



**Life Skills Training on Reducing Depression and Increasing the
Self-esteem of Mentally Disabled Children's Mother**

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**Life Skills Training on Reducing Depression and Increasing the Self-esteem of
Mentally Disabled Children's Mother**

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ABSTRACT

In this article, life skills training has been studied on reducing depression and increasing the self-esteem of mothers of mentally disabled children. One of the problems for parents of disabled children is their low level of self-esteem. Self-esteem can be the result of proper education in the environment, school, and society. Life skills training program leads to increasing individual self-esteem and empowers people with a variety of essential skills, realizing potential abilities and coping with different life situations. Research in the field of semi-experimental design and in the form of pretest-posttest with control group, A sample of 30 female volunteers were selected in the research program in an accessible manner and were randomly assigned to two groups of 15 individuals who were control and experimental. Life skills training also affects depression. Life skills that increase the power of adaptability and positive behavior. And the person accepts responsibility for his social role in the society without damaging himself or others. And face the challenges and problems of life effectively. The results show that there is a significant differences between the pre-test and post-test scores of the experimental group and the mean scores of self-esteem in the post-test are significantly higher than the mean scores of the pre-test; in the control group, there was no significant difference between the mean scores of pre-test and post-test.

Keywords: life skills, depression, self-esteem, disabled children



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1. INTRODUCTION

Self-esteem, trusting in your ability to think and cope with challenges, trusting in your right to success and happiness, feeling worthy, having the right to express your needs and desires, and enjoying of your own efforts. kong, Zhoa [2] and you [3] (2013) mediate the role of self-esteem and social support in the relationship between emotional intelligence and life satisfaction. In this study, 489 female students with an average age of 17-23 were selected. The results showed that social support and self-esteem play a role of mediator between emotional intelligence and life satisfaction. In addition, multiple regression analysis showed that the higher amount of social support would be, the greater the satisfaction of life (quoted by Nazari Chagni, 2013). Wong, Chang, He [3] and Wu (2010) examined the relationship between social supports, self-esteem and life satisfaction in 625 migrant children. In this analysis, data analysis showed that social support and self-esteem are significantly related to life satisfaction. Edwards and Lopez (2006) also examined the relationship between social support and life satisfaction in 266 American adolescents. The results of this study showed that social support is a strong advocate for life satisfaction in youth. Yalcin [1] and karahan (2007), in a study on life skills training on 67 families, found that life skills education has a positive effect on the promotion of relationships and can create long-term desirable behavioral changes in People. Lamb and Meyer (2001) examined the effect of teaching life skills on parents who had a child with a sad mental retardation, feeling tired, frustrated, and guilty and having psychological stress. At the end of teaching skills, these parents felt successful and showed less problems and better ability to make decisions. (Bee [1], 2000), in his study, emphasized the importance of self-esteem and its role in various aspects of life, and concluded that educational programs for the promotion of mental health and social skills, with an emphasis on increasing and self-esteem, and it should be done. In a study conducted by Alison, individuals with low self-esteem have shown symptoms such as physical complaints, indifference, loneliness, depression and frustration (quoted by Biyabangard, 2003). Nosek et al. (2003) found that women with physical-mobility impairment have lower self-knowledge and lower self-esteem than other women and are socially isolated. On the other hand, the results of



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researches (May and Warren, 2002), Kermode and Maclin (2001) show that the self-esteem of adults with spinal cord injury, the elderly, and the patients with Physical-mobility impairment is one of the important factors affecting their quality of life. In addition, research suggests that self-esteem also affects the rate of occupational opportunities for people with physical-mobility impairment (Chapin and Kewman, 2001). In this study, life skills training has been used to reduce depression and increase dignity. Mother's self-esteem for mentally handicapped children. The birth of a child for parents at any age and condition is the cause of mental stress and tension. Now if a baby is born with a type of mental, physical, visceral, or a combination of them, the psychological, social and economic stress associated with the existence of such a child on the family is multiplied. The effects of this issue are not merely an effect on the mutual interaction between the disabled child and others, but the mutual interaction of family members is deeply affected by this issue. The emphasis on the separation of disabled children from relatives, neighbors and close relatives causes the entire family to be completely separated and isolated, which is a psychological disadvantage to the family. The importance and necessity of teaching life skills is determined when it comes to identify that life skills training improves psychosocial skills. These abilities help a person to deal effectively with conflicts and situations of life and help him to work positively and adaptively with other people, his community, his culture and environment, and to provide his mental health. Hence according to the problems of families who have disabled children, skills training to parents of disabled children and research on the impact of education and training on self-esteem and depression these parents can be in the planning supportive agencies including welfare state, in this article, to the study of life skills training on reducing depression and increasing the self-esteem of mentally handicapped children.

2. STATEMENT OF THE PROBLEM

One of the problems for parents of disabled children is their low level of self-esteem. Self-esteem is as a symbol of mental health and in social relation, it supports people against anxiety and physical disorders (Shirbyam et al., 2009) and improves individual coping strategies and improves mental health (Yousefi and Mohammad Khani, 2014). Self-



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esteem is not like an educable skill, but it can be a consequence of proper education in the environment, school, and society. A life skills training program is one of the programs that increases individual self-esteem and empowers people with a variety of essential skills, realizing potential abilities and coping with different life situations (Planet E& Plant M, 1999). These skills are potentially life-threatening. These skills are the ability for targeted and succeed behaviors. According to Gizzard and Gunther (1996), life skills are essential for life and for all life stages (childhood, youth, and adolescence). The overall set of these skills is in four dimensions of family, educational, occupational and social life that are used for preventive and curative treatment based on a theoretical structure that has the overall goals of mental health counseling (quoted by Aghajani, 2003). Other problems for disabled parents are depression. Creativity is a penetrating and enduring atmosphere that internally experiences and influences the individual's behavior and understanding of the world. Creation may be natural and normal [1], elevated [2], or depressed [3]. In patients with depressed mood, there is a loss of energy and interest, feeling guilty, difficulty of concentrating, loss of appetite, and thoughts of death and suicide. Other signs and symptoms of mood disorders include changes in levels of activity, cognitive abilities, speech and vegetative functions (such as sleep, sexual activity, and other biological practices). This changes always disrupts interpersonal, social and occupational functions (Akiskal et al., 2005). In relation to other human beings, society, culture and environment act positively and adaptively and provide their mental health (Eskandari, 1392). People who are trained in life skills are more aware of their lives and abilities and are confident with their acceptance and assurance that they can step up and advance to a higher level of progress (Bova, Burwick and Quinnens, 2008). Successful learning of life skills influences the learner's feelings about himself and others and promotes social psychosocial capabilities such as self-esteem, tools of being and being responsible, and interpersonal communication. These abilities help a person to cope effectively and deal with life-conflicts and provides mental health (Taromian, 2003). Learning and practicing life skills can strengthen or change attitudes, values and behaviors of the human being and many of the problems can be prevented by the emergence of positive and healthy behaviors (Alilu,



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2007). Families of disabled children face economic and psychological problems because of their children's circumstances. So far, no comprehensive research has been conducted on the teaching of life skills in this stratum of society. Therefore, according to the literature on the effect of life skills on mental health, the researcher's depression aims to determine whether life skills training affects self-esteem and decreases depression of parents of mentally disabled children.

3. RESEARCH METHOD

The present study is in the field of quasi-experimental design and in the form of pre-test, post-test design with control group. In this research, life skills training, role of independent variable and self-esteem and depression are dependent variables that life skills training on it, is analyzed. In this research, life skills training, role of independent variable and self-esteem and depression are dependent variables that the effect of life skill training on it could be analyzed. The research pattern can be as follows:

Research pattern of table 1

Post	independent	pretest	The way of appointing in the group	group
T2	X	T1	R	experimental
T2	-	T1	R	control

R: It refers to the assignment of people in groups.

T1: The purpose is implementing the pre-test in control and experimental groups.

T2: The purpose is implementing the post-test in intervene and control groups

X: Refers to the application of the independent variable in the present research of life skills training.

Society, sample and sampling method

The statistical population of research includes all mothers of mentally handicapped children in Mallard city, of Tehran province. The size of the statistical population is about



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350 people. Then, the sample size according to the semi-experimental research will be selected by using Cohen table with the effect size of 50/0 and alpha of 5/0 and test power of 97 times to 30 people. Then, the sample size according to the quasi-experimental research will be selected by using Cohen table with the effect size of 50/0 and alpha of 5/0 and test power of 97 times to 30 people. Considering the fact that the present research is in the field of quasi-experimental projects, in this research, 30 volunteers were selected in the research program in an accessible manner and randomly assigned to two groups of 15 people who were in the control and experimental groups.

Research instruments

Self-esteem questionnaire (ESI)

This Self-Esteem Questionnaire (1976; quoted by Biyabangard, 1373) contains 30 questions. And the subject to respond to each item must select one of the choices "yes", "no" or "?". In this questionnaire, the lowest possible score is zero and the highest score is 30. Hormozinejad (1380), in a research study on students of Shahid Chamran university of Ahwaz, reported the construct validity of this test which was 0.74 for female students and 0.79 for male students. He also performed the Izonik self-esteem test and Ahwaz self-esteem scale simultaneously on two male and female students of Shahid Chamran University of Ahwaz. The calculated coefficients for the female sample were $r = 0.79$ and $r = 0.74$ for male sample, It reports that both at the level of $001/0 > p$ are significant. The results of his findings show that this test has favorable and satisfactory psychometric properties.

Beck Depression Questionnaire (inventory) (BDI)

BDI essays are based on the observation and summarization of commonly observed attitudes and symptoms among depressed mental patients. This test consists of a total of 21 materials related to different symptoms and when performed, the subject is asked to grade the severity of these symptoms based on a 4-degree scale from 0 to 3. This questionnaire is within the range of 12 to 40. This questionnaire is widely used as a self-reporting instrument for measuring depression-dependent cognitive knowledge. The 21 items in this questionnaire acquire from observation of signs of a type of depressed



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patients. These phrases are graded from 0 to 3 according to severity of the reported condition by the patient (Beck [1], 1984). The results of the meta-analysis of the Beck Depression Inventory (BDI) indicate that its internal consistency coefficient ranges from 73% to 93% with an average of 86%. The validity coefficient obtained from the retest is based on the interval between runtime and type of group in the range of 48% to 86%. Similarly, this test showed a moderate correlation with similar scales that measure depression (quoted Hejazi et al., 1395).

Life skills training protocol

First session: Welcoming, self-referrals, and the introduction of individual group members by themselves, the need to teach life skills, defining life skills, history, introducing ten key skills of life, and briefly summarizing their goals, setting titles and timing of future meetings.

Second Session: Teaching Self-Awareness-Definition of self-awareness, self-esteem and the characteristics of resilient people, the characteristics of those who know themselves and the benefits of self-awareness.

Third Session: Empathy Training - Definition of empathy, empathy barriers, the most important methods of empathy, especially active listening and empathy benefits.

Fourth Session: Teaching decision-making skills and problem solving - Definition of decision-making, decision-making process, importance and benefits of decision-making skills, definition of problem-solving skills, activities and steps needed to solve a problem (problem definition, possible solutions, selection Appropriate Solutions and Performance).

Fifth Session: Teaching effective communication skills and creating and maintaining interpersonal relationships-Defining effective communication skills, key styles in effective communication and the identification of communication elements, the definition of interpersonal skills, the importance of effective interpersonal relationships and the benefits of interpersonal relationships.

Sixth Session: Creating Creative Thinking Skills and Critical Thinking - Defining Creative Thinking Skills, The Purposes and Benefits of Creative Thinking, How to Strengthen



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Creativity, Definition of Critical Thinking Skills, How to Strengthen Critical Thinking, The Benefits of Critical Thinking.

Seventh Session: Learning to Cope with Excitements - Definition of coping skills, anger definition, signs of anger, causes of anger, anger management techniques and controlling it.

Eighth session: Stress coping skills training, Stress definition, Stress coping skills, Stress resources, Stress coping strategies and Adaptive coping methods.

At the end of the meeting, the participants were evaluated (post-test) and appreciated by all members for attending this course.

Methods for collecting data

To perform the test, after the completion of questionnaires, sampling was done. For sample collection after obtaining permission from the Department of Welfare of the Mallard city, access to files of disabled people was made. Then they were asked to participate in the test as voluntary samples. After sampling, the sample was randomly assigned to two groups of 15 experimental and control groups. At first, pre-test was carried out and a training session was conducted for the experimental group during eight weeks and one session each week. Then, at the last session, the experimental group and the control group received a post-test.

Statistical analysis method

SPSS 20 software is used for analysis. For descriptive analysis of data, mean and standard deviations are used, and for inferential analysis also uses analysis of covariance [1].

4. RESULTS

Demographic information

Table 2: Information on the age and mothers’ education by type of experimental and control group

education			age		group
Higher than bachelor's degree	Diploma and higher	Under diploma	-31 50	-24 30	



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2	10	3	4	11	Experimental group
4	9	2	6	9	Control group

Descriptive statistics

In the following, the results of descriptive analysis of sample members are analyzed:

Table 3 describes the results of research variables between the two experimental and control groups

Control group		experimental group		situation	variable
Standard deviation	mean	Standard deviation	mean		
3/24	34/53	4/23	32/67	pretest	Mothers' depression
2/41	34/47	2/69	24/47	posttest	
2/55	13/60	1/54	11/60	pretest	Self-esteem
2/57	13/27	1/76	14/53	posttest	

The table above shows the mean scores and standard deviations of experimental and control groups respectively. Descriptive analysis results show that the mean depression of mothers in the posttest was lower than the pre-test, and the mean of self-esteem in the post-test was increased compared to the pre-test.

Inferential statistics

In this section, we use the inferential analysis to test the hypothesis or examine the research question. Hypothesis 1: Life skills training has been shown to have a significant effect on increasing the self-esteem of mothers of mentally disabled children under support of welfare state of Mallard city. According to the present research, which is pre-test and post-test with control group, for analyzing the data, covariance analysis was used to control the pre-test's effect (Human, 1392). This analysis has hypotheses, including the homogeneity of the regression slopes between the random variable (pre-test) and the



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dependent variable. In this study, the slope of the regression line was almost parallel in all studied variables. Also, the errors homogeneity of two groups' variances in the post-test was also checked by the Lone test and the significance of the difference between the variances of the groups was not proved.

Lone test, posttest

Sig.	df2	df1	F
0/186	28	1	1/841

Description: As can be seen, the variance error difference is not significant and the assumption of the homogeneity of the variance error is confirmed.

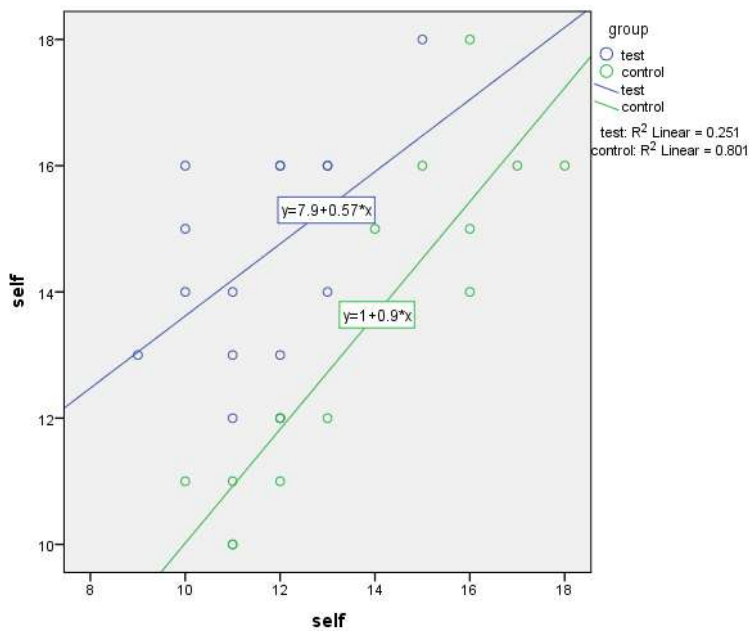


Figure (1) dispersion diagram of Random Variable and Dependent Variable
As can be seen, the slope of both lines is almost parallel, and indicating a linear relationship between the two variables.



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Table 5: Analysis of covariance

Significance level	F	mean of squares	degree of freedom	Sum of squares	Sources of changes	variables
0/000	41/46	82/77	1	82/77	pretest	Self-esteem
0/000	25/36	50/63	1	50/63	group	
-	-	1/99	27	53/89	error	
-	-	-	30	5945	total	

Explanation: According to Table 5, the effect of pre-test was statistically significant ($P < 0.05$ and $F = 27.46$). In other words, post-test scores were affected by pre-test scores. To test the effect of group or intervention (life skills training) on the dependent variable (self-esteem), the pre-test effect should be eliminated as a coherent factor. The results showed that the effect of group or intervention by removing or eliminating the equilibrium variable was statistically significant ($p < 0.05$, 25.36 ($F = 37$) and 1). Therefore, it can be concluded that life skills training has changed in groups.

Second hypothesis: life skills training has a significant effect on the reduction of depression in mothers of mentally handicapped children under the well-being of Mallard city. According to the present research, which is pre-test and post-test with control group, for analyzing the data, covariance analysis was used to control the pre-test's effect (Human, 1392). This analysis has hypotheses, including the homogeneity of the regression slopes between the random variable (pre-test) and the dependent variable. In this study, the slope of the regression line was almost parallel in all studied variables. Also, the homogeneity of the two group variance errors in the post-test was also checked by the Lone test and the significance of the difference between the variances of the groups was not proved.

Table 6, lone test, post test

Sig.	df2	df1	F
0/960	28	1	0/003



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Description: As can be seen, the variance error differences is not significant and the assumption of the homogeneity of the variance error is confirmed.

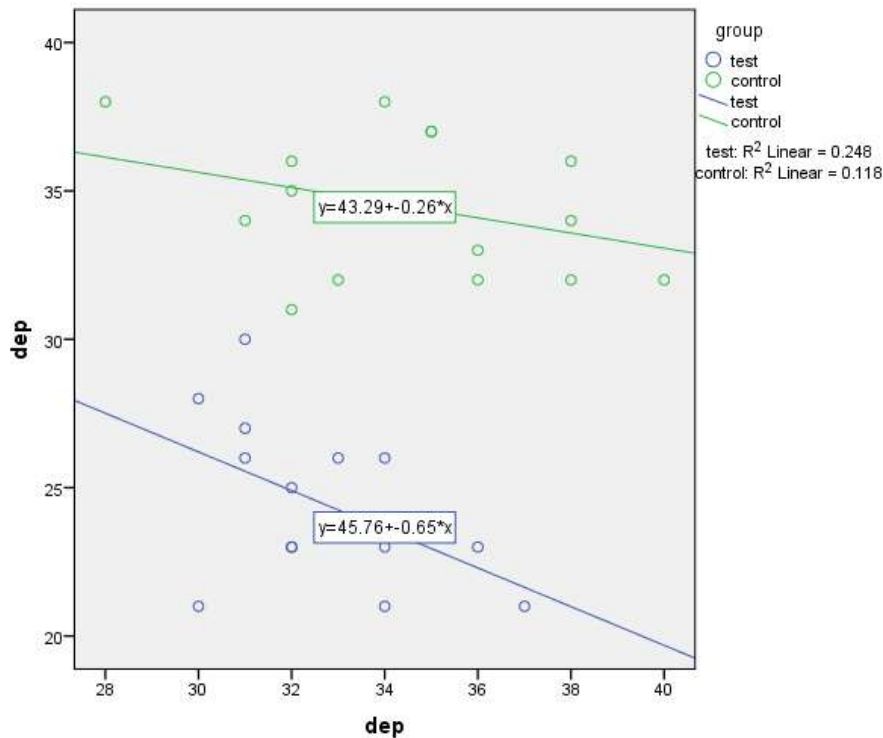


Figure (2) dispersion diagram of Auxiliary Random Variable and Dependent Variable. As can be seen, the slope of both lines is almost parallel, indicating a linear relationship between the two variables.

Table 7) Analysis of covariance

Significance level	F	Mean of squares	Degree of freedom	Sum of squares	Sources of change	variables
0/035	4/90	28/18	1	28/18	pretest	Self esteem
0/000	132/29	760/84	1	760/84	group	
-	-	5/75	27	155/27	error	
-	-	-	30	26982	total	



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Explanation: According to the table, the effect of pre-test was statistically significant ($P < 0.05$ and $F = 90.4$). In other words, post-test scores were affected by pre-test scores. To test the effect of group or intervention (life skills training) on the dependent variable (depression), the pre-test's effect should be eliminated as a coherent factor. The results showed that the effect of the group or intervention by removing the homogeneous variable was statistically significant ($P < 0.05$ and $F = 37.29$). Therefore, it can be concluded that life skills training has changed in groups.

5. CONCLUSION

In this paper, Life skills training was used to reduce depression and increase the self-esteem of mothers of mentally disabled children. Research in the field of quasi-experimental design and in the form of pre-test, post-test with control group. In this study, life skills training, role of independent variable and self-esteem and depression were dependent variable that life skills training on it was analyzed. Finally the following results were obtained:

- 1- First hypothesis: Life skills training has a significant effect on increasing the self-esteem of mothers of mentally disabled children under the welfare state of Mallard city.
- 2- Results showed that there was a significant difference between the pre-test and post-test scores of the experimental group in self-esteem and the mean scores of self-esteem in the post-test were significantly higher than the mean scores of the pre-test, while in the control group, the mean scores of pre-test and post-test, Failed. This finding leads us to the conclusion that the cause of the difference in mean is the factor between the subject, and the teaching of life skills. Accordingly, the hypothesis is confirmed. This finding was consistent with the results of Lamb & Mir (2011), Bethshaw (1997), Mahvash (1391).
- 3- Self-esteem is a value that individuals attribute to themselves as individuals. This aspect of interpersonal relationships is a reflection of the individual's views of others, and determines how he treats different issues. According to Adler, Rogers, and Sullivan and Maslow, a lack of self-esteem is considered an anxiety disorder (Hart, 2015). Cooper (2003) considers self-esteem as a threshold variable, which lowers the deterrent effect on perseverance, trust, and academic performance, and disrupts the performance of a person



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in the psychological, physical, family, and social realm, making him which moves to change its position or compromise with it; Compromise which can be effective or ineffective. He believes that self-esteem is an individual's assessment of himself, which he gains through self-awareness, and is a sign of an attitude of confirmation or disapproval and the extent to which one believes in his ability, success, and self-esteem.

4- Nossake et al. (2003) found that women with physical-motility disabilities have lower self-knowledge and lower self-esteem than women and are more socially isolated. 1- Bethshaw (1997) believes that by using life skills training to solve problems, professionals can help families with disabling children to deal with psychological stress, depression, incompatibility and loneliness, especially when these feelings weaken parents' ability to help and care for the child.

5- First hypothesis: Life skills training has a significant effect on reducing the depression of mothers of mentally disabled children under the welfare state of Mallard city.

6- Results showed that there was a significant difference between the pre-test and post-test scores of the experimental group in self-esteem and the mean scores of self-esteem in the post-test were significantly higher than the mean scores of the pre-test, while there is not any significant effect in the control group, the mean scores of pre-test and post-test,. This finding leads us to the conclusion that the cause of the difference in mean is the factor between the subjects, or the teaching of life skills. Accordingly, the hypothesis is confirmed. This finding was in line with the findings of Lamb & Mir (2011), Bethshaw (1997), Moradi and Kalantari (2006).

7- Creation may be natural or high. An individual with natural creation experiences a wide range of creations and equally sets of emotional manifestations and is able to control his mood and emotions. While mood disorders are a group of clinical conditions associated with mood impairment, lack of control emotions on mood and mental experience of severe discomfort. These disorders always lead to disruptions in job performance, social relationships, and interpersonal relationships. In addition, changes in the level of activity, cognitive ability, speech, vegetarian symptoms (sleep, appetite,



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sexual activity), and other biological rhythms also occur (Sarason, 1987; quoted by Najarian et al., 2008).

8- Research shows that life skills training affects depression. Life skills include a set of abilities that increase the power of adaptability and positive behavior. As a result, a person is able to take on social responsibility responsibilities and effectively deal with daily life challenges and problems, without affecting oneself and others. Researchers have a positive impact on life skills in sustainability. Families are considered as a reason for the importance of education, and training of these skills as a general approach to the prevention of family and personal and social damage has been emphasized (quoted by Pour Ghasemi, 2011).

9- Researches show that life skills training has a positive effect on increasing mental health of individuals, reducing anxiety and depression (Azor, 2005; Mahmoudian, Khoshkonesh and Saleh Sedighpour, 2008; Amiri Barmokhi, 2009). Life skills or psychosocial abilities are a set of abilities that help a person to deal effectively with conflicts and situations in life. These abilities enable the individual to positively and adaptively engage with other human beings, society, culture and environment and provide their mental health (Eskandari, 1392). Also, various researches on the effect of life skills training program on mental health, and also the amount of anxiety, social incompatibility and depression in women with physical disabilities, on the social skills of hearing impaired students, on increasing self-efficacy and the motivation for the progress of women with disabilities Physical and mobility skills, increased adaptability, social skills and self-esteem (Moradi and Kalantari, 2006; Mahvash Varnosfaderani et al., 2012 and Gonzáles Llontop and Otero Gonzáles, 2017)

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