



## Investigation of the hope-therapy effectiveness on psychological well-being among the housewives

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### ABSTRACT

*The main purpose of the present study was to investigate the effectiveness of the hope-therapy on psychological well-being among the housewives. The statistical population of the present study included the housewives women referred to the Western Town Alley of Tehran including about 30 women that they were selected as the sample of the study based on a targeted case; they were also substituted randomly into both experimental (15 ones) and observation (15 ones) groups in the study. Then, the experimental group was taken under the hope-therapy in a 8 sessions of 90 minutes. The necessary data was gathered by Reef Psychological Well-being Questionnaire and they were also analyzed by the use of covariance statistical tool and SPSS Software. The results showed that the hope-therapy did not have positive impact on the psychological well-being elements with others. Therefore, the results indicated that the hope-therapy can lead to the recovery of self-autonomous elements, target-based life, personal growth, overcoming on the environment and the score of housewives women psychological well-being. Thus, it can be stated that the hope-therapy can recover the housewives women psychological well-being effectively.*

**Key words:** hope-therapy, psychological well-being, housewives women

### INTRODUCTION

Today the world is challenging and confronting with many different issues and problems that these are the main and basic threatening factors of the human generation potentially. These factors are often subjected to the humanistic affairs. The incorrect usage and misuse of the nature and the God's givengifts have devastated the natural resources developing the negative damages increasingly in this regard. Among this, not only the man has been damaged but also the man's psychiatric and mental issues have been destructed making him or her susceptible to various disorders in this case. The same subject made the mental health as the main and basic issue and discussion in the last decade. The world health organization defines the mental health as following:

The mental health is subjected to the cohesive and arranged connection with others, changing and correcting the personal and social environment and solving controversies and personal tendencies logically and suitably and or it is subjected to the complete physical-mental and social welfare without having any illness or annoyance in this regard.

The mental health is related to the fluency and skills of correct relationship with environment particularly in three important space elements of the life, love and entertainment and finding a suitable job, having family, escaping of legislative problems and enjoying the life precious moments [21]. In the other hand, due to the appearance of new theories and positive psychology movements emphasizing on the mental health particularly in positive and personal abilities growth, a group of psychologists used the psychological welfare instead of the mental health because they believe that this term has a better positive dimension in the mind [32]. Along this, there have been represented some models such as Jahooda and Diner mental welfare models defining the mental health instead of focusing on the illness and weakness on abilities [27]. The carried out struggles regarding to the health traditional patterns made the necessary background for considering the health as a mood of the welfare, but they could not provide enough definition in this case. In the last decades, Riff et al represented a psychological welfare pattern or positive psychological health and this has been vastly being paid attention in all over the world [37].

The Riff et al (1999) six factors model defines the psychological welfare as the real talents growth of every one as following:

**Self acceptance:** it means the positive attitudes towards the self and different aspects of the acceptance such as good and bad features and positive feeling about the past life

**Positive relations to others:** satisfaction and intimacy feeling in relation to others and the understanding of these dependencies

**Independence:** feeling of independency and its effectiveness in life events and its active role in behaviors

**Fluency at environment:** it is subjected to the control of internal activities and effective application of the environmental opportunities

**Purposeful life:** having target and purpose at life believing the meaning of past and present life

**Personal growth:** durable and sustainable feeling of a new experience as an existence with high potential talents

There have been carried out many various studies in relation to the mental welfare affairs; for example, Shad and Riff [13]. in a study regarding to the psychological and personality welfare concluded that there is negative relationship between the dimensions of psychological welfare and mental personality features. Also Ronny et al (2003) found out that there is a significant negative relationship between the dimensions of psychological welfare, anxiety, depression and enmity. [25,1]. in their study showed that the lack of having life skills can reduce the psychological welfare among people. Also, Makkarian et al in their study indicated that the existence of physical illnesses in women can reduce the mental health [30]. It seems that the degree of the hope is one of the most important factors influencing on people's psychological welfare. Different researches have shown that the hope with positive emotion and self value feeling (Snyder et al, 1996) has a positive relationship but it has got negative relationship with depression [42,53], anxiety [12], aging sensation [13]. According to Snyder (1994) the depression has a reverse relationship with the lack of research targets being high important for people [41]. The low hope can predict the level of depression and social mental deficiency [45]. Koing in a research showed that the mental and physical health of the man has a relationship with the life [9]. Hassani and Bahrami (2005) in a research investigated the contrastive analysis and relationship and happiness originating with spiritual issue has got a relationship with the mental health. The results showed that there is a correlation between the positive spiritual and mental health [14]. Psychologists accepted that the hope can influence on the mental health of people [11]. In a traditional psychological approach based on the pathological pattern, the main aim of the treatment is subjected to the elimination of illness and personal fixation. Caregivers believed for long times the fact that the reduction of negative symptoms can lead to the mental health and function efficiently. However, the appearance of positive psychology has specified that the related assumption may not be completely correct [31]. Although the mental illness treatment is of high importance, but an approach focusing merely on the pathological issue has got two main problems itself. The first is that many individuals seeking to treat approach are not psycho patients [30]; they may feel that the life is unattractive or dissatisfied of everything surrounding them but they cannot be considered as the psycho patients. The mental health experts determine their adaptation disorder diagnosis in this regard [15]. These kinds of referees are not seeking the remedial approaches but they like to recover their disorder in this case. Second, if the referees had psycho disorder, the treatment focus on the past weaknesses may not be an effective way in relation to an optimized remedial approach instead of the present abilities [36]. Seligman and Peterson (2003) considered a pattern including the approaches for boosting and inducing the abilities in order to treat the illness symptoms against the hardness and stressful factors as the best way in this pavement [36]. The beneficent impacts of the positive structures on the mental and physical health have been confirmed in many various researches [37]. Among this, they hope has been increasingly paid attention in this path [40]. According to Snyder (1991) the hope is not an activated excitement being appeared only in dark side of the life but it is considered as a cognitive phenomenon being consciously followed by individuals [43]. According to his view the process of hope can determine the self targets creating approaches for reaching to the innovative purposes and finally it can provide the necessary motivation for achieving these approaches. These three elements have bilateral interaction towards each other potentially. These can determine the most essential purposes increasing the process of motivation in this pavement. The research of Cooper clarified these elements separated together being related to the hope elements of Snyder's theory; these include the positive and negative hope being appeared among the referred people. Although the hope happens among the entire people (Snyder et al, 1997) but it can be increased by an intervention problem at fundamental levels [49,38]. The hope-therapy is originated from the behavioral-cognitive therapy according to Snyder theory [51], it is based on the fact that it can help the whole caregivers to formulate the purposes finding motivated targets removing the whole obstacles as challenges to overcome them potentially [7]. The hope-therapy has been established based on the positive psychology instead of weaknesses of the human [35]. The hope-therapy is a treatment program that has

been designed to increase the hopefully thoughts going towards the purposes. In this treatment the participants first get familiar with the hope theory and then they get learned how to apply these approaches at their life. The participants are learnt how to 1- determine the important targets, 2- determine the different paths towards reaching their purposes, 3- recognize the motivation resources and their bilateral interaction, 4- recover the progression of the target and 5- amend the targets and paths if necessary.

The process of hope therapy aimed at help the caregivers to specify and clarify the various paths based on the targets; they can categorize these purposes and targets being able to overcome the whole obstacles in this pavement [7,45,8,19,50] in a research titling the hope therapy on a sample with 39 people without any pathological symptoms participated voluntarily in the research concluded that a short intervention of the hope therapy can increase some psychological abilities reducing the mental cognitive damage. Snyder (2005) in a study showed that the hope therapy intervention can lead to the recovery of self esteem and life meaning reducing the depression and anxiety symptoms [49].Ghezelsefloo and Esbati (2011) in a study indicated that the hope-therapy group treatment can increase the life quality of people with HIV illness[6]. Raieesian, Gholzari and Borjali (2010) in a study showed that the hope-therapy lessons can recover the depression of addicted people[4]. Also the results showed that the hope-therapy can be effective variable in the recurrence of the addiction. In a research led by Bijari et al (2009) the effectiveness of the hope-therapy was investigated in relation to the increase of women with breast cancer and their hope to life[1]; the findings showed thatthe therapy group based on hope therapy can increasingly increase the hope of life reducing the depression among women with breast cancer in compare to observation group significantly. [15]in a study showed that the hope therapy can increase the mental health of girl students. Due to the mentioned subjects, the present study is aimed at response the question whether the hope therapy can be effective in housewives' psychological welfare?

## MATERIALS AND METHODS

The present study is a semi-experimental type of study with pre and post tests with control group due to the description and investigation of the hope-therapy impact on the psychological mental welfare of housewives.

### Statistical population, sample group and sampling method:

The statistical population of the present study includes the housewives referred to one of Tehran's western alleys that they were entered into the study by the target-based sampling method; about 30 women were entered and taken in the study as the sample of the present study. They were substituted randomly in both experimental (15 women) and observational groups (15 women) in the study. The entering criteria were as following:

The lack of having illness and physical chronic patience, lack of having chronic mental illness such as psychosis, ability in participating the hope-therapy sessions, obtaining the score 288 in the psychological welfare questionnaire, having third guidance school degree, ability of doing tasks in hope-therapy sessions.

It should be mentioned that the hope-therapy was carried out for the observational group for considering the moral issues in the end of every session. Again it should be mentioned that two ones of the group could not continue to participate in the sessions and for the reason they were eliminated from the study. Also, two another one was eliminated from the study due to the equality of the groups randomly.

### Data collection tool: scale of psychological welfare measurement

This scale was constructed by Carol Riff in 1989. This test includes 84 questions and 6 main factors. The participants response to the questions in a 6 degree scale (completely disagree to completely agree). About 47 direct questions and 37 reverse questions were scored in this case. Riff used the measurements of emotional balance [29], life satisfaction [31], self respect (Rosenberg, 1965) to investigate the validity tool and its measurement in relation to the psychological welfare index. The results of Riff correlation test were acceptable with every above mentioned scale. Hence, the above mentioned tool is considered as a validity tool structurally [32].

**Table 1: description of hope-therapy sessions**

| Session | Subject of session                      | Purpose of session                                              | Content of session                                                                                              | External tasks of session                                                                  |
|---------|-----------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| 1       | Psychological welfare and mental health | Familiar with elements and definitions of psychological welfare | Definition of three elements of psychological welfare (self authority, personal growth, fluency at environment) | Bringing examples in relation to understanding the psychological welfare of three elements |

|   |                                         |                                                                              |                                                                                                                    |                                                                                               |
|---|-----------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| 2 | Psychological welfare and mental health | Familiar with elements and definitions of psychological welfare              | Definition of three elements of psychological welfare (self authority, personal growth, fluency at environment)    | Bringing examples in relation to understanding the psychological welfare of three elements    |
| 3 | Hope                                    | Familiar with hope and its distinction with self esteem, belief and optimism | Definition of hope in different viewpoints and clarification of its nature and difference with similar words       | Writing the story of everyone in terms of hope viewpoint and finding hope points in the story |
| 4 | Power of virtue                         | Familiar with power of virtue, factorial thinking                            | Planning questions about power of virtue and its size of participants and paths for increasing the power of virtue | Practice about internal negotiations and increase of positive power of virtue                 |
| 5 | Target determination                    | Defining target and targets categorization                                   | Familiar with short term and long term targets and reaching ways                                                   | Finding a one short term target in relation to member of group                                |
| 6 | Planning power                          | Step by step training in reaching to target                                  | Planning questions about the participants and their better planning                                                | Writing and completing personal program in every target                                       |
| 7 | Recognizing obstacle                    | Familiar with internal and external obstacles in relation to target          | Conscious of related obstacles and making negative excitement responses with it                                    | Finding personal obstacles with his or her targets                                            |
| 8 | Conclusion of hope formulation          | Determination of a general formulation of hope                               | Reviewing every hope element and its impact on the formulation                                                     | Following-up and continuing the ways of reaching to target after ending up the sessions       |

## MATERIALS AND METHODS

The multi covariance analysis (MANCOVA) was applied in order to analyze the collected data in the study. It also was carried out by the use of SPSS-20 Software.

**Table2: summary of covariance analysis for the effectiveness of hope-therapy on the self acceptance element**

| Source of changes        | SS       | DF | MS      | F      | P       | Degree of impact | Power of test |
|--------------------------|----------|----|---------|--------|---------|------------------|---------------|
| Correction of model      | 2751.828 | 7  | 342.975 | 6.456  | 0.001** | 0.721            | 0.978         |
| Fixed degree             | 996.224  | 1  | 996.224 | 15.702 | 0.001** | 0.576            | 0.982         |
| Main impact of pre test  | 0.958    | 1  | 0.958   | 0.021  | 0.899   | 0.011            | 0.092         |
| Main impact of treatment | 995.212  | 1  | 995.212 | 17.415 | 0.001** | 0.621            | 1             |
| Error                    | 1052.865 | 18 | 60.425  |        |         |                  |               |
| Total                    | 100758   | 26 |         |        |         |                  |               |
| Corrected total          | 3499.769 | 25 |         |        |         |                  |               |

The results of the covariance analysis show that there is a significant difference between the mean scores of observational and experimental groups in relation to the self-authority element ( $F= 17.415$ ,  $p<0.01$ ) and the degree of impact was 0.621. Hence, it can be stated that the hope therapy can increase the self acceptance elements in housewives women.

**Table 3: summary of covariance analysis for the effectiveness of hope-therapy on the positive relations to others**

| Source of changes        | SS       | DF | MS       | F      | P       | Degree of impact | Power of test |
|--------------------------|----------|----|----------|--------|---------|------------------|---------------|
| Correction of model      | 228.859  | 7  | 32.694   | 0.59   | 0.794   | 0.173            | 0.174         |
| Fixed degree             | 1090.636 | 1  | 1090.636 | 17.976 | 0.001** | 0.500            | 0.980         |
| Main impact of pre test  | 19.523   | 1  | 19.523   | 0.353  | 0.558   | 0.015            | 0.088         |
| Main impact of treatment | 29.719   | 1  | 29.719   | 0.490  | 0.493   | 0.026            | 0.102         |
| Error                    | 1092.102 | 18 | 62.672   |        |         |                  |               |
| Total                    | 94801    | 26 |          |        |         |                  |               |
| Corrected total          | 1320.962 | 25 |          |        |         |                  |               |

The results of the covariance analysis show that there is no a significant difference between the mean scores of observational and experimental groups in relation to the positive relations to others ( $F= 0.490$ ,  $p=0.493$ ) and the degree of impact was 0.621. Hence, it can be stated that the hope therapy does not have an impact on the increase of housewives women and their positive relations to others.

**Table 4: summary of covariance analysis for the effectiveness of hope-therapy on the self authority**

| Source of changes        | SS       | DF | MS       | F      | P       | Degree of impact | Power of test |
|--------------------------|----------|----|----------|--------|---------|------------------|---------------|
| Correction of model      | 2456.828 | 7  | 350.975  | 5.786  | 0.001** | 0.692            | 0.986         |
| Fixed degree             | 1001.201 | 1  | 1001.201 | 16.506 | 0.001** | 0.478            | 0.970         |
| Main impact of pre test  | 0.978    | 1  | 0.978    | 0.012  | 0.914   | 0.001            | 0.051         |
| Main impact of treatment | 999.200  | 1  | 999.200  | 16.473 | 0.001** | 0.478            | 0.970         |
| Error                    | 1091.826 | 18 | 60.657   |        |         |                  |               |
| Total                    | 100661   | 26 |          |        |         |                  |               |
| Corrected total          | 3548.654 | 25 |          |        |         |                  |               |

The results of the covariance analysis show that there is a significant difference between the mean scores of observational and experimental groups in relation to the self-authority element ( $F= 16.473$ ,  $p<0.01$ ) and the degree of impact was 0.478. Also the power of the test was 0.970. Hence, it can be stated that the hope therapy can influence on the increase of housewives women and their self authority element.

**Table 5: summary of covariance analysis for the effectiveness of hope-therapy on the target-based life element**

| Source of changes        | SS       | DF | MS       | F      | P       | Degree of impact | Power of test |
|--------------------------|----------|----|----------|--------|---------|------------------|---------------|
| Correction of model      | 1371.194 | 7  | 195.885  | 2.640  | 0.006** | 0.507            | 0.746         |
| Fixed degree             | 672.207  | 1  | 672.207  | 9.058  | 0.008** | 0.335            | 0.812         |
| Main impact of pre test  | 74.653   | 1  | 74.653   | 1.139  | 0.297   | 0.047            | 0.176         |
| Main impact of treatment | 1258.109 | 1  | 1258.109 | 16.954 | 0.001** | 0.485            | 0.973         |
| Error                    | 1335.768 | 18 | 74.209   |        |         |                  |               |
| Total                    | 112427   | 26 |          |        |         |                  |               |
| Corrected total          | 2706.962 | 25 |          |        |         |                  |               |

The results of the covariance analysis show that there is a significant difference between the mean scores of observational and experimental groups in relation to the target-based life element ( $F= 16.954$ ,  $p<0.01$ )

and the degree of impact was 0.485. Hence, it can be stated that the hope therapy can influence on the increase of housewives women and their target-based life element.

**Table 6: summary of covariance analysis for the effectiveness of hope-therapy on the personal growth element**

| Source of changes        | SS       | DF | MS       | F      | P       | Degree of impact | Power of test |
|--------------------------|----------|----|----------|--------|---------|------------------|---------------|
| Correction of model      | 2293.566 | 7  | 327.652  | 9.440  | 0.001** | 0.786            | 1             |
| Fixed degree             | 731.697  | 1  | 731.697  | 21.080 | 0.001** | 0.539            | 0.991         |
| Main impact of pre test  | 25.918   | 1  | 25.918   | 0.608  | 0.443   | 0.026            | 0.116         |
| Main impact of treatment | 1174.898 | 1  | 1174.898 | 33.849 | 0.001** | 0.653            | 1             |
| Error                    | 624.780  | 18 | 34.710   |        |         |                  |               |
| Total                    | 101503   | 26 |          |        |         |                  |               |
| Corrected total          | 2918.346 | 25 |          |        |         |                  |               |

The results of the covariance analysis show that there is a significant difference between the mean scores of observational and experimental groups in relation to the personal growth element ( $F = 33.849$ ,  $p < 0.01$ ) and the degree of impact was 0.653. Hence, it can be stated that the hope therapy can influence on the increase of housewives women and their personal growth element.

**Table 7: summary of covariance analysis for the effectiveness of hope-therapy on the fluency at environment element**

| Source of changes        | SS       | DF | MS       | F      | P       | Degree of impact | Power of test |
|--------------------------|----------|----|----------|--------|---------|------------------|---------------|
| Correction of model      | 2206.399 | 7  | 315.200  | 2.687  | 0.043*  | 0.511            | 0.755         |
| Fixed degree             | 538.082  | 1  | 538.082  | 4.587  | 0.046*  | 0.203            | 0.527         |
| Main impact of pre test  | 0.040    | 1  | 0.040    | 0.001  | 0.984   | 0.00             | 0.050         |
| Main impact of treatment | 1813.335 | 1  | 1835.335 | 15.458 | 0.001** | 0.462            | 0.960         |
| Error                    | 2111.486 | 18 | 117.305  |        |         |                  |               |
| Total                    | 109665   | 26 |          |        |         |                  |               |
| Corrected total          | 4317.885 | 25 |          |        |         |                  |               |

The results of the covariance analysis show that there is a significant difference between the mean scores of observational and experimental groups in relation to the fluency at environment element ( $F = 15.458$ ,  $p < 0.01$ ) and the degree of impact was 0.462. Hence, it can be stated that the hope therapy can influence on the increase of housewives women and their fluency at environment element.

**Table 8: summary of covariance analysis for the effectiveness of hope-therapy on the psychological welfare element**

| Source of changes        | SS        | DF | MS        | F      | P       | Degree of impact | Power of test |
|--------------------------|-----------|----|-----------|--------|---------|------------------|---------------|
| Correction of model      | 12209.735 | 7  | 1744.248  | 4.246  | 0.006** | 0.623            | 0.934         |
| Fixed degree             | 33945.937 | 1  | 33945.937 | 82.634 | 0.001** | 0.821            | 1             |
| Main impact of pre test  | 0.489     | 1  | 0.489     | 0.001  | 0.971   | 0.00             | 0.050         |
| Main impact of treatment | 7053.947  | 1  | 7053.947  | 17.171 | 0.001** | 0.488            | 0.975         |
| Error                    | 7394.419  | 18 | 410.801   |        |         |                  |               |
| Total                    | 3289.154  | 26 |           |        |         |                  |               |
| Corrected total          | 19604.154 | 25 |           |        |         |                  |               |

The results of the covariance analysis show that there is a significant difference between the mean scores of observational and experimental groups in relation to the psychological welfare element ( $F = 17.171$ ,

$p < 0.01$ ) and the degree of impact was 0.488. Hence, it can be stated that the hope therapy can influence on the increase of housewives women and their psychological welfare element.

## **DISCUSSION AND CONCLUSION**

The results showed that the hope-therapy can increase the self acceptance element in relation to the housewives psychological welfare. These results are coincident with the researches of Jones, Feldman, Gum, Michael and [51,3]. Khodayari (2000) in his study showed that the hope-therapy can change the personal perceptions towards the self rehabilitating higher acceptance of the same person towards the self [3]. In this finding it can be stated that the hope-therapy can lead to the induction and construction of people's motivation and cognitive beliefs [34]. Changes in beliefs not only determine the people's attitudes but also they will make some perceptual affairs in the people self, too. Also, it can be deduced that the hope-therapy can induce positive perspective and insight towards the future making the success path among individuals. The results showed that the hope-therapy cannot increase the positive relations to others element along with housewives welfare psychological affairs. These results are not coincident with the results of [14]. Ripley et al in a research on 43 couples carried out a comparison on two interventions for enriching the hope and forgiveness issues found that both groups can make positive connections in this regard. It can be deduced that the hope-therapy emphasizing on the personal beliefs can make a positive attitude towards the future [49]. Most of these personal beliefs affect on people and it seems that this therapeutically method is little influenced on the social relations and it does not change the positive relations to others element. In response to the third hypothesis of the research, the hope therapy is effective on women self authority. The results showed that the hope therapy can increase the psychological welfare self authority among housewives women. These results are coincident with the results of [49,51,1] that they showed that the hope-therapy can be effective on the self authority and independence of people. It can be stated that the hope-therapy can increase personal motivation making target-based life remembering the successes of the life in the past time being considered as one of the best ways of the hope-therapy approaches. In the other hand, this makes people to mitigate their disabilities at life relying on higher social skills and situations [40]. The results showed that the hope-therapy can increase the psychological welfare element of housewives women. These results are coincident with the results of Jones, Feldman, Gum, Michael and [51,49,40,1] that they showed in their studies that the hope-therapy can be effective in making the positive targets of the life. In this relation it can be stated that the hope-therapy is a kind of thinking way about the surrounding world making people to be trained to determine their targets in this pavement moving their life direction and orientation to reach to the life successes [40]. Also it can be stated that the structure of hope-therapy sessions is subjected to move people along with higher hope towards the related targets determining their successes in this path. The results showed that the hope-therapy can increase the personal growth element of housewives psychological welfare. These results are coincident with the results of [1,40,6,17,45,36] that they showed in their studies that the hope-therapy can recover the people's psychological elements. In this relation it can be stated that these factors include the cognition and perception of people's personal traits interacting a determinant role in the field of personal growth. The hope-therapy approach and generally the positive psychology with changing people's attitudes can rehabilitated them to provide their personal positive acceptance reaching to personal growth in this case. The results showed that the hope-therapy can increase the element of fluency at environment among housewives psychological welfare. These results are coincident with the results of Jones, [36,51,49] that they showed that the therapies based on the hope can increase the self confidence of people. In this can it can be stated that the household women have traditional gender role tending them to be good mates at their life. The self authority and fluency at environment are those cases that have been added to these gender plans [5]. Here, it can be deduced that the hope-therapy inducing higher hope towards future can change the household women struggle high potentially at their social and family situations. In response to the seventh hypothesis the hope-therapy is effective in increasing the psychological welfare of household women. These results are coincident with the results of that they showed in their studies that the hope-therapies can recover the mental and psychological health changing the psychological variables. Hassani and Bahrami (2005) in a research studied the spiritual contrastive relationship and spiritual happiness originating from the hope towards future; the results showed that there is a positive correlation between the contrastive spirituality and mental health. It can be stated that the hope-therapy can change people's attitudes towards the future determining targets for them to induce their environmentally social changes increasing the psychological welfare. Also, it can be stated that the hope-therapy could change the people's attitudes towards their own beliefs and perceptions. As it mentioned before, Riff psychological welfare considers the personal struggle for keeping the real potential abilities. Due to the definition of psychological welfare and in the other hand due to the targets and hope-therapy purposes, it can be stated that the hope-therapy with focusing on the

psychological welfare elements can simply increase the people's psychological welfare[31,6,19,16,31,51,49,18,13,23].

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