REVIEW OF LITERATURE

The impact of “normal” or positive family environment on the development of children has hardly been studied before. Nor has it been conceptualized as to what is a positive home environment. The present research has introduced a novel concept of positive family functioning and home environment, termed domestic harmony. The model of domestic harmony is based on the growth model of positive psychology, as opposed to the clinical model based on insights gathered in therapeutic encounters on which the previous models of family functioning are based. Three such models, namely the McMaster Model, the Circumplex Model, and Bowen’s Model of Family Functioning have been described in the previous chapter. The prevalence of clinical models of family functioning and their utilization in couple and family therapy have received ample research coverage. The role of the overall home environment, however, has not been much studied.

There is also a paucity of research on how the home environment experienced from childhood until adulthood positively influences the development of the child and the acquired outlook towards life, particularly in young adulthood. The present study may fill this gap in research. The purpose is two-fold: first, to conceptualize a positive home environment where domestic harmony prevails, and second, to investigate the role it plays in the development of positive life outcomes, namely resilience, empowerment, self-esteem and positive life orientation (PLO), in young adults.

This chapter will take a look at the previous research that has been done on family functioning and resilience, empowerment, self-esteem, and PLO. Since domestic harmony is a novel concept, no previous research exists on this concept. That is, the concept itself does not exist in research. However, related research on the characteristics of family functioning and certain aspects of the home environment exists and is presented here.

Healthy Home Environment and Development
It is a well understood fact that a healthy growing up environment is needed for the positive development of children. The concept of domestic harmony highlights this need. Previous research has already underlined the harmful effect of a dysfunctional family environment, as is discussed below, highlighting the need for family stability necessary for children’s development. The role of parenting, parents’ personalities, and family communication and family satisfaction has been studied as contributing to the family atmosphere and children’s development. Below is a discussion of some of the important findings of this line of research, which will provide a context in which domestic harmony can be conceptually understood.

Cicchetti & Toth (2005) state that a dysfunctional family environment does not provide the child with the appropriate experiences necessary for the child’s normal development and later adaptation in life. An unsupportive environment causing developmental disruptions can further cause an enduring state of vulnerability that can hinder the development of positive outcomes in the future (Cicchetti, 2004; Cicchetti & Toth, 2005). The effects of a harmful home environment are so severe that it can lead to psychopathological development in later adult life. “Children growing up in an environment failing to provide consistent and appropriate opportunities for development are more likely to internalize negative self-perceptions or self-schemas which, in turn, increase the risk of adult psychopathology, especially that of anxiety and depression” (Brewin et al., 1993; Schilling et al., 2007; Scott et al., 2010; Tyrka et al., 2009). If exposure to a harmful home environment evidently leads to psychopathology in adulthood, then it can similarly be claimed that experience of a harmonious home environment will lead to the development of positive outcomes in adulthood.

The effect of some aspects of the home environment on the personality development of child has also been studied. Personality is considered an important indicator of adaptive development because it “reflects the coherence of behavior and emotions, and adaptation of the individual to the environment” (Josefsson et al. 2013). Focusing on establishing a link between home environment and the development of personality in adult life in a longitudinal study, Josefsson et al., (2013) found that home environment, created through the quality of parental caregiving, was more strongly related with the development of psychological maturity, including self-directedness and cooperativeness (character, involving voluntary
rational processes (Cloninger, 2008), than with emotional and behavioral tendencies (temperament, involving involuntary emotional processes (Cloninger, 2008)), after 18 years.

The notion of family stability (Harden, 2004) has also been proposed in relation to healthy child development. A home environment that has family stability has been described as consisting of warmth, emotional availability, stimulation, family cohesion, and day-to-day activities (Bradley, Corwyn, & Burchinal, 2000; Emde & Robinson, 2000; Olson, 2000; Roderick, 2002). Additionally, characteristics such as stable relationships among caregivers, positive parenting, and a cohesive, supportive, and flexible family system have been cited as markers of family stability leading to healthy child development (Ackerman, Kogos, & Youngstrom, 1999; Azar, 2002; Dickstein, Seifer, & Hayden, 1998).

The effect of the home environment and stable family life on the development of children’s personality traits becomes significant in this context. The point to be noted is that the home environment plays a key role in the emergence of personality characteristics in children in their adult life. According to Kagan’s (1984) research, by the age of two children develop internal standards about how things or events should be. Therefore, from the age of two onwards, children have begun to develop a sensitivity regarding the quality of their home environment, and depending on the favorable or unfavorable conditions of the home climate, are accordingly affected by it. By age seven, they have formed near-concrete ideas and expectations regarding their parents’ behavior and treatment towards them (Selman, 1980).

According to the family process perspective, family processes influence children’s well-being and positive development (Acock & Demo, 1994; Demo & Acock, 1988). Two of the most influential family processes are the quality of the parent-child relationship and the quality of the relationship between parents. According to the family processes theorists and researchers, the well-being and positive development of children is ensured when they experience favorable family processes in the form of high-quality parent-child relationship and low parental conflict. In fact, in studies done on divorced families, it was found that prior low family cohesion and high parental conflict caused more distress to the children and hindered their development than did the later marital disruption and dissolution of the family (Emery, 1982; Heatherington, Cox & Cox, 1981). Furthermore, the quality of the parent-child
relationship determined the child’s level of adjustment following divorce (Furstenberg, et al., 1983; Hetherington, 1989; Wallerstein & Kelly, 1980). In the context of the family, therefore, parental influence on the child and the quality of the relationship between them is an important determinant of positive outcomes in children.

The contribution of parenting in developing a healthy environment for the development of the child has long been studied (Ainsworth et al., 1978; Baumrind, 1967; Bowlby, 1969). It is to be noted that most of the researches have explained the rearing environment in relation to parent characteristics, parenting style or the quality of the parent-child relationship. The functionality or dysfunctionality of a family environment has been described in reference to the adequacy and appropriateness of parenting. Of special interest has been the question of the extent of variation in parent-child relationships explaining the different ways in which children develop. According to parenting researchers, there are three main dimensions of parenting influencing positive and healthy outcomes in children (Skinner, Johnson, & Snyder, 2005) – (a) warmth versus rejection, (b) behavioral control versus chaos, and (c) autonomy support versus coercion. These parenting dimensions have been found salient in its assessments of parents of children from pre-school age to late adolescence. Despite the contending role of heredity (Harris, 1998; Rowe, 1994) and peers (Harris, 1998), social scientists have continuously asserted the significance of the influence of parenting on the child’s functioning (Collins, Maccoby, Steinberger, Hetherington, & Bornstein, 2000). Studies in behavior genetics, too, have offered insight into the influencing role of parenting on the child’s psychological functioning (Knafo & Plomin, 2006).

The difference between “normal” or “good-enough parenting” versus a pathological rearing environment has already been established (Maccoby, 2000). The non-pathological rearing environment has been described in terms of fulfilling the basic needs of the child. These basic needs include physical needs (e.g. food and health care), need for stable family environment (e.g. no violence, no conflict, stable relationship with caregiver), and need for guidance and support (e.g. emotional support, parental structure, and cognitive stimulation) (Dubowitz et al., 2005). In previous conceptualizations, a home environment is considered favorable for child development if it meets the above needs of the child. The present research goes further and investigates the influence of domestic environment, in terms of peace and harmony, on the development of resilience, empowerment, self-esteem, and PLO in young adults.
The personalities of the mother and the father have been purported to be an important source of influence on their children’s psychological functioning (Prinzie, Stams, Dekovic, Reijntjes, & Belsky, 2009). Even though only to a modest degree, parents’ personality has been found to be an inner resource contributing to parenting styles (Prinzie et al., 2009). Associations, albeit small, have been found between the Big Five personality dimensions and the three below-mentioned parenting dimensions. Each of the Big Five personality dimensions, namely Extraversion (or surgency, positive affectivity), Agreeableness (vs. antagonism), Conscientiousness (or constraint), Emotional Stability (vs. Neuroticism or negative affectivity), and Openness to Experience (or intellect, culture; Caspi & Shiner, 2006; Goldberg, 1990), are related to parental warmth and behavioral control. Autonomy support, however, was only related to Agreeableness and Neuroticism. Parents who display higher levels of Extraversion, Agreeableness, Conscientiousness, and Openness, and lower levels of Neuroticism engage in warm and structured parenting (Prinzie et al., 2009). Such parents are more able to initiate and maintain positive interactions, to respond appropriately and satisfactorily to their child’s signals, and provide a consistent and structured child-rearing environment at home.

In regards to autonomy, parents who are high on Agreeableness and low on Neuroticism, tend to support their children’s autonomy needs. As Prinzie et al. (2009) explain, such parents are more inclined to tolerate or support their children’s autonomy needs, as they tend to view it in a positive light and not as an attack on their parental autonomy. In contrast, more neurotic and less agreeable parents tend to attribute negative intentions to their children when they misbehave (Bugental & Shennum, 1984). On the other hand, agreeable and less neurotic parents do not experience frustration, distress, irritation, and anger, and by avoiding harsh disciplinary tactics, they are able to approach their children in a manner that avoids the initiate or further escalation of conflictual interactions.

Family communication is constituted by the manner in which verbal and non-verbal information is exchanged between family members (Epstein, Bishop, Ryan, Miller, & Keltner, 1993). Family satisfaction has been defined as the degree to which family
members feel happy and fulfilled in their relationship with each other (Olson & Wilson, 1982).

Systems theory elaborates on how family communication is an important part of effective family functioning (Beavers & Voeller, 1983; Bloom, 1985; Olson & DeFrain, 1994; Stinnett & DeFrain, 1985). For example, family communication has been found to play a pivotal role in the resolution of unavoidable problems arising between family members (Peterson & Green, 2009). Focusing on the positive development of adolescents in particular, Akhlaq, Malik, & Khan (2013) explain that “open communication within families creates an environment of positive change, understanding, and growth. Therefore, facilitating open family communication should encourage the development of stronger relationships within families.”

Several investigators have discovered a link between family communication and developmental outcomes in adolescents. Positive developmental outcomes, such as school achievement (Demo et al., 1987), ability to resolve difficult life issues (Hops, Tildesley, Lichenstein, Ary, & Sherman, 1990), moral maturity (Walker, 1991), and taking an active role in coping with stress (Day, Bosworth, Gustafson, Chewning, & Hawkins, 1985) have been associated with perceived open communication. Furthermore, perceived open communication has also been associated with the ability to express ideas and opinions (Cooper, Grotevant, & Condon, 1983). The same applies to young adults as well, the period immediately following adolescence. It is to be expected that similar positive developmental outcomes would sustain through young adulthood as well.

Additionally, the Circumplex model of marital and family functioning is a graphic representation of the dynamic relationships between family systems. It emphasizes how family members and their behaviors are inter-connected. The three dimensions addressed by the model are family cohesion (togetherness), family adaptability (the ability to cope with change), and family communication (Olson & DeFrain, 2000). Although communication is not graphically pictured in the model, it serves as a facilitating dimension that helps the families move between the extremes of the other
two dimensions. It’s interpretation states: “If a family has good communication skills, they are more likely to be close (cohesion dimension) and be able to work out problems (adaptability dimension) when they arise” (Olson & DeFrain, 2000).

A strong link has been found by researchers between communication patterns and satisfaction with family relationships (Noller & Fitzpatrick, 1990). According to studies, during adolescence life satisfaction is strongly influenced by the life experiences and relationships occurring within the family (Gohm et al., 1998; Rask et. al., 2003; Edwards & Lopez, 2006). Furthermore, across the entire age range of adolescence, students’ ratings of their familial relationships were found to make a stronger impact on their overall life satisfaction than peer, school, or community relationships (Dew & Huebner, 1994). Despite the fact that adolescents spent more time with their peers as compared to their family members, the quality of family relationships was most important in the adolescents’ lives.

These were some of the pre-established conceptual parameters alongside which domestic harmony will be located. Most of this research has been restrained to characteristics of the parent-child relationship and interaction. The concept of domestic harmony attempts to go beyond and provide a more holistic picture of positive family functioning and the consequent development of a positive home environment. Several more aspects of the home environment will be included in the exploration of what entails domestic harmony. Additionally, most of this previous research has been from the perspective of parents. The present research focuses on the perception of domestic harmony from the perspective of young adults, which will be another novel contribution to the research on the family and its influence on young adults, particularly in India.

India is appreciated all over the world for the role of the family in children’s development. This study tries to systematically find out if the positive family environment, characterized by domestic harmony, leads to positive life outcomes among children moving into adulthood.
Effect of Maternal Employment on Children’s Development

The debate on the impact of working mothers versus non-working mothers on children’s development has been a long raging one. The aim of the present research is not to compare working versus non-working mothers, but to investigate the moderating effect their working status has on their children’s positive development. In the context of the Indian culture, the myth is that stay-at-home moms prove more beneficial for their children’s positive development than do working mothers. Research, however, has given mixed results. Without going into a detailed review of the exhaustive research on working and non-working mothers, presented below is the research salient to the concerns raised by the present research.

One of the main reasons why non-working mothers are considered better for their children’s development than working mothers is because of the amount of time they spend with their children. In a study done in Eastern European countries by Mihailescu (2004), it was found that women working outside of the home and their families spend approximately two times less time with their children than do housewives. While housewives spent 7-8 hours per day with their children, working women spend about 4 hours engaging in activities with their children per day (4 hours in case of children under the age of 3, 3 hours in case of children over age 3 and about 3 and a half hours in case care had to be taken of more than one child). However, the difference in the duration of time spent with children was not found to significantly enhance or hamper children’s well-being and development.

Few studies in India have found negative impact of the mother’s working status on her child’s physical and mental condition. For example, Ranjan (2013) found that primary school children of working mothers displayed more behavioral problems than children of home-maker mothers. Looking at it from a different stance, results of a study by Francavilla and Giannelli (2007), for example, support the proposition that stay-at-home mothers prove beneficial for their children’s positive development. They found that that the children of mothers who stay at home have increased educational opportunities as the mothers make sure that their children go to school and seriously complete their educational activities.
On the other hand, there are studies that have established a positive link between employed mothers and the positive development of their children. A study by Biabangard and Hatami (2012) on students in Tehran, Iran, found working mothers to have a positive effect on the social development and educational progression of children, especially girls. In India, Muthusamy (2006) found that working mothers spend as much time in child-care as non-working mothers, except playing with them, thereby proving to play as significant a role in their children’s positive development as non-working mothers. Hangal and Aminabhavi (2007) found that children of employed mothers are higher on emotional maturity and achievement orientation, especially girls, than children of home-maker mothers.

The results, regarding the effect of maternal employment on children’s development, are different for the two genders and across social class. Desai, Chase-Lansdale, & Michael (1989) found mother’s employment to have an adverse effect on children’s intellectual ability, but only for boys in higher income families. This impact was not found for girls or for children from low-income families. In fact, Vandell and Ramanan (2008) have found that children’s intellectual ability was positively affected by the mother’s employment in low-income families. Additionally, there was less poverty and better overall home environment in families in which the mothers were employed (Vandell & Ramanan, 2008).

In fact, after a review of studies on employed and non-employed mothers, Hoffman (1998) has claimed that “the mother’s employment status is not so robust a variable that the simple comparison of the children of employed and non-employed mothers will reveal meaningful differences.” The moderated effects of other variables, such as social class, whether the employment was full-time or part-time, parents’ attitudes, and child’s gender, need to be considered.

Since the present research is following the positive psychology approach, the interest is in investigating whether the mother’s working status plays a role in the development of positive life outcomes in her young adult children. In particular, the moderating role of her working status in the relationship between domestic harmony and positive life outcomes is under investigation. This is the first time that such questions are being addressed, specifically in the Indian context, and regarding the development of resilience, empowerment, self-esteem, and
PLO. The categorization of the mother’s working status into mothers WOH, WfromH, and WforH has also been done for the first time in research in India. The findings of the present study will, therefore, add a different dimension, from a positive psychology approach, to the already extensive literature on working and non-working mothers. This study will also address the question whether the perception of the home environment by the young adult or the mother’s working status is more salient and encompassing in effecting positive life outcomes.

**Positive Life Outcomes: A Positive Psychology Approach**

The Positive Psychology approach uncovers people’s strengths, their derivatives, and promotes positive functioning (Snyder et al., 2011). In particular, the interest is in how the resources inherent in positive environments shape and foster strengths in people. In such, the positive psychology approach lays down guidelines about how people should live their lives, and what makes lives worth living. With this intention, the researchers claim that positive interactions with family, and the creation of an atmosphere of domestic harmony at home, are highly likely to beget positive outcomes in young adults. The positive life outcomes chosen to study in the present research are resilience, empowerment, self-esteem, and PLO. All these constructs have been operationalized from a Positive Psychology approach for the present research. Below is a literature review of each concept.

**Resilience**

The research on resilience has been carried out in three waves so far. Each wave of resilience research has focused on a different approach of studying the resilient individual. This section presents a brief detail of each of these three waves of resilience research. Emphasis will be on the findings relevant to the interests of the present research.
It is to be noted in the beginning of the discussion on the literature review on resilience that there is a conceptual difference in resilience research on children and adults. When the target population is children, researchers usually utilize measures of behavioral competence, or the degree to which they reach normative developmental milestones at appropriate times in their life-cycle (Moffitt, 2005). Assessments are typically based on reports by teachers, parents, peers, on whether they are getting good grades, get along with their peers, and whether they generally behave well (Luthar, Sawyer, & Brown, 2012). On the other hand, when involving the adult population, self-report measures are used to assess how the individuals themselves feel. Indices such as subjective well-being, happiness, self-reported levels of distress, etc. are utilized. Since the target population of the present research was young adults, a self-report Resilience Scale was used.

The first wave of resilience research delineated a number of factors or correlates of resilience. By identifying several promotive and protective factors that facilitate normative development in both high and low risk situations, the importance of fundamental, universal human adaptive systems has been established (Wright, Masten, & Narayan, 2013). These systems, of which family is one, ensure normative and on-course development, and also recovery from adversity (Masten, 2001; Masten, 2007).

Early resiliency researchers have found three major precursors of resilience: positive temperament or positive personality disposition (Rutter, Maughan, Mortimore, Ouston, & Smith, 1979; Garmezy, 1985); supportive family milieu (family cohesion and warmth); and the availability and use of external support systems by both child and parent (Kumpfer, 1999).

Resiliency researchers have identified several personality dispositional characteristics, however, only the ones that are pertinent to our present research will be discussed. An important personality factor is empathy and related social connectedness with others. Werner (1985; Werner, 1986) found resilient children to possess a sense of responsibility for others, willingness to care for others, and ability to empathize with the needs of others. Coping skills of these children were enhanced due to the presence of good interpersonal social skills (Platt, Belding, & Husband, 1999), an engaging personality along with good listening and communicating skills (Wolin, 1991), and politeness (Kumpfer, 1990). Responsiveness to
others elicits more positive reactions from associates since infancy (Demos, 1989; Werner & Smith, 1992). Children who were able to build secure attachments and connections with other people, including family and non-family members, due to their pleasing personality characteristics increased their likelihood of successfully bouncing back if they encountered adversity in their lives. Their increased social skills make them popular among their peers, and allow them a wide array of friends to choose from, thereby enabling them to form friendships with positive and prosocial peers (Berndt & Ladd, 1989). Ability and opportunity to establish affinity with others, therefore, proves to be a strong protective factor buffering against the negative effects of adversity. In addition, closeness with positive others, peers as well as elders, perpetuates similar behaviors and builds onto the resiliency repertoire.

Developing a mission or purpose in life is an important psychological characteristic of resilient children, especially those who exist in high-risk environments (Bernard, 1991; Richardson, Neiger, Jenson, & Kumpfer, 1990). Holding a sense of uniqueness or specialness about oneself, along with a strong self-belief that they will be the instigators of change (empowerment) helps resilient children surpass difficult situations (Kumpfer, 1999). This purpose in life or existential meaning (Frankel, 1959) helps them endure hardships and emerge stronger and with the conviction that they will make the world a better place for similar types of children (Kumpfer, 1999). Healing through helping or caring for others (Werner, 1986; Segal, 1986) helps in regaining mastery of the environment and perceived control (Taylor, 1983), which are required to sustain hope throughout the difficult circumstances and emerge resilient. Neiger (1991) has confirmed in a study of college students of South Carolina that the final pathway to positive life adaptation is resiliency, and the most predictive variables in this resiliency clusters were life purpose, followed by problem-solving and self-efficacy.

In their qualitative study, Gordon and Song (1994) found autonomy and self-directedness related to resilience. The independent-minded types were able to bypass negative pressures and instead focus on goal-directed activities. They were also able to separate themselves from their family’s value systems and become their own moral guardians (Jacobs & Wolin, 1991). Higher intellectual thought in the form of higher moral reasoning has also been demonstrated in resilient individuals.
One of the most powerful predictors of positive adaptation is internalizing a sense of powerfulness (empowerment) and holding the belief that one can convert negative life circumstances into positive outcomes through direct action (PLO) (Kumpfer, 1999). Internal locus of control and the perceived ability to influence the surrounding environment and future destiny was found in abundance in resilient individuals (Campbell, Converse, & Rodgers, 1976; Luthar, 1991; Murphy & Moriarty, 1976; Parker, Cowen, Work & Wyman, 1990; Rotter, 1954; Werner & Smith, 1992). The trick is to develop an “optimistic bias” and latch “on to any excuse for hope and faith in recovery” (Murphy, 1987). More noteworthy is the finding that there needs to be a congruence between these control beliefs and objectivity of the life circumstances (Christensen, Turner, Smith, Holman, & Gregory, 1991). Resilient individuals have “the ability to know the difference” and withdraw their efforts to control circumstances and situations that are uncontrollable.

Once the characteristics of resilience had been identified by the first wave of resilience research, the processes underlying the initiation of development of these characteristics in individuals needed to be investigated. These processes, however, are extremely complex owing to multiple and multilayered interactions between various factors within the individual, within the environment, and between the individual and the environment, that occur simultaneously. Such multi-causal models are difficult to study all together.

The second wave of resilience research attempted an integrative understanding of the processes underlying the development of resilience. The focus shifted from the “what questions of description” to the “how questions of underlying processes that influence adaptation” (Masten et al., 1990). The focus of the second wave has been on specifically understanding the complex, systemic interactions that shape positive outcomes, in which resilience is considered to be a result of several processes acting simultaneously (Cicchetti, 2010; Egeland, Carlson, & Sroufe, 1993; Masten, 1999, 2007; Yates, Egeland, & Sroufe, 2003). The operational definition of resilience during this phase of research, therefore, focused on the search for underlying multiple processes. An example is: “Resilience reflects a diverse set of processes that alter children’s transactions with adverse life conditions to reduce negative effects and promote mastery of normative developmental tasks” (Wyman, 2003).
The second wave of resilience research has taken contextual issues into account and searched for dynamic models of change, in which developmental systems are realized to play an important role in causal explanations (Cicchetti, 2010; Cicchetti & Curtis, 2007; Masten, 2007; Masten, 2011). These systems are contextualized in multiple ways, making generalizability across systems and across developmental ways improbable. Hence, studying the interactions between the different systems in the development of resilience becomes imperative.

Wright et al. (2013) give us some examples of these developmental adaptive systems: development of attachment relationships (with family and peers); moral and ethical development; self-regulatory systems for modulating emotions, arousal and behavior; mastery and motivational systems. It is to be noted that all of these adaptive systems can be located within one’s family, hence the family systems approach to understanding development and positive life adaptation can be useful. Other systems, involving the broader social and cultural milieu, include extended family networks, religious organizations, and other social systems in the society offering adaptive advantages (Wright et al., 2013). All of these developmental adaptive systems help in the nurturing of personality characteristics (some of which have been discussed above) that aid in the development of resilience and positive life adaptation in general.

Shifting focus away from the individual and placing it onto the broader relational context, inclusive of the family and community networks, the second wave utilized an ecological, transactional systems approach (Cowen, 2000; Cummings, Davies, & Campbell, 2000; Masten & Obradovic, 2008; Walsh, 1998; Wright et al., 2013). Outcomes of positive life adaption were determined by complex interactions and transactions between the individual and the immediate societal milieu. The focus of study became the child-context relationships and interactions (Wright et al., 2013). In the early development of the child, effective family functioning was found to lead to the development of resilience in later adult life (Richmond & Beardslee, 1988).
The family, and other environmental, influences became the focus of study in wave two. Plomin, Asbury, and Dunn (2001) found that parents do not necessarily respond to their different children in the same manner, and neither do children experience the family environment in the same way. The child’s perception of the family environment and its corresponding effect on the child’s development becomes salient. Conflict or harmony within the family may be expressed to the children in different ways, and the children may differently interpret, get affected by, and respond to the home environment. The reciprocity and reactivity of interactions also needs to be highlighted.

Family plays the part of both protective as well as promotive factor in the resilience-building process. Its role as a protective factor, however, may be contextually-specified. Groups exposed to diverse stressors adapt in different ways, which also means that some factors may be protective for some individuals but not for others. Interpersonal relationships between family members, though largely believed to be a significant protective factor, but evidence has been found that resilience can also be based on a lack of close relational ties with family or other social support groups. In their study of maltreated children, Cicchetti and Rogosch (1997) found that those maltreated children who drew from lesser relational sources and, in addition, used more restrained emotional self-regulation styles displayed better long-term positive life adaptation than children in the compared control group. Similarly, Werner and Smith (1992) and Wyman (2003) found that interpersonal and affective distancing coupled with low parental expectations of support were related to later resilience, instead of to poor adjustment. “Later in life, many of these resilient adults detached themselves from their parents and siblings, perhaps to prevent being overwhelmed by their families’ emotional problems,” (Werner & Smith, 1992). Emotional distancing is clearly associated with better outcomes for children coming from dysfunctional families, whether it applies to healthy families also remains to be seen. The role of perception, in this case the child’s perception of his or her family environment, is extremely salient. For the same reason, we have emphasized the effect of perceived domestic harmony on positive life outcomes by young adults.

Boyce et al. (1998) recognized the fact that impact of the social context depends upon the individual’s interpretation and perception of the experience. The present research is based on similar premises. The effect of the individual’s perception of domestic harmony within the family on development of resilience has been investigated. The internal process involved in
perceptions and their effects has already been studied by a number of investigators (Compas, Connor-Smith, Saltzman, Thomsen, & Wadsworth, 2001). We attempt to further this investigation by studying how the perception of domestic harmony propels internal processes that positively affect the development of resilience in young adults.

The third wave of resilience research focused on intervention to foster resilience in individuals. Mainly, the aim was to “inform practice, prevention, and policy efforts directed towards creating resilience when it was not likely to occur naturally” (Wright, Masten, & Narayan, 2013). To elaborate on the contiguity of the second and third waves in resilience research, Wright, Masten, and Narayan (2013) explain that “the second wave focused on a better understanding of mediating and moderating processes that might explain the links between adversity and developmental competence, as an intermediate step toward the ultimate goal of intervening to promote resilience and positive development.”

The growing influence of resilience theory and research is evident in the growing models for intervention, in particular prevention models (Masten, 2011). Several resilience frameworks and strength-based models, for both practice and policy, have been developed (e.g. Cicchetti et al., 2000; Galassi & Akos, 2007; Luthar & Cicchetti, 2000; Masten, 2001; Masten, 2006; Masten, 2011; Nation et al., 2003). In the prevention area, intervention models emphasize the protective factors that contribute to the development of resilience (McLain et al., 2010; Patterson, Forgatch, & DeGarmo, 2010; Toth, Pianta, & Erickson, 2011; Weissberg, Kumpfer, & Seligman, 2003; Wyman, 2003; Wyman, Sandler, Wolchik, & Nelson, 2000). This research study, focusing on the contribution of domestic harmony in the formation and development of resilience, falls in the same category. Domestic harmony can be understood as a protective and promotive factor fostering resilience development, and can thereby be advocated for therapy, practice, and policy.

Resilience has also been studied in relation to self-esteem, and gender, two variables of interest in the present research:
Self-esteem, along with satisfying interpersonal relationships (as experienced in domestic harmony) is considered to constitute resilience (Rutter, 1987). Resilient individuals have higher self-esteem since they are capable of making an accurate appraisal of their strengths and abilities (Kumpfer, 1999). Along with resilient self-efficacy (Bandura, 1977; Bandura, 1989), they have the ability to regain their self-esteem after facing failure causing a disruption in their internal homeostasis (Flach, 1988). Self-efficacy is a related component of self-esteem and can be explained as the self-perception regarding one’s own competence to effectively perform certain behavioral tasks (Bandura, 1977). Heightened self-efficacy influences which tasks and challenges will be attempted, how much effort will put into completing them, and what will be the emotional reactions to threats of failure (Lawrence & McLeroy, 1986). Elaborating on the importance of self-esteem in developing resiliency, Schunk and Carbonari (1984) state that “youth who avoid opportunities to master challenges because of low self-esteem or specific task self-efficacy will have a more difficult time developing resilience.” Taking on challenges is therefore important in developing self-efficacy, which will in turn give rise to resilience (Bandura, 1989).

Findings of the Rochester Child Resilience Project (Wyman, 2003; Wyman, Cowen, Work, & Kerley, 1993) suggest that though high self-esteem and positive future orientation are correlates of resilience for some children, they may not be so for others, thereby highlighting the context-specificity of protective and associative factors of resilience. These factors are only truly protective when they are congruent with actual capabilities. Unrealistic perception of one’s own competence, which does not match up with actual ability to realize that perceived competence, does not serve as a protective factor in resilience development.

Gender has been found to be a factor in predicting resiliency. Developmental studies have repeatedly found girls to be more resilient than boys in a gender comparison of children in high-risk families or environment (Werner, 1985). In respect to negative family environments, boys tend to react emotionally and behaviorally in more negative ways than do girls (Gamble & Zigler, 1986; Rutter, 1982).

The present research focuses on whether domestic harmony predicts the development of resilience in young adults. These young adults are not necessarily going through a crisis in
their present life from which they need to bounce back. The attempt is to look at the preemptive impact of a positive family environment in inculcating a resilient attitude. So, if and when the young adult encounters a crisis situation in the future, the likelihood of bouncing back from it will be enhanced because the solid and positive family environment experienced while growing up has bolstered the individual to become resilient. In effect, the domestic harmony can therefore be seen as a source of primary prevention (Snyder et al., 2011) for the young adult.

Empowerment

Empowerment has different meanings in different socio-cultural and political contexts. Some of the terms associated with empowerment include: self-strength, control, self-power, self-reliance, own choice, life of dignity in accordance with one’s own values, capable of fighting for one’s own rights, independence, own decision-making, being free, awakening, and capability – to mention just a few.

These are two landmark studies that have empirically tested psychological empowerment. These two studies, conducted by Kieffer (1984) and Zimmerman and Rappaport (1988) employed different methodologies but arrived at similar results. Keiffer’s (1984) study utilized qualitative methodology, conducting in-depth interviews with 15 individuals who had proven their leadership in grass-root organizations. Based on his research results, his conceptualization of psychological empowerment included skill development necessary for effective participation in community decision-making, and comprised of psychological constructs such as heightened self-esteem, perceived self-efficacy, and belief in causal importance. Zimmerman and Rappaport (1988), on the other hand, conducted a quantitative analysis of the degree of association between participation and perceived control, in which they found similar results. The study distinguished between high-participation groups and low- or no-participation groups. Samples of students and community residents across three different measures of participation yielded similar results regarding the relation between perceived control and level of participation in decision-making.
These two studies therefore confirmed the theoretical conceptualization that psychological empowerment involved personal control, a sense of competence, critical awareness of the sociopolitical environment, and participation in community organizations and activities (Zimmerman et al., 1992). As proposed by Zimmerman and Rappaport (1988), these constructs can be divided into the three components of psychological empowerment, namely the intrapersonal, the interactional, and the behavioral components. Taking the example of individuals who participate in community organizations and activities: “the intrapersonal component of psychological empowerment may be hypothesized to include measures of perceived control consisting of personal and community control, perceived efficacy for influencing community decisions, and beliefs about the difficulty individuals perceive for influencing the socio-political system. The behavioral component might be expected to include participation, and holding leadership positions in community organizations, and activities. The interactional component may include some understanding of factors that hinder and enhance one’s ability to influence community decisions, as well as, decision-making and problem-solving skills” (Zimmerman et al., 1992).

The results of Zimmerman et al.’s (1992) study confirmed the theoretical model of psychological empowerment (as composed of intrapersonal, interactional, and behavioral components) by replicating the results of Kieffer (1984) and Zimmerman and Rappaport’s (1988) studies. Furthermore, it extends the theory by applying psychological empowerment theory to a more diverse and randomly selected adult population, than did the previous two studies. Zimmerman and Rappaport (1988) had tested their hypotheses on an undergraduate population, and although their findings were replicated in a community sample, it was not a stratified random sample like the one used in Zimmerman et al.’s (1992) study. Kieffer’s (1988) sample consisted of a small number of select people chosen for in-depth analysis. Zimmerman et al.’s (1992) generalizes the findings to a larger and more representative sample.

Only study was found on empowerment of university students, which measured their level of political empowerment. Angelique, Reischl, and Davidson (2002) were concerned with discovering intervention through which university courses could increase the political empowerment of its students. In their understanding, along with social justice, social action, and community involvement, political empowerment also consisted of an element of self-
efficacy (Fawcett et al., 1995; Hobfoll, 1998; Marin, Tschann, Gomez, & Gregorich, 1998; Perkins & Zimmerman, 1995; Zimmerman, 1995). Although “efficacy” has been regarded by some as an outcome of empowerment, it is better to understand it as a motivating influence in pushing forward the empowerment process because without an efficacy belief, the individual may not consider empowering himself or herself. The self-efficacy component, therefore, can be considered a common factor in all the different kinds of empowerment that have been discussed in the empowerment literature.

Since Angelique et al.’s (2002) study, like the present research, is based in a University setting, they have given a description of the University as an empowering setting. In this regard, the researchers say: “Although some have critiqued contemporary university structures as being oppressive mechanisms of particular ideologies (e.g. Altback, Arnove, & Kelly, 1982; Giroux & Purpel, 1983; Levin, 1981), one of the hallmarks of higher education is clearly academic freedom as well as intellectual development and evolving critical awareness. University settings can be structured to create empowering environments, particularly in classes with many opportunities to acquire skills and knowledge, as well as develop critical thinking skills. Teachers can offer both supportive and challenging leadership. Universities often have resources that are readily accessible. Organizing classes into small groups, basing a class around a common social cause, and structuring many opportunities for hands-on community experience are all reasonable possibilities for community researchers and educators. In sum, the university can provide an appropriate setting for creating an empowering environment and investigating the development of political empowerment over time.”

Wanting to examine whether a university course, implemented in an empowering setting, leads to the development of political empowerment in students, in Angelique et al.’s (2002) study, University undergraduate students were randomly assigned to one of two conditions (intervention/control) and were surveyed at two time points: before implementation of the intervention and upon completion of the intervention. Results indicated that students who participated in the empowering intervention had increased feelings of political commitment as compared to students who were assigned to a waiting list/control group. The empowering intervention was found to, therefore, successfully increase some aspects of political empowerment in the students. These results make a good case for the role that Universities
and their corresponding environments can play in the development of empowerment in young adults (undergraduate students).

Empowerment has been operationalized based on the dimensions of youth empowerment unearthed in the construction of the Empowerment Scale in the present research. The results of the present study will provide much-needed insight into youth empowerment, especially for Indian youth, by filling in the void in this area of empowerment research. The impact of the family environment on empowerment in young adults is a novel and significant contribution of the present study to empowerment research. Particularly, the contextualization of empowerment in family relations and home environment will provide a perspective on the development of empowerment that is salient for most youth and on which no previous research exists.

**Self-Esteem**

The debate on the benefit of high self-esteem for experiencing positive life outcomes in comparison to low self-esteem is ongoing. Whereas some studies suggest that self-esteem has no positive effect on important life outcomes, such as relationship success, economic welfare, and health (e.g., Baumeister, Campbell, Krueger, & Vohs, 2003; Boden, Fergusson, & Horwood, 2008; Krueger, Vohs, & Baumeister, 2008), other studies emphasize the relevance of self-esteem in determining positive life outcomes (e.g., Swann, Chang-Schneider, & McClarty, 2007, 2008; Trzesniewski et al., 2006). The present review of literature on self-esteem will provide, firstly, an outline of the developmental trajectory of self-esteem. Secondly, two correlates of self-esteem, relationship satisfaction and parental relationship, which are relevant to the purposes of the present research, will be discussed. Thirdly, the relationship between parental behavior and family variables, as established by previous research, will be discussed. Fourthly, the link between parental self-esteem and children’s self-esteem will be established. And lastly, the connected between self-esteem and gender will be discussed.
Previous research has established a developmental trajectory of self-esteem. Originally, through an extensive literature review, Wylie (1979) had concluded that there were no age differences in self-esteem. Researchers since then have debated this claim (e.g. McCarthy & Hoge, 1982; O’Malley & Bachman, 1983; Rosenberg, 1986). Now, considerable evidence exists about the developmental trajectory of self-esteem during the entire lifespan of the individual. This evidence is discussed in this section.

Self-esteem goes through normative shifts throughout the developmental period (Robins & Trzesniewski, 2005). Following a similar trajectory for both men and women, self-esteem is the highest in children, drops during adolescence, begins to rise in young adulthood reaching a peak in middle adulthood, followed by a sharp decline in old age. These findings have been corroborated by three recent studies – a meta-analysis of 86 published articles (Trzesniewski, Donnellan & Robins, 2001; see also Twenge & Campbell, 2001); a large, cross-sectional study of individuals aged 9 to 90 (Robins, Trzesniewski, Tracy, Gosling, & Potter, 2002); and, a cohort-sequential longitudinal study of individuals between the ages of 25 and 90 (Trzesniewski & Robins, 2004).

Similarly, in a longitudinal study assessing the developmental trajectory and stability of self-esteem over the life span, Orth, Robins, and Widaman (2012) found that self-esteem tends to increase during adolescence, young adulthood, and middle adulthood, reaching its peak at age 51, and then tends to decline in old age. In the same study, gender was not found to have a moderating effect on the life-span development of self-esteem. The trajectory of self-esteem across the life span remained the same for both men and women. Education, however, did play a role in determining the level of self-esteem experienced by individuals: individuals with higher levels of education had higher self-esteem, at all ages (Orth et al., 2012). In the current research, education is a constant, since all participants are currently pursuing their undergraduate studies. Hence, education is not a factor taken into consideration in the current analyses. Regardless, it is an important indicator in the assessment and evaluation of the levels of self-esteem experienced by individuals across their life-span, and therefore, was considered necessary to report.
Several correlates of high self-esteem have been identified, such as career success (Judge & Bono, 2001), the causal effect of self-esteem on positive life outcomes is a critical question that remains satisfactorily unanswered. If a causal effect can be established, it would implicate that attempts at increasing self-esteem would make a worthwhile contribution to the experience of positive life outcomes, thereby also reducing the risk of developing maladaptive consequences (for a detailed discussion see Baumeister, Campbell, Krueger, & Vohs, 2003). However, if self-esteem is simply a consequence of positive life outcomes (Seligman, 1993), then boosting self-esteem may not yield much concrete benefit. Though causal relationships are yet to be established, several correlates of self-esteem have been observed. Discussed below are two correlates: relationship satisfaction and parental relationship.

A major component of experiencing domestic harmony is the quality and value of the relationships shared between family members. Relational satisfaction is therefore an important ingredient in determining whether domestic harmony prevails in the home, and its corresponding positive impact on future life outcomes. Several cross-sectional studies have found that self-esteem and relationship satisfaction are positively correlated (Shackelford, 2001; Voss, Markiewicz, & Doyle, 1999). Orth et al. (2012) explain this correlation by stating, “this positive relation may arise because individuals with high self-esteem show more relationship-enhancing behaviors, whereas individuals with low self-esteem show more dysfunctional, relationship-damaging behaviors.” For instance, low self-esteem is likely to lead individuals to become more sensitive to rejection and develop a tendency to withdraw and reduce interpersonal closeness following conflicts, which undermines the level of satisfaction experienced in close relationships (Murray, Holmes, & Griffin, 2000; Murray, Rose, Bellavia, Holmes, & Kusche, 2002). Similarly, the converse also holds true – relationship satisfaction boosts self-esteem. As Leary & Baumeister (2000) found, “satisfying relationships may increase one's perceived relational value of oneself and may thereby positively influence self-esteem.”

In their attempt to establish a connection between self-esteem and parental relationship, Rosenberg et al. (1995) identified the path from global self-esteem to self-estimate of intelligence by using the following instrumental variables (amongst others): closeness to father, closeness to mother, parents’ tendency to reason with the child in disciplinary
situations, and parental punitiveness. All of these were expected to affect global self-esteem directly. This model was found to significantly fit the data (Rosenberg et al., 1995).

In other and related research, four extensive monographs were conducted to specify the relationship between salient parental behavior dimensions and children’s self-esteem (Bachman, 1970; Coopersmith, 1967; Rosenberg, 1965; Thomas, Gecas, Weigert, & Rooney, 1974). The major conclusions of these researches was that parental support and involvement with their children, along with parental consent and willingness to grant their children freedom and autonomy was positively associated with high self-esteem in children. The explanation is that such behaviors “convey to the child information about his or her inherent worth… [and] suggests to the child that the parent trusts the child and considers him or her to be a responsible person. This too has favorable consequences for the child’s self-esteem” (Gecas & Schwalbe, 1986).

In the study of adolescents’ self-esteem, the family variables that significantly correlate with self-esteem are the following: individual’s “feelings towards his or her parents” (O’Donnel, 1976); family conflict and support (Cooper, Holman & Braithwaite, 1983); perceptions of family acceptance, inter-communication, and shared satisfaction (Watkins & Astilla, 1980); and, parental support and control, with the latter divided into induction and coercion (Openshaw, Thomas, & Rollins, 1983, 1984). Furthermore, Gecas & Schwalbe (1986) obtained a significant positive relationship between adolescents’ self-esteem and their perceptions of parental support, autonomy/control, and participation. No association, however, was found between parental self-reports of the same behavior and children’s self-esteem, thereby indicating the salience of the child’s perception of family relationships over self-proclaimed behaviors expressed by parents.

Support in parent-child relationships is a bidirectional and reciprocal socialization process (Demo, Small, & Savin-Williams, 1987). According to Hoelter (1986), adolescents who feel good about their relationship with their parents, and demonstrate
support and express affection towards their parents, are likely to experience high self-esteem. Demonstration of support and expression of affection toward parents is an important indicator of the quality of the parent-adolescent relationship.

Positive family relationships are believed to impact the overall global self-esteem of an individual (Rosenberg et al., 1995). An important context for the development and sustenance of the individual’s self-esteem is the family and the interactions that take place between family members (Demo, Small, & Savin-Williams, 1987). According to symbolic interactionism, “an individual’s sense of self is a social product of the reflected appraisals of others, especially those of significant others, that are transmitted in the course of social interaction” (Demo et al., 1987). Gecas (1981) further noted that “the intimate, intensive, relatively enduring nature of the family interactions implies that the socialization that takes place [in this setting] is usually the most pervasive and consequential for the individual.” Since parents and siblings, who constitute the immediate family, are the most important people in the growing child’s life, the nature of the relationship between family members plays a major influencing role in the formation of the child’s sense of self and corresponding self-esteem.

At the outset, it is important to note that the relation between self-esteem and family relationships depends on a large part on the child or adolescent’s perception of the quality of the familial relationships (Demo, Small, & Savin-Williams, 1987). In line with the argument posed by symbolic interactionism (Blumer, 1969; Gecase, 1971; Gecas & Schwalbe, 1986; Peterson & Rollins, 1986), an individual’s perception or interpretation of others’ behavior is more important and impactful to the individual and his or her self-esteem than is others’ actual behavior. Demo et al. (1987) have found empirical support for this proposition. Keeping this important point in mind, the scale of domestic harmony constructed for the present study measures perceived domestic harmony, from the standpoint of the young adult, the target population of the present research.
Inconsistent findings have emerged regarding the importance and effect of, for example, parental control, depending upon the source of the information. Depending on who the data was collected from, parents or children, different results emerged regarding the relationship between parental control and adolescents’ self-esteem (Coopersmith, 1967; Thomas et al., 1974; Gecas & Schwalbe, 1986). Demo et. al. (1987) explain this discrepancy in results from the symbolic interactionism perspective: “A symbolic interactionist perspective suggests that it is necessary to examine the adolescents’ perceptions as well as the parents’ perceptions of control in family relations. From the adolescents’ perspective, control involves the parents’ attempt to limit or direct his or her activities (Gecas & Schwalbe, 1986); thus the more the adolescent feels that decisions and behaviors that affect him or her are under the control of the parent, the lower will be his or her level of self-esteem. Parents may view their control differently, however, perceiving it as necessary for the adolescents’ growth and development.”

Due to the well-documented and evidenced positive consequences of high self-esteem, it becomes important to discuss the self-esteem of parents who are currently raising young children. In general, high self-esteem enables individuals to be more capable and competent (Burns, 1979); further enabling them to be more responsive and sensitive in their interactions with the people around them (Walster & Walster, 1978). Incorporating these findings into the family, Small (1988) states that “parents with higher self-esteem would have more positive interactions with their children and perform more effectively in their parental role.” To add further evidence to this assumption, Satir (1972), based on clinical evidence, has stated that “high self-esteem is the foundation for all positive communication and interaction in the family. Because individuals with high self-esteem feel they matter, they are more likely to be honest, responsible, compassionate, and loving to other family members” (Small, 1988). In a similar and reciprocal vein, parents who raise their children to be competent, capable individuals with a high sense of self-worth feel good about themselves and experience high self-esteem (Curran, 1983).
In a family, parents with high self-esteem have more positive interactions with their children and employ effective parental styles. These assumptions are supported by Small’s (1988) research, who found that there is a relationship between a parent’s sense of self-worth and the behaviors the parent utilizes in his or her interaction with preadolescent and adolescent children. The significant link Small (1988) found between parental self-esteem and a particular parent-child interaction style held true especially for mothers. The parenting role seems to be more central to the mother’s sense of self than to the father’s sense of self.

Small (1988) also found a strong positive relationship between parental self-esteem and parent-child communication, which held true for both mothers and fathers. Parents with high self-esteem were more likely to have more and friendlier interactions with their children (Small, 1988). On the other hand, consequences of negative parent-child communication have adverse effects on the child’s later-life functioning. For example, the adoption of destructive conflict behaviors by parents, in their interactions with their children, sends the implicit message that children’s needs and feelings are unimportant. This message invokes negative working models of the self and others in the child (Feeney, 2006). The children, then, fail to learn important social skills and, in fact, enact the maladjusted behavior patterns modeled by the parents (Pettit & Clawson, 1996).

How is parental self-esteem formed? Demo et al. (1987) state that parental self-esteem is affected by the quality of the parent-adolescent interaction in the same manner as is the self-esteem of the adolescent. Parents and adolescents were found to have independent yet overlapping perceptions of their relationship with each other, and self-esteem was related to the individual’s own perception of the relationship while the other’s perception was unrelated to the self-esteem of the individual. As explained by the symbolic interactionism perspective, “these findings suggest that the intimate, challenging, and the emotionally-charged nature of parent-adolescent relations is indeed influential in shaping the self-concepts of all family members involved. We believe the nature of these relationships is critical in that both adolescents and parents serve as significant others whose opinions and reflected
appraisals are influential in shaping the others’ self-esteem. Reflected appraisals are mutually transmitted as parents and their children interact in daily social encounters” (Demo et al., 1987).

Self-Esteem and Gender: Although boys and girls follow the same self-esteem trajectory throughout their life-span, some significant gender divergences have emerged in the research by Robins and Trzesniewski (2005). Despite reporting similar levels of self-esteem in childhood, a gender gap emerges in adolescence, with adolescent boys reporting higher self-esteem than adolescent girls (Kling, Hyde, Showers, & Buswell, 1999; Robins et al., 2002). This gender gap persists throughout adulthood but diminishes and then disappears in old age (Kling et al., 1999; Robins et al., 2002).

Despite the lack of existence of a generalized integrative theoretical model to explain these gender differences in self-esteem, researchers have offered several explanations. These explanations range from maturational changes associated with puberty to socio-contextual factors related to the differential treatment given to boys and girls in the classroom, or differences in body image ideal, amongst others (Robins & Trzesniewski, 2005).

Replicating the finding of Gecas & Schwalbe (1986), Demo et al. (1987) found that the self-esteem of adolescent boys is more influenced by parental relations than is the self-esteem of adolescent girls. The reason they propose is that “the stronger relationship between parental behavior and boys’ self-esteem (compared to that of girls) is… greater parental responsiveness to the self-esteem of boys than of girls – that is, responsiveness in terms of control and support behavior” (Gecas & Schwalbe, 1986). Another probability for the high self-esteem of boys is that adolescent boys tend to express and communicate their self-esteem in ways that command a response from parents (in the form of support, control, or communication), whereas the expressions of girls are fewer or too subtle, denying the parents with potential cues to produce the appropriate responses (Demo et al., 1987).

For both genders, however, communication and participation with parents are strongly associated with the self-esteem development and sustenance in adolescents. This tendency
illustrates highly reciprocal social relationships, in which shared activities, conversations, and emotional support are highly correlated with children’s self-esteem (Demo et al., 1987).

In conclusion, it needs to be acknowledged that in regards to the family and its role in building self-esteem most of the previous research has focused on the parent-child relationship. The present research goes beyond this dual relationship and explores the creation of an atmosphere of domestic harmony in the home, which is only partly contributed by the quality of the parent-child relationship and interaction. Domestic harmony attempts to paint a more holistic picture of a positive home environment that is purported to predict high self-esteem in young adults. Self-esteem is thus measured as an outcome of domestic harmony in the present research. It is also conceptualized as one of the positive life outcomes, along with resilience, empowerment, and PLO. Following the positive psychology approach, the results of the present study will provide insight into the role positive family functioning plays in the development of self-esteem for college-going young adults.

**Positive Life Orientation**

The importance of optimal psychological functioning and well-being has been well documented by researchers, especially in the field of positive psychology, whose aim is to address the problematic areas of human functioning by focusing on the positive potentials that will enhance the quality of life by the experience of an enriching human experience (Diener & Seligman, 2004; Seligman, 2003; Seligman & Csikszentmihalyi, 2000; Sheldon & King, 2001). Agrawal et al. (1995) conceptualized positive life orientation (PLO) with the aim to understand its role in the recovery from recent myocardial infarction (MI), i.e. heart attack. The results indicated that holding a positive life orientation, which involved looking at the brighter side of a situation, including disease and its associated crisis, played an important role in recovery. PLO can thus be understood as an influential factor in experiencing, or regaining, subjective well-being, especially following a crisis in life.
Apart from Agrawal et al’s (1995) PLO, the related concept of positive orientation has also been forwarded by Caprara, Steca, Alessandri, Abela, and McWhinnie (2010). Positive orientation consists of judgments people hold about themselves, their life, and their future. All of these are considered important ingredients of positive psychological functioning and well-being. Well-being, therefore, is an important outcome of holding a positive orientation.

Abundant research exists on the concept of subjective well-being (Diener, 1984; Diener, 1994; Diener, Lucas, & Oishi, 2002; Diener, Suh, Lucas, & Smith, 1999). All this research differentiates between two main components of well-being: the cognitive component, corresponding to “the individual’s evaluation of life satisfaction according to subjectively determined standards,” and an affective component “corresponding to an individual hedonic balance, namely, a state characterized by a predominance of pleasant (or positive) affective experiences over unpleasant (or negative) affective experiences” (Caprara & Steca, 2006; Diener, 1984; Diener, 1994; Diener, 2000; Diener, Suh, Lucas, & Smith, 1999).

Caprara and colleagues (Caprara, Delle Fratte, & Steca, 2002; Caprara & Steca, 2004; Steca, 2004) have suggested that the cognitive component of subjective well-being should be extended to include self-esteem, optimism, along with life satisfaction. A look at the literature shows high degrees of correlations between these three variables, as well as between these variables and different aspects of positive psychological functioning, especially in the domain of interpersonal positive relationships (Alicke, 1985; Brown, 1998; Campbell, 1981; Diener & Diener, 1995; Gable & Nezleck, 1998; Lucas, Diener, & Suh, 1996; Scheier, Matthews, Owens, Magovern, & Carver, 1990; Schimmack & Diener, 2003).

Self-esteem has already been discussed above. To turn our focus to life satisfaction and optimism, both concepts related to, yet slightly different from, PLO, Caprara (2009) states that all these concepts refer to the “enduring knowledge structures about oneself and the world that significantly affect one’s feelings and actions, shape the present, and predispose to future experiences.” Optimism, in particular, has been found to be positively correlated with physical health, effective coping strategies, successful recovery from diseases, and longevity.
The role of optimism in interpersonal relationships has been studied. Results indicate that “individuals with optimistic outlooks are better liked by others and are socially rejected less often; have fewer negative social interactions; have longer-lasting friendships; and experience lesser social alienation and anxiety. In romantic relationships, both optimists and their partners enjoy greater relationship satisfaction, and optimists’ relationships are at lower risk of breaking up” (Srivastava & Angelo, 2009).

Research on optimism and coping strategies shows that the manner in which optimists cope with stress and adversity is reflective of an attitude of resilience. As Srivastava and Angelo (2009) point out, “research on coping strategies has indicated that optimists are indeed more persistent and more successful in pursuing goals. When faced with challenges or obstacles, optimists are more likely to use approach-oriented coping strategies like active coping, planning, positive reinterpretation, and less likely to use avoidance-oriented coping strategies like denial and behavioral disengagement. Optimists are also more likely to use coping strategies that target a problem directly when doing so would be effective; but when a problem is unresolvable or uncontrollable, they make use of emotion-based strategies like acceptance, humor, and positive reframing in order to lessen the problem’s impact. Optimist’s persistence in not limitless or self-destructive, however, optimism is also associated with behavioral flexibility in coping with a stressor, such that optimists disengage from hopeless tasks and shift their attention to more tractable problems, rather than proceeding with non-productive persistence.”

The three constructs of optimism, self-esteem and life satisfaction are connected by a single underlying latent construct, positive thinking (Caprara & Steca, 2004; Steca, 2004). Positive thinking “corresponds to 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). Later on, the concept of positive thinking was renamed positive orientation (Caprara et al., 2009). Positive orientation is defined as “the general tendency to evaluate self, life, and future in a positive way” (Caprara et al., 2009).
Positive orientation is also referred to as positivity (POS) (Caprara, Alessandri & Eisenberg et al., 2012). Positive orientation, or positivity, is known to uniquely contribute to optimal functioning (Alessandri, Caprara, & Tisak, 2012). Individuals who are high on POS, also tend to evaluate their lives in a positive manner, have optimistic expectations of the future, and a positive sense of self-worth (Caprara et al., 2009; Caprara, Alessandri, & Eisenberg et al., 2012; Caprara, Alessandri, & Trommsdorff, et al., 2012).

As Heikamp et al. (2014) suggest, “Taking a person-centered approach to optimal human functioning, POS represents a core dimension ‘that significantly affects how individuals predispose themselves to actions and experiences’ (Caprara, Alessandri & Trommsdorff, et al., 2012). This approach views individuals as agents who significantly contribute to chart the course of their life and accordingly focuses on their strengths and potentials. Accordingly, past research has shown that positive self-evaluations (i.e. self-esteem), positive attitudes towards life (i.e. life satisfaction), and optimism are associated with self-confidence and aspirations conducive to success in different life domains (Lyubomirsky et al., 2005).”

Positive orientation has delivered robust findings across three different cultures, mainly Japan, Germany, and Italy. In studies conducted in these three countries, Caprara, Alessandri, Trommsdorff, Heikamp, Yamaguchi, and Suzuki (2012) corroborated the generality of positive orientation across the three countries. In addition, the Positivity Scale, constructed to measure positive orientation, also corroborated the latent dimension of positive orientation across five countries, namely Italy, Germany, Spain, Poland, and Serbia (Heikamp, Alessandri, Laguna, Petrovic, Caprara, & Trommsdorff, 2014).

Longitudinal studies have found positive orientation to be highly stable during the course of adolescence and into adulthood (Alessandri, 2008; Caprara, Alessandri, Tisak, & Steca, 2009). It was also found to be positively associated with indicators of successful adjustment across various domains of functioning (Heikamp et al., 2014). Positive orientation was also found to strongly predict measures tapping depression, positive and negative affectivity, quality of friendship and health, along with indicators of individual optimal functioning at school and at work (Alessandri, 2008; Caprara, Alessandri, Tisak, & Steca, 2009). The impact
of positive orientation was stronger than the unique and combined effect of optimism, self-esteem, and life satisfaction.

Apart from empowerment, self-efficacy has been found to play a contributing role in developing positive orientation (Caprara, 2009). In particular, a conceptual model has been formulated in which perceived efficacy in managing affect influences the perceived efficacy in managing interpersonal relationships (for example, with family members), and together, both contribute to positive orientation (Caprara & Steca, 2005, 2006ab). These results suggest that self-efficacy in dealing with affect and social relations significantly contributes in strengthening positive orientation (Caprara, 2009).

In positive orientation, self-esteem has been included along with optimism. In the present research, self-esteem has been taken as a separate variable from PLO. Also, PLO has already been differentiated from optimism. Hence, PLO has been presented as a construct similar in orientation, yet different from positive orientation or POS. Not much research has been done using the PLO (Agrawal et al., 1995) concept as yet. The results of the present study will provide insight into the role of the family and home environment, in the form of domestic harmony, as a determining predictor of PLO, thereby increasing the understanding of PLO. Furthermore, PLO has been clubbed with resilience, empowerment, and self-esteem under the overarching construct of positive life outcomes. The inter-relations between the four positive life outcomes will establish PLO as a positive psychology construct that will have applicability as a source of primary prevention.