

The effect of positive psychology intervention on psychological well-being of drugs inmates

Seyed Mosa Tabatabaee*¹, Gohar Albooyeh², Hadi safari³, Mojtaba rajabpour⁴

¹- Assistant Professor, Department of Educational Psychology, Semnan University, Semnan, Iran. (Corresponding Author: s.mosatabatabaee@semnan.ac.ir)

²- MSC of clinical psychology, Islamic Azad University, Science and Research Branch, Semnan, Iran.

³- Ph.d student of psychology, Semnan University.

⁴- Ph.d student of psychology. University of Mohaghegh Ardabili, Ardabil, Iran.

(Received: 26 Des 2014; Revised: 11 Jul 2015; Accepted: 2 Sep 2015)

Abstract

Introduction: Positive psychology is a new branch of psychology. The focus of this field is on personal growth; and rather than treating illness, it utilizes scientific methods to aid the achievement of a satisfactory life. This study aimed to investigate the effectiveness of positive psychology intervention on psychological well-being of drugs inmates.

Methods: The subjects were 30 male drugs inmates in Semnan prison. They were selected through random sampling and randomly assigned to experimental 15 and control groups 15. All participants answered to psychological well-being scale before and after intervention. Experimental group received positive psychology intervention during 12 sessions while control group received no therapy. Data was analyzed using multiple analysis of variance.

Results: The statistical analysis showed the mean psychological well-being of the experimental group was meaningfully higher than the mean of psychological well-being of the control group.

Conclusion: positive psychology intervention by focusing on personal growth, rather than treating mental illness can improve psychological wellbeing of drug inmates.

Declaration Interest: None.

Keywords: Drug, Positive Psychology, Psychological Well being.

Introduction

Today, human life is constantly threatened by violence and crime (1). Offense and crime are some examples for these kinds of treats .Crime is a complex phenomenon which can be seen with different forms in different situations (2). These days, most of criminologists, psychologists, and psychiatrists consider crime as a multifactor phenomenon and try to investigate from four biological, psychological, social, and legal points of view (3-4).

The history of prison and of crime control shows that methods based on punishment not only fail to

prevent crimes from recurrences, but also may sometimes add tie their intensity and frequency, in some cases. Hence, today, it is believed that the use of positive psychology intervention on offenders, particularly those offenders with cognitive defects and mental disorders and addictions is very useful and effective (5). Addiction is affected by people`s belief and attitudes (6).Tending to drugs includes cognitive, emotional and behavioral components. Formation of positive and negative attitude arises from combination of knowledge, information, beliefs, people`s emotions and the amounts of valorizing them (7). Mental and personal problems can be both cause and effect of addiction (8).One of the

factors that lead to drugs abuse is ignoring of mental disorders. Addiction is a mental, physical and spiritual disorder that various underlying factors involved in its formation (9).

The results of various researches demonstrate that individual and group therapy programs play a significant role in improvement of psychological state and reduction of crime rate among inmates (10). On the other hand, prisons are an opportunity for basic interventions and since different interventions have occurred for the treatment of addiction and reduction of harms in prison that one of interventions is positive psychology. It can effect on psychological well-being of drugs inmates.

Based on positivist psychology, attitude about disorders has exited from medical framework and treatment should occur to follow reforming and changing the quality of life expanding capabilities, establishment the satisfaction of life and well-being in communities and individuals (11).

Positivist psychologists believe in following complete understanding of human experiences from shortage, pain, disease to cure, health, well-being and human happiness instead of emphasis on pathology (12-13).

Human has half of positive and negative and now it's the time for considering positive aspect of humans' existence, so there must consider to positive abilities of human. (14). Also, some parts of positive attitudes are happiness, hope, creativity and knowledge (15). So, positivist psychology intervention is complementary direct method for preventing and training of mental damages (16).

One of the most important models that have conceptualized psychological well-being is multi-dimensional model of Ryff (17). Ryff states that psychological well-being is a person's attempt for achieving his own real potential abilities. This model has formed and expanded by integrating different theories of individual growth (Maslow's theory of self-dehiscence and Rajer's complete person) and adaptive performance (Mahoda's theory of positive mental health). Wissing & Van Eeden have recognized a general factor of psychological well-being and have described it the combination of special qualities such as solidarity, satisfaction of life, affection balance, general attitude towards optimism or positive orientation to life. Based on Ryff model, psychological well-being is made of six factors: self-acceptance, positive relationship

with others. Autonomy, dominant on environment, purposeful life and individual growth (18-19). Ryff according to careful review of the research literature and solidarity of growth theories, mental and clinical health pointed out that these perspectives are consist of similar and complementary procedures of positive psychological health. Theoretical aspects of positive psychological health in recent perspective are such as: self-acceptance, positive relationship with others, autonomy, domination on environment, purposeful life and individual growth (20-21).

The psychological well-being refers to people's assessment of life quality. Psychological well-being has been mentioned as important factor of life quality (22). Diener points to activity theory in psychological well-being definition according to Sikzent Mihali and knows it as function of personality and general attitudes and condition (23). Harris & Lightsey have shown that there is emphasis on role of predicting psychological well-being factors on effect low-high impacts patterns (external, situational) and effective high-low impacts patterns (internal and procedures) (24). In low-high theories, psychological well-being is the result of collected pleasure and unpleasant (25).

Towel (2003) compared the efficiency of intervention programs which used punishment with those which used reinforcement of positive behaviors in the case of clients staying in a prison camp, and noticed that the greater the focus on punishment, the higher the rate of crime and reconviction (26). Friendship (2003) compared the efficiency of cognitive behavioral programs in controlling psychological symptom and reducing the rate of recommitment of crime in two groups of male clients who were sentenced to two or more years of imprisonment. The experimental group consisted of 667 prisoners and control group consisted of 801 prisoner subjects who had been matched with the experimental group in terms of several variables related to the goal of the study. The subjects in the experimental group took part in psychotherapy sessions which used cognitive-behavioral techniques. The results showed a significant difference between the two groups in terms of psychological state and reconviction periods (10). Flashaw (2004) studied the effectiveness of group instruction of cognitive behavioral skills in recidivism in British prisons.

They compared the rate of recidivism, in a period of two years after release from prison, in male prisoners who had participated in cognitive skills instruction programs from 1996 to 1998 and a matched group of male prisoners who had taken part in the programs. The findings showed no significant difference, although the rate of recidivism was lower for some of the clients who had taken part in the cognitive skills instruction program (27). It looks that any research don't perform about the effect of positive psychology intervention on psychological well-being in drugs inmates. So, regarding mentioned matters, the aim of the present study is the effect of positive psychology intervention on psychological well-being of drugs inmates. The main hypothesis is positivist psychology intervention has effect on psychological well-being of drugs inmates.

Methods

The present study followed two experimental and control group with pretest-posttest design. The participants were 30 male drugs inmates in Semnan prison. The participants were selected through random sampling and randomly assign in experimental and control groups. One person in control group was absent in post-test. For measuring psychological well-being in male drugs inmates, mental well-being scale (MWS) has been utilized. This scale has 84 questions and six factors such self-acceptance, positive relation with others, autonomy, dominance on environment, purposeful in life and individual growth. The results of correlation's Ryff test was accepted with every above scales. So test was reliable for purpose of this study. Ryff (1989) computed Cronbach-Alpha for every components are as follow: self-acceptance (0.93), positive relation with others (0.91), autonomy (0.86), having purposeful in life (0.90) and individual growth (0.87). Lindfors and his colleagues reported amplitude coefficient for internal consistency for different dimensions of Rif scale from 0.65 to 0.70. The coefficient for having purposeful in life was 0.24. In Liyaghat study; in order to assess the reliability of the mental well-being scale the Cronbach Alpha methods were used. Cronbach Alpha was for autonomy 0.35, dominance on environment 0.67, individual growth 0.51, positive relation with others 0.67, having

purposeful in life 0/61, self-acceptance 0.62 and for the whole test 0.88.

Sample was from all inmates drug in Semnan province because all of province drugs inmates were kept in Semnan profession training camp. The subjects were 30 male drugs inmates in Semnan prison. The participants were selected through random sampling and randomly placed in experimental (15 person) and control groups (15 person). One person in control group was absent in post-test. Experimental and control group answered to psychological well-being scale before starting intervention. For more focus and less space, experimental groups were divided into two sub-groups (a group of 7 persons and a group of 8 persons). Experimental group received positive psychology intervention during 12sessions. Intervention was done twice a week for 90 minutes. The interval between meetings was two or three days. Education programs was consisted of three parts which were made positive on own, world and life and in these sessions some concepts have trained such as positive and psychological well-being and expressing purpose of session, self-acceptance and self-esteem, familiar with responsibilities, self in others' point of view, psychological well-being and appointed , positive and familiar to self-acceptance of positive features in discussion group method, introduction illogical thoughts that causes pessimistic and negativist on self, others and life and features of positive and negative people. Training method was in this way that first psychologist presented topic and aim for every session. Then skills expressed by giving example and after that prisoners did practical activities in the prison. Necessary actions have given by psychologist to group and at the end of session, one assignment as an activity at prison has given to prisoners. Psychologist use of a lab top for presentation and noting the subject's comments during discussion. After 12 sessions, all participants (control and experimental group) were assessed by the scale of study.

Results

For test of the hypothesis, given post-test and pre-test in variables were appropriate analyses of covariance. Since, there was not the assumption of equal regression and because there are some

subscales, in this study has been used multivariate analysis of variance procedure.

Table 1. Descriptive Statistics in psychological well-being subscales

	GROUP	Mean	Std. Deviation	N
Pre-test				
Positive relationships	experimental	57.4000	8.89462	15
	control	56.7143	7.91715	14
Autonomy	experimental	52.6667	5.10835	15
	control	54.0000	5.73786	14
Dominant on environment	experimental	53.7333	11.68312	15
	control	54.0000	10.67708	14
Individual growth	experimental	58.6667	8.82906	15
	control	60.0714	10.45477	14
Purposeful in life	experimental	55.3333	8.67399	15
	control	56.8571	8.25420	14
Self-acceptance	experimental	46.8000	8.54568	15
	control	49.0714	8.45317	14
Post-test				
Positive relationships	experimental	63.4000	5.51362	15
	control	53.0714	7.70079	14
Autonomy	experimental	52.4000	5.84074	15
	control	50.1429	4.73704	14
Dominant on environment	experimental	62.6000	7.42390	15
	control	47.8571	5.03613	14
Individual growth	experimental	66.2667	7.20582	15
	control	53.8571	7.62443	14
Purposeful in life	experimental	60.2000	6.48294	15
	control	54.5000	7.61325	14
Self-acceptance	experimental	58.6667	5.65264	15
	control	46.2857	8.00412	14

Table 1 includes mean and standard deviation of pre-test and post-test scores in psychological well-being subscales. According to table 1, in pre-test, mean of subscales is almost equal in subscales of control and experimental group and

it indicates that both of groups were equal in psychological well-being subscales before starting intervention (pre-test) and they were not different from each other.

Table 2. Multivariate Tests

Group	Value	F	Hypothesis df	Error df	p	Partial Eta Squared
Hotelling's Trace	1.937	7.101 ^b	6.000	22.000	0.00	0.659

Base on table 2, significance of Wilk's test allowed to use MANOVA. There is a difference among psychological well-being subscales in experimental and control groups because the

multivariate testis statistically significance (based on Ata index in table 2 is explained 65/9 percent of dependent variable by intervention).

In table 3, each of psychological well-being subscales are evaluated separately.

Table 3. Tests of Between-Subjects Effects

	Dependent Variable	Type III Sum of Squares	df	Mean Square	F	p	Partial Eta Squared
GROUP	Positive relationship	772.506	1	772.506	17.432	0.000	0.392
	Autonomy	36.893	1	36.893	1.295	0.265	0.046
	Dominant on environment	1573.927	1	1573.927	38.587	0.000	0.588
	Individual growth	1115.145	1	1115.145	20.308	0.000	0.429
	Purposeful in life	235.272	1	235.272	4.734	0.038	0.149
	Self-acceptance	1110.016	1	1110.016	23.411	0.000	0.464

Based on table 3, there is a significance difference in experimental and control group subscales such as positive relationship with others, domination on environment, individual growth, purposefully and self-acceptance and there is no significant difference in autonomy subscale. Partial Eta Squared of intervention is mean in domination on environment (0.588), individual growth (0.429) and self-acceptance (0.464) is mean and Partial Eta Squared of intervention in purposeful in life (0.149) is low, positive relationship with others (0.241) and Partial Eta Squared of intervention in autonomy is lower than mean. Based on table 1, mean of experimental group is significantly higher than control group in positive relationships with others, domination on environment, individual environment, Purposeful in life and Self-acceptance.

Conclusion

The purpose of the present study was to examine the efficiency of positive psychology intervention on psychological well-being of drugs inmates. The findings demonstrated that positive psychology interventions have effect on psychological well-being of drugs inmates. In other words, psychological well-being scores after intervention in subscales such as positive relationships, dominance on the environment, individual growth, purposeful life and self-acceptance have increased significantly. The results are in line with those obtained by Friendship (2003), Towel (2003), Flawsha (2004). Regarding results in pervious researches and obtained results in present study, It would be mention that positivist in group and individual

interventions can taking account as effective procedure on psychology features which considered by expert in health dominance (12, 16, 22). Based on positivist psychology, if person focus on positive aspect of one thing, He can experience life easily. So, regarding positive psychology, there is more possibility on having perfect image on human health, psychological well-being and happiness (15, 18, 30).

The present study, based on attention to the positive factors in inmates' drug has applied positive psychological intervention that is a new branch of cognitive-behavioral therapy. When people are faced to adversity and difficulties, they can experience a variety of emotions including a range from enthusiasm to anger, depression, anxiety and addiction (28). It seems that balance between these feelings are related to the degree of optimism and pessimism in people that positive psychology intervention can improve their optimism. People with positive attitude will learn to make higher amount of well-being, creating balance among valuable aspects of life existing these days according to their ideal. It should be mentioned without attention to positive emotions in inmates drug not only cause intensity of their negative emotions but also ignore positive events in their lives. It is so that in early sessions of treatment, majority of inmates drug emphasize lower feeling of well-being in their different situations but with progress of their therapy sessions, they experience higher feeling of well-being and inmates drug become able to find their positive feelings. Psychological well-being is a term that refers to a positive state of mind and amount of psychological well-being of people has a

positive relationship with different excitements such as hope, optimism, happiness, personal satisfaction (29). Ness (1991) believes that reason for disability of inmate's drug is in identifying of positive emotions. Generally negative feelings and experiences are understood or remembered easier of positive feelings and experiences in future. So, task of positive psychology intervention is to emphasize the reduction of negative attention and memories and increasing of positive attention and memories (30).

The present study has done in prison environment and subjects were in prison. It is clear that, prison environment has its own special mental stress but positive psychology intervention has increased significantly the majority of psychological well-being subscales in experimental group (in comparison with control group). Although prison facilities such as space, noise, the amount of prisoner's numbers and little space for practicing of what they have learned in group sessions caused limitation they increased the possibility for generalization of research findings in real prison environment. In order to avoid delays leading from unpredicted leaves, participants have been chosen as sample that they cannot take leave. That is why the created positive effects can be considered only due to positive psychological intervention. Subjects of study were in low level of education.

Most of subjects were in guidance school level of education and the only one person had diploma. According to increasing influence of positivist psychology intervention on psychological well-being subscales in drug inmates in this study, theoretically effectiveness of positive psychology intervention for low levels of education has been confirmed in situation with low facilities.

The subjects weren't homogeneous in previous record of narcotic substances and this is one of the study limitations. Some of the subjects in both groups didn't take narcotic but carried it. Also, the narcotic taken by subjects in past were not the same. Some of them took traditional narcotic substances (for example opium and etc.). Some others took industrial narcotic substances for (example Crack, glass). Also, subjects didn't use narcotic substances during intervention but it was not clear that they will quite narcotic substances completely. In

accessibility of narcotic substance was the same for all of subjects in prison. It is possible, all of them have not quitted narcotic substances optionally and most of them will take narcotic substance again in out of the prison. We tried to reduce effective of equal in subjects by random attributing to experimental and control groups.

The present study has a number of theoretical and practical implications. One is that giving insight to people, changing their attitudes and improving their psychological well-being, a point already emphasized in various theories of psychology and psychotherapy. It is recommended to investigate proficiency of various treatment attitudes during the selection of sample group from the whole drugs inmates with respect to their level of education and amount of condemnation in this study. Also, positivist psychology intervention can be done on other variables and other prisoners and compared with this study. Furthermore, effectiveness of positive psychology intervention on psychological well-being in drugs inmates has been investigated in this study. In the later study, it can be recommended to investigate the permanent effects of this intervention.

Acknowledgment

We would like to thank to our colleagues and the organizations for all provided insight and expertise that greatly assisted this research and patients who helped us kindly in the project. We also tried to consider all ethical issues in this study.

References

1. Andrews DA, Bonta JL. The psychology of criminal conduct. First Edition. New York: Anderson; 1994.
2. Goldouzian I, Necessities of general criminal law, 7nd edition. Tehran: Mizban press; 2002. 85-90. [Persian]
3. Farrington D, Biron L, LeBlanc M. Abnormal Offenders, Delinquency, and the Criminal Justice System. In: Gunn J, Farrington DP Editor. Personality and delinquency in London and Montreal. First Edition. New York: Wiley; 1982.
4. Ghomrani A, Jafari H. A survey on emotional intelligence and blindness. Journal of Exceptional Education. 2001; 31: 25-30. [Persian]
5. Crighton D, Towel G. Psychology in probation. England: The British Psychological Society and Blackwell Publishing Ltd; 2005.

6. Beck JC. Cognitive therapy: Basic and beyond. Second Edition. New York: Guilford Press; (2001).
7. Poorshahbaz, A. The structural relationship between risk and protective factors for using drugs substances in teenagers: 2004. www.Pishgirinovin.com: Available at: <http://www.pishgirinovin.com/>. 1 Oct 2015.
8. Dinas PC, Koutedakis Y, Flouris AD. Effects of exercise and physical activity on depression. Irish Journal of Medical Science. 2011; 180(2): 319-25
9. Galanter M, Kleber HD, Brady TK. Textbook of substance abuse treatment. Fifth Edition. Washington DC: American Psychiatric Press; 2006.
10. Friendship C, Blud L, Erikson M, Thorton D. Cognitivebehavioraltreatment for imprisoned offenders: Anevaluation of HM prisons service's cognitive skills programs. Legal and Criminological Psychology. 2003; 8(1):103-17.
11. Seligman M. Authentic happiness. First Edition. New York: Free Press; 2002.
12. Gable SL, Haidt J. What (and why) is positive psychology? Review of General Psychology. 2005; (9): 103-110.
13. Joseph S, Lindley AP. Positive therapy: A Meta theory for Psychological practice. Xi. New York: Rutledge Press; 2006.
14. Peterson C, Seligman MEP. Character strengths and virtues a handbook and classification. New York: American Psychology Association Oxford University Press. 2004: 241-242.
15. Snyder CR. Handbook of hope: theory,measures, and applications. London: Academic Press; 2000
16. Dukworth, A.L., Steen, T. A. and Seligman, M.E.P. (2005). PositivePsychology in ClinicalPractice Annual Review of Clinical Psychology, 1(1), 629-651.
17. Ryff, C D, Singer B, Love GD, Essex MJ. Resilience in adulthood and later life: Defining features and dynamic processes. In: J.Lomranz, Editor. Handbook of aging and mental health: An integrative approach. First Edition. New York: Springer Science + Business Media, LLC; 1998. 69-96.
18. Ryff, Cd. Happiness is everything or is it? Exploration on the meaning of psychological well-being. Jornal of personality and social psychology. 1989; 57(6), 1069-1081.
19. Ryff, CD, Keys CL.The structure of psychological Well- being revisited. Journal of personality and social psychology. 1995; 69(4), 719-727.
20. Ryff CD, Singer B. The contours of positive human health. Psychological Inquiry. 1998; 9(1): 1-28.
21. Antonelli E, Cucconi L. Effects of retirement on psychological well- being, the self-concept, and self-esteem. Ricerche Di Psychologia; 1998; 22 (3), 27-55
22. Diener, E. National indication of subjective well-being. Journal of personality and social psychology. 2005; 25, 240 – 256.
23. Eid M, Larson RJ. The Science of subjective well-being. First Edition. New York: Guilford press; 2008.
24. Harris PR, Lightsey O R. Constructive thinking as a mediator of the relationship between extraversion, neuroticism, and subjective wellbeing. European Journal of Personality. 2005; 19 (5), 409-426.
25. Ositer GR, Markindes KS, Black SA, Goodwin JS. Emotional Wellbeing predicts subsequent Functional independence and survival. Journal of the American Geriatrics Society. 2000; (48):473-478.
26. Towel G. Psychology in prisons. First Edition. UK: The British Psychological Society and Blackwell Publishing Ltd; 2003.
27. Flashaw L, Bates A, Pate A, Pate V, Corbet C, Friendship C. Assessing reconviction, reoffending and recidivism in a sample of UK sexual offenders. Legal Criminal Psychology. 2004; 8(2): 207-15.
28. Snyder CR, Lopez SJ. Handbook of positive psychology. First Edition. New York, Oxford University Press; 2002.
29. Bartram D, Boniwell, I. The science of happiness: Achieving sustained psychological well-being. Positive Psychology. 2007; 29: 478-482.
30. Nesse RM. What good is feeling bad? The evolutionary benefits of psychic pain. Sciences. 1991; 31:30-7.