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Raising Flourishing Adults: How Positive Psychology Can Help Adolescents Rise Above Stressful Life Events to Lead Flourishing Adult Lives

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Abstract

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Keywords

adolescence, adversity, development, stress response, plasticity, psychopathology, positive psychology, stressful life events, positive parenting, neurodevelopment

Disciplines

Child Psychology | Curriculum and Instruction | Developmental Psychology | Family, Life Course, and Society

**Raising Flourishing Adults: How Positive Psychology Can Help Adolescents Rise Above
Stressful Life Events to Lead Flourishing Adult Lives**

Devon J. Still

Master of Applied Positive Psychology Program, University of Pennsylvania

MAPP 800: Capstone Project

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August 1, 2022

Abstract

Adolescence is a time of dramatic change and growth across multiple systems. Simultaneous development of neural, biological, and social domains of functioning renders adolescence a heightened period of sensitivity to early life experiences. Among these experiences, stressful life events are shown to disrupt the architecture of the developing brain, increasing the risk of future mental health disorders, such as depression and anxiety. In this paper, I discuss the risk of adolescence, such as the vulnerabilities to stress, alongside the unique plasticity that creates an opportunity for positive external influences (e.g., family milieu). Finally, I propose a multidimensional construct, known as RISE, for adolescent flourishing borrowing from other validated positive psychology concepts. A workshop and specific interventions to improve each of the four elements of RISE are proposed that can be used by parents.

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Adolescence, Adversity, Development, Stress Response, Plasticity, Psychopathology, Positive Psychology, Stressful Life Events, Positive Parenting, Neurodevelopment

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Preface

I was eight years old when I watched my parents go through an ugly divorce. Two years later, I found myself sitting in a jail cell after spiraling out of control. As a child raised in poverty, my family lacked access to many resources. Throughout my entire childhood I was exposed to drugs and violence. Before the age of seventeen, I had attended three funerals of friends that lost their lives to gun violence. When I was eighteen, I witnessed a shooting that resulted in the tragic loss of a teenager's life. By the time I was nineteen, I had been through three major sports related surgeries. Given the early life stressors I experienced, it would have been implausible to predict that I would someday become a productive member of society, a first-generation college graduate, and a dedicated father and husband who would earn an Ivy League master's degree and become a top NFL draft pick.

My life story, as well as other individuals who faced early physical, environmental, and emotional hardships, demonstrates that some people do rise above stressful life events to lead flourishing lives. However, many individuals who experience similar early life stressors struggle to successfully transition into adulthood, often experiencing various psychological disorders—including depression (Saleh et al., 2016), anxiety (Kim, 2020), and substance abuse (Enoch, 2010). For years, I have been on a search to discover what determines whether individuals flourish or languish after encountering stressful life events. What circumstances or traits enable individuals to rise above challenges in a manner that protects health and well-being? A combination of practical and theoretical knowledge has led me to believe the answer lies within four critical elements of positive psychology: resilience, intelligence, strengths, and executive functioning. The work presented in this capstone will combine these four concepts to create the RISE model. The aim of the RISE model is to provide interventions that protect adolescents from the adverse outcomes associated with stressful life events. Although the RISE model provides

interventions at the individual, family, and community levels, this capstone will focus on the family level, specifically parenting.

My hope is that one day the RISE model will be taught in households and institutions worldwide, providing children and adolescents with the tools to navigate stressful life events successfully; so one day they can look back at their lives and proclaim the famous words of the late Maya Angelou, “Still, I rise!”

Part I: The Challenge

Introduction

Raising morally competent children who one day lead flourishing lives as adults is the goal of all parents and society (Park & Peterson, 2006). According to Keyes (2002), individuals flourish when they have both the absence of mental illness and the presence of mental health. The 1999 Surgeon General's report on mental health defined mental illness as "health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning." In contrast, mental health was defined as "the state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and cope with adversity" (U.S. Department of Health and Human Services, 1999, pp. 4-5). Despite the goal mentioned above, a 2021 mental health poll revealed that only forty-four percent of Americans over the age of eighteen are flourishing, while twenty-one percent are languishing, that is, suffering from a mental illness, such as anxiety or depression (Independent Polling System of Society, 2021). It can be reasonably assumed that the 2019 global pandemic is a major explanation for the current prevalence of mental illness in adults. However, studies show that mental illness impacted millions of Americans pre-pandemic. For instance, in 2017, 46.6 million adults in the U.S. had a mental illness (Egede et al., 2021). According to Knopf et al. (2008), half of all mental health problems in adulthood begin in adolescence.

Adolescence is the developmental period of life between childhood and adulthood, from ages ten to nineteen (World Health Organization, 2019). Second only to infancy, adolescence is characterized as one of the most critical, dynamic, and influential periods of human development (Viner et al., 2015). The challenges individuals experience during this phase are extensive, covering biological, psychological, social, and behavioral domains of functioning. During this

phase, adolescents experience a multitude of stressors that vary in frequency, intensity, duration, and meaning. Stressors are defined as “demands made by the internal or external environment that upset balance, thus influencing physical and psychological well-being and require actions to restore balance” (Lazarus, 1966, p. 19). Commonly noted stressors in adolescence include physical growth and sexual maturation linked to puberty, academic demands, maintaining friendships and romantic relationships, career decisions, and increased responsibility and independence from family (Krapić et al., 2015). Over the same interval, some adolescents experience more unique stressors such as mental or physical illness, divorce, addiction, neglect, parental bereavement, poverty, and various forms of abuse (Krapić et al., 2015). Consequently, adolescence is also characterized as one of the most stressful periods in human development (Casey et al., 2010).

Defining Stress

According to The American Institute of Stress, the term stress is a highly subjective phenomenon that defies definition (Marksberry, 2017). Nonetheless, researchers have defined stress in various ways, including “a state of disharmony, or threatened homeostasis” (Chrousos, 1992), “many variables and processes that are reflected in the person’s appraisal of a relationship with the environment as relevant to well-being and taxing or exceeding his or her resources” (Lazarus et al., 1985), and “a word used to describe experiences that are challenging emotionally and physiologically” (McEwen, 2007). Despite the disagreement among researchers on the exact definition of stress, there is a consensus that not all stress is bad stress. Certain types of stress promote flourishing, while others lead to languishing. Selye (1974) distinguished the difference between two categories of stress: eustress and distress. Eustress refers to an optimal level of stress that facilitates growth (Le Fevre et al., 2003). Examples would include exercise or reading. In contrast, distress occurs when the physiological or psychological loads placed on the body

exceeds its ability to maintain homeostasis (Le Fevre et al., 2003). This includes stressors such as abuse, feelings of neglect, or illness. Whether stress leads to adverse outcomes depends on the severity of the stress, the amount of time an individual is exposed to the stress, and his or her body's ability to cope with stress (Medina, 2022).

The human body regulates stress using a system called the hypothalamic-pituitary-adrenal (HPA). The HPA is a central control and regulatory system of neuroendocrine pathways and feedback loops that are responsible for maintaining homeostasis (Sheng et al., 2021). When the brain detects stress, by way of the amygdala, it sends a signal to a part of the brain called the hypothalamus. The hypothalamus discharges corticotropin-releasing hormone that cues the pituitary gland to release adrenocorticotrophic hormone (ACTH) into the cardiovascular system. ACTH triggers receptors in the adrenal gland to produce hormones called glucocorticoids. One of the glucocorticoids emitted is cortisol, which plays a critical role in stress response. Cortisol increases glucose in the bloodstream for energy, curbs nonvital organ functions, and decreases inflammation to effectively combat stress (Hannibal & Bishop, 2014). Acute or short-term increases of cortisol promote survival (Russell & Lightman, 2019). However, chronic or long-term activation of the stress response system and prolonged cortisol secretion results in reversal of the benefits (Russell & Lightman, 2019). Overloading the HPA axis, especially in adolescence, can lead to psychopathology (Russell & Lightman, 2019).

Mental Health Consequences of Stress in Adolescence

Adolescence represents a phase in human development where individuals reap the benefits of various maturational improvements, including immune function and cognitive skills (Eiland & Romeo, 2013). However, the transition from childhood to adulthood can also be a time of substantial psychological vulnerabilities (Dahl, 2004). For example, mental disorders, such as depression, anxiety, and schizophrenia show a marked increase in prevalence during adolescence

(Lee et al., 2014). According to Eiland and Romeo (2013), exposure to stressful life events during this phase of development plays a significant role in the onset of mental illnesses.

When stress occurs during sensitive periods it can have long-lasting effects on brain organization and function (Eachus et al., 2021). Sensitive periods, such as adolescence, refer to times in human development when heightened neuroplasticity renders the brain particularly sensitive to stressful or negative external factors (Blakemore, 2019). During adolescence, the brain does not grow significantly in size but rather through the creation and strengthening of neurocircuitry and pathways, including those responsible for controlling stress (Sharma et al., 2013). Chronic stress during this period can damage developing neural circuits and hormonal systems, resulting in dysfunctional stress response systems that will be oversensitive or slow to return to baseline levels when faced with a stressor throughout the lifespan (Loman & Gunnar, 2010). The repeated or continuous activation of brain systems responsible for stress management can lead to enhanced vulnerability to a variety of mental illnesses over a lifetime (Mariotti, 2015).

An Introduction to Positive Psychology

For most of history, psychology's primary focus was on the assessment, understanding, and treatment of mental illness (Duckworth et al., 2005). By focusing on the negative qualities of the human condition, researchers and practitioners have made admirable progress in the understanding of and treatment for psychological disorders. For instance, at least fourteen previously complex disorders are now curable or can be significantly relieved (Seligman, 2002). However, before World War II, the field of psychology had a broader mission. According to Seligman and Csikszentmihalyi (2000), psychology originally had three goals: "curing mental illness, making the lives of all people more productive and fulfilling, and identifying and nurturing high talent" (p. 6). After the war, the National Institute of Health and the Veterans

Administration rendered psychology a science largely devoted to healing based upon a disease model of human functioning (Linley et al., 2006). This focus on pathology abandoned the notion of a flourishing individual and community. Furthermore, it neglected the possibility that a “building-what’s-right” approach is the most effective tool in therapy (Seligman, 2002). In 1998, then President of the American Psychological Association, Dr. Martin Seligman, reminded his colleagues that psychology had moved too far away from its original roots. He argued that psychology is not just the study of human suffering, it is also the study of strength, virtue, and the social, biological, and psychological elements that enable flourishing (Seligman, 1998). It was this understanding that sparked the positive psychology movement.

Positive psychology is the scientific study of positive affect, individual traits, and enabling institutions (Seligman et al., 2005). It provides a theoretical framework to promote human flourishing (Seligman, 2011). Despite its name, positive psychology is not the study of a “happyology.” It does not aim to ignore or replace previous research on human suffering, weakness, and ailments. Rather, positive psychology “calls for as much focus on strength as weakness, as much interest in building the best things in life as in repairing the worst, and as much attention to fulfilling the lives of healthy people as to healing the wounds of the distressed” (Peterson, 2006, p. 5).

Seligman and Csikszentmihalyi (2000) imply that understanding and stimulating human flourishing within individuals, communities, and societies is perhaps the preeminent goal of positive psychology. As a result, Dr. Martin Seligman introduced the PERMA model, identifying five critical elements of psychological well-being that enable flourishing (Seligman, 2011): positive emotions, engagement, positive relationships, meaning, and accomplishments. Positive emotion includes transient feelings such as joy, awe, happiness, and gratitude. Frequent experiences of positive emotions trigger upward spirals toward enhanced well-being

(Fredrickson & Losada, 2005). Engagement refers to the psychological connection to a challenging activity or task that causes individuals to utilize their skills, strengths, and attention. When individuals feel they have the skills or ability to manage a difficult task, it boosts well-being (Fritz et al., 2007). The next element in PERMA is relationships. Positive relationships indicate feeling valued and supported by one's social network. Positive relationships help intensify good times, provide support during challenging times, and promote efficacy (Marujo & Neto, 2013). Meaning describes feeling connected to something larger than the self. This sense of purpose promotes goal-directed action and enhances well-being (Schueller & Seligman, 2010). Accomplishments, the final element in the PERMA Model, refers to making progress toward and reaching goals. According to Seligman (2012), accomplishing meaningful goals enhances well-being by providing individuals a sense of pride and fulfillment.

Positive Psychological Interventions

In recent decades, positive psychology has introduced evidence-based activities called positive psychological interventions (PPIs) to increase human flourishing. Parks and Biswas-Diener (2013) argue that activities must fit a certain criterion to be considered a PPI. First, the primary goal of the activity must be to build some positive element or elements (e.g., positive relationships, meaning, positive emotions). Second, interventions must have a solid foundation in empirical research, offering practitioners reassurance that the interventions successfully manipulate the target element(s). Parks and Biswas-Diener (2013) suggest this criterion eliminates self-help approaches that are not evidence-based. Finally, there must be empirical evidence that suggests improving the target element(s) produces positive outcomes for the intended population.

Current literature reveals that there are five established areas of positive psychological interventions (Parks & Schueller, 2014). The first area of PPIs is gratitude. Gratitude is defined as an emotional response to a gift, or a moment of bliss induced by natural beauty (Peterson & Seligman, 2004). Gratitude interventions usually involve self-reflective activities, such as journaling, or interactive approaches, like expressing thankfulness to others. Research suggests that gratitude interventions lead to higher levels of gratitude, positive affect, life satisfaction, and well-being (Parks & Schueller, 2014).

The second area of PPIs is forgiveness. According to Peterson and Seligman (2004), forgiveness reflects compassion and leniency toward a transgressor. Forgiveness PPIs are used to thwart problems, promote healing, and promote prosperity (Peterson & Seligman, 2004). Writing forgiveness letters and fantasizing about an apology are two well-known examples of forgiveness interventions. Studies indicate that forgiveness PPIs can lead to increased physical and mental well-being and higher quality relationships (Parks & Schueller, 2014).

Another well-established area of positive psychological interventions is savoring positive experiences. Savoring PPIs involves attending to past positive memories, relishing current positive experiences, and anticipating future positive experiences to increase positive affect (Parks & Schueller, 2014). Savoring experiences, such as going on a walk with a significant other, requires "the totality of an individual's sensations, thoughts, behaviors, perceptions, and emotions when attentively focusing on and appreciating a positive stimulus, outcome, or event, along with the associated environmental or situational features of the encounter" (Parks & Schueller, 2014, p.83). Engaging in savoring PPIs is linked to an increased sense of control in life, happiness, and greater life satisfaction.

The fourth area of PPIs is focusing on strengths. A strengths-based approach to positive psychological interventions leverages an individual's or community's talents or psychological resources to attain goals (Parks & Schueller, 2014). Strength PPIs aim to identify positive characteristics and skills, increase awareness of strengths, and promote behavioral changes that fit strengths. By focusing on areas of strength, PPIs are more likely to generate high levels of success than if interventions concentrate on overcoming weaknesses (Parks & Schueller, 2014).

Meaning-oriented interventions are also an established area of PPIs. Meaning interventions focus on identifying or increasing individuals' sense of purpose in life. Research findings indicate that a life of meaning signifies psychological and spiritual well-being, psychological strength, positive development, happiness, and life satisfaction (Parks & Schueller, 2014). Volunteering and building social relationships are great examples of meaning-oriented PPIs.

The final area of established positive psychological interventions is empathy-oriented activities. Empathy-oriented interventions focus on strengthening interpersonal relationships by fostering understanding. Studies indicate that interventions based on positive relationships increase happiness while also amending depressive symptoms (Gander et al., 2016). Evidence also suggests that when people can adopt the perspective of others, it increases feelings of sympathy, increases helpful behaviors, and promotes greater willingness to forgive (Parks & Schueller, 2014).

PPIs and Adolescent Development

Adolescence is a remarkable time of opportunity during which a wide range of actions can be taken to ensure adolescents rise above stressful challenges to live flourishing adult lives.

According to Fuhrmann et al. (2015), heightened plasticity during adolescence may not only result in increased vulnerabilities but also increased opportunities for effective interventions. In the following section, each element of the RISE model is explored. A detailed outline of a future RISE Parenting Workshop is found in the appendix to this paper.

Part 2: RISE

Resilience

There is wide variation in the way individuals respond to stressful life events. Though exposure to stress may lead to mental illness for some, others have relatively good outcomes despite exposure to severe stressors or adversities (Rutter, 2012). Decades of literature suggest that resilience explains the variation in stress response (Hornor, 2017). While there is no universal definition of resilience (Aburn et al., 2016), the term typically refers to “positive adaptation, or the ability to maintain or regain mental health, despite experiencing adversity” (Herrman et al., 2011, p. 259). In other words, resilience is the ability to persevere through challenges and overcome stressful life events. Furthermore, it is considered a measure of an individual’s stress-coping ability for lessening adverse psychological outcomes, including depression, anxiety, and other stress-related effects linked to negative experiences (Wisniewski et al., 2015).

Resilience has been conceptualized as a multifaceted concept resulting from the interplay of risk factors and protective factors (Rutter, 1999). Risk factors are measurable traits of an individual or circumstance that predict undesirable outcomes (Masten et al., 2009). Risk factors, such as stressful life events, increase the probability of individuals developing psychological, emotional, and behavioral disorders (Song et al., 2020). In contrast, protective factors are measurable characteristics of individuals that mitigate risk factors (Masten et al., 2009), safeguarding mental health in the face of exposure to stressful life events (Davydov et al., 2010).

Resilience and Stress

Resilience is critical during times of complex change such as adolescence. During the transition from childhood to adulthood, adolescents' propensity to engage in risky behaviors threatens their health and well-being (Wu et al., 2010). According to Simantov et al. (2000), adolescent risk behaviors, including alcohol consumption and substance abuse, are strongly associated with stressful life events. However, studies suggest that resilient adolescents may be better at reducing the adverse effects of stress (Smith & Carlson, 1997) and avoiding risky behaviors than other adolescents (Ali et al., 2010). Early studies of resilience focused on the qualities of the individual adolescent, suggesting the role of extraordinary characteristics and inner resilience within the adolescent that led to the ability to cope mentally and emotionally with stress (Garmezy & Neuchterlien, 1972). However, developments in research indicate resilience reflects normal developmental processes that result almost entirely from the functioning of basic human adaptational systems (Masten, 2001). To be sure, some protective factors are internal, including an individual's genetic make-up (Feder et al., 2009) and sense of meaning and purpose (Constantine et al., 1999). However, researchers recognize that some protective factors, such as family milieu, are external to adolescents.

Parental Influence on Resilience

Among external factors, the family milieu has the most direct and enduring influence on the development of adolescents (Bronfenbrenner, 1981). Current models of resilience suggest that parenting style is one of the most influential factors in promoting resilience in adolescents (Zakeri et al., 2010). Parenting styles refer to how parents attempt to control and socialize their children (Darling & Steinberg, 1993). Parenting styles are conceptualized along two separate dimensions (Aunola et al., 2000): demandingness and responsiveness. Demandingness refers to the control a parent attempts to have over their child's behavior and maturation. Demandingness

is often expressed through parental supervision, discipline, and response to child disobedience (Dalimonte-Merckling & Williams, 2020). Conversely, the dimension of responsiveness refers to the extent to which parents show acceptance, warmth, and attunement. According to Dalimonte-Merckling and Williams (2020), responsive parents display compassionate, sensitive, and receptive behaviors to their adolescents' needs and demands.

Based on the two dimensions, Baumrind (1966), and Maccoby and Martin (1983) distinguished four parenting styles: permissive, uninvolved, authoritarian, and authoritative. Permissive parents are often warm and supportive. However, they rarely exercise control, allowing adolescents to frequently regulate their own activities (Baumrind, 1966). Permissive parenting is associated with adverse adolescent outcomes, such as lower achievement, lower autonomy, and lack of impulse control (Firoze & Sathar, 2018). Uninvolved parenting is characterized as low demandingness and responsiveness (Darling, 1999). These parents fail to monitor the adolescent's behavior (Aunola et al., 2000) and limit time and energy dedicated to the adolescent, often neglecting their needs (Firoze & Sathar, 2018). Uninvolved parenting is related to adolescent outcomes, including substance abuse, low levels of academic achievement, and impulsiveness (Dalimonte-Merckling & Williams, 2020).

An authoritarian style of parenting lacks communication, warmth, and responsiveness. These parents are strict and intolerant to defiance, and they express their maturity demands and expectations through rules (Spera, 2005). Adolescents reared by authoritarian parents generally have lower levels of self-efficacy, social competence, intellectual curiosity, and commitment to goals than adolescents raised in an authoritative household (Dalimonte-Merckling & Williams, 2020).

Finally, according to Simons and Conger (2007), authoritative parenting is the optimal style of parenting. Authoritative parenting is both demanding and responsive. These parents use

firm control but are not excessively restrictive (Baumrind, 1966). They encourage their adolescent to be autonomous and champion individuality. Another vital characteristic of authoritative parenting is open parent-child communication. Parents welcome the perspectives of the adolescent while at the same time not failing to express their own views (Dalimonte-Merckling & Williams, 2020). As a result, adolescents raised in an authoritative family have high levels of independence, self-esteem, social competence, and academic achievement (Dalimonte-Merckling & Williams, 2020). Furthermore, authoritative parenting is associated with high levels of resiliency, while permissive and authoritarian parenting styles are linked to low resiliency (Zakeri et al., 2010).

Intelligence

The second element in the RISE model is intelligence. Intelligence is defined as “the ability to learn, understand or to deal with new or trying situations (Merriam-Webster, n.d.). According to Implicit Theories of Intelligence (Dweck & Leggett, 1988), human mindsets can be categorized in two forms: growth mindset and fixed mindset. Individuals with a growth mindset view intelligence, talents, and abilities as learnable and capable of growth in response to effort, good strategies, and help from others (Dweck, 2016). Conversely, those with a fixed mindset view these traits as innate gifts and unchangeable over time (Dweck, 2016). According to Carol Dweck, these two mindsets lead to different behaviors and outcomes. Individuals with a growth mindset embrace life struggles, persist in the face of difficulties, view effort as a means to develop, utilize constructive criticism to improve, and receive inspiration from the success of others (Esparza et al., 2014). Furthermore, individuals with a growth mindset tend to have strong social networks (Dweck, 2007), high levels of academic achievement (Yeager et al., 2019) and substantial motivation (Ng, 2018). On the other hand, Esparaz et al. (2014) suggest that

individuals with a fixed mindset circumvent challenging situations to avoid failure, reject critique from others, resent the success of others, and perceive effort as a sign of low ability.

Growth Mindset and Stress

In addition to the positive outcomes mentioned above, research indicates that growth mindsets buffer against stressful life events. For example, Burnette et al. (2020) conducted a meta-analysis to examine the relationship between mindsets and psychological distress, including symptoms of depression, anxiety, and other distress-related constructs. The researchers meta-analyzed results from 72 articles published between 1988 and 2019, totaling over 17,000 research participants. The meta-analysis found that growth mindsets are negatively correlated to psychological distress and positively correlated to treatment seeking and positive coping. These findings support an earlier meta-analysis by Schleider et al. (2015) that investigated the link between implicit theories and youth mental health issues. The researchers synthesized an emerging body of research in children, ages 4-19, from 17 research articles. The results of the study suggest that individuals with a fixed mindset are more vulnerable to mental health disorders. Adolescents that view stressful life events as having stable, internal causes tend to feel a loss of control over negative events and thus experience high levels of anxiety, depression, or aggression (Schleider et al., 2015). Conversely, adolescents with a growth mindset remain optimistic in the face of adversity as they believe they can attain desirable outcomes through focused effort (Schleider et al., 2015).

Parental Influence on Growth Mindset

Since the growth mindset movement emerged in the early 2000s, researchers have become increasingly concerned with cultivating growth mindsets in adolescents. Studies reveal that individuals are not born with one type of mindset; mindsets can be influenced or taught. According to Dweck (2006), parents have a powerful impact on their childrens' mindsets. For

instance, when parents praise their children for their ability or performance (e.g., “You are such a natural athlete” or “You are so smart”), children tend to develop a fixed mindset (Mueller & Dweck, 1998). Ability-focused praise sends the message to children that their accomplishments are trait-based and a result of something innate. However, when children receive effort-focused praise (e.g., “You studied so hard for your test. Great job getting an A”), they tend to adopt a growth mindset (Mueller & Dweck, 1998). Effort-based praise sends the message that the child’s accomplishment is a result of effort. Furthermore, studies suggest that parents’ beliefs about failure predict their children’s mindset. Parents with a “failure-is-enhancing mindset” adopt parenting practices that cultivate growth mindsets in their children (Haimovitz & Dweck, 2017, p. 1853). Conversely, parents with a “failure-is-debilitating” mindset tend to foster fixed mindsets in their children (Haimovitz & Dweck, 2017, p. 1853).

Character Strengths

When parents are surveyed on what characteristics they want to instill in their children, many mention character strengths, such as kindness and honesty (Gillham et al., 2011). Character strengths, the third element of the RISE model, are the basic building blocks of a flourishing life (Seligman, 2011) and are defined as positive traits that impact how individuals think, feel, and behave (Park, 2004). According to the Values in Action Classification (Peterson & Seligman, 2004), there are 24 character strengths (see Table 1). These character strengths fall under six categories of virtues—wisdom, courage, humanity, justice, temperance, and transcendence—that are valued across almost all cultures, religions, and nations (Niemiec, 2017). Although individuals possess all 24 character strengths to various degrees, each person has a distinctive profile of strengths, called signature strengths, that they “own, celebrate, and frequently exercise” (Peterson & Seligman, 2004, p. 18). Character strengths, when used within the “gold mean” (Niemiec, 2019), produce not only positive outcomes (Peterson & Seligman,

2004) but also prevent undesirable outcomes (Park & Peterson, 2009). However, Niemiec (2017) argues that some character strengths matter more for certain outcomes and may matter more at specific times in life.

Table 1

VIA Classification of Strengths

1. **Wisdom-** strengths that help individual gather and use knowledge:
 - Creativity- thinking of novel to do things
 - Curiosity- novelty-seeking and open to experience
 - Judgment- making rational and logical decisions
 - Love of Learning- a passion for learning and mastering new skills
 - Perspective- the ability to look at systems in as a whole
2. **Courage-** strengths that help individual exercise will and face adversity:
 - Bravery- not shrinking from challenges, threats, or difficulties
 - Honesty- speaking the truth and presenting oneself in a sincere way
 - Perseverance- finishing what one starts
 - Zest- approaching life with excitement and energy
3. **Humanity-** strengths that manifest in caring relationships with others:
 - Kindness- doing good deeds for others
 - Love- valuing close relationships with others
 - Social Intelligence- being aware of the motives and feelings of self and others
4. **Justice-** strengths that help individuals connect in community or group-based situations:
 - Fairness- treating people justly
 - Leadership- organizing group activities and accomplishing goals
 - Teamwork- working well as a member of a group
5. **Temperance-** strengths that help you manage habits and protect against excess:
 - Forgiveness- extending compassion to those who have done wrong
 - Humility- accurately evaluating one's accomplishments
 - Prudence- being careful about one's choices and actions
 - Self-regulation- controlling one's emotions and actions
6. **Transcendence-** strengths that help you connect to the larger universe:
 - Appreciation of Beauty- noticing and appreciating beauty, excellence in all domains of life
 - Gratitude- feeling and expressing a deep sense of thankfulness in life
 - Hope- positive expectations about the future
 - Humor- recognizing what is amusing in situations
 - Spirituality- belief that there is life beyond human understanding

Character Strengths and Stress

Growing research indicates that specific character strengths – including hope, kindness, social intelligence, self-control, and perspective – safeguard against the adverse effects of stressful life events (Park & Peterson, 2009). For example, Valle et al. (2006) conducted a longitudinal study to examine the moderating role of hope in the relationship between stressful life events and adolescent well-being. The participants were 699 students, between the ages of 10-18, attending public schools in rural areas. Students were required to complete pre and post-questionnaires – including The Students' Life Satisfaction Scale (Huebner, 1991), The Youth Self-Report form of the Child Behavior Checklist (Achenbach & Edelbrock, 1986), The Life Events Checklist (Johnson, 1980), and the Children's Hope Scale (Snyder et al., 1997). The year-long study results revealed that hope plays a functional role in the relationship between stressful life events and psychological well-being. Adolescents who report high levels of hope are less likely to experience surges in internalizing behavior problems and declines in life satisfaction when facing stressful life events (Valle et al., 2006)

Research by Galla and Wood (2014) also highlights the protective role of character strengths in the face of adversity. The researchers conducted a study to investigate the relationship between individual differences in self-control and daily stress exposure and reactivity in adolescents. A total of 129 ninth-grade students from the northeastern United States completed individual difference measures of responses to stress, self-control, and neuroticism. Participants were required to report on daily stressful events, the severity of stress, mood, coping strategies, and mindlessness, that is, how often they acted on impulse, for fourteen consecutive days. The study's findings revealed that adolescents with high levels of self-control had less exposure to daily stressors, were less reactive to daily stress, and used more active coping strategies relative to those with lower self-control (Galla & Wood, 2014).

Parental Influence of Character Strengths

The protective role of character strengths in moderating stress has prompted interest in discovering the factors that cultivate the use of strengths in adolescents. Research findings suggest that parents play a crucial role in developing character strengths in their children. According to a study by Jach et al. (2017), a strength-based approach to parenting is positively related to adolescents' strength use and high levels of subjective well-being. Strength-based parenting (SBP) is a style of parenting that seeks to "identify and cultivate positive states, positive processes, and positive qualities" in adolescents (Waters, 2015, p. 690). In other words, SBP is the tendency for parents to recognize and encourage their children to use their strengths.

Executive Functioning

Executive functioning (EF) plays a critical role in adolescent development. EF describes a set of high-level cognitive processes that underlie goal-directed behavior (Best & Miller, 2010) and optimize an individual's response to novel or ambiguous circumstances (Gilbert & Burgess, 2008). According to Berthelsen et al. (2017), these processes contribute to lifelong well-being. EF stems from three related, yet distinct, core cognitive processes (Diamond, 2013): inhibitory control, working memory, and cognitive flexibility. Inhibitory control, also known as response inhibition, is the ability to inhibit or control impulsive responses (e.g., attention, thoughts, behaviors, and emotions) and create appropriate responses using attention and reasoning. Inhibitory control enables individuals to choose how they react or behave rather than being at the mercy of impulses, old habits, and/or external stimuli (Diamond, 2013). Working memory is the cognitive system responsible for the short-term storage and manipulation of information used to plan and carry out complex tasks (Cowan, 2008). Individuals rely on working memory for daily tasks, such as following a conversation, mental math, or following multistep directions. According to Gross and Grossman (2010), working memory allows information to remain in an

active state so that it is accessible for use in high-order behaviors, such as decision making, planning and organizing, and problem-solving. Finally, cognitive flexibility refers to individuals' ability to shift amongst different tasks or think about multiple concepts concurrently. It allows individuals to disengage from one task and re-engage with another task effectively (Dajani & Uddin, 2015).

Executive Functioning and Stress

Executive function skills are increasingly recognized as an essential buffer against stressful life events by promoting effective stress and emotion regulation. According to Shields et al. (2017), EF may moderate the neuropathological effects of stress by reducing perceptions of stress intensity. EF aids cognitive reframing and reappraisal, allowing individuals to think about stressful situations in ways that are less distressing (Andreotti et al., 2013). Furthermore, studies indicate that EF, specifically inhibitory control, enables emotion regulation and minimizes experiences of negative affect (Schmeichel & Tang, 2015). Therefore, Shields et al. (2017) postulate that high executive function levels under stress are associated with reduced stress-related health problems.

Parental Influence on Executive Function

Given the importance of executive functioning skills for positive outcomes, there is great interest in identifying the factors that influence the development of EF skills. Adolescence is proposed to be a sensitive period of EF development (Zelazo & Carlson, 2012), and research findings indicate that parental behaviors can promote the development of EF during this period. According to Mageau et al. (2015), autonomy-supportive parenting behaviors help facilitate EF development in adolescents. Autonomy support refers to parenting behaviors that support adolescents' decisions, goals, and volition (Griffith & Grolnick, 2013). One distinct behavior of autonomy-supportive parenting is scaffolding. Scaffolding refers to providing children with the

appropriate support and guidance to successfully complete tasks (Mermelshtine, 2017). Scaffolding also requires parents to help their children through a reflection process when they experience failure. In addition to scaffolding, autonomy support consists of perspective-taking, which describes a parent's ability to understand the world from their child's point of view (Joussemet et al., 2005). Parenting behaviors that are autonomy-supportive bolster EF skills because they allow adolescents to solve problems in their own way when completing challenging activities. According to Bindman et al. (2015), engaging in challenging tasks that require EF provides opportunities for adolescents to practice and strengthen these skills.

In Summary

This paper highlights that early life stress is an urgent public health crisis with lifelong mental health impacts. A potential approach to positive adolescent development was proposed through a discussion of positive psychology and its aim to stimulate human flourishing. The review of empirically validated concepts that have been used to buffer the psychological effects of stress and promote flourishing served as the fundamental basis of the proposed multidimensional construct. The RISE model provides parents with the knowledge, tools, and skills to raise flourishing adults.

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