

Effect of resilience on psychological well being in young adults.

*** Vanshika Manjani & ** Dr. Arefa Mansuri**

*Undergraduate Student, St. Xavier's College, Ahmedabad

**Under the guidance of Associate Professor, St. Xavier's College & M.Phil., Ph.D. Guide,
Gujarat University

Abstract

Resilience helps an individual in successfully adapting or bouncing back in the face of stress or adversity. Young adults face a lot of social, emotional, academic and personal challenges and resilience helps them to deal effectively with these challenges. Psychological well being is referred to as experiencing positive emotions such as happiness, feeling content etc. and also functioning well. Resilience is often considered as a aspect that maintains and enhances an individual's psychological well-being. This study aims to study about the relationship between resilience and psychological well being in young adults and also taking into consideration gender differences and family type differences. A total sample of 160 participants were selected which comprised of 80 females and 80 males from both joint family and nuclear family. In which 40 females were from joint family and 40 from nuclear family and same goes for males as 40 were from joint family and 40 from nuclear family. The tool used in order to examine resilience Bharathiar University Resilience Scale (BURS) was used and to examine psychological well being PGI General Well Being Scale was used. The data collected was analysed with the help of t-test along with Pearson correlation. Results indicated that there was no significant differences in resilience scores with respect to gender and family type. There was no significant difference in psychological well being scores in respect to nuclear and joint family. There was significant difference in psychological well being scores of males and females. No significant correlation was found in between resilience and psychological well being. This study highlights the importance to address psychological well being in young adults while recognising uniformity in resilience across various groups.

Key words: Resilience, Psychological well being, Young adults, Gender , Family type

Introduction:

Resilience has been most frequently defined as positive adaptation despite adversity. Over the past 40 years, resilience research has gone through several stages. In the 1980s and 1990s, research on resilience was devoted to children who, despite various stresses and adversities, were able to function well in adulthood. In the 2000s, other population groups appeared in the focus of resilience research, including the elderly and representatives of various ethnic groups who were in unfavourable conditions (had various diseases, were in military conflict zones etc.). Since the beginning of the 1990s, the focus of resilience research has shifted from identifying protective factors to understanding the processes due to which individuals are able to overcome difficulties (Zlata Grygorenko & Naidionova, 2023). Resilience is basically ability of an individual to adapt successful or bounce back when faced with difficulties or adversities in life. Resilient is dependent on mainly two factors: internal and external factors. Internal factors that affect resilience are optimism, adaptability, self efficacy and self control while the external factors that affect resilience are social connections, positive and healthy relationships, social communities, access to education, healthcare etc. Resilience which determines how well person adapts in traumatic or stressful situation is often linked to an individual's psychological well being.

Psychological well-being is a multifaceted and multi-dimensional construct that encompasses an individual's overall happiness, satisfaction with life, and mental and emotional health. It includes key components such as positive emotions, autonomy, positive relationships, low levels of negative emotions, purpose in life, life satisfaction, and personal growth (Dhanabhakym & Sarath, 2023). In 1946 the World Health Organization (WHO) defined health as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (Feller et al., 2013). This shows that for overall health psychological well being is very important. Maslow in his hierarchy of needs has given self-actualization as the most important need. Carol D. Ryff, an acclaimed researcher and psychologist, is credited with developing a six-dimensional model of psychological well-being.

- **Autonomy:** The degree of freedom and ability to make independent decisions are correlated with an individual's level of autonomy.
- **Environmental Mastery:** This involves managing everyday tasks, solving difficulties, and taking charge of one's surroundings.
- **Personal Growth:** It is an indication of a person's commitment to continuous improvement and development. Curiosity, receptivity to novel experiences, and drive for advancement and self-realization are the three key elements.

- **Positive Relations with Others:** This dimension's major focus is on how well a person can establish and sustain healthy connections with other individuals depend on a variety of factors, including the capacity for empathy and compassion as well as a growing feeling of social connection.
 - **Purpose in Life:** The meaning of life may be found in completing particular goals and having a feeling of purpose.
 - **Self-acceptance:** Self-acceptance is defined by positive characteristics of an individual's self-image, such as high self-esteem and a strong feeling of self-worth (Moghe & Misra, 2024).
- Psychological well being gives more emphasis to eudaimonic happiness but it also includes aspects of hedonic happiness.

Several researches have been conducted on resilience and psychological well being which suggest positive correlation between them . Research done on Resilience and Psychological Well-Being of Higher Education Students During COVID-19: The Mediating Role of Perceived Distress gave positive correlation between resilience and psychological well being (Sood & Sharma, 2021). Research done on Relationship between Resilience, Optimism and Psychological Well-Being in Students of Medicine showed that resilience predicts psychological well being and optimism plays a mediation role between them (Souri & Hasanirad, 2011). A Correlational Study on Dispositional Resilience, Psychological Well-being, and Coping Strategies in University Students showed a positive correlation between resilience and psychological well being (Sagone & Elvira De Caroli, 2014). Research on resilience, stress, and psychological well-being in nursing students: A systematic review showed resilience and low stress were found to better predict well-being (Li & Hasson, 2020). Research on Model of coping strategies, resilience, psychological well-being, and perceived health among military personnel revealed that resilience is higher when positive approach-oriented coping strategies are used, which directly affects psychological well being (Chiang et al., 2018). Young adults is a very critical age group as they're are constantly faced by different challenges such as academic, social, career, emotional and personal challenges and to cope up with such challenges resilience is required. Such challenges faced by them also affect their psychological well being so it becomes necessary to explore link between resilience and psychological well being. Many researchers have found positive correlation between resilience and psychological well being but there are limited Indian researches done on this topic leaving a gap in understanding resilience and psychological well being according to Indian culture. Also family type (joint family and nuclear family) and gender can influence resilience and psychological well being.

So the main aim of this research is to examine the effect of resilience on psychological well being by taking into consideration gender and family type in young adults. This study provides overall understanding of resilience and psychological well being in young adults.

Hypothesis

There will be no significant difference between male and female participants with regards to their resilience.

There will be no significant difference between joint and nuclear families participants with regards to their resilience.

There will be no significant difference between male and female participants with regards to their psychological well-being.

There will be no significant difference between joint and nuclear families participants with regards to their psychological well-being.

There will be no significant correlation between resilience and psychological well-being among participants.

Method:

Participants :

The sample consisted of 160 participants out of which 80 were females and 80 were males. Participants were distributed according Family type where from 80 females 40 were from joint family and 40 from nuclear family and same for males 40 were from joint family and 40 were from nuclear family. Data was collected from participants of age 18-25. Any participant who was less than 18 or more than 25 were excluded from this research. And participants living in joint or nuclear family were approached.

Measurement:

To measure resilience Bharathiar University Resilience Scale (BURS) was used. This scale is developed by Annalakshmi in 2000 and is a self reporting questionnaire which consists of 30 items. Each item is scored on 5 point likert scale ranging from 1 which is not at all appropriate to 5 which is most appropriate. Higher total score indicate greater resilience. Cronbach's alpha coefficient is 0.86. The scale has been reported to be valid as shown by it's correlation with the Frigborg's resilience scale ($r=0.46$).

To measure psychological well being PGI General Well Being Scale was used. PGI General Well Being Scale was developed by Santosh Verma and Amita Verma in 1989. This scale is self reporting questionnaire and consist of 20 items. These twenty questions need to answered according to how an individual has felt in the past one month. Responses were to be given based on three point alternatives that were fully true, somewhat true and fully untrue.

Scoring was to be done by giving 0 to fully untrue, 1 to somewhat true and 2 to fully true. Minimum and maximum score range is 0-40.

Procedure :

A Google form was made for collecting data from participants and it consisted of consent of participant, demographic details, questions from PGI General Well Being Scale and BURS scale. Individuals of age 18 to 25 were approached and were told the purpose of research then verbal and online (Google form) consent was taken from them where there were asked if they voluntarily wanted to participate in this survey and that they can withdraw anytime they want or feel uncomfortable. They were ensured that all the details they provide will remain confidential. They were then given Google form and instructions were given to them to read each question carefully and answer according to what they feel and not what the ideal answer would be. After the form was completed they were thanked for their participation. Later the data was collected scoring and interpretation was done.

Statistical Analysis

Data was collected from participants then statistical analysis was done using descriptive statistics such as mean score and standard deviation was calculated among groups of participants to get overview about resilience and psychological well being among them. t-test was used to see if there was significant differences in scores of resilience and psychological well being among different groups. Later Pearson correlation was calculated to examine if there was relation between resilience and psychological well being.

Results:

Table 1: means score , SD and t value of resilience of males and females.

	N	Mean	SD	t-value	Table value	Level of significant
Male	80	89.18	13.79	1.24	1.98	NS
Female	80	92.76	22.06			

In the table no. 1, the mean score of males is 89.18 whereas mean score of females is 92.76. The mean score of females is slightly more than males. t-test was conducted to find if there's any difference in resilience of males and females. The t-value calculated was 1.24 which was less than table value 1.98 which is not significant at 0.05 level. This indicates that there was no significant difference between the resilience of males and females. This null hypothesis is not rejected.

Table 2: Mean score, SD and t value of resilience of joint family and nuclear family

	N	Mean	SD	t-value	Table value	Level of significant
Joint family	80	91.06	17.94	0.06	1.98	NS
Nuclear family	80	90.88	19.02			

In the table no 2, the mean scores of joint family is 91.06 and the mean score of nuclear family is 90.88. The mean scores of joint family is slightly higher than means score of nuclear family. t-test was conducted to see if there's any difference in the resilience of joint family and nuclear family participants. The t- value calculated was 0.06 which is less than table value 1.98 which is not significant at 0.05 level. This indicates that there was no significant difference in resilience of joint family and nuclear family. So the null hypothesis is not rejected.

Table 3: Mean score, SD and t-value of psychological well being of male and female.

	N	Mean	SD	t-value	Table value	Level of significant
Male	80	26.62	7.11	2.4	1.98	0.05
Female	80	23.54	9.17			

In the table 3, the mean score of males is 26.62 and the mean score of females is 23.54. The mean score of males is higher than the mean score of females. t-test was conducted to see if there's any difference in psychological well being of males and females. The t-value calculated is 2.4 which is more than table value 1.98 which is significant at 0.05 level. This indicates that there is significant difference in psychological well being of males and females. So the null hypothesis is rejected.

Table 4: Mean score, SD and t-value of psychological well being of joint family and nuclear family .

	N	Mean	SD	t-value	Table value	Level of significant
Joint family	80	26	7.94	1.42	1.98	NS

Nuclear family	80	24.16	8.65			
----------------	----	-------	------	--	--	--

In the table 4, The mean score of joint family is 26 and the mean score of nuclear family is 24.16. The mean score of joint family is slightly higher than the mean score of nuclear family. t-test was conducted to see if there's any difference in psychological well being of joint family and nuclear family. The t-value calculated is 1.42 which is less than table value 1.98 which is significant at 0.05 level. This indicates that there is no significant difference between psychology wellbeing of joint family and nuclear family. So the null hypothesis is not rejected. Table 5: showing Correlation between resilience and psychological well being

	N	Mean	r- value	Table value	Level of significant
Resilience	160	90.9695	-0.0045	0.1534	NS
Psychological well being	160	25.0792			

In the table 5, the mean score of resilience is 90.9695 and the mean score of psychological well being is 25.0792. The mean score of resilience is higher than the mean score of psychological well being. The r- value is -0.0045 which is less than table value 0.1534 which is significant at 0.05 level. This indicates that there is no significant correlation between resilience and psychological well being. The correlation found between resilience and psychological well being is not that significant. Thus the null hypothesis is not rejected.

Discussion:

This scores show negative correlation between resilience and psychological well being according to 0.05 level this negative correlation between resilience and psychological well is statistical not significant. It means that participant who has higher resilience may or may not have reported higher psychological well being. This may be due to cultural factors as usually in Indian culture resilience would be shown by fulfilling responsibilities towards family, keeping quiet or silently bearing all the problems and showing oneself happy which may or may not always align with psychological well being. Also there are personality factors like there are people who have higher resilience but are faced with constant challenges or adversities in their life which may or may not always enhance their psychological well being. There was significant difference in psychological well being of males and females. Females

reported lower psychological well being than males which may be due to patriarchy system in India as it teach women to take care of everyone around them except for themselves and this neglect might lead to low psychological well being. So there are other factors which influence psychological well being like cultural , personal or social factors.

Conclusion:

This research found that there was no significant correlation between resilience and psychological well being in young adults. Theoretically psychological well being and resilience might be related but this study did not found resilience as a significant predictor of psychological well being. Resilience didn't differ in gender and family type. Whereas psychological well being of males and females differ significantly. But psychological well being didn't differ across family type. This shows that Resilience is uniform in gender and family type. Difference between Psychological well being in males and females shows a need for taking appropriate measures to increase psychological well being among young adults and this approach should be holistic.

Limitations :

- 1) First limitation of this study is that this study was specifically based on young adults so results can't be generalized on wider population which limits it's scope.
- 2) Second limitation of this study is that it used self reporting questionnaire where participants were told answer according to what they feel but sometimes people over-estimate or under-estimate their experience and feelings or give socially accepted answer so this also becomes a limitation.

References :

- Chiang, H.-H., Chen, K.-J., & Yang, C.-C. (2018). Model of coping strategies, resilience, psychological well-being, and perceived health among military personnel. *Journal of Medical Sciences*, 38(2), 73. https://doi.org/10.4103/jmedsci.jmedsci_60_17
- Dhanabhakyaam, M., & Sarath, M. (2023). Psychological Wellbeing: A Systematic Literature Review. *International Journal of Advanced Research in Science, Communication and Technology*, 3(1), 603–607. <https://doi.org/10.48175/ijarsct-8345>
- Feller, S., Teucher, B., Kaaks, R., Boeing, H., & Vigl, M. (2013). Life Satisfaction and Risk of Chronic Diseases in the European Prospective Investigation into Cancer and Nutrition (EPIC)-Germany Study. *PLoS ONE*, 8(8), e73462. <https://doi.org/10.1371/journal.pone.0073462>

- Li, Z.-S., & Hasson, F. (2020). Resilience, stress, and psychological well-being in nursing students: A systematic review. *Nurse Education Today*, 90(1), 104440. <https://doi.org/10.1016/j.nedt.2020.104440>
- Moghe, S., & Misra, S. (2024). A Study on Psychological Well-being among University Students. 12(1). <https://doi.org/10.25215/1201.241>
- Sagone, E., & Elvira De Caroli, M. (2014). A Correlational Study on Dispositional Resilience, Psychological Well-being, and Coping Strategies in University Students. *American Journal of Educational Research*, 2(7), 463–471. <https://doi.org/10.12691/education-2-7-5>
- Sood, S., & Sharma, A. (2021). Resilience and Psychological Well-Being of Higher Education Students During COVID-19: The Mediating Role of Perceived Distress. *Journal of Health Management*, 22(4), 097206342098311. <https://doi.org/10.1177/0972063420983111>
- Souri, H., & Hasanirad, T. (2011). Relationship between Resilience, Optimism and Psychological Well-Being in Students of Medicine. *Procedia – Social and Behavioral Sciences*, 30, 1541–1544. <https://doi.org/10.1016/j.sbspro.2011.10.299>
- Zlata Grygorenko, & Naidionova, H. (2023). THE CONCEPT OF “RESILIENCE”: HISTORY OF FORMATION AND APPROACHES TO DEFINITION. *Public Administration and Law Review*, 14(2), 76–88. <https://doi.org/10.36690/2674-5216-2023-2-76-88>