

# The relationship between psychological hardiness and resilience and its role in the actual well-being of mothers with handicapped children

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## SUMMARY

### Background and aim

Children with disabilities cause many psychological problems for family members, especially mothers. Considering the importance of mothers' actual well-being in the family and society, the aim of this study was to investigate the relationship between psychological hardiness and resilience and its role in the actual well-being of mothers with handicapped children.

### Materials and methods

This is a descriptive correlational study in which the statistical population was all mothers with children with handicapped (300) covered by the welfare of Tabriz in 2020-2021 using 150 simple random sampling method. People were selected as the sample. Data collection tools were: Ahvaz Kiamarsi et al. (1998) psychological hardiness questionnaire, Connor and Davidson resilience scale, Lyubomirsky and Leper actual happiness scale and Diner life satisfaction scale. Pearson correlation coefficient and multiple linear regression analysis were used to analyze the data using SPSS software version 19.

### Results

The results showed that there is a significant positive relationship between psychological toughness and resilience of mothers with handicapped children. The results also showed that psychological hardiness and resilience have a significant positive relationship with actual well-being and its dimensions (happiness and life satisfaction).

### Discussion

It can be said that psychological toughness reduces the level of anxiety and depression by equipping a person with a shield to deal with stressful situations, and by activating problem-based coping strategies in stressful situations, it makes a person look at events with more optimism.

### Conclusions

The actual well-being of mothers with handicapped children can be predicted by their resilience and psychological resilience.

**Key words:** psychological hardiness, resilience, actual well-being, handicapped children

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## Introduction

Physical disability is one of the major disabilities of children in many countries <sup>1</sup>. The World Health Organization uses disability as a general term for injuries, functional and participatory limitations that lead to dysfunction of the body and deprives the individual of participation in daily personal and social activities <sup>2</sup>. Awareness of any problems, developmental delays, or differences in the child can be very hard on parents. Therefore, parents experience intense emotions when they realize their child's disability. Meanwhile, mothers often experience more stress than fathers because

of their special role in the birth and care of a disabled child. Fathers usually do not express their feelings as much as mothers, while mothers show a wide range of emotions such as anger, sadness, crying and grief<sup>3</sup>. Studies have shown that mothers with disabled children have lower levels of general health and lower happiness, lower quality of life and psychological capital, lower life satisfaction and higher levels of stress compared to mothers of healthy children, and have lower psychological well-being<sup>3-8</sup>.

According to statistics released by the World Health Organization, there are 6.5 million people with disabilities living in the world, of which about 70% are in developing countries. In Iranian society, according to the Welfare Organization, about 7% of the population suffers from some kind of disability and annually about 25,000 children with disabilities are born in the country with severe physical and motor disorders<sup>9</sup>.

Active well-being is a broad concept that includes experiencing pleasant emotions, low levels of negative mood, and high life satisfaction. In short, actual well-being has two components, emotional and cognitive. Emotional or emotional components include the balance of positive emotion (happiness) and negative emotion. The cognitive component (life satisfaction) is also the cognitive assessment that each person makes of the overall quality of life or its specific areas<sup>10</sup>. Therefore, people with actual well-being have a sense of life satisfaction, high positive emotion and low negative emotion<sup>11</sup>. Resilience is one of the factors that help a person to cope with difficult and stressful life situations and protect people against obstacles, maintaining optimism and positive emotions in difficulties, and avoiding erosive strategies pathological disorders and life difficulties<sup>12</sup>.

Connor and Davidson<sup>13</sup> describe resilience as the ability to balance bio-psychological balance in dangerous situations. They see resilience not only as resilience to threatening conditions, but also as the active and effective participation of the individual in the environment. In addition, researchers believe that resilience is a kind of self-healing with positive emotional and cognitive consequences, which in itself plays an important role in adaptation and satisfaction with life as much as possible<sup>14</sup>.

In general, resilience includes: maintaining calm when faced with pressure, being resilient to. In addition, resilient people are normally able to think creatively and flexibly about problem solving, and seek help from others when needed and help others in times of crisis. These people have degrees of health and independence. They believe in their ability to change the environment<sup>15</sup>. Cohn et al.<sup>16</sup> showed that resilience has an effect on increasing positive emotions, happiness and reducing negative emotions. In another study, Suri et

al.<sup>17</sup> stated that psychological well-being is affected by personality factors, including resilience, which can predict 27% of psychological well-being. The results of the study of Sattarpour et al.<sup>18</sup> showed that resilience has a significant positive relationship with the actual well-being of mothers of students with mental disabilities and its dimensions (actual happiness and life satisfaction) and is able to predict about 11% of them.

Pardel et al.<sup>19</sup> concluded that psychological resilience has a significant effect on the feeling of happiness and improving the quality of life of mothers of children with ADHD. Poursardar et al.<sup>20</sup> showed that resilience leads to greater life satisfaction by reducing negative emotions and increasing mental health.

It should be noted that another variable that is closely related to actual well-being is psychological hardiness. Stubbornness is a combination of beliefs about self and the world using the existential theories of personality, which consists of three components: challenge, control and commitment<sup>21</sup>. In fact, psychological rigidity is a single structure that deals with the integrity of its components and creates homogeneity in them<sup>22</sup>.

Psychological stubbornness is born of the knowledge that a person has more resources to respond to stress. In other words, it is a fundamental sense of control that allows the stubborn person to achieve a number of useful and effective strategies. Also, psychological stubbornness causes a person to consider their stresses in a realistic and far-sighted way. Ultimately, psychological stubbornness reinforces an optimistic view of psychological stress.

In fact, psychological resilience is a shield against intense physiological arousal due to stressful events<sup>23</sup>. Psychological hardiness has a negative effect on stress and a positive effect on satisfaction. Hardiness may act as an important coping force against the effects of pressure for change<sup>24</sup>. Studies show that there is a significant relationship between psychological toughness with physical and mental health, mental happiness, emotion control, anger, anxiety, depression and quality of life<sup>25-28</sup>. Baghchaghi et al.<sup>29</sup> concluded that psychological toughness is an important predictor of cognitive emotion regulation strategies that lead to improved quality of life in mothers of autistic children. Also, Asghari and Mamizadeh<sup>30</sup> showed that psychological hardiness can predict 51% of psychological well-being.

Obviously, all people can achieve well despite the hardships and sufferings that lie ahead. Mothers with handicapped children are no exception.

In view of the above, and considering that the mother has a key role in maintaining the psychological and social balance of the family, and creating tension and pressure in the mother affects other family members, and given that the mother has an important role in mental

health of family members It is very important to address the situation of mothers with handicapped children.

Considering the mentioned effects of individual psychological and personality capacities (resilience and psychological hardiness) on the well-being of mothers of exceptional children and the importance of actual well-being for mothers of children with handicapped children, as well as insufficient research in this field, The predictive role of psychological toughness and resilience in the actual well-being of mothers with handicapped children was assessed.

## Materials and methods

This study according to the purpose of basic studies and in terms of data collection and analysis; the method used is descriptive and correlational design. The statistical population studied in this study was all mothers with handicapped children covered by the General Welfare Office of Tabriz in 2020 (400 people according to the statistics of the General Welfare Office of Tabriz). The sample size was estimated to be 196 based on Cochran's formula and the samples were selected by simple random sampling.

Inclusion criteria: 1. Having a child with a physical disability; 2. Having a minimum diploma; 3. Age range 30 to 45 years; 4. Having an average economic status; 5. To have complete satisfaction to participate in the research. And exclusion criteria; There was no completion of the questionnaire or any particular problem during the research.

After receiving permission from the General Welfare Office of Tabriz and coordination with the authorities, the selected mothers (196 people) were invited to attend the amphitheater of the General Welfare Office of Tabriz at the appointed time. After the presence of mothers with handicapped children and the researcher's relationship with them, the researcher explained the purpose of the research, the method of completing the questionnaire and after obtaining cooperation and informed consent, three questionnaires were presented to mothers continuously and together to complete it. Questionnaires were designed without a name and were collected by the subject after completion.

### Following tools have been used to collect information

Ahvaz Hardiness Inventory (AHI): This questionnaire was developed by Kiamarsi, Najarian and Mehrabizadeh Honarmand<sup>23</sup>. This questionnaire has 20 items and its purpose is to evaluate the degree of stubbornness and its factors in individuals. The way of scoring this questionnaire is that the options will never, rarely, sometimes and often will get scores of 4, 3, 2, 1, respectively. The sum of the total scores of these questions is considered as the toughness score of the subject and

the higher this score is, the higher the toughness of the respondent and vice versa. In this questionnaire, questions 1 to 9 are related to the commitment factor, questions 10 to 16 are related to the control factor and questions 17 to 20 are related to the struggle factor.

Cronbach's alpha coefficient was used to measure the internal consistency of "Ahvaz Hardiness Questionnaire" and based on the findings of alpha coefficients for the whole sample, male and female subjects were 0.76, 0.76 and 0.74, respectively. To assess the reliability of the "Ahvaz Hardiness Scale", this test was presented again to 119 students (53 boys and 66 girls) after six weeks. Correlation coefficients between the subjects' scores were obtained in two rounds, ie pre-test and post-test again for all subjects,  $r = 0.84$ , male subjects =  $r = 0.84$  and female subjects:  $r = 0.85$ . The Maslow Self-Prosperity Scale, the Structural Validity Scale, the Ahvaz Depression Scale, and the Anxiety Scale were given to groups of students.

The correlation coefficients between the scores of all subjects on the scale of stubbornness and anxiety for the whole sample, male and female subjects were -0.62, -0.71, -0.57, respectively. The correlation coefficients between the total scores of the subjects, male and female subjects on the self-fulfillment scale with the Ahvaz hardness scale were 0.55, 0.65 and /45, respectively. The results of Pearson correlation tests between the subjects' scores on the Hardness Structure Validity Scale and the Ahvaz Stiffness Scale showed that the correlation coefficients were statistically significant and these coefficients were 0.51, 0.61 and 0.46 for all subjects, male and female subjects, respectively<sup>23</sup>.

Resilience Questionnaire: Connor and Davison Resilience Scale were used to measure resilience<sup>13</sup>. This scale consists of 25 items, each of which is graded on a five-point Likert scale from zero to four and has a total score. Validity (by factor analysis and convergent and divergent validity) and reliability (by retesting and Cronbach's alpha) resilience scale has been achieved by the test manufacturers in different normal and at-risk groups. In Iran, Mohammadi<sup>31</sup> reported the reliability of this scale as 0.89 and its validity between 0.14 to 0.64. In the present study, the reliability of the resilience scale was calculated to be 0.86 using Cronbach's alpha method.

Tests such as the Lyubomirsky & Lepper Active Happiness Scale<sup>32</sup> and the Diener Life Satisfaction Scale<sup>33</sup> are among the most appropriate scales for assessing actual well-being. These two self-assessment tests were used to assess the actual well-being of retired teachers. Therefore, the total score of happiness and life satisfaction will be the level of actual well-being<sup>34</sup>.

The actual happiness scale has 4 items and people respond to it on a five-point scale. This scale measures

people's happiness independently and in comparison with their peers. The internal validity of the scale is reported from 0.85 to 0.95 based on Cronbach's alpha<sup>35</sup>. The Persian version of this scale has been validated in Iran<sup>35</sup>. Cronbach's alpha coefficient of Persian version is equal to 0.76 and its correlation with life satisfaction scale is reported between 0.43 to 0.47<sup>36</sup>.

The Life Satisfaction Scale has five items and is a single factor. This scale is designed to measure the cognitive dimension of actual well-being. The validity of the scale was 0.87 with Cronbach's alpha method and 0.82 with two-month interval with retest method<sup>34</sup>. This scale has been validated in Iran by Bayani et al.<sup>36</sup> They obtained the validity of the scale using the Cronbach's alpha method of 0.83 and the retest method of 0.69.

### Data analysis

Data were analyzed using SPSS software and Pearson correlation and multiple regression tests.

### Results

According to the findings of Table I, the mean of actual well-being ( $\pm 5.11$ ) is 19.51, psychological hardiness (13 6.13) is 57.23 and resilience (54 10.54) is 56.34.

Kolmogorov-Smirnov test was used to evaluate the normality of the distribution of variables. The results of Kolmogorov-Smirnov test (Tab. II) indicate that all variables have a normal distribution ( $p < 0.05$ ).

Pearson correlation was used to investigate the relationship between variables. The results of Pearson correlation test are given in Tab. III. The results of Pearson correlation test show that there is a relationship between psychological toughness with actual well-being ( $p < 0.05$ ,  $r = 0.50$ ), actual happiness ( $p < 0.05$ ,  $r = 0.30$ ) and life satisfaction (0.05).  $> p$ ,  $r = 0.52$  There is a significant positive relationship. Between resilience with actual well-being ( $p < 0.05$ ,  $r = 0.38$ ), actual happiness ( $p < 0.05$ ,  $r = 0.37$ ) and life satisfaction ( $p < 0.05$ ,  $r = 0.23$ ) There is a significant positive relationship.

Simultaneous multiple linear regression has been used to investigate the predictive role of psychological toughness and resilience in the actual well-being of mothers

with handicapped children. The multiple correlation coefficient is 0.56 and the determination coefficient is 0.31. In fact, 31% of the variance of actual well-being is explained by the variables of psychological toughness and resilience. The value of the Watson camera is 1.87. Since this value is between 1.5 and 2.5, it is concluded that the criterion variable is not self-correlated and the errors are independent of each other. Also, the significance level of F test is equal to 0.001. Considering that the level of significance of F-test is less than 0.05, it shows that there is a significant linear relationship between the criterion variable and the predictor variables (Tab. IV).

The final regression results are presented in Table V. According to the table, it is concluded that psychological hardiness ( $p = 0.001$  and  $\beta = 0.43$ ) and resilience ( $p = 0.001$  and  $\beta = 0.25$ ) have a positive effect on the actual well-being of mothers with handicapped children. They are meaningful. Thus, psychological hardiness and resilience variables can predict the actual well-being of mothers with handicapped children. Psychological hardiness with a standardized coefficient ( $\beta$ ) of 0.43 has the greatest effect on predicting actual well-being.

### Discussion

The aim of this research was to study the relationship between psychological hardiness and resilience and its role in the actual well-being of mothers with handicapped children. The results showed that psychological hardiness and its components (commitment, control, struggle) have a significant positive relationship with the actual well-being of mothers with handicapped children and its dimensions (actual happiness and life satisfaction) and is able to improve their well-being.

There is no report in the research literature about the role of psychological hardiness in the actual well-being of mothers with handicapped children; But the result obtained with the results of Florian et al.<sup>25</sup>, Tavakoli et al.<sup>26</sup>, Azarian et al.<sup>27</sup>, Shokouhi Fard et al.<sup>28</sup>, Baghchaghi et al. There is a significant positive relationship between psychological toughness with physical and mental health,

**TABLE I.** Descriptive statistics of variables ( $n = 196$ ).

Variables	M	Standard deviation	Skew	Elongation	Minimum	Maximum
General welfare	19.51	5.11	-0.02	-0.51	8	32
Happy activity	8.90	3.32	-0.11	-0.94	2	15
Life satisfaction	10.60	2.97	0.12	-0.33	4	18
Psychological hardiness	57.23	6.13	-0.49	0.04	40	70
Resilience	56.34	10.54	-0.36	-0.44	28	77

**TABLE II.** Results of Kolmogorov-Smirnov test to check the normality of the distribution of variables.

Variables	N	Statistics Z Kolmogorov-Smirnov	Sig.
General welfare	196	0.979	0.293
Happy activity	196	1.312	0.075
Life satisfaction	196	1.249	0.088
Psychological hardiness	196	1.24	0.092
Resilience	196	1.022	0.247

**TABLE III.** Pearson correlation test results for variable relationships ( $n = 196$ ).

Variables	General welfare	General welfare	Life satisfaction	Psychological hardiness	Resilience
General welfare	r	1			
	p				
Happy activity	r	0.834	1		
	p	0.001			
Life satisfaction	r	0.787	0.316	1	
	p	0.001	0.001		
Psychological hardiness	r	0.502	0.304	0.523	1
	p	0.001	0.001	0.001	
Resilience	r	0.378	0.371	0.234	0.301
	p	0.001	0.001	0.001	0.001

**TABLE IV.** Correlation table, camera-Watson and F for the effect of resilience and psychological toughness on mothers' actual well-being.

Multiple correlation coefficient	Determination coefficient	Watson camera	F	Sig.
0.555	0.308	1.866	42.961	0.001

**TABLE V.** Table of regression coefficients.

	Non-standardized coefficients		Standardized coefficients	T	Sig.
	B	Std. Dev.	Beta		
Fixed value	-7.643	2.985		-2.561	0.011
Psychological hardiness	0.355	0.052	0.427	6.794	0.001
Resilience	0.121	0.03	0.249	3.968	0.001

psychological well-being, control of negative emotions, mental happiness and improving quality of life. Families with children with disabilities are under more stress than families with healthy children. In addition, the first person who has direct contact with the child is the mother.

While constant maintenance and the need to provide special conditions for growth and exposure to pressures such as, stereotyped behaviors and lack of self-care skills in these children weaken the normal functioning of the mother and also mothers react negatively to their



child's behaviors. It causes high levels of stress and marital conflicts, separation, divorce, low self-esteem, decreased happiness and life satisfaction in mothers with handicapped children <sup>7</sup>.

Explaining this research finding, it can be stated that how the mother deals with this issue (birth crisis of a disabled child) depends on the personality traits of the mother.

Hardship, defined by Kubasa as a personality construct, is a combination of components of commitment, control, and struggle that contribute to individuals' physical and mental health by coping with traumatic events and modifying life stressors, also, mothers who score high in the struggle component view life problems and stressors as an opportunity for growth and change rather than failure. This attitude to stress and problems effectively deal with it and prevents the weakening of the immune system and vulnerability of people and brings them mental and physical health, and as a result with positive emotions and life satisfaction in mothers with handicapped children. There is a movement.

The results also showed that resilience has a significant positive relationship with the actual well-being of mothers with handicapped children and its dimensions (actual happiness and life satisfaction) and is able to predict their actual well-being. This finding suggests that by promoting resilience, mothers can resist and overcome stressors as well as factors that cause many psychological problems. Resilience also ensures the psychological well-being of individuals by modulating and mitigating factors such as stress and depression <sup>37</sup>. This finding is consistent with the results of the research of Sattarpour et al. <sup>18</sup> showed that the inclusion of significant variance in the actual well-being (happiness and practical satisfaction and life satisfaction) of mothers of mentally retarded students explains.

Also, it is consistent with the results of studies by Cohn et al. <sup>16</sup>, Souri et al. <sup>17</sup>, Pardel et al. <sup>19</sup>, Poursardar et al. <sup>20</sup>, that resilience on increasing positive emotions, happiness and decreasing negative emotions, well-being it has a greater psychological effect on life and satisfaction. Explaining this research finding, it can be stated that resilience, which means coping with problems in traumatic events and being flexible in responding to the pressures of daily life, is a trait that varies from person to person and can grow or decrease over time <sup>38</sup>.

Resilience strengthens successful coping with negative experiences by increasing levels of positive emotions. Based on this, it seems that resilient people look at problems creatively and flexibly, plan to solve them and do not hesitate to ask for help from others when needed, and have complete resources to deal with the problems that these factors cause the person have a life satisfaction <sup>39</sup>.

Therefore, it can be said that by promoting resilience, mothers with handicapped children can resist and overcome stressors as well as factors that cause many psy-

chological problems. By reducing psycho-emotional problems in mothers, mental well-being and life satisfaction in mothers are improved.

The results of simultaneous multiple regression analysis also showed that psychological hardiness and resilience explained 31% of the actual welfare variance of mothers with handicapped children and had significant predictive power and psychological resilience and resilience with standardized beta coefficient (0.43 and 0.25) have the most and the least effect on the prediction of actual well-being, respectively. Therefore, the most important predictor variable in this study is psychological toughness. In fact, it can be said that psychological toughness reduces the level of anxiety and depression by equipping a person with a shield to deal with stressful situations, and by activating problem-based coping strategies in stressful situations, it makes a person look at events with more optimism. As a result, it reduces the risk of diseases and increases pleasant emotions, happiness and positive feelings about life and well-being in the individual, and as a result, increases life satisfaction in mothers.

## Conclusions

The results of the present study showed that psychological hardiness and productivity can significantly predict changes in actual well-being in mothers with handicapped children and strong variables in explaining the actual well-being of mothers with handicapped children. Therefore, it is recommended that mothers and their families be taught how to increase them, and that government institutions and organizations provide the necessary support for them. Also, due to the limitations of the research, which is a sample only of mothers with handicapped children, it is suggested that such research be conducted in mothers of other groups with special needs, fathers and in other cities.

## Ethical consideration

This research has been conducted in compliance with ethical standards and participants' satisfaction.

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## Conflict of interest

There is no conflict of interest for the authors of this article.

## Author contributions

Both Authors had a common share.

## References

- 1 Tsai C-F, Guo H-R, Tseng Y-C, et al. Sex and geographic differences in the prevalence of reported childhood motor disability and their trends in Taiwan. *Biomed Res Int* 2018;6754230. <https://doi.org/10.1155/2018/6754230>
- 2 Aurora U. Study for determining laterality in children with motor disabilities in adapted physical activities. *Proced Soc Behav Sci* 2014;117:646-652. <https://doi.org/10.1016/j.sbspro.2014.02.276>
- 3 Salehi M, Shirin K, Hagh Doost N. The compaire of mental health, coping strategies and well- being between mother with physically handicap and normal children. *J Psych Res* 2011;3:1-12.
- 4 Murphy NA, Christian B, Caplin DA, et al. The health of caregivers for children with disabilities: caregiver perspectives. *Child Care Health Develop* 2007;33:180-187<https://doi.org/10.1111/j.1365-2214.2006.00644.x>
- 5 Eisenhower AS, Baker BL, Blacher J. Preschool children with intellectual disability: syndrome specificity, behaviour problems, and maternal well being. *J Intellect disab Res* 2005;49:657-671. <https://doi.org/10.1111/j.1365-2788.2005.00699.x>
- 6 Bayrami M, Movahedi Y, Kodaryari F. The compersion of psychological capital and quality of life between mothers of healthy and handicapped children. *Iran J Rehab Res Nurs* 2015;1:42-51.
- 7 Aghajani Mj, Hosain Khanzadeh A, Akbari B, et al. The effect of the Islamic positive thinking training on anger management and life satisfaction in mothers of exceptional children. *Middle East J Disab Stud* 2017;7:1-6.
- 8 Lee J. Maternal stress, well-being, and impaired sleep in mothers of children with developmental disabilities: a literature review. *Res Develop Disab* 2013;34:4255-4273. <https://doi.org/10.1016/j.ridd.2013.09.008>
- 9 Khodabakhshi KA. Consoling and psychotherapy in disability rehabilitations (application of theories). 2<sup>nd</sup> Ed. Tehran: Danje 2012.
- 10 Nassir Aqa B, Hojjatollah F, Ali Reza Fazili M. Spiritual intelligence and subjective well-being. *Ravanshenasi Va Din* 2012;4:83-96.
- 11 Pavot W, Diener E. The satisfaction with life scale and the emerging construct of life satisfaction. *J Posit Psych* 2008;3:137-152. <https://doi.org/10.1080/17439760701756946>
- 12 Riahi M, Malekitabar M, Farahbakhsh K, et al. Effectiveness of mindfulness Group Therapy on resilience of the mothers of children with physical-motor disabilities. *Middle East J Disab Stud* 2017;7:106.
- 13 Connor KM, Davidson JR. Development of a new resilience scale: the Connor-Davidson Resilience Scale (CD-RISC). *Depress Anxiety* 2003;18:76-82. <https://doi.org/10.1002/da.10113>
- 14 Luthar SS, Cicchetti D, Becker B. The construct of resilience: a critical evaluation and guidelines for future work. *Child Dev* 2000;71:543-562. <https://doi.org/10.1111/1467-8624.00164>
- 15 Bogar CB, Hulse-Killackey D. Resiliency determinants and resiliency processes among female adult survivors of childhood sexual abuse. *J Couns Develop* 2006;84:318-327. <https://doi.org/10.1002/j.1556-6678.2006.tb00411.x>
- 16 Cohn MA, Fredrickson BL, Brown SL, et al. Happiness unpacked: positive emotions increase life satisfaction by building resilience. *Emotion* 2009;9:361-368. <https://doi.org/10.1037/a0015952>
- 17 Hossein S, Elahe H, Javad E. The correlation of resiliency and optimism with psychological well-being. *Int J Behav Sci* 2013;7:271.
- 18 Sattarpour FI, Jamali YG, Leyla H, et al. Investigating the role of predictability of resilience, social support and intellectual aptitude in subjective well-being of student's mothers with intellectual disability. *J Know Health* 2018;13:1-9. <https://doi.org/10.22100/jkh.v13i1.1889>
- 19 Pardel H, Dideh Roshani S, Hejazipour M. The effectiveness of mental resilience training on happiness and improving the quality of life of mothers of children with ADHD. Third National Conference on Mental Health and Wellness, Quchan (Iran), 2014.
- 20 Poursardar F, Abbaspour Z, Abdi Zarrin S, et al. The effect of resilience on enhancing mental health and life satisfaction. *Scientific Magazine Yafte* 2012;14:81-89.
- 21 Soodeh K, Maedeh Sadat E, Mohammad Hossein A, et al. The relationship between hardiness and resilience with self-efficacy in crisis managers of Red Crescent society. *J Res Relief* 2017;8:70.
- 22 Kobasa SC. Stressful life events, personality, and health: an inquiry into hardiness. *J Personal Soc Psychol* 1979;37:1-11. <https://doi.org/10.1037//0022-3514.37.1.1>
- 23 Mirzamohammadi Z, Mohsenzadeh F, Arefi M. The relationship between parenting styles, psychological hardiness, and students' resilience. *Quart J Family Res* 2017;13:97-120.
- 24 Rush MC, Schoel WA, Barnard SM. Psychological resiliency in the public sector: "Hardiness" and pressure for change. *J Voc Behav* 1995;46:17-39.
- 25 Florian V, Mikulincer M, Taubman O. Does hardiness contribute to mental health during a stressful real-life situation? The roles of appraisal and coping. *J Personal Soc Psychol* 1995;68:687-695. <https://doi.org/10.1037//0022-3514.68.4.687>
- 26 Tavakoli N, Saliminia N. The relationship between psychological hardiness and mental happiness with women's burnout. 3<sup>rd</sup> National Conference on Science and Technology of Educational Sciences, Social Studies and Psychology of Iran, Tehran, 2017.
- 27 Azarian A, Farokhzadian AA, Habibi E. Relationship between psychological hardiness and emotional control index a communicative approach. *Intern J Med Res Health Sci* 2016;5:216-221.
- 28 Shokohifard S, Hamid N, Soodani M. The effect of hardiness training on quality of life of teacher training female students. *Know Res Appl Psych* 2017;14:14-25.
- 29 Baghchaghi F, Vakili S, Kashani Vahid L. A study of the relationship between quality of life and psychological hardiness with cognitive emotion regulation strategies of mothers of autistic children. Family Conference, Autism Disorder and Associated Challenges, Tehran, 2019.
- 30 Asghari Ebrahimabad M, Mamizade M. An investigation into the role of psychological flexibility and hardiness in explaining soldier's psychological well-being. *Res Clinic Psych Counsel* 2018;8:37-51.
- 31 Mohammadi M, Jazayeri A, Rafie AH, et al. resilience factors in individuals at risk for Substance abuse. *J Psych (Tabriz University)* 2006;1:203-224.
- 32 Lyubomirsky S, Lepper HS. A measure of subjective happiness: preliminary reliability and construct validation. *Soc Indic Res* 1999;46:137-155.
- 33 Diener E. Assessing subjective well-being: progress and opportunities. In: Diener E, Ed. *Assessing well-being: the collected works of Ed Diener*. New York: Springer 2009, pp. 25-65. <https://doi.org/10.1007/978-90-481-2354-4>
- 34 Salehi M, Janbozorgi M, Tabatabaei SKRZ. The effectiveness of Islamic hope therapy on the subjective well-being of the people with multiple sclerosis compared with snyder hope therapy. *Psychol Relig* 2016;9:29-50.
- 35 Aghababai N, Farahani HA, Rahiminejad A, et al. Spirituality and subjective well-being in university students and clergies. *J Psychol Sci* 2009;8:360-372.
- 36 Bayani AA, Koochekey AM, Goodarzi H. The reliability and validity of the satisfaction with life scale. *J Iran Psych* 2007;3:259-260.
- 37 Haghighat S, Shariatnia K. A study of the relationship between resilience and psychological hardiness with students' psychological well-being. The First Scientific Conference on Educational Sciences and Psychology of Social and Cultural Injuries in Iran, Tehran, 2014.
- 38 Khalatbari J, Bahari S. Relationship between resilience and satisfaction of life. *J Educ Psych* 2010;2:83-94.
- 39 Karami J, Sanjabi A, Karimi P. The prediction of life satisfaction among the elderly based on resilience and happiness. *Ag Psych* 2017;2:229-236.