

Children's resilience, loneliness and hope: The Positive Psychology perspectives

Resiliencia infantil, soledad y esperanza: Perspectivas de la Psicología Positiva

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Abstract

In this paper, we shall present theoretical approaches and new research on the implications of positive psychology for understanding children's resilience, happiness, and hope. Young people keep contacts with family, friends, "friends of friends" and total strangers. Social networking has been growing in richness, enabling diverse routes to challenge the social isolation. Yet, many children and adolescents continue to feel alone even among friends. Our responsibility is to sensitize families and schools to the children's distress and to promote innovative research as well as prevention and intervention programs, among others. In this paper, we shall discuss the predictive roles of individual and systemic risk and protective factors (such as family support and schools' empowerment) within the positive psychology approach, in order to provide clarification of developmental trends.

Keywords: Resilience, loneliness, hope, children, positive psychology

Resumen

En el presente artículo abordaremos enfoques de carácter teórico y nuevas investigaciones acerca de las implicaciones de la Psicología Positiva en el entendimiento de la resiliencia en niños, la felicidad y la esperanza. La población juvenil entabla contactos de carácter familiar, con amigos, con "amigos de amigos" e incluso con desconocidos. Por otro lado, las redes sociales online son una potente herramienta para habilitar rutas que desafíen el aislamiento social. Pero todavía son muchos los niños y adolescentes que continúan sintiéndose solos, incluso entre amigos. Nuestra responsabilidad es sensibilizar a familias y escuelas de la angustia y la aflicción que presentan estos niños así como fomentar la innovación en la investigación y diseñar programas de prevención e intervención, entre otras iniciativas. En este trabajo, argumentaremos acerca de los roles predictivos del individuo, del riesgo sistémico y de los factores de protección dentro del marco de la Psicología Positiva con la intención de aportar una mayor clarificación de las tendencias del desarrollo.

Palabras clave: Resiliencia, soledad, esperanza, psicología positiva

Introduction

Defining and enhancing human wellness has a rich philosophical and psychological tradition. Today, the study of positive mental health along with human strengths has become the focus of positive psychology. This approach challenges the exclusive focus on pathology that dominated the psychological sciences in the past, and that lacks the appreciation for the positive segments that make life worth living.

In this paper, I shall present theoretical approaches and new research on the implications of positive psychology for understanding children's resilience, happiness, and hope. In my recent book "Lonely children and adolescents" (Margalit, 2010), I proposed the developmental implications of loneliness and hope for children and adolescents in our technological saturated environments that emphasized social need to stay connected, with extended possibilities for interpersonal communication. Nowadays young people keep contacts with family, friends, "friends of friends" and total strangers. Social networking has been growing in richness, enabling diverse routes to challenge the social isolation. Yet, many children and adolescents continue to feel alone even among friends. My goals in writing this book were to sensitize families

and schools to the children's distress and to promote innovative research as well as prevention and intervention programs. In my talk, I shall discuss the predictive roles of individual and systemic risk and protective factors (such as family support and schools' empowerment) within the positive psychology approach, in order to provide clarification of developmental trends.

Resilience

Resilience refers to individuals' capacity for coping successfully and functioning competently, despite exposure to a severe hardship (Luthar, Cicchetti, & Becker, 2000). It deals with dynamic interactions between risk and protective processes. The paradigm shift from a reductionist problem-oriented approach underlying the deficient models to the comprehensive empowering models is becoming a prevalent theme across academic disciplines and the helping professions. Employing these empowering models does not deny deficiencies and difficulties; however, the problems are examined within wider multidimensional, dynamic perspectives.

At the beginning, the resilience conceptualization celebrated the identification of "resilient children"

who were successful regardless of challenging risk factors. In the second stage, research examined their unique qualities, proposing linear models: i.e., a larger number of risk factors predicted excessive levels of maladjustment outcomes. Similarly, a larger number of protective factors predicted well-being. Risk factors were defined as the individual's characteristics and developmental difficulties or environmental hazards that increased their vulnerability to experiencing negative outcomes. Among the identified protective factors were proposed personality characteristics (i.e., high self-esteem), children's academic success, social competencies, intellectual performance, and the presence of secure relationship with adults (i.e., parents and out-of-the family mentors) and (Cicchetti & Rogosch, 2009).

Recent research challenged the former belief that accumulated risk factors predict increased maladjustment. A model shift focused attention on the dynamic interplay of risk and protective factors over developmental stages within different contextual conditions (Belsky & Pluess, 2009), and on approaches such as the salutogenic paradigm. Antonovsky (1987) coined the term "salutogenesis" from *salus*, the Latin word for health, to emphasize the focus of his model on health rather

than on disease. The salutogenic paradigm focuses on the identification and examinations of factors that may contribute to a dynamic movement of individuals along the health experiences of the ease/dis-ease continuum. In line of this approach, we assume that many children experience loneliness at some time, but nobody is completely lonely or fully connected. Children and adults alike dynamically move along this lonely/not lonely continuum. Interventions do not attempt to "repair" the lonely individuals, but to help them to move along this social relations' continuum.

The salutogenic approach has currently a central role in health promotion research, and supported by the World Health Organization (WHO) (Tellnes, 2009). The ability to identify and use internal (personal) and external (contextual) resources for effective coping with challenges was conceptualized as the Sense of Coherence construct (Antonovsky, 1987). This is a global orientation that expresses the extent to which individuals have confidence that their internal and external environments can be treated as structured and predictable; that resources are available to meet increased demands; and that these demands can be considered challenges worthy of energy investment and engagement.

The sense of coherence has been widely studied in different cultures. A longitudinal study (more than 30 years) indicated that child-centered parenting in adolescence and a stable career line in adulthood were directly associated with a high Sense of Coherence at age 42 (Feldt, Metsäpelto, Kinnunen, & Pulkkinen, 2007). Antonovsky pointed out that people with a high Sense of Coherence tend to treat stressors as challenges. Their coping with life stressors were more successful than those with lower Sense of Coherence.

Thus, the trends towards resilience paradigms emerged through the growing realization that many children were able to overcome personal difficulties and familial challenges, reaching successful adjustment regardless of their hardships. It should be emphasized that people seldom experience an isolated problem. Individuals who are at risk on one dimension tend to be at risk on multiple dimensions. Usually multiple risk factors tend to interact in different ways. In order to understand the impact of the risk we need to address to the simultaneous interacting effects of multiple risk factors at once. Protective variables also do not act separately or in isolation, but they operate in interactive patterns in order to buffer individuals against the effects stressful situations (Beasley, Thompson, & Davidson, 2003). Research proposed several models of resilience, and

their descriptions will exemplify the complexity of the interactions among factors. For example:

The protective models: Personal strengths and/or resources can moderate or reduce the effects of risk factors on outcomes. The connections between the risk and the outcomes will be decrease when the protective factors are present.

The challenge model: This model suggested that moderate levels of the risk might be related to greater positive outcomes. For example, Youngsters who experienced many family conflicts may feel distressed. However, a moderate amount of family conflicts may provide youth with enough opportunities to learn from the resolution of conflicts, to develop emotional inoculation, and to be prepared to face future challenges.

Traditionally risk and protective factors reflect the individuals' past and present functioning. The hope theory (Snyder, 2002) extend our perspectives by providing the future outlook.

Hope theory

Snyder (2002) assumed that human actions are inherently goal directed. He defined hope as a cognitive set of beliefs based on a reciprocally derived sense of successful (a) agency thinking (goal-directed determination) and (b)

pathways thinking (planning of ways to meet goals). High-hope individuals are convinced in their ability to produce multiple routes to their goals. Their greater repertoire of pathways thinking contributes to a higher probability of accomplishing the desired goals. In school environments, the hope predicted effort, academic performance and achievements even for children with learning disabilities (Lackaye & Margalit, 2006). Hopeful children reported lower loneliness.

Loneliness

The loneliness is a painful emotional experience that affects children's current quality of life and represents a developmental risk for their future. It signals the existence of a failure in the valued area of interpersonal relationships. Loneliness does not mean that children do not have friends and social networks. However, it means that they feel excluded and socially alienated. Loneliness is a subjective experience that reflects a mismatch between children's needs and their social environments (Margalit, 2010). The study of loneliness is in fact the study of children's interrelations, including their self-perceptions in terms of how the children view others and themselves, how others view them, and how they feel about these perceptions and conceptions.

Peplau and Perlman's classic definition (Peplau & Perlman, 1982) presented loneliness as an unpleasant experience when individuals perceive a discrepancy between the desired and accomplished patterns of their social networks. The loneliness experience is a global indicator of dissatisfaction from the quality and/or the quantity of individuals' social interrelations. Two children may be alone, but one child may experience loneliness, while the other child wishes to stay alone. Children may have many friends, and yet feel very lonely. They can be in a large crowd, in a family gathering or a social party, and yet feel alienation from the group.

The following general statements present the commonly accepted results from several loneliness studies:

- Loneliness is a distressing negative emotional experience that has clear cognitive segments.
- Loneliness is a subjective experience that may not be supported by objective situations.
- Loneliness is a reaction to unfulfilled needs: (1) for intimacy and/or (2) for social belonging.
- Loneliness is transient and a temporary state for many individuals, yet chronic states for others.
- Loneliness 'runs' in families, disclosing the joint impact of genetic and environmental factors.

- Loneliness is different from solitude. Solitude is considered as a pleasant and even desirable situation that may promote a creative experience or provide an opportunity for rest from stressful realities.
- Loneliness is different from depressive mood. Loneliness represents attempts to approach others, while depression represents withdrawal tendencies to avoid negative feelings.

conditions that promote or discourage individuals' abilities and the likelihood of experiencing satisfying human connections.

Children learn their first social interactions within their families through developing intimate relations with parents and siblings (Le Roux, 2009). The breakdown of the nuclear family, the rising divorce statistics and the increasing mobility of modern society all contributed to increased loneliness until it reached epidemic proportions in our time. The nature of parent-child interactions have been considered the roots of social competence, providing children with the confidence, knowledge, and experience that serve as the basis for later social growth and peer relations.

Developmental perspectives

Children understand and report their loneliness from early developmental stages. Their needs for relatedness can be identified even before entering school. Self-perceptions such as Sense of Coherence, social self-efficacy beliefs, hope expectations and attribution styles were consistently related to loneliness experiences. We examined the loneliness of children with typical development as well as children with special needs, and especially with learning disabilities.

Children whose development is marked with academic challenges such as learning disabilities are at an increased risk for lower self-competence, deficient social skills, and higher levels of loneliness. The study of children's loneliness requires the consideration of environmental

The attachment conceptualization predicted different levels of social connections (Mikulincer & Shaver, 2009). From early developmental stages, infants needed intimacy and continuous contacts with their parents. Gradually they develop their independence and autonomy. The dynamic conceptualization of attachment relations was expressed through the youngsters' successful struggles for a satisfactory balance between staying very close to their parents and negotiating their personal distance, independence and autonomy. Various aspects inside families, such as the cohesion and supportive

relations among family members, communication styles, siblings' conflicts and parental social activities provided guidance for their children's social development. Parents' Sense of Coherence, the family's strengths and capacity for successful adjustment (Al-Yagon & Margalit, 2009), and parental hopes and coping abilities, all joined together and related to children's functioning within environments that either promoted their capacity to form meaningful companionship or may encourage social isolation. Children's characteristics, strengths and disabilities interacted with familial factors, predicting loneliness at home and at school.

Teacher-child relationship quality and feelings of closeness and confidence further affected the tendencies for social connections (Rimm-Kaufman & Pianta, 2000). The distinctiveness of students' interpersonal closeness to teachers predicted wellbeing (Al-Yagon & Margalit, 2006). Children's unique characteristics such as learning disabilities contributed to their vulnerability to loneliness at school. Overall, children's school adjustment was facilitated by obtaining close relationships (attachment) with their teachers, whereas teacher-child conflicts predicted the children's poorer adjustment and the development of alienation in classes.

Children with learning disorders, behavior problems and attention difficulties often reported higher levels of loneliness as related to their emotional distancing by their teachers. In addition, these children also expressed lower levels of hope for changing their school situation and many felt alienated at school.

Peer relations have been considered an important challenge for boys and girls during different developmental stages. Loneliness emerged not only because of the lack of friends, but sometimes also as a result from problematic friendship relations (Waldrip, Malcolm, & Jensen-Campbell, 2008). Several negative qualities of friendship such as jealousy, conflicts, aggression and victimization may extend the impact of developmental risks. Thus the quality of interpersonal connections with friends and classmates may be treated both as an important index.

Research showed that children do not have to be exceptionally popular or well liked to avoid feeling lonely, but peer rejection and social skills' difficulties clearly contributed to loneliness. However, not all the children with difficulties were lonely. The value of positive self-perceptions and hope orientation were recognized as protective factors and as predictors of resilience and effective coping with challenges.

Loneliness in different cultures

The personal expressions of loneliness differed across cultures and social attitudes. If the community viewed a given behavior as acceptable or even desirable, then parents and teachers would attempt to encourage its development and enable its expressions. Surprisingly, comparative research clearly demonstrated the universality of the loneliness experience. Children who were socialized under different social and cultural backgrounds experienced similarly the feelings of loneliness and social distress (Rubin, Coplan, & Bowker, 2009). Young children with learning disabilities in different cultures such as Israel, China and USA expressed higher levels of loneliness. The internet environment provided new social opportunities of establishing connections. Future studies have to clarify the contradictory trends between limitless connectivity due to Internet and Cell communication, the blurring boundaries between private and public environments, and the remaining distress of social isolation. The results of several studies revealed the irrelevance of the generalized approaches regarding the global impacts of online communication and relations. They have to be treated as an inseparable part of their overall social behavior (online and offline) in order

to achieve consistent and meaningful answers.

Hopeful thinking and expectations seemed to boost effort investment in social and academic challenges not only for typical developing children, but also for those children and adolescents with learning disabilities (Lackaye & Margalit, 2006). We performed several studies that included typical developing children and children with learning disabilities. Samples consisted of several age groups from elementary schools (10 years old), to middle schools (12-13 years old) and high school students (16-17 years old). The studies examined the contributions of individual and familial variables for the prediction of the loneliness as a developmental risk and the sense of coherence as a protective factor. Family cohesion and children's hope contributed to the explanation of the risk and protective outcomes. The results of studies showed that children develop their relatedness and independence in different contextual conditions, moving along different developmental paths, adaptable to their families' variability.

In conclusion, within resilience paradigm, children's characteristics and familial distinctiveness jointly and dynamically contributed to behavior understanding. Prevention and intervention programs are currently being developed using the resilience

paradigm to promote hopeful thinking, reduce social alienation and enhance wellbeing (Margalit, 2010). Short and extended workshops are currently in their initial developing stages with

promising results in pilot studies. Their description will be detailed in my presentation and provided in the book on children loneliness (Margalit, 2010).

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