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THE EFFECTIVENESS OF HAPPINESS TRAINING WITH FORDYCE COGNITIVE - BEHAVIORAL METHOD ON REDUCING DEPRESSION AND ANXIETY IN PATIENTS WITH MOOD DISORDERS

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ABSTRACT

The purpose of this study is the effectiveness of happiness training with Fordyce Cognitive - behavioral method on reducing depression and anxiety in patients with mood disorders. This is a semi-experimental study that conducted in The pre-test and post-test designs with control groups. The statistical population of this study was all of the patients (n = 345) that referred to the all of Ardabil's mental clinics with mood disorders [all patients referred in 2015]. Among them, 60 person were chosen as Random sample, and they assigned separately in two experimental (N = 30) and control (N = 30) groups. Then our happiness trainings by Fordyce Cognitive - behavioral method were applied on our experimental group during 12 two hour sessions. The results shown that there was no significant difference between the mean score of depression and anxiety factors in both of control and experimental groups before the intervention, but after intervention, the same tests have a significant difference between same groups ($p < 0.005$). Research findings shows that the happiness training by Fordyce Cognitive - behavioral method is effective in reducing anxiety and depression, and this method can be applies as an effective intervention method on patients with mood disorders.

Keywords: *Happiness Training by Fordyce Cognitive- behavioral Method, Anxiety and Depression, Mood Disorders*

INTRODUCTION

The mood and creation of a human can decrease, stay in normal type or increases. Mood disorders includes a wide range of psychiatric disorders that according to the diagnostic criteria (DSM-5), The prevalence of these disorder in united states is about 1 - 1.6%; while that's prevalence in world is about 0.3 - 3.5% (Kaplan and Sadok, 2005). The mood disorders is one of the most common disorders in psychological, while the depression and anxiety were as two common symptom of psychological disorders, and despite of the kind of disorder, the depression and anxiety can be One of the main complaints of patients who admitted in psychiatric ward. Several factors in the etiology of these disorders have been declared that we can mention to psychological and social inheritance of biological factor (Aghiliei, 2004); and according to the etiology of the disorder, various treatment methods Such as drug therapy, shock therapy, Psychoanalysis, cognitive therapy, cognitive behavioral therapy and group therapy have been proposed. The group therapy or group psychotherapy is a chosen therapy method for some psychological disorders that have some advantages such as power and energy saving, Skills training, performing or improving the relationship between the patients. in the other hand, reducing the anxiety and depression of admitted patients can be as a significance and important factor for treatment and more adaptability of psychiatric ward hospital. Several techniques are used in group therapy that Cognitive therapy is one of them. Cognitive Therapy despite of its name, is a composed coherent set of

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cognitive behavioral strategy changes (Burgess *et al.*, 2005). As stipulates in the comprehensive scientific guidelines prepared by Beck and his colleagues (Caplette and Savard, 2008), this treatment is attempted to encourage the patient to consider his/herself beliefs and convictions as hypotheses that should be tested and typically uses his/her behaviors as a benchmark to evaluate the validity or honesty of this beliefs. Basically attempts of Cognitive therapists has been uses to make his/her as a fan of partners experience, And during that it uses the patient's own experiences as a indicator to evaluate the honesty of the same belief by a series of behavioral tests (Carson, 2000).

The depression is one of the most common mood disorders that grows in recent 50 years, and also it considered as most common causes of hospitalization (Fagihi *et al.*, 2007). the depression is a disorder that detected with Lack of energy and motivation, Feeling of being guilty, Difficulty concentrating, Anorexia and death or suicide thoughts and associated with Changes in activity levels, Cognitive abilities, Speech, Sleep, appetite and Other biological rhythms, and it is one of the most important reasons of disability in all countries, and also it is one of the most common mental disorders that glaring as a global health problem in all cultures. some people for their specific situation, are more vulnerable to this disorder (Park and Park, 2003). The results of researches shown that in united states and Iran about 19 million and 15-25 million people experience the depression, respectively. According to various statistics the prevalence of depression is 30.5 % in women and 16.7 % in men (Somov, 2010). Based on Logotherapy mental disorders is the result of Lack of meaning and purpose in life and it is a feeling of emptiness (Borjali, 2013). Several treatment methods were suggested based on etiology of depression; One of these approaches is Logotherapy that its benefits have been reported in several studies (Karimi *et al.*, 2010). The treatment method for treating this kind of disorders Includes pharmacotherapy and psychotherapy methods, in association with Psychoanalysis, Cognitive, behavioral, cognitive-behavioral and Family Therapy methods that been used lonely or in synthetic way (Bahrami, 2011). despite of pharmacotherapy is one of the common methods in treating the emotional disorders, particularly depression, but adverse side effects of these medications limited their utilization in many situations and conditions. Also The studies that have been done in the follow up after treatment indicates a high amount a depression in patients after discontinuation of the drug.

Among the factors that can be correlates with depression is the lack of meaning in life. The Logotherapy is an existential approach that can provide a conceptual structure to help referrals to challenging for finding a meaning in their life. Frankl (1998), based on clinical practice and research, Noticed that Lack of meaning is the main reason of stress and anxiety in people. He Considers the "existential neurosis" as a meaningless experience. Therefore based on frankel theory, the treatment helps the referrals to find a meaning in their life (Navabinejad, 2009). In addition, The clinical findings shows that mental pressure caused by everyday life events, Eventually affected on different body system activities such as Immune system and it can cause them to weaken and disrupt. The depression is one of the psychological disorders that weakened body's immune system and causes body to been exposed to several diseases (Zhao *et al.*, 2011).

Fordyce (1993) uses a educational approach in his own educational activities that as well as cognitive, is behavioral ; in cognitive part, in addition to providing the results of correlated studies of his own students, he also provide the fundamental threads about involvement of specific thoughts and behaviors in happiness creation. In behavioral part, he provide a set of various techniques and strategies that been resulted of cognitive and behavioral therapies, and he believe that this results can be useful in utilizing each principles in our life.

This plan includes two methods: educational one and consulting methods. in educational methods the main aim is to increase the happiness of patients by training them. in consulting method the main aim is to despite of expert consulting with people and with finding their problems through cognitive therapy, or behavioral therapy, the happiness of the people is increasing. Because of the high prevalence of mood disorders and the lack of research in this field in Iran, The effectiveness of happiness training by Fordyce Cognitive - behavioral method on Reducing depression and anxiety in patients with mood disorders is the main aim of this study.

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The hypothesis of the study is:

- 1) Happiness training by Fordyce Cognitive- behavioral method is influences on depression decreasing in patients with mood disorders.
- 2) Happiness training by Fordyce Cognitive- behavioral method is influences on anxiety decreasing in patients with mood disorders.

MATERIALS AND METHODS

Research Methodology

This is a semi-experimental study that conducted in The pre-test and post-test designs with control groups. the statistical population of this study is the patients who got mood disorder. Inclusion criteria were : Full conscious consent to participate in the study and having a minimum score of 21 on the Beck Depression Inventory and a score of 23 for Beck Anxiety, that according to this Standards and criteria 60 persons (30 person in experimental group and 30 person in control group) were evaluated, that this people based on purposive non-probability sampling method separated to two Intervention and control groups. The intervention group has been treated during a 12 set session(each 2 hour and once a week) with happiness training with Fordyce Cognitive - behavioral method by a psychologist.

The Fordyce Cognitive - behavioral method has 14 principles and its based on this principle : if a man wants to be happy, he can be happy, like other people. This approach is a combination of cognitive and behavioral theories. At the cognitive level, the principles of this program were explained to members and required arguments for proving "This principles can decrease the depression" are provided. At the behavioral level, some of the behavior therapy techniques were used that together with those 14 principles, can be done practically. This fourteen principle are :

- being active and entertained
- Spending more time with gather and group activities
- Doing Significant and productive works
- Better organizing
- Removing discomforts
- Lowering the expectations and wishes
- Positive and optimistic thoughts
- Having Attention to the present
- Considering personality health
- being Extraversion and social
- being own real person
- Putting aside problems and negative emotions
- Strong communication, the most important source of happiness
- worthwhile considering is the happiness

The protocol of group therapy sessions are based on available resources and they were developed with the following purposes:

The program was conducted in a set of 12 sessions (each two hours) on the Participants :

Research Tools

For measuring the study variables we used this tools:

A) Beck Depression Inventory: the Beck's Depression Inventory, first introduced by beck in 1961. This questionnaire includes 21 questions. So this scale can determine the depression levels from mild to very severe, and its score limitation and amplitude is from 0 (minimum) to 63 (maximum) (Beck *et al.*, 1975). Tashakori and Mehryar (1994) have found its final coefficient in Iran that it was 0.78. In other studies such as Prtovies (1975), Vahabzadeh (1973) and Chegini (2002), the validity of Beck 's questionnaire was reported that is high and varies from 0.70 to 0.90. Estiri and Brown (2000) was reported the amount of 73% to 92% with an average amount of 86% for its Internal consistency and the amount of 86% (for patient) and 81% (for non-patient) groups for its alpha coefficient. Rajabi *et al.*, (2001) have reported the

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amount of 87% for Cronbach's alpha coefficients of total questionnaire, 83% for validity coefficient, and 49 % for test-retest coefficient within three weeks (Fathi, 2008).

B) Beck Anxiety Inventory : Beck Anxiety Inventory was developed by himself in 1988. This test includes 21 symptoms of depression. In this test the scores of 0-23 mean is a symptoms of mild anxiety, 24-28 shows the average anxiety, and the higher scores than 29 shows the disease anxiety. The studies shows that this questionnaire are much valid. Its internal consistency coefficient (Alpha coefficient) is 0.92, Its retest reliability within a week is 0.75, and the correlation of its components is varies from 0.30 to 0.76 (Beck et al., 1998). This questionnaire is a 21 component scale that participants choose one of 4 provided answers as a intensity of anxiety. Four options for each question is ranking from 0 to 3 in a four-part range. each question of this test describes one of the Common symptoms of anxiety (Mental, physical and fear symptom) (Fathi, 2008).

Data Analysis Methods

For describing, averaging, standard deviation and analysis of data we use MANOVA and ANOVA covariance analysis.

RESULTS AND DISCUSSION

Results

Table 1: Mean and standard deviation of two groups in anxiety and depression

Variables	pre-test		test Post		Follow up		
	M	SD	M	SD	M	SD	
Control	anxiety	3/75	0/43	3/13	0/96	3/60	0/49
	deperession	3/75	0/43	3/54	0/50	3/50	0/50
Fordyce cognitive therapy	anxiety	3/77	0/47	0/88	1/07	0/53	0/57
	deperession	3/76	0/43	0/56	0/50	0/53	0/62

Table 1 shows the mean and standard deviation of the subjects in the two groups on measures of anxiety and depression in the pre-test, post-test and follow-up show.

Table 2: Summarizes the analysis of variance to compare anxiety and depression in both groups pre-test

Variables	SS	MS	F	P	n ²
anxiety	0/200	0/100	0/45	0/62	0/01
deperession	0/800	0/400	0/61	0/10	0/09

Note:df=2

To ensure equality of means between the two groups pre-test analysis of variance (Table 2) have demonstrated that there is no significant difference between groups in the variables studied.

Table 3: Summarizes the analysis of covariance for two methods of therapy on anxiety and depression

	Variables	df	SS	MS	F	P	n ²
pre-test	anxiety	1	0/01	0/01	0/01	0/96	0/01
	deperession	1	0/21	0/21	0/96	0/32	0/01
Post test	anxiety	2	153/02	76/51	235/47	0/001	0/85
	deperession	2	186/66	93/32	439/39	0/001	0/91

Note: F Tukey test to compare two groups of variables and summary

The effectiveness of medical procedures based on the pre-test and covariance analysis reflected in Table 3.

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Table 4: Summarizes the t-test and post-test to compare averages and track

Variables		d	t	p
Control	anxiety	-0/23	2/04	0/08
	deperession	-0/33	-3/34	0/03
Fordyce cognitive therapy	anxiety	0/07	0/44	0/66
	deperession	0/03	0/23	0/81

To assess the impact of continued therapy on symptoms of anxiety and depression at follow-up t-tests were used. The two group stages of the post-test scores were compared (Table 4).

Conclusion

The main purpose of this study was the effectiveness of happiness training with Fordyce Cognitive - behavioral method on Reducing depression and anxiety in patients with mood disorders. In this study, the happiness training with Fordyce Cognitive - behavioral method significantly reduces the depression and anxiety and shows that the Fordyce Cognitive - behavioral method as a treatment method, is a effective and strong method for biological function of people. By means of Fordyce Cognitive - behavioral method several studies have been conducted about happiness increasing and reducing the negative mood. Fordyce by applying this method on a set of non-patient students in a At a specified time in each day for almost 6 weeks, found that this course was successful and about 69 % of participants get happier than before. In total, This research that has been conducted in correlation of other studies in the world, Confirms the positive effect of this two program on decreasing the depression and continuation of this reduction on participants. This finding can be significant in IRAN, since the utilized methods is too simple and useable in several educational, clinical and other situations. This study is consistent with previous research Such as Teshnizi *et al.*, (2009) that been conducted their own researches in field of the effectiveness of programs in Mental life and Fordyce cognitive-behavioral methods in reducing depression in students, and the results shown that there is a significant difference between the experimental and control groups in decreasing the depression. This results also shown that there is no significant difference between the mental life and Fordyce methodological programs in decreasing the depression of students. Abu Arefeh by conducting a longitude study and research were found that good moods (positive ones) will improve the immune system and the negative moods will decrease that and causes a 5 or 6 day delay in showing or hiding the primary symptoms of a disaster. Argil by studying on depressed people found that this people are lone, recluse, ostracism and often they do not have social skills. As an explanation for these findings, by analyzing the context of Fordyce's educational method we can find that he teach the principles that each one of them in its kind affects on happiness components. As Argil (1990) stated, the happiness has three component :

1. Happy feeling
2. Life satisfaction
3. Having no negative feelings of anxiety and depression

Fordyce method or we can use the term of "Education" instead , may don't have any effect on life satisfaction but technical trainings such as increasing active ability, expression of emotions, optimism, social relations and avoiding of all concerns can effect on reducing the negative feelings of anxiety and depression, while techniques such as Reducing expectations and giving priority to happiness is effects on life satisfaction. Finally it is recommended to advisors and psychologists to use this method for increasing the happiness of such people. Meanwhile, health authorities duo to the findings of this study and do effective and constructive efforts to increase happiness levels of this patients by improving and providing happiness training workshops.

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