

The Effectiveness of Psycho-social Empowerment on Enhancement of Student's Psychological Well-Being and Resilience

Amin Taghipour^{1,*}, Gholam Hossein Javanmard²

¹Education Department, Bonab, Iran

²Psychology Department, Payam Noor University (PNU), Tehran, Iran

Email address:

amintaghipur@yahoo.com (A. Taghipour)

*Corresponding author

To cite this article:

Amin Taghipour, Gholam Hossein Javanmard. The Effectiveness of Psycho-social Empowerment on Enhancement of Student's Psychological Well-Being and Resilience. *Advances in Social Psychology*. Vol. 2, No. 1, 2017, pp. 6-13. doi: 10.11648/j.asp.20170201.12

Received: May 1, 2017; **Accepted:** May 9, 2017; **Published:** July 5, 2017

Abstract: The aim of this study is to investigate the effectiveness of psycho-social empowerment on enhancement of well-being and resilience in the junior high school students. The type of research is Quasi-experimental pretest-posttest study with control group. There were selected 30 junior high school students for statistical samples and were placed in two control (n=15) and test (n=15) groups randomly. Both groups responded the questionnaires firstly the resilience questionnaire [1] (CD-RISC) and the psychological well-being questionnaire [2]. The test group received psycho-social empowerment training program and the control group did not receive any intervention. After, the members of both groups answered the psychological well-being questionnaires. The results showed psycho-social empowerment training program was significantly increased the psychological well-being and resilience.

Keywords: Psycho-social Empowerment Program, Psychological Well-Being, Resilience

1. Introduction

The health psychology seeks to identify the structures and ways which follow the mental health. The health psychology attempts to help the human in adjusting and adapting to life problems and threats. In this regard, one of the significant issues in health psychology and mental health is the resilience. Garmezy and Muston [3] have known the resilience as the capability process or the successful adaptation consequence with the adverse condition (damages and threats). In other words, the resilience is the positive compatibility in response to the adverse conditions [4]. Ruter [5] has defined the resilience as the individual differences in response to difficult situations. So, a resilient person processes the adverse situations through positive method and considers his ability to deal with it. Of course the resilience not only is the stability against threatening damages and conditions and the passive status dealing with dangerous conditions but also the active and constructive participation in its surrounding environment. It can be stated that the

resilience is the ability of a person to establish the biological and psychological balance in dangerous situations [1]. According to opinion of Bandura, the resilient individuals behave through four processes including cognitive, emotional, motivational and selective processes. These persons consider the challenges as the opportunities for the cognitive growth with the minimum stress (emotional) and maximum setting (motivation) for reorganization (optional). So, the resilient persons are dynamic and flexible in front of the life conditions [6]. Also, most researchers believe that the resilience is some kind of recovery with positive emotional and cognitive consequences [7], [8]. In recent years, some researchers in the field of the mental health, positive psychology, have selected the different theoretical approach to explain and study this concept. They have considered the mental health as the positive psychological functioning and conceptualized it in form of psychological well-being. They have believed that the healthy person characteristics are included having a sense of satisfaction in the life, the, sufficient progress, the effective interaction with the world, creating positive energy and good relationships with the

community and the positive progress. They do not know enough feeling healthy physically [9], [10]. In fact, the psychological well-being is the most important and the greatest goal of human life affected the mental health more than any other factor [11]. Adolescence is the most important and the most complex period of life. The problems and difficulties arising from maturity and adolescence are in such a way that the teenage period can be called the period of crisis and pressure [12]. In teenage years, there are conflicts and contradictions [13]. Anxiety and depression are the disorders that have the significant growth in the adolescence [14]. One of the factors threatens the health of the students is stress. Little stress can have the positive effect and increase the motivation as an incentive to deal with problematic situations. But too much stress can make anger, fear and disappointment endangering the physical and mental health of the students [15]. Adolescents are in the periodic transformation with the rapid changes in the field of biological, cognitive and emotional characteristics. These unwanted growths impose the pressures on them. Some part of these pressures are caused by physical changes (such as hormones, sudden change of body parts and physical appearance) and some of the pressures are related to socio-cultural factors (including peer pressure to smoke, changes in family, changing school, difference and the conflict between parents or the family pressure for academic achievement in school and attachment to groups outside the family) [16]. In this period, the aggression and crime increase in boys [17] and the drug use increases [18]. The problems and disorders of behaviors in the adolescents, in most cases, cause deep emotional and social disabilities [19]. Due to increasing changes and complexity and expansion of the social relations nowadays, it is necessary that people especially adolescents and youth to be prepared to deal with the difficult situations. The importance and necessity of life skills training will be obvious when the people know these skills can improve the mental and social abilities. Psychosocial Empowerment Approach is one of the approaches applied in psychology to prevent in different fields. This approach focuses on the training of public personal and social skills. These capabilities help the person to have the effective reaction and positive and consistent interaction with other people, society, culture and environment when faced with problems. As a result, by creating positive and healthy behaviors, many problems will be solved [20]. The empowerment program has been introduced by Anderson et al in 1990 [21]. It is considered as a teaching method. The life skills training is a prevention program based on the psycho-social empowerment approach known and admitted as the most effective proactive approach by many academic and research institutions including America Psychological Association, the Center for Disease Control and Prevention, America Medical Association, National Institute of Drug Abuse, National Cancer Institute, Center for the Prevention of Substance Abuse and Crime Prevention and the Office of Juvenile Crime [22]. The life skills training is a prevention program based on the psycho-social empowerment approach known

and admitted as the most effective proactive program. It has been evaluated and expanded over all programs widely. Generally, the life skills include abilities leading to the mental health promotion, the richness of human relations, the improvement of health and healthy behaviors in community. The life skills have been applied as a solution to promote the psychological health and as the tool to prevent the psycho-social damages in the society such as addiction, domestic and social violence, child abuse, suicide AIDS and etc. As a whole, the life skills are the powerful tools in hands of the mental health administrators in the community in order to empower the youth in psychological aspects. These skills help people to act positively and preserve themselves and the community from the psycho-social damages and attempt to promote their psychological health level [23]. This program should be fit out due to the population. Mirjana et al [24] tested, in a study, 37 patients with type 2 diabetes and investigated the empowerment effects and the psycho-social interventions on the life quality and the metabolic control. They concluded that the empowerment based on the psycho-social intervention can promote the life quality and increase the metabolic control in the patients. They also reported that these interventions could promote the patients due to social and psychological aspects. Some researchers including Zamanzadeh, Seyed Rasoli and JabarzadehTabrizi [25] investigated the effects of the psycho-social empowerment program on the control of the psycho-social aspects of the diabetic patients. They concluded that such programs could increase the ability of the patients in achievement of the social supports, the increase of the motivation, the increase of decision making and the effective control of the stress associated with the diabetes. Also, Mahmoodi and Malekshahi [26] investigated the impact of emotional intelligence, low resilience and psycho-social empowerment approach on the reduction of addiction in patients with psychosomatic disease. They concluded that there is difference between the emotional intelligence, the resilience of the patients with psychosomatic disease and the ordinary people. Also, the psycho-social empowerment approach is very effective in reduction and recurrence of substance use and misuse of drugs in patients with psychosomatic disease. Elmi [27] investigated the effects of the life skills training program on the psychological wellbeing promotion and resilience in female students of secondary school in Karaj. He concluded that this program had the significant effect on the psychological wellbeing promotion and resilience factors. Sadr Mohamadi et al [28] determined the life skills training program and the mental health of the girls and realized that the life skills training program can be effective in increasing happiness and life satisfaction.

Current study performed on the adolescents is a psycho-social empowerment program including self-awareness, coping with stress and negative emotions, establishment and maintenance of effective interpersonal relations, assertiveness, the skill of solving problems, anger management skills and critical thinking skills. We attempt, in the current study, to investigate the effectiveness of psycho-

social empowerment on enhancement of well-being and resilience in the junior high school students. So obviously, the question of this study is: "Can psycho-social empowerment program be effective on enhancement of well-being and resilience in the junior high school students?"

2. Methodology

In this study, the type of research is Quasi-experimental pretest-posttest study with control group. The statistical population is included 648 persons from male students among the junior high schools in Bonab. Among them, 60 persons were selected by available sampling method. Also, 30 persons gained the score below average in both scales (psychology wellbeing and resilience) were separated and randomly assigned to experimental and control groups. The experimental group attended in psycho-social empowerment program sessions (8 sessions, every session 90 minutes). The control group did not receive any intervention. The psycho-social empowerment training program has shown in Table 1.

The empowerment program has been introduced by Anderson [21]. It is considered as a teaching method. The life skills training is a prevention program based on the psycho-social empowerment approach known and admitted as the most effective proactive approach by many academic and research institutions including America Psychological Association, the Center for Disease Control and Prevention, America Medical Association, National Institute of Drug Abuse, National Cancer Institute, Center for the Prevention of Substance Abuse and Crime Prevention and the Office of Juvenile Crime [22]. The life skills training is a prevention program based on the psycho-social empowerment approach known and admitted as the most effective proactive program. It has been evaluated and expanded over all programs widely. Generally, the life skills include abilities leading to the mental health promotion, the richness of human relations, the improvement of health and healthy behaviors in community. The life skills have been applied as a solution to promote the psychological health and as the tool to prevent the psycho-social damages in the society such as addiction, domestic and social violence, child abuse, suicide AIDS and etc. As a whole, the life skills are the powerful tools in hands of the mental health administrators in the community in order to empower the youth in psychological aspects. These skills help people to act positively and preserve themselves and the community from the psycho-social damages and attempt to promote their psychological health level [23].

There was performed another posttest in order to investigate the effects of psycho-social empowerment training program on psychological well-being enhancement and resilience over time. Due to time constraints, on the one hand, and uncontrolled variables such as environment, culture and relations with peers, on the other hand, the implementation of this test is neglected. Some measurement tools of this study are included:

2.1. Psychological Well-Being Questionnaire

This questionnaire made by Ryff [2] has 84 items in order to evaluate the psychological well-being of the persons. Also, this questionnaire has 6 subscales and every scale has 14 questions. The subscales are: positive relationship with others, independence, environmental mastery, personal growth, purpose in life and self-acceptance. In 2005, Van Dirndank [29] measured the Cronbach's alpha coefficients for the 14-item version in scales such as independence, environmental mastery, personal growth, positive relationship with others, purpose in life and self-acceptance 0.90, 0.80, 0.83, 0.77, 0.84, 0.82, respectively. Chang & Chan [30] reported the Cronbach's alpha coefficients for scales such as independence, environmental mastery, personal growth, positive relationship with others, purpose in life and self-acceptance 0.59, 0.63, 0.55, 0.65, 0.70, 0.59, respectively. The reliability coefficient of Ryff with retest method for the psychological well-being scale is reported 0.82 and the subscales of self-acceptance, positive relationship with others, independence, environmental mastery, purpose in life and personal growth are 0.71, 0.77, 0.78, 0.77, 0.70, and 0.78, respectively [31]. Ryff used the measures such as the emotional balance of Bradburn [32], life satisfaction of Nwegorton [33] and self-esteem of Rosenberg [34] to examine the validity and its relationship with measures for the personal traits considered the psychological well-being index. The results of the correlation test of Ryff were acceptable with each of the mentioned measures. So, this tool was considered a valid tool due to structure. The Cronbach's alpha achieved in the study of Ryff [2] is as follows: self-acceptance (0.93), positive relationship with others (0.91), independence (0.86), environmental mastery (0.90) and personal growth (0.87).

2.2. Resilience Scale of Connor & Davidson (CD-RISC)

In this study, there has been used the resilience questionnaire of Connor & Davidson (CD-RISC) [1] in order to measure the resilience level of the students. This scale has 25 items. The psychometric characteristics of this scale have been determined in six groups: general population, patients for the primary cares, outpatient psychiatric patients, the patients with the problem of generalized anxiety disorder and two groups of patients with post-traumatic stress disorder. The researchers of this scale have believed that this questionnaire can separate the resilient persons from others in clinical and non-clinical groups and it can be applied in clinical research situations [35]. Although the results of exploratory factor analysis have confirmed the five factors (personal competence / tenacity, trust in ones instinct / tolerance of negative effects, positive acceptance of change/ secure relationships, spirituality) for the resilience scale; the reliability and validity of the subscales have not yet confirmed and the total score of the resilience is the valid score for the purpose of the research (Connor & Davidson, 2003). Internal consistencies, test-retest reliability,

convergent and divergent have been reported as the suitable level. The consistency and reliability of Persian form of the resilience scale has been investigated and confirmed in preliminary studies on the patients and its validity has been confirmed in Iran in 2007 by Besharat [36]. In this study, the overall reliability obtained by Cronbach's alpha is 0.79. This 25-item scale measures the structure of the resilience in 5-

degree size of Likert resilience (from zero to four). So, completely wrong option has the score 0, rarely correct option has the score 1, sometimes correct option has the score 2, most correct option has the score 3 and always correct option has the score 4. The minimum score of the resilience of the subjects in this scale is zero and the maximum score is 100.

Table 1. *Psycho-social empowerment training program.*

sessions	Purposes
Session 1	Introducing the group members and familiarity with programs, purposes, rules and framework of the group
Session 2	Teaching the concept of self-awareness skill
Session 3	Familiarity with the concept of stress and negative emotion and learning to deal them
Session 4	Teaching and familiarity of the students with problem solving and decision making skills
Session 5	Teaching and familiarity of the students with better family relationships
Session 6	Teaching and familiarity of the students with dare behaviors
Session 7	Teaching anger management skill
Session 8	Teaching critical thinking skill and posttest performance

3. Findings

For the test, there has been used the overall difference between groups after teaching at post-test program and covariance analysis. The results have shown in table 2.

Table 2. *The results of covariance analysis and the overall difference of the groups at post-test of dependent variables.*

Variables/indicators	Test statistics	Value of statistics	Ratio F	Hypothesis df	Error df	P
group	Pilai	0.828	5.62	6	7	0.020
	Vilkex	0.172	5.62	6	7	0.020
	Hotling	4.816	5.62	6	7	0.020

The results of the table 2 show that three indicators of the test statistics are meaningful on the differences of groups due to studied variables. So, two groups have differences at least in one of the variables.

There has been used the statistical method of the multi-variable covariance analysis in order to investigate the differences between groups in variables related to psychological well-being. The results have shown in table 3.

Table 3. *The results of multi-variable covariance analysis and differences between groups in variables related to psychological well-being.*

Dependent variable	SS	df	MS	F	P
relationship with others	337.3	1	337.3	15.47	0.002
Independence	123.4	1	123.4	7.49	0.018
Environmental mastery	525.6	1	525.6	28.32	0.001
personal growth	384.6	1	384.6	19.34	0.001
purpose in life	580.3	1	580.3	29.15	0.001
self-acceptance	592.3	1	592.3	21.85	0.001

The results of the covariance analysis (table 3) show that all groups in all subscales and the overall score of psychological well-being have the significant differences. It means that the intervention used in this part can promote the suspects (in the test group compared to control group).

Also, there has been used the multi-variable covariance analysis method to investigate the differences of the groups in the post-test scores of the resilience variable.

Table 4. *The results of multi-variable covariance analysis of the dependent variable related to resilience in the groups.*

Dependent variable	SS	df	MS	F	P
Overall score of resilience	136.475	1	136.475	6.992	0.014

The results of multi-variable covariance analysis in table 4 show that the groups have the significant difference in the overall score of the resilience. It means that the intervention used in this part can promote the overall score of the resilience (in the test group compared to control group).

4. Discussion

The current study showed the health psychology seeks to identify the structures and ways which follow the mental health. The health psychology attempts to help the human in

adjusting and adapting to life problems and threats. In this regard, one of the significant issues in health psychology and mental health is the resilience. Also, the group education of psycho-social empowerment on enhancement of psychological well-being components has been effective in the junior high school students. The results of the current study are consistent with the findings of Esmaili [37], Zarifgolbar Yazdi [38] and Elmai [27]. Also, these findings are consistent with the study of Gray D. E who found changing in attitudes and opinions of families with autistic children can promote the well-being of these children. The results of the current study are consistent with the findings of Mohammadi [39] about the reduction of behavioral disorders of the students with teaching technique of problem solving skill and the results of the study of Sohrabi et al about the effectiveness of teaching technique of problem solving skill with group consultation increasing the self-efficacy of the female students and consistent with the findings of Tuttle [40] that indicates the training of the life skills in adolescents can promote the psychological well-being especially decision making abilities, communications and increasing the self confidence in them. The evidence shows that the relationship between work and stress reaction is complex [41].

To explain the results, it can be stated the adolescence is one of the most important social and psychological growth process that needs the special attention because it is along with maturity. The compatibility with the changes of this period, finding a place among peers, coping with gender expectations, increasing attention to appearance, changing in family relationships, extreme shyness temporarily are the significant issues of this period [42]. So, the pressure of various social and psychological issues can decrease the mental well-being of the youth. The Psycho-social empowerment program attempts to focus on the consciousness of the students helping them to correct misunderstandings, prejudices and common stereotypes about the adolescence in order to have the realistic expectation about them. So the self-awareness skill can help the students to apply their strengths, positive characteristics and abilities and it helps them to deal with problems of adolescence.

The skills to deal with stress and negative emotions helps teenagers to use the coping method in the face of stressful situations and tolerate negative events or facts. Consciously and able to adapt themselves [43]. Psycho-social empowerment program help the students to have the effective relationship and create the satisfying relations with others. This program also helps them to discuss about their ideas, hopes, dreams and concerns with their parents and feel understood and accepted [44]. The life skills training is a prevention program based on the psycho-social empowerment approach known and admitted as the most effective proactive program. It has been evaluated and expanded over all programs widely. Generally, the life skills include abilities leading to the mental health promotion, the richness of human relations, the improvement of health and healthy behaviors in community. The life skills have been

applied as a solution to promote the psychological health and as the tool to prevent the psycho-social damages in the society such as addiction, domestic and social violence, child abuse, suicide AIDS and etc. As a whole, the life skills are the powerful tools in hands of the mental health administrators in the community in order to empower the youth in psychological aspects. These skills help people to act positively and preserve themselves and the community from the psycho-social damages and attempt to promote their psychological health level. The students with these skills can express their feelings and thoughts directly without any disrespect and violation of the rights and learn to be tolerant to environmental stresses. One of the factors threatens the health of the students is stress. Little stress can have the positive effect and increase the motivation as an incentive to deal with problematic situations. But too much stress can make anger, fear and disappointment endangering the physical and mental health of the students [15]. According to Hans Selye (general adaptation syndrome), the persons facing problems, after experiencing the alarm stage, enter the stage of resistance. As long as the stress continues, mechanisms mobilize to cope with stress. The faster the person can afford the problem, the amount of energy expended is less and likely reach the third stage (exhaustion) and therefore more psychological and physical health is guaranteed. In such situations, it is clear that those with psychological and social ability and especially the power of social problem solving, easily and quickly can solve problems and handle the negative and destructive unresolved issues of adolescence leading to decreasesocial and psychological different aspects.

Due to the effect of group training on the psycho-social empowerment in increasing the resilience in the junior high school students, the results indicate that these programs are effective and can promote the resilience component among the students. So, it can be stated the psycho-social empowerment program is effective in the promotion of the resilience components in the junior high school students. These findings are consistent with the results of Dadfar [45] about the effectiveness of social problem solving in increasing self- control, self- efficacy and reducing impulsivity in the students; with the results of Mahmoudi [46] about the effectiveness of social communication and problem-solving skills training on the self- confidence of the students and the results of Taheri and ShafiiAmiri [47] about the effectiveness of the muscle relaxation and problem-solving skills training on the reduction of anxiety.

To explain the current discussion, it can be stated that Adolescence is the most important and the most complex period of life. The problems and difficulties arising from maturity and adolescence are in such a way that the teenage period can be called the period of crisis and pressure [48]. In teenage years, there are conflicts and contradictions [13] Anxiety and depression are the disorders that have the significant growth in the adolescence [14]. One of the factors threatens the health of the students is stress. Little stress can have the positive effect and increase the motivation as an

incentive to deal with problematic situations. But too much stress can make anger, fear and disappointment endangering the physical and mental health of the students [15]. Adolescents are in the periodic transformation with the rapid changes in the field of biological, cognitive and emotional characteristics. These unwanted growths impose the pressures on them. Some part of these pressures are caused by physical changes (such as hormones, sudden change of body parts and physical appearance) and some of the pressures are related to socio-cultural factors (including peer pressure to smoke, changes in family, changing school, difference and the conflict between parents or the family pressure for academic achievement in school and attachment to groups outside the family) [16]. In this period, the aggression and crime increase in boys [17] and the drug use increases [49]. The problems and disorders of behaviors in the adolescents, in most cases, cause deep emotional and social disabilities [19].

Due to increasing changes and complexity and expansion of the social relations nowadays, it is necessary that people especially adolescents and youth to be prepared to deal with the difficult situations. The importance and necessity of life skills training will be obvious when the people know these skills can improve the mental and social abilities. On the other hand, the studies of Ann, Erikson-Smith, John Walander and Fred Biasini [50] show that there is some relationship between the resilience and psycho-social well-being and the life quality. So, the increase of resilience and psychological well-being promotion has occurred as a result of psycho-social empowerment program leading to improvement of the mental health.

5. Conclusion

Generally, it can be concluded that the social problem-solving training can promote the psychological well-being students with learning disorders leading to increase their resilience. Such programs can make lots of positive changes in the lives of the students due to the variables that guarantee the health. As stated earlier, because of the intensity and low number of training sessions of psycho-social empowerment training program and the lack of control over certain variables such as environment, culture, follow-up test failed. Therefore, the effect of psycho-social empowerment training program in the long term is unclear. For this reason, it is recommended to remove obstacles in future researches and examine the effects of training over time. We appreciate the cooperation of all officials in the Education Ministry in Bonab city that help researchers in performing this study.

References

- [1] Conner, K. M. & Davidson, J. R. T. (2003). Development of a new resilience scale: The Conner-Davidson Resilience Scale (CD-RISC). *Depression and Anxiety*, 18, 76-82.
- [2] Ryff, Cd. (1989). Happiness is everything or is it? Exploration on the meaning of psychological well-being. *Journal of personality and social psychology*, 6, 1069-1081.
- [3] Garmezy, N., & Masten, A. (1991). The protective role of competence indicators in children at risk. In E. M. Cummings, A. L. Green, & K. H. Karraki (Eds.), *Life span developmental psychology: Perspectives on stress and coping*. Hillsdale, NJ: 151-174.
- [4] Waller, M. A. (2001). Resilience in ecosystemic context: Evolution of the child. *American Journal of Orthopsychiatry*, 71, 290-297.
- [5] Rutter, M. (1990). *Psychosocial resilience and protective mechanisms*. In J. Rolf, A. Masten, D. Cicchetti, K. Nuechterlein, & S. Weintraub (Eds.), *Risk and protective factors in the development of psychopathology* (pp. 181-214). New York: Cambridge University Press.
- [6] Moradi, B., Tebbe, E. A., Brewster, M. L., Budge, S. L., Lenzen, A., Ege, E., Flores, M. (2016). A content analysis of literature on trans people and issues: 2002-2012. *The Counseling Psychologist*, 44, XX-XX. doi: 10.1177/0011000015609044.
- [7] Garmezy, N. (1991). Resilience and vulnerability to adverse developmental outcomes associate with poverty. *American Behavioral Scientist*, 34, 416-430.
- [8] Masten, A. S. (2001). Ordinary magic: Resilience processes in development. *American Psychology*, 56, 227-238.
- [9] Ryan, R. M. & Deci, E. L. (2001). "To be happy or to be eudaimonic well-being". In S. Fiske (Ed.), *Annual Review of Psychology*, 52, 141-166.
- [10] Karademas, E. (2007). "Positive and negative aspects of well-being: Common and specific predictors". *Personality and Individual Differences*, 43, 277-287.
- [11] Moradi, m. 2014. Impact of endometriosis on women's lives: a qualitative study. *BMC Women's Health*. 10.1186/1472-6874-14-123.
- [12] KhajeRashidan, F, 1997, investigation of emotional and behavioral problems of students in Semnan province. The second edition, Semnan Department of Education of the city of Semnan.
- [13] Khodayarifard, M. Abedini, Y. 2007, Health problems of adolescents and young people. Tehran. Tehran University Press.
- [14] Dadsetan, P, 1999, mental development disorder) children to adults, (Vol. Tehran, Samt publisher.
- [15] Giga, S. I. (2001). The implied employment relationship: investigating the effect of psychological contract violation on employee wellbeing. www.yahoo.com.
- [16] Carr, A. (1999). *The handbook of child and adolescent clinical psychology*. London: Routledge.
- [17] Barker, Trembli, Vituto, and Lacurus. 2006. "Do early difficult temperament and harsh parenting differentially predict reactive and proactive aggression?" *J Abnorm Child Psychol*. 2006 Oct; 34 (5): 685-95.
- [18] Costello, E. J., Sung, M., Worthman, C., & Angold, A. (2007). Pubertal maturation and the development of alcohol use and abuse. *Drug and alcohol Dependence*, 88 (Supplement 1), S50-S59.

- [19] Ruttelle, P. L., Shirlcliff, E. A., Serbin, L. A., Fisher, D. B. D., Stack, D. M., & Schwartzman, A. E. (2011). Disentangling psychobiological mechanisms underlying internalizing and externalizing behaviors in youth: Longitudinal and concurrent associations with cortisol. *Hormones and behavior*, 59 (1), 123-132.
- [20] Naseri, H; Nikpour, R. (March 2005). To evaluate the effectiveness of teaching life skills to student's mental health. The second seminar student's mental health. Tehran: Tarbiat Modares University.
- [21] Abedin, A., Molaie, A. (2010). The effectiveness of Group Movie Therapy (GMT) on parental stress reduction in mothers of children with mild mental retardation in Tehran. *Procedia Social and Behavioral Sciences*, 5, 988-993.
- [22] Bowling, T. K., Hill, C. M., Jencius, M. (2005). An overview of marriage enrichment. *The Family Journal: Counseling and Therapy for couples and Families*; 13, 1, 115-131.
- [23] World Health Organization. (1994). Life Skills Training Program. R. translations light Qasmabady and Mohamad Khani 1379. Tehran: State Welfare Organization. Department of Cultural Affairs and prevention.
- [24] Mirjana Pibernik-Okanovic, Manja Prasek, Tamara Poljicanin-Filipovic, Ivana Pavlic-Renar, Zeljko Metelko (2004). Effects of an empowerment-based psychosocial intervention on quality of life and metabolic control in type 2 diabetic patients. *Patient Education and Counseling*, 52, 193-199.
- [25] Zamanzadeh, Seyed Rasoli, A. Jabarzadeh, F, 2008, the effect of empowerment program on psychosocial aspects of managing diabetes. *Tabriz Nursing and Midwifery Journal*, 11, 32-25.
- [26] Mohammad Khani, S. (1388). Psycho-social empowerment programs in schools: Health promotion focuses on teaching life skills to students. Tehran: United Nations Office on Drugs and Crime's combat and counter-narcotics campaign.
- [27] Elmi, M. (2011). Life skills training and psychological well-being check the compatibility of Karaj middle school students. Dissertation MA, Clinical Psychology (unpublished). Islamic Azad University: Roudehen.
- [28] Sadr mohamadi et al. 2010. The role of life skills and self-efficacy in mental health among male students in High school. *International Journal of Medical Research & Health Sciences*, 2016, 5, 7S: 118-126.
- [29] VanDimdank. (2005). Psychological well-being: A fortigenic conceptualization and empirical clarification. Paper presented at the 3rd Annual Congress of the Psychological Society of South Africa, Durban, South Africa.
- [30] Chang and Chan. (2005). "Toward a tripartite factor structure of mental health: Subjective well-being, personal growth, and religiosity". *Journal of Psychology*, 135, 486-500.
- [31] Dastjerdi, R. 2011, Investigate the role of personality traits, welfare, school, academic identity, self-efficacy and academic motivation and academic predict students' psychological well-being and academic performance up and down. Educational Psychology PhD thesis (unpublished), Faculty of Psychology and Educational Sciences. Tarbiat Moallem University of Tehran.
- [32] Peleg-popko/Ora. (2002). Bowen therapy: A study of differentiation of self/social Anxiety and physiological symptoms. *Contemporary family therapy /24 /Human sciences press*.
- [33] Negovan, V. (2010). Dimensions of students' psychosocial well-being and their measurement: Validation of a students' Psychosocial Well Being Inventory. *Europe's Journal of Psychology*, 2, 85-104.
- [34] Rollinson, D., Broad, F. A., Edwards, D. (1997). *Organizational Behavior and analysis, An Integral Approach*, New York, Adison Wesley.
- [35] Murdock / nancy. L. and Gore/paul. A. (2004). *Stress/Coping/and differentiation of self: Atest of Bowen*.
- [36] Besharat, M. 2007, the psychometric properties of Persian version of Resilience Scale, Research Report. University of Tehran.
- [37] Esmaili, M. 2010, the comparison of effectiveness of stress inoculation training against interpersonal and social skills on psychological wellbeing of sons of veterans with post-traumatic stress. Psychology department of Isfahan University.
- [38] ZarifgolbaYazdi, Hania; aghamohamadian sherbaf, Hamidreza, Mousavifar, Nazhat; Moinizadeh, Majid. (2012). Well-being therapy on stress and psychological well-being of infertile women. *Journal of Obstetrics Gynecology and Infertility*, 15, 2, 56-49.
- [39] Kaveh, Munira, Alizadeh, Hamid, Delaware, Ali; Borjali, Ahmed al. (1390). Plans to increase resilience against stress and its impact on quality of life components parents of children with mild mental retardation. *Iranian Journal of Exceptional Children*, 2, 140- 119.
- [40] Tuttle J, Campbell-Heider N, David TM. (2006). Positive adolescent life skills training for high risk teens. *Journal of Pediatric Health Care*, 20, 3, 184- 191.
- [41] Rudolph KE, Sanchez BN, Stuart EA, Greenberg B, Fujishiro K, Wand GS, Shrager S, Seeman T, Diez Roux AV, Golden SH (2016) Job Strain and the Cortisol Diurnal Cycle in MESA: Accounting for Between- and Within-Day Variability. *American Journal Of Epidemiology* 183: 497-506 doi: 10.1093/aje/kwv280.
- [42] Mc Conkey, R., Truesdale-Kennedy, M., Chang, M. Y., Jarrah, S. & Shukri, R. (2008). The impact on mothers of bringing up a child with intellectual disabilities: A cross-cultural study. *International Journal of Nursing Studies*, 45, 65-74.
- [43] Naderi, Farah, Safarzadeh, Sahar, Mashak, Roya. (1390). Compare hypochondriasis, social protection, social anxiety and public health among mothers of children with mental retardation. *Journal of Health Psychology*, 1, 1, 41, 15.
- [44] Mohammad Khani, n. 2010, strategies for preventing drug use among students at risk identification, assessment and intervention. The UN Office on Drugs and Crime in Iran.
- [45] Dadfar, S. 2011, Effectiveness of social problem solving training on self-control, self-efficacy, impulsivity students with addictive potential. Master's thesis, Islamic Azad University of Ardabil.
- [46] Mahmoudi, N, Malekshahi, M. (October 2007). The effect of emotional intelligence, resiliency and empowerment low psychosocial decline in patients with psychosomatic addiction. Proceedings of the Fourth International Congress of Psychosomatic. Esfahan. Islamic Azad University.

- [47] Taheri, M. & Shafiei Amiri, M. (2012). Effectiveness of muscle relaxation and social problem-solving skills training on decreasing anxiety. *European Psychiatry*, 27, 153.
- [48] Khajr Rashidan, F. (1978). "Review of compliance with social norms by secondary school students in Semnan province." A social science research, the spring of 1387.
- [49] Cusullo, M. M. & Castro-Solano, A. (2001). Adolescent student's perception of psychological well-being meaning. *Revista Iberoamericana Diagnostico Y Evaluacion*; 12 (2): 57-70 (in Spanish).
- [50] Ann, I., Alriksson-Schmidt, M. A., Jan Wallander, & Fred Biasini. (2005). Quality of life and resilience in adolescents with a mobility disability *Journal of Psychology*, 32 (3), 370-379.