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Resilient Individuals: Vulnerable Heroes

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## **Resilient individuals: vulnerable heroes**

### **Introduction:**

Humans are susceptible to face adversity or stress at least once throughout their lifetime. It is apparent that people deal with hardships differently. The question then arises, how can some individuals rise and thrive after a trauma while others cannot?

The psychological and physiological well-being of an individual who have gone through a traumatic event depends on his or her ability to successfully utilize the available resources to work his or her way through the stressful event.

Resilience is a process through which individuals are able to overcome adversity in a healthy manner (Spence, 2015). Resilient individuals are able to better use the available resources to handle tragedies and stressors in a way that will prevent them from developing psychopathologies. This paper will provide a framework to explain the concept of resilience by highlighting the most important protective factors involved in resiliency and by analyzing the case of two children, one is resilient while the other is not.

### **The Case Study:**

Ahmad and Adam are two brothers who have been through harsh life conditions and only one of them seem to have been able to go on with his life, while the other could not. Ahmad is 25 years old, employed as HR (human resources) manager in a well-known company, and he is engaged to be married. Adam on the other hand is 23, unemployed and single. Ahmad was born one year after his parents got married. As the first child, everyone in his family took care of him, from his

grandmother to his cousin, and especially his mother. She would hurry to check on him if he cries and barely leaves him alone. Ahmad was an easy baby, he would smile a lot and cry a little. Almost one year after Ahmad was born, his mother got pregnant with Adam. The parents were very excited for the new baby, unfortunately life took a wrong turn for Ahmad's family. On the day of Adam's delivery, Ahmad's father was involved in a car accident when he was on his way to the hospital that led to his death. After Adam was delivered, the mother started asking about Ahmad's father. She was surrounded by her family and his family, whom have been told the bad news. No one wanted to drop the the bad news on the mother, but she could tell from their faces that something was wrong. She started screaming and begging for someone to tell her that Ahmad's father is alright. Ahmad's grandmother decided to end the scene and tell the mother about Ahmad's father accident. The mother was very shocked and went in a state of denial. After the mother was discharged she went in a severe case of depression and neglected both her children, Ahmad as well as Adam. The mother went to live with her parents to help her care for her children. Unfortunately, the parents were very old to take the appropriate care of Ahmad and Adam. Ahmad and Adam would cry for hours and find no response. They were both neglected and left alone most of the time. Few months after, Ahmad and Adam's mother was able to break through her depression and realized she had to support her two sons, as she did not want to burden her parents with such responsibility. She started a full-time job and always came home late and tired, but she was satisfied because she was able to support herself and her children and move out from her parents' house. She tried to balance between her job and her children, but her job was very demanding. She mostly left her children with her sister during the day and picked them up at night. Few years later, Ahmad and Adam started going to school. Ahmad was better at

making friends than Adam, but they both did relatively well during their elementary school years. By the time Ahmad was 10, he developed an interest in religion and started attending lessons and lectures in the mosque, where he was able to make a number of friendships. On the other hand, Adam preferred to stay home and watch TV or play soccer with the children in the street. Soon, Ahmad and Adam's mother got very sick and was unable to work. Ahmad and Adam were trying to take care of their mother and help whenever they could. They would spend less, study on their own, and clean the house. This was Ahmad and Adam's life for almost a year, until their mother passed away. Her death devastated both children. Ahmad and Adam moved to stay with their aunt, who was very accepting and supportive of the two orphans. She registered them in a school near her house so they do not have to walk for long distances. She also informed some of the teachers in the school about Ahmad and Adam's case and asked them to be considerate of the two children. Ahmad managed to form tight relations with a couple of children and his class teacher. Whereas Adam preferred to stay alone most of the time. Ahmad always tried to introduce Adam to his friends or teachers, but Adam never seemed to be interested. By the time Ahmad reached high school, his grades were high and his teachers were very proud of him. He graduated with high grades and was admitted to university with a full scholarship. On the other hand, Adam did not do as well in school and was unable to go to university, as his aunt was unable to pay the university fees. Now, Adam cannot support himself and is supported financially by his brother Ahmad.

**Resilience:**

Resilience sustains an individual's well-being during and after distress and adversity. Although resiliency may appear as a transparent concept, a scientific

definition for the term “resiliency” does not exist. One of the core reasons that lead to the inability to construct a solid definition of resilience is the dissension among scientists to verify whether resilience is a trait or a dynamic process (Herrman & Stewart, 2011). However, in light of recent researches, resiliency is considered to be a dynamic process through which a person tries to bounce back from an adversity through the utilization of the available resources within a cultural context (Spencer, 2015). The proposition that resiliency is a process that could be learned and developed by anyone can be supported by Werner’s findings in her study of the Kauai children (Werner & Smith, 1992). The study targeted children from birth all the way to their adulthood, to compare between resilient and high-risk children. Werner found out that most of the high risk children who had troubles as teenagers have figured their way to establish a better and a satisfactory life by the time they reached adulthood (Werner, 2005).

Although resiliency could be practiced by virtually anybody, there are factors which enhance people’s ability to be resilient in the face of adversity and distinguish them as resilient. These factors are called protective factors, and they could be classified into three categories, which are personal, familial and societal factors (MacMillan & Afifi, 2011; Passer & Smith, 2011).

### **Protective factors:**

Resiliency is a product of many factors. Warner and Smith were able to deduce three main factors that promote resiliency within an individual, which include personality traits, good family relations and social support (1992). Such factors that promote resiliency are known as protective factors (Masten, 2011). In light of Werner

and Smith's finding, the development of resilient individuals can be understood in the context of the personal, familial and societal protective factors.

### **I. Personal factors**

Resilient individuals exhibit a number of distinguishing traits. They show positive attitudes such as self-confidence, intelligence and adaptive coping (MacMillan & Afifi, 2011). Werner & Smith found that the factor that significantly differentiated between resilient individuals and their peers is the ability of the resilient individuals to find and seek emotional support during their early years of life.

Resilient children respond to their caregiver and behave in a manner that attracts the caregiver's attention positively, resulting in more attention from the caregiver, hence establishing the basis for familial support.

Moreover, resilient individuals are able to adapt and cope with adversity in a healthy manner. There are three general mechanisms in which an individual can cope with a stressful event. These mechanisms are as follows; (1) problem focused-coping, (2) emotional-focused coping and (3) seeking social support. Problem focused-coping involves facing the situation head on and trying to come up with solutions to stop or overcome the adversity. However, in emotion-focused coping individuals try to work their way through their feelings. Lastly, seeking social support involves the creation of social networks and the reliance on others for help and support. Each of these coping mechanisms is effective as long as it is used in the appropriate situations and in the appropriate way. Resilient individuals are able to use these coping mechanisms to successfully get through life obstacles (Passer & Smith, 2011).

Furthermore, by the time of adolescence, resilient children show positive attitudes and traits. They have a sense of self-trust, worthiness, responsibility, and

confidence. The development of such attitudes was possible because as children these individuals participated in different school activities, which not only provided them with a sense of satisfaction, but also honed their self-esteem.

## **II. Familial factors:**

The second major factor contributing to resiliency is familial support. The presence of a supportive family, and an attentive caregiver in one's early years of life, and throughout the lifespan is very critical for an individual's well-being (Karreman & Vingerhoets, 2012). Familial factors include the presence of well-established family relationships during childhood and adulthood.

The most crucial relationship in a person's life is the mother-infant relationship. As a result of the need for the caregiver, infants demonstrate attachment behaviors such as smiling and crying to ensure the closeness of the caregiver (Fonagy, 2001).

Moreover, Ainsworth proposed that a child's expectations of the caregiver's response to his or her needs will determine the quality of attachment the child develops with primary caregiver. Ainsworth was able to identify three main qualities of attachment between the infant and the caregiver, which are secure attachment, and insecure attachment which in itself is divided into two criteria, which are anxious-resistant and anxious avoidant-insecure attachments. In Ainsworth experiments children who were observed as securely attached demonstrated curiosity in the environment, they become anxious when the mother left and show signs of happiness when she returned. Anxious resistant babies would explore less whether the mother is absent or present and would get upset if she leaves but they would not be relieved if she comes back. Anxious-avoidant children did not respond much to the leave or

return of the mother (Bretherton, 1992; Passer & Smith, 2011). The different reactions of the infants were a result of their expectations from their caregiver, emphasizing the critical role of the caregiver in establishing a bond with the infant.

The importance of the attachment theory is best understood when the infant does not form an attachment with the primary caregiver in early childhood. When the caregiver is inattentive to the child's needs, the process of forming a healthy attachment with the primary caregiver is interrupted, which could lead the child to suffer a lifetime of social and emotional impairment. This was demonstrated in Harlow's experiment with the monkeys, where he observed that monkeys who were not able to form an attachment with their primary caregiver grew to become violent adults, who treated other monkeys and their own babies fiercely (Passer & Smith, 2011).

Clearly, establishing a secure attachment between the mother and the child in his first years of life is very crucial for the child ability to form healthy relationships in the future. Furthermore, family relations are just as important during childhood as they are during adulthood. The support of spouses or other family close members is also important for a person to be able to face hardships and bounce back. The presence of a figure of support, love and care helps the individual look at the bright side and reduce the effect of the stressor. The presence of familial support will motivate the individual to adopt positive attitude, allowing him to better withstand and work through trauma (Werner, 2005).

## **II. Societal factors**

The presence of social support has been closely linked with resiliency. Societal factors that promote resilience include social support from friends or society



members (e.g. supportive teachers) and practice of religion and presence of faith (MacMillan & Afifi, 2011; Werner, 2005). Children who are resilient exhibit better social skills as children compared to their counterparts. They can form and maintain strong relations with a non-family member, who provide care and support. These behaviors that grow with resilient individuals help them feel better about themselves when facing adversity, making it easier for them to cope with the experience. The presence of a supportive figure is beneficial not only by providing support, but also by reducing the effect of bad environments. For example, a supportive figure could prevent the individual from dealing with adversity through drugs or alcohol (Herrman & Stewart, 2011). In addition, Werner & Smith found that the majority of resilient individuals seek support from childhood and all the way to adulthood (1992), indicating that social support is an important protective factor in resilient individuals.

Moreover, Werner (1992) found that many of the resilient had faith in God which provided them with the support they need to overcome adversity. In addition, she found that faith was one of the factors that allowed children who were considered to be at high risk of future collapse to be successful adults. Suggesting the importance of faith, not only to those who are resilient but also to those who seek to be.

### **Difference between resilient and non-resilient individuals:**

Lastly, there are characteristics that distinguish resilient individuals from non-resilient ones. These characteristics will be pointed out by comparing the cases of Ahmad and Adam. Ahmad and Adam are two brothers, who have been through the same life trauma but came out very differently. Ahmad is living a successful life, while Adam is still struggling to stand on his feet.

Resilient children exhibit different behaviors when compared to children who are non-resilient. Ahmad exhibited resiliency traits since his childhood. He was an easy baby, which motivated his mum to form a strong bond with him. Ahmad fits the criteria of a securely attached baby, which protected him from forming psychopathologies and allowed him to become resilient in the future. As a result of being a securely attached infant, Ahmad was able to form better relations as a child and as an adult. By forming tight relations around him, he was able to better manage the loss of both his parents. Ahmad was able to utilize the support he got from the mosque and his faith to keep him going. As Ahmad reached high school his self-esteem has improved and he managed to get a scholarship and complete his studies. In his early adulthood, Ahmad was able to find a job that satisfied his needs. He was also engaged to his best friend, who was his primary source of support during his adolescence and continues to be. Adam was the complete opposite of Ahmad; he was unable to get a degree or find a job. He was also unable to form a stable relationship. Adam's struggle after the loss of his mother was due to a combination of risks, and the absence of protective factors against those risks. Adam was unable to form a healthy secure bond with his mum when he was a child. The mother was neglectful of both of her children during their childhood, but only Adam was severely affected. This happened because Adam's mum was neglectful of Adam during his first two years of life, and he did not have a stable attentive caregiver during those years, which caused him an inability to form healthy relationships later on in life, preventing him from acquiring or seeking social support. He was mostly left alone and his cries received no response, which caused him to be an insecurely attached child. Moreover, by losing the secure attachment, Adam was less resilient in the face of adversity. After Adam's mother passed away, he pulled back from society. He could not form

relationships or succeed in school. He was not able to benefit from the people around him or seek support. Therefore, he started developing symptoms of psychopathology. Although Adam has hit rock bottom, his journey is not over yet. If he is able to benefit from opportunities or seek social support from a friend or a mentor, or relate to his faith he might be able to overcome the loss of his mother and be an effective member in society. He could learn to become resilient by utilizing the resources around him (Werner, 2005).

### **Conclusion**

To conclude, people cannot escape adversity, therefore, resilience is a process that should be taught and advocated for by the government as well as individuals. It is important to teach and embed and provide protective factors for children, to help them acquire traits of resiliency. Creating a society that advocates resiliency and help individuals to be resilient, creates a harmonious society, one in which individuals are able to rise and thrive in the face of adversity. Moreover, by promoting resiliency, a better environment can be created for the future generations. By helping individuals to rise, they will desire to give their children what they had, and hence, a cycle of resilient people will give rise to another and so on. This way, society will witness the everlasting achievements of those who have overcome adversity.

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