GENDER DIFFERENCES IN LEVELS OF TOXIC POSITIVITY IN ADOLESCENTS: A QUANTITATIVE STUDY

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Abstract:
This research is the first research derived from applied science in the field of public health to explore gender differences in levels of toxic positivity in adolescents. Toxic positivity is defined as the overgeneralization and ineffectiveness of happy and optimistic states in all situations resulting in the denial, minimization, and invalidation of authentic human emotional experiences. The research sample consisted of male and female teenagers aged 18-24. Data was collected through a questionnaire that measures the level of toxic positivity based on responses related to positivity and behavior that can ignore or override negative emotions. The results show that there is a significant difference between male and female adolescents in the level of toxic positivity. Adolescent girls tend to show lower levels of toxic positivity than adolescent boys. These findings indicate that adolescent girls are more likely to acknowledge and manage their negative emotions more openly than adolescent boys. This study provides important insights into gender differences in the context of toxic positivity in adolescents. The results can be used to develop more targeted interventions and approaches to help adolescents manage their emotions healthily and constructively. The novelty of this research is that it introduces a new measure of toxic positivity that can capture the subtle and complex ways in which people cope with their emotions. This study also contributes to the literature on gender and emotion regulation by highlighting differences in patterns and consequences of toxic positivity among male and female adolescents.

Keywords: Adolescent, Empathy, Positive Attitude, Toxic Positivity

INTRODUCTION

In contemporary times, the prevailing approach to attaining happiness revolves around emphasizing positivity, positive emotions, and positive traits. This framework falls within Martin Seligman's Positive Psychology theory, aimed at revitalizing one's sense of purpose in life, even amidst challenges and hardships (Arif, 2016; Kumar & Cavallaro, 2018; Kloosterboer et al., 2020). Peale (1986) posits that positive thinking involves cultivating a mindset inclined towards seeking the best outcomes, even in the face of adversity (Gorl, et al., 2020). He further suggests that positive thinking involves acknowledging the existence of negative aspects in life, but placing greater emphasis on the positive aspects. Fredrickson (2009) and her theory expound on the significance of positive emotions in the human journey towards happiness. Moreover, this positivity framework plays a pivotal role in subjective well-being (SWB) and psychological well-being (PWB), serving to mitigate prolonged negative emotions, aid in the restoration of cardiovascular function, and enhance motor skills and cognitive adaptability through an increase in dopamine levels (Scheier & Carver, 1992; Fredrickson &
Levenson, 1998; Ashby, Insen & Turken, 1999; Ghodsin et al., 2015; Clarke, & Hoskin, 2022). While this approach is widely employed in addressing challenges, it is important to note that its positive effects may not always be universally experienced. In certain instances, individuals who focus on positivity during difficult times may subsequently experience feelings of worsened well-being, diminished self-worth, and self-blame. For instance, in a study conducted by Wood, Perunovic & Lee (2009), the repetitive affirmation of self-positive statements may prove ineffective and even detrimental, especially for those with low self-esteem (Chan & Mak, 2017; Petrocchi, et al., 2017; Hollenbaugh et al., 2020; Mills, 2021).

Despite the widespread acceptance of the positivity concept, there persists a phenomenon of misunderstandings regarding its appropriate application, particularly within the realm of social interactions and relationships. An instance that may resonate with many is facing a problem that elicits feelings of defeat or burden. In such situations, when sharing this experience with family or friends, the response received may not provide the needed support and instead feel dismissive. Consequently, there may be a sense of guilt for not approaching the situation with a more positive outlook. This insistence on focusing solely on the positive can lead to the rejection of negative emotions, rendering the concept of positivity unrealistic and unhelpful. This excessive promotion of positivity is commonly referred to as “Toxic Positivity,” a term coined to describe the belief that maintaining a positive outlook is the only correct way to navigate through life (Lukin, 2019; McCullough, Miller, & Johnson, 2020; Sinclair et al., 2020; Lee & Koo, 2022). Additionally, Cherry (2021) defines toxic positivity as the notion that regardless of how challenging and dire the circumstances may be, one should always uphold a positive mindset. Quintero & Long (2019) further elaborate that toxic positivity entails fixating solely on positive aspects while disregarding anything that may evoke negative emotions.

According to experts’ definitions, toxic positivity encompasses an excessive insistence on positive thinking, demanding a person to maintain a positive outlook in all situations and circumstances while disregarding negative emotions. Quintero & Long (2019) further clarify that this approach leads to the denial, downplaying, and invalidation of human emotional experiences. Essentially, the core feature of toxic positivity lies in the refusal to acknowledge or validate the presence of negative emotions. Linehan (as cited in Hall & Cook, 2012) argues that consistently invalidating one’s feelings and thoughts can hinder emotional development more significantly than we may realize. Lukin (2019) contends that ignoring negative emotions can intensify their impact. Gross & Levenson's (1997) research supports this, showing that individuals who suppress their emotions in challenging situations or act as though nothing is wrong experience heightened physiological arousal, characterized by increased physiological activity like a faster heartbeat, and so on.

In reality, discussions about toxic positivity are prevalent in various social media articles, although there are still many who struggle to grasp the concept. Some individuals, as indicated by a survey conducted by the researcher, express confusion about how to respond supportively to others while maintaining a positive outlook without inadvertently being toxic. Given this prevailing phenomenon, the researcher is motivated to delve deeper into the meaning of toxic positivity, particularly in terms of the thoughts and emotions experienced by those who encounter it, especially within the context of relationships. As a relatively new and underexplored topic, this research holds potential for shedding light on the psychological processes at play in individuals experiencing toxic positivity, as well as understanding the potential repercussions it may have. Ultimately, this research aims to provide guidance on how to navigate the concept of positivity in a constructive manner, without veering into toxic territory.

**RESEARCH METHOD**

This study employs a quantitative research approach, utilizing methods such as questionnaires for data analysis, which is a commonly utilized technique (Alshenqeeti, 2014; Choy, 2014; Apuke, 2017). The sample size for this study comprises 158 individuals. The sampling technique employed is non-probability sampling, indicating that participants were not chosen at random. Specifically, purposive sampling was used to select participants based on specific criteria: individuals of both genders, residing in Yogyakarta, and aged between 18 and 24 years. Data for this study were gathered through a questionnaire, which is an effective tool for collecting quantitative data, particularly when employing a rating scale (Woerkom et al., 2016; Cagetti et al., 2020).
The questionnaire in this study was constructed using a Likert scale, presenting statements for adolescents to respond to, ranging from "Strongly Agree" (SA), "Agree" (A), "Neutral" (N), "Disagree" (D), to "Strongly Disagree" (SD). The data analysis technique employed in this study encompassed both descriptive and analytical statistical approaches. Descriptive statistical analysis involved computations such as mean, mode, median, standard deviation, minimum, and maximum values (Winarsunu, 2017; Odhier et al., 2019; Nurwulandari & Darwin, 2020) to provide a comprehensive summary of the data.

Analytical statistical analysis, on the other hand, utilized the t-test for comparing perceptions across genders within each class (Zhu, et al., 2019; Masni, Ralmugiz, & Rukman, 2020; Ramdahan, 2020). It is worth noting that the t-test is appropriate when the data is normally distributed and exhibits homogeneity (Kurniawan, et al., 2019; Huda et al., 2020).

RESULTS AND DISCUSSION

This research was conducted in Yogyakarta with the criteria of male and female adolescents, aged 18-24 years, domiciled in Yogyakarta on table 1.

<table>
<thead>
<tr>
<th>Toxic Positivity</th>
<th>Means</th>
<th>Median</th>
<th>Mode</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>119.67</td>
<td>105.00</td>
<td>102</td>
<td>98</td>
<td>124</td>
</tr>
<tr>
<td>Female</td>
<td>125.34</td>
<td>112.00</td>
<td>110</td>
<td>95</td>
<td>136</td>
</tr>
</tbody>
</table>

Based on the description of toxic positivity data based on gender, the male mean is 119.67 and the female is 125.34, the male median is 105.00 and the female is 112.00, the male mode is 102 and the female is 110, the male minimum is 98 and the female is 95, the male maximum is 124 and the female is 136. The following is a categorisation of toxic positivity variables in adolescents and based on gender differences in adolescents in table 2.

<table>
<thead>
<tr>
<th>No</th>
<th>Score</th>
<th>Frequency</th>
<th>Categories</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>X&lt;70</td>
<td>98</td>
<td>Lower</td>
<td>62.0%</td>
</tr>
<tr>
<td>2.</td>
<td>70 ≤ X &lt; 110</td>
<td>60</td>
<td>Moderate</td>
<td>38.0%</td>
</tr>
<tr>
<td>3.</td>
<td>110 ≤ X</td>
<td></td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>158</td>
<td></td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on the table above, it can be seen that out of 158 teenagers, there are 98 subjects who are categorised as having a low level of toxic positivity with a percentage of 62.0%, and 60 subjects who are categorised as having a moderate level of toxic positivity with a percentage of 38.0%. Thus, it can be concluded that the level of toxic positivity in adolescents in Yogyakarta is in the low category in table 3.

<table>
<thead>
<tr>
<th>Table 3. Normality Test Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score</td>
</tr>
<tr>
<td>Kolmogorov-Smirnov Z</td>
</tr>
<tr>
<td>asymp. Sig. (2-tailed)</td>
</tr>
</tbody>
</table>

In Table 3, the outcomes of the normality test reveal that the Asymp. Sig (2-tailed) significance value is 0.685, surpassing the threshold of 0.05. Following the decision-making criteria outlined in the Kolmogorov-Smirnov normality test, it can be affirmed that the data exhibits a normal distribution. Consequently, the prerequisite of normality for the regression model has been satisfied. With the confirmation of normality, the researcher proceeds to carry out the final prerequisite examination, which entails conducting a homogeneity test. This assessment of homogeneity aims to ascertain whether the data displays uniformity. The findings of this homogeneity test are detailed in Table 4.
In table 4 about the results of the homogeneity test, it is known that the Sig. Levene's Test for Equality of Variances for the toxic positivity variable is 0.780. Because the value of Sig. 0.780 > 0.05, it can be concluded that the variance of toxic positivity data in adolescents is homogeneous in table 5.

Table 4. Homogeneity Test Results

<table>
<thead>
<tr>
<th>Lavender's Test for</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equality of Variances</td>
<td>0.780</td>
</tr>
</tbody>
</table>

Table 5. Group Statistics

<table>
<thead>
<tr>
<th>Toxic Positivity</th>
<th>Gender</th>
<th>N</th>
<th>Means</th>
<th>std. Deviation</th>
<th>std. Error Means</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>80</td>
<td>119.67</td>
<td>10,576</td>
<td>.893</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>78</td>
<td>125.34</td>
<td>9,034</td>
<td>.484</td>
</tr>
</tbody>
</table>

Referring to the provided table, it is evident that there are 80 instances of toxic positivity data for men, compared to 78 for women. The mean score for toxic positivity in men stands at 119.67, whereas for women, it is 125.34. Therefore, based on these descriptive statistics, it becomes imperative to assess whether this disparity is statistically significant or not. This interpretation can be further elucidated by consulting the independent sample t-test table 6 below.

Table 6. Independent Sample Test

<table>
<thead>
<tr>
<th>t-test for Equality of Means</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equal variances assumed</td>
</tr>
<tr>
<td>5,678</td>
</tr>
<tr>
<td>156</td>
</tr>
<tr>
<td>0.001</td>
</tr>
<tr>
<td>Equal variances not assumed</td>
</tr>
<tr>
<td>5,579</td>
</tr>
<tr>
<td>145,04</td>
</tr>
<tr>
<td>0.001</td>
</tr>
</tbody>
</table>

To conduct an independent sample t-test, one can employ either manual calculations or utilize statistical software like SPSS. In the variable view, the variable under examination is entered in the first column and the first row. Moving to the data view, one can select "analyze" and then proceed to "compare means". From there, navigate to "independent sample t-test". In the t-test input section, the scores being tested are placed in the test variable box. Next, enter the test score (population mean) into the corresponding box and click "ok" to proceed with the analysis (Choudhary, 2018; Gerald, 2018). When interpreting the significance level, if the probability is greater than 0.05, the null hypothesis (Ho) is rejected, while if the probability is less than 0.05, the alternative hypothesis (Ha) is accepted (Agustina, 2018; Bhatti et al., 2019; Agustina, 2018; Bhatti et al., 2019). Based on table 8, in the 'Equal Variance Assumed' section it is known that the Sig value. (2-tailed) of 0.001 <0.05, so as a basis for decision making in the independent sample t test it can be concluded that H0 is rejected and Ha is accepted. Thus, it can be concluded that there is a significant difference between the results of toxic positivity in adolescent men and women.

Believing in maintaining a positive outlook in all situations is seen as a way to navigate through life's challenges. However, the misunderstanding of this notion is termed as toxic positivity. Both participants encountered instances of toxic positivity within their social interactions, involving not only peers but also figures of authority such as teachers and professors. This experience of toxic positivity arose when the participants sought support by sharing their difficulties. The responses received urged the participants to focus solely on positive aspects and dismiss the negative emotions they were feeling. This phenomenon is recognized as the invalidation of negative emotions, encompassing the negation, rejection, or dismissal of one's emotional experiences (Long, 2017; Bennett et al., 2019; Fajobi et al., 2023; Pereira, FreireT., & Tavares, 2023).

Based on the study, there is a significant difference between males and females in terms of toxic positivity in adolescents. Adolescent girls tend to have lower levels of toxic positivity compared to adolescent boys. This means that female adolescents may be more likely to acknowledge and express their negative emotions than male adolescents. This suggests that adolescent girls may be more open to a range of emotions and better able to cope with social pressure to be positive in all situations. On the
other hand, adolescent boys may have a higher tendency to accept or respond to such pressures in a more positive way. Moreover, this response of toxic positivity is viewed as misguided or inappropriate encouragement. The participants perceived that when they expressed their concerns about the challenges they were facing, both friends and educators, were attempting to offer support by encouraging them to look at the brighter side. Essentially, the participants were urged to express gratitude for their circumstances and discomfort, hence the term "positive side". However, this motivation missed the mark. Instead of providing genuine support, both participants felt indirectly pressured to shift out of their "negative state". On the flip side, it's possible to unintentionally downplay emotions in an attempt to help others feel better (Long, 2017; Hiscox et al., 2021; Kuscuoglu, & Hartas, 2022; Novick, & Novick, 2023). This phenomenon is closely tied to the culture of positivity, which promotes the belief that maintaining a positive outlook is the universal solution to problems. In reality, insisting on staying positive in challenging situations is not a one-size-fits-all approach and can have unintended consequences (Wood, Perunovic & Lee, 2009; Vongxay et al., 2020; Ren & Shen, 2022).

The study's findings indicated significant disparities between men and women concerning toxic positivity, with adolescents generally falling into the low category of toxic positivity. This aligns with prior research suggesting that toxic positivity among Indonesian Generation Z individuals tends to be on the lower end, implying that adolescents are not inclined towards toxic positivity. Behaviors such as downplaying problems, deeming participants as overly reactive to challenges, and assigning blame for experiencing negative emotions served as indicators of the perpetrators' lack of understanding of the participants' situations. Encouraging participants to maintain a sense of gratitude, toxic positivity ultimately emerges as an impractical and unhelpful form of support. In contrast, validating emotions can play a crucial role in making an individual feel acknowledged and empathized with (Bossowski et al., 2005; Hall & Cook, 2012; Antle et al., 2019). While toxic positivity may manifest in the form of certain remarks during instances of verbal violence, it's important to note that not all statements made during such incidents can be classified as toxic positivity. Toxic positivity is fundamentally a misunderstanding of positive concepts and perspectives. The concept of positivity is rooted in moral-based character development, serving as a primary determinant of one's sense of contentment or discontentment (Arif, 2016; Laurence, 2020; Adjorlolo, & Anum, 2021; Sarizadeh, Najafi, & Rezaei, 2020). Therefore, when viewed through this lens, the objective of toxic positivity is ultimately to lead to happiness. The distinction lies in the fact that toxic positivity is geared towards achieving immediate gratification by disregarding negative emotions (Quintero & Long, 2019; Abdullah et al., 2020; Pronk et al., 2020). Furthermore, the motivation behind toxic positivity, namely a desire to provide help, stands in stark contrast to the context of verbal violence, which constitutes an act of aggression. Verbal violence encompasses more than just negative statements; it may also involve shouting and yelling at others (Elitok et al., 2020; Ermiwati & Fitriani, 2020; Kamaruddinn et al., 2023). Such behavior is not characteristic of toxic positivity, and the underlying intent to assist is absent in the context of violence.

The novelty of this research is that it introduces a new measure of toxic positivity that can capture the subtle and complex ways that people cope with their emotions. The research also contributes to the literature on gender and emotion regulation by highlighting the different patterns and consequences of toxic positivity among male and female adolescents. The research suggests that toxic positivity may be a risk factor for mental health problems and poor well-being in adolescents, especially for boys.

The limitation of this research is that it only uses a self-report questionnaire as the data collection method. This may introduce some biases and inaccuracies in the responses of the participants, such as social desirability, memory recall, or response style. A more valid and reliable method of measuring toxic positivity may include other sources of data, such as interviews, observations, or physiological indicators. The research also has a limited sample size and diversity, as it only involves male and female adolescents in the age range of 18-24 years. A larger and more representative sample may include adolescents from different age groups, cultures, and backgrounds.

Taufik (2012) defines empathy as the act of comprehending the thoughts and emotions of others. According to the participants, empathy goes hand in hand with acts of assistance, encompassing a willingness to lend an ear and extend support beyond just offering positive affirmations. Responses of this nature often lead to placing blame on the participants for their inability to adopt a positive outlook amidst their existing challenges. Empathy exhibits a positive correlation with acts of assistance, as
individuals with a capacity for empathic concern are more likely to engage in behaviors aimed at alleviating the suffering of others (Batson et al., 1991; Hoffman, 2001). Moreover, the effectiveness of the support provided hinges on whether it aligns with the participants’ actual needs. This highlights the pivotal role of validation in the processes of empathy and assistance. Ardian (2019) asserts that a validating response is inherently empathic, whereas the responses from proponents of toxic positivity entail a dismissal of the participants’ emotions. According to Long (2017), such reactions indicate a deficiency in empathetic capacity (Taufik, 2012).

CONCLUSION

Based on the results of the study, it can be concluded that there is a significant difference between men and women in terms of toxic positivity in adolescents. Adolescent girls tend to have lower levels of toxic positivity than adolescent boys. This suggests that female adolescents tend to be more open to the experience and expression of their negative emotions compared to male adolescents. Toxic positivity tends to be more common in adolescent boys, where they may be more likely to face social pressure to remain positive in all situations. With this understanding, it is important to consider gender differences in approaches to toxic positivity and provide space for adolescents to feel and express their emotions without the pressure to always maintain a positive attitude. Support and validation of negative emotional experiences are also important in helping adolescents cope with their problems in healthy and productive ways.

REFERENCES


