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Unemployment and Resilience

The role of optimism in perception of lack of health

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Abstract

This study was performed with the purpose of testing a relationship between optimism and perception of lack of health, as well as its mediation through resilience, in the context of recurrent unemployment. To reach this study goal, research was conducted by using face-to-face and online questionnaires, which were filled by 298 Portuguese unemployed individuals. The sample is composed by different genders, marital status and levels of education; and responses were collected in several different locations. Results confirm that optimistic individuals easily use challenges of being a high number of times unemployed to increase their repertoire of resilience, and by developing their alternatives to cope with adversity, they decrease their perception of lack of health. Furthermore, this study's results showed that low optimism difficulted the transformation of unpleasant situations into resilient attitudes, which leads to a higher perception of lack of well-being. Practical implications are discussed by highlighting the urgency in developing differentiated interventions to act upon both types of traits.

Keywords: unemployment; optimism; resilience; well-being.

Introduction

According to Horizon 2020 Societal Challenges, it is considered imperative to strike against inequalies and intensify social integration in the context of unemployment. Unemployment in Portugal, in 2015 (PORDATA, 2016), reached 12.4% and is becoming one of the main social issues that particullarly affects the unemployed individual and also his or her family (Moorhouse & Caltabiano, 2007). The present study aims on developing research, among unemployed Portuguese individuals, on the importance of optimism and resilience and their influence in the personal perception of lack of health. Resilience is a "positive psychological capacity to rebound, to 'bounce

back' from adversity, uncertainty, conflict, failure, or even positive change, progress and increased responsibility" (Sweetman & Luthans, 2010) and it is assumed to explain how individuals cope with unemployment events. Indeed, research has demonstrated that in spite of being subject to equal or similar environmental conditions, individuals have considerably different psychological, physical and behavioral responses (Mäkikangas & Kinnunen, 2002) to adversity conditions; they cannot control the occurance of stressfull and challenging situations in their lives, but can decide how they will respond to pressure and the impact of difficult moments in the future. Furthermore, "optimists are people who expect good things to happen to them; pessimists are people who expect bad things to happen to them" (Sweetman & Luthans, 2010) and it is commonly accepted that individuals with positive perceptions of the environment and their lives tend to relativize their lack of health (Jibeen, 2013; Ring, Jacoby, Baker, Marson, & Whitehead, 2016). Furthermore, earlier research had demonstrated that optimism is positively correlated with resilience, while people who feel that they have control over their future outcomes usually adopt coping strategies to deal with adversity events (Barkhuizen, Rothmann, & R. van de Vijver, 2013). Additionally, in light of studies from Souri et al. (2011), resilience seems to be positively associated with psychological well-being; and Sojo et al. (2011) showed that resilient individuals are capable of enjoying well-being in spite of extended periods of unemployment. It is crucial to continue investigation regarding resilience in unemployment, since considerable funds are being invested to support unemployed people but psychological damage and unemployment rates continue to grow (Moorhouse & Caltabiano, 2007).

To my knowledge, the impact of being unemployed a significant number of times in resilience had never been studied before; as well as the effect of passing through this type of obstacle too many times in perception of lack of health. Several studies have already analized the impact of

being unemployed for a long period of time in individuals' resilience, yet their reaction to and overcomig of recurring unemployment hasn't been investigated so far. When individuals see themselves repeatedly unemployed, they are being constantly forced to deal with the same type of pressure; and persistently suffering the same pain caused by the same type of adversity. This will dramatically impact their resilience, which is aligned with their perceptions of future outcomes. As such, the present study proposes that optimistic individuals, after facing unemployment several times, gain the capacity to enhance their resilience; and by doing that will reduce their perception of lack of health (Figure 1).

After this section, the study will present the Literature Review and Hypotheses, Methodology, followed by the Results and Discussion – which will include the limitations of the study and further research – and final remarks.
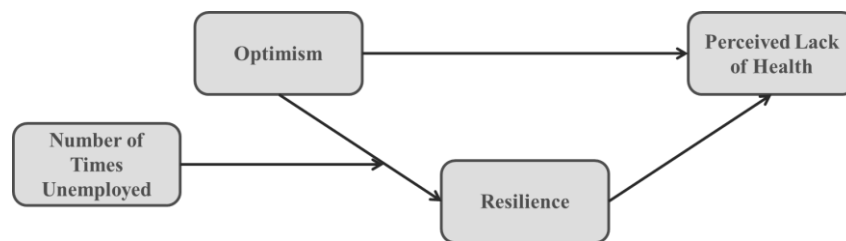

Figure 1 – Research Model.

Literature Review and Hypotheses

"Job loss is a life event in which paid employment is involuntarily taken away from an individual" (McKee-Ryan, Kinicki, Song, & Wanberg, 2005). Prior research showed that unemployment decreases an individual's self-esteem (Vansteenkiste, Lens, De Witte, & Feather, 2005; Mäkikangas & Kinnunen, 2002), affects his or her physical and psychological well-being (McKee-Ryan, Kinicki, Song, & Wanberg, 2005) and increases fellings of meaninglessness,

worthlessness and social isolation (Vansteenkiste, Lens, De Witte, & Feather, 2005). Furthermore, negative health effects increase family dysfunction (Lai & Wong, 1998) and promote depression (Moorhouse & Caltabiano, 2007). McKee-Ryan et al. (2005) highlighted the negative effect that unemployment has in employees' psychological and physical well-being, as well as how reemployment increases their perception of well-being.

Psychological or subjective well-being is a multidimentional construct that "reflects the extent to which people think and feel that their life is going well" (Jiang, Yue, Lu, Yu, & Zhu, 2015); which emcompasses the concept of life satisfaction, that "refers to peoples' global evaluation of the quality of their life" (Jibeen, 2013). Individuals' perception of their lack of health is influenced by his or her personality and beliefs regarding health, illness, risk, threat, locus of control and dominant coping style (Barkhuizen, Rothmann, & R. van de Vijver, 2013; Dosedlová, et al., 2015). Individuals' health threat perception depends on personal beliefs regarding their vulnarability to negative situations and the severity of their outcomes (Hevey & French, 2012).

Optimism and Perceived Lack of Health

Optimism can be broadly characterized by an individual's generalized positive expectation concerning future outcomes (Fowler & Geers, 2014; Lai & Wong, 1998). This fairly stable trait contributes to a more positive assessment of stressful situations, influencing individuals' reaction in adverse contexts as well as to several health outcomes (Scheier & Carver, 1992; Hevey & French, 2012; Barkhuizen, Rothmann, & R. van de Vijver, 2013). Furthermore, optimism describes an individual's predisposition to have confidence in the likely absence of negative events and in the forthcoming experiencing of comparatively favorable outcomes; for example, optimistic individuals tend to expect success from job responsibilities and tasks while pessimists approach challenges nervously. Moreover, in the work context, optimistic individuals tend to have faith in

individual accomplishment and not necessarily in group or organizational results success (Sweetman & Luthans, 2010).

A large number of case and longitudinal studies have highlighted the impact that optimism has on individuals' perceptions of their lack of health or how it mediates their judgements of their personal well-being, in different subjects: Barkhuizen et al. (2013) emphasized an optimistic individual tends to feel less depressed and showed that optimism has an indirect effect on burnout and ill health; Baker et al. (2016) indicates that the concept of optimism is the one that better predicts mental health and perceptions of quality of life, and Dosedlová et al. (2015) and Feldt et al. (2004) were able to associate that people who trust they can control their future are the ones showing superior mental health and physical well-being. Moreover, Jibben (2013) presented that when people are emotionally connected with negative thoughts are less likely to feel satisfied with their lives, which leads to a psychological maladjustment and lower physical health. According to Hevey and French (2012) people with high optimism underestimate the importance of health information; they are less concerned in learning about contraception and take more risks. Optimism was also investigated in a group of women that recently had a child as well as in a group of men who passed through a coronary artery bypass surgery; studies revealed that this characteristic diminishes the possibility of women feel depressed in postpartum or men feel depressed after the surgery, plus optimistic people reported having a greater quality of life (Scheier & Carver, 1992). A study among a group of undergraduates in their first semester in college was also conducted, and revealed that believing in a favorable future could decrease psychological distress (Scheier & Carver, 1992). Previous research reflects that men with high self-esteem and who hope to experience positive outcomes in the future are less expected to feel emotional exhaustion and mental distress; besides, optimism is the only characteristic that moderates the relationship between

work pressure and women's mental distress (Mäkikangas & Kinnunen, 2002).

According to the research mentioned above, it is expected the following:

Hypothesis 1: Optimism will be negatively correlated with perceived lack of health.

Mediation by Resilience

Resilience is a dynamic process generally defined by the capacity to bounce back or recover when facing significant unpleasant and hard conditions (Ruiz-Robledillo, De Andrés-García, Pérez-Blasco, González-Bono, & Moya-Albiol, 2014); and the aptitude to adjust positively to the demands of stressful, challenging and risky circumstances (Griffith & West, 2013). Likewise, resilient people tend to be skilled in assembling personal and social resources to effectively coping with threats generated by their interaction with the environment (Mak, Ng, & Wong, 2011), therefore being able to protect themselves and retain their mental health (Ring, Jacoby, Baker, Marson, & Whitehead, 2016). Individuals who are capable of developing a resilience trait, usually are also highly talented in characteristics such as self-efficacy, confidence, determination and self-esteem, which helps them maximizing their psychological well-being (Mak, Ng, & Wong, 2011).

Optimism and resilience high connection has been observed through different ways. People with positive emotions tend to analyze alternatives to overcome challenging situations and dynamically act instead of adopting disengagement, avoidance and denial attitudes, since they feel they are able to control future outcomes (Barkhuizen, Rothmann, & R. van de Vijver, 2013; Hevey & French, 2012; Fowler & Geers, 2014; Mak, Ng, & Wong, 2011). Jibeen (2013) and Souri et al. (2011) displayed that in unsafe and tense situations, resilience often comes accompanied with optimism, particularly in adolescents. Individuals with high optimism have a tendency to plan problem-focused coping and emotional-focused strategies (as positive reinterpretation and humor) under

pressure circumstances, which confers them a better social adjustment, decreases anxiety and benefits their psychological and physical well-being. This was noted in populations of unemployment (Sojo & Guarino, 2011), stressful college environments (Scheier & Carver, 1992), breast cancer and coronary patients and in gay men at risk of AIDS (Lai & Wong, 1998). Optimistic employees with high resilience not only used effective approaches in times of adversity, but also approached those moments as a challenge that could make them grow (Mäkikangas & Kinnunen, 2002).

Previous research showed that high resilience is negatively associated with psychological distress and is favorable to psychological well-being, and so negatively associated with perception of lack of health (Ifeagwazi, Chukwuorji, & Zacchaeus, 2014; Souri & Hasanirad, 2011). Moreover, the possibility of feeling depressive increases in individuals with lower resilience, who appraise their environment in a negative form and who believe that they have no control over their future outcomes (Sojo & Guarino, 2011). Furthermore, for women with lower resilience it is more difficult to manage stress of an abortion, which decreases their psychological health. Mak et al. (2011) exposed that resilience could help college students adapting to difficulties, in self-acceptance and in increasing their subjective well-being. Still, it was found that the relationship between resilience and well-being could be mediated by optimism (Mak, Ng, & Wong, 2011). Optimism was also associated with the use of coping strategies to deal with the negative impact of unemployment in people's lives (Lai & Wong, 1998).

As such, it is expected the following:

Hypothesis 2: Resilience mediates the relationship between optimism and perceived lack of health.

Moderation by Number of Times Unemployed

Being a higher number of times unemployed or remaining unemployed for longer periods is a huge adversity that affects individuals' lives in several aspects; self-esteem tends to decrease, they start doubting their self-worth, managing family issues gets harder and directing personal and environmental resources in order to overcome these challenges reveals itself to be a difficult task. Earlier research used psychological theories such as expectancy-value theory, learned helplessness theory and attribution theory to explore the unemployment theme, which made possible to understand better the suffering and damage that losing a job and searching for a new one could have in an individual (Vansteenkiste, Lens, De Witte, & Feather, 2005). Sojo et al (2011) identified a relationship between resilience and long-term unemployment mediated by detachment coping, which showed that individuals with high resilience are capable of managing difficulties and making decisions on important issues and still feel satisfied with their accomplishments regardless the time they had been unemployed.

Unemployment is considered one of the major sources of adversity in adulthood. Existing studies in the area of unemployment focus on the length of unemployment and neglect the number of times an individual passed through this stressful situation. Accordingly, with learned helplessness theory and attribution theory (Vansteenkiste, Lens, De Witte, & Feather, 2005), it is expectable that relapse in unemployment could be an important indicator of greater adversity and impact unemployed individuals' capacity to construct and extend their resilience. Thus, unemployed individuals who show high levels of optimism will have a superior ability to mobilize their resources in the different conditions of difficulty, and therefore reinforce their resilience, strength and well-being. Hard times compel individuals to collect information and insights to increase their broad and diversified repertoire of practices used when responding to uncertainty

and complexity (Lengnick-Hall & Beck, 2005). When unemployed individuals are more pessimistic, they tend to be less capable of dealing with adversity; and so, they use more avoiding and disengagement strategies and are more likely to feel vulnerable after facing unexpected situations.

Present research give rise to the following hypothesis:

Hypothesis 3: Number of Times Unemployed moderates the relationship between Optimism and Resilience.

Finally, this study suggests that the association between optimism, resilience and perceived lack of health is conditional on the number of times unemployed. Indeed, this study proposes that optimistic individuals, when remaining a higher number of times unemployed, can increase their resilience and, consequently, decrease their perception of lack of personal health. On the contrary, low optimistic individuals who see themselves frequently unemployed are less likely to use adversity to raise their resilience which will therefore decline their perception of lack of health. Hence, it is expected the following:

Hypothesis 4: The mediated relationship of optimism and perceived lack of health through resilience will be stronger when number of times unemployed is higher.

Methodology

Sample and procedure

Two hundred and ninety-eight currently unemployed Portuguese individuals participated in this study. In this sample, 63.8% of the questioned were females. Regarding marital status, more than half of the respondents were single (52.7%), 10.4% were in a civil partnership, 22.1% were

married, 11.1% were divorced and 3.7% were a widow or widower. Concerning education, 2.7% of the population only attended school for 4 years, 3.7% for 5 or 6 years, 11.7% for 7 to 9 years, 35.6% had been there for 10 to 12 years, 3.4% of individuals reported university frequency, 2.7% had a bachelor's degree, 29.2% had an undergraduate degree, 10.1% had a master level, 0.7% attended a post-graduation, and 0.3% of the population had a PhD. Regarding the number of times individuals had been unemployed before, the majority reported that this was the first time they lost their job (40.6%), 29.9% had only previously lost their job once, 15.1% had been twice unemployed earlier, 8.4% had already been three times without a job, 3.7% four times, 1.0% five times, 0.7% six times, and finally 0.7% had at the moment been 10 times unemployed. This sample has an average age of 35.8 years (standard deviation = 12.0). The data collection was performed face-to-face (150 responses) and online (148 answers). Besides that, in both cases the questionnaires included Portuguese version of the measures. A back-translation was applied to the scales used for the first time in Portuguese (Brislin, 1980). Surveys were personally collected in places such as unemployment centers, hospitals, malls, universities (in lectures dedicated to the unemployed) and even in the middle of the street. Furthermore, questionnaires distributed to currently unemployed individuals contained a cover letter where the researcher's affiliation was explained; and in which they were informed that participation was voluntary, confidential and anonymous. Lastly, identification was made using codes.

Instruments

Optimism

Optimism was evaluated using Psychological Capital Questionnaire (PCQ) scale (Luthans, Avolio, Avey, & Norman, 2007), with answers on a 5-point Likert scale from 1 (totally disagree) to 5 (totally agree). The measure was composed by 6 items and one example of those items is "I

am optimistic that I will find a job" (Cronbach's α = .83). Only the negative item "Sometimes, I get stuck to my problems and I cannot see a solution" was corrected from a 1 (totally agree) to 5 (totally disagree) scale.

Resilience

Resilience was measured using 20 items from Connor-Davidson Resilience Scale (Manzano-García & Calvo, 2013). Examples of items are "I am able to adapt to change" and "I am not easily discouraged by failure" (Cronbach's α = .94). Participants answered to the questionnaire based on a 5-point Likert scale ranging from 1 (totally disagree) to 5 (totally agree). None of the items were reversed.

Perceived Lack of Health

Perceived Lack of Health was measured with 12 items from the 12-Item General Health Questionnaire, each one measuring how severe a mental problem could be (Sánchez-López & Dresch, 2008). An example item was "Felling unhappy and depressed" (Cronbach's α =.85). Items were scored using a 4-point Likert scale ranging from 1 (never) to 4 (always). 5 positive items had been reversed from 1 (always) to 4 (never), in order to be aligned with negative items.

Statistical Analysis

To test the hypotheses presented, a regression-based path analysis was performed using PROCESS software, a computational tool for estimating and probing interactions and the conditional indirect effects of moderated mediation models (Hayes, 2013; Preacher, Rucker, & Hayes, 2007). Process is a SPSS software macro that allows the test of the indirect effects ab, with a normal theory approach (e.g., the Sobel test) and with a bootstrap approach to calculate Confidence Intervals (CI). MacKinnon, Lockwood, and Williams (2004) recommend

bootstrapping. Through the application of bootstrapped CIs, it is possible to avoid power problems introduced by asymmetric and other non-normal sampling distributions of an indirect effect. Hypotheses were tested in two interlinked steps. First, a simple Model 4 was examined in PROCESS using 10000 bootstrap samples, 95% bias-corrected bootstrap confidence intervals for all indirect effects. This model also incorporates the multistep approach proposed by Baron and Kenny (1986). Second, the proposed moderator variable was integrated into the model (Hypothesis 3) and the overall moderated mediation hypothesis was empirically tested (Hypothesis 4). Accordingly, the procedures used to test Hypotheses 3 and 4 were integrated such that was considered the possibility of a statistically significant indirect effect being contingent on the value of the proposed moderator. To test for these Hypotheses, Model 7 was estimated in PROCESS, which accounts for a conditional indirect effect of optimism on perceived lack of health through resilience with 1000 bootstrap samples and 95% bias-corrected bootstrap confidence intervals for all indirect effects. The conditional indirect effect was analyzed at different values of the moderator variable: the mean, one standard deviation above, and one standard deviation below the mean.

Results

Descriptive Statistics

In Table 1, means, standard deviations and correlations can be observed. As expected, optimism is negatively correlated with perceived lack of health (r = -.59, $p < .01$). Further, as it was antecipated, optimism is positively related with resilience (r = .73, $p < .01$). Also accordingly with expectations, resilience is negatively associated with perception of lack of health (r = -.61, $p < .01$).

Table 1. *Descriptive statistics and study variable intercorrelations*

	Mean	S.D.	1.	2.	3.	4.	5.	6.

	Mean	SD	1	2	3	4	5	6
1. Age	35.80	12.02						
2. Gender (a)			0.10					
3. Number of Times Unemployed	1.16	1.44	0.12*	0.07				
4. Length of Unemployment (b)	20.07	27.64	0.26**	-0.03	-0.07			
5. Optimism	3.72	0.73	-0.08	0.04	-0.04	-0.11		
6. Resilience	3.85	0.64	0.04	0.02	-0.06	-0.01	0.73**	
7. Perceived Lack of Health	2.26	0.47	-0.01	-0.16**	0.06	0.12*	-0.59**	-0.61**

Note. N=298;

(a) Dummy Variable coded 0 if Female and 1 for Male; (b) in months

* $p< .05$; ** $p< .01$; *** $p<.001$

Test of Mediation

Hypothesis 1 proposed that optimism was associated with less perceived lack of health and Hypothesis 2 that this relationship was mediated by resilience. Table 2 shows that optimism was positively associated with resilience (B= .64, t= 18.45, $p <.001$). Both optimism and resilience were negatively associated with perceived lack of health (B= -.20, t=-4.81, $p<.001$; and B=-.28, t= -5.81, $p <.001$, respectively). Furthermore, it was observed a significant indirect effect of optimism on perceived lack of health through resilience (indirect effect =-.18; 95% CI from -.25 to -.10; $z = -5.53$, $\rho<.001$). Therefore, results supported hypotheses 1 and 2.

Table 2. *Mediation Model*

Steps	B	SE	t	p
Resilience regressed on Optimism (*a* path)	0.64	0.03	18.45	<.001
Perceived Lack of Health regressed on Resilience, controlling for Optimism (*b* path)	-0.28	0.05	-5.81	<.001
Perceived Lack of Health regressed on Optimism, controlling for Resilience (*c'* path)	-0.20	0.04	-4.81	<.001

Unstandardized value	Effect	SE	LL95%CI	UL95%CI
Bootstrap results for indirect effect				

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Effect through Resilience	-0.18	0.04	-0.25	-0.10

Normal theory tests for specific indirect effects (Sobel)	Effect	*SE*	*z*	*p*
Effect through Resilience	-0.18	0.04	-5.53	<.001

Note. N=298. Bootstrap sample size = 1.000. LL = Lower limit; CI = confidence interval; UL = upper limit.

Test of Mediated Moderation

Table 3 presents the results for the moderator effect of number of times unemployed (H3), and the conditional indirect effects of optimism on perceived lack of health (H4). Results indicated that the cross-product term between optimism and number of times unemployed on resilience was significant (B= .07, t= 2.33, $p<.05$).

Table 3. *Regression results for mediated moderation (Conditional Indirect Effects)*

Predictor Variable	B	*SE*	*t*	*p*
DV: Resilience (Mediator) R2 = .55 *p<.001*				
Constant	3.85	0.03	153.24	<.001
Optimism	0.64	0.03	18.66	<.001
Number of times unemployed	-0.01	0.02	-0.54	.590
Optimism X Number of times unemployed	0.07	0.03	2.33	<.05

	B	*SE*	*t*	*p*
DV: Perceived Lack of Health (Dependent Variable) R2 = .42 *p<.001*				
Constant	3.29	0.19	17.59	<.001
Optimism	-0.21	0.04	-4.95	<.001
Resilience	-0.27	0.05	-5.55	<.001

Number of times unemployed			Boot	
	Effects (1)	Boot *SE*	LLCI	BootULCI
Conditional indirect effect at = *M ± 1SD*				
Mediator: resilience				
- 1 *SD* (-1.44)	-0.15	0.03	-0.21	-0.08
M (0.00)	-0.17	0.04	-0.25	-0.10
+ 1 *SD* (+1.44)	-0.20	0.05	-0.29	-0.11

Note. N=298. Bootstrap sample size = 1.000. LL = Lower limit; CI = confidence interval; UL = upper limit.

This interaction effect is represented in Figure 2. As expected, the association between optimism and resilience is higher in individuals that have been unemployed a higher number of times. When they have been unemployed fewer times, optimism has a weaker effect on resilience. Results indicate that the highest levels of resilience are found in individuals who report high optimism and have been unemployed more often. Therefore results supported H3.
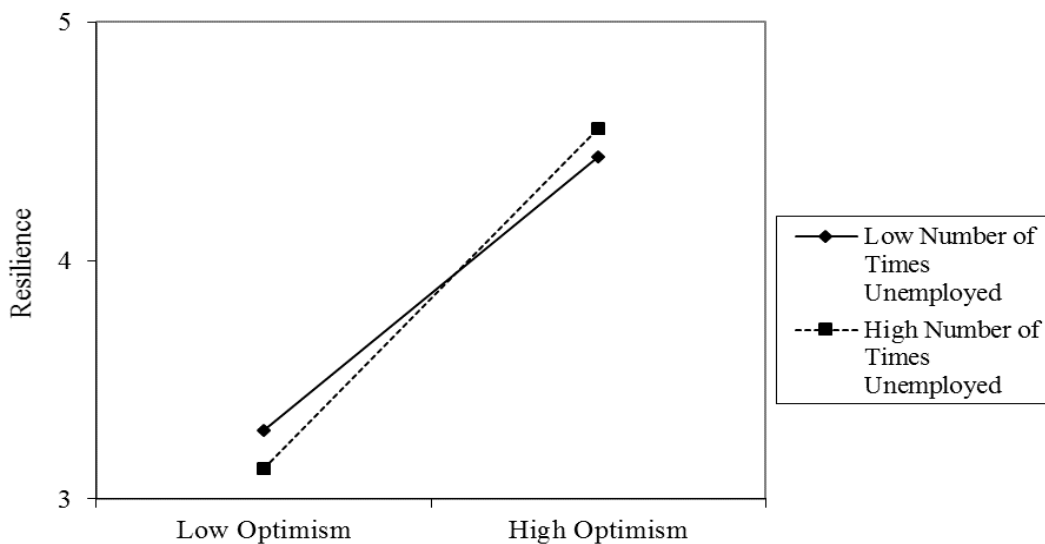

Figure 2. – Interaction effect.

Although results show that optimism interacted with number of times unemployed to influence resilience, they do not directly assess the proposed mediated moderation. Therefore, the conditional indirect effect of optimism on perceived lack of health (through resilience) was examined at three levels of number of times unemployed (Table 3): the mean (0.00), one standard-deviation above the mean (1.44), and one standard- deviation below the mean (-1.44).

Results supported a conditional indirect effect of optimism on predicting perceived lack of health via resilience when individuals reported having been unemployed more often (Table 3). Results indicated that the three conditional indirect effects (based on moderator values at mean and

+1 standard-deviation) were negative and significantly different from zero. However, the indirect effect is significantly higher for individuals who were unemployed more times. Thus Hypothesis 4 was supported, such that the indirect and negative effect of optimism on perceived lack of health (through resilience) was stronger when number of times unemployed is higher.

Discussion

This study was conducted with the purpose of understanding how optimism can reinforce an individual's repertoire of resilience when facing the pressure of being unemployed too many times, and consequently how it can influence people's perception of lack of health. Results showed that individuals who have higher optimism, when faced with losing their job a higher number of times, are capable of using those adverse and stressful moments to increase their repertoire of resilience. Therefore, by being high in optimism and high in resilience, they decrease their perception of lack of health.

This study complies with prior literature (Scheier & Carver, 1992; Ring, Jacoby, Baker, Marson, & Whitehead, 2016; Jibeen, 2013) by highlighting once more the negative effect that the optimism trait has in an individual's perception of lack of health, this time in an context of unemployment. Moreover, results of the present study replicate earlier studies about resilience (Sojo & Guarino, 2011; Lai & Wong, 1998) by supporting that resilience is a dynamic process where optimistic individuals convert adversities in a repertoire of alternatives to act each time they have to deal with an equal or different challenge. Results indicated that optimistic individuals are capable of coping with unemployment in a smoother manner. This is explained by their belief that unemployment is a temporary situation and the confidence that they can assemble personal and social resources and direct those in a way that they can control future outcomes; and so they expect that they will overcome unemployment quickly and without severe consequences in their health and well-being.

Furthermore, and in line with learned helplessness and attribution theories (Vansteenkiste, Lens, De Witte, & Feather, 2005), the results seem to indicate that optimistic people tend to attribute the blame of adverse events (such as being recurrently losing their jobs) to external causes instead of blaming themselves. This type of perception allows them to elaborate on a vast repertoire of resilience to cope with several challenges that being without a job would bring them, without giving up. This study also showed that individuals that see themselves unemployed a high number of times, that don't have a positive vision regarding their future and don't trust in their competences (e.g. low optimism), usually enter into a vicious cycle where they believe that no matter what they do, they will never overcome the unemployment situation and are more likely to see themselves without a job permanently. These beliefs will prevent them from increasing their repertoire of resilience, and they will incur more easily in avoidance and disengagement behaviors. In both extreme situations, the perceptions that individuals have regarding how well they are dealing with unemployment and about how favorable future perspectives could be will influence the perception of their health and well-being.

Previous literature has already highlighted that being long periods of time unemployed is an obstacle that resilient people can surpass (Sojo & Guarino, 2011). Nevertheless, it is crucial to go beyond the length of unemployment. As such, the present study emphasizes on the number of times unemployed, since even when individuals are unemployed for shorter periods of time, if they keep being repeatedly unemployed for small periods, they will feel constrained over and over again by the same adversity, which will impact their lives and perceptions. A huge number of people pass through this type of issue and in order to overcome that they have to stare at difficulties as challenges and use problems to build on their resilience, reinvent their ways of coping and expand their strengths. Therefore, by using number of times unemployed as moderator and establish that

this moderator could expand personal repertoire of resilience, this study underlined the importance of exploring this topic.

Limitations and Future studies

It is imperative to point out some restrictions of this study. First, this study had a cross-sectional design, seeing that data was only collected in the moment research was performed. As a longitudinal study was not implemented, it is not possible to establish causal relationships between research variables. Moreover, as the collected data didn't have temporal separation, this study results are biased by participants' perceptions of their health and of themselves in the moment they filled the questionnaire. Future studies should explore if with a longitudinal design results remain significant and also if it is possible to set a causal relationship between variables, since a wide range of factors could influence an individual's perspective in a specific moment.

Second, data being collected through self-reported questionnaires could instigate problems like common method effects. However, this study has the purpose of comprehending how participants perceived their lack of health, understanding how they usually react to diversified conditions and realize effects in their well-being and way of thinking in a repeated unemployment context; and so self-reported data appeared to be the most appropriate approach to achieve the aim of this study and appraise the variables needed. Future research should be conducted by collecting data from multiple sources, so results will not rely so heavily in self-reported data and personal opinions.

Third, the present study relies only in one specific type of population – the unemployed. Despite this selection making sense, considering the purpose of this study, future research should analyze if within a different type of population and similar pressures, building a repertoire of resilience is still encouraged.

A fourth limitation for this study is the fact that it has an unrepresentative sample. Despite the fact that data had been gathered in different places and include diversified participants, it is not enough to generalize to all unemployed individuals in the world – and not even in Portugal –, since the majority of respondents were from Lisbon. Future research could focus on a population beyond this one.

Additionally, future studies should continue to explore the impact of recurrence of unemployment in individuals, taking into account that according to each individual's personal characteristics, the effect of being constantly passing through unemployment will certainly be different.

Lastly, future studies on other personal or contextual variables could provide important insights regarding traits that could trigger the process of developing a repertoire of resilience in individuals, and further helping them to improve their well-being while coping with unemployment.

Implications for practitioners

This study provides relevant implications for practitioners, as it demonstrates that individuals deal differently with being a high number of times unemployed, depending on their level of optimism. Considering that individuals with lower optimism become more vulnerable in cases where unemployment is recurrent – which hinders their capacity of building on their resilience – and bearing in mind that optimistic individuals cope better with adversities of being a high number of times unemployed by increasing their repertoire of resilience; it is crucial that public and private institutions that provide support and training to unemployed focus on developing, in the perspective of positive organizational behavior, differentiated interventions adapted to individuals' personal characteristics. Interventions with unemployed individuals need to go beyond advices on building

CV's. Soft skills require more attention and working on them can boost an individual's well-being and perceptions of the future. Less optimistic individuals have other personal characteristics that could be further developed in order to boost their resilience. By working over those resources, individuals with low optimism could overcome more easily difficulties associated with regular unemployment. Public and private institutions should also act to promote optimism and resilience in individuals that already had the ability to transform harsh conditions into positive outcomes.

Conclusion

Results from this study suggest that, in a context of frequent unemployment, optimism urges individuals to increase their repertoire of resilience, which decreases their perceptions of lack of health. On the other hand, the absence of optimism instigates vulnerability that downgrades the ability to engage in resilient behaviors, and thus increases the perception of lower well-being. Outcomes of the present research alert to the necessity to put effort in finding several interventions, that could support both extreme cases and prevent withdrawal behaviors.

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