

Effectiveness of Positive Thinking Skills Training on Depression in Female Students

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Abstract

purpose: The purpose of this study was to determine the effectiveness of teaching positive thinking skills on decreasing depression among female students of the Sabzevar University of Sabzevar. **Methodology:** The study population consisted of all female students of Azad University of Sabzevar Branch in the academic year of 97-96, including 30 people who were selected using purposeful sampling. They were randomly assigned to the experimental group (15) and the control group (15 People) was replaced. The Beck Depression Inventory and Positive Thinking Training Package, which was set up in 9 sessions one and a half hours, was used to collect data.

Findings: The results of statistical analyses showed that teaching positive thinking skills with an effect size of 0.13 reduces students' depression.

Conclusion: At the end of the treatment sessions, students learned in both groups to choose their own behaviors in order to attain their demands, each of whom should choose responsible behaviors while maintaining ethical principles and applying optimistic, correct and responsible actions to Your wishes are also met. Teaching positive thinking skills creates a supportive and safe environment where students can experience a feeling of acceptance and psychosocial security, which brings greater compatibility and fewer conflicts.

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1. Introduction

Depression is the most common psychiatric disorder and has recently been rising steadily. Depression is a mental cold (Schouw Enberg, 2004). Depression is associated with great sadness, feelings of worthlessness and sin, withdrawal from others, loss of sleep, appetite, and libido, and the lack of interest in the pleasures of the common activities (Stohanan & Seligman, 2012). Depression is the complex emotional disorder that has experienced mild to moderate, most people in some living conditions. Depression involves self-reflection of sadness and excitement as shame (Lisa, 2006). The presence of depression in young people is important because nearly 30% of university students suffer from some degree of depression at the time they enter the university. Several studies point to the existence of health problems in the world, especially among students. The high level of depression affects the cognitive status, information processing, and memory, and disrupts effective learning, so that students who have a higher level of anxiety than students in similar situations, but with lower depression levels, poor grades They earn triceps (Beidel, 2001).

The World Health The organization has listed world mental health problems at 11.5% in 1998, the statistics show that in the year 2020, these disorders will reach 15%, which means that there are depressed people. It can put a heavy burden on societies. Also, according to the organization in 2011, major depression is the fourth a most important cause of disability worldwide, and it is anticipated that in the coming years it will be the second most common disease that afflicts the world population; it should be noted that although Depression is observed in all groups, but some groups are more vulnerable than others, and it can be said that the general prevalence of depression in women is higher than that of men (Izadi Fard, Sepasi Ashtiani, 2010). It is important to pay attention to women's mental health. Having a spirit of hope, vitality, and happiness can have a significant effect on their functioning and activity and, in turn, can provide next-generation happiness (Gafni & Geri, 2010).

One of the factors that may affect depression is positive thinking. Positive Thinking is a subset of the theory of positivist psychology that roots in the thinking of psychologists such as Karl Rogers and Abraham Maslow (humanistic psychology) and is now expanding rapidly (Balkis & Dura, 2007). In recent decades, a new approach to psychology has been taken into consideration, calling it "positive psychology." (Seligman et al., 2015; Seadatee Shamir, Mazboohi, Marzi, 2019). in the comprehensive paper, defined positivist psychology as follows: "Positive psychology is the scientific study of positive experiences and positive individual traits and the institutions whose growth Positive psychology, considering that it is optimal for mental comfort and functioning, may at first seem a clinical psychological attachment, but our belief is that those who have the most severe psychological pressures In life, they are looking for something far more than relieving pain and suffering. People with difficulty seek more pleasure, more pleasure and more satisfaction than spend less. They are looking for strong points, not the weaknesses at all, they are looking for a meaningful life with intent and purpose (Seadatee Shamir, Saniee, Zare, 2019). These conditions are not easily achieved by relieving pain and discomfort. "

Another factor that can affect depression is spirituality (Smorti, 2014; Taheri, dortaj, delavar, Seadatee Shamir, 2019). Spirituality is a consciousness of being or a force beyond the material aspects of life, and it gives rise to a deep sense of unity or bond with the universe (Tanhaye Reshvanloo & Seadatee Shamir, 2016). Spiritual reliance can have a devastating effect on depression and there is a positive and meaningful relationship between mental health, physical health, life satisfaction, and liveliness (Tanhaye Reshvanloo keramati & Seadatee Shamir, 2016). In recent years, the issue of spirituality and its relation to physical and psychological functions have been paying great attention (Seadatee Shamir, Mazbohi, 2018). Although there is not much agreement on this issue, the analysis and meta-analysis of the findings of the researchers indicated that spirituality and its related concepts (Such as religion, beliefs, and religious practices) have a positive relationship with health. For example, spirituality seems to have a high correlation with low levels of depression, antisocial behavior, and suicide (lotfi & Seadatee Shamir ,2016, Chang, 2008; Chase, 2003).

Spirituality is a personal relationship with transcendental existence. Although there is a relationship between religion and spirituality, spirituality is more personal, while religion is the representation of spirituality in the context of private religion and includes personal and social rituals (Chu & Choi 2005).

Positive thinking is a key feature of human behavior that provokes individuals and leads them to actions and moves toward their goals (Bryce, Nicola; Camp, Segalar & Rosemary, 2005). Forecasting, planning, ordering behavior, emotions, and attitudes, and Processes It is essential to achieve the goals and as a result of the individual's health (Behrens, Sanders & Kim, 2006). For this purpose, it has been shown in this research that positive thinking towards the future (such as optimism and hope) has a positive relationship with better behavior and higher general health, and also with the negative results of psychology have a negative relationship. In this research, we focus on two concepts, hope and optimism, and its relationship with depression (Atkins et al. 2015). Thinking about the future is a way of understanding and interpreting the future of a person. The positive and negative aspects of this thinking can be examined in two distinct systems, one whose amplification does not necessarily mean a further reduction (Amiri, Ghanbari Hashem Abadi, Agha Mohammadian, 2006) This study focuses on the importance of negative thoughts about the future and with less attention to the importance of positive expectations. Two key concepts are the study of the positive expectations of individuals about the future of hope and optimism (Alkazer et al., 2018).

The positive theory is a thinking-oriented model that emphasizes the causal role of thinking towards the purposes of producing feelings, in which positive emotions follow the understanding of success in achieving goals while negative emotions result from perceived failures (Barrow, 2004). Snyder defines hope as a positive motivational state based on a sense of interaction derived from an (a) agent (a target-oriented energy) or (b) a pathway (plan for achieving goals). In other words, hope is the sum of the perceived abilities to create ways to achieve the desired goals, along with motivating them to go through these paths. The main element of the hop theory that was developed by Snyder is the existence of a goal that acts as the ultimate point of the operation of hope. Slow, for example, thinking and acting thinking. The components of roads refer to the ability to generate possible paths to the goals and tools needed to overcome the problems of the goal, while the factors of motivation and the will to use these paths refer to the desired goals. Theory Hope Snyder is based on the interaction between the two processes (Balkese and Dora, 2017).

Optimism is defined as the tendency to have overall expectations for good outcomes. So when confronted with a challenge, humorous people have self-confidence and Egypt, even when it's difficult, while more pessimistic people are suspicious and hesitant Craciun, Holdevici & Craciun, 2010). Optimism or pessimism can lead to differences in coping methods, healthy behaviors, and emotional experience when confronted with problems. Despite the obvious conceptual distinctions between hope, optimism and other related concepts such as self-efficacy, self-esteem, documentary opacity, and problem-solving, these concepts have common ground. For this reason, to better understand them as independent concepts, some of the tips for this model are briefly described (Barrow, 2004).

Butler et al. (2019) have argued that optimism is associated with positive outcomes since it implies both thinkings involved in the agent. However, the theory of positive thinking reflects on the causal effects of the person in the factor component While at the optimism the potential causes of the outcome are attributed to internal forces (eg, personal talents, self-awareness) or external forces (such as helping friends or family, luck, religious beliefs, and spiritual beliefs). The pathway component of hope theory is a concept that is not looked at in optimism. Previous studies from several authors showed that hope and optimism are interrelated, but with additional notions.

2. Methodology

The present study is fundamental research in terms of its purpose and is quantitative research in terms of its method. In terms of data collection, it is an experimental part of the research. The design of this study was a pre-test of the post-test with the control group. In this research, the study population consists of all female students of Sabzevar University of Azarbaijan in the academic year of 97-96, whose number was 8,000 according to a report from the university's undergraduate education. The sample consisted of 30 people who were selected from the target population by purposeful sampling and were randomly assigned to experimental (15) and control (15) groups. In this research, all-female students of the Sabzevar University of Azad University were randomly selected from all disciplines. First, they selected all faculties of civil engineering, mathematics, psychology, and English, and then from each field, two Inputs were selected randomly from each input of a class, one of which was considered as a test group and one of the classes as a control group. In the next step, depression questionnaires were given to the experimental and control groups. After completing the questionnaire, the experimental group did not teach the skills of positive thinking and the control group. At the same time, the training group was emphasized that by the end of the course contents to other students in order not to transfer the training indirectly to the control group. Subsequent to the post-training training, both groups were provided and the completed questionnaires entered the analytical phase.

Beck Depression Inventory is one of the most popular instruments for measuring depression, which included 21 questions. This questionnaire was translated by Ganji (1366). The score for each of your questions is from 0 to 3. The minimum and maximum scores obtained from this questionnaire are 0 and the maximum is 63. The questions in this questionnaire include mood, pessimism, feelings of failure, self-knowledge, sin, punishment, self-abomination, suicidal thoughts, crying, irritability, hesitation, insomnia, lack of appetite, and mental retardation and decreased libido. A score of 1-10 normal, 11-16 slightly depressed, 17-20 need to refer, 30-30 relatively depressed, 30-40 severely depressed, and 40 upward depressive excess. Beck et al. (1988) obtained the validity of the questionnaire by correlating it with the Hamilton Psychoanalytic Grading Questionnaire (73/0) and with the form of the Band of the Questionnaire (76/0) at the level of 001/0 and the reliability of the questionnaire by the method of two halves and Spearman-Brown reported 0.81.

There have also been various studies in the country that measure the psychometric properties of this tool. Among these researches, we can mention the study of metatarsi's and methane in 1373, whose coefficient of reliability in Iran was 0.78. In other researches such as Chegini's research in 2002, the reliability coefficient of the questionnaire was reported through Cronbach's alpha (90/0) (Khalili, 1392). Rwandost (2002) reported the reliability of the questionnaire by Cronbach's and Pushup's alpha methods, respectively (0.80 and 0.79, respectively) (Saatchi et al., 2011). Khalili (1392) also reported on the validity of the questionnaire by correlating with the short form of Beck Depression 0.44 at 0.01 level and reliability of the questionnaire through Cronbach's alpha = 0.83, indicating high validity and reliability of the questionnaire has it.

3. Findings

Table 1 shows Descriptive information of the age and educational status of the participating students in both the experimental and control groups.

Table 1. Descriptive information of students' age and educational level

group	sex	number	Age average	S. deviation	Minimum age	Maximum age
experiment	Female	15	23	1/11	18	42
Control	Female	15	25	1/01	18	50

Table 2. Descriptive indexes of depression in pre-test and post-test stages

Variable	group	number	Mean	Standard deviation
Depression	pretest	15	49/02	18/13
		15	46/52	7/43
	posttest	15	33/02	7/13
		15	46/52	4/32

Table 2 shows the mean of pre-test scores for participants in the test and control group in depression. Accordingly, the mean and standard deviation of depression in the pre-test stage in the experimental group and in the control group are not significantly different. Therefore, it can be concluded that the two groups are comparable in the depression variable in the pre-test stage. Table 2 shows the mean post-test scores of participants in the test and control group in the variable of depression. Accordingly, the mean and standard deviation of depression in the post-test in the experimental group and in the control group are significantly different. That is, the mean score of subjects in the test group in the depression variable in the post-test stage is higher than the mean of the control group. Therefore, it can be concluded that these two groups have a significant difference in depression in the post-test phase. This can be attributed to the effect of independent variables, namely, the teaching of positive thinking skills to the experimental group.

Table 3. The results of the Kolmogorov Smirnov test and Levin test for homogeneity of variances

Dependent variable	test	z	Significance
Depression	pretest	1/32	0/46
	F	df2	
	1/23	28	0/24

Table 3 shows the results of the Kolmogorov Smirnov test. Accordingly, the distribution of depression scores in the pre-test and post-test is normal. Therefore, it is believed that the distribution of data is a nullity. The results of Levine's test for homogeneity of variances showed that there was a significant difference in the components of the scores of depression greater than 05 / 0 and therefore is not meaningful in the sense that the variances of the groups are not scattered and the groups are comparable. To determine the homogeneity and equality of the depression covariance matrix, the Ubox test was used and the results are reported in Table 4.

Table 4. Mbox test related to default equation of covariance matrix in the test and control group

Dependent variable	test	Box ratio	F	Df1	Df2	Significance
0/54	1/77	6	1/56	6	1/77	0/54

The results presented in Table 4- show that the significance level of the above test is more than 0.05. The result of the table shows that the default equivalence of covariance matrices is confirmed. The results of effective test subjects for depression score of participants showed a significant difference between the two groups. Accordingly, the value of the Mbox in the depression variable was 7.27, the value of $f = 1.6$ and the significance level was 0.54. Also, the results of Bartlett's sprite test with a degree of freedom of 28 at a significant level of 0.01 were significant for depression, which indicates that an acceptable level of internal correlation exists in the depression variable.

Table 5. Results of covariance analysis in experimental and control group

Source	dependent variable	Sum of squares	Degree of freedom	mean of squares	F	Significance	eta
Interaction effect	Depression	109.306	1	109.306	1.184	.284	.032
group	Depression	508.869	1	508.869	5.511	.025	.133
Error	Depression	3324.092	28	92.336			
Total	Depression	38584.000	30				

Similarly, the results of Table 5 show that the interactive effect of the group and the pre-test with the value ($f = 1.184$) and the significant level ($p = 0.284$) is not significant, meaning that the default regression

line slope is observed and the groups together Are comparable. But based on the results of the independent variable (positive thinking), the dependent variable (depression) is significant ($F = 5.11$) and the significance level ($p = 0.025$). In the sense that (positive thinking has led to a decrease in depression in the experimental group and a significant difference in the benefit of the experimental group between the experimental and control groups, and also the fractional ethanol shows that (133%) of the changes Created in the test group was the result of providing an independent variable to the test group.

To investigate and decide on the reliability of the above hypothesis three months after the last run, a post-test re-test was carried out using the covariance analysis test. The results of this analysis are presented in Table 6, which relates to the analysis of covariance analysis, the difference between the mean depression scores of the students in the group Testing and control are provided after the second test.

Table 6. The results of covariance analysis in experimental and control group in the second post-test

Source	dependent variable	Sum of squares	D f	Mean of squares	F	Sig	Eta
Interaction effect	Depression	108.301	1	109.306	1.123	.043	.032
group	Depression	498.861	1	508.869	4.501	.032	210/
Error	Depression	4124.091	28	98.336			
Total	Depression	42584.123	30				

As Table 6 shows, the interactive effect of the group and the pre-test with the value of ($F = 123.1$) and the significant level ($p = 0.43$) are not meaningful, meaning that the default regression line slope is observed and the groups together Are comparable. But based on the results of the independent variable (positive thinking), the dependent variable (depression) is significant with the value ($F = 5.01$) and the significant level ($p = 0.32$). This means that positive thinking has led to a reduction in depression in the experimental group at the post-test stage, and a significant difference in the test group between the experimental and control groups, and also the fractional ethanol (0.21) One hundred percent of the changes in the experimental group resulted from the independent variable being presented to the experimental group. Therefore, the results of the present study can be considered as reliable in terms of the reliability of the results in the second post-test.

4. Conclusion

The results of this hypothesis analysis showed that the effect of positive thinking on depression was significant. In the sense that positive thinking led to depression in the experimental group. The results of this study are based on the results of Garland, Gaillard and Frederickson (2012), Kang, Smoski and Robbins (2013), Sherrer (2013), Morowatisharifabad & etal (2016), Buffer & Richard (2002), Marzi & seadatee shamir (2017,2019). Asmarty (2014), lotfi & Seadatee Shamir (2016). Alcazar, Verdijo, Bosco (2011), Goldin & Gross (2011), Ayutthaya and Dodgey (2009) and Walsh (2008); Orlando (2015), Mauritius (2015), Sullivan and Hamarra (2009), Keynesian, Dolly, Bautz, Agent and Malone (2011); Ferrell, Wooleck, and Kai (2009) Classon (2010).

The results of the study, (Izadi Fard & Sepasi Ashtiani,2010). consistent with the findings of this study, showed that positive thinking can form the basis of people's judgment and their behavioral and semantic system. Hence, students who received positive thinking received the conclusion that their personal traits, such as intelligence, fixed, and immutable, are God-given, thus choosing high-level homework and activities. In contrast, students who have not received positive thinking believe that positive thinking is not a constant matter, but through effort and experience, it can be reduced. These learners pursue challenging and challenging goals. Therefore, when dealing with obstacles such as inappropriate conditions, complicated books or poor teachers, and other problems, with individual the initiative, they will find a way to overcome these problems.

Dun & Rake's findings (2010), along with research findings, showed that student with high depression, academic achievement goals, and students with low depression choose functional goals. Also, in line with the findings of Ersche, Turton, Pradhan, Bullmore & Robbins (2010).in explaining the research hypothesis, learners who have received positive training mainly focus on improving their competencies and acquiring new knowledge, and to foment the failures The past is trying and doing homework that is hard and new, but people with high depression often choose more performance goals and prefer assignments that can be done without mistakes, so they are more likely to fail, and Most experience depression(Michinov, Brunot, Ohayel & Delaval ,2011).

As Mangs and Lamp (2008) & Ferrari & Diaze Moralez (2007) did in their research on a number of students, the majority of students who believe beliefs as a flexible and diminishing nature are more likely than students who believe in the intrinsic beliefs Ferrari & Diaze Moralez, 2007) and Buffard and Bouchard (2002) also found in their study of the concept of depression among students that ordinary students often used to reduce depression and eliminate or reduce interpersonal difficulties. Cognitive strategies are used, but students with higher levels of positive thinking often use meta-cognitive strategies to reduce depression and eliminate or reduce interpersonal difficulties, and work harder to solve problem-solving tasks. Students with higher depression favored challenging assignments.

Based on the findings of Asmurti (2014) and in line with the findings of this research, we can say that the positive and optimistic real knowledge and beliefs of students who are created as a result of positive thinking is organizing their world and meaning their experiences. It provides conditions that beliefs can create a different psychological world in individuals and guide them in different ways to think, feel, and act, hence their depression diminishes. According to the results of this research, we can say that our beliefs are that those who organize our world around us give meaning to our experiences, and in general, they form the behavioral and semantic system of each person.

Positive thinking techniques are effective in reducing muscle relaxation and reducing worries and thus, reducing depression (Kabat Zein, 2003). The main mechanism of positive thinking seems to be self-control because focusing attention on a neutral stimulus like breathing creates an appropriately focused environment and prevents mental work from threatening thoughts and worries about performance in assessment situations (Morowatisharifabad, Khankolabi, Gerami, Fallahzade, Mozaffari-khosravi & Seadatee-Shamir, 2016). As the Positive Thinking Program reinforces both physical performance and mental performance, participants in the positive thinking program can be expected to have a more positive attitude toward their abilities and to be successful in coping with anxiety and worry. In other words, this method reduces anxiety, physiological excitation, and depression by decreasing one's awareness of the momentary experiences and paying attention to the cognitive system and the more efficient processing of information (Kabat-Zein, 1990). The first reason is that positive thinking depresses the key to depression and reduces intelligence. When a person is in danger, it is clear that his body and mind are in a state of extreme reaction. This state of affliction causes his ability to understand and reduce his judgment and self-esteem. What a positive awakening does is that it increases the amount of calm and calm daily, resulting in less unpleasant responses.

The second reason for the recovery of post-meditational relationships are to increase the awareness of the capacity to accept the experiences and events occurring at any time in a person's life. This spirit of readiness for confrontation with whatever happens spontaneously improves his relationship with the rest, because he no longer has the spirit of denying or denying or eliminating people as they are, without first being prejudiced. It is natural that this way, along with the disadvantages and errors of people, can better understand the good and the positive points of personality and the behavior of people (Zahmatkesh, Hosseini Nassab & Seadatee Shamir, 2016; Seadatee Shamir & Sanee'I Hamzanlouyi ,2017).

Mark (2004) explains the role of positive thinking in communicative skills and reduction of depression. Positive thinking by persuading people to frequent practice Focus on the problem and courageous awareness on the subject and minds of individuals, responding to conflicting situations from the state The automaton

transforms into a conscious and appropriate state and strengthens the consciousness and depression of the individual.

As expected, both components of hope had a significant relationship with levels of depression. However, the relationship between total scores of hope and depression, and between the scores of personal factors and pathways and depression were also meaningful. The relationship between total scores of hope and depression in accordance with the results of previous studies have shown that hope is related to depression levels, high hopes with fewer symptoms of depression, and vice versa (Seadatee Shamir, Mazboohi, & marzi, 2019; Seadatee Shamir, Sane'e'I Hamzanlouyi, 2017). Although these significant relationships between depression and hope components of the previous studies and studies violate, some of them show that only the agent component is associated with depression. One of them also shows the relationship between the component of paths alone and depression. These findings according to Seadatee Shamir, Saniee & Zare (2019) clarify the fact that not only the reduction of target-oriented energy but also the reduction of the ability to understand and find ways to the desired goal, can be aspects of an important element in developing symptoms of depression is at least in these types of samples. It should be noted that previous researches used non-clinical samples involving students, and only Eliot and his colleagues had used a clinical specimen, including those who were harmed Spinal cord injury. The findings of Seadatee Shamir, Tahergholami & Jalai (2017) in line with the current research's finding shows that Patients such as the present sample (patients with fibromyalgia, and abdominal disorder and personality), reducing the ability to create ways to reach their goal, tend to be more connected with depression than patients with non-clinical samples.

The lack of a link between optimism and depression found in this article was in contradiction with most of the research in this area. There are, however, several authors have little evidence or no evidence of this connection. Unique, like sex, and diagnosed diseases and disorders, are considered weak in the sample in this connection (Seadatee Shamir & Mazbohi, 2018). In addition, these results confirm the pattern found by Chang and his colleagues (2012), reflecting the role and the greater involvement of hope Compared with the optimism of depression in people at risk of personality disorders. This pattern suggests that in addition to the adult at risk, having this strong feeling that one knows the ability and means to reach the goal, is for everyone more than having a positive outlook for life in the future. According to Tanhaye Reshvanloo, keramati, & Seadatee Shamir (2016) This pattern cannot be generalized in all cultures and all instances. Wong and Lim found that hope optimism has a greater role in predicting symptoms of depression, the result that Chang and his colleagues (2012) have suggested can be attributed to cultural differences, age, gender, or both and can decrease student's depression.

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