Resilience: Being Well in Difficulty

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ABSTRACT

Positive human functioning is perhaps most remarkable when evident in contexts of significant life challenge and adversity. It is then, when individuals are being tested, that much becomes known about human strengths what they are, how they are nurtured or undermined. The growing literature on human resilience addresses this juxtaposition of being well in the face of difficulty. Maximum efforts on resilience have emphasized the avoidance of negative outcomes and acceptance of positive aspects of life. In this study an attempt was made to findout the pattern of resilience in the children. 160 participants in the age range of 8-16 were taken in consideration and they were arranged according to the requirements of the four way factorial design with two levels of age groups (8-11 and 13-16 years), two types of sex (boys and girls), two economic status (low economic status and high economic status) and two types of parenting style (single parenting and double parenting). The Well Being Scale and Child Behavior Checklist were administered on the participants followed by general information on schedule and it was found that- (1) with increase in age the magnitude of resilience increased and the magnitude of problem behavior decreased. (2) Girls showed more resilience behavior than boys and they experienced more problems in them. (3) First born participants were more resilient than only child and or second or last born child and they showed less problem behavior than second or last born child. (4) Participants hailing from low socio-economic group were more resilient than higher socio-economic group and they experienced less problem behavior than high socio-economic group. (5) So far as the matter of parenting type was concerned participants of single parents showed more resilient behavior than participants living with both parents. More over

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the magnitude of problem behavior was relatively lower in them. Findings were interpreted in terms of Resilience as flourishing under fire.

**Key Words:** Resilience, Wellbeing, Behaviour Check list.

Positive human functioning is perhaps most remarkable when evident in contexts of significant life challenge and adversity. It is then, when individuals are being tested, that much becomes known about human strengths what they are, how they come about, how they are nurtured or undermined. The growing literature on human resilience addresses this juxtaposition of being well in the face of difficulty. Investigations of resilience are increasingly prominent in both phases of life. We then compare studies of resilience conduct at these early and later periods of the life course, giving emphasis to how the two literatures inform each other.

What follows this study rests on the premise that the study of flourishing (i.e., delineating positive features of the human condition) and the study of resilience (i.e., elaborating the capacity to prevail in the face of adversity) yield fruitful advances when joined together. Conceptions of the flourishing articulate the nature of human strengths and well being and thereby, offer enriched formulations of what it means to thrive under challenge. Much of the literature, on resilience has emphasized the avoidance of negative outcomes (e.g., psychological, social, emotional, or physical problems), rather then the presence of the positive outcomes. Alternatively, the study of resilience brings to the literature on flourishing greater insight about how human strengths come to be, including the observation that they are sometimes forged in trial and tribulation. At the extreme end, in fact, is the proposition that particular heights of the human experience, what some call thriving, are known only by those who have run the gauntlet. Whether ultimate human strengths emerge from extremes of human suffering is an open and controversial question. We do not invoke the necessity that one must know pain to find the essence of what is good in life; rather, we see research on resilience as a valuable realm of balance. That is, it draws on the negative in human experience by articulating the many ways in which life can be hard, but it also emphasized the positive in describing how some, despite (or because of) their travail, are able to love, work, play- in short embrace life. Such a combination avoids the something excessively upbeat tone that accompanies studies of well being or the overdone darkness characterizing research on human maladies. William James (1902) richly depicted this contrast long ago, with this juxtaposition of “healthy-mindedness” and “the sick soul”. A leading challenge of the present era is to recognize both darkness and light as central to understanding the human condition.

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Keeping these views in consideration this study was planned and it was aimed to ascertain the pattern of resilience as affected by age, sex, socio-economic status, and parenting type. The objectives and hypotheses were as follows:

- The first objective of this study was to find out the pattern of resilience as affected by chronological age. It was contended that with increase in age the magnitude of resilience would increase.
- The second objective of this study was to find out the pattern of resilience as affected by sex. It was contended that boys and girls would differ in the magnitude of resilience.
- The third objective of this study was to ascertain the pattern of resilience as affected by socio-economic status. It was hypothesized that the difference in socio-economic status would cause difference in the magnitude of resilience.
- The forth objective of this study was to ascertain the pattern of resilience as affected by parenting type. It was hypothesized that differentials in parenting type would cause difference in resilience.

Keeping these objectives in views this study was planned.

**METHOD**

**Sample:** 240 participants ranging between 8-13 years served in this study and they were arranged according to the requirements of the four way factorial design with three age groups (8-9, 10-11, 12-13 years), two types of sex (boys and girls), two levels of socio-economic status (high socio-economic status and low socio-economic status), and two types of parenting types (single parenting and double parenting), i.e. 3*2*2*2 factorial design, that is 10 participants per cell.

**Tool:** The following tool was used in the study

*The Well-Being Scale:* In order to measure the mental health of the participants, the Well-Being Scale (Shukla & Pant, 2008) was used. This scale has 64 five point items belonging to eight areas where well being can be experienced; they are personal growth, autonomy, self-esteem, emotion control. The score ranges between 64 and 320. Low scores indicate high level of well being and high scores vice-versa.

**Procedure:** At first the investigator contacted the children either from their schools, homes or neighborhood and made all possible attempts to get along with them. The participants were both boys and girls and they belong to high and low socio-economic status which was assessed by the monthly
income of their parents. Children, whose parents’ monthly income was
more than 20,000 Rs. per month were termed as high socio-economic status and
the parent getting less than 10,000 were termed as low socio-economic status.
In order to determine birth order families having three or more than three
children were considered. So far as the matter of parenting type was concerned
fatherless children were tested along with their counterparts having double
parents. Only such fatherless children were taken who had experienced the
love and affection of their father and their loss. Data collection was done
individually or in group as per the availability of the participants and best
attempts were made to avoid external distractions.

RESULTS

Obtained data were analyzed by four way analysis of variance and
interpreted in terms of age, sex, socio-economic status, and parenting type as
effectors of resilience. Findings are reported in table 1.

<table>
<thead>
<tr>
<th>Source of variance</th>
<th>SS</th>
<th>DF</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>16.32</td>
<td>2</td>
<td>8.16</td>
<td>10.74</td>
</tr>
<tr>
<td>B</td>
<td>4.04</td>
<td>1</td>
<td>4.04</td>
<td>5.32</td>
</tr>
<tr>
<td>C</td>
<td>3.17</td>
<td>1</td>
<td>3.17</td>
<td>4.18</td>
</tr>
<tr>
<td>D</td>
<td>3.19</td>
<td>1</td>
<td>3.19</td>
<td>4.21</td>
</tr>
<tr>
<td>AB</td>
<td>14.76</td>
<td>2</td>
<td>7.38</td>
<td>9.72</td>
</tr>
<tr>
<td>AC</td>
<td>12.74</td>
<td>2</td>
<td>6.37</td>
<td>8.39</td>
</tr>
<tr>
<td>AD</td>
<td>12.32</td>
<td>2</td>
<td>6.16</td>
<td>8.11</td>
</tr>
<tr>
<td>BC</td>
<td>3.47</td>
<td>1</td>
<td>3.47</td>
<td>4.57</td>
</tr>
<tr>
<td>BD</td>
<td>3.35</td>
<td>1</td>
<td>3.35</td>
<td>4.41</td>
</tr>
<tr>
<td>CD</td>
<td>3.10</td>
<td>1</td>
<td>3.10</td>
<td>4.08</td>
</tr>
<tr>
<td>ABC</td>
<td>13.96</td>
<td>2</td>
<td>6.98</td>
<td>9.19</td>
</tr>
<tr>
<td>ABD</td>
<td>16.34</td>
<td>2</td>
<td>8.17</td>
<td>10.75</td>
</tr>
<tr>
<td>ACD</td>
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<td>2</td>
<td>6.99</td>
<td>9.21</td>
</tr>
<tr>
<td>BCD</td>
<td>7.09</td>
<td>1</td>
<td>7.09</td>
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</tr>
<tr>
<td>ABCD</td>
<td>17.48</td>
<td>2</td>
<td>8.74</td>
<td>11.50</td>
</tr>
<tr>
<td>Error (within)</td>
<td>164.16</td>
<td>216</td>
<td>.76</td>
<td></td>
</tr>
</tbody>
</table>
A close perusal of the table indicates that the first main effect of chronological age was also significant (F, 2, 216=10.74, P< .01) and it was found that the higher magnitude of resilience was shared by older children as compared to the middle aged (X= 119.58) and younger children (X=188.97).

The main effect of sex was significant (F, 1, 216=5.32, P< .01) mean values were pooled across, socio-economic status, and parenting type were 126.94 and 137.06, which revealed that girls were found more resilient than boys.

The main effect of socio-economic status was also significant (F, 1, 216=4.18, P< .05) and it was found that higher level of well being was shared by the participants of high socio-economic status (X=128.29) as compared to the participants of low socio-economic status (X= 135.71). The next main effect of parenting type was also significant (F, 1, 216=4.21, P< .05) and it was seen that high level of resilience was evident in the children of single parents (X=127.38) as compared to double parented children (X= 136.62). The interaction between age & sex was significant (F, 3, 216=9.72, P< .01). The interaction between age & socio economic status was significant (F, 3, 216=8.39, P< .01). The interaction between age & parenting type was significant (F, 3, 216=8.11, P< .01). The interaction between sex & socio-economic status is significant (F, 1, 216=4.57, P< .05). The interaction between sex & parenting type is also significant (F, 1, 216=4.41, P< .05). Similarly the interaction among age, sex & socio-economic status is also significant (F,2, 216=9.19, P< .01). The interaction among age, sex & parenting type is also significant (F,2, 216=10.75, P< .01). The interaction among age, socio economic status & parenting type is also significant (F,2, 216=9.21, P< .01). The interaction among sex, socio-economic status & parenting type is also significant (F, 1, 216=9.33, P< .01). The four way interaction of age, sex, Socio economic status & parenting type was significant (F, 3, 216=11.50, P< .01).

**Dimensional Analysis of Data**

Apart from analysis of variance a co-rrelational analysis was also made to seek the within group relationship in the data. Data were pooled across age, sex, socio-economic status; and parenting type and findings are given in Table 2. Table reveals that there was a close relationship between the dimensions.
TABLE-2

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Name of the areas</th>
<th>Correlation Coefficient</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>1</td>
<td>Autonomy</td>
<td>1.00</td>
</tr>
<tr>
<td>2</td>
<td>Environment Mastery</td>
<td>1.00</td>
</tr>
<tr>
<td>3</td>
<td>Personal Growth</td>
<td>1.00</td>
</tr>
<tr>
<td>4</td>
<td>Positive Relations With Others</td>
<td>1.00</td>
</tr>
<tr>
<td>5</td>
<td>Purpose in life</td>
<td>1.00</td>
</tr>
<tr>
<td>6</td>
<td>Self-Acceptance</td>
<td>1.00</td>
</tr>
<tr>
<td>7</td>
<td>Emotional control</td>
<td>1.00</td>
</tr>
<tr>
<td>8</td>
<td>Self-esteem</td>
<td>1.00</td>
</tr>
</tbody>
</table>

Findings in sum are as follows:

1. Older children were found more resilient than younger ones.
2. Girls were more resilient than boys.
3. Children of low socio economic status were high resilient than their high class counterparts.
4. Children of single parents were highly resilient than the children of double parents.
5. All areas were highly correlated.

DISCUSSION

Obtained data were analyzed by four way analysis of variance and interpreted in terms of age, sex, economic status and parenting style as affecters of resilience. Prior to the inception of this work some hypotheses were formulated and the findings will be interpreted accordingly.

- **Increase in age would increase the magnitude of resilience and decrease of problem behavior:** Our first and foremost concern was related with the developmental pattern of resilience. It was found that with increase in age children did evince greater amount of resilience. Rutter’s 10 year study, for example, focused on children whose parents were diagnosed as mentally ill. The intriguing finding was that many of these children did not themselves become mentally ill or exhibit maladaptive behaviors (Rutter, 1985, 1987; Rutter, Maughan, Mortimore, & Ouston, 1979). Based on these observations, Rutter formulated resilience as the positive pole of an individual’s response to stress and adversity (Rutten, 1990). Positive in Rutter’s
work frequently referred to the absence of the negative (e.g. adverse temperament, conduct disorders, affective disorders, and depression) in overall functioning.

In other classic work, Garmezy and colleagues (Garmezy, 1991, 1993; Garmezy, Masten & Tellegen, 1984) followed children from low socio-economic status backgrounds that lived among negative family environments. Again, although some showed less competence and more disruptive profiles, others of these disadvantaged children were judged to be competent (by teacher, peers, school records) and did not display behavior problems. Studies of children of schizophrenic mothers also played a crucial role in Garmezy and Masten’s formulations of childhood resilience. Many of these children thrived despite their high high-risk status (Garmezy, 1974; Garmezy & Streitman, 1974; Masten, Best, & Garmezy, 1990). In these investigations, resilience was formulated as the capacity for recovery and maintaining adaptive functioning following incapacity (Garmezy, 1991) or the positive side of adaptation after extenuating circumstances (Masten, 1989).

Other pioneering research was conducted by Werner and colleagues (Werner, 1993, 1995; Werner & Smith, 1977), who followed a cohort of Children born in Kauai for more than three decades, one third of whom were designated as high risk because they were born into poverty and lived in troubled environments (parental psychopathology, family discord, poor child-rearing conditions) of these high risk children, one third grew up to be competent, confident, and caring adults. Werner’s conception of resilience emphasized sustained competence under stress (Werner, 1995; Werner & Smith, 1992).

Frequent candidates to account for stress resistance in children have included temperament and personality attributes, family cohesion and warmth and external social supports (Garmezy, 1993), as well as high IQ, problem solving abilities, quality parenting, stable families, and high socio-economic status ed (Garmezy et al. 1984). Masten’s (1999) “short list” of protective factors included parenting quality, intellectual functioning, and self perceptions (e.g., self-efficacy). Proffering an organizational framework, Werner (1995) distinguished between protective factors within the individual (e.g., affectionate and good-natured in infancy and early childhood; outgoing, active, autonomous, bright, and possessing positive self concepts in middle childhood and adolescence); those in the family
(close bonds with at least one nurturing, competent, emotionally stable parent); and those in the community (support and counsel from peers and elders in the community). Analytically, such protective factors have been constructed as compensatory factors that have direct, independent effects on outcomes (Garmezy et al, 1984; Masten, 1989) or as interactive influences that moderate the effects of exposure to risk (Rutter, 1985, 1987; Zimmerman & Arunkumar, 1994).

Ages differences are either not studied (Banik, 1972) on children of various ages are combined under a very broad group as 0-12 years (Verghese et. al, 1973). Use a broad age group is likely to camouflage age trends in the problem behavior under study. The studies were age differences have been taken into account, dealt with only one or two problems like enuresis or hyperactivity etc. as children grow and more through various stages over the years. Changes that occur in them are phenomenal. Physically, intellectually, socially and emotionally, the variations are legion. Behavior disorders of children therefore, must be viewed in relation to their age and developmental stages. In this recent review of child psychiatric research in India. Sitholey (1992) has pointed out that “the entire group of children has been considered as a whole” (p. 49). As such, it is necessary to study various groups of children such as pre-school children, primary school children and adolescents etc separately. Further, age differences must be studied by comparing children in a single year age group of each problem under study, separately.

It is believed that the early years of school attendance, age 6-10 years are the most common period of inset reported for all childhood behavior problems. Also, as we know, many behavior problems can occur together in children, the research studies must be so planned that there is a built-in scope for tapping various types of problems. For this purpose, use of comprehensive measures is essential.

• Girls would show more resilience as compared to boys: As our second notion was concerned with sex related on resilience. It was found that the impact of sex was significant and boys were lower in resistant as compare to girls. More over it was also seen that the higher level of resilience was shared by the girls.

Martin and Halverson (1981, 1987) have proposed a somewhat different cognitive theory (actually, an information-processing theory) that overcomes the key weakness of Kohlberg’s theory. Like
Kohlberg, they believe that children are intrinsically motivated to acquire values, interests and behaviors that are consistent with their cognitive judgments about the self. However, Martin and Halverson (1981, 1987) argue that this “Self-Socialization” begins as soon as children acquire a basic gender identity, at the age of 2 or 3. According to their schematic-processing model, children acquire gender schemata-organized sets of beliefs and expectations about males and females that influence the kids of information they will attend to and remember.

First children acquire a simple in group in group/ out group schema that allows them to classify some objects, behaviors and role as appropriate for males and others as appropriate for females (for example, cars are for boys, girls can cry but boys should not, and so on). Then they seek out more elaborate information about the role of their own sex, constructing an own-sex schema. Thus, a young girl who knows her basic gender identify might first learn that sewing is for girls and building model airplanes is for boys. Then because she is a girl and wants to act consistently with her own self-concept, she gathers a great deal of information about sewing to add to her own sex schema, largely ignoring any information that comes her way about how to build model airplanes. Once gender schemata are in place, children will actually distort new information in memory so that it is consistent with their schemata (Liben & Signorella, 1993; Martin & Halverson, 1983). Martin and Halverson (1983) showed 5 and 6 year olds pictures of children performing gender-consistent activities (for examples, a boy playing with truck) a picture of children performing gender inconsistent activities (for example, a girl sawing wood). A week later the children easily recalled the sex of the actor when activated were gender-consistent. When an actor’s behavior was gender-inconsistent, through children often distorted the scene to make it gender-consistent (for example, by saying that it was a boy, not a girl, who had sawed wood). Thus, this research gives us some insight into why in accurate gender stereotypes persist.

- **The variation in socio-economic status would cause variation in resilience:** Our third notion was concerned with the pattern of resilience as affected by socio-economic status. It was found that difference in the level of socio-economic status would lay its impact on the magnitude of resilience. Fortunately, our hypothesis was conformed and we found that the children of low socio-economic
status were highly resistant than their counterparts of middle and high socio-economic status respectively.

The level of socio economic status has been found as the most powerful source for the variation in personality characteristics and other psychological variables. According to Maccoby (1980) social class differences may be observed in many cultures and across racial and ethnic groups. It has been found that lower and working class parents teach more lessons of disciplines to their children and train them to live happily even in adverse conditions (Kelly, Power & Vim Bush, 1992). Also, it appears that lower and working class parents are somewhat more critical, positive and intolerant of disobedience than parents from the middle and upper socio-economic strata.

The findings support our hypothesis and claim that children living in adversity are tend to be more resilient as compare to their counterparts born with silver spoon in their mouth.

- The differentials in parenting type would cause difference in resilience: Our last hypothesis was related with the impact of parenting type on emotional disturbance and disruptive behavior. It was contended that variation in parenting type would cause variation in the magnitude of resilience and disruptive behavior. Our hypothesis was conformed and we found that fatherless children were highly resilient and less in disruptive behavior. Contrarily it was found that children with both parents were highly disruptive. In this study fatherless children were defined as those who had been brought up by their mothers and they used to miss the affection of their father because they had lost their fathers in a very young age. It is also seen that single mother is capable to make a control over her children. Also the children think that they are alone and any mischief done by them would decrease the prestige of their mothers and late fathers. In addition it is also apparent that fatherless children are more able for worldly struggles than their counter parts of double parents. It may have caused our finding in which it was found that fatherless children were higher in resilience and low in disruptive behavior.

Findings, in sum, reveal that resilience is a personality factor which is directly related with early summary experiences. In addition, it has also been noted that resilience teaches the person to lead thoroughly happy life inspite of adversities. Therefore, there is a need to make develop oneself and live happily even in adversities therefore the feeling of resilience could be developed.
REFERENCES


