

Psychology of Woman Journal

2020, Volume 1, Issue 1, Pp. 62-75

eISSN: 2783-333X

Predicting the quality of life of female heads of households based on psychological capital and perceived social support with the mediating role of stress coping styles

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Abstract

The purpose of the present study was to predict the quality of life of women heads of households based on psychological capital and perceived social support with the mediating role of coping styles. The design of the current research is descriptive of the correlation type. The statistical population of the present study included all women heads of households under welfare support and the Imam Khomeini Relief Committee in 2020, and 168 people were selected as a statistical sample using the available sampling method. The data collection tool was Montazeri et al.'s quality of life questionnaire (2005), Latens et al.'s (2007) psychological capital, and Zimmet et al.'s (1988) perceived social support scale. The results of the path analysis indicated the significance of the direct path between social support and the components of hope and resilience with quality of life. Also, the results indicated the significance of the role of problem-oriented stress coping style in the relationship between hope, resilience, and social support with quality of life. However, the indirect path of self-efficacy and optimism to quality of life with the mediation of problem-oriented stress coping style and also all the indirect paths of psychological capital (self-efficacy, hope, resilience, and optimism) and social support to quality of life with the mediation of emotion-oriented stress coping style were not significant.

Keywords: *Quality of life, psychological capital, social support, stress coping styles*

Cite this article as:

Mousapour Lailabadi, E., Fattahi Andabil, A., & Jafari, A. (2020). Predicting the quality of life of female heads of households based on psychological capital and perceived social support with the mediating role of stress coping styles. *JPW*, 1(1): 62-75.



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Introduction

Women head of the household are women who take care of the family without the regular presence or support of an adult man and are responsible for the economic and social administration, family education, and major and vital life decisions (Afrasiabi & Jahangiri, 2016). The problems and pressures imposed on these women affect their social and economic performance and cause a decline in their quality of life (Salehi, Shabani Hamedan, and Salehi, 2015). Quality of life is the conditions that make it possible to live well so that a person can perform daily activities in a suitable physical, mental, and social condition. The World Health Organization has defined quality of life as "a person's perception of his life situation in terms of the culture and value systems in which he lives and in relation to his goals, expectations, standards, and preoccupations.

One of the factors affecting the quality of life is psychological capital, which is obtained in continuous evaluations and leads to internal and relatively stable satisfaction in the sequence of life. Psychological capital is one of the psychological indicators of positivism, which is the component of hope, resilience, optimism, and self-efficacy (Amirkhani & Arefnejad, 2012). Therefore, having a high psychological capital enables a person to cope better in stressful situations and be less affected by daily stressful events; Therefore, such people have more psychological health. Psychological capital includes a person's self-understanding, having a goal to achieve success, and persistence in the face of problems (Jafari & Hessampour, 2017).

Another important factor that has received much attention in recent years is social support, which as one of the emotional coping mechanisms, has the power to

influence the quality of life (Erasoi, Kart Vogeldo, 2005). According to Cohen (2004), social support is a social network that provides psychological and tangible resources to cope with stressful life conditions and daily problems.

Every taking charge of the head of the household is considered a change in a woman's life. Any change in human life, both pleasant and unpleasant, requires some readjustment. In response to stress, humans try to adapt to changes with reactions, and what is promising in the meantime is coping methods that can be a potent mediator for the emotional consequences of stress (Khodayari Fard & Parand, 2007); Coping styles are a mental process that creates automatic psychological reactions in a person and supports a person against anxiety (Dzgilowski, 2010).

The present study aims to answer whether psychological capital and perceived social support directly and with a mediating role of stress coping styles predict the quality of life of women heads of households.

Method

The current research is correlational descriptive research regarding its applied purpose and design. The statistical population of the present study included all female heads of households under welfare support and the Imam Khomeini Relief Committee in 2020. Due to the nature of the research, which is correlational. Referring to the opinion of Hoyt and Kramer (2004) about selecting 20-40 people for each variable and considering that the current research has four variables, the selected sample was estimated to be 160 people. It also increased to 180 people with the possibility of a drop. The sampling method was available. This way, the research questionnaires were given to the applicants who volunteered to cooperate

with the researcher by calling the welfare helpers and the female head of the household relief committee and explaining the research objectives to them.

Materials

1- Quality of life questionnaire: The 36-item form of quality of life was designed by Warosherbon in 1992 in the United States. This questionnaire has 36 statements that measure eight dimensions; Physicality, physical role playing, physical pain, general health, tiredness or vitality, social functioning, emotional role playing and mental health. The lowest score in this questionnaire is zero and the highest score is 100. The reliability and validity of the Persian version of this questionnaire has been confirmed in Iran, the validity rate is estimated between 0.7 and 0.9. The validity of this questionnaire using Cronbach's alpha is 0.88 (Majremi, 2009).

2. Psychological capital questionnaire: To measure psychological capital, psychological capital questionnaire of Latens et al. (2008) was used. This questionnaire contains 24 questions and four subscales of hope, resilience, optimism, and self-efficacy. Each subscale contains six items, and the subject answers each item on a 6-point Likert scale (from completely disagree to completely agree).

3. Scale of Perceived Social Support: To measure social support, the multidimensional scale of perceived social support by Zimmet et al. (1988) will be used. This scale consists of 12 items that measure three components: perceived support from family, perceived support from important people, and perceived support from friends. All items of this scale are graded on a five-point Likert scale (completely agree, agree, have no opinion, disagree, and completely

disagree). The range of scores of this scale is 12 to 60.

4. Lazarus-Folkman coping styles questionnaire: The coping styles questionnaire prepared by Lazarus and Folkman (1985) contains 66 items. These materials include eight problem-oriented and emotion-oriented coping methods for measuring matters. The validity of the coping styles questionnaire has been evaluated by testing the internal consistency of the coping dimensions obtained by Cronbach's alpha coefficient.

Implementation. The participants were asked to cooperate with the researcher if possible and to answer the questionnaires honestly and not to leave any question unanswered, and it was reminded that it is not necessary to write the name and surname. It should be noted that there was no time limit for completing the questionnaires. Finally, out of 180 distributed questionnaires, 170 completed questionnaires were received. Pearson's correlation coefficient and path analysis were used to analyze the data.

Findings

The mean and standard deviation of the psychological capital of female heads of households in the sample group is 112.33 (13.30), respectively; The highest average of the components of psychological capital is related to the hope variable with an average of 29.56. Also, the mean and standard deviation of the perceived social support of female heads of households in the sample group is 36.11 (5.62), respectively. The mean and standard deviation of the emotion-oriented stress coping style of female heads of the sample group is 38.23 (9.23), and the problem-oriented stress coping style of these women is 34.48 (6.88), respectively. Finally, the mean and standard deviation of the

quality of life of female heads of the sample group was 36.11 (5.62), respectively.

All the correlation coefficients obtained between the quality of life of female heads of households in the sample group and other research variables are significant at $P < 0.01$ and $P < 0.05$ levels.

According to the fit indices, the proposed model does not have a good fit, and the fit indices indicate the need to make corrections in the model. In order to improve the fit of the initial model, a modification was made in the model (by correlating the error of the two variables of resilience and self-efficacy) with the help of the proposed modification indices (MI). After applying the changes, the model was tested again.

In the modified model, chi-square on the degrees of freedom (χ^2/df) shows 10.3, which indicates a good fit of the model. The values of GFI, AGFI, NFI, CFI, IFI, and TLI in the modified model are 0.96, 0.86, 0.92, 0.94, 0.94, and 0.81, respectively, which indicates a good fit of the model. The obtained RMSEA value (0.098) indicates the acceptable fit of the model; In other words, the mentioned model can be generalized to the research community by accepting the error probability of 0.05. The goodness of fit index (GFI), a measure of the amount of variance/covariance information, has been observed, and values higher than 0.90 indicate a good fit of the model with the data. Among the psychological capitals, only the coefficients of hope to quality of life ($p < 0.05$ and $\beta = 0.18$) and resilience to quality of life ($p < 0.01$ and $\beta = 0.14$) are significant. The indirect path of hope to quality of life with the mediation of problem-oriented stress coping style, resilience to quality of life with the mediation of problem-oriented stress coping style, and social support to quality of life with the mediation of problem-

oriented stress coping style are significant. This result indicates the significant role of problem-oriented stress coping style in the relationship between hope, resilience, and social support with quality of life. However, the indirect path of self-efficacy and optimism to the quality of life with the mediation of problem-oriented stress coping style and also, all the indirect paths of psychological capital (self-efficacy, hope, resilience, and optimism) and social support to the quality of life with the mediation of emotion-oriented stress coping style are not significant.

Discussion

The purpose of the present study was to predict the quality of life of women heads of households based on psychological capital, and perceived social support with the mediating role of coping styles. The results indicate the significance of the direct path between social support and components of hope and resilience to quality of life. Also, the results indicated the significant role of problem-oriented stress coping style in the relationship between hope, resilience, and perceived social support with quality of life. However, the indirect path of self-efficacy and optimism to quality of life with the mediation of problem-oriented stress coping style and also, all the indirect paths of psychological capital (self-efficacy, hope, resilience, and optimism) and social support to quality of life with the mediation of emotion-oriented stress coping style were not significant.

Hope, as an internal force, helps women heads of households to deal with the stressful conditions of their lives and increase their level of well-being, and to use problem-oriented coping styles in dealing with challenging life situations. Since resilience is one of the most critical components affecting

the quality of life, improving the quality of life has a significant impact, and resilient people will use problem-oriented coping styles instead of emotion-oriented ones when faced with difficult situations (Kaldi & Selhshuri, 2013).

In explaining the relationship between perceived quality of life and social support, the most important construct of quality of life is the social approach. This approach is due to the existence of two goals: improving social cohesion and combating social exclusion is similar to the comprehensive quality of life approach. This approach is a human revision of utilitarianism and evaluating the quality of life based on income and wealth, whose main content is financial capabilities and social relationships. One of the components of psychological capital is resilience. In this regard, it should be noted that resilience is not only resistance and standing against stressful and threatening conditions. Instead, the company is active in the environment, and when this aspect of resilience is placed next to concepts such as communication, emotional belonging, emotional responsiveness, and the family's overall functioning, its connection with these concepts is better clarified (Rezaei & Mahmoudi, 2019).

Social support, by acting as a mediator between the stressful factors of life and the occurrence of physical and mental problems, as well as strengthening people's cognition, reduces the experienced tension, increases the survival rate, and improves the quality of life of people (Pinar et al., 2018). Also, having good social support leads a person to physical health and mental well-being. Considering the existence of a relationship between the component of hope and increasing the quality of life, counselors and

psychologists who work in empowering women heads of households should use positive and hope-based approaches in their interventions and training. Also, considering the relationship between social support and the quality of life, the relevant organizations' necessary training for public awareness should be carried out to provide social support to women heads of households from the people around them and society.

Ethics

In this research, ethical standards including obtaining informed consent, ensuring privacy and confidentiality were observed.

Acknowledgement

The cooperation of all participants in the research is thanked and appreciated.

Conflict of Interest

According to the authors, this article has no financial sponsor or conflict of interest.

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