

Why being resilient won't necessarily make you happy

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Credit: AI-generated image (disclaimer)

We're living in difficult and uncertain times, and are constantly reminded to stay resilient in the face of adversity. In fact, tips on how to stay strong and handle unexpected setbacks by recovering—and even growing as a person—are being thrown at us left, right and center. This sort of thing can be helpful, but we must first ask ourselves, what does it



really mean to be resilient—and what good does it do?

Over the past two decades there has been a huge shift in psychology from a focus on individual risk and vulnerability to one of personal strength and capacity. Around 85% of all the studies on <u>resilience</u> have been published in the last 20 years, reflecting our growing belief that humans can train themselves to overcome hardships. But will resilience automatically enable us to be happy? Our new study, <u>published in BMC Public Health</u>, suggests not.

Resilience featured at the core of the World Health Organization's policy framework for health and well-being in 2020. This states that "building resilience is a key factor in protecting and promoting health and wellbeing." Similar statements have also been made by wellbeing researchers. Despite this, most resilience research focuses on how to help individuals avoid negative outcomes, rather than achieve positive outcomes. Very few who investigate resilience actually assess wellbeing.

Wellbeing is a broad concept that encompasses feelings of happiness and satisfaction. Many make the distinction between <u>subjective</u>, "hedonic <u>wellbeing"</u>, which is characterized by positive emotions, and <u>psychological</u>, "<u>eudaimonic wellbeing"</u>, which relates to how we evaluate our lives. The latter can include perceptions of autonomy, purpose in life, relationships with others and so on. When these different aspects of wellbeing are considered together, they are collectively referred to as "<u>mental wellbeing</u>."

Good mental wellbeing predicts <u>a host of positive outcomes</u>. Happier people have more successful relationships, feel better about themselves, earn more money and even have stronger immune systems. Higher wellbeing not only arises from these outcomes, but it can also lead to them. The same goes for mental health. Research suggests that maintaining good wellbeing <u>can offset some of the processes</u> that lead to



mental health problems. Happier people are generally less likely to have a mental illness.

Impact of adolescent bullying

Resilience can help us avoid developing mental health problems after something negative happens to us—but it does not guarantee happiness. In our recent study with more than 650 participants who reported being bullied as adolescents, we demonstrated this. Participants responded to a set of questions related to their experiences of being bullied at the age of 13. We then assessed their mental health and wellbeing at age 23.

We showed that many victims remained partially resilient by avoiding depression in early adulthood. But whether they were resilient or not, they still experienced significantly poorer wellbeing than individuals who were never bullied. These findings are quite remarkable as wellbeing was assessed ten years after the bullying experiences took place—demonstrating the potentially severe and lasting implications of adolescent bullying.

The lower wellbeing scores that we observed among the victims is a clear example of people "languishing" instead of flourishing. This state of being is also likely to be linked to other instances of victimization, and perhaps also negative life experiences more generally. But because wellbeing is scarcely assessed among adults after adversity, we don't know the true burden of these events. Understanding how wellbeing is affected by a negative event is crucial to ensuring that we can offer the right support. As is evident from our findings, individuals who do not meet the criteria for a clinical diagnosis may still be in need of psychological support.

Approaches to improving wellbeing differ to those offered for mental health problems including depression. While treatments for depression



focus on alleviating symptoms, positive psychological interventions aim to cultivate positive thoughts, feelings and behaviors. Strategies include things like writing gratitude letters, counting blessings and relaying positive memories. That's because the aim is not to treat psychiatric symptoms, but to benefit those experiencing negative emotions. When this is delivered alongside treatments for depression, the likelihood of relapsing is also significantly reduced.

The benefits of exercising good wellbeing are infinite, and the availability of positive psychological interventions are both vast and accessible. It is therefore time to expand the focus on resilience to include assessments of wellbeing to help identify when, why, and for whom these resources will be of most value. This is vital to ensuring that individuals not only avoid mental health problems after adversity, but truly flourish and build resilience to both past and future events.

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