Original Article

Role of mothers' resilience in the development of resilience and prevention of depression and anxiety in daughters

Zara Nizar Damani & Sana Hussain
Shaheed Zulfiquar Ali Bhutto Institute of Science & Technology, Karachi-Pakistan.

Abstract

Background: Resilience has proven to be a protective factor against adverse conditions. However, mental health professionals have started studying resilience in terms of reducing depression and anxiety. In Pakistan especially, this area needs to be explored to develop interventions to make people resilient. This study aimed to investigate and understand the role of mothers' resilience in developing resilience and prevention of depression and anxiety in daughters.

Methodology: This was a cross-sectional study, and data were collected from 88 participants hailing from different areas of Karachi, Pakistan, and among them, 44 were girls, and 44 were their biological mothers. The variables were assessed using the resilience and depression anxiety scale.

Results: The study results reveal that when mothers are resilient, it helps develop resilience in daughters. Since there was no significant difference between mothers' and daughters' resilience, all the mothers were resilient, and their daughters were resilient. Further, this study also showed that resilience is negatively correlated with depression and anxiety. Moreover, there was a significant positive relationship between mothers' resilience and daughters' depression and anxiety scores. Besides this, a significant positive relationship has also been found between daughters' resilience and mothers' depression anxiety scores.

Conclusion: Based on the findings, it is suggested that for the development of a healthy society, intervention programs that promote resilience must be adapted for children as well as adults so that they can overcome the challenges of daily life.

Keywords

Resilience, Mother-Daughter Relationship, Depression, Anxiety.
Introduction
Depression and anxiety are the most common disorders found among all regions of the world. These disorders are significant to consider due to their economic and social consequences. By 2030, Pakistan will be the fifth most populated country; therefore, there is a need to develop a strong aid policy on dealing with depression and anxiety disorders. The prevalence of depression and anxiety disorders is higher in Pakistan, with higher numbers among rural population than to urban. Similar to other countries, women in Pakistan have higher rates of illness than men. Mental-health-related illnesses are increasing day by day. Children go through many changes, socially, physically, and mentally. To understand this issue, many scholars and public health workers have identified the need for interventions that promote and develop resilience in the early stages of childhood. Resilience is a learned behavior, and if properly addressed according to the age, gender, and population being targeted, it results in greater preventive effects. A resilient person will survive despite having high levels of emotional and physical stress and having severe adversities in life. Resilience can be stated as individual characteristics that indicate a successful functioning in fulfilling social norms and personal responsibilities. Predictors of resilience are the child's competence, parenting styles, and bond with caregivers. Mother-daughter relationship connection plays a vital role in increasing resilience. In addition, there is a significant relationship between maternal responsiveness and family communication in adopting positive coping behaviors in children. Further, the acceptance-involvement parenting style significantly contributes to the development of resilience. Moreover, parent-child communication influences the child's emotional wellbeing and emotional functioning.

No such study has been done to identify this phenomenon in the Pakistani context. Therefore, this study aims to examine the role of mothers' resilience in developing resilience and prevention of depression and anxiety in daughters.

Methodology
It is a cross-sectional, correlational study, in which the participants were recruited through purposive sampling and snowball sampling. They were approached through social media platforms. Only those participants were selected who fulfilled the criteria (i.e., mothers between the ages of 30-40 years with their firstborn biological daughters between 13-19 years, and both mother and daughters understood the English language). After getting verbal consent from the participants, they were called to a community gathering/social gathering. Before conducting the study, participants were requested to fill a consent form. They were assured that their identities would remain anonymous, and data gathered from the questionnaire will be used only for research purposes.

Along with this, ethical approval was also taken from the board of advanced studies and doctoral research committee of SZABIST, Karachi. In total, 100 (50 daughters and 50 mothers) were approached to fill the questionnaire and out of which 88 (44 mothers and 44 daughters) agreed to be part of the study. Participants were asked to fill a consent form, demographic form, Resilience scale, Depression Anxiety Scale (DAS). All the scales were in the English language, and all the participants understood this language. After collecting the data, as a token of thanks, a session was conducted for the participants to teach them...
some coping strategies to overcome daily life stressors. Results were analyzed through SPSS version 20.0. To calculate reliabilities of the scales, Cronbach alpha was used. The correlation was applied to find out the relationship between different variables and to identify the differences independent t-test was administered.

**Result**

The result shows that both the scales are having high reliability. The depression, anxiety scale (DAS) has 0.94, and resilience has a 0.89 reliability coefficient.

| Scales            | No. of Items | Alpha Reliability |
|-------------------|--------------|-------------------|
| Resilience        | 14           | 0.89              |
| DAS               | 21           | 0.94              |

DAS-depression, anxiety scale.

The result shows a significant positive relation (r=0.465; p<0.05) between mothers’ and daughters’ resilience. Moreover, it shows a significant positive relation(r=0.516; p<0.01) between daughters' resilience and mothers' depression and anxiety levels. Further, there is a significant positive relationship (r=0.462; p<0.01) between mothers' resilience and daughters' depression and anxiety results. Moreover, a significant negative correlation (r=-0.538; p<0.05) can be seen between mothers and daughters' levels of depression and anxiety. Furthermore, the result shows that there is a significant negative correlation (r=-0.162; p<0.05) between mothers resilience and mothers DAS. Similarly, a significant negative correlation (r=-0.642; p<0.05) can be seen on the table between daughters' resilience and daughters DAS scores.

| Measures               | Mothers Resilience | Mothers DAS | Daughters Resilience | Daughters DAS |
|------------------------|--------------------|-------------|----------------------|---------------|
| Mothers Resilience     | 1                  | -0.162**    | 0.465**              | 0.462**       |
| Mothers DAS            | 1                  | 0.516**     |                      | -0.538**      |
| Daughters Resilience   |                    |             | 1                    | -0.642**      |
| Daughters DAS          |                    |             |                      | 1             |

DAS-depression, anxiety scale.

**Correlation is significant at the 0.01 level**

The result shows the mean difference between mother and daughter scores on resilience and DAS. It shows no difference between mother and daughters' scores on both the variables tested in the current study (p > 0.05).
Table 3: Difference in the mean DAS and resilience among mothers and daughters.

| Variables | Mothers (n=44) | Daughters (n=44) | 95% CI         | t-values |
|-----------|----------------|------------------|----------------|----------|
|           | Mean±SD       |                  |                |          |
| Resilience| 81.81±12.6    | 83.02±9.94       | (-3.626 - 6.035) | .496     |
| DAS       | 16.95±14.16   | 15.20±10.13      | (-6.976 - 3.476) | -.667    |

DAS-depression, anxiety scale.

Discussion

The main objective of the present study was to identify the role of mothers' resilience in developing resilience and preventing depression and anxiety in daughters. The present study’s finding suggests that resilience plays a significant role in reducing depression and anxiety among mothers and daughters. In this study, there is a significant negative correlation found between the depression and anxiety of mothers and daughters with their resilience, which proves that resilient factors decrease the scores of anxieties and depression in an individual and promotes wellbeing. Recently, a study on footballers suggested that resilience was a protective factor against anxiety and stress. High resilience and low anxiety traits were found to be protective factors to improve mental wellbeing.10 It can be said that resilience impacts on improving mental wellbeing and reducing depression and anxiety in an individual.

In Pakistani culture, the relationship between mothers and daughters determines the later development of the daughter. The current study shows a positive correlation between mothers' and daughters' resilience. Moreover, there was no difference between mother and daughters' resilience which shows if mothers are resilient, then daughters can also be resilient. This finding shows the importance of a mother's role in the emotional development of their daughters. On the basis of this finding, we can say that if we work on a mother's resilience, we can make daughters resilient. The connection with mothers provides a safe space for children, especially daughters, to internalize a positive attitude and overcome adversities.

Moreover, the current study also suggests that when mothers get depressed, daughters become resilient. When daughters show depressive or anxiety symptoms, mothers tend to get resilient to deal with the situation. There was a positive correlation found between daughters' depression, anxiety score and mother's resilience. Moreover, a significant positive correlation was also found between mothers' resilience and daughters' depression and anxiety scores. Therefore, current study’s finding suggest that resilience plays a significant role in dealing with stressful life events and that if we can develop interventions to promote resilience, we can make our society healthy and sound.

Mothers and daughters provide a robust support system to each other, especially in Pakistani culture. The quality of the relationship between mothers and daughters determines the later development of the daughter. The current study shows a positive correlation between mothers' and daughters' resilience. Moreover, there was no difference between mother and daughters' resilience which shows if mothers are resilient, then daughters can also be resilient. This finding shows the importance of a mother's role in the emotional development of their daughters. On the basis of this finding, we can say that if we work on a mother's resilience, we can make daughters resilient. The connection with mothers provides a safe space for children, especially daughters, to internalize a positive attitude and overcome adversities.

The small sample size is one of the limitations of this study, but this study will...
contribute to the literature by minimizing the gap. Furthermore, this study can be replicated with larger populations to get a better picture. Also, including gender differences and childbirth order differences in the study would allow researchers to develop interventions suitable for both genders and all the children irrespective of their birth order.

**Conclusion**

Overall, this study showed that resilience plays a significant role in preventing depression and anxiety among mothers and daughters. Therefore, more intervention programs must be developed that promote resilience not only in clinical settings but also in programs that are school-based. Moreover, family therapy sessions must be promoted to make society resilient. Also, as resilience is learnt, it is essential that programs that promote family resilience or resilience in mothers should be encouraged so that there are more citizens that can be productive and can perform well. This will impact the overall well-being of the society and the country as well.

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