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Effectiveness of cognitive therapy based on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran

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Abstract---The purpose of this research was the effectiveness of cognitive therapy based on mindfulness and psychological capital and mood states of depressed army soldiers in Tehran. For this purpose, the current type of research was considered semi-experimental and of pre-test-post-test type with a control group. The statistical population of the present study included all army sergeants with depressive conditions who referred to the 577th army hospital in Tehran in 1401. Sampling of the research is done in two stages: in the first stage, 50 army secretaries with depression conditions are selected using cluster sampling method (25 people in the experimental group and 25 people in the control group) and with them A call was made, from which, due to the small number of clients, the entire community is selected as a statistical sample. During the research, they were invited to an interview and presented the relevant questionnaires. The obtained results show that the relationship between cognitive therapy,

improving interventions and experimental stance towards reality on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran is direct and significant. The obtained results show that the relationship between cognitive therapy and improving the flexibility of awareness on mindfulness and psychological capital and the mood states of army soldiers with depression in Tehran is direct and significant. The obtained results show that the relationship between cognitive therapy improving non-conceptual awareness and improving the continuity of awareness and paying attention to mindfulness and psychological capital and mood states of army soldiers with depression in Tehran is direct and meaningful.

Keywords---*cognitive-based therapy, mindfulness, psychological capital, mood states, army soldiers, depression*

Introduction

The period of compulsory military service has caused many young people to leave the family and enter a military environment with its own special standards and a less flexible environment, which for some people with vulnerable personalities can cause mental and psychological disorders such as It brought depression and mood disorders such as nervousness and anxiety (Ricky, 2019)

In the field of treating psychological problems of people suffering from depression, various approaches have been used, including drug therapy and combined treatments. In this field, cognitive therapy based on mindfulness has been proposed, which has a significant effect on the treatment and prevention of depression relapse. Mindfulness is one of the ways to reduce mental stress. Mindfulness is a non-judgmental and balanced sense of awareness that helps to clearly see and accept emotions and physical phenomena as they occur. Mindfulness generally refers to cognitive processes during which a mindful person concentrates on experiencing feelings and events that occur in himself or around him at the present moment ((Wike, 2018)

Mindfulness involves adopting a non-judgmental attitude towards personal experiences that are ongoing moment by moment, thus allowing a person to be less reactive and more accepting of these experiences. On the other hand, the lack of mindfulness causes permanent negative self-talk that plays an important role in self-evaluation processes ((Brackett, 2018)

Researches show that the increase in mindfulness has brought various existential consequences, such as reducing mental pressure, anxiety, depression, changing moods, etc. The conducted research seems that mindfulness can improve people's moods through the development and growth of emotional intelligence and by encouraging people to accurately perceive emotions and regulate emotions (Ricky, 2019)

In recent years, mindfulness meditations have been used as an important component in the combination of various interventions for disabilities and distress. Therefore, paying attention to the effectiveness of this type of training and taking into account the benefits of this method in the field of treating depression and increasing the quality of life, it is recommended to use it widely. Cognitive therapy based on mindfulness is a new promise in explaining the approach of cognitive behavioral therapy ((Ricky, 2019), which leads to a new development in the field of psychotherapy in the current century (Ricky, 2019)

Self-awareness includes 1- Transparency, which is the first and most important feature of mindfulness. 2- Non-conceptual awareness without prejudice means not interfering in the process of experience. 3- Flexibility of awareness and attention means voluntary and fluid regulation of awareness and attention. 4- Empirical position to reality, which includes complete processing and reality. 5- Mind - awareness means moment-oriented alertness. 6- Continuity of awareness and attention which can be deep and continuous or superficial and discrete. 7 Mindfulness-based interventions include informal exercises and formal exercises.

In approaches based on presence of mind, depression is accepted as an unavoidable part of life. The aim of these approaches is to create psychological flexibility when thoughts, feelings and behaviors related to depression are present in the patient (Elliot, 2018)

Therefore, the aim of this research is to investigate the effectiveness of cognitive therapy based on mindfulness on the psychological capital of people with acute depression index.

The results of Shian-Ling et al.'s (2020) research indicated that mindfulness can strengthen regulatory processes that act as a shield against mood disorders. Mindfulness training plays an important role in improving important aspects of emotional experience, meaning that it increases the clarity and distinction of emotions and feelings and increases the ability to perceive and regulate emotions. In other words, by increasing the awareness of emotions as they occur, the conscious mind leads to an improvement in the regulation of emotions, which in turn leads to the proper naming of emotions. And respond to them with a receptive and developing positive emotions, and therefore it will improve mood regulation. (Wike, 2018)

Rob's (2021) research on the effectiveness of mindfulness-based cognitive therapy shows that these methods predict a large number of mental health and psychological capital indicators. Nicol (2022), showed that during a survey, the relationship between mindfulness, psychological capital and cognitive therapy was examined among managers of industrial and organizational companies, and the results showed that there is a positive and significant relationship between mindfulness and psychological capital. and people with high mindfulness characteristics who have psychological capital also report creating inappropriate behavior in the work environment.

Mindfulness has three major effects on moods: 1) reducing negative emotion 2) increasing positive emotion 3) changing the way people respond to negative

emotion when it occurs. Jain and colleagues found that participants reported a reduction in overall distress and an increase in positive states of mind after four sessions of mindfulness meditation practice.

Several studies also point out that brief mindfulness interventions are a new way to regulate moods. However, in this study, MBCT could not increase the amount of positive affect. In this regard, different implicit causes can be considered. Firstly, it is always easier and faster to reduce negative moods than to increase positive emotions, perhaps this is the reason why it is always easier to reduce sadness than to increase inner happiness and increase positive emotions. Therefore, the increase of negative emotion may require a longer time and treatment methods more focused on this goal. In addition, we must keep in mind that the sample we examined was heterogeneous and this heterogeneity may also play a role in this. Second, it may be possible to benefit from other treatments based on mindfulness to increase positive emotion more than MBCT. For example, in Kasin et al.'s research, it was determined that the creation of people who used mindfulness strategies, A significant improvement has been found (Hosseinian, 2020). Therefore, more focused research on increasing positive emotions through various types of mindfulness-based treatments can be proposed as a special suggestion of this article.

2- Checking the background of the research

Shian-Ling, (2020), discussed the effectiveness of cognitive therapy based on mindfulness on loneliness and psychological well-being of divorced mothers. For this purpose, 28 divorced mothers who had custody of their children after divorce were randomly selected from a large number of divorced mothers in Shiraz city. After collecting the data, the data was analyzed using SPSS software. The results of the variance analysis of the pre-test and post-test differential scores showed that there was a difference between the experimental group and the control group in the two variables of psychological well-being and feelings of loneliness. There was meaning. As a result, cognitive therapy based on mindfulness significantly reduced the feeling of loneliness and increased the psychological well-being of divorced mothers.

Sarah Frances (2020), discussed the effectiveness of cognitive therapy group therapy based on mindfulness on depression and anxiety of mothers of children with autism spectrum disorder. In the pre-test, post-test and one-month follow-up stages, in order to measure the level of depression and anxiety of mothers, and also to collect data, Beck's anxiety questionnaire and Beck's Depression II were used. The experimental group underwent cognitive therapy group therapy based on mindfulness, during 8 sessions of 120 minutes, and the control group did not receive any treatment. Multivariate analysis of covariance was used to analyze the data. The results of the research showed that in the post-test and follow-up phase, depression and anxiety scores in the experimental group decreased significantly after the intervention. Therefore, the results of this research emphasize the importance of using this intervention in the treatment of depression and anxiety of mothers of children with autism spectrum disorder and providing new horizons in the clinical interventions of these people.

Isaac Rahimian, (2020), investigated the effectiveness of cognitive therapy based on mindfulness on students' creativity. To determine the sample size, 70 people were randomly selected from the available sampling method and divided into two groups of 35 silver (test and reference). The reliability of fluidity, innovation, flexibility, and extension obtained through retesting were reported as 0.85, 0.82, 0.84, and 0.80, respectively. Findings: The findings indicated that that cognitive therapy training based on mindfulness has a positive and significant effect on students' creativity level (0.000) and its component which includes fluidity (0.000), expansion (0.001), initiative (0.000), flexibility (0.000) 012). Conclusion: Students who are taught with new methods show higher creativity.

Anghel (2019). The effect of cognitive therapy based on mindfulness on the quality of life of depressed people (non-clinical). Objective: The aim of this research is to investigate the effect of cognitive therapy based on mindfulness on increasing the quality of life in depressed non-patients. Method: In this research, the test-retest semi-experimental method was used for two experimental and control groups. became. Multivariate analysis of variance and Pearson's correlation test were used to test the research hypotheses, and independent t-test was used to evaluate the treatment effect. Results: The findings show that cognitive therapy based on mindfulness increases the quality of life and reduces depression. Summary: It seems that cognitive therapy exercises based on mindfulness by increasing people's awareness of the present moment through techniques such as paying attention to breathing and the body, and paying attention to the here and now, on the cognitive system and information processing. It has an effect. Therefore, due to the effectiveness of this type of training and taking into account the benefits of this method in the field of treating depression and increasing the quality of life, its widespread use is recommended.

Griffin, (2019), addressed the effectiveness of mindfulness-based stress reduction in the intensity of fatigue, and the intensity of fatigue questionnaire was used as a tool. Analysis of variance of repeated measurements with mixed design was used to analyze the data. The sampling formula based on G-POWER included effect size and statistical power of the test. Findings: The results of the univariate test on the effect of time showed that the effect of time on fatigue was significant ($F = 59.82$, P

Xian-Ling Kong, (2021), addressed the effects of mindfulness on psychological health: a review of empirical studies. The results showed that mindfulness has various positive psychological effects, including increasing mental well-being, reducing psychological symptoms and emotional reactions, and regulating better behavior. The review concludes with a discussion of the mechanisms of change of mindfulness interventions and suggested directions for future research.

Huffman (2018), addressed the study protocol for a randomized controlled trial to investigate the effectiveness of an 8-week mindfulness-based cognitive behavioral intervention (MiCBT) for primary care patients. The aim of this study is to investigate whether and how group MiCBT reduces symptoms of depression and anxiety for patients with a range of mental health conditions. Participants ($n = 120$) recruited through physician referrals were randomized to MiCBT or a waitlist control. The criteria for entering the study are 18 to 75 years. Proficient in

English and having a Kessler psychological distress score (K10) of 20 or more. The MiCBT treatment group received an 8-week MiCBT intervention in a private psychology practice. Participants complete a series of online self-report measures and record the amount of meditation practice each week. The control group receives the usual treatment and performs the measures at the same time. Primary outcome measures are Depression Anxiety Stress Scale-21 (DASS-21) and K10. The analysis uses a repeated measures mixed model. The potential ability of MiCBT to provide a comprehensive treatment system applicable across diagnostic groups makes it an additional attraction to existing MBIs.

3- Examining research hypotheses

The main hypothesis

Cognitive therapy based on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran is effective.

Sub-hypotheses

1-Cognitive therapy is effective in improving non-conceptual awareness and improving continuity of awareness and attention on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran.

2-Cognitive therapy is effective in improving the flexibility of consciousness on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran.

3-Cognitive therapy, improving interventions and experimental stance to reality is effective on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran.

4- Research method

The current type of research is semi-experimental and of pre-test-post-test type with a control group. The statistical population of the current study includes all the army sergeants with depressive conditions who referred to the 577th army hospital in Tehran in 1401.

Sampling of the research is done in two stages: in the first stage, 50 army secretaries with depression conditions are selected using cluster sampling method (25 people in the experimental group and 25 people in the control group) and with them A call is made, from which, due to the small number of clients, the entire community is selected as a statistical sample. During the research, they are invited to an interview and submit relevant questionnaires.

Therefore, a structured interview based on DSM-IV is conducted individually with each of these people. This interview is arranged according to the structured interview (SCID) and the inclusion criteria are examined.

The entry and exit criteria in this study are as follows:

Inclusion criteria

- 1- Current military service period, male gender, age range 18-24 years
- 2- Not receiving psychiatric drug treatments, psychological treatments or counseling in the last one year
- 3- Absence of psychological disorders (which is determined based on a diagnostic interview).

Exit criteria:

- 1- Determining that people are not soldiers, the age range is less than 18 years and more than 24 years,
- 2- Receiving psychiatric, psychological or counseling drug treatments in the last one year
- 3- Suffering from psychological disorders (which was determined based on a diagnostic interview)

Two experimental (11 people) and control (9 people) groups were formed among the people who have inclusion criteria and are ready to cooperate in the research. The tools used in this research are as follows:

Mood-Positive and Negative Affect Scales (PANAS): PANAS is a self-report instrument developed in 1988 by Watson et al. This scale is made of 20 statements, 10 of which evaluate positive emotions and the other 10 evaluate negative emotions. The grading is in the range of 0 to 5 degrees. Regarding concurrent validity, the results of Mohammadi et al.'s research show that negative affect with depression and anxiety subscales have correlation coefficients of 0.67 and 0.56, respectively, and positive affect has correlation coefficients with subscales. Depression and anxiety scores were -0.32 and -0.40, respectively. The amount of Cronbach's alpha index also varied between 0.82 and 0.88 for two forms of state and trait of mood scales (22). In this research, the positive emotion scale was used to examine the positive emotion of the subjects, and the negative emotion scale was used to measure the negative emotion.

Beck Depression Questionnaire II: This questionnaire includes 21 groups of sentences that measure the physical, behavioral and cognitive symptoms of depression. Each group has 4 options that are scored on the basis of zero to three and determine different degrees of depression from mild to severe. The maximum score in this questionnaire is 63 and the minimum score is zero. In Fathi Ashtiani's research (2013); It was found that its reliability coefficient varied from 0.48 to 0.86 according to the distance between the times of implementation and the type of population tested using the retest method. In the research of Saidi (2010) et al., the reliability of this scale was analyzed using Kornbach's alpha method and retesting with a time interval of one week, and its correlation coefficients were obtained as 0.72 and 0.85, respectively. Its validity was obtained through construct validity and with the convergent validity method and

simultaneous implementation with the revised scale of Hamilton's psychiatric rating for depression, and its correlation was 0.74.

Demographic information form: This form contains the general and basic information of the participants, which is set by the researcher.

Mindfulness-based stress reduction treatment program (MBCT): Mindfulness-based stress reduction treatment program, in its usual form, includes 8 weekly sessions of 2-2.5 hours. The topics presented in the group sessions of this research include automatic guidance, facing obstacles, mindfulness of breathing and body, staying in the present, acceptance, thoughts are not true, how can I take care of myself in the best way, and acceptance and change. Considerable time is devoted to doing mindfulness exercises and discussing the members' experiences from them, a wide range of mindfulness exercises is learned. and in most meetings, educational information is presented. These meetings were conducted by me (the responsible author).

Table 1. Description of cognitive therapy sessions based on mindfulness (Sarah Frances, 2020)

Cognitive behavioral therapy sessions

Cognitive behavioral therapy can be done with a therapist individually or in groups with people who have a similar situation. If you do individual cognitive behavioral therapy, sessions usually last between 5 and 20 weekly or biweekly sessions with a therapist. Each session lasts 30 to 60 minutes. Cognitive behavioral therapy sessions are usually held once a week or every 2 weeks with a therapist.

The effective factors in the individual's treatment process that are taken into consideration during the sessions are:

Severity of symptoms

The amount of stress

Duration of symptoms

Individual progress during sessions

The type of disorder or medical condition of the person

Support of your family members and those around you

During the sessions, the person, in collaboration with his therapist, divides and analyzes his problems into separate parts, such as thoughts, physical feelings and behaviors, so that if they are unrealistic or unhelpful, they are evaluated and their impact on each other. and even specific to the individual.

First sessions

In the first few sessions, the therapist will ask questions about the person's life and medical and family history, and it is mostly done to evaluate the person so that the therapist can make sure whether you are a good candidate for cognitive behavioral therapy or not. If the person is anxious or depressed, the therapist checks whether these factors have caused disruption in family relationships, work and social life of the person or not. If the person's therapist determines that this treatment method will be useful for the person, they will explain the entire treatment process to the person, otherwise they can suggest alternative treatment methods.

Next sessions

After the initial assessment period, the individual will work with your therapist to break down their problems into smaller details. For this purpose, the therapist asks the person to review and remember his memories and write down his thought and behavioral patterns. The individual's therapist will be able to help the individual determine how to change unhelpful thoughts and behaviors. After specifying the behavior and mindsets that the person needs to change, the psychotherapist asks the person to practice these changes in their daily life.

In this research, descriptive statistics (mean and standard deviation), Yeoman-Whitney inferential statistics, Wilcoxon test, and SPSS software are used for data analysis.

5- Analysis of findings

Analysis as a process of scientific method is one of the basic foundations of any research method. In this chapter, the information collected from the statistical sample of the research has been analyzed and statistical conclusions have been drawn regarding the proposed hypotheses.

The data obtained from this research is analyzed using SPSS software version 21 and the research report is presented in the form of descriptive and inferential analysis. In this chapter, the analysis of the collected research data has been done in two general parts and the findings are presented in the following two parts:

A) Descriptive findings including the number of samples, average, standard deviation, lowest and highest scores of the participants in the studied variables.

A) Descriptive findings

Table - Descriptive findings related to research variables

Maximum score	Minimum score	standard deviation	Average	Number	variables
336	103	58.837	201.10	Sample	Research
45	9	5.417	41.80	50	Cognitive therapy based on mindfulness
61	16	7.234	51.70	50	Mindfulness
24	6	3.525	18.16	50	Psychological capital
24	5	4.292	13.48	50	moods

Table 1- Sample number, total mean, standard deviation, minimum score and maximum score of the subjects in the variables of cognitive therapy based on mindfulness, mindfulness, psychological capital, mood states, depression and cognitive therapy based on mindfulness. ; shows

Estimation of the regression model

Gratation coefficients	F P	R ²	R	independent variable	The dependent variables
B:11.197 β :17.102 t:6.54 P:0.000	5.23 0.000	11.192	4.715	Cognitive therapy based on mindfulness	depression
B:5.304 β :3.162 t:6.16 P:0.000	11.65 0.000	7.163	3.593	Cognitive therapy based on mindfulness	Psychological capital
B:4.93 β :4.17 t:5.25 P:0.000	9.23 0.000	10.78	4.11	Cognitive therapy based on mindfulness	moods

Based on the results obtained from the table above, it can be concluded that cognitive therapy based on mindfulness has an effect on cognitive therapy based on mindfulness with a regression coefficient ($R=4.715$) at a significant level

(0.000) and this scheme It has had an effective role on cognitive therapy based on content mindfulness of army soldiers with depression in Tehran.

Based on the results obtained from the table above, it can be concluded that psychological capital with regression coefficient ($R=3.593$) at a significant level (0.000) has an effect on cognitive therapy based on mindfulness and this schema has an effective role on On cognitive therapy based on content mindfulness of army soldiers with depression in Tehran.

Based on the results obtained from the above table, it can be concluded that mood states with regression coefficient ($R=4.11$) at a significant level (0.000) have an effect on cognitive therapy based on mindfulness and this schema has an effective role on Cognitive therapy based on content mindfulness of army soldiers with depression in Tehran.

6- Inferential findings

6-1-First hypothesis test

1-Cognitive therapy is effective in improving non-conceptual awareness and improving continuity of awareness and attention on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran. Table 1- The relationship between cognitive therapy improving non-conceptual awareness and improving the continuity of awareness and paying attention to mindfulness and psychological capital and mood states of army soldiers with depression in Tehran (experimental group)

significance level (sig)	Regression (R)	number of samples	group	The names of the variables
0.000	-1.084	25	examination Group	Cognitive therapy improves non-conceptual awareness and improves the continuity of awareness and attention
				Mindfulness and psychological capital and mood states of army soldiers
0.787	25	25	Control	

According to the values in table (1), it can be seen:

Experimental group: Correlation of cognitive therapy improvement of non-conceptual awareness and improvement of continuity of awareness and attention and psychological capital and mood states of army soldiers: $\text{sig}=0.000=r=1.084$

Control group: Correlation of cognitive therapy improvement of non-conceptual awareness and improvement of continuity of awareness and attention and psychological capital and mood states of army soldiers: $r=0.787$ sig 17.11

The obtained results show that the relationship between cognitive therapy improving non-conceptual awareness and improving the continuity of awareness

and paying attention to mindfulness and psychological capital and mood states of army soldiers with depression in Tehran is direct and meaningful.

6-2-Test of the second hypothesis

2-Cognitive therapy is effective in improving the flexibility of consciousness on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran.

Table 2- The relationship between cognitive therapy and improving the flexibility of awareness on mindfulness and psychological capital and the mood states of army soldiers with depression in Tehran (experimental group)

significance level (sig)	Regression (R)	number of samples	group	The names of the variables
0.000	0.223	25	examination Group	Cognitive therapy improves the flexibility of awareness on mindfulness
				Mindfulness and psychological capital and mood states of army soldiers
0.177	11.97	25	Control	

According to the values in table (1), it can be seen:

Experimental group: Correlation of cognitive therapy improving the flexibility of awareness on mindfulness and psychological capital and mood states of soldiers: sig=0.000 r=0.223

Control group: Correlation of cognitive therapy improving the flexibility of awareness on mindfulness and psychological capital and mood states of soldiers: sig=0.177 r=11.197

The obtained results show that the relationship between cognitive therapy and improving the flexibility of awareness on mindfulness and psychological capital and the mood states of army soldiers with depression in Tehran is direct and significant.

6-3-Test of the third hypothesis

3- Cognitive therapy, improving interventions and experimental stance to reality is effective on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran.

Table 3- The relationship between cognitive therapy, improving interventions and experimental approach to reality on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran (experimental group)

significance level (sig)	Regression (R)	number of samples	group	The names of the variables
0.000	1.329	25	examination Group	Cognitive therapy to improve interventions and empirical position to reality
				Mindfulness and psychological capital and mood states of army soldiers
1.37	17.981	25	Control	

According to the values in table (1), it can be seen:

Experimental group: Correlation of cognitive therapy improvement interventions and experimental stance to reality on mindfulness and psychological capital and mood states of depressed army soldiers: $r=1.329$ $\text{sig}=0.000$

Control group: Correlation of cognitive therapy improvement interventions and experimental stance to reality on mindfulness and psychological capital and mood states of depressed army soldiers: $r=17.981$ $\text{sig}=1.37$

The obtained results show that the relationship between cognitive therapy, improving interventions and experimental stance towards reality on mindfulness and psychological capital and mood states of army soldiers with depression in Tehran is direct and significant.

7-Result

According to the obtained results, it shows that the relationship between mood and avoidance states with cognitive therapy based on mindfulness in army soldiers with depression in Tehran is direct, which means that as the level of mindfulness and avoidance increases, the degree of tendency towards cognitive criteria increases. Mindfulness-based therapy is also on the rise.

According to the obtained results, the obtained results show that the relationship between mood states and cognitive therapy based on mindfulness in army soldiers with depression in Tehran is direct (significant). This means that as the amount of mindfulness and avoidance increases, the tendency towards cognitive therapy based on mindfulness also decreases. But the relationship between cognitive therapy based on mindfulness and cognitive therapy based on mindfulness in army soldiers with depression in Tehran is direct (significant). The obtained results show that there is an indirect and non-significant relationship between depression and mindfulness in army soldiers with depression in Tehran.

8-Research limitations

- The sample of this research was army soldiers with depression in Tehran city, so the generalization of the results of this research to other sections of the society should be observed with caution.

- This research was conducted only on girls, therefore, caution should be taken to generalize the findings.
- According to the sample selection method that has been available, the generalization of the research results should be done with caution.
- The sample size of the army soldiers with depression in Tehran studied in this research was small.

9-Research proposals

- The use of more comprehensive samples that can include a wider community can give more reliable and reliable results.
- It is suggested that these findings be implemented in order to investigate the relationship between positive psychology and schemas with cognitive therapy based on mindfulness in the group of boys.
- It is suggested to use other random sampling methods in future research to select the sample and increase the generalizability of the findings.
- It is suggested that these variables be implemented in the group of couples.
- It is suggested to use newer tools in future researches.

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