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## Resilience and adaptation of adolescents

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### Abstract

The first studies on resilience originate in child psychology and psychiatry. Contemporary authors define resilience as a dynamic process involving positive adaptation in the context of adverse living conditions. Resilience, hardiness, self-regulation, coping behavior and psychological defense mechanisms influence the processes of human adaptation. We hypothesized that the resilience of adolescents is associated with indicators of social adaptation.

A variety of methods for empirical data collecting were used: observation, expert interviews and test methods. First, we have found that the main causes of adolescents' social disadaptation are: manifestation of anxiety and hostility to adults, impulsivity and failure to comply with social norms. Secondly, the low level of the risk group's resilience is determined by the lack of control over events and determination on choice making in difficult situations, including traumatic ones.

Therefore, resilience is an important resource for the adolescents' development and social adaptation to environmental conditions.

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**Keywords:** Resilience; adolescent; social adaptation; resource.

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## **1. Introduction**

The resilience of a man is an indicator of his ability to develop, adapt and maintain stability / balance in difficult situations. The first works devoted to the study of resilience originate in child psychology and psychiatry. Back in the 70s of the last century scholars and practitioners were attracted by the phenomenon of resilience in children at risk of developmental disorders and psychopathology as a result of adverse genetic or environmental influences.

Initially, the ability to withstand stress was seen as an innate quality, like a miracle, as the unique children's ability, as a psychological armor of the "impregnable child", who is not subject to stress. Gradually the issue of the human adaptive systems functioning came to the fore, which in the case of normal performance, provide the conditions for development despite the difficulties and crises.

Contemporary authors define resilience as a dynamic process involving positive adaptation in the context of adverse living conditions. Resilience is a potential, a prerequisite for evolution and adaptation, influencing development of regulation and self-regulation. According to M. Rutter (Rutter, 1987), personality traits associated with resilience and protective environmental factors provide a basis for the development and improvement of adaptive processes. This fact directs to the empirical study of resilience in relation with social adaptation (Kuftyak, 2012). In the context of this study the social adaptation is considered as a result of an individual's active adaptation to the conditions of the social environment (Rean, 2006).

Adolescence as the most vulnerable period in ontogeny is considered by the most researchers as a risk factor of disadaptation and mental disorders (Nicol'skaja, Granovskaja, 2000). Adolescence is a stage at which a person realizes himself the author of his own biography, taking personal responsibility for his own future and clarifying the boundaries of self-identity. The understanding of the younger generation's psychological characteristics encouraging them to live and develop and making it resistant in the face of dangers is the issue of serious practical importance for modern society.

The purpose of this research is to study interrelations between resilience of adolescents and their level of social adaptation-disadaptation. We have hypothesized that resilience of adolescents is connected with social adaptation indicators.

## **2. Method**

### *2.1 Participants*

The empirical study on resilience and social adaptation of adolescents involved students of 8-9 classes of secondary schools in Russia. Total sample size was 25 teenagers, the average age – 16 years.

### *2.2. Measures*

#### *2.2.1. Procedure*

The disadaptation symptoms intensity were assessed by Stott's programmable monitoring procedure. The Personality Anxiety Scale (PAS) (Prihozhan, 1983) was used to identify the level of social competence of adolescents, as well as the level of social competence in accordance with

chronological age. Questionnaire “The Personal Views Survey” (Maddi 2003; adaptation Leontiev 2006) and Resilience Factors Scale (RFS).

*2.2.2. Statistics*

Mann-Whitney U-test and Spearman’s rank correlation were used.

**3. Results and discussion**

The participants were divided into two groups according to Stott’s monitoring procedure results. The first group consisted of "adaptive teenagers» (n = 14) and the second group of “maladaptive teenagers» (n = 11). To divide the participants into the groups we used the level of symptom-complex severity indicators. The group of maladaptive teenagers showed the following symptom-complexes: lack of trust in new people, things and situations; depression; emotional stress; anxiety towards the adults; restlessness. These data have proved that these children have to put a lot of effort in the performance of any act or achieving success; they are characterized by low mood, lack of energy, low concentration and restlessness.

There were found statistically significant differences in indicators of the social competence severity in the groups. Such indicators as the development of randomness and social interests have much smaller quantitative intensity in "maladaptive teens" comparing with "adaptive teenagers." The "maladaptive teens" have a low level of social development that mismatches chronological age of the participants.

Comparing the average values of indicators using the Resilience Factors Scale (RFS) procedure the following data were identified (Table 1): the skills of problem identifying-solving were less expressed in “maladaptive teens” group (U=11,000, at p=0,000), as well as positive thinking (U = 36,000, at p = 0.025), the balance of personality and social skills (U = 34,000, at p = 0.018), the appeal for different types of support (U = 20,000, at p = 0,001). Our study showed that “adaptive teenagers” get over the mental and emotional stress by the means of efficient coping such as "problem solving", "positive thinking" and "appeal to support".

**Table 1.** The average values of resilience components in groups of adolescents

Subscale	M		Mann-Whitney’s U – criterion
	Maladaptive adolescents (n = 11)	Adaptive adolescents (n = 14)	
Problem identifying and solving skills	26,6	30,9	11,000*
Personal support	25	26	61,000
Other types of support	11,9	13,8	20,000*
Positive thinking	13,6	15,5	36,000*
Self-confidence	8,4	8,5	43,500
Balance of a personality and social skills	12,5	13,4	34,000*

(M - arithmetical average; \* - significance value of p <0,05)

Using Mann-Whitney's test we found significant differences in indicators of "control" in the studied groups of teenagers ( $U = 26,0$ ,  $p = 0,004$ ). The indicator of "control" was significantly higher in the adapted adolescents' group (Table 2). It was also found that the level of hardiness manifestation in groups of adolescents tended to be different. The level of hardiness in maladjusted adolescents was significantly lower than that of the adapted group ( $U = 44,0$ ,  $p = 0,061$ ).

**Table 2.** The average values of hardiness components in groups of adolescents

Subscale	Maladaptive adolescents (n = 11)	Adaptive adolescents (n = 14)
	M	M
Commitment	39,1	39,5
Control	26,7	30,4*
Challenge	16,8	18,4

(M - arithmetical average; \* - significance value of  $p < 0,05$ )

These data do not contradict the views of S. Muddy on the development of hardiness. Age-related changes in the hardiness manifestations are primarily associated with social factors such as the impact of resilient adults' positive examples and learning how to keep emotions and behavior under control. According to our research the adapted teenagers are harder than the maladapted. Teens with behavioral disorders have a low social level comparing to well-to-do adolescents, they tend to feel a low level of social support and they are characterized by high tension in behavior and learning activities. These data allow predicting the lower mental health level of maladapted adolescents and it can be confirmed by a low level of their hardiness intensity.

To investigate the relationship between resilience, hardiness, social adaptation and social disadaptation we conducted a correlation analysis. The data obtained by Spearman's rank correlation confirmed the presence of the relationship between all indicators.

The study has found:

1. Presence of interconnection between resilience, social adaptation and social disadaptation. The higher the level of resilience, the lower the social disadaptation level and the higher the social adaptation level.

2. Resilience indicators are negatively connected with such disadaptation symptom-complexes as withdrawal and anxiety towards peers on the total sample of adolescents. These individually exhibited traits and behavior characteristics are caused by excessive anxiety, fearfulness, propensity for obsessive fears and self-isolation which do not help adolescents actively and independently resolve their stressful situations.

3. Considering the results of the study on interconnection between hardiness and disadaptation symptom-complexes the following data were revealed: the negative control bonds due to withdrawal, anxiety towards peers, anxiety towards adults' acceptance, negative interrelations between hardiness and emotional immaturity of adolescents. We can confirm that hardiness in its manifestations is based upon the weaknesses and vulnerabilities demonstrated by maladaptive adolescents.

4. Resilience indicators associated with the control in adolescents and their hardiness include (Table 3): the skills of identifying and solving problems, support of an adolescent, positive thinking, self-confidence and social skills.

**Table 3.** Significant correlations between the resilience and hardiness

Resilience parameter	Hardiness parameter	Control	Hardiness
Problem identifying and solving skills		0,482*	
Personal support			-0,410*
Other types of support		0,661*	
Positive thinking		0,457*	
Self-confidence		0,438*	
Balance of a personality and social skills		0,412*	

In our view, the person’s conviction that it is possible to influence the outcome of an event, regardless of the essential situation outcome, determines the human behavior’s productivity, his total energy potential and success in difficult situations.

#### **4. Discussion**

In modern social, economic, demographic and environmental conditions an important factor of human adaptation to reality as well as personal self-fulfillment is resilience which characterizes person's ability to implement his resource potential and can predict his success in various fields of life.

Firstly, we have found that adolescents’ manifestation of anxiety and hostility to adults, impulsiveness and failure to comply with social norms can be the causes of their social disadaptation.

Secondly, disadaptation symptom-complexes negatively associated with indicators of resilience and hardiness are mostly expressed in adolescents at risk comparing to their adapted peers.

Thirdly, the low level of the risk group’s resilience is determined by the lack of control over events and determination on choice making in difficult situations, including traumatic ones.

Therefore, the low social adaptation level of maladaptive adolescents is defined by their low resilience, and, as a consequence - the lack of resources for social adaptation. Thus resilience is an important resource for the adolescents’ development and social adaptation to environmental conditions.

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