

THE EFFECTIVENESS OF FORDYCE'S HAPPINESS TRAINING ON THE PSYCHOLOGICAL WELL-BEING AND LIFE QUALITY OF SINGLE IRANIAN WOMEN LIVING IN DUBAI

Fariba Ghaffari¹, Supervisor: Dr. Majid Saffarinia²

ABSTRACT

The main objective of this study was to investigate the effectiveness of Fordyce's happiness training on the psychological well-being and life quality of single Iranian women living in Dubai. The statistical population of this study included all single women covered by Children's Foundation in Dubai. It should be noted that by the end of 2010, the population of Iranian residents is estimated to be about 400,000 people, and the population of single Iranian women is 75. The statistical sample of this study was 30 single Iranian women living in Dubai who were randomly and simply selected and placed in two experimental and control groups. The methods used in this study were the World Health Organization Life Quality Questionnaire and the Ryff's Psychological Well-being Questionnaire. To analyze the data, multiple covariance analysis method was used with SPSS22 software package. The results of multiple covariance analysis showed that happiness training for single women had an effect on improving their life quality and psychological well-being by 0.97 ($p < 0.05$). Based on the findings, Fordyce's happiness training can be used to improve the life quality and psychological well-being of single women in consulting centers and psychological services.

Keywords: happiness, Fordyce, psychological well-being, life quality, single women

The Effectiveness of Fordyce's Happiness Training on the Psychological Well-being and Life quality of Single Iranian Women Living in Dubai

Happiness and exhilaration is one of the most important psychological needs of mankind, and has a major impact on personality development and mental health. Happiness is the one of human emotions. Human emotions vary from a wide range of severe sadness to intense happiness, and in fact, there are two types of emotions, pleasant and unpleasant emotions (Liu, Floud, Pirie et al., 2016). Until recently, in psychology, human negative emotions such as depression, sadness, nervousness, indignation, and anxiety have mainly been studied, but in recent years, happiness studies have been greatly increased. According to Argyle et al. (1990), happiness has three essential components: "positive excitement", "life satisfaction," and "lack of negative emotions", including depression and anxiety. They found

that positive relationships with others, purposefulness of life, personality development, loving others and life, are components of happiness. Argyle argues that happiness is a personality trait and considered it to be equivalent to "Stabic Extroversion" in Ising's theory (Argyle and Lu, 1990).

Diener, Suh, Lucas et al. (1999), believe that married people feel happier than those who have never been married or divorced or have lost their spouse. In addition, people who are not yet married but live with their favorite partner, are much happier than those who live alone (Diener, 1989). But in the present society, a number of women are single because of their husband's death, being divorced or imprisoned, and they feel helpless because of social and economic pressures, and in spite of governmental and non-governmental financial support, they often have a limited and painful life. Single women are often faced with harmful factors such

¹M. Psych. Dubai, United Arab Emirates - December 2019, Email: fariba50@gmail.com
Research Supervisor²

as cultural discrimination, lack of proper job opportunities, low literacy, and lack of sustainable income which make them feel as though they are incapable in parenting and controlling their families which cause various problems in their life (Liu, Esteve, & Treviño, 2017). The negative features of these women's life cause a lack of happiness, a decrease in life quality and their psychological well-being.

The nature and structure of well-being is an issue that has long been considered by philosophers and scholars of various scientific disciplines, and has recently been at the center of the attention of positive psychology, the scientific study of optimal human functions (Linley et al., 2009). The concept of psychological well-being is used as the word "health", a general mental concept in psychological researches. Increasing the capacity of positive states and decreasing negative states are defined as optimal well-being. Well-being can be divided into two parts: Subjective Well-being and Psychological-Subjective Well-being, which has two emotional and cognitive components. The emotional component is the balance between positive and negative affections; the cognitive component is judgment about the satisfaction of a person's life (Vitterso, 2011).

Research evidence suggests that people who are happy with their life and experience positive excitements have a high level of psychological well-being. Psychological well-being is defined as an encounter with ontological challenges and an attempt to personal growth, and identified with the six-component Ryff's model. Ryff considers psychological well-being to be an attempt for perfection in realizing the real potential of a person (Ryff, 1989). The dimensions of psychological well-being include self-acceptance (the ability to see and accept their weaknesses

and strengths), positive relationships with others (having close and valuable relationship with important people of life), autonomy (the ability and strength to follow demands and act on the basis of personal principles, even if opposed to customs and social demands), purposeful life (having goals that makes one's life meaningful), personal growth (in this sense, that the potential talents and abilities of the individual will be de facto throughout time and life), and domination to environment (the ability of regulating and managing life's affairs, especially the daily life issues) (Breitbart, Rosenfeld, Pessin et al., 2015). Psychological well-being has a positive impact on life quality (Uysal, Sirgy, Woo et al., 2016). Life quality is a general concept, defined as the individual's satisfaction with life and the circumferential environment, and includes needs, demands, lifestyle preferences and other tangible and intangible factors that affect the comprehensive well-being of individuals (Bisegger, Cloetta, Von Rueden, Abel, 2005). According to the definition of the World Health Organization, life quality is the perception that individuals have about the situation in their lives, cultural background and value system in which they live. Perceptions that relate to their goals, expectations, standards and their interests (Frisch, 2014). According to Calman (1984), life quality is the expansion of hope and wishes that come from the experiences of life. Life quality involves physical, psychological and social dimensions that are limited to the experiences, beliefs, expectations and perceptions of the individual (Heesch, van Gellecum, Burton et al., 2015).

Since single women have a limited and difficult life and often have the responsibility of parenting alone, and on the other hand, the health of the mother affects the child's health, it seems essen-

tial to help these mothers. In this research, inspired by Fordyce's method, a training method was used to make these single women happy, the Fordyce-Dubai Happiness Program, in which twelve cognitive behavioral techniques were taught as follows: 1. Expressing emotions, 2. Increasing optimism and positive thinking, 3. Increasing physical activity, 4. Increasing social relationships, 5. Increasing sincerity, 6. Increasing creativity, 7. Decreasing expectations, 8. Being themselves, 9. Planning and organizing, 10. Living in the present, 11. Avoiding disturbing thoughts, 12. Giving priority to happiness. Therefore, considering the issues discussed in this study, the effect of happiness training on improving the life quality and psychological well-being of single women in Dubai was studied.

Method

Sample: The research method in this experimental study was pre-test and post-test with a control group. The statistical population of this study included all single women covered by the Children's Foundation in Dubai. It should be noted that by the end of 2010, the population of Iranian residents is estimated to be about 400,000 people, and the population of single Iranian women is 75. The statistical sample of this study was 30 single Iranian women living in Dubai who were randomly and simply selected and placed in two experimental and control groups. The subjects' age range was between 20 and 49 years old. The pre-test was performed before the start of the training sessions. The subjects of experimental group had 7 happiness training sessions based on the Fordyce's protocol. Post-test was performed after training sessions and the results were analyzed using covariance analysis in SPSS22 software environment.

The research tools:

World Health Organization Life Quality Questionnaire with 26 Questions (WHOQOL-BREF): The World Health Organization commissioned a group to create a questionnaire for coherence in research and life quality assessment. The result was a questionnaire of life quality with 100 questions (WHOQOL-100). A few years later, a short form was provided for easier use of this questionnaire. World Health Organization Life quality Questionnaire with 26 questions (WHOQOL-BREF) is a questionnaire with 26 questions that measures the overall and general quality of a person's life. This scale was developed by a group of experts of the World Health Organization in 1996, by modification of the items of the 100 question form of this questionnaire. The questionnaire has 4 subscales and a general score, and questions are scored from 1 to 5. These subscales include: physical health (3-4-10-15-16-17-18), mental health (5-6-7-11-19-26), social relationships (20-21-22), health of circumferential environment (8-9-12-13-14-23-25) and a general score. Initially, a raw score is obtained for each subscale, which must be converted to a standard score between 0 and 100 through a formula. A higher score indicates a higher life quality. The reliability of the retest test for the subscales was as follows: physical health 0.77, mental health 0.77, social relationships 0.75, and health of circumferential environment 0.84. Internal consistency was also obtained using Cronbach's Alpha for physical health (0.71), mental health (0.72), social relationships (0.53) and health of circumferential environment (0.79) (Snell, Siegert, Surgenor et al., 2016).

Ryff's Psychological Well-being Questionnaire: This short version (18 questions) of Ryff's psychological well-being scale was designed in the year 1989

and revised in 2002. This version consists of 6 factors. Questions 9, 12 and 18 assess the independence factor; questions 1, 4 and 6 assess the factor of environmental dominance; questions 7, 15 and 17 assess the factor of personal growth; questions 3, 11 and 13 assess the factor of positive relationship with others; questions 5, 14 and 16 assess the factor of purposefulness in life, and questions 2, 8, and 10 assess self-acceptance. The total score of these 6 factors is calculated as the total score of psychological well-being. This is a self-test instrument that is answered in a 6-degree continuum, from "completely agree with" until "completely disagree with" (1-6), with a higher score indicating better psychological well-being. Of all the questions, 10 questions are scored directly and 8 questions are scored in reverse order. The correlation of the short version of the Ryff's psychological well-being scale with the main scale ranged from 0.7 to 0.89 (Chan, Chan, & Sun, 2017).

Results

The sample consisted of 30 single Iranian women who were placed in two experimental and control groups. The age range of the subjects was between 20 and 49 years old. Their education level ranges from illiterate to associate's degree, and the number of children ranges from no children to 5 children, and the type of being single ranges from divorced-abandoned widow to husband in prison.

Table 1: Shows the Average, standard deviations of scores of life quality and psychological well-being and its subscales

Index	Group Membership	Pre-test		Pre-test	
		Average	Standard Deviation	Average	Standard Deviation
Physical Health	Experiment	22.13	3.02	24	2.77
	Control	21	3	20.80	3.02
Mental Health	Experiment	18.20	3.60	19.40	3.39
	Control	18.60	3.18	18.46	3.18
Social Relationships	Experiment	8.20	1.97	8.80	1.56
	Control	9.06	1.62	9	19.69
Health of Circumferential Environment	Experiment	20.60	4.61	22.93	3.76
	Control	20.66	3.94	20.73	3.93
Total Score of Life Quality	Experiment	69.13	5.51	75.13	4.88
	Control	69.33	7.08	69	7.26
Independence	Experiment	10.73	3.23	11.80	2.80
	Control	11.60	2.35	11.46	2.26
Domination to Environment	Experiment	10.40	2.55	11.26	2.40
	Control	10.26	3.05	10.13	3.18
Personal Growth	Experiment	10.66	2.66	11.33	2.55
	Control	11.26	3.59	11.33	3.57
Positive Relationship with others	Experiment	9.93	3.01	11	2.32
	Control	10.53	3.75	10.40	3.73
Purposefulness in Life	Experiment	10.20	2.007	11.06	2.18
	Control	10.33	2.63	10.40	2.64
Self-acceptance	Experiment	9.53	2.79	10.20	2.62
	Control	9.33	2.28	9.53	1.88
Total Score of Psychological Well-being	Experiment	61.46	6.79	66.66	5.70
	Control	63.33	9.52	63.26	9.32

Table 1 presents the average and standard deviation of scores of life quality and psychological well-being and its subscales. According to the table results, the scores of life quality and psychological well-being in the experimental group increased in the post-test phase and in most of the components, the average scores of the experimental group were greater than the average scores of the control group.

For assessing the effectiveness of Fordyce's Happiness Training on life quality and psychological well-being, multiple covariance analysis was used.

Table 2: Shows the Results of multiple covariance analysis of variables of life quality and psychological well-being

Effect		Value	F	Hypothesis df	Sig	Partial Eta Squared	Observed Power
Group	Pillai's Trace	0.97	37.04	10	0.001	0.97	1.00
	Wilks' Lambda	0.024	37.04	10	0.001	0.97	1.00
	Hotelling's Trace	41.16	37.04	10	0.001	0.97	1.00
	Roy's Largest Root	41.16	37.04	10	0.001	0.97	1.00

The results of multiple covariance analysis showed that effectiveness of happiness training of single women on increasing their life quality and their psychological well-being was as high as 0.97 and sample size was also adequate. The value of the efficacy of this method on each of the variables is shown in Table 3.

Table 3: Show The results of covariance analysis in the experimental and control groups after the controlling of the pre-test scores

	Dependent Variable	Type III Sum of Squares	df	Mean Square	F	Sig	Partial Eta Squared	Observed Power
Life Quality	Physical Health	32.03	1	32.03	72.60	0.001	0.80	1
	Mental Health	12.39	1	12.39	169.98	0.001	0.90	1
	Social Relationships	1.90	1	1.90	9.71	0.007	0.33	0.81
	Health of Circumferential Environment	32.21	1	32.21	28.19	0.001	0.61	0.99
Psychological Well-being	Independence	5.55	1	5.55	14.57	0.001	0.44	0.95
	Domination to Environment	2.99	1	2.99	9.22	0.007	0.33	0.81
	Personal Growth	1.32	1	1.32	3.94	0.063	0.18	0.46
	Positive Relationship with others	8.83	1	8.83	15.36	0.001	0.46	0.95
	Purposefulness in Life	6.18	1	6.18	18.40	0.001	0.50	0.98
	Self-acceptance	1.31	1	1.31	3.71	0.070	0.17	0.44