

Out of Our Hands: Can We Really be Happy in Extremely Negative Situations?

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Introduction

Imagine lying in a hospital bed undergoing intense chemotherapy for severe lung cancer. Your days consist of constant injections, frequent visits by doctors, and infrequent visits from friends and family. An observer would assume that your life is slowly slipping through your fingers and you are falling into a dangerous decline towards depression and death. You appear to be completely unhappy and unable to ever be happy again. However, this is not always the case.

In this paper we examine, using sociological and psychological theories, whether or not people can be happy in extremely negative situations. For the purposes of our paper, happiness or subjective well-being, is defined as the extent to which an individual perceives his/her life, as a whole, to be positive, not specific aspects, such as, work, income, love, etc. (Calvo-Bralic 2009). We focus our analysis on four categories of negative or life-threatening situations: dealing with disease, living in a refugee country,

being imprisoned, and battling natural disasters. Through the application of the exchange theory, dramaturgical theory, hedonic treadmill model, positive psychology, and the resilience theory, we found that it is possible to be happy in negative life situations, despite contrary evidence from theories such as the power/status.

Individuals cannot always change their circumstances, but they can react in a variety of ways to what life gives them. This control over actions can result in happiness as depicted in Table 1. In reference to the data, if a person can change his/her actions into positive actions under negative circumstances, then he or she can find happiness during their hardship. An individual's ability to adapt to situations and seek happiness, primarily in relationships and faith, makes it possible for individuals to be happy in negative situations.

Argument

The first theory used to prove that people can be happy in negative situations is The Meaningful Life or the third way to live a happy life, as explained through Martin Seligman's (2004) theory of positive psychology. The Meaningful Life suggests that individuals live their lives on the basis of something greater than what is immediately present within the self. This theory is best exemplified through analyzing the negative circumstances of refugees (Seligman 2004). For refugees living in or exiled from war-torn and broken countries, life is full of adversity and discomfort. In 2008, Khawaja, White, Schweitzer, Greenslade published as titled, "The Difficulties and Coping Strategies of Sudanese Refugees: A Qualitative Approach." Through a series of 23

interviews the researchers generated a qualitative analysis of the experience of Sudanese refugees before, during, and after their migration experiences. The report explained that life as a refugee is an extremely negative experience; "refugees reported traumatic and life-threatening experiences during the pre-migration and transit phases, and difficulties with resettlement during the post-migration phase"(Khawaja et. al. 2008: 489). The overall refugee experience is latent with a number of different hardships. The top four difficulties the refugees reported were displacement, separation from loved ones, inability to continue normal everyday life activities, and physical and/or psychological trauma (Khawaja et. al. 2008). Many of these difficulties arise from a sense of instability and loss of freedom.

Despite this, using Seligman's Meaningful Life Theory (2004), happiness can be achieved. In the study, "Difficulties and Coping Strategies of Sudanese Refugees" researchers found that faith and religion helped people deal with the stress of life and lead individuals to happiness. Faith and religion are aspects of the Meaningful Life; religion provides hope for something greater than one's current circumstances. Researchers have determined that faith is a powerful anecdote for unhappiness. For example, Halcon and colleagues (2004) found that between 50 and 75% of a sample of Somalian and Ethiopian refugees used prayer to relieve their sadness. In some cases, religious beliefs are linked to a style of coping that emphasizes 'enduring' the adversities of the present for the reward of a 'better future' (Colic-Peisker & Tilbury 2003 cited in Khawaja et. al. 2008).

Prayer, faith, and religion provide an outlet for victims of extremely negative situations. Studies have shown that faith or religiosity contribute to subjective well-being even more so than socially defining characteristics such as race, education, and income

[See Table 2 for research data of faith being a major component in determining life satisfaction]. Refugees, as well as individuals under peaceful living conditions, generate a sense of hope, which allows a longing for the future and the ability to endure the suffering currently at hand.

In addition to the positive psychology's Meaningful Life, the Symbolic Interactionist Sociological Theory of Human Emotion shows how refugees can be happy. Even though refugee life is extremely difficult, refugees can control strategies to confirm the self, changing their internal attitudes, reactions, and perception of their situation. For example refugees can change their "attitudes toward their internal resources, such as taking a positive approach, identifying strengths, reinforcing the determination to cope and self-perception as a survivor rather than a victim" (Gorman et al. 2003 cited in Khawaja et al. 2008.). Through the symbolic interactionist theory and positive cognition, or perceiving things with positive meaning, refugees are able to give new meaning to their life circumstances and the place of the self in their current circumstances. Changing their perceptions of their life circumstances, refugees are able to adapt better to their current conditions.

Another theory that can explain how those in extremely negative situations can still be happy is the hedonic treadmill model which states that good and bad events only affect our overall happiness for a brief period of time and then we go back to a state of hedonic neutrality (Diener, Lucas and Scollon 2006). In applying this theory to people that have been placed in negative situations, it should follow that we should see a downward trend in overall happiness, but one should quickly be able to adjust to their new environment.

After a brief period of time, one's happiness should be at virtually the same level it was prior to the negative situation.

An excellent example of this is those that have been incarcerated; much psychological research has been done on the topic of prisoner adjustment and evidence has shown that for the most part prisoners are able to adjust to their environments. This trend is evidenced by the fact that the first few months of imprisonment are the most stressful and is the time when suicide is most prevalent. Fifty percent of suicides occur in the first 24 hours of imprisonment (Bonta and Gendreau 1990). Based on Liebling's research (1999) inmates adjust to life in prison "surprisingly well", and the effect that prison time has on overall happiness is "relatively minimal." In fact, the majority of psychological research on the subject of prisons and subjective well-being, indicates that the effect of imprisonment on overall happiness is only slightly more than experiencing what Zamble and Porporino describe as a social "deep freeze", which is a short period of mild to moderate depression and/or isolation. Overall, most prison research, including Bonta and Gendreau's study (1990), found that long-term incarceration has no contribution to significant detrimental effects, thus, it does not intervene with one's ability to be happy.

Furthermore, the social exchange theory of human emotion is another theory that shows how people in negative situations can be happy. The social exchange theory is based on the idea that human relationships revolve around the benefits each party receives from being in the relationship. If one party is contributing more than they are receiving in a relationship it is expected that they will leave the relationship. This theory examines the exchanges and payoffs are essential to relationships and that's how attitudes are formed.

The social exchange theory can be applied to Spiegel's (1988) research study of examining a focus group of women who had cancer. Most people would assume these women would be unhappy and the study itself addresses the unhappiness caused by a lack of positive strong relationships. Many studies have shown that when cancer patients retreat into society and socially isolate themselves they can become sicker faster. Spiegel found that "many cancer patients become more socially isolated with their illness should especially arouse medical concern because it should make a bad prognosis worse," running away from relationships because they feel they have no more to give or receive can be a major issue (Spiegel 1988: 68). By doing this they have "less social contact and a reduction in meaning and self-esteem that comes from productive work experience" (Spiegel 1988: 68). The study shows that a patient can choose to use the exchange theory to their benefit or not. If patients do not look for positive relationships they will most likely have an unhappier time dealing with their prognosis.

Furthermore, while some people could retreat from society and experiences unhappiness, most of the women in this study found happiness despite their cancer. In the study it is said that it is important to "acknowledge the other person's potential beyond being just an extension of oneself" (Spiegel 1988: 67). In doing so, the researchers found better relationships were created among the women. The focus group was composed of cancer patients who talked about their experiences and created relationships with people who were facing the same issues. Exchanging their ideas and stories helped them accept their current situation and bring a sense of reassurance and peace. The study indicated that patients "found new meaning by using their experience of illness to help others going through the same dilemma and came to feel like experts in living rather than victims of

cancer” (Spiegel 1988: 67). These cancer patients used the people around them to help reevaluate their lives. In doing so they were able to find happiness in setting and achieving goals they set together. This community helped the women find happiness in their gloomy situation. One woman talked about the group and stated “I brought my cancer with me and put it in the seat next to me. It was there but I had a wonderful time” (Spiegel 1988: 67). Although she was well aware she was sick, she was able to put it aside and focus on things that would bring her joy. Statistics and observations found that “not only were the women randomized to this intensive group therapy living better, they turned out to be living longer by an average of 18 months” (Spiegel 1988: 67). Through the exchange theory happiness can be found even in the worst of situations.

The dramaturgical theory is another way to understand how people can be happy in negative situations. This theory claims that human beings present themselves to others based on the society’s cultural values, norms, and expectations. According to the dramaturgical theory, it would be extremely hard for cancer patients and patients with any chronic illness to find happiness because society subscribes sick people as unhappy. Often the “unhealthy” are deemed lesser than the “healthy” individual. Society puts a dim light over people who are diagnosed with illness and this causes many patients to withdraw from society rather than live their lives to the fullest. The article “Redefining Health: Living with Cancer” by Marjorie Kagawa-Singer explains how patients who are extremely sick deem themselves healthy. They “are healthy because their definition of health differs from the dominant definition used by the American health care system” (Kagawa-Singer 1993: 295). Many of these patients “must create socially valued positions for themselves by re-establishing the fact that they are still the same

individuals even though they are inside bodies which no longer meet society's requirements of 'health'" (Kagawa-Singer 1993: 296). Instead of adhering to cultural scripts of mainstream society, terminally ill patients recreate their own social norms and cultural scripts in order to be happy. These patients found happiness in not abiding by what they felt society believed. These individuals felt that someone is healthy when "he is fit for the normal accomplishments of his physical and social functions" (Kagawa-Singer 1993: 296). By choosing to have this point of view on health the patients were able to find happiness because they believed they could maintain their sense of integrity. They were able to realize they were still the same person they were pre-diagnosis. Acting as a force against society actually granted them more satisfaction. By rejecting the "normal" definition of health these patients were able to create their own social scripts. In some ways one could say these patients have created social scripts strictly for the cancer community which allows them to not only accept their illness and new life but also be happy while fighting their disease.

The resilience theory can also be helpful in determining how these individuals can be happy. The resilience theory is "a two-dimensional construct concerning the exposure of high-risk adversity, such as natural disaster, and individuals' perception of positive adjustment to recover from the trauma" (Mancini & Bonanno, 2006; Luthar 2003). Gordon and Wong (1994) referred to resilience as one's "individual and collective behaviors, circumstances, and achievements that allow them to overcome adversity; it also can refer to what actions one may take to survive." McCubbin et. Al. (1998) defined the resilience theory as one's "capacity to cope with life stress." All in all, in order for one to cope and achieve one's original level of happiness, during and after the destruction

of a natural disaster, internal resilience or perseverance is crucial in order to deal with the traumatic experience. [For a further explanation of the resilience theory refer to Table3]

The resilience theory can be applied to the survivors of Hurricane Katrina, which devastated over 90,000 square miles of the Gulf coast in Alabama, Mississippi and Louisiana in 2006 (Lee, Shen, and Tran 2009: 2-3). Victims of hurricanes experience a list of hardships, which include “household disruption, family conflict, social interference, health problems, bereavement, and property loss” (Lee, et. al. 2009). In addition, according to Lamberg (2006), 1 in 20 Katrina survivors reported the death of a family member, and 1 in 4, a friend. In order to preserve happiness and stability, the survivors of Hurricane Katrina had to adapt to the current environment and social conditions at the time by using their internal resilience, which “was a dynamic process that grew out of their exposure to risk and the complex interplay of person and environment” (Lee, et. al. 2009). In addition, several studies concluded that faith and praying promoted resilience during the recovery period of a disaster (Spence et al., 2007; Lawson and Thomas 2007). Lastly, in a case study of Hurricane Katrina survivors, common coping strategies, used by survivors, included having the determination to live, obtaining life necessities through desperate survival strategies, maintaining family ties, connecting with community and sharing experiences with others (Greene 2007). All in all, Katrina survivors were able to cope with the negative circumstance through their internal resilience, spirituality, determination to live, and maintaining social connections with family and community, thus, it is possible for one to find happiness in dealing with a natural disaster.

Counter Point

Despite all of these theories it is still difficult for some to believe that individuals can be happy in extremely negative situations, and with good reason. We are all aware of the atrocities. Studies have shown that the aftermath of natural disasters can cause survivors to suffer from Post-Traumatic Stress Disorder (Shalev, Tuval-Mashiach and Hadar 2004). There is also the fact that suicide rates amongst the incarcerated are much higher than those in the general population. Many psychologists look at facts, such as these, and come to the conclusion that people in negative situations can not be happy.

Symbolic interactionists feel that humans behave in ways to constantly verify the self concept and when individuals experience a loss of self or are unable to reconcile a situation or action with the “self” that they perceive themselves to be, they undergo negative emotions (Turner, Jonathan and Stets 2006). Those in negative situations experience an extreme loss of self, reduced to “just a number” in the prison system, a survivor in the case of natural disasters, or even just a patient for those with terminal illness. The symbolic interactionist theory states that when people do not receive confirmation of the self, they experience emotions such as guilt, shame, and embarrassment which serve as impediments to overall happiness. A behavioral strategy that many people employ to limit the negative emotions felt when the self is not verified is to withdraw from the activity which did not verify the self. However, this is impossible for those in many negative situations such as being a prisoner or refugee or being the victim of natural disaster or terminal illness, as it is out of the individual’s control. An alternative way to deal with this is to change the “self” and the identity standards by which “self” is judged and adjust behavior to those that are valued in the current setting.

If neither of these options is available, another approach is to repress the negative emotions. This can explain the drastic difference between the self reported happiness levels of those in extremely negative situations and facts to the contrary, such as the high suicide rate of those in prison, which is 47 suicides per 100,000 as compared to just 14.3 per 100,000 in the general population according to the U.S. Bureau of Justice (2002).

Another theory that supports this notion is the Power and Status Theory of Human Emotion. This theory describes society as a dichotomy of those with power and those without in a struggle to achieve satisfaction or happiness (Turner, Jonathan and Stets 2006). Many refugees and prisoners are forced to give up their freedom, independence, relationships with family and friends, and individuality. As a result of this loss of power they experience anxiety, fear, and loss of confidence; if this loss is great they can descend into sadness and depression (Turner, Jonathan and Stets 2006). This theory is especially relevant to those in prison because it states that when a person feels that him or herself is to blame for the loss of status or power, then he or she will feel even greater feelings of shame and embarrassment.

Furthermore, according to parts of Martin Seligman's theory of positive psychology (2004), those in negative situations may not be able to be happy. It states that there are three ways to live happily. One way is through the Pleasant Life which consists of using your skills and abilities to create and sustain a comfortable lifestyle, and securing and maintaining those material things and situations which make you happy (Seligman 2004). The pleasant life does not exist for refugees because they are not able to continue with their daily life activities, are displaced and homeless, and often suffer physical trauma (Khawaja et. al. 2008). Martin Seligman's (2004) second way of living a

happy life is through the Aristotelian concept of the Good Life. In the good life, people can experience happiness through flow. Flow occurs when individuals engage in activities that make time stop because of the joy these activities generate. The living conditions of refugees, prisoners, and those relocated due to natural disaster limit the possibilities for engaging in activities which generate flow because they spend most of their energy adapting to new life circumstances.

Difficulties of adaptation may also lead to these people's unhappiness. Refugees in the post-migration phase and those that have been recently incarcerated must adapt to new cultural norms in their new "homes". According to Khawaja, et al.(2008: 503), post-migration refugees must deal with "a lack of environmental mastery, financial difficulties, social isolation and the impact of perceived racism. Since they do not understand the cultural norms and values of their new homes right away, they are unable to participate in the prescript interaction rituals of the community. In reference to the Interaction Ritual Theory of Human Emotion, there are a set of norms and rituals that are appropriate for face-to-face encounters and community development or acceptance (Turner, Jonathan and Stets 2006). Since newly relocated individuals; be they refugees, prisoners, or those relocated from areas of natural disaster may not understand the interactions rituals of their new home, may struggle to gain acceptance into the community, which stifles overall happiness.

Conclusion

Initially, one would assume that people dealing with disease, living in a refugee country, being imprisoned, or battling natural disasters, would be unhappy. However, our research suggests that it is actually possible to be happy and sometimes increase

happiness despite these negative situations. Individuals facing negative situations find happiness primarily in adapting to new circumstances, strong relationships and in seeking a greater life purpose. For example, those suffering from disease continue interaction with loved ones in order to gain happiness. Refugees and prisoners both have limited power and opportunity, but they often find happiness in the simplicity of their lives. They have little choice, so the positive choices they do make have great effects on them and greater purpose for them. Finally, those facing natural disasters are not helpless victims, but instead, are resilient warriors who face the unlikely adversity with drive and determination. The overcoming of the turmoil allows the individuals to find happiness on the new life they achieve after the disaster. There are strong arguments for why negative situations would result in unhappiness. Other research suggests that lack of power and inability to adapt inhibit happiness in negative situations. However, our research suggests that in many circumstances it is *possible* to be happy and even increase happiness if individuals handle the situation with optimism, surrounds themselves with positive and loving people and pursue positive actions. The issue remains controversial because research is still ongoing as to how exactly one achieves happiness in general and in negative situations particularly. However, a preponderance of the research has convinced us that it is in fact indubitably *possible* to be happy in negative situations.

Tables

TABLE I

Mean differences between the activity change group and the circumstantial change group (Study 1)

change	Circumstantial change	Activity
	Validity checks	
3.68	Intentionality	4.30
3.31	Effort	3.95
	Hypothesis tests	
3.57	Habituation	2.96
2.90	Variety	3.43
affect	Positive	3.67

Note: All group differences are significant at the 0.01 level or higher.

This table illustrates a study which shows that changing one's actions results in higher positive affections than changing one's circumstances. Thus, if a person deals with a negative situation in a positive manner with a high level of friends, family, and faith, the person will be happier than if they merely change their negative situation.

Sheldon, Kennon M., Lyubomirsky, Sonja. (2006). Achieving Sustainable Gains in Happiness: Change your Actions, Not your Circumstances. *Journal of Happiness Studies*. 7, 1, pp. 55-86.

TABLE 2

TABLE 2
 MULTIPLE REGRESSION: IMPORTANCE OF FAITH AND OTHER
 SOCIAL BACKGROUND FACTORS ON WORTHWHILENESS OF LIFE^a

Independent Variables	Pearson r	Slope	Standard Error	Beta
Importance of Faith	.17	.17	.02	.16
Number of Friends ^b	.15	.12	.02	.13
Marital Status ^c	.13	.34	.07	.11
Age	.00	.03	.02	.04 ^d
Education	.07	.08	.03	.07
Health ^e	.09	.20	.07	.06
Income	.10	.04	.02	.06
Race ^f	-.04	-.29	.09	-.07

^aR = .28, R² = .08

^bAsked if the respondent has (1) a good many very good friends, (2) an average number, or (3) not too many good friends.

^cCoded as a dummy variable, married = 0, unmarried = 1.

^dNon-significant at .05.

^eAsked if the respondent has any particular health problems.

^fCoded as a dummy variable, white = 0, non-white = 1.

This table shows that faith and number of friends ranks highest against marital status, age, education, health, income, and race in importance for making life worthwhile. Worthwhileness of life is equal to subjective well-being and happiness in that deals with overall life satisfaction. This table shows that faith has a more

positive effect on one's overall life satisfaction than other social categories.

Hadway, Christopher Kirk and Wade Clark Roof. (1978). Religious Commitment and the Quality of Life in American Society. *Review of Religious Research*, 19:3, 301. Religious Research Association, Inc.

TABLE 3. Risk and Resilience Theory: Basic Assumptions

<p>Resilience</p> <ul style="list-style-type: none">• is a biopsychosocial and spiritual phenomenon• is a transnational dynamic process of person–environment exchanges• encompasses an adaptational process of goodness-of-fit• occurs across the life course with individuals, families, and communities experiencing unique paths of development• is linked to life stress and people’s unique coping capacity• involves competence in daily functioning• may be on a continuum—and is a polar opposite to risk• may be interactive, having an effect in combination with risk factors• is enhanced through connection or relatedness with others• is influenced by diversity including ethnicity, race, gender, age, sexual orientation, economic status, religious affiliation, and physical and mental ability• is expressed and affected by multilevel attachments, both distal and proximal, including family, school, peers, neighborhood, community, and society; consequently, resilience is a function of micro-, exo-, mezzo-, and macrofactors• is affected by the availability of environmental resources• is influenced by power differentials.

This table provides an overview of key concepts of the Resilience Theory.

Adapted From: Greene, R. R. (2002). Resiliency: An integrated approach to practice, policy, and research (pp. 41-42). Washington, DC: NASW Press. Downloaded By: [Boston College] At: 03:16 14 April 2009