

The Effectiveness of Life Skills Training on the Psychological Well-being, Communication Skill and Maternal Parenting Stress of Mothers of Children with Intellectual Disability

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Abstract

Introduction: The present article was done with the aim to investigate the effectiveness of Life Skills therapy on the psychological well-being, communication skills and maternal parenting stress of mothers of Children with Intellectual Disability.


Methods: The research method was quasi-experimental method with a pretest and posttest design plus control group. The statistical society of the study consisted of all the mothers of Children with Intellectual Disability in exceptional schools of Urmia city during 2021-2022; among them 40 students were selected in available sampling method as the sample case and categorized in experimental group (20 children) and control group (20 children). Data collection instruments included Riff psychological well-being questionnaire, Matson scale to evaluate mothers' communication skills and Abidin (1983) to estimate maternal parenting stress level. The validity of research instruments was confirmed by the approval of specialists and the reliability was estimated and approved by calculating Cronbach alpha coefficient ($\alpha > 0.7$). Prior to the study, pre-test of psychological well-being, communication skills and maternal parenting stress was implemented in both groups. The experimental group received life skills therapy through the training package in 10 sessions, but the control group did not receive any training therapy. After the training course in the post-test stage, both of the groups answered to the same questionnaire of pre-test stage. The research data was analyzed with one way and Multivariate Covariance Analysis.


Results: The results revealed that life skills therapy had a positive effect on the increase of psychological well-being and its five subscales, communication skills and maternal parenting stress and its subscales ($P < 0.05$).

Conclusion: According to the effectiveness of life skills therapy in the present research, it was suggested to the principles of exceptional schools to establish relations among school officials

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and mothers with intellectually disabled children, through life skills training and counseling sessions to improve these mothers' psychological well-being and communication skills and also, to reduce their parenting stress.

Keywords: Communication Skills, Children with Intellectual Disability, Life Skills Therapy, Maternal Parenting Stress, Psychological Well-being

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Introduction:

The birth of a baby is one of the happiest events in the life of any parent, but being a parent brings new responsibilities and a different role to the individual. These new responsibilities are stressful for parents in themselves, and they may sometimes feel ineffective in their parenting role. In such cases, parents feel that they cannot control the situation, and this feeling of lack of control brings them more stress (1). Birth of a child with psychological or developmental problems; It is a very stressful task for parents (2) and its effects on the family are deeper; Because the occurrence of disability in the child, in addition to threatening the relationship between the mother and the child, causes many emotional and economic disorders in the family. In fact; the presence of a mentally retarded child in the family, according to the special care needs of the child, is a source of stress for mothers who deal more with the child than others, and also affects their mental health and adjustment (3).

Nowadays, the problems caused by diseases and disabilities, including mental retardation, are among the most acute problems of human societies. In recent studies, the prevalence of mental retardation has been estimated at 2 out of 211,000 (4). The prevalence of mental retardation in developing countries is estimated at 10 to 15 per 1,000 children, and its prevalence in Western societies is estimated at 1 to 3% of the total population (5). In most estimates, the prevalence of mild mental retardation is approximately 85%, moderate mental retardation is about 10%, severe mental retardation is 4% and profound mental retardation is about 1 to 2% of people with mental retardation. Constitute (6).

Mental retardation is not a disease or illness, but a complex disability that is associated with developmental disabilities in various physical, mental, developmental, social and educational dimensions (7). Having a mentally retarded child affects the family's mental health and, in addition to concerns and mental health problems, makes it difficult to share explicit communication plans and processes and be aware of other family members' issues (8). Mental retardation is one of the major problems of human societies and one of the most complex and difficult problems in children and adolescents that has many effects on the family and society (9). The presence of a mentally retarded child is associated with care problems for the family and especially stressful experiences for parents. Such a situation prevents the family from being able

to perform its normal functions such as raising children, social relations, employment, leisure and marital relations in a desirable way (10).

Mental retardation, in addition to a significant prevalence, is associated with developmental delays in various social, educational, developmental, physical and psychological aspects and can have an adverse effect on the body and performance of a family. In order for the parents to bear this heavy role in various ways and as a result, to impose great difficulties on the family and society in the field of caring for and caring for people with special needs (11). A significant proportion of mothers of mentally retarded children suffer from high levels of stress and have high levels of stress and low levels of mental health (12). Mothers of mentally retarded children are the ones who have the most interaction and knowledge about their child, and most of their daily routines are spent caring for and fulfilling responsibilities related to their disabled child, leading to high levels of stress and health threats. They become (13). Various studies have shown that the presence of mentally retarded children with developmental delays in the family makes all family members, especially parents, feel guilty, stressed, anxious, afraid, depressed, denied, aggressive and embarrassed (14). In fact, the birth of a mentally retarded child can cause stress, frustration and despair in the family. Evidence shows that parents in such families are more likely to face social, economic, and emotional problems that are restrictive, destructive, and pervasive in nature, resulting in the culture and society in which the parents live. They can increase parental stress, reduce psychological well-being, reduce communication, and increase various problems and challenges in the family. In this regard, in families with mentally retarded children; the mother experiences the most difficulty and pressure in caring for the child. With the presence of a child with a mental disorder in the family, the mother is no longer able to perform routine tasks as well as she used to, and the time she spends with other family members is reduced, Because most of his time is spent caring for and providing for the needs of the disabled child. Also, mothers, due to the close relationship they have with such children; In the face of others, in explaining the situation of their mentally retarded child, they behave more in terms of emotional issues, react irrelevantly in family relationships and outside the family, and suffer from tension and stress (15). Therefore, it can be said that mothers of mentally retarded children face many stresses. One of these stresses is the stress of parenting. Abidin defines parental stress as a complex combination of three interrelated factors: child, parent, and parent-child interactions (16). Parenting stress is defined as a psychological response to parental desires (17). Parenting stress is caused by a lack of coordination and balance between parents' understanding of the demands and responsibilities of this role and access to available resources to meet their needs and demands. In fact, the need for balance and coordination between existing demands, needs and resources is at the core of most parenting stress theories. This stress occurs when parents are unable to meet their child's responsibilities and demands and as a result their quality of life is affected. (12).

Abidin (18) believes that parent-child characteristics, along with external situational variables and life stressors, are the reason for the possible increase in active failure and parenting stress. In

fact, such mothers are harmed in life. However, the degree of vulnerability of such mothers to psychological pressures varies and depends on various factors such as the sex of the child, the type and severity of the child's problem or disability (19). People are different not only in terms of the events they experience in life, but also in terms of their vulnerability to events. Everyone's vulnerability to stress is affected by coping skills and existing social support. The ability to overcome physical stressors such as illness in individuals depends on how healthy the person is when exposed to the stressors. The ability to cope with and overcome psychological stressors depends on a person's personality traits when experiencing stressful events (20). In this context, and in line with the discussion about the high stress of parents with mothers with mentally retarded children; Biabani (21) showed that mothers of mentally retarded children endure 70% more parenting stress than mothers with normal children. Al-Hozimi also received 22 during the corona epidemic; Covid virus has many negative effects on the behavior of children with autism, which has increased the stress of parents. Sermentzli and Koklari also found; Parenting stress of mothers with children with autism and children with mental disabilities was on a par with their children's age and adaptive skills, and both types of problems in their children caused parenting stress for their mothers. As a result, the presence of parenting stress in parents, especially mothers with mentally retarded children, is clearly seen in previous research.

Parenting stress reduces the mental health of parents with mentally retarded children. Such mothers need help to reduce their stress, which is possible by using communication methods. One of these methods is to pay attention to the development of communication skills to mothers. In today's society, as the process of life becomes more complex, the importance of communication has increased. In such societies, communication skills are one of the most important factors in the development and excellence of human success (23).

Harji defines communication skills as the skills by which individuals can engage in interpersonal interactions and the communication process, that is, the process by which individuals share information, thoughts, and they express their feelings through the exchange of verbal and non-verbal messages (24). One of the problems that mothers with mentally retarded children have is poor communication skills. These mothers, due to the defect in their child, somehow blame themselves and hide their child from others and have low self-esteem. To overcome this shortcoming, mothers who have good psychological well-being can have a positive interaction with their children. Psychological well-being is considered as emotional reactions to the perception of appropriate personal characteristics and achievements, proper interaction with the world and social cohesion, and positive progress over time (25).

Considering the issues and problems rose regarding the exposure of mothers with mentally retarded children in life; various educational methods have been proposed to treat these behavioral problems of mothers, especially to reduce parenting stress, improve communication skills, as well as psychological well-being (30). One of the most important educational methods in the field of mother-child behavior and relationships; is life skills (31). The World Health Organization defines life skills as the ability to perform adaptive and positive behaviors so that one can cope with the challenges and necessities of daily life (32). Life skills are a set of abilities

that provide the basis for adaptation and positive and useful behavior. These abilities enable the individual to take on the responsibilities of his or her social role and to deal effectively with daily wants, expectations, and problems, especially in interpersonal relationships, without harming himself or herself (33). In this method, by providing the required training, a set of skills necessary for success in life is taught to the person and he is helped to acquire the necessary abilities, information, attitudes and skills for Develop a successful, healthy and stress-free life. According to Hamish (34), life skills training is one of the most effective and efficient methods among educational approaches to improve mother-child relationships and parental stress. This educational approach is effective both in terms of personal growth and empowering people to act and behave in stressful situations. Life skills can be one of the intervention methods in increasing psychological well-being and communication skills and reducing parenting stress.

The results of previous research on the high statistics of parenting stress among mothers with mentally retarded children indicate the need for behavioral education to reduce this problem among them, despite research related to the effectiveness of life skills. This behavioral problem can be reduced among the mothers in question by reducing parenting stress. In this regard, the results of Mofrad, Isfahani Khaleghi and Taybi (35) research show that teaching life skills to parents has a significant effect on parenting stress (child stress and parent stress). Maghribi Sinki, Hassanzadeh, Arjmandnia and Khademi (36) also found; Communication skills training have a significant effect on promoting parent-child interaction between participating mothers and reduce the components of conflict and dependence.

The results of limited research on the impact of life skills on helping mothers with mentally retarded children indicate the need for ways to increase communication skills among them. The results obtained from the researches of Ghasemi, Fatehabadi, Mousavi and Rezazadeh (37) show; Life skills were used as an effective intervention method to improve the communication skills of mothers of students with autism. As a result, life skills training showed the necessary effectiveness in increasing mothers' communication skills.

The results of various studies on the importance of psychological well-being of mothers with mentally retarded children indicate the need for behavioral therapy to increase it among mothers, despite the research related to the effectiveness of life skills in increasing psychological well-being. This behavioral variable can be improved among the mothers in question. In this regard, the results of Foolad Cheng and Merhamati research (38) show that life skills training (from the perspective of Islam and psychology) improved the psychological well-being of female students. The companion study (39) also showed the effect of education on promoting the mental health of mothers with mentally retarded children. The results of Taherkhani's research (40) also showed that communication skills training increase the psychological well-being of mothers of children with mental disabilities.

Few researches have been done on the effect of life skills on improving psychological well-being, communication skills and reducing parenting stress of mothers with mentally retarded children. And the importance of this treatment in improving the behavioral status of mothers

becomes more and more apparent. According to the mentioned cases and problems, children with mental disabilities and conflicts and preoccupations that occur for their mothers in personal, family and especially in the discussion of education, learning, social relations and behavior of children in primary school. Due to the constant association with these children, such mothers suffer from dysfunctional interactions with their children and suffer from confusion and eventually parenting stress, as a result of which they reduce their relationship with others and become isolated in a way. As a result of these factors, they neglect their personal growth, autonomy and acceptance and lose control of the environment, and as a result, their psychological well-being declines and they cannot play the management and role of mother and wife in family life well. Eventually, they will be unable to raise their mentally retarded children, and many problems will remain in their children until they are older. Therefore, it is necessary to make plans to solve the problems of these mothers. Therefore, by assigning different educational methods, especially life skills training, we can try to reduce their behavioral problems and help them in dealing with children with mental disorders, especially in teaching. According to the results of similar research; The ability to perform life skills seems to be effective in reducing parenting stress and increasing communication skills and psychological well-being of mothers with mentally retarded children. Therefore, ignoring the effectiveness of this educational-behavioral method on the variables mentioned in the mothers of mentally retarded students can be considered a serious gap in the exceptional schools of Urmia, which the purpose of this study is to fill part of the gap; Therefore, in this regard, the present article was conducted with the aim of the effectiveness of life skills training on psychological well-being, communication skills and parenting stress of mothers of students with intellectual disabilities in special schools in Urmia. Given the importance of the subject matter and the lack of research to examine effective methods for improving the behavioral characteristics of mothers of students with intellectual disabilities; Especially with the special attention that has been paid in recent years to the teaching of life skills in daily life and the upbringing of children in the family sphere, this study is to examine and solve the many problems that exist among mothers of knowledge. There are students with mental disabilities in special schools in Urmia, and it seeks to answer the question of whether life skills training is effective on psychological well-being, communication skills and parenting stress of mothers of students with mental disabilities?

Methods:

The research method is based on quasi-experimental designs in which a pre-test-post-test design with a control group was used. The statistical population included all mothers of mentally retarded primary school students in the exceptional schools of Urmia in the academic year 2020-2021, which was used to determine the sample; Using the available sampling method; Forty mentally retarded primary school students in special schools in Urmia were selected and their mothers were studied. In such a way that they were randomly divided into two separate groups of 20 people (life skills test group and control group) by observing the inclusion criteria and by random replacement. Inclusion criteria include: presence of both parents at home, having

mothers' mental health, having at least literacy for mothers, not attending other psychological intervention sessions during the last six months, mothers' interest in participating in research and mothers' informed consent to participate was in research. Exclusion criteria also included: absence from more than two sessions, unwillingness to cooperate in continuing the research and simultaneously participating in other intervention programs.

Before conducting research; written consent was obtained from the mothers of the students studied. In addition, the American Psychological Association's code of ethics was observed, including respect for the principle of confidentiality of results, the possibility of subjects withdrawing from research, providing sufficient information on how to teach and research, and that the intervention would not cause any physical harm. The mothers of the participating students completed the Psychological Well-Being, Communication Skills and Parenting Stress Questionnaires. They were then randomly divided into two groups of 20 people. Then, the subjects in the experimental group underwent the intervention of "life skills training" in 10 sessions of 60 minutes. The subjects in the control group did not receive any educational intervention. After the intervention sessions; both groups completed the same questionnaires on psychological well-being, communication skills, and parenting stress. In order to comply with ethical principles; Training sessions were held for the control group after the completion of the research.

Measurement, validity and reliability tools:

A) Psychological welfare questionnaire: To measure the psychological well-being of mothers of mentally retarded children from the short form 84 questions of the Reef Psychological Welfare Scale (1989) on a scale of 6 Likert options from strongly disagree 1, disagree 2, somewhat disagree 3, somewhat agree 4 I agree with 5 and strongly agree with 6 with six subscales including: self-acceptance components in items (84-78-72-66-60-54-48-42-36-30-24-18-12 -6), positive relationships with others in items (79-73-67-61-55-49-43-37-31-25-19-13-7-1), autonomy in items (80- 74-68-62-56-50-44-38-32-26-20-14-8-2), mastering the environment in items (81-75-69-63-57-51-45-39- 33-27-21-15-9-3), purposeful life in items (83-77-71-65-59-53-47-41-35-23-29-17-11-5) and personal growth Used in items (82-76-70-64-58-52-46-40-34-28-22-16-10-4). The sum of the scores of these 6 subscales was calculated as the psychological well-being score. A higher score indicates better psychological well-being. Some items were renamed due to negative charge and scored in reverse.

Reef used Cronbach's alpha in a study to evaluate the reliability of the original scale. Cronbach's alpha has been reported for self-acceptance (93%), direct communication with others (90%), purposefulness in life (90%) and personal growth (87%), is counted. The correlation between the short version of the Reef psychological well-being scale and the main scale ranged from 7% to 89% (Reef and Singer, 2006). This scale has been standardized in Iran by Sefidi and Farzad (2009) in a study entitled Rifting the Reef Psychological Welfare Test in Qazvin University students and the obtained Cronbach's alpha is reported to be 73%. In the present study, the content of the tool was approved by several experts using the content validity. Cronbach's alpha

results also confirmed the reliability of the psychological well-being questionnaire and its subscales ($\alpha < 0.7$).

B) Communication Skills Questionnaire: To measure communication skills, Matson 19-item questionnaire on a scale of 5 options of Likert scale from very low with a score of 1, low with a score of 2, satisfactory with a score of 3, good with 4 and very good with 5 choices used. The total score of 19 items was calculated as the communication skills score. The score range of this questionnaire is between 19 and 95. People with a score below 45 have an acute communication problem; People who score between 46 and 65 have communication problems; and people who score between 66 and 95 are able to communicate.

Monjemizadeh (41) for simultaneous validity of the communication skills questionnaire with the communication ability questionnaire; the effective correlation was obtained ($r = 0.69$) and as a result its simultaneous validity was confirmed. Also, the reliability of the questionnaire or its reliability was calculated using Cronbach's alpha measurement method and was equal to 0.73, which indicates the appropriate reliability of this questionnaire. In the present study, the content of the tool was approved by several experts using the content validity. Cronbach's alpha results also confirmed the reliability of the communication skills questionnaire ($\alpha < 0.7$).

C) Parenting Stress Questionnaire: To measure the parenting stress of mothers of mentally retarded children, the short version of the Abidin Parents Stress Questionnaire (42) on the Likert scale includes strongly disagree 1, disagree 2, disagree 3, agree 4, and strongly agree 5. 36 items were used in the form of three subscales of parental confusion (first 12 items), dysfunctional parent-child interaction (second item 12) and problematic child characteristics (12 items). The total score of 36 items was calculated as the parenting stress score of mothers.

The alpha coefficient of this questionnaire was reported by Abidin for parental confusion 0.83, dysfunctional parent-child interaction 0.86 and for problematic child characteristics 0.80 and also the total validity of this scale in Iran based on alpha 0.90. (43). In Rahimi Pardanjani, Ghobari Bonab, Afrooz and Faramarzi research, the total validity was calculated based on Cronbach's alpha of 0.87. In the present study, the content of the tool was approved by several experts using the content validity. Cronbach's alpha results also confirmed the reliability of the Parenting Stress Questionnaire ($\alpha < 0.7$).

D: Protocol of life skills training to the experimental group:

To teach life skills intervention sessions to the experimental group; The Seyedabadi training package (44) and life skills, published by Mohammadkhani and Nouri (45) through the Cultural Planning and Counseling Office of the Ministry of Education, were used for the first to tenth sessions. This training package has been compiled in 10 training sessions of 60 minutes. The content of the sessions in Table (1) to the samples of the experimental group, by the researcher who has a history of such research; done.

Table1. The content of the life skills training protocol to the experimental group

Meeting	Description of meetings
First session	Familiarize the group with the consultant and each other and determine the goals and rules of the group

second session	Knowing yourself and knowing your characteristics in accepting yourself (self-awareness)
third session	Review the assignment of the previous session and give feedback and familiarity with empathy skills
fourth Session	Review the assignment of the previous session and give feedback, knowledge about the phenomenon of effective communication
fifth meeting	Familiarity with anger management and management skills
Sixth Session	Problem solving skills
Seventh session	Stress management and coping skills
Eighth Session	Decision making skills
The ninth session	Critical thinking skills
The tenth session	Familiarity with emotion management skills

SPSS software version 24 was used to analyze the data. The results were analyzed in two parts. The first part of descriptive statistics including mean and standard deviation and the second part of inferential statistics including assumptions and hypotheses of univariate analysis of variance and multivariate analysis of covariance were used.

Results:

Table 2 presents the descriptive statistics of the studied variables by test type and groups.

Table2. Descriptive statistics on psychological well-being, communication skills, parenting stress of mothers of mentally retarded children and their subscales

Variable	Group variables	Pre-test		Post-test	
		Average	Standard deviation	Average	Standard deviation
Psychological well-being	Your acceptance	50/3	5/79	54/2	5/62
	Self-acceptance life skills training				
	Control	50/25	5/13	52/8	6/01
	Positive relationships with others	51	4/59	57/05	5/67
	Positive relationships with others. Life skills training				
	Control	50/5	3/98	50/5	4/59

Autonomy	Autonomy of life skills training	۴۹/۵۵	۴/۷۶	۵۵/۹	۶/۵۸
	Control	۵۱/۱	۳/۹۷	۴۸/۴۵	۴/۵۷
Mastery of the environment	Mastering the life skills training environment	۵۲/۷	۶/۹۹	۶۰/۷۵	۷/۹
	Control	۵۳/۲	۶/۵۸	۵۲/۸	۷/۱۲
objective life	Purposeful living Teaching life skills	۵۳/۹	۴/۵۹	۶۰/۲	۶/۱۸
	Control	۵۱/۸۵	۵/۷۶	۵۲/۷۵	۶/۹۱
Personal growth	Personal development Life skills training	۵۴/۸۵	۷/۰۹	۶۲/۵۵	۶/۳۸
	Control	۵۴/۵۵	۶/۹۹	۵۵/۶۵	۵/۵۷
Psychological well-being	Psychological well-being Life skills training	۳۱۲/۳	۲۵/۰.۵	۳۵۰/۶۵	۲۷/۸۸
	Control	۳۱۱/۴۵	۲۵/۳۵	۳۱۲/۹۵	۲۶/۹۳
Communication skills	Communication skills Life skills training		۵۵/۷	۱۲/۵۸	۷۵/۹۵
	Control		۶۵/۲۵	۱۰/۵۱	۷۰/۹۵
Parental confusion	Parental confusion teaching life skills	۳۸/۵	۴/۸۲	۲۲/۶	۴/۵۴
	Control	۳۹	۵/۲۴	۳۹/۱	۵/۲۸
Inefficient interaction	Inefficient interaction	۳۸/۱۵	۶/۴۵	۲۱/۹۵	۲/۵
	Parent-child teaching life skills	۳۸/۷۵	۶/۶۹	۳۸/۳	۴/۷۴
Parent-child	Control	۳۹/۴۵	۵/۰.۳	۲۱/۷۵	۳/۵۸
	Characteristics of a problematic child	۳۸/۷۵	۵/۵	۳۸/۸	۴/۱۴
Parenting stress	Control	۱۱۶/۱	۱۴/۷۷	۶۶/۳	۱۰/۰.۴
	Parenting stress Life skills training	۱۱۶/۵	۱۵/۷۲	۱۱۶/۲	۱۲/۶۲

Multivariate analysis of covariance was used to evaluate the effectiveness of life skills training on the psychological well-being of mothers of children with mental disabilities. First, the assumptions of this test were performed (Table 3). The default normality in the two groups was examined as follows. In self-acceptance (statistics life skills training group = 0.96, $p < 0.05$; control, statistics = 0.8, $p < 0.05$), in positive relationships with others (statistics life skills training group = 0.82, $p < 0.05$; control, statistics = 0.64, $p < 0.05$), in autonomy (life skills training group, statistics = 0.76, $p < 0.05$; control, statistics = 0.52, $p < 0.05$), in mastering the environment (Life Skills Training Group Statistics = 1.07, $p < 0.05$; Control, Statistics = 0.77, p

<0.05), In purposeful life (life skills training group statistics = 1.29, $p < 0.05$; control, statistics = 0.54, $p < 0.05$), in individual development (life skills training group statistics = 79 0.0, $p < 0.05$; control, statistics = 1.19, $p < 0.05$), in psychological well-being (life skills training group, statistics = 1.01, $p < 0.05$; control, statistics = 0.49, $p < 0.05$), the results did not show any violation of this assumption. Another assumption is for variance homogeneity, which Levin test showed in all subscales of psychological well-being, including self-acceptance (variance = 0.22, $p < 0.01$); Positive relationships with others (variance = 0.03, $p < 0.01$); Autonomy (variance = 2.98, $p < 0.01$); Environmental dominance (variance = 0.39, $p < 0.01$); Purposeful life (variance = 0.15, $p < 0.01$) and individual growth (variance = 0.14, $p < 0.01$); We did not violate this assumption either. Another hypothesis of this test is the similarity of the variance-covariance matrix, which M.BOX results showed that we have not violated this assumption (Mbox = 12.12, variance = 1.86, $P < 0.001$).

Table3. Results of the Kolmogorov-Smirnov, Loon, and M. box

Variable	group	Kolmogorov-Smirnov		Levin		M box	
		Statistic	The significance level	Statistic	The significance level	Statistic	The significance level
Your acceptance	Life	۰/۹۶	۰/۳۱				
	Skills Training			۰/۲۲	۰/۶۴		
	Control	۰/۸	۰/۵۴				
Positive relationships with others	Life	۰/۸۲	۰/۵				
	Skills Training			۰/۰۳	۰/۸۵		
	Control	۰/۶۴	۰/۸				
Autonomy	Life	۰/۷۶	۰/۵۹			۱/۸۶	۰/۰۱
	Skills Training			۲/۹۸	۰/۰۹		
	Control	۰/۵۲	۰/۹۴				
Mastery of the environment	Life	۱/۰۷	۰/۱۹				
	Skills Training			۰/۳۹	۰/۵۳		
	Control	۰/۷۷	۰/۵۸				
objective life	Life	۱/۲۹	۰/۰۷	۰/۱۵	۰/۶۹		

	Skills Trainin g				
	Control	۰/۵۴	۰/۹۲		
Personal growth	Life	۰/۷۹	۰/۵۵		
	Skills Trainin g			۰/۱۴	۰/۷
	Control	۱/۱۹	۰/۱۱		
Psychologica l well-being	Life	۱/۰۱	۰/۲۵		
	Skills Trainin g			-	
	Control	۰/۴۹	۰/۹۶		
		>۰/۰۵P		>۰/۰۱P	
				>۰/۰۰۱P	

As a result, after confirming and confirming all the assumptions; Multivariate analysis of covariance was performed and the results of Table 4 showed: there is a significant difference in the linear composition of the variables (variance = 6.42, $P < 0.05$, Wilkes's lambda, effect size = 0.58)

Table4. Multivariate test of the difference between the mean scores of psychological well-being of mothers of children in the experimental and control groups

	the amount of	Variance	The significance level	Effect size
Wilks Lambda	۶/۴۲	۰/۴۱	۰/۰۰۰	۰/۵۸

Univariate covariance test was used to compare the experimental and control groups in each of the dependent variables. Table 5 presents the results of univariate analysis of covariance for post-test psychological well-being subscales by experimental and control groups.

Table5. Results of univariate analysis of covariance for post-test psychological well-being subscales by experimental and control groups

	Total squares	Degrees of freedom	Average squares	Amara F	The significance level	Effect size
Your acceptance	۲/۸۳	۱	۲/۸۳	۰/۰۹	۰/۷۵	۰/۰۰۳
Positive relationships with others	۳۱۲/۹۸	۱	۳۱۲/۹۸	۱۳/۳۸	۰/۰۰۱	۰/۲۹
Autonomy	۶۰۱/۸۲	۱	۶۰۱/۸۲	۱۸/۳۵	۰/۰۰۰	۰/۳۶
Mastery of the environment	۴۲۰/۹۱	۱	۴۲۰/۹۱	۸/۳۷	۰/۰۰۷	۰/۲۰
objective life	۴۲۸/۸۶	۱	۴۲۸/۸۶	۹/۸۸	۰/۰۰۴	۰/۲۳
Personal growth	۳۲۷/۸۲	۱	۳۲۷/۸۲	۱۰/۲۹	۰/۰۰۳	۰/۲۴

According to Table 5, the results showed that there were significant differences between the groups in the subscales of positive relationships with others, autonomy, environmental control, purposeful life and individual growth ($P < 0.008$). In addition, part of the variance of changes in positive relationships with others (0.29), in autonomy (0.36), in dominating the environment (0.20), in purposeful living (0.23) and in personal growth (0.24) 0 In the post-test, it is related to the effect of life skills training, but there was no significant difference between the groups in the acceptance subscale ($P < 0.008$).

Univariate analysis of covariance was used to evaluate the effectiveness of life skills training method on communication skills of mothers of children (Table 6). First, the assumptions of this test were performed. The default of normality in the two groups was examined as follows (life skills training group statistics = 0.73, $p < 0.05$; control, statistics = 1.16, $p < 0.05$), the results of no Did not show a violation of this assumption. Another assumption is to match the variance that Levin test showed that we have not violated this assumption (variance = 6.35, $p < 0.01$). Another assumption of this test is the homogeneity of the regression slope, which the results showed, we have not violated this assumption (variance = 0.602, $P < 0.05$).

Table6. Results of Kolmogorov-Smirnov assumptions, Leven test and regression slope

Variable	group	Kolmogorov-Smirnov		Levin		Regression slope	
		Statistic	The significance level	Statistic	The significance level	Statistic	The significance level
Communication skills	Life skills training	0.73	0.65	6.35	0.01	0.602	0.44
	Control	1.16	0.13				
		$> 0.05P$		$> 0.01P$		$> 0.05P$	

As a result, after confirming and confirming all the assumptions; Univariate analysis of covariance was performed. Table 7 presents the results of univariate analysis of covariance for the communication skills variable of mothers of children in the post-test by experimental and control groups.

Table7. Results of univariate analysis of covariance for communication skills of mothers of children in post-test by experimental and control groups

	Total squares	Degrees of freedom	Average squares	Amara F	The significance level	Effect size
pre-exam	2/49	1	2/49	0.06	0.79	0.02
Bands	230/42	1	230/42	6/3	0.01	0.14

Error	۱۳۵۱/۴	۳۷	۳۶/۵۲
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According to Table 7, the results showed that there was a significant difference in communication skills between mothers of children ($P < 0.05$). In addition, part of the variance in changes in communication skills of mothers of children (0.14) in the post-test is related to the effect of life skills training.

Multivariate analysis of covariance was used to evaluate the effectiveness of life skills training method on parenting stress of mothers of children (Table 8). First, the assumptions of this test were performed. The default normality in the two groups was examined as follows. In parents' confusion (life skills training group, statistics = 1.35, $p < 0.05$; control, statistics = 0.62, $p < 0.05$), in dysfunctional parent-child interaction (life skills training group) Statistics = 1.08, $p < 0.05$; control, statistics = 1.007, $p < 0.05$), in the characteristics of the problem child (Life Skills Training Group Statistics = 1.04, $0.05 < P$; control, statistics = 0.59, $p < 0.05$), in parenting stress (life skills training group, statistics = 1.12, $p < 0.05$; control, statistics = 0.7, $05 / P < 0$), the results did not show any violation of this assumption. Another assumption is for variance homogeneity, which Levin test showed in all subscales of parenting stress, including parental confusion (variance = 0.37, $p < 0.01$); Dysfunctional parent-child interaction (variance = 4.17, $p < 0.01$) and problematic child characteristics (variance = 0.15, $p < 0.01$); We did not violate this assumption either. Another hypothesis of this test is the similarity of the variance-covariance matrix, which M.BOX results showed that we have not violated this assumption (Mbox = 25.46, variance = 3.87, $P < 0.001$).

Table8. Results of the Kolmogorov-Smirnov, Loon, and M. box

Variable	group	Kolmogorov-Smirnov		Levin		M box	
		Statistic	The significance level	Statistic	The significance level	Statistic	The significance level
Parental confusion	Life Skills Training	۱/۳۵	۰/۰۵۱	۰/۳۷	۰/۵۴		
	Control	۰/۶۲	۰/۸۲				
Dysfunctional parent-child interaction	Life Skills Training	۱/۰۸	۰/۱۹	۴/۱۷	۰/۰۴	۳/۸۷	۰/۰۰۱۴
	Control	۱/۰۰۷	۰/۲۶				
Characteristics of a problematic	Life Skills Training	۱/۰۴	۰/۲۲	۰/۱۵	۰/۶۹		
	Control						

child	g		
	Control	۰/۵۹	۰/۸۷
Parenting stress	Life Skills Trainin	۱/۱۲	۰/۱۵
	g		
	Control	۰/۷	۰/۷
		>۰/۰۵P	>۰/۰۱P
			>۰/۰۰۱P

As a result, after confirming and confirming all the assumptions; Multivariate analysis of covariance was performed and the results of Table 9 showed that there was a significant difference in the linear composition of the variables (89.56 variance, $P < 0.05$, Wilkes's lambda, effect size = 0.89).

Table9. Multivariate test of the difference between the mean scores of parenting stress scores of mothers of children in the experimental and control groups

	the amount of	Variance	The significance level	Effect size
Wilks Lambda	۶/۴۲	۰/۴۱	۰/۰۰۰	۰/۵۸

Univariate covariance test was used to compare the experimental and control groups in each of the dependent variables. Table 10 presents the results of univariate analysis of covariance for the post-test parenting stress subscales by experimental and control groups.

Table10. Results of Univariate Analysis of Covariance for Parenting Stress subscales in post-test by experimental and control groups

	Total squares	Degrees of freedom	Average squares	Amara F	The significance level	Effect size
Parental confusion	۲۶۷۶/۴۶	۱	۲۶۷۶/۴۶	۱۱۵/۰.۳	۰/۰۰۰	۰/۷۶
Dysfunctional parent-child interaction	۲۶۱۸/۱۸	۱	۲۶۱۸/۱۸	۱۹۷/۰.۸	۰/۰۰۰	۰/۸۴
Characteristics of a problematic child	۲۸۵۰/۵۴	۱	۲۸۵۰/۵۴	۱۹۵/۱۹	۰/۰۰۰	۰/۸۴

According to Table 10, the results showed that there was a significant difference between the groups in all subscales of parental disorder, dysfunctional parent-child interaction and problematic child characteristics ($P < 0.016$). In addition, part of the variance of parental confusion (0.76), in the dysfunctional parent-child interaction (0.84) and in the characteristics of the problematic child (0.84) in the post-test related to the effect of life skills training it becomes.

Discussion and Conclusion:

The aim of this article was to evaluate the effectiveness of life skills training on psychological well-being, communication skills and parenting stress of mothers of children with mental

disabilities in the academic year 1399-400. One of the results showed that life skills in improving psychological well-being (58%) and five subscales of positive relationships with others (29%), autonomy (36%), mastery of the environment (20%), purposeful living (23%) and individual growth (24%) were effective. But no significant effectiveness was observed in the acceptance subscale. The results of this research are in line with the results of Foolad Cheng and Merhamati (38), Ashabi (39), Taherkhani (40).

Received steel and mercy (38); Life skills training (from the perspective of Islam and psychology) improved the psychological well-being of female students. The companion study (39) also showed the effect of education on promoting the mental health of mothers with mentally retarded children, which has a positive and significant effect. The results of Taherkhani's research (40) also showed that communication skills training increase the psychological well-being of mothers of children with mental disabilities. One of the basic principles in life skills is that for people with problems in individual and family life; Teaches the ability to deal with problems and improve self-awareness through problem solving, stress management and controlling life emotions through anger management and management. Regarding mothers with mentally retarded children who are always with the mother; Teaching life skills traits can help a mother deal with a child with a problem to make the problem seem trivial through critical thinking, and instead of blaming herself and cutting ties with others; Through individual growth; Being able to communicate with others and not be ashamed of having a disability in the child by being in the peer group and interacting with children of the same age, the ability to create empathy by mastering the environment as well as making the right decisions in building life Purposeful and overall psychological well-being of themselves and other family members. Life skills due to the fact that they are more behavioral and affect the daily life of mothers; Therefore, mothers with mentally retarded children, despite having a child with a disorder, by teaching life skills components such as anger management, stress management, emotion management, the ability to communicate with others by creating empathy for them in having a Purposeful living helps. In fact, teaching life skills in behavioral dimensions such as self-awareness, empathy, how to communicate, facing problems, managing stress and anger and excitement increased communication skills in the mothers studied. But regarding the acceptance component in this research; Life skills training did not have the necessary effectiveness. This may be due to the fact that mothers of mentally retarded children, given that they often had the same child and had the first experience of educating a child with a mental disorder; How to interact with such children, as well as their ability to tolerate feedback from others about seeing their child with a disorder; Somehow frustrated and blamed themselves for having such a child, they still did not have the ability to accept themselves despite holding life skills training sessions. As a result, they lacked life satisfaction, self-confidence, and success, and were more inclined to focus on the present, because thinking about the future, despite having a child with a disorder, brought them negative emotions. It seems that if life skills sessions continue; there is a possibility that "self-acceptance" in mothers will also increase. Because such mothers, after experiencing and training other characteristics such as personal growth and the

ability to communicate with others, dominate the environment and make important decisions independently and autonomously, and by repeating these cases. , You can expect to be accepted in them.

Another result of the study showed that life skills were effective in improving communication skills of mothers with mentally retarded children (14%). The results of this research are in line with the results of Ghasemi et al. (23).

Ghasemi et al. (23) found; He used life skills as an effective intervention method to improve the communication skills of mothers of students with autism. Explaining this finding, it can be said that mothers with mentally retarded children have a child with a disorder and have lower mental capacity than normal children; As well as the feeling of shame and shame they have in themselves; It has isolated themselves and their children from others, and their relationships with others have been minimized. Therefore, in order to solve this problem, the mother must first be justified that this problem of her child is not her fault, and she must improve her interactions and relationships with others and be tolerant of her child's situation and show her problem by being insignificant; Coping management strengthens emotion and anger in itself and expands the relationship between himself and his child with others by creating interaction and empathy. Life skills training help the mother to cope with this situation of her child and through the ability to solve the problem and make the right decisions about this issue by communicating with others in their ability to adapt to this process. . However, as the results showed, only 14% of life skills training in the present study improved mothers' communication skills, which could be due to the small size of Urmia and the personality traits of some mothers, as well as People related to them and, most importantly, mothers' lack of knowledge of psychological and behavioral characteristics such as components of life skills, which by identifying these characteristics and holding educational and motivational classes to such mothers by education and Exceptional schools in Urmia can increase the effectiveness.

Another result of the study showed that life skills in reducing parenting stress (89%) and subscales of parental disturbance (76%), dysfunctional parent-child interaction (84%) and problematic child characteristics (84%) It has been effective among mothers with mentally retarded children. The results of this research are in line with the results of the studies of Mofrad et al., Maghribi Sinki et al.

Mofrad et al. (35) showed that teaching life skills to parents has a significant effect on parenting stress (child stress and parent stress). Maghribi Sinki et al. (36) found; Communication skills training has a significant effect on promoting parent-child interaction between participating mothers by reducing the components of conflict and dependency and increasing the component of intimacy. According to the results of domestic and foreign research in this field; It can be understood that mothers with mentally retarded children are always self-absorbed and blamed; They consider themselves the main culprit for the birth of such a child. As a result, with such thinking, they feel guilty and become stressed and confused by blaming themselves. As a result, they are unable to communicate and interact with their child, and they also experience parenting

stress due to their child's problematic behaviors. As a result, by teaching them life skills, they will be able to communicate and interact with their child with a problem, and as a result, they will be less disturbed. In fact, life skills with an emphasis on behavior; Manages stress management, emotion management, decision-making skills, self-awareness and problem-solving skills, and the ability to empathize and interact with others in mothers. Teaching life skills by raising mothers' self-awareness by creating methods of empathy and making their children's problems seem insignificant; They managed emotion and anger management and, most importantly, managed coping with stress and reduced their tension and stress. In fact, life skills can motivate mothers to have a purposeful life. The results of some studies show those mothers with mentally retarded children before life skills intervention or any other treatment; they had a much higher parenting stress than mothers with normal children. In this context and in line with the discussion about the high stress of parents with mothers with mentally retarded children; Biabani (21) showed that mothers of mentally retarded children endure 70% more parenting stress than mothers with normal children. Sermentzelli and Koklari (46) also found; Parenting stress of mothers with children with autism and children with mental disabilities was on a par with their children's age and adaptive skills, and both types of problems in their children caused parenting stress for their mothers. As a result, the presence of parenting stress in parents, especially mothers with mentally retarded children, is clearly seen in previous research.

Characteristics of life skills such as self-awareness, empathy techniques, how to communicate with others, anger management and management, stress management and emotion management, use of critical thinking and decision-making skills Properly, they can help improve communication with others, reduce parenting stress, and, consequently, the psychological well-being of mothers with mentally retarded children. As a result, teaching life skills as a positive behavioral ability can play an important role in increasing well-being and communication skills as well as reducing mothers' stress. Freeing mothers' life skills training from focusing on their child's illness and providing mothers with the right training for proper living in interaction and communication with others; Teaches other children and family members how the mother deals with the child with the problem. In this type of education, mothers are taught how to deal appropriately with a mentally retarded child, as well as how their child is present among family, friends and peers, relatives and acquaintances, and without being ashamed of it; they lead a normal life. As a result, considering the positive effects and consequences of life skills on the lives of mothers with mentally retarded children; Anxiety and turmoil in their lives are reduced and they adapt to their child's existing problems, which should be used constructively in the development of their mental health and social relationships. It is also widely recommended to hold life skills workshops to train counselors and psychologists. Exceptional school teachers are also recommended; Parent training courses should be held to establish better relationships with children and meet the challenges ahead. It is also recommended that therapists and health professionals use this method to increase parental tolerance, reduce dysfunctional parent-child interaction, as well as to address the characteristics of the problem child and reduce mental confusion and depression, Because with regular and purposeful education through this method,

we can see a reduction in parenting stress of mothers of mentally retarded children in the short and long term. It is suggested that the results of this study be provided to the Organization for Exceptional Education in Urmia to get acquainted with the effectiveness of life skills in increasing psychological well-being and communication skills and reducing parenting stress and by holding counseling sessions with mothers; Identify the shortcomings in families with mentally retarded children and provide appropriate solutions to solve existing problems. Exceptional school management is also advised to liaise between school officials and mothers with mentally retarded children through training sessions and counseling to improve the well-being, psychological skills, communication skills, and parenting stress of such mothers. Take care. Finally, given the impact of life skills; Counselors, therapists, and clinical psychologists at counseling centers are also recommended to use this method to increase the psychological well-being, communication skills, and reduce parenting stress of mothers of elementary school students with mental disabilities.

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