Mental well-being and significant stressful events as risk factors for negative attitudes towards life among adolescents and young adults

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Abstract

Adolescence is characterized by a variety of changes, which may have substantial implications for the identity, self-definition, and psychological characteristics of adolescents. The wide scope of changes during this developmental stage and the internal reorganization often causes them to develop new thoughts about life and death. This process can gain momentum for them, especially when they are exposed to many stressful events and when their mental well-being is low.

The present study examined the influence of self-identity and mental well-being on negative attitudes toward life among Jewish, Christian, and Muslim adolescents and young adults living in the State of Israel. The study examined the negative attitudes toward life of 437 adolescents (ages 15-18) and young adults in the emerging adulthood stage (ages 21-24), while controlling for various personal variables, such as: clarity of self-concept, the number of stressful events that the adolescents and young adults were exposed to, positive self-perception, and psychological well-

being. The study findings suggest that the lower the clarity of self-identity, the lower the self-well-being and positive perception toward life will be. As a result, adolescents and young adults may adopt negative attitudes toward life, which may lead to suicidal behaviors and suicide. The study findings contribute to a better understanding of the process of sliding into negative attitudes toward life, attitudes that may even arouse suicidal thoughts, which may encourage adolescent and young adults to commit a suicidal act. Therefore, it is sometimes possible to identify a connection between negative attitudes and stressful events, which affect clarity of self-identity. The personal identity of the adolescent and young adult and their mental well-being, which in turn may affect the level of depression and even suicide attempts. In addition, differences were found between the groups in exposure to stressful events, which affect personal well-being and negative attitudes towards life.

The article concludes with practical implications for the areas of prevention and intervention among adolescents.

Keywords: Adolescence, Stressful Events, Self-concept Clarity, Negative Attitudes Toward Life, Future Perception, Mental Well-being

Mental Well-Being

Mental well-being refers to the extent to which an individual tends to view their situation positively and feels that their needs are being met. According to Khumalo and colleagues (Wissing & Temane, 2012), the perception of mental well-being is influenced by personality traits and the living conditions in which the individual finds themselves. Accordingly, they state that social demographics affect overall psychological mental well-being. Thus, mental well-being is higher among individuals living in cities, working, educated, and married. In this context, the extent to which an individual feels social support is of great importance. According to Wodka and Barakat (2007), social support contributes to an individual's personal

well-being by providing coping resources and optimism and significantly alleviating coping with a stress-inducing living environment and negative life events. Heisel and Flett (2004) also found that meaning in life contributes to mental and physical well-being, while a lack of meaning can lead to pathology and suicide. In a recent study involving 520 Japanese students, it was found that self-identity formation indicates psychological well-being (Sugimura et al., 2016). Additionally, in research conducted by Braun-Lewensohn and colleagues (Roth, Sagy, & Braun-Lewensohn, 2011) among adolescents belonging to Jewish, Islamic, and Druze cultures, it was found that those with higher mental well-being cope better when faced with stress-inducing events, including terror events (Braun-Lewensohn et al., 2009). Kakounda-Muallem (2013) noted that an abundance of stress-inducing events leads to lower mental well-being and more negative attitudes towards life. Strandheim et al. (2014) found that low mental well-being indicates a higher prevalence of negative attitudes towards life, increasing suicidal risk (Depue & Slater, 1981). Researchers have also reported that negative attitudes towards life result in lower mental well-being (Keyes & Ryff, 1995). Another study found that adolescents with high mental well-being reported more adaptive functioning and more positive attitudes than those reporting lower mental well-being. Furthermore, there were no reports of pathological symptoms among adolescents with high mental well-being (Huebner & Gilman, 2006).

Stress Events

Stress events are extreme situations, such as stress, frustration, threat, and conflict, but also great joy or excitement. In such situations, all bodily and mental systems mobilize for a supreme effort to overcome the difficulty (Aylon & Hadad, 2000). Studies have shown that the level of psychological distress resulting from a threatening event increases as the perceived threat associated with that event rises (Dekel & Kutz, 2006). Any event requiring adaptation and re-adjustment constitutes

a stress condition, whether it is attributed a positive or negative value (Anders et al., 2003; Frazier, Jackson, Williams, & Torres, 2012). Even an event to which a person is indirectly exposed can create a sense of stress, but the level of stress will be higher when the person is directly exposed to the event. Moreover, many studies indicate that the feeling of stress in response to exposure to stress-inducing events can lead to decreased work efficiency, health problems, depression, and other physical and mental phenomena (Meyer, 2008; Seidman & Aber, 1993; Fresco et al., 2007). Craighead and Rytwinski (2007) found that exposure to negative life events is associated with increased levels of depression among students, and Portzky et al. (2005) found that youth who committed suicide experienced stress-inducing events shortly before their death.

Future Perception

Future perception refers to an individual's expectations of the future—whether they will be happy or unhappy—since a positive perception of the future indicates a positive meaning attributed to life and optimism, which come with feelings of power and the desire to live (Kakounda-Muallem, 2002). In contrast, a negative perception of the future indicates a negative meaning attributed to life and a reluctance to live (Mukhtar-Greenstein, 2007). According to Klinger (1977), when a person claims that their life is meaningful, they refer to the experience of emotional involvement in interpersonal relationships, a sense of uniqueness, and emotionally valuable activities. Conversely, a person who sees their life as meaningless feels they cannot realize valuable goals or that those goals have lost their significance. Hepburn and colleagues (Williams & Barnhofer, 2009) noted that most people believe the future will be more positive than negative and that most have hope for the future. However, there are those characterized by a depressive mood whose beliefs about the future are negative. The researchers added that a low positive expectation of the future leads to feelings of hopelessness. A person's stance regarding the future is influenced by

the extent of their belief in the likelihood of encountering good or bad events. Negative attitudes towards a person's future weaken their ability to continue managing their lives (Levi-Belaz, 2016), which can lead to exacerbated feelings of helplessness. These feelings may accelerate the choice of suicide as the only escape from distress (Farooqi, 2004).

Suicidal Behavior

Epidemiological studies indicate that suicide attempts and suicides are the leading causes of premature death among young people in Western society (Apter & King, 2003). Jamison (2000) found that in the United States, suicide is the third leading cause of death among adolescents. In recent years, the risk level for men to commit suicide before the age of 25 has increased by 260%. According to a recent report by the Council for Child Welfare, there has also been an increase in the number of suicides attempts in Israel: 773 children and adolescents arrived in emergency rooms in 2016 after a suicide attempt, of which 608 were girls, nearly four times the number of boys (Berman, 2017).

Due to the increase in the number of suicides attempts in Israel and worldwide, we must consider the variability arising from different ethnic and cultural backgrounds, such as the relationship between life events, negative attitudes towards life, subjective feelings, and suicidal thoughts. Therefore, I believe there is a place to investigate differences in subjective feeling systems among adolescents and young adults from different groups in Israeli society.

Studies examining suicide rates in Israeli society and comparing Jewish and Arab populations have shown that suicide rates are higher among Jews and that suicide rates among men are higher than among women. In a study conducted by Kakounda-Muallem and Israelashvili (2015) among Arab adolescents, it was found that suicidal thoughts are more common among girls than boys, which aligns with the situation in

Israel and the Western world. In another study by Klomek et al. (2016), it was found that the rate of suicide attempts among Jews is 89.8 per 100,000 people, while among Arabs, the rates are as follows: Muslims - 84.8, Bedouins - 72.4, Druze - 64.9, and Christians - 58.6. This study also revealed that suicide attempts are higher among women in all groups and that between the ages of 15-24, suicide attempts were higher among Muslim women, Bedouin women, and Druze men. It should be noted that in another study addressing cross-cultural differences, the researchers believed that gender and cultural affiliation influence the assessment of suicidal risk. Furthermore, it was found that Arab girls had higher levels of both suicidal thoughts and suicide attempts, their mental distress was higher than that of Arab boys and Jewish boys, and they were more sensitive to suicidal behavior when experiencing depression. It should be emphasized that these results were discussed on one hand in the context of Arab girls belonging to a minority group in Israel, and on the other hand, in the context of their status as women in patriarchal Arab culture (Benator, Glazer, & Nakash, 2017).

In a study by Forte et al. (2018), it was found that immigrant women from South Asia and Africa had the highest risk for suicide attempts. Other factors influencing this include language barriers, concern for family, separation from family, lack of information about the healthcare system, loss of status, and loss of social and cultural networks.

Despite cross-cultural differences, adolescents considering suicidal behavior share universal characteristics: they experience more stress than other adolescents, and this stress manifests in negative life events, early losses, negative social support, and limited resources (Tuisku et al., 2009; Murphy, 1992). For example, Horesh et al. (2003) found that young people who attempted suicide reported stress-inducing events in the 12 months preceding the suicide attempt. Additionally, it was found that depressed adolescents with low family support develop stronger intentions to

harm themselves, as they have difficulty coping with depressive states and consume alcohol more than other adolescents (Tuisku et al., 2009). Finally, in the research of Kakounda-Muallem and Israelashvili (2015), general findings shared among all adolescents in the developed world were identified, such as stress, school maladjustment, lack of optimism, and a sense that life lacks meaning, factors that contribute to the development of suicidal thoughts. The research also revealed that religious adolescents tend to develop suicidal thoughts less than secular adolescents.

Self-Identity Clarity as a Central Task in Adolescence and Emerging Adulthood

For most young people, the period of adolescence is an exciting and intense time. However, this period is also filled with many emotional and developmental challenges, including the awakening of sexual drives, a strong need for intimacy, and the beginning of emotional separation from the family; all of these evoke intense anxieties, conflicts, confusion, and suffering (Chen-Gal et al., 2007). Researchers have noted that school provides adolescents with countless experiences with peers, through which their personal identity is shaped and developed in all its aspects (Brown, 2013). Additionally, during adolescence, the ego weakens relative to the id due to a renewed surge of sexual drive and the rejection of parental support, which was more accessible until then. Therefore, this period is also characterized by negative manifestations such as helplessness, despair, anger, weakness, and worthlessness, all representing feelings of abandonment and withdrawal (Blos, 1970).

However, in a broader developmental perspective, it should be noted that self-concept clarity has a significant impact beyond the functioning characteristics of adolescents, as it is reasonable to assume that the level of self-concept clarity will largely shape the individual's behavior in the subsequent developmental stage,

known as "emerging adulthood" (Arnett, 2002). This assumption is based on the definition of the essence of the emerging adulthood stage: according to Arnett (2002), adolescents (ages 14-18) acquire general connections and superficial experiences in all areas of life. In contrast, during emerging adulthood, young adults (ages 18-25) are no longer dependent on childhood and adolescence and are still not in a state of responsibility. This group does not see itself as adolescents, and many do not even see themselves as independent adults. They do not label this period as anything, in the sense of "in between." They struggle to internalize the fact that they have reached adulthood before completing their education, getting married, and integrating into practical life. That is, they have defined for themselves preliminary and general outlines regarding their complete and clear self-identity, and now they seek opportunities to examine the outlines they have adopted concerning various topics and developmental tasks in life, love, work, and worldview. Very little of the future seems clear, yet many opportunities exist. The very fact that they have not yet established their own families allows them to be more updated and more easily adaptable to changes in the technological world, thereby achieving a new basis of status.

According to Arnett (2002), adolescents who reach the stage of emerging adulthood without a clear self-identity are likely to behave differently from those with a clear personal identity. Therefore, this study focused on adolescents and young adults. Due to the complexity of the situation at these ages, they may be during a developmental process and self-formation in terms of experiences and self-maturity. This process may influence them towards forming negative attitudes towards life, particularly depending on their affiliation with different cultures, their exposure to stress-inducing events, and their personal well-being.

Research Purpose

The study examined the relationships between subjective thoughts and personal background of adolescents and young adults belonging to three different ethnic groups—Jews, Muslims, and Christians—and their negative attitudes towards life. Its purpose was, on one hand, to examine the effect of stress-inducing events and mental well-being on negative attitudes towards life, and on the other hand, to investigate whether the difference in personal identity clarity is reflected in the degree of exposure to stress-inducing events, and whether personal identity clarity and exposure to stress-inducing life events affect negative attitudes towards life. These attitudes precede the emergence of suicidal thoughts, which in many cases will lead to suicidal actions and suicide.

Research Questions

The research questions are as follows:

1. How do negative life events, mental well-being, and self-concept clarity affect positivity and negativity in future perception and attitudes towards life?

2. Does future perception play a mediating role in the relationship between life events and attitudes towards life?

3. Will differences be found between the different groups?

Research Hypotheses

The hypotheses were as follows:

1. As adolescents are exposed to more stress events, their perception of the future will be less positive, and their negative attitudes towards life will increase.

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2. Adolescents who report high mental well-being will report lower levels of negative attitudes towards life and more positive future perceptions than adolescents who report low mental well-being.

3. As adolescents report higher clarity of self-concept, their perception of the future will be more positive, and their negative attitudes towards life will decrease.

4. Among adolescents and young adults from the Arab population—Muslims and Christians—higher levels of negative thoughts and lower levels of positive future perception will be found compared to Jewish youth.

5. The relationship between stress events and self-concept clarity with negative attitudes towards life and positive future perception may be expressed indirectly (mediated relationship) through the subjective well-being of the respondents.

Method Research Population

A total of 442 respondents answered the questionnaire. Of these, five provided only partial data and were excluded from the sample. The final number of respondents was 437, of which 283 were male (64.8%) and 154 were female (35.2%). The age of the respondents ranged from 15 to 26, with over 40% (43.2%) under age 18, another 30% under age 22, and the rest in the age range of 23-26. Religiously, about 45% of the respondents were Christians, 33% Muslims, and the rest Jews.

Research Tools

Attitudes Towards Life Questionnaire (Short Version)

The questions and statements in the questionnaire are designed to assess the reasons for suicide, risk behaviour, and suicidal thoughts. The original questionnaire includes 96 items, but the short version contains only 24 items—12 positive and 12 negatives.

The respondent is asked to answer yes or no to the various questions. An example statement: "I feel good because I have a life with meaning and clear goals." The authors of the questionnaire reported a reliability of .84, and previous use among respondents in Israel yielded good reliability. The measure was built based on four items in each of four domains (death, health, self-harm, and self-related factors) and three types of behaviour (positive and negative actions, thoughts, and feelings). The relationship with depression, hopelessness, suicidal behaviours, and gender differences was examined. A high classification rate was found for suicidal thoughts (sensitivity=0.86) and a high classification rate for non-suicidal thoughts (specificity=0.82). Finally, the short version was found to correspond with the long version, which consists of 24 questions (α=.82), with scores ranging from 1 to 5—higher scores indicating more negative attitudes towards life.

- **Future Perception Questionnaire (Wyman, Cowen, Work, & Kerley, 1993):**

This questionnaire is used to measure the respondent's expectations of the future. In the original version, it included an open-ended question and six closed questions; however, in the current study, the open-ended question was removed for technical reasons. The answers to each question range from "not true at all" (1) to "very much true" (5). The respondent calculates their score based on the average of their answers to all items, so a high average score for the variable "future perception" indicates a more positive and optimistic view of the future. An example item: "Do you think there will always be people and friends who care about you?" This questionnaire has been translated into Hebrew and Arabic and has been administered to Jewish and Arab respondents (e.g., Mukhtar Greenstein, 2007), and it has a reliability of .83. The validity of the questionnaire was examined, and a correlation was found between the variable "future perception" and positive expectations, as defined by Werner and Smith (1982, 1992). This questionnaire consists of six questions. The reliability of the scale is α = .79.

- **Mental Well-Being Questionnaire (Reynolds, 1998):**

This questionnaire assesses the adjustment of adolescents. The original questionnaire includes 30 questions and statements designed to determine the frequency of certain behaviors or feelings occurring in the six months prior to completing the questionnaire. For the purposes of the research, we removed two items specifically related to adolescents and adapted three items for adolescents and young adults. Respondents are asked to rate each of the behaviors or emotional responses on a scale from 1 to 3 according to their frequency. The questionnaire has been translated and also tested in Arabic, yielding high reliabilities for the four scales included - positive self-image, anger control, relationships with adults, and mood states. An example statement: "I felt very angry." In tests conducted in Israel, it was found that the questionnaire has high reliability and validity - .89, and it is very suitable for measuring adjustment difficulties and functioning of youth. Four scales of mental well-being were constructed: emotional stress scale (reliability of the scale - $\alpha = .79$), antisocial behavior scale (reliability - $\alpha = .72$), positive self-scale ($\alpha = .62$), and problems and lack of control over anger scale ($\alpha = .74$). The overall reliability of the measure was $\alpha = .89$.

- **Questionnaire Measuring Significant Stressful Events:**

For the current research, we used a questionnaire that examines negative life events experienced by people throughout their lives. The questionnaire relied on a list of various events used by researchers worldwide (such as Zitzow, 1992) and includes 25 events with a reliability of $.\alpha = .77$. The respondent is asked to answer "yes" if they have experienced a similar event or "no" if they have not experienced such an event in their life. An example item: "Death of a family member." The scale was constructed as a count of the number of stressful events that occurred in the past year. The reliability of the measure was $\alpha = .78$.

- **Background Questions:**

In addition to the above questionnaires, respondents were asked to answer background questions that were compiled specifically for the current research and tailored to their population. The questions also address the extent of exposure to "other" cultures in daily life (such as shared work or study with members of the other culture, etc.), for example: "How often do you get to meet people your age who are Jewish?"

Questionnaires Administration

The questionnaires were administered to adolescents and young adults; however, the study did not compare different age ranges.

- **Process Among Adolescents:**

After preparing the questionnaires and obtaining the necessary ethical approvals from the Chief Scientist of the Ministry of Education, a request was made to a large number of school principals to seek their permission to administer the questionnaires to students in grades 10 to 12. Although the research was approved by the Chief Scientist, many principals did not allow the researcher to enter the schools.

Once permission to enter the schools was obtained, the researcher entered the classrooms accompanied by the homeroom teachers, introduced herself, explained the subject of the research, its importance, and its contribution to their age group, and requested their sincere and relevant responses to the questionnaires that would be administered to them. The questionnaires were distributed to all students in the classes. The questionnaires were distributed in Christian, Jewish, and Muslim schools that allowed us to enter. The selected frameworks are subject to the Ministry of Education, and the classes were heterogeneous classes chosen randomly.

It was clarified that the questionnaire is anonymous, and the data processed from it would be used only for research purposes. Students were informed that they were not obligated to complete the questionnaire and that it was entirely at their discretion. They were also told that they could stop filling out the questionnaires if they felt they could not continue. The researcher was present in the classrooms with the students during the completion of the questionnaires and guided them when needed. It should be noted that there was a high response rate for completing the questionnaires, with only 3% of students refusing to participate in the research.

- **Process Among Young Adults:**

The questionnaires were administered to students of all three religions studying at Tel Aviv University, the Hebrew University of Jerusalem, and several colleges across the country, residing throughout the country. Additionally, the questionnaires were randomly distributed to ordinary citizens in workplaces to try to reach all segments of the population, not just academics. The respondents were identified as a convenience sample, and participants were selected based on their accessibility to the researcher.

During the administration of the questionnaires, the respondents were explained the purpose of the research and what they needed to do. Some responded to the researcher's request and filled out the questionnaires immediately, while others arranged a later return date for the questionnaires. The response rate among young adults was also high. Some returned the questionnaire immediately, while the others were collected by the researcher at a later date.

Statistical Analysis

The central approach to hypothesis testing is through a linear regression model, which aims to find relationships between the research variables, as outlined in the hypotheses section. Two variables have been defined as dependent variables:

positive future perception and negative attitudes towards life. The regression model tests the hypotheses as a complement to the Pearson correlation estimates between the research variables. The testing is conducted in two steps.

In the first step, background variables are presented as explanatory variables, primarily focusing on the ethnic group variable, in order to provide answers to Hypothesis C. Subsequently, in the second step, an additional relevant explanatory variable is added to test each hypothesis (A to C) separately. If it is found that the explanatory power increased significantly from the first step to the second step, we can claim that the additional variable has a significant contribution to the model.

As a preliminary introduction to the regression model, initial tests for Hypotheses A to C were performed using Pearson correlations. To examine Hypothesis D, differences between ethnic groups were tested using Analysis of Variance (ANOVA), with further investigation into mean rankings based on pairwise comparisons with Bonferroni correction for multiple analyses. Hypothesis E was tested in a mediation model, based on two joint regression models, allowing for the estimation of an indirect relationship between an independent variable and a dependent variable through a mediating variable. For this hypothesis, we used the PROCESS procedure developed by Hayes (2013). Figure 1 below illustrates the mediation model. One regression equation represents the relationship between life events and well-being concerning attitudes towards life and the future, while the second equation represents the relationship between life events and well-being. The indirect relationship is estimated from the regression coefficients, which is the product of the regression coefficients. To test the significance of this relationship, the model was examined using bootstrapping.
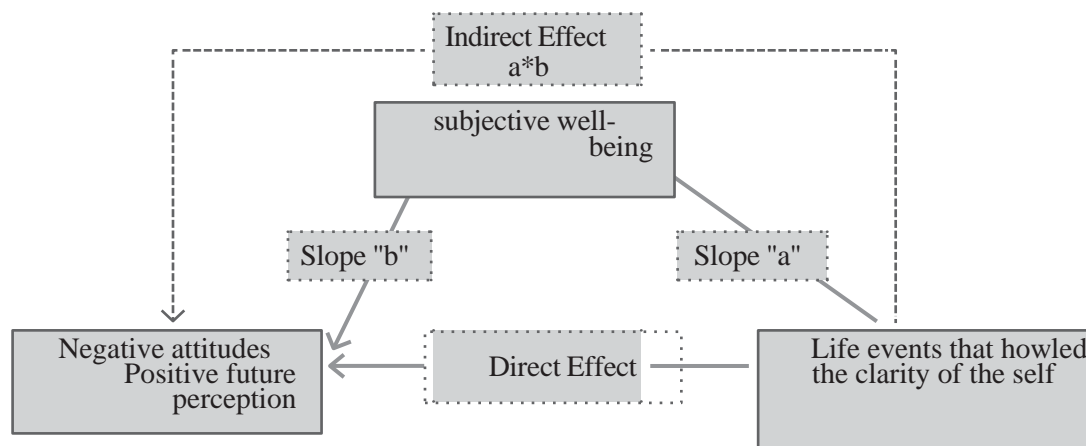
Figure 1: A basic presentation of the mediation model

Results

In order to test the four research hypotheses, Pearson correlations were performed between the explanatory variables themselves. The four hypotheses investigated were initially confirmed.

Table 1: Centrality and dispersion measures of the research indicators and Pearson correlations between the research indicators (N=437)

Number of stress events	A positive vision for the future	Negative attitudes towards life	Self-well-being	Clarity of self-concept	
				-	Clarity of self-concept
			-	.48***	Self-well-being
		-	-.56***	-.39***	Negative attitudes towards life
	-	-.56***	.38***	.22***	A positive vision for the future
-	-.21***	.31***	-.31***	-.20***	Number of stress events
10.47	3.88	2.22	2.36	3.25	average
4.68	0.65	0.51	0.29	0.71	Standard deviation
0—26	1—5	1-4	1-3	1-5	Range

***p<.001

Table 1 above presents centrality and dispersion measures for the study indicators and pairwise correlations (Pearson correlation coefficients): (a) A negative correlation was found between the number of stressful events and a positive future perception, self-concept clarity, and self-well-being, and a positive correlation was found between the number of stressful events and negative attitudes toward life; (b) Positive correlations were found between self-concept clarity and a positive future perception and self-well-being, and a negative correlation was found between self-concept clarity and a positive future perception, and a negative correlation was found between self-well-being and a negative attitude toward life and the number of stressful events; (c) A positive correlation was found between self-concept clarity and a positive future perception, and a negative correlation was found between self-concept clarity and a positive future perception, and a negative correlation was found between self-well-being and a negative attitude toward life and the number of stressful events.

Table 2: One-way univariate analysis of variance for the study variables with comparison between ethnic groups

η^2_p	F	Jews (n=94)	Muslims (n=145)	Christians (n=198)	the measure
.02	3.71*	4.01[b] (0.62)	3.78[a] (0.68)	3.89[ab] (0.63)	A positive vision for the future
04.	8.95***	2.08[a] (0.53)	2.35[b] (0.52)	2.20[a] (0.48)	Negative attitudes towards life
.03	6.60**	11.81[b] (4.71)	10.62[ab] (5.00)	9.72[a] (4.29)	Number of stress events
.006	1.25	3.23 (0.73)	3.18 (0.70)	3.30 (0.71)	Clarity of self-concept
.07	15.23***	2.47[c] (0.26)	2.27[a] (0.29)	2.38[b] (0.28)	Personal well-being

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

Note: Pairwise comparisons within ethnic groups with Bonferroni correction for multiple testing, lowercase Latin letters for group mean rankings, from lowest to highest.

These analyses were repeated again, controlling for age, and it was found that age had an effect on the level of negative attitudes towards life (p=.007) (F=7.29), and on the number of stressful events (p=.023), (F=5.23), but this did not change the comparison between the ethnic groups; that is, age had a uniform effect across all groups examined. In addition, a comparative analysis of the age variable across the ethnic groups showed that the Jewish participants were older than the Christian and Muslim participants (p<.001), (F=48.50), a difference that probably stems from the fact that Jewish students come to school after military service and are therefore older. Table 2 presents analyses of variance to examine the differences between the different groups in the sample. Differences were found between the groups in four of the five research variables examined: positive future perception, negative attitudes, stressful events, and personal well-being. The analysis shows, first, that there is no difference in the level of exposure life events between the groups, which proves random sampling. Furthermore, in principle, support is obtained for hypothesis C regarding ethnic and cultural differences that lead to different subjective perceptions and thoughts. On the other hand, contrary to what was assumed, it was precisely among the Muslim respondents that a positive future perception and psychological well-being were lower and negative attitudes were higher.

Table 3: Results of stepwise regression analysis to examine the effects of background variables, life events, and self-concept clarity on future perception and negative attitudes

Negative attitudes towards life				A positive vision for the future		Dependent variables ← Explanatory variables
□	SE	B	β	SE	B	
						Step 1
.14**	0.05	0.15	-.10*	0.07	-0.13	Gender
-.14**	0.01	-0.02	-.03	0.01	-0.01	age
.05	0.07	0.05	-.11	0.09	-0.14	Christian vs. Jew
.20**	0.07	0.22	-.19**	0.09	-0.26	Muslim vs. Jew
		.075***			.027*	R□
						Step 2 (Hypothesis 1)
.34***	0.01	0.04	-.22***	0.01	-0.03	Number of stress events
		.106***			.043***	□R□
		.181***			.070***	R□
		5,431			5,431	Df
		19.09***			6.48****	F
						Step 2 (Hypothesis 2)
-.37***	.03	-.26	.21***	.04	.19	Clarity of self-concept
		.132***			.044	□R□
		.207***			.071***	R□
		5,431			5,431	Df
		22.54***			6.64***	F
						Step 2 (Hypothesis) 3
-.54***	0.07	-0.96	.37***	.10	.84	Personal well-being
		.271***			.130***	□R□
		.346***			.157***	R□
		5,431			5,431	Df
		45.60***			16.11***	F

*p<.05, **p<.01, ***p<.001

Table 3 presents regression coefficients estimated on future perceptions and negative attitudes towards life. In the first step, the relationships between the background variables and the two dependent variables were examined, each separately, in a linear regression model. In the second step, the relationship between the dependent variables and one of the research variables, as formulated in the hypotheses, was examined in three independent repetitions. An assessment of the quality of the model was examined using two measures of goodness of fit. The first measure is the

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additional explanation provided by the model, ($\Box R^\Box$) and the second measure is the significance of the regression coefficient, or the significance of the explanation provided by the hypothesis variable. The results indicate lower levels of positive future perceptions among girls than among boys (p<.05) (B=-0.13), and lower levels among Muslim youth than among Jewish youth (p<.01). (B=-0.26). This finding is in line with the findings of the analysis of variance above and contradicts hypothesis C. Girls had less positive attitudes toward life than boys (p<.01), (B=0.15), and so did Muslim youth compared to Jewish youth (p<.05). (B=0.22). Also, older boys had fewer negative attitudes toward life than younger boys (p<.01), (B=-0.02), as also indicated by the note to the analyses of variance. The addition of the research variables to test the first three hypotheses provides support for these hypotheses, as expected from the formulation of the hypotheses. A higher level of stressful events has a negative effect on a positive future perception and a positive effect on a positive future perception. (p<.001;) B=-0.03, p<.001, B=0.04, respectively.) The more stressful life events subjects experienced, the less positive they perceived the future and developed more negative attitudes toward life, as formulated in Hypothesis A. As for the other two hypotheses, a positive relationship was found between personal well-being and self-concept clarity and positive future perceptions, with the explanatory factors being self-concept clarity and personal well-being (p<.001; B=0.84, p<.001; , B=0.19, respectively,) (i.e., the higher the levels of self-concept clarity and personal well-being, the more positive the future perception develops; and conversely, a negative relationship was found between high levels of self-concept clarity and personal well-being and negative attitudes toward life (p<.001;) (B=-0.26, p<.001 respectively.) In any case, the addition of explanatory variables significantly increases the amount of explanation provided by the model in each of the stages, with the exception of the transition from step one to step two in self-concept clarity, where the dependent variable is a positive future perception.

Table 4: The relationship between the history of stressful events and self-concept clarity and attitudes and future perceptions in the mediation of mental well-being

95% Confidence interval	Indirect effect	Independent dependent	an intermediary dependent	Independent an intermediary	dependent	an intermediary	Independent
(.01, .03)	.02* (.003)	.02*** (.01)	-.85*** (.07)	-.02*** (.003)	Negative attitudes	well-being	Number of stress events
(-.02, -.01)	-.02* (.004)	-.01* (.007)	.77*** (.11)	-.02*** (.003)	Future perception	well-being	Number of stress events
(-.21, -.12)	-.16* (.02)	-.10** (.03)	-.83*** (.08)	.20*** (.02)	Negative attitudes	well-being	Clarity of self-concept
(.10, .13)	.15* (.03)	.04 (.05)	.79*** (.12)	.20*** (.02)	Future perception	well-being	Clarity of self-concept

*p<.05, **p<.01, ***p<.001

The final part is the test of hypothesis E, which formulated the possibility that subjective well-being mediates between events and self-concept clarity and negative attitudes and future perception. Four such mediation relationships were found, which provide broad support for this hypothesis. The effect of stressful events on negative attitudes and future perception can also be explained through well-being. In the first case, if the number of stressful events is high, lower well-being is expected, and when well-being is lower, higher negative attitudes are expected. When the dependent variable is future perception, a lower level of well-being is associated with a less positive level of future perception. The definition of self-concept has a positive relationship with the level of personal well-being, and at a higher level of well-being, the relationship with negative attitudes is negative, while the relationship with future perception is positive. In estimating the mediation effect, we used the PROCESS procedure, developed for SPSS software in model 4 (Hayes 2013). The indirect correlation coefficient is calculated, and therefore, in order to assess its variance in order to determine a significance level, there are two possible tools: The first tool is the calculation of a common variance for the two coefficients that make up the

indirect relationship, as suggested by Kenny & Baron (1986). Alternatively, correlation coefficients can be estimated using bootstrapping, as was done using PROCESS. In the latter case, a full indirect effect was found, which means that the relationship between self-concept clarity and future perception cannot be explained, but rather through the mediation of well-being.

Discussion

The starting point for the current study was the recognition of negative attitudes toward life as a risk factor for suicidal behavior and suicide. The study examined the effects of self-concept clarity, self-well-being, positive self-perception, and exposure to stressful events on negative attitudes toward life. The study was conducted among Jews, Arab Muslims, and Arab Christians during adolescence and emerging adulthood. The goal was to obtain a comprehensive picture of the entire study population, and later - also to distinguish between subpopulations. The findings of the current study are innovative in these areas and support the study's claim that characteristics of personal identity clarity, self-well-being, and exposure to stressful events explain the variation in attitudes toward life, both positive and negative, which provides an additional aspect for identifying adolescents at risk of suicide and for building prevention programs.

- **Self-concept clarity and mental well-being:**

The study shows that self-concept clarity and mental well-being have a significant and direct impact on a positive future perception and a lower number of negative attitudes towards life, which indicates that an adolescent with a clear self-identity who reports high mental well-being will have less negative attitudes towards life, and will feel better about himself. A significant correlation was also found between mental well-being and self-identity clarity: high self-concept clarity indicates good

mental well-being. The conclusion is that there is a relationship between self-identity clarity and mental well-being.

Self-identity for future perception and well-being: The higher the clarity of self-identity, the more positive the future perception and well-being, and the fewer negative attitudes towards life.

Therefore, the greater the ambiguity of the self-concept, the more negative attitudes will increase. These things are consistent with the study by Zamboanga and colleagues (Zamboanga, 2009 Van, & Jarvis, Schwartz, 2009), who noted that clarity of self-concept is a protective factor against unhealthy behaviors. Also, those who manage to form an internal identity will have higher psychological well-being than those with identity difficulties, who will be perceived as stressed (Iwamoto & Liu, 2010).

Furthermore, recent studies by Larson, Sbarra, & Larson (2015) found that people with high personal identity clarity can recover emotionally easily after encountering problems. They claim that the main thing is the ability to restructure self-esteem, since people who have difficulty recovering have low self-concept clarity, but increasing this clarity reduces emotional damage and loneliness. In another study by Mittal (2015), it seems that people with low personal identity are Those who use disengagement coping styles, such as spending time shopping, as a way of coping and escaping. Other researchers have also argued that psychological well-being indicates civic engagement, and the connection between them leads to achieving authentic happiness, a meaningful life, and a positive perception of the future (Zawadzka, & Zalewska 2016). From the literature review, it can be concluded to what extent the clarity of personal identity affects the individual's mental well-being.

- **Stressful events and negative attitudes towards life:**

Stressful events may increase self-ambiguity and negative attitudes toward life, and on the other hand, the abundance of stressful events causes less psychological well-being and more negative attitudes toward life. The literature suggests that significant negative life events, as opposed to positive ones, are associated with less psychological well-being (McCullough, 2000).

By observing someone who is more exposed to stressful events, it can be concluded that the clarity of the individual's self-concept and his or her self-well-being are lower and his or her perception of the future is more negative than someone who is less exposed to stressful events, which indicates the presence of more negative attitudes toward life. In addition, positive correlations were found between self-concept clarity and a positive future perception and psychological well-being, and a negative correlation with negative attitudes toward life. Greater self-concept clarity indicates higher self-well-being and a good future perception. Alternatively, the absence of expressions of distress, i.e. high self-clarity, means high psychological well-being.

The current study also found that positive future perceptions and psychological well-being are lower among Muslims, compared to Jews. In addition, negative attitudes towards life are higher among Muslims than among Jews. These results indicate that the Muslim sector.

The person living in Israel is in distress. This distress causes an increase in negative attitudes towards life. The reason for this may stem from the Muslim society's attempt to control its members and prevent them from personal expression and choices that suit them. In addition, there is a large gap between tradition and the personal perceptions of young people. Tradition still dominates among the Muslim public, while young people, exposed to the Internet and television, want to resemble the modern society in which they live. This increases the chance of problems in their

communication with their parents and family. As a result, they feel negative feelings and their attitudes towards life are more negative than others.

These findings may indicate a higher probability that an individual in this society will have a low positive perception of the future and a high level of negative attitudes towards life; this is especially true when he encounters many stressful events, which harms his mental well-being and the clarity of his self-concept. Hence, there is a high probability that he will slip into suicidal behavior and suicide. According to Bick's cognitive approach, suicidal tendencies stem from three patterns of thinking that include negative attitudes of the suicidal individual, both toward himself and toward the world and his future. These attitudes crystallize into a feeling of continuous despair with no hope in sight, and the individual feels that death is the only solution (Carson, Botzer, & Minke, 2001, pp. 389-308). (Litman, 1967) (Gupta, who argued that following migration there is an increase in preoccupation with death and the appearance of mental illnesses, but if the individual is not exposed to a particular stressful event, there is a high probability that negative attitudes towards life will not appear in him.

In addition, high self-clarity will increase the individual's positive perception of life. This fact will increase his mental well-being and affect his personal conduct. Therefore, the impact of stressful events on him will be less, which will reduce his negative attitudes towards life. According to Cole (1985), the more difficulties there are in adapting, the greater the chances of developing a mental disorder. The study by Horesh et al. (2003) also shows that adolescents with suicidal tendencies experienced more negative life events than the control group. Similarly, Portzky et al. (2005) found that adolescents who committed suicide experienced a number of stressful events shortly before their death. Chang (2002) also examined the relationship between different levels of depression and stressful events. He showed that the lower the depression scores, the fewer stressful events the subjects reported

experiencing during their lives. In addition to these factors, a relationship was found between suicidality and For academic difficulties in high schools. Fresco et al. (2007) found that exposure to negative life events is associated with increased levels of depression among students.

The findings of the current study indicate that in order to understand the attitudes and thoughts of adolescents and young adults, it is necessary to delve deeper into understanding the psychological and sociological characteristics of each of them. It is also important to consider the stressful events to which they were exposed, as the events are related to life satisfaction, well-being in life, and perception of the future, as well as positive and negative attitudes toward life. In addition, the study shows that the relationship between high self-concept clarity and high self-well-being and a smaller number of negative attitudes toward life, as well as the relationship between stressful events and higher levels of identity confusion and negative attitudes toward life, are universal, and not local and society-dependent.

The components mentioned above, and especially the situations in which adolescents and young adults encountered stressful events, influence their attitudes toward life. and death. They report the effect of negative events on engagement in risky behaviors (et Auerbach et al., 2010), meaning that stressful events have an effect on negative attitudes toward life, and this effect cannot be ignored. In conclusion, although studies have been conducted on personal identity and cultural identity among various populations and sectors around the world and in Israel, no studies have yet been conducted on the relationship between the effect of self-identity and mental well-being on negative attitudes toward life among Jewish, Christian, and Muslim adolescents and young adults living in the State of Israel. In addition, no comparison was conducted between the different populations in the State of Israel, so the current study revisits these areas and emphasizes the differences between the different populations.

- **Limitations of the study and suggestions for further research**

The current study has several limitations: The first limitation is the manner in which the questionnaires were administered - they were administered to the entire Jewish population, without distinction between different ethnic groups, country of birth and previous place of residence.

This situation created an overall picture of this population, without a unique examination of each group or ethnic group separately. In addition, we did not address the factor of immigration in the study - whether the adolescent was born in Israel, and if not - when he immigrated to Israel. The questionnaires were also administered to the Arab Muslim and Arab Christian populations without distinction between different ethnic groups, previous place of residence (moving from a village to a city), new citizenship, and parents of different origins. This requires greater awareness of the differences within the Jewish, Christian, and Muslim groups. This issue is significant for understanding self-identity, mental well-being, and negative attitudes toward life, as Calderon (2000) states: "Israel is a country of immigrants. It has many people who were displaced from their place of birth in the distant or recent past, and as a result, this population is full of ruptures that generally cannot be healed." Another limitation was the failure to measure and investigate the depression variable, which is an important variable that has an impact on negative attitudes toward life.

Following the above, there is room to expand the research and conduct several additional studies that would include Arab adolescents and young adults of all kinds and from all geographical areas in Israel, and the differences between all subgroups, such as: Bedouin adolescents and young adults from the Negev region and the north of the country, Arab adolescents living in Arab cities, Arab adolescents - Christian, Muslim, and Druze - living in the same area, Christian adolescents from different communities, Druze adolescents, Jewish adolescents from different communities, adolescents from families with a medium socioeconomic status and adolescents from

poor families, Arab adolescents living in villages near Jewish concentrations and adolescents living in remote villages. It is also recommended to address the differences between ages.

If such large-scale studies are conducted, it will be possible to obtain a reliable and true picture of the personal identity and attitudes toward life of Arab and Jewish adolescents and adults living in the State of Israel.

- **Research Implications:**

In order to understand as fully as possible the inner world of adolescents and young adults and their attitudes towards life, we are obliged to address self-clarity, the negative stressful events they encounter, and their psychological well-being.

In light of the research findings, it is proposed to work with adolescents in schools in all sectors. This intervention requires psychological counseling, which will allow adolescents to talk openly about their negative attitudes towards life. This move should not discourage educational counselors, because as we have seen, negative attitudes toward life characterize adolescence, and when an adolescent is allowed to talk about his feelings and hear the feelings and thoughts of his peers, he feels that he is not the only one who has such feelings, in the sense of "the trouble of many is half a consolation" (Kakunda-Mualem, 2013). "Normalizing" the phenomenon may serve as a factor that will reduce the adolescent's worries and feelings of dissatisfaction with his life. The operative conclusion from all of the above is that school intervention programs should be formulated that will assist in the formation of identity, foster self-awareness, and assist in providing coping tools that will positively affect attitudes toward life. It is also recommended to formulate a program to prevent suicide among adolescents in the various sectors, namely to develop structured and organized lesson plans within the framework of a life skills program, in which the adolescent will learn what His peers think about their self-identity and

will even voice his views on this issue. In addition, it is recommended to work on a new construction of the events that the adolescents have experienced in a way that will transform a difficult event into an event that may lead to a positive turn and the discovery of strength; this is through hearing significant stories from others and telling their own stories, which can be an inspiration and an opportunity for learning and personal development and contribute to their well-being, that is, to train them in a way that will allow them to grow from the crisis (Willoughby, & Tavernier, 2012). This can only be done after training educational counselors and educators on the subject of personal identity and on the subject of dealing with difficulties and crises, so that they can convey these complex issues.

All of the aforementioned programs will help the various agencies identify adolescents with negative attitudes toward life and those who have suicidal thoughts or have even attempted suicide. In addition, support groups should be formed to develop the mental resilience of those adolescents who need it. These adolescents should be referred to cognitive-focused treatments, such as CBT, a treatment that attempts to change the adolescent's negative attitudes and attributions, as part of the treatment process for symptoms of depression and suicidality (Levi-Blaze, 2016). The findings of the current study highlight the need to put the entire life of adolescents on the educational agenda, and not just their academic achievements. Therefore, it is recommended to involve all elements in the education system, especially counselors and educators, in this. It is also recommended to emphasize intercultural differences, especially given the fact that adolescents belong to different and diverse ethnic populations (Hettige et al., 2017). The education system should pay special attention to minority groups and find creative ways to alleviate their distress and empower them (Benator et al., 2017). Finally, it is necessary to expose parents to the issue and give them tools to cope, thus completing the circle surrounding adolescents. Although parents were not examined in this study, it is

important to create parental support groups by exposing them to the importance of this support and participating in workshops on adolescence; this follows findings that adolescents whose parents were involved in their lives communicated more confidently and their behavior was less problematic than adolescents whose parents were uninvolved and distant (Van Beyers, & Vansteenkiste, 2013). Support resources in adolescents' environments predict their self-efficacy to cope with various distress situations, as they weaken the perceived intensity of the crisis and improve coping skills with risk factors (Frost, Meyer, & Schwartz, 2016).

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