



# The Effectiveness of Positive Psychology Interventions with Islamic approach on Satisfaction of life in females with Multiple Sclerosis in city of Kerman

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## ABSTRACT

**Objective:** The aim of the present research was to review the effectiveness of positive psychology interventions with Islamic approach on satisfaction of life in women with Multiple Sclerosis in Kerman city. **Methodology:** The present research is of quasi-experiment type with pretest-posttest design together with control group and following test with one-month duration after posttest. In this regard, 40 female patients from members of MS society of Kerman were selected as sample by targeted sampling and then they were placed in two groups of 20 people (experiment& control) through random assignment. Positive psychology with Islamic approach was trained only in experiment group during 7 sessions in 120 minutes for each session satisfaction of life questionnaire (SWLS) was used as instrument. **Results:** The results showed that positive psychology interventions with Islamic approach increase the satisfaction of life in females with MS. Also, the effectiveness and impact of the training, according to the results of follow-up after one month, was stability. ( $p < 0/001$ ). **Conclusion:** It can be noted that positivism skills training in order to reinforce and improve positive relationship with self, others and world causes the people to know themselves better and recognize their positive experiences and find out the role of these positive experiences in increasing and promoting respect to themselves.

## 1. Introduction

MS is one of the common chronic diseases of the central nervous system and effect on the person's sensory and motor function (McCabe, 2005). This disease has unknown cause and progressive nature with recrudescence and improvement periods, so that the suffering people experience various physical and mental disorders due to the disease during their life and these disorders strongly effect on daily performance, family and social life, functional independence and planning for future (Solari & Radice, 2001). Although the disease cause is unknown, it seems that activation of safety mechanisms against Myelin antigens is involved in causing this disease. The most common age for this disease is 20-40 years Van der Geer et al. (2000) and its prevalence in women is more than men (3 to 1 in Kerman). According to the researches results, the prevalence of this disease has been reported 51.9 in Tehran and 57.3 in Kerman in 100000 people (Ebrahimi & Sedighi, 2013). On the one hand, this disease threatens the person's independence and ability for effective participation in society (Bishop et al, 2007) and on the other hand, prognosis and its unpredictable periods have clear effect on patients' quality of life. One important concept in quality of life, the concept of subjective well-being is a part of the investigation, subjective well-being of the individual evaluation of their lives, in terms of present and past. This evaluation includes emotional reaction to events and judgments that He gives life satisfaction (Kakabayee et al, 2012). Findings show that life satisfaction and other indicators of positive adaptation can be a strong predictor for the incompatibility of emotional (depression and anxiety) is. Today, researchers believe that life satisfaction people to greater success in life, better health,

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social communication and physical health than Directive makes. Therefore, today's treatments should focus on expanding capabilities and increase the life satisfaction in people.

One of the psychological interventions, which has been recently considered, is positive psychological interventions. In spite of other approaches that focus on the problems and weaknesses, in this approach, increasing positive emotions and promoting meaning of life have been emphasized and considered. From positive psychology point of view, positive emotions and capabilities are one of the best fields to prevent mental damages, and psychologists should not work only on fixing the people's problems but they should help them to be able to have a happier, richer and more complete life. Also in Seligman & Csikszentmihalyi (2000), point of view human has both positive and negative halves and this time when we pay attention to the human's positive thought, beliefs, emotions and behaviors be side her/his disease and sick psyche. by using and In the meantime, Seligman & Csikszentmihalyi (2000) optimism as one of the subcategories of positive psychology that is considered among the positive features of human has devoted a special position to itself in the fields of evolution psychology, family psychology and mental health during one recent decade (Seligman & Csikszentmihalyi 2000). Investigations show that optimism and generally positive beliefs cause hope, self- efficacy and self-esteem in people (Alberto & Joyner, 2008). Carver et al (2010) mention that optimism improves people's resiliency against life stressful events and has meaningful positive relationship with better emotional well-being, more effective coping strategies and even better outcomes of physical health. From his point of view, optimism provides cognitive and coping resources that cause mental health promotion in the individual. According to the mentioned, positive thinking discussion is so much important because of the effect of positive thought and optimism on the health and relaxation of spirit and mind .On the other hand, The psychological intervention is greatly influenced by cultural, inter-cultural beliefs and values, and its effectiveness in accordance with the cultural and religious patients depends . The religion as a cultural and ideological elements placed individuals (Hofmann, 2006) that Researches also have been recently done about the combination of psychotherapeutic techniques with spirituality and religion. In this regard, Paukert et al. (2009) by using cognitive-behavioural combinational treatment approach with spirituality and religion showed this therapeutic approach causes coping skills improvement in patients with Generalized Anxiety Disorder. In one review in Iran, the effectiveness of short time psychotherapy of learning self-control with and without religious orientation was also measured on inhibition of anxiety and stress. Results showed that therapy with Islamic religious orientation has an effect beyond therapy without religious orientation in decreasing anxiety (Janbozorgi, 1999). Therefore, we reviewed above, since we live in a society where the majority of them Muslims velocity form of Islamic religious context, it is important to carry out psychological intervention In general, it seems that the combination of spiritual-religious approaches with different methods of psychotherapy can cause promotion of the effectiveness of these methods. Nowadays also most pundits believe that the biggest achievement of religion is maintaining the humans' spiritual and mental health. Of course, in the meantime, Islam religion faces the human the most optimistic attitude and look to God, human, universe and life. The aim of most of the recommended methods in it is to help human in order to have healthy spirit and mind with emphasizing on attention to life positive aspects, positive interpretation of events and positive expectation towards future to be able to cope with problems by the best possible ways and to achieve comfort. Hence, positive thinking with Islam approach is a method that increases most of the human's mental fields through facilitating positive impressions according to three principles of attention, interpretation and expectation. Furthermore, three elements of attention, interpretation and expectation in Islamic optimism match with other available approaches in the field of optimism. Carver et al. (2010) emphasized on expectation concept. Seligman & Csikszentmihalyi (2000) emphasized on explanation and interpretation. Hofmann (2006) combined these two approaches, so that optimistic interpretations and explanations of events cause positive expectations formation. Meta-recognition theory of Wells & Matthews (1996) says that the person's interpretations and explanations are affected by meta-recognitions. So, it can be said that positive meta-recognitions are followed by optimistic explanations and interpretations and optimistic interpretations generate positive expectations towards future.

On the other hand, in the present era that Islamic thought revitalization is rapidly developing, this fact has been cleared that Islam is beyond a collection of religious practices and behaviours. Muslim scholars have tried to introduce Islam by using the teachings of the Qur'an and Sunnah and offering cognitive, emotional and behavioural guidance as a life method in harmony with the universe that paves the way of human's perfection and growth and guides and helps him/her in life difficulties. Therefore, it is appropriate that study and research are implemented for knowing these methods and practical and scientific solutions are being extracted from them and is used as a theory of behaviour and mental health balance next to the other mentioned similar theories.

## 2. Methods and Materials

This study is of quasi-experimental type with pretest-posttest plan with control group. At first, 40 patients who had the entrance to research criteria were chosen among the list of woman patients with multiple sclerosis by referring to Kerman MS society and getting permission for performing research in order to participate in therapy sessions, and then we divided them into two groups of 20 patients (control and test) in random replacement form. The criteria of entering to this study included: woman patients with MS with the age range of 20-50 years old, having no history of divorce and death of family members in recent six months, no psychotic disorders, disease promotion almost in the same level, avoiding the use of narcotics and psychotropic drugs, minimum literacy in order to read and fill out written consent by patient and criteria of exiting from study were considered as the patient's non-acceptance in order to participate in the research, illiterate people, history of divorce or death of family members in recent six months, having psychotic disorders and narcotics usage. At first, we shared satisfaction of life questionnaire for the patients of both groups. Then positive psychology interventions were applied in the test group by the related teacher in 10 sessions of 2 hours, two sessions per week, while control group received no intervention. satisfaction of life was reevaluated in the two groups (control and test) after finishing educational sessions. satisfaction of life was reevaluated in the two groups after one month in order to follow up results stability.

## 2.1. Research instruments

### 2.1.1. satisfaction of life scale

This scale by Bishop et al. (2007) to measure life satisfaction, subjective well-being in the cognitive dimension is applied. The scale has five, and each of the seven options which respondents rate their satisfaction, from one (strongly disagree) to seven (strongly agree) shows. The average does not mean life satisfaction and life satisfaction is an average of seven shows. Using half the test-retest reliability of the test method 0/87 and 0.82 have been reported. Acceptable reliability using self-report measures and external measures, such as peer reporting, storage and grading scale clinical trials have been reported. Iranian form of credit to help with testing positive emotion and negative tests were evaluated and a significant positive correlation with positive affect scale and significant negative correlation with negative affect scale was found. Janbozorgi (1999), to run on 147 male students and 121 male students and female Canadian and Iranian girl has reported Cronbach's alpha 0/88.

## 2.2. Description of the Training sessions

The researcher hasn't obtained a resource that positive psychology interventions are dealt with in it directly. Hence, she tried by spending much time to develop a comprehensive program about positive psychology interventions according to three principles of **attention, interpretation and expectation** by using **religious resources** and **psychological resources** under the supervision of psychologist and seminary experts as follows:

**Table 1. Description of training sessions**

First meeting: Meeting group members with each other, describing the objectives and rules of course, providing some explanations about the training sessions and orienting the treatment client within positive psychotherapy. Attention to positive aspects in order to increase the self-esteem some materials about the Islamic comment were presented.
Second meeting: Attention to thinking, controlling negative thoughts, some materials about the Islamic comment were presented.
Third meeting: Attention to the positive aspects of others and improve social relationships, some materials about the Islamic comment were presented.
Fourth meeting : To the blessings and thanks giving Attention
Fifth meeting: The positive interpretation of events and problem solving, some materials about the Islamic comment were presented.
Sixth meeting: Positive expectations about the future and achieve goals, some materials about the Islamic comment were presented.
Meeting Seventh: a total review of the materials, polling the pervious and answering the question, testing the post-test and holding the closing ceremony.

## 3. Results

At first, mean, standard deviation and defaults have been offered and then covariance analysis of the effect of group membership of **satisfaction of life** scores has been investigated in table 2 to review the difference between satisfaction **of life** scores before training and after that. The pretest scores of **satisfactions of life** were controlled in this analysis.

**Table 2. Number, mean and standard deviation of the satisfaction of life in terms of two group of test and control groups of test and control group in two test**

Variable	GROUP	Test	Mean	Standard deviation
satisfaction of life	TEST	Pre test	19.40	3.70
		Post test	24.55	3.05
	Control	Pre test	19.05	3.88
		Post test	19.10	4.07

Covariance analysis test was used to review the meaningfulness of scores mean difference of satisfaction of life before training and after that in both groups. Assuming that the control variable is pretest scores, table 3 shows the results of covariance analysis test of satisfaction of life's scores mean difference before training and after that in terms of both test and control groups.

**Table 3. The results of covariance analysis test of satisfaction of life's scores mean difference before training and after that in terms of both test and control groups**

Source	Some of squares	Df	Mean of square	F	Sig.	Eta Squared
Pre test	439/23	1	439/23	303/67	0/001	0/89
Group	263/25	1	263/25	182/009	0/001	0/83
Error	53/51	37	1/44			
Total	19843	40				

As is obvious in table 3, assuming that the control variable is pretest scores, there is meaningful difference between satisfaction of life scores before training and after that in test group ( $p=0/001$ ). Statistical power 1 shows that sample size has been enough. Meanwhile, adjusted means was obtained for control group 24.39 and for test group was 19.25. In training effect, follow-up study that was performed one-month later (table 4).

**Table 4. Number, mean and standard deviation of the satisfaction of life points in terms of two test and follow up studies**

Variable	GROUP	Test	Mean	Standard deviation
satisfaction of life	FALLOW UP	TEST	24.40	3.23

Result in table 4 it has been shown that there is difference between the mean of satisfaction of life scores in both test and control groups. Independent t test was performed to review the meaningfulness of these differences that its results have been offered in the following.

**Table 5: Independent t test results to compare the mean of satisfaction of in both test and control groups**

Variable	Levin test		
	Sig.	Sig.	T
satisfaction of life	0.41	0/52	5/02

#### 4. Conclusion

The aim of the present research was to review the effectiveness of positive psychology interventions with Islamic approach on Satisfaction of life in females with Multiple Sclerosis in Kerman city. The obtained results from table 2 show that there is a meaningful difference between posttest scores of test group and control group. Therefore, positivism training has been effective in increasing Satisfaction of life in the women with MS and this effectiveness was also stable in the follow-up phase. In this way, the research hypothesis is confirmed in the meaningfulness level. According to this fact that no review with the present research topic was found, similar studies are investigated. Aspinwall (1998) showed that positive affect and positive beliefs enhance the resources of people to deal with difficulty and disaster. Furthermore, during a meta-analytic research that was performed on 850 people about the relationship between religious beliefs and actions and mind health and social function, it showed that religion has its effect on mind health by increasing ability in dealing with stress, generating social support space, generating hope and optimism in order to help to generate positive emotions like better living, life satisfaction and welfare (Aspinwall, 1998). Ebadi et al. (2010) also review the effectiveness of positivism training with emphasize on Quran verses on increasing hope to life of divorced women of Ahvaz city during a research in Iran. Their research results showed that positivism training with emphasize on Quran verses has been effective on increasing hope and according to the performed follow-up after one month; it is followed by stable results. In explaining the present research results, it can be noted that positivism skills training in order to reinforce and improve positive relationship with self, others and world causes the people to know themselves better and recognize their positive experiences and find out the role of these positive experiences in increasing and promoting respect to themselves. Attention to positive points and past good experiences, increase the probability of more positive impressions' occurrence from the self and others and this causes the people to be able to accept more responsibilities about their value and achieve a more complete understanding of themselves that this causes increasing Satisfaction of life in people. But the fact that the method of positivism with Islamic approach has been effective is not out of mind because the effectiveness of beliefs on emotions and behaviors is both correlated with the experiences of common sense and cognitive ideas. It has been said in the humans' history and story that the tensions haven't been necessarily destructive for religious people who has found goal and meaning in their life and even can also lead to their growth and sophistication that Frankel logo therapy theory and his personal experience is not unrelated to this fact. On the other hand, in the present era, according to the growth and increasing mental and social ravages, tendency to treatment by religion that even has been accelerated more among western societies, can be effective in treating many mental diseases. Hence, contemplation in Islam doctrines and Quran verses not only enhances people spirituality, but also helps human in life to be able to meet life problems by appropriate method. From Islam viewpoint, if people justify and interpret events logically and by considering all appliances, they experience more relaxation in life; as a result, quality of life and hope is also more in them. Algae et al. (2008), also believes that religion has an important role in meeting life stresses and can adjust the effect of life sever crises. It seems that religious and non-religious people experience the same mental pressure rate. But religious people can deal with life negative events and mental stressful factors better. Because religious beliefs are acted as a shield

against life stresses and in this way, help the person in choose appropriate and effective coping strategies. In this field, Polma & Pendelton (2002), reported the effect of religion on mental health, decreasing disease symptoms and decreasing discomfort and confusion and confirmed the existence of a relationship between religion and mental health. In general, increasing Satisfaction of life in women with MS can be said because during training sessions, patients became more aware of their thoughts and emotions and fostered more positive beliefs in them, review and reflection on negative thoughts and replacing positive thoughts instead of negative thoughts were increased, also considered discovering weaknesses and generating facilitation in positive attitude towards the self and others, logical and realistic interpretation of the events, attention to blessings and positive living and this causes increasing Satisfaction of life in them.

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#### REFERENCES

- Alberto, J., & Joyner, B. 2008. Hope, optimism, and self-care among Better Breathers Support Group members with chronic obstructive pulmonary disease. *Applied nursing research*, 21(4), 212-217.
- Algoe, S. B., Haidt, J., & Gable, S. L. 2008. Beyond reciprocity: Gratitude and relationships in everyday life. *Emotion*, 8(3).
- Aspinwall, L. G. 1998. Rethinking the role of positive affect in self-regulation. *Motivation and emotion*, 22(1), 1-32.
- Bishop, M., Stenhoff, D. M., & Shepard, L. 2007. Psychosocial adaptation and quality of life in multiple sclerosis: Assessment of the disability centrality model. *Journal of rehabilitation*, 73(1), 3.
- Carver, C. S., Scheier, M. F., & Segerstrom, S. C. 2010. Optimism. *Clinical Psychological Review*, 30(1).
- Ebadi, N. Sodani, M. faghihi, A. & Hassanpour, M. 2010. Efficacy of positive thinking by emphasizing the Quran to increasing life expectancy divorced women in Ahwaz. *New findings in the Journal of Psychology*. 84-72. [Persian].
- Ebrahimi, H. A., & Sedighi, B. (2013). Prevalence of multiple sclerosis and environmental factors in Kerman province, Iran. *Neurology Asia*, 18(4), 385-9.
- Hofmann, S. G. 2006. The importance of culture in cognitive and behavioral practice.
- Janbozorgi M. 1999. The study of effectiveness of psychotherapy with and without religious orientations on reducing of anxiety and stress. [Thesis]. Tehran: Tarbiat Modares University; [Persian].
- Kakabrayee K, Arjmandnia A, Afroz Gh. 2012. Relationship between coping styles and perceived social support with psychological subjective well-being scales among parents of regular and mentally ill children in Kermanshah in 2010 (Persian). *Research on exceptional children*, 2(7), 1-26.
- McCabe, M. P. 2005. Mood and self-esteem of persons with multiple sclerosis following an exacerbation. *Journal of psychosomatic research*, 59(3), 161-166.
- Paukert, A. L., Phillips, L., Cully, J. A., Loboprabhu, S. M., Lomax, J. W., & Stanley, M. A. 2009. Integration of religion into cognitive-behavioral therapy for geriatric anxiety and depression. *Journal of Psychiatric Practice*, 15(2), 103-112.
- Polma, M. B., & Pendelton, R. 2002. The emotional impact of fundamentalist religious participation. *Journal of spiritual therapy*. 17, 59-63.
- Seligman, M. E., & Csikszentmihalyi, M. 2000. Positive psychology: *American Psychologist*; 55(1): 5-14.
- Solari, A., & Radice, D. 2001. Health status of people with multiple sclerosis: a community mail survey. *Neurological Sciences*, 22(4), 307-315.
- Van der Geer, J., Hanraads, J. A. J., & Lupton R. A. 2000. The art of writing a scientific article. *Journal of Scientific Communications*, 163(2), 51-59.
- Wells, A., & Matthews, G. 1996. Modelling cognition in emotional disorder: The S-REF model. *Behaviour research and therapy*, 34(11-12), 881-888.

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