners” and discarding “losers.” Children who are not bonded to school fail to develop their full potential.
- Instead of *Independence*, youth are deprived of opportunities to make responsible decisions. As African-American educator W. E. B. DuBois said, only responsibility teaches responsibility.
- Instead of *Generosity*, children are reared in a world that equates wealth with worth. Preoccupied with self, they fail to develop their natural abilities to show care and contribute to others.

In the fifteen years since we first described the Circle of Courage, nobody has come forth to challenge the basic assumption that all children share these needs. We have found no fans for the opposite traits—alienation, failure, irresponsibility, or selfishness. Because the Circle of Courage is based on universal needs, it expresses what philosopher Mortimer Adler calls “absolute values.” All persons are genetically programmed for these needs. Thus, the Circle of Courage applies with any population.

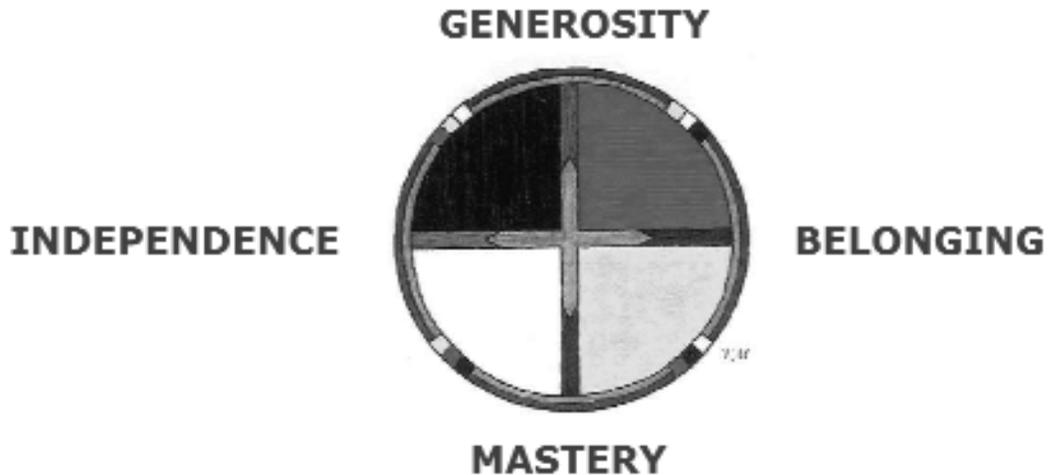
Martin Brokenleg met a teacher in Canada who taught her first grade pupils about the Circle of Courage. In this class, one enthusiastic learner constantly raised his hand or blurted out answers to questions. The teacher took him aside and kindly explained he would have to learn to give other classmates their turn in responding. “Oh, it’s a generosity thing!” he exclaimed. Even small children can understand this wisdom.

Many have noted that the power of the Circle of Courage is that it is simple without being simplistic. The human brain prefers ideas that can be understood and shared. These principles transcend professional disciplines and treatment models. Perhaps most uniquely, these beliefs are also embraced by young persons. You do not have to fight with kids to convince them they should belong, master, be independent, and contribute to others. We are endowed with these motivations; they are programmed into human genetics and they are the reason the human race has survived.

In another publication, we reviewed the evidence base of the Circle of Courage. We noted that these

Table 1

Circle of Courage Research Foundations



Resilience Research	The Circle of Courage	Self-Worth Research
<p>Attachment Motivation to affiliate and form social bonds</p> <p>Achievement Motivation to work hard and attain excellence</p> <p>Autonomy Motivation to manage self and exert influence</p> <p>Altruism Motivation to help and be of service to others</p>	<p>Belonging Opportunity to establish trusting connections</p> <p>Mastery Opportunity to solve problems and meet goals</p> <p>Independence Opportunity to build self control and responsibility</p> <p>Generosity Opportunity to show respect and concern</p>	<p>Significance The individual believes "I am appreciated."</p> <p>Competence The individual believes "I can solve problems."</p> <p>Power The individual believes "I set my life pathway."</p> <p>Virtue The individual believes "My life has purpose."</p>

principles are validated by a large body of resilience science (Brendtro & Larson, 2006) as well as classic studies of self-worth in children (Coopersmith, 1967). This is demonstrated in Table 1. The challenge for the future is to evaluate the degree to which our educational and treatment interventions put these principles into practice.

A New “Gold Standard” for Research

Not everything important can be measured, and not everything that can be measured is important.

– Albert Einstein

The popularity of interventions does not attest to their power to change troubled lives—for example, the public fascination with boot camps and brat camps. But even supposedly scientific data can be skewed. As programs compete for funding, there is growing pressure on all practitioners to show that their approaches are effective. Authentic science seeks truth; but science can be distorted for personal or political purposes. Thus, advocates of certain interventions have invested greatly in gathering, marketing (and sometimes spinning) research studies to support a particular viewpoint.

It is foolish to use interventions that lack evidence, but there are many kinds of evidence. Not all “evidence” is equal. Many programs operate on folk psychology or common sense. In another bit of wit and wisdom, Einstein warned that common sense is the collection of prejudices acquired by age 18. The purpose of professional training in our field is to give new ways of thinking and acting that are not available to the untrained person. This is particularly critical in work with troubled children who are skilled at reverse behavior modification—turning kindly adults into angry adversaries.

Formal evidence about program efficacy is acquired by *qualitative* and *quantitative* research. Many creative research strategies are advancing our understanding of the science of best practices. For example, Strength Based Services International has standardized an environmental survey instrument that shows the climate of educational and treatment programs.² Youth provide data on the nature of the peer climate and their relationships to adults. Staff

members provide data on the nature of the team-work climate and their relationships to program leaders. Families provide data on satisfaction with staff, program, and progress of their youngster. In another series of studies, we are evaluating how Circle of Courage training changes staff perceptions of problems and confidence in dealing with challenging students.

All of this is too complicated for bureaucratic bean counters who seek standardized ways to stamp their approval or disapproval on programs. It has become trendy to declare the “gold-standard” of effective research to be randomized clinical trials like those used by the drug industry. In one fell swoop, all other ways of knowing are dismissed. On closer inspection, this highly touted research scheme has many shortcomings (Penston, 2003). A Harvard researcher calls the gold standard the “golden calf” of medicine (Kaptchuk, 2001).

Programs serving problem children and teens need to develop their own systems for effective research and evaluation (Dishion & Kavanagh, 2003). Educational and youth development professionals need to expand research initiatives, but they should not be coerced to mimic methods from medical drug trials. Still, some authorities prescribe this yellow-brick road in order to attain the preferred status of “blue print interventions” to coin another colorful Newspeak term.³ The use of such linguistic puffery perverts objective science into political ends.

We already have a “gold standard” for measuring program effectiveness, and it is called the science of positive youth development. These research-validated principles must guide all successful efforts to build strength and resilience in children. The test of any effective intervention is whether it contributes to positive growth. Because all children have inborn needs for attachment, achievement, autonomy, and altruism, our education and treatment models must address these needs. Otherwise they fail.

The Circle of Courage captures what Wozner (1985) called the “unifying theme” which exists in powerful reclaiming environments. The Circle focuses attention on the critical factors by providing a big picture or “gestalt” of what all children need (Meyen, Vergason, & Whelan, 1998). By highlighting universal goals of intervention, it transcends differences in cultures, theories and program models. The Circle of

Courage provides an anchor of enduring certainty in a chaotic post-modern culture (Kauffman, 2000).

Diverse Methods for Universal Needs

The way one defines a problem determines in large measure the strategies that can be used to solve it.
– Nicholas Hobbs

Traditional definitions of the problems of troubled children operated from a deficit perspective. There is evidence that all of the major theories of problem behavior are being reshaped by principles of positive psychology.

In recent decades there have been five major approaches to work with troubled children.⁴ These are listed below. For a quick popularity poll, they are rank-ordered by the number of internet sites that appear when “googling” the word “children” along with the italicized term:

1. **Behavioral:** Problems are *behavioral disorders*. (270,000)
2. **Psychodynamic:** Problems are *emotional disturbance*. (131,000)
3. **Neuroscience:** Problems are *brain disorders*. (80,000)
4. **Ecological:** Problems are *dis-ease* in the ecology. (43,200)
5. **Sociological:** Problems are *social maladjustment*. (9,420)

This cursory web search shows a huge literature trying to explain childhood social, emotional, and behavioral problems. But, as Hobbs suggested, the way one defines problems limits solutions. In fact all of these labels are pessimistic. Numbers 1-3 focus on deficits in the child, while 4 and 5 describe deficits in the environment. But there is a new mindset on the scene. If we google *resilience* and *children*, we get over 700,000 hits, more than all the foregoing pathological labels combined. We are in the midst of a resilience revolution.

In Circle of Courage terms, effective strength-based interventions use strategies to enhance Belonging, Mastery, Independence, and Generosity. Below we

briefly note how the key theories about troubled children are moving from a preoccupation with deficit towards a focus on strengths.

1. Behavioral approaches use learning principles to teach prosocial behaviors.

Early behavior modification focused narrowly on elimination of target deviant behaviors. At times, this “outsider” view blocked awareness of what was happening with the inner child. A leader in broadening the behavioral perspective was Arnold Goldstein. He contended that lasting change requires methods that are *multilevel*, directed both at changing the youth and the system. He also called for *multimodal* methods that blend cognitive, affective, and behavioral methods. Goldstein developed *The Prepare Curriculum* for teaching prosocial competence. Also, his *Aggression Replacement Training* directs a triple punch with components for teaching social skills, anger control, and moral reasoning.⁵ Another psychoeducational approach with behavioral roots is the Teaching Family Model pioneered at Girls and Boys Town. In a recent refinement, it targets relationships, skills, empowerment, and spiritual growth (Peter, 1999). These behaviorally based models revolve around strength-based goals. Another current shift in behavioral approaches is from coercion to building positive behavior supports.

2. Psychodynamic approaches use positive interpersonal bonds to foster growth.

Early methods focused on inner conflict and pathology as “depth therapy” and sought to uncover early childhood traumas. Modifying this model for children was Fritz Redl (1902-1988) who worked with August Aichhorn and Anna Freud in Austria. They saw love as the primary unmet need of troubled children. At the onset of World War II, Redl emigrated to North America. Teaming with David Wineman and William Morse at the University of Michigan Fresh Air Camp, they trained a generation of graduate students to work with aggressive children. The co-editors of this journal, Larry Brendtro and Nicholas Long were both products of this tradition. Long also worked with Redl at the National Institute of Mental Health. He and colleagues later developed the *Life Space Crisis Intervention* model (Long, Wood, & Fescer, 2001). Thousands of professionals are trained each year in these advanced therapeutic strategies. LSCI blends cognitive, emotional, behavioral, and developmental approaches and uses

problems to build strengths in youth. Every issue of this journal features an application of this approach.

3. Neuroscience approaches explore ways to restore healthy brain functioning.

Traditional biophysical methods focus on administering psychotropic medications for what are seen as brain pathology. Often the goal is to “stabilize” persons in crisis and “manage” medications rather than create transformational change. Perhaps the most exciting advance in neuroscience has been the onset of brain scan technology. This has given new insight into how the brain really works. We are learning much about the effects of positive connections as well as trauma. While this field still concentrates on pathology, there are welcome course corrections. Even if one can manipulate brain chemistry and calm mood with medications, lasting change seems to require reprogramming the brain with experience. This requires corrective interpersonal attachments, communication, and the opportunity to learn new strategies of emotional control and coping behavior. Knowledge from neuroscience can just as readily be used to understand positive processes like attachment and altruism as to investigate pathology. Promising programs develop interpersonal bonds and provide corrective experiences to “rewire” brain pathways of traumatized children (Stein & Kendall, 2004). Another frontier in neuroscience is exploring how nurturing relationships contribute to healthy development (Taylor, 2002). The *Response Ability Pathways* curriculum based on the Circle of Courage uses this new neuroscience in developing effective experiential interventions. Beginning in this issue, a regular feature by psychologist Howard Bath of Australia will use advances in neuroscience to inform practices with troubled children.

4. Sociological approaches enlist peer groups to teach prosocial behavior.

These programs build on research showing that delinquent youth normally support antisocial thinking, values, and behavior. This negative influence is called *peer deviance training* and is responsible for the negative cultures that are common in programs that segregate troubled kids from more prosocial peers (Dishion, McCord, & Poulin, 1999). Put two Boy Scouts together and they compare merit badges. Put two delinquents together and they brag about criminal prowess. Of course, the most direct solution would be to find positive peer groups for all and not

segregate so-called “antisocial” youth. But even public schools can become breeding grounds for negative peer cultures. Only in modern society do we find so many youth who are emotionally dependent on peers rather than elders. This counters the history of the human race where children modeled caring adults and more mature, responsible peers (Neufeld & Maté, 2004). The solution to peer dependency is two-fold. First, we bond children and youth to caring adults. Second, we develop positive peer cultures. Current peer treatment programs blend group methods with other models described above.⁶ Programs that successfully use positive peer group methods are able to transform negative peer influence among delinquent youth and create safe environments that foster attachment, achievement, autonomy, and altruism (Gold & Osgood, 1992).

5. Ecological methods surround youth with environments that meet their needs.

This most eclectic of all models borrows freely from the other major treatment approaches. Model programs blend positive peer group methods, life space crisis intervention, family support, and various behavioral strategies. The leader in this approach was Nicholas Hobbs (1918-1983) who created the Re-ED model. He was strongly influenced by European and French-Canadian *educateurs*. He argued that disturbance was not a symptom of pathology in the child but a malfunction in human ecosystems (Hobbs, 1994). His 12 key principles cover all of the goals in the Circle of Courage. Initial research on this model was very positive, but the advent of the Viet Nam War truncated funding. Growing mainly in private treatment settings, Re-ED is now found in a full range of educational and treatment programs. The American Re-Education Association provides national conferences and training in this model and is publishing a book on Re-ED outcomes (Cantrell & Cantrell, in press). In 2002, a special issue of this journal featured the Re-ED model.⁷

The articles in this issue of *Reclaiming Children and Youth* present a full range of promising programs that address Circle of Courage principles. When we are clear about our goals, then a wide range of specialized methods can be brought to bear. But putting principles of positive psychology into practice requires a transformation. We seek more than incremental change, one more micro-skill. Instead we

strive to transform personal mindsets, program practices, and public policies. Welcome to the revolution.

Larry K. Brendtro, PhD, is president of Reclaiming Youth International and former president of Starr Commonwealth, where he continues to serve as dean of research and training. His resides in the Black Hills of South Dakota.

Martin Brokenleg, EdD, is director of the Native Ministries Program and professor of First Nations Ministry and Theology at the Vancouver School of Theology, University of British Columbia, Canada. He is an enrolled member of the Rosebud Sioux Tribe.

Steve Van Bockern, EdD, is professor of Education at Augustana College, Sioux Falls, South Dakota. He has broad experience as a teacher and principal and consults widely with schools, courts, and treatment programs serving youth at risk.

The authors are co-founders of Reclaiming Youth International and have trained professionals in the Circle of Courage model world-wide. They may be contacted at courage@reclaiming.com

REFERENCES

- Benson, P. (1997). *All kids are our kids*. San Francisco: Jossey-Bass.
- Brendtro, L., Brokenleg, M., & Van Bockern, S. (2002). *Reclaiming youth at risk* (Rev. ed.). Bloomington, IN: National Educational Service.
- Brendtro, L., & Larson, S. (2006). *The resilience revolution*. Bloomington, IN: National Educational Service.
- Cantrell, R., & Cantrell, M. L. (in press). *Helping troubled and troubling children: Continuing evidence for Re-ED's ecological approach*. Westerville, OH: AREA.
- Dishion, T., McCord, J., & Poulin, E. (1999). When interventions harm: Peer groups and problem behavior. *American Psychologist*, 54(9), 755-764.
- Dishion, T., & Kavanagh, K. (2003). *Intervening in adolescent problem behavior*. New York: Guilford Press.
- Gibbs, J., Potter, G., & Goldstein, A. (1995). *The EQUIP program: Teaching youth to think and act responsibly through a peer helping approach*. Champaign, IL: Research Press.
- Gold, M., & Osgood, D. W. (1992). *Personality and peer influence in juvenile corrections*. Westport, CT: Greenwood Press.
- Hobbs, N. (1994). *The troubled and troubling child*. Cleveland, OH: AREA.
- Kaptchuk, T. J. (2001). The double-blind, randomized, placebo-controlled trial: Gold standard or golden calf? *Journal of Clinical Epidemiology*, 54(6), 541-549.
- Kauffman, J. M. (2000). Future directions with troubled children. *Reclaiming Children and Youth*, 9(2), 119-124.
- Knitzer, J., Steinberg, Z., & Fleisch, B. (1990). *At the school-house door*. New York: Bank Street College of Education.
- Long, N., Wood, M., & Fecser, F. (2001). *Life space crisis intervention*. Austin, TX: PRO-ED.
- Meyen, E., Bergason, G., & Whelan, R. (Eds.). (1998). *Educating students with mild disabilities*. Denver: Love Publishing Company.

- Morse, W., Cutler, R., & Fink, A. (1964). *Public school classes for emotionally handicapped children*. Washington, DC: Council for Exceptional Children.
- Neufeld, G., & Maté, G. (2004). *Hold on to your kids: Why parents need to matter more than peers*. Toronto: Vintage Canada.
- Penston, J. (2003). *Fiction and fantasy in medical research: The large-scale randomised trial*. London: The London Press.
- Peterson, C., & Seligman, M. P. (2004). *Character strengths and virtues: A handbook and classification*. New York: Oxford University Press.
- Peter, V. (1999). *What makes Boys Town succeed?* Boys Town, NE: Boys Town Press.
- Ramphele, M. (2002). *Steering by the stars: Being young in South Africa*. Cape Town: Tafelberg Publishers.
- Rhodes, W. C., & Tracel, M. L. (1985). *A study of child variance: Vol. 1 conceptual models*. Ann Arbor: University of Michigan Press.
- Rutter, M. (1985). Resilience in the face of adversity. *British Journal of Psychiatry*, 17, 598-611.
- Stein, P., & Kendall, J. (2004). *Psychological trauma and the developing brain: Neurologically based interventions for troubled children*. New York: Haworth.
- Taylor, S. (2002). *The tending instinct*. New York: Henry Holt and Company.
- Sternberg, R. (2000). The concept of intelligence. In R. J. Sternberg (Ed.), *The handbook of intelligence* (pp. 3-15). Cambridge, MA: Yale University Press.
- Vorrath, H., & Brendtro, L. (1985). *Positive peer culture*. New York: Walter du Gruyter.
- Werner, E., & Smith, R. M. (1992). *Overcoming the odds: High risk children from birth to adulthood*. Ithaca, NY: Cornell University Press.
- Whittaker, J. (1980). *Caring for troubled children*. San Francisco: Jossey-Bass.
- Wozner, Y. (1985). Institution as community. *Child & Youth Services*, 7, 71-90.

REFERENCE NOTES

¹This movement was launched by the American Psychological Association during the presidency of Martin P. Seligman, noted optimism researcher. See Peterson & Seligman, 2004.

²For information, contact the Department of Research and Training, Starr Commonwealth, Albion, Michigan. Phone 1-517-629-5594.

³The U.S. Department of Justice sponsors the Blueprints for Violence Prevention Initiative, which currently lists 600 programs that meet muster. But jumping research hoops does not prove one has a powerful program. As in the drug industry, there is great financial incentive to gain formal approval, which motivates manipulation of research design.

⁴For example, see Morse, Cutler, & Fink, 1967; Rhodes & Tracy, 1974; Whittaker, 1980; Knitzer, Steinberg, & Fleisch, 1990.

⁵A special issue of this journal on Aggression Replacement Training was edited by A. Mark Amendola and Robert W. Oliver. See *Reclaiming Children & Youth*, 12(3), 2003.

⁶See Vorrath & Brendtro (1985) and Gibbs, Potter, & Goldstein (1995).

⁷See Re-Education with troubling youth, *Reclaiming Children & Youth*, 11(2), 2002.