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**Lived Experience Resilience-Based Lifestyle of Working Women During the Corona Virus Pandemic**

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| **A R T I C L E I N F O** | **ABSTRACT**Living in the corona has created unique problems for working women with children. This study aimed to investigate the lived experience of lifestyle based on productivity of working women with psychological problems caused by quarantine. In order to analyze the interview data, methodology was Qualitative &analysis of participants' lived experience, to identify 14 sub-themes and categorize them into five main themes (individual and psychological strategies, understanding spouse assistance, support networks, religious beliefs, and consequences). Resulted: Based on the findings of the present study and interviews conducted, it can be said that the lived experience of lifestyle based on the productivity of these women is an exceptional experience that includes many dimensions that showed that this is a multidimensional phenomenon with individual, communication, social dimensions, cultural and family with different challenges and needs. The findings of this study expanded the limited literature of the past on the experience of female resilience. This study also had many achievements for counseling centers and family therapy specialists. These findings can provide the necessary information about support resources and the adoption of educational, supportive, and therapeutic strategies for women to provide more mental health. |
| *Article Type* ***Research paper*** |
| **Keywords:**Lived experience, lifestyle, resilience, working women, Corona pandemic. |

**Introduction**

C-19 was diagnosed in late December 2019 in Wuhan-China and soon spread worldwide. People began a new life in quarantine following the disease to protect themselves from the disease. Living in a home quarantine has psychological, social, and economic consequences. In a study conducted to explain the psychological experiences of students in home quarantine due to the outbreak of coronavirus, data analysis included four main themes, including; “Growth of negative emotions, confusion and, pessimism,” “Growth of obsessive-compulsive disorder around the body and washing,” “Concerns about endangering family health,” and “Economic worries and fear of getting rid of Corona” was obtained. Coronavirus disease is a unique, life-threatening event worldwide. In addition to the stress of illness and death, families suffer economic hardship, insecurity in having adequate food and necessities, separation from loved ones, scary news, and uncertainty about the future. While behaviors can reduce the risk of infection, many aspects of the epidemic are beyond individuals’ reach, so the event’s stressful nature increases.

Not only did the disease cause public health concerns, but it also caused several psychological disorders, including anxiety, fear, depression, labeling, avoidant behaviors, irritability, sleep disturbance, and post-traumatic stress disorder (PTSD) (Shahyad & Mohammadi, 2020).

With the outbreak of the first wave of the coronavirus, significant social consequences were achieved in communities, the normal life of the people was disrupted, and many routines of life were changed. People were quarantined in their homes, and many businesses were forced to close their businesses. Moreover, staying at home, thus disrupting both the financial and psychological condition of the family; Even this situation arose to some extent for employees whose working days were reduced. With the closure of schools, taking on the responsibility of educating children, and creating entertainment for them to make the home environment bearable, additional hardship was felt on the shoulders of parents, especially women. The mourning for the loss of loved ones and the pressure of not holding mourning ceremonies, followed by the deprivation of the emotional perceptions of those around him, was further caused. The multiplication of household chores and family members, the endurance of financial recession and long-term association with the spouse, and the full-time care of all the children's issues made women spiritually bored and impatient with resentments, but among them were women who based on resilience-based lifestyles with many problems, they adapted well and ensured their health and that of their families. Previously, most research focused on patient anxiety, but the fact is that during an epidemic like the coronavirus, the fear of disease and the fear of death, along with the disruption of daily activities, caused healthy people to become anxious about the disease.

In this regard, the World Health Organization defines lifestyle as: the term lifestyle refers to people's way of life and a complete reflection of social values, attitudes, and activities. It is also a combination of behavioral patterns and personal habits throughout life (physical activity, nutrition, alcoholism, and smoking) that has been created following socialization (Torabi, 2021). Lifestyle is a relatively new scientific term that is defined by various approaches. In a general division of the three macro approaches, we can name the approach of sociologists, the approach of psychologists, which is influenced by the views and ideas of Alfred Adler, and the approach of theologians, which can be defined according to the approach of theologians: a set of behaviors Organized that are influenced by beliefs, accepted values and attitudes, as well as following individual desires and environmental conditions, have become the dominant aspect of the behavior of an individual or a group of people (Mahdavi Kani, 2008).

As Sobel argues, three types of economic determinants affect individuals 'choices: individual needs and resources, the totality of society's material culture, and the political and economic rules under which the distribution of cultural and cultural elements is believed to be structured through constant interaction with the material culture. Another group that thinks differently often examines the economic determination of lifestyle from a position of income-based class indexation: Zabul Kyokanter believes the social class is the best predictor of lifestyle (Torabi, 2021).

**The theoretical framework of research**

**Cultural capital**

The Another factor influencing the choice and lifestyle is cultural capital. Cultural capital is one of the types of capital that Bourdieu has proposed and considers effective in creating, strengthening, or changing lifestyles. Bourdieu and the effect of cultural capital on consumption, activity, and cultural lifestyle Afradrabatosel explains the theory of differentiation and believes that the most important concept that can explain the effect of cultural capital on cultural lifestyle is its impact on other areas of life is talent. Any set of activities that wants to become part of a person's lifestyle should be tailored to the individual's intentions.

**Capital or social**

In addition to cultural capital, social or capital also plays an essential role in the lifestyle of members of society. The impact of social capital on lifestyle is more focused on studying social networks and norms. Social networks play a crucial role in creating talent and change. Social capital and lifestyle are interrelated and can be viewed from how having different lifestyles can lead to social capital. Therefore, there is a possibility of creating weak and strong social ties while performing these activities.

**The concept of lifestyle in psychological terms**

If we accept that before Alfred Adler, psychologists paid attention to the concept of lifestyle and used it, but Adler is the most specific psychologist who has used this term and discussed it in detail. According to Adler and his followers, lifestyle is a relatively fixed way people pursue their goals and solve their life problems. Adler and his followers define the style of life around him.

The way a person copes with these tasks distinguishes his lifestyle from the lifestyle of others. In Adler's parable, the house branches of a lifestyle tree are based on five attitudes as a light tree trunk.

Life is as follows:

1. How to look at yourself.
2. How to look at problems.
3. How to look at others.
4. How to look at the opposite sex.
5. How to look at life as a whole.

[Luthar et al. (2000)](#_ENREF_21) define resilience as the process of coping with life-threatening, stressful, or challenging events. Resilience is an active process of perseverance, self-affirmation, maturity in response to the crisis, the ability to return to the original state with more excellent stability and strength ([Khosla, 2017](#_ENREF_15)). Resilience enables one to consciously reevaluate adverse conditions to find a window of hope to find meaning in life, to be motivated to live, to strive with greater psychological endurance, and recover faster from injury. Variety recovers after the disaster ([Torgalsbøen, 2012](#_ENREF_41)). Resilience is the ability to survive adverse conditions ([Owens & Parsons, 2018](#_ENREF_29)), the ability to return to the original state and, successful adaptation.

Resilience is one of the factors that help a person to cope with stressful and challenging life situations and protect people against pathological disorders and difficulties in life ([Lewis, 2002](#_ENREF_20)).

Resilience is the capacity and the force that brings back from difficulty and reconstruction, and the ability to face adversity, while at the same time finding meaning for those events and maintaining hope ([Masten & Monn, 2015](#_ENREF_24)).

The concept of resilience is based on the theory that although some people are exposed to several risk factors and are more likely to develop a disorder, they do not develop it. Theorists such as Garmsey, Werner ([Werner, 1995](#_ENREF_43)) and Smith, Kempfer, Rutter ([Rutter, 2012](#_ENREF_33)), Walsh ([Walsh, 2006](#_ENREF_42)), the theory of the "social-ecological system" and the theory of "empowerment" believe that the emergence of resilience is due to factors that, like a shield of disaster, put people at risk, protect against the effects of exposure to risk factors.

According to numerous studies, people with high resilience have higher levels of mental health ([Khosla, 2017](#_ENREF_15); [Razavi, 2018](#_ENREF_30); [Sadri Damirchi et al., 2018](#_ENREF_34)), suffer minor damage against disasters ([Hosseinpour, 2018](#_ENREF_12)), suffer less stress and burnout ([Sardarzadeh et al., 2016](#_ENREF_35)), have a better quality of life ([Kwok et al., 2014](#_ENREF_18)), and are less likely to suffer from cardiovascular disease ([Kordestani & Ghamari, 2018](#_ENREF_17)), compared to the disease Have a positive attitude ([Anderson & Funnell, 2005](#_ENREF_4); [Baghi & Baghban Karimi, 2018](#_ENREF_5)), show better responsibility and social and finally a better ability to deal with problems and Diseases show themselves ([Amato et al., 1995](#_ENREF_2); [Amiri Moghadam, 2019](#_ENREF_3); [Tajikzadeh et al., 2016](#_ENREF_39)).

In Iran, research has dealt with the issue of resilience with different populations. For example, resilience among female-headed households, immigrant women ([Naghavi, 2015](#_ENREF_28)), cancer patients ([Tajikzadeh et al., 2016](#_ENREF_39)), hypertension patients ([Baghi & Baghban Karimi, 2018](#_ENREF_5)), heart patients-vascular ([Kordestani & Ghamari, 2018](#_ENREF_17)), elderly ([Izadi Avanji et al., 2009](#_ENREF_13); [Karami et al., 2017](#_ENREF_14)), teachers ([Sardarzadeh et al., 2016](#_ENREF_35)), Nurses ([Razavi, 2018](#_ENREF_30)) and adolescents in groups at different risks ([Mohammadi, 2004](#_ENREF_25)) have been studied ([Amiri Moghadam, 2019](#_ENREF_3)).

**Bandura Social Cognitive Theory**

This approach explains human behavior in terms of the interaction between cognition, behavior, and environmental factors and emphasizes the partnership between behaviors, humans, and cognition, behaviors, and environmental factors. It also emphasizes that compatibility depends on emotions, goals, competencies, and individual commerce. According to this theory, resilience arises from environmental, behavioral and, personal factors. In contrast to the social cognitive perspective, humans are considered active beings who can self-regulate and regulate their behavior, not passive beings controlled by unknown environmental forces or internal impulses. They actively participate in their transformation and control their behavior, events and, happenings. The actions and thoughts of individuals are the product of the interaction between the three forces of the environment, the person and behavior.

Ellis Cognitive Theory

It forms the basis of the theory and model A - B - C, which is used in cognition and personality change. This model says that activating events (A) have consequences for emotional behavior (C). However, the behavioral and emotional consequences of the event are not debilitating but rather a system of individual beliefs (B). In other words, these stimuli are not the motivating events that are important, but the individual perception and interpretations of these events are essential.

Beck Cognitive Approach

According to *Laitsi* (2006), another theory related to the concept of resilience is *Beck's cognitive theory*. *Beck* affirms that having negative beliefs and habits exacerbate stress and that positive habits act as a barrier to or reduce stress ([Alizadeh, 2012](#_ENREF_1)).

Factors that cause family resilience

Factors that affect resilience include high self-confidence, positive problem-solving skills, a solid connection to school, higher intelligence, having an internal control center, and constructive communication skills ([Kiani Dehkordi et al., 2005](#_ENREF_16)).

Connor ([Connor & Davidson, 2003](#_ENREF_8); [Rostami et al., 2008](#_ENREF_32)) has defined *resilience* as a way to measure a person's ability to cope with stressors and factors that threaten a person's mental health. Resilient people do not have self-destructive behaviors, are emotionally calm, and cope with unpleasant situations. Resilience is used for people at risk but not for psychological disorders. Resilience allows people in difficult situations and, despite risk factors, to use their existing capacity to achieve success and growth of their individual life and these challenges and tests as an opportunity to empower Take advantage of themselves and come out of them proud.

Research has reliably reported several features related to resilience; These features include:

**1- Feeling of worth**

Feeling of worth is determined by self-esteem, self-confidence and, self-perception ([Reich et al., 2010](#_ENREF_31)). Accepting yourself as a valuable person and respecting yourself and your abilities, unconditionally loving and trying to recognize your positive points and cultivate them, and on the other hand, recognizing your weaknesses and not hiding them. These people try to solve these shortcomings with realism and otherwise cope with these characteristics.

**2- Problem-solving skills**

Resilient people have an analytical-critical mindset about their abilities and circumstances, are resilient to different situations, and have a fantastic ability to find different solutions to a particular situation or problem. They also have a remarkable ability to realistically analyze personal problems and find immediate solutions and long-term strategies to solve problems that are not easily and quickly solved ([Gau et al., 2008](#_ENREF_10)).

**3- Social adequacy**

This group has learned communication skills very well. They can maintain their sense of humor in difficult situations, can be intimate with others, and enjoy the social support of others in times of crisis; While such people can be good patients stone, they can listen well when you talk to them and put themselves in your shoes ([Fraser & Pakenham, 2009](#_ENREF_9)).

**4- Optimism**

A firm belief that the future can be better, a sense of hope and purpose, and a belief that they can control their lives and future, and that potential obstacles cannot stop them ([Carver & Scheier, 2002](#_ENREF_7)).

**5 - Empathy**

Resilient can establish a relationship with mutual respect with others, which leads to social cohesion, i.e., a sense of belonging to individuals, groups, and social institutions ([Masten & Monn, 2015](#_ENREF_24)).

**6- Feeling of purposefulness**

Feeling of purposefulness and belief in a bright future ([Khosla, 2017](#_ENREF_15)). These people expand their moral dimension in events, and crises feel more purposeful in life. And their compassion and kindness to the troubles of others increases. One of the characteristics of resilient people is that they ask themselves questions about the purpose of life; Where did I come from? Who am I? Where will I go? And that it is necessary to have a purpose and life ([Walsh, 2006](#_ENREF_42)).

**7- Interpersonal skills**

Resilient characters are often attractive to others. They also have special interpersonal skills that help them build and maintain relationships. As a result, it helps them cope with stressful life experiences ([Reich et al., 2010](#_ENREF_31)). Resilient people have good interpersonal communication skills. In times of stress, they have access to more sources of social support and can understand and experience the feelings of others, which is why others are interested in communicating with them. Trust and help when needed ([Skodol, 2010](#_ENREF_37)).

**Methods**

The present study is qualitative and phenomenological. The simplest definition of qualitative research is that this method is research whose findings are not obtained through statistical methods or other quantitative tools, but the approach allows the study of issues from a perspective that makes study participants possible. A qualitative researcher should have the mentality, flexibility and, ability to listen to people who tell their life stories ([Hajjari, 2011](#_ENREF_11)).

The type of phenomenology as a research method was devoted to studying manifestations, describing the structures of lived and conscious experience without reference to theories, hypothetical deductive thinking, and previous theoretical assumptions ([Mohammadpour, 2010](#_ENREF_26)). In general, phenomenological methodology aims to stimulate the individual's perception and lived experience while emphasizing the richness, breadth, and the depth of these experiences. The purpose of conducting the present qualitative research is to test what already exists in the researcher's mind—discovering and cultivating new knowledge about the resilience experience of working women. On the other hand, to deeply study complex human experiences and interactions, a holistic research method is needed to examine the integrity of a complex phenomenon in-depth and meticulously. Given the nature of the research question and its purpose, which is the qualitative study and understanding of the resilience experience from the point of view of the lived experience of the experimenters, the main focus is on the statements, reports, and interpretations of the experienced people of their unique mental experience. Moreover, its consequences are. In other words, the researcher in this study does not seek to test hypotheses and theorize. As is expected from qualitative phenomenological research, to gain deeper insight, approach the world of participants' experiences, answer the experiences, and discover the meaning. The phenomenon in people experiencing resilience ([Laverty, 2003](#_ENREF_19)) is one of the main goals of qualitative research. The statistical community, research participants, and selection process.

Participants in the present study were working women exposed to coronavirus for the past year due to teleworking conditions and quarantine tolerance. They used counseling and psychotherapy services online once a week and had resilience experiences. Mental health was due to unexpected circumstances. One of the selection criteria was that working women had children, and in addition to performing their job duties, they also had to do work related to their children's education and other current family affairs. Their life was in Tehran province. Purposeful sampling was performed to select the participants in this study. [Starks and Brown Trinidad (2007)](#_ENREF_38) state that to manifest the existence of a phenomenon in the method of phenomenology, data are collected only from people who have experienced the phenomenon and those who can report their experiences in detail. It is essential that research participants be aware of the phenomenon and be interested in understanding its nature and meaning ([Amiri Moghadam, 2019](#_ENREF_3); [Moustakas, 1994](#_ENREF_27)). Therefore, the selection of samples in phenomenological research is according to the purpose of the study. This study aimed to investigate the resilience experience of working women with children in the coronavirus period, so the sample includes those who have reported resilience experience with the resilience scale and lived with it and are interested in understanding the nature of this experience. The use of these sampling strategies in the present study to select a purposeful sample is as follows:

Sample selection criteria provide an excellent opportunity to select participants who meet the inclusion criteria ([Starks & Brown Trinidad, 2007](#_ENREF_38)). In the present study, the main criteria for targeted sampling include the following:

A) The participants have the experience of the desired phenomenon and have shown this resilience through a questionnaire; B) Participants are willing to participate in research and share their experiences;

C) Participants have the necessary literacy and knowledge to share their experiences. Criteria for entering the research: being a woman, wife, and mother. Being employed and willing to cooperate in research

Exclusion criteria: housewife without children.

**Measuring tools**

**1. Semi-structured interviews**

In this study, semi-structured interviews were used to collect data. Qualitative research interviews seek to describe and make sense of central themes in participants' lives. The primary purpose and task of the interview are to understand the meaning of what the interviewees say ([Amiri Moghadam, 2019](#_ENREF_3)).

One of the advantages of qualitative research over quantitative research is the use of open-ended and semi-open-ended questions, which contributes to the exploratory nature of this research. Such questions help participants to express their experiences in their own words. Such questions are rich and explanatory and have not been predicted by the researcher ([Hajjari, 2011](#_ENREF_11)).

In qualitative studies, the study tool is the questions that are asked during the interview. Qualitative interviews are flexible and vary based on the data obtained during research.

**2. Conner and Davidson Resilience Scale**

[Connor and Davidson (2003)](#_ENREF_8) developed the Connor & Davidson Resilience Scale in 2003 to measure individual resilience. They have prepared and standardized this questionnaire by reviewing the research sources of 1979-1991 in the field of resilience. Evaluation of psychometric properties of this scale was performed in six groups, including the general population, patients referred to the primary care ward, psychiatric outpatients, patients with generalized anxiety disorder, and two groups of patients with post-traumatic stress disorder has taken. The Connor & Davidson Resilience Questionnaire has 25 statements scored on a Likert scale between zero (completely incorrect) to four (always correct). Those with a score of 50 or higher have resilience experience. This scale has been standardized in Iran by [Mohammadi (2004)](#_ENREF_25). He obtained the Cronbach's alpha coefficient of the Conner and Davidson Resilience Scale of 0.89 and the scale's validity by correlating each item with a total score between 0.41 and 0.64.

Extracting the data

Due to the nature of the present study, the researcher used a descriptive phenomenological approach with a seven-step collage analysis method to analyze the data. The seven steps of the collage approach are:

**Step 1**

In the first step, at the end of each interview and note-taking, recorded statements of the participants were repeatedly listened to, and their statements were written word for word on paper. Then, to understand the interviewees' feelings and experiences, the text of the statements was read and reviewed several times.

**Step 2**

In the second stage, after studying all the participants' descriptions, the following information with the meaning and statements related to the phenomenon in question was underlined. In this way, essential sentences directly related to resilience experience were identified. This step is similar to open coding in grounded theory, and by analyzing the text line by line, the data were carefully examined, and the meanings and categories were discovered.

**Step 3**

In the third step, which is to extract the concepts of the formula, after identifying the essential phrases of each interview, a concept was extracted from each phrase that expresses the meaning and the fundamental part of the individual's thinking.

**Step 4**

After extracting the codes, according to the fourth step of the collage, the researcher carefully studied the concepts and categorized them based on their similarity. In this way, thematic categories of concepts were formed.

**Step 5**

In the fifth step, the researcher combined the results for a comprehensive description of the phenomenon under study and formed more general categories. In other words, based on the final rooting of the similarity of the sub-themes, the main themes emerged.

**Step 6**

In step 6, a comprehensive description of the phenomenon under study was provided (as clearly and unambiguously as possible). At this stage, the findings were reduced to remove redundant, inappropriate, and exaggerated descriptions of the entire section, and this effort were made to emphasize the underlying structure.

**Step 7**

The final stage of validation of the findings was done. Following the analysis of each interview, the participant was asked about the accuracy of the meaning received from the interview. In the end, the results were presented to the participants, and their opinion on the accuracy of the extracted meaning was received. Participants matched and evaluated the extracted results with their statements.

**Findings**

The main themes and sub-themes revealed from the data analysis Main theme’s Sub-themes Individual and psychological strategies for acquiring problem-solving and conflict-solving skills Acquire effective and efficient coping skills Gaining experience from the lives of others (modeling) Patience and perseverance in the face of difficulties

Hopeful foresight and that the era will be short. Understanding and helping the spouse Empathy and mutual understanding of the spouses

Involvement of spouses in matters related to their children and resolving current and specific issues of life in the days of Corona Intimacy between spouses

Women's support networks a supportive family in a limited circle.

Receive specialized support for counseling and psychology if needed and continuous communication with this department to adapt and prevent future problems.

Religious beliefs Reliance on God and the use of religious teachings.

The consequences of resilience

Acquisition and promotion of personal-spiritual and social capabilities and abilities

Hope to improve your life again and make the most of these experiences.

Promoting psychosocial health in various dimensions.

Experts have listed various factors such as class and economic factors, values ​​and value change, education, gender, age and life span, social capital, and cultural capital as the most critical factors influencing lifestyle.

**Values ​​and value change**

Many researchers consider values ​​as the primary source of lifestyle formation and emphasize that understanding the structure of individual values ​​is the main task to understand people's lifestyles. Supporters of this view believe that a person's current values ​​determine his or her lifestyle. On the other hand, the emergence of some lifestyles is also the result of value changes in society and the efforts of individuals to adapt to the new value system.

Kyocanter believes that apart from the classical life, which has a dominant class aspect, other lifestyles are the result of a disruption of value cohesion) Razavi2018).

These dualists believe that in a society in transition, the formation of lifestyles around the collective action strategy of the social movement is the only reliable way to achieve value cohesion;

This path is proposed for those who have political and social awareness. Although the prevailing view is that Value change effectively creates lifestyles, but it can be related to value change and relationships from another perspective.

It looked at lifestyles. Value change can change instead of creating a new lifestyle.

Available in lifestyle principles. One of the most prominent examples of this view is the emergence of the ideal of democracy and

Equality and the overlap of the hierarchy of talents in society. Theorists such as Peterson believe that an eclectic lifestyle has emerged.

An example of the feedback of working women in the field of resilience in the time of Corona.

We must learn to solve our problems in times of crisis, the situation may become longer and more difficult.

As a child, I learned patience and tolerance from relatives' houses, especially my mother, and it will give positive results.

I hope for the future and everything will be fine.

If it wasn't for my wife's cooperation and companionship, all this tolerance would probably not have been achieved.

I am comfortable with my wife and I can talk to her without fear.

My family always cares about me and does not leave my back in difficult times.

Throughout my life, I believed in counseling trying to use it to achieve a certain peace.

Trusting in God and having spiritual conditions gives me special comfort. I do not lose my faith in the most difficult situations.

We must believe in ourselves, if the conditions are calm, we will solve the problems.

Corona unintentionally created good experiences for us.

During the corona period, I realized how strong they are and how I can handle household and organizational work for me.

**Findings**

**Main themes and sub-themes revealed from data analysis**

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| **Main themes** | **Sub-themes** |
| Individual and psychological strategies | Acquiring problem solving and conflict resolution skillsAcquiring effective and useful coping skillsGaining experience from the lives of those around you (role modeling)Patience and perseverance in the face of problemsA hopeful outlook and that the time will be short. |
| Understanding and helping the wife | Sympathy and mutual understanding of spousesSpouses' participation in matters related to their children and solving current and special life issues in the days of CoronaIntimacy between spouses |
| Women's support networks | The presence of a supportive family in a limited circleReceiving specialized counseling and psychological support if needed and continuous communication with this department for greater compatibility and prevention of future problems. |
| religious beliefs | Trusting God and using religious teachings. |
| Implications for resilience | Acquiring and improving personal-spiritual and social abilitiesHope to improve life again and many uses of these experiences.Promotion of mental-social health in different dimensions. |

**Acquisition of problem-solving skills**

Problem-solving skills is one of the significant actions of the mind in which a person discovers the relationship between past experiences and the problem, and according to it, the way Adopts the appropriate solution. This skill helps the person find the right solution to solve the problem, identify the various possibilities around him, and use it to make the right decision and solve the problem in different situations. Lack of problem-solving skills can lead to maladaptation and even behavioral problems in the family. One of the things most participants mentioned in their statements was problem-solving skills. Concepts such as proper crisis management, choosing the right solution, decision-making power for the problem, the ability to plan and manage the bottleneck led to the extraction of the theme of problem-solving skills.

**Acquisition of effective coping skills**

This theme includes stubbornness and resistance to problems, study, awareness-raising, life skills training, seeking effective social support, having a source of internal control, and engaging in sports activities. They have used it to cope with problems and prevent negative consequences, and they have learned how to deal with stress effectively.

Gaining experience from the lives of others (modeling): In this sub-theme or sub-theme, it should be said that the researcher, according to the participants, concluded that most of these people use dimensions such as modeling parents in similar experiences. From the experiences of others, they pointed to appropriate role models and gaining comfort in a group with joint pain, which shows that in addition to seeking personal and psychological support for themselves, women seek and gain experience through people who have experienced similar situations. To be able to manage stressful situations by observing others and learning.

**Patience in the face of problems**

In this sub-theme, the researcher concluded that most of these people have dimensions such as patience in the face of problems, acceptance of the status quo, acceptance of problems as part of life, adaptation to existing conditions, and postponement And desires pointed out that it shows that women who have this protective feature, when dealing with stressful life problems and events, try to have a positive attitude towards that stressful factor, and through this feature Negative ones, such as depressive symptoms, protect themselves, which in turn makes them better able to cope with new situations.

**Hopeful foresight**

In this sub-theme, most women mentioned hopes for the future, predicting future success, optimistic and realistic goals, futuristic and progressive goals, striving to achieve the goal, and not being discouraged. This shows that one of the factors that can improve mental functions in the form of thinking, mood, and behavior and increase the ability to deal with emotional and psychological problems is hopeful foresight. Hope for the future is not just about enduring harm or threatening situations. It is not about being passive in the face of dangerous situations. It is about being an active and productive company in your environment. Understanding, companionship, and empathy of husbands: Most women in dimensions such as understanding and understanding between husbands, understanding each other's differences, enduring hardships despite husband support, friendly and intimate relationships, husband's attention and appreciation, and frustration and discouragement, if the husband does not support, they have pointed out that it shows the vital role of accompanying the spouse in enduring hardships and problems.

**Intimacy between spouses**

Most women, in dimensions such as free expression of positive and negative feelings and thoughts, pain and heartache together, love and affection between husband and wife, and constructive dialogue and the role of these concepts in the emotional balance of husbands and characteristics and Mental states of family members pointed out. Understanding social support can prevent adverse effects. In other words, perceived social support includes the mother's perception or experience of being loved, cared for, respected, and part of a social network with contributions and commitments. Count.

**Existence of a supportive family**

Working women refer to their experiences of family support and family networking. They pointed to the full support of family members, unconditional acceptance of each other in the family, the responsibility of members towards each other, empathy and love between family members, and family support in problems, which shows the presence and support of the family, is one of the main factors of resilience.

**Receiving specialized support**

In this study, all women want happiness and the psychological health of their families. To achieve this demand, they use support resources. One of these resources is professional and psychological support. Through this, women try to achieve valuable and effective strategies.

**Religious beliefs of working women**

All participants in this study consider religious beliefs as one of the essential factors in enduring hardships and say that having religious faith and beliefs, tolerating people in the face of hardships, Increases and helps them overcome challenges in life changes. Religious beliefs act as a support and support for more remarkable adaptation.

**Resilience Outcome**

Acquisition of mental and psychological capabilities

Positive adjustment removes the individual from loneliness, depression, failure, and isolation. Tolerance is a factor in women's ability to reverse adverse outcomes positively and help maintain their health. High levels of resilience help a person use positive emotions and emotions in order to get over unpleasant experiences and return to the desired state.

**Discussion**

The present study examines the lived experience of resilience-based working women with children with psychological problems caused by quarantine. Results showed that tolerance enables people to search for resources that allow people to grow to follow stressful life events. Given these conditions, it is clear that a person can achieve positive effects under certain conditions if tolerated (Breivik & Olweus, 2006). The participants in this study all expressed their tolerance of the hardships caused by quarantine and in their experience of resilience, such as accepting the current situation, patience in the face of problems, accepting problems as part of life, but short-term, adapting to They mentioned the existing conditions and the postponement of desires and wishes.

At the same time, the results showed a reciprocal and two-way relationship between the elements and themes that make up resilience, which have a reciprocal and rotational relationship that, together in a reciprocating motion, form the structure of resilience. For example, individual and communication dimensions interact so that the acquisition of practical problem-solving and coping skills leads to a constructive relationship with the spouse in affairs and forms a better relationship with the spouse. Reciprocally, the mutual understanding and support of the husband enable women to cope and hopeful foresight of life. There is a rotational and reciprocal relationship between religious beliefs and resilience. One of the themes that the participants mentioned in their experience as both a factor of resilience and a cause of resilience is religious beliefs, which means that heart belief in the existence of God is trust. God and religious teachings have been mentioned as one of the most critical factors in the experience of resilience, and in return, this experience of resilience has led to the spiritual return of some participants. In the same way, other dimensions are interrelated and form a resilient structure in women in a rotational motion. Resilience means for the participants of this research, an active process of enduring in the face of problems and difficulties and the ability to return to the first state. Resilience enables one to consciously re-evaluate adverse conditions to find a window of hope to find meaning in life. Resilient people can provide better living conditions through individual and psychological strategies. They develop problem-solving and conflict-solving skills, strengthen resilience by observing and modeling the lives of friends and neighbors, and, through coping skills, abilities, cultivate the necessary information, attitudes, and skills. Resilience is sometimes not due to individual and psychological characteristics but to support networks such as family and the use of professional and psychological support. Social support often refers to the help of influential people living in times of crisis and need. Therefore, for the participants, the support of the spouse and the early families is considered a powerful source of external confrontation. Spouse support and participation mitigate the adverse effects of stress through emotional attention, help, and information. Also, according to the Iranian-Islamic culture, most of the participants used spiritual forces and Islamic resources. Factors in spirituality such as trust and patience in disasters played the role of a defensive shield, caused cohesion, and prevented early burnout. In which people increase their resilience and adaptability to the problem and, more importantly, the consequences and achievements that lead to psychosocial changes, the acquisition of spiritual capabilities and abilities, and the restoration of hope and goals. Life is the spiritual return of the participants and promotes their mental and social health. In general, it can be said that the consequences of resilience are "empowerment," which means positive consequences for the individual and emphasizes the development of abilities, natural talents, competence, and competence of the individual to create a successful and positive adaptation in interaction with the outside world. The word positive refers to the elimination and correction of defects and shortcomings and planning to increase the ability of the individual. In this approach, there are three methods: 1- Reducing the person's injuries and problems (risk-based approach), 2- Improving or increasing the ability and positive and valuable cases in life (methods based on valuable and valuable cases) and 3- Changing And increased adaptive abilities (by providing the necessary arrangements for social skills training) were used for resilience programs (Masten, 2001). General conclusion: For the participants of this research, resilience was an active process of surviving against problems and hardships and the ability to return to the first state. Because resilience enables people to consciously re-evaluate adverse conditions to know They find a means of hope to find meaning in life. Resilient people can provide better conditions for life through individual and psychological strategies. They develop problem-solving skills, build resilience through observing and modeling the lives of friends and others, and through coping skills, abilities, and information, They develop the necessary tendencies and skills. Resilience is sometimes not due to individual and psychological characteristics, but due to the existence of support networks such as family, school, and specialized and psychological support. Social support often refers to the help of important people in crisis. Therefore, for the participants, the spouse's support is considered as a powerful external coping resource. The spouse's support and participation moderate and weakens the adverse effects of psychological pressure through emotional attention, assistance, and providing information, as was the case in the present study. According to cognitive theorists such as Ellis, Beck, and... resilient people should be involved. / Don'ts and absolutists are not considered and they avoid personalization of affairs and arbitrary inferences because they consider mental capabilities and problem-solving skills as the best solutions in difficult life situations.

From the point of view of empowerment, it is possible to emphasize the development of capabilities, natural talents, competence, and competence of a person to create a successful and positive adaptation in interaction with the outside world. Resilient people can provide better conditions for living because they develop problem-solving skills and are more resistant to stress.

In addition, the meaning of life expectancy can be associated with concepts such as regaining life goals, reviving hope, returning positive emotions, changing interpersonal interactions, and performing enjoyable activities.- Specialists and consultants who are in contact with families, especially women in their consultations

Pay more attention to the resources of the resilience of these people and make them stronger characters by highlighting these resources so that they have the strength to deal with crises.

- Resilience education programs for parents and especially women at the level of schools, workplaces, counseling centers, and through mass media and social organizations should be prioritized in preventive and positive activities. Because according to the experts' emphasis on the learnability of various resilience skills, by teaching these skills to people, the level of general health and psychological well-being can be increased.

- Specialists should understand and understand the meaning of the resilient behavior of working women and their lived experience of resilience

and develop their competencies through interventional and therapeutic methods

give

- Due to the systemic functioning of the family and the fact that all family members interact and confront each other,

Therapeutic interventions should be done for all family members instead of one family member.

**Limitations and Implications**

There are limitations in this research. Since this research was conducted in a cross-sectional sample, causality cannot be inferred from it. Also, due to the non-random sampling method available, the generalization of the results should be done with caution.

**Compliance with Ethical Standards**

**Ethical Approval:** The presenters of this research, while committing for being aware and observing all the provisions of the "National Guide to Ethics in Publishing Research Works", are responsible for any kinds of research that are misconducted after the research.

**Informed Consent:** Subjects participated total satisfaction consciously.

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**References**

Alizadeh, H. (2012). Psychological resilience (mental well-being and behavioral disorders). Arasbaran Publications.

Amato, P. R., Loomis, L. S., & Booth, A. (1995). Parental divorce, marital conflict, and offspring well-being during early adulthood. Social Forces, 73(3), 895-915.

Amiri Moghadam, A. (2019). A study of the lived resilience experience of mothers of children with ADHD Shahid Chamran University of Ahvaz].

Anderson, R. M., & Funnell, M. M. (2005). Patient empowerment: reflections on the challenge of fostering the adoption of a new paradigm. Patient education and counseling, 57(2), 153-157.

Baghi, V., & Baghban Karimi, E. (2018). Predicting the quality of life of patients with hypertension based on resilience and social support. Iranian Journal of Psychiatric Nursing, 5(6), 24-30.

Breivik, K., & Olweus, D. (2006). Adolescent's adjustment in four post-divorce family structures: Single mother, stepfather, joint physical custody and single father families. Journal of Divorce & Remarriage, 44(3-4), 99-124.

Carver, C. S., & Scheier, M. F. (2002). Optimism. In Handbook of positive psychology. (pp. 231-243). Oxford University Press.

Connor, K. M., & Davidson, J. R. (2003). Development of a new resilience scale: The Connor‐Davidson resilience scale (CD‐RISC). Depression and anxiety, 18(2), 76-82.

Fraser, E., & Pakenham, K. I. (2009). Resilience in children of parents with mental illness: Relations between mental health literacy, social connectedness and coping, and both adjustment and caregiving. Psychology, health & medicine, 14(5), 573-584.

Gau, S. S.-F., Chiu, Y.-N., Soong, W.-T., & Lee, M.-B. (2008). Parental characteristics, parenting style, and behavioral problems among Chinese children with Down syndrome, their siblings and controls in Taiwan. Journal of the Formosan Medical Association, 107(9), 693-703.

Hajjari, S. (2011). A study of parents' lived experience of parenting after divorce Shahid Chamran University].

Hosseinpour, M. (2018). The role of psychological capital in preventing people from becoming addicted. Social Health and Addiction Quarterly, 4(16), 25-62.

Izadi Avanji, F. S., Adib Hajbaghery, M., & Afazel, M. R. (2009). Quality of sleep and it's related factors in the hospitalized elderly patients of Kashan hospitals in 2007 [Research]. Feyz Journal of Kashan University of Medical Sciences, 12(4), 52-60. <http://feyz.kaums.ac.ir/article-1-686-fa.html>

Karami, J., Moradi, A., & Hatamian, P. (2017). The Effect of Resilience, Self-Efficacy, and Social Support on Job Satisfaction Among the Employed, Middle-Aged and Elderly [Research]. Salmand: Iranian Journal of Ageing, 12(3),300-311. <https://doi.org/10.21859/sija.12.3.300>

Khosla, M. (2017). Resilience and health: Implications for interventions and policy making. Psychological Studies, 62(3), 233-240.

Kiani Dehkordi, M., Rafiei, H., Samiei, M., Karimilou, M., Doulatshahi, B., & Bina Zadeh, M. (2005). Resiliency against substance dependency in the male offspring of dependent and non-dependent fathers. HAKIM RESEARCH JOURNAL, 8(2), -. https://www.sid.ir/en/journal/ViewPaper.aspx?ID=48972

 Kordestani, D., & Ghamari, A. (2018). Comparing the Resilience, Life Style and Life Quality Among Cardiovascular Patients and Normal Peopel [Research]. scientific magazine yafte, 19(5), 71-80. <http://yafte.lums.ac.ir/article-1-2429-en.html>

Kwok, S., Leung, C., & Wong, D. (2014). Marital satisfaction of C hinese mothers of children with autism and intellectual disabilities in H ong K ong. Journal of intellectual disability Research, 58(12), 1156-1171.

Laverty, S. M. (2003). Hermeneutic phenomenology and phenomenology: A comparison of historical and methodological considerations. International journal of qualitative methods, 2(3), 21-35.

Lewis, M. (2002). Child and adolescent psychiatry: A comprehensive textbook, 3rd ed. Lippincott Williams & Wilkins Publishers.

Luthar, S. S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. Child development, 71(3), 543-562.

Mahdavi Kani, M. S. (2008). Religion and Lifestyle. Imam Sadeq University

Masten, A. S. (2001). Ordinary magic: Resilience processes in development. American psychologist, 56(3), 227.

Masten, A. S., & Monn, A. R. (2015). Child and family resilience: A call for integrated science, practice, and professional training. Family Relations, 64(1), 5-21.

Mohammadi, M. (2004). Investigating the factors affecting resilience in people at risk of substance abuse University of Social Welfare and Rehabilitation Sciences, Tehran].

Mohammadpour, A. (2010). Qualitative research method against methods, steps and practical procedures in qualitative methodology (Vol. 2). Sociologists.

Moustakas, C. E. (1994). Phenomenological research methods. Sage Publications, Inc.

Naghavi, A. (2015). Marital Conflicts And Social Obstacles Of Help-Seeking Behavior From The Point Of View Of Iranian Immigrant Women Living In Australia. SOCIOLOGY OF WOMEN (JOURNAL OF WOMAN AND SOCIETY), 6(2), 41-66.

Owens, E., & Parsons, R. D. (2018). Crisis and Trauma Counseling: Unique Forms of Helping (Vol. 1st Edition).

Razavi, V. s. (2018). Effectiveness of resilience training on stress and psychological well-being of nurses in a military hospital in Kerman. EBNESINA, 19(4), 38-44.

Reich, J. W., Zautra, A. J., & Hall, J. S. (2010). Handbook of adult resilience. Guilford Press.

Rostami, A., Noruzi, A., Zarei, A., Amiri, M., & Soleimani, M. (2008). Exploring the relationships between the burnout and psychological wellbeing, among teachers while controlling for resiliency and gender [Research]. Iran Occupational Health Journal, 5(3), 68-75. <http://ioh.iums.ac.ir/article-1-151-fa.html>

Rutter, M. (2012). Resilience as a dynamic concept. Development and psychopathology, 24(2), 335-344.

Sadri Damirchi, E., Bashorpoor, S., Ramezani, S., & Karimanpour, G. (2018). Effectiveness of resilience training on anger control and psychological well-being in impulsive students. Journal of School Psychology, 6(4), 120-139.

Sardarzadeh, F., Jian Bagheri, M., & malake, F. M. (2016). The role of resilience in reduction of job stress and job burnout among employees of satellite project of Iranian Offshore Oil Company [Applicable]. Shenakht Journal of Psychology and Psychiatry, 3(4), 61-77. <http://shenakht.muk.ac.ir/article-1-277-en.html>

Shahyad, s., & Mohammadi, M. T. (2020). Psychological Impacts of Covid-19 Outbreak on Mental Health Status of Society Individuals: A Narrative Review [Review]. Journal of Military Medicine, 22(2), 184-192. <https://doi.org/10.30491/jmm.22.2.184>

Skodol, A. E. (2010). The resilient personality. Handbook of adult resilience, 112.

Starks, H., & Brown Trinidad, S. (2007). Choose your method: A comparison of phenomenology, discourse analysis, and grounded theory. Qualitative health research, 17(10), 1372-1380.

Tajikzadeh, F., Sadeghi, R., & Raeeskarimian, F. (2016). The comparison of resilience, coping style and pain catastrophizing behavior between cancer patients and normal people. Journal of anesthesiology and pain (persion), 7(1), -. <https://www.sid.ir/en/journal/ViewPaper.aspx?id=531937>

Torabi, F. (2021). Relationship and comparison of lifestyle and marital satisfaction in working and housewives in Tehran Al-Zahra University].

Torgalsbøen, A.-K. (2012). Sustaining full recovery in schizophrenia after 15 years: does resilience matter? Clinical schizophrenia & related psychoses, 5(4), 193-200.

Walsh, F. (2006). Strengthening family resilience, 2nd ed. The Guilford Press.

Werner, E. E. (1995). Resilience in development. Current directions in psychological science, 4(3), 81-84.

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