INTRODUCTION

The primary aim of the present research was to investigate the relationship between domestic harmony and positive life outcomes among young adults. Positive life outcomes consist of resilience, empowerment, self-esteem, and positive life orientation (PLO). The initial aim of the research was to conceptualize and operationalize domestic harmony. Once domestic harmony had been conceptualized, a scale for its measurement was also constructed (Study 1). Secondly, a scale to measure empowerment was also constructed (Study 2). Thirdly, the long-term effects of domestic harmony on positive life outcomes in young adults were investigated (Study 3). And finally, the moderating effect of the mothers’ working status on the relationship between domestic harmony and positive life outcomes was tested (Study 3).

For this purpose, three kinds of homes were included in the study: one type of home in which the mother was working outside the home (Working Outside Home mothers [WOH]), one type of home in which the mother was working from home (Working From Home mothers [WfromH]), and homes where the mother was a homemaker (Working For Home mothers [WforH]).

Domestic Harmony

Domestic harmony is a novel concept on which, to the best of the researcher’s knowledge, no prior research exists. In fact, the researcher did not come across the concept of domestic harmony anywhere in literature or previous research studies. The meaning of the term “domestic” denotes the running of a household and corresponding family relations. “Harmony” relates to, according to Oxford dictionary, the state of being in agreement or concord, with an additional connotation of the meaning stating that it is the quality of forming a pleasing and consistent whole. In positive psychology, harmony is considered a human value, which refers to “compatibility and accord in feelings, actions, relationships, opinions, interests, etc.” (Lopez & Snyder, 2009). Harmony has been studied in both the intrapersonal and interpersonal contexts by positive psychologists, particularly in its relation with happiness and subjective well-being. Clifton and colleagues (Buckingham & Clifton, 2001; Clifton & Anderson, 2002; Clifton & Nelson, 1992), who have introduced the harmony theme in Clifton Strengths Finder, describe harmony as “a desire to find consensus among the group,” as
opposed to putting forth conflicting ideas” (Buckingham & Clifton, 2001; Lopez, Hodges, & Harter, 2005).

Positive psychologists have traced the origin of the notion of harmony to Confucianism in East Asia. According to Confucian classics, harmony has been emphasized as a “guiding principal in interpersonal relationships and social roles, as it is essential to the stability of families and prosperity of human societies” (Lopez & Snyder, 2009). The emphasis of harmony, therefore, has been on the quality of relationships and interactions shared between people that produce an accord between them, and fulfills the larger goal of establishing a harmonious balance in a social group, whether it is a family or society at large.

Combining the two terms, “domestic harmony” can be understood to denote a family in which there is a smooth-flowing concord in the family relations, where there is compatibility in actions, feelings, opinions, interests, and relationships among family members, as proposed by Lopez (2009). The present research postulates that such well-balanced familial relationships, indicative of positive family functioning, result in a stable home environment in which the various elements constituting the family, including the family members and their quality of relationships and patterns of interaction, form an overall pleasant and consistent whole, representing a well-balanced and unified solidarity.

Not much research has been conducted on harmony, especially in the field of positive psychology. For this reason, Snyder, Lopez, and Pedrotti (2011) call for a need for more conceptual work on the concept of harmony as well as the development of reliable and valid measuring devices. The current research answers this call for new research by exploring the concept of harmony experienced in the domestic sphere. For this reason, the concept of domestic harmony can be considered a novel and much-needed contribution to the field of positive psychology.

Domestic harmony is an important contribution to the upcoming field of positive psychology because instead of being based on a clinical or illness model, its basis lies in the functioning
of non-clinical families. In this regard, it follows the growth model of positive psychology (Seligman, 1998; Seligman & Csikszentmihalyi, 2000; Compton, 2005) by providing a way for families to flourish and experience flow (Csikszentmihalyi, 1990) in their family relations and generate a harmonious home environment. Furthermore, the present research posits that domestic harmony informs the four major topics of interest in the field of positive psychology as proposed by Peterson (2009), which are: (a) positive institutions, that is the family; (b) positive relationships, between family members; (c) positive experiences, in the experience of a home environment in which domestic harmony prevails; and finally, (d) positive psychological traits, that may develop in family members for happiness and growth.

A major reason to initiate a study of domestic harmony, and from where the term “domestic harmony” has been derived, was from the extensive focus on the phenomenon of domestic violence. In India, the incidence of domestic violence is so immense that a recent G20 survey ranked India as the worst country in the world to be a woman in (Baldwin, 2012). Violence against women, in the form of domestic violence, female foeticide, sexual harassment, and other forms of gender-based violence, permeates the lives of more than 70% girls and women in the country. According to the National Family Health Survey 3 (2005-06), the last reported country-wide survey in India, 8% of married women have been subject to sexual violence, such as forced sex, 31% of married women have been physically abused in a way defined as ‘less severe’, such as slapping or punching, while 10% have suffered ‘severe domestic violence’, such as burning or attack with a weapon.

Without going into a detailed discussion on domestic violence, the point to be noted is that there is no paucity of literature, research, intellectual talk and debate, media coverage, or social activism on the alarming incidence and detrimental effects of domestic violence in the country. It negatively impacts children who are witness to domestic violence incidents in their homes. Men and women learn domestic violence through the socialization process and that is what they practice. Most of the talk surrounds domestic violence, but no one coherently puts forth an alternative. If the world needs to be rid of domestic violence, then what needs to take its place? Everyone agrees that domestic violence, and all forms of gender-based violence, need to come to a stop, but along side there is also a need to articulate an idea of what kind of behavior needs to replace domestic violence that will lead to positive outcomes for the women, children, and men who are victims of family violence. Asking for a stop to the
violence is not enough as it creates a void as to what kind of behavior should be the replacement. The intention of the researchers was to put forth such a concept, based on the positive psychology model, which can take place in homes. Hence, the concept of domestic harmony has been introduced, the practice of which may lead to healthy and happy outcomes in the domestic arena.

Literature is replete with studies showing the adverse impact of domestic violence on children. Links between encountering marital discord between parents and developing psychological problems has been well-documented over the years (for more detail, see Baruch & Wilcox, 1944; Gassner & Murray, 1969; Hubbard & Adams, 1936; Jouriles, Bourg, & Farris, 1991; Porter & O’Leary, 1980; Rutter, 1970; Towle, 1931; Wallace, 1935). Providing a theoretical perspective to the negative effect of parental conflict, which could express itself in the form of domestic violence, Davies and Cummings (1994) put forth the idea of the Emotional Security Hypothesis. Expanding on the cognitive-contextual model proposed by Grych and Fincham (1990), this hypothesis proposes that based on the children’s cognitive and affective evaluative assessments of perceived parental conflict, their emotional security is threatened. When the child’s emotional security is adversely affected, as a result of witnessing domestic violence, his or her ability to deal with daily problems, for example, is severely affected. As stated by Davies and Cummings (1994), “emotional insecurity, through a variety of processes, promotes less effective coping and greater emotional and behavioral dysregulation in response to daily stresses and challenges.”

Hurlock (1974) has stated that the emotional climate of the home has a direct influence on the behavioral characteristics of an individual and his or her adjustment to life. Emphasizing the importance of the effect of the home climate on the individual’s personality development, Hurlock (1974) says “If the home climate is favorable, the individual will react to personal problems and frustrations in a calm, philosophical manner and to people in a tolerant, happy, and cooperative way. If the home climate is frictional, he will develop the habit of reacting to family members, and outsiders as well, in a hostile or antagonistic way.”

Though the concept of domestic harmony has not been explored, three models of family functioning have been presented by previous research, namely the MacMaster Model of
Family Functioning (Epstein, Bishop, & Levin, 1978), The Circumplex Model of Marital and Family Functioning (Olson, 1999), and Bowen’s Model (The Bowen Center for the Study of the Family, 2004). These models are based on the pathology model of psychology whose aim is to identify and describe clinically dysfunctional families needing therapeutic interventions. It should, however, be noted that there is not one unified theory of family functioning (Grovetant & Carlson, 1989). A single theory that consolidates all the findings regarding family functioning has yet to emerge. This fact has been aptly addressed by Bray (1995) who contends that “from a systems perspective, there will probably never be ‘one’ best method, because it is often necessary to evaluate multiple aspects of the family system.” The complexities inherent in the research on family environments will lead to multiple theories of family functioning (Carlson, 1989). Considering family functioning from different perspectives is, therefore, becomes imperative. The three models of family functioning are described below:

### The MacMaster Model of Family Functioning

This model of family functioning is based on the systems approach. The aspects of systems theory utilized in this model are described as the following (Epstein, Bishop, & Levin, 1978):

1. Parts of the family are connected to each other.
2. One part of the family cannot be understood in isolation from the rest of the system.
3. Family functioning is more than just the sum of the parts.
4. A family’s structure and organization are important in determining the behavior of family members.
5. Transactional patterns of the family system are involved in shaping the behavior of family members.

The main dimensions of family functioning, according to this model, are (Epstein & Bishop, 1973): Problem Solving, Communication, Roles, Affective Responsiveness, Affective Involvement, and Behavior Control. The model believes that to understand and explain such a complex entity as the family, a single dimension conceptualization, such as communication or
role behavior, would be insufficient. Hence, many dimensions are defined and delineated to explain family functioning.

Problem Solving is “the family’s ability to resolve problems to a level that maintains effective family functioning” (Epstein et al., 1978).

Communication is defined as the manner in which the family exchanges information (mostly verbal exchanges, as non-verbal aspects of family communication is not included due to the difficulty of its measurement). Communication, thus, is of four styles: clear and direct communication, clear and indirect communication, masked and direct communication, and masked and indirect communication.

Roles are the often repeated behavior patterns by which individuals satisfy their functions as family members. These functions are divided into necessary family functions and other family functions. Necessary family functions include all the family will need to repeatedly address in order to function well. Other family functions are not necessary for the family to function effectively, but nevertheless come up in the course of the individual’s family life to some degree or the other.

In the consideration of the role dimension, two further concepts are raised: role allocation and role accountability. Role allocation incorporates assigning responsibilities for family functions, depending on whether such allocations are appropriate, carried out explicitly or implicitly, or by direct order or through open and free discussion. Role accountability involves family members being made responsible and accountable for the responsibilities that have been allocated to them. This accountability reinforces the commitment to and the effectiveness to the role fulfillment needed to be carried out.

Affective Responsiveness is the ability to respond to a range of stimuli with the appropriate degree and amount of feelings, emphasizing the family’s response pattern to affective
stimuli in particular. The responses are classified into two categories: welfare feelings and emergency feelings. Welfare emotions are portrayed by emotions such as love, tenderness, happiness, and joy, while emergency feelings consist of fear, anger, sadness, disappointment, and depression. An effective family would respond with a wide range and appropriate set of affective responses suitable to the situation.

Affective Involvement is the extent to which the family displays interest in and values the activities and interests of the family members. The focus is on how much each family member is invested in the other family members. The affective involvement dimension, therefore, ranges from complete lack of involvement at one end to an extreme involvement that blurs individual differentiation at the other end.

Behavior Control is the pattern adopted by the family in handling behavior in three specific situations – physically dangerous situations, situations involving the meeting and expressing of psychobiological needs and drives, and situations involving socializing behavior both inside and outside the family. For each of these areas, families develop acceptable behaviors and decide on how much leeway they will allow in the expression of this standard, both of which together determine the style of behavior control.

The Family Assessment Device (FAD) is the questionnaire developed to assess families based on the McMaster model of family functioning (Epstein, Baldwin, & Bishop, 1983). The FAD is an assessment and evaluation tool designed to provide therapists and researchers with valid information on how a family functions on a wide array of clinically relevant dimensions. The FAD is a screening instrument meant to identify problem areas that can be later tackled through family therapy. The proposed Domestic Harmony Scale, on the other hand, is a measure of perceived harmony in a family. It can also be utilized as a guide in the kind of behaviors and attitudes a family needs to adopt to create domestic harmony.

Circumplex Model of Family Functioning
The Circumplex Model presents a “relational diagnosis” in a system focusing and integrating three dimensions considered to be highly relevant in a variety of family theory models (Olson, 1999). These three dimensions are family cohesion, flexibility, and communication. These three dimensions have been derived from a conceptual clustering of over 50 concepts describing marital and family dynamics (Olson, 1999).

*Family cohesion* is defined as the emotional bonding that family members have for each other. Within this model, some of the indicators of family cohesion are: emotional bonding, boundaries, coalitions, time, space, friends, decision-making, and interests and recreation. The main focus is how systems balance their separateness with togetherness.

There are four levels of family cohesion: disengaged (very low), separated (low to moderate), connected (moderate to high), and enmeshed (very high). The model hypothesizes that the central or balanced levels of cohesion, which are separated and connected, make for optimal family functioning. The extreme or unbalanced levels, disengaged and enmeshed, are considered to be problematic for relationships over the long term.

Balanced couple and family systems (separated and connected types) are more functional across the life-span. A separated relationship has some emotional separateness, but is not as extreme as the disengaged system. In the separated system, while time apart is considered essential, some time is spent together, and some decisions are jointly made. Activities and interests are generally separate, but a few are shared. A connected relationship has emotional closeness and loyalty to the relationship. Time spent together is more important that time spent apart or alone, and togetherness is emphasized. In the marital relationship, the couple has both separate and common friends. There are common shared interests but also include separate activities.

*Family flexibility* is the amount of change in its leadership, role relationships, and relationship rules. It includes the concepts leadership (control, discipline), negotiation styles, role
relationships, and relationship rules. The focus of flexibility is on how the system strikes a balance between stability and change.

The levels of flexibility range from rigid (very low) to structured (low to moderate) to flexible (moderate to high) to chaotic (very high). Central or balanced levels of flexibility (structured and flexible) are more conducive to marital and family functioning, while the extremes (rigid and chaotic) pose problems for families.

As with cohesion, balanced family systems are more functional over time. Very high flexibility levels (chaotic) and very low flexibility levels (rigid) tend to be problematic for individuals and the development of relationships in the long run. Relationships that are structured and flexible, on the other hand, are able to manage change and stability more effectively. There is no pre-defined and pre-established absolutely best level proscribed for any relationship. However, relationships are known to experience problems and difficulties if they function as either end of the continuum for extended periods of time.

Marital and Family Communication is considered as a facilitating dimension in which communication is imperative to facilitate movement along the other two dimensions. Focusing on the family as a group, communication depends on listening skills, speaking skills, self-disclosure, clarity, continuity tracking, and respect and regard.

In listening skills, the emphasis is on empathy and attentive listening. Speaking skills refer to speaking for oneself and not speaking for others. Self-disclosure involves sharing information about the self and the relationships between family members. Tracking refers to staying on topic, while respect and regard relate to the affective aspects of communication. As can be understood, balanced systems have good communication, whereas unbalanced systems are poor on the communication dimension.
The questionnaire developed by this model is called FACES (Family Adaptability and Cohesion Evaluation Scales) (Olson, Sprenkle, & Russell, 1979). FACES has been designed as a self-report assessment device measuring the cohesion and flexibility dimensions of the Circumplex Model. It taps both balanced (healthy) and unbalanced (problematic) aspects of family functioning (Olson & Gorall, 2006). It is an assessment tool designed for research, clinical assessment, and treatment planning with couples and families. The same difference applies to this tool and the proposed Domestic Harmony tool as did to the FAD. Both those tools are meant to assess the degree of pathological family functioning, while the Domestic Harmony Scale proposed to measure positive family functioning.

**Bowen’s Model of Family Functioning**

Bowen’s family systems theory is a theory of human behavior that views the family as an emotional unit and uses systems thinking to describe the complex interactions in the unit. It is the nature of a family that its members are intensely emotionally connected. Often people feel distant or disconnected from their families, but this is more of a feeling than a fact. Family members so profoundly affect each other’s thoughts, feelings, and actions that it often seems as if people are living under the same “emotional skin.” People solicit each other’s attention, approval, and support and react to each other’s needs, expectations, and distress. The connectedness and reactivity make the functioning of family members interdependent. A change in one person’s functioning is predictably followed by reciprocal changes in the functioning of others. Families differ somewhat in the degree of interdependence, but it is always present to some degree.

The emotional interdependence presumably evolved to promote the cohesiveness and cooperation families require to protect, shelter, and feed their members. Heightened tension, however, can intensify these processes that promote unity and teamwork, and this can lead to problems. When family members get anxious, the anxiety can escalate by spreading infectiously among them. As anxiety goes up, the emotional connectedness of family members becomes more stressful than comforting. Eventually, one or more members feel overwhelmed, isolated, or out of control.
These are the people who accommodate the most to reduce tension in others. It is a reciprocal interaction. For example, a person takes too much responsibility for the distress of others in relationship to their unrealistic expectations of him. The one accommodating the most literally “absorbs” anxiety and thus is the family member most vulnerable to problems such as depression, alcoholism, affairs, or physical illness.

**Differences between Previous Models and Domestic Harmony**

It is important to differentiate between the above models and domestic harmony. The previous models, firstly, are based on interactions with clinical patients encountered in therapeutic situations, in contrast to the concept of domestic harmony that has been derived from a non-clinical and “normal” sample. Secondly, the previous models were developed with the aim of applying them in family therapy with clinical patients experiencing a dysfunctional family situation. The model of domestic harmony is based on the growth model of positive psychology that attempts to amplify the experience of positive family relations and create a harmonious home environment. Even though it is proposed as a replacement to domestic violence, the model of domestic harmony can also be applied to families not particularly experiencing dysfunctional family functioning, but by families who want to further enhance their favorable family experience. The tenets of domestic harmony can, therefore, be applied to make a good family environment even better! And finally, domestic harmony is a wholistic concept, that is, the overall perception of the family as a whole rather than a sum of isolated, or inert-related, aspects of family functioning and family environment. For example, Bowen’s model primarily focuses on emotional interdependence, which may be balanced in a family but an overall atmosphere of domestic harmony may not necessarily prevail based solely on the fulfillment of this condition of family functioning. Domestic harmony, therefore, is more than just the sum of aspects of family functioning. In the conceptualization of the present research, therefore, domestic harmony is the overall perception of the domestic environment by the young adult, which fulfills several inter-related conditions of family dynamics.

**The Family in Domestic Harmony**
Structurally, a family is a unit of two or more persons united by marriage, blood, adoption, or consensual union, in general consulting a single household, interacting and communicating with each other (Desai, 1994).

Apart from its structural composition, the family serves several functions and plays a major part in the development of all its members throughout the life course. In fact, family has been described as the “headquarters” of human development (Garbarino, 1982). It is place for love, care, learning and socialization of children. Children, parents and the lifelong kinship bond between them make up the concept of the family (Reddy & Reddy, 2003).

The family in India is considered to be an ideal homogenous unit with strong coping mechanisms. It is also considered to be an integral part of the larger social system that is society. In India particularly, which has plurality of forms, families defer along the basis of class, ethnicity, and individual choices. Its members are bound by interpersonal relationships in a wider network of role and social relations. It is considered a link between community and change (TISS, 1993). Hence, the role of the family and its influence in shaping children and the youth is considered crucial as the future of a nation and its growth, development and progress is in the hands of the young. The family is a basic and important unit of society because of the role it plays in the generation of human capital resources and the power that is vested in it to influence individual, household, and community behavior (Sriram, 1993).

The family is the first line of defense, especially for children, and a major factor in their development. It has the major potential to provide stability and support when there are problems. Human development can, thus, be enhanced by enriching family life (Desai, 1995). The young Indian child grows up considering himself/herself to be part of a family unit that works together to face the challenges of the outside world. For this reason, the child participates in various rituals and practices that emphasize family ties and work towards strengthening the bond between family members.
Young Adulthood

The target population of the present research has been chosen to be young adults in the age group of 18 to 22 years (Arnett, 2000; Arnett, 2004). This developmental stage is also referred to as emerging adulthood (Arnett, 2004). On his research on college students and non-college students in India, aged between 18 to 26 years, Nelson (2011) found that the majority of his respondents considered themselves to have reached adulthood. Specifically, 61% college students and 59% non-students gave a reply in the affirmative, while only 26% gave the ambiguous “In some ways yes, in some ways no” response (Nelson, 2011). Not only have researchers classified above 18-year olds as adults, albeit young adults, but the individuals belonging to this age bracket perceive themselves as adults also. Since adulthood expands through a considerably long period of the individual’s lifetime, this phase of the individual’s adult life has been termed as young adulthood or emerging adulthood.

This stage of transition to adulthood has been considered by demographers as a period of demographic density due to the several closely spaced life changes (Rindfuss, 1991). According to Arnett (2000; Arnett, 2004), five distinct characteristics define this period of development: identity exploration to understand personal and professional interests; instability in work and residence; being self-focused; feeling in-between about their status (having crossed adolescence but not yet fully ready to take up adult roles and responsibilities); and exploring new possibilities in life.

It is also a period in the individual’s life-span characterized by important events. In particular, young adulthood experiences life-changing events such as residential mobility, school leaving, beginning of college, and employment (Roberts, Caspi, & Moffit, 2001). According to psychologists, the transition to adulthood is “a time of identity commitment and consolidation in which men and women move from dependence on their family of origin to increasing independence as fully functioning members of society” (Erikson, 1963; Havighurst, 1948; Levinson, 1986). This is especially true of young adults in India, along with concerns regarding their careers and potential life partners. Studying the young adults’ current worldview and expectations of their future life, therefore, becomes important.
A young adult, with a positive outlook towards his or her present life, is more likely to successfully overcome the potential difficulties that adult life entails. In fact, Arnett (2006) has stated that this stage in life is a period of possibilities, characterized by a high degree of optimism and great expectations. It is the time when young people have high aspirations and work towards fulfilling them, especially since they believe that even if their present life is stressful and difficult, their future adulthood will be better and turn out well (Arnett, 2004). This has been found especially true for children from deprived and dysfunctional families (Arnett, 2004; Arnett, 2006). The effect of a positive home environment on young adults has not been studied as yet. As stated by Arnett (2004; Arnett, 2006), children have to live in the environment provided by the family, whether it is healthy or incompetent. In previous research it has been found that when children enter young adulthood and college, they get a chance to not only leave their parents’ home (in several cases), but due to the different exposure get the chance to reinvent their lives and begin making their own decisions, orienting them for a positive, and possibly challenging, future (Arnett, 2004; Arnett, 2006). The focus of the present research, on the other hand, is to discover how a positive family and home environment leads to positive outcomes for young adults.

Is the young adult in India, enjoying college life and standing at the gateway of an independent and challenging adult life, mentally and emotionally prepared for what lies ahead of him or her? These were the concerns that prompted the researchers to choose young adulthood as the focus of study, especially since not much research has previously been conducted on this age group in the context of life outcomes. In particular, the researchers were interested in whether a harmonious family and home environment has made young adults resilient and empowered enough, and equipped them with high self-esteem and a positive orientation towards life (PLO) with which they can head into adult life. The likelihood is high, as Nelson (2004; 2011) has found young adults in India to be optimistic, with 80% students and 53% non-students believing that their quality of life will be higher than their parents’ quality of life.

These young adults are presently partaking in college life, which is the period when the individual is transitioning into adulthood and is beginning to negotiate numerous life tasks
and makes commitments to new identities (Roberts et al., 2001). New attitudes and behaviors, towards oneself, others, and life in general, are formed and acted upon. This is also the age when ideas, notions, concepts, beliefs, values, behaviors and reactions, feelings, cognitions, coping mechanisms, etc., have become more or less consolidated in the young adult, and can have long-term impacts. For the young adult to live a meaningful life, he or she needs to head into this life period with a positive mindset of optimistic expectations. These were additional reasons why the developmental age period of young adulthood was chosen as the focus of the present research.

This development stage is also considered to be the life stage when individuals become more independent, take on adult responsibilities, and explore various lifestyles (Arnett, 2004). During this period, young adults feel in control and autonomous (Hawk, Keijsers, Hale, & Meeus, 2009), undergo the process of “individuation” (Grotevant & Cooper, 1986; Petronio, 1994). Young adults explore various potential identities they can adopt as adults, in the process of which their focus tends to turn away from relationships, with parents in particular, and onto themselves (Nelson et al., 2007). This movement toward independence, therefore, creates a unique transition within the parent-child relationship, and overall family dynamics and the associated home environment.

Whether the young adult perceives domestic harmony at this life stage is an interesting question. Further interesting is whether the perception of domestic harmony influences the experience of positive life outcomes for these young adults. And, how is this relationship influenced by the working status of the mother. These questions have not been studied before, which is why the present research is an important contribution to research on young adults because it aims to fill in a gap in the understanding of young adults, their perceptions and life outlook, and the role the family plays in their acquisition of a positive outlook toward their present life. Therefore, the researcher’s interest was in how factors like domestic harmony and mother’s working status influence the life of the children in the family when they grow up to become college-going young adults.

**Women’s Working Status**
The present research investigates the moderating role of the mother’s working status on the relationship between domestic harmony and positive life outcomes. For this purpose, the mother’s working status has been categorized into three groups: working outside home (WOH) mothers, working from home (WfromH) mothers, and working for home (WforH) mothers.

An important contention in this categorization is that the mother, or woman in general, is always working, when she is outside the home in an office as well as when she is carrying out the household chores and mothering responsibilities. The major difference between working in an office in an organizational set-up and working for home, typically classified as being a home-maker, is that the woman receives a financial compensation in the form of a salary for the former, whereas her household work is not monetarily compensated for. Professional women, who are a part of the country’s workforce, are believed to contribute to the economic growth of the country, whereas women working for home are not counted to yield any economic dividends. Whether there is monetary compensation or direct economic advantage or not, the woman’s work for the home cannot be ignored as no work at all. Hence, in the present research project, the mother’s work for home has also been recognized as a “work” category.

The three categories of women’s working status studied are:

1. Working outside home (WOH): Women who, in addition to home, also work in an organizational or institutional set-up in a professional capacity belong to this category. These are the women who go outside of their homes to an office to carry out their work responsibilities, for which they get financially compensated in the form of a salary. These women have fixed number of working hours in a day and fixed number of working days in a week. Along with the salary, these women are also provided with additional work benefits, such as a paid leave, medical leave, and provident fund.
2. Working from home (WfromH): Women who are engaged in salaried work, but do not have to necessarily go out of their homes to an office, for a fixed number of days in a week and for a fixed amount of time, belong to this category. These are women who can fulfill their work commitments from their homes. For example, writers, freelancers, or self-employed women running small businesses from their homes. Many organizations have given this freedom to their employees to work from home. Like the previous category of working women, these women also get financially compensated for their work. However, unlike the previous category, these women do not necessarily have fixed number of working hours and working days. Most of these women can practice a certain amount of flexibility in their work-time demands.

3. Working for home (WforH): All women actually belong to this category, whether they are working outside home or not as a woman who works outside home or works from home indulges in household work and carries out child-rearing responsibilities. However, to make a distinction with women who do not engage in the above two categories of work, this category pertains to women who are typically referred to as “homemakers” or “housewives.” These women provide work-like services to their families and carry out household responsibilities, but do not get a “salary” for their work. Neither are they entitled to work benefits, such as weekends off, paid leave or medical leave. A woman who works for the home is employed in this capacity full-time. Even though a woman who works for home may not be considered to financially contribute to the family, she is creating a comfortable environment at home that ensures that her husband does not have to carry the burden of household work and can concentrate on his professional work responsibilities. She ensures that her children are well-fed and looked after so that they can concentrate on their education in order to prepare themselves to join the country’s work-force in the future. Hence, working for home women are not only the reason behind their spouses’ and children’s present and future, respectively, earning capabilities, but they are also indirectly contributing to the economic growth of the country.

**Working Mothers**
The relationship between mother’s employment and child’s outcomes has been extensively studied, with varying results. Some of those studies are presented in the following chapter. However, Hoffman (1998) explains how the pathway through which maternal employment affects child’s outcomes is through the family. “To understand how maternal employment affects the child, you have to understand how it affects the family because it is through the family that effects take place. Previous research indicates that the particular aspects of the family that are affected by the mother’s employment status and, in turn, affect the child, are the father’s role, the mother’s sense of well-being, and the parents’ parenting styles – that is, how they interact with the children and the goals they hold for them.” With this understanding it can, therefore, be gauged that family relations play a significant role in whether maternal employment will enhance or hinder the development of positive life outcomes in children.

The experience of domestic harmony, therefore, becomes an important marker of how the mother’s working status is affecting the family dynamics. Once these effects have been established by the measure of perceived domestic harmony, the moderating role of the mother’s working status will illustrate whether the experience of positive life outcomes is enhanced or diminished.

**Positive Life Outcomes**

Resilience, empowerment, self-esteem, and PLO constituted positive life outcomes for the purpose of the present research. Below is a description of each variable as conceptualized for the present research.

**Resilience**

The scientific study of resilience began in 1970 when some pioneering researchers noticed the phenomenon of positive adaptation among children considered to be “at risk” for later developmental psychopathology (Masten, 2001; Masten, 2012). Like most research in
psychology, this group of researchers was also interested in studying resilience as a form of prevention and treatment for psychopathology. As Wright, Masten, and Narayan (2013) tell us, psychoanalytic theory and a disease-oriented biomedical model, that located the source of illness within the individual, dominated the field of mental health at that time. However, the pioneers of resilience research realized that models based primarily of predicting psychopathology were limited in scope and usefulness, and provided little understanding of how good outcomes were associated with children “at risk.” One of the main contributions of these early resilience researchers has been their recognition and championing the idea of positive developmental pathways in the context of adversity (Wright, Masten, & Narayan, 2013). Mostly children who’ve been subjected to adverse conditions and serious challenges to their development, such as poverty, malnutrition, divorce etc., and have successfully bounced back from them to lead normal and fulfilling lives have been studied.

Freud’s intrapsychic perspective disregarded the role of social interventions in propagating personality and behavior modification. However, with the advent of research in resilience, the understanding of people’s physical and social ecologies, as responsible for their capacity to overcome adversity successfully rather than adversity leading to their breakdown, came into prominence (Seccombe, 2002; Wolkow & Ferguson, 2001). A major contributor to this mode of understanding was Kurt Lewin, whose work on personality characteristics and the environments in which they existed, preceded the major research work on resilience, and can be understood as having given resilience research its proper direction (Ungar, 2008).

As Ungar (2008) explains, resilience is “a concept that changes our focus from the breakdown and disorder attributed to exposure to stressful environments, to the individual characteristics and social processes associated with to either normal or unexpectedly positive psychosocial development.” Resilience is a product of the capacities of the individual coupled with environmental resources, together that result in the psychosocial sustainability of the person.

The development of resilience in children is hugely dependent on the environment in which the child grows up. The psychosocial environment provides highly effective protective factors that foster positive development. Different factors would be specific to different cultures and contexts.
Implicating the mandatory role of environmental resources in contributing to the development of resilience, Ungar (2008) defines resilience as composed of the following components:

1. First, resilience is the capacity of individuals to navigate their way to resources that sustain well-being;
2. Second, resilience is the capacity of individuals’ physical and social ecologies to provide these resources; and
3. Third, resilience is the capacity of individuals, their families and communities to negotiate culturally meaningful ways for resources to be shared.

Resilience is often discussed as an outcome (proper functioning or well-being). It is important to refer to it as a set of qualities and processes that enable the individual to make use of internal and external resources for their own benefit (Schofield, 2001; Yates et al., 2003). Not only as an outcome, resilience can also be considered as the capacity that causes the good outcome. Masten et al.’s (1990) definition takes into account all these three associated aspects of resilience:

…the process of, capacity for, or outcome of successful adaptation despite challenging or threatening circumstances.

A range of factors that can be grouped into three factors have been identified that contribute to the development and sustenance of resilience (Garmezy, 1983; Garmezy, 1993; Olsson et al., 2003; Rutter, 2000; Werner & Smith, 1992; Werner & Smith, 2001):

1. Individual, or internal, such as intelligence, gender.
2. Family, such as quality of relationships, cohesion.
3. Community or society, such as level of social support.
The growing consensus among resilience researchers is to not view resilience as an enduring personality trait or an outcome, but to view resilience as an ongoing process present in all individuals and families to a greater or a lesser extent (Grotberg, 1997; Grotberg, 1997; Turner, 2001). It is an evolving and interactional process between the individual or family and aspects of the environment (Rutter & Smith, 1995; Gilligan, 2001; Schofield, 2001).

Emphasizing the “ordinariness” of resilience, Masten (2001) has examined converging findings and concluded that “resilience usually arises from the normative functions of human adaptational systems.” She elaborates that the surprising aspect of resilience is the ordinariness of the phenomena. Resulting from basic human adaptational systems, resilience is a common phenomenon. If Protection of those systems that keep it in good working order, foster robust development that sustains even in the face of severe adversity. Impairment of these major systems, prior or consequent to adversity, increases the risk developmental problems to a greater extent, especially if the environmental hazards are prolonged (Masten, 2011).

The positive psychology stance on resilience focuses on building the strengths and capacities associated with resilience, instead of (or rather alongside) problems, deficits, or psychopathologies requiring remedy and therapeutic intervention. The study on resilience has provided us with several insights into the step-by-step progression of positive development of at-risk populations, children included. No work, until now, has been done to look at the development of resilience among children and youth not exposed to crisis situations. Apart from responding positively to experienced adversity, resilience processes can also refer to preparedness for adversity that may be encountered in the future. Depending on the timing of the occurrence of adversity, resilience may be viewed as occurring prospectively (developing capacities likely to help manage future adversities), concurrently (coping well during adversity), or retrospectively (recovering well after adversity) (Hill et al., 2007).

The main concern in understanding resilience has been on the bouncing back of individuals from adverse situations. Which individuals are predisposed to such bouncing back phenomenon? The current interest is in acquiring an understanding of the prevalence of those positive social conditions that are a prerequisite for the tendency to develop resiliency, or, to
be resilient when faced with adverse situations and consequences in the future. It is expected that children who have grown up in families with perceived domestic harmony are likely to develop capacities and strengths to bounce back from adversities or deal with present and future life situations more effectively.

Approaches to Studying Resilience: Most resilience research has focused on outcomes of risk and adversity among children most prone and exposed to high instances of risk and adversity. The two major approaches to study resilience among high-risk children have been the variable-focused approaches and the person-focused approaches. Masten (2001), in a review of literature utilizing these two approaches, describes them as: “Variable-focused approaches use multivariate statistics to test for linkages among measures of the degree of risk or adversity, outcome, and potential qualities of the individual or environment that may function to compensate for or protect the individual from the negative consequences of risk or adversity.” On the other hand, “person-focused approaches compare people who have different profiles within or across time on sets of criteria to ascertain what differentiates resilient children from other groups of children.”

In the present research, the variable-focused approach is being utilized to examine the role family harmony plays in prospectively compensating the effects of adverse circumstances an individual can possibly face in the future.

**Empowerment**

Several conceptualizations of empowerment have previously been given. Notable amongst those is the World Bank’s articulation of empowerment as the expansion of choice and action. Zimmerman (1995) makes an important point about empowerment when he states that empowerment can be viewed both as a process and as an outcome. As a process, it involves actions, activities and structures, while as an outcome it is suggestive of an achieved level of empowerment by the individual. Theories of empowerment, therefore, include both processes and outcomes (Swift & Levin, 1987; Zimmerman, 1995).
A distinction needs to be made between empowerment processes and outcomes to get a better understanding of the construct (Perkins & Zimmerman, 1995). An example of empowering processes for the individual is participation in community organizations to fulfill civic duty. An outcome, on the other hand, refers to the operationalization of empowerment that enables studying the effects and consequences of experiencing the empowerment processes. Such an outcome for the individual might include perceived control in specific situations and increased skills for resource mobilization and decision-making.

Individual empowerment is a process of interaction between the individual and the environment, during which the individual’s sense of worthlessness transforms into an acceptance of the self as an active and proactive citizen who participates in sociopolitical affairs (Keiffer, 1984).

Zimmerman and Rappaport (1988) have described empowerment as an active process whose form is dependent on circumstances and events, but which is achieved through human activity directed at change from a passive state to an active one. An integration of self-acceptance and self-confidence, social and political understanding, and the ability to play an important part in decision-making and in exercising control over resources present in the environment are achieved during the empowerment process. The sense of personal ability connects with civic commitment. “Individual empowerment is an expression on the individual level of a multi-leveled process that may be applied to organizations, communities and social policy” (Zimmerman & Rappaport, 1988).

The empowerment process culminates in change both internally and externally. Internal change involves an increase in the individual’s belief in his or her ability to make decisions and solve problems. External change expresses itself in the ability to act and implement practical knowledge, information, skills, capabilities, and other resources acquired during the process of empowerment (Parsons, 1988).
It has repeatedly been stated that psychological empowerment is context-specific and needs to be understood with respect to the population under study. Keeping these considerations in mind, empowerment, at the level of the individual, is “a process by which individuals gain mastery and control over their lives,” which can only be achieved if individuals have a critical understanding of the environment within which they are currently functioning (Berger & Neuhaus, 1977; Cornell Empowerment Group, 1989; Kieffer, 1984; Rappaport, 1984; Rappaport, 1987; Schulz & Israel, 1990; Swift & Levin, 1987; Zimmerman, 1990a). One such type of environment, that of the family, is under study in the present research. The aim is to investigate whether an environment of domestic harmony leads to the development of empowerment in young adults or not. Individual and psychological empowerment, in particular, is the focus of the current research.

To further increase the understanding of the constituents of empowerment, Zimmerman, Israel, Schulz, and Checkoway (1992) give a descriptive understanding of three components that entail psychological empowerment, namely intrapersonal, interactional, and behavioral components:

“The intrapersonal component refers to how people think about their capacity to influence social and political systems important to them. It is a self-perception that includes domain-specific perceived control (Paulhus, 1983), self-efficacy, motivation to exert control, and perceived competence. It may also include perceptions about the difficulty associated with trying to exert control over community problems. This perceived difficulty might refer to beliefs about one’s own capacity to influence social and political systems, or to beliefs about people in general (Zimmerman & Rappaport, 1988).

The interactional component refers to the transactions between persons and environments that enable one to successfully master social or political systems. It includes knowledge about the resources needed to achieve goals (i.e. resource mobilization, see McCarthy & Zald, 1977), understanding causal agents (Sue & Zane, 1980), a critical awareness of one’s environment (Freire, 1973; Kieffer, 1984), and the development of decision-making and problem-solving skills necessary to actively engage one’s environment. The interactional component has not been studied directly, but it may be essential to the construct of PE because it connects self-
perceptions about control (intrapersonal component) with what one does to exert influence (behavioral component).

The behavioral component of psychological empowerment refers to the specific actions one takes to exercise influence on the social and political environment through participation in community organizations and activities. It includes participation in community organizations such as neighborhood associations, political groups, self-help groups, church or religious groups, and service organizations. Other aspects of the behavioral component include participation in community-related activities such as helping others cope with problems in living, contacting public officials, or organizing a neighborhood around an issue. Several investigators have suggested that participation in voluntary organizations is associated with psychological empowerment” (Berger & Neuhaus, 1977; Prestby, Wandersman, Florin, Rich, & Chavis, 1990; Zimmerman & Rappaport, 1988).

However, despite laying down a comprehensive conceptualization of psychological empowerment, researchers also state that the specific operationalization of psychological empowerment for a particular study ought to depend on the context and population that is being studied. In the present research, the researchers are interested in psychological empowerment at the individual level, focusing on the internal state of being of the young adult along with associated outcomes and behaviors. The intention is to tap into the perceived empowered state of mind of young adults that would spur them to practice empowered behavior and experienced related outcomes. Thus, the interest is in locating proactivity, considered an essential element especially in the behavioral aspect of psychological empowerment. And that proactivity will only develop when individuals achieve an internal state of empowerment, enabling them to exert themselves in their surrounding environments.

Empowerment Explained by Psychological Constructs: Attempts have been made to describe empowerment in terms of psychological constructs, most notably locus of control (Rotter, 1966) and self-efficacy (Bandura, 1989). Locus of control, a personality construct, is measured along the continuum of internal-external: a person with an internal locus of control derives reinforcement from within himself, is internally motivated, therefore most of his achievements will be under his control. A person with an external locus of control, however,
will search for reinforcement beyond himself, and will believe that his accomplishments depend upon chance, fate, destiny, or influential others (Rotter, 1966).

Although several studies have been conducted to establish a link between empowerment and locus of control, no significant connection has been found between locus of control and some of the factors associated with empowerment, notably political social activity. Internality of locus of control has not been found to hold an advantage over externality of locus of control, especially in cases of extreme powerlessness, and in cases of women. Instead, locus of control has been found to be situation-contingent, rather than a personality construct (Levenson, 1981; Parsons, 1988; Sendler et al., 1983). It is, therefore, advisable to view locus of control as a cultural and situational construct, rather than as a defining personality feature (Antonovsky, 1979).

Self-efficacy, on the other hand, is a useful psychological construct in understanding the cognitive mechanism underlying empowerment. As Sadan (1997) explains:

“Self-efficacy (Bandura, 1989) is a central and ongoing individual mechanism (which operates by means of cognitive, motivational, and affective processes) which is comprised of a person’s perceived belief in her capability to exercise control over events. Studies indicate that a person’s belief in her ability to achieve outcomes is, among other things, connected to her thinking patterns – to what extent they help or hinder her to realize goals. This belief determines how a person will judge her situation, and influences the degree of motivation that people mobilize and sustain in given tasks, their degree of endurance in situations of stress and their vulnerability to depression, and the activities and the environmental frameworks that people choose. The social influences operating in the selected environments can contribute to personal development by the interests and competencies they cultivate and the social opportunities they provide, which subsequently shape their possibilities of development (Bandura, 1989, 1997). The connection between the self-efficacy mechanism and the empowerment process is so clear that there can be no doubt about the value of an integration between them.”
Although generally, empowerment researchers warn that empowerment should not be confused with traditional psychological constructs. The researchers linking psychological constructs with empowerment, as discussed above, have a psychological orientation in revealing the mental and affective processes underlying the achievement of an empowered state of mind. Other empowerment researchers, from different social sciences disciplines, focus on the individual’s behavioral expression in his prevalent socio-political environment, and his intentional interaction with the influential elements in the larger cultural and political landscape.

For the present research, empowerment has been conceptualized as consisting of having choices, decision-making and transforming decisions into actions, dynamism, proactivity and self-efficacy, negotiation, social justice, and control. Based on these dimensions of empowerment, derived from an extensive review of literature, empowerment will be operationalized and a scale constructed for its measurement, which is best suited for the purposes of the present research.

**Self-Esteem**

Self-esteem was first discussed as an independent construct by William James (1890) in his seminal work, *The Principles of Psychology*. In this book, he set the research agenda for the study of the self. His proposition about self-esteem claimed that “self-esteem is a function of judgment about self-attributes (i.e., self-esteem = success/pretensions ratio).” Taking up on this idea, later researchers conceived of the individual “as evaluating specific abilities and attributes and then arriving at an overall sense of self-worth with some implicit cognitive algebra” (Pelham, 1995; Pelham & Swann, 1989; Suls & Krizan, 2005).

Self-esteem is a topic of large-scale concern, especially the self-esteem of developing children and young adults. Self-esteem is associated with several negative states of psychological functioning, such as depression and anxiety, as well as with motivation and general satisfaction with one’s life (Harter, 1986; Rosenberg, 1986). In light of
these associations, it has been stated that children and adolescents, who are low on self-esteem, are deeply dependent on their families, especially their parents (Willoughby, King, & Polatajko, 1996). It is also possible that families breeding dependence in their children is the determining factor in those children’s low self-esteem. Hence, these children and adolescents are highly likely to be affected by inter-familial relationships and the corresponding home environment.

Most of the research and literature on self-esteem refers to global self-esteem, described as “the individual’s positive or negative attitude toward the self as a totality” (Rosenberg, Schooler, Schoenbach, & Rosenberg, 1995). However, research on attitude understands that people can have an attitude about an object in whole as well as about particular facets or aspects of that object (Marsh, 1990). Since self-esteem is an attitude, this distinction applies to self-esteem as well, thereby allowing for its categorization into global and specific self-esteem (Rosenberg et al., 1995). In fact, Rosenberg (1979) makes an interesting point about self-esteem as an attitude; he says that self esteem “can be viewed as an attitude toward an object, even though the holder of the attitude and the object toward which the attitude is held – the self – are the same” (Rosenberg, 1979).

As an attitude, self-esteem has both cognitive and affective elements. In its cognitive element, self-esteem refers to an object, the self, in which it indicates toward an evaluative thought held about the self. Self-esteem’s affective element is evident from the fact that it has direction, that is positive or negative self-esteem, and it has varying intensity, that is high and low self-esteem. In global and specific self-esteem, these cognitive and affective elements function differently, a fact that has often been overlooked by self-esteem researchers (Rosenberg et al., 1995).

The affective and cognitive aspects of self-esteem are differently represented in global self-esteem and specific self-esteem. Since global self-esteem is more strongly associated with psychological well-being, than with behavior, it is most probably an expression of personal affect (Rosenberg et al., 1995). On the other hand, since specific self-esteem is more strongly associated with behavioral outcome, being a
judgment or evaluation of a particular characteristic, specific self-esteem has an underlying cognitive element (Rosenberg et al., 1995). Both these types of self-esteem, therefore, have different effects on the personality and its associated behavioral patterns and outcomes.

Failing to distinguish specific from global self-esteem, in the same manner as confusing the part with the whole, has led to mistaken interpretations. Rosenberg et al. (1995), whose self-esteem scale has been used in the present research, cite a well known example of the relationship between race and self-esteem. Some studies on this relationship emphasize the pride in one’s race (racial self-esteem), while other studies focus on pride in oneself (personal self-esteem) (Porter and Washington, 1989). Pointing out this distinction, between racial and personal self-esteem, is often missed. Cross (1985), in an exhaustive literature review, pointed out that out of the 161 studies he examined, 87 percent explored either racial self-esteem or personal self-esteem, never both together. In these studies, low regard for one’s race was interpreted as low self-regard or self-esteem. As Cross (1985) reported, “although researchers clearly set out to assess racial self-esteem, as a result of their failure to make a sharp distinction between racial and personal self-esteem, they often presented the racial self-esteem results ‘as if’ their study had actually assessed level of self-worth.” In a similar manner, children with poor academic self-concepts are often mistakenly understood of having low self-esteem. The implicit assumption is that a child who considers him or herself as a poor student has a generalized low self-esteem (Wylie, 1979). This may be because of the value attached to academics over all other aspects of the individual’s personality. This is especially true in the Indian context where academic achievement is most valued in the growing up child.

Global and specific self-esteem, although dynamically interrelated phenomena, nevertheless are not directly interchangeable. Marsh (1986) provided early empirical evidence for this distinction. In his research, Marsh (1986) examined the relationship of subjects’ self-evaluations on 12 facets of the self with their overall global self-esteem. The results showed that the associations fell within the range of .06 to .60, with most of the associations ranging from .30 to .50. Even if measurement error
somewhat lowered these correlations, these relatively low correlations indicate that though global and specific self-esteem are related, they are definitely not interchangeable phenomena.

One reason why it is necessary to distinguish between global and specific self-esteem is that without this distinction, the rather weaker associations reported in the literature between self-esteem and other variables might be incorrectly interpreted as truly representative. Depending on whether self-esteem is treated as a cause or outcome, these relationships are often weaker than expected (Rosenberg et al., 1995). It should be noted here that in the present study, self-esteem has been treated as an outcome (of perceived domestic harmony). In regard to the relationship between self-esteem and other variables, self-esteem has been shown to be predicted with only moderate success by, for example, socio-demographic variables (Wylie, 1979). Neither has self-esteem been found to be a reliable predictor of behavioral outcomes, except for some successes here and there (Menaghan & Parcel, 1990). The need to distinguish between global and specific self-esteem, and their relevance to behavior and psychological well-being, underlies these relatively weak associations.

The interest of the present research is in measuring the overall global self-esteem of the young adult. Thus, self-esteem has been operationalized as “a positive or negative orientation toward oneself; an overall evaluation of one’s worth or value” (Rosenberg, 1965). To measure the concept, Rosenberg’s Self-Esteem Scale (RSES) (1979) is being used. This is the most widely-used measure of global self-esteem.

Life Orientation

The role of cognition and affect on behavioral outcomes is often studied. Social and personality psychology have aptly taught us that our beliefs and emotions influence our social behavior. “Beliefs can proactively shape the ways that individuals perceive and make sense of social situations, and beliefs can affect how individuals behave towards others” (Srivastava & Angelo, 2009). Similarly, beliefs towards one's own self can be expected to play a vital role in the development of a positive orientation
towards life in general. In fact, it has been found that people’s cognitive and affective evaluations of themselves, their life and their future play a vital role in their well-being and success across a variety of domains of functioning (Diener & Suh, 2000; Kahneman, Diener, & Schwartz, 1999). In particular are self-esteem, life satisfaction, and optimism. These derivatives of a positively-construed life orientation have been found to correlate with a number of optimal functioning outcomes for the individual, such as health, job success, and positive interpersonal relationships (Lyubomirsky, King, & Diener, 2005; Psyczczynski, Greenberg, Solomon, Arnt, & Schimel, 2004; Scheier & Carver, 2001).

Longitudinal studies have proven that experiencing and expressing positive emotions, for example in the form of positive appraisals of life situations, are associated with positive long-life outcomes along with a healthy long life (Danner, Snowdon, & Friesen, 2001; Maruta, Colligan, Malinchoc, & Offord, 2000; Peterson, Seligman, Yurko, Martin, & Friedman, 1998). Fredrickson (2001) describes this process by her broaden-and-build theory, which states that the experience of positive emotions broadens people’s momentary thought-action repertoires that then lead to rewarding and enriching social and interpersonal exchanges and experiences (Ashby, Isen, & Turken, 1999; Aspinwall, 1998, 2000; Estrada, Isen, & Young, 1997; Fredrickson & Branigan, 2005; Fredrickson & Joiner, 2002; Isen, 2002).

Self-efficacy beliefs also play a definitive role in the development of positive orientation. As stated by Caprara (2009), “previous findings point to the contributions of self-efficacy beliefs to positive orientation within the frame of social cognitive theory that places self-efficacy beliefs at the core of human agency, and provides direction to target properly the processes and mechanisms that enable people to exert control over the course of their life and to contribute actively to their happiness (Bandura, 1997; Caprara, 2002).” Based on earlier findings a conceptual model can, therefore, be created in which one’s effectiveness in managing interpersonal relationships (such as with family members) is influenced by one’s perceived efficacy in managing affect. Both these efficacy beliefs, working in concert, contribute to positive orientation (Caprara & Steca, 2006ab).
The two positive orientations, namely life satisfaction and optimism, “correspond to enduring knowledge structures about oneself and the world that significantly affect one’s feelings and actions, shape the present and predispose to future experiences” (Caprara, 2009). To explain further, life satisfaction comprises the overall evaluation of the different activities and relationships that make the individual’s life worthwhile (Diener, 1984). Specifically, this overall evaluation constitutes the gratification that the individual has derived from the relevant activities and relationships that have marked his or her life (Caprara, 2009). Optimism pertains to the belief that future personal and social events will contain good things in plentiful while bad things will be scarce (Carver & Scheier, 2002). Underlying these two constructs, along with self-esteem, is a common latent factor, positive thinking. It is described as “a common mode of viewing at the world and facing reality that affects the ways people construe their experiences and predispose to actions” (Caprara, Delle Fratte, & Steca, 2002; Caprara, Steca, Alessandri, Abela, & McWhinnie, 2009).

**Positive Life Orientation (PLO)**

Introducing the concept of Positive Life Orientation (PLO), Agrawal, et al. (1995) define it as “the predisposition to selectively focus one’s attention on the brighter side of any situation” (Agarwal et al., 1995). It is a positivity bias utilized in constructing subjective reality in a way that positive meaning can be derived from any given situation in life. It should be noted that this positivity may be unrealistic or illusionary in nature, in some cases. Regardless, the positive effect of the interpretative value of the experienced event on the individual’s mental state and emotional functioning is important, while the illusionary nature of PLO can be ignored (Agrawal et al., 1995).

Agrawal et al. (1995) further explain PLO as a “general mode of positive thinking of an individual which is less affected by a particular context.” Since PLO is operationally defined as “one’s ability to emphasize the positive aspects of a crisis, make positive comparisons, and maintain a positive attitude toward life in general,” the generalized expectancy of positive outcomes is a consequence of PLO and not one
of its components. This is the way Agrawal et al. (1995) differentiate PLO from optimism.

In other related research, positive thinking, the dimension underlying life satisfaction, self-esteem and optimism, has been specifically described as “a positive outlook or a mode of viewing reality and facing life events that capitalizes on positive past experiences retrieving and making them salient in the various occurrences of life” (Caprara & Steca, 2006). PLO, on the hand, is the tendency to focus one’s attention on the brighter side of current life events and experiences. Both these conceptualizations are similar, in fact PLO can be considered as the operationalization of positive thinking, in the interest of the present research. While this is an attempt to operationalize positive thinking, PLO may be influenced by past experiences, rearing, modeling behavior etc.

It is necessary to clarify that PLO is not considered a personality trait. Therefore, the source of adopting a positive life orientation in life can only be conjectured, since the authors of PLO have not provided adequate information about where PLO is derived from. In fact, the current research attempts to find out whether the past and current experience of domestic harmony influences the development of PLO. The results will give a perspective on a derivative source of PLO.

Previously, a body of empirical research has focused on the subjective well-being of the individual, in which the quality of life and emotional states reflecting the perception and evaluations of daily transactions have been measured (Diener, 1984, 1994, 2000; Diener, Lucas, & Oishi, 2002; Diener, Suh, Lucas, & Smith, 1999). The conceptualization of subjective well-being as dependent on the perception and evaluation of daily life events draws parallels with Agrawal et al.’s (1995) conceptualization of PLO, the latter being the positive appraisal of current events occurring in the individual’s life. An elaborated understanding of PLO can thus be derived from the comprehensively established explanation of the entailing factors and processes of subjective well-being. PLO can, perhaps, be understood as both a component as well as a product or consequence of subjective well-being. The element
of positive life orientation is imminent in the favorable perception and evaluation of present life events. As a product, a positive life orientation results when the individual reports experiencing high levels of subjective well-being, the consequence of which is interpreting every new event and experience in a positive light.

For the present research, PLO has been operationalized as per the definition given by Agrawal et al. (1995) as “the predisposition to selectively focus one’s attention on the brighter side of any situation.” The PLO scale, constructed by the same authors, will be used to measure the construct.

**Conclusion**

In conclusion, it is reiterated that the aim of the present study is to conceptualize and operationalize domestic harmony and to construct a tool for its measurement. Empowerment will also be operationalized to suit the purpose of the present research, along with developing a tool for its measurement. Following this, the predictive impact of domestic harmony on resilience, empowerment, self-esteem, and PLO will be tested. Whether this relationship, between domestic harmony and positive life outcomes, is moderated by the mother’s working status, will be the final question addressed.