

Effectiveness of positive psychotherapy for young adults with depressive symptoms

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Abstract

Objective: To analyse the level of happiness and depressive symptoms before and after positive psychotherapy.

Methods: The experimental study was conducted from February 2018 to March 2018 in Shahpur Sadar town of Sargodha district in the Punjab province of Pakistan at Govt. College, and comprised female young adults with depressive symptoms. The participants were subjected to 8 sessions (one baseline and seven other) of group positive psychotherapy. On the basis of repeated measure design, data was collected using the depression subscale of Depression Anxiety Stress Scale-21, Positive Psychotherapy Inventory, and Values in Action Inventory before, during and after therapy administration. SPSS 23 was used for data analysis.

Results: Of the 250 subjects assessed, 30(12%) aged 18-20 years were selected for therapy sessions as they had some level of depression; 15(50%) mild and 15(50%) moderate. Mean happiness level increased with each session from baseline value of 20.63 ± 4.61 to post-therapy 50.67 ± 4.63 ($p < 0.05$). Depression level decreased from baseline value of 15.47 ± 3.42 with each session to post-therapy 4.53 ± 1.10 ($p < 0.05$).

Conclusion: Positive psychotherapy sessions were found to be effective in decreasing depression among female young adults.

Keywords: Positive psychotherapy, Depression, Character strength, Positive emotions, Meaning in life, Engagement. (JPMA 70: 856; 2020). <https://doi.org/10.5455/JPMA.16572>

Introduction

It is important to note that 63% of Pakistan's population is aged <25 years.¹ In this regard, the mental health of adults should be perfect, and for this reason there is a need to increase happiness and decrease depressive symptoms of young adults. Depression affects 44% of the entire population in Pakistan. Its prevalence is higher in women at 57.5% while it is 25% in men. In Pakistan, 50 million people are suffering from common mental disorders.² Treatment of the symptoms of depression is an anxiety art and science. There are many effective treatments like talking therapies and antidepressant medicines, or a combination of both.³ All the old-fashioned methods that are used for the treatment of depression first define the problem and then find different ways to treat it effectively by using several techniques. In recent years, a different, new and unique approach is becoming popular and common for the treatment of depression in

normal persons as well as in mental health patients. Positive psychotherapy (PPT) focusses on the inner abilities and strengths of individuals to deal with problems that they face in their life, rather than focussing and recognising the problem. PPT helps people in identifying what is going right in their life slightly more than what is wrong and broken in their world. Existing empirical evidence confirmed that PPT helps people in experiencing happiness in their life that can improve the well-being and mental health of a person.⁴ Positive scientific treatments make an attempt to bring a depressed person from a -5 score to a +5 one in terms of well-being, rather than simply bringing them up to the neutral zero. Proof shows that strengths play a key role in growth even in dire life circumstances.⁵

PPT is principally supported by Seligman's concept of happiness and well-being that comprises positive emotion, engagement, relationships, meaning and achievement. People who feel strong in these key areas of life are less likely to feel depressed.⁶ PPT uses different interventions for making people happy and less depressed. These

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interventions can be applied either in group therapy or one-to-one sessions. PPT interventions are often, but not always, used on normal and randomised samples.⁷ A quasi-experimental study⁸ determined the effect of PPT on happiness and gratitude among female students of the University of Isfahan with a control group, pretest-posttest comparison and follow-up. Results showed increase in overall happiness.

The current study was planned to investigate PPT effectiveness in female young adults in a Pakistani setting.

Subjects and Methods

The experimental study was conducted from February 2018 to March 2018 in Shahpur Sadar town of Sargodha district in the Punjab province of Pakistan, and comprised female young adults aged 18-25 years with depressive symptoms. Due to the specific requirements of the therapy, the sample was restricted to a small group of young adults.^{9,10} After approval was obtained from the institutional review committee (IRC), the sample size was calculated using G-power software,¹¹ and the sample was raised using simple random sampling technique. The inclusion criteria were age-specific for young adulthood⁹ and a selected level of depressive symptoms screened through Depression Anxiety Stress Scale-21 (DASS-21). Those falling outside the age and symptom ranges were excluded. DASS-21 is a self-reporting tool¹² which has been translated into Urdu.¹³ It has 3 subscales measuring depression, anxiety, and stress. Only the depression subscale was used in the study. Also used was the Urdu version of Positive Psychotherapy Inventory (PPTI)¹⁴ to assess the pleasant life, the engaged life, the meaning of life and overall happiness. Values in Action Survey for Adults (VIA-120) scale¹⁵ was used to identify the strengths of the participants.

Initially, DASS-21 was administered on the sample, those with mild or moderate (10-20) levels of depression were shortlisted and represented the final study sample. The study followed the ethical standards outlined by the American Psychological Association (APA).¹⁰ After

obtaining written informed consent, the participants were subjected to group PPT. Group PPT comprised seven 90-minute sessions. Every session was discussion-based, but transient lectures were provided to introduce new material. Participants received worksheets in every session containing elaborated description of the week's exercise and area for recording varied aspects of their expertise with the exercise. After the first session, each session started with a review of the previous assignments and then moved to subsequent exercises. All sessions were held at identical time and location. PPTI and DASS-21 was used weekly to assess PPT effectiveness. Throughout the therapy, seven totally different PPT interventions were introduced in line with literature.⁸ On the basis of repeated measure design, data was collected before, during and after therapy administration. SPSS 23 was used for data analysis.

Results

Of the 250 subjects assessed, 30(12%) aged 18-20 years were selected for therapy sessions as they had some level of depression; 15(50%) mild and 15(50%) moderate. Mean happiness level increased with each session from baseline value of 20.63 ± 4.61 to post-therapy 50.67 ± 4.63 ($p < 0.05$). Depression level decreased from baseline value of 15.47 ± 3.42 with each session to post-therapy 4.53 ± 1.10 ($p < 0.05$) (Table 1; Figure). The difference in terms of both happiness and depression was significant (Table 2).

Table-1: Mean and standard deviation on happiness and depression with successive sessions.

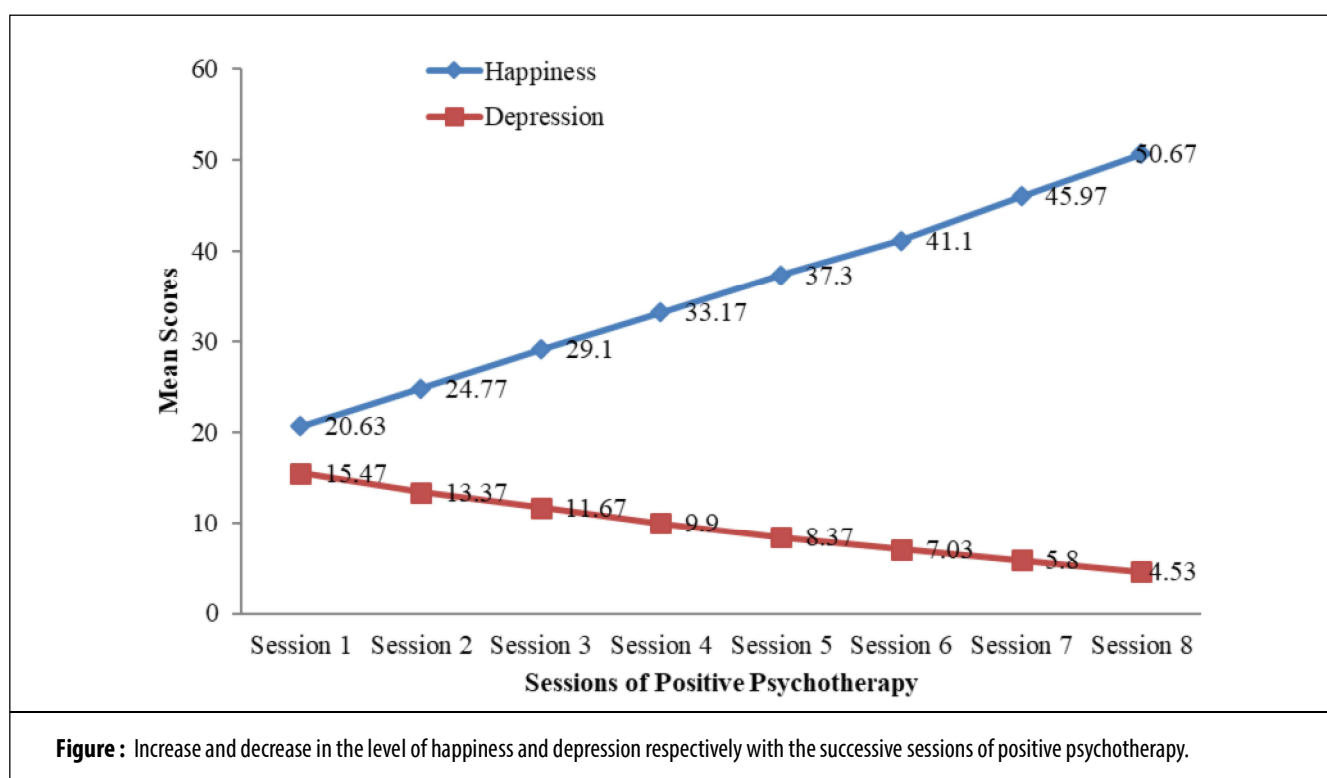
Sessions	Happiness Mean $\pm$ SD	Depression Mean $\pm$ SD
Baseline	20.63 $\pm$ 4.61	15.47 $\pm$ 3.42
Session-1	24.77 $\pm$ 4.60	13.37 $\pm$ 2.97
Session-2	29.10 $\pm$ 4.94	11.67 $\pm$ 2.39
Session-3	33.17 $\pm$ 5.11	9.90 $\pm$ 1.90
Session-4	37.30 $\pm$ 5.22	8.37 $\pm$ 1.52
Session-5	41.10 $\pm$ 5.07	7.03 $\pm$ 1.42
Session-6	45.97 $\pm$ 4.97	5.80 $\pm$ 1.21
Session-7	50.67 $\pm$ 4.63	4.53 $\pm$ 1.10

SD: Standard Deviation.

Table-2: Repeated measure analysis of variance (ANOVA) for happiness and depression across sessions.

Variables	Source	SS	Df	MS	F	p-value	Partial η^2	Post-Hoc
Happiness	Greenhouse-Geisser	299697.33	2.22	10244.42	722.11	0.000	0.96	1<2<3<4<5<6<7<8
	Error	911.55	64.25	14.19				
Depression	Greenhouse-Geisser	3033.93	1.40	2161.03	324.29	0.000	0.92	1>2>3>4>5>6>7>8
	Error	271.32	40.72	6.66				

SS: ?, MS: ?, F: ?, Partial η^2 : ? Post-Hoc: ?



Discussion

The present study comprised female young adults with mild or moderate depression. There are many methods of treatment used in the treatment of depression in modern psychology.¹⁶ The rise of PPT has revised the methods of treatment of different disorders in general, and the treatment of depression in particular.¹⁷ Most specifically, PPT is considered the latest advancement in the treatment of depression.¹⁸ It is the most effective non-traditional method of treatment which is effectively applied across the world for the effective treatment of depressive symptoms both in the general and clinical populations.¹⁹ Moreover, PPT effectiveness is not limited to reducing depression,⁶ as it is equally effective in enhancing the level of happiness.¹⁸

Studies in Pakistan have remained limited to the treatment of depressive symptoms through traditional therapeutic techniques.²⁰ In fact, there is no evidence of PPT use in clinical practice in the local context. IN that sense, the current study is unique.

There are two important insights that were obtained from the findings of the present study. One, PPT interventions led to significant changes. Two, the changes were evident even after a single session. The findings confirmed that

PPT was effective in improving the level of happiness while decreasing the depressive symptoms. PPT has been successfully applied in Iran, the United States, Turkey²¹ and Austria,²² confirming its effectiveness in various populations, contexts and cultures. The current study has added evidence from Pakistan.

In terms of limitations, the current study has a small sample size raised from one institution of higher education in a single city. Future studies should be conducted with larger and varied samples. Also, seven PPT sessions were applied on all participants in a group when PPT needs to be applied according to the need. Also, one-to-one sessions were not included at all. Finally, all the subjects were selected from the general population while clinical cases were left out.

Pakistan's standing on the Global Happiness Index²³ indicates that there is a need for mass-level training and therapeutic interventions to increase the level of happiness. It is recommended that mass-level training programmes should be designed to improve overall mental health, quality of life and happiness of students of higher education institutions in general and young adults in particular.

Conclusion

Positive psychotherapy sessions were found to be effective in increasing happiness and decreasing depression levels among female young adults.

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