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Research Paper

Predicting Social Problem-solving Strategies Based on the Level of Social Well-being and Spiritual Health in Girls and Boys Ready to Marry

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ABSTRACT

Background and Objectives: Problem-solving is formed as one of the most important branches of life skills in the socialization process and several factors are effective in adopting its types. The purpose of the present study was to explain the sociological factors related to social problem-solving strategies in girls and boys ready for marriage who refer to Baharenko Counseling Center in Shiraz.

Methods: The present study was based on the survey method, in which 912 ready-to-marry men and women referring to Baharenko pre-marital Education and Counseling Center were selected as a statistical sample by cluster random sampling. The research tool was a questionnaire whose validity was confirmed by experts and its reliability was assessed using Cronbach's alpha coefficient method. Data were analyzed using t-test, F-statistic, correlation coefficient, and stepwise regression.

Results: There was a positive and significant relationship between logical problem-solving strategy and spiritual health (existential and religious). Also, all dimensions of social well-being (acceptance, adaptation, prosperity, cohesion, and contribution) had a significant and positive relationship with problem-solving. The results of stepwise regression also showed that spiritual health and social well-being can predict 0.21 of the logical problem-solving variable in couples ready for marriage.

Conclusion: The social and spiritual health of individuals was an important explanatory factor in predicting the dependent variable. The more people value themselves and enjoy social and spiritual health, the more likely they are to be part of society and experience a more meaningful life, the more likely they are to use a rational problem-solving strategy.

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Introduction

During their daily life, human beings are faced with many problems, followed by problem-solving situations. Therefore, recognizing the factors affecting this situation, improving the problem-solving ability, and forming a feeling of satisfaction and peace, is of great importance.

Social problem-solving is an effective interaction with dynamic environmental tasks and a person can only adjust to his environment if he can successfully analyze and integrate information from the environment in a certain period [1]. Many researchers believe that incorrect patterns in social information processing, social problem-solving strategies, and social reasoning play a major role in the formation of maladaptation [2-5].

A review of research results shows that a lack of effective social skills can lead to rejection, moral and behavioral problems, aggression [6], interpersonal problems, incompatibility, depression [7], and sometimes suicide [8, 9]. One of the essential skills in every person's life is problem-solving skills. The results of previous research in Iran show that spiritual intelligence [10, 11], identity base [12], and social support [13] can predict constructive problem-solving. The results of research conducted in Iran also showed that constructive problem-solving can increase the quality of social life [14] and self-confidence and reduce helplessness [15],of security [16], and self-confidence [17], sense identity crisis [18] and couples incompatibility [19]. A review of research has also shown that adopting a constructive problem-solving approach can improve performance in difficult situations [20], increase self-efficacy, psychological resilience, and perceived social support [21], individuals' ability to solve problems and receive social support [22], well-being [23], and marital adjustment [24] and reduce depression [25], anxiety in critical life situations [26], and high-risk behaviors [27].

In a general assessment, it can be said that most of the previous research has been done in the field of psychology and mostly on women. The present study tried to explain various problem-solving strategies related to social issues and on a sample of women and men. Explaining the problem-solving strategies was the most important goal of the present study, which differentiates it from previous research and paves the way for educational policies and counseling.

In this regard, this study with a sociological perspective focused on explaining the relationship between social problem-solving and the variables of spiritual health and social health.

Methods

This research was done with a quantitative approach and survey method. The statistical population included all girls and boys ready for marriage in Shiraz who were attended the Baharenko premarital counseling center. In this research, the method of cluster random sampling was used. In this regard, the days of referral to the Baharenko center and classes were randomly selected. The statistical sample size in both sections was obtained using Cochran's formula. According to the Statistics Center of Iran, the population of men and women in Shiraz is 1603416 people. Using Cochran's formula, the study sample was estimated to be 383 people, but to increase the level of confidence, the sample size was increased to two and a half times and 912 questionnaires were filled in Shiraz. The collection tool in this research was Social Problem-solving Questionnaire [28], the Social well-being Questionnaire [29], and Spiritual Health Scale [30]. The Social Problem-solving Questionnaire is answered on a Likert-type tool with 25 questions and its purpose is to measure the responsive skill in solving a social problem in logical, careless, and avoidant dimensions. The Keyes' social well-being Questionnaire contains 33 items in the dimensions of cohesion, acceptance, contribution, prosperity, and adaptation. The Spiritual wellbeing Scale was designed by Palutzian and Ellison [30]. This scale is a questionnaire containing 20 phrases whose answers measure spiritual health in both existential and religious dimensions. The answer sequence is ranked based on a range of strongly disagree, somewhat disagree, no comment, somewhat agree, and strongly agree, and scores of one to five are assigned to each option, respectively.

Face validity was used to assess the validity of the entire questionnaire. Cronbach's alpha coefficient was used to measure the reliability of the scales used. First, 60 questionnaires were tested experimentally and the alpha coefficient was calculated. After checking the reliability in the initial stage and modifying the assessment tool, the final questionnaire was prepared and data were collected. The collected data were analyzed with SPSS software v. 19. For descriptive analysis of data, mean, percentage, and standard deviation, and for inferential analysis, mean difference tests (T and F), correlation

coefficient, and stepwise regression were used. The obtained coefficients are given in Table 1.

Ethical considerations

In this study, individuals were studied with knowledge of the purpose of the study and with complete satisfaction. The questionnaires were also anonymous and the privacy of individuals was fully respected.

Results

In this study, 912 samples were examined, of whom 596 cases were female and 316 were male. Also, 158 people were under 20 years old, 651 people were between 21 and 35 years old, and 103 people were over 35 years old. The youngest person in the survey was 13 years old and the oldest person was 68 years old. Among the participants in the survey 647 people were Fars, 86 people were Lor, 117 were Turk, and 35 people were from other ethnicities.

Out of 912 people, 2 were illiterate, 107 were undergraduates, 267 had a diploma, 76 people had an associate degree, 353 people had a bachelor's degree, 85 people had a master's degree, and 22 people had a doctorate.

The difference between the mean of problem-solving strategies based on the variables of gender, age, and ethnicity was not statistically significant. The difference between the mean in men and women at the level of the logical problem-solving strategy was not statistically significant (F=2.96; P=0.542). The mean difference in terms of age at the level of the logical problem-solving strategy was not statistically significant (F=0.92.; P=0.396)

In the logical problem-solving strategy, the level of significance (F=4.27; P=0.05) showed that the mean difference between social classes was statistically significant. In the careless problem-solving strategy, the level of significance (F=3.66; P=0.012) showed that the difference between the means was statistically significant.

Table 2 shows the correlation coefficients between the social well-being variable and its dimensions with problem-solving strategies.

Social well-being had a significant and direct relationship in the dimensions of prosperity, cohesion, and acceptance with the solution of the logical problem (P<0.001). Social well-being terms of cohesion, acceptance, adaptation, prosperity and contribution with solving the problem dimensions of carelessness and avoidance had a significant inverse relationship (P>0.001). Table 3 shows the correlation coefficients between the variables of spiritual health in the existential and religious dimensions with logical problem-solving strategies directly and significantly (P<0.001). Also, there was a significant inverse correlation between the variable of spiritual health in the existential dimension with problem-solving strategies dimensions of carelessness and avoidance (P<0.001).

Multivariate regression analysis

Table 4 explains the dependent variable using a multivariate regression equation and a stepwise method. Among the variables, dimensions of social well-being, spiritual health, education of respondents, and social class were included in the equation. Values of R^2 (coefficient of determination) showed that with the entry of the social well-being variable, the cohesion dimension

Table 1. Reliability of the scales used

Structure	Problem-solving (Logical)	Problem-solving (Careless)	Problem-solving (Avoidance)	Spiritual Health	Spiritual Health (Existential)	Spiritual Health (Religious)
Number of items	7	4	6	18	6	12
Cronbach's alpha	0.81	0.76	0.80	0.89	0.81	0.81

Structure	Social Well-being	Social Well-being (Cohesion)	Social Well-being (Admission)	Social Well-being (Contribution)	Social Well-being (Prosperity)	Social Well-being (Dimension of Adaptation)
Number of items	23	7	6	5	6	4
Cronbach's alpha	0.80	0.61	0.62	0.73	0.60	0.63

Table 2. Mean problem-solving scores in terms of demographic variables

Variables	Independent	Problem-Solving Strategy	Mean±SD	t/F	P
Gender	Female	Logical	27.8826±3.97382	2.96	0.542
	Man		28.6899±3.79038		
	Female	Careless	14.2299±4.00242	0.75	0.386
	Man		13.5759±3.92193		
	Female	Avoidance	16.0738±3.86946	0.0001	0.996
	Man		15.4905±4.14307		
Age (y)	>20	Logical	2.3038±0.50107	0.92	0.396
	20-35		2.3548±4.52774		
	<35		2.3883±0.50938		
	>20	Careless	1.7595±0.60181	1.22	0.293
	20-35		1.6836±0.65962		
	<35		1.6408±0.06450		
	>20	Avoidance	2.0823±0.51679	2.95	0.052
	20-35		1.9800±0.01837		
	<35		1.9903±0.04470		
Class	Down	Logical	28.0909±4.55641	0.36	0.782
	Medium downward		28.0226±4.00968		
	Medium upward		28.2935±3.75670		
	Top		28.60000±4.15933		
	Down	Careless	15.1970±4.23981	4.27	0.005
	Medium downward		14.2613±3.98512		
	Medium upward		13.6117±3.90939		
	Top		12.4000±2.96648		
	Down	Avoidance	16.6515±2.6526	3.66	0.012
	Medium downward		16.2236±4.09001		
	Medium upward		15.4402±3.72990		
	Top		15.8000±2.04939		
Ethnicities	Persian	Logical	2.3398±0.52457	0.40	0.751
	Non-Persian		2.3761±0.52072		
	Persian	Careless	1.6721±0.64101	0.84	0.472
	Non-Persian		1.7350±0.635508		
	Persian	Avoidance	1.9941±0.47207	0.88	0.449
	Non-Persian		1.9658±0.49010		

Table 3. Analysis of the correlation between problem-solving strategies with social well-being and spiritual health

Variables		Logical	Careless	Avoiding
Cohesion	The correlation coefficient	0.39	-0.17	-0.14
	Significance level	<0.001	<0.001	<0.001
Acceptance	The correlation coefficient	0.10	-0.15	-0.13
	Significance level	<0.001	<0.001	<0.001
Adaptation	The correlation coefficient	-0.03	-0.203	-0.27
	Significance level	0.281	<0.001	<0.001
Prosperity	The correlation coefficient	0.15	-0.37	-0.42
	Significance level	<0.001	<0.001	<0.001
Social contribution	The correlation coefficient	0.30	-0.41	-0.50
	Significance level	<0.001	<0.001	<0.001
Social well-being	The correlation coefficient	0.24	-0.31	-0.32
	Significance level	<0.001	<0.001	<0.001
Existential	The correlation coefficient	0.30	-0.28	-0.41
	Significance level	<0.001	<0.001	<0.001
Religious	The correlation coefficient	0.30	-0.26	-0.34
	Significance level	<0.001	<0.001	<0.001
Spiritual health	The correlation coefficient	0.33	-0.30	-0.42
	Significance level	<0.001	<0.001	<0.001

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showed a positive correlation with logical problem solving, and with the entry of this variable, 14.7% of the variance of the dependent variable (P<0.001) was explained. Findings indicated that spiritual health in the religious dimension (P<0.001) and social well-being in the dimensions of adaptation (P<0.001), contribution (P<0.001), existential spiritual health (P<0.001), social well-being prosperity (P<0.001), and acceptance (P<0.001), are stronger predictors of adopting a logical problem-solving strategy. Finally, with the introduction of seven variables, the explained variance reached 0.21%.

Discussion

Social problem-solving is one of the most important components of life skills that is influenced by biological, psychological, and sociological factors. Problem-solving is an effective interaction with dynamic environmental tasks and a person can only adjust to his environment

Table 4. Key elements of multivariate regression analysis to predict logical problem-solving strategies

Stages	Variables	R	R^2	Adjusted R^2	B	β	F	P
1	Social well-being (cohesion)	0.38	0.14	0.14	0.30	0.31	210.34	<0.001
2	Spiritual health (religious)	0.43	0.18	0.18	0.09	0.14	139.21	<0.001
3	Social well-being (adaptation)	0.44	0.19	0.19	-0.19	-0.12	100.01	<0.001
4	Social well-being (contribution)	0.45	0.20	0.20	0.15	0.13	79.30	<0.001
5	Spiritual health (existential)	0.46	0.21	0.20	-0.09	-0.08	65.26	<0.001
6	Social well-being (prosperity)	0.46	0.21	0.21	0.05	0.09	55.50	<0.001
7	Social well-being (admission)	0.46	0.21	0.21	-0.06	0.13	48.42	<0.001

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if he can successfully analyze and integrate information from the environment in a certain period [1, 28].

The purpose of this study was to explain the sociology of solving the social problem of men and women ready for marriage. Independent variables included gender, age, education, spiritual health, and social well-being. The dependent variable of problem-solving strategies is social, which is divided into the dimensions of logical problem solving, careless problem-solving, and avoidance problem-solving.

There was no significant relationship between problem variables and problem-solving strategies in age, gender, and ethnic groups. This result is in line with research. that men and women behave similarly with identity tasks in different areas of life.

The results showed that the more spiritual and Social well-being people have, the more likely it is to adopt a logical problem-solving strategy. This result is in line with the research of Sajjadinejad and Akbari Charmahini and Sajjadinejad et al. [10, 11]. It seems that the lack of knowledge related to wisdom in the problem-solving process is partly related to the level of cognitive development of individuals. Presenting rational thinking requires a level of cognitive function that goes beyond formal logic. Although rational thinking is derived from the combination of explicit and objective knowledge and intuitive experiences and individual motivations, it has a dialectical nature. The results showed that those who have spiritual health and it is reflected on the existential dimension and meaning of their lives, often use a logical problem-solving strategy. This style is associated with characteristics, such as problem orientation, alertness in decision making, independence in judgment, openness to experiences, the complexity of cognition, rationalism, and introspection. Rational problem-solving and wisdom are interrelated human resources, and an inherent consequence of aspects of successful growth that function in both individual and social life.

As point out, wisdom has an adaptive function in certain areas that can be considered as the meaning and behavior of life. The results of this study showed that avoiding problem-solving was inversely related to spiritual health and social well-being, that is, the lower the spiritual health and social well-being in people, the more likely they are to use avoidance problem-solving strategy. Avoidance problem-solving is more common in people with confused identity styles. The structure of identity and avoidance of conflict resolution and decision-making and long-term non-adaptation over time. These people are not task-oriented. They usually leave their duties incomplete and do not feel obligated to do so. The tendency to engage in abnormal and unusual behaviors is high among them. They are likely to be drawn into sects by informal subgroups, have suspicions about adults, and reject individual-social values. They have a negative view of the social world. They tend to use less logical methods in the information processing process, have limited problem-solving skills, and their identity structure is fragmented and incoherent. Individuals who are attributed to the avoidant-disturbed identity style usually have a situational ability to make decisions and are mostly hesitant. Their emotional actions and behaviors are evaluated almost without stability. In this regard, the avoidance style is different from the other two styles.

Individuals' social well-being is an important explanatory factor in predicting the dependent variable. This result is in line with the research conducted by Ahmadi and Farhadi (2017) [16] and Turner et al. (2008) [22]. Based on these results, it seems that the solutions that a person uses when faced with problematic situations, as social contexts are involved, lead to a lifestyle based on creativity or despair, which is one of the determinants of personal well-being level.

Conclusion

A review of previous research has shown that problem-solving is often explained by psychological approaches and performed on women and adolescents, and the contribution of variables, such as spiritual health and social well-being with sociological approaches and the study of men and women on the verge of marriage is small. The findings of this study showed that the lower the level of the spiritual health of men and women, the greater the likelihood of adopting a careless strategy of problem-solving or avoiding problem-solving, and the higher the spiritual health, the higher the possibility of solving life problems rationally. In other words, the more people have a relationship with God as a superior power and know where it comes from and where it goes (religious), and also the more people seek the meaning and purpose of life (existential), the more logically they solve their problems. Also, the greater the social well-being of individuals, the higher the possibility of problem-solving logically and the less likely it is to avoid problem-solving or problem-solving carelessly. That is, the more people are satisfied with the quality of their relationships with others (cohesion), the more people consider themselves important and influential members of society (contributed), and the more they accept others with all their flaws and positive and negative aspects and trusts

others as capable and kind people (acceptance), have a realistic understanding of the quality, organization, and management of the social world around them (adaptation), hope for the future and growth of themselves and society (prosperity), and these people solve their problems more logically.

Research limitations

Each research is associated with problems and limitations that are sometimes beyond the control of the researcher in proportion to the way it is conducted. The present study also had some limitations that are mentioned below: The most important limitation of this research was in the field of data collection because due to the prevalence of coronavirus, premarital counseling classes were held online and access to the target audience was difficult. Due to the prevalence of COVID-19, the number of wedding ceremonies has decreased and, consequently, the number of visits to the Baharenko Center has decreased compared to the past, and access to the target audience has become more difficult. Due to the observance of health protocols, people were reluctant to fill out the questionnaire and the questioner could not morally insist on filling out the questionnaire; thus, the process of collecting information was long.

Strengths and weaknesses

Since the understanding of the social problem-solving process in each individual is very complex, and also, due to the existence of different cultural contexts and therefore, creative and diverse methods in dealing with confusing situations and finally, the lack of a defined theory in this field, it is necessary to plan a qualitative look and in-depth study in this field. It is suggested that in future research, other factors, such as personality traits, economic factors, reference groups, media consumption, etc., which have not been addressed in this research, be examined.

Ethical Considerations

Compliance with ethical guidelines

There were no ethical considerations to be considered in this research.

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Authors' contributions

All authors equally contributed to preparing this article.

Conflict of interest

The authors declared no conflict of interest.

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References

[1] Meiner A, Greiff S, Frischkorn Gt, Steinmayr R. Predicting complex problem solving and school grades with working memory and ability self-concept. Learn Individ Differ. 2016; 49:323-31. [DOI:10.1016/j.lindif.2016.04.006]

[2] Grant JS, Elliot TR, Giger JN, Bartoluci AA. Social problem-solving abilities, social support, and adjustment among family caregivers' individuals with a stroke. Rehabil Psychol. 2001; 46(1):44-57. [DOI:10.1037/0090-5550.46.1.44]

[3] Teglasi H, Rottman L. Stories a classroom-based program to reduce aggressive behavior. J Sch Psychol. 2001; 39(1):71-94. [DOI:10.1016/S0022-4405(00)00060-1]

[4] Harvey RJ, Fletcher J, French DJ. Social reasoning: A source of influence on aggression. Clin Psychol Rev. 2001; 21(3):447-69. [DOI:10.1016/S0272-7358(99)00068-9]

[5] Pakaslahti L. Children and adolescent's aggressive behavior in context: The development and application of aggressive problem-solving strategies. Aggress Violent Behav. 2000; 5(5):467-90. [DOI:10.1016/S1359-1789(98)00032-9]

[6] Ju C, Zhao F, Zhang B, Deng J. Effects of fathering style on social problem-solving among Chinese teenagers: The roles of masculine gender stereotypes and identity. Pers Individ Dif. 2015; 77:124-30. [DOI:10.1016/j.paid.2014.12.037]

[7] Becker-Weidman EG, Jacobs RH, Reinecke MA, Silva SG, March JS. Social problem-solving among adolescents treated for depression. Behav Res Ther. 2010; 48(1):11-8. [DOI:10.1016/j.brat.2009.08.006] [PMID] [PMCID]

[8] Hirsch JK, Chang EC, Jeglic EL. Social problem-solving and suicidal behavior: Ethnic differences in the moderating effects of loneliness and life stress. Arch Suicide Res. 2012; 16(4):303-15. [DOI:10.1080/13811118.2013.722054] [PMID]

[9] Kwok SY, Yeung JW, Low AY, Lo HH, Tam CH. The roles of emotional competence and social problem-solving in the relationship between physical abuse and adolescent suicidal ideation in China. Child Abuse Negl. 2015; 44:117-29. [DOI:10.1016/j.chiabu.2015.03.020] [PMID]

[10] Sajjadi Nejad M, Akbari Charmahini P. Spiritual intelligence and problem-solving skills. International Congress of Islamic Humanities; 2014. http://icih.ir/%D9%87%D9%88%D8%B4-9%84-%D9%85%D8%B3%D8%A6%D9%84%D9%87/

[11] Sajjadi Nejad M., Kalvani M, Falahati M, Kazemi k. A study of the relationships between spiritual intelligence, empathy and problem solving strategy among university students. Paper presented at: National Congress of Social Psychology of Iran; 2019. https://www.sid.ir/Fa/Seminar/ViewPaper.aspx?ID=42719

[12] Ghasemi D. [The relationship between identity bases and problem-solving skills with motivation for progress (Persian)]. Paper presented at: National Conference on the Third Millennium and Humanities. 15 June 2014; Shiraz, Iran. https://civilica.com/doc/398798/

[13] Roustaei M, Janghorbanian F, Ghadiri M. [Comparing problem solving methods in divorced and ordinary men and women (Persian)]. Paper presented at: First International Conference on Management, Economics, Accounting and Educational Sciences. 19 September 2015; Sari, Iran. https://civilica.com/doc/445158/

[14] Makki S, Emamgholi Khooshehchin T, Dadashi M. [The effect of problem-solving training on quality of life in women with gestational diabetes (Persian)]. Nurs Midwifery J. 2019; 16(10):760-70. http://unmf.umsu.ac.ir/article-1-3661-en.html

[15] Mousavi SV, Ghasemi Jobneh R, Rezaei S, Sheikhli N. [Neurosis and problem-solving styles in women attempting chemical suicide (Persian)]. Clin Psychol Pers. 2019; 16(2):123-30. https://www.sid.ir/fa/journal/ViewPaper.aspx?id=508827

[16] Ahmadi S, Farhadi E. [A study of relationship between problem-solving skill and feeling of security among women (Persian)]. Strateg Res Soc Probl Iran. 2017; 6(2):33-44. https://www.sid.ir/en/journal/ViewPaper.aspx?ID=566415

[17] Taghizadeh Z, Purbakhtyar M, Daneshparvar H, Ghasemzadeh S, Mehran A. [Comparison the frequency of domestic violence and problem-solving skill among pregnant women with and without violence in Tehran (Persian)]. Iran J Forensic Med. 2015; 21(2):91-8. http://sjfm.ir/article-1-695-fa.html

[18] Taj Javaheri A, Fathi Aghdam Q. [The effectiveness of problem-solving skills on mind theory and reducing the identity crisis of female adolescents (Persian)]. Paper presented at: First National Conference on Educational Sciences and Psychology. 14 December 2014; Iran, Marvdasht. https://civilica.com/doc/338400

[19] Azadi Z, Kimiaei SA, Abbasi Borandarq S. [The relationship between family problem solving ability and irrational beliefs with marital problems and incompatibility (Persian)]. J Psychol. 2014; 9(36):1-17. https://www.sid.ir/fa/journal/ViewPaper.aspx?id=290730

[20] Arsalan BF, İnanc BY, Aydos S. The investigation of social problem solving physically disabled children by the use of quast-experimental method. J Sci Technol. 2018; 8(1):122-28. https://www.tojsat.net/journals/tojsat/articles/v081/.pdf

[21] Şükran Ş, Figen G. The investigation of problem-solving skills of mothers with and without disabled children. Int J New Trends Educ Their Implic. 2015; 6(1):104-11. http://ijonte.org/FileUpload/ks63207/File/14.simsek.pdf

[22] Turner NE, Macdonald J, Somerset M. Life skills, mathematical reasoning and critical thinking: A curriculum for the prevention of problem gambling. J Gambl Stud. 2008; 24(3):367-80. [DOI:10.1007/s10899-007-9085-1] [PMID]

[23] Malouff JM, Thorsteinsson EB, Schutte NS. The efficacy of problem-solving therapy in reducing mental and psysical health problems: A meta-analysis. Clin Psychol Rev. 2007; 27(1):46-57. [DOI:10.1016/j.cpr.2005.12.005] [PMID]

[24] Reich CM, Blackwell N, Simmons CA, Beck JG. Social problem-solving strategies and posttraumatic stress disorder in the aftermath of intimate partner violence. J Anxiety Disord. 2015; 32:31-7. [DOI:10.1016/j.janxdis.2015.02.007] [PMID]

[25] Silverstein M, Cabral H, Hegel M, Diaz-Linhart Y, Beardslee W, Kistin CJ, et al. Problem-solving education to prevent depression among low-income mothers: A path mediation analysis in a randomized clinical trial. JAMA Netw Open. 2018; 1(2):e180334. [DOI:10.1001/jamanetworkopen.2018.0334] [PMID] [PMCID]

[26] Nguyen CT, Fairclough DL, Noll RB. Problem-solving skills training for mothers of children recently diagnosed with autism spectrum disorder: A pilot feasibility study. Autism. 2016; 20(1):55-64. [DOI:10.1177/1362361314567134] [PMID]

[27] Wenzel V, Weichold K, Silbereisen RK. The life skills program IPSY: Positive influences on school bonding and prevention of substance misuse. J Adolesc. 2009; 32(6):1391-401. [DOI:10.1016/j.adolescence.2009.05.008] [PMID]

[28] D'Zurilla, TJ, Nezu AM, Maydeu-Olivares A. Social Problem-Solving Inventory Revised (SPSI-R): Manual. North Tonawanda, NY: Multi-Health System. 2002. https://www.scirp.org/(S(351jmbntvnsjt1aadkposzje))/reference/ReferencesPapers.aspx?ReferenceID=1076917

[29] Keyes CLM. Social well-being. Soc Psychol Q. 1998; 61(2):121-40. [DOI:10.2307/2787065]

[30] Ellison CW. Spiritual well-being: Conceptualization and measurement. J Psychol Theol. 1983; 11(4):330-8. [DOI:10.1177/009164718301100406]