

Evaluating the Effectiveness of Group Resilience Training on Increasing the Social Adjustment and Reducing Loneliness in Female High School Students

Masomeh Kamali Nejad¹, Gholamreza Ebrahimi Nejad^{2*}

¹Department of Psychology, Kerman Branch, Islamic Azad University, Kerman, Iran

²Department of Behavioral Medicine and Clinical Psychology and Neuroscience Research Center Shahid Beheshti Psychiatric Hospital Kerman University of Medical Sciences, Kerman, Iran

*Corresponding Author Email: ebrahimig@kmu.ac.ir

ABSTRACT: The objective of present research was to evaluate the effectiveness of group resilience training on increasing social adjustment and reducing loneliness in female high school students. The population of this research consisted of all female high school students in Sirjan city during the academic year of 2015-2016. for this purpose, 30 female students having low social adjustment and high loneliness were randomly selected and assigned into two groups of experimental and control (each containing 15 subjects). The tools used in this research included Hamel, Renshaw, and Asher Loneliness Questionnaire (1984), and Sinha and Singh Social Adjustment Questionnaire (1993). The participants were trained for 8 consecutive sessions, in which each session lasted 90 minutes. Data were analyzed using covariance test. The findings revealed that the mean scores of loneliness in the experimental group declined significantly in the post-test stage compared to those in the control group ($P = 0.001$). Additionally, the mean scores of social adjustment in the experimental group increased significantly in the post-test compared to those in the control group ($P = 0.001$). Findings of this study showed effectiveness of group resilience training on increasing social adjustment and reducing loneliness in female high school students. To reduce loneliness and increase social adjustment in students, much attention should be paid on the role of resilience training as one of the appropriate educational training in preventing students' problems.

Keywords: Group Resilience Training, Social Adjustment, Loneliness.

INTRODUCTION

By studying behavioral distortions and social deviations in recent years, psychologists have found that many disorders and harms are rooted in people inability in correctly analysis of personal issues, lack of control and adequacy to cope with difficult situations, and lack of readiness to solve the problems (Sarkhosh, 2005). Based on different studies, about 30% of adolescents usually experience a psychological disorder during their lives, which might leave many negative impacts on their family, school, environment, and peers and their future (Eslaminasab et al., 2011). Adolescence is considered as one of the most important stages of social and psychological growth and development in a person. In this period of life, the need to emotional balance, especially the balance between emotions and wisdom, understanding the self-value, self-awareness (recognition of capabilities and desires), choosing of real goals in life, the emotional independence of the family, maintaining the mental and emotional

balance against environmental stressors, establishing healthy relations with others, acquiring social skills needed to find friends, recognizing the healthy and effective life are considered the important needs of adolescents. Thus, it seems to be essential to help adolescents develop the skills needed for desired living, to create or increase the self-esteem in coping with problems, and to help them develop emotions and social skills needed to successfully adapting to the social environment and effective and constructive life (Shoari Nejad, 1993). Female high school students have low levels of adaptability because of some reasons such as being away from family, change in environment and problems caused by physiological disorders such as premature syndrome disorder, so they suffer from loneliness. Elhageen (2004) considers loneliness as frustrating and unpleasant experience, which causes that an adolescent to experience uncomfortable and unpleasant mood. Loneliness might be the result of interaction between the child and the parents' parenting style (Department of Health, 2001). Social adjustment as the most important sign of mental health is a topic that has drawn the attention of many sociologists, psychologists, and especially educators. Social growth is the most important aspect of the growth of any person, and his adjustment to others is considered as the criterion to assess his social development. From Tinto point of view (1993), adjustment had the wide spectrum, which includes the aspects of family, peers, and community, in which the social adjustment is in priority. When one's physical and mental balance is interrupted so that he is displeased, internal forces and external supports will be needed to create the balance. In this case, if he is successful in using new mechanisms and solving the problem for his advantage, it is said that adaptation took place (Goodstein and Lanyon, 1995). Different studies such as those conducted by Ramezani and Sayari (1999) and Gharbi and Gholizadeh (2007) have found that Iran's education system has worked poorly in the area of human communication skills, especially in high school level of education, and students at this level of education suffer from some deficiencies in interpersonal communications, resilience, and flexibility, so that life skills level in Iranian adolescents is less than average (Adib, 2006). Rahmati et al (2010) found that training life skills is effective in social adjustment. Given the importance of resilience training skills with the aim of preventing and promoting mental health, the need for training such skills to adolescents is revealed for us. One of the preventive programs considered at the global level is training the resilience for adolescents. Mandel et al (2006) considers resilience as an effective flexibility against life events, and he argues that resilience is proper adjustment when exposed to stressful or dangerous areas or important threats. In other words, they introduce resilience as the ability to improve, compensate, and flexibly after facing with damaging and stressful events. Inzlicht et al (2006) believe that resilience leads into decreased anxiety and depression. Werner (2005) investigated a group of children in Khawabi city in Hawaii. He found that children with high levels of resilience enjoyed those characteristics in their adolescence, which made them to be distinctive from those adolescents who had low level of resistance. Maston et al (1990) compared the resilience of children who had schizophrenia mothers with children who had healthy mothers. Findings revealed that children with healthy mothers had a higher level of self-esteem and higher academic achievement compared to those who had schizophrenia mothers. In another study, Jopp and Rott (2006) investigated the impact of resilience on the happiness in elderly people, and he concluded that resilience training leads into high level of happiness. Seligman et al (2005) used strategies to improve happiness and resilience on the clinical population in their study. They concluded that mood improvement and self-esteem trainings led into reduced depression symptoms. In a research carried out by Lyubomirsky et al (2008), it was found that training the components of self-esteem and positive mood and optimism among students who had cognitive symptoms of depression up to six months after the intervention caused an improvement in students' depression and resilience. Based on the studies conducted among female high school students with low social adjustment and high levels of loneliness, many problems found among them. Some of these problems included that female high school students due to problems caused by premenstrual syndrome, emotional problems, being away from the family, and so on feel lower adjustment and thus high loneliness (Moharam Zadeh, 2012). Given what was said above, the main research question is if group resilience training affects the level of social adjustment and loneliness in female high school students.

MATERIALS AND METHODS

Population, sample size, and sampling method

This study is a quasi-experimental type of study with pre-test and post-test and control group. The population of the study included female second-grade high school students of Sirjan city in the academic year of 2015-2016. For this purpose, among 50 female high schools in Sirjan, one female school was selected using single-stage cluster random sampling method, and questionnaires of loneliness and social adjustment (pre-test) were distributed among 87 second-grade high school students. Then, among the students with low adjustment score and high loneliness

score, 30 subjects were randomly selected and they were assigned into experimental and control groups (each group containing 15 subjects). Then, experimental group received 8 sessions (each session lasted 90 minutes) of group resilience training and the control group received no training.

Research tool

A) Loneliness scale

This scale was developed by Asher and Hamel and Renshaw in 1984 (1984), which assesses the level of loneliness and social dissatisfaction. It includes 24 items, which 8 items of it (2-4-5-11-13-15-19-23) are related to entertainments and interest, and no score is given for them. Score is given for 16 items and its range is from 16 to 80. They are scored based on Likert scale ranging from 1 to 5 (it is not true about me at all=1, it is true little about me=2, it is sometimes true about me = 3, it is often true about me = 4, and it is quite true about me = 5). In a research conducted by developers of this scale on 522 normal children and adolescents aged 12 years and older (1984), it was found that the scores of this scale has significant correlation with scores of assessment of peers and other methods of group measurement. The reliability coefficient of this test was obtained $r=0.83$ using split-half method, $r = 0.91$ using the Spearman Brown method, and $r=0.91$ using the Guttman slit-half method (Asher, Hamel, and Renshaw, 1974). The reliability coefficient was obtained to be $r=0.49$ by Mohammad Majdian using test-retest with time interval of 25 days on 41 students studying in one female secondary school. This test is a good scale for measuring and evaluating the level of child loneliness and social dissatisfaction.

B) Adjustment Questionnaire (Special for high school students)

This questionnaire was developed by Sinha and Singh in Shankar University in 1993 and it was validated and normalized. It assesses the adjustment of high school students (aged 14 to 18 years) in three areas, including emotional, social, and educational. This questionnaire can be used as a tool for screening in the area of adjustment. Total adjustment score is obtained by sum of the scores of the three sub-scales. The score of each item of questionnaire is considered as a sign of non-adjustment. The greatest score of each sub-scale is 20 and the total score is 60. Therefore, the greater score in the sub-scales and the total test is considered as sign of non-adjustment. The initial questionnaire includes 100 questions, reduced to 60 questions after different reviews. Thus, the final form of questionnaire has 60 questions (20 questions for each area). Sinha and Singh implemented its final form on 1950 students, selected randomly among 40 high schools. Using the data collected, they normalized questionnaires for the target population. According to the norms reported, having score 31 and higher in total adjustment and score 11 and higher in each of the subscales suggests poor adjustment. The answers to the test questions are in the form of "Yes" and "No" and the value of each question is zero (very good adjustment) or one (very poor adjustment). Sinha and Singh reported its reliability 90% and 96% for subscales and the total test using test-retest and split-half method, respectively. Questionnaire was also validated by correlating the questionnaire scores with Hostel management ranking. This ranking was performed using the data obtained from 60 students living in multi-purpose high school of Panette College. Hostel management ranked the students in the point scale: very good, good, moderate, poor, and very poor in terms of their adjustment. Correlation coefficient between the questionnaire's scores and managers ranking was obtained 0.51. The reliability coefficient in this study was estimated to be 0.94, 0.93, 0.96, and 0.95 for emotional, social, and educational dimensions, and total scale, respectively, using the split-half method. It was also estimated to be 0.92, 0.92, 0.96, and 0.94 for emotional, social, and educational dimensions, and total scale, respectively, using Kurder Richardson method.

Data analysis method

The data obtained from the experimental and control groups were examined using descriptive indices of graph, mean, and SD, and inferential indices of covariance analysis were used to test the hypotheses of research.

Procedure

To conduct this research, researcher referred to Education Department of Sirjan city and received the list of all female high schools of Sirjan. Then, single-stage cluster random method, one female high school was selected among 50 schools, and the loneliness and social adjustment questionnaire (pre-test) was distributed among all 87 second-grade high schools. Then, 30 subjects who had low social adjustment and loneliness were randomly selected and they were assigned into experimental and control groups (each group containing 15 subjects). Then, experimental group received group resilience training for 8 sessions, in which each session lasted 90 minutes and the control group received no training. After resilience training, the loneliness and social adjustment of students in the

experimental and control group were re-measured (post-test). Description of sessions of group resilience training is as follows:

Resilience training sessions report: First session: Group members were introduced to each other and rules and principles governing the group counseling were described, and concepts of resilience and methods of implementing program and tasks were explained for members. Second session: emotions were identified and controlled. Third session: methods to enhance the level of empathy were trained and the behavior of altruism and contributing, assisting, accepting, and consoling each other were trained. Fourth session: The words of self-regulation and self-esteem and their differences were explained for members. Self-regulation is a component through which adolescents acquire the skill of delaying the immediate pleasure and preventing the impulses to achieve the future goals. Self-resilience refers to ability of adolescents to adapt, to acquire flexibility, and to adapt the needs of various situations. Fifth session: The ability to form positive relationships and to maintain them and the ability to establish an effective verbal and non-verbal relationship were discussed. Sixth session: sense of humor and effective group participation were trained. Seventh session: sense of self-realization, positive self-perception, and self-efficacy were trained. Eighth session: meta-cognition, problem solving, negative thinking cycle analysis, and an effort for positive attitude development were trained.

RESULTS

Table 1. Mean and SD of social adjustment variable in pre-test and post-test.

Variable	status	Group	Mean	SD	minimum	maximum	N
Social adjustment	Pre-test	Experimental	21.07	3.47	15	28	15
		control	20.47	4.13	13	30	15
		Total	20.77	3.76	13	30	30
	Post-test	Experimental	36.33	2.58	30	40	15
		control	20.87	4.17	17	32	15
		Total	28.60	8.57	17	40	30

Means of pre-test and post-test in the variable of social adjustment were different. To examine the significance of this difference, covariance analysis was used.

Table 2. Findings of covariance analysis of scores in variable of social adjustment.

variable	Source of variations	SS	df	SS	F	p-value	ETA Coefficient
Social adjustment	Pre-test	89.83	1	89.83	9.81	0.004	0.267
	group	1718.11	1	1718.11	187.63	0.001	0.874
	error	247.23	27				
	total	26670.00	30				

To examine the hypothesis that states group resilience training is effective in increasing the social adjustment level of female high school students, social adjustment scores of two experimental and control groups were compared using the covariance analysis method. Findings of this method in Table 2 indicate a significant difference between experimental and control group scores ($F = 187.63$, $p < 0.001$). This finding suggests that group resilience training is effective in increasing the mean of social adjustment in female high school students, so research hypothesis was confirmed.

Table 3. Mean and SD of loneliness variable in pre-test and post-test.

Variable	status	Group	Mean	SD	minimum	maximum	n
loneliness	Pre-test	experiment	59.60	7.46	45	72	15
		control	61.60	6.84	48	70	15
		Total	60.60	7.10	45	72	30
Post-test	Post-test	experiment	38.53	5.02	30	50	15
		control	58.93	7.32	44	70	15
		Total	48.73	12.07	30	70	30

Means of pre-test and post-test in the variable of loneliness were different. To examine the significance of this difference, covariance analysis was used.

Table 4. Findings of covariance analysis of scores in variable of loneliness.

variable	Source of variations	SS	df	SS	F	p-value	ETA Coefficient
loneliness	Pre-test	566.64	1	566.64	28.43	0.001	0.513
	Group	2692.22	1	2692.22	135.10	0.001	0.833
	error	538.02	27	19.92			
	Total	75474.00	30				

To examine the hypothesis that states group resilience training is effective in reducing the loneliness level of female high school students, loneliness scores of two experimental and control groups were compared using the covariance analysis method. Findings of this method in Table 4 indicate a significant difference between experimental and control group scores ($F = 135.10$, $p < 0.001$). This finding suggests that group resilience training is effective in decreasing the mean of loneliness in female high school students, so research hypothesis was confirmed.

CONCLUSION

As stated, this research was carried out to examine the effectiveness of group resilience training on increasing social adjustment and reducing loneliness in female high school students. Findings of Table 1-4 revealed that the resilience training program can increase social adjustment and reduce loneliness among female students ($P > 0.001$). It means that resilience training is effective in increasing social adjustment and reducing the loneliness of female students. This result is in line with results of the studies conducted by Lyubomirsky et al (2008), Mendel et al (2006), Inzlicht et al (2006), Jopp and Rott (2006), Werner (2005), Seligman et al (2005), Elhageen (2004), Department of Health (2001), and Maston et al (1990). In explaining the result that why resilience training is effective in increasing social adjustment and reducing the loneliness of students, it can be stated that the defined resilience training program can develop adaptive skills in students and reduce the severity of their non-adaptability. People suffering from loneliness usually do not have the adaptive skills of problem solving and communication skills, and they face with problems and act impulsively when communicating with their peers. Beside cognitive rehabilitation, such people can acquire the skills needed, show different responses in different situations and improve their social relations by participating in resilience training programs. It is recommended that resilience training program to be included as main general education program in the educational centers so that we can change the stereotypical thoughts, symbolic system, and behavior of guilty people in society in line with peaceful coexistence and welfare.

Conflict of interest

The authors declare no conflict of interest.

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