





Original Article

The effectiveness of life rebuilding program training on the life quality of divorced women

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Abstract

Introduction: Divorce is among the influential factors on the people's mental and physical health. By the way, women are more vulnerable than men. Therefore, the present study was conducted to determine the effectiveness of life rebuilding program training on the life quality of divorced women.

Materials and Methods: The statistical population of this clinical trial included all the divorced women who referred to counseling centers in Isfahan city in 2019. Thirty of whom were selected through convenient sampling method and divided into two experimental (15 cases) and control (15 cases) groups. Research instrument was Nejat et al. quality of life questionnaire (2006). The intervention consisted of eight ninety-minute sessions of life rebuilding program training for the experimental group. The data analyzed through repeated measurement ANOVA via SPSS24 software.

Results: The findings showed that life rebuilding program training had significant effect on the life quality and its components (psychological health and concept of life quality) in the posttest and follow-up stages (P < 0.05).

Conclusion: According to the results, life rebuilding program training can lead to the improved overall life quality, psychological health, understanding the concept of life quality, and ultimately promoting mental health and preventing post-divorce trauma in the divorced women.

Keywords: Divorce, Life rebuilding program, Quality of life.

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Introduction

The family is the first foundation which has been formed to meet the human's innate needs, especially the need to the social life (1), and can provide a rich source of feeling peaceful up to the level of success for the people; however, divorce is another aspect of the social fact that no person or society is immune to its outcomes (2). As a society in transmission from traditionalism to modernism, Iran experiences specific social and cultural conditions that have faced new social traumas and issues. The process of onthe-rise divorce in Iran is a case in point (3).

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Upsetting the life balance and the incidence of disturbance in mental health, a decrease of adjustment, less involvement in social activities and incidence of social isolation. losing adequate support, and finally, the decrease of life quality are among the mental and social outcomes of divorce which can make them fragile against traumas (4). Women's breakdown and mental damage, and these damages will show themselves in the form of physical diseases and, at last, depression in the later decades (6). Therefore, addressing divorced women's mental health is essential to avoid mental and physical traumas after divorce and offer effective therapeutic alternatives to improve their life quality. World Health Organization defines life quality as "the individual's perception of his/her present status taking into account the culture and value system and the relationship of these perceptions with the supposed purposes, expectations, standards, and priorities" (7). With the rise of the level of hygiene care in recent years, applying therapeutic methods based on feeling satisfied with the life has increased.

A critical factor under the name of "life quality" has been accommodated beside hygienic measures. The criteria such as achievement, satisfaction, low unemployment, psychological wellbeing, life enjoyment, and freedom are among the signs of high life quality (8).

The studies have shown that the life quality of divorced women has a significant difference from that of the other women, and it is much lower than them (9-11). Hawaiian et al. proved in their study that the mean score of all the aspects of life quality (including physical, psychological health, social relationships, and life environment) in divorced women is significantly lower than that of non-divorced ones (5).

Administering therapeutic interventions in the field of divorced women's life quality has always been in line with therapists' activities, and the researchers have attempted to employ alternatives to promote mental health, adjustment, and finally, promoting these people's life quality (12,13).

Caltabiano and Vukalovich used a group intervention program to improve the divorced women's mental health; the results showed that group intervention program has been effective to improve divorced women's mental health

Mohammadi Nejadi and Rabi'ei examined the efficiency of therapeutic schema on divorced women's life quality and psychological wellbeing. Their findings showed that therapeutic schema could improve divorced women's life quality and increase psychological wellbeing as an effective therapy (15). One of the most recent interventions in divorced women's mental hygiene is the life rebuilding program. Life rebuilding program is a therapeutic intervention with educational, supportive nature, which provides an opportunity for the therapists in order for them to be able to increase their awareness and grow.

includes program psychological, physiologic, and social effects of divorce, communication communicative and impediments. incidence and regulating emotions, finding meaning in Life, anxiety, stress and depression, coping skills, and the importance of social support after divorce. This therapeutic program focuses on the physical, psychological, and emotional aspects of separation, ending the relationship, and training people to concentrate on the future and present time rather than the past (16). Asanjarani et al. showed the efficiency of society-based therapeutic life rebuilding program and self-worth of divorced women (18). Some studies carried out overseas on the effectiveness of this type of therapy on the psychological traumas; for example, the efficiency of rebuilding has been investigated on people's life quality with visual disorders. The results have emphasized its success (19).

Considering the results mentioned above, it is likely that the therapeutic disorders based on life rebuilding affect the other aspects of those damaged by the social traumas such as divorce.

Since the direct effect of this therapy has not yet been investigated on mental health and life quality of divorced women in other studies and taking the necessity of promoting divorced women's life quality, the present study is to examine the following hypothesis aiming to determine the efficiency of training life rebuilding on divorced women's life quality in the city of Esfahan: training post-divorce life rebuilding is effective on the divorced women's life quality and other components of life quality (physical, psychological, social, environment and the concept of life quality) at the posttest and follow-up stages.

Materials and Methods

The present study was quasi-experimental with pretest, posttest, and follow-up design and control group. The statistical population of the present study included all divorced women who were referred to consultation centers in the city of Isfahan in 2018, although their exact number is not precise. After the researcher's interview regarding the inclusion criteria, the subjects were asked to answer the research questionnaires at the pretest stage. A research sample of 34 people was selected through the convenient sampling method, and they were accommodated into experimental (17 people) and control (17 people) groups. Determining the sample size was done according to the research method; in the experimental studies, the minimum sample size of 15 was suggested for each of the research groups (20).

After codifying the program and setting the condition, the experimental group participated in eight ninety-minute training life rebuilding programs, and finally, they took the posttest, but there was no intervention in the control group.

Moreover, a follow-up test was administered on both groups after one month. It is worth mentioning that after data collection, the data from 15 people from each group were confirmed and used for the final analysis. The inclusion criteria included: no more than one year has passed from their divorce, they have lived with their husband in their marriage life, they should have the age range of 25 to 50 years old, they would like to take part in the study.

Furthermore, the exclusion criteria included: having acute mental or physical disease, taking psychiatric drugs, drug abuse, absence for more than three sessions, not doing the tasks, unpredicted events such as the beloved demise, and reluctance to cooperate.

The other important point is that the ethical considerations have been observed; for example, the subjects got informed about the subject and research administration method and accepted to participate in the sessions with their agreement and awareness, the volunteers' personal and private information was preserved, the results were interpreted in case they wished, they were willing to withdraw from participating in sessions, and the researcher decided to hold session freely for the subjects.

Research instrument

The applied instrument in the current study was Nejati et al. life quality questionnaire (2006) which was used at the pretest, posttest, and follow-up stages. It is composed of 26 questions. Physical health has seven questions and assesses mobility power, everyday life activities, work, energy capacity, pain, and sleeping. In psychological health, conception of appearance, negative feelings, positive feelings, self-confidence, thoughts, learning, memory and concentration, religion, and mental status are questioned in 6 items. The social relationships area has three questions about personal communications, social support, and sexual life.

The area of environment health asks eight questions about financial resources, physical security, hygienic and social care, the physical environment of the accommodation, available situations to acquire new skills and information, recreational situations, physical environment (noise, air pollution, etc.), and transportation. Besides, this questionnaire evaluates the health status and life quality generally via two separate questions.

Cronbach alpha of this questionnaire has been recorded 0.81 in the aspect of physical health, 0.78 in psychological health, 0.82 in social relationships and 0.80 in environmental health, and 0.83 in the whole questionnaire (21). Sessions of training life rebuilding program (training post-divorce life rebuilding program by Fisher) were extracted from the book "post-divorce life rebuilding," and its final form of therapy was arranged by Vukalovich and Caltabiano according to the study by Asanjarani et al. (16).

Table 1 shows the summary of training life rebuilding program sessions. Finally, the data were analyzed through descriptive statistics (mean and standard deviation) and inferential statistics (repeated measurement ANOVA) through SPSS version 24.

Results

The participants' demographic information in the study included age (mean 35.12 and SD 5.11), marital life years (mean 8.95 and SD 4.51), educational level (33% below diploma, 13% diploma, 20% associate degree, 27% BA, and 7% postgraduate education). Table 2 presented the descriptive data of the study.

Table 1. Summary of training life rebuilding programs sessions

Session	Purposes and therapeutic method
First Past relationships	Reviewing past relationships in order to diagnose the factors which have caused relationship breakdown Looking at the pathway of separation and the feelings experienced during the pathway The fields of adjustment and probable changes after separation Diagnosing reactions of each person to separation and stresses following it Using affidavit, entering group process and familiarity with the tasks in each week Receiving an edition of the book "post-divorce life rebuilding" Administering the pretest
Second adjustment	Learn more the knowledge of adaptive behavior Better understanding of the manner of problem creation of adaptive behaviors in communications Diagnosis, acceptance, understanding and nurturing adaptive mechanisms which have helped the individual to survive. Better knowledge of the other group members through free sharing in small groups. Starting to understand the value of creating a supportive network both inside and outside the class
Third bereavement	-Familiarity with emotional reactions of bereavement and loss of sharing personal experience of bereavement and loss of emotional, psychological, physical and social aspects of loss and bereavement after the loss. Familiarity with five stages of bereavement and familiarity with effective communicative methods in the process of loss
Fourth Feeling guilty and being rejected	Familiarity with emotional reactions from the point of view of both the rejecter and rejected. Creating a secure atmosphere where the participants are able to share their emotional experiences. Familiarity with the language of the rejecter and rejected
Fifth Anger	More familiarity with correct methods anger incidence. Familiarity with anger as an emotion and not as a behavior. Understanding anger as a secondary emotion. Knowing the difference between aggression, passive behaviors and courageous behaviors. Training the process of the conception of "abandonment"
Sixth Noble family	More familiarity with a noble family, values, beliefs and interactive models having been learned drawing the graph of a noble family, drawing familial graph, diagnosing the difference between values, beliefs and behavioral models. Identifying the roles, rules, models, and criteria in noble family
Seventh Self-esteem and social support	Familiarity with methods of nurturing self-esteem after separation Encouraging to create and maintain a supportive network Identifying the barriers in creating self-esteem
Eighth Communication	Understanding growth-making communications Familiarity with the methods to help forming communications Familiarity with risky relationships Offering a summary of session and finishing them. administering pretest

Table 2. The scores of the two groups in three stages of the study

***	G.	Control group		Experimental group	
Variable	Stage	Mean	SD	Mean	SD
	Pretest	23.33	2.23	23.31	2.46
Physical	Posttest	23.03	3.18	24.76	3.14
, and the second	Follow-up	23.87	2.99	24.23	2.38
	Pretest	19.07	2.99	24.23	2.38
Psychological	Posttest	19.16	2.63	22.08	3.15
, ,	Follow-up	19.61	3.79	21.31	2.89
	Pretest	9.13	1.51	8.69	1.93
Social	Posttest	8.87	1.95	11.15	2.34
	Follow-up	9.03	1.59	10.38	1.61
	Pretest	26.33	4.03	24.23	4.55
Environment	Posttest	26.26	3.35	26.85	4.04
	Follow-up	24.07	3.58	28.23	4.42
	Pretest	5.40	1.06	5.23	1.09
Concept of life quality	Posttest	5.47	1.06	6.85	0.89
1 1 3	Follow-up	5.40	1.29	6.53	1.39
	Pretest	83.27	4.76	79.69	4.77
Total	Posttest	83.20	5.73	91.69	3.47
	Follow-up	82.07	6.75	90.69	5.33

The results offered in table 2 implies that the total posttest means a score of life quality and the posttest mean in each of its components have increased in both the experimental group and in the follow-up stage, while it is not observed any tangible change in the posttest mean of life quality and its components in the group. Repeated measurement control ANOVA was applied to investigate the significance of this increase at the level of inferential statistics. Before offering ANOVA results, the presuppositions of using this test were assessed. Therefore, the data normality investigated through Kolmogorov-Smirnov test. The findings revealed that the significance of the statistic of Kolmogorov-Smirnov was more than 0.05 for the variable of life quality and its components in the experimental and control groups, and it implies the research data normality (P>0.05). Moreover, homogeneity of variances was

investigated by employing the Leven test; the results taken from the Leven test is 0.05 for life quality which shows the homogeneity of the variance of the variables in the experimental and control groups (*P*>0.05).

Furthermore, P>0.05 according to the Box test results and the presupposition of equality between covariances is confirmed (*P*>0.05). Besides, the results of the presupposition of sphericity (Mauchly's test) to investigate the consistency of variances in three measurements showed that the significance level of this test is more than 0.05 (*P*>0.05); hence, all the presuppositions of repeated measurement ANOVA were confirmed.

The results of the Wilks Lambda test to investigate the difference of inter-group scores for the variable of life quality and its components showed that just the difference between overall life quality, components of psychological health, and the concept of life quality is significant (P<0.05).

As a result, the findings of repeated measurement ANOVA to investigate the effectiveness of training life rebuilding program on the life quality and the components of psychological health and the concept of life quality in the divorced women in the city of Esfahan have been examined. The results of this analysis have been shown in table 3.

Table 3. ANOVA of the effectiveness of training life rebuilding program on the life quality and its components

Scale	S	ource	Degree of freedom	MS	F	P	Effect size	Power
	Intra- cal health group	Factor	2	34.35	3.42	0.04	0.12	0.52
Psychological health		Interactive effect	2	24.35	2.43	0.02	0.09	0.47
	Inter- group	Group	1	31.47	3.69	0.03	0.12	0.46
	Intra-	Factor	2	5.43	4.45	0.02	0.15	0.74
Life quality	group	Interactive effect	2	4.84	3.96	0.03	0.13	0.53
	Inter- group	Group	1	12.81	8.61	0.01	0.25	0.81
	Intra-	Factor	2	282.05	11.16	0.001	0.30	0.99
Total	group	Interactive effect	2	341.79	13.52	0.001	0.34	0.99
	Inter- group	group	1	425.82	12.9	0.001	0.33	0.93

According to table 3 and the significance of intra-group factor, the presence of a significant difference between three times measurement in pretest, posttest, and followup for the overall life quality and the components of psychological health and the concept of life quality was confirmed at P<0.05 and the significance of inter-group source it can be pointed out that there is a significant difference between the

experimental and control groups in the overall life quality and the components of psychological health and the concept of life quality. An LSD follow-up test was used to investigate the mean of overall life quality and the components of psychological health and the concept of life quality between three pair wise pretest, posttest, and follow-up stages. The results of this test have been offered in table 4.

Table 4. LSD follow-up test to compare the mean in time

Scale	Stage A	Stage B	A-B mean difference	Standard error	Significance level
Psychological health	Pretest	Posttest	-2.02	0.79	0.02
		Follow-up	-1.81	0.83	0.04
Health	Posttest	Follow-up	0.22	0.92	0.82
G	Pretest	Posttest	-0.84	0.28	0.006
Concept of life		Follow-up	0.65	0.31	0.04
quality	Posttest	Follow-up	0.19	0.30	0.53
Total	Pretest	Posttest	-5.97	1.27	0.001
		Follow-up	-4.9	1.44	0.002
	Posttest	Follow-up	1.07	1.32	0.43

According to table 4, there is a significant difference between pretest and posttest scores for the overall life quality and the components of psychological health, and the concept of life quality. Therefore, it can be pointed out that training post-divorce life rebuilding program effectively affects the overall life quality and the components of psychological health and the concept of life quality at the posttest stage. Moreover, there is no significant difference between posttest and follow-up stages in the overall life quality and the components of psychological health and the concept of life quality.

As a result, it can be said that the effect of training post-divorce life rebuilding has been stable on the overall life quality and the components of psychological health and the concept of life quality at the follow-up stage. Therefore, the research hypothesis stating the effectiveness of training life rebuilding program on the life quality and the components of life quality (psychological health and the concept of life quality) is confirmed at the posttest and follow-up stages.

Discussion

The present study was conducted to investigate the degree of the effectiveness of training post-divorce life rebuilding programs on the divorced women's life quality in Isfahan. The findings showed that the lifebuilding program has been influential in the total score of life quality and the components of psychological health and the concept of life quality at the posttest and follow-up stages. The results of this study are in line with the findings of studies by Lee (13), Caltabiano and Vukalovich (14), Asanjarani et al. (16), Noor et al. (22), Azizi and Ghasemi (23), Saadati et al. (24) and Ferraro et al. (25). Lee (13) carried out extensive research in Berlin on 2487

divorced men and women; he states that life rebuilding after divorce can cause happiness in women. Lee (13) expresses that since divorce results in severe traumas in the individual's social life, life rebuilding and emphasizing returning and adjusting to society can play a dramatic role in improving these traumas. The results of the present study can be interpreted by the studies mentioned above, and it can be pointed out that when a person returns to society and settles his/her social relationships, the psychological components will be influenced by him/her. The increase in psychological health finally leads to the improvement of life quality.

Consistent with it, in experimental research in which 20 women and ten men were selected through a convenient sampling method, Vukalovich and Caltabiano (14) emphasize the importance of improving the relationships and state that when a person suffers from loneliness and has unstable and weak social relationships due to familial problems, his/her life quality can be improved through rehabilitating relationships. The consistency of the methodology and results of the two studies proves the validity of the present study, and it shows that the results of the present study can be trusted.

Asanjarani et al. (16) emphasize the importance of life rebuilding in the adjustment and life satisfaction and point that when a person can return to the everyday life condition and achieves natural adaptation to external stimuli, life satisfaction will increase consequently. It is worth mentioning that the population under study was the divorced women from whom 34 were selected through a convenient sampling method and receive ten sessions of training life rebuilding program. As a result, it can be said that both studies were similar regarding the experimental

condition, and the results consistency implies the efficiency of this type of therapy. The study by Azizi and Ghasemi (23) was carried out on 44 people using a quasi-experimental design and via convenient sampling design. and the experimental group participated in nine two-hour sessions. The results showed that cognitive-behavioral therapy, acceptance and commitment therapy, and solution-based therapy could cause a decrease in the signs of depression and improve divorced women's life quality. Regarding the relationship between the carried-out studies with the present one, it can be pointed out that when a person experiences social cleavage due to divorce, he gets indifferent toward his/her values and commitments to society and others. As a result, employing different therapies and attempting to elucidate the person's life values, social responsibilities, and commitment causes them to feel valued and generally increases his/her life quality. Ferraro et al. (25) study in Florida was conducted to investigate the mental health of the people who had got divorced and their demeanor with the family, especially the children, through experimental and convenient sampling methods.

They emphasized the role of life rebuilding in the improvement of divorced women and stated that rehabilitating the person's life causes him/her to show more adjustable behavior in stressful conditions.

The consistency of this study with the current one proves that training life rebuilding program leads to the increase of mental health; hence, it can be concluded that when the person retrieves life skills in the society. he/she will overcome mental problems such as stress and consequently he/she will retrieve his/her mental health. In explaining the research hypothesis, it can be stated that in training life rebuilding programs sessions, the women were encouraged to self-help after receiving an edition of the book "post-divorce life rebuilding" and then it was attempted to make them more potent through diagnosis, acceptance, understanding and nurturing adaptive mechanisms which have helped them so far; moreover, the other attempt was to make them understand the value of forming a supportive network both inside and outside the group and step in this way.

Also, it was tried to make them familiar with five stages of post-divorce bereavement and effective communicative methods during the loss process. Among the other techniques applied in training sessions to assist in life rebuilding after divorce are familiarity with emotional reactions from the viewpoint of both the rejecter and rejected, discriminating aggression from passive behaviors and courageous behaviors, identifying the roles, rules, models, and criteria in a noble family, familiarity with the methods of nurturing self-esteem after separation and the barriers in creating self-esteem and understanding growth-making relationships.

Generally, it should be mentioned that divorce is not necessarily the end of the tensions resulting from marriage for those who ask for separation; instead, there will be new accidents and processes at the final stages of marriage and even after the divorce, which can influence the divorces women's life quality, some of them are: the responsibility of taking care of the children (for the divorced women who have undertaken the children's custody), cutting the relationship with the children (for the women who were deprived of their children's custody), conflict with the exhusband, visiting or custodianship of the children, lack of affective support due to the decrease of relationship with affine, married friends, neighbors, etc.

The process of adjusting to divorce can include the followings: taking social-familial support, efficient relationship with the exhusband, attachment and differentiation style, physical and mental health, religious attitude, age, gender, marriage duration, divorce duration, job, appropriate attitude toward divorce and finally living while concentrating on the present and future time.

As it was offered in describing training sessions, when the women get involved in post-divorce life rebuilding program training and following the skills they have learned, they will find a new viewpoint toward post-divorce time. They learn how to adjust to divorce, overcome their negative feelings and attract more social support.

They will also learn efficient coping methods, get more hopeful and find more satisfaction with their decision which, per se, leads to the improvement of their life quality. As a result, it should be pointed out that the focus of the training life rebuilding program is on promoting psychological and affective health of the women who experience the end of the marital relationship. Loneliness and the

tensions present in their life bring about psychological problems such as anxiety and depression, which negatively influence divorced women's psychological health. Enjoying a supportive and training nature and employing techniques like brainstorming, roleplaying, administering therapeutic techniques, relaxation and conception tasks, etc., and through accommodating the women in similar supportive groups, these sessions help them promote psychologically.

Hence, besides the fact that the women enjoy supportive information to get along with divorce, they will benefit from each other's empathetic understanding and promote their psychological health. Furthermore, in case of the findings of the present study, the lack of significant difference in some of life quality components is a fact which should be spoken about, and the interpretation might be this result that taking the short time of training sessions was not possible to promote them in the short run.

Conclusion

This study shows that training life rebuilding program has a positive effect on divorced women's life quality, and it causes promoting their life quality. Training life-building programs, taking training and supportive approaches, facilitates women's adjustment to divorce, promoting their life quality. Therefore, the specialists and consultants in

the field of the family can use training life rebuilding programs to promote divorced women's life quality aiming to prevent the traumas coming from divorce.

The convenient sampling method was among the limitations of the study, which probably influence the research results. Hence, the sample under study cannot be supposed to mirror the actual population. Besides, the limitation in the number of therapeutic sessions (eight sessions) is one of the other limitations of the current study.

The other is that this study was carried out just on the sample of women, so it is suggested that the researchers compare the effectiveness of training life rebuilding program taking gender into account and through comparing to the other training methods. Moreover, it is a suggestion to hold a training life rebuilding program as a part of the formal dissolution of marital relationships in the form of a wellbeing program and judicature to promote the women's life quality after divorce.

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