



Investigating the effectiveness of strength-based counseling on adolescent resilience

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ARTICLE INFORMATION

Article type

Original research

Pages: 169-175

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Article history:

Received: 2022/08/11

Revised: 2023/02/09

Accepted: 2023/02/21

Published online: 2023/07/27

Keywords:

counseling based on strength, resilience, teenagers

ABSTRACT

Background and Aim: Problems can be used as situations to help a person to gain insight and develop effective coping behavior. Therefore, the aim of the present study was to investigate the effectiveness of strength-based counseling on increasing the resilience of adolescents. **Methods:** This research was a quasi-experimental type with a pre-test-post-test design with a control group. The statistical population of this research was teenagers aged 14 to 17 who referred to Mehravar Counseling Center in Tehran in the second half of 2021. A sample of 20 people was randomly selected from among the teenagers who had a lower score in the resilience scale of Connor and Davidson (2003) and were assigned to two experimental (10 people) and control (10 people) groups. Teenagers in the experimental group received 10 90-minute sessions of the strength-based counseling package developed by Parsakia and Darbani (2022) as a group, and members of the control group were placed on the waiting list. Both groups responded to the resilience scale before and after the experiment. Data analysis was done with descriptive statistics (mean and standard deviation) and repeated measure variance with SPSS version 26 statistical analysis software. **Results:** The results showed that strength-based counseling significantly increased the resilience of 14-17-year-old teenagers ($F = 8.20$ and $P = 0.001$). This effect was also stable in the follow-up phase. **Conclusion:** Based on the findings, it can be concluded that counseling based on strength increases the resilience of teenagers.



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How to Cite This Article:

Darbani, S. A., & Parsakia, K. (2023). Investigating the effectiveness of strength-based counseling on adolescent resilience. *Jayps*. 4(5), 169-175.

Introduction

Problems reveal potential learning opportunities. Successfully solving life's difficult challenges provides a foundation for developing resilience and positive abilities. In addition, if problems and conflicts cannot be resolved positively, self-destructive cycles of behavior emerge. These are in direct relation with youth in crisis that problems can be used as situations to help a person to gain insight and develop effective coping behavior (Brendtro, 2007).

Recently, resilience has taken a special place, especially in the fields of developmental psychology, family psychology and mental health. So that the number of researches related to this structure increases every day. Resilience is defined in the term as follows: It is a kind of state that can be developed in a person, based on which he is able to continue to work harder in facing problems, tragedies and conflicts of life and even positive failure events, progress and more responsibility, and not to give up in order to achieve more success. (Khalatbari & Bahari, 2019). In other words, resilience is the ability to adjust the level of control according to environmental conditions. Researchers believe that resilience is a form of self-repair with positive emotional and cognitive consequences, which plays an important role in adapting and being more satisfied with life. Having this personal internal resource enables a person to continue his adaptive growth and maintain his mental health despite unfortunate circumstances and negative events (Sasani, 2019). Definitions of this concept are usually limited to psychological processes related to proper adaptation (LoVette, Kou, and Harrison, 2019). Garmezy and Masten (1991) have defined resilience as a process, ability, or outcome of successful adaptation to threatening environmental conditions, which plays an important role in coping with stress and threats to life and its adverse effects (Garmezy & Masten, 1991). Connor and Davidson (2003) believe that resilience is a person's ability to establish biological-psychological balance in dangerous situations. Resilient people are aware and aware of the situation, they know their feelings and emotions, so they also know the cause of these feelings and manage their emotions in a healthy way. Therefore, resilience is called the dynamic process of adaptation and

positive adaptation to bitter and unfortunate experience in life (Khan, 2020). Resilience is a protective process that reduces the possibility of negative consequences (Leyva, 2021). Therefore, people who have this protective feature, when dealing with stressful life problems and events, try to make their attitude positive towards those stressful factors. In this way, they can protect themselves from negative characteristics such as depression symptoms (Gonzalez-Mendez & Hamby, 2020). Resilience can make a person triumphantly overcome adverse events and improve his social, academic and occupational competence despite being exposed to severe stress. Resilience is a characteristic that varies from person to person and can develop or decrease over time. Resilient people are emotionally calm, look at problems creatively and flexibly, plan and plan to solve them. In case of need, they do not hesitate to ask for help from others, and they have complete resources to deal with problems and stresses in life, and they are less affected by mental and emotional disturbances (Sasani, 2019). Among the other positive characteristics of resilient people are participation in health promotion behaviors, enjoyment of challenges, positive interpretation of negative emotions, and use of adaptive strategies appropriate to the situation, each of these behaviors somehow leads to mental health and life satisfaction of people. In other words, resilience is an optimistic explanatory style that leads to a person's positive outlook on life. Based on this, it seems that resilient people look at problems in a creative and flexible way, plan to solve it, and do not hesitate to ask for help from others when needed, and have complete resources to deal with problems. These factors make a person enjoy life satisfaction. Resilient people are people who are able to organize their daily responsibilities. These people are more capable than vulnerable people in adapting to life changes and have the ability to create and expand a set of coping skills such as problem solving skills that support them in challenging situations (Shalbfafan & Javaheri, 2021).

Resilience is a central concept that lays the foundation of interventions using a strength-based approach (Drabani & Parsakia, 2022). The fundamental concepts of this approach include empowerment, hope, resilience and autonomy. Clients do not differ from each other

for this approach and this approach looks at them with one eye and can deal with an internalized message full of problems and defects (Cousins, 2005). The foundation of strength-based counseling is also built on researches and texts related to the growing theory of resilience. Resilience is defined as the process of coping with adversity and through the adaptation of small successes that occur with intermittent failures, setbacks, and disappointments. People's recognition of their own resilience provides a way to true self-worth. Resilience provides a process through which strength develops. Resilience is not a fixed trait; Rather, it is a dynamic and contextual process that develops as a result of interactions between individuals and their environments (Smith, 2006). A strength-based approach involves clients and therapists working together to use the client's strengths and abilities to create a sense of purpose and happiness. The strength-based approach is based on the belief that the way people deal with challenges depends on their view of themselves and whether they see their strengths or their weaknesses (Drabani & Parsakia, 2022). Human strengths can also have characteristics of excellence and superiority; Since they can get used to standing up against physical or mental attack or force. Many studies on resilience emphasize the importance of the above ability to achieve success and victory in life events. Strengths help to excel and progress in personal, social and environmental conditions. Strengths may grow out of a need to find meaning and purpose in our lives so that we seek out transformative people, places, and experiences that help us feel connected to the world (Drabani & Parsakia, 2022). . The strength-based approach guides counselors both in orientation to the individual and in the set of answers they should provide to the individual. At its core, the strength-based approach conceptualizes clients and counselors as partners in a communication process that leads them to explore and identify issues, concerns, assets, strategies, growth opportunities, clarifying goals, supports, and barriers. Within this relationship, the counselor and clients reflect thoughts, feelings, and behaviors in positive and affirming ways (Edwards, Young, & Nikels, 2016). To date, no study has investigated the effectiveness of strength-based

counseling on increasing adolescent resilience. Therefore, this research aims to answer the question, "Is strength-based counseling effective in increasing the resilience of 14-17-year-old teenagers?"

Method

The present study was a semi-experimental study with a pre-test-post-test design with a control group. The statistical population of this research included all adolescents aged 14 to 17 who referred to Mehravar Counseling Center in the second half of 2021. At the beginning and after the first counseling session, the adolescents referred to this center were asked to answer the Connor and Davidson (2003) resilience questionnaire. After collecting the questionnaires and in the initial screening, 20 teenagers aged 14 to 17 were diagnosed as having low resilience, and with the available targeted sampling method, 10 people were randomly replaced in the experimental group and 10 people in the control group.

Materials

1. Connor and Davidson Resilience Questionnaire: This questionnaire was prepared by Connor and Davidson in 2003 to measure the ability to deal with pressure and threats. This scale includes 25 five-choice items (never, rarely, sometimes, often, and always). 5 factors measure the perception of individual competence, trust in individual instincts, tolerance of negative emotions, positive acceptance of change, safe relationships, control, and spiritual influences. 13 items of this questionnaire (10-11-12-16-17-23-24-25) related to the factor of the perception of individual competence; 7 articles (6-7-14-15-18-19-20) related to the factor of trust in individual instincts to tolerate negative emotions; 5 articles (1-2-4-5-8) related to the factor of positive acceptance of change and secure relationships; 3 articles (13-21-22) related to the control agent; 2 Article (3-9) related to the factor of spiritual influences. The scoring of the options in this questionnaire is as follows: completely false = 0, rarely = 1, sometimes true = 2, often = 3 and always true = 4; Therefore, the range of test scores is between 0 and 100, and higher scores indicate more resilience of the subject. Connor and Davidson reported the Cronbach's alpha coefficient of resilience scale as 0.89. The reliability coefficient obtained from the retest method in a 4-week interval was 0.87. This scale has been standardized in Iran by Mohammadi (2005). He used Cronbach's alpha method to determine the reliability of Connor and Davidson's resilience scale and reported a reliability coefficient of 0.89.

2. Strength-based counseling: The summary of the sessions prepared by Darbani and Parsakia (2022) is presented in the table below.

Table 1. Summary of strength-based training sessions

Session	Content
1	Expressing the goals and regulations of the group, familiarizing the members with each other, establishing a therapeutic relationship, preparing a list of the capabilities of each member, reflecting the capabilities of the members by the group leader and other members of the group.
2	Identification of capabilities, description of the life story with a perspective based on capabilities, description of the positive things that each member wants to continue in their relationships.
3	Assessing the current problems, measuring the behavioral and emotional skills, capabilities and characteristics that create a sense of personal success, revealing these things by the members: the way they understand their problems, the reason they believe in the existence of problems, behaviors and situations that lead to the occurrence of most problems and their consequences
4	Encouraging and injecting hope, emphasizing the members' own efforts or progress instead of the results of their efforts, defining the leader from the group members and the members from each other, making expressions that help the members feel self-worth and belonging, using the technique of "building a hope box"
5	Framing the solutions, using the "exception question" technique, paying attention to the way the problems are expressed instead of the problems themselves, identifying and evaluating the members' past coping situations and current support sources in relation to the problems they are facing, using the forgiveness technique.
6	Building capacity and capability, helping members to understand that they are not incapable of influencing life changes
7	Empowering, identifying and promoting the proper functioning of members, transferring power to members, trying to create interactions between the person and social realities, developing a major awareness about the interactions of life realities, promoting conscientiousness, exploring the social roots of clients' actions.
8	The change stage, using "change conversation" to help members become aware of the reforms they need to make to improve their lives, and to be able to name the capabilities or resources they have to make these changes; Encouraging members to view mistakes as learning opportunities, using techniques of "changing the meaning of life events" and "reframing"
9	The stage of creating resilience in members, training and practicing problem solving skills, training and practicing coping skills
10	Evaluation and termination stage, summarizing and presenting a summary of the meetings, re-implementation of the questionnaire

Implementation

To carry out this research, 20 people were first selected and answered the measurement tool in 2 experimental groups (10 couples) and control (10 couples). Then, the experimental group underwent 10 90-minute sessions of strength-based counseling, and after the end of the therapy sessions, both experimental and control groups completed the Connor and Davidson questionnaire again. Then, after checking the related assumptions, the scores were analyzed using the 26th edition of SPSS software and descriptive (mean and standard deviation) and inferential (variance analysis with repeated measures) methods.

Results

The obtained demographic findings showed that the average (standard deviation) age of the experimental group members was 15.88 (1.03) years and the control group members was 15.42 (1.32) years. In the table below, the findings of the descriptive statistics of the research are reported, which include the average and standard deviation of the resilience scores in the three stages of pre-test, post-test and follow-up, separated by membership in the experimental and control groups.

Table 2. Descriptive data of scores of experimental and control groups

Variable	Group	Stage	Mean	SD
Resilience	Experimental	Pre-test	38/29	6/44
		Post-test	44/66	7/91
		Follow-up	36/71	7/70
	Control	Pre-test	40/02	6/90
		Post-test	40/56	8/01
		Follow-up	40/43	7/53

Based on the results listed in the above table, it can be seen that intuitively, there are very few changes in the average scores of the control group, but the scores of the test group's average resilience has increased significantly. To test the significance of the effectiveness of the strength-

based approach on the test group's resilience, analysis of variance with repeated measurements has been used in three stages. For this purpose, the required prerequisites should be checked first.

Table 3. Results of normal distribution of scores and homogeneity of variances test

Variable	Shapiro-Wilk		Levene's test		M-Box	
	Statistics	Sig.	F	Sig.	F	Sig.
Resilience	0/930	0/455	0/390	0/629	2/80	0/030

*Significant at 0.05 Level

According to the results obtained in the above table, the results of the Shapiro-Wilk test confirm the normality of the data. In addition, based on the results of Levene's test, the condition of homogeneity of variance is

established and the results of the Mbox test also confirm the homogeneity of the covariance matrix. Therefore, it is possible to use the method of variance analysis with three-step repeated measurements.

Table 4. Mixed variance analysis with repeated measurements in the three stages of pre-test, post-test and follow-up with resilience variables in two experimental and control groups.

Variable	Source	SS	Df	MS	F	Sig	Effect size
Resilience	Intercept	19850/52	1	19850/52	382/84	0/000	0/82
	Group	79/22	1	79/22	8/20	0/001	0/44
	Error	145/23	38	3/82			

The contents presented in the above table show that the value of F and the significance level of the obtained value are reported in the resilience variable (F = 8.20 and P = 0.001). It can be concluded that the independent variable (strength-based approach) has significantly

changed the dependent variables (resilience). Therefore, it can be concluded that the changes made in the dependent variables were caused by the implementation of the strength-based approach on the experimental group.

Table 5. Results of pairwise comparison of averages based on Bonferroni test in three stages by groups

Index	Post-test – Follow-up		Pre-test – Follow-up		Pre-test – Post-test	
	SE	Sig	SE	Sig	SE	Sig
Resilience	3/12	1/00	2/99	0/00	3/08	0/00

According to the findings reported in the table above, it can be seen that the difference between the mean scores of the follow-up and post-test stages was not significant, while the scores of both stages are significantly different from the scores of the pre-test stage. Hence, it can be concluded that the strength-based approach in the post-test stage has significantly changed resilience, and at the same time, this effect on the variables of the test group has been stable in the follow-up stage.

Conclusion

The present study was conducted with the aim of determining the effectiveness of strength-based counseling on increasing the resilience of adolescents aged 14 to 17 years. The results of the statistical analysis of the data showed that strength-based counseling has a significant effect on increasing the resilience of adolescents aged 14 to 17 years and that these effects are stable in the follow-up phase. The findings of this research were consistent with the findings of Bu and Duan (2020), Khawaja et al (2021), Nickerson and Fishman (2013), Parsakia et al. (2022), and Darbani and Parsakia (2022).

In explaining the results obtained in this research, it can be said that the foundation of strength-based consultation is built on researches and texts related to the growing theory of resilience. The strength-based approach includes the use of strengths, cultural values, and resources that families have. It is assumed that cultural values are different and not deviated and that families and communities have the capacity to grow and develop. Finally, the strength-based approach assumes that cultural groups have competencies for individuals who define appropriate roles, values, beliefs, and lifestyles for their members and work collectively to strengthen these competencies. Family therapists must better understand the importance and impact of culture on family functioning and learn to embrace the strengths and resilience factors in families and communities (Edwards, Young, and Nikels, 2016). Hawley (2000) advocates four clinical areas of particular importance when promoting family resilience: the need to focus on strength, assessing resilience as a developmental pathway, searching for commonalities, and creating a useful family schema. Hawley's clinical findings suggest that strength-based

therapy, which often plays a central role in constructivist approaches to family therapy, promotes coping and flourishing essential to the concept of resilience (Durbani & Parsakia, 2022). Strength-based approach counselors actively seek to help clients build and pay for resilience, which protects them from repeating similar issues in order to separate themselves from such similar issues. Some resilience goals for an individual may promote the development of social competence; In order to: break the cycle of family problems; develop good problem-solving skills; and show good coping skills (Drabani and Parsakia, 2022). The development of resilience requires a sense of personal power and self-efficacy so that a person can practice internal control and distance himself from destructive effects (Drabani and Parsakia, 2022). Gilmore (2020) believes that, in general, a strength-oriented approach to treatment can help a person see and maintain his best qualities and develop a positive view of himself and his life. It can increase a person's self-confidence, motivation, resilience and coping skills (Gilmore, 2020). To help formulate ways to cope with new stressors, it is essential to explore current coping strategies and successes. Hawley emphasizes that family resilience is neither static nor does it work in all situations, and family therapists must explore the factors that led to current stressors and a number of possible solutions. Additionally, this approach acknowledges that stressors are rarely curable and often require follow-up to address persistent issues or new stressors (Edwards, Young, & Nikels, 2016).

In total, the results of the present study showed that counseling based on strength can increase the resilience of adolescents. In general, the reason for confirming the research hypothesis can be that the strength-based approach is a supportive approach that brings hope and forgiveness to teenagers. Therefore, it increased awareness and created motivation with a positive view for change, and this also increased their resilience.

One of the limitations of this research is the use of available sampling method, which can cause problems in the possibility of generalizing the research results. Considering the lack of studies in the field of strength-based counseling, it is suggested that more research be done in this field. Finally, it is suggested that the concepts

and techniques of this approach be taught to students and psychologists in educational workshops.

Conflict of Interest

According to the authors, this article has no financial sponsor or conflict of interest.

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