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Effectiveness of Group Training of Health-Oriented Lifestyle Using Psychodrama in the Improving Phobia, Paranoid Thoughts, and the Lack of Emotional Clarity in Students

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ABSTRACT

The present study was done to investigate the effectiveness of group training of health-oriented lifestyle, using psychodrama, in the improvement phobia, paranoid thoughts, and lack of emotional clarity in female students living the dormitory of the University of Isfahan in 2013. This is a quasi-experimental study with pre- and post-test design and a control group. In this study, 32 fresh master's students, living in the dormitory, who scored above 190 and 90 in The Symptom Checklist 90 (SCL-90) and the Difficulties in Emotion Regulation Scale (DERS) inventories were selected. They then were placed into experimental and control groups equally. The experimental group received group training of health-oriented lifestyle for eight 90-minute sessions, based on the Walsh's theory (2011). The SCL-90 and DERS were used for measuring phobia-and-paranoid thoughts, and the lack of emotional clarity, respectively. Results from posttest, using ANCOVA, showed that the implementation of group training of health-oriented lifestyle through psychodrama could significantly increase the emotional clarity and decrease phobia and paranoid thoughts in the investigated students, compared to the control group (p<0.01).

Keywords: Group Training of Health-oriented lifestyle, psychodrama, phobia, paranoid thoughts, lack of emotional clarity.

Introduction

Disability in cognitive processing of emotional information and emotional regulation is called alexithymia. It is a multi-dimensional construct characterized by inability to identify emotions, lack of emotional clarity, difficulty in identifying feelings and distinguishing between feelings and the bodily sensations of emotional arousal, and difficulty in describing feelings to other people (Bagby and Taylor, 2008). Theorists believe that those who are incapable of distinguishing their emotional responses to every events show more diagnostic symptoms, and internalizing disorders such as depression, anxiety, and paranoid thoughts (Horny, 2007). Phobia

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is a type of anxiety disorder, usually defined as a persistent, irrational, and overwhelming fear of an object, position, activity, situation, or even bodily function (that are disproportional to the actual danger or anxiety). The majority of people with phobia acknowledge that their fear is disproportionate to the situation. According to the evidence, people with phobia employ negative coping strategies for regulating their negative emotions, which per se intensifies the symptoms of phobia (Azadi, 2010).

Studies suggest that the increase or decrease of using emotion regulation is associated with changes in mental health. They show that lifestyle is correlated with mental health and correct strategies of cognitive emotion regulation (Manza Tavakoli, Esmaeli, & Tavakkoli, 2014).

Lifestyle refers to the way of people' live and includes all aspects of daily life such as sleep, food, health, customs, work, play, entertainment, fun time, social relationships, attitudes, behavior, speech, feelings and the emotions. Since lifestyle encompasses all dimensions of life, it has a significant role in physical and mental health.

Literature review suggests that researchers of this field attempt to help people in easing and/or coping with their behavioral and emotional problems through training them how to improve their interpersonal relationships by correcting maladaptive aspects of their lifestyle. Noriega (2004), Jaber, Pinelli, and Brown (2011), Nandakumar, Kadam, Srikanth & Rao (2012), and Gerstel, Pataky, Busnel & Rutschmann (2012) concluded that changing lifestyle improves the health condition of the patients with diabetes, cardiovascular syndrome, and eating disorder. In Iran also, Lotfi, Kashani, and Karimi (2012), Bayat, Shojae Zadeh, Sadeghi, and Tal (2012), Mobasheri, Khalili, Mehrabi, Hadaegh, Movahhedi, and Azizi (2012), and Manzari Tavakkoli, Esmaeli, Tavakkoli, and Ahmadi Foroshani (2013) put that changing lifestyle can significantly decrease the symptoms of mental disorders and increase psychological well-being (2014). Although, reviewing the background of the study show that lifestyle and interventions to improve it have been highlighted, it seems that these research trends have not addressed many variables related to the mental health, positive and negative emotions, and valid approaches to counseling and psychotherapy. In this regard, psychodrama, as a type of role play, can be given as an example. In this method, clients use role-playing as they are in a particular situation. It is to some extent associated with emotional draining and self-motivation, and deepens people's insight and knowledge (phiress & terall, 2009). Indeed, psychodrama is a technique that allows gaining immediate, exciting, and stronger experience of subjects, with which the client, therapist, and other participants of therapeutic session are involved. Regarding the background of the study and that psychodrama has not been applied to train healthy lifestyle, specifically to female students living in dormitory, this study aims at investigating the effectiveness of group training of health-oriented lifestyle, using psychodrama, in the improvement of phobia, paranoid thoughts, and the lack of emotional clarity in female university students living in the dormitories of the University of Isfahan.

Methodology

This is an applied study with quasi-experimental design, and pre- and post-intervention with control group. The statistical population included all fresh female students living in Shodaha Dormitories, in 2013. Data sampling was first done via headcount census, in that SCL-90 and DERS inventories were distributed between all dormitory residents at the dormitory site to measure phobia and paranoid thoughts, and lack of emotional clarity, respectively. From the completed and returned questionnaires, 40 subjects scored higher than 190 and 90 in SCL-90 and DERS, respectively. They were then divided into two equal groups. Due to not showing up in more than two sessions, four subjects were excluded from the study. To have two equal groups,

four subjects were also removed from the research randomly. The experimental group received eight 90-minute interventional sessions in two months, one session per week; while, the control group did not receive any intervention. Then, the post-test was implemented with the collected questionnaires. In this study, in addition to the use of descriptive statistical indexes like mean and standard deviation, multivariate analysis of variance has also been employed to investigate the results from experimental and control groups.

Research Instruments

SCL90-R:

Since distinguishing healthy people from patients requires short-term and valid instruments, SCL90-R is an instrument capable of diagnosing and monitoring people with disorders. This five-point scale measures discomfort from zero "Not at All" to four "Severely". This questionnaire has been widely used in domestic and foreign studies. In different research, reliability of 0.77 to 0.98, and high validity value have been reported for it. In the present study, the mean, standard deviation, and Cronbach's alpha of 4637.87, 25610.53, and 0.98 have been obtained for this questionnaire. In addition, the mean, standard deviation, and Cronbach's alpha of 5.4810, 4.89457, and 0.75 have been obtained for phobia. Moreover, the mean, standard deviation, and Cronbach's alpha of 4035.7, 4.00966, and 0.62 have been obtained for this questionnaire in the present study.

DERS:

This is a self-reporting questionnaire with 36 statements and 6 sub-scales, designed to evaluate the difficulties in emotion regulation more comprehensively than the existing instruments. These sub-scales are: 1. Non-acceptance of emotional responses; 2. Difficulties engaging in goal directed behavior; 3. Impulse control difficulties; 4. Lack of emotional awareness; 5. Limited access to emotion regulation strategies; and 6. Lack of emotional clarity. The response of each subject ranges from 1 to 5: "almost never", "sometimes", "about half the time", "most of the time", "almost always". Higher scores suggest more difficulties in emotion regulation. In the present study, the mean, standard deviation, and reliability of 84.0702, 21.53563, and 0.93 have been obtained for this questionnaire. In the present study, the mean, standard deviation, and reliability of 9.2632, 3.59015, and 0.77 have been obtained for this questionnaire.

Results

Before performing this analysis, its presumptions were reviewed. This test is not significant at 0.05 (Box's M=85.6, F=1.65, and sig=0.07), and thus multi-variate ANCOVA can be used to test this problem.

		0	2	
	F	Df1	Df2	Significance
Phobia	3.137	1	30	0.087
Paranoid Thoughts	0.000	1	30	0.992
Lack of Emotional Clarity	0.272	1	30	0.606

Table 1. Results from Levin's test to check the homogeneity of error variance

Results from Table 1 show that the variance of error is homogeneous in all dependent variables at independent variable levels. To examine this question, multivariate ANCOVA can be used.

Mental Health	Group	Number		Pre-Test	Post-Test		
Components			Mean	Standard Deviation	Mean	Standard Deviation	
Phobia	Control		8.8125	3.93647	10.3592	7.28689	

Table 2. Descriptive Statistics of Different Groups and Test Phases

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	Test	9.3125	2.93754	4.4375	2.42126
	Total	9.0625	3.42606	7./3983	6.13018
Paranoid Thoughts	Control	10.562	5 3.99948	9.9375	2.71953
	Test	9.1250	3.87943	4.8125	2.58763
	Total	9.8438	3.94404	7.3750	3.68738
Lack of Emotional	Control	10.1250	3.18067	11.2500	3.31662
Clarity	Test	11.1250	4.08044	7.8750	3.42296
	Total	10.6250	3.63451	9.5625	3.73249

Table 3	. Results from	multivariate	testing of ment	al health

Multivariate Test	Value	F	df for question	df for error	Significance	Size of Effect
Pillai's trace	0.861	8.93	9	13	0.000	0.861
Wilks's lambda	0.139	8.93	9	13	0.000	0.861
Hotelling Effect	6.185	8.93	9	13	0.000	0.861
Maximum root error	6.185	8.93	9	13	0.000	0.861

Table 3 shows the results from multivariate testing of difficulties in emotional regulation

Table 4. Results from multivariate testing of emotion regulation								
Multivariate Test	Value	F	df for question	df for error	Significance	Size of Effect		
Pillai's trace	0.679	6.70	6	19	0.001	0.679		
Wilks's lambda	0.321	6.70	6	19	0.001	0.679		
Hotelling Effect	2.118	6.70	6	19	0.001	0.679		
Maximum root error	2.118	6.70	6	19	0.001	0.679		

Table 4. Results from multivariate testing of emotion regulation

According to the Table 3, all of the four multivariate tests are significant for the assessment of the overall significance of the model. In other words, these results indicate that the experimental interventions have been significant, and the implementation of them has significantly improved dependent variables of the experimental group.

		Table 5. Results from h	nerse	ibjeet effects te	σι			
Source:	Dependent	Sum of the Square of	Df	Mean	F	Significance	Size	of
	Variables	the Third Kind		Squares			Effect	
Group	Phobia	296.012	1	296/012	10.771	0.004	0.339	
	Paranoid Thoughts	104.262	1	104.262	13.104	0.002	0.384	
	Lack of Emotional	85.526	1	85.526	6.337	0.019	0.209	
	Clarity							

Table 5. Results from intersubject effects test

According to Table 4, this test is significant for all dependent variables. These results mean that health-oriented lifestyle training significantly increases all dependent variables of female university students, indicating the efficacy of the intervention.

Conclusion

In explaining research findings, it can be said that lifestyle is one's specific method for being in, coping with, and working in surrounding world, and supports the one's personal logic in achieving his/her desired objectives (Ansobacher, 1990; Disque and Bitter, 1998). Therefore, training correct and healthy lifestyle enables one to employ problem-oriented coping method by avoiding fundamental mistakes (illogical beliefs and unhealthy habits) under stressful conditions. In addition, social interest created by healthy lifestyle training increases the one's positive personality traits and improves his/her mental health (quoted from Tavakkoli et al., 2014).

In addition, in psychodrama technique, people role play stages of their life, dream, or imaginations. Such role-playing helps them to express their untold feelings, achieve new insights, and practice and test more appropriate behaviors with higher satisfaction (Somov, 2008). on the other hand, when a person becomes aware of positive and healthy effect of healthy behaviors during training and practices them practically and understands their role in life freshness and happiness, this can pave the way for healthy behaviors and increases his/her mental health.

The broaden-and-build theory introduced by Fredrickson (2002) explains how positive emotional experiences not only are the indicators of personal health but also contribute personal growth and development. Many of the negative emotions and thoughts limit one's instantaneous operation, in that they become prepared for self-protection in a specific way. In contrast, positive emotions broaden instantaneous operation, affording opportunities for the creation of sustainable personal resources, which per se lay the ground for personal growth and development through positive or compromising twists of emotion, and understanding and acting. These will lead to positive personality traits. Empirical evidence from clinical and laboratory studies of several research fully support broaden-and-build theory (Isen, 2000; Fredrickson, 2002; cited in Esmaili, 2010). The present study also confirms this theory.

Although this is a small research limited to one course of study, it is required to be performed in some similar courses to generalize its results more conclusively. Findings od this sudy is consistent with those of Norbakhsh, Atashpoor, and Moulavi (2005), Pouladfar and Ahmadi (2005), Husseini, Ahmadi, and Abedi (2004), Ghaffarinejad and Pouya (2002), Behdani, Sargolzae, and Ghorbani (2000), Lotfi, Ksshani, and Karimi (2012), Ghasemi, Kajbaf, and Rabie (2010), Rotama and PeKonen (1999), Swazono (2003), Ford, Clark, and Stansfield (2011), Barlo et al. (2009), Saedi (1999), Manzari Tavakkoli, Esmaili, and Tavakkoli (2013), and Alizadeh et al. (2010), indicating that health-oriented lifestyle decreases the symptoms of mental disorders and increases emotion regulation.

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