



The Effectiveness of Resiliency Training on Psychological Cohesion and Flourishing in Elementary Students

Amrollah Amani Kolarijani^{1*}, Seyedeh Azam Mortazavi Nia², Sara Esmaelzadeh Khadem³

1. Assistant Professor, Department of Sociology, East Tehran Branch, Islamic Azad University, Tehran, Iran.

2. MA, General Psychology, Neka Branch, Islamic Azad University, Mazandaran, Iran

3. MA, General Psychology, West Tehran Branch, Islamic Azad University, Tehran, Iran

* Corresponding author's Email: amani.shargh@gmail.com

Abstract: The present study aimed to examine the effectiveness of resiliency training on psychological cohesion and flourishing in elementary students. The current research was a quasi-experimental pretest-posttest with a control group design. The statistical population of the study consisted of all sixth grade elementary school girls in Islamshahr, Iran in 2020. The sample consisted of 30 sixth grade female students who were selected by accessible sampling method and randomly assigned to experimental and control groups (15 students in each group). To collect the data, Sense of Coherence (SOC) Scale and Diner et al. (2010) Flourishing Scale were used. The experimental group underwent resilience training intervention of Hossein Sabet (2011) for 8 one-hour sessions. The control group did not receive any training during this period. The research hypotheses were analyzed by multivariate and univariate analysis of covariance. Results indicated that resilience training has significantly increased psychological cohesion and flourishing in students ($p < .001$). In general, the findings support the effectiveness of resilience-based interventions on primary students' motivational outputs.

Keywords: Elementary students, Flourishing, Psychological cohesion, Resiliency training

Introduction

After the family, the school is the second institution that the child goes to for learning on a wider level. Children and adolescents are the future generation of a country and their physical, mental and social health guarantees the current and future health of society ([Ravanmehr, Chitsaz, & Hejazi, 2021](#)). Therefore, it is important to pay attention to the factors affecting their health. In this regard, the concept of psychological coherence during recent years, gained increased attention as a model on the relationship between health and disease. ([Grøholt, Stigum, Nordhagen, & Köhler, 2003](#)). The sense of coherence is one of the concepts that refer to the understanding of the environment and control over it to have a meaningful and appropriate behavior or action ([Lindblad, Sandelin, Petersson, Rohani, & Langius-Eklöf, 2016](#)). Psychological coherence is a personal orientation to life that has a positive effect on physical and mental health as an internal resource. It refers to a pervasive, stable, and dynamic feeling that life events are comprehensible, structured, and explainable (([Madhu, Siddiqui, Desai, Sharma, & Bansal, 2019](#)). The main concept of psychological coherence consists of three sub-components including comprehensibility (a person's readiness to perceive the world), manageability

(adequate perception of internal and external sources of external stimuli) and meaningfulness (perception of challenge) ([Akbari, Javidpour, & Shabanian, 2022](#)).

Another factor related to people's social health is flourishing. Flourishing is a construct in positive psychology that refers to the type of living with constant optimism about human performance and implicitly implies goodness, fertility, growth and flexibility ([Fredrickson, 2004](#)). Flourishing is a combination of psychological, emotional and social well-being, which has recently been gained attention by positive approaches ([Diener et al., 2010](#)). According to [Keyes and Lopez \(2009\)](#), flourishing is somehow synonymous with positive emotion, happiness and psychological well-being and is a manifestation of the mental life of people who have high levels of emotional well-being. People with high Flourishing are happy and satisfied, tend to live a purposeful life, accept all their characteristics, have a sense of autonomy and independence, and have inner intuitive power ([Huppert & So, 2013](#)). Flourishing is associated with positive reactions, positive relationships with others, personal growth, self-acceptance, life expectancy, and lower levels of loneliness and depression ([Akin & Akin, 2015](#)). Flourishing people have positive feelings, emotional stability, vitality, optimism, flexibility, self-confidence, interaction, competence, high social relations, meaning and positive relations ([Eraslan-Capan, 2016](#)). Also, compared to people with low flourishing, people with high flourishing have better physical and mental health and have a more appropriate approach to potential challenges in life ([Schotanus-Dijkstra et al., 2016](#)).

One of the psychological interventions that can improve life is resiliency training. Resiliency refers to a personality trait that reflects the ability to tolerate and adapt to life's crises and overcome them, and it shows a person's flexible ability to regulate the levels of emotions in different situations, and therefore, it is considered an effective and efficient way to deal with stressful factors and challenges ([Miloni et al., 2015](#)). Resiliency training increases more effective coping strategies, increases protective factors such as self-confidence, self-leadership, reduces negative emotions, stress and depression, and improves quality of life ([Behzadpoor, Motahhari, Vakili, & Sohrabi, 2015](#)).

Although resiliency is a function of personal characteristics, it is also a function of people's environmental experiences. Therefore, humans are not absolute victims of the environment and heredity, and people's reactions to stress, unpleasant events, and difficulties can be changed; so, they can overcome negative environmental problems and effects ([Noone & Hastings, 2009](#)). Therefore, through education, it can be promoted and help people to face the unpleasant events and realities of life in a positive and efficient way ([O'Connor & Batcheller, 2015](#)).

Researches have shown the effectiveness of resiliency training on reducing the psychological disturbances of mothers with children with attention deficit hyperactivity disorder ([Tabatabaei & Chalabainloo, 2020](#)), reducing the anxiety of female high school students ([Ghajareih, Allipour, shehni yailagh, & Davoodi, 2018](#); [Nasirzade, Razai, & Mohamadifar, 2018](#)), reducing the psychological stress of female students ([Jahed Motlagh, Younesi, Azkhash, & Farzi, 2015](#)), improving the general health components of female high school students ([Sheikhzadeh, Tarkhan, Golchin, & Zare, 2015](#)), increasing well-being psychological well-being of impulsive students ([Sadri Damirchi, Bashorpoor,](#)

[Ramezani, & Karimanpour, 2018](#)), psychological well-being of nurses ([Jamshidi Eini & Razavi, 2018](#)), improving the psychological well-being of street girls with externalizing disorders ([Dousti, PourmohamadrezaTajrishi, & GhobariBonab, 2014](#)) and improving the mental well-being of patients with type 2 diabetes ([Khodabakhshi Koolaei, Falsafinejad, & Navidian, 2016](#)).

School years are one of the most fundamental years of children's lives, and school experiences have an important effect on their academic success and health in adulthood, and neglecting the role of effective factors in promoting the health of schools, such as psychological cohesion and flourishing, makes ineffective any change, decision, and treatment planning. It seems necessary to teach psychological interventions including resiliency in adolescents and students in order to improve their health. Therefore, the present study was conducted with the aim of examining the effectiveness of resiliency training on the psychological coherence and flourishing in elementary students.

Material and Methods

The current study is an applied research that was conducted by semi-experimental pre-test-post-test design with a control group. The statistical population of this research consisted of all sixth grade female students of Islamshahr (Iran) in 2021. The sample consisted of 30 female students who were selected by accessible sampling method and randomly assigned to experimental and control groups (15 people in each group). The inclusion criteria included being a 6th grade student, not having behavioral disorders, not undergoing other psychological treatment at the same time, interested in cooperation and informed consent to participate in the research and exclusion criteria included non-cooperation in training sessions and absence of more than two sessions.

Instruments

Sense of Coherence (SOC) Scale: This 13-question tool was developed by [Antonovsky \(1987\)](#) with three components of Manageability (3, 5, 10, 13), Comprehensibility (2, 6, 8, 9, 11) and Meaningfulness (1, 4, 7, 12) is measured using a seven-point Likert scale (1 = no desire and 7 = great desire). The total score of the questionnaire is obtained by summing the score of the questions, so the range of scores is between 13 and 91, and a higher score means a higher sense of coherence. [Antonovsky \(1987\)](#) confirmed its construct validity and reported reliability by internal consistency method (Cronbach's alpha) for subscales between 0.82 and 0.95. In Iran, [Mahammadzadeh, Poursharifi, and Alipour \(2010\)](#) investigated the psychometric properties of this scale, which obtained a Cronbach's alpha reliability of 0.77 and a test-retest coefficient of the total scale of 0.66. Also, its construct validity was confirmed and the concurrent validity of this scale with the 45-question questionnaire of psychological toughness was 0.54. In the present study, the reliability of this questionnaire was 0.85.

Flourishing Scale: This 8-question scale was designed by [Diener et al. \(2010\)](#). The scoring of this scale is based on a 7-point Likert scale from completely disagree (1) to completely agree (7). The range of scores is between 8 and 56, and a higher score indicates a higher degree of flourishing. [Diener](#)

[et al. \(2010\)](#) have reported that its validity is favorable and Cronbach's alpha and test-retest reliability coefficients are 0.87 and 0.71, respectively. In Iran, the psychometric characteristics of this questionnaire were investigated by [Moradi siah afshadi, Ghasemi, and Ghamarani \(2015\)](#) on a sample of 200 students from Isfahan University of Medical Sciences. These researchers confirmed its validity and reported Cronbach's alpha reliability and split-half reliability of 0.82 and 0.80, respectively. In the present study, the reliability of this questionnaire was 0.81.

In the research implementation phase, first, after complete and clear explanations about the objectives and method of conducting the research and observing ethical considerations such as keeping the names and information of the participants confidential, the researcher asked the students to answer the questionnaires carefully (pre-test). Then the resiliency training which were taken from the resiliency training protocol of ([Hossein Sabet, 2011](#)), was conducted in the experimental group for 4 weeks and one 60-minute session every week. Participants in the control group did not receive the intervention. After the sessions, both groups were given a post-test. It should be noted that after the end of the study, in order to comply with ethical considerations, the resiliency training was also conducted in the control group. The summary of resilience training sessions is presented in Table 1.

Table 1. Summary of resiliency training sessions

Session	Title	Content
1	Familiarity and self-awareness	Communicating with the audience and familiarizing them with resilience and the rules of participation in the workshop, awareness of their abilities
2	valuable	Strengthening self-esteem
3	Effective communication and wood bonding	Improving the ability of people to communicate, establish social relations and make friends
4	Foresight	Determining the goal and how to achieve it
5	self-efficacy (decision-making)	State the correct criteria for a good decision
6	self-efficacy (problem solving)	Learn to think about a problem
7	Self-efficacy (responsibility)	To be responsible for their behavior in life and work environment
8	Identify the emotions	Learn stress management methods and teach others

SPSS-22 software was used for data analysis. Mean and standard deviation were used in the descriptive part and multivariate covariance analysis test was used in the inferential part to test the hypotheses.

Results

The mean and standard deviation of the pre-test and post-test scores of psychological coherence and flourishing variables in the experimental and control groups are presented in Table 2.

Table 2. Mean and standard deviation of pre-test-post-test scores of psychological cohesion and flourishing in the experimental and control groups

Group	Variable	Pretest		Posttest	
		Mean	SD	Mean	SD
Control	Comprehensibility	16.03	3.56	16.70	3.25
	Manageability	13.11	2.59	13.93	2.71
	Meaningfulness	12.17	3.51	12.62	3.38
	Total psychological coherence	41.31	4.74	43.25	4.98
	Flourishing	26.07	3.33	26.77	3.04
Experimental	Comprehensibility	16.33	3.17	19.45	3.11
	Manageability	12.53	2.56	15.13	2.77
	Meaningfulness	12.90	3.33	14.74	3.46
	Total psychological coherence	41.77	4.81	49.33	4.16
	Flourishing	27.21	5.59	5.69	5.69

In order to investigate the effectiveness of resiliency training on students' psychological cohesion, multivariate covariance analysis was used. Shapiro-Wilk test was used to check the normality of the distribution of scores, which confirmed the assumption of normality of the distribution of scores due to the non-significance of the obtained values. The results of the homogeneity test of the regression slope of the pre-test and post-test scores in the experimental and control groups revealed that the regression slope was the same in both groups ($P < 0.05$, $F = 1.764$). The results of Levin's test to check the homogeneity of the variance of the dependent variables in the groups showed that the variance of the comprehensibility ($p < 0.05$, $F = 1.576$), manageability ($p < 0.05$, $F = 3.826$) and meaningfulness ($p < 0.05$, $F = 1.746$) is equal in groups. The results of the Box's M test for equivalence of covariance matrices of the dependent variables in the experimental and control groups also showed that the covariance matrix of the dependent variables in the two groups is equal ($p < 0.05$, $F = 0.205$, Box M = 1.395). The results of Bartlett's chi-square test to check the sphericity or significance of the relationship between the variables showed that the relationship between these components is significant ($p < 0.01$, $DF = 5$, $\chi^2 = 26.608$). After confirming the assumptions of multivariate covariance analysis, the results of the MANCOVA test showed that there is a significant difference between two groups in the psychological coherence components ($p < 0.01$, $F = 9.406$, Wilks Lambda = 0.449). In order to check which of the components of psychological coherence between the experimental and control groups differ from each other, a one way analysis of covariance embedded in MANCOVA was performed, the results of which are reported in Table 3.

Table 3. The results of covariance analysis of ANCOVA embedded in MANCOVA on the components of psychological coherence

Variable	Source	SS	DF	Mean	F	p	Eta
Comprehensibility	Between group	48.78	1	48.78	12.03	0.01	0.325
	Error	101.37	25	4.05			
Manageability	Between group	23.02	1	23.02	9.66	0.01	0.279
	Error	59.56	25	2.38			
Meaningfulness	Between group	15.23	1	15.23	10.25	0.05	0.291
	Error	37.12	25	1.48			

According to Table 3, in comprehensibility ($P < 0.01$, $F = 12.031$), manageability ($P < 0.01$, $F = 9.664$) and meaningfulness ($P < 0.05$, $F = 10.256$) are significant. These findings indicate that there is a significant difference between the psychological coherence of the control and experimental groups. Based on this, resiliency training has increased students' psychological cohesion. Also, the effect size in Table 3 shows that the intervention explains 32.5% of changes in comprehensibility, 27.9% of changes in manageability, and 29.1% of changes in meaningfulness.

In order to investigate the effectiveness of resiliency training on students' flourishing, one-way covariance analysis was used. Shapiro-Wilk test was used to check the normality of the distribution of scores, which confirmed the assumption of normality of the distribution of scores due to the non-significance of the obtained values. The results of the homogeneity test of the regression slope of the pre-test and post-test scores in the experimental and control groups showed that the regression slope was the same in both groups ($P < 0.05$, $F = 0.903$). The results of Levin's test to check the homogeneity of the variance of the dependent variable in the groups showed homogeneity of the variance of flourishing ($p < 0.05$, $F = 1.046$). After confirming the assumptions, covariance analysis was performed on the flourishing scores, the results of which are presented in Table 4.

Table 4. Results of one-way covariance analysis on flourishing

Variable	Source	SS	DF	Mean	F	p	Eta
Flourishing	Between group	91.04	1	91.04	28.12	0.001	0.51
	Error	87.39	27	3.23			

According to Table 4, the F statistic for flourishing is significant ($P < 0.01$, $F = 28.129$). This finding indicates that there is a significant difference between the flourishing of the control and experimental groups. Based on this, resilience education has improved students' flourishing. Also, the effect size in Table 4 shows that the intervention explains 51% of the changes in flowering.

Discussion

The aim of the present study was to examine the effectiveness of resiliency training on students' psychological cohesion and flourishing. The results showed that there is a significant difference in psychological cohesion between the test and control groups, and considering the higher average scores of the experimental group compared to the average scores of the control group, it can be concluded

that resiliency training has increased psychological cohesion. The obtained findings are consistent with the results of previous studies. For example, the study of [Tabatabaei and Chalabainloo \(2020\)](#) showed that resiliency training was effective in reducing the psychological disturbances of mothers with children with attention deficit hyperactivity disorder. Other studies have also shown that resiliency training has been effective in reducing the anxiety of female high school students ([Ghajareih et al., 2018](#); [Nasirzade et al., 2018](#)), as well as the results of the research of [Jahed Motlagh et al. \(2015\)](#) that showed resiliency training can be used as a useful intervention method to reduce the psychological stress of students. In this regard, research findings showed that group resiliency training leads to an increase in the general health of female high school students by changing psychological structures ([Sheikhzadeh et al., 2015](#)). In explaining these findings, it can be said that resiliency training strengthens belief in ability and develops an optimistic philosophy towards life. This intervention helps the person fill the gap between his resources and his limitations ([Mealer et al., 2014](#)) and through encouragement, the person becomes aware of his values and becomes aware of his strengths and assets ([Watts & Garza, 2008](#)). Therefore, resiliency training increases empathy and this causes people to show more flexibility and create better relationships with others. These flexible behaviors lead to better problem solving and better understanding of the situation. Also, resiliency training will enable people to be immune to stress and other negative aspects that endanger their mental health and well-being ([Barghi Irani, 2017](#)); and as a result reach more psychological coherence. Resilience with a combination of beliefs develops the three components of commitment, control and coping in people. In fact, people with resilience do not necessarily consider any event as a threat to human security and health, and show cognitive flexibility and tolerance to stressful events and ambiguous situations ([Rutter, 2012](#)), so this can increase a person's cohesion that lead to adaptation to stressful events. Another finding of the research indicated that there is a significant difference in flourishing between the experimental and control groups, and considering the higher average scores of the experimental group compared to the average scores of the control group, it can be concluded that resiliency training has increased flourishing. The obtained findings are consistent with the results of previous studies. A study by [Jamshidi Eini and Razavi \(2018\)](#) showed that resiliency training had a significant effect on the level of stress and psychological well-being of nurses. In another research by [Sadri Damirchi et al. \(2018\)](#), they found that resiliency training can improve the psychological well-being of impulsive students. Also, it was shown that resiliency training was effective on the psychological well-being of street girls with externalizing disorders ([Dousti et al., 2014](#)). Correspondingly, group resiliency training had an effect on improving the psychological well-being of type 2 diabetic patients ([Khodabakhshi Koolae et al., 2016](#)). In explaining this finding, it can be said that resiliency training can increase people's commitment and committed people involve themselves in activities. They also become confident that they are able to change their life experiences in a direction that is interesting and meaningful for them. As a result, they are completely engaged with many aspects of problems. Control over the environment increases the internal source of control that considered a vital element in improving people's flexibility ([Jamshidi Eini & Razavi, 2018](#)). When control is increased, it leads to

improved mental health and consequently flourishing. In resiliency training sessions, the teaching coping skills, instruction the meaning seeking and searching for meaning, cognitive restructuring and creating a model of constructive and resilient thinking have reduced anxiety and physical complaints. It seems that the participation of people in this program makes them to think positively, face unpleasant events positively, maintain their sense of humor even in unfortunate situations, seek help from others in difficult situations and try control their thoughts, emotions and actions by monitoring and managing them ([Bahmani, Javadi, Khalilzadeh, & Mehraban, 2018](#)). Therefore, resiliency gives people the ability to face problems and adversities without getting hurt and turn these situations into an opportunity to grow and improve their personality and flourishing.

The limitations of the present study include the absence of a follow-up period, conducting the study in a group of girls, and the little theoretical foundations and research related to the researched topic, especially in the field of flourishing. It is suggested to carry out resiliency training on the sample of boys along with the follow-up phase in future research. Based on the findings, it is suggested to hold training courses and workshops with the aim of promoting resiliency in order to improve the psychological condition of students. Also, it is suggested to compare resiliency training with new educational and therapeutic approaches, including third wave treatments, in future studies. From a research point of view, this study can reveal the hidden aspects of the factors influencing the psychological cohesion and flourishing of students in the non-clinical population. Therefore, the attention of health policymakers and education officials to the resiliency and holding training courses to increase the health of students in schools will improve physical and mental health and reduce the costs of treating diseases.

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