**RESILIENCE**

A World Expert Discusses What Research and Personal Experience Have Taught Him

Dennis S. Charney, M.D.

Dean, *Icahn School of Medicine at Mount Sinai*President for Academic Affairs, *Mount Sinai Health System*Professor of Psychiatry, Neuroscience and Pharmacological Sciences, *Mount Sinai School of Medicine*

BBRF Scientific Council Member Emeritus  
2019 BBRF Colvin Prizewinner for Outstanding Achievement in Mood Disorders Research

*We all face adversity at different times in our life, and some of us, unfortunately, may experience serious trauma. How do we develop resilience in order to better deal with these situations? Recently, I had the opportunity to discuss this important subject with Dr. Dennis Charney. Dr. Charney is a world expert in the neurobiology and treatment of mood and anxiety disorders, making fundamental contributions to the understanding of the causes of human anxiety, fear, depression, and resilience, and the discovery of new treatments for mood and anxiety disorders. This Q&A is adapted from episode 12 of the 6th season of my “Healthy Minds” series on PBS, which is available online.*– **Jeffrey Borenstein, M.D.**

**Dr. Charney, what is resilience?**

There are a couple of definitions of resilience. One is if you’ve been traumatized in some way and you develop post-traumatic stress disorder (PTSD), or depression, or other problems, but you recover—that’s resilience. Another definition is that you’ve been traumatized or experienced a lot of stress in your life but you don’t develop issues related to depression, or post-traumatic stress disorder, or things like that.  
Those are two definitions that are used commonly.

**You’ve studied resilience. Tell us about the research you’ve done and what you found out about it.**

This has been a team effort. My close colleague, Dr. Steve Southwick, has been working with me for 30 years in studying resilience. We started out studying the causes of depression and PTSD to understand those conditions and develop new treatments. We felt that if we could understand resilience—why some people are able to rise above difficulties in their life—that it might help us understand the conditions that I just mentioned

and develop the new treatments. We decided to study resilient people, and along the way, we got to meet incredible people that we admired, who had changed their own lives.

**What’s the secret sauce? What did you find out about these people who are so resilient?**

Let me give you some examples of the people we studied. POWs from Vietnam, Navy Seals, members of the Special Operations team in the U.S. Army, victims of natural disasters like earthquake in Pakistan, individuals that had to face poverty, or physical and sexual abuse, even people who

were born with congenital physical abnormalities and rose above them. We started with a blank slate. We wanted to learn from those people. How did they do it? How do they experience growth based on their trauma? And common factors ultimately came to light in our research.

**Tell us about some of those factors that you discovered.**

Ultimately, we came up with roughly 10 factors, and we concluded one major thing, and that is: while everybody is born with a certain level of resilience, you can make yourself more resilient. Genes are not destiny. You can, essentially, train to become a more resilient person.

**There are steps people can take to become more resilient in the face of adversity.**

Absolutely. Here are some of the factors. One is optimism, positive attitude. Now, that might seem obvious. Some people seem to be born with the glass half-full, but others are not. You can work at helping people be more optimistic, and it’s not what you might call “Pollyanna” optimism. That is optimism that is not justified. You need to develop other skills to be optimistic in the face of serious stress or trauma in your life. But, ultimately, having the ability to be optimistic and know that you could overcome what you’re facing is critical.

**So, being realistic about the circumstances—not Pollyanna, but realistic; but also being able to be optimistic given whatever the circumstances are.**

And the skills that you have developed to be able to handle those obstacles in your life. A good term is what you just said, *realistic optimism*. And in fact, among the most courageous of the POWs was Jim Stockdale. He ultimately won the Medal of Honor based on heroism as a POW. A term has been coined called the Stockdale Paradox related to optimism. And that means, on the one hand, you do have to face the brutal facts that you’re dealing with. On the other hand, you have to feel that you will prevail. American soldiers being taken prisoner in North Vietnam. Dr. Charney learned from POWs the importance of being realistically optimistic and seeking support.

That is the kind of optimism that really characterized resilience. Another element that is really important is role models, to learn from people who’ve gone through what you’re going through. You can find role models in your personal life. They can be a parent or a sibling. It might be somebody who’s gone through the same thing who you’ve become friendly with. They provide you a roadmap on how to overcome what you’re facing. Role models are extremely important, and in many respects, that’s where things start in becoming resilient.

**So, having someone that you can look to—the path that they took in response to their adversity.**

Yes.

**And it inspires you that, well, maybe I could do that too.**

Very important. We found that over and over again. A couple of other things. Having a moral compass, a set of beliefs that very few things can shatter. For some people, that’s religion in the traditional sense, having a strong faith, going to church or synagogue, getting support from that faith, but also the people you meet along the way. But in other people, it wasn’t traditional faith but it was a set of beliefs about who you are, what you stand for, and that you get the feeling that “I might be traumatized, but that doesn’t change who I am as a person. I’m still that same person.” That’s very important: moral compass.

Another very important factor is a support system—people who really care about you who are there during the toughest times, to provide light at the end of the tunnel. You can’t go through it alone. You need a safety net. I’ll give you one example from the POWs. We interviewed maybe 40 or so of the POWs from Vietnam who were held in prison in Hanoi for 5, 6, 7, even 8 years, and many of them were in solitary confinement. That was the most stressful part of being a POW. They developed a “tap” code in which they could communicate to each other through the wall about what was happening to them. And the way the tap code worked is: there were five rows of five letters. If you tapped once, that was row one, A, B, C, D, E. And then, if you tap three times after that, that’d be the third letter in that row.

They used a tap code because they weren’t even allowed to talk. They tapped through the wall, and many times communicated very intimate things about what they were feeling, about their lives, about their families. And they told us over and over again that without that tap code, they wouldn’t have survived. The analogy for all of us is everybody needs a tap code and everybody needs that support.

**Tell us some of the other key steps towards resilience.**

Another step is to reappraise what happened to you, and put it in the context of your life so you can derive meaning from it. For example, if, unfortunately, you’re the victim of a rape. That’s not about you. That’s not who you are, but it happened to you. You don’t want it to change your life going forward. You want to be able to have relationships and have a joyful life. You’ve got to put that rape into context. You don’t want it to change your life, but it did happen. You can’t undo it. It happened to you. You want to become stronger from that experience. You reappraise it in the context of your life and say, “I’m going to move forward from that. I’m going to find role models who have gone through the same

thing that I did. I’m going to have my own moral compass so it’s not going to change who I feel I am as a person. I’m going to get my support system to help me move forward.” That’s another important element of becoming a resilient person.

**So, really, it’s taking a perspective on the situation, being realisticas to what happened, but also a perspective of the broader picture of one’s life.**

Yes. And you also have to face your fears. There are things that may have happened to you that made you very fearful. You

have to actively face your fears, actively cope. For example, when we got to know the Navy Seals, we thought, “Oh, the Navy Seals, they don’t experience fear. They’re fearless.” But, when we got to know them, they said, “Oh yeah, we experience fear. In fact, fear is a guide. Fear can help you overcome failure.” So, you have to face your fears, butyou do it in a way that’s step-by-step.

As an example of what the Navy Seals do, sometimes they have to go into a foreign country, jump out of an airplane at 20,000 feet in the middle of the night. That’s not easy. You don’t do that as step one. You train to get to the point that you can jump out of an airplane in the middle of the night. You’re gradually facing your fears until you feel optimistic and competent that you’ll be able to move forward.

**In addition to the research that you’ve done on resilience, you yourself have had to face an adversity, and test your own, and further develop your own resilience. I’d like you to tell us about that.**

As our team had been studying resilience for decades, I was always wondering whether I was a resilient person. I’m Vietnam-era, but I did not go to Vietnam. I was in college, so I got a deferment, then I went to medical school and I got a deferment, and by the time I got out of medical school, the war was over. While I faced certain obstacles in my life, I’d never been challenged like the people who I was learning from, in developing a prescription to become a more resilient person. That is, until August 29, 2016. I was coming out of a local delicatessen in Westchester, New York, and I was the victim of a violent crime. From about20 or 30 feet, I was hit with a shotgun blast in my right shoulder and chest area. The individual who shot me was a disgruntled former Mount Sinai faculty member who we had determined had been the culprit of scientific misconduct. As a result of that, I decided, as the Dean, to terminate him. After that, 6 years later, he ultimately tracked me down in Westchester where I live, coming out of a local deli. I was hit seriously with this shotgun blast, was taken to an ICU (intensive care unit)—in fact at Mount Sinai, and stayed in the ICU as part of my recovery Luckily, the pellets—and I still have the 15 pellets in my shoulder area—did not hit a vital organ or vessel, or else I would have been killed. But there was a recovery process, and my recovery was public because it was in the newspaper. Lots of articles, I’m the Dean, I’m recovering at Mount Sinai...The press picked it up. During my recovery I was with so many people who I knew and had close relationships with. One of the first reactions I had in my mind was, “Okay, I’m going to find out if I’m resilient because I’ve got to face this recovery.” I also thought, “Well, all the things that I learned, let’s see if they’re actually true.”

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I experienced that recovery process. One thing I should mention is that once it happened you find out the truth of that quote, “ordinary people can be really heroic.” One story that always gets to me is: I get in an ambulance, I’m taken to the local hospital first and a police officer who was off duty comes to my room in the hospital, sits outside the room. And my son, who was also a doctor, when I’m ultimately being transferred to Mount Sinai, sees the police officer standing outside my room, and he said, “Well, thank you. Who are you?” It turns out it’s Police Officer Davenport who was off duty. He said to my son, “I just wish I was there to take the bullet.” I didn’t know Police Officer Davenport. I do now. He’s just a heroic police officer who wanted to do his job.

**Then you had to face the recovery process.**

Yes. And, ultimately, I did find that a lot of the factors that we are discussing played a major role in my own recovery.

**Were you able to step back and say, “Am I having the right perspective on this? Am I being optimistic but realistic?” What did you do with regard to all of these different steps towards resilience?**

I do tend to be an optimistic person and so I was optimistic that I would recover.I did feel I had the wherewithal or the psychological toolbox to recover, but I did use certain tools in helping me recover. One will sound a little bit odd. I’m a fan of Bruce Springsteen and there’s a song he wrote called “Tougher Than the Rest.” The lyrics don’t quite get what I was going through, but I’m in the ICU and I kept saying to myself, “I’m going to be tougher than the rest in how I recover.” And believe it or not, just repeating that to myself was very helpful. I had enormous support. I’m very close to my family, five children, been married for 50 years and had very close friends, so that really helped. The environment at Mount Sinai was extremely supportive. Ultimately, the students, as I recovered, formed an award called the Dean Charney Award for Resilience, which I tell the students is the best award I’ve ever gotten, and now they give it out every year. For me, setting goals was extremely important. For example, when I was in the ICU, in about two weeks the White Coat Ceremony was scheduled. That’s a ceremony for the incoming medical students, to welcome them to medical school and they get a white coat. Their parents come, it’s a very emotional event.

**It’s sort of the start of becoming a doctor.**

It’s starting become a doctor, and I always give a speech. I said to my doctors, “You better get me in shapeso I can give that White Coat Ceremony speech.” Two and a half weeks after I was shot, I gave that speech. And then I set other goals for myself along the way. The bottom line is I did validate, personally, a lot of the factors that I think help you become more resilient.

**Thank you for sharing that. Andit certainly shows that, for you, it worked and, obviously, for many, many other people it works as well. If somebody’s reading right now and they’ve had a traumatic event, what do you say to them?**

I say you can recover. Have confidence. Utilize some of the things that we’re talking about. I will also say to them, believe it or not, you can come out of this stronger. I have done that with other individuals who have been traumatized. In fact, a number of years ago there was a shooting in one of the other hospitals in New York City, at Bronx-Lebanon. A disgruntled employee went in and shot a lot of people. A number of those who were shot were transferred to Mount Sinai, including some young doctors. One of those doctors was having issues around recovery, particularly from a psychological point of view. So, they asked me would I go and see him. I told him, “I know what you’re going through. I may be the Dean, but I’m your brother.”

**What do you see down the road? Where do you think it’s going to go in terms of further understanding about building resilience?**

One area that I’m particularly committed to relates to children. Frankly, and your audience may be surprised at this, it’s

Kids can learn resilience by being taken outside their comfort zone, Dr. Charney says.

not a good idea to raise your children in a stress-free environment—because they won’t be prepared. I have permission to talk about my own kids, in this regard. I have five children. Now they’re adults, and when I started studying resilience, they were younger, they were teenagers, and they noticed that I wasa little tougher on them. Now, I didn’t traumatize them, but I would work to put them a little bit out of their comfort zone so that they would develop skills on how to handle stress. We would take trips to different parts of the country, national parks, go on hikes, and so forth, trips that I would say were semi-dangerous. There was one instance in the family where one of my daughters was around 13, and we were on a mountain. Bad weather came in, there was some wildlife around that was a little scary. In front of all my other kids, she said from her heart and soul that she despised me. Okay. But over time, she became a very confident woman. Now, what does she do now, as a mother, and

a professional? She goes to Yellowstone National Park—in winter. You can help your children become more confident and able to handle stress that, inevitably, everybody faces in their life.I think it has implications. Resilience research has implications for how you raise your children.

**A message to any parent reading is: you certainly don’t want your child to, God forbid, be traumatized, but a little bit of stress, and giving them some guidance to deal with it, is a healthy thing because, ultimately, we all face stress at some point.**

We all face it. Maybe stress is not the right word, but to put them in situations that are challenging, that are out of their comfort zone, so that they ultimately gain skills that are going to help them later in life. I think that’s a very important area we can do more research on, and make part of teaching people how to be good parents. v