The Association Between Social Skills, Grief and Resilience among Palestinian University Students Throughout the Coronavirus (COVID-19) Pandemic in Palestine

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Abstract

Previous studies have demonstrated that social skills and resilience could be predictive factors in coping with traumatic grief among youth throughout the COVID-19 pandemic; however, the current study variables have not been examined among Palestinian university students. This correlational study was the first to test the relationship between social skills, resilience and grief among Palestinian university students throughout the COVID-19 pandemic. The sample consisted of 412 university students; 264 females and 148 males, recruited from online advertisements, e-mail campaigns and social media. Findings revealed that social skills were negatively correlated with grief, and positively correlated with resilience; while resilience correlated negatively with traumatic grief. Further studies are recommended to test the relationship between current study variables and other related variables such as wellbeing, social support and psychological adjustment. This study also emphasizes the importance of developing intervention programs that focus on reinforcing social skills which may improve psychological resilience among university students during pandemics.

Introduction

In December 2019, the World Health Organization (WHO) identified a novel coronavirus disease, now commonly known as "COVID-19" (Fauci, Lane, & Redfield, 2020). COVID-19 is an infectious disease caused by a newly discovered coronavirus (WHO, 2020).

COVID-19 is characterized as a highly contagious, rapidly spreading and potentially fatal disease, depending on the existing health condition of the infected individual (Muniyappa & Gubbi, 2020; Wang et al., 2020). Individuals worldwide were quickly forced to implement social distancing strategies to avoid infection. This resulted in a shift away from normal behavior patterns, daily routine and functions, for example, public places have been shut down and restrictions were imposed on one's ability to work (Galea, Merchant, & Lurie, 2020).

Consequently, since the beginning of this pandemic, individuals have shown several psychological impairments such as, stress, anxiety, depression, symptoms of post-traumatic stress disorder (PTSD), and grief (Liang et al., 2020; Mahamid & Bdier, 2020; Mahamid, Veronese, & Bdier, 2020; Rajkumar, 2020; Zhai & Du, 2020). With respect to these consequences, resilience and social skills are important factors that can assist in mitigating the negative mental health effects associated with COVID-19 (Havnen et al., 2020; Saltzman, Hansel, & Bordnick, 2020). The current study was designed to test the relationship between social skills, resilience and grief among Palestinian university students during the COVID-19 pandemic.

Theoretical background

Social skills as a psychological construct is difficult to adequately define, since its construct is deceptively simple It relies on a number of other psychological constructs such as personality, intelligence, language, perception, appraisal, attitude and behavior-environment interaction (Merrell & Gimpel, 2014). Social skills can be defined as behaviors that promote positive interaction with others and their environment, such as empathy, participation in group activities, generosity, helpfulness, communicating with others, negotiating, and problem solving (Lynch & Simpson, 2010). In addition, according to Pereira- Lima & Loureiro (2015) social skills can also be characterized as the different classes of social behavior of the individual's repertoire that allow him/her to deal adequately with the demands of interpersonal situations.

Jurevičienė, Kaffemanienė, and Ruškus (2012) defined social skills within two perspectives; that is, the intrapersonal perspective (self-awareness, self-evaluation, self-control), where social skills are described as behavior that is typical of a personality in all situations and that refers to the person's self-perception (Stravynski & Amdao, 2001), and the interpersonal perspective (e.g. recognizing and understanding the feelings and moods of others, and orienting in social situations). Raudeliūnaitė & Paigozina (2014) described social skills as a behavior that corresponds to the way of some interaction. As a result, social skills are specific behaviors that are acquired and then applied to situations.

Appropriate and effective social skills consist of two main components: 1) organizing cognition and behaviors into integrated actions based on socially and culturally acceptable interpersonal goals; and 2) continuously assessing and modifying

social behavior to maximize the likelihood that specific goals will be attained (Romanczyk, White, & Gillis, 2005).

Individuals with strong social skills have well-developed methods for effectively coping with problems encountered in daily life, learning from lived experiences to effectively face challenges and access support from their social networks, minimizing stress (Segrin, Hanzal, Donnerstein, Taylor, & Domschke, 2007). Having poor social skills cause a series of social and adaptive impairments among individuals with regards to interaction with others in different social contexts (Del Prette, 2013).

Poor social skills are found to be associated with psychological distress, depressive symptoms, loneliness and low levels of life satisfaction among youth (Malinauskas, Dumciene, & Lapeniene, 2014; Nilsen, Karevold, Røysamb, Gustavson, & Mathiesen, 2013; Ozben, 2013; Segrin, McNelis, & Swiatkowski, 2016).

Social skills and grief

As of October 5th 2020, there were 1 030 738 confirmed deaths worldwide as a result of being infected with COVID-19 disease; 390 of which were from Palestine (WHO, 2020). Among individuals, grief would be a common emotional reaction experienced after loss (Hall, 2014). Throughout the pandemic, a dying patient's inability to say "goodbye" to family before death due to quarantine, and a lack of family preparation for the death were associated with traumatic grief (Wallace, Wladkowski, Gibson, & White, 2020).

Good social skills were found to be positively correlated with social support and youth's well-being (Leme, Del Prette, & Coimbra, 2015; Wills & Ainette, 2012). As

social support decreased as a result of the pandemic, individuals are susceptible to higher levels of negative emotional reactions; such as grief (Jackson et al., 2020; Zhou et al., 2020). Moreover, social skills were correlated with self-regulation; self-regulated youth tended to demonstrate higher levels of socially competent behaviors and appeared to stay emotionally stable (Montroy,. Bowles, Skibbe, & Foster, 2014). As a result, the ability to self-regulate may serve as a coping mechanism toward the undesirable psychological consequences produced by the COVID-19 pandemic (Li, Yang, Dou, & Cheung, 2020). In addition, loss of social competence is sought to be a predictor of grief (Shear et al., 2011), given that social skills are considered a component of social competence (Segrin, 2000). Consequently, those who lack social skills will be at higher risk of experiencing intense grief.

With respect to this study, Palestinian youth face stress from living in a war zone, which affects aspects of family life, social relations, and leisure. It was also found to be associated with low levels of education, unemployment and poverty (Al-Krenawi, Graham, & Sehwail, 2007; Mahamid & Bdier, 2020). Moreover, youth who live in conflict settings risk exposure to ongoing traumatic events, such as witnessing bombardment of buildings, the killing of people, watching mutilated bodies, and so on (Alibwaini & Thabet, 2019). This, coupled with the effects of the COVID-19 pandemic places Palestinian university students in a precarious position to experience negative emotions, such as grief.

Social skills and resilience

Resilience can be defined both as a personal trait and a process. Resilience as a personal trait is the human ability to overcome, survive, or successfully adapt to a variety of adverse conditions (Pan & Chan,

2007). Resilience as a process is the capacity of a dynamic system to adapt successfully to disturbances that threaten system function, viability, or development (Masten & Reed, 2002). Resilience could also be defined as the maintenance, recovery or improvement in mental or physical health following stress, therefore, may help individuals to deal effectively with different life stressor (Noble & McGrath, 2014).

In the current study, resilience is defined as achieving positive outcomes despite challenging or threatening circumstances, coping successfully with traumatic experiences, and using positive problem-solving strategies to deal with intense grief (Zolkoski & Bullock, 2012).

Resilient youth are characterized by possessing skills such as; positive communication with peers and adults, a high degree of social responsiveness and sensitivity, empathy, a sense of humor, intelligence, high levels of self-esteem, problem-solving skills, an easy temperament, optimism, personal determination and perseverance, as well as the capacity to self-reflect (insight); understand the experiences of others (empathy); experience a high quality of life (satisfaction); have good self-esteem, confidence, social problem-solving skills and a sense of self-efficacy (Poulou, 2007). In addition, it was found that resilient youth are socially competent, as they are able to care and empathize with others, and have effective communication skills (Zolkoski & Bullock, 2012).

Current study

Palestinians have witnessed traumatic loss as a result of living in a conflict zone. Their prolonged grief have profoundly affected their mental health outcomes (Barron, Dyregrov, Abdallah, & Jindal-Snape, 2015; Thabet, Tawahina, Sarraj, & Vostanis, 2013). Despite living in a war zone, Palestinian university students reported relatively high levels of resilience; which could be due to the degree of social support, contextual components and personal skills they have access to (Abualkibash & Lera Rodríguez, 2015). Similarly, resilience and good social skills would be protective psychological factors against grief throughout COVID-19 among Palestinian university students.

The current study examines the relationship between social skills, grief, and resilience among university students throughout the COVID-19 pandemic in Palestine. Despite the importance of the study variables in question, there are a lack of studies which have attempted to test the relationship between these variables in a Palestinian context. As a result, the current study was designed to answer the following questions:

- What are the levels of social skills, grief, and resilience among Palestinian university students throughout the COVID-19 pandemic?

- Is there a significant correlation between social skills, grief, and resilience among Palestinian university students throughout the COVID-19 pandemic?

Methodology
Participants
Participants were recruited from online advertisements, e-mail campaigns and social media. The participant group was comprised of 412 Palestinian university students; 264 females and 148 males. A geographical representation of the participants showed that 58.3 percent of participants were from cities, 39.8 percent were from villages, and 1.9 percent were from Palestinian camps. With respect to

education levels, 37.9 percent of participants had a Master's degree, and 62.1 obtained a bachelor's degree. Inclusion in the study required participants to be: 1) Palestinian university students, 2) native Arabic speakers, and 3) living in Palestine during the COVID-19 pandemic. The study was submitted for review by An-Najah Institutional Review Board (IRB) and received approval before data collection. Informed consent was also obtained electronically before data collection.

Measures

All questionnaire items were translated and back translated from the original standard English version into Arabic and pilot-tested by ten Arab professional experts in psychology, counseling, and social work. They evaluated the clarity, relevance and translation of the questions in a Palestinian context. After completion of the translated draft of the questionnaires, the questionnaire was ~~then~~ back-translated into English by an independent expert in translation. The translated version was then pilot-tested among 50 Independent university students and further refined for clarity according to their comments.

Argentinean Adaptation of the Social Skills Inventory IHS-Del-Prette: The Argentinean Adaptation of the Social Skills Inventory IHS-Del-Prette is a self-reporting instrument used to assess social skills. It is made up of 38 items; each describing an interpersonal situation and a possible reaction to it. In each item, participants rate the frequency with which they behave as described in the item on a 5-point Likert-type scale, ranging from 0 (never or rarely) to 4 (always or almost always). For example, Item 1 ("I feel comfortable in a group of strangers, talking naturally"), respondents state the frequency with which they act that way. Some of the items within the inventory are

inversely worded, in these items, scores are reversed to calculate the total score. For instance, in Item 9 ("I avoid talking in public or making speeches in front of strangers"), a high frequency of this behavior indicates a deficit in social skills. When calculating the final score, a high score on the scale indicates a high level of social skills (Olaz, Medrano, Greco & Prette, 2009).

Traumatic Grief Inventory-Self Report Version (TGI-SR): The TGI-SR is an 18-item self-report measure for the assessment of symptoms of traumatic grief. The report takes approximately 5-10 minutes to complete. Participants rate the extent to which they experienced each of the 18 symptoms of traumatic grief listed the month prior to testing on a 5-point scale: 1="never", 2="rarely" 3="sometimes", 4= "frequently", 5="always". A lower item cutoff (e.g., where items rated as 3="sometimes" are also treated as a symptom endorsed) may be considered when it is desirable to maximize detection of possible grieving cases. Diagnostic conclusions based upon the TGI-SR are always provisional and are confirmed through diagnostic interviewing (Boelen, & Smid, 2017)

Resilience Scale for Adults (RSA): The RSA is a 33-item self-reporting scale that measures protective resilience factors among adults. The scale comprises five factors: Personal competence ("I know if I continue, I will succeed"), Social competence ("I can establish friendly relationships easily"), Family cohesion ("Even in difficult situations, my family is optimistic"), Social resources ("There is always someone who helps me when I'm in need") and Structured style ("I sustain my daily rules even in difficult situations"). Respondents rated items using a Likert response format with gradations from 1 strongly disagree to 5 strongly agree (Hjemdal et al., 2011).

Statistical Analysis

Means, standard deviations, and percentages were used to test the degree of social skills, grief and resilience, whereas Pearson's Correlation Coefficient was also conducted to test the relationship between social skills, grief and resilience among participants. In addition, regression analyses were performed to test the causal relationship between social skills, resilience and grief.

Findings

As Table 1 indicates, participants on average scored moderate levels of social skills, with high scores on levels of resilience and low scores on grief.

Table1: Means and standard deviations for research variables (N= 412)

Variable	Mean	S.D	Min	Max
Social skills	2.35	.31	1.65	3.76
Resilience	3.12	.43	1.88	4.00
Grief	1.34	.87	.20	4.00

As shown in Table 2, social skills were positively correlated with resilience, and negatively correlated with grief, while resilience was negatively correlated with grief.

Table2: Correlations among study variables (N= 412)

Measures	(1)	(2)	(3)
(1) Social skills	-	.32**	-.14*
(2) Resilience		-	-.36**
(3) Grief			-

*p < 0.01, **p < 0.01

Results of Table 2 showed a statistically significant positive correlation between social skills and resilience ($r = .32$, $p < .01$). The regression analysis for predicting grief (Table 3) found that social skills contributed in a way that was statistically significant towards explaining variance in grief (B =-.74, SE = .13, β = -.26).

Table3: Regression to predict grief (N= 412)

Variable	B	SE	*B*	t	p	95% CL
Social skills	-.746	.131	-.268	5.698	.000***	[-.48 - -1.00]
Resilience	-.918	.093	-.459	-9.858	.000***	[-1.10 - .73]
Gender	-.133	.088	-.092	-1.735	.080	[-. 44 - -.10]
Residence	-.120	.072	-.073	-1.650	.100	[-.26 - .02]
Degree	-.132	.074	-.087	-1.786	.075	[-.27 - 2.57]

***p < 0.001

Results in Table 2 also outlined a statistically significant negative correlation between resilience and grief (r = -.36, $p < .01$). The regression analysis for predicting grief (Table 3) found that resilience contributed in a way that was statistically significant towards explaining variance in grief (B = -.91, SE = .09, β = -.45). Finally, a statistically significant negative correlation (Table 2) was found between social skills and grief (r = -.14, $p < .05$).

Discussion

The aim of this study was to test the relationship between social skills, resilience, and grief among Palestinian university students throughout the COVID-19 pandemic.

Social skills and grief during COVID-19 pandemic

Social skills were negatively correlated with grief. These findings are consistent with previous research; demonstrating a significant, negative correlation between social skills ~~negatively~~ and grief (Segrin, 2000; Cole, Lazarick, & Howard, 1987; Nilsen et al, 2013). According to the social skills deficit vulnerability model of psychosocial problems; based on behavioral approaches to grief, poor social skills create susceptibility to developing psychosocial problems after experiencing stress (Segrin, 2000; Segrin & Flora, 2000). During pandemics, people with poor social interactional skills tend to experience a number of mental health issues, many of which appear to originate from problematic interactions with others, hence being categorized as "psychosocial" problems. The list of psychosocial problems negatively related to good social skills is extensive; issues include feelings of grief and loneliness, alcoholism, social anxiety, internet addiction, and marital distress.

Leia et al. (2020) explored the impact of COVID-19 on grief and well-being. Their results showed that social support improved social skills, which assisted people in adapting effectively to changes during quarantine. In another study, Mahamid, Veronese and Bdier (2020) investigated the relationship between feelings of fear surrounding COVID-19, mental health, and the mediating roles of social skills and support among Palestinians. Results showed that fear of COVID-19 was negatively correlated with social skills and positively correlated with mental health problems (depression, anxiety and stress).

Grief and resilience throughout COVID-19 pandemic

Results show a negative correlation between grief and resilience. The current findings are in line with previous findings demonstrating that grief correlated negatively and significantly with resilience (Barzilay et al., 2020; Shanahan et al., 2020; Yildirim & Arslan, 2020). Psychological resilience refers to the ability, outcome, or dynamic process of successfully adapting to adversity, grief, or other major stressors. Resilience may also help people cope through adverse experiences, it's considered as a dynamic mechanism used to mitigate the impact of an adverse event. It involves the interaction between internal and external protection and risk processes (Ran et al., 2020).

Karaşar and Canli (2020) explored the relationship between psychological resilience and depression among youth during the COVID-19 outbreak in Turkey. They found a negative correlation between psychological resilience and depression. Zhang et al (2020) studied the role of resilience in anxiety among patients with mild symptoms of COVID-19 in Wuhan, China. Results showed that resilience was inversely associated with anxiety and was a protective factor for both feelings of anxiety and grief. Mikocka-Walus et al (2020) investigated the association between resilience and symptoms of mental illness in a large sample of Australian adults throughout the COVID-19 pandemic, with results showing higher levels of resilience were associated with lower levels of stress, anxiety, and grief.

One possible interpretation of this study's results is that resilience does not exist exclusively on an individual level, rather, at a community level. In any societal ecosystem, there is a necessary level of shared resilience to overcome stress sors associated with COVID-19 and resume normalcy (Masten, & Motti-Stefanidi, 2020). Therefore, resilience can be seen as a mitigating factor in facing crisis and stressful situations.

Social skills, grief and resilience throughout the COVID-19 pandemic

Social skills in youth were negatively correlated with traumatic grief among university students in Palestine throughout the COVID-19 pandemic, and positively correlated with high resilience. Traumatic grief showed a significant, negative correlation with resilience among students. These findings are consistent with previous studies (Dvorsky, Breaux & Becker, 2020; Prime, Wade & Browne, 2020)

High level(s) of Social and emotional skills in youth have positive effects on their mental health throughout the COVID-19 pandemic. This include being more likely to deal with grief and stressors, better physical and mental health, and higher positive problem-solving strategies. Emotional resilience and social skills are important aspects that may assist youth in adapting to feelings of grief, the long-term mental impacts of the pandemic and future adversities. Mahamid and Bdier (2020) found that a feeling of fear towards COVID-19 was positively correlated with stress and negative mental health indicators, such as anxiety and depression.

Liu et al (2020) found that those with prior mental health concerns (depression, anxiety, and PTSD) reported more grief and worry throughout the COVID-19 pandemic, resilience was associated with low levels of depression and anxiety symptoms, social support and social skills were associated with low levels of grief and PTSD. In another meta-analysis study, Spoorthy (2020) indicated that several variables, such as poor social support, low self-efficacy and lack of resilience were associated with increased levels of stress, anxiety, symptoms of depression and grief among health care

workers throughout the COVID-19 pandemic.

Limitations

This study has several limitations, providing opportunity for future research. First, it focuses on a specific group; university students. Second, the study used quantitative data exclusively; collected through online advertisements, e-mail campaigns and social media. Third, the scales used, and their psychometric characteristics had not previously been tested with this specific population. Fourth, the methods of the present study are correlational and its results are cross-sectional. Comparative, longitudinal and experimental studies would be needed to assess the causal connection between study variables.

Conclusion

The current study supported previous findings; demonstrating that social skills negatively correlate with grief, and positively correlate with resilience. Moreover, resilience was negatively correlated with grief among university students in Palestine throughout the COVID-19 pandemic. The current study contributes to the theoretical understanding of how these study variables are related; it also offers practical implications. For instance, improving resilience and social skills among Palestinian university students may contribute to effective coping mechanisms for grief and stress as a result of COVID-19. Further studies are recommended to test the relationship between current study variables and other related variables such as, wellbeing, social support and psychological adjustment.

Compliance with Ethical Standards

Conflict of Interest

The authors declare that they have no conflict of interest. No funding was received for this study.

Ethical Approval

All procedures performed in this study involving human participants were in accordance with the ethical standards of University's Research Ethics Board, the American Psychological Association (APA, 2010) and with the 1975 Helsinki Declaration.

Informed Consent

Informed consent was obtained from all participants

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