

Extracurricular activities and group belonging as a protective factor in adolescence



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ABSTRACT

In the transition into adulthood, family and school play a critical role protecting the adolescent from engaging in behaviors that could cause mental health problems. Nevertheless, there are other social groups and structured activities that have shown to act as an educational activity and as a protective factor as well. The aim of this study was to investigate the relationship between belonging to different types of social groups and the positive and negative mental health indicators of Mexican adolescents. Participants were 840 Mexican adolescents ranging between 12 and 17 years old. Results indicated that belonging to artistic and scout groups reported a statistically significant correlation with higher levels of emotional intelligence. Belonging to sport and artistic groups reported a statistically significant correlation with higher levels of resilience. No statistically significant results were found on anxiety, depression, and/or disruptive behaviors. Further research is needed, especially investigating possible predictive and moderating variables.

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Actividades extraescolares y pertenencia al grupo como factor protector en la adolescencia

RESUMEN

En la transición a la vida adulta, la familia y la escuela juegan un papel protector decisivo para proteger al adolescente de comportamientos que podrían acarrearle problemas de salud mental. No obstante, hay otros grupos sociales y actividades estructuradas que han funcionado como actividades educativas además de como factores protectores. El objetivo de este trabajo ha sido investigar la relación entre la pertenencia a diferentes tipos de grupos sociales y los indicadores positivos y negativos de salud mental de adolescentes mexicanos. Los participantes eran 840 adolescentes mexicanos de edades comprendidas entre los 12 y los 17 años. Los resultados indican que la pertenencia a grupos artísticos y scouts correlacionaba significativamente con elevados niveles de inteligencia emocional. Pertenecer a grupos deportivos y artísticos correlacionaba significativamente con elevados niveles de resiliencia. No se dieron resultados estadísticamente significativos en ansiedad, depresión o conductas problemáticas. Se necesita continuar investigando, sobre todo en las posibles variables predictoras y moderadoras.

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In the transition into adulthood, family and school play a critical role with regards to protecting the adolescent in engaging in behaviors that could cause pathologies. However, other social groups and their structured activities, including the follow-up of goals and objectives, the supervision of an adult as a leader, and the adherence to rules and schedules, could also act in an educational

manner, specifically promoting the development of abilities and the generation of new learning opportunities (Balsano, Phelps, Theokas, Lerner, & Lerner, 2009; Mahoney & Stattin, 2000).

A longitudinal research conducted by Carbonell et al. (2002) has found that family cohesion, positive perspective, social support, and healthy interpersonal relationships are some of the main protective factors for adolescents, and all of them can be favored through group belonging.

Research shows that some of the protective factors of highest impact for adolescents are family, school, work, sports, and recreational microenvironments that are healthy and favorable to development. This could be due to the fact that social networks created in the established groups promote the formation of a psychosocial support system, in which individuals can express and share emotions and affection, thus benefiting their mental and physical health (Abello & Madariaga, 1999). It should be noted as well that, according to psychosocial theories, it is from their loyalty to reference groups (Erikson, cited in Papalia, Wendkos, & Duskin, 2004, p. 470) where adolescents solve their identity crisis. This loyalty not only implies belonging to a group of friends or colleagues, but also the sense of belonging to a set of values, an ideology, a religion, a social movement, a creative enterprise, or an ethnic group.

A study by Knifsend and Juvonen (2013) analyzed the complexity of social identity in adolescents and found that prevailing social groups, which adolescents identified with themselves, were those based on extracurricular activities. Therefore, it is of interest to this study to find if there are any differences in the indicators of mental health according to the group they belong to and the activities performed by these groups. It is also assumed that these peer groups can be considered a protective factor at this important stage of life and that they usually help to promote learning, free expression of identity, and mainly the consolidation of a sense of belonging.

The following is some scientific evidence found in the literature for each of the groups that have been addressed in the present study.

Sport Groups

Sports play an important role in the social relationships linked to it.

The demands of competitive sports carry with them the development of psychological competences such as tolerance and the overcoming of challenges (Ruiz, de la Vega, Poveda, Rosado, & Serpa, 2012). They are beneficial to self-concept and tend to decrease the symptomatology of anxiety and depression (Candel, Olmedilla, & Blas, 2008), as well as the depression related to low academic achievement, particularly in females (Gore, Farrell, & Gordon, 2001). Other studies in Latin America reported a positive relation between the systematic practice of sports and different processes, including self-esteem, autonomy, conviction, and the use of adequate coping skills (Broche, Diago, & Herrera, 2012). Also, results reported by López, Balaguer, Castillo and Tristán, 2011 indicated that it is athletes' involvement in the task, and not the ego, the one that has a predictive validity over motivation and, in turn, over self-esteem.

On the contrary, research conducted by Molina, Castillo, and Pablos (2007) did not find any differences in the self-esteem of people that practice sports, in comparison to those that do not. In the same way, Hume et al. (2011) did not find any relation between the practice of sports and an individual's symptoms of depression.

Harju, Luukkonen, Hakko, Rasanen, and Riala (2011) concluded that it is team sport, not the practice of individual sport, what decreases the risk for depression. Moreover, they found that males

participating in team sport reported a decreased in the onset of affective disorders, but some males also reported an increase in behavioral problems.

It should be noted that, in some occasions, sport groups could be a risk factor in facilitating contact with drug users and drug circulation (Moreno, 2002), or even be associated with alcohol consumption (Denault, Poulin, & Pedersen, 2009).

Scout Groups

Since its beginnings, The World Organization of the Scout Movement (WOSM) has promoted the service to both country and community, through leadership, outdoors living, and the creation of social support. Several studies have been conducted worldwide studying some of the characteristics of this movement that could favored adolescents, especially in the development of social capital, connection with the community (Polson, Kim, Jang, Johnson, & Smith, 2013), self-esteem (Royse, 1998), and an adequate development of citizenship, all of this through the development of self-regulation skills and the consolidation of human rights (Mills, 2013).

It is worth mentioning the work by Rohm and Osula (2013), who studied the relationship between the scout model and the leadership models centered in volunteering. They found that the scout model mainly favors the characteristics of voluntary subordination, being authentic, relationship by commitment, moral responsibility, spiritual transcendence, and transforming influence.

Religious Groups

Among the studies that have covered the effects of religion in adolescents, the one by Francis (2013) analyzed the purpose of life in a sample of adolescents aged 13 to 15. Results showed that both implicit and explicit religiosity (the one that besides the belief also implies the practice of ritual) are beneficial to creating a purpose of life in adolescents.

The study by Hodge, Marsiglia, and Nieri (2011) found that for adolescents of Hispanic origin, mere religious affiliation is not associated with a decrease in the use of drugs; nevertheless, the assistance by and integration in a social religious network does predict lower probability in the use of marijuana and inhalants.

When analyzing the different dimensions related to Christian religiosity, Grier and Gudiel (2011) found that in the face of antisocial behaviors, the influence of peers is stronger than the belonging to a religious group. However, the variables of social justice and interest in the Bible did predict pro-social behaviors and maintain a negative correlation with peer pressure. For this reason, they concluded that religiosity could contribute to positive decision-making in adolescents.

Existing evidence of the relationship between religiosity and affective variables such as depression and wellbeing are contradictory. A study conducted with Muslim adolescents found a positive correlation between religiosity, happiness, and physical and mental health, and a negative correlation between religiosity and anxiety and depression (Abdel-Khalek, 2007). On the contrary, a study conducted amongst German adolescents, whose culture gives less importance to religion, did not find statistically significant correlations between the variables of religious involvement and the happiness-depression scale (Wenger, 2011). Finally, a study conducted with a multicultural sample found that the sense of personal religiosity maintains a predictive validity for coping with stress, even while controlling variables such as neighborhood and gender (Amhed, Fowler, & Toro, 2011).

Volunteering

Volunteering can be defined from attributes such as helping, cooperating, and empathy, which distinguish pro-social behavior. It relates to a long-term planned action that occurs within an organized context and involves non-mandatory action (Omoto & Snyder, 1995).

An important factor among volunteering groups is probably the social support which is obtained from them. There is evidence that people who do not count with a social or family support network tend to remain for a longer time as volunteers, in an attempt to keep determined levels of social support (Arias & Barrón, 2008). The study conducted by Vecina and Chacón (2005) indicates that experiencing positive emotions through volunteering can predict the permanency in the volunteer group. On the other hand, a relationship has been found between volunteer work and life satisfaction, where volunteers performing social assistance showed a higher level of satisfaction with life, compared to those who perform environmental work (Dávila & Díaz, 2005).

Artistic Groups

Aguilar, Bedau, and Anthony (2009) considered that artistic environments based on the community are proper for meeting the needs of young people regarding emotional intelligence, given that arts offer structures, dynamics, and systems that allow the adolescent to express their emotions and develop positive relations. They also favor the consolidation of identity, imagination, perspective, the search for meaning (Perrin, 2004), and the authentic expression of oneself. Artistic groups also promote an individual and a group sense of achievement, group cohesion, and the flourishing of participants in such experiences (Kane, 2013).

As a protective factor, Denault et al. (2009) found a positive correlation between the number of hours dedicated to carry out artistic activities in an organized way and a decrease in participants' depressive symptoms.

It should be pointed out that most of the studies focused on using arts as a group therapeutic intervention, which have shown to foster positive characteristics between adolescents in vulnerable conditions (Heejeong & Sunnam, 2012; Slayton, 2012) or in situations of social imbalance (Kim et al., 2006). For this reason, studying the effects that belonging to an artistic group has on a community population becomes very important, particularly as a strategy that could contribute to the prevention of anxiety, depression, or disruptive behaviors.

In sum, international programs that search for the positive development of young people suggested that successful experiences imply a positive and constant relationship with an adult, the practice of activities that develop life skills, and the opportunity of young people for using such skills in activities that are highly valued in the community (Lerner & Lerner, 2013). The purpose of this study was to identify if the involvement in extracurricular activities and group belonging could be protective factors associated with a better mental health during the adolescence stage.

Method

Participants

The sample was integrated by 840 adolescents between ages 12 and 17, with a mean age of 14.3; 44% were males and 56% females. Informed consent was appropriately obtained by the principals of the middle and high schools. At a first stage, data collection was carried out in various middle and high schools within the Metropolitan Area of Guadalajara, Mexico. Later the social groups' headquarters

that were evaluated were also visited. From the whole sample, 29% of the participants reported that they did not belong to any formal social group; 22% belonged to religious groups, 13% belonged to scout groups, 13% belonged to groups that engage in artistic activities, 11% belonged to sport groups, 4% belonged to groups dedicated to volunteering in emergency services, and 5% reported that they belonged to some gang. The remaining 3% of the sample belonged to groups not taken into account for this research. It should be noted that groups such as gangs were not a category considered at first in the protocol for this study. Nevertheless, it was decided to consider them as a group, given that some participants stated that they belonged to some of them, and with the purpose of exploring the possible effects of psychosocial risk.

Instruments

Socio-demographic characteristics questionnaire, which, in addition to age, gender, school grade, and group belonging, also included information regarding the education level of parents and their occupation.

The following instruments were applied for evaluating positive indicators of mental health:

Bar-On Emotional Quotient Inventory, Youth Version (EQ-i: YV; Bar-On & Parker, 2000). The validation of this measure in Spanish language with Mexican youth was conducted by Ruvalcaba, Gallegos, Lorenzo, and Borges (2014). The EQ-i: YV is a self-report instrument integrated by 48 items scored on a Likert-type scale. This measure evaluates six dimensions: intrapersonal and interpersonal competencies, anger management, adaptability, positive emotions, and a dimension related to optimism and self-concept. The Spanish version of this measure yielded a Cronbach's alpha of .902.

The Resilience Scale for Adolescents (READ; Hjemdal, Friborg, Stiles, Martinussen, & Rosenvinge, 2006). The validation of this measure in Spanish with Mexican adolescents was conducted by Ruvalcaba, Gallegos, and Villegas (2014). The Spanish version of the READ is a self-report measure that comprises 22 items graded on Likert-type scale. The READ evaluates five dimensions: personal competence, social competence, family cohesion, social resources, and goal orientation. The READ reported an internal consistency index of .894.

The following scales were applied to evaluate negative indicators of mental health:

The Revised Children's Manifest Anxiety Scale (CMAS-R; Reynolds & Richmond, 1978). It is an instrument that evaluates the degree and nature of anxiety in children and adolescents. The Spanish version of this measure was used for this study. The CMAS-R consists of 37 items rated on three subscales: anxiety, worry and oversensitivity, and social concerns. Additionally, it has a lie scale designed to detect conformity, social convenience, or deliberate falsification of responses. In this study, the CMAS-R reported a Cronbach's alpha of .789.

The Children's Depression Inventory (CDI; Kovacs, 1992). It is a self-report instrument consisting of 27 items and two subscales: dysphoria, which considers elements such as depressive mood, sadness, and worry, and the negative self-esteem subscale, that includes the judgments of inadequacy, ugliness, and meanness (Kovacs, 2004). The Spanish language version of this measure was used for this study. In this study, the CDI reported an internal reliability of .806.

The Disruptive Behavior Scale (ECODI- 27; Moral & Pacheco, 2011). It is an instrument that aims to detect behaviors that lead up to a personality antisocial disorder and to the involvement in legal problems. ECODI was created with a Mexican sample and is a Likert-type scale comprised of 27 items. The instrument reported a Cronbach's alpha of .932. It should be noted that, in the original

Table 1
Means of Measures related to Positive Indicators of Mental Health and the Results from the ANOVA and the Tukey Post-hoc Test with Type of Association as a Factor.

	Non-belonging group 1	Religious group 2	Volunteering group 3	Sports group 4	Scouts group 5	Artistic group 6	Gangs group 7	F	Tukey post-hoc
<i>Socio-emotional competences/EQ-i YV</i>									
Intrapersonal	10.28	10.66	9.27	9.67	10.68	10.93	9.66	2.795*	3 < 6
Interpersonal	27.47	28.35	26.60	26.23	29.24	28.93	25.83	6.997***	1, 3, 7 < 5, 6
Anger management	18.60	18.91	18.39	18.86	18.41	17.54	18.02	1.401	
Adaptability	29.38	29.84	28.00	29.09	31.45	31.32	28.88	5.157***	1, 3, 4 < 5, 6
Optimism & self-concept	25.87	26.00	25.57	26.18	27.25	25.83	26.25	1.889	
Positive emotions	14.04	14.15	14.33	13.98	14.42	14.40	13.50	1.675	
<i>Resilience/READ</i>									
Family cohesion	23.68	22.84	22.97	24.59	23.66	24.16	22.90	2.148*	2 < 4
Social competence	19.67	19.45	17.58	20.01	19.89	20.16	19.36	2.999**	3 < 1, 2, 4, 5, 6
Personal competence	15.96	15.45	14.88	15.95	15.83	16.34	15.62	2.420	
Social resources	17.34	17.30	16.64	17.70	17.41	17.27	17.05	0.895	
Goal orientation	12.51	12.27	12.52	12.75	12.52	13.09	12.00	3.088**	2, 7 < 6

* $p < .05$, ** $p < .01$, *** $p < .001$.**Table 2**
Means of Measures related to Negative Indicators of Mental Health and the Results from the ANOVA and the Tukey Post-hoc Test with Type of Association as a Factor.

	Non-belonging group 1	Religious group 2	Volunteering group 3	Sports group 4	Scout group 5	Artistic group 6	Gang group 7	F	Tukey post-hoc
<i>Depression/CDI</i>									
Dysphoria	4.06	4.01	5.82	3.56	3.89	3.94	5.02	2.097	
Negative self-esteem	5.50	5.98	6.36	5.24	5.36	5.44	6.69	2.527*	4 < 7
<i>Anxiety/C-MAS</i>									
Physiological anxiety	3.63	3.77	3.64	3.31	3.51	3.03	3.98	1.542	
Worry-oversensitivity	5.50	5.99	5.48	5.14	5.16	5.29	5.10	1.888	
Social concerns	2.67	2.57	2.88	2.32	2.56	2.29	2.88	1.251	
<i>Disruptive behavior/ECODI</i>									
Robbery & vandalism	12.00	12.28	12.03	13.66	11.45	10.95	16.60	6.136***	1, 2, 3, 5, 6 < 7
Malicious mischief	15.30	14.91	14.91	16.38	14.18	14.56	19.98	6.112***	1, 2, 3, 4, 5, 6 < 7
School desertion	3.29	3.21	3.55	3.57	3.22	2.76	5.12	8.498***	1, 2, 3, 4, 5, 6 < 7
Fights & weapons	10.86	10.06	9.45	12.28	10.32	10.16	14.69	12.707***	2, 3, 4, 5, 6 < 4, 7
Graffiti	5.98	5.57	5.36	7.43	5.08	5.49	8.95	7.367***	2, 3, 4, 5, 6 < 4, 7
Disagreement	8.21	8.40	8.67	9.08	8.57	8.47	10.31	2.565*	1, 2 < 7

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

scale, a higher score represents a lower presence of disruptive behaviors; however, in this study the direction of the items was inverted for a better interpretation of the instrument. Therefore, the higher the score, the higher the presence of disruptive behaviors.

Procedure

The measures were administered in both middle and high schools located in the Metropolitan Area of Guadalajara, as well as at the social groups' headquarters that carried out the extracurricular activities. Undergraduate students in Psychology, previously trained, were the ones who administered the measures. Once the data was captured, statistical analyses were conducted using the SPSS v.19 statistical program.

Results

Table 1 presents the means obtained for each of the groups in the measures related to positive indicators of mental health, as well as the results of the analysis of variance (ANOVA) and its respective analysis according to the Tukey *post-hoc* test.

As reported on Table 1, the groups that got statistically significant higher scores on most of the measures were scout, artistic, and sport groups. Results obtained by the volunteering and gang groups stand out, as they reported the lowest scores on the positive

indicators of mental health. Results indicated that belonging to artistic and scout groups reported a statistically significant correlation with higher levels of emotional intelligence, and belonging to sports and artistic groups reported a statistically significant correlation with higher levels of resilience.

Results obtained from the measures on negative indicators of mental health are presented in Table 2. No statistically significant differences were observed to be reported for those variables related to internalizing problems, except for the negative self-esteem subscale of the CDI. In this subscale, students that belonged to sports groups reported higher scores, when compared to those adolescents that belonged to a gang. For externalizing problems, such as disruptive behaviors, a statistically significant higher risk was found for those adolescents that belonged to some gang.

With the purpose of identifying a possible effect of the variables of age and gender in the differences found by the ANOVA, a linear regression analysis was conducted including dummy variables codified according to the group they belonged to. The results of the regressions wherein group belonging keeps its statistical significance after controlling for age and gender are presented in Table 3 for protective factors and in Table 4 for risk factors. Statistical significance was lost only in the variables related to Family Cohesion and Intrapersonal Competence. In the rest of the variables, statistical significance remained for group belonging, even when the predictive level was reported as low.

Table 3
Linear Regressions with Protective Factors as Dependent Variables.

	R ²	F	β	p
<i>Dependent variable: Interpersonal Competence</i>				
Model	.082	8.924***		
Gender			.183	.000
Age			-.023	.500
Belonging to a religious group			.080	.042
Belonging to a volunteering group			-.039	.267
Belonging to a sport group			-.054	.152
Belonging to a scout group			.139	.000
Belonging to an artistic group			.128	.001
Belonging to a gang group			-.058	.110
<i>Dependent variable: Adaptability</i>				
Model	.043	4.442***		
Gender			-.074	.038
Age			.018	.606
Belonging to a religious group			.038	.350
Belonging to a volunteering group			-.054	.136
Belonging to a sport group			-.029	.454
Belonging to a scout group			.136	.000
Belonging to an artistic group			.123	.002
Belonging to a gang group			-.031	.396
<i>Dependent variable: Social Competence</i>				
Model	.028	2.844**		
Gender			.060	.095
Age			-.053	.141
Belonging to a religious group			-.026	.522
Belonging to a volunteering group			-.121	.001
Belonging to a sport group			.038	.331
Belonging to a scout group			.019	.630
Belonging to an artistic group			.056	.153
Belonging to a gang group			-.010	.796
<i>Dependent variable: Goal Orientation</i>				
Model	.028	2.879**		
Gender			.037	.297
Age			.063	.078
Belonging to a religious group			-.058	.150
Belonging to a volunteering group			-.006	.874
Belonging to a sport group			.050	.194
Belonging to a scout group			.013	.738
Belonging to an artistic group			.111	.005
Belonging to a gang group			-.064	.086

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

Discussion

The mental health status of an adolescent could be determined by the presence of negative indicators including symptoms of anxiety, depression, and disruptive behaviors, as well as the presence of positive indicators, such as emotional intelligence and resilience. These last ones have recently become extremely important given their impact among the different dimensions of human development. According to various authors, resilience is the combination of internal and external protective factors that help the individual to overcome setbacks without suffering a permanent damage in their development or psychological condition (González, 2007; Hjermald et al., 2006). Additionally, resilience has been explained by three categories of protective factors: positive individual factors, family support, and belonging to a support network, besides the family (Von Soest, Mossige, Stefansen, & Hjermald, 2010).

Scientific research dedicated to investigating protective factors and their influence on adolescent's mental health has represented an important task, one that has allowed us to develop effective strategies to improve our adolescents' wellbeing. The impact of protective factors, such as family and school, has been frequently investigated (Blum, McNeely & Rinehart, 2002; Isaza & Henao, 2011; Resnick, 1997; Ruvalcaba, Gallegos, Villegas, & Lorenzo, 2013). However, few studies have explored the protective impact that other groups could have on adolescents' mental health.

Table 4
Linear Regressions with Risk Factors as Dependent Variables.

	R ²	F	β	p
<i>Dependent variable: Negative Self-Esteem</i>				
Model	.030	3.057**		
Gender			.104	.004
Age			-.034	.340
Belonging to a religious group			.073	.072
Belonging to a volunteering group			.062	.092
Belonging to a sport group			-.015	.704
Belonging to a scout group			-.014	.715
Belonging to an artistic group			.004	.928
Belonging to a gang group			.109	.003
<i>Dependent variable: Robbery and Vandalism</i>				
Model	.104	11.513***		
Gender			.229	.000
Age			.090	.009
Belonging to a religious group			-.023	.548
Belonging to a volunteering group			-.007	.837
Belonging to a sport group			-.042	.258
Belonging to a scout group			.054	.150
Belonging to an artistic group			.089	.018
Belonging to a gang group			-.158	.000
<i>Dependent variable: Malicious Mischief</i>				
Model	.057	6.076**		
Gender			.109	.002
Age			.044	.212
Belonging to a religious group			.023	.561
Belonging to a volunteering group			.007	.848
Belonging to a sport group			-.035	.360
Belonging to a scout group			.078	.045
Belonging to an artistic group			.056	.147
Belonging to a gang group			-.168	.000
<i>Dependent variable: School Desertion</i>				
Model	.061	6.448***		
Gender			.063	.073
Age			.060	.091
Belonging to a religious group			.013	.748
Belonging to a volunteering group			-.031	.385
Belonging to a sport group			-.029	.453
Belonging to a scout group			.023	.551
Belonging to an artistic group			.096	.013
Belongings to a gang group			-.198	.000
<i>Dependent variable: Fights and Weapons</i>				
Model	.119	13.400***		
Gender			.205	.000
Age			.127	.000
Belonging to a religious group			.061	.117
Belonging to a volunteering group			.042	.229
Belonging to a sport group			-.055	.139
Belonging to a scout group			.067	.074
Belonging to an artistic group			.072	.053
Belonging to a gang group			-.177	.000
<i>Dependent variable: Graffiti</i>				
Model	.111	12.473***		
Gender			.146	.000
Age			.065	.058
Belonging to a religious group			.051	.187
Belonging to a volunteering group			.018	.605
Belonging to a sport group			-.112	.003
Belonging to a scout group			.114	.002
Belonging to an artistic group			.070	.063
Belonging to a gang group			-.199	.000
<i>Dependent variable: Disagreement</i>				
Model	.032	3.327**		
Gender			.099	.005
Age			-.071	.049
Belonging to a religious group			-.020	.628
Belonging to a volunteering group			-.022	.539
Belonging to a sport group			-.066	.089
Belonging to a scout group			-.038	.337
Belonging to an artistic group			-.015	.707
Belonging to a gang group			-.116	.002

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

The purpose of this study was to investigate the relationship between belonging to a social group and the positive and negative mental health indicators in Mexican adolescents. Our hypothesis was that belonging to a social group, regardless of group type, would be related to a better mental health status in terms of higher levels of emotional intelligence and resilience, and lower symptoms of anxiety, depression, and disruptive behaviors. Our hypothesis was partially confirmed, given that only those adolescents involved in artistic, sports, and/or scout groups reported significantly higher levels of emotional intelligence and resilience.

Other authors have found similar results (Aguilar et al., 2009; Heejeong & Sunnam, 2012; Kim et al., 2006; Slayton, 2012), where arts prove to be an excellent way for the expression of emotions, the development of positive relationships, identity consolidation, and sense of achievement (Kane, 2013; Perrin, 2004). Similar abilities have proven to be promoted as well by scout groups, where one of their main activities is providing social support. Scouts adolescents are benefited from creating community bonds and from constantly practicing self-regulation in favor of good citizenship. These practices help them to have a better image of themselves, which in turn increases their self-esteem and self-concept (Mills, 2013; Royle, 1998).

Results from this study also agreed that sports groups could help adolescents in increasing their resilience through their social support system and a sense of belonging. In fact, healthy interpersonal relationships have been identified as one of the five pillars of human wellbeing and flourishing (Seligman, 2012). Different researchers, including Ruiz et al. (2012), have also found that the demands from sports promote tolerance and self-improvement and increase self-concept and the use of proactive coping skills (Broche et al., 2012; López et al., 2011), all of them related to emotional intelligence and resilience.

“Flow” is another important factor that could have also contributed to the higher positive scores reported by those belonging to artistic, sport, and scout groups. The flow experience has been also identified by Dr. Martin Seligman (2012) as one of the five pillars of wellbeing and human flourishing. Typically characterized by a concentration, motivation, and absorption state while undertaking an activity, the flow experience encourages us to use our potential to the limit, which leaves us with a sense of happiness and achievement (Csikszentmihalyi, 1990).

Contrary to our hypotheses, results showed that the adolescents involved in volunteering groups reported the lowest scores in mental health, except for those involved in gangs. One possible reason could be that some of the adolescents who participate in volunteering groups are precisely those who do not have a strong sense of belonging and a social support network (Arias & Barrón, 2008). Therefore, they try to find them through their involvement in volunteering groups.

Another unexpected finding, contrary to what has been reported by several authors (e.g., Abdel-Khalek, 2007; Amhed et al., 2011), was that belonging to religious groups did not report a statistically significant difference in the emotional intelligence and resilience of the participants.

Furthermore, no social group in this study reported a statistically significant relationship with anxiety or depression, probably because both variables are more related to individual and family factors than to social support.

This study found that adolescents' who belonged to gangs engaged more in antisocial behaviors. The study of Mahoney and Stattin (2000) found similar results that suggest that unstructured activities wherein the meetings occur randomly and that do not have formal rules, schedules, and an adult as a leader could favor the engagement in this risky behaviors.

Conclusions

Results from this study showed that those adolescents that belonged to artistic, sport, and/or scout social groups reported higher levels of emotional intelligence and resilience in comparison to those who do not belong to any group or belonged to a different type of group. This is a promising finding that highlights the benefits of using these social groups as avenues to increase adolescents' positive development.

Contrary to our hypotheses, no statistically significant results were found suggesting that belonging to a social group directly helps in the prevention of anxiety or depression. Further research should evaluate possible group variables that could predict or moderate this relationship. Some of the variables might be the number of adults per adolescents in the group, the level of emotional intelligence and resilience of adults that lead and supervise the social group's activities, the specific time, duration, and intensity of the activities, and the adolescent's socioeconomic level (Denault et al., 2009).

Because individual, contextual, and family factors could also impact this relationship (Mahoney & Stattin, 2000), further research should also consider the particular circumstances that surround Mexican adolescents. To illustrate, the First National Survey of Exclusion, Intolerance and Violence in Public Middle Schools and High Schools (SEP, 2008) showed that about 35% of the students had insulted and rejected their classmates, and 40% had ignored them. The presence of youth gangs is also high in Mexico. A study conducted by the Secretary of Public Safety in 2010 revealed the existence of nearly 9,384 gangs throughout the country, who had gone through common illegal activities such as robbery and infringement to be associated with organized crime, into activities such as drugs, prostitution, and human and gun trafficking.

A recent study by Benjet, Borges, Medina-Mora, Zambrano, and Aguilar-Gaxiola (2009) found that almost 40% of Mexican adolescents have suffered from some mental health problem (Benjet et al., 2009), where anxiety was reported as the most common. Likewise, a study conducted by the Secretary of Public Education (Secretaría de Educación Pública, SEP, 2010) showed that 65% of Mexican adolescents reported constant feelings of sadness and loneliness and 50% said they were afraid and felt rejected, plus a high percentage of students that had been bullied or had bullied others. In a context like this, increasing adolescents' mental health is a top priority. Continuing the research on protective factors is crucial to accomplishing this task as well as the evaluation of prevention programs that foster adolescents' positive development.

Conflict of Interest

The authors of this article declare no conflict of interest.

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References

- Abello, R., & Madariaga, C. (1999). *Las redes sociales ¿para qué? Psicología desde el Caribe*, 2(3), 116–135.
- Aguilar, J., Bedau, D., & Anthony, C. (2009). Growing emotional intelligence through community-based arts. *Reclaiming Children and Youth*, 18, 3–7.
- Amhed, S., Fowler, P., & Toro, P. (2011). Family, public and private religiosity and psychological wellbeing over time in at risk adolescents. *Mental Health, Religion & Culture*, 14, 393–408.

- Arias, A., & Barrón, A. (2008). El apoyo social en la predicción a corto plazo de la permanencia del voluntariado socioasistencial. *Psicothema*, 20, 97–103.
- Balsano, A., Phelps, E., Theokas, C., Lerner, J., & Lerner, R. (2009). Patterns of early adolescents' participation in youth development programs having positive youth development goals. *Journal of Research on Adolescence*, 19, 249–259.
- Bar-On, R., & Parker, J. (2000). *BarOn Emotional Quotient Inventory: Youth version. Technical manual*. Toronto: Multi-Health Systems Inc.
- Benjet, C., Borges, G., Medina-Mora, M. E., Zambrano, J., & Aguilar-Gaxiola, S. (2009). Youth mental health in a populous city of the developing world: Results from the Mexican adolescent health survey. *Journal of Child Psychology and Psychiatry*, 50, 386–395. <http://dx.doi.org/10.1111/j.1469-7610.2008.01962.x>
- Blum, R. W., McNeely, C., & Rinehart, P. M. (2002). *Improving the odds: The untapped power of schools to improve the health of teens*. Center for Adolescent Health and Development. University of Minnesota, MN.
- Broche, Y., Diago, C., & Herrera, L. F. (2012). Características resilientes en jóvenes deportistas y sus pares de la universidad central Marta Abreu de las Villas. *Pensando Psicología, Revista de la Facultad de Psicología Universidad Cooperativa de Colombia*, 8(14), 10–18.
- Candel, N., Olmedilla, A., & Blas, A. (2008). Relaciones entre la práctica de actividad física y el autoconcepto, ansiedad y depresión en chicas adolescentes. *Cuadernos de Psicología del Deporte*, 8(1), 61–77.
- Carbonell, D., Reinherz, H., Giaconia, R., Srashwick, C., Paradis, A., & Beardslee, W. (2002). Adolescent protective factors promoting resilience in young adults at risk for depression. *Child and Adolescent Social Work Journal*, 19, 393–412.
- Csikszentmihalyi, M. (1990). *Flow: The psychology of optimal experience*. New York: Guilford Press.
- Dávila, M., & Díaz, J. (2005). Voluntariado y Satisfacción Vital. *Intervención Psicosocial*, 14(1), 81–94.
- Denault, Poulin, A., & Pedersen, F. (2009). Intensity of participation in organized youth activities during the high school years: Longitudinal association with adjustment. *Applied Developmental Science*, 13, 74–87.
- Francis, L. J. (2013). Implicit religion, explicit religion and purpose in life: An empirical enquiry among 13- to 15- year old adolescents. *Mental Health, Religion & Culture*, 16, 909–921.
- González, N. I. (2007). *Factores determinantes de la resiliencia en niños de la ciudad de Toluca* (Tesis doctoral inédita). Universidad Iberoamericana, México.
- Gore, S., Farrell, F., & Gordon, J. (2001). Sports involvement as protection against depressed mood. *Journal of Research on Adolescence*, 11, 119–130.
- Grier, L., & Gudiel, W. (2011). Can religious beliefs combat negative peer influence during adolescence? *Mental Health, Religion & Culture*, 14, 983–997.
- Harju, O., Luukkonen, A., Hakko, H., Rasanen, P., & Riala, K. (2011). Is an interest in computers or individual/teams sports associated with adolescent psychiatric disorders? *Cyberpsychology, Behavior and social Networking*, 14, 461–465.
- Heejeong, J., & Sunnam, C. (2012). Increasing ego-resilience using clay with low SES adolescents in group art therapy. *Arts in Psychotherapy*, 39, 245–250.
- Hjemdal, O., Friberg, O., Stiles, T. C., Martinussen, M., & Rosenvinge, J. (2006). A new scale for adolescents resilience: Grasping the central protective resources behind healthy development. *Measurement and Evaluation in Counseling and Development*, 39, 84–96.
- Hodge, D., Marsiglia, F., & Nieri, T. (2011). Religion and substance use among youths of mexican heritage: A social capital perspective. *Social Work Research*, 35, 137–146.
- Hume, C., Timperio, A., Veitch, J., Salmon, J., Crawford, D., & Ball, K. (2011). Physical activity, sedentary behavior and depressive symptoms among adolescents. *Journal of Physical Activity and Health*, 8, 152–156.
- Isaza, L., & Henao, G. C. (2011). Relaciones entre el clima social familiar y el desempeño en habilidades sociales en niños y niñas entre dos y tres años de edad. *Acta Colombiana de Psicología*, 14, 19–30.
- Kane, K. (2013). Best practices in the performing arts: Transformation and flourishing in a progressive summer dance theater program for adolescents. *Journal of Dance Education*, 13, 71–77.
- Kim, S., Kverno, K., Lee, E., Hwa, J., Hwa, H., & Kim, H. (2006). Development of a music group psychotherapy intervention for the primary prevention of adjustment difficulties in Korean adolescent girls. *Journal of Child and Adolescent Psychiatric Nursing*, 19, 103–111.
- Knifsend, C., & Juvonen, J. (2013). The role of social identity complexity in inter-group attitudes among young adolescents. *Social Development*, 22, 623–640.
- Kovacs, M. (1992). *The Children's Depression Inventory*. North Tonawanda, NY: Multi-Health Systems.
- Kovacs, M. (2004). *Inventario de Depresión Infantil (CDI)*. Madrid, España: TEA Ediciones.
- Lerner, R., & Lerner, J. (2013). *The positive development of youth: Comprehensive findings from the 4H study of positive youth development*. Institute for Applied research in youth development. Maryland.
- López, J., Balaguer, I., Castillo, I., & Tristán, J. (2011). Clima motivacional percibido, motivación autodeterminada y autoestima en jóvenes deportistas mexicanos. *Revista de Psicología del Deporte*, 20, 209–222.
- Mahoney, J., & Stattin, H. (2000). Leisure activities and adolescent antisocial behavior: The role of structure and social context. *Journal of Adolescence*, 23, 113–127.
- Mills, S. (2013). An instruction in good citizenship: Scouting and the historical geographies of citizenship education. *Transactions of the Institute of British Geographers*, 38, 120–134.
- Molina, J., Castillo, I., & Pablos, C. (2007). Bienestar psicológico y práctica deportiva en universitarios. *Motricidad. European Journal of Human Movement*, 18, 79–91.
- Moral, J., & Pacheco, M. (2011). Desarrollo de una escala de conducta disocial en México. *Revista electrónica de Psicología Iztacala*, 14, 199–221.
- Moreno, J. (2002). Información básica sobre drogas. In A. Acero, G. Moreno, J. Moreno, & L. Sánchez (Eds.), *La prevención de las drogodependencias en el tiempo de ocio*. Madrid: Asociación Deporte y Vida.
- Omoto, A. M., & Snyder, M. (1995). Sustained helping without obligation: Motivation, longevity of service, and perceived attitude change among AIDS volunteers. *Journal of Personality and Social Psychology*, 68, 671–686.
- Papalia, D., Wendkos, S., & Duskin, R. (2004). *Desarrollo Humano*. México: McGrawHill.
- Perrin, S. (2004). Arts and the psychological growth of adolescents. *Independent School*, 63(2), 20–30.
- Polson, E., Kim, Y., Jang, S., Johnson, B., & Smith, B. (2013). Being prepared and staying connected: Scouting's influence on social capital and community involvement being prepared and staying connected. *Social Science Quarterly*, 94, 758–776.
- Resnick, M. D. (1997). Close ties to parents and school improve adolescents' lives. *Minnesota Medicine*, 80(12), 24–26.
- Reynolds, C. R., & Richmond, B. O. (1978). What I think and Feel: A Revised Measure of Children's Manifest Anxiety. *Journal of Abnormal Psychology*, 6, 271–280.
- Rohm, F., & Osula, B. (2013). Scouting and servant leadership in cross-cultural perspective: An exploratory study. *The Journal of Virtues and Leadership*, 3(1), 26–42.
- Royse, D. (1998). Scouting and girls scout curriculum as interventions: Effects on adolescents' self-esteem. *Adolescence*, 33(129), 159–169.
- Ruiz, R., De la Vega, R., Poveda, J., Rosado, A., & Serpa, S. (2012). Análisis psicométrico de la escala de resiliencia en el deporte del fútbol. *Revista de Psicología del Deporte*, 21, 143–151.
- Ruvalcaba, N., Gallegos, J., Lorenzo, M., & Borges, A. (2014). Propiedades Psicométricas del inventario de competencias socioemocionales para adolescentes (EQI-YV) en población mexicana. *Evaluar*, 14, 1–14.
- Ruvalcaba, N., Gallegos, J., & Villegas, D. (2014). Validation of the resilience scale for adolescents (READ) in Mexico. *Journal of Behavioral Health and Social Issues*, 6(2), 21–24. <http://dx.doi.org/10.5460/jbhsv6.2.41180>
- Ruvalcaba, N., Gallegos, J., Villegas, D., & Lorenzo, M. (2013). Influencia de las habilidades emocionales, los estilos de comunicación y los estilos parentales sobre el clima familiar. *Revista de Investigación y Divulgación en Psicología y Logopedia*, 3(2), 2–7.
- Secretaría de Educación Pública (SEP) (2008). *1era Encuesta Nacional de Exclusión, Intolerancia y Violencia en Escuelas públicas de Educación Media Superior*. Retrieved from http://www.sems.gob.mx/es_mx/sems/encuestas_de_exclusion_intolerancia_y_violencia
- Seligman, M. (2012). *Flourish: A new understanding of happiness, wellbeing, and how to achieve them*. New York: Simon & Schuster.
- Slayton, S. (2012). Building community as social action: An art therapy group with adolescent males. *Arts in Psychotherapy*, 39, 179–185.
- Vecina, M., & Chacón, F. (2005). Positive emotions in volunteerism. *The Spanish Journal of Psychology*, 8, 30–35.
- Von Soest, T., Mossige, S., Stefansen, K., & Hjemdal, O. (2010). A validation study of the Resilience Scale for Adolescents (READ). *Journal of Psychopathology and Behavioral Assessment*, 32, 215–225. <http://dx.doi.org/10.1007/s10862-009-9149-x>
- Wenger, S. (2011). Religiosity in relation to depression and well-being among adolescents: A comparison of findings among the Anglo-Saxon population and findings among Austrian high school students. *Mental Health, Religion & Culture*, 14, 515–529.