

Comparing the Effectiveness of Acceptance and Commitment–Based Training and Cognitive-Behavioral Training on Students’ Hope for the Future

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ABSTRACT

This study aimed to compare the effectiveness of Acceptance and Commitment–Based Training and Cognitive-Behavioral Training in improving hope for the future among female lower-secondary-school students. The study employed a quasi-experimental pretest-posttest design with a control group and a two-month follow-up. The statistical population consisted of female lower-secondary-school students in Mashhad, Iran, during the 2025–2026 academic year. Participants were selected through convenience sampling and assigned to three groups: Acceptance and Commitment–Based Training, Cognitive-Behavioral Training, and control, with 15 students in each group. The first experimental group received a ten-session acceptance and commitment-based intervention, while the second experimental group received a ten-session cognitive-behavioral intervention. The control group received no intervention. Data were collected at pretest, posttest, and two-month follow-up using the 19-item Adolescent Hope Questionnaire developed by Ginevra et al. (2017). Data were analyzed using repeated-measures analysis of variance and Bonferroni post-hoc comparisons at a significance level of .05. The analysis revealed a significant intervention effect on hope for the future, $F = 31.73$, $p < .001$, partial $\eta^2 = .318$. Bonferroni comparisons showed significant increases from pretest to posttest and from pretest to follow-up in the Acceptance and Commitment–Based Training group ($p = .007$ and $p = .010$, respectively) and in the Cognitive-Behavioral Training group (both $p < .001$). The differences between posttest and follow-up were not significant in either intervention group, indicating maintenance of treatment gains. No significant differences were observed across measurement occasions in the control group. Both Acceptance and Commitment–Based Training and Cognitive-Behavioral Training were effective in improving hope for the future among female lower-secondary-school students, and the improvements were maintained at the two-month follow-up.

Keywords: *Acceptance and Commitment–Based Training, Cognitive-Behavioral Training, Hope for the Future, Students, Adolescents*

1. Introduction

Adolescence is a developmental period characterized by rapid cognitive, emotional, interpersonal, and educational changes that can substantially shape individuals' perceptions of themselves and their future. During this period, students are increasingly expected to make decisions regarding academic pathways, interpersonal relationships, personal values, and future occupational roles while simultaneously adapting to heightened academic expectations and social pressures. An important psychological resource that may facilitate successful adaptation to these developmental demands is hope for the future. Hope provides young people with a positive orientation toward forthcoming experiences, enables them to perceive meaningful possibilities despite current difficulties, and supports continued investment in goals when obstacles arise. Recent evidence has increasingly emphasized the contribution of hope to adaptive functioning in educational contexts. For example, hope has been associated with academic thriving, adaptive coping, and greater psychological tranquility among students, suggesting that it is not merely a positive emotional state but an important psychological resource for managing academic and developmental demands (Shan & Xu, 2025). Similarly, interventions specifically designed to enhance hope have been reported to improve academic motivation, academic hardiness, and academic hope among school students (Raeisi, 2025). Positive psychological interventions have also demonstrated that changes in hope can occur alongside improvements in psychological well-being and reductions in indicators of distress, reinforcing the potential value of deliberately cultivating hope within educational populations (Laakso et al., 2025).

Hope for the future can be understood as a multidimensional orientation involving positive expectations, perceived possibilities, motivation toward valued objectives, and the ability to remain psychologically engaged with future goals. For students, this orientation may affect how academic difficulties are interpreted, how strongly they persist when facing failure, and whether setbacks are viewed as permanent barriers or temporary challenges that can be managed. A student with stronger future hope is more likely to conceptualize present educational activities as meaningful steps toward desired outcomes, whereas low hope may contribute to disengagement, pessimistic expectations, reduced perseverance, and uncertainty regarding future possibilities.

These processes are especially important during early adolescence, when cognitive representations of identity and future direction become increasingly differentiated. Psychological interventions that modify maladaptive interpretations, strengthen adaptive coping, and promote goal-directed behavior may therefore provide useful approaches for enhancing adolescents' future-oriented hope.

A broader body of psychological research indicates that adaptive functioning is influenced not only by external circumstances but also by cognitive, emotional, and interpersonal processes through which individuals interpret and respond to experience. Emotion regulation, for example, can mediate the relationship between intrapersonal differentiation and conflict, demonstrating how the capacity to manage emotional experiences may alter behavioral responses under stressful conditions (Joqratian et al., 2026). Cognitive-emotional schema modes have likewise been associated with instability and conflict in close relationships, illustrating the broader significance of entrenched cognitive and affective patterns in shaping adaptation (Hicks et al., 2026). Research on marital conflict has also shown that maladaptive cognitive and interpersonal patterns can contribute to persistent psychological difficulties within relationships (Zohrei et al., 2025), while investigations of conflict among couples have emphasized the multifactorial nature of psychological and interpersonal problems and the role of coping and interactional processes in their maintenance (Tasew & Getahun, 2025). Although these studies were conducted primarily in adult relational contexts, they illustrate a general psychological principle relevant to adolescent functioning: how individuals interpret internal experiences, regulate emotions, approach conflict, and respond to difficulties can substantially influence their ability to maintain adaptive functioning.

Cognitive interpretations are particularly important because dysfunctional beliefs can intensify distress and interfere with flexible responses to challenging circumstances. Research has demonstrated relationships among irrational beliefs, communication patterns, conflict-resolution styles, and interpersonal difficulties (Bahramian et al., 2025). Similarly, marital commitment, communication processes, and conflict management have been shown to interact in shaping relational adjustment, indicating that beliefs and behavioral response patterns jointly contribute to psychological outcomes (Aziz & Naqvi, 2025). Cognitive-behavioral interventions are grounded in the assumption that emotional and behavioral responses are influenced by the meanings individuals assign to situations. Accordingly,

maladaptive expectations regarding failure, personal inadequacy, academic difficulties, or future uncertainty can potentially be identified, evaluated, and modified. For students with low future hope, cognitive-behavioral training may therefore help challenge pessimistic predictions, promote more balanced self-appraisal, strengthen perceived competence, and facilitate systematic planning toward attainable goals.

Evidence concerning cognitive-behavioral approaches in other psychological contexts supports their capacity to modify dysfunctional beliefs and improve adaptive functioning. Cognitive-behavioral couple therapy, for instance, has been found effective in modifying communication beliefs and reducing marital burnout among distressed couples (Vaslehchi et al., 2024). More broadly, communication and cognitive-behavioral processes have repeatedly been identified as mechanisms associated with psychological adjustment. Effective communication skills training has been shown to reduce marital burnout (Jafari et al., 2021), while effective conflict-resolution styles have been implicated in the association between maladaptive schemas, irrational beliefs, and relational outcomes (Farhangi, 2021). Comparable findings have indicated that early maladaptive schemas and irrational relationship beliefs may exert their influence partly through inefficient conflict-resolution processes (Sheikhhadisiroei et al., 2018). These findings underscore the modifiability of cognitive and behavioral processes and support the broader rationale for structured interventions that teach individuals to identify problematic thought patterns, develop more adaptive interpretations, and practice constructive behavioral responses.

The relevance of cognitive processes becomes particularly apparent when considering the long-term effects of adverse experiences. Childhood maltreatment has been associated with later emotional and interpersonal difficulties through mechanisms such as attachment insecurity, maladaptive schemas, and emotion-regulation problems (Alavi Lavasani & Ahmadi Tahour Soltani, 2017). Childhood trauma has also been linked to diminished relational resources in adulthood, suggesting that early experiences may influence subsequent beliefs about the self, others, and the predictability of interpersonal environments (Banford Witting & Busby, 2019). Systematic evidence similarly indicates an association between histories of sexual violence and difficulties in romantic relationship functioning (Vitek & Yeater, 2021), and a broader review of childhood maltreatment and relationship quality has highlighted

multiple mediating and protective mechanisms that may either intensify or reduce long-term adverse outcomes (Zamir, 2022). These findings are relevant to understanding hope because future expectations are partly constructed through accumulated beliefs about personal capability, safety, control, and the likelihood that desired outcomes can be achieved.

Attachment and interpersonal processes further illustrate how psychological resources can either protect or undermine adaptive expectations. Childhood traumatic experiences have been associated with marital self-efficacy and relational resilience through attachment-related mechanisms (Kara & Yüksel Şahin, 2022). Similarly, attachment and dyadic coping have been identified as mediators linking childhood maltreatment with later relationship quality (Fitzgerald & Shuler, 2023). Self-compassion may also function as a protective psychological resource in the association between childhood maltreatment and satisfaction in intimate relationships (Lassri et al., 2023). Mindfulness represents another potentially protective process; evidence indicates that it may mediate the relationship between cumulative childhood trauma and couple satisfaction (Godbout et al., 2020). Collectively, these findings suggest that psychological outcomes are not determined solely by adverse experiences themselves. Rather, the manner in which individuals relate to their thoughts and emotions, regulate distress, interpret themselves, and engage with meaningful relationships can significantly modify the effects of difficult experiences. This proposition is highly consistent with intervention models that seek to strengthen psychological flexibility rather than eliminate unwanted thoughts or emotions.

Acceptance and Commitment-Based Training offers one such framework. Rather than attempting to suppress distressing internal experiences, acceptance- and commitment-based approaches encourage individuals to recognize thoughts and emotions as transient psychological events, reduce excessive experiential avoidance and cognitive fusion, clarify personally meaningful values, and engage in committed actions aligned with those values. In the context of students' hope for the future, such processes may be particularly relevant. Adolescents may experience thoughts such as "I will fail," "my future will not improve," or "I cannot reach my goals." When these thoughts are treated as unquestionable realities, they can restrict action and reinforce avoidance. An acceptance- and commitment-oriented approach instead seeks to alter the student's relationship with these cognitions, enabling the individual to

acknowledge uncertainty or anxiety without abandoning valued educational and personal goals. Through values clarification and committed action, abstract hopes for the future can be translated into meaningful and achievable behaviors.

This emphasis on psychological flexibility is also consistent with evidence indicating that adaptive emotional and interpersonal functioning depends on more than simply reducing negative experiences. Studies of conflict and adjustment have shown that communication patterns can mediate the effects of adverse childhood experiences on later psychological functioning (Kang & Choi, 2022). Cumulative childhood trauma has likewise been associated with psychological intimate-partner violence through mechanisms involving negative urgency and dysfunctional communication patterns (Dugal et al., 2020), while trauma-related difficulties and maladaptive communication patterns have been linked to interpersonal aggression among individuals seeking psychological assistance (St-Pierre Bouchard et al., 2023). These studies emphasize that distressing histories or emotions do not automatically determine behavior; intermediary processes such as regulation, awareness, impulsive responding, and communication substantially shape outcomes. For adolescents, developing the ability to experience difficult emotions without becoming dominated by them may similarly preserve goal-directed behavior and future orientation in the face of academic or interpersonal adversity.

The importance of constructive coping is reinforced by evidence from studies examining conflict-resolution strategies. Accommodation and other conflict-resolution styles have been associated with marital satisfaction (Karanja & Yator, 2021), and conflict-resolution processes have been identified as mediators between earlier adverse experiences and later relationship satisfaction and stability (Knapp et al., 2017). Conflict-resolution styles and marital expectations have also been shown to predict marital burnout (Rezaei & Rezaei, 2018). Although these findings concern adult relationships rather than educational hope, they demonstrate the broader significance of learned coping strategies in determining whether challenging situations lead to deterioration or adaptation. Adolescents similarly encounter conflicts between present discomfort and long-term goals. Cognitive-behavioral training may improve the problem-solving and planning components of this process, whereas acceptance- and commitment-based training may

enhance willingness to remain engaged in valued actions despite difficult emotions or discouraging cognitions.

Research on communication and emotional exhaustion provides additional evidence regarding the importance of behavioral and interpersonal skills. Dysfunctional interaction patterns and ineffective coping with relational problems have been associated with marital burnout and conflict (Javdan et al., 2023). Marital communication has similarly been identified as an important correlate of burnout among mothers experiencing substantial caregiving demands (Kaleta & Błońska, 2021). Sexual satisfaction and marital burnout have also been found to be related among married nurses, highlighting the interconnected nature of emotional, interpersonal, and contextual aspects of psychological well-being (Moteshafie et al., 2023). Furthermore, interventions focused directly on communication have demonstrated improvements in communication and relationship satisfaction among distressed couples (Vazhappilly & Reyes, 2018). These findings collectively highlight an important intervention principle: adaptive psychological functioning may be strengthened through structured teaching of skills rather than being viewed as a fixed personal characteristic. Hope may likewise be conceptualized as a potentially modifiable psychological capacity that can be strengthened through appropriate training.

The concept of personal efficacy is especially relevant to future hope. Individuals who perceive themselves as capable of influencing important outcomes are more likely to initiate and sustain goal-directed behavior. Conversely, repeated negative expectations can produce passivity, avoidance, or disengagement. Research in relational contexts has shown that self-related and interpersonal capacities—including differentiation, communication, attachment security, and effective conflict management—contribute to adjustment (Alibekian & Afsharinia, 2020; Parpaee et al., 2020). Self-esteem has also been identified as a mediator in the relationship between insecure attachment and marital burnout, suggesting that individuals' evaluations of their own worth and competence may influence how they respond to relational challenges (Ayadi et al., 2017). Among students, comparable self-evaluative mechanisms may influence whether academic obstacles are interpreted as evidence of permanent inadequacy or as difficulties that can be addressed through effort, planning, skill development, and persistence.

Intervention research further indicates that psychological difficulties can be responsive to focused therapeutic and

educational approaches. Solution-focused couple therapy has demonstrated effectiveness in reducing marital conflict and burnout (Rahseparmonfared et al., 2021), reinforcing the value of interventions that emphasize resources, attainable change, and movement toward preferred outcomes. These principles overlap conceptually with hope-oriented interventions, in which attention is directed toward future possibilities and actionable steps rather than exclusively toward existing problems. At the same time, evidence that maladaptive cognitive patterns, interpersonal beliefs, and emotional processes contribute to psychological difficulties suggests that interventions capable of altering these processes may provide meaningful benefits. This is particularly relevant for adolescents, because patterns of thinking about ability, failure, relationships, and the future are still developing and may therefore be especially amenable to preventive and educational intervention.

An additional reason for examining hope among students is that educational development inherently requires sustained orientation toward outcomes that are temporally distant. Students are expected to study now for achievements that may only become visible months or years later. Future hope can therefore support persistence by linking present effort to anticipated future outcomes. Research showing that hope training can enhance academic motivation and hardiness among schoolchildren provides direct support for this educational function of hope (Raeisi, 2025). Likewise, the association of hope with adaptive coping and academic thriving indicates that hopeful students may possess greater psychological capacity to manage educational demands while maintaining a sense of direction (Shan & Xu, 2025). The finding that a positive psychology intervention can simultaneously affect psychological well-being, depression-related outcomes, physiological stress indicators, and hope further suggests that hope is embedded within a broader network of psychological adaptation rather than functioning in isolation (Laakso et al., 2025).

Despite these promising findings, an important question concerns which psychological training approach may be more effective for strengthening students' future hope. Cognitive-behavioral training and acceptance- and commitment-based training approach psychological change through partially distinct mechanisms. Cognitive-behavioral training emphasizes identifying dysfunctional cognitions, evaluating their accuracy, replacing maladaptive interpretations with more constructive ones, and using behavioral strategies such as planning, problem solving, skill development, and structured practice. For students whose

hopelessness is maintained by rigid negative predictions and dysfunctional beliefs about their competence or future, cognitive restructuring and behavioral activation toward academic and personal goals may be particularly beneficial. Acceptance- and commitment-based training, in contrast, does not require that difficult thoughts be eliminated or replaced before adaptive action can occur. It emphasizes acceptance, cognitive defusion, present-moment awareness, values clarification, and committed action. Thus, students may learn that uncertainty, fear of failure, or pessimistic thoughts can coexist with purposeful movement toward valued future goals.

The potential effectiveness of both approaches is also supported indirectly by the broader literature demonstrating that rigid beliefs, ineffective communication, problematic coping, and emotion-regulation difficulties are associated with poorer psychological and interpersonal outcomes, whereas adaptive skills and flexible psychological resources may protect functioning (Bahramian et al., 2025; Hicks et al., 2026; Joqratian et al., 2026). Research has further demonstrated that the consequences of adversity can be mediated by cognitive, emotional, attachment-related, and interpersonal processes rather than following a simple deterministic pathway (Fitzgerald & Shuler, 2023; Godbout et al., 2020; Lassri et al., 2023). This body of evidence supports the assumption that targeted psychological training may influence future hope by modifying the processes through which students respond to uncertainty, discouragement, and perceived barriers.

Furthermore, the literature on marital and interpersonal functioning consistently demonstrates that maladaptive patterns may accumulate when they remain unaddressed. Emotional exhaustion can emerge gradually in relationships (Alsawalqa, 2019), and the quality of conflict management and communication can determine whether interpersonal difficulties become persistent or remain manageable (Stinson et al., 2017). Although adolescent hope and marital functioning represent distinct constructs and populations, this research has conceptual relevance because it demonstrates that psychological adaptation is shaped by repeated patterns of cognition, emotion, and behavior. Intervening during adolescence may therefore have preventive value by equipping students with flexible and constructive ways of responding to difficulties before maladaptive patterns become consolidated.

The existing literature therefore provides compelling reasons to examine interventions for strengthening hope, but several issues remain. First, relatively few studies have

directly compared an acceptance- and commitment-based approach with cognitive-behavioral training for promoting hope for the future among female lower-secondary-school students. Second, these approaches differ meaningfully in their theoretical mechanisms, making comparative evaluation important. Third, assessing outcomes not only immediately after intervention but also during follow-up is necessary to determine whether improvements persist beyond the active training period. Finally, female students in early adolescence face developmental, academic, familial, and social challenges at a period in which future expectations are becoming increasingly influential in educational and personal decision-making. Identifying effective interventions for strengthening their hope may therefore have implications for school counseling, preventive psychological services, and educational planning.

Accordingly, the aim of the present study was to compare the effectiveness of Acceptance and Commitment-Based Training and Cognitive-Behavioral Training in improving hope for the future among female lower-secondary-school students.

2. Methods and Materials

2.1. Study Design and Participants

The present study employed a quasi-experimental design with a pretest, posttest, and two-month follow-up assessment and a control group. The statistical population consisted of all female lower-secondary-school students in Mashhad, Iran, during the 2025–2026 academic year. Eligible participants were recruited using convenience sampling and subsequently allocated to three study groups: an Acceptance and Commitment-Based Training group, a Cognitive-Behavioral Training group, and a control group. The first experimental group received Acceptance and Commitment-Based Training, while the second experimental group participated in Cognitive-Behavioral Training. The control group received no psychological or educational intervention during the study period. Hope was assessed in all three groups at three measurement occasions. At the pretest stage, participants completed the Adolescent Hope Questionnaire before initiation of the interventions. Following completion of the ten-session intervention programs, the questionnaire was administered again as the posttest. To examine the maintenance of intervention effects over time, a follow-up assessment using the same instrument was conducted two months after the posttest for participants in all three groups. The independent variable consisted of the two educational

interventions, namely Acceptance and Commitment-Based Training and Cognitive-Behavioral Training, whereas hope for the future constituted the principal outcome variable. Participation was voluntary, the students were informed about the general procedures of the study, and confidentiality of the collected information was maintained throughout the research process.

2.2. Measures

Data were collected using the standardized Adolescent Hope Questionnaire developed by Ginevra et al. (2017). The instrument contains 19 items designed to assess adolescents' perceptions of hope across three dimensions. Items 1 through 6 assess optimism, items 7 through 12 assess pessimism, and items 13 through 19 assess hope for the future. Responses are scored using a five-point Likert-type scale ranging from "never" to "always." Accordingly, the total score obtainable from the questionnaire ranges from 19 to 95, with the scoring direction interpreted according to the relevant dimensions and scoring instructions of the instrument. Higher scores on positively oriented dimensions indicate stronger positive expectations and hope concerning the future, whereas the pessimism dimension reflects negative expectations. Ginevra et al. (2017) reported excellent internal consistency for the questionnaire, with a reliability coefficient of 0.968 in their dataset. In the present study, the questionnaire was administered under comparable conditions at pretest, immediately after completion of the interventions, and at the two-month follow-up assessment to permit examination of both immediate treatment effects and their maintenance over time.

2.3. Interventions

The Acceptance and Commitment-Based Training program was implemented in ten sessions based on the principles of Acceptance and Commitment Therapy described by Hayes et al. (2006), with the content adapted to students' hope, motivation, planning, and future orientation. In the first session, participants were interviewed, introduced to one another and to the general structure and rules of the group, familiarized with the fundamental principles of the acceptance- and commitment-based approach, and completed the pretest assessment. The second session introduced the concepts of experiential avoidance, cognitive fusion, and psychological acceptance, with emphasis on helping students recognize attempts to avoid unwanted thoughts and emotions and understand how such patterns can

interfere with effective behavior and future-oriented goals. The third session focused on cognitive defusion techniques, psychological awareness, and self-related perspective-taking exercises intended to help participants observe thoughts without automatically treating them as literal truths. The fourth session addressed emotional awareness and mindful awareness, enabling students to recognize internal experiences while responding to them more flexibly. The fifth session specifically applied acceptance- and commitment-based techniques to hope for the future and encouraged students to develop a more flexible relationship with discouraging thoughts and emotions concerning their future. The sixth session focused on motivation and planning and emphasized pursuing meaningful goals despite uncomfortable internal experiences. The seventh session concentrated on future orientation and helped students develop a clearer and more constructive perspective regarding future possibilities and personally meaningful goals. The eighth session introduced personal values and values clarification, through which participants identified important life directions and examined the relationship between their values, choices, and future aspirations. The ninth session emphasized committed action and enhancement of personal effectiveness by translating identified values and goals into specific behavioral steps. The tenth and final session consisted of reviewing and integrating the material covered throughout the program, discussing participants' experiences, consolidating learned skills for continued application, conducting a final interview, and administering the posttest assessment. Two months after completion of the intervention, participants completed the follow-up assessment to determine the persistence of changes in hope for the future.

The Cognitive-Behavioral Training program also consisted of ten sessions and was conducted according to the protocol described in the study materials with reference to Watson and Clark (1988), as cited by Karbasian (2022). The intervention was organized around modification of maladaptive cognitions, enhancement of constructive self-beliefs, identification of personal strengths and weaknesses, development of motivation and planning skills, and strengthening of hope for the future. During the first session, participants completed the pretest, participated in an introductory interview, became acquainted with other group members and the structure of the program, and were introduced to the basic principles of cognitive-behavioral training, with particular emphasis on self-belief and changing unhelpful patterns of thinking. In the second

session, cognitive-behavioral techniques addressing motivation, planning, judgment, and related cognitive processes were introduced and practiced. The third session concentrated on recognizing personal strengths and weaknesses and examining the cognitions associated with these self-evaluations. During the fourth session, cognitive-behavioral strategies directly related to hope for the future were presented, with particular attention to valuing school, recognizing the importance of personal and interpersonal skills, and developing effective relationships with others. The fifth session continued the future-hope component by emphasizing principles of progress and achievement, realistic goal setting, and systematic planning for educational and personal objectives. The sixth session focused on self-esteem and constructive acceptance of personal weaknesses, with the aim of reducing dysfunctional self-evaluations and encouraging more adaptive beliefs about personal capabilities. The seventh session continued cognitive-behavioral training through exercises involving acceptance of praise, effective methods of conversation and interaction, and appropriate expression of emotions. The eighth session included cognitive-behavioral exercises designed to strengthen motivation and positive expectations regarding the future. The ninth session emphasized planning skills and their application to future-oriented goals and hope, enabling participants to translate cognitive changes into concrete behavioral plans. The tenth session was devoted to integration and review of the material presented throughout the program, consolidation of acquired skills, and administration of the posttest. A follow-up assessment was administered two months later to evaluate whether the effects of the Cognitive-Behavioral Training program on students' hope for the future were maintained over time.

2.4. Data Analysis

The collected data were analyzed using descriptive and inferential statistical procedures. Descriptive statistics, including means and standard deviations, were calculated for the study variables at the pretest, posttest, and two-month follow-up stages separately for the Acceptance and Commitment-Based Training, Cognitive-Behavioral Training, and control groups. Given the presence of three independent groups assessed repeatedly across three measurement occasions, repeated-measures analysis of variance was used to examine changes in hope over time, differences among the groups, and the group-by-time interaction. Before conducting the main analysis, the

relevant statistical assumptions were evaluated, including normality of the distribution of scores, homogeneity of variances, and the sphericity assumption. Mauchly's test was used to evaluate sphericity, and when this assumption was violated, an appropriate correction such as the Greenhouse–Geisser adjustment was applied to the degrees of freedom. Where significant overall or interaction effects were identified, Bonferroni-adjusted pairwise comparisons were performed to determine the specific differences between measurement occasions and study groups. Effect sizes were also considered to indicate the magnitude of observed intervention effects. All statistical tests were conducted using a significance level of 0.05.

Table 1

Descriptive Statistics for Hope for the Future by Study Group and Measurement Stage

Variable	Group	n	Pretest M	Pretest SD	Posttest M	Posttest SD
Hope for the Future	Acceptance and Commitment–Based Training	15	57.17	7.11	68.50	8.70
Hope for the Future	Cognitive-Behavioral Training	15	55.36	8.23	74.50	7.70
Hope for the Future	Control	15	54.29	7.14	53.40	8.80

As shown in Table 1, the three groups had relatively comparable mean scores for hope for the future at pretest. The mean score increased from 57.17 (SD = 7.11) at pretest to 68.50 (SD = 8.70) at posttest in the Acceptance and Commitment–Based Training group. A greater descriptive increase was observed in the Cognitive-Behavioral Training group, in which the mean score increased from 55.36 (SD = 8.23) to 74.50 (SD = 7.70). In contrast, the mean score of the control group showed no improvement and changed only slightly from 54.29 (SD = 7.14) at pretest to 53.40 (SD = 8.80) at posttest. These descriptive findings therefore suggest that both interventions were associated with improvement in students' hope for the future, with the largest posttest mean observed in the Cognitive-Behavioral Training group.

Table 2

Results of the Analysis of Variance for the Effect of Intervention on Hope for the Future

Source	SS	df	MS	F	p	Partial η^2
Group	313.18	1	313.68	31.73	< .001	.318
Error	149.17	43	3.49	—	—	—
Total	467.85	—	—	—	—	—

As presented in Table 2, the statistical analysis demonstrated a significant intervention effect on students'

3. Findings and Results

Descriptive statistics were first examined to evaluate changes in students' hope for the future across the study groups. Table 1 presents the mean and standard deviation of hope-for-the-future scores for the Acceptance and Commitment–Based Training group, Cognitive-Behavioral Training group, and control group at the pretest and posttest stages. The descriptive results indicate that both intervention groups demonstrated increases in hope for the future following the interventions, whereas no comparable improvement was observed in the control group.

Before conducting the inferential analysis, the relevant statistical assumptions were examined. Homogeneity of error variances was evaluated using Levene's test. The results indicated that Levene's test was nonsignificant at the pretest, $F = 0.123$, $p = .733$, posttest, $F = 0.545$, $p = .571$, and follow-up, $F = 3.12$, $p = .057$. Because all significance values were greater than .05, the assumption of homogeneity of variances was satisfied across the three measurement occasions. Thus, the observed differences in variance among the groups were not statistically significant, supporting the use of parametric procedures for evaluating intervention effects. The repeated-measures analysis was subsequently conducted to determine whether changes in hope for the future differed significantly among the Acceptance and Commitment–Based Training, Cognitive-Behavioral Training, and control groups over the course of the study.

hope for the future, $F = 31.73$, $p < .001$, partial $\eta^2 = .318$. Accordingly, hope-for-the-future scores differed

significantly across the study conditions following the interventions. The partial eta-squared value of .318 indicates that approximately 31.8% of the variance in hope-for-the-future scores was associated with the intervention effect, representing a substantial effect. Taken together with the descriptive results, this finding indicates that participation in Acceptance and Commitment–Based Training or Cognitive-

Behavioral Training was associated with higher hope for the future compared with the absence of intervention. Because the omnibus analysis demonstrated statistically significant differences, Bonferroni-adjusted post-hoc comparisons were conducted to determine at which measurement stages significant changes occurred within each group.

Table 3

Bonferroni Post-Hoc Comparisons of Hope for the Future Across Pretest, Posttest, and Follow-Up Assessments

Group	Comparison	Mean Difference	SE	p	95% CI Lower	95% CI Upper
Acceptance and Commitment–Based Training	Posttest – Pretest	7.41	2.45	.007	2.03	14.17
	Follow-up – Pretest	8.16	2.22	.010	3.92	15.38
	Posttest – Follow-up	-1.27	1.76	1.000	-5.64	3.21
Cognitive-Behavioral Training	Posttest – Pretest	10.43	1.97	< .001	5.62	15.32
	Follow-up – Pretest	8.36	1.85	< .001	3.65	13.43
	Posttest – Follow-up	2.13	1.64	.620	-2.17	6.23
Control	Posttest – Pretest	1.42	1.03	1.000	-2.39	3.26
	Follow-up – Pretest	1.16	0.67	1.000	-1.54	2.32
	Posttest – Follow-up	1.11	0.74	1.000	-1.34	2.12

The Bonferroni-adjusted comparisons presented in Table 3 further clarified the pattern of change across the three measurement occasions. In the Acceptance and Commitment–Based Training group, hope for the future increased significantly from pretest to posttest (mean difference = 7.41, SE = 2.45, $p = .007$) and from pretest to the two-month follow-up (mean difference = 8.16, SE = 2.22, $p = .010$). However, the difference between posttest and follow-up was not statistically significant (mean difference = -1.27, SE = 1.76, $p = 1.000$), indicating that the improvement achieved following the intervention was generally maintained during the follow-up period. Similarly, in the Cognitive-Behavioral Training group, significant increases were observed from pretest to posttest (mean difference = 10.43, SE = 1.97, $p < .001$) and from pretest to follow-up (mean difference = 8.36, SE = 1.85, $p < .001$). The posttest-to-follow-up difference was nonsignificant (mean difference = 2.13, SE = 1.64, $p = .620$), suggesting maintenance of the treatment gains two months after intervention completion. By contrast, none of the comparisons in the control group reached statistical significance, including pretest versus posttest ($p = 1.000$), pretest versus follow-up ($p = 1.000$), and posttest versus follow-up ($p = 1.000$). Overall, the post-hoc findings indicate that both Acceptance and Commitment–Based Training and Cognitive-Behavioral Training produced significant and relatively stable improvements in students’

hope for the future, whereas no meaningful changes occurred in the control group.

4. Discussion

The present study aimed to compare the effectiveness of Acceptance and Commitment–Based Training and Cognitive-Behavioral Training in improving hope for the future among female lower-secondary-school students. The findings showed that both interventions were associated with significant improvements in hope for the future from pretest to posttest, whereas no meaningful change was observed in the control group. In the Acceptance and Commitment–Based Training group, posttest hope scores were significantly higher than pretest scores, and this improvement remained significant at the two-month follow-up. Likewise, students who received Cognitive-Behavioral Training demonstrated a significant increase in hope for the future at posttest, and the improvement remained evident at follow-up. In both intervention groups, the difference between posttest and follow-up was not statistically significant, indicating that the gains achieved during treatment were generally maintained over the follow-up period. In contrast, the control group showed no significant differences among pretest, posttest, and follow-up measurements. The overall intervention effect was also statistically significant and accompanied by a relatively substantial effect size. Although the descriptive results

suggested a greater increase in the Cognitive-Behavioral Training group, the available inferential findings do not provide sufficient evidence to conclude that Cognitive-Behavioral Training was statistically superior to Acceptance and Commitment-Based Training. Therefore, the findings primarily support the effectiveness and durability of both interventions in strengthening students' hope for the future.

The improvement observed in both experimental groups is consistent with previous research emphasizing the modifiability of hope through structured psychological interventions. Hope should not be regarded merely as a stable disposition or spontaneous positive feeling; rather, it can be strengthened by modifying the cognitive, emotional, and behavioral processes through which individuals interpret difficulties and pursue goals. Raeisi reported that hope training improved academic motivation, academic hardiness, and academic hope among school students, indicating that targeted psychological instruction can strengthen positive future-oriented beliefs in educational settings (Raeisi, 2025). Similarly, Laakso et al. found that a positive psychology intervention produced beneficial changes in psychological well-being and hope among students, suggesting that structured interventions can meaningfully influence positive psychological resources (Laakso et al., 2025). Shan and Xu also demonstrated that hope is closely associated with academic thriving, adaptive coping, and peace of mind among students, thereby supporting the importance of hope as a central psychological resource for successful adaptation to academic demands (Shan & Xu, 2025). The present findings extend these observations by indicating that both acceptance- and commitment-based and cognitive-behavioral methods may constitute useful pathways for enhancing this resource among adolescent students.

The effectiveness of Acceptance and Commitment-Based Training can be interpreted through the concept of psychological flexibility. Students with diminished hope may become cognitively fused with discouraging thoughts such as beliefs that failure is inevitable, future goals are unattainable, or current difficulties will continue indefinitely. When such cognitions are experienced as literal facts rather than mental events, students may withdraw from meaningful activities, avoid challenges, and reduce investment in future goals. Acceptance- and commitment-based techniques seek to alter this relationship with internal experiences by increasing awareness of thoughts and emotions, reducing experiential avoidance, encouraging acceptance of psychological discomfort, clarifying personal

values, and promoting committed action. Through these processes, students may learn that uncertainty, anxiety, disappointment, or fear of failure do not necessarily require withdrawal from personally meaningful educational and developmental goals.

The present findings are conceptually consistent with studies demonstrating the importance of emotion regulation and psychological processes in adaptive functioning. Joqratian et al. showed that emotion regulation mediated the relationship between differentiation of self and marital conflict, highlighting the role of regulatory capacities in determining how individuals respond to emotionally demanding situations (Joqratian et al., 2026). Similarly, Lassri et al. identified self-compassion as a mediating protective factor linking childhood maltreatment with later relationship satisfaction, suggesting that the manner in which individuals relate to difficult internal experiences can influence subsequent psychological functioning (Lassri et al., 2023). Godbout et al. also demonstrated a mediating role for mindfulness in the association between cumulative childhood trauma and couple satisfaction (Godbout et al., 2020). Although these studies focused on adult relational outcomes rather than adolescent hope, they support the broader mechanism underlying acceptance-based interventions: improved awareness, nonjudgmental engagement with internal experiences, and more adaptive emotional processing may reduce the disruptive influence of distress and support continued goal-directed behavior.

Values clarification and committed action may have been particularly important in explaining the sustained improvement observed in the Acceptance and Commitment-Based Training group. Hope for the future is strengthened when young people can identify personally meaningful directions and perceive a connection between present behavior and desired future outcomes. By helping students articulate educational, interpersonal, and personal values, the intervention may have transformed vague wishes into clearer directions for action. Committed action further enables individuals to continue pursuing these directions even when discouraging thoughts or uncomfortable emotions are present. This interpretation is compatible with research indicating that adaptive coping and constructive psychological resources can buffer the effects of adverse experiences. Fitzgerald and Shuler found that attachment and dyadic coping mediated the association between childhood maltreatment and intimate relationship quality (Fitzgerald & Shuler, 2023), while Kara and Yüksel Şahin reported that attachment-related processes mediated

associations among childhood trauma, marital self-efficacy, and relational resilience (Kara & Yüksel Şahin, 2022). These findings illustrate a broader principle relevant to the present study: adaptive coping resources can alter the pathways through which difficulty influences later functioning.

The effectiveness of Cognitive-Behavioral Training can be explained by its direct influence on dysfunctional cognitions, self-evaluations, planning, motivation, and behavioral responses. Students with low hope may interpret academic setbacks in global and stable terms, underestimate their capacities, anticipate unfavorable future outcomes, or fail to identify practical routes toward desired goals. Cognitive-behavioral training addresses these tendencies by helping individuals recognize maladaptive thoughts, evaluate their validity, generate more balanced interpretations, and translate new cognitions into concrete behavior. In the present intervention, emphasis was placed on self-belief, identification of strengths and weaknesses, motivation, planning, school-related values, progress, achievement, self-esteem, communication, and future-oriented exercises. Together, these components may have enhanced students' perceptions of competence and control while reducing rigid pessimistic thinking.

This interpretation is supported by research demonstrating the importance of dysfunctional beliefs and cognitive patterns in psychological adjustment. Bahramian et al. found meaningful relationships among irrational beliefs, communication patterns, conflict-resolution styles, and marital conflict, indicating that maladaptive cognitions are closely tied to behavioral and interpersonal difficulties (Bahramian et al., 2025). Farhangi similarly identified early maladaptive schemas and irrational relationship beliefs as relevant to conflict-management processes (Farhangi, 2021), while Sheikhhadisiroei et al. showed that ineffective conflict-resolution styles mediated the association between maladaptive schemas and irrational relationship beliefs (Sheikhhadisiroei et al., 2018). Hicks et al. further emphasized the contribution of schema modes and cognitive-emotional patterns to relationship instability and conflict (Hicks et al., 2026). Although these findings relate to relational outcomes, they reinforce the cognitive-behavioral premise that persistent maladaptive beliefs can shape emotional responses and behavioral choices. In adolescents, restructuring pessimistic assumptions about personal competence and future possibilities may therefore contribute directly to increased hope.

The cognitive-behavioral findings are also consistent with evidence from intervention studies indicating that

structured cognitive and behavioral training can modify maladaptive beliefs and improve functioning. Vaslehchi et al. reported that cognitive-behavioral couple therapy was effective in changing communication beliefs and reducing marital burnout among couples approaching divorce (Vaslehchi et al., 2024). Jafari et al. similarly demonstrated that effective communication skills training reduced marital burnout among married women (Jafari et al., 2021). Vazhappilly and Reyes found that an emotion-focused communication program improved communication and marital satisfaction among distressed partners (Vazhappilly & Reyes, 2018). These studies support the general proposition that structured psychological education can modify established cognitive and behavioral patterns. In the present study, teaching students to identify distorted thinking, recognize strengths, plan effectively, communicate more constructively, and formulate achievable goals may have strengthened their belief that future outcomes are modifiable rather than predetermined.

The durability of improvements at the two-month follow-up is another important finding. In both intervention groups, follow-up scores remained significantly improved relative to pretest, while no significant decline was detected between posttest and follow-up. This pattern suggests that participants may have continued using the skills learned during the interventions after the formal sessions ended. For the Acceptance and Commitment-Based Training group, skills such as cognitive defusion, mindful awareness, values clarification, and committed action may have become strategies that students could repeatedly apply when facing academic or personal difficulties. For the Cognitive-Behavioral Training group, cognitive restructuring, self-evaluation, planning, communication, and goal-oriented behavioral exercises may similarly have provided reusable strategies for maintaining more hopeful future expectations.

The maintenance of treatment gains is theoretically plausible because both interventions targeted mechanisms that operate repeatedly in everyday life. Students regularly encounter academic evaluation, social comparison, uncertainty, disappointment, interpersonal stress, and decisions about future goals. Interventions that alter how these situations are interpreted or approached may therefore continue to exert effects beyond the formal treatment period. Previous studies have emphasized that enduring patterns of cognition, communication, and coping contribute significantly to adaptation. Kang and Choi found that dysfunctional communication mediated the relationship between adverse childhood experiences and marital

satisfaction (Kang & Choi, 2022), whereas Dugal et al. demonstrated that negative urgency and communication patterns mediated associations between childhood trauma and psychological intimate partner violence (Dugal et al., 2020). St-Pierre Bouchard et al. likewise linked cumulative childhood trauma and communication patterns with intimate partner violence among men seeking help (St-Pierre Bouchard et al., 2023). These studies underscore that recurrent psychological processes can maintain both maladaptive and adaptive outcomes over time. The continued use of skills acquired during intervention may therefore explain why improvements in hope remained evident at follow-up.

The absence of significant change in the control group further strengthens the interpretation that the observed improvements were associated with the interventions rather than merely with repeated measurement or the passage of time. Students in the control condition did not show meaningful improvements across the assessment stages, suggesting that hope did not increase spontaneously during the study period. This result is important because adolescents' future expectations may be affected by multiple contextual influences, including academic pressures, interpersonal experiences, family expectations, and developmental uncertainty. Without systematic psychological support, these conditions do not necessarily result in improved optimism or future hope. Structured intervention may therefore provide an additional resource for helping students respond more adaptively to these developmental demands.

The findings can also be understood from a resilience perspective. Hope contributes to persistence because it enables individuals to maintain an orientation toward desired outcomes even under conditions of difficulty. Research on relational resilience has demonstrated that attachment, coping resources, and self-efficacy may influence adaptation after adverse experiences (Kara & Yüksel Şahin, 2022). Banford Witting and Busby similarly showed that childhood trauma is associated with later resources within couple relationships (Banford Witting & Busby, 2019), while Zamir's review emphasized the importance of mediating and protective factors in explaining the association between childhood maltreatment and later relationship quality (Zamir, 2022). Vitek and Yeater also documented the long-term implications of sexual violence histories for romantic relationship functioning (Vitek & Yeater, 2021). Collectively, these studies demonstrate that psychological outcomes are influenced by both risk and protective

processes. Hope may function as one such protective resource for adolescents by encouraging persistence, adaptive planning, and engagement despite adverse or uncertain circumstances.

The findings further suggest that self-efficacy and positive self-appraisal may constitute common mechanisms shared by both interventions. Acceptance- and commitment-based methods can enhance perceived effectiveness by helping individuals act according to values despite psychological discomfort, while cognitive-behavioral methods can strengthen self-belief by modifying negative assumptions and promoting successful behavioral experiences. Ayadi et al. demonstrated that self-esteem mediated the association between insecure attachment and marital burnout (Ayadi et al., 2017), and Parpae et al. highlighted the role of effective communication in the relationship between attachment and marital satisfaction (Parpae et al., 2020). Alibekian and Afsharinia similarly emphasized the contribution of self-differentiation, conflict-resolution styles, expectations, and burnout to marital adjustment (Alibekian & Afsharinia, 2020). These findings support the broader proposition that perceptions of personal capacity and adaptive coping resources can influence psychological outcomes. Among students, increased confidence in their ability to plan, respond flexibly, and take meaningful action may consequently strengthen future hope.

The present results also fit with the broader literature on conflict management and adaptive behavioral strategies. Stinson et al. found that conflict-resolution styles were associated with marital satisfaction (Stinson et al., 2017), while Karanja and Yator reported an association between accommodation conflict-resolution style and marital satisfaction (Karanja & Yator, 2021). Knapp et al. identified conflict-resolution styles as mediators connecting childhood sexual abuse experiences with later relationship satisfaction and stability (Knapp et al., 2017), and Rezaei and Rezaei showed that conflict-resolution styles and marital expectations could predict marital burnout (Rezaei & Rezaei, 2018). These studies indicate that adaptive outcomes are partly shaped by the strategies individuals use when encountering obstacles and conflicting demands. In a similar way, students' hope may depend not only on the existence of difficulties but also on whether they possess effective strategies for responding to them.

It is also useful to consider the findings in relation to interpersonal and contextual dimensions of psychological functioning. Javdan et al. demonstrated that family relationships and conflict-resolution styles were associated

with marital burnout among divorce-seeking couples (Javdan et al., 2023), while Kaleta and Błońska highlighted marital communication as an important factor associated with burnout among mothers of children with autism spectrum disorder (Kaleta & Błońska, 2021). Moteshafie et al. similarly identified relationships between sexual satisfaction and marital burnout among nurses (Moteshafie et al., 2023), and Alsawalqa described marital burnout as a process involving gradual emotional exhaustion (Alsawalqa, 2019). Although these studies address different populations and outcomes, they demonstrate that psychological well-being is embedded within broader cognitive, emotional, and social processes. For adolescent students, hope for the future is likewise likely to be affected by the quality of perceived support, communication, school experiences, and confidence in managing challenges. Interventions that strengthen internal coping capacities may therefore help students maintain hopeful expectations even when environmental conditions cannot immediately be changed.

Another relevant consideration is that emotional and behavioral responses are frequently shaped by earlier experiences and existing schemas. Alavi Lavasani and Ahmadi Tahour Soltani showed that attachment styles, early maladaptive schemas, and emotion-regulation difficulties played important roles in the relationship between childhood maltreatment and emotional divorce (Alavi Lavasani & Ahmadi Tahour Soltani, 2017). These findings highlight how previously established beliefs and emotional patterns can influence later responses to difficulty. Cognitive-Behavioral Training may help students identify and revise maladaptive interpretations before they become more deeply consolidated, whereas Acceptance and Commitment-Based Training may reduce the behavioral dominance of such cognitions even when they cannot be immediately changed. In this respect, both approaches may be particularly appropriate during adolescence, when cognitive and emotional patterns are still undergoing considerable development.

The results also correspond conceptually with studies demonstrating that interventions targeting adaptive coping and constructive interaction can reduce psychological strain. Rahseparmonfared et al. found that solution-focused couple therapy reduced marital conflict and burnout (Rahseparmonfared et al., 2021). Aziz and Naqvi emphasized the importance of commitment, communication patterns, and conflict-handling strategies in understanding marital functioning (Aziz & Naqvi, 2025), while Tasew and Getahun highlighted the complexity of factors contributing

to marital conflict (Tasew & Getahun, 2025). Zohrei et al. likewise emphasized the contribution of family-of-origin and in-law conflicts to marital conflict (Zohrei et al., 2025). Although these studies concern adult interpersonal functioning, they reinforce the general therapeutic principle that adaptive outcomes can be strengthened by targeting identifiable psychological mechanisms rather than treating distress as unchangeable. The significant improvement in hope observed in the present study may similarly reflect the acquisition of modifiable cognitive, emotional, and behavioral skills.

5. Conclusion

Overall, the findings suggest that Acceptance and Commitment-Based Training and Cognitive-Behavioral Training can both be useful interventions for strengthening hope for the future among female lower-secondary-school students. The two interventions appear to achieve this outcome through partially different but potentially complementary mechanisms. Acceptance and Commitment-Based Training may increase hope by reducing experiential avoidance, loosening cognitive fusion, strengthening present-moment awareness, clarifying values, and encouraging committed behavior despite uncertainty. Cognitive-Behavioral Training may increase hope by modifying dysfunctional beliefs, strengthening self-efficacy, increasing motivation, improving planning, and helping students develop more realistic and constructive expectations regarding their future. The maintenance of gains at the two-month follow-up further suggests that both approaches may provide skills that students can continue to apply after formal intervention has ended. At the same time, because the available analyses did not establish a statistically significant direct difference between the two active interventions, it is more appropriate to conclude that both approaches were effective rather than to claim superiority of one intervention over the other.

Several limitations should be considered when interpreting the findings. The participants were female lower-secondary-school students from Mashhad and were recruited through convenience sampling, which restricts the generalizability of the findings to male students, students from other educational levels, adolescents from different geographical regions, and populations with different socioeconomic or cultural characteristics. The relatively small number of participants in each study group may also have limited statistical power, particularly for detecting

more subtle differences between the two active interventions. The study relied primarily on a self-report questionnaire, and participants' responses may therefore have been influenced by social desirability, temporary mood, response tendencies, or expectations regarding the interventions. Furthermore, the follow-up period was limited to two months, making it impossible to determine whether treatment effects persist over longer periods. The absence of detailed information on potentially influential variables such as family socioeconomic status, baseline psychological distress, academic achievement, parental support, concurrent counseling, and major life events also limits the extent to which alternative explanations can be excluded. Finally, therapist or instructor effects, treatment fidelity, participants' attendance, and adherence to intervention exercises were not systematically examined, and these factors may have influenced the magnitude of observed changes.

Future studies should replicate the present research using larger samples drawn through probability-based or multi-stage sampling procedures and should include both female and male students from different schools, educational levels, cities, and socioeconomic backgrounds. Direct statistical comparisons between Acceptance and Commitment-Based Training and Cognitive-Behavioral Training should be conducted using designs adequately powered to determine whether one approach produces greater or more durable benefits under particular conditions. Future research could extend follow-up assessments to six months or one year to establish the long-term stability of improvements in hope. Researchers should also examine potential mediating mechanisms, including psychological flexibility, cognitive fusion, experiential avoidance, self-efficacy, optimism, emotion regulation, academic motivation, goal-setting ability, and perceived social support. Incorporating teacher or parent reports, behavioral indicators, academic outcomes, and qualitative interviews would provide a more comprehensive understanding of intervention effects beyond self-report measures. Future investigations may also examine whether baseline levels of hope, academic performance, family functioning, or psychological distress moderate treatment response and whether combining cognitive-behavioral and acceptance-based components produces greater benefits than either approach alone.

School counselors, psychologists, teachers, and educational administrators may consider incorporating structured hope-enhancement programs into school-based mental health and student-development services.

Acceptance and commitment-based activities may be particularly useful for students who struggle with avoidance, fear of failure, excessive worry, or difficulty acting in accordance with personal values when distress is present, whereas cognitive-behavioral techniques may be especially helpful for students whose low hope is characterized by persistent negative beliefs, low self-confidence, poor planning, or unrealistic expectations about failure. Schools could integrate brief exercises in values clarification, cognitive defusion, constructive self-talk, goal setting, problem solving, planning, emotional awareness, and committed action into counseling programs or life-skills curricula. Intervention effects may be strengthened by providing periodic booster sessions and encouraging students to apply the learned strategies to actual academic and personal goals. Practitioners should also monitor individual differences in students' responses and adapt intervention content to developmental level, educational needs, family circumstances, and cultural context rather than implementing identical procedures for all students.

Authors' Contributions

Authors equally contributed to this article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

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Declaration of Interest

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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