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# Effectiveness of emotional intelligence training on resilience of parents with abnormal children in Tehran

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**Abstract**--Introduction: The study explored effectiveness of emotional intelligence training on resilience of parents with abnormal children in Tehran. Methods: This is an applied research conducted using a quasi-experimental method with control and experimental groups. The statistical population consisted of all parents of abnormal children in exceptional schools of Tehran. To determine the sample size, 120 individuals including 60 pairs of parents of abnormal children were selected. The samples were randomly selected from 5 exceptional schools in Tehran. As a pre-test, Connor and Davidson (2003) resilience questionnaires were filled by the subjects. The experimental group underwent emotional intelligence training for 20 sessions of 1.5 hours (two sessions per week). The control group did not receive any training. After the training course, the resilience of both groups was re-measured. The data was analyzed via SPSS. Results: Emotional intelligence training was effective in increasing resilience of parents with abnormal children ( $p = 0.001$ ). In addition, the average resilience of parents of children with autism spectrum disorder was significantly higher than the parents of children with physical and intellectual disabilities. However, there was no significant difference in the mean resilience between the parents of children with physical and intellectual disabilities. Conclusion: The results indicated that effectiveness of emotional intelligence training on increasing resilience of the parents of children with autism spectrum disorder was greater compared to the parents of children with physical and intellectual disabilities.

**Keywords**---autism, emotional intelligence, resilience, parents.

## **Introduction**

Children's health is the main concern of parents and the existence of a disorder with chronic conditions among the children causes worry and stress for any family. The birth of an abnormal baby can arouse a variety of problems in the family as it may damage family performance by affecting the quantity and quality of couples' relationships and the interaction of family members (Halahan & Kaufman, 2019).

Mothers of abnormal children are more stressed than fathers because they spend more time caring for the traumatized child. In addition, due to ongoing cognitive, social, and emotional conditions and responsibilities, the mothers undergo more stress and the risk of psychic traumas. Mothers' rehabilitation for coping with conflicts and problems requires emotional intelligence training as a new, important, and helpful variable in the field of psychology. Problematic situations, e.g. the presence of an exceptional child or children in the family, cause burnout and mental fatigue of parents and affect their resilience level. The resilience level, in turn, affects individuals' ability to manage responses and reactions, which is a difficult and complex process and reduces the quality of interpersonal relationships (Afkhami Aqda et al., 2014).

Resilience is considered to be the inherent mechanism of human self-correction and an important personality construct for understanding motivation, excitement and conceptualizing behavior. Resilience, through reducing negative emotions, leads to increased mental health and greater life satisfaction, and acts as a mediator to facilitate overcoming adversity, problems, stress and their psychological effects (Gallyamova, Z. V., et. al., 2019; Hanawi, S. A., et. al., 2020). Therefore, if living conditions worsen, improvement of resilience level and quality will help the family in coping with problems, and using flexible methods (Satir, 2019).

According to the experts, coping with family problems requires social and emotional skills besides wise abilities. It has recently been proven that emotional skills are not fixed and unchangeable; skills can be developed and boosted through an appropriate training like teaching emotional skills. Teaching emotional intelligence through the introversion of absorption and adaptation is like a journey inside a person that starts from the one's awareness of needs, moods, emotions and defense mechanisms (absorption) and reaches flexibility and higher power of choice so that one can acquire interpersonal skills, control of negative emotions, and self-realization (adaptation) (Shurchi Golangdari et al., 2013).

According to Gelman (2016), emotional intelligence is the ability to optimally manage mood, mental state, and impulses. It is a factor that creates motivation and hope in the case of experiencing failure and not achieving the goal. While emphasizing cognitive and emotional intelligence, Gelman states that, at the best,

only 20% of life success depends on IQ and 80% is associated with other factors; individuals' fates mainly pertain to the skills that form emotional intelligence. Emotional intelligence provides the basis for improving social relationships by strengthening mental health, empathy with others, social adjustment, emotional well-being, life satisfaction and reducing interpersonal problems. Also, emotional perception, facilitation, and understanding as well as management of emotions through the mechanisms of forecasting, prevention, monitoring, and strengthening coping strategies are effective in improving social relations (Khaledian et al., 2018). Therefore, it can be said that emotional intelligence training can be effective for mothers with abnormal children.

Experiences observed in society and the results of numerous studies show the presence of tension in families with abnormal children. On the other hand, considering the importance of the family system and strengthening the foundations of family life in society, the best solutions need to be found to solve or alleviate the problems of such families. For this reason, the present study seeks to investigate whether emotional intelligence training influences resilience, marital satisfaction and parenting styles of parents with abnormal children.

## **Theoretical basis**

### **Resilience**

Resilience is a set of personality traits that acts as a source of resistance to life pressures. Striking curiosity, desire to have interesting and meaningful experiences, belief in the effectiveness of what is imagined in the mind, the expectation that change is natural and that any important stimulus can lead to growth and development, assertiveness and strength, and the ability to persevere and resist are of the traits helpful in adapting to difficult life events. The rationale behind choosing these traits is the optimistic cognitive assessments that can, despite being difficult, lead to an individual's meaningful understanding of his/her characteristics; thus, difficult events turn into more tolerable ones (Damghanian et al., 2015).

According to Elson (2006), resilience acts as flexibility to life events. He states that resilience is the ability to adapt appropriately when an individual is exposed to stressful and dangerous situations or threats.

### **Resilience and emotional intelligence**

Emotional intelligence theorists believe that there is a positive relationship between emotional intelligence and the ability to cope with risky situations. They also suggest the high emotional intelligence as a protective factor (Karimi et al., 2014). People with emotional intelligence control negative emotions such as anger, fear and failure and give them a positive direction. Moreover, they enjoy higher levels of self-confidence, have full self-knowledge, and choose goals based on their ability since they are honest with themselves. In addition, their success has been shown to be the result of their own efforts and not others. Instead of labeling others, they review their emotions, their inner is source of emotions control, they relate success and failure to themselves, they wish happiness and

well-being for themselves and others, and they tie their happiness and well-being to the happiness and well-being of others. Accordingly, emotional intelligence can be effective in mental health and resilience (Koole, 2009).

Emotional intelligence program is based on planning, purposeful life, and a focus on the present as the indicators that play a crucial role in a person's life and positive strategies. If the life is based on goals and planning, the cognitive processes of attention, concentration and evaluation are activated, and as a result, the person uses a wide range of psychological and physical strategies for stability and relaxation which might rectify the conditions and improve resilience (Khaledian et al., 2018).

### **Emotional intelligence**

The concept of Emotional Intelligence (EI) was developed by Daniel Gelman who argues that IQ is less important than EI in predicting a person's worthiness. According to him, only 20% of success results from cognitive intelligence and 80% depends on other factors. In fact, individuals' fate mainly pertains to the skills that form their emotional intelligence. Daniel Gelman considers EI as a kind of social skill and the ability to communicate effectively with others, which includes empathy, controlling impulses and resolving conflicts (Gelman 2016).

Bradbury and Graves (2019) state that emotional intelligence is the ability to recognize, understand, and regulate emotions and apply them in life. It seems that EI generally includes a set of abilities to recognize, perceive, and describe the emotions of themselves and others and process them correctly in order to provide an appropriate response.

### **The importance of EI training**

As a phenomenon, EI not only contains a theoretical-psychological aspect, but it might provide appropriate answers for hidden life problems if it will be actually activated. Numerous papers, books and workshops on EQ are developed in order to introduce new solutions to deal with the personal and interpersonal problems of today's complex societies (Mirdrikundi, 2011). Overall, emotional intelligence predicts the success of people in life and how to properly deal with stress. The development and growth of emotional intelligence carries a great deal of importance. The following can represent the importance of emotional intelligence.

- 1) Developing a sense of responsibility;
- 2) Creating a happy and lively life;
- 3) Dealing with dangerous situations;
- 4) Developing a spirit of cooperation and helping others;

People with higher levels of EI are better learners, have fewer behavioral problems, express their emotions well, listen well to others, show less violence, find plenty of friends, are happy and cheerful, have a lot of tolerance for problems, and feel good to those around them (Gholizadeh Tehrani et al., 2017).

## Review of literature

Tanha et al. (2016) in a study entitled "*the relationship of emotional intelligence and resilience with mental health among people with hearing impairment*" observed that all dimensions of emotional intelligence and resilience had a significant positive relationship with mental health. Further, the results of stepwise regression analysis showed that the variables of independence, perception of individual competence, problem solving, optimism, and impulse control could predict mental health and explain 21% of its variance.

Khaledian et al. (2015) in a study entitled "*the effectiveness of emotional intelligence training on loneliness, resilience and mental health of addicts*" realized that the mean resilience in the post-test scores of the experimental group were significantly higher than the scores of the control group. Also, the mean of mental health and loneliness in the post-test scores of the experimental group were significantly lower than the scores of the control group.

Yeganeh Darabi and Hafezian (2015) in a study entitled "*the relationship of mothers' emotional intelligence, resilience and positive thinking with separation anxiety in preschool children*" reported a significant negative relationship between the mothers' emotional intelligence dimensions (i.e. emotional perception, emotional regulation and emotional utilization, resilience, and positive thinking) and children's separation anxiety. Emotional intelligence, resilience, and positive thinking acted as good predictors of separation anxiety in preschoolers. According to the t-value and the significance level, it was found that among the predictors, the components of emotional perception, emotional regulation, resilience and mothers' happiness contribute in explaining the separation anxiety of preschool children. The final model revealed the higher impact of emotional regulation, emotional perception, resilience and positive thinking on reducing separation anxiety, respectively.

Khoshnazari et al. (2015) in the study entitled "*the effect of training emotional intelligence skills on resilience of nurses in psychiatric wards*" showed that demographic variables were identical in the intervention and control groups. The pre-intervention mean score of EI was  $329.72 \pm 29.91$  for the intervention group and  $326.73 \pm 36.55$  for the control group ( $p = 0.501$ ). After the intervention, it was  $354.51 \pm 37.27$  and  $325.92 \pm 34.92$  ( $p = 0.003$ ) for the experimental and control group, respectively. Analysis of covariance with a probability value of 0.004 showed that EI variations in the experimental group were due to the intervention. The mean pre-intervention resilience score was  $61.71 \pm 12.47$  for the experimental group and  $57.70 \pm 15.14$  for the control group ( $p = 0.098$ ). After the intervention, it was  $70.40 \pm 13.48$  and  $58.92 \pm 13.71$  ( $p = 0.001$ ) for the experimental and control group, respectively. Analysis of covariance with a probability level of 0.001 showed that the variations in the resilience scores of the experimental group were due to the intervention.

Karimi et al. (2014) in the study entitled "*resilience prediction based on emotional intelligence among public administration employees in Yasouj*" reported a positive and significant relationship between the overall score of emotional intelligence and resilience. They also revealed that level of EI can to some extent predict the

level of resilience. Further, the level of emotional intelligence and resilience were higher in men than women.

Shoorchi Glenkadri and Hossein Sabet (2013) in the study entitled "*effectiveness of emotional intelligence training by assimilation and accommodation method on resilience and aggression*" noticed a decrease in the rate of general aggression and all its components in the experimental group, which continued until the follow-up phase. However, they observed higher levels of resilience. It seems that emotional intelligence training by assimilation and accommodation helps decreasing aggression and increasing resilience in adolescents. Therefore, this training can be used in schools and other educational centers to improve resilience and reduce aggression. Larger and more diverse examples will help to better understand the usefulness of such an intervention.

Zheng et al. (2021) in the study entitled "*bidirectional relationship between emotional intelligence and perceptions of resilience in young adolescents: a twenty-month longitudinal study*" showed that there is a positive and significant relationship between emotional intelligence and perception of resilience. Social support as a protective factor positively predicts emotional intelligence and perception of resilience. However, family conflicts and bullying in school -as risk factors- negatively predict emotional intelligence and resilience perception.

Delhom et al. (2020) in the study entitled "*Can we improve emotional skills in older adults? Emotional intelligence, life satisfaction, and resilience*" showed that emotional intelligence intervention has a significant impact on the elderly. The mean scores of resilience and life satisfaction increased due to the intervention. Emotional intelligence-based intervention improved the elderly's skills in three dimensions. In addition, life satisfaction and resilience improved after the intervention.

Trigueros et al. (2020) in the study entitled "*the influence of emotional intelligence on resilience, test anxiety, academic stress and the Mediterranean diet*" demonstrated that emotional intelligence predicts resilience positively. However, resilience predicts exam anxiety and academic stress negatively. Manicacciet al. (2019) in the study entitled "*Involvement of emotional intelligence in resilience and coping in mothers of autistic children*" recognized a significant difference between mothers of autistic and non-autistic children in terms of emotional intelligence and resilience. Moreover, mothers of normal children had more emotional intelligence and resilience.

Lee et al. (2017) conducted a study entitled "*Effect of self-esteem, emotional intelligence and psychological well-Being on resilience in nursing students*" and using a hierarchical analysis showed that emotional intelligence, psychological well-being and self-esteem were the factors affecting resilience. Emotional intelligence had the highest impact with the capability to explain the regression model. Their study revealed that emotional intelligence, psychological well-being and self-esteem are essential for resilience in nursing students. Furthermore, more emotional intelligence and psychological well-being will be an effective strategy to improve resilience in nursing students.

## Method

This is an applied research conducted by quasi-experimental method with control and experimental groups. The statistical population consisted of all parents of abnormal children in exceptional schools. To determine the sample size, 120 subjects including 60 pairs of parents with abnormal children were randomly selected from five exceptional schools in Tehran. Then, they were randomly assigned into experimental and control groups. Each group included 60 subjects (30 pairs of parents) of children with mental retardation, physical disability and autism spectrum disorder (20 subjects or 10 parent pairs of each disorder). The objectives of the research were explained to all of the subjects and as a pre-test, Connor and Davidson (2003) resilience questionnaires were filled by them. The experimental group underwent emotional intelligence training for 20 sessions of 1.5 hours (two sessions per week). The control group did not receive any training. After the training course, the resilience of both groups was re-measured.

Connor and Davidson Resilience Scale (CD-RISC) was developed by Connor and Davidson (2003) using the literature of resilience over 1991-1999. Psychometric properties of the scale have been checked for six groups: general population, patients referred to the primary care ward, psychiatric outpatients, patients with generalized anxiety disorder and two groups of patients with post-traumatic stress disorder. The developers of the scale believe that it is well able to distinguish between resilient and non-resilient individuals in clinical and non-clinical groups and can be used for research and clinical situations. The CD-RISC consists of 25 items, which are evaluated on a five-point Likert scale ranging from 0-4: not true at all (0), rarely true (1), sometimes true (2), often true (3), and true nearly all of the time (4) - these ratings result in a number between 0-100, and higher scores indicate higher resilience.

Connor and Davidson reported the Cronbach's alpha coefficient of the CD-RISC as 0.89. Also, the reliability coefficient of 0.87 has been computed by retest method during a 4-week interval. Mohammadi (2005) has standardized the scale in Iran. He has reported a reliability coefficient of 0.89 using Cronbach's alpha. According to the reports, Connor and Davidson Resilience Scale scores have had a significant positive correlation with the Cubasa Hardness Scale scores, and a significant negative correlation with the perceived stress scale scores and the Sheehan Stress Vulnerability Scale, indicating the simultaneous validity of the CD-RISC. However, it has not been significantly correlated with the Arizona Sexual Experience Scale scores at the beginning and end of the experiment, indicating the differential validity of the test.

In a study conducted by Samani, Jokar, and Sahragard among students, reliability of the CD-RISC was reported to be 0.93, and using factor analysis and convergent and divergent method, validity of the scale was established by test constructors in different normal and at-risk groups (Samani et al., 2006). Finally, data analysis was presented in two parts: descriptive and inferential statistics. Nominal and rank variables were described using frequency distribution tables and interval variables were described using central indices and mean dispersion, standard deviation, skewness and kurtosis. The analysis of covariance and LSD post hoc test were used to test the research hypotheses.

## Results

### Descriptive indicators of the variables

Mean, standard deviation, skewness, kurtosis, minimum and maximum was calculated for the main variables of the research. The mean resilience of the pretest was 48.13 and 46.08 in the in the control and experimental group, respectively. The mean resilience of the post-test was obtained equal to 48.98 and 51.05 for the control and experimental group, respectively.

Table 1: Descriptive indicators of the variables

Variables	Group	Number	Mean	Standard Deviation	Skewness	Kurtosis	Minimum	Maximum
Pretest resilience	Control	60	48.13	20.49	-0.05	-1.24	15	83
	Experimental	60	46.08	18.80	0.14	-1.13	17	80
Posttest resilience	Control	60	48.98	20.92	-0.12	-1.26	12	84
	Experimental	60	51.05	18.83	0.15	-1.12	20	86

### Normality of the variables distribution

According to the significance levels obtained from Kolmogorov-Smirnov test, resilience has a normal distribution in both pre-test and post-test (significance level greater than 0.05). (Table 2)

Table 2. Kolmogorov-Smirnov test results

Variables	N	Kolmogorov-Smirnov-Z statistic	Significance level
Pretest resilience	120	1.124	0.16
Posttest resilience	120	1.328	0.06

Hypothesis 1: Emotional intelligence training affects the resilience of parents with abnormal children.

The hypothesis was tested using analysis of covariance. As seen in Table 3, the distribution of resilience is normal.

The assumption of regression slopes homogeneity was checked using group interaction and pretest (Table 4-7). The significance level of the pretest\*group impact is equal to 0.77. Given that the significance value is greater than 0.05, the assumption of homogeneity of regression slopes is confirmed.

Table 3 - Homogeneity of regression slopes assumption for resilience in experimental and control groups

Violation source	Mean squares	Degree of freedom	Mean squares	F-statistic	Significance level
pretest*group impact	0.846	1	0.846	0.086	0.77
Error	1138.729	116	9.817		

The equivalence of the dependent variable variance error in the groups was investigated using Levin test. The significance level of Levin test is 0.906. Since the significance value is greater than 0.05, the variance error of the dependent



variable (resilience) is homogeneous in the groups. Table 4 displays the results of ANCOVA. According to the table, the group impact is significant at the probability level of 99% ( $p = 0.001$ , Eta squared = 31,  $F = 53.03$ ). This means after adjusting the pre-test scores, the resilience level in the post-test is significantly different between the control and experimental group. The adjusted means indicate that the parents' resilience in the experimental group ( $m = 52.08$ ) is significantly higher than the control group ( $m = 47.96$ ). Therefore, it is concluded that emotional intelligence training improves the resilience of parents with abnormal children.

Table 4. ANCOVA results for the resilience difference after the post-test

Violation source	Mean squares	Degree of freedom	Mean squares	F-statistic	Significance level	Eta squared
Pretest impact	4560.26	1	45602.26	4681.978	0.001	0.976
Group impact	506.791	1	506.791	52.032	0.001	0.308
Error	1139.575	117	9.74			
Total	347070	120				

Table 5. Adjusted resilience in experimental and control groups

Group	Number	Adjusted average	Standard error
Control	60	47.959	0.403
Experimental	60	52.975	0.403

Hypothesis 4: The effect of emotional intelligence training on the resilience of parents with abnormal children is different for different types of abnormalities. The assumption of homogeneity of regression slopes was examined through the interaction of abnormalities and pretest (Table 6). The significance level of different types of abnormalities impact \* pretest is equal to 0.193. Given that this value is greater than 0.05, the homogeneity of regression slopes assumption is confirmed.

Table 6. Results of the homogeneity of regression slopes assumption for the resilience of experimental group with different types of abnormalities

Violation source	Mean squares	Degree of freedom	Mean squares	F statistic	Significance level
Pretest* Various abnormalities impact	8.931	2	4.466	1.696	0.193
Error	142.17	54	2.633		

The equivalence of the dependent variable variance error in the groups was investigated using Levin test. The significance level of Levin test is 0.745. Since it is greater than 0.05, the variance error of the dependent variable (resilience) is

homogeneous in the groups. Therefore, the preconditions for ANCOVA are established.

Table 7 presents the results of ANCOVA. According to the table, the impact of different abnormalities is significant at the probability level of 99% ( $p = 0.001$ , Eta squared = 46,  $F = 23.77$ ). This means after adjusting the pre-test scores, the post-test resilience difference is significantly high for different types of abnormalities. The results of LSD post hoc test show that the average resilience of parents of children with autism spectrum disorder is significantly higher than the parents of children with physical and intellectual disabilities. However, no significant difference was observed between the mean resilience of the parents of children with physical and intellectual disabilities. Therefore, the impact of emotional intelligence training on the resilience of parents of children with autism spectrum disorder is greater compared to the parents of children with physical and intellectual disabilities.

Table 7. ANCOVA results of the post-test resilience difference in the experimental group for different types of abnormalities

Violation source	Mean squares	Degree of freedom	Mean squares	F statistic	Significance level	Eta squared
Pretest impact	20283.048	1	20283	7517.1	0.001	0.993
Various abnormalities impact	128.284	2	64.142	23.772	0.001	0.459
Error	151.102	56	2.698			
Total	177293	60				

Table 8. Results of LSD post hoc test for paired resilience comparisons in different types of abnormalities

Group(I)	Group(J)	I-J difference standard error	Difference standard error	Significance level
Mental retardation	Physical disability	-0.527	0.52	0.316
	autism spectrum disorder	-3.339	0.521	0.001
Physical disability	autism spectrum disorder	-2.812	0.52	0.001

## Discussion and Conclusion

The aim of this study was to determine the effect of emotional intelligence training on resilience of the parents with abnormal children in Tehran.

The results of the hypotheses testing were obtained as follows:

Emotional intelligence training improves the resilience of parents with abnormal children.

The result obtained from testing the first hypothesis showed that emotional intelligence training is effective for improving resilience of parents with abnormal children. This is in line with the findings of Tanha et al. (2015), Khaledian et al. (2015), Khosh Nazari et al. (2015), Shoorchi Glenkadri and Hossein Sabet (2013). The presence of an abnormal child threatens the adaptation, physical-mental health, and resilience of the parents and often leads to adverse impacts on them. Individuals can be trained to improve their resilience by learning certain skills which can modify the reactions to stress, unpleasant events, and difficulties so that they can overcome negative environmental problems. Bauman (2005) and Gardner and Harmon (2004) found that the resilience of the parents with exceptional children was lower than that of normal parents, and less resilience led to more mental disorders among parents.

Consistent with this view and numerous studies, our results revealed the positive impact of emotional intelligence training on the resilience of parents with abnormal children. Explaining the result, it can be said that people with emotional intelligence not only control negative emotions such as anger, fear and failure but also direct them effectively. In addition, they are blessed with self-confidence, self-knowledge, and the potential of choosing goals based on their ability because they are honest with themselves. Further, their success is mainly the result of their own efforts. Instead of labeling others, they review their emotions, their emotion control is an inner potential, they attribute success and failure to themselves, they which happiness and well-being for themselves and others, and they tie their happiness and well-being to the happiness and well-being of others. Hence, it can be claimed that emotional intelligence is effective in mental health and resilience (Koole 2009). Emotional intelligence program includes planning, purposeful life and a focus on the present, as the indicators with a prominent role in a person's life and efficient strategies. If the life is based on goals and planning, the cognitive processes of attention, concentration and evaluation are activated, and as a result, the person uses a wide range of psychological and physical strategies for stability and relaxation, leading to effective outcomes in the conditions and improvement of resilience (Khaledian and et al., 2018).

In general, emotional intelligence training helps parents of abnormal children to cope well with the problems. This means that in a healthy and positive environment, many small problems go away spontaneously and conflicts are considered as an issue. In this way, people can solve the problems and discomforts may fade by lowering expectations of the abnormal child. Parents' mastery of anger and stress management skills not only makes the family more resilient to challenges and adverse situations, but also allows the individuals to cope well with stressful events. Khaledian et al. (2015) concluded that emotional intelligence training is effective on resilience and mental health.

Results of the current study also indicated that the average resilience of parents of children with autism spectrum disorder is significantly higher than the parents of children with physical and intellectual disabilities. However, there is no significant difference between the mean resilience of parents of children with physical and intellectual disabilities. Thus, the effectiveness of emotional intelligence training on improving resilience of the parents of children with autism

spectrum disorder is greater compared to parents of children with physical and intellectual disabilities.

Parents of abnormal children experience numerous difficulties in parenting and caring skills due to the child's destructive and abnormal behaviors. They need to constantly adapt to the changing needs of the child. The lack of such skills and a proper approach expose the parents' mental health at risk. The results of this hypothesis confirmed a higher effectiveness of emotional intelligence training on the resilience of parents with autism compared to the parents who have children with other types of abnormalities.

In explaining the result, it can be said that mental disabilities and physical-motor problems cause new needs and behaviors as the children grow up; so, the parents must constantly adapt to these changes and conditions. However, children with autism might acquire the ability to manage and control certain behaviors over time through effective and regular education. Due to parents' awareness and because of progresses in different areas, their hope will rise as well. Moreover, with emotional intelligence training that is accompanied by increased hope and self-confidence, and a positive attitude towards oneself and others, as the child acquires an ability - even a small one - the parents ignore his/her destructive behaviors and manage tensions in the hope of promoting other abilities. Aghababaei et al. (2013) realized that techniques and abilities to deal with stress are different among the mothers of mentally retarded, cerebral palsy and normal children.

According to our results, holding emotional intelligence training courses for parents with abnormal children is suggested in order to provide the needed ground for control and improvement of resilience and marital satisfaction among the parents. Finally, due to the research limitations, investigation of all the abnormalities was not allowed and only frequent abnormalities (autism spectrum disorder, physical disability and mental retardation) were included in the study. It should be noted that a questionnaire may not measure the whole concept properly - particularly the subjects with individual or social sensitivity - and the respondents may provide cautious and self-censored responses.

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