Ways to Promote Resilience of Vulnerable Children and Mothers

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Abstract

Introduction: Resilience is the key to successful adaptation to change and the ability to resist new problems that makes a balance between vulnerability and the ability of individuals. This study aimed to review the ways of promoting resilience in treatment of vulnerable children and mothers.

Method: To find related studies, search the main databases including PubMed, Web of Science (ISI), Scopus, PsycINFO, EMBASE, Google Scholar, and national databases such as Irandoc, Civilica, MagIran SID, using the key words of promoting, resilience and vulnerable children and mothers was performed from the beginning of database until August 2022.

Results: In the initial search of databases, 1727 studies were obtained, of which 1532 studies were removed after duplication and 234 full-text studies were screened, of which 24 studies were included in the present study.

Conclusion: There are different ways to improve the resilience of vulnerable people, which can be used to increase the resilience of these people against problems and improve their quality of life.

Keywords: Resilience, Promotion, Vulnerable Population.

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INTRODUCTION

Resilience is the ability of people to deal with damaging events (1), their ability to adapt in the face of disasters or life-threatening pressures and overcome and even be strengthened by those experiences (2), which is the reason for maintaining relatively stable levels of psychological health and performance (1). In other words, resilience is a component that balances the vulnerability and abilities of people (3), it helps people to use health, happiness, and meaningful life for defense against internal and external stress (4), and gives the person the power to make the most of his adaptability skills in different situations (5), turn stressful situations into an opportunity for learning, and by focusing on The problem is to lower the level of stress in a person and cause positive adaptation in people (6). This ability is a multidimensional characteristic that varies depending on the time, gender and situation of the person and helps the response and adaptation of the person to stressful situations (7, 8), causes adaptation to unpleasant life situations and keeps people safe from cognitive disorders and daily life problems (9). Vulnerable groups in society include teenagers, children,
physically disabled, elderly, addicts, beggars, and women (10). One of the psychological interventions that can improve the quality of life of vulnerable people is resilience. This process causes adaptation to challenges and threats and overcomes them, and states that individuals and groups of resilient people are equipped with a set of common characteristics that prepare them to overcome the changes and vicissitudes of life (11). With such a viewpoint, people who have high resilience examine the stressful situation and then by adopting logical solutions, direct those situations in the direction they want (12).

In identifying the individual factors related to resilience, there are many studies on the existence of its positive characteristics such as the ability to create self-discipline or self-control in adverse conditions, positive self-concept, autonomy, high self-esteem, problem-solving skills, high purposefulness in life, control and management of stress and mental and physical health (8). Some studies have also shown that increasing resilience improves the quality of life (13), reduces pain and stress (14), reduces emotional problems, and increases the level of mental health and life satisfaction (15).

To promote the resilience of vulnerable people, health care providers must have a clear understanding of the factors affecting resilience based on qualitative documentation and human experiences in the specific social, cultural and economic context of their society. Regarding the importance of resilience in the mental health of vulnerable people and its effectiveness in their ability to overcome problems, the present study aimed to review ways that improve resilience in vulnerable children and mothers.

METHOD

Data Sources and Searches

In this systematic review study we followed the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) guidelines for conducting this systematic review and meta-analysis (16). The searches were performed on the following electronic databases: Pubmed, EMBASE, Web of Science (ISI), Scopus, PsycINFO, Google scholar, and Persian databases, including Scientific Information Database (SID), Irandoc, and MagIran were searched. The following terms were used as text words and keywords in databases (for example PubMed): (Resilience OR ability of people to deal with damaging events), (Vulnerable Children), AND (Vulnerable mothers OR Vulnerable women) from the start dates of the databases (1988) through August 2022 were used. Two authors independently performed screenings of these databases. Also, these authors considered the reference lists of articles at the full-text stage and reviewed articles on the topic of Resilience and Vulnerable people.

Eligibility criteria

We considered for inclusion criteria, observational studies (Cohort studies, cross-sectional) published as original or conference abstracts and used a validated method or instrument to assess Resilience, Vulnerable Children, and Vulnerable Mothers or women. Also for selections of studies. Exclusion criteria included Studies that did not report enough data to determine the Resilience and All types of review articles, letters, editorials, and interventional studies were excluded. The two mentioned investigators independently determined the study’s eligibility. At beginning of the search, no linguistic restrictions were applied.

Data collection

Regarding the selection criteria, the results of the search were screened for relevant titles and abstracts. The relevant abstracts were chosen for full-text review. After that, data extraction was done individually by the two authors. Also, references to relevant articles were screened for relevancy. Duplicates were removed. Then, for extracting the following information from included studies, a standardized data collection form was used: first author, study design, purpose people, year of publication, sample size, and conclusion.

Study quality

For each included article, a second author investigated all extracted data during the quality assessment process. The Newcastle-Ottawa Scale (NOS) was used for assessing the methodological quality of studies. Sample selection, comparability, and exposure were the 3 main items for qualitative assessment.

RESULTS

In this study, all published studies analyzing the resilience, vulnerable children and vulnerable Mothers or women in Iran and other countries were systematically reviewed and meta-analyzed based on the PRISMA guidelines Fig.1.
In the initial search of databases and other databases, 1727 studies were obtained, of which 1532 studies were removed after duplication and 234 full-text studies were screened, of which 24 studies were included in the present study. Study design in this study was include Experimental (Exp), Semi Experimental (Semi Exp), Randomized Clinical Trial (RCT), Cohort, and Cross-Sectional (C-S).

Table 1: The frequency of conducted studies on vulnerable Children and vulnerable Children's mothers

<table>
<thead>
<tr>
<th>NO</th>
<th>First author</th>
<th>Year</th>
<th>Study Design</th>
<th>Purpose Population</th>
<th>Sample Size</th>
<th>Way to promote Resilience</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Shojaee et al. (17)</td>
<td>2015</td>
<td>Semi Exp</td>
<td>Children with Down syndrome</td>
<td>30</td>
<td>Teaching Resilience Skills</td>
</tr>
<tr>
<td>2</td>
<td>Dehghan et al. (18)</td>
<td>2014</td>
<td>C-S</td>
<td>Deaf-blind children</td>
<td>131</td>
<td>Mental health of children’s parents</td>
</tr>
<tr>
<td>3</td>
<td>Kim et al. (19)</td>
<td>2005</td>
<td>C-S</td>
<td>Korean children</td>
<td>442</td>
<td>Meaning Therapy</td>
</tr>
<tr>
<td>4</td>
<td>Ashournejad et al. (20)</td>
<td>2016</td>
<td>Semi Exp</td>
<td>Female student children</td>
<td>240</td>
<td>Teaching emotion regulation strategies</td>
</tr>
<tr>
<td>5</td>
<td>Atadokht et al. (21)</td>
<td>2014</td>
<td>Semi Exp</td>
<td>Children with learning disabilities</td>
<td>40</td>
<td>Teaching social problem solving</td>
</tr>
<tr>
<td>6</td>
<td>Kang et al. (22)</td>
<td>2009</td>
<td>Semi Exp</td>
<td>Cancer children</td>
<td>29</td>
<td>Meaning Therapy</td>
</tr>
<tr>
<td>7</td>
<td>Khosravi et al. (23)</td>
<td>2020</td>
<td>Semi Exp</td>
<td>under 11 years old - Children</td>
<td>40</td>
<td>Friends program</td>
</tr>
<tr>
<td>8</td>
<td>Rezaee et al. (24)</td>
<td>2013</td>
<td>Semi Exp</td>
<td>Mothers with retarded children</td>
<td>24</td>
<td>Existential psychotherapy</td>
</tr>
<tr>
<td>9</td>
<td>Veysi et al. (25)</td>
<td>2015</td>
<td>C-S</td>
<td>Mothers with slow-paced children</td>
<td>100</td>
<td>Religion</td>
</tr>
<tr>
<td>10</td>
<td>SaeediFard et al. (26)</td>
<td>2016</td>
<td>RCT</td>
<td>Mothers of children with learning disabilities</td>
<td>30</td>
<td>Acceptance and Commitment-based Therapy</td>
</tr>
</tbody>
</table>
Results showed that common suggested way for promote of resilience in vulnerable Children and vulnerable Children's mothers were include teaching resilience skills, Mental health of children’s parents, Meaning Therapy, teaching emotion regulation strategies, Teaching social problem solving, Friends international program, Existential psychotherapy, Religion, and Acceptance and Commitment-based Therapy (Table 1).

<table>
<thead>
<tr>
<th>NO</th>
<th>First author</th>
<th>year</th>
<th>Study Design</th>
<th>Purpose Population</th>
<th>Sample Size</th>
<th>Way to promote Resilience</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Evazei et al. (27)</td>
<td>2019</td>
<td>Semi Exp</td>
<td>Middle-aged women</td>
<td>30</td>
<td>Yoga</td>
</tr>
<tr>
<td>2</td>
<td>Davis et al. (28)</td>
<td>2015</td>
<td>Semi Exp</td>
<td>Pregnant Women</td>
<td>46</td>
<td>Yoga</td>
</tr>
<tr>
<td>3</td>
<td>Heidarian et al. (8)</td>
<td>2016</td>
<td>RCT</td>
<td>Women with breast cancer</td>
<td>40</td>
<td>Mindfulness Training</td>
</tr>
<tr>
<td>4</td>
<td>Kamarzin et al. (29)</td>
<td>2012</td>
<td>Semi Exp</td>
<td>Isfahan women</td>
<td>30</td>
<td>Yoga</td>
</tr>
<tr>
<td>5</td>
<td>Rosenzweig et al. (30)</td>
<td>2010</td>
<td>Cohort</td>
<td>Women with chronic pain</td>
<td>133</td>
<td>Mindfulness Training</td>
</tr>
<tr>
<td>6</td>
<td>Mohamad Karimi et al. (31)</td>
<td>2018</td>
<td>Semi Exp</td>
<td>Women with cancer</td>
<td>30</td>
<td>Spirituality – Therapy</td>
</tr>
<tr>
<td>7</td>
<td>Tajikzadeh et al. (32)</td>
<td>2016</td>
<td>C-S</td>
<td>Women with cancer</td>
<td>61</td>
<td>Comprehensive Care Plan</td>
</tr>
<tr>
<td>8</td>
<td>Pustchian et al. (33)</td>
<td>2018</td>
<td>Semi Exp</td>
<td>Divorced Women</td>
<td>30</td>
<td>Group Meaning Therapy</td>
</tr>
<tr>
<td>9</td>
<td>Graham et al. (34)</td>
<td>2001</td>
<td>C-S</td>
<td>Women</td>
<td>115</td>
<td>Meaning Therapy</td>
</tr>
<tr>
<td>10</td>
<td>Khodabakhshi et al. (35)</td>
<td>2013</td>
<td>C-S</td>
<td>Pregnant Women</td>
<td>211</td>
<td>Spiritual Intelligence</td>
</tr>
<tr>
<td>11</td>
<td>Zare et al. (36)</td>
<td>2015</td>
<td>Semi Exp</td>
<td>Female-headed households</td>
<td>28</td>
<td>Encouragement Training</td>
</tr>
<tr>
<td>12</td>
<td>Chehri et al. (37)</td>
<td>2019</td>
<td>Semi Exp</td>
<td>Women with marital conflict</td>
<td>30</td>
<td>skills of stress management</td>
</tr>
<tr>
<td>13</td>
<td>Jalili et al. (38)</td>
<td>2015</td>
<td>Semi Exp</td>
<td>Infertile Women</td>
<td>16</td>
<td>Existential psychotherapy</td>
</tr>
<tr>
<td>14</td>
<td>Jafari et al. (39)</td>
<td>2016</td>
<td>Semi Exp</td>
<td>Female-headed households</td>
<td>30</td>
<td>Self-awareness and emotion management skills</td>
</tr>
</tbody>
</table>

Results showed that common suggested way for promote of resilience in vulnerable mothers and women were include Yoga, Mindfulness Training, Spirituality – therapy, Comprehensive Care Plan, Group Meaning Therapy, Meaning Therapy, Spiritual Intelligence, Encouragement Training, skills of stress management, Existential psychotherapy, and Self-awareness & emotion management skills (Table 2).

**DISCUSSION**

In general, resilience is defined as the process, capacity, or result of successful adaptation despite challenges or threatening conditions (40) and the economic and social problems in people's lives have always necessitated the feature of resilience as a resistant shield (41, 42). Of course, resilience is not stability against injuries and threatening conditions, nor is it a state of passivity in facing dangerous conditions; rather, it is the active participation in the surrounding environment and the individual's ability to establish biological-psychological balance in difficult conditions (7). By reviewing various studies, various ways to overcome problems and improve people's resilience have been suggested, which include.

**Skill Training**

One of the ways to overcome problems and increase resilience against them is to learn skills that can be used to adapt to existing conditions. In various studies, many skills such as interventional mindfulness skill training (8), encouragement training (36), stress management skills training (37), self-awareness and emotion management skills training (5), mind training awareness (30), teaching resilience skills (17), teaching emotion regulation strategies (20), teaching social problem solving (21), and teaching self-compassion (43) to promote resilience People have been reported. Education allows people to have a non-judgmental attitude towards themselves, which helps them define their desired goals in life and increase their self-confidence to develop possible paths to achieve those goals. In addition, people with higher levels of education tend to deal with their failure more adaptively.
Exercise and yoga

Various studies have proven the effectiveness of yoga on resilience. Evazeei et al. considered yoga as an accessible and low-cost treatment for improving resilience (27), Goodman et al. considered yoga as a suitable tool for reducing anxiety, depression and improving Resilience (28), and Kamarzrin et al. have considered yoga as a means to improve resilience and increase problem-solving skills (29). Dirmanchi et al. have mentioned sports as a suitable way to improve resilience and self-efficacy in people (44). Since people face stressful situations many times a day and this may reduce their resilience, the way of life can be designed in such a way that exercise and physical activities, especially yoga, the level it reduced anxiety in people and improved their resilience.

International Friends and Hardship Program

International Friends program is one of the tools for promoting resilience, increasing calm and reducing anxiety disorders in vulnerable people (23) and Hardship is one of the other tools for promoting resilience (52). Hardship and having a high spirit is one of the factors that motivate people and increase the ability to overcome adversities and conflicts in life.

Psychotherapy and mental health

Psychotherapy is one of the methods of intervention that is effective in reducing many psychological problems, improving the quality of life, and enhancing resilience in numerous studies, Rezaei et al. (24) and Jalilino et al. (38) in their studies, they mentioned psychotherapy and medicine among the factors affecting the promotion of vulnerable people. Dehghammonshadi et al. (18) mentioned mental health as another effective factor in improving the resilience of vulnerable people. A healthy mind has a healthier understanding of life's adversities and, as a result, has a higher ability to deal with them.

Perception of God and meaning therapy

Understanding life will enable people to tolerate difficulties and hardships. In various studies, the effect of meaning therapy on the promotion of resilience has been proven, Postchian et al. (33), Kim et al. (19), Kang et al. (22), and Kuchakinia (53), in their studies have proven the effect of meaning therapy and perception of God on improving the resilience of vulnerable people. It seems that people, believing that their life is important and has a purpose and has an impact on their surroundings, give a positive meaning to the incidents and events of their lives and in this way achieve a more effective adaptation to traumatic life experiences. This meaning helps a person to consider hardships and adversities as a factor to achieve spirituality and to have more resilience and tolerance against life's problems. The meaningfulness of life increases not only for the person in overcoming inconsistencies. It helps, but it also leads to a person's satisfaction with life.
CONCLUSION

Spiritual therapy, skills training, exercise and yoga, commitment and acceptance therapy, supportive and social resources, perception of God and meaning therapy, Friends International Program, and Hardiness, and psychotherapy and mental health are the affecting factors on the promotion of resilience in vulnerable children and mothers.

CONFLICTS OF INTEREST

The authors declare no conflict of interest.

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