Effectiveness of Positive Thinking Training on Self-Assertiveness of Teenage Girls

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Abstract

Background: Self-assertiveness is the ability to stand up for one’s rights and express one’s thoughts, feelings, and beliefs in an appropriate and direct manner. Adolescence is an important time to establish the social position of individuals. This study aimed to investigate the effect of positive thinking training on adolescents.

Methods: The target population was female students of Hazrat-e-Masumeh School in Ilam, Iran in the academic year of 2017-2018. According to simple random sampling, 42 subjects were randomly selected and allocated into two equal groups (experimental and control). The experimental group experienced Positive Thinking Training and both groups were given pre-test and post-test through Adolescence Self-Assertiveness questionnaire.

Results: The findings showed that the mean of self-assertiveness in the experimental group was 18.81 before Positive Thinking Training (PTT) and 19.95 after PTT. In the control group, the mean of this variable was 18.95 before PTT and 18.51 after PTT. This indicates that after training, the mean of self-assertiveness increased in the experimental group but decreased in the control group. Data analysis through analysis of covariance test (ANCOVA) showed significant differences between self-assertiveness scores F = 4.65 in the experimental group level in post-test compared to that of the control group (P<0.05).

Conclusion: According to the results of this study, PTT can be effective in increasing the self-assertiveness of teenage girls. The effect of positive thinking showed that optimism is an important factor in coping with difficult life events and assisting teenagers to deal with their negative thoughts and promoting their self-assertiveness.

Keywords: Positive thinking training, Self-assertiveness, Teenage girls


1. Introduction

The history of experimental studies on the subject of self-assertiveness is rooted in the works of researchers such as Beck and colleagues (2004), Salter (1950), Wolpe (1990), Alberti and Emmons (2008). They held that the lack of self-assertiveness is the reason behind various mental illnesses; therefore, they searched for methods for increasing the self-assertiveness of individuals (1-4). Later, humanists, who showed great interest in the positive features of humans, furthered the growth of self-assertiveness. Using the results of Pavlov’s research as well as his own studies, Salter (1950) concluded that the cause of the lack of SA is the formation of a conditional response in the central nervous system (2). As a student and follower of Salter, Wolpe (1990) admitted that the main feature of self-assertive people is their ability to express feelings openly and introspectively, and those with social anxiety lack self-assertiveness (3). These individuals suffer from shyness and embarrassment due to social avoidance and concerns about social encounters; they opt for withdrawal, become distressed and distracted in social situations, and ultimately lose the courage of expressing opinions. Wolpe (1990) attempted to increase self-assertiveness ability through reducing social fears (3). Self-assertiveness is a behavior that enables one to take actions in line with their own interests, become independent without anxiety, express their own feelings in a candid manner, and stand up for their rights while observing others’ (4). Researchers have recently confirmed that assertiveness is not only important when parties are in complete opposition regarding the discussed issue, but also relevant when a person believes someone else’s positions are not perfectly aligned with her own (5). Popular perceptions and actual claims vary in type and degree (6, 7). Although psychology has consistently emphasized that dignity maintains the mutual rights and has a positive impact on behavior, everyday notions of assertiveness tend to express aggressive expressions and even angular relationships (8). A person with a proper level of self-assertiveness cannot be stopped by the fear of blame or public embarrassment and does not easily abandon their incontrovertible rights. Self-assertiveness prevents
repression and censorship of thoughts (9). Moreover, in the development process of a teenager, self-assertiveness is considered as an important social skill comprised of emotional, cognitive, and behavioral aspects. In its emotional dimension, self-assertiveness includes anxiety-free interpersonal behavior. It is also associated with cognitive changes in children, leading to specific cognitive interpretations of the social environment, oneself, and others, and their interactions. The cognitive changes caused by self-assertiveness result in the creation of daring schemas in humans; using these cognitive schemas in interpersonal relationships, individuals become able to show more courageous behaviors (10).

Positive thinking is one of the key concepts in positive psychology, which is an almost new field focused on enhancing well-being and improving performance rather than eradicating symptoms and works as a complement to traditional psychology (11). Positive thinking is a cognitive process that creates pleasant images, broadens optimistic beliefs, finds approaches to dealing with problems, and provides a clear outlook on life. However, positive thinking does not neglect the need for real evaluation. Instead, it confirms both the negative and the positive aspects of the issues, events, and situations, and then direct the person towards precision and positive analytics (12).

A positive person evaluates stressful situations with optimism and has a good estimate of their ability to overcome the predicament, which may sometimes take time. The growth of optimism in life enhances one’s thoughts, creativity, and rationality and results in a positive behavior (13). Eagelson and colleagues (2017) demonstrated that replacing worry with various forms of a positive thoughts, even if it is not related to the content of one’s concern, has beneficial effects. The findings of their research suggested that positive ideas can be used to effectively deal with disturbing traits (14).

Positive thinking empowers people to effectively pursue their goals with perseverance and improve their quality of life (15), both of which are directly related to self-assertiveness. Positive psychological interventions include treatments or activities designed to promote positive emotions, behaviors, perceptions, and knowledge, enhance well-being, and ameliorate the symptoms of depression (13, 16). Positive thinking interventions have been shown to increase one’s adaptive performance and increase life quality in different groups (17-19).

According to Sheldon and King (2001), instead of focusing on what is wrong, positive psychology emphasizes what is right, appropriate, and effective (20). According to Gable and Haidt (2005), positive psychology is employed to study the conditions and processes that culminate in progress with the desired performance of individuals, groups, and organizations (21). Furthermore, according to Snyder (2002), positive psychology is a scientific study of the favorable and optimal performance of humans and their goals and the utilization of factors conducive to the development of individuals and societies (22). Positive psychologists emphasize nurturing capabilities and fostering positive self-esteem and self-image. At the moment, in most advanced industrial countries, there are short-term and long-term training courses for assertiveness and other communication skills. Different organizations spend a fair sum of money to equip their labor force and create better conditions for organizational progress. These costs can be considered as a kind of investment in the organization’s labor force as they will result in positive outcomes for the organization.

High school students are more exposed to psychological stress due to major physiological, cognitive, and psychological changes. Adolescence is a critical period due to the strain of new social roles and responsibilities as well as the tension created by the surrounding expectations and judgment. Accordingly, they are more vulnerable compared with other age groups (23). Many researchers deem adolescence as the most stressful period during which teenagers more often than not undergo tension and conflict both at home and at school, encounter problems in creating self-awareness and self-esteem, and need help and guidance more than others (24). Many local and foreign studies, including Jafari and Mehrafzoun (2013), and Asadaniya and colleagues (2012) have shown that self-assertiveness can be increased through well-documented training (25, 26). The study by Nadi Najaf Abadi and colleagues showed a correlation between self-esteem and shyness and that training could enhance self-esteem in adolescents (27). In Jafari and Mehrafzoun’s study (2013), Positive Thinking Training (PTT) was proved effective in reducing adolescence’s shyness (25). Moreover, Hamoud and colleagues (2011) conducted research on 80 nursing students at Alexandria University in Egypt; they reported that through their curriculum, self-esteem and self-assertiveness increased in the studied individuals (28). Research has further shown that positive psychological interventions are effective in raising the levels of hope, perceived social support, and the ability to cope with social stress (29).
Considering the above, the purpose of this study was to determine whether PTT can increase self-assertiveness of teenage females and if yes, how strong the effect of such increase is. Given the results of previous research, in this study, the following hypothesis was examined: PTT has a positive effect on self-assertiveness of teenage girls.

2. Objectives.

The objective of this study was to investigate the impact of positive thinking training on adolescences.

3. Methods

The present experimental study was conducted to determine the effect of PTT on self-assertiveness of adolescent girls. The population was the students of Hazrat-e-Masumeh School in Ilam, Iran in the academic year of 2017-2018. Given that at least 15 individuals were suggested for each group in the experimental studies (30, 31), 42 subjects were selected via random sampling and allocated randomly in two equal groups (experimental and control). This school had a total number of 52 students who were each assigned a number, and 42 students were randomly selected to participate in the study by lottery as the simple random sampling. Furthermore, according to the following formula, the estimated sample size for each group was 24 individuals; however, according to similar studies conducted in Iran, the sample size was estimated between 15 to 20 individuals per group (30). The d-score was 5% of the maximum score that subjects received by responding to the Adolescence Self-Assertiveness questionnaire as a dependent variable, ranging from zero to 33.

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d = \frac{5\% \times 33}{2} = 6.6
\]

\[
Z = 1.96
\]

\[
SD = 4.070
\]

\[
S = 16.56
\]

\[
95\% - Z\text{ Score} = 1.96
\]

\[
\frac{z^2 \times Z^2}{d^2} = \frac{274.39 \times 3.84}{43.56} = 24
\]

The mean age of the participants was 14 years. Assertiveness Scale of Adolescent (30) was given as pre- and post-tests with a ten-week gap between the former and the latter. The experimental group participated in ten 45-minute sessions of positive thinking training that went on for about ten weeks. The results of both tests were analyzed using the analysis of covariance.

3.1. Instruments

Adolescence Self-Assertiveness questionnaire was developed by Lee and colleagues (1985). It contains 33 questions and was designed using a multiple-choice scale with three response options (32). Response options fall into three categories: assertive, unassertive, and aggressive or passive-aggressive. The scoring method in Adolescence Self-Assertiveness questionnaire is that one of the three responses is considered as the appropriate answer (self-assertiveness) receiving a score of 1 and the rest are assigned a zero score. The validity and reliability of the Persian version of both questionnaires have been confirmed in various studies (33). In the present study, the Cronbach’s Alpha for this questionnaire was 0.78.

In this study, PTT refers to teaching positive psychology techniques including positive self-esteem, attention to virtues and abilities, and appreciation. Sessions were imparted weekly and were based on a positive psychological approach designed by Pourrazavi and Hafezian (34). In the first session, the members of the group got acquainted with each other and established the initial communication, their roles and responsibilities were clarified, and the pre-test was performed. In the second session, positive psychology was briefly explained to the participants along with the concept of positive attitude and its benefits. The third session was dedicated to training the ability of seeing one's strengths, how to set goals and strategies for achieving them; the possible obstacles to a healthy life were further studied along with self-awareness, and a comprehensive view of the self and awareness of the benefits of positivism was provided accompanied by some exercises and an assignment. The fourth session revolved around optimism skills training and defining types of optimism. The fifth session aimed to help participants develop a positive attitude towards their surroundings using the assignments and exercises. The sixth session dealt with positive memories and their recount. In the seventh session, the focus was on hope and optimism and the members of the group were explained about the attributions and how to attribute their good and pessimistic personality. The eighth session had to do with reviewing the strength of memories and increasing positive self-esteem. The penultimate session was dedicated to reviewing the assignments, receiving feedback on the provided tasks, offering evidence and valid criteria, and conclusion of multiple topics. At the last session, the topics were summarized and concluded, and then the post-test was administered to both groups. The mean age of
the control and experimental groups was 14 years. The target population were the first, second and third grades of high school; in terms of marriage and gender, all subjects were single and female. Written informed consent was obtained from the participants. Data were analyzed by mean, standard deviation, and multivariate and univariate covariance analysis.

4. Results

Table 1 presents the indices of central tendency and dispersion related to the scores of subjects in two separate questionnaires for the experimental and control groups. Prior to the covariance analysis test, its requirements, including independence of the scores of each subject, interval scale scores, homogeneity of scores variance, and normal distribution of scores were confirmed.

As shown in Table 1, the mean of self-assertiveness in the experimental group was 18.81 before PTT and 19.95 after PTT. In the control group, the mean of this variable was 18.95 prior to PTT and 18.51 following PTT. This indicates that after training, the mean of self-assertiveness increased in the experimental group but decreased in the control group. To examine the two homogeneity assumptions – the variance of the scores of the two groups and the normal distribution of the scores – Levene and Kolmogorov Smirnov tests were used, respectively.

As observed in Table 2, the Kolmogorov-Smirnov test is not significant regarding the self-assertiveness scores of two groups (P1=0.307, P2=0.958). Therefore, self-assertiveness has a normal distribution and can be used in parametric analyses.

The results of Levene test for self-assertiveness scores (F=0.091, df=1.40, P=0.764) showed that the F value obtained at α<0.05 was not significant; accordingly, with 95% confidence, it can be concluded that the variance of the scores of the two groups is homogeneous.

The results pertaining to the analysis of covariance for the hypothesis in Table 3 indicate that according to the obtained result (P=0.037), F (1, 39)=4.65, PTT was effective on SA, confirming our hypothesis.

5. Discussion

Alberti and Emmons (2008) believed that self-assertiveness is observing the rights of others while standing up for one’s own rights. The features of this style include providing self-evoked responses with a friendly but firm tone, looking at others, pointing out important issues, expressing one’s feelings and beliefs, valuing oneself, and non-bothering oneself and others (4). The purpose of self-assertiveness is to observe justice for all sides of the relationship; also, a courageous person uses communication methods that enable them to maintain their self-esteem, pursue their satisfaction and fulfill their desires, exercise their rights and interact with others without abuse or dominating them, and express the needs, values, concerns, and beliefs in a direct and appropriate manner. Therefore, some of the benefits of expressing one’s presence include creating self-

| Table 1: Descriptive indicators of experimental and control groups |
|-----------------------------|-----------|----------|-----------|
| Variables | Groups | Test | Frequency | Mean±SD |
| SA | Experimental | Pre-test | 21 | 18.81±4.070 |
| | | Post-test | 21 | 19.95±5.482 |
| Control | Pre-test | 21 | 18.95±5.123 |
| | Post-test | 21 | 18.51±5.715 |

| Table 2: Kolmogorov-Smirnov test results for the normality of SA scores |
|-----------------------------|-----------|-----------|
| Experiment | Control |
| Z Kolmogorov-Smirnov | P value | Z Kolmogorov-Smirnov | P value |
| 0.967 | 0.307 | 0.509 | 0.958 |

| Table 3: Results of analysis of covariance (ANCOVA) concerning the effect of PTT on SA in the experimental group |
|-----------------------------|-----------|-----------|-----------|-----------|-----------|-----------|
| Source of changes | Sum of squares (Ss) | Df | Mean of squares (MS) | F | P value | Size of effect η |
| SA | 1826.19 | 1 | 1826.99 | 4.65 | 0.037 | 0.107 |
| Error | 15320.76 | 39 | 392.84 | | | |

worth, promoting satisfactory relationships, reducing fear and anxiety, increasing social competence, and controlling one’s own life (35). Based on our results, it can be concluded that the 10-session PTT significantly increased self-assertiveness in the teenage girls of the experimental group.

Seligman and Martin (2002) believed that by helping create deep and long-term social relationships, positive thinking promotes the health of individuals and, consequently, increases their longevity (36). Because humans are social beings, they need a deep social relationship to survive and maintain their physical and mental health. Self-assertiveness is an important and undeniable factor in social communication. Thus, any kind of training that can influence the self-assertiveness ability of an individual will inevitably have an impact on the promotion of social communication as well. In a healthy advanced society, individual and collective rights are respected and not all individuals have the same opportunities to develop the ability of self-assertiveness in the family environment; therefore, it seems essential to train this skill in individuals, particularly at an early age.

According to Smith (1985), self-assertive individuals perfectly know their own rights, recognize the rights of others, and try to behave in ways not to violate them (37). In case of an imbalance between the rights of oneself and others, human behavior is usually passive or aggressive. To have self-assertiveness, one must not only know his rights, but also be able to use them under different circumstances (35). Students with self-assertiveness are less likely to submit to illogical requests of others, and are capable of critical thinking. Therefore, they are more resistant to many kinds of social harm caused by or related in some ways to shyness. In teenagers who lack high self-assertiveness ability, the tendency to high-risk behaviors is higher. There are no immediate therapies for improving assertiveness, and it cannot be solved with medication. The basis of the shyness treatment is a change in the cognitive domain and individual’s lifestyle (38). Some studies have shown that positive psychology is effective in increasing social adequacy (36). Thus, one of the most important therapies in this regard is to change the attitudes and make positive changes in the individual. Many studies have confirmed the effectiveness of PTT in increasing individual’s social skills, including self-assertiveness.

6. Conclusion

In this study, positive thinking was further proved effective in increasing the student's level of self-assertiveness; it can therefore be stated that positive thinking skills can empower students in terms of self-acceptance and self-worth.

The study had some limitations. For instance, the participants were selected from one particular school, rendering it difficult to generalize the findings. Given this limitation, it is suggested that the impact of demographic factors be examined in future research. It is also possible that the pretest affected the internal validity of the posttest; researchers can examine ways to counteract this possible bias. Finally, the considerable drop in the control group’s scores might be the consequence of using an imported scale not undergone enough standardization. Therefore, we suggest the use of cultural validated instruments in future studies.

Authors contributions

Conceptualization: Hamidi & Otaghi; Methodology: Hamidi & Otaghi; Writing review and editing: Hamidi,Otaghi & Paz; Recourses: Hamidi,Otaghi & Paz; Supervision: Hamidi

Conflict of Interest: The authors declared no conflict of interest.

Ethical Consideration

The present study was approved by the Ethics Committee of Shahid Rajaee University (Ref. no.2416809).

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Positive thinking training and self-assertiveness


