

Self-Esteem and Optimism as Predictors of Resilience among Selected Filipino Active Duty Military Personnel in Military Camps

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Abstract

Knowing the immense physical and psychological distress that military personnel undergo, it is almost impossible not to talk about its adverse psychological consequences, particularly in the context of the mental health profession. Resilience, optimism, and self-esteem are just among the many factors that frequent the discussion about the effects of adverse situations. According to Fergus and Zimmerman's Resilience Theory (2005), individuals possess innate traits such as resilience, that allow them to withstand distress, highlighting the predictive application of self-esteem and optimism for resilience. Mental health awareness has likewise risen in the Philippines, shedding more light on mental health issues that were previously considered to be too shallow and usually dismissed. As such, utilizing a predictive non-experimental research design, this present study aimed to determine whether self-esteem and optimism can predict resilience among 360 military personnel in active duty. Military personnel from military camps who were selected using a non-probability technique completed a test battery consisting of three scales to measure the variables: Rosenberg Self-Esteem Scale, Life Orientation Test-Revised (LOT-R), and Connor-Davidson Resilience Scale (CD-RISC). Significant results revealed that a relationship exists among the research variables and that self-esteem and optimism predicts resilience among the present study's selected active duty military personnel in military camps.

Keywords: Self-esteem, optimism, resilience, military personnel, Filipinos

Introduction

The U.S. Marine Corps (2010) states that being exposed to harsh experiences and combat stress is inevitable for military personnel. It is part of their job to be deployed in unfamiliar and strenuous environment for extended periods of time. In addition to this, physical demands, being away from their family and the conflict between their duty to protect their country and their own survival are some of the challenges that they face which may also contribute to their stress (Kennedy, 2013).

For instance, the recently concluded Battle for Marawi has been labeled as the Philippines' longest battle since the end of World War II (Fonbuena, 2018). For over five months, the Armed Forces of the

Philippines faced what they claimed to be their most laborious and challenging mission to date since their opponents, the Maute fighters, made use of new and unfamiliar strategies they were not prepared for (Neuhof, 2017). Despite those unforeseen circumstances, the military troops won over the Maute fighters and foreign terrorists, and eventually freed Marawi. As a result, the Armed Forces felt satisfaction and fulfillment with regards to their operation in the Marawi crisis. Not only did they succeed in liberating the city, but they also exhibited flexibility and mobility throughout the siege (Fonbuena, 2017).

Even after the troop's victory however, the physical and psychological toll of combat experiences have

severely affected their lives (Cesur, Sabia, & Tekin, 2013). Military work and wartime activities such as deployment in war zone units, unexpected mobilization, and exposure to heavy casualties have been established to be correlated with psychological distress (Pflanz, & Sonnek, 2002). To emphasize, even the most courageous soldiers may have a chance to develop mental health problems such as depression, anxiety, post-traumatic stress disorder, and even schizophrenia. However, it is important to note that compared to other individuals, there are some who can recover immediately after being faced with adversity, and this can be further explained by the concept of resilience.

Resilience was first coined in the scientific literature during the twentieth century and since then, this construct has had a great significance and has been a long-standing topic for researchers (Luthar, 2006). Its structure, definition and design have been formulated and revised through different levels of analysis and these variations made it hard to identify a specific and standardized application of the construct. Furthermore, it has been identified that in different versions of the definition, commonalities in some elements such as personal qualities, exposure to some type of adversity, coping strategy, and positive adaptation after an adversity existed (Bonanno, 2004; Connor & Davidson, 2003; Friberg, Hjemdal, Rosenvinge, & Martinussen, 2003; Masten et al., 1999; Richardson, 2002). Consequently, some researchers have used elements to limit the definition including social context such as family and other support systems (Friberg et al., 2003; Luthar, Cicchetti, & Becker, 2000; Masten, 2001), while others claimed that resilience is inherent within the person (Block & Block, 1980; Davidson et al., 2005).

Examining the evolution of resilience, Fergus and Zimmerman (2005) was able to formulate a theory of resilience that focuses on the healthy development of an individual using the strengths and capabilities that the individual has rather than the deficits. This theory classified promotive factors into two categories which are assets or personal qualities of an individual, and resources or environmental factors. To aid the theory in explaining how it works, several models have been proposed. The most commonly used models in research literature are compensatory and protective models of resilience (Fergus & Zimmerman, 2005; Garnezy, Masten, & Tellegen, 1984; Masten et al., 2007). In compensatory model, the promotive factors counteract in order to neutralize exposure to risk and in protective model, the interaction between exposure to risk and outcomes is modified by the assets and resources (Fergus

& Zimmerman, 2005). In addition to these two models, Rutter (1987) introduced a challenge model which suggests that moderate levels of exposure to an adversity helps an individual to be less vulnerable in experiencing negative outcomes of subsequent adversity. With the enormous amount of available literature for resilience, interest in studying the science of resilience intervention grows with the aim of helping people and at the same time testing the theory (Masten, 2006; Masten, 2007a; Masten et al., 2006).

Some researchers focused on distinguishing resilience from resiliency due to a wide variety of definitions. Resilience is a process that involves the interaction of personal qualities and environmental factors (Luthar et al., 2000), while resiliency according to Block & Block (1980), refers to the personal characteristic of an individual and it implies having the endurance and flexibility in dealing with stressful experiences in order to return to normal functioning. Resilience is also defined as the ability to successfully adapt and cope with challenging situations (Agaibi & Wilson, 2005). It is the ability to bounce back and recover from adversity and failure with the use of various positive patterns of adaptation. It is considered as one of the most effective natural defense mechanisms of an individual (Masten & Reed, 2002). Previous researches about resilience identified protective factors which include personal qualities such as mental ability (Baldwin et al., 1993; Rutter, 1987; Wolff, 1995; Wright & Masten, 1997), independence (Werner & Smith, 1982), gregariousness, coping strategies (Brooks, 1994; Luthar & Zigler, 1991), (Werner & Smith, 1982), self-esteem (Balgiu, 2017; Karatas & Cakar, 2011; Masten, 2001; Rak & Patterson, 1996; Taylor, 1994;), optimism and well-being (Carver, Scheier & Segerstrom, 2010; Miller et al., 1996; Souri & Hasanirad, 2011) and these factors aid individuals in coping with different kinds of adversity. Moreover, resilience is seen to be positively correlated with emotional competence and self-esteem (Habib, U., Habib, O., & Ansari, 2016).

There is an existing consensus among researchers relating to the association of resilience with self-esteem (Balgiu, 2017). Some consider self-esteem as a part of resilience on the individual level (Kumpfer, 1999; Masten & Coatsworth, 1998). A research conducted by Dumont and Prevost (1999), showed that resilient individuals have higher self-esteem than those who are vulnerable. This can be supported by a study which revealed that adolescents who obtained high scores on resilience sustain high levels of self-esteem despite experiencing negative events (Oshio, Nakaya, Kaneko,

& Nagamine, 2002).

The Self-esteem theory emphasizes the duality of self-esteem (Jindal-Snape & Miller, 2008). It states that self-esteem depends on two types of judgment: (1) the extent to which an individual feels worthy of respect from others, and (2) the extent to which an individual feels competent to face challenges. Additionally, self-esteem, considered as an integrated sum of self-confidence and self-respect, is a dynamic aspect of self-image wherein an individual constantly evaluates himself in relation to his society (Sharma & Bali, 2013). Self-esteem reflects a person's overall subjective emotional evaluation of his or her own worth. It includes beliefs (for example, "I am competent", "I am worthy") and emotions such as triumph, despair, pride and shame (Habib et al., 2016). This is considered as an influential factor in physical or mental health and health-related behavior together with other aspects such as family, peer-group, and environment (Veselska, Geckova, Orsova, Gajdosova, van Dijk, & Reijneveld, 2009). In a study by Harter (2012), self-esteem first develops in school age children, and it is strongly influenced by both the mental comparisons of the ideal self and the actual experiences of an individual. Those with high self-esteem know themselves and know what they are capable of doing, enabling them to maximize the outcomes of their actions (Franken, 1994). There have been clear links drawn with the self-esteem and resilience of individuals (Gilligan, 2000; Rutter, 1987). Individuals possessing a high self-esteem naturally have the ability to bounce back from adverse circumstances, and recover quickly from mental, physical, and emotional crises (Sharma & Bali, 2013). It was also found in the study of Balgiu (2017) that self-esteem and emotional balance support individual resilience. On the other hand, negative self-esteem is known to have a significant role in the development of various mental disorders such as depression and anxiety, as well as social problems such as high-risk behavior, violence, and substance use (Mann, Hosman, Schaalma, & de Vries, 2004). For this reason, positive self-esteem is considered as a protective factor whereas negative self-esteem is considered as a risk factor (Veselska et al., 2009). However, the links between self-esteem and resilience are more abundant and significant than what has previously been known (Miller & Daniel, 2007).

In addition to this, individuals who are resilient possess self-esteem as a personal characteristic (Jindal-Snape & Miller, 2008). There are factors that influence the duality of self-esteem that of which are related to resilience (Miller & Daniel, 2007). As illustrated by

Jindal-Snape and Miller (2008), findings associated with self-efficacy, autonomy, and self-esteem in the resilience literature are usually reported as separate personality variables; but from a two-dimensional self-esteem perspective, they would all be linked to feelings of self-competence. Also, the worthiness dimension of self-esteem is affected by a range of personal qualities and beliefs that are characteristics of resilient individuals. According to Karatas and Cakar (2011), hopelessness and self-esteem contribute to the prediction of resilience. Their findings showed that as self-esteem increases, self-confidence also increases, and as self-worth increases, resilience also increases (Karatas & Cakar, 2011).

The body of research regarding resilience has become considerably substantial and has paved a way for researchers to produce large amount of studies concerning its correlation with other concepts. Numerous variables have accompanied the long-standing research for resilience in the field, and that includes optimism. Defined, optimism is an individual characteristic that reflects the ability of individuals to hold positive anticipations regarding their future (Carver et al., 2010). Optimism encompasses two correlated concepts: (1) the inclination to hope, and (2) the tendency to believe that we live in the "best of all possible worlds" (Conversano et al., 2010). Essentially, it is the overall expectation for positive result (Panchal, Mukherjee, & Kumar, 2016).

In a study by Scheier and Carver (1985), they introduced "dispositional optimism", which is a trait of an equilibrated personality that influences the way an individual comes to terms with the past, present, and future life events. However, optimism is also considered as an "attributional style", which is characterized by the tendency to believe that negative events are inconstant, external, and specific. For this reason, optimistic individuals believe that positive events are more stable and frequent than negative events (Peterson & Seligman, 1987). Another perspective called the "unrealistic optimism" phenomenon states that optimism is a bias for the self, reflecting the conviction that positive events are more likely to occur to oneself whereas negative events will affect others. This implies that optimism is the consequence of a cognitive underestimation of risk (Conversano et al., 2010). It appears that the notion of resilience demands the accompaniment of optimism in the face of adversity (Rutter, 2006). Carver et al. (2010) supported this claim by stating that optimism does indeed accompany resilience by providing individuals with cognitive, coping, and contextual resources that are beneficial in fostering better mental health. It can be

inferred from these claims that optimism is a vital aspect in adapting to stressful events. In his study, Klohnen (1996) defined resilient individuals as those that have a positive and energetic outlook in life, and with positive emotionality as the cornerstone of their beliefs; allowing them to achieve more and transpire more positively in life. This further reinforces the claim that resilience shares a positive correlation with optimism. Consequently, when optimists are faced with adversities, resilience is highly evident despite the challenge and slow progress (Snyder & Lopez, 2002); they are more driven to accomplish the task and are more hopeful for a positive outcome. Correspondingly, optimists present a higher quality of life as compared to those with low levels of optimism and even pessimists. This is in line with the study of Wrosch and Scheier (2003), wherein they found that both optimism and adaptation of purpose as variables capable of influencing the quality of life.

Optimism has been shown to accompany resilience in stressful situations and it has been linked to high levels of engagement coping (Carver et al., 2010). In other words, optimists are more inclined towards active coping mechanisms rather than avoiding challenging situations which positively affects both adjustment and well-being. In times of adversities, those who are considered to be optimists demonstrate resilience and tend to have lower levels of psychological distress. They are more likely to have better physical health, live longer, and become more successful in life.

Our review of related literature and studies provided a comprehensive knowledge about the association of optimism and resilience. Optimism appeared to be an essential component of resilience for an individual to withstand stressful encounters. This equips individuals with cognitive, coping, and contextual resources that may improve their mental health to continue having a hopeful and positive outlook in life. Through the reviewed materials, a more thorough understanding was acquired regarding the relationship among self-esteem, optimism, and resilience. With that in mind, resilience is affected by individuals' view of themselves as worthy and competent, their ability to hold positive anticipations of an outcome, and their ability to progress life's challenges through growth and self-acceptance despite exposure to stressful situations. The literature and studies justified the significance of each variable as a contributing factor in developing resilience.

In summary, understanding resilience as a construct requires extensive knowledge of its nature. Also, in this present study, we were able to recognize the existing relationship of self-esteem and optimism with resilience.

Unmistakably, previous researches emphasized the importance of resilience in helping individuals. After an in-depth analysis of this construct, various renditions were created, making it difficult to be applied in a single manner. Despite the differences in its structure, definition, and design, similar elements can be identified such as personal qualities, exposure to an adversity, genetics, social context, and environment. Aside from this, several theories were developed in order to understand and explain resilience as a construct. In particular, a theory of resilience was formulated which focused on promotive factors such as, assets and resources, that aid in the healthy development of the individual. Numerous models were also established to further comprehend the theories such as the compensatory model, protective model, and a challenge model in which the interactions of promotive factors, exposure to risks, and outcomes are seen (Zimmerman, 2013).

The army is an interesting field to investigate the concepts of self-esteem, optimism, and resilience; wherein, their military development is tested by high mental and physical standards to create competent leaders (Matthews, 2008). Hence, it is most ideal to study human behavior and resilience under stressful situations through Positive Psychology (Bartone & Priest, 2001). Studies show that through Positive Psychology, these concepts potentially balance the negative effects of anxiety-related experiences which can influence one's performance, psychosomatic health, and psychological well-being (Seligman, & Csikszentmihalyi, 2000). Thus, the present study pursued on exploring the predictive influence of one's self-esteem and optimism on the resilience of selected active duty military personnel in military camps in the Philippines. Moreover, this endeavor would contribute further to the advancement and development of Positive Psychology, particularly in the field of military. Previous researches have been conducted to identify different factors contributing to resilience, however, there is not much available literature concerning how self-esteem and optimism specifically contribute to resilience. Hence, this study is of great significance in facilitating research on resilience in the military. Identification of the variables of self-esteem and optimism as predictors of resilience would strengthen research regarding the concept. Knowledge of the different predictors of resilience would lead to the improvement of military resilience in training programs. In like manner, proper conceptualization and implementation of the programs can promote long-term resilience to those in the military field.

Method

Research Design

In this current study, we used a predictive cross-sectional research design which enabled us to establish whether the variable of interest, resilience, can be predicted from the other variables, using the same population (Belli, 2008). In this study, self-esteem and optimism of military personnel was assessed in relation with resilience

Participants

The present study's participants totaled to 360 combatant military personnel which consisted of 327 males and 33 females with ages ranging from 20 to 53 ($M = 33.22$, $SD = 6.89$), and years of service in the military ranging from 1 to 32 years ($M = 10.61$, $SD = 6.39$). The participants in this study have never been diagnosed of mental illness at the time of the data gathering. Participants were selected through a non-probability convenience sampling method and each participant signed a written informed consent prior to completing the psychological scale battery. Participation was voluntary, and no remuneration was given. The participants understand written and oral communication in English, since their average educational attainment is college level. According to the Philippine Army (2018), the minimum educational requirement for those being recruited in the army is that applicants must at least be high school graduates with technical and vocational skills.

Measures

Rosenberg Self-esteem Scale (RSES). This scale is a widely used self-report instrument for evaluating individual self-esteem developed by Dr. Morris Rosenberg and published by Princeton University press in 1965. It is a 10-item scale that measures global self-worth by measuring both positive and negative feelings about oneself. Sample items include "On the whole, I am satisfied with myself." and "I feel that I have a number of good qualities." All items are answered using a 4-point Likert scale format ranging from 4 (Strongly Agree) to 1 (Strongly Disagree) (Tinakon & Nahathai, 2012). Items answered with "Strongly Agree" is given 4 points, "Agree" is given 3 points, "Disagree" is given 2 points, and "Strongly Disagree" is given 1 point. However, items 2, 5, 6, 8, and 9 are reversely scored prior to scoring. The sum scores for all 10 items is obtained and higher scores indicate higher self-esteem (Rosenberg, 1965). This scale has sound psychometric properties. A varied selection of independent studies using wide variety of samples showed alpha coefficients ranging from 0.72 to 0.87 which indicated a fairly high outcome. In addition, a test-retest reliability with 2-week interval

was calculated at 0.85, the 7-month interval was calculated at 0.63 (Silber & Tippett, 1965). Convergent validity was established using the Coopersmith Self-Esteem Inventory (Swenson, 2003).

Life Orientation Test - Revised (LOT-R). The Life Orientation Test is a scale developed to assess individual differences in generalized optimism versus pessimism (Scheier & Carver, 1985). However, this scale had its problems, and one that was greatly noticed is how its original items did not focus as explicitly on expectations for the future as theory dictated. Thus, the LOT-R was developed to suffice for the deficiencies of the previous scale (Scheier, Carver, & Bridges, 1994). This scale is a 10-item measure (three items assess optimism, three assess pessimism, and four of them are fillers). Sample items include "In uncertain times, I usually expect for the best." and "I am always optimistic about the future." Participants rate each item on a 5-point scale format ranging from 0 (Strongly Disagree) to 4 (Strongly Agree). Items answered with "Strongly Disagree" is given no point, "Disagree" is given 1 point, "Neutral" is given 2 points, "Agree" is given 3 points, and "Strongly Agree" is given 4 points. Items 3, 7, and 9 are reversely scored, while items 2, 5, 6, and 8 are not scored since they are filler items only. To obtain the overall score, scores for items 1, 3, 4, 7, 9, and 10 are added together. Higher scores reflect higher levels of optimism (Scheier, Carver, & Bridges, 2013). In terms of psychometrics, this scale has an acceptable level of internal consistency with a .78 cronbach alpha for the entire 6 items. This scale is said to be reliable with test-retest correlations of .68, .60, .56 and .79 suggesting that it is stable across time (Scheier et al., 1994).

Connor-Davidson Resilience Scale (CD-RISC).

The CD-RISC is a 25-item scale that measures resilience. Sample items include "I am able to adapt when changes occur." and "Past successes give me confidence in dealing with new challenges and difficulties." Each item is evaluated on a five-point Likert Scale ranging from 0 (Not at all true) to 4 (True nearly all the time). The scoring of this scale is simply based on the sum total of all the items where each is scored from 0 to 4; scores ranges between 0 to 100, with higher scores indicating higher resilience. (Davidson & Connor, 2018). The original scale was created by Dr. Kathryn Connor and Dr. Johnson Davidson in 2003 as a means to assess resilience and for the use in clinical practice. It has been tested to different settings with a wide variety of population.

Table 1. Means (*M*), standard deviations (*SD*), and Pearson correlations of the study variables

	<i>M</i>	<i>SD</i>	Self-esteem	Optimism	Resilience
Self-esteem	30.42	3.60	1		
Optimism	15.57	2.78	.411**	1	
Resilience	76.82	13.45	.486**	.292**	1

Note: *N* = 360; **Correlation is significant at the 0.01 level (2-tailed)

Moreover, this scale has sound psychometric properties with Cronbach α of .89 and item-total correlations that ranges from .30 to .70. Scores on this scale have been compared to other scales to test for its convergent and divergent validity. Scores on this test have been significantly and positively correlated with a test that measures hardiness. In addition, scores on this test have been significantly and negatively correlated with tests that measure stress and vulnerability (Connor & Davidson, 2003).

Procedure

Approval was sought from the College of Science Ethics Review Committee (ERC) of the University of Santo Tomas prior to the acquisition of participants in order to protect the rights, safety and well-being of the participants, as well as assess this study's ethical considerations.

The respective commanders of military camps received letters of request before obtaining military personnel as participants for the current study. Approval was sought from the camps' respective Ethics Review Board (ERB) and arrangements were made regarding the testing schedule. Data collection began after securing the Certificate of Approval from the ERC and ERB. We assured the participants that the information gathered from them are kept confidential. Answering the questionnaire lasted for 15 to 20 minutes. We screened test questionnaires to ensure that only completely answered questionnaires were retained and used for the present study. After testing, the participants were debriefed regarding the purpose of the study. The present

study originally involved 409 combatant military personnel from various military camps. However, after screening for completely answered questionnaires, the participants were narrowed down to 360 combatant military personnel. Upon the data completion, data were scored and encoded. Initial analyses include the computation of descriptive statistics, and after which, data were subjected to Pearson Correlation Coefficient and Stepwise Linear Regression Analysis with Statistical Package for the Social Science (SPSS) and Microsoft Excel as the main statistical tools. It should be noted that the scales used in the current study have been normed from the western population. Thus, the interpretation of the scores may be influenced both by the location or region where data was obtained, and the nature of the sample.

Results

Results in Table 1 indicate that a significant positive relationship exists among the participants' self-esteem, optimism, and resilience at the 0.01 level (two-tailed).

Resilience was significantly related to self-esteem and optimism with correlation coefficients of .48 and .29 respectively. Moreover, results also show that self-esteem was also significantly related to optimism with a correlation coefficient of .41. Furthermore, self-esteem and optimism of military personnel was also found to predict their resilience. The stepwise linear regression analysis conducted determined whether self-esteem and optimism significantly predict resilience among the participants in the present study.

Table 2. Stepwise regression of self-esteem (SE), optimism (O), resilience (RES)

Variable	Model 1 SE			Model 2 O			Model 3 SE + O		
	<i>R</i>	<i>R</i> ²	<i>F</i>	<i>R</i>	<i>R</i> ²	<i>F</i>	<i>R</i>	<i>R</i> ²	<i>F</i>
RES	.48	.23	110.43	.29	.08	33.36	.49	.24	58.25

Note.

a. Predictors: SELF-ESTEEM

b. Predictors: OPTIMISM

c. Predictors: SELF-ESTEEM, OPTIMISM

As seen in Table 2, Model 1 showed that self-esteem significantly explains 23% of the variance of resilience, ($R^2 = .236$, $F(1, 353) = 110.4$, $p < .001$) while Model 3 showed that optimism, together with self-esteem, significantly explains 24% ($R^2 = .242$, $F(2, 357) = 58.2$, $p < .001$) of the variance. Results revealed that when taken individually, Self-esteem contributes to resilience more with $\beta = .486$, $p < .001$, as compared with Optimism, with $\beta = .292$, $p < .001$. Nonetheless, as seen in Table 2 Model 3, both Self-esteem and Optimism ($R = .49$, $p = .001$) significantly predicts the participants' resilience.

Discussion

The present study hypothesized that self-esteem, optimism, and resilience are significantly related and that self-esteem and optimism can significantly predict resilience among selected active duty military personnel in military camps in the Philippines. The study found that both self-esteem and optimism are positively related to resilience. Previous studies have also shown similar results indicating a significant positive relationship between self-esteem and resilience (Dumont & Prevost, 1999; Oshio et al., 2002; Campbell-Sills, Cohan, & Stein, 2006; Karatas & Cakar, 2011; Habib et al., 2016; Martínez-Martí & Ruch, 2016; Balgiu, 2017) and that self-esteem do predict resilience in a meaningful way (Karatas & Cakar, 2011; Martínez-Martí & Ruch, 2016; Balgiu, 2017). Our study's result implies that the higher the self-esteem military personnel possess, the more resilient they are (Balgiu, 2017). Military personnel who have high levels of self-esteem are found to easily adapt in stressful environments and may prosper in new environment, since they have something to rely on, which is the idea of believing in themselves (Martínez-Martí & Ruch, 2016; Balgiu, 2017). In addition, self-esteem is a variable reliably associated with resilience since it buffers the impact of loneliness (Kidd & Shahar, 2008). Though we found that a significant relationship exists between self-esteem and resilience, the said relationship only constitutes a medium effect ($r = .48$, $p = .001$), one that weakens when another variable is introduced in stepwise regression to predict resilience. This effect may be explained by the small number of participants.

The present study also found that optimism is related to and significantly predicts the resilience of the participants. This is widely supported by studies that indicate the predictive application of possessing a positive outlook towards incoming events on an individual's resilience (Carver, et al., 2010; Segovia,

Moore, Linnville, Hoyt, & Hain, 2012). A study by Sabouripour and Roslan (2015) demonstrated consistent findings with the present study, stating the optimism and resilience accompany each other in times of distress where a person's favorable attitude towards adverse circumstances anticipate how they cope regarding the situation. This is in line with the Assets component of Fergus and Zimmerman's Resiliency Theory (2005), demonstrating the presence of protective factors innate to individuals. Having a positive outlook in life serves a great purpose especially in a profession so physically and psychologically demanding (Segovia et al., 2012). In times of distress, focusing on positive future implications rather than catastrophizing the situation allows individuals to put things in perspective which then provides them with options that can be used to properly cope (Reivich, Gillham, Chaplin, & Seligman, 2013).

Some studies have likewise shown the relationship of optimism and self-esteem. According to Kapikiran and Kapikiran (2016), an individual's optimism positively affects their self-esteem because promoting a positive outlook on life improves self-esteem (Vacek, Coyle, & Vera, 2010). Therefore, self-esteem and optimism as assets, based on the Resiliency Theory, aid in overcoming the effects of exposure to negative events (Fergus & Zimmerman, 2005). It is said that individuals with high self-esteem and optimism can cope better with exposure to risks (Mäkikangas Kinnunen, & Feldt, 2004).

In conclusion, the present study strongly confirmed the positive relationship among self-esteem, optimism, and resilience, and that self-esteem and optimism were predictors of resilience among selected active duty military personnel. The identified factors would be valuable to military psychologists and other mental health professionals working with military personnel. The importance of the findings lies in its potential to raise awareness regarding the essential traits that would significantly contribute to the development of resilience among those in the military.

Limitations and Future Directions

The present study acknowledged certain limitations. Based on Fergus and Zimmerman's Resilience Theory (2005), promotive factors that enable an individual to endure adversities are divided into (1) assets, which are factors inherent within the individual, and (2) resources, which are factors residing outside the individual. In this study, only assets namely self-esteem and optimism were measured as predictors of resilience. Future research may also be done to (1) explore the resource that can

contribute to the resilience of military personnel, (2) determine whether demographic variables such as gender, age, religion, or years of service in the military have an effect on the resilience of military personnel, and (3) consider confirmatory factor analyses and other structural equation modeling to better understand the present study's constructs (self-esteem, optimism, and resilience).

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