Adversity to Advantage: A Review of the Potential Strengths Gained from Childhood Adversity
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Introduction

Childhood adversity is a common experience, affecting up to half of children in the United States (Green et al., 2009). Childhood adversity can include a wide variety of traumatic and stressful experiences, often contributing to a risk of psychopathology (Green et al., 2009, Kessler et al., 2018). Depressive symptoms are already common in adolescence, increasing from early adolescence onward, but childhood adversity is a psychological risk factor that could exacerbate this (Bartlett 2020). The more severe the childhood adversity before the age of 11, the greater the chance of developing depressive symptoms (St. Clair et al., 2015). A study by the World Health Organization further supports this idea, stating that 30% of mental health issues in children stems from childhood adversity (Kessler et al., 2018).

Overall, the literature on childhood adversity tends to focus on the negative consequences. After all, it has consistently been linked to substance use, mental disorders, suicide attempts, many chronic diseases (e.g. heart diseases, obesity, cancer, etc.), and even premature mortality (McLaughlin et al., 2014).

More recently, a new body of work has investigated whether such experiences confer strengths and/or advantages. Adapting effectively after experiencing an adversity is known as resilience, and in response to the experience of adversity, many children develop resilience-promoting factors that enable them to achieve resilience (Fritz et al., 2018). Resilience factors act as a moderator (Fergus and Zimmerman 2005) and/or positive mediator (Masten 2001) between childhood adversity and psychopathology. A systematic review on resilience-enhancing factors that mediate and/or moderate childhood adversity and psychopathology found a variety of resilience factors, including high mental flexibility, high cognitive reappraisal, and low rumination (Fritz et al., 2018). Furthermore, a positive family environment that included parental support, along with a supportive community that offered social support, were significant resilient-promoting factors (Fritz et al., 2018).

As a whole, however, literature on childhood adversity focuses far more on negative than positive outcomes. While these deficit perspectives are important in thoroughly understanding the struggles of childhood adversity in order to best assist the children, it is currently unbalanced with acknowledging the strengths these children can develop (Ellis et al., 2020). Children may feel disrespected or pitied when adults such as their teachers view them as “damaged goods,” pushing them towards a remedial path to “fix” their shortcomings rather than encouraging their growth (Ellis 2020). In order to truly help children overcome their struggles, it is necessary to remember potential positive outcomes as well as the negative. After all, if we only focus on the negative consequences following adversity, we do not have a full, comprehensive scientific understanding of adversity because the potential advantages that follow adversity are not being considered. Furthermore, it is important to encourage children as they navigate a difficult time, reassuring them that good may come out of it, and focusing primarily on negative effects of adversity can be counterproductive.

This literature review hopes to shed light on the strengths that can be gained due to childhood adversity by studying two common ones in depth: parental separation and bereavement. It will also examine anxiety, a common byproduct of both parental separation and bereavement, to see if advantages can be obtained from anxiety as well. By examining the
strengths, resilience factors, and advantages that can occur because of these adversities, this review hopes to present a fuller picture of how those struggling with childhood adversity can best be helped.

**Parental Separation**

**Background**

Parental separation is one of the most common childhood adversities and is continuing to escalate in the world today (Haimi and Lerner, 2016). In the United States alone, there are over a million divorces annually, with 60% of these involving children (Halligan et al., 2014). Furthermore, half of all first marriages end in divorce, with over a million children suffering the pain of watching their parents divorce every year (Haimi and Lerner, 2016). While the United States has the highest divorce rate, the issue of divorce is a global phenomena. Europe has also been experiencing a rise in divorce. From 1965 to 2011, there was a massive surge in divorce, with the divorce rate increasing by 150% (EUROSTAT, 2015). In the EU-28, 2015 Eurostat data recorded a million divorces/separations every year, with half involving kids. Thus, it is imperative that we examine how having separated parents impacts children’s development, seeing as children are increasingly being exposed to this unfortunate circumstance that they fear. When presented with 20 stressors, children chose parental separation as the worst, illustrating the dread they feel at the possibility of their parents separating and the pain they likely feel when it does occur (Davies et al., 2022). Studying the struggles, pathways to resilience, and advantages that can potentially result from parental separation may be beneficial for those working in education and social work to better acknowledge the strengths that can come from experiences typically viewed as negative.

**What are different circumstances involving parental separation, and how do children suffer from these scenarios?**

Parental separation can involve various unstable situations that contribute to stress for the children involved. The stressors accompanying parental separation for children, including children’s living arrangements and parent-child relationships, can lead to psychological and social struggles for young children in the long run (Wallerstein, 1991).

Children’s living arrangements are a significant factor in determining a child’s psychological health long-term. Parental separation can increase the likelihood of falling below the poverty line by almost twice as much (Seijö et al., 2016). In general, divorce and separation are known to lead to a decline in living standards (Lacey et al., 2014).

Parent-child relationships are also essential in determining a child’s psychological state following parental separation. In high conflict marriages, mothers tend to become colder, more rejecting, and more likely to utilize harsh discipline. Furthermore, fathers usually become withdrawn from their children (Verrocchio et al., 2015). This can be of significant detriment to the children, as the people who were supposed to provide support from them instead become distant and absorbed in their own conflicts. It only worsens if the parents begin fighting against each other and force their children to take sides. They may use their children to express anger at each other, ordering them to deliver hostile messages or banning them from speaking about the other parent (Baker and Fine, 2013). These behaviors are known as parental alienation, which is when parents attempt to push their child to reject the other parent, known as the “targeted” parent (Baker and Fine, 2013). Parents’ engagement in alienating behaviors is often associated with challenges in empathizing with, and understanding the viewpoints of, children.
This parenting is sometimes associated with the parenting style of low care and high overprotection. Although these parents can be cold, withdrawn, and rejecting, they can also be psychologically controlling and cross boundaries in order to do so (Baker, 2007). However, it is important to note that these may not be trait-level characteristics of parents who engage in these behaviors; they may be a result of the stressful conditions of separation. In a study of 470 Italian adults whose parents had divorced, 46% had experienced one parent trying to turn them against the other. The study found that divorced and separated parents were less effective in supervising their children and more emotionally detached from parenting (Verrochio et al., 2015). Again, it is important to knowledge that these may be traits developed as a result of the stressful situation surrounding the divorce. However, it may also be that parents who get divorced tend to be less effective, which is partially why they get a divorce in the first place.

For the rest of their lives, children may be affected by their parents’ divorce, regardless of how young they were when it occurred. This may contribute to issues for the children, including low autonomy, low cooperativeness, low self-esteem, depressive symptoms, and psychological distress in adulthood (Ben-Ami and Baker, 2012).

When their parents separate, children’s ability to focus on their education can deteriorate. Parental instability in early childhood is associated with weaker verbal ability, lack of concentration, and academic achievement problems (Davies et al., 2022). Though these findings may reveal certain potential situations of children with separated parents, it is also important to note that parental instability could be associated with other factors that could shape children’s early skills. For instance, genetic factors in the parents, such as a propensity for anxiety or depression, could have contributed to the separation as well as affecting children’s early skills because they may have inherited the genes for these mental health disorders that affect their ability to concentrate. Thus, while parental separation could result in children struggling with early skills, there could be other confounding variables involved, and more research must be done to have a conclusive answer. A study of 346 children in Spain found that children from separated families doubled the probability of poor academic performance. Additionally, these children doubled the probability of school failure: being forced to repeat a grade (Seijo et al., 2016). Furthermore, if a child comes from a separated family, the likelihood that they will engage in disruptive class behaviors doubles (Seijo et al., 2016). This may be because these children were found to have higher levels of hostility, being more likely to express aggression, anger, and fury (Seijo et al., 2016). As students participate more in disruptive class behaviors, they are less likely to be able to focus on their studies and more likely to struggle academically. They may also garner less support from their teachers as they test their teachers’ patience through these behaviors, lowering the chances that the teachers will be patient with them throughout this difficult time. This is further exacerbated by the students’ lack of self-control, exemplified by their increased social withdrawal, aggressive behavior, stubbornness, and disobedience (Seijo et al., 2016). Facilitating factors such as self-control are reduced and increased inhibitors such as social withdrawal are increased, thereby leading to social incompetence and a struggle to problem solve in managing social conflicts (Arce et al., 2010). Thus, children coping with the separation of their parents may struggle to succeed socially and form friendships, further leading to a lack of academic support, as peers are often able to assist each other in academics. Several studies have found that parental separation was linked with reduced educational attainment, providing a variety of possible reasons: lack of parental support, lack of support from schools, and the financial necessity of the students to work instead of pursuing their education (Lacey et al., 2014). Many confounding variables,
however, could be at play. For example, uneducated parents may struggle financially, which may be a factor in their separation. In turn, their children may have to work to support their family. In this case, the supposed link between reduced educational attainment and parental separation may in reality be a link between reduced educational attainment and economic hardship. On the other hand, a study of 196 children separated into three groups by age, found stronger evidence of this link, as parental separation was found to have a negative impact on a child’s school adjustment, which would worsen with age (Corras et al., 2017). Again there was support for the idea that financial instability and the parent-child relationship was a significant moderator (Corras et al., 2017). The issue is that school adjustment, which includes high academic achievement and a positive attitude to school, is a protective factor against violence, and school maladjustment is linked to a life-long maladjustment trajectory (Corras et al., 2017). After all, lower education attainment reduces the chances of obtaining higher-paying jobs, meaning children are more likely to be materially disadvantaged as adults (Schoon et al., 2004). This is associated with psychological distress. In fact, studies have found that parental separation and adult depression are partially mediated by education, occupational status, and economic hardship (Ross et al., 1999). Thus, education can be a significant challenge for those struggling with their parents’ separation and can ultimately lead to economic struggles and depression in adulthood.

In general, psychological issues that result from parental separation can be detrimental to a child’s life. When they are adults, children whose parents separated tend to report higher levels of depression and anxiety (Clark et al., 2010). That being said, it is necessary to point out the possibility that the parents passed down genetic propensity for depression and anxiety, which was a factor in both their divorce and their children’s outcomes. Thus, the children’s depression and anxiety may not be entirely due to the experience of parental separation itself but a result of this confounding variable. According to a study of 346 children from separated families, those whose parents are separated tend to have higher levels of depression, generalized anxiety, paranoid ideation, and psychoticism. Furthermore, their parents’ separation took a toll on their self concept, in terms of academic, emotional, and physical self-concept along with their sense of importance within their own family (Seijo et al., 2016). Consequently, these children may experience behavioral disorders and struggles with social adjustment. They may even convert these psychological problems to physical symptoms, as children from separated families have increased risk of developing gastrointestinal, genitourinary, dermatological, and neurological disorders (Martinon et al., 2017). One potential reason for the struggles in psychological adjustment is the increase in relative poverty, which then has a tendency to last throughout their lives (Seijo et al., 2016). As has been noted, struggles to adjust psychologically can be a detriment to the child’s education due to disruptive and antisocial behaviors, and a lack of education is likely to lead to lower paying jobs, thereby fueling the cycle. Another possibility of this psychological distress is the disruption of parent-child relationships at a young age, which can affect the children for the rest of their lives (Morgan et al., 2012). Moreover, children from separated families are more likely to experience their adult relationships ending, possibly because they witnessed fewer positive marital relationship interactions from their parents as children, only furthering the likelihood of psychological distress (Dronkers et al., 2008). Again there is a recurring cycle. Their psychological struggles and low self-esteem contribute to a pessimistic outlook regarding themselves and their future relationships, as they begin to think thoughts such as “you’re on your own in life” and “no one loves me, I’m like my father” (Cartwright, 2008). These negative thoughts can then lead to a
self-fulfilling prophecy where their relationships do fail and they take another hit to their self esteem. Unfortunately, the issues that arise as a result of parental separation can accumulate and lead to suicide, as there is a higher risk of suicide attempts in children from separated families (Haimi and Lerner, 2016). It is imperative that we examine the struggles these adolescents go through so that we can better understand how to assist them.

What are some resilience factors?

Fortunately, there are resilience factors that can contribute to a child adjusting to their parents’ separation, with positive parental relationships being one of them. After all, children tend to benefit from living with both parents after separation, as suggested by some studies (Hanson, 1999). Studies have demonstrated that traditional visiting arrangements are not ideal for children whose parents separated, as it is better for children when an attentive, caring father can be consistently involved in their lives, through either visiting arrangements or shared custody arrangements (Haimi and Lerner, 2016). However, this can only occur if the separated parents are willing to cooperate after the separation in order to provide children with access to both parents. Typically, when the parents are able to work together after the separation, children and adolescents had fewer behavioral problems and better relationships with their father (Scabini and Cigoli, 2008). While father involvement helps to minimize the negative effects of divorce on adolescents, only about 10-18% of fathers that are not the primary caretakers actually spend a significant amount of time with their children (Carlson, 2006). Generally speaking, parental bonding is considered an essential part of later healthy functioning in adulthood, as residing with competent parents is a protective factor that correlates with positive outcomes in children (Verrocchio et al., 2013). If parents are warm, emotionally supportive, and reasonable in their expectations, children are more likely to benefit in comparison to if parents are inattentive, less supportive, or overly harsh (Verrocchio et al., 2015). In a 2008 study of 158 Israeli young adults, reciprocal support between parent and child had the best results for positive long-term impact on the child. As they are able to clearly communicate their needs and insecurities, both the children and their parents become more aware of others’ needs. Consequently, the children developed maturity, self-confidence, responsibility, strength, and empathy for their parents’ situation. They were able to make peace with their parents’ divorce and have more confidence in their ability to handle future relationships (Sever et al., 2008). This increase in maturity and responsibility, along with support from their parents, could only improve the child’s ability to pursue their education, and education is a factor that can also help children cope with their parents’ separation (Lacey et al., 2014). If parents overprotect their children and engage in parental alienation behaviors, the adolescents are more likely to suffer from low self-esteem and more likely to experience psychological distress (Ben-Ami and Baker, 2012). A higher self-esteem could assist the child in overcoming their parents’ separation, so it would be wise for the parents to be communicative and cooperative with both their former partner and their children (Verrocchio et al., 2015). This could be assisted if the parents exercise parental psychological flexibility, which is when parents are open-minded about their child’s thoughts, beliefs, and feelings but are still effective parents (Burke and Moore, 2015). This consists of three factors: cognitive defusion, where desires, emotions, and thoughts are separated from the necessary actions; committed action, where the parents are willing to adapt and take action based on their moral values; and acceptance, where they can experience individual events without letting it change their course of action (Burke and Moore, 2015). There is a positive impact of parental psychological flexibility (Burke and Moore, 2015). One aspect that can help
with parental psychological flexibility is coparenting. Although this study involved married parents, it can still provide useful information about the benefits of coparenting in general. More research must be done to have a more conclusive answer. While anxiety and depression can undermine positive parenting, increasing the risk of psychological inflexibility, coparenting can be helpful (Yu and Xiao, 2021). In the case of anxiety, parents may begin to engage in “anxiety-enhancing” behaviors such as denial and rejection, key traits of psychological inflexibility (Ginsburg and Schlossberg, 2022). Depression can also have a negative effect on parenting, as parents ignore their child’s psychological needs and generally will not strive to develop a deep bond with their child (Yu and Xiao, 2021). This is where effective co-parenting becomes useful. If parents are able to co-parent successfully, the effect of anxiety on parental psychological inflexibility is reduced (Yu and Xiao, 2021). Effective co-parenting increases the chances of parents observing and encouraging their child’s positive behaviors, along with accepting the child’s psychological distress and thoughts (Yu and Xiao, 2021). Maternal coparenting is also a potential predictor of the father’s involvement, which has been shown to be beneficial for the children (Yu and Xiao, 2021). It is important to note that these co-parenting studies involved married couples, but parental cooperation is likely to help the child regardless of the parents are married. Ultimately, reduced conflict between separated parents mean they can spend more energy on their child’s psychological needs and are more likely to be accepting of the child’s need to spend time with both parents, both of which have been demonstrated to be beneficial for the children of separated parents. All in all, one key way parents can help alleviate the struggles of their children throughout and after the separation is simply by being good co-parents.

What are some unexpected advantages?

Parental separation is undoubtedly a tough challenge for young children to face. In spite of these struggles, however, many who have experienced parental separation grew to find advantages in their situation.

First of all, divorce could be beneficial for children if it allows them to escape a high-conflict household, as married parents with a tumultuous dynamic leads to a high-conflict household. Children are more likely to perform poorly academically and develop behavioral/psychological problems if they grow up in a high-conflict household because of the emotional turmoil involved (Amato et al., 2011). Removing adolescents from a home filled with emotionally draining conflict may permit them to flourish.

Surprisingly, parental separation is not necessarily a determining factor for whether children are eventually able to form and maintain relationships, contrary to what many may believe. In a study of University of Central Florida students, surveys and interviews were conducted to discover that parental divorce does not necessarily determine how a child’s relationships will turn out because those with divorced parents and those with non-divorced parents responded similarly when questioned about the frequency, duration, and attitudes involving their relationships (Mohi, 2014). The relationship between parental separation and the child’s relationships is seen more in the relationship between the parents rather than whether they are still together, as an amicable post-divorce relationship between the adolescent’s parents is correlated with longer relationships for the child. While children can become anxious regarding relationships and unsure of their ability to maintain one because of their parents’ separation, the result comes from their interpretation and experience of their parents divorce, according to a 2012 survey of 45 university students (Bernstein, 2012). The study found that
those who witnessed their parents' divorce possessed more sympathy (a potential supportive coping mechanism), enthusiasm (motivation encouraged by stressful experience of divorce), awe (more gratitude and appreciation towards relationships), and perspective taking. Some may actually experience appreciation and increased knowledge of relationships by observing their parents, increasing their confidence to succeed in their own relationships. Watching the dissolution of their parents' relationship likely led to a sense of gratitude for their own relationships, also providing them with an experience to learn from (Bernstein, 2012).

Several studies have supported the idea that children tend to learn from their parents' mistakes in their own relationships (Mohi, 2014). Studies have demonstrated that while children go through emotional pain as a result of their parents' separation, divorce could ultimately culminate in a healthy lifestyle for the children depending on family processes and functional family relationships (McGuinness, 2006). Some even have positive perspectives on these experiences. In a 2014 study of University of South Florida undergrads, 14% declared that they experienced positive emotions at the time of their parents' separation, noting that they learned from their parents' mistakes (Mohi, 2014). Furthermore, in a study of Israeli young adults, less than a quarter of those surveyed felt that there were more negative than positive effects of their parents' divorce. On the contrary, they believed that they were more aware of the complexities of marriage and had more realistic standards and desires for their own relationships (Sever et al., 2007). Thus, whether parental separation results in a strength or weakness depends on the child's perspective, as experiencing their parents' divorce can result in a more mature outlook towards the world. It is necessary to inform those who have suffered from parental separation that they can channel their experiences into positive growth, if only they choose to do so.

**Grief**

**Background**

Similarly to parental separation, the death of a parent is considered one of the most stressful life events an adolescent can experience (Harrison and Harrington, 2001). Unfortunately, the loss of a parent is a common event, as 4% of children and adolescents in Western countries experience the death of a parent (US Bureau of the Census, 1990). For every 20 children, one child experiences this loss before the age of 18 (US Bureau of the Census, 1990). Within in the United States alone, 2.5 million children suffer the loss of their parent before the age of 18 (US Bureau of the Census, 2001). Across the world, there were 143 million orphans in 93 countries in 2003 (UNAIDS, UNICEF, & USAID, 2005). Despite this, the literature tends to focus on adults after bereavement, and literature on child bereavement fails to account for the circumstances of death (Howell et al., 2015). This is detrimental to the ability to assist children in grappling with their parent’s passing because it overlooks the changes that come from grief that can make them feel out of control, such as financial, moving, social, etc. (Howell et al., 2015).

Bereavement is a complicated experience because of how many factors are involved, altering the way different people can experience it (Revet et al., 2020). Because the loss of a loved one is considered one of the most distressing events in a person’s life, a bereaved person reacts through a process of grief, in which they reconstruct their loss through passing stages. The most common theory is the 5 stages of grief: denial, anger, bargaining, depression, acceptance (Asgari et al., 2022). Grief is tricky for psychologists to understand because it is regarded as a normal process that everyone will have to experience, but there is a difference between normal grief and complicated grief (Revet et al., 2020).
While there have been advances in understanding of grief reactions in adults, research on children is lacking, though evidence suggests that similarly to adults, some bereaved children suffer from complicated or prolonged grief reaction (Melhem et al., 2011). Most children who lose a parent experience healthy adjustment, but for others, the loss of a parent at a young age puts individuals at risk for negative physical and mental health outcomes. After 1-2 years following the bereavement, an estimated 20% of children face depression or other mental health problems (Melhem et al., 2011). Various factors, such as religious training, life circumstances, cognitive development, emotional development, and relationships impact how the child understands and copes with death, and thus whether they adjust in a positive or negative manner (Stambrook & Parker, 1987). However, the lack of research overall on children and bereavement is an issue. Many children suffer as a result of complicated grief over the loss of a parent, but the literature does not focus enough on the varying situations that could contribute to complicated grief or the post-traumatic growth children can experience as a result of their parent’s death. This section hopes to observe the struggles a bereaved child may go through, along with the strengths they develop and the resilience factors that allow them to cope.

**Struggles**

Bereavement can be incredibly difficult because it involves losing a significant relationship, which is usually a key source of stability and meaning in people’s lives (Shear and Shair, 2005). Despite the distress that often ensues from the loss of a significant relationship, many individuals are successful in overcoming the pain that comes from loss without external intervention (Bonanno et al., 2011). It is, however, difficult to determine whether a grief reaction is normal or significantly distressing, as the definition of grief is theorized to vary due to culture, religion, or prior life experiences (Kaplow et al., 2012). Children in particular can experience a more complicated path, as children are theorized to re-grieve when they reach a different stage of development (Draper and Hancock, 2011). Thus, young children, especially those under the age of 7, would suffer greatly because they went through the grieving process a greater number of times (Draper and Hancock, 2011). This suffering is exacerbated by the fact that losing a loved one can be one of the most traumatic events a child can face (Ayyahh-Abdo, 2001). Literature on the subject has found that children often experience sadness, anxiousness, anger, and disconnect following their parent’s loss (Eppler, 2008).

In the case of children specifically, losing a parent could put them at significant risk, especially if they had a history of mental illness prior to the loss. Generally speaking, bereaved children are vulnerable, at risk for being impaired or struggling with psychopathology (Eppler, 2008). Most people experiencing bereavement are able to recover without professional help, but around 6-20% need grief interventions (Djelantik et al., 2020). Those who need interventions are often struggling with complicated grief, which is characterized by particularly high levels of distress and grief symptoms (Maciejewski et al., 2016). For some still, complicated grief remains a struggle no matter how much time has passed since bereavement (Melhem et al., 2011). Those who are struggling with complicated grief may feel angry about the loss, find the loss difficult to accept, long for their deceased loved one, or feel that life is meaningless without them (Melhem et al., 2011). Complicated grief can involve physical manifestations, such as high blood pressure, muscle cramps, appetite irregularities, weight loss, and insomnia (Godzik, 2021). Furthermore, many psychological issues, including PTSD, anxiety and depression, low self-esteem, low concentration, self-harm ideation, drug and alcohol use, aggression, and suicide

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ideation and attempts, also are all associated with complicated grief (Asgari et al., 2022). In terms of children specifically, complicated grief reactions and depressive symptoms are often found in youth who have suffered the loss of a family member or peer (Melhem et al., 2011). If the child lost a parent, they were more likely to develop depression and PTSD in the first year after death, even carrying on to the second year in some cases (Melhem et al., 2011). One study found that for 10% of bereaved children, the struggles of complicated grief continue even as time passes (Melhem et al., 2011). Although in a study, most were able to overcome their grief in a relatively timely manner, 30.8% of children demonstrated more gradual diminishing of grief symptoms, and 10.4% revealed remarkable prolonged grief manifestations nearly 3 years after their parent’s death (Melhem et al., 2011).

Prolonged grief reactions (PGR) significantly impact children’s ability to function post loss, so it is essential to understand why these reactions occur in order to best assist them during a difficult time (Melhem et al., 2011). In one study, a personal history of depression for the child tended to predict PGR, and adolescents with PGR tended to experience an increased incidence and onset of depression (Melhem et al., 2011). Among children who experience loss, having a high level of unknown control beliefs, meaning they do not know why stressful events occur, was associated with worse grief outcomes (Tein et al., 2006). Interestingly, the experience of loss can lead to children who have lost their parents have lower levels of internal control beliefs than their peers with parents (Haine et al., 2003; Haine et al., 2008). It is possible that parentally bereaved children are less likely to feel in control of their situations because their experience of losing their parents has made them doubt their ability to control aspects of their lives. After all, they could not prevent their parent’s death. In an attempt to regain this power, some children develop distorted cognitive beliefs, which often include unfairly blaming themselves for their parent’s loss (Cohen, Mannarino, & Deblinger, 2006). Another potential reason for complicated grief could be the manner of death, but there are conflicting accounts. Some argue complicated grief is predicted by a violent or sudden death (Brown et al., 2008), while others claim the type or cause of death is irrelevant in developing complicated grief (Brent, Melhem, Masten, Porta, & Payne, 2012). However, there is support for the idea that how close one is to the deceased and the quality of that relationship is a predictor of complicated grief (Mash, Fullerton, Shear, & Ursano, 2014; Melhem, Day, Day, et al., 2004). Specifically, the mental state of the deceased parent has an impact on the struggles children face post-death, as increased psychiatric disorders in parents tended to mean children were more at risk for psychological disorders, thereby increasing their likelihood of suffering after bereavement (Melhem et al., 2011). Typically, those who experienced more complicated grief reactions had a family history of bipolar disorder (Melhem et al., 2011). The deceased parent’s disorder could have been genetic, leading to the child’s struggle, but it is also possible the deceased parent’s mental disorders impacted their relationships with their children in a way that led to the child’s emotional turmoil later on. For example, death by suicide, unintentional injury, and sudden natural causes are linked with a past of personality disorders, alcohol and substance abuse, and bipolar disorder in the deceased parent (Melhem et al., 2011). Therefore, the child may have experienced difficulty coping with the parent’s behaviors as a result of their mental struggles along with the suddenness or traumatic nature of their deaths.

Generally speaking, a child’s family can impact the child’s reaction to bereavement in either a positive or negative manner. As has been noted, the death of a parent can be a time of intense pain and stress for children. While families might normally be a source of comfort during this time, families may be struggling themselves to grapple with the loss of their loved ones
(Eppler, 2008). Instead, children may express their emotions at school, even lashing out at their peers out of the anger that accompanies grief (Eppler, 2008). Of course, it is difficult for all family members to cope when dealing with loss, so it is understandable for family members to struggle with emotionally supporting their children. Nevertheless, it is important to be aware of how family members can affect the childrens’ grief. For example, parental depression is a significant risk factor for psychological disorders in the bereaved children (Luecken 2008). This may be because mentally struggling parents may find it difficult to be consistent, structured, and organized (Wolchik et al., 2008). If the surviving parent was inconsistent with discipline after bereavement, children’s mental health was negatively affected, potentially resulting in depression, anxiety, and behavior problems (Brown 2007). Thus, parents should be encouraged to take care of their own mental health in order to continue providing a stable environment for their children. However, it can be extremely difficult to do so, meaning these parents should also be reminded to be patient with themselves as they process their own loss. All in all, it is essential to closely examine the potential struggles children may face dealing with grief in order to best assist them in coping.

**Resilience Factors**

Fortunately, there is an increasing body of literature on the resilience factors that assist children in recovering from loss. Those who have focused on studying resilience in children have found that certain factors, including individual traits (communication skills, intelligence, internal locus of control, and positive self-concept), emotional connections with relatives (family cohesion), and external support systems (school), help children in stressful circumstances with resilience (Eppler, 2008). One study also included demographic variables when examining resilience, which includes age, gender, and education (Bonanno and Mancini 2008). However, there is currently limited information for resilience factors that assist bereaved children specifically, which is why it is necessary to examine this closer so that we can best help these adolescents through the grieving process.

Coping with bereavement starts on an individual level. After loss, a bereaved person processes the loss through stages; the most common theory is the 5 stages of grief—denial, anger, bargaining, depression, and acceptance (Asgari et al., 2022). Grief is adaptive and changes to best help bereaved individuals overcome the pain of their loss (Asgari et al., 2022). In terms of children specifically, developmental psychopathology states that adaptive functioning means children adjust well despite the challenges they face (Howell et al., 2015). Around only 10-15% of children and up to 40% in clinical samples cope with serious psychiatric problems following loss, suggesting that it is likely children are capable of healthily adjusting to their loss, and they should thus be encouraged to do so (Melhem et al., 2011; Dowdney, 2000). Behaviors children should be urged to avoid include avoidant coping and avoiding thoughts related to trauma since this tends to increase the risk of youth developing psychiatric symptoms post-adversity (Howell et al., 2015). Instead, grieving adolescents should be permitted to express their emotions, as this coping strategy is associated with positive outcomes in children overcoming adversity (Howell et al., 2015). After all, being able to confront their emotions head-on might assist bereaved children in reevaluating their goals and life plans, which further helps them adapt to these life changes (Asgari et al., 2022). Another key resilience factor is the child’s internal locus of control, which determines how in control the child feels of their life situations (Wolchik et al., 2008). One study found that internal locus of control is such an important resilience factor because it enables children to develop more successful coping
strategies as they seek to gain control (Haine 2003). Moreover, these children were less likely to be terrified of stressors they faced because they had more confidence in their ability to control situations (Haine 2003). Similarly, one study found that prolonged grief reactions are associated with dependency before the loss, whereas resilience is linked with an acceptance of death and belief in a fair universe before loss (Bonanno et al., 2002). Believing that one is independent and able to control their reactions to events, along with having faith in happy endings, tends to foster an optimistic attitude, thereby assisting children in overcoming their loss. Therefore, children should be strongly encouraged to both express their emotions and seek control over their situations to the extent they are able to. Although grieving adolescents can experience resilience post-loss individually, resilience in children tends to be based significantly on other people (Wright et al., 2013), specifically feeling as though they are supported (Betancourt et al., 2008; Schoenfelder et al., 2011) because a major resilience factor for children is support seeking (Wolchik et al., 2008).

One major way children seek this support is in their guardian. Consistently in grief literature revolving around children, the caregiver, typically the surviving parent, plays an essential role in the bereaved child’s life following the loss. A caregiver’s well-being is considered a significant predictor of the adolescent’s adjustment post-loss (Melhem et al., 2011). Complicated grief in both the surviving parent and child tended to be a significant predictor of incident depression in children up to 3 years post-death (Melhem et al., 2011). After all, children depend on a positive caretaking environment to process their loss (Howell et al., 2015). Specifically, children benefit from a surviving parent’s compassion, warmth, and communication catering to the child (Hung and Rabin, 2009). Another study corroborated this, discovering that resilient children typically scored higher on the caregiver’s qualities of warmth, mental health, and coping efficacy (Lin et al., 2004). Being able to remain positive and caring towards the child allows the parent to maintain a close relationship, which is considered beneficial for the child (Schoenfelder et al., 2011). Following a significant loss of a parent, children fear abandonment and desire dependability; a close relationship with the surviving parent helps alleviate these concerns (Schoenfelder et al., 2011). One potential reason for this sense of stability is the parent’s own internal locus of control. Parental internal locus of control tended to impact adolescent’s reactions to grief (Cipriano, 2019), possibly because a parent’s feeling they could control certain aspects of their situation could increase the child’s own internal locus of control by promoting the idea that people can act to improve their lives. Furthermore, a parent’s confidence may contribute to the child’s sense of safety and stability. Additionally, a parent who maintains a positive relationship with their child would be more likely to help their child maintain a connection with their deceased parent by discussing that parent or honoring them in other ways. This is considered one positive role the surviving parent can play in helping their child adjust to the loss (Haine, 2008). Parents can also assist their children by being engaged in their child’s mental services, as children do not typically request treatment, meaning it is often the parent that initiates getting them the help they need (Staudt 2007). A parent can remain engaged through behavior (showing up, participating, persevering), attitude (expecting positive results, remaining optimistic, and staying committed to the treatment), and participation engagement (offering viewpoints, asking questions) (Cipriano, 2019). All in all, parents should be encouraged to remain involved in their child’s life in a proactive, warm, and compassionate manner because it fosters stability for a child deprived of it after a significant tragedy.

Surprisingly, one study discovered that bereaved children benefited from seeking support from adults, but that they did not gain this support from their peers (Wolchik 2008). In stark
contrast, another study found that peer support assisted bereaved children in overcoming the pain of loss (Ringler and Hayden 2000). Another study supported this belief, finding that grieving adolescents gained positive support when meeting with other parentally bereaved children (Brewer and Sparkes 2011). These contradictory findings could simply be a result of differing circumstances and perspectives involving the people studied. Some children may have encountered more helpful adults when coping with grief, while others may have had more positive experiences with their own peers. More research is needed specifically on bereaved children for a more conclusive answer on how they best seek support.

A systematic review of bereaved adults, while not about children, can shed some light on potential resilience factors that assist bereaved children that can be enacted by groups focusing on grief support. The review found that significantly successful techniques include home support, follow up contracts, and remembering their loved ones (Asgari et al., 2022). More inconsistent results came from condolence letters, telephone calls, and physical activities (Asgari et al., 2022). This inconclusiveness could be due to a number of factors, such as a technique being carried out in different manners with the same group, resulting in contradictory results. Furthermore, several characteristics of a person, including physical, cognitive, behavioral, interpersonal, emotional, and spiritual, are impacted by bereavement, so it is necessary to consider all these factors when deciding what techniques are going to best help them (Balk et al., 2011). For example, a support group might have shown more positive results because it tackled the problem from both a psychological and psychosocial perspective, allowing people to vent their own feelings while also gaining social support from those around them (Asgari et al., 2022). On the other hand, therapy that followed a standard rather than catering to the group itself tended to be less effective (Asgari et al., 2022). Overall, more effective results can be gained from utilizing a holistic approach, thoroughly studying patients’ needs post-loss in order to best help them (Asgari et al., 2022). It is important to note that these findings were from adults, not children, considering the lack of literature on resilience factors that assist bereaved children specifically. However, it provides a starting point for understanding how humans best recover from grief. More research is needed on bereaved children’s resilience so that professionals, educators, parents, and others can better understand how to aid them through a tough time.

**Advantages**

These resilience factors can enable bereaved children to process their loss in more positively, occasionally even in an advantageous manner. As has been noted, many people who suffer loss are still able to function in everyday life and undergo positive experiences (Bonanno, 2004). In a study of 182 children and adolescents under the age of 18, the children were interviewed at three points in time after death. The study found that for over 50% of bereaved children, their grief manifestations undergo a relatively rapid resolution (Melhem et al., 2011). This was further supported in another study involving interviews, where 12 participants aged 9-13 who had recently lost a parent had to answer questions and write a short story detailing their experiences. Typically, they felt a variety of emotions, such as sadness, anger, fear, and joy- sometimes all at the same time (Eppler, 2008). Overall though, there was still a theme of happiness. One child said, “When I think about my dad I feel happy because I love my dad,” while another added, “I’m not sad because I know I’ll see him again” (Eppler, 2008). Several were able to recall fond memories before and after their parent passed, again suggesting a positive mindset when coping with bereavement is possible. Some claimed that they were still
doing work; in fact, some stated they were happy distracting themselves with other things (Eppler, 2008). It was also a common trend that children discuss their emotions with loved ones, including surviving parents, caretakers, extended family, friends, and teachers, further supporting the idea that external support is especially helpful in coping with grief. In general, the children in the study were not merely sad, but also joyous, kind, helpful, and most of all, normal. When asked how they perceived themselves, bereaved children in the study responded that they were capable of surviving and thriving during grief, requesting that others realize their resilience (Eppler, 2008). Thus, those close to children experiencing a loss should attempt to remain optimistic, as believing in the children’s strength might encourage them to believe it too. As they received support from their loved ones, bereaved children demonstrated their own ability to cope and grow after their parent’s death (Eppler, 2008). However, it is important to note that the sample size of the study was minimal, and further studies should focus more on the positive outcomes of bereavement in children specifically. One resilience factor for grief previously noted was internal locus of control, and children may be more inclined to believe they are able to have control over their lives if others believe in these positive outcomes first. After all, positive, encouraging support was another key factor in helping bereaved children overcome their pain.

Another idea brought up in bereavement literature is post-traumatic growth, in which reevaluating one’s viewpoints on the self and the world following trauma can lead to positive change (Tedeschi, 1996). The struggle afterward, not the event itself, is what fosters PTG (Tedeschi and Calhoun, 1995). Five domains of post-traumatic growth were identified: new opportunities, sympathizing with others, cherishing life, spiritual change, and personal strength (Calhoun and Tedeschi, 2006). In a systematic review of 9 databases, it was found that PTG can occur due to bereavement (Michael and Cooper, 2013). Since mainstream psychology tends to focus more on struggles after bereavement, this is an essential contribution to positive psychology (Michael and Cooper, 2013). Positive psychology is a rising movement in psychology that focuses on positive emotions, relationships, and engagement—especially following an adversity (Seligman and Martin, 2012). To be clear, there is a difference between resilience and post-traumatic growth. Resilience is when an individual resumes a healthy state of psychological function they were experiencing before the traumatic experience (Bonanno, 2004), whereas post-traumatic growth is when an individual surpasses their original psychological function before the traumatic experience (Tedeschi and McNally, 2011). When it comes to bereavement, resilience involves the loss being incorporated into prior views before the loss, while post-traumatic growth involves the beliefs being altered together to fit these new life experiences (Joseph and Linley, 2005). However, it is important to note that most PTG research has not used non-trauma comparison groups, so it is difficult to determine whether growth was post-traumatic growth or non-traumatic maturational growth (Michael and Cooper, 2013). Furthermore, there is currently not enough literature studying the connection between PTG and grief (Michael and Cooper, 2013). This is especially true for children, as PTG has not been thoroughly studied in bereaved children (Michael and Cooper, 2013). However, research on this has been increasing, suggesting that children can experience positive outcomes due to their loss (Brewer & Sparkes, 2011). Several studies have observed positive outcomes in bereaved adolescents, such as an increased appreciation for life, altruistic and empathetic behaviors, spiritual growth, and increased maturity, suggesting that the PTG outcomes described originally for adults can appear in youth as well (Brewer and Sparkes, 2011). In a study of children who were affected by parental cancer, interviews were conducted with these children as adults, with
44% of participants declaring they experienced post-traumatic growth, a greater appreciation for life, stronger relationships with others, and potential new paths in life (Wong, Cavanaugh, MacLeamy, Sojourner-Nelson, and Koopman, 2009). Interestingly enough, even some of those whose parents survived reported experiencing PTG, implying that the threat of a parent dying could potentially be enough to lead to PTG. As previously noted, parents play a vital role in children’s adjustment to grief, and PTG is no exception. In an article describing the current knowledge on how children cope with a parent’s passing, parental support for bereaved adolescents was found to have a significant correlation with many aspects of PTG, including relating to others, new possibilities, and personal strength (Wolchik et al., 2008). A possible theory presented by the paper is that children desire support from other adults after the loss of a parent, which can be a factor in their resilience (Wolchik et al., 2008).

In general, adults, not children, have been the primary focus in research on PTG and bereavement. Research on PTG in adults following bereavement, however, could still be an indicator of how children could potentially experience PTG after loss, meaning this background knowledge could be useful as researchers continue to study resilience in children. Post-traumatic growth in adults can manifest itself in several ways, including improvements in interpersonal relationships, new views on personal strengths and life, and positive changes in career (Yilmaz and Zara, 2016). This was demonstrated in a study of 15 caregivers who lost a loved one to HIV and AIDS, where themes of both struggle - including psychological distress and existential issues - and PTG - including personal growth, humor, spirituality, and social support - were prevalent (Cadell, 2007). If bereaved individuals are open to the idea, they are capable of finding beauty in their pain and grow from the painful experience (Neimeyer et al., 2018). In a systematic review of 15 studies involving bereavement, all found that bereaved individuals saw their loss of a loved one as a major reason for positive growth in self-concept (Michael and Cooper, 2013). Interestingly enough, a study of 146 bereaved individuals found that those who lost a first degree relative tended to report higher levels of growth, suggesting that more severe of a loss leaves more room for growth (Armstrong and Shakespeare-Finch, 2011). Studies on bereaved parents support this idea, as parents who experienced higher levels of grief were found to also report higher levels of growth (Buchi et al., 2007). Another study surveyed 132 individuals who had lost either a first degree relative or a romantic partner, discovering that there was a positive relationship between levels of grief intensity and levels of post-traumatic growth, and a significant amount of distress and/or trauma is a contributing factor to PTG (Yilmaz and Zara, 2016). Traumatic qualities of loss involve the loss being a surprise, involving violence, or permanently altering the way a bereaved individual perceives themselves and the world (Yilmaz and Zara, 2016). Because the loss was traumatic, grieving individuals tended to ruminate more about the loss, and perceiving the loss as traumatic might lead to intentional rumination that propels the process of creating meaning out of suffering (Yilmaz and Zara, 2016). This growth and meaning is generally reflected in three categories: individual growth, altered relationships, and a newfound perspective on life (Tedeschi and Calhoun, 1995). When it comes to individual growth, bereaved individuals have been found to gain confidence post-loss, viewing themselves as strong, capable, and competent (Tedeschi and Calhoun, 1995). People may see themselves as more resilient because they were able to overcome a significant obstacle- in this case loss- and thus can persevere through anything (Aldwin et al., 1994). For example, widows were found to feel a sense of increased independence and self-confidence after coping with a situation where they were forced to struggle (Calhoun and Tedeschi 1989-1990). Similarly, post-traumatic growth due to bereavement was found to lead to
improved relationships with others, as bereaved individuals were better able to empathize and form deeper connections with others (Tedeschi and Calhoun 1995). One example is familial relationships; a loss in the family was found to result in closer relationships with family members (Lehman et al., 1993). As theorized by some psychologists, this increased empathy may lead to greater compassion for those who struggle, leading to altruistic behavior (Wuthnow, 1991). Overall, post-traumatic growth following bereavement can be summarized with individuals’ new perspective on life: a feeling of needing to live life to the fullest and seek out positive experiences and emotions because life is short (Tedeschi and Calhoun, 1995). While this research was not specifically focusing on children, post-traumatic growth has been found in all ages (Tedeschi et al., 1998), and PTG can be found in different circumstances, including the loss of a parent (Tedeschi and Calhoun, 1995), suggesting that these trends found in adults experiencing post-traumatic growth following bereavement could potentially be found in children who have lost a parent as well. More research needs to be done to have a conclusive answer.

Although the positive psychology movement has made significant contributions to our understanding of strength-based psychology (Schoultz et al., 2012), it is necessary to acknowledge that just because post-traumatic growth occurs post-grief does not mean bereavement is a positive event (Salloum et al., 2019). After all, everyone experiences grief differently. Even two siblings were found to have different reactions to losing their father (Worden, 2018). Thus, positive experiences following grief cannot be generalized to all those experiencing a loss. For instance, while some became closer to others after a loss, others experienced the decline or destruction of social bonds (Lehman et al., 1993). Some theorize that post-traumatic growth might in reality be a result of positivity bias, a cognitive defense mechanism people use to help them cope with bereavement by convincing themselves positives came out of the loss (Mancini, 2015). However, this can be dangerous because focusing on positivity can ignore the pain of trauma (Wortman, 2004). According to a study of 132 bereaved individuals who lost a first degree relative or romantic partner, growth was not an instant result of trauma, as bereaved individuals needed to cope with their trauma in an effective manner first (Yilmaz and Zara, 2016). Since the trauma accompanying grief can drastically reshape a bereaved individual’s outlook on the world, the process of psychological growth involves cognitive restructuring where cognitive schemas alter to match a new reality (Yilmaz and Zara, 2016). Part of the growth in this process requires working through the pain and distress that follows bereavement (Yilmaz and Zara, 2016). This cannot be accomplished if people see bereavement as an experience that only leads to post-traumatic growth without acknowledging the obstacles that bereaved individuals face. Instead, post-traumatic growth following bereavement should be seen as a potential positive outcome that occurs when bereaved individuals are able to healthily process their emotional struggles.

Anxiety

Background

Anxiety disorders are an especially common challenge facing the population, affecting around 20% of adults every year (Munir and Takov 2022). In 2015, the World Health Organization reported that anxiety disorders rank sixth among all mental and somatic illnesses in the world. With the advent of the COVID-19 pandemic, anxiety only became a more prevalent condition; adults were 3 times more likely to have anxiety in 2020 than a year prior (Twenge and
Joiner 2020). Generally speaking, the pandemic resulted in an increase in anxiety and a reduction in happiness. (Forte et al., 2020) Anxiety is especially common in children, as one in four children between the ages of 13 and 18 suffer from anxiety (Munir and Takov 2022). Throughout the past 24 years, anxiety has increased, particularly amongst adolescents and young adults (Philips and Yu 2021). While anxiety typically begins in adolescence or early adulthood, patients are more likely to develop other mental illnesses (such as depression or substance-related disorders) or somatic diseases (such as cardiovascular diseases or cancer) later on in life (Strohle et al., 2018).

Anxiety disorders are prevalent in society, but they are particularly present in those who have suffered from adverse childhood experiences, known as ACEs, which include parental separation and loss of a parent. One study found that those with multiple ACEs were twice as likely to develop an anxiety disorder as those who had no ACEs (Poole et al., 2017). In a study of college students, those with two or more ACEs were more likely to develop worsening anxiety throughout the semester (Karatekin, 2018). In general, ACEs are linked with mental disorders that include anxiety (Poole et al., 2017). Thus, to assist many who have experienced childhood adversity, it is imperative to examine a common challenge they face - anxiety - along with the struggle they may face and the advantages they may harness.

**What is anxiety and where does it come from?**

An anxiety disorder can be a challenge to recognize, as worry is a common feeling experienced by everyone at some point in their lives. Worry is when one “chews on a problem” and is linked to a number of anxiety disorders (Ahmad Dar et al., 2017). The difference between general worry and generalized anxiety disorder is that the latter encompasses excessive anxiety and worry for at least six months, with this worry being immensely difficult to control, as the Diagnostic and Statistical Manual of Mental Disorders describes. The DSM-5 further describes common symptoms of anxiety, listing restlessness, becoming easily exhausted, difficulty concentrating, irritability, muscle tension, sleep disturbances, and significant distress/impairment in social and occupational areas (Munir and Takov, 2022). Other anxiety disorders include panic disorder, characterized by a short period of intense fear and a feeling of impending doom, usually accompanied by physical symptoms such as chest pain, dizziness, and shortness of breath. Agoraphobia, the fear of being in a place from which escape is difficult to impossible, is another example. There is also social phobia, in which people experience anxiety in social situations. Obsessive Compulsive Disorder, another common anxiety disorder, involves repeated behaviors (known as compulsions) to lower anxiety due to disruptive, undesirable thoughts (obsessions). These behaviors can include repeatedly cleaning things, repeatedly checking the stove, repeatedly checking work, etc. (Adwas et al., 2019).

Disorders usually develop for a reason, and anxiety is no exception. A common reason for the development of an anxiety disorder is, as would be expected, stress (Munir and Takov, 2022). Other predictors of anxiety disorders include physical conditions, such as diabetes, or other comorbidities, such as depression (Munir and Takov, 2022). A main cause of anxiety disorders, however, is genetics. First degree relatives of patients with panic disorder were 3-5 times more likely to then develop the disorder. Genetics are predicted to contribute to 30-67% of the development of an anxiety disorder, with the remainder involving negative environmental factors, such as various childhood adversities. This can include abuse and neglect, parental separation, financial struggles, and deaths of significant others (Klauke, 2010). Thus, it is
pertinent to examine anxiety as not only a childhood adversity in its own right but a result of other common childhood adversities.

How may those with anxiety struggle?

There are a number of struggles that those with anxiety face. One expected challenge resulting from anxiety is the decline in happiness, as there is a negative correlation between stress, a correlate of anxiety, and happiness (Cohen-Louck and Levy, 2022). This may be related to why the comorbidity of generalized anxiety disorder and depression is significant; the two are often found together in individuals (Munir and Takov, 2022). Additionally, those with anxiety are more sensitive to common occurrences that occur in everyday life. For example, public humiliation and teasing, usually considered normal social practices, may precipitate or exacerbate symptoms of social anxiety disorder in those who have it, contributing to their decline in confidence in social situations (Carleton et al., 2011). Furthermore, the stress of everyday life tended to increase over-confidence in those with lower anxiety while reducing self-confidence in those with higher anxiety (Goette et al., 2015). This sensitivity to life events may lead to physical symptoms of anxiety, including shortness of breath, palpitations, fatigability, headaches, dizziness, and restlessness. Psychological struggles- intense, non-specific worry, emotional lability, difficulty concentrating, and insomnia- are another common issue (Munir and Takov, 2022). These symptoms may result in greater issues with patients’ abilities to live their lives; common complications include drug/alcohol misuse, GI problems, social isolation, issues functioning at work or school, impaired quality of life, and suicide potential. Anxiety disorders are underdiagnosed and undertreated, which further contributes to these challenges (Munir and Takov, 2022). Thus, it is crucial for us to examine anxiety disorders to better understand how we can assist those who suffer from them, especially children and adolescents who are at high risk for developing anxiety.

What factors contribute to resilience?

A number of factors may assist those with anxiety in overcoming their obstacles. It is necessary to identify the resilience factors that act as a pathway from struggle to success in order to aid patients in need. Two main treatments are recommended by medical professionals and are considered to be highly effective: cognitive behavioral therapy and medication. Cognitive behavioral therapy consists of psychoeducation, altering maladaptive thought patterns, and gradual exposure to situations that may trigger anxiety. Medication consists of drugs such as antidepressants, which are particularly successful in treating anxiety as it has been shown to be 81% effective in children (Munir and Takov, 2022). However, therapy and medication are not easily obtainable by the general public due to factors such as cost. Therefore, it is necessary to inform people of other methods to manage their anxiety.

One easily implementable strategy to reduce anxiety is humor. Studies have shown that those with a greater sense of humor showed less anxiety and stress in comparison to those with a lower sense of humor. Humor has been shown to reduce both non-clinical and clinical anxiety (Dionigi et al., 2021). Humor is considered an effective coping method, likely because it is associated with a change in perspective, which can help to overcome stressful situations. One study analyzed specific types of humor and the roles they play in reducing or exacerbating symptoms of anxiety. Affiliative humor, using humor in a social context to form social bonds, was shown to reduce anxiety. Self-enhancing humor, using humor as a coping mechanism for managing life stressors, was also associated with reducing anxiety. On the other hand,
self-defeating humor was shown to be associated with higher levels of anxiety. In general, however, humor was typically observed to lower anxiety levels, as those who experienced worry and then were exposed to humor tended to have an increase in positive emotions and a decrease in negative emotions. Furthermore, people who had a greater sense of humor experienced less intolerance of uncertainty, a quality associated with anxiety. Humor can assist one in raising their self-esteem and developing a strong social network, two factors that tend to contribute to a decrease in anxiety (Dionigi et al., 2021).

Music is another common device utilized to cope with anxiety. Studies have shown that listening to music tends to decreasing anxiety, with the most effective results occurring when one starts off by listening to music that represents their mood and slowly progressing it to where they desire their mood to be (Heiderscheit and Madson, 2015). In a study analyzing the effects of music on anxiety, music was shown to significantly reduce anxiety in comparison to pink noise. In particular, music with a slow tempo tends to be associated with lower body temperature, muscle tension, respiration rate, heart rate, and sweat production, which are all traits associated with anxiety (Mallik and Russo, 2022).

Additionally, environmental factors can play a major role in assisting those with anxiety. Environmental factors can start with something as simple as sunlight; a study examining 444 employees found sunlight contributed to reduced anxiety (An et al., 2016). Simply limiting one’s intake of tobacco, alcohol, and caffeinated beverages could be helpful, as they have all been linked with increased anxiety (Munir and Takov, 2022). Furthermore, healthy habits such as consistent physical exercise can be a protective factor against anxiety, as demonstrated by a study analyzing adolescents during the COVID-19 pandemic. The study also discovered the importance of consistent companionship; teenagers lacking socialization were more likely to be anxious (Chen et al., 2020). Prevention programs, such as the Cool Little Kids program or the Friends program, aimed to prevent these anxiety disorders from developing later on in teenagers by targeting high-risk groups during the critical window of childhood and adolescence (Strohle et al., 2018).

Finally, emotional coping strategies that reshaped the way people thought tended to be useful in overcoming anxiety’s challenges. A study examining different coping methods found that problem-focused coping, in which one identifies the stressor and figures out how to manipulate the situation, was found to increase self-confidence and reduce anxiety and stress. Conversely, emotion-focused coping tried to reduce emotional distresses associated with stressful situations. In situations where one could not control their surroundings or the solutions presented were limited, emotion-focused coping proved more effective (Cohen-Louck and Levy, 2023). These situations could include performances, where not much can be done about performance anxiety except emotional coping. In a study analyzing orchestral musicians’ coping mechanisms for performance anxiety, the tactic of trying to control the situation was ineffective for decreasing worry. Musicians who felt resigned or tended to ruminate struggled more with battling their anxiousness, as it occasionally worsened their anxiety. Additionally, socially prescribed perfectionism and self-oriented perfectionism positively correlated with performance anxiety. On the contrary, age and experience alleviated performance anxiety, with the exception of musicians with a lack of confidence. Fortunately, there were effective methods for dealing with this lack of confidence by increasing self-efficacy through behaviors such as coping minimization/denial of guilt (e.g. minimization, denial of guilt, distraction) and pleasant anticipation (Langendorfer et al., 2006). Throughout various scenarios involving anxiety, self-confidence was demonstrated to be a significant factor in helping anxious people cope.
When professional athletes were in stressful competitive situations, self-confidence assisted them in overcoming their adversity. Thus, it is essential to get to the root of the problem and assist children in developing their self-esteem from a young age so that they are able to manage their anxiety as adults.

**What are some unexpected benefits that may result from anxiety?**

While the literature tends to be focused on the difficulties those with anxiety face, there are surprising advantages as well. Firstly, creativity was shown in several instances to be higher in those who had anxiety. In a study of 60 male undergraduate students, the higher creative group displayed more signs of anxiety in the MCT than the lower creative group. High creativity was associated with not only higher trait anxiety but also a greater use of defense mechanisms and more signs of projection and sensitivity. This may seem surprising, but creativity is strongly associated with more cognitive flexibility and more subjective feeling, which can thus lead to less rationality and increased worries. Even more shocking is that the same cognitive flexibility associated with greater anxiety can also contribute to a reduction in depression, as seen by the higher levels of depression in the low creative group (Carlsson, 2010). However, it is important to acknowledge that anxiety and depression are often found together, and this study may have been an exception rather than the trend. It still holds true that there are potential upsides to suffering from anxiety, which may assist young children in coping knowing that one day it could play to their strengths just like these undergraduate students.

Creativity often translates into performance and productivity, illustrated especially clearly in performance artists. Performance anxiety is incredibly common in musicians, with 25-50% of musicians in professional orchestras suffering from it (Langendorfer et al., 2006). In general, performing artists are more vulnerable to psychopathology, as musicians, actors, and dancers all displayed high rates of anxiety. Similarly to the undergraduate students studied, increased anxiety was associated with these creative people (Thomson and Jaque, 2018). One study examined childhood adversity and how it impacted adult professional performing artists. The group that experienced the highest amount of childhood adversity had higher negative psychological factors like trait anxiety. They were also more fantasy prone, a trait that tended to both increase anxiety and creativity, demonstrating again how the two qualities are linked. The cognitive flexibility associated with creativity contributes to a resilience that enables these artists to transform their experiences into their work, suggesting that greater anxiety, if harnessed correctly, can result in the same. While the performers in the highest childhood adversity category had higher trait anxiety, they also were able to lose themselves in their work, experiencing emotional intensity far greater than those who were less anxious. They valued creativity to a significantly greater degree because they understood how it helped them cope with their adversities (Thomson and Jaque, 2018). Children suffering through anxiety can be reassured that perhaps that same struggle will result in transformative art, just like it has for so many performance artists.

Increased anxiety translates to not only performance in the arts but also in everyday life as adults navigate education and work. In a study of 696 Italian university students, those who had test anxiety tended to have higher levels of worry, but at the same time, they also had higher levels of perseverance and diligence, ultimately resulting in a higher grade (Heckel et al., 2021). It is important to note, however, that this held true when the participants’ lack of confidence was low, reiterating the importance of confidence in moderating anxiety in order for it to be properly utilized (Heckel et al., 2021). Generally speaking, a more optimistic mindset tends
to result in a more positive outcome when a person has anxiety. Throughout the days leading up to an exam, 103 undergraduate students completed a daily self-report of anxiety, emotional exhaustion, and stress, revealing that stressful times can be a motivation to achieve. However, this motivation was induced when those with anxiety viewed anxiety as being facilitative, as this encouraged them to challenge stress appraisals and see a stressor as less of a threat. Viewing anxiety as a tool rather than a weapon resulted in both a decrease in emotional exhaustion and an increase in academic performance, exemplifying the advantages anxiety can bring so long as those who have it understand how to wield it (Strack and Esteves, 2015). As these students enter the workforce, worrying again is positively correlated with job performance (Perkins and Corr, 2005). Thus, it is imperative to teach young children suffering from anxiety that it is entirely possible for it to be a benefit, as long as they possess confidence in themselves and learn to treat it as a potential strength.

**Conclusion**

After examining several childhood adversities in depth, it is clear that the literature generally focuses on the difficulties children face as a result of the challenges they face. However, there is also significant literature studying the resilience factors that assist children in coping with their struggles. In stark contrast, there is far less research on whether children who have faced childhood adversity gain advantages from their situations. Thus, it may be possible for children to develop strengths due to the struggles they face, but it cannot be definitively concluded.

Throughout all adversities, several recurring themes occurred in terms of struggles, with the main one involving issues adjusting psychologically. With parental separation, children struggled to adjust to new living situations and parental conflict, resulting in psychological issues such as low self-esteem, depression, and anxiety. Similarly, parental bereavement often led to similar effects, as those experiencing complicated grief are at greater risk for psychopathology, which includes greater risk of low-self-esteem, depression, and anxiety. Anxiety itself, which was studied due to its frequent appearance in struggles associated with childhood adversity, came with its own set of difficulties, such as intense worry, sensitivity in social situations that can end in social isolation, and physical symptoms. It is important to note the genetic factors that play into the challenges associated with parental separation and parental bereavement. In terms of parental separation, parents who suffer from mental illness may be more likely to separate from their partners and then pass on this trait to their children, explaining why children with separated parents may appear to have higher levels of depression and anxiety. With parental bereavement, parents who succumb to illnesses involving drugs or suicide are likely to have suffered from psychopathology in their lifetimes and may also have passed down the genes making their children more vulnerable to psychopathology. In both cases, the obstacles presented were not a direct result of the adversity itself; rather, the cause of the adversity was the reason for the obstacle.

Fortunately, children are able to cope with these adversities through resilience factors, which are factors that contribute to children’s adaptation. The most common trend throughout both parental separation and parental bereavement is that parenting can be a significant factor in helping children deal with their challenges. In the case of parental separation, children benefited from having positive relationships with both parents despite the separation. Similarly, support from the surviving parent was extremely impactful in providing stability for bereaved
children. With anxiety, a common struggle for children dealing with parental separation or parental bereavement, therapy, humor, music, and emotional coping strategies were all helpful.

Due to these resilience factors, children can experience resilience and even advantages following the adversities they face. Among those whose parents separated when they were young, some reported feeling as though they were able to learn from their parents' mistakes in their own relationships. Similar lessons were learned from parental bereavement, where children could experience post-traumatic growth, where they grew from the person they were before the loss. These children experienced stronger relationships with others, a newfound appreciation for life, increased maturity, and more empathetic, altruistic behaviors. Anxiety, a common struggle for those coping with parental separation and parental bereavement, was associated with increased creativity and productivity. In particular, creativity was found to be a potential outcome to childhood adversities, as performing artists who struggled with childhood adversity tended to find a greater appreciation for their art.

Despite positive gains made in research involving childhood adversity and the potential advantages children can gain as a result, more research must still be done. Many of the studies referenced used a limited sample size, which may not provide an accurate reflection of the total population due to other confounding variables that might be at play. Childhood adversity can involve many factors, including familial relationships, living conditions, social bonds, and genetics. A limited sample size means these variables will have a more significant effect in comparison to a larger sample size where the effects of confounding variables will tend to be minimized due to the diversity of the sample. Thus, more studies should be conducted using large, diverse samples in order to more definitively come to a conclusion as to whether children can develop strengths from adversity.

**Final Thoughts**

Generally speaking, it is difficult to conclude whether children generally develop strengths due to their adversity or whether it is a rarity. The literature typically focuses more on the struggles children face because of childhood adversity, meaning there is a limited amount of studies that can be used to come to a conclusion. Additionally, it is entirely possible that the growth children experience as a result of childhood adversity is in actuality maturational growth that occurs with age. Other factors also could have contributed to advantages children seemed to gain, again meaning more research needs to be done, preferably with larger and more diverse sample sizes. Larger and more diverse sample sizes could help to minimize the effect that various other factors could have on the outcome.

Throughout this paper, a recurring theme was that social support is crucial in supporting positive outcomes in children following adversity. Being able to inform children of the potential advantages they could gain as a result of their challenges could help provide this support they need. The paper does not intend to argue that childhood adversity is a positive event. Rather, examining the positives in order to balance out the negatives allows children, along with those who wish to assist them, to have a fuller picture of how they can best overcome these obstacles. In the midst of a difficult time, these children deserve to be reminded of all they are capable of.
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