



Effectiveness of positive psychotherapy training on thought control and emotional adjustment of 17-15-year-old female students recovered from the Corona Pandemic (Covid-19)

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Background and Aim: The purpose of the present study is to determine the effectiveness of psychological education in positive mania on the control of thought and emotional adjustment of 15-17-year-old female students who have recovered from the first peak of the Corona Pandemic (Covid-19) in Zabol city. **Methods:** The present study was applied research with quasi-experimental type and pre-test, post-test with a control group. The statistical population was all secondary school female students of Zabol city, and using multi-stage cluster sampling method, 32 students recovered from the first peak of the corona pandemic were selected and divided into two experimental groups. (16 people) and the control group (16 people) were randomly selected. The pre-test was conducted in all groups and positive psychotherapy trainings were given to the experimental group. The post-test was conducted in all groups. In the pre-test and post-test Wells and Davis Thought Control Questionnaires (TCQ, Rabiou et al. 's emotional compatibility (EAM) were implemented. One-way univariate analysis of covariance and multivariate one-way analysis of covariance or Mancova test were used to analyze the data. **Results:** In general, the results of the data analysis showed that positive psychotherapy training did not affect the increase in thought control of 15-17-year-old female students who recovered from the first peak of the Corona pandemic. This training had an effect on the emotional adjustment of students. The emotional adjustment of subjects who were trained in positive psychotherapy was significantly improved compared to the control group. **Conclusion:** It can be concluded that positive psychotherapy can improve students' thought control and emotional adjustment, so it is suggested to use it in counseling and treatment.



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Introduction

On February 11, 2020, the World Health Organization officially named the new coronavirus as the Corona virus disease (COVID-19). This infectious disease has been the largest outbreak since the SARS outbreak in 2003 (Shahamatinejad, 2021). Millions of lives have been significantly changed. The coronavirus has created a public health crisis that requires an appropriate emergency response (Darbani & Mirzaei, 2022). The spread of the corona virus disease has caused people in many countries to stay at home or at a quarantine center. The uncertainty of the progress of the epidemic and its duration causes more psychological pressure on the public. The possible reason for these psychological problems may be related to the worry of contracting the disease and the fear of controlling the disease (Farahati, 2020). The consequences of the outbreak of the corona virus disease (Covid-19), which is caused by a virus called SARS-COV-2, have affected all aspects of human life. This disease not only threatens people's physical health, but also affects people's mental health, especially in terms of emotions and cognition. As many theories suggest, people showed more negative emotions (anxiety, depression and anger) and less positive emotions (happiness) after the announcement of Covid-19, that is, people developed more negative emotions to protect themselves. Therefore, psychiatric interventions are necessary during the outbreak of infectious diseases with high mortality rates. Public health emergencies trigger a series of emotional stress responses that include higher levels of anxiety and other negative emotions. Long-term negative emotions may reduce the function of the immune system of people and destroy the balance of their natural physiological mechanisms (Haghbin et al., 2020).

Entering adolescence, as one of the most critical periods of development, brings various stressful factors, and failure to adapt to these conditions can lead to the formation of numerous injuries (Maleki Golandoz & Sardari, 2020). The epidemic of corona disease and the implementation of quarantine have had various effects on the psychological and social aspects of the society. One of the most important symptoms of this disease is acute respiratory symptoms, which lead to death in two percent

of cases. The implementation of health policies, despite the positive consequences, has caused negative psychological effects in the society. Fear of illness, fear of death, spread of false news and rumors, interference in daily activities, prohibitions or restrictions on travel, reduction of social relations and the consequences of these conditions threaten people's mental health (Alizadeh Fard & Safarinia, 2020). The disease of COVID-19 has many symptoms and signs. The most common clinical symptoms of COVID-19 infection include fever, cough, fatigue, diarrhea, vomiting, and acute respiratory distress syndrome, which occurs about 9 days before the onset of infection. In addition to the lungs, this virus damages other tissues, including the heart, kidney, liver, eyes, and nervous system. Confusion, forgetfulness, weakening and fading of smell and taste, and nerve pain up to stroke are among the neurological symptoms of this virus, which is related to lack of oxygen and inflammation of the brain. COVID-19 communicates with tissues by causing actual or threatened inflammation (Ganji et al., 2020). The experience of pain includes sensory and emotional dimensions, the sensory dimension of pain indicates its intensity and its emotional dimension indicates the level of dissatisfaction of the person with the experience of pain, which is usually influenced by beliefs and emotions (Mustafai et al., 2018). Adolescence is one of the sensitive periods of development, and the formation of identity becomes important in it, and teenagers are inevitably faced with significant physical and psychological changes. Therefore, they are sometimes exposed to some injuries (Nasiri et al., 2019). The students of any society are the builders of the future of that society, therefore their mental health is very important for the society and the existence of mental problems has a serious effect on the education of students. Seligman considered self-efficacy as the main subject of positive psychology and divided it into three components: positive emotion (enjoyable life), fascination (attractive life) and meaning (life with meaning). Based on this approach, the guides that help subjects to create a pleasant, attractive and meaningful life are called positive interventions (Rashid and Seligman, 2013). One of the important reasons that makes the need to implement positive psychology in schools more

and more evident is the increasing rate of depression and stress among teenagers and young people in the world (Hakimi et al., 2017). The main theme of positive psychology is positive psychological states (Parsakia et al., 2022). These situations include: Happiness, joy, tenacity, self-control, hope, optimism, purpose-setting, meaning, love, knowing, wisdom, originality, resilience, generosity, autonomy, compassion, humor, empathy, altruism, and spirituality. The goal of positive psychology is to increase positive emotions by increasing happiness, engagement in life, and psychological well-being (Farnam, 2017). Wells and Davis (1994) developed thought control strategies including worrying, self-discipline, distraction, reappraisal, and social control in developing the metacognitive model of emotional disorders as one of the main components of the model. Salovis (1984) believed that the distinction between automatic thoughts and intrusive thoughts should be emphasized. Intrusive thoughts are unwanted, often automatic, negative, and boring. People use a range of strategies to control unwanted thoughts. Recently, researches have shown that there are individual differences in the successful stopping of thoughts. For example, Bervin and Webiton (2002) concluded that effective stopping of thinking is related to higher levels of fluid intelligence and higher working memory fit (Zare, Deira Vamini, 2016). One of the important components of stress and anxiety in adolescence is the worry and anxiety of a person in health-related matters. Worry in this period continues until old age. Because the problems of girls in terms of health, mental and social dimensions are more than boys and the problems of teenagers are related to consequences in their health and behavior (Moghadam Tabrizi et al., 2016). Considering the importance of adolescence, addressing the problems of this period should be one of the priorities of every society. Therefore, in this research, we are looking for an answer to these two questions: Does positive-oriented therapy have an effect on thought control, emotional adjustment of 15-17-year-old female students who have recovered from the corona pandemic (Covid-19)?

Method

The current research was an applied and quasi-experimental type of pre-test, post-test with a control group. The statistical population was all

female secondary school students of Zabul city, and using multi-stage cluster sampling method, 32 students recovered from the first peak of the corona pandemic were selected and randomly selected into two experimental groups (16 people) and control group (16 people). The pre-test was implemented in all groups and positivist psychotherapy trainings were presented to the people of the experimental group during ten virtual training sessions. So, the test was done for all groups. To analyze the data, univariate one-way analysis of covariance and multivariate one-way analysis of covariance or Mancova test were used.

Materials

1. Rabio et al.'s emotional adjustment scale (EAM): This scale was designed by Rabio et al. in 2007. This tool was developed with the purpose of testing the stability or emotional balance of people and includes 28 questions and two subscales called lack of regulation of emotional and physiological stimuli and the second factor called hopelessness and wishful thinking. This questionnaire is on a 6-item Likert scale from completely agree to completely disagree. The highest score a person can get in this questionnaire is 168 and the lowest score is 28. Therefore, whenever a subject gets a high score and close to 168 in this questionnaire, it means that the person has low and weak emotional adjustment. A low score close to 28 will indicate that he experiences high emotional compatibility. In Rabiot et al.'s (2007) study, the results of common dispersion between the dimensions of the emotional adjustment scale with the dimensions of the Eysenck Personality Inventory and the five-factor questionnaire experimentally supported the convergent validity of the emotional adjustment scale. In Rabio et al.'s study (2007), the internal consistency coefficient of the emotional adjustment scale was 0.89. In Iran, in the study of Shokri et al. (2014), in order to study the validity of the EAM structure, the correlation coefficient between the dimensions of emotional adjustment with the subscales of reactivity to perceived stress and the health-promoting lifestyle profile was reported. The results of confirmatory factor analysis of EAM showed that in the sample of Iranian students, the two-dimensional structure of this questionnaire, including the lack of order factor of emotional and physiological arousal and the factor of hopelessness and wishful thinking, had

a favorable fit with the data. The internal consistency coefficients of the general factor and the subscales of the emotional adjustment questionnaire were between 0.84 and 0.91.

2. Wells and Davis Thought Control Questionnaire (TCQ): Wells and Davis designed the Wells and Davis Thought Control Questionnaire (TCQ) in 1994. This questionnaire has 29 questions and its purpose is to evaluate the ability to control thinking against disturbing thoughts from different dimensions (distraction, worry, social control, punishment, re-evaluation). Wells and Davis (1994) reported the internal consistency of the subscales of this questionnaire from 0.69 to 0.79. Also, the content validity of this questionnaire was reported as satisfactory. Khanipour et al. (2011) calculated the

convergent and discriminant validity of the thought control questionnaire factors through their correlation with BDI-II, BAI and GHQ-28 and the results showed good validity of this questionnaire. Finally, the validity of this questionnaire was confirmed. Also, in their research, the reliability coefficient was 0.65 for two weeks using the open-ended test method. They also reported a reliability coefficient of Cronbach's alpha of 0.73. Scoring of the Wells and Davis Thought Control Questionnaire (TCQ) is based on a 4-point Likert scale, so that the range of the total score of the questionnaire is between 29 and 126.

3. Positive psychotherapy protocol: In the present study, the package provided by Seligman (1994) was used to implement positive psychotherapy sessions.

Table 1. Summary of the content of positive psychotherapy sessions

| Session | Subject | Content | Assignment |
|---------|---|--|--|
| 1 | Acquaintance, knowledge and practice are three good things | Getting to know the members of the group, stating the rules and regulations of positive psychotherapy sessions, and explaining the program and tasks of the clients during the sessions, and paying attention to the positive psychology alphabet instructions. | Writing three good things that happened during the day and answering why these good things happened |
| 2 | Expressing the therapist's responsibilities and duties and the framework of positive psychotherapy and strengthening personal strengths and positive emotions | Discussing the lack of resources such as emotions and positive emotions and personality strengths and their role in the occurrence of stress and anxiety; Discussing the most important areas of study in positive psychology and 24 personality strengths and introducing methods to discover these strengths in everyday life and their role in experiencing a satisfying and meaningful life. | Identifying obvious strengths by group members and using them in a new way during the day, planning new ideas and practicing a new strength daily, mindfulness meditation |
| 3 | Enjoying | Discussing the skill of enjoying in order to help people have a more concrete connection with pleasant experiences and positive emotions, not taking good things for granted, increasing the skill of taking advantage of these moments instead of losing them, acquiring the skill of practicing in the moment and standing more towards individual feelings. | Doing this skill, which includes: sharing with others in a pleasurable struggle, making memories, self-definition, sharp perceptions, being absorbed in pleasure and not thinking about its edges, at least once a day, writing a summary of feelings about the skill of pleasure. |

| | | | |
|---|------------------------------|--|--|
| 4 | have a nice day | Discussion about the skill of having a good day and helping the group members to create a daily life full of joy and happiness and minimizing negative emotions, finding awareness about what is enjoyable for them and what is not enjoyable for them, discussion about finding Ways in which people maximize pleasurable activities and minimize less pleasurable activities, addressing the goals of mindfulness meditation | Completing the form of having a good day by taking notes of the activities that make up a person's day and giving a score on a scale of 1 to 10 |
| 5 | Thank you letter | The discussion about appreciating a person or persons in the path of life has helped people and contributed to what they are now, emphasizing gratitude as a sustainable form of gratitude; Thinking and focusing on the moments when the good memories of these people are evoked in one's mind | Group members taking notes of their thoughts about the letter and preparing a draft of the letter and then writing the original letter of appreciation and continuing breathing exercises and mindfulness meditation. |
| 6 | Active-constructive response | The discussion about responsive and positive and effective in successful and happy relationships, providing verbal communication as an important factor in relationship satisfaction, and the significant and effective role that communication style has with humor, affection and positive biases towards the other party; Discussions about four ways of responding (enthusiastic/willingly, active-destructive, passive-constructive, passive-destructive with reluctance and reluctance accompanied by excitement and excitement; discussion about good news and spreading it and ways to savor it good news with others, | Performing a role play to show the principle of active-constructive responding in the group and then performing active-constructive responding as a role-play with one of the family members and writing this person's name in the form related to active-constructive responding and focusing on its effect On conversations and relationships, mindfulness of someone who has had problems with him or someone they love, and doing breathing exercises. |
| 7 | hot chair | Discussion about acquiring the method of replacing negative thoughts with positive thoughts and applying it in annoying and uncomfortable situations by facilitating optimism along with happiness and life satisfaction. | Using index cards including situations and emotions in two parts: writing negative thoughts experienced in a situation on one side and optimistic responses corresponding to it on the other side, using three strategies: examining the available evidence for pessimistic thinking, thinking about alternative explanations thinking and behavior, challenging your thoughts, using the above three strategies in new daily situations, mindfulness |

| | | meditation | |
|----|---|---|--|
| 8 | Writing biography | a Discussion about the skill of written practice of writing a biography in order to bring out the deep and inner goals and values of group members, how to live and celebrate their birthday in the coming years and remember what they love most, special attention to values , strengths, relationships with others, life developments and the overall meaning of life and not just material things | Writing a brief biography by group members and sharing it with interested members, preparing a list of values and goals that group members would like to be remembered for, planning work based on these values and goals. |
| 9 | Positive service | Discuss the general areas for service (community, politics, family, mosque, charitable works, etc.); Helping the group members to use their outstanding strengths in the service of something bigger than themselves and reflecting on the methods of using their outstanding strengths and having a productive life with a combination of positive emotions, connections, progress and positive experiences; Maintaining the positive changes made in the person | Implementation of an idea in order to take advantage of outstanding strengths in providing services, writing about this experience after each member of the group completes their service project, mindfulness, excitement about a person. |
| 10 | End of work and maintenance and summarization of the points presented | Discussing the impact of the group therapy experience, examining the processes related to the previous sessions, providing the context to prepare the group members to leave the group; Discussion about getting feedback from group members about their experiences and opinions, discussion about carrying out maintenance, summarizing and ending group therapy. | Expressing feedback about the group and favorite exercise through email, etc |

Implementation

To conduct this study, first coordinated with hospital officials and families of teenagers with cancer and sampling continued until the sample size reached 30 people. Then, the samples were replaced by a simple random method in two groups of 15 people including experimental (lifestyle training to promote health) and control groups. The experimental group was trained in 8 90-minute sessions with the health-promoting lifestyle method, and during this time, the control group was not trained, and the research tools introduced above were completed by the samples in the pre-test and post-test stages. After collecting the data, the distress tolerance scale of Simmons and Gaher (2005) and the life expectancy scale of Snyder et al. (1991) were

analyzed by multivariate covariance analysis method in SPSS-19 software at a significance level of 0.05.

Results

The obtained demographic findings showed that in total, students of the 11th and 12th grades each had the largest share in the research sample with 13 people (about 40%). The lowest frequency was related to 10th grade students with 6 people (about 20%). The subjects were distributed almost equally in both the control and experimental groups. The composition of the subjects of the experimental and control groups was almost similar to each other in terms of educational level, and it can be said that the groups were selected homogeneously

Table 2. Descriptive data of scores of experimental and control groups

| Variable | Stage | Control group | | Experimental group | |
|---|-----------|---------------|------|--------------------|------|
| | | Mean | SD | Mean | SD |
| distraction | Pre-test | 14/9 | 3/3 | 15/8 | 4/4 |
| | Post-test | 14/7 | 4/6 | 19/1 | 3/9 |
| Worry | Pre-test | 11/4 | 2/8 | 10/9 | 3/6 |
| | Post-test | 11/9 | 3/0 | 11/3 | 4/9 |
| Social control | Pre-test | 12/8 | 4/7 | 14/7 | 3/5 |
| | Post-test | 13/4 | 3/9 | 16/5 | 2/2 |
| punishment | Pre-test | 9/1 | 3/3 | 10/0 | 3/4 |
| | Post-test | 10/2 | 3/7 | 9/6 | 3/6 |
| Reassess | Pre-test | 16/8 | 3/3 | 15/0 | 3/5 |
| | Post-test | 17/2 | 3/3 | 15/0 | 3/7 |
| Lack of regulation of emotional arousal | Pre-test | 46/2 | 10/6 | 45/9 | 12/5 |
| | Post-test | 42/8 | 10/5 | 57/7 | 14/5 |
| Despair and wishful thinking | Pre-test | 56/1 | 11/5 | 57/6 | 15/7 |
| | Post-test | 52/8 | 12/4 | 65/9 | 17/3 |
| Total emotional compatibility | Pre-test | 102/3 | 19/9 | 103/4 | 27/2 |
| | Post-test | 95/6 | 21/6 | 123/5 | 31/1 |

According to the numbers reported in the above table, it can be intuitively said that the condition of the two groups after the intervention was not the same in all components. The average of the two components of distraction and social control of the experimental group was higher than the control group, and the average of the re-evaluation component was lower than the control group. The difference between the groups before the intervention was relatively significant, but there was no significant difference between the groups in other components. Intuitively, it can be said that the situation of the two groups was not the same after the intervention. The minimum, maximum, and average scores of the experimental group were higher than the control group, and therefore, this mentality is formed that the

emotional compatibility of the experimental group subjects is at a higher level than the control group subjects. There was a similar trend regarding the two subscales of emotional adjustment; That is, the average scores of the subscales of lack of orderliness, emotional and physiological arousal, despair, and wishful thinking of the experimental group were higher than the control group, which indicates that the experimental group is better than the control group in both subscales. Therefore, ANCOVA was used to compare the average post-test score of the emotional adjustment of the research groups and MANCOVA was used to compare the average post-test score of their thought control subscales. Before conducting the tests, the necessary conditions for their use were examined.

Table 3. The results of checking the normality of the distribution of variables

| Variable | Group | Statistics | df | P |
|-------------------------|--------------|------------|----|-------|
| Emotional compatibility | Control | 0/937 | 16 | 0/319 |
| | Experimental | 0/906 | 16 | 0/099 |
| distraction | Control | 0/966 | 16 | 0/765 |
| | Experimental | 0/921 | 16 | 0/172 |
| Worry | Control | 0/955 | 16 | 0/577 |
| | Experimental | 0/859 | 16 | 0/015 |
| Social control | Control | 0/977 | 16 | 0/933 |
| | Experimental | 0/926 | 16 | 0/212 |
| punishment | Control | 0/853 | 16 | 0/015 |
| | Experimental | 0/928 | 16 | 0/229 |
| Reassess | Control | 0/962 | 16 | 0/691 |
| | Experimental | 0/874 | 16 | 0/031 |

According to the results reported in the above table, except for the variables of worry ($P=0.015$, $W=0.859$ (W)) and re-evaluation ($P=0.031$, $W=0.874$ (W)) In the experimental group and the punishment variable in the control group ($P=0.015$, $W=0.853$ (16)), the distribution of all variables in both groups was

normal ($P<0.05$). However, the smallness of skewness and elongation of the distribution in these three cases also caused their distribution to be considered normal with a little tolerance. Therefore, it can be said that the assumption of normality of distribution of dependent variables was established.

Table 4. The results of Levene's variance homogeneity test

| Variable | F | Df1 | Df2 | P |
|----------------------|-------|-----|-----|-------|
| Emotional adjustment | 0/001 | 1 | 30 | 0/976 |

According to the above table, Levene's test was not significant for the emotional adjustment variable ($P<0.05$). Therefore, the assumption of

homogeneity of variance of the groups regarding these variables was approved.

Table 5. M-box variance homogeneity test

| Variable | M | F | Df1 | Df2 | P |
|-------------------------------|--------|-------|-----|---------|-------|
| Components of thought control | 30/428 | 1/659 | 15 | 3623/68 | 0/052 |

The M-Box test was not significant for thought control components ($P=0.052<0.05$) and this indicated that the homogeneity condition of the variance-covariance matrices of these variables was met between the groups.

According to the quantitative indices of fit, it can be concluded that the theoretical model related to the theoretical model of the research is an acceptable model and the relationships within the model and the values of the

regression coefficient between the hidden variables can be discussed. A partial index (p-value) has been used to test the hypothesis, and the condition for a relationship to be significant is that the value of this index for the desired relationship is less than 0.05. Table 4 shows the results of the bootstrap method in the macro program, Preacher and Hayes (2008) test for mediation relationships.

Table 6. The results of the MANCOVA test to compare the average thought control of the groups

| Variable | Value | F | Df hyp. | Df error | P |
|-------------------------------|-------|-------|---------|----------|-------|
| Components of thought control | 0/262 | 1/491 | 5 | 21 | 0/235 |

According to the above table, the significance level of the MANCOVA test of the five components of thought control was equal to 0.235 and therefore more than 0.05 ($P<0.05$); Therefore, there was no sufficient reason to reject the null hypothesis of the multivariate covariance analysis test, that the average of all the components were equal between the groups,

and this means, statistically, there was no statistically significant difference between the two groups in the average of even one of the five components of thought control. Therefore, the first research hypothesis regarding the effectiveness of positive psychotherapy training on increasing students' thought control was rejected.

Table 7. Results of ANCOVA test to compare the average emotional compatibility of groups

| Variable | Source | SS | df | MS | F | P |
|-------------------------------|----------|-----------|----|-----------|-------|--------|
| Components of thought control | Pre-test | 13716/028 | 1 | 13716/028 | 51/11 | <0/001 |
| | Group | 5812/260 | 1 | 5812/260 | 21/66 | <0/001 |
| | Error | 7782/623 | 29 | 268/366 | | |

According to the above table, the significance level of the independent variable (group) is less

than 0.001 and consequently less than the acceptable error of 0.05 ($P < 0.05$). Therefore,

the null hypothesis of the analysis of covariance test, based on the equality of the mean of the groups, was rejected. So, it can be said that after removing the effect of the pre-test (initial status of the groups), there was a statistically significant difference in the mean scores of the post-test of emotional adjustment of the groups.

Conclusion

The present study was conducted with the aim of effective positive psychotherapy training on thought control and emotional adjustment of 15-17-year-old female students who have recovered from the Corona pandemic (Covid-19). Examining the first hypothesis of this research showed that positive psychotherapy training did not affect the increase in thought control of 15-17-year-old female students who recovered from the first peak of the Corona pandemic. Therefore, the first hypothesis of the research regarding the effectiveness of positive psychotherapy training on increasing students' thought control was rejected. Related to the result of examining the first hypothesis of this research, the research results of Akati and Abdkhodaei (2021) showed that teenagers insisted on using the same methods of their previous lives during the corona pandemic. Therefore, it is necessary to pay attention to psychological interventions and counseling for teenagers during the corona pandemic. The research results of Darbani and Parsakia (2022), Alipour Shahir et al. (2021), Mostafaei et al. (2018), Sadeghpour et al. (2015) were inconsistent with the present research. It showed that positive psychology and thought control strategies can be used in the right way to control stress and live a healthy life and overcome unhealthy and anxiety-provoking thoughts. Having positive thinking means having good thoughts and feelings about yourself instead of constant humiliation, thinking well about others and establishing a good relationship with them, expecting the best from the world and believing that the best in the world will be yours. In positive-thinking interventions, identifying and promoting positive emotions and people's capabilities instead of relying on weaknesses is the main topic of education. Psychologically based intervention training helps people learn skills to pay attention to positive emotions and accept them. Therefore, it can be effective in reducing anxiety and stress caused by Corona. In order to promote people's well-being, positive psychotherapy tries to teach resilience

skills, strengthen capabilities, raise the level of positive emotions and increase life satisfaction, which also increases self-efficacy and acceptance in people (Mahmoudi Tabar & Safarzadeh, 2021). . In critical situations, such as the outbreak of Covid-19, the effects of the disease can not only cause mental health problems, but also have a lasting effect on the negative emotions of the population. According to stress theory and perceived risk theory, public health emergencies stimulate more negative emotions and cognitive evaluation and maintain these negative emotions in people. However, negative emotions are long-term and may reduce people's immune function and destroy their natural physiological balance. At the same time, people may overreact to illness, which may lead to excessive avoidance behaviors and blind adaptation (Delavar & Shokohi Amirabadi, 2020).

Examining the second hypothesis of the research showed that the post-test average of the experimental group's emotional adjustment was 27.9 higher than the control group's. Therefore, it can be said that the emotional adjustment of the subjects who were trained with the positive psychotherapy method improved significantly compared to the control subjects. Therefore, the second hypothesis of the research regarding the effectiveness of positive-oriented psychotherapy training on increasing the emotional adjustment of students was confirmed. The results of some studies are consistent with the present research, such as: Darbani and Parsakia (2022); Parsakia et al. (2022); Mousavi (2021); Seyedmousavi et al. (2021); Haghbin et al. (2020); Askari and Chowdari (2020); Alipour et al. (2020); Farahati (2020); Qadiri et al. (2019). The high level of fear, stress and excitement may prevent rational decision-making in the process of responding to the corona virus. One of the common psychological consequences is the negative effects of this disease on the mental health of children and adolescents and causing behavioral problems in them. People have developed negative emotions to protect themselves. Solutions such as a hopeful look, positive look, appreciation, attention to what you have, conscious acceptance of the disease, emotional expression, attention to spiritual dimensions and increasing resilience are effective in improving people's mental health during the corona disease. These cases improve cognitive and emotional regulation and help emotional

adjustment of students with symptoms of anxiety and stress. Using balanced positive strategies and making a person aware of negative and positive emotions and accepting and expressing them on time can play an important role in reducing physical symptoms and depression and anxiety and mental health disorders. Emotion regulation problems, increased reactivity of the amygdala to threats, and smaller hippocampus and amygdala are psychological and neurological mechanisms that increase the possibility of vulnerability to internalizing problems among children and adolescents in response to stressful life events. The use of maladaptive emotion regulation strategies such as rumination and suppression are associated with internalizing problems in longitudinal studies and meta-analyses of high-risk adults and adolescents. On the other hand, more use of adaptive emotion regulation strategies, such as cognitive reappraisal, had a more unstable relationship with psychopathology than maladaptive strategies. However, consistent and more effective use of cognitive reappraisal has a protective moderating effect on internalizing problems in adolescents and young adults who experience stressful life events. In the context of the COVID-19 pandemic, adolescents who engage in greater cognitive reappraisal are expected to be more resilient to pandemic-related stressors. On the other hand, it is expected that adolescents who are involved in more expressive suppression and thought leakage, show more vulnerability to increased stress related to internalizing problems (Wiseman et al., 2021).

Despite having strengths, this research also has limitations. The study sample is limited to female students and adolescents who are in the age range of 15-17 years, which can limit the generalization of the results and achievements to children and adolescents. Therefore, other age groups can be used for future research. In addition, the control of possible intervening variables was insufficient in this research. The change in time, the re-epidemic and multiple times of being affected by Covid-19 may have many effects on the performance and feelings and thoughts of individuals and groups. Therefore, it is necessary to further examine individual and social feelings and ways of thinking and acting due to facing the corona

virus. Future research should further examine the effects of positive psychotherapy on individual, social, and organizational feelings and the performance of individuals and governments during the pandemic and facing the corona virus again. The research sample is made up of students; Therefore, one should be careful in generalizing the results of this research to other groups of society. The most important application of the findings of this research is the student community. The main suggestion is that there should be a coherent program to ensure the continuity of students' learning. Children and teenagers should be provided with sufficient and correct information about self-protection and self-care methods.

Conflict of Interest

According to the authors, this article has no financial sponsor or conflict of interest.

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