



Positive Thinking Training on Mental Health, Social Function and Emotional Role of Pre-service Teachers

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A B S T R A C T

The purpose of this study was to determine the effectiveness of positive-thinking education on mental health and social function and emotional role Student of the University at Farhangian University (Iran). The research design was quasi experimental with pretest- posttest, two month follow up with control group. First, a total of 110 people in the Human Sciences completed the SF-36 Quality of Life Questionnaire and those who scored the lowest score in three levels of social function, emotional role, and mental health, 30 participants were selected and randomly replaced in experimental and control groups. The experimental group received eight weekly 90-minute sessions of positive-thinking education. At the end of the training, both groups were asked to complete the questionnaire again. In the next step, after two months of follow-up, a follow-up test was conducted to measure the training's durability. In addition to descriptive statistics, multivariate analysis of covariance (MANCOVA) and one-way covariance analysis (ANCOVA) were used to analyze the data. The results of multivariate and one-variable covariance analysis showed that there was a significant difference between the two groups in the three scales in the post-test phase. The results showed that the training of positive thinking was effective in both in post-test and follow up stages. Finally, positive group education improves social function, emotional role, and mental health as the subscales of quality of life in the experimental group. Therefore, considering the effectiveness of positive-thinking education on increasing mental health, social function, and emotional role of the student, it is recommended that the authorities apply positive education programs in educational programs.

Keywords: Positive Thinking Training, Social Function, Mental Health, Emotional Role, Quality Of Life, Student Teacher.

INTRODUCTION

Quality of life is a concept that has become important in recent years due to its role in mental health of individuals. In this regard, and given the fact that the future student will be in charge of managing different fields of society, it will be necessary to recognize the issues that can endanger the quality of life and the health of the student. One of the important issues in the field of clinical and a health science is the importance of "measuring health". Since in recent decades health is considered as a broad concept, today, in health planning, considering multiple dimensions of health, in other words, "quality of life" has been raised more and more and its measurement as a consequence of the health level in the field Health sciences have become widely used. Over the past fifty years, most of the efforts of clinical psychologists have focused

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on the treatment of disabilities and the elimination of disabilities. But positive psychology emphasizes increasing happiness and health and the scientific study about the role of personal and social systems in promoting optimal health (Carr, 2013). Bailey, Eng, Frisch, and Snyder (2007) in their self-assessment of hope and satisfaction Life has been associated with hope and life expectancy, which is the result of this research showing the importance of positive psychological states, including optimism. The results of the research Reiter and Wilz (2016) on the effectiveness of writing positive memories in preventing symptoms of depression and increasing psychological well-being indicate that these interventions have reduced depressed mood and increased positive and well-being in adolescents.

The findings of the study on the effectiveness and stability of positive-thinking education on increasing the quality of life emphasizing the Quran and Islamic teachings showed that positive group-training in the experimental group compared with the evidence has increased the quality of life in all its subsamples (Islamiah, 2018).

Cohn and Fredrickson (2010) concluded in their research that positive-psychological interventions have promoted a more positive and important sense in the real life of an individual. Khodayarifard et al. (2016) studied the effects and positive results of optimism in Nahj al-Balaghah and concluded that the effects and results of optimism and positive thinking in the individual and society are: achieving peace of mind, reducing fear, anxiety. Research has shown that optimism and positivism have an important role in coping with the pressures of life and overcoming psychosocial disadvantages in the behavior of health-related behaviors, lifestyle modification and, finally, the reduction of the incidence of physical and psychological disorders (Khodarahimi, 2015). Capabilities are: courage, optimism, interpersonal communication skills, ethical compliance, and hope for a psychological harm hazard (Jabbari, Shahidi, & Mootabi, 2014). This finding also indicates the importance of paying attention to and developing these positive situations. Positive psychology is a scientific study of things that improve life. This is about creating positive experiences, positive qualities and positive organizations that lead to a better quality of life. A person who is positively thought never recognizes and addresses negative issues, when looking for a good one, it is very likely to be found (Peale, 2012). Quality of life is one of the most fundamental concepts posited in positive psychology (Schalock et al., 2002). Positive psychology seeks to express a clear picture of good life (Snyder, Lopez, & Pedrotti, 2010). Positive psychology has always sought to identify and describe the happiness and mental feeling of well-being and their prediction. The central theme of this emerging field in psychology is to promote the well-being of individuals and identify positive aspects in individuals and to strengthen them in order to prevent and improve mental health as well as to help with treatment if there is a problem and impairment (Froman, 2010; Snyder & Lopez, 2009).

Youth is one of the most important periods of life of individuals, especially students, whose mental health has a positive effect on their social health and quality of life. In this period, people are faced with a lot of changes, including changes in emotions, feelings, behavior, physical and economic status (Arslan, Ayranci, Unsal, & Arslantas, 2009). Due to changes in conditions, style and environment, students have more social and psychological problems than adults (Baumann, Ionescu, & Chau, 2011). In fact, students are in the lungs of a lifetime that reducing their quality of life can have adverse effects on their future and, consequently, on the health of the community. In the 21st century, psychology noticed that humans should devote

their rational energy to the positive aspects of their experience. One of the issues that has been attracted a lot of attention in recent decades is positive psychology (Seligman & Csikszentmihalyi, 2000). In this research, we aimed to investigate the effectiveness of teaching positive psychology on improving the quality of life of pre-service teachers.

METHODOLOGY

The design of this semi-experimental research is a kind of pre-test, post-test, and follow-up with the experimental and control group. The statistical population of the study was the students of the Farhangian University (Iran) that its number is 110 people in the field of humanities. In order to screen and select a sample, all of the students who scored the lowest score in the SF-36 Quality of Life Questionnaire were pre-tested, 30 were selected as the target group and were randomly assigned to two groups of 15. Data collection was done by a questionnaire. The health-related quality of life questionnaire was developed by Ware Jr, Kosinski, and Keller (1996). The Cronbach's Alpha coefficient calculated in the research for this questionnaire was higher than 0.7. This test is designed to assess health policies and generally assess health status in terms of physical and mental status. The questionnaire has 36 questions and 8 components. The purpose of this questionnaire is to assess the health status from both the physical and mental status and has 13 items; in this research, three subscales of social function, emotional role play, and mental health are evaluated. Each score points from zero to one hundred variables, which reports 0 to the worst and one hundred best situations and to better quality of life at the desired scale. For all measurements, the value of the coefficient is equal to the recommended value or more, and only in vitality measurement, the coefficient was lower than the recommendation size of $\alpha = .65$. In addition, the percentage of scores of respondents was the highest level (effect of the ceiling) on physical activity scales, physical limitations, physical pain, social function and psychological problems. In contrast, the percentage of scores of respondents at the lowest level (level effect) was minimal for all scales except for mental problems. The internal correlation analysis of the scale also indicated that the structures of the Persian species of the SF-36 standard are generally separate from each other, although relatively strong relationships were observed between the scales in the expected directions (correlations larger than 0.50).

After selecting the sample and substituting the subjects randomly in the experimental and control groups, positive training was provided to the experimental group during the eight 90-minute sessions, two months and weekly, and the control group did not receive any training; only a pre-test, Post-test and follow-up were performed. To investigate the effectiveness of the training, the follow-up test was carried out two months after the post-test on the two groups to better analyze the results.

Table 1. Summaries of Group-Based Positive Teaching Sessions

Session	Topic
1	establishing contacts and introducing members, expressing group rules, goals and introducing training courses, taking commitment from attendees to attend meetings, introducing and discussing positive thinking and its indications in improving quality of life, performing a pretest, and feedback.
2	the meaning and concept of positive thinking, the attention of individuals to the strengths
3	thank you, and write a letter of thanks to friends with the purpose of reminding people and creating positive emotions (active practice)

4	Talk about the experience of enjoying the present with focus on the subject of the present
5	Reviewing Follow-up Activities outside the workshop Enjoying Life (Active Exercise)
6	Reviewing Sessions Follow Follow-up Activities Outside of the Workshop How to Interact with Others or Active Builder Engagement (Active Exercise)
7	Review of previous session Follow-up outside activities - Positive Teacher Career Services by Using Strengths and Special Abilities (Active Exercise)
8	Dialogue on Positive Thinking and the Choice of a Practicing Exercise from the exercises provided in previous sessions and discussions in that field with the aim of creating positive excitement (active practice)

RESULTS

The purpose of this study was to determine the effectiveness of positive-thinking education on increasing the quality of life of the student population. In table (2), descriptive data is presented in the subcategories of quality of life for group titles. As seen from the contents of this table, at the pre-test stage, the mean and standard deviation of all subscales of quality of life in the two groups are roughly the same, but there is a significant difference in post-test and follow-up stages.

Table 2. Descriptive indicators of quality of life subscales for the experimental group

Group	Subscales	Min.	Max.	Range	Mean	SD	Skewness	Kurtosis
Pretest	Emotional role playing	42	56	14	47.33	4.18	0.82	-0.24
	Social functioning	43	65	22	50.53	5.46	1.27	2.6
	Mental health	40	52	12	47.07	3.78	-0.55	-0.88
Posttest	Emotional role playing	60	65	5	62.47	1.59	-0.17	-1.21
	Social functioning	59	65	6	62.07	1.75	-0.024	-0.89
	Mental health	59	64	5	47.07	3.78	-0.11	-1.74

Table 3. Descriptive indicators of quality of life subscales for the experimental group

Group	Subscales	Min.	Max.	Range	Mean	SD	Skewness	Kurtosis
Pretest	Emotional role playing	43	57	14	48.8	4.21	4.12	-0.7
	Social functioning	37	53	16	47.33	4.25	4.25	1.1
	Mental health	41	56	15	50.8	4.32	4.32	0.28
Posttest	Emotional role playing	42	62	20	46.8	5.55	1.77	3.16
	Social functioning	41	55	14	47.87	3.52	0.08	0.24
	Mental health	42	56	14	50.93	3.93	-0.85	0.4

Table 4. Results of Kolmogorov-Smirnov test for the experimental group

Stage	Pretest		Posttest	
	K-S	SIG	K-S	SIG
Emotional role playing	0.69	0.72	0.71	0.69
Social functioning	0.71	0.69	0.72	0.67
Mental health	0.78	0.9	0.66	0.6

Table 5. Results of Kolmogorov-Smirnov test for the control group

Stage	Pretest		Posttest	
	K-S	SIG	K-S	SIG
Index				
Emotional role playing	0.52	0.94	0.67	0.74
Social functioning	0.39	0.99	0.87	0.43
Mental health	0.48	0.8	0.58	0.62

According to the results presented in tables 3 and 4 can be said is that the normal

distribution.

Table 6. Levine's test results for homogeneity of variances

Subscale	Levine's test	df1	df2	Sig.
Emotional role playing	3	1	28	0.094
Social functioning	3.47	1	28	0.073
Mental health	3.1	1	28	0.06

Levin's test results show that the assumption of homogeneity of variances for the present study has been confirmed.

Table 7. Analysis of covariance of the effects of positive thinking on the promotion of mental function, social and mental health

Source	SS	DF	MS	F	Sig.	Effect Size
Corrected Model	53677.57	2	26838.78	363.72	0.001	0.96
Constant	2909.24	1	2909.24	39.42	0.001	0.59
Pretest	757.57	1	757.57	10.26	0.001	0.27
Group	50195.19	1	50195.19	680.25	0.001	0.96
Error	1992.29	27	73.78			
Total	3301584	30				

Based on the information obtained from the table 6, it can be concluded that positive attitudes toward male students have been shown to increase the level of social, emotional and mental health of the subjects studied. Also, the total effect size is 0.27 which indicates a 27 percent variation of the three variables explained with positive thinking.

CONCLUSION

With the advent of positivist psychology, scholars and researchers have focused their attention on the study of human abilities, and instead of pure attention to negative experiences or beliefs, individuals have sought to appreciate such structures as the hope, spirituality, optimism, and appreciation of the positive psychology. Positive feelings are through increased happiness, interaction in life and psychological well-being(Thomas & McPherson, 2011).

The aim of this study was to investigate the effectiveness of positive-thinking education on increasing social function and emotional role and mental health. In this research, only three subscales of quality of life were investigated. The findings showed that group positive-thinking training in the experimental group compared to the test increased social function, emotional role playing and mental health as three subscales of quality of life. Based on this study, the emphasis of Islam and the Holy Quran on the goodness's, virtues and virtues of individuals is confirmed by the intervention of positive psychology in individual psychotherapy for depressed people and family therapy for family inferiority and personality disorder and its effectiveness. According to a Khodayarifard et al. (2016) study, a person in a program that was designed for students emphasized the strengths, and noted that they were considered as exercises. Positive psychology seeks to clearly capture a picture of good life; on the one hand, the positive and

optimistic person works with the pessimistic and pessimistic person, and in each situation he sees and rebuilds the best thing; while that the pessimist person is more aggressive and uses denial strategies. A positive person accepts limitations, but denies the pessimist person and, as a result, exacerbates the situation. In other words, optimistic people know when to leave work and when they insist on doing it, if pessimistic people, although not reachable, insist on doing so (Snyder & Lopez, 2009).

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