

# The mediating role of resilience in the relationship between parental bond and psychological well-being of adolescent girls

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## ABSTRACT

The present study was conducted to evaluate the mediating role of resilience in the relationship between parental bond and psychological well-being of adolescent girls. The method of this study is descriptive-correlational and the statistical population of the study includes all female adolescents of Babol in the academic year of 2017-2018. Among them, 180 people were selected by a cluster random sampling method. Data were collected using parental bond inventory, Resilience Questionnaire (Conner and Davidson) and Psychological Well-being Questionnaire. Pearson correlation method and multivariate regression analysis in Spss24 software were used to analyze the data. Results revealed that there was a significant relationship between parental bond and resilience and psychological well-being of adolescent girls. The results of regression analysis showed that resilience, emotion regulation and paternal care can predict students' psychological well-being.

**Keywords:** Parental Bond, Resilience, Psychological Well-being

## Introduction

Adolescence is one of the most critical periods of life, since along with physical changes, a series of changes occur in one's feelings, emotions, desires and imaginations. Some of these changes include imbalance and instability, irritability, despair and early depression in the face of failures<sup>[1]</sup>. Psychological well-being during adolescence has a particular importance and it has been defined as the ability of each person to establish mental, emotional and situational balance to solve problems and response to stress in healthy ways<sup>[2]</sup>. One of the most important models in the area of mental health and psychological well-being is the Ryff model (1998). He has conceptualized mental health as a positive psychological function and with the term of psychological well-being. Based on this view, well-being is an attempt for flourishing of potentials and the manifestation of one's abilities<sup>[3]</sup>. The psychological well-being approach examines the observed

growth and development in the face of life's existential challenges and puts great emphasis on human development. Well-being feeling has both emotional and cognitive components<sup>[4]</sup>. One of the other components that play a major role in emotional balance and consequently the psychological well-being of adolescents is parental bond. Parental bond is a variable evaluates parental behavior from the perspective of children and has been designed by the Bowlby attachment theory. Parental bond is one of the new methods in child rearing. Bowlby (2010) argues that it is a very common and effective bond in human relationships and plays a major role in personality development and adulthood psychological functions<sup>[5]</sup>. The existing theoretical literature suggests that type of parent-child relationship is associated with some psychological disorders in adulthood<sup>[6]</sup>. They believe that poor parental bonds result in psychosomatic personality and lack of maternal care is considered as an aspect of poor parental bond that has a positive relationship with psychosomatic pathology in later stages of life. However, poor paternity support increases the autonomy of the child to control and regulate cognitive processes. Given the complexity of today's societies and occurrence of psychological and behavioral disorders, one of the concepts in contemporary psychology is emotional self-regulation, which is one of the components influencing the psychological well-being. This issue has a special importance for adolescents, because adolescence is associated with instability in many areas, including roles, identities, and emotions. Emotion

## Access this article online

Website: [www.japer.in](http://www.japer.in)

E-ISSN: 2249-3379

**How to cite this article:** ALiAsghar Hosseinzade, Soheyla Hedayati Moghadam. The mediating role of resilience in the relationship between parental bond and psychological well-being of adolescent girls. *J Adv Pharm Edu Res* 2020;10(S4):188-194. Source of Support: Nil, Conflict of Interest: None declared.

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regulation involves creating thoughts and behaviors that inform people what kind of emotion they have, when that emotion arises in them, and how they should express it.

Resilience is another psychological construct that may play a role in the psychological well-being of people. Resilience is an individual, family, and social ability to cope with maladaptive situations or stresses in life that are not immediately effective, but they lead to an increase in the ability to cope with future difficulties<sup>[7]</sup>. Block (2004) argues that resilient individuals have the ability to overcome negative experiences and adapt to different levels of environmental stress. Resilient people do not have self-defeating behaviors. They are emotionally calm and have the ability to moderate stressful situations<sup>[8]</sup>. Early theories of resilience emphasized the characteristics related to positive outcomes in the face of life adversities. These studies have considered external protective factors, such as effective schools and supportive adult relationships effective in improving resilience. Harter (2000) argues that the level of resilience changes over time and will increase if there are supportive factors in individuals or in their environment<sup>[8]</sup>. In a study entitled "Investigating resilience variables, attachment styles and differentiation in predicting psychological well-being", Jafarnejad (2016) showed a significant relationship between psychological well-being, resilience, attachment styles, and differentiation<sup>[2]</sup>. The regression result also showed that resilience and attachment styles explain 21% of the variance of psychological well-being in male students and 24% of the variance of psychological well-being of female students. Multiple regression analysis also showed that resilience directly predicts students' psychological well-being. Since adolescents determine the future destiny of country and their psychological well-being is very important and since the present study was conducted on a sample of adolescent girls who are mothers and caregivers of the next generation, investigating the factors that play a role in their psychological well-being is necessary and important for the development of efficient and healthy human resources. Moreover, conducting the present study can provide useful practical applications for those officials of mental health and education and based the results of this study; it is possible to recommend new paths for future research in this field. Thus, conducting this study is both practically and theoretically seems to be necessary. Given what was stated above, it seems that each of the variables alone is effective in adolescents' well-being. Hence, the present study aims to answer the question of what is the mediating role of resilience in the relationship between parental bond and psychological well-being of adolescent girls.

## **Theoretical Foundations of Research**

### **Psychological well-being**

A group of researchers in the field of mental health have adopted a different theoretical and research approach from positive psychology to explain and study this concept in recent years. They considered mental health as positive psychological

functioning and conceptualized with term of "psychological well-being." This group does not consider lack of disease to be sufficient for feeling healthy, but they argue that having a sense of life satisfaction, sufficient progress, and efficient and effective interaction with the world, energy and positive bond creation and a favorable relationship with community and positive progress are the characteristics of a healthy person. Nowadays, a new perspective is expanding in health-related sciences in general and in psychology in particular. Based on this scientific approach, the focus is on positive aspect of health and well-being and explaining the psychological nature of well-being. Psychological well-being requires an understanding of the existential challenges of life. The psychological well-being approach examines the observed growth and development in the face of life's existential challenges and puts a strong emphasis on human development<sup>[10]</sup>. According to Ryff model, psychological well-being includes self-acceptance, positive relationship with others, autonomy, purposefulness in life, personal growth and mastery of the environment<sup>[11]</sup>. "Life-span" theorists such as Erickson (1989) and Neugarten (1993) have explained the obligations of different age periods and the ways in which one can successfully overcome them. Psychologists, interested in the full growth and development of man, have proposed structures such as self-actualization, maturity, and individuality. The feeling of well-being has both emotional and cognitive components. People with high well-being experience mostly positive emotions and have a positive evaluation of the events around them, while people with low well-being evaluate their events and life situation unfavorable and experience more negative emotions such as anxiety, depression and anger<sup>[12]</sup>. Given the important role of wellbeing on various aspects of psycho-social and even physical life, it is obvious that each of these dimensions and components have a great contribution in improving personal psychological and social status. Some of the components effective in wellbeing are spirituality, happiness, optimism, and meaning.

### **Parental bond**

Family is a small community that usually consists of parents and children<sup>[13]</sup>. Family is one of the effective factors in one's behavior. Researchers believe that parent-child relationships influence personality orientation and growth of psychological needs and other characteristics. Historically, the most influential views on the family and its effects on the child personality have been presented by psychoanalytic theorists and social learning. Psychoanalysts view growth as the result of the child movement through psycho-sexual conflicts that play a major role in the relationship between child and parent, and social theorists look at the family from the angle of principles of learning, that is, aspects such as the use of encouragement and punishment and modeling the effect of family. These theories have made researchers to discover what class of child personality traits will be affected by what kind of behavior of their parents in the future. Some psychologists believe that adolescents' personality and

behavioral patterns depend on their childhood rearing and how their parents have treated with them. They have investigated aspects of parental behavior such as acceptance-rejection and lenience and control. Social status, family members' communication with each other, economic status, thoughts and ideas, customs, ideals and desires of parents have a great influence on children's behavior. Knowing how early life experiences shape a person's personality may scientifically help us take wiser steps in rearing children and gaining a more accurate understanding of how parents' behaviors and attitudes affect children<sup>[14]</sup>. Studies suggest the way of parents' treatment with their children at home has an important effect on the child behavior. The presence of family members who are playing supportive, caring, and responsible role is an important factor in reducing children violence. Moreover, a warm relationship with parents, without excessive criticism and blame, has a positive effect on children, and prevents future antisocial and delinquent behavior. Also, several studies have indicated that deficits in parental duties are a strong predictor of adjustment problems such as antisocial behavior, poor academic performance, depression and anxiety<sup>[15]</sup>.

## Resilience

Resilience is defined as the process, ability, or outcome of successful adaptation to threatening conditions<sup>[3]</sup>. Resilience, as a popular field in recent years, has investigated personal and interpersonal abilities, resulted in progress and resilience in difficult situations<sup>[16]</sup>. Resilience is not merely passive resistance to harm or threatening conditions, but the resilient person is an active participant and builder of his or her environment. Resilience is one's ability to establish biological-psychological and spiritual balance in the face of risky conditions and is a kind of self-repair that is associated with positive emotional, affective, and cognitive outcomes<sup>[17]</sup>. Resilience is a successful adaptation, manifested in hardships and debilitating stresses. This definition of resilience refers to a structure that requires a complex balance between risk and protective factors. In fact, resilience is a phenomenon that results from the natural adaptive responses of human beings and, despite one's facing serious threats, it enables them to achieve success and overcome threats. Resilience is not merely passive resistance to harms or threatening conditions, but resilient person is an active participant and builder of his or her environment. Resilience is one's ability to establish biological-psychological-spiritual balance in the face of risky situations. Thus, it cannot be considered equivalent to recovery, since in recovery a person experiences negative outcomes and emotional problems<sup>[18]</sup>. Leading resilience researchers contributed to shaping the positive psychology movement, which is perhaps the most popular field in psychology. Instead of identifying and focusing on clients' problems, the common approach of positive psychology was to examine and identify strengths, capabilities, and organize these strengths, which are expected to reduce clients' problems. Interestingly, among the academic disciplines

of positive psychology, the most studied subject is the characteristics of resilience. Also, all studies conducted in the field of child development, family dynamism, school efficiency and social development, as well as ethnographic studies of adolescents suggest that characteristics in family, school and social environments can strengthen or weaken the child natural resilience.

## Methodology

The present study is a descriptive research and since the researcher seeks to investigate the relationship between parental bond, emotional self-regulation and resilience and psychological well-being, it is considered as a correlational study. The statistical population of the study includes all female adolescents aged 15-17 years in Babol, which according to the education statistics of Babol in 2017, their number is 5018 people. The sample size was calculated based on the formula proposed by Tabachnik and Fidel (2007) ( $N > 50 + 8m$ ). Since there are 6 predictor variables in this study, the sample size based on the above formula was considered 180 people, considering the probability of distorted questionnaires. Using random cluster sampling, they were selected from the four districts of Babol. The sampling procedure was as follows: first, Babol city was divided into four districts (east, west, north and south) and one girl high school (Osweh, Azaram, Pour Rang and Fahima) was selected from each district and two classes were randomly selected from each high school and the sample size was determined 45 students in these classes.

## Research instruments

Parental bond inventory (PBI): The primary instrument was developed by Parker et al. (1979) to assess the first 16 years of life perception of parental care and extreme support. This instrument has 25 items (12 items are related to the care section and 13 articles are related to the extreme support section). Its items are scored on a 4-point Likert scale. The minimum and maximum scores of this inventory vary from 25 to 100. Leis et al. (2005) obtained test reliability 0.92 for care sub-scale and 0.87 for the extreme support subscale through Cronbach's alpha. In a study conducted by Shayeghian (2008), factor analysis showed two main factors of care and extreme support<sup>[19]</sup>. The criterion for extracting the factors was based on the slope of the screw curve and the eigenvalue higher than one. KMO index was equal to 0.93 and Bartlett coefficient was equal to 4053 at the significant level of 0.00 ( $X = 1372.78$ ,  $df = 270$ ). The reliability of the subscales was calculated through Cronbach's alpha and it obtained 0.90 for subscale of care and 0.82 for subscale of extreme support<sup>[19]</sup>.

Resilience Questionnaire: The Resilience scale was developed in 2003 by Connor and Davidson. The scale consists of 25 items that question resilience in the five-point Likert scale ranging from "always false = 0, always true = 4". Connor and Davidson (2003) used Cronbach's alpha coefficient of 0.89 and retest

coefficient of 0.87 as an indicator of internal consistency and they reported positive correlation of the resilience scale with the Kuyasa Hardness Instrument ( $r=0.83$ ) and Sheehan Social Support Scale ( $r=0.36$ ) and reported negative correlation of this scale with Perceived Stress Scale ( $r=-0.76$ ) and Sheehan Stress Vulnerability Scale as an indicator of the convergent validity of this instrument. In Iran, Besharat (2007) reported Cronbach's alpha coefficient at 0.86 and reported its construct validity at acceptable level [20].

Ryff Psychological Well-Being Questionnaire: This scale was developed by Ryff in 1989 and has 6 factors of autonomy, mastery of environment, personal growth, positive relationship with others, purpose in life and self-acceptance. The sum of the scores of these 6 factors is calculated as the overall score of psychological well-being. This test is answered in a 6-point Likert scale ranging from "strongly disagree" to "strongly agree" (1 to 6). Out of total questions, 44 questions are scored directly and 40 questions are scored reversely. In Iran, Bayani et al. (2008) tested the reliability of this scale and its consistency was measured using Cronbach's alpha. Cronbach's alpha for master of environment, positive relationship with others, personal growth, self-acceptance, purpose in life, and autonomy at 0.77, 0.77, 0.78, 0.71, 0.70, and 0.82, respectively [21].

### Implementation method

After coordinating with the education department of Babol city and preparing a list of girl high schools based on 4 districts of this city, 4 high schools and two classes from each high school were randomly selected and resilience questionnaire and psychological well-being questionnaire were distributed among students and completed individually. To observe the research ethics, the researcher first explained the general objectives of the research to the participants and asked them to carefully and patiently complete the questionnaires. The order of questionnaires was based on interest of samples to control the effect of fatigue on the answers.

### Data analysis method

In the present study, the data were collected and coded using SPSS 21 software for statistical analysis. Descriptive statistics (frequency, percentage, mean) were used to describe the data and draw a general picture of the demographic characteristics and describe the studied variables. Inferential statistics (Pearson correlation coefficient, multivariate regression analysis) were used to test the hypotheses.

## Results

### Age group

Table 1- Frequency distribution and frequency percentage of samples separately used age of subjects

statistical index	frequency	percentage of frequency
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age group		
15 years	54	30.0
16 years	62	5.34
17 years	64	5.35
sum	180	100

As shown in Table (1), out of 180 samples collected, 30% of students are 15 years old, 34.5% are 16 years old and 35.5% are 17 years old.

### Kolmogorov-Smirnov test

Table 2- Test results for normality of research variables

Null hypothesis: The distribution of observations follows the normal distribution.				
Opposite hypothesis: The distribution of observations does not follow the normal distribution.				
variable	number of sample	test statistic	value Sig	test result
Psychological well-being	180	72.1	24.0	normal distribution
Paternal care	180	43.1	35.0	normal distribution
Extreme paternal support	180	5.1	14.0	normal distribution
Maternal care	180	21.1	12.0	normal distribution
Extreme maternal support	180	32.1	14.0	normal distribution
Resilience	180	4.1	16.0	normal distribution

According to Table (2), the probability levels (P value) in all research variables are greater than the error level of 0.01. Given the value of P and not rejecting the null hypothesis, the data distribution is considered to be consistent with the normal distribution. As a result, parametric tests were used to test the research hypotheses.

### Testing hypotheses

Hypothesis 1: There is a relationship between the components of parental bond and psychological well-being of adolescent girls.

Table 3- Calculating the relationship between parental bond and psychological well-being of adolescent girls

variable	n	value of the correlation coefficient	significance level( $\alpha$ )
Paternal care with psychological well-being of adolescent girls	180	85.0	000.0
Extreme paternal support with psychological well-being of adolescent girls	180	55.-0	000.0
Maternal care with psychological well-being of adolescent girls	180	83.0	000.0
Extreme maternal support with psychological well-being of adolescent girls	180	57.-0	000.0

Based on Table 3, considering the 95% confidence interval and the significance level of the Pearson correlation coefficient test (0.000), which is less than the presumption value (0.05), the null hypothesis (lack of relationship between parental bond components and psychological well-being of adolescent girls) is

rejected as the opposite hypothesis (existence of relationship between parental bond components and psychological well-being of adolescent girls) is accepted. In other words, it can be concluded that there is an inverse and significant relationship between extreme paternal and maternal support and psychological well-being of adolescent girls and a positive and significant relationship between paternal and maternal care and psychological well-being of adolescent girls.

Hypothesis 2: There is a relationship between resilience and psychological well-being of adolescent girls.

To test the research hypothesis and use Pearson correlation test, first the presumption of linear relationship between variables was investigated through scatter plot and it was found that this assumption is valid.

**Table 4- Calculating the relationship between resilience and psychological well-being of adolescent girls**

statistical index variable	n	correlation coefficient value	significance level (α)
Resilience with psychological well-being	180	70.0	000.0

Based on Table 4, according to the 95% confidence interval and the significance level of the Pearson correlation coefficient test (0.000), which is less than the presumption value (0.05), it can be concluded that there is a positive and significant relationship between resilience and psychological well-being of adolescent girls and since this correlation coefficient is positive (0.70), it can be stated that increasing resilience is associated with increasing psychological well-being of adolescent girls.

Hypothesis 3: Resilience and parental bond components predict the psychological well-being of adolescent girls.

Regression model assumptions:

1-Normality of dependent variable (psychological well-being): To check the normality of a variable, Kolmogorov-Smirnov test (K-S) was used. The results in Table (2) showed the normality of the data.

2-Linear relationship between dependent and independent variables (Fisher's F test): This can be used through ANOVA to examine the linear relationship between variables.

**Table 5 - The result of multiple regression analysis and analysis of variance of resilience and parental bond components in predicting psychological well-being.**

indices variables	sum of squares	df	sum of means	F	R	R <sup>2</sup>	sig
regression	56.1441	4	31.288				
residual	67.463	175	66.2	19.108	87.0	75.0	000.0
total	24.1905	179					

According to Table (5), since Sig = 0.00 that is less than α = 0.01, it can be concluded that the hypothesis H0 is rejected and the hypothesis H1 is confirmed. Thus, linearity of the relationship between independent variable and dependent variable is confirmed. The general correlation between the

research variables is 0.87, which indicates a correlation higher than average (relatively strong) between the research variables. Also, the value of the coefficient of determination is equal to 0.75, which means that resilience and parental bond components account for only 0.75% of psychological well-being changes and the rest are related to other components, which were not investigated in this study.

Calculating the impact factor of independent variables on the dependent variable:

**Table 6- Results of resilience coefficient analysis and parental bond components in predicting psychological well-being**

indices variables	non-standardized coefficients β	standard error	coefficients β	T	significance level
constant value	-45.86	9.98	-	-4.59	0.00
Resilience	0.39	0.08	0.03	4.96	0.00
Paternal care	1.51	0.16	0.73	9.16	0.000
Extreme paternal support	-0.39	1.07	-0.24	-0.36	0.71
Maternal care	0.006	0.11	0.004	0.05	0.95
Extreme maternal support	0.62	1.09	0.38	0.57	0.56

As shown in Table 6, paternal care with an impact factor of 0.73 and resilience with an impact factor of 0.30 remain in the regression model and can explain a part of psychological well-being of girl students and the variable of paternal care has the most influential effect on the psychological well-being of girl students.

## Discussion and Conclusion

The aim of present study was to investigate the relationship between parental bond, emotional self-regulation and resilience and psychological well-being of adolescent girls. Results showed that there is a significant relationship between parental bond, emotional self-regulation and resilience and psychological well-being of adolescent girls. Based on the obtained information, there is a significant relationship and correlation between parental bond and psychological well-being in adolescent girls. It means that the first hypothesis of the present study (relationship between parental bond and psychological well-being of adolescent girls) is accepted and confirmed. The results of this study are consistent with those of the studies conducted by Besharat (2015), Bayani et al. (2011), Rindel et al. (2016), and Winhoven (2010)<sup>[20, 21]</sup>. In a study entitled "The moderating role of parental bonds in the relationship between satisfying basic psychological needs and adjustment", Besharat (2015) showed that parental care had a significant positive relationship with adjustment and parental excessive support had a significant negative relationship with non-adjustment<sup>[20]</sup>. The results also showed that only maternal care can modify the relationship between satisfying basic psychological needs and adjustment.

In explaining this result, it can be stated that adolescents transfer the pattern learned in the family environment to their other relationships, so that girls and boys who have higher levels of parental care in their childhood, have a safer attachment and friends and report more intimate friends<sup>[22]</sup>. Skills such as problem solving and emotion regulation can also stem from family, so that the poor affection of parents predicts the lack of such skills in their children.

Based on some research evidence, certain components in parenting style, such as responsiveness, are specifically related to emotion regulation in children<sup>[23]</sup> and having conflict management skills, regulating negative emotions, and selecting appropriate emotion regulation strategies by adolescents help them to strengthen their health and improve quality of their relationship<sup>[24]</sup>, which increases psychological well-being. Also, in explaining the occurrence of disorders such as depression and anxiety in adolescents, Ingram, Atchley, and Segal (2013) referred to path between abnormal child-parent interactions and psychological trauma. Based on them, the defect in maternal care affects the child's cognitive development and his or her emotional-neural structures and the communications between them<sup>[25]</sup>.

Based on the research results, there is a significant relationship between resilience and psychological well-being in adolescent girls. Hence, the second hypothesis of the present study is confirmed. The results of this study are consistent with those of the studies conducted by Jafarnejad (2016), Hashemi et al. (2014), Winhoven (2010)<sup>[2, 26]</sup>. In this regard, Hashemi et al. (2014) conducted a study entitled "The role of psychological capital in psychological well-being with respect to the moderating effects of social capital"<sup>[26]</sup>. The results showed that psychological capital and its components (including resilience) have a positive and significant relationship with psychological well-being. In explaining this result, it can be stated that resilience leads to strengthened self-esteem and successfully coping with negative experiences by increasing the levels of positive emotions. Accordingly, resilience results in positive adaptability and psychological well-being by strengthening self-esteem as a mediating mechanism, and people with higher psychological well-being are more likely to adapt to problems than those who do not have such advantage. Moreover, as one's resilience increases and his or her ability to cope with life problems and stresses increases, he or she will less be exposed to psychological and emotional disorders and will enjoy higher mental health and well-being<sup>[26]</sup>. The results also showed that paternal care with an impact factor of 0.73 and resilience with an impact factor of 0.30 remain in the regression model and can explain a part of the psychological well-being of girl students. Parental care variable has the highest impact on the psychological well-being of girl students. The results of this study are in line with those of the studies conducted by Besharat (2015), Bayani et al. (2011), Jafarnejad (2015), Hashemi et al. (2014), Rindel et al. (2016), and Winhoven (2010)<sup>[2, 20, 21, 26]</sup>. In this regard,

Jafarnejad (2016) showed a significant relationship between psychological well-being and resilience<sup>[2]</sup>. The regression result also showed that resilience explained 21% of the variance of psychological well-being of boy students and 24% of the variance of psychological well-being of girl students.

In explaining this result, it can be stated that resilient people look at problems creatively and flexibly, plan for solving them, and if necessary, ask for help from others, and have complete resources to cope with the problems and these factors bring high mental health and psychological well-being for the person. Additionally, paternal care is positively associated with psychological well-being. In children who describe their parents as warm, kind, and compassionate people, they feel the presence of parents and talk with each other with empathy, leading to increased psychological well-being and mental health of their children. In contrast, in families where the children are neglected by the parents, or have poor paternal care and the father treats the children not warmly, the children's need for care and attention, affection, empathy and acceptance is not met, making children prone to many psychological problems<sup>[27]</sup>.

### Research limitations

- The nature of the present study, which is of the correlation type and the proposed documents, can not necessarily be considered as etiological.
- The present study was implemented on adolescent girls, so we should treat with caution in generalizing results to non-adolescent girls as well as to the opposite sex.

### Research recommendations

- It is recommended to design plans to strengthen psychological factors such as emotion regulation and resilience to promote the psychological well-being of adolescents.
- Since various factors are involved in psychological well-being, it is recommended that in future research, factors such as family, mental health, and social class of the subjects to be considered to make a more accurate judgment on psychological predictors.

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