

Prediction of Quality of Life Based on Spiritual Intelligence and Resiliency in Mothers of Children with Behavioral Problems

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Abstract

Background and Objectives: The challenges faced by the mothers of children with behavioral problems underline the necessity of improving psychological characteristics, especially quality of life, in this group. Regarding this, the present study was conducted to predict the quality of life in terms of spiritual intelligence and resiliency in mothers of children with behavioral problems in 2018.

Methods: This descriptive-correlational research was performed on 100 mothers of children with behavioral problems referring to the counseling centers of Neyshabour, Razavi Khorasan, Iran, in 2018. The participants were selected using the multistage random sampling technique. The data collection was performed using three questionnaires, namely the Connor-Davidson Resilience Scale, World Health Organization Quality of Life-BREF, and spiritual intelligence. Then data were analyzed in SPSS software (version 23).

Results: Based on the obtained results, quality of life showed a positive and significant relationship with spiritual intelligence ($r=0.59$, $P<0.01$) and resiliency ($r=0.63$, $P<0.01$). Furthermore, the results of the regression analysis showed that 66% and 68% of the variance in quality of life were explained by spiritual intelligence and resiliency, respectively. In this prediction, resiliency was more significant than spiritual intelligence ($P<0.01$).

Conclusion: The findings showed the importance of resiliency and spiritual intelligence variables in predicting the quality of life in mothers having children with behavioral problems. Therefore, it is suggested that counselors and psychologists consider the quality of life in this group. Additionally, they are recommended to apply spiritual intelligence and resilience strategies in their educational programs and treatments to increase the quality of life in mothers having children with behavioral problems.

Keywords: Children with Behavioral Problems, Resiliency, Quality of Life, Spiritual Intelligence.

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Introduction

Some children are incapable of going through developmental stages and meeting developmental expectations and tasks for a variety of reasons, as a result of which they develop acute behavioral problems with aging (1). The consequences of these behavioral problems manifest in the form of

rejection by others and complaints about them (2). The results of research performed in this area reveal that unresolved behavioral problems in childhood often lead to subsequent problems (3).

It is found out children's behavioral problems are closely related to parents' psychological

states. Moreover, such problems may limit the interactions and social activities of the family and affect their interpersonal relationships (4-5). In addition, children's behavioral problems not only affect family functioning, generally, and mothers' functioning, specifically, but also causes stress and create disorder in the family environment (6).

Quality of life is one of the most considerable issues for parents and other family members (7). In this regard, quality of life means meeting expectations and consequently life satisfaction which manifests in the form of happiness and vitality. This factor is a powerful force that plays a prominent role in guiding people and improving their health and well-being (8). Moreover, it is considered an active, dynamic, and multifaceted flow of perceptions, attitudes, and behavioral changes that are influenced by the mother-child relationship (9). In other words, mothers' interaction with children having behavioral problems affects the quality of their lives and reduces their performance (7).

Spiritual intelligence is one of the effective psychological components playing a significant role in the perfection and health of the human mind (10). In addition, it includes a set of adaptive capacities in the mind based on non-physical aspects and transcendence of reality. This concept is also considered to involve a set of activities causing self-awareness and deep insight into life and its purposefulness, in addition to tenderness and flexibility in behavior (11). According to the literature, spiritual factors, such as spiritual intelligence, influence the quality of life, especially in mothers (12). Furthermore, the results of a study performed by Hojjati et al. revealed that resilience has a substantial role in the quality of life of parents (13).

Resilience is defined as a person's ability to establish a biological, psychological, and spiritual balance in the face of risky situations. In other words, it is a kind of self-healing with positive emotional and cognitive consequences (14), reducing negative emotions and increasing mental health and life satisfaction (15). The findings of the research conducted by Mortazavi and Yarolahi showed a positive

and significant relationship between resilience and mental health (16).

In another study performed by Mehrafriz and Jahangir, it was revealed that resilience had a positive and significant relationship with the quality of life of mothers with children having behavioral problems (17). Therefore, the consideration of the quality of life in the mothers of these children and the components affecting its improvement is of high importance (9), especially considering the prominent role of mothers in developing the psychological and emotional characteristics of children (18), as evidenced by their high referrals to counseling centers (19).

The relationship of spiritual intelligence and resilience components with the quality of life has been investigated in various studies. For instance, the studies conducted by Noorisamarin and Noori (20) and Singh and Sinha (21) showed that spiritual intelligence and its components had a positive and significant relationship with the quality of life. Furthermore, Shabahang et al. (22) indicated that the resilience of parents of children with special needs has a positive and significant correlation with the quality of life. In addition, the findings of the research carried out by Hosseininia and Hatami (23) showed that the quality of life of retirees can be predicted based on psychological well-being and resilience.

The mentioned studies have separately investigated the relationship of the quality of life with the variables investigated in this research. To the best of our knowledge, no special research has been performed to predict the quality of life in the mothers of children with behavioral problems in terms of spiritual intelligence and resilience. Additionally, few studies have been conducted to investigate the effect of these variables on the target population. This highlights the necessity of studying the multiple relationships of these variables in the community of mothers with problem children with the aim of prevention or improvement of the quality of life in this group. With this background in mind, the present study was conducted to predict the quality of life in terms of spiritual intelligence

and resilience in the mothers of children with behavioral problems.

Methods

In the present descriptive-correlational study, spiritual intelligence and resilience were considered predictor variables, while the quality of life was regarded as a dependent variable. The statistical population consisted of all mothers with 6 to 12-year-old children having internal and external behavioral problems, referring to the counseling centers of Neyshabour in 2018. The diagnosis of the behavioral problems of the children was made based on a clinical diagnostic interview. The final sample of the study ($n=100$) was selected using the multistage random sampling technique.

To this end, a list was initially prepared from the centers providing counseling and psychological services located in all areas of Neyshabour. These centers were then classified into four categories of the north, south, west, and east regions. However, to gather the necessary data, only one center from each region was selected according to the number of counseling centers. At the next stage, the necessary permissions were obtained from the relevant departments. Furthermore, the participants were informed about the confidentiality of their personal information.

The questionnaires were distributed among the eligible samples. The inclusion criteria were determined as: 1) willingness to complete the questionnaires, 2) having a child with behavioral problems, and 3) diagnosis of psychiatric disorders. On the other hand, mothers who did not meet the inclusion criteria were excluded from the study. In this regard, the exclusion criterion was the mother's referral to counseling centers to seek counseling services for problems other than their children's behavioral problems.

The data were collected using three questionnaires, namely spiritual intelligence, Connor-Davidson Resilience Scale, and World Health Organization Quality of Life-BREF. The spiritual intelligence questionnaire, developed and standardized by Abdollahzadeh et al., contains 29 items on a five-point Likert

scale (strongly agree to strongly disagree) in two subscales, namely comprehension and connection with the supreme power and spiritual life or reliance on inner core (24). Therefore, this instrument has a score range of 29-145 (26).

The validity and reliability of this questionnaire, which was developed in accordance with the cultural characteristics of Iranian society, have been also confirmed (25). The validation of this 30-item questionnaire was performed using a pilot study conducted on 30 university students and then on 280 subjects, including 184 females and 96 males, rendering the Cronbach's alpha coefficients of 0.87 and 0.89, respectively (19-27). The validity of the questionnaire was confirmed using content validity, face validity, and factor analysis (23). In the present study, the reliability of this instrument was also measured, rendering a Cronbach's alpha coefficient of 0.82.

The Connor-Davidson Resilience Scale (2003) was used to measure the resilience of the participants. This test contains 25 items that are scored on a five-point Likert scale (completely incorrect=0 to always correct=4) in five subscales, namely personal competence, trust to instinct, acceptance of positive emotions, control, and spiritual influences (28).

According to the developers of this scale, this questionnaire is quite capable of distinguishing between resilient and non-resilient people in clinical and non-clinical groups both in research and clinical settings. This questionnaire has the minimum and maximum scores of 25 and 125, respectively (29). Internal consistency, test-retest reliability, and convergent and divergent validity of this instrument have been confirmed in previous studies (30). The reliability and validity of this questionnaire have been also confirmed by Mohammadi for Iranian, using internal consistency ($r=0.89$) and factor analysis (0.87) methods, respectively (31). In the present study, the Cronbach's alpha coefficient of this research tool was obtained as 0.88.

The Quality of Life Questionnaire was developed by the World Health Organization in collaboration with 15 international centers in 1989. This questionnaire assesses various aspects of quality of life through 26 items (32).

The same method of scaling was used in this questionnaire as the previously mentioned ones. In this regard, a 5-point Likert scale was applied with some items being reverse scored (15). This questionnaire has a score range of 26-130 with a score of 78 as the cut-off point. Accordingly, lower scores are indicative of a low level of quality of life, while higher scores represent a high level of quality of life (33).

It should be noted that this questionnaire consists of four aspects of physical, mental, social, and environmental health, with the Cronbach's alpha range of 0.73-0.89 for the four subscales, as well as the whole scale (34). In Iran, Nasiri et al. translated this scale into Persian and reported its validity and reliability with the Cronbach's alpha coefficient of 0.84 indicating an acceptable internal consistency (35).

However, in a study conducted by Fathi-Ashtiani, the reliability of this questionnaire was reported to be 0.95 using Cronbach's alpha method (36). In addition, Levy and Litman-Ovadia measured the reliability of the above-mentioned questionnaire using three methods, namely three-week interval test-retest, split-half, and Cronbach's alpha coefficient and obtained the scores of 0.67, 0.87, and 0.88, respectively (37). In the present study, the Cronbach's alpha coefficient was evaluated at 0.84.

To collect the necessary information, the purpose of the study was explained to the mothers of children with behavioral problems as a prerequisite of the research process. Subsequently, the questionnaires were distributed among the participants after obtaining their consent to participate in the study and assuring them about the confidentiality of their information.

Statistical analysis

The descriptive analysis of the data was performed using a central tendency and distribution indices. In addition, the inferential analysis of data was accomplished based on Pearson correlation and simultaneous multiple regression methods to test the statistical hypotheses and predict the changes in the dependent variables based on the predictor variables and their odds ratio. The obtained data were analyzed in SPSS software (version 23) at a significance level of < 0.01 .

Result

A total of 100 subjects participated in this study with the age range of 20-30 ($n=27$, 27.00%), 31-40 ($n=64$, 64.00%), and 41-50 ($n=9$, 9.00%) years, respectively. The mean scores of resilience, spiritual intelligence, and quality of life questionnaires and their subscales are presented in Table 1. Based on the results of Table 1, the mean score of spiritual intelligence was obtained as 115.73 ± 16.13 . Regarding the subscales of this questionnaire, namely comprehension and connection with the supreme power and spiritual life or reliance on inner core were estimated at 48.72 ± 9.96 and 67.01 ± 10.42 , respectively.

Concerning resilience, the mean score was calculated at 83.17 ± 13.99 . In addition, personal competence, trust to instinct, acceptance of positive emotions, control, and spiritual influences as the subscales of this instrument had the mean scores of 27.19 ± 5.35 , 21.40 ± 4.53 , 17.12 ± 3.13 , 9.71 ± 2.52 , and 7.75 ± 1.65 , respectively. Additionally, the quality of life was found to have a mean score of 94.85 ± 10.11 . As indicated by the results, the skewness and kurtosis values were < 3 and $<$

Table 1. Descriptive statistics of research variables

Research variables	Mean	Standard deviation	Skewness	Kurtosis
Spiritual intelligence	115.73	16.13	0.01	1.70
Comprehension and connection with the supreme power	48.72	6.96	-0.47	-0.58
Spiritual life or reliance on inner core	67.01	5.35	1.04	6.91
Resilience	83.17	13.99	-0.19	-0.78
Personal competence	27.19	5.35	-0.16	-0.87
Trust to instinct	21.40	4.53	-0.13	-0.90
Acceptance of positive emotions	17.12	3.13	0.04	-0.55
Control	9.71	2.52	-0.17	-0.86
Spiritual influences	7.75	1.65	-0.26	-1.01
Quality of Life	94.85	10.11	-0.21	-0.47

Table 2. Results of Pearson correlation coefficient test between quality of life and spiritual intelligence

Statistical index	Quality of life	P-value
Comprehension and connection with the supreme power	**0.59	0.01
Spiritual life or reliance on inner core	**0.63	0.01
Spiritual Intelligence	**0.66	0.01

**P<0.01

Table 3. Results of Pearson correlation coefficient test between quality of life and resilience

Statistical index	Quality of life	P-value
Personal competence	**0.64	0.01
Trust to instinct	**0.56	0.01
Acceptance of positive emotions	**0.49	0.01
Control	**0.49	0.01
Spiritual influences	**0.48	0.01
Resilience	**0.68	0.01

**P<0.01

10, respectively, for all variables and subscales (Table 1).

Pearson correlation coefficient test was used to investigate the relationship of spiritual intelligence and resilience with quality of life. Based on the results of this test, the quality of life showed a significant and positive correlation with spiritual intelligence, resilience, and their subscales ($P<0.05$; tables 2-3). In this respect, the quality of life enhanced as spiritual intelligence and its subscales increased. In addition, simultaneous multiple regression was applied to determine the predictability of quality of life in terms of spiritual intelligence and resilience and their subscales in mothers

of children with behavioral problems. The results of this evaluation are presented in tables 4 and 5.

Based on the results of simultaneous multiple regression analysis, spiritual intelligence accounted for 0.66 variance in quality of life (Table 4). Furthermore, according to the beta coefficients, spiritual intelligence, comprehension and connection with the supreme power (0.29), and spiritual life or reliance on inner core (0.42) could directly predict the quality of life in mothers of children with behavioral problems ($P<0.01$).

Considering the results of simultaneous multiple regression analysis tabulated in Table 5, 0.68 of the variance in quality of life was defined by resilience. In addition, based on the results of beta coefficients, resilience, personal competence (0.32), and spiritual influences (0.17) could predict the quality of life in the mothers of children with behavioral problems ($P<0.01$). On the other hand, acceptance of positive emotions, trust to instinct, and control failed to predict the quality of life in this group.

Table 4. Results of simultaneous multiple regression analysis for predicting quality of life in terms of spiritual intelligence and its subscales

Predictor variables	R ²	F	SIG _F	B	Standard Error	Beta	T	Sig
Comprehension and connection with the supreme power	0.66	79.03	0.01	0.43	0.15	0.29	2.76	0.007
Spiritual life or reliance on inner core				0.41	0.10	0.42	3.94	0.001

Table 5. Results of simultaneous multiple regression analysis for predicting quality of life based on resilience and its subscales

Predictor variables	R ²	F	SIG _F	B	Standard Error	Beta	T	Sig
Personal competence	0.68	86.28	0.001	0.61	0.23	0.32	2.56	0.01
Spiritual influences				1.07	0.53	0.17	2.00	0.04

Discussion

Child-rearing is considered one of the most important and valuable issues in every mother's life. However, the presence of a child with behavioral problems can negatively affect and challenge the quality of life in mothers. Due to the importance of determining the factors affecting the quality of life in the mothers having children with behavioral problems, the present study was conducted to

predict the quality of life of this group in terms of spiritual intelligence and resilience.

The results of correlation coefficients indicated that the quality of life has a positive and significant relationship with the overall score of spiritual intelligence and its components, including comprehension and connection with the supreme power and spiritual life or reliance on inner core. The findings of simultaneous multiple regression

analysis showed that 0.66 of the total variance of mothers' quality of life is directly explained by spiritual intelligence. Additionally, both components of spiritual intelligence were significantly capable of predicting the quality of life in this population.

The results of this study are in line with those obtained by Zamani et al. (12), Noorisamarin and Noori (20), Pant and Srivastava (38), and Singh et al. (39). In conformity with the results of the present research, the findings of a study performed by Mossadegh et al. (40) show that spiritual understanding can predict the mental health of mothers with problem children. In a study conducted by Reisi et al. (41), it was revealed that people with higher spirituality and spiritual feelings not only would be more hopeful about their future but also would endeavor harder to change their lives and increase their quality. These findings were revealed to be in agreement with those of the present study.

The results of the current study revealed a significant relationship between the components of spiritual intelligence and quality of life. Furthermore, both components of spiritual intelligence (i.e., comprehension and connection with the supreme power and spiritual life or reliance on inner core) can predict the quality of life in the mothers of children with behavioral problems.

However, based on the obtained beta value, the component of spiritual life or reliance on inner core could be considered a stronger predictor of the quality of life in this group. This finding can be explained based on the results obtained by Noorisamarin and Noori (20), who indicated that individuals' ability to understand the meaning of events, in addition to believing in an internal superior and sacred power, can help overcome problems effortlessly and take effective steps to resolve them. Moreover, the results of a study carried out by Jafari and Hesampour (42) showed that people who have a higher level of understanding, regarding the components of connection with the supreme power and the meaning they give to themselves and the world around them, are less prone to psychological distress. This is because these individuals are more purposeful

and have higher self-esteem. These findings are consistent with those of the present study.

It can be concluded that individuals with spiritual beliefs feel less abandoned, futile, and lonely. Additionally, spiritual intelligence enables humans to access meaning and value. The ability to properly make use of spiritual intelligence helps individuals to reveal their inner strength extensively and immensely, thereby contributing to the improvement of their mental health and quality of life (40).

In the present study, the results of correlation coefficients were also indicative of a positive and significant relationship between quality of life and the components of resilience, including personal competence, trust to instinct, acceptance of positive emotions, control, and spiritual influences. Furthermore, based on the results of regression analysis, resilience accounted for 0.68 of the total variance in quality of life among mothers with problem children. This finding is line with the results of the studies performed by Hojjati et al. (13), showing that resilience is significantly related to the quality of life, and Sadeghi et al. (43), implying that resilience is considered an important component of individuals' mental and psychological well-being.

In line with the present study, Sadeghi et al. (44) introduced resilience as one of the effective components of maternal mental health. To elaborate on the findings of the present study, it should be stated that mothers with high resilience acted more strongly in dealing with stressful child-rearing situations. Moreover, they were more skilled in communicating effectively with the environment and others. Such abilities develop higher levels of mental health and inner satisfaction, which, in turn, improve the quality of life. Additionally, Wolf (1995) carried out a study on the effect of resilience on psychological health to determine the basic characteristics of resilient people accounting for the enhancement of mental well-being. The results of the mentioned research revealed that such characteristics as social ability, problem-solving ability, self-management, purposefulness, and belief in a prosperous future improved the quality of life in the mothers of

children with behavioral problems (43).

Our results also revealed that among the resilience components, personal competence and spiritual influences could significantly predict the quality of life among mothers with problem children. Although no similar research has been found in this field, this study is generally consistent with several studies, such as those carried out by Shabahang et al. (22) and Hosseini and Hatami (23), in terms of the relationship between resilience components and quality of life.

According to the results of a study conducted by Gholamhosseinzadeh et al. (45), the predictive role of the components of personal competence and spiritual influences can be explained by the fact that people who are highly competent and have a high level of spirituality are able to develop and expand a set of skills helping them adapt more to stressful situations. This matter improves their competence, health, and quality of life, thereby reducing their dissatisfaction.

Eventually, since mothers of children with behavioral problems spend most of their time with such children, they need to be incredibly resilient. These mothers are expected to seek solutions when dealing with their children's behavioral problems, instead of becoming frustrated or disappointed. Moreover, mothers who enjoy a higher level of resilience are more successful in reducing their children's behavioral problems since they possess higher levels of mental toughness and self-confidence. This matter affects mental health, happiness, inner satisfaction, and in general quality of life in mothers with problem children.

Conclusion

The results of the present study demonstrated that the components of spiritual intelligence (i.e., comprehension and connection with supreme power and spiritual life or reliance on inner core) and resilience components (i.e., personal competence and spiritual influences), can predict the quality of life in mothers with problem children. Moreover, this group of mothers who have higher levels of spiritual intelligence and resilience enjoys a higher

level of quality of life than their counterparts without such qualifications.

Based on the results of the present study, psychologists, counselors, officials, and other beneficiaries are suggested to design educational programs and training courses encouraging the improvement of resilience and spiritual intelligence with the aim of improving quality of life.

Such a measure can boost the quality of life in mothers with problem children, especially in those who have a low quality of life.

One of the weaknesses of the present study is the limitation of the study population to mothers of children with behavioral problems referring to the counseling centers of Neyshabour. This removes the possibility of generalizing the results of this study to bigger populations in other cities. Another limitation that should be taken into account is the use of self-assessment tools that could be somewhat influenced by human factors.

Conflict of interest

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