The Impact of the Corona Pandemic on the Psychological and Social Resilience of Kindergarten Children from the Point of View of Parents

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Abstract
The study aimed to identify the impact of the Corona pandemic on the psychological and social resilience of kindergarten children from the point of view of parents, and the study was based on the descriptive method, and the sample of the study consisted of (200) parents of kindergarten children in the city of Amman, and to achieve the objectives of the study was prepared a measure of flexibility in both fields: psychological flexibility and social flexibility after ascertaining the sincerity and stability. The results of the study indicated the following: The impact of the Corona pandemic on the psychological and social resilience of kindergarten children came from the point of view of the parents to a medium degree, the existence of statistically significant differences in the overall degree and social flexibility in light of the impact of the Corona pandemic in the view of kindergarten children from the point of view of parents attributable to the sex variable.

Keywords: corona pandemic, psychological resilience, social resilience, kindergarten children

1. Introduction
In light of the Corona pandemic, some Arab (and non-Arab) countries have adopted the remote education model as an alternative to the traditional education method, as a defense in the war against the Coronavirus. This pattern, which has been associated with the current epidemic pandemic, appears unique in its philosophy, goals, and procedures, and differs from the usual pattern of distance education. This variation lies in several aspects: This type of distance education came as a sudden response without any previous planning, with the aim of confronting the current pandemic that educational institutions witnessed overnight, without being prepared with pre-prepared regulations and systems, as the Corona pandemic caused a push Society in all its spectrums to employ a different educational style, without preparing the training staff and designing previous curricula and programs. As these global developments played a major role in changing the usual education policy, suddenly and due to emergency circumstances, and from this standpoint, the most accurate name for this situation is that countries employ technical services to overcome the current situation and save the classroom in light of the spread of the virus; Accordingly, this employment does not live up to the known standards of distance education (Al-Layili, Ismail, Abu Nasser, & Al-Qahtani, 2020). We now live in an era full of rapid and successive changes, which has led to the emergence of a number of problems, conflicts, and psychological pressures facing the individual and affecting his psychological and social compatibility, as wars increased, corruption increased, and various physical and psychological diseases alike, and this makes it imperative for the individual to have a high degree of efficiency and psychological flexibility to face these conflicts, to achieve the greatest degree of compatibility, happiness, and mental health. Mental health is an essential component of resilience, and the basis for positive adaptive capacity that enables people to cope with stressful psychological life events, benefit from their potential, and achieve their humanity (Soliman, 2012). Psychological resilience is a dynamic process by which the extent of individuals' adaptation and formation to positive behavior emerges when they face severe adversities, or when their lives are intercepted, threatened, or some of them are exposed to sources of tension and unpleasant emotion (Al-Maliki, 2012). Kashdan (2010) explains the importance of psychological flexibility, in that it helps the individual to adapt to various circumstantial demands, and to maintain a balance between important areas of life, that the committed behaviors are consistent with values, and flexibility is the cornerstone of personal, social, health performance, and relative ability. For recovery after stressful events, self-control, or the ability to modify cognitive and behavioral tendencies is a factor that helps enable psychological resilience. As individuals who have the strongest levels of
self-control have better social performance, so they are more resilient and this flexibility appears strongly in curiosity and perseverance.

The Corona pandemic deprived the child from playing with peers. The child’s mind has drawn a distorted form of social relations characterized by low social communication skills, low language skills, reduced flexibility, and psychological and social coping mechanisms. In exchange for clinging to the house increased.

Study Questions: This study seeks to answer the following questions:

1) What is the impact of the Corona pandemic on the psychological and social resilience of kindergarten children from the parents' point of view?

2) Are there statistically significant differences at the significance level (0.05≥α) in the extent to which the Corona pandemic affects the psychological and social resilience of kindergarten children from the parents' point of view due to the gender variable?

1.1 The Problem of the Study

The Corona pandemic caused the creation of an environment affected by it and it became not limited to the infection of Kofed-19, but it led to increased mental complexity, disorder and rapid development and the intensity of pressures experienced by society as a whole, and showed many threats to all institutions Society, including educational and learning institutions, has made these institutions face many new developments and challenges and has imposed on them the ability to adapt and respond quickly to these successive developments in a short period of time, which made these institutions urgently need a sufficient amount of flexibility in order to prepare for the response. On the pressures that are quickly stressed, where the flexibility of institutions has become a necessary requirement for all enterprises to work to be able to do so. It is therefore imperative for institutions wishing to remain flexible at all levels and levels, particularly strategic ones, to ensure that institutions provide advanced religious capabilities to cope with all the developments imposed by the Corona pandemic (Rizk, 2020). The Corona pandemic has deprived the child of playing with peers, which has shaped the child’s mind as a distorted form of social relations characterized by low communication skills.

1.2 The Objectives of the Study

The study aims to: to identify the impact of the Corona pandemic on the psychological and social resilience of kindergarten children and the point of view of parents. To identify the differences in the impact of the Corona pandemic on the psychosocial resilience of kindergarten children and the point of view of parents depending on the gender variable.

1.3 The Importance of Study

The study of psychological and social resilience is one of the most important studies in educational psychology; Because it has an impact on a person’s life in improving his performance as a positive individual who works to keep pace with development and progress in all areas of his life, and its importance lies in the individual’s tendency to persist and maintain his calm and balance when exposed to stressful situations. And because children are the fruit of this society and the basis for its development, progress, and prosperity, it is imperative to pay attention to all aspects of their lives (physical, mental and spiritual), and to help them face the various psychological problems and conflicts and burdens of life, with all intelligence, control, awareness, flexibility, and understanding, in order to reach a state of balance, stability and psychological security In order for the individual to be able to face various pressures, he must have a set of characteristics and characteristics, including psychological flexibility, which helps the individual to adapt to continuous stressful events and situations, and it is a continuous process through which the individual exhibits positive adaptive behavior in the face of emergency conditions (Boussaid, 2014). This research gains its importance from the importance of the topic being researched, due to the absence of recent studies on the Coronavirus (Covid-19), which still threatens the whole world, and its relationship to psychological and social resilience, and its impact in general and specifically on kindergartens, and how what caused it was dealt with.

1.4 Definition of Terminology

Corona pandemic: It is an infectious disease that affects individuals on a wide geographical scale caused by the new CORONA virus (COVID-19), a highly contagious virus transmitted mainly by droplets produced by an infected person when he or she breathes or coughs (WHO, 2020).

Psychological Resilience: It is the ability of individuals and societies to adapt to daily challenges, including life transformations and accumulated stress, which allow them to thrive and develop despite these challenges in light of their daily life situations (Abualkibash & Lera Rodriguez, 2015).
Social resilience: The ability of the individual to return to a normal life after experiencing a crisis or distress (Al-Hamza, 2020).

Kindergarten children: Children who enroll in kindergarten whose ages range between (5-6) years (Hammoud, 2011, 12).

1.5 The Limits of the Study
Human limits: The application of the study was limited to the parents of kindergarten children.
Temporal boundaries: The study was applied in Amman, Jordan.
Temporal boundaries: The study was applied during the second semester of the 2020/2021 academic year.
Objective boundaries: The study was limited to revealing the impact of the Corona pandemic on the psychological and social resilience of kindergarten children from the point of view of their parents.

2. Theoretical Framework and Previous Studies
2.1 Corona Pandemic
The spread of the disease from a certain region to the world becomes a pandemic, and this is what the world witnessed through the Coronavirus, whose symptoms varied from high fever, cough, severe pain in the throat and shortness of breath, and Corona is a name for a group of viruses (Maalash, Qadam, & Zaarour, 2020). The epidemic is the spread of the disease and its rapid spread, which affects individuals in a community in one geographical location, and can extend to other neighboring regions, and what distinguishes the epidemic is its passage without people knowing it except when infected with it or contacting infected people, as for the pandemic it is derived from the epidemic but it is It affects individuals in a wider geographic range, as is the case in the Coronavirus, and is usually unfamiliar to the host bodies due to not being exposed to it for a long time, which leads to the suspension of all joints of social life and commercial and economic activities (Junaidi, 2020). Covid-19 is a disease caused by a new strain of coronavirus (Coronavirus). The English name for the disease is derived as follows: “CO” are the first two letters of the word corona, and “VI” are the first two letters of the word virus, and “D” is the first letter of the word disease. Previously, this disease was called “2019 novel coronavirus” or “2019-nCoV” (Binder, 2020). Compliance requirements in many countries have included mandatory closings of childcare facilities, which would be a major challenge for working parents, including frontline staff, and for children at risk who depend on such facilities for the care, nutrition, and support they need. Bearing in mind that the benefits derived and expected from the closure are important, and may outweigh the potential challenges it poses in the long term (IFC, 2020). By closing the centers, the possibility of reducing the rapid spread of the Coronavirus pandemic, Covid-19, and other respiratory diseases, and thus protecting the health of children, families, and entire societies, will increase, due to the ease of transmission of infection among children as they are still embarking on the journey of learning and acquiring personal hygiene habits, such as covering the mouth. And the nose when coughing, washing hands, and respecting personal space, and even for others around them, including the most vulnerable groups, such as grandparents and other members of the family or community.

The kindergarten stage is one of the most dangerous stages that the child goes through, during which the growth cycle that began at home and under the supervision of the family and between the next stage, which is school, is completed and includes physical, mental, sensory, linguistic, emotional, motor, moral, physiological and other development, and this stage also witnesses a group of psychological, behavioral and educational disorders Which can be controlled by the teacher or the school by identifying the psychological, emotional, social, physical and mental needs and dealing with them in a positive manner, and trying to treat problems through deliberate steps and working to overcome these disorders which, if neglected, are the first and basic building block of deviation, aggression or negative in various forms. The role of kindergarten is just as important as the role of schools. Rather, it is considered the most important stage because it is the first step in educating the child, even if this education does not depend on reading and writing, it develops the child’s motor skills, helps him to express himself and his imagination, and strengthens his personality if he is properly raised, as kindergarten can be among the most dangerous The stages fall on a child if his abilities and skills are not properly developed (Grossberg, 2018). Among the most prominent benefits of the kindergarten stage is preparing the child for school, as the kindergarten stage moves the child from the family atmosphere and the home to the outside world, preparing him for the school stage and relying on himself instead of relying on parents, and it develops his motor abilities through play, and this stage comes as the first The stages of raising and educating the child in behavioral and etiquette, as well as teaching the child to work in a team spirit and cooperate with his peers and integrate with them, so that the child does not become introverted and shy, and it also strengthens the relationship between the child and his teacher in order to prepare for the school stage, and the role of the teacher is not new to the child (Devi, 2018). The kindergarten stage
benefits the child in developing his mental abilities by teaching him to count in a simple way, and this helps him to remember and know numbers, and it also develops his verbal abilities and makes him able to express himself and his ideas. As for the behavioral aspect, it teaches him morals and good manners, and it is important to teach the child hygiene at this stage (Loveless, 2018). Appropriate health education for kindergarten children focuses on good health behavior, such as containing coughing and sneezing by bending the elbow, washing hands frequently, developing a method for tracking handwashing and providing an equivalent for children who wash their hands frequently at the correct time, and using a doll or toy to illustrate symptoms (sneezing, Cough, fever) and what to do if they get sick (that is, if they feel pain in the head or abdomen, and if they feel excessively tired), how to comfort a sick person (instill sympathy and safe caring behaviors), spread the distance between children when they sit and ask them to extend Their arms should stay a sufficient distance to separate them from their peers to avoid contact with each other (Binder, 2020). This service can be provided over the Internet, through the help of a specialized staff that children are familiar with while ensuring that its members are also supported throughout the crisis phase. In this context, the service provided includes the use of electronic platforms to share songs, daily exercises, stories, and various activities. This adopted approach may help parents achieve the happiness of their children and the continuity of their learning, but it will not be a substitute for their actual participation in this, with their children at the early stage. In addition, this approach may raise concerns in terms of ensuring children’s safety on the Internet and determining the time allowed for use. Also, the possibilities of connecting to the Internet and the types of devices available may differ according to different income levels. Therefore, governments and employers seek to test and use different sets of multiple media such as radio, television, smartphones, WhatsApp, and other online and offline tools and applications to provide such services (IFC, 2020).

2.2 Psychological Flexibility

Psychological flexibility is one of the basic concepts in positive psychology, and it is one of the main areas of research in the literature of contemporary psychology, especially in positive and applied psychology, which is concerned with studying and developing the positive forces and characteristics of humans, instead of focusing on psychological disorders (Hart & Sasso, 2011; Seligman, 2011). Amy Werner, referred to in (Abu Halawa, 2013) is considered one of the first scholars to use the term psychological resilience in the seventies of the twentieth century, as she conducted studies on groups of children who belonged to poor families who were addicted to alcohol, or the parents of some of these children suffered from Psychological diseases and problems related to unemployment, and I noticed that most of these children exhibit aggressive and destructive behavior and that they later failed due to these problems that they suffer from at the level of their families, and I also noticed that some of these children succeeded in overcoming these family problems, and did not show aggressive and destructive behavior as a result of it. And succeeded in their careers later, and these children are called children with psychological resilience. Parsons, Kruijit, and Fox (2016) defined psychological resilience as a dynamic system in order to enhance resilience or recover from major threats facing the individual that threaten his stability, development, or viability. As for Sharma (2015), he defined psychological flexibility as the ability to regain fitness after any failure, loss, or trauma, and it is one of the most important life skills that an individual needs to protect the support and enrichment of his presence in today’s world, and the term flexibility is often used to describe a trait. A stable character or ability protects individuals from the negative effects of dangers and adversities. Allan, McKenna, and Dominey (2014) stated that resilience is derived from overcoming challenges and trying to meet them in order to re-align so that the individual becomes more balanced. Abu Halawa (2013) mentioned a number of factors related to psychological flexibility, namely: the ability to develop realistic plans and take steps and procedures to implement or implement them, a positive outlook on oneself, confidence in personal abilities and capabilities, positive communication, and problem-solving skills, and the ability to control or manage emotions. Al-Maliki (2012) indicated that one of the characteristics of resilient individuals is a rapid response to danger through the ability to perceive, organize and conform to the requirements of a sudden social situation in order to avoid harm, and separate emotion, which is the ability of the individual to distance himself from acute feelings, and to search for information with the desire to learn from Dangers in the individual’s environment as much as possible, and the formation of relationships that remain longevity with the ability to form relationships that lead to aid and support in times of crisis, and a positive inferential pictorial expectation, which is the ability of the individual to contemplate and visualize the future state after times of crisis have passed. Razzouki and Suha (2015) mentioned two aspects of flexibility: automatic flexibility, which is the ability to quickly call the largest number of different and varied responses that are related to a specific situation determined by the test, and these responses are varied and automatic. Adaptive flexibility, which is the successful behavior to confront a specific situation or problem, and requires an intended modification of behavior consistent with the correct solution to confront a specific situation, and it shows the ability of the individual to change the mental processes and the way of thinking through which the individual deals with the problem and how he can adapt to it, and it can be considered the
positive party For mental adjustment. Psychological flexibility in children refers to individuals whose performance is normal despite their previous history of exposure to risk factors and neurological experiences, and it can be considered that psychological resilience requires two basic conditions or parties, which are the child’s exposure or coexistence with risk factors or nervous conditions and stressful events that are supposed to have repercussions Negative, and the child maintains normal or normal performance despite his exposure to these factors and those conditions, and psychological resilience is a common characteristic and a product or industry for a wide range of developmental processes over time that enables children who are exposed to some types of risk to continue to grow normally (Masten, 2001). There are many protective factors of great importance for children whose psychological resilience is to be established, and among these factors are normal cognitive performance such as cognitive control, self-cognitive regulation, intelligence coefficient, and positive social relationships, especially with parents and adults of concern as well as friends, peer group, and children who are available They have and in their environment factors and mentalities that are more capable of good behavioral performance in some contexts of nervous or stressful conditions, compared to children who lack such types of factors (Luthar, 2006).

Garmezy (1974) provided a description of children with psychological flexibility stating that these children are able to work and play well and have high expectations, and have an internal control center and a positive level of self-esteem, self-efficacy, and spontaneity. Benard (1991) adds another set of characteristics for these children, including expectations (The high and positive meaning of life, clarity of purpose of life, competence, personal strength, and problem-solving skills with relationships with others). The school classrooms that provide opportunities for interaction and the integration of pupils in a collaborative learning environment and participate in setting learning goals and high expectations of academic achievement is a fundamental factor in forming the psychological resilience of these pupils, and such a classroom environment enables the pupils to feel a sense of belonging and integration (Fan & Lu, 2020). Among the theories that explain psychological resilience is Richardson’s theory, which formulated the concepts of resilience that it is the power that exists within each individual, and that drives him to achieve self-worth, etiquette, and wisdom. The Thomson & Cowen theory refers to flexibility as a general characteristic of response that pervades all manifestations of an individual’s behaviour, and represents the individual’s precept to a certain way of resolving previously successful issues when such a way of resolving it is no longer valid. Issues and the personal factors related to mental rigidity (Al-Harbi, 2012). With increasing pressures in society, whether socially, materially or otherwise, flexibility has become inevitable, for both the individual and society alike, institutions and organizations have begun to advocate the importance of flexibility to deal with emerging situations (Abu Shehadeh, 2019).

2.3 Social Flexibility

Social resilience, or what may be called ease of adaptation, is defined as the person’s ability to return to his normal life after exposure to a crisis or distress, and also refers to the ability of society to adapt and adapt to pressures such as social or economic change, given that humans can anticipate future conditions and prepare for them (Al-Hamza, 2020). Resilient people are characterized by being more effective in society, and with high skills to solve problems, and the ability to communicate with people of various segments and they have experience in dealing with life’s challenges, and to enhance flexibility is necessary for the charity to the offending people, or they do not show a degree of tact in dealing As well as trying to go along with the desires of others and not clinging to positions or opinions, and forgiving them actually and not just in words, and try not to criticize your decisions, and try not to complain completely about anything for as long as possible, and social flexibility can help protect from various unhealthy psychological conditions, such as depression Anxiety, and it would also help to banish factors that increase the risk of mental illness, such as exposure to cruelty or previous trauma (Al Hamza, 2020). Al-Shawabkeh (2015) believes that adaptation to society has several aspects, so when these aspects exist in any person we can say that he is adapted to his society, and among these manifestations: psychological comfort and the ability to overcome all obstacles and problems facing the individual in his life, and the individual’s superiority in his work, And not to hit the individual with any disease resulting from psychological problems, and the individual set realistic goals, and make efforts to achieve these goals, and the ability to realize the consequences of things and self-control. The ability to form relationships with others based on mutual trust and the individual’s ability to assume the responsibilities assigned to him. Love of others and strive to serve them and sacrifice for them. Flexibility is the ability to adapt to the adversities that encounter the child, helping him to deal with those adversities with strength and intelligence, and in fact, all children possess a theoretical readiness for flexibility as this readiness grows in the event that opportunities for meaningful supportive social participation are available, which increases social ties and sets clear and consistent boundaries In relationships with family members and friends, which gives more scope for learning life skills, the most important of which is the ability to solve problems (Dvorsky, Breaux, & Becker, 2020). The concept of psychological resilience for children emerged when a group of
researchers sought to explain the good performance of some children in difficult circumstances and to understand the processes that explain the unexpected performance of these children, and psychological resilience appears when children successfully adapt to the risk factors they are exposed to, it is the ability to adapt successfully despite Challenges or threatening circumstances. The psychological resilience is a psychological phenomenon that brings good and positive results to the individual, despite the various threat factors of adaptation or growth that an individual may go through during his life. It reflects the individual differences between individuals in responding to threat and tension factors. There are those who respond positively to his harsh conditions, and there are those who are affected by these circumstances, and they reflect negatively on his life. This explains the existence of children who enjoy good mental health even though they live in difficult circumstances (Masten, 2001). Social flexibility contributes to the effective transformation and adaptation to different types of social environments. Also, in social situations, emotion regulation is required to be able to read social signals that facilitate cooperation; social flexibility also includes sensitivity to social cues in the environment that facilitate social interaction (Metran, 2010). Social resilience is a dimension that can be considered an aspect of emotional intelligence, which is defined as the ability to recognize what we and others are feeling, find ways to deal with it, and manage those emotions (Ikizer & Ramírez-Esparza, 2018). In order for a person to adapt to the society in which he lives, he must constantly strive to interact with others, and constantly feel the need and need for others, the sense of the inability to dispense with them, the understanding of others, their feelings, ideas and attitudes, and respect for them. Humility to others, lack of arrogance and condescension towards them, not to talk more about oneself, capabilities and knowledge that the individual possesses, and love of goodness to others and not to harm them, and patience with what you hate from others.

2.4 Previous Study

Many previous studies have been viewed, and the following came from McCracken, Badinlou, Buhrman, and Brocki (2021) identify the role of psychological resilience in the context of COVID-19 and its association with depression, anxiety, and insomnia, standardized measures of depression, anxiety, and insomnia in addition to measures of psychological resilience were carried out through a large-scale online national survey (1102 participants with an average age of 9.36 and 75% are women). The results showed that psychological resilience was negatively associated with symptoms of depression, anxiety, and insomnia, and that psychological resilience factors were important against mental health problems in the context of COVID-19. Yeasmin et al.’s (2020) study aims to explore the impact of COVID-19 on children’s mental health during the lockdown in Bangladesh. An online cross-sectional study was conducted from April 25 to May 9, 2020, among 384 parents who had at least one child aged 5–15 years using non-probability sampling. The children were classified into four groups where 43% of the children had mental disorders and the highest percentage of mental health disorders were for children with a higher educational level of parents, relatives infected with COVID-19, implementing psychological intervention strategies, improving family financial conditions, and literacy among parents. Childcare and job security may help improve the psychological/mental state of children. The study (Kalia, Knauf, & Hayatbini, 2020) recognizing the mediation of cognitive flexibility and the perceived threat of COVID-19, the relationship between child abuse and state anxiety, the Adverse Childhood Experiences Scale (ACEs), the perceived threat of COVID-19, and status anxiety were used in a sample of adults. It assesses the participants’ cognitive flexibility. The results revealed that both the perceived threat from COVID-19 and the flexibility in assessing challenges mediated the impact of abuse, and the results also indicate that early life distress experience in the form of abuse is associated with an increased perceived threat from COVID-19, leading to higher levels of anxiety for the individual. In contrast, childhood abuse is associated with decreased flexibility in assessing challenges, which in turn mediates the relationship between abuse and anxiety. Dawson and Golijani-Moghaddam (2020) study the effect of COVID-19 on mental health and well-being in the United Kingdom during the ‘lockdown’ period (15-21 May 2020) and the specific role of psychological resilience as a potential mitigation process, the study sample was (555) Individual, psychological resilience was significantly and positively associated with greater well-being, and inversely related to anxiety, depression, and distress associated with COVID-19. Avoidant coping behavior was positively associated with all indicators of distress and negatively related to well-being while engaging in the confrontational approach showed weaker correlations with attention outcomes. No relationship was found between adherence to government guidelines and psychological resilience, and psychological resilience showed increased predictive validity for all outcomes of distress and well-being (as well as demographic characteristics and coping responses of COVID-19). And psychological resilience and outcomes of COVID-19 were only partially mediated by coping with responses to COVID-19. Kroska, Roche, Adamowicz, and Stegall’s (2020) study aimed to examine the demographic characteristics, adversities associated with the epidemic, and psychological resilience in relation to general and peritoneal distress in a sample of participants in the US survey during May of 2020. A component sample was selected. 485 participants from Amazon Mechanical Turk (MTurk), N, participants completed measures of
pandemic-related distress, components of psychological resilience (openness to experience, behavioral awareness, and valuable action), peritoneal distress, and general distress. The results indicated that components of psychological resilience may be particularly important targets for prevention and intervention efforts in the midst of the COVID-19 pandemic. Diagnostic interventions, such as acceptance and commitment therapy that target psychological resilience may be beneficial as the impact of the epidemic continues to emerge. The study (Masten, & Motti-Stefanidi, 2020) aimed at identifying multi-system resilience for children and youth in disaster situations: Reflections in the context of COVID-19, the principles of a multi-system perspective on resilience, and key findings on what matters to youth in disasters were identified with reference to the epidemic. Striking similarities are observed in specific psychosocial resilience factors at the level of children, families, schools, and communities.

These parallels indicate that the adaptive capabilities associated with flexibility in these interacting systems reflect interconnected networks and processes that have jointly evolved and may function in harmony. Coyne, Gould, Grimaldi, Wilson, Baffuto, and Biglan (2020) study the aim of the study is to provide practitioners with evidence-based tools that will support psychological resilience, self-care, positive parenting behaviors of caregivers during COVID-19 and beyond, psychological resilience, and self-care. They are essential aspects of mental health. For parents, shaping these processes may help foster family care, support PBS for children, and provide effective and consistent use of the evidence-based parenting “kernel” of parenting. The study (Feger, Vitiello, Plener, & Clemens, 2020) aims to identify the challenges and burden of the Coronavirus (COVID-19) pandemic for children and adolescents in a narrative review to highlight the clinical and research needs in the acute phase and a long return to normal life. The study included research questions to understand the mental health effects of social distancing and economic stress, identify risk and resilience factors, and prevent long-term consequences. And social has an average. The results showed that there were no statistically significant differences in the level of psychological flexibility attributable to the effect of sex. There are statistically significant differences in the level of psychological resilience attributable to the first grade of secondary school. The results showed statistically significant differences in the level of psychological resilience attributable to the effect of sex, where the differences were in favor of females. There are no statistically significant differences in the level of psychosocial adaptation attributable to the class. The results also showed a positive and statistically significant correlation between the level of psychological resilience and the level of psychosocial adaptation among students in Jordan. Sheikh (2017) conducted a study aimed at identifying the relationship between psychological flexibility and life satisfaction among students of Damascus University, according to the variables: sex, specialization, and the sample of research consisted of (500) students and the results of the study concluded that there is a correlation of statistical function between psychological flexibility, and life satisfaction in the individuals of a statistical sample between the average grades of the study members. Statistically significant differences in the average scores of the research sample members on the psychological resilience scale according to the gender variable in favor of male students.

2.5 Comments on Previous Studies

By reading the previous studies that were reviewed, it became evident interest in the psychological and social resilience variable in light of the Corona pandemic because of their impact on the lives of individuals in general, and the lives of students and children in particular. Previous studies have dealt with various goals. Some studies came with the aim of studying the impact of the Corona pandemic on psychological resilience in Other studies examined psychological flexibility and social adaptation, and other studies came to study the differences according to the gender variable in psychological and social flexibility, and by comparing the current study with previous studies, it becomes clear that the current study is distinguished from other studies as it focused on revealing the impact of the Corona pandemic on psychological and social resilience. In kindergarten children, from the point of view of parents, this is what was not covered by previous studies, which strengthens the conduct of this study and gives it a place among previous studies to be a start for other studies in this field in light of the impact of the Corona pandemic, in addition to the nature of the childhood stage that was covered within the study sample and the importance of this stage as it is an important stage in the formation of Individual personality.

3. Method and Procedures

3.1 Study Methodology

This study relied on the descriptive approach, for its suitability in achieving the objectives of this study.

3.2 Study Population

The study community consisted of all the parents of children who are studying in kindergarten in the city of Amman, where their parents respond to the paragraphs of the study tool electronically using an electronic link designed through the Google Drive application and sent via social media to the parents of the children.
3.3 The Study Sample
The study sample consisted of parents of (200) children and girls from kindergarten children in Amman, by (100) mothers and (100) fathers, and they were chosen from the study population in a random way.

3.4 Study Tool
The study tool was developed to collect data from the individuals of the study sample, with the aim of revealing the impact of the Corona pandemic on the psychological and social resilience of kindergarten children from the point of view of parents, by referring to the theoretical literature and previous studies such as the study (Al-Darawsheh, 2017; Al-Shawarib, 2017; Al-Smadi, 2015), and the study tool included the resilience measure, which was divided into two areas as follows:

3.5 The Field of Psychological Resilience
It included 20 items measuring the psychological flexibility of kindergarten children.

3.6 The Field of Social Resilience
It included 17 items measuring the social resilience of kindergarten children.

The validity of the study tool: In order to ensure the apparent validity of the study tool in its initial form, it was presented to (8) arbitrators with experience and competence in the field of education, with the aim of judging the degree of soundness and clarity of the linguistic wording of the paragraphs, and its suitability to measure what it was intended for, and the extent of Each paragraph belongs to the scale to which it belongs, in addition to any procedure required to delete, amend or add to the paragraphs of the questionnaire or proposals they deem appropriate, and the arbitrators ‘comments and proposals were taken into account and the paragraphs of the questionnaire were amended based on the arbitrators’ consensus by the rate of agreement for the amendment (89%). Deleting a paragraph from the field of psychological resilience, and (3) paragraphs from the field of social resilience, amending the wording of some paragraphs, and the questionnaire was released in its final form.

In order to ascertain the indications of structural validity for all paragraphs of the study tool, it was applied to an exploratory sample consisting of (20) individuals from outside the study sample and from the study population, and calculating the correlation coefficients between each paragraph and the scale to which it belongs, and Table 1 illustrates this.

Table 1. Correlation coefficients between each paragraph and the domain to which it belongs

| No. | Paragraph-Scale Connection | No. | Paragraph-Scale Connection | No. | Paragraph-Scale Connection |
|-----|-----------------------------|-----|-----------------------------|-----|-----------------------------|
|     | Psychological Resilience Domain | 13 | .873** | 5 | .786** |
| 1   | .791** | 14 | .565** | 6 | .746** |
| 2   | .713** | 15 | .838** | 7 | .655** |
| 3   | .778** | 16 | .859** | 8 | .732** |
| 4   | .476* | 17 | .698** | 9 | .854** |
| 5   | .693** | 18 | .717** | 10 | .533** |
| 6   | .826** | 19 | .879** | 11 | .615** |
| 7   | .724** | 20 | .819** | 12 | .719** |
| 8   | .731** | Social Resilience Domain | 13 | .618** |
| 9   | .746** | 1 | .805** | 14 | .455** |
| 10  | .837** | 2 | .799** | 15 | .554* |
| 11  | .657** | 3 | .822** | 16 | .720** |
| 12  | .832** | 4 | .891** | 17 | .734** |

* Acceptable correlation coefficients at the significance level (α ≤ 0.05).
** Acceptable correlation coefficients at the significance level (α ≤ 0.01).

The Table 2 shows that the correlation coefficients between each paragraph of the psychological resilience scale and the psychological resilience scale as a whole ranged from (0.879-0.476), and the correlation coefficients between each paragraph of the social resilience scale and the social resilience scale as a whole ranged between (0.891-0.455), which are significant and acceptable correlation coefficients for the purposes of applying this study.
The stability of the study tool: In order to ensure the reliability of the study tool, it was applied on pilot study consisting of (20) individuals from study population and outside the study sample, and the Cronbach’s alpha equation was applied, the Table 2 shows that.

Table 2. Cronbach’s alpha results to detect internal consistency coefficients of the study scale:

| Study Domains                      | Segments No. | Cronbach’s alpha |
|------------------------------------|--------------|------------------|
| Psychological Resilience Domain    | 20           | 0.80             |
| Social Resilience Domain           | 17           | 0.82             |
| Domains as a whole                 | 37           | 0.86             |

It is evident from Table 2 that the coherence coefficient for the field of “psychological resilience” reached (0.80), while the coherence coefficient for the field of “social resilience” reached (0.82), while the coherence coefficient for the measures as a whole reached (0.86), all of which are high and acceptable consistency coefficients for the application of this study.

Correction of the study tool: Likert scale of the five-point gradient was used to scale the opinions of the study sample, and it was given to a very large degree (5), to a large degree (4), to a medium degree (3), to a small degree (2), to a very small degree (1) By placing a sign (✓) in front of the answer that reflects the degree of their agreement, and the following classification was relied upon to judge the means as follows: (highest value - lowest value)/5 and equal to (5-1)/3 = 1.33 length of the category. Accordingly, the means of the answers were classified as follows: (2.33 and below is low), (From 1.34- 3.66 is Medium), (From 3.67 to 5 is high).

3.7 Study Variables

Independent variables: gender and has two classes: (male, female).

Dependent variables: They are a measure of two domains: psychological resilience and social resilience.

Statistical treatments: To answer the study questions, appropriate statistical methods and treatments that were made using the Statistical Package for Social Sciences (Version 25SPSS) were used, as follows: Extract the frequencies and percentages of the distribution of the study sample according to the study variables. And the arithmetic means and standard deviations of the study measures as a whole and the paragraphs of each scale separately, and the application of (t) test independent samples (independent sample t-test) to detect differences in psychological and social flexibility according to the gender variable.

4. Results of the Study

This part includes a presentation of the findings of the study that aimed to identify the extent of the impact of the Corona pandemic on the psychological and social resilience of kindergarten children from the parents’ point of view. Presentation and discussion of the results of the first question and a text: What is the impact of the Corona pandemic on the psychological and social resilience of kindergarten children from the parents’ point of view? To answer this question, averages and standard deviations of the impact of the Corona pandemic on the psychological and social resilience of kindergarten children were extracted from the parents’ point of view, as shown in the following tables.

Table 3. The arithmetic means and standard deviations of the impact of the Corona pandemic on the psychological and social resilience of kindergarten children from the parents’ point of view

| No. | Resilience Scale                      | Means | Standard Deviation | Degree   | Rank/Arity/Class |
|-----|---------------------------------------|-------|--------------------|----------|-----------------|
| 1   | Psychological Resilience Scale        | 2.71  | 0.33               | Moderate | 1               |
| 2   | Social Resilience Scale               | 2.26  | 0.37               | Low      | 2               |
|     | Scale as a whole                      | 2.51  | 0.26               | Moderate |                 |

It can be seen from Table 3 that the effect of the Corona pandemic on the psychological and social resilience of kindergarten children from the point of view of parents was average, as the arithmetic mean of the total score was (2.51) and a standard deviation (0.26), where field No. (1) Came which stated: “Psychological flexibility” with the highest arithmetic mean (2.71) and a standard deviation of (0.33) and the score was medium, while field No. (2) Which stated: “Social flexibility” came with the lowest arithmetic mean (2.26) and a standard deviation of (0.37) and the score was low.
Table 4. Arithmetic means and standard deviations of the impact of the Corona pandemic on the psychological resilience of kindergarten children from the parents’ point of view

| No. | Segment                                                    | Means  | Standard Deviation | Degree    | Rank |
|-----|------------------------------------------------------------|--------|--------------------|-----------|------|
| 13  | Pays attention to the stimulants around.                   | 3.11   | 0.84               | Moderate  | 1    |
| 9   | Capable to adapt to changes.                               | 3.08   | 0.77               | Moderate  | 2    |
| 11  | Likes challenges.                                          | 3.02   | 0.93               | Moderate  | 3    |
| 8   | Prefers to be initiative in solving problems.              | 2.98   | 0.81               | Moderate  | 5    |
| 20  | Seeks to achieve goals no matter the difficulties.         | 2.98   | 0.94               | Moderate  | 5    |
| 1   | Has the ability to handle unpleasant emotions.             | 2.96   | 0.88               | Moderate  | 6    |
| 16  | Trusts self-abilities to succeed in life.                  | 2.96   | 0.90               | Moderate  | 6    |
| 3   | Not easily frustrated by failure.                          | 2.92   | 0.85               | Moderate  | 4    |
| 14  | Meditates a lot in the surroundings.                       | 2.84   | 0.93               | Moderate  | 7    |
| 4   | Does not give up easily.                                   | 2.80   | 0.96               | Moderate  | 8    |
| 6   | Sees the funny sides of situations.                        | 2.76   | 0.88               | Moderate  | 9    |
| 12  | Feels proud about self-achievements.                       | 2.72   | 0.98               | Moderate  | 10   |
| 15  | Thinks carefully before starting any task.                 | 2.68   | 1.01               | Moderate  | 11   |
| 18  | Likes joking with friends.                                 | 2.61   | 0.88               | Moderate  | 12   |
| 19  | Dealing with everything seriously.                         | 2.46   | 0.90               | Moderate  | 13   |
| 7   | Works very hard regardless the results.                    | 2.44   | 1.04               | Moderate  | 14   |
| 17  | Takes good care of oneself.                                | 2.44   | 0.89               | Moderate  | 14   |
| 5   | Regains balance after going through sickness or getting hurt.| 2.33   | 0.92               | Low       | 15   |
| 2   | Capable of dealing with new situations in life.            | 2.31   | 1.00               | Low       | 16   |
| 10  | Finds people to help overcome physiological issues.        | 1.90   | 1.06               | Low       | 17   |

Psychological Resilience as a whole 2.71 0.33 Moderate

Table 4 shows the arithmetic averages and standard deviations of the field of psychological resilience, and the scale as a whole came with an arithmetic mean (2.71) and a standard deviation (0.33) and the score was medium. Where Paragraph No. (13) Which states: “Pay attention to stimuli around him” came with the highest arithmetic mean (3.11) and a standard deviation of (0.84) and the degree was medium, while Paragraph No. (10) States: “He finds people who help him to overcome His psychological problems “with the lowest arithmetic mean (1.90) and a standard deviation of (1.06), and the score was low.

Table 5. Arithmetic means and standard deviations of the impact of the Corona pandemic on the social resilience of kindergarten children from parents’ point of view

| No. | Segment                                                  | Means  | Standard Deviation | Degree    | Rank |
|-----|----------------------------------------------------------|--------|--------------------|-----------|------|
| 13  | Takes the lead to help others through their bad times.   | 2.52   | 0.99               | Moderate  | 1    |
| 3   | Knows from where to get help.                            | 2.50   | 0.96               | Moderate  | 2    |
| 8   | Shares others in their happy and sad times.              | 2.45   | 0.92               | Moderate  | 3    |
| 9   | Can easily make new relationships with others.           | 2.32   | 0.98               | Low       | 4    |
| 10  | Seeks to build social relationships with others.         | 2.32   | 0.96               | Low       | 4    |
| 11  | Has a good social relationship with others.              | 2.29   | 1.04               | Low       | 5    |
| 4   | Knows when the right time to ask for help is.            | 2.26   | 1.01               | Low       | 6    |
| 5   | Can prove ones-presence regardless the place.            | 2.26   | 0.91               | Low       | 6    |
| 2   | Depends on oneself rather than asking others for help.   | 2.25   | 0.88               | Low       | 7    |
| 7   | Receives help and support from others.                   | 2.24   | 1.02               | Low       | 8    |
| 12  | Support colleagues even if they are mocked by others.    | 2.24   | 0.95               | Low       | 8    |
| 6   | Likes team work.                                         | 2.18   | 0.97               | Low       | 9    |
| 14  | Has so many friends who are dependable.                  | 2.18   | 0.89               | Low       | 9    |
| 16  | Makes an effort to look good in front of others.         | 2.16   | 0.80               | Low       | 10   |
| 17  | Being patient when getting hurt from others.             | 2.15   | 0.82               | Low       | 11   |
| 15  | Participates in social activities.                       | 2.13   | 0.87               | Low       | 12   |
| 1   | Takes decisions that might not please others.             | 2.08   | 0.90               | Low       | 12   |

Social Resilience Scale 2.26 0.37 Low
Table 5 shows the arithmetic averages and standard deviations of the social resilience scale, and the scale as a whole came with an arithmetic mean (2.26) and a standard deviation (0.37), and the score was low. Paragraph No. (13) Which stated: “He takes initiative to help others in their misfortunes” came with the highest arithmetic mean (2.52) and a standard deviation of (0.99) and the score was medium, while Paragraph No. (1) Which states: “He takes decisions that do not satisfy others “with the lowest average (2.08) and a standard deviation of (0.90). The score was low.

Table 6. Independent sample t-test results to detect differences in the study scale by gender variable

| Resilience Scale         | Gender Variable | Digit Means Deviation | (t) Value | Degree of Freedom | Statistical Significance |
|--------------------------|-----------------|-----------------------|----------|-------------------|-------------------------|
|                          |                 |                       |          |                   |                         |
| Psychological Resilience | Males           | 100                   | 2.74     | 0.37              | 1.232                   | 198                     | .220                    |
| Domain                   | Females         | 100                   | 2.68     | 0.30              |                         |                         |                         |
| Social Resilience Domain | Males           | 100                   | 2.34     | 0.36              | 2.834                   | 198                     | .005                    |
|                          | Females         | 100                   | 2.19     | 0.36              |                         |                         |                         |
| Scale as a whole         | Males           | 100                   | 2.56     | 0.28              | 2.659                   | 198                     | .008                    |
|                          | Females         | 100                   | 2.46     | 0.24              |                         |                         |                         |

Table 6 shows that there are no statistically significant differences in the means of the sample individuals’ estimates of the psychological flexibility scale according to the gender whenever (t) value was (1.232) by significant (0.220).

There are statistically significant differences in the means of the social flexibility scale according to the gender variable, whenever (t) value was (2.834) by significant (0.005), were differences in favor of males with a mean of (2.34), while the mean for females was (2.19). There are statistically significant differences in the means of total scale according to the gender variable, whenever (t) value was (2.659) by significant (0.008), were differences in favor of males with a mean of (2.56), while the mean for females was (2.46).

The results indicated that the effect of the Corona pandemic on the psychological resilience of kindergarten children from the point of view of parents was of a moderate degree, and that the effect of the Corona pandemic on the social resilience of kindergarten children was of a low degree. This indicates the impact of the Corona pandemic on the psychological resilience of kindergarten children, quarantine, closures and restrictions on communication imposed a complete change in the psychological and social environment of individuals, and the current situation conditions were reflected on children and their families, as kindergartens were closed for periods and schools were closed, social communication and gatherings were restricted and activities canceled. Leisure time outside the home, and asking parents to homeschool their children, and some of them work at the same time from home, and the economic situation of some families worsened with high levels of unemployment, and this led to psychological pressures among family members, and this led to great pressure on children and their families, which reflected on mental health and social communication. The study (Yeasmin et al., 2020) indicated that a large percentage of children suffer from mental health disorders during the lockdown period in light of the Corona pandemic, and that implementing psychological intervention strategies and improving family financial conditions, and job security may help improve the psychological and mental state of children. The study (Fegert, Vitiello, Plener, & Clemens, 2020) showed that there are many mental health threats associated with the Corona epidemic and its subsequent restrictions, as the mental health risks associated with Corona will inappropriately affect children and adolescents who are already deprived and marginalized, and child psychiatrists must Adolecents will ensure continuity of care during all stages of the epidemic. This result was in agreement with the study (Masten & Motti-Stefanidi, 2020), where striking similarities were observed in the specific psychological and social resilience factors at the level of children, families, schools and societies. It indicates that the adaptive capabilities associated with resilience reflect interconnected networks and processes that have jointly evolved and may work in harmony in light of the pandemic. This result is also in agreement with the study by Coyne, Gould, Grimaldi, Wilson, Baffuto, and Biglan (2020), which showed that psychological resilience and self-care are essential aspects of mental health. For parents, shaping it may help promote family care, support prosocial behavior for children, and provide effective and consistent use of the evidence-based parenting “kernel”. This result differed with the Al-Alawi study (2017), which indicated that the level of psychological resilience of the students was high, while the level of social adaptation in them was moderate. Presenting the results of the second question and discussing it as an ounce: Are there statistically significant differences at the level of significance (α ≤ 0.05) in the extent to which the Corona pandemic affects the psychosocial resilience of kindergarten children from the point of view of
parents due to the sex variable? To answer the second question, the averages were extracted.

5. Recommendations

According to the results of the study, the researcher recommended the following:

1) Implementing psychological interfere strategies suitable for families and children to help them dealing with new situations in the presence COVID-19 pandemic.
2) Providing the psychological support for children, especially for those who were infected with COVID-19.
3) Implementing strategies in order to improve the financial conditions for the damaged families of COVID-19 pandemic.
4) Encouraging the electronica social communication for children with their friends, under the supervision and help of family.
5) Children should participate in social activities while taking into consideration the protection procedures and social distancing.

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