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## Relationship Between Resilience and Quality of Life in Parents of Children with Cleft Lip and Palate in Ilam City in 2026

**Masomeh Soltanmohamadi**

Department of Psychology, Ilam Branch, Islamic Azad University, Ilam, Iran

**Corresponding Author:**

soltanmahmoodiimasoomeh@gmail.com

### Abstract

**Introduction:** One of the important and practical topics in psychology that is closely related to the concept of resilience is quality of life. The present study was conducted to determine the relationship between resilience and quality of life among parents of children with cleft lip and palate in Ilam city.

**Methods:** In this cross-sectional study conducted in 2026 in Ilam city, parents of patients with cleft lip and palate were examined. The sample consisted of parents of children with cleft lip and palate, and a total of 117 fathers and mothers participated in the study. The instruments used included the Connor–Davidson Resilience Scale (CD-RISC), the SF-36 Quality of Life Questionnaire, and a demographic information form for the participants. After entering all data into SPSS version 18, descriptive and analytical statistical analyses were performed to report the findings.

**Results:** Result showed, 55.6% of the participants were mothers and 44.4% were fathers. The mean (SD) age of the parents was 47.58 (7.82) years. The mean (SD) resilience score was 88.84 (12.94) among fathers and 59.66 (11.69) among mothers, indicating that fathers had higher resilience levels compared with mothers. The overall mean resilience score among parents was 72.63 (19), suggesting a moderate to relatively high level of resilience in the studied sample. The mean (SD) quality of life score was 76.30 (8.12) for fathers and 59.27 (8.66) for mothers, indicating a better quality of life among fathers compared with mothers. The overall mean quality of life score among parents was  $66.84 \pm 11.94$ , reflecting a moderate level of quality of life in the study population. The correlation coefficient  $R = 0.931$



indicates a very strong positive relationship between parental resilience and quality of life.

**Conclusion:** The correlation results showed that resilience plays a very important role in determining quality of life, and more than 86% of the variance in quality of life can be explained by resilience. These findings highlight the importance of strengthening parents' resilience—especially that of mothers—as a key strategy for improving their quality of life.

**Keywords:** Quality of life, Resilience, Cleft lip and palate

### Introduction

Individuals encounter numerous stresses and pressures throughout their daily lives. Any event that requires considerable adaptation in a person's life can be considered stressful [1]. Resilience is generally defined as the ability to return to a normal state and successfully adapt despite significant stress and adverse conditions. In other words, resilience refers to an individual's capacity to maintain psychological and biological balance under threatening or stressful circumstances. Achieving balance does not imply a passive response to challenging conditions; rather, it involves active and constructive engagement with one's environment. Since all individuals face difficulties during their lives, resilience is not limited to a specific group but is necessary for all people [2–5].

On the other hand, resilience is considered a dynamic and protective process that enables individuals to cope effectively with stressful life situations. In other words, resilience allows individuals to adapt to their surrounding environment, interact peacefully with others, and achieve an appropriate position within society. By enhancing capacity, participation, recovery, and adaptation with minimal disruption while maintaining competence, resilience facilitates adjustment to changes, particularly behavioral changes related to health [2,6,7]. Most definitions of resilience highlight two key aspects: first, the presence of multiple interacting factors associated with resilience (such as self-esteem, age, personality traits, etc.), and second, that resilience depends on time and context and may not manifest equally across all domains of life [8,9].

One of the important and practical topics in psychology that is closely related to the concept of resilience is quality of life. Today, quality of life is recognized as a key indicator for evaluating an individual's health status, and its measurement has become increasingly important in many studies related to physical and mental health. This concept refers to individuals' perceptions and evaluations of their life circumstances based on their culture, values, and the social context in which they live. Moreover,

quality of life can reflect an individual's level of adaptation to daily challenges and pressures; therefore, its relationship with resilience is expected. Examining these two constructs simultaneously may provide a clearer understanding of the psychological status of parents of children with cleft lip and palate [10–13].

One of the issues that can create considerable psychological pressure for individuals and their families and disrupt their well-being and health is having a child with special needs. The stress experienced by family members affects the entire family system. Caring for a patient may drain family resources and expose them to physical, psychological, emotional, and social consequences, often leading to feelings of despair, helplessness, hopelessness, fear, and embarrassment among parents [14,15].

Congenital disorders in children are among the conditions that can impose significant psychological stress on both patients and their families. One such condition is cleft lip and palate, which may substantially increase the caregiving burden on families during the course of treatment and care [16,17]. Considering the above, the present study was conducted to determine the relationship between resilience and quality of life among parents of children with cleft lip and palate in Ilam city.

### Methods

This cross-sectional study was conducted in 2026 in Ilam city and included parents of patients with cleft lip and palate.

The study sample consisted of parents of children with cleft lip and palate. After explaining the objectives of the research, 65 mothers and 52 fathers agreed to participate in the study. In total, 117 parents participated in the research. Inclusion criteria included willingness to participate in the study, residence in Ilam province, having a child with cleft lip and palate, and living together with the child. Parents who were separated from their child due to divorce or other reasons were excluded from the study.

The data collection tools included a resilience questionnaire, a quality of life questionnaire, and a demographic information form. The demographic form contained questions regarding parents' age, gender, education level, occupation, economic status, and place of residence. Resilience was assessed using the Connor–Davidson Resilience Scale (CD-RISC), which consists of 25 items measuring resilience on a Likert scale ranging from completely false (score 1) to always true (score 5). The minimum possible score is 25 (indicating low resilience) and the maximum score is 125 (indicating high resilience) [18].



Quality of life was assessed using the 36-item Quality of Life Questionnaire (SF-36), which evaluates quality of life within a score range of 0 to 100, with higher scores indicating better quality of life [19,20].

All ethical principles of research were observed in this study, including obtaining informed consent, maintaining the confidentiality of participants' information, and ensuring

voluntary participation. After entering the data into SPSS version 18, descriptive and analytical statistical analyses were performed.

### Result

Result showed, 55.6% of the participants were mothers, while 44.4% were fathers. The mean (SD) age of the parents was 47.58 (7.82) years (Table 1).

**Table 1. Demographic Characteristics of Parents Participating in the Study**

Variable	N	%
<b>Parent's Gender</b>		
<b>Mother</b>	65	55.6
<b>Father</b>	52	44.4
<b>Parents' Age (years)</b>	<b>M(SD)</b>	47.58(7.82)
<b>Education Level</b>		
<b>Illiterate / Primary</b>	44	37.6
<b>Secondary</b>	42	35.9
<b>Diploma</b>	28	23.9
<b>University Education</b>	3	2.6
<b>Economic Status</b>		
<b>Poor</b>	108	92.3
<b>Moderate</b>	9	7.7
<b>Good</b>	0	0

The mean (SD) resilience score for fathers was 88.84 (12.94), while for mothers it was 59.66 (11.69), indicating that fathers have a higher level of resilience compared to mothers. The overall mean resilience score among parents was 72.63 (19), reflecting a moderate to relatively high level of resilience in the studied sample. Additionally, the score range of 25 to 100 demonstrates substantial variability in resilience levels among parents (Table 2).

**Table 2. Statistical Indicators of Parents' Resilience**

Variable	Mean	SD	Minimum	Maximum
<b>Overall resilience score in fathers</b>	88.84	12.94	25	100
<b>Overall resilience score in mothers</b>	59.66	11.69	25	100
<b>Overall resilience score in parents</b>	72.63	19.00	25	100



The mean (SD) quality of life score for fathers was 76.30 (8.12), while for mothers it was 59.27 (8.66), indicating a more favorable quality of life among fathers compared to mothers. The overall mean quality of life score for parents was reported as  $66.84 \pm 11.94$ , reflecting a moderate level of quality of life within the study population. The score range of 0 to 100 also demonstrates considerable variation in parents' perceptions of their quality of life (Table 3).

**Table 3. Statistical Indicators of Parents' Quality of Life**

Variable	Mean	SD	Minimum	Maximum
Overall quality of life score in fathers	76.30	8.12	0	100
Quality of life score in mothers	59.27	8.66	0	100
Overall quality of life score in parents	66.84	11.94	0	100

**Table 4. Correlation Matrix Between Resilience and Quality of Life**

Model	R	R Square	Adjusted R Square	Sig.
-	.931 <sup>a</sup>	.868	.866	.000 <sup>b</sup>

The correlation coefficient  $R = 0.931$  indicates a very strong and positive relationship between resilience and parents' quality of life, meaning that as resilience increases, quality of life also increases significantly. The R Square value of 0.868 shows that approximately 86.8% of the variance in quality of life can be explained by resilience, which represents a very high level of explanatory power. Furthermore, the Sig value of 0.000 indicates that the relationship is statistically significant, confirming that this strong correlation is not due to chance (Table 4).

## Discussion

Quality of life is a multidimensional construct that the World Health Organization defines as an individual's perception of their position in life, considering their values, goals, standards, and personal interests. In recent years, research on the quality of life of patients and their caregivers has gained significant attention due to its importance [21–23]. Accordingly, the present study was conducted to examine the relationship between resilience and quality of life among parents of children with cleft lip and palate.

Result showed, a significant relationship was observed between quality of life and resilience. In the study by Gheysaranpour et al., 165 parents of children with major thalassemia were assessed using the SF-36 Quality of Life Questionnaire and the Connor-Davidson Resilience Scale. Their results revealed a mean (SD) resilience score of 89.1 (17.1) and a quality-of-life score of 97 (8.9). A significant correlation was also reported between resilience and quality of life ( $r = 0.22$ ,  $p = 0.004$ ) [14]. In the study

by Mehrafraz et al., quality of life was evaluated using the WHOQOL questionnaire and resilience using the CPI scale. The results showed mean (SD) scores of 71.90 (12.11) for quality of life and 29.92 (9.62) for resilience, with a significant association between the two variables [24]. Together with the findings of the present study, these results support a consistent pattern indicating a meaningful relationship between resilience and quality of life. Despite differences in sample characteristics, the study by Gheysaranpour et al. also demonstrated a positive correlation between resilience (89.1) and quality of life (97). Similarly, Mehrafraz et al. confirmed this pattern using different measurement tools.

Consistent with the present findings, higher resilience is expected to correspond with better quality of life. In the study by Luo et al., 146 parents of children with cancer in two hospitals in China were assessed. The results indicated that higher parental resilience was associated with better quality of life, suggesting that strengthening resilience can improve parents' well-being



[25]. Likewise, Cardelle-Pérez et al. examined resilience and quality of life in families of children with autism using the Family Quality of Life Scale and a 14-item resilience scale. Their findings showed that parents had relatively high resilience but lower satisfaction in the domains of resources and supports. Although gender differences were observed, they were not statistically significant [26].

Furthermore, the study by Widyawati et al. demonstrated that different dimensions of parental resilience were associated with various aspects of the quality of life of children with developmental disabilities. For instance, parents' understanding of their child was associated with communication and developmental outcomes, positive parental attitudes with socio-emotional well-being, and perceived social support with material well-being and activity levels. These relationships appeared more complex within collectivist cultural contexts, highlighting culturally specific patterns [27].

Overall, evidence from previous studies reinforces the notion that resilience plays a protective and influential role in determining the quality of life among parents of children with chronic or congenital conditions.

## Conclusion

Based on the findings of this study, parents of children with cleft lip and palate demonstrated moderate to relatively high levels of resilience, with fathers reporting higher resilience and quality of life compared to mothers. Correlation analyses revealed that resilience is a strong predictor of quality of life, explaining more than 86% of its variance. These findings highlight the importance of strengthening parental resilience—particularly among mothers—as a key strategy for improving their quality of life.

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