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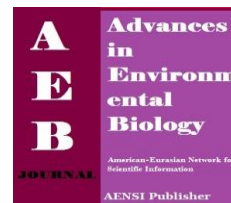
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The Intermediate Role of Gender in the Impact of Attachment to God on Resilience and Mental Health of Training Retarded Children's Parents

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ABSTRACT

The present study aimed to examine and investigate the intermediate role of gender in effect of attachment to God on resilience and mental health of training retarded children's parents. In this correlating study, 296 individuals who had training retarded children were selected by applying proportional random classification method of sampling from the considered population and based on Morgan tables. For gathering data, three kinds of questionnaires that are attachment to God, resilience, and behavior symptoms check list (SCL- 90-R) were used. By employing statistical t-tests, regression analysis and correlation quantity in two parts, with and without sexual control variance, results of the current study were obtained. They revealed that mothers of training retarded children had less resilience and mental health compared to their fathers. attachment to God was positively correlated with parents' resilience and mental health. Moreover, in dimension of secure attachment to god, this correlation indicated a significant and positive relation. In anxiety and avoidance dimension, it was negatively and significantly correlated with resilience and mental health; however, sexuality had no significant and determining role in this regard. These results are correspondence with present theories, samples and researches in this field. Therefore, regardless of sexual differences and by applying spiritual treatment attitudes, particularly rich Islamic treatments, and changing individuals' attachment to God quality, we probably can improve and develop individuals' resilience and mental health in confronting with difficulties of the modern industrial life.

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INTRODUCTION

The presence of exceptional children in the family and appearance of their special needs is always significant and controversial issues. Today, many families suffer to having exceptional and the mentally retarded children, having a child with mental retardation may cause diverse problems for family members, because the effect on the quantity and quality of family interaction causes confusion and increasing parental stress, and thus it harms the family revenue and the mental health of its members [1,2,3] Birth of a disabled child, brings feelings as same as the feeling that people experience after a [3]. These features have been reported in families with exceptional children. However, in many cases, children with disabilities and mental retardation are in the home and most of their time is interacting with family members, especially their mothers. And presence of these children's make family's performance Improper and reduce mental health of parents, especially the mother's mental health because of many behavioral, emotional problems and special needs [4,5,6]. Although presence of mentally retarded child is as a potential cause of severe stressful, constantly threatening the mental health of family members, but evidence shows that people do not have the same reaction to stressful situations [7,8] one of the reasons for these different responses is the concept of resilience [9,10,11,12].

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Based on studies between resiliency and psychological problems in patients exists negative and significant relationship, these structures can be used as the interface between mental health and many other variables. And the promotion of resilience can increase the resistance in the face of factors that can be caused by psychological problems [7,8,9]. Mental health is a basic need; it is a fair and reasonable ability to have harmonious relationships with others, personal and social improvement of environment, conflict resolution and personal desires reasonably. In other words, mental health, power, and action against a variety of life experiences are flexible and meaningful [13].

In general, research has shown that one of the variables related to mental health, resiliency or cope with their hardships [6,5,12,10,14]. Abiding people return to a normal level of function after facing difficult life conditions, but some people are even promoted of the past after encountering failures, tragedies and difficulties. As a whole, abiding people accept the reality of life readily and believe that life is meaningful. This belief is backed usually by their values and resulted in hard work in a meaningful way worthy goal and gets. Working hard help this people to face the tense changes and convert difficulties into lucrative opportunities. Desired properties in hard work are commitment, control and challenging. It is the purpose of undertaking the person would prefer to retain of such a scene dealing with difficult situations. Instead of leaving the scene and the people involved in that situation would help in resolving difficulties. Controlling purpose, the person may believe his ability to influence the outcome of events and purpose of challenging is the person seeks to create opportunities for themselves and others grow in confronting challenges instead of blame fate. In fact, resilience is a phenomenon that is derived from natural human adaptive responses and despite the deal with serious threats such as having an exceptional child; it enables parents in achieving success and overcoming on problems [7].

As mentioned above, the resilience means to deal with the problems of adverse events and flexible response to the pressures of daily life that is different from one to other person and can be expected to grow over time, or shortcomings [15].

The presence of a mentally retarded child in the family is as a potential stressful couple considering gender differences, possibly will follow different perceptions and reactions from each of the parents (father and mother). Especially the retarded child with a disability proceeding is serving to take his life in a home environment and in relation to the mother. On the other hand, women are more emotional and psychological variability based on the emotional differences between men and women, women suffer 50 percent more than men from neuroticism and anxiety and also have more negative emotions in everyday life and women almost are depressed twice of men [16,17].

Evidence also suggests a relationship between the problems of children who have disabilities and there are Parental stress and psychological problems such as depression and anxiety [2,3]. So it looks like the evidence mentioned including; gender differences, parental Understanding and relationship of retarded children with their mothers in a family environment, Parents (father and mother) of mentally retarded children would experience Resiliency and consistency and result in different psychological stress of having mentally retarded children, Thus improving resiliency is an important goal for prevention and treatment [7]. Nowadays attachment to God is considered one of the variables in the resiliency and tolerance for life's challenges, such as unwanted problems and chronic. Caused by having a child with mental retardation in the spectrum of the parent [18,19]. Although attachment theory and resilience theory are developed each as a separate component of knowledge but they should be considered as complementary concepts and they should develop and strengthen [10]. Attachment is as an important factor in minimizing risk and maximizing resiliency for children in need of care and secure attachment to parents with children of the factors affecting the resilience [11]. Secure attachment is as a factor for resiliency, which are formed early in life and it protected of health in the face of danger and affliction [12]. Attachment has a significant contribution as one of the structural transformation - personality in shaping communication patterns of adult. According to Balby's theory, people are born with a mental system - biological which is named the attachment behavioral system. This system has adaptive value and leads person to maintain closeness and attachment to adjoining or pictures of important people - those who children can stay close in threatening situations to increase his chances of survival fertility and compromise. The purpose of this system is the child achieves a sense of real safety and support or perceived disruption of close interaction with the attachment figure [20,21].

Balby's attachment theory is based on two fundamental assumptions: 1 - Watch welcoming and accessible must provide a secure base to children. 2 - A relationship based on lack of bond is internalized and acted as a mental model that is based on friendship and love. Attachment style is relationship between two people not a trait that is granted a mother to her child. This is a two-way path, and child and watchful also need to be responsive and sensitive. Although the roots of adult attachment patterns are in childhood attachment relationships but it is evident that the concept and structure of adult attachment differs with childhood attachment. Adults can be divided into three groups of adult based on attachment styles of secure, avoidant and

Anxiety. Safety adults feel close with others they able to trust others and to know himself lovely and worth, but ambivalence or anxiety adults, they have variable behaviors and emotions to attachment and they are overly dependent, they are often worry that left and they fail at love more than other people. Avoidant adults tend to

feel less committed than others. And consider others to be unreliable but they suppose themselves good toward others [22].

The concept of attachment is widespread, and the relationship of parent - child relationship and also adults with each other covers the religious realm [18], accordingly, there is also a degree of difference in love and close relationship that one would experience with attachment figures in relationship with God [23]. The relationship between the person and God perceived as attachment relationship, it is beyond the limits of the physical presence [24].

A major factor in the religiosity of the human need to connect with God and this factor is the relationship with God which causes powerful and health of religious person [18]. Religious beliefs have a significant impact on the family's strengths, [25]; believe in God Cause meaningful and purposeful attitude to the whole of existence, Lack of belief and faith in God leads a person don't has integrity and peace and this causes weakness and the source of many conflicts in family life. Indeed God has a situation as a source of support and attachment that allows considers him to qualify as an attachment position. The characteristics of this source attachment is a safe havens that the person can refer to it in life problems [26], it Always is available and comrade to human, Despite their physical presence is always felt his presence and the other, person knows that God is the basis of safety because He's able to understand everything and knows all things So the believer felt the power and security from there he [23]. Research conducted in the field of mental health as well as the relationship between attachments to God verifies the claim [18,27].

Given the above findings and theories, God is absolute attachment figures and people may have subject to various factors, avoidant attachment style, anxiety and immunity to God's. Individual differences in attachment to God can conceptualized and measured as individual differences in adult attachment and childhood attachment history. The secure attachment to God, one's belief is that God is accessible and responsive, in avoidant attachment to God, God cannot be far from achievable and attachment anxiety, God is accessible and responsive to the uncoordinated [24]

People with secure attachment to God, less anxiety, depression and physical illness, lower and psychological adjustment have life satisfaction more than those with insecure attachment [24]. Insecure attachment is associated with higher anxiety [28]; secure attachment to God is associated with better emotional adjustment [27], attachment styles with secure patterns of psychological adjustment and mental health are better than avoidant attachment style, Compared to attached avoidant individuals, individuals with secure attachment to God know him closer, more loving and less controller to themselves [21,29], attachment avoidant people are less religious commitment and attachment anxiety individuals show extremist religious behaviors [30].

Based on what was said, birth and presence of mentally retarded children caused special needs in the family and endanger the mental health of parents, especially mothers that have different role than the role of fathers in families and they spend most of their time in the family environment, in relation to this child. Moreover, based on the evidence mentioned, has been reported that mood and emotional swings in pressures of life among women is more than men. Accordingly, it is expected that a secure attachment to God as a variable affecting could through giving the meaning to people's lives, causing resiliency, and adaptability in the face of difficulties, increasing feeling of work hard deal with unwanted conditions and bound to this spectrum of the parent and prevent parental distress and promote mental health and the changing role of gender as a confounding variable, possibly linked to different components of attachment to God (avoidance, anxiety, safely) on resiliency and mental health will predict among parents of mentally retarded children. Little research especially is done in Iran, on the subject of attachment to God and its role on resiliency and mental health of parents of mentally retarded children. This study sought to investigate the role of these structures in relation to the parents of mentally retarded children by the made tests to measure attachment to God for Muslims. It is hoped that in the future, the results of this study in addition to fill the gap in this field to be effective in counseling centers and health clinics offering services to clients in the approach especially for parents with exceptional children.

In general, the aim of this study were educable, to evaluate the effect of gender in mediating role of attachment to God on resiliency and mental health of parents mentally retarded children.

2. Method:

This study was conducted in the form of correlation research. The populations of the study were parents with at least one of educable mentally retarded children in the city of Zahedan. Educable mentally retarded children to be applied a group of retardation - mental that have IQ of 50 to 75. They were 6 to 12 year in terms of the age range. Based on the diagnosis assessment and education experts were enrolled in special schools, the total number of students in educable mentally retarded population studied was 612 people in six schools and three grade students. However, the study population size in 1224 was the parent of educable mentally retarded child and sample size of 297 patients was calculated according to Morgan. Sample group were selected based on stratified random sampling proportional method from schools and sections. Thus sample size was selected by the ratio of the sample of study at each level and school and the selection of subjects for this study were randomly. The age of sample group was 21 to 67 year, the mean age of participants in this study was 21/39 and

standard deviation was 16/7. Three different questionnaires were used to collect data. Attachment to God scale has been prepared by Ghobari and Maynr (2008). The questionnaire contained 52 questions and three subscales; secure attachment was avoidant and anxious attachment. Each of these test questions presents a brief description of the attachment relationship to God. Examining the degree of compliance with the conditions and experiences in relation to God is defined on a 7-point Likert scale from 1 (strongly disagree) to 7 (strongly agree) grading. This scale prepared in 2008 by the Ghobari and Maynr to assess their attachment to God and Standardization, reliability and validity of the Muslims are estimated. This test has high validity and Cronbach's alpha coefficient is estimated for the 95/0. In this study, the Cronbach's alpha coefficient of this questionnaire was estimated to be 97/0. Correlation of this questionnaire with attachment to God of Rowatt and Kirkpatrick (2002) was estimated to be 0.81 and the correlation of the safety aspects was 87/0 and the correlation of the avoidance was estimated to be 85/0 and anxiety was 73/0.

The other tools used by Connor and Davidson [7] were (CD_RISC) to identify the Resilience Scale; this scale contain 25-item with five options (never, rarely, sometimes, often, always). And it can distinguish non-abiding from abiding individuals in clinical and non-clinical groups and can be used in clinical and research situations. Attari, Abbas and artist [25], correlated of each grade with the total scores, except for (item 3) are reported between 41 to 64 percent of the adjusted coefficients. While the internal consistency of the questionnaire is reported using Cronbach's alpha of 0/89. Cronbach's alpha coefficient in this study was estimated to be 95/0. Correlations of the questions varied from 30 to 70 percent. The third tool used was new revised checklist of symptoms of mental disorders (SCL-90 -R), the original form of the questionnaire was planned by Derogatis, Lipman and Covi (1973), showing the psychological aspects of physical and mental patients, it was planned To illustrate the psychological aspects of physical and mental patients, This questionnaire has been revised by Derogatis, Rickles and Rock in (1976), And the final form have been prepared by the name of the revised list of psychiatric symptoms (R90SCL).

Rezapour [31], the reliability coefficient of this questionnaire have been reported between 62 to 91 percent using the bisection method, between 62 to 91 percent using Cronbach's alpha. The data collected in this study were analyzed using spss.w.15 software and correlation coefficient and t-test.

Statistical methods to compare the correlation and follow equation were used in order to comparison the correlation between attachment to God in dimensions of (avoidance, anxiety and safe) by the resiliency and mental health of parent and control of gender variables. $Z = \frac{Z_{r1} - Z_{r2}}{\sqrt{\frac{1}{n_1-3} + \frac{1}{n_2-3}}}$

Where $Z_{r_i} = \frac{1}{2} \ln \left(\frac{1+r_i}{1-r_i} \right)$ and r_i is correlation between two variables in the Group (i). In this formula, Z normally distributed.

3. Analyses and Result:

In this study, 50% of subjects were fathers and 50% were mothers of the educable mentally retarded children in terms of demographic characteristics variables. The highest employment rate (5/39%) is related to employee people and the lowest rate of employees (4/3%) is related to retired people. The most frequent terms of education level of subjects was (5/35%) for level of diploma and minimum frequency was (7/5%) of the parents illiterate (Table 1).

Table 1: Demographic data and descriptive case study.

gender	Level of education	percent	job	percent	frequency
male	Illiterate	5/7	Unemployed	30/1	148 subjects
	High school	15/9	employee	39/5	
	Diploma	35/5	Self-employed	20/6	
femal	Art of association	17/6	labor	6/4	148 subjects
	M.A & PhD	25/3	retired	3/4	
Sum	Total	100	Sum	100	296

The results of study of mental health among parents of educable mentally retarded children showed that the averages of mental health among mothers of mentally retarded children are more than their fathers in all aspects. And statistically there are significant differences ($P < 0.001$) between the mental health of fathers and mothers of mentally retarded children at all scales. While the mental health questionnaire was used in this study, increasing the score average of each questionnaire is meant to reduce mental health. So fathers had better mental health than their mothers and this difference was statistically significant (Table 2).

In the comparative study of resilience of mothers and fathers was observed that the rate among women is higher than fathers of mentally retarded children. And statistically, the differences is significant ($p < 0.001$) (Table 3).

Table 2: Comparison of mental health among parents of mentally retarded children according to gender.

<i>Mental health aspects</i>	<i>Level of significance</i>	<i>Standard deviation</i>	<i>average</i>	<i>Gender</i>
Somatic complaints	294=df9/77=t P<0/001	1/25	1/68	Female
		0/71	0/53	Male
Obsessive - compulsive	294=df9/07=t P<0/001	1/27	1/72	Female
		0/70	0/64	Male
Interpersonal sensitivity	294=df9/26=t P<0/001	1/27	1/80	Female
		0/75	0/67	Male
Depression	294=df10/11=t P<0/001	1/22	1/65	Female
		0/61	0/52	Male
Anxiety	294=df9/47=t P<0/001	1/30	1/71	Female
		0/67	0/75	Male
Aggression	294=df8/25=t P<0/001	1/30	1/45	Female
		0/64	0/47	Male
Phobia	294=df9/28=t P<0/001	1/21	1/41	Female
		0/51	0/41	Male
Paranoid thoughts	294=df8/41=t P<0/001	1/12	1/69	Female
		0/79	0/75	Male
Psychotic	294=df8/26=t P<0/001	1/24	1/38	Female
		0/55	0/46	Male
total	294=df9/66=t P<0/001	107/30	145/73	Female
		52/01	50/36	Male

Table 3: Comparison of parents of mentally retarded children interms of resiliency to gender differences.

<i>The standard deviation</i>	<i>averages</i>	<i>gender</i>	<i>Variables</i>
26/94	75/24	mothers	resiliency
18/98	100/74	fathers	
9/66=t	294=df		P<0/001

In the study of relationship between attachment to God and Mental Health Resiliency educable mentally retarded parents was considered that, there is a positive and significance relationship between secure attachment to God ($r=0.839$) and Resilience ($p < 0.001$). There is negative and significant relationship between avoidant and anxious attachment to God and resiliency ($-0.80 = r$, $r = -0.78$) ($p < 0.001$), also a secure attachment relationship to God and Mental Health ($r=0.779$) was significant ($p < 0.001$). There is a negative and significance relationship between attachment avoidance and anxiety with mental health ($r=0.76$ and $r=0.71$) ($p < 0.001$) (Table 4).

Table 4: Relationship between attachment to God, resiliency and mental health of parents.

		Avoidance	Secure	Avoidance
			0/92= -r P<0/001	
	Anxiety	0/76= r P<0/001	0/96= -r P<0/001	Anxiety
Resiliency	0/78= -r P<0/001	0/80= -r P<0/001	0/839= r P<0/001	Resiliency
0/784= -r P<0/001	0/71= r P<0/001	0/76= r P<0/001	-0/779=r P<0/001	mental health

There is significant correlation on the relation between attachment to God in dimensions (anxiety, avoidance and safe), Resiliency and mental health of parents of mentally retarded children with the statistical control variables of test and gender that the relationship between avoidant attachments to God and resiliency is negative among both genders, there is a difference of this relationship between fathers ($r = -0.02$) ($p > 0.851$), in comparison with mothers of mentally retarded children ($r = -0.69$) ($p < 0.001$), and this differences is significant ($p = 0.001$). The relationship between anxious attachments to God with resiliency is negative and significant in both genders. And comparison the relationship between fathers ($r = -0.53$) ($p < 0.001$) indicate no a significant difference ($p > 0.075$), compared with mothers ($r = -0.64$) ($p < 0.001$). Secure attachment relationship to God with resiliency is positive and significant in both genders. And comparison of this relationship between fathers ($r=0.61$) ($p < 0.001$) showed no significant difference ($p > 0.075$) compared with mothers of mentally retarded children ($r=0.74$) ($p < 0.001$). Avoidance attachment relationship to God with mental health is negative in both genders and comparison of this relationship between fathers ($r=-0.60$) ($p < 0.001$) showed no significant difference ($p > 0.08$) compared with mothers of mentally retarded children ($r = -0.75$) ($p < 0.001$) (see table 5). Anxiety attachment relationship to God with mental health is negative in both genders and comparison of this relationship between fathers ($r=-0.13$) ($p < 0.174$) showed no significant difference ($p > 0.095$) compared with

mothers of mentally retarded children ($r = -0.61$) ($p < 0.001$) (see table 5). Secure attachment relationship to God with mental health is positive and significant in both genders, and comparison of this relationship between fathers ($r = 0.57$) ($p < 0.001$) showed no significant difference ($p > 0.01$) compared with mothers of mentally retarded children ($r = 0.74$) ($p < 0.001$).

Table 5: Comparison between dimensions of attachment to God, mental health and resiliency with variable control of gender.

<i>P-value</i>	<i>Z</i>	<i>P-value</i>	<i>Solidarity</i>	<i>gender</i>	<i>Independent variable</i>	<i>Style of Attachment to God</i>
0/001	-7/07	00/01<	-0/69	mothers	<i>resiliency</i>	Avoidance
<		0/851	-0/02	fathers		
0/008	2/39	0/001<	0/75	mothers	<i>mental health</i>	Anxiety
		0/001	0/60	fathers		
0/075	-1/44	0/001	-0/64	mothers	<i>resiliency</i>	Secure
		0/001	-0/53	fathers		
0/095	4/94	0/001	0/61	mothers	<i>mental health</i>	
		0/174	0/13	fathers		
0/019	2/06	0/001	0/74	mothers	<i>resiliency</i>	
		0/001	0/61	fathers		
/010	-2/37	0/001	-0/72	mothers	<i>mental health</i>	
		0/001	-0/57	fathers		

Discussion and Conclusion:

The results showed that among the educable mentally retarded parents, fathers had greater mental health and resiliency than their mothers. These findings are consistent with the finding of [16,17] which according to these findings women have Variability more excitement than men. Women suffer anxiety and neuroticism 50% more than men and they have more negative emotions than men, they are depressed almost twice that of men in everyday life. Also consistent with the findings [4]Rahimian boogar[5]; samani & jokar, [6], in many cases, children with disabilities and mental retardation are in the home and in interaction with the mother in most of their time, presence of these children Because of having many emotional and behavioral problems, cause decreasing resiliency and mental health, especially the mother's. Also, there is positive and significant relationship between secure attachment of parents (father and mother) to God, mental health and resiliency and there is negative and significant relationship between parent's avoidance attachment and anxiety to God, resiliency and mental health.

According to findings of [18,21] , secure attachment to God is one of Proposed factors in resiliency, and promote the mental health of people with chronic problems in life, like parents of mentally retarded children. By The control of gender variables, the relationship between secure attachments to God with resiliency is positive and significant in both genders and the relationship between an avoidance and anxiety attachment to God with the resiliency is negative in both genders and gender differences is only in the relationship between avoidant attachment to God and the resiliency which Although the relationship was negative between the mothers and the fathers at that time, But negative correlation between the mothers was significant and the fathers was not significant. Striking result is that However, mothers of mentally retarded children had lower mental health and resiliency than fathers due to the different roles and sensitive to the problems of mentally retarded children in the family and some differences in physical, emotional, other gender cognitive, but By The control of gender variables, Secure attachment to God was positively and significantly associated with mental health in both genders and Avoidance and anxiety attachment to God showed a significant and negative association with mental health in both genders (Secure attachment to God was associated with increasing mental health in both genders and attachment avoidance and anxiety was associated with reduced mental health in both genders).

The secure attachment to God increases mental health and the avoidance and anxiety attachment to God decrease mental health and Gender dose not effect on this relationship. Consistent with the results of this study, in the secure attachment to God it is a belief that God is accessible and responsive, in avoidant attachment to God, God is far away and cannot be achievable and in the anxiety attachment, God is uncoordinated accessible and responsive . People with secure attachment to God have less anxiety, less depression and physical illness and psychological adjustment than those with insecure attachment [24]. Insecure attachment is associated with higher anxiety [28], secure attachment styles have better psychological adjustment and mental health than

avoidant attachment style, compared with individuals of avoidant attachment, individuals with secure attachment know God lovelier and closer about themselves and less controller [21], individual Attached to avoidant are less religious commitment and attachment anxiety individual show extremist religious behaviors [30]. In fact, the relationship between the individual and God as perceived attachment relationship is beyond the limits of the physical presence [24].

This relationship is entitled to believe God led to approach of meaningful and purposeful of person to whole of existence, Indeed God as a support and source of attachment that allows him to qualify as an attachment position, the characteristics of the attachment source is as a sure shelter that the person can refers him in life problems and Always is available and in addition to human [26], Despite their physical presence is always felt his presence And the other person knows that God is the basis of safety because he is able to do everything and knows everything, so there's a sense of strength and security by his presence [23]. This study showed that secure attachment to God one of the basic ways that you can help to prevent the mental health problems, mention and remembrance of Allah is the aspect of prevention and also therapy and rehabilitation aspects. As in the Quran is aware that only with the remembrance of God hearts gentle.

The results indicate a significant positive relationship between secure attachments to God with resiliency mental health. The results clearly showed the remembrance of god lead to peace of mind and mental despite the many problems of modern industrial life, regardless of gender and cognitive differences and as a total could be said that attachment to God and religion provide valid and consistent framework to mental health, if circumstances allow a person internalize God and religion in the context of structure of their cognitive and emotional and transfer the level of belief in the level of religious faith, such a faith and knowledge can ensuring the individual unity and provide his mental health. The results of this study and other results are consistent with this study can be said attachment is as an important factor in minimizing the risk and maximizing the agent's mental health that the result of this influence plays a critical role in difficult conditions, hazardous and grueling life. Given the undeniable influence of religion on mental health, practitioners and Responsible for health services can properly use religious strategies in community mental health programs, and mental health therapists is expected using spiritual approaches should take effective steps based on spiritual beliefs in the integrity, security and mental health. The limitations of the present study can be pointed to the long applied questionnaire it is possible that the effects of fatigue of subjects lowered their accuracy in test. The study was conducted among parents of children with educable mental retardation and it is necessary to be cautious extending to other groups, particularly in depicting the pattern of attachment. The questionnaire used is standard method of measurement of psychological constructs in this research. If you use other methods of measurement, such as interviews and observation techniques, it is possible; the results are different from the current findings.

Conclusions:

Based on the results of this research can be said that different people using spiritual methods of promotion without regard to gender differences, And especially from the Islamic rich teachings by changing the attachment quality of people to God improve their resilience and mental health as well as modern industrial life in the face of problems.

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