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**THE EFFECTIVENESS OF ASSERTIVENESS TRAINING ON THE QUALITY OF
LIFE OF WOMEN HEADS OF HOUSEHOLD RELIEF COMMITTEE SHIRAZ**

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ABSTRACT

The present study was to determine the effectiveness of assertiveness training on quality of life Female-headed households was carried out Imam Khomeini Relief Committee. The research is semi-experimental pre-test and post-test mode with the control group. The study population included women heads of households covered by the Imam Khomeini Relief Committee (RA) four-city area in 2014-2015 years the number was 12,000. Sample study, 372 patients were selected based on Morgan table. After the completion of the World Health Organization Quality of Life Questionnaire of the people who received the lowest score, 40 were selected and randomly assigned to experimental and control groups. The experimental group received 10 sessions of 90 minutes of training in assertiveness were involved, but the control group did not receive. In this study, the World Health Organization Quality of Life Questionnaire (WHOQOL-BREF) was used. Data on univariate and multivariate analysis of covariance methods and using the software SPSS-20 were analyzed The results showed that assertiveness skills training to increase the quality of life of female-headed households is sent.

Keywords: assertiveness skills - Quality of life, female-headed households

INTRODUCTION

Despite the deep cultural changes and changes in lifestyle, many dealing with life issues, lack of ability are essential, making them vulnerable in the face of life's problems (Klinke, translation

Mohamadkhani , 2005). Problems vulnerable life (Klinke, translator Mohammad Khani, 2005).

According to researchers, more women than men at risk because they lack the

capability or resources to reduce poverty, limited social mobility and economic impact of cultural and legal factors, the fight against poverty for female-headed households it is more difficult (Shaditalab, Gerainejad, 2004). In any society, given the state of the physical, psychological, social, cultural, and providing the basis for the realization of dynamic, healthy, safe community is in the coming years. So, check the quality of people's lives and trying to improve and enhance it, leading to increased physical and mental health will be people (Mousavi Zadeh, 2009). Also, due to the increased vulnerability of women supervisors and their families, and the lack of research on the effectiveness of assertiveness skills, quality of life, we aimed to influence the effectiveness of assertiveness training on women's quality of life fashioned family is examined. It is hoped that by teaching women to be empowered.

Problem statement:

Cope with the pressures of life and gaining personal and social skills, a part of the reality of human life and in different periods of his life, manifested in various forms. Due to the complexity of human life in today's world with many challenges and crises such as the challenges of globalization and localization, population crisis, crisis, health and nutrition, changes

in technology and professional conditions and the effects of modern communication technology skills social and ethical challenges. Each of these crises on the lives and behavior of the social problems it imposes. So how to deal with these issues as well as issues such as education, human beings with desires, values and aspirations of the community are proportionate, require certain projections and planning.

Every human life must learn a lot of skills to be able to handle problems. Life skills training can help to overcome tensions and difficulties of life to prepare (Taromyan, Mahjavy, Fathi, 1999, quoted Mohammadi, 2007). Female-headed households, those with no regular presence and with the support of an adult male householder and the responsibility for the home and making important decisions and it is therefore vital to support social responsibility can be somewhat of a problem reduce the cortex. It is the term given to women who for various reasons such as death, disability, incarceration, addiction or unemployment or separation from his wife led his family have taken (Shaditalab, Wahhabi and Ramzyar , 2005). The results show that the main problems of women heads of households, in the form of economic problems, lack of readiness for domestic economic affairs, negative social attitudes towards women heads of household,

children and the number and role conflict expressed concern about the future, so every man throughout his life must learn a lot of skills to be able to handle problems. (Nonarb, 1999, citing a desire Shaditalab and others, 2005). Studies conducted both inside and outside countries,

Foreign literature study

Temple Robson (1991) (quoting Yadgari, 2005) Effect of rubber assertiveness, self-esteem examined and concluded that self-esteem was significantly increased in most subjects. This improvement was observed in the follow up. Huth et al (1995), the effects of social skills training to increase appropriate behavior and reduce inappropriate behavior described. Most research in this area are the positive effects of social skills training. Kambynz (2005) in their study on the relationship between quality of life, self-esteem and health to achieve this result, students who have higher self-esteem scores, fewer absences in their class, as well as the quality of life than are other students. (Gilbert in 2014, according to the Borani, 2013) in a study entitled life skills to prevent drug abuse by increasing personal and social competencies that these skills widely to prevent the misuse of alcohol, tobacco, marijuana and other drugs are effective. Internal research background

Taromoan, (1999), life skills training to increase physical and mental health, such as self-esteem, dealing with environmental and psychological stress, anxiety and depression, suicide loss, reduce school failure, promoting healthy and effective interpersonal communication and social behavior, reducing drug abuse, drug and prevention Temple Robson (1991) (quoting Yadegari, 2005) examined the effect of assertiveness and self-esteem and self-esteem to the conclusion that in the majority of subjects significantly increased, and the subsequent improvement in the track view was. Nayyeri (2006) on stress and quality of life of resident students indicated that relaxation can improve the perception of quality of life, so we can use relaxation to increase the quality of life of students recommended.

METHODS

In this study, quasi-experimental research design that used a pre-test and post-test experimental and control groups were equivalent at random.

The population consisted of women heads of households covered by the Imam Khomeini Relief Committee (RA) four-city area, according to the Bureau of 2014-2015 in the total population of these women, 12,000 of us are.

Sampling

Simple random sampling was used to select the sample. The first of 12,000, 372 students were selected based on Morgan. After the completion of the World Health Organization Quality of Life Questionnaire (WHOQOL-BREF) of the people who received the lowest score of 40 randomly selected and randomly assigned to experimental and control groups.

Sample

The study sample consisted of 40 women from the community supervisor of households with at least a bachelor's degree in elementary aged between 25 and 50 years.

Check sample based on age:

Distribution of sample size on the basis of age

standard deviation	Average	maximum age	Minimum age	Group
6/2	37/65	45	26	Test
6/2	37/75	48	22	Control

RESEARCH TOOLS

In this study, in order to measure variables of the tool is used.

Quality of Life Questionnaire

In this study, in order to measure variables of the tool is used.

The World Health Organization is a quality of life questionnaire self-report instrument developed by the World Health Organization is designed to evaluate quality of life

Statistical analysis:

In order to analyze the data in this study of descriptive statistics such as frequency, percentage, mean, standard deviation, maximum and minimum and inferential part test results using statistical methods and analysis means comparison covariance are analyzed.

Data for the analysis of 20- spss software is used. Meanwhile, a significant level in this study, 05/0 = determined.

Table 1: Mean and standard deviation of the variable scores and quality of life of its components in the experimental group

standard deviation	Average	Number	Group	Variable
0/4	2/03	20	pre-exam	Quality of life
0/4	3/45	20	After the test	
0/5	2/35	20	pre-exam	physical health
0/4	3/75	20	After the test	
0/4	1/97	20	pre-exam	mental health
0/6	3/42	20	After the test	
0/6	1/97	20	pre-exam	Community Relations
0/8	3/30	20	After the test	
0/5	1/81	20	pre-exam	Environmental health
0/4	3/33	20	After the test	

Table 2: Analysis of covariance effectiveness of assertiveness training on quality of life

Significance level	f	Mean square	Degrees of freedom	Total squares	Source Changes
0/8	0/019	0/004	1	0/004	The effect of pre-test
0/0001	114/9	21/19	1	21/19	The effect of the independent variable
-----	-----	0/184	37	6/81	Error
-----	-----	-----	40	324/875	Total adjusted

Table 3: Mean and standard deviation of the quality of life in the post-test

Adjusted average	Standard deviation	average unadjusted	Number	Group
3/45	0/43	3/45	20	Test
1/995	0/41	1/994	20	Control

Table 4: Test results box on the default equality of covariance

Level	Index
9/372	Box
0/83	F value
10	DOF 1
6903/586	DOF 2
0/60	The significance level

Table 5: Results of multivariate analysis (Manova) variables between the two groups

Statistical power	ETA Factor	significance level	Degrees of freedom	F value	Index
0/1	0/79	0/0001	4	33/5	Test the effect of Pylavy
0/1	0/79	0/0001	4	33/5	Lambda Wilkes

Table 6: analysis of covariance components of quality of life in both experimental and control groups

Statistical power	ETA Factor	Significantly	F value	Mean square	Degree of freedom	Total squares	Index	Resource change
1	0/78	0/0001	137/6	26/29	1	26/29	After physical health test	Group Resource change Resource change
1	0/64	0/0001	68/5	18/906	1	18/906	Mental health test	
1	0/47	0/0001	34/3	21/025	1	21/025	After the test of social relations	
1	0/68	0/0001	81/1	19/252	1	19/252	Mjyt health test	

CONCLUSIONS

Covariance analysis, revealed as a result of the increasing assertiveness skills and quality of life and quality of life of female-headed households is significant. In other words, it measures the quality of life and assertiveness skills training group and the control group had received no education saw, the difference is significant. In fact, women's groups by taking advantage of the skills of assertiveness and its stages found out how to strengthen the quality of life.

This is the result of research by Robson (1991), Fenyjman (1997), Christan et al. (2002), Falfvlyd et al. (2004), Cammins (2005), Mastovav, Ochyama (2006), Gilbert (2014), is in line . The results of this study assertiveness skills and other life

skills teaching methods, student quality of life, self-esteem and marital satisfaction of married women has increased. As well as abuse of alcohol and tobacco and Mary Jo Anna and inappropriate behavior has reduced. Research search results not in line with this hypothesis was not found. France began explaining this result, it can be considered that the quality of life perception of their well-being and believes that if perceptions of reduced quality of life and other characteristics, he affected the result of their loss of quality of life (France, 2005 appears perhaps the same topic (assertiveness training) can, increased internal control as a personality trait, that person cannot control some of the effects of stressful situations and also be found threat,

also makes. Since relations marked social support as an external source, can reduce the effects of stress and coping with environmental stress and increase mental health and social support to help people raise a result can return it as a protective shield in enhancing the quality of life can be explained. In explaining the physical and psychological Hagerty began with the view that, having a poor quality of life can impact on family relationships. Poor quality of life can use and adapt coping mechanisms other influential people and led to increased tension in them and the increased tension in direct contact with and can cause the severity of illness in physical person increase. Therefore, it can be seen that quality of life is a multidimensional concept and structure complex, which should be evaluated from different aspects (Hagerty, 2004, quoted Gholamipoor, 2011). It can be said with regard to the person of their ability to perform daily activities that require energy consumption and includes a scale such as mobility, power, energy, pain and discomfort, sleep and reduced work capacity after his precarious physical As well as the mental aspects and lack of health such as depression, fear, anger, happiness, and peace increase, and then put psychological influence resulting in reduced quality of life for people. Since assertiveness training,

creating a sense of self-worth, promoting satisfying relationships, reduce fear and anxiety, living life to have desired shape and control and empower people to make their service life (Bolton, 2001 , quotes, Fata et al., 2006). It can be concluded assertiveness skills may affect physical and mental health, and ultimately enhance the quality of life is sent. Based on the results can be considered (Gough, 2000) who believes, desires, goals that are specific preferences and cultural environment caused by man. If these requirements are not satisfied, the real and serious injuries (in reduced quality of life) will lead the one hand, the ability to express oneself, as an important factor in mental health and feeling of competence and satisfaction of life and access goals causes (Jorad, quoted Rezaei-Nejad, 2010). In recognition of this situation, it is likely that assertiveness skills can be serious damage to the health of people in the areas of environmental, social, mental health and physical health prevented or minimized, which may result in to enhance the quality of life. Check the quality of life in general theoretical foundations can start with the idea Galybr that quality of life is a multidimensional concept and should be measured from different angles and dimensions. Galybr (1997, quoted Khajeh, 2010).

In expounding this seems to say that female-headed households during 10 sessions included assertiveness skills (skills, decision making, problem solving, communication skills, etc.) are, received, your skills could enhance the quality of life and its dimensions. It is observed that the experimental group compared to the control group showed a significant increase in quality of life and its dimensions to be said that this training leads to an increase or improve the quality of life of female-headed households. Therefore, it is expected that each person after assertiveness training in life skills, the ability to achieve.

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