

Comparison of the Effectiveness of Positive Thinking Therapy and Dialectical Behavior Therapy on Behavioral Modification and Management, Self-Awareness, and Meaning-Making in the Lives of Vulnerable Adolescents Covered by Welfare Services in Tehran

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ABSTRACT

The purpose of this study was to compare the effectiveness of Positive Thinking Therapy and Dialectical Behavior Therapy (DBT) on behavioral modification and management, self-awareness, and meaning-making in the lives of vulnerable adolescents covered by welfare services in Tehran. The statistical population of this study included all vulnerable adolescents (aged 12 to 18 years), including runaway adolescents, those with addicted or poorly supervised parents, and orphans, who were covered by the Welfare Organization in Tehran in 2021. The sampling method used in this research was convenience sampling with a screening approach. The intervention groups consisted of two groups: 20 participants in the Positive Thinking Therapy group, 20 participants in the Dialectical Behavior Therapy (DBT) group, and 20 participants in the control group. This study is semi-experimental, with a pre-test and post-test design, including a control group, implemented using a screening method. After randomly assigning the sample to the two experimental groups and the control group, a pre-test was administered to both groups. Then, Positive Thinking Therapy was delivered in 15 sessions, and DBT was delivered to the second experimental group in 15 sessions, with each session lasting 90 minutes. Finally, all three groups were measured in the post-test. Additionally, a follow-up was conducted one month after the intervention. The research tools used for data collection included the Meaning in Life Questionnaire (Li & Li, 2019), Cattell's Self-Awareness Inventory (1998), and a researcher-developed Behavioral Modification and Management Questionnaire (Mollai, 2022). Descriptive and inferential statistical methods were used for data analysis. The findings revealed that there were significant differences in the effectiveness of Positive Thinking Therapy and DBT on the behavioral modification and management of vulnerable adolescents covered by welfare services in Tehran ($p < 0.01$). Furthermore, the results indicated that there were significant differences

between the effectiveness of Positive Thinking Therapy and DBT on the self-awareness of vulnerable adolescents ($p < 0.01$). There were also significant differences in the effectiveness of Positive Thinking Therapy and DBT on meaning-making in the lives of vulnerable adolescents covered by welfare services in Tehran ($p < 0.01$).

Keywords: *Positive Thinking Therapy, Dialectical Behavior Therapy, Behavioral Modification and Management, Self-Awareness, Meaning-Making, Adolescents.*

1. Introduction

Adolescents are the most vulnerable group to engage in risky behaviors, and due to the developmental characteristics of this period, they are more likely than other age groups to engage in behaviors that threaten their present or future well-being (Wangsa, 2024). One of the significant challenges during adolescence is self-awareness. Self-awareness is a foundational element of psychological balance and strength, which determines an individual's life achievements, motivates them to strive, and brings them closer to a higher level of psychological and behavioral performance (Mohkamkar et al., 2024). In general, the issue of self-awareness and the related factors and consequences are highly important for adolescents' social and psychological health because achieving future goals, plans, and dreams occurs in the future. Therefore, how adolescents envision their future is a crucial factor in their motivation, movement, and growth throughout life (Fateri & Abdi, 2023). On the other hand, adolescents must master the correction and management of their behavior (Seifi, 2022; Thaintheerasombat & Chookhampaeng, 2022).

An individual who feels capable of controlling their life is able to manage stress and negative emotions, perceives life conditions as changeable, and is thus inclined to live because they see their future positively (Kaya et al., 2023). Therefore, adolescents should be assisted in enhancing their ability to manage life's tensions, particularly those associated with this developmental stage. In fact, adolescents must feel that events are understandable, manageable, and meaningful in order to eventually increase their sense of cohesion and, through this, their hope for the future (Kaya et al., 2023).

One of the factors influencing the mental health of adolescents is their self-awareness. Adolescents and young people who, in the prime of their lives, become interested in the essential issue of self-awareness and take steps in this direction should consider this inclination the beginning of their spiritual and intellectual development. They should be

aware that self-awareness, in addition to being a precursor to the recognition of God, also lays the foundation for growth and self-improvement. Furthermore, in adolescence, the process of meaning-making in life holds great importance. Various studies on the meaning of life, its sources, and dimensions have often overlooked adolescence; however, the emergence of meaning can indeed be traced in this stage of development, coinciding with the formation of the individual's identity. It can be stated that during this period of identity formation, meaning-making in life is vital and necessary, because before an individual seeks a vision of themselves, their goals, and the meaning of their life, they must first understand who they are and have a definition of themselves. In other words, the most significant developmental tasks in these formative years can be considered as forming a personal worldview alongside the development of identity (Cusullo & Castro-Solano, 2001).

The turbulent adolescence period is marked by rebellion, defiance, and intense, fleeting emotional and affective upheavals (Seligman, 2003; Wenzel et al., 2009). Therefore, identifying methods that can impact these factors is of high importance. One such effective approach is positive psychology. Over the past decade, positive psychology has become one of the major trends in the field of psychology, rapidly gaining a strong position within this discipline. The speed at which this approach has transformed into a practical, evidence-based framework is unparalleled by any other psychological trend. This rapid development is especially noticeable in the methods and interventions created and employed within positive psychology. Positive interventions aim to enhance life quality, life satisfaction, happiness, joy, and subjective well-being, and in short, happiness (Ambler, 2007; Catalano et al., 2002; Seligman, 2003).

Positive psychology, which originally focused on studying human strengths, also addresses the identification of factors that enhance mental health during adolescence. Some of the abilities that relate to human character and nature are psychological in nature and help an individual

perceive potential threats to mental health as less threatening, or manage their reactions to such events (Seligman, 2003). Positive psychology is defined as the science of living happily. The medical model focuses on repairing damage, while positive psychology emphasizes that psychology should not merely replicate this medical model. Psychology should not focus solely on bringing a person from negative to zero, but must also plan for moving from zero upwards. In fact, the mission of psychology is not just to reduce negative emotions but also to increase positive emotions. To enable an individual to move upwards, they must learn the science of living happily, even though there may be obstacles such as hereditary or personality factors (Sobhi-Gharamaleki & Rajabi, 2011).

Numerous studies have emphasized the influential role of positive psychology in self-awareness and behavior management during adolescence. Additionally, Dialectical Behavior Therapy (DBT) can significantly assist in meaning-making for vulnerable adolescents. DBT is a form of cognitive-based psychotherapy that posits that certain individuals react more intensely and outside the norm to emotional situations, especially in romantic, familial, and social relationships. According to DBT theory, some people become emotionally triggered much more quickly than others in such situations, which leads to a greater activation of emotional stimuli and requires much more time for them to return to normal. Multiple studies have reported the impact of DBT on meaning-making in the lives of adolescents (Sheikh et al., 2021; Tabatabayi et al., 2021). Marshall's (2010) research on suicidal thoughts and meaning-making in life among runaway adolescents in the United Kingdom found that those who underwent DBT showed fewer signs of suicidal actions and self-harm, and reported higher levels of meaning-making in life (Beckstead et al., 2015). Based on the topic of this study, the primary research question is: Do interventions based on positive thinking therapy and dialectical behavior therapy have an effect on behavioral modification and management, self-awareness, and meaning-making in the lives of vulnerable adolescents covered by welfare services in Tehran?

2. Methods and Materials

2.1. Study Design and Participants

This study is a semi-experimental research and was conducted using a pre-test and post-test design with a control group through screening. The design includes a pre-test followed by a post-test with a control group. The statistical

population in this research consisted of all vulnerable adolescents (runaway adolescents, those with addicted and negligent parents, and orphaned adolescents under the care of the Welfare Organization in Tehran) between the ages of 12 and 18 in 2021. The sampling method used was convenience sampling, and screening was performed. To determine the number of participants representative of the statistical population, 60 individuals were selected, divided into three groups: 20 participants in the Positive Psychology Treatment group, 20 in the Dialectical Behavior Therapy group, and 20 in the control group.

Inclusion criteria for this study were being between 12 and 18 years old, male or female gender, experiencing vulnerabilities such as running away from home, having an addicted or negligent parent, or being orphaned, being under the care of the Welfare Organization of Tehran, and literacy in reading and writing. Exclusion criteria included illiteracy, addiction, absence from more than two sessions, severe mood and behavioral disorders, disability, and having inappropriate behaviors for participation in group therapy sessions.

In this study, after randomly assigning the sample to the first experimental group, second experimental group, and control group, a pre-test was conducted for both experimental groups. Then, Positive Psychology sessions (15 sessions, each lasting 90 minutes) were conducted with the first experimental group, and Dialectical Behavior Therapy sessions (15 sessions, each lasting 90 minutes) were conducted with the second experimental group. Finally, all three groups were assessed in the post-test. Additionally, a one-month follow-up period was carried out. To adhere to ethical principles, after the intervention sessions for the experimental groups, the treatment sessions were also initiated for the control group participants.

2.2. Measures

2.2.1. Meaning of Life

This questionnaire was designed by Li and Li in 2019. It consists of 15 items that assess the meaning of life among adolescents and young adults. The validity (using factor analysis, convergent, and divergent validity) and reliability (through test-retest and Cronbach's alpha) of the scale were confirmed by the test developers in different groups (normal and at-risk). Reliability was assessed using Cronbach's alpha, and validity was determined via factor analysis. The reliability coefficient of the scale was reported to be 0.93, which is consistent with the reliability reported by the test

developers. The results of factor analysis using principal component analysis revealed one general factor in the scale. The extraction criteria for factors were a scree plot and eigenvalues greater than one. The KMO index was 0.91, and Bartlett's test of sphericity was 2174, which was statistically significant at $p < 0.0001$, indicating the adequacy of the sampling questions and correlation matrix. These results align with other studies that examined the reliability and validity of this scale. The subscale used had a Cronbach's alpha of 0.93, and Asgari, Hassanzadeh, and Asgari Ebrahimabad (2020) reported a Cronbach's alpha of 0.89 (Izadi et al., 2024).

2.2.2. Behavior Modification and Management

This questionnaire consists of 20 items that assess the modification and management of behavior among adolescents. The items were developed using a multi-point Likert scale. To determine its validity, content validity was used. The questionnaires were provided to experts for validation, and the items were reviewed for relevance. For the reliability of the questionnaire, a test-retest method was employed. The reliability was measured by administering the questionnaire to 10 vulnerable adolescents in Tehran, followed by re-administration after 10 days. The Cronbach's alpha coefficient was 0.75, indicating an acceptable level of reliability (Salza et al., 2020; Ugli et al., 2024).

2.2.3. Self-Awareness

Cattell's Self-Awareness Questionnaire was introduced in 1998. This questionnaire contains 43 items that evaluate the level of self-concept in individuals. The scoring system uses a 5-point Likert scale, ranging from strongly agree to strongly disagree. The scale's items are scored using a Likert method, and some items are reverse-scored. Its reliability and validity were confirmed by Weir et al. (2016), with a reliability coefficient of 0.81. Furthermore, its reliability and validity have been verified in the Iranian population, with internal consistency coefficients of the three subscales ranging from 0.70 to 0.85, and test-retest reliability coefficients ranging from 0.43 to 0.79 after a one-week interval (Shasizadeh et al., 2022).

2.3. Interventions

2.3.1. Positive Psychology Therapy

Positive Psychology Therapy is rooted in the principles of fostering positive emotions, building resilience, and

enhancing well-being. The intervention focused on developing participants' strengths, promoting optimism, and finding meaning in life. Through a series of interactive and reflective exercises, the therapy aimed to help adolescents recognize their potential, overcome adversity, and increase their overall happiness and sense of purpose.

Session 1: Orientation and Goal Setting

The session began with an introduction to the therapy, its goals, and expected outcomes. Participants shared personal goals and identified areas they wanted to improve, such as managing emotions or building self-awareness. The session concluded with a discussion on the importance of focusing on personal strengths.

Session 2: Identifying Strengths

Participants completed exercises to identify their core strengths, using a strengths inventory and group discussions. Emphasis was placed on recognizing how these strengths could be applied in daily life and during challenging situations.

Session 3: Gratitude and Appreciation

This session explored the concept of gratitude. Participants practiced gratitude journaling, writing about three things they were thankful for each day. They shared their experiences and discussed the impact of gratitude on their well-being.

Session 4: Cultivating Optimism

Through storytelling and role-playing, participants learned techniques to reframe negative thoughts and cultivate optimism. Exercises included imagining and writing about a positive future.

Session 5: Building Resilience

The session focused on developing resilience through strategies like self-compassion and learning from past challenges. Participants reflected on moments when they overcame difficulties and discussed lessons learned.

Session 6: Mindfulness and Positive Emotions

Participants were introduced to mindfulness techniques, such as deep breathing and meditation, to enhance present-moment awareness and foster positive emotions.

Session 7: Meaning-Making in Life

The session explored the concept of finding meaning in life. Participants reflected on their values, goals, and purpose, discussing ways to align their actions with their aspirations.

Session 8: Enhancing Relationships

Focusing on social connections, participants discussed the role of relationships in well-being. Activities included

identifying supportive people in their lives and practicing active listening.

Session 9: Acts of Kindness

Participants engaged in planning and performing small acts of kindness in their daily lives. They shared their experiences and discussed how these acts influenced their sense of fulfillment.

Session 10: Overcoming Challenges

Participants identified challenges they were currently facing and brainstormed positive strategies to address these issues, using their strengths and resilience.

Session 11: Self-Compassion

This session emphasized the importance of being kind to oneself. Participants practiced self-compassion exercises and learned how to manage self-critical thoughts.

Session 12: Visualization and Goal Setting

Participants practiced visualization techniques to imagine achieving their goals. They set actionable steps to move closer to their desired outcomes.

Session 13: Positive Habits

The session focused on building positive daily habits, such as maintaining a gratitude journal or practicing mindfulness.

Session 14: Reflection and Growth

Participants reflected on their journey through the therapy, highlighting their progress and areas where they experienced growth.

Session 15: Closure and Future Planning

The final session involved reviewing the tools and skills learned, creating a plan for continued personal growth, and celebrating their achievements during the program.

2.3.2. *Dialectical Behavior Therapy*

DBT is a cognitive-behavioral approach aimed at helping individuals regulate emotions, improve interpersonal relationships, and find meaning in life. The intervention targeted emotional dysregulation and maladaptive behaviors through mindfulness, distress tolerance, emotional regulation, and interpersonal effectiveness. The sessions were structured to build practical skills applicable to real-life situations.

Session 1: Introduction to DBT and Group Rules

Participants were introduced to the principles of DBT, group rules, and expectations. The importance of mindfulness and emotional regulation was discussed as foundational skills.

Session 2: Mindfulness Basics

The session focused on mindfulness techniques, including observing thoughts without judgment and practicing present-moment awareness. Activities included guided meditation.

Session 3: Understanding Emotions

Participants explored the purpose of emotions, identifying common triggers, and recognizing emotional patterns. Techniques for managing intense emotions were introduced.

Session 4: Distress Tolerance Skills (Part 1)

This session introduced distress tolerance techniques, such as distraction, self-soothing, and radical acceptance, for coping with crises without resorting to harmful behaviors.

Session 5: Distress Tolerance Skills (Part 2)

Building on the previous session, participants practiced applying distress tolerance skills through role-playing and group discussions.

Session 6: Emotional Regulation Skills (Part 1)

Participants learned techniques to identify and label emotions, as well as strategies to reduce emotional vulnerability and increase positive emotions.

Session 7: Emotional Regulation Skills (Part 2)

This session focused on applying emotional regulation strategies in daily life. Activities included identifying and planning for situations that could trigger intense emotions.

Session 8: Interpersonal Effectiveness (Part 1)

Participants learned skills for effective communication, such as assertiveness, setting boundaries, and resolving conflicts.

Session 9: Interpersonal Effectiveness (Part 2)

Building on the previous session, participants practiced these skills through role-playing and feedback.

Session 10: Validation and Self-Validation

The session emphasized validating one's own emotions and experiences, as well as validating others. Participants practiced self-validation techniques.

Session 11: Building a Life Worth Living

Participants explored the concept of a "life worth living" and identified actions aligned with their values to create a meaningful life.

Session 12: Problem-Solving Skills

This session focused on structured problem-solving strategies to address real-life challenges effectively.

Session 13: Combining Skills

Participants practiced integrating all the DBT skills learned in previous sessions to handle complex situations.

Session 14: Reflection and Application

Participants reflected on their progress, discussed barriers they encountered, and identified ways to maintain and apply their skills.

Session 15: Closure and Future Planning

The final session included reviewing the learned skills, setting goals for continued growth, and celebrating the participants' efforts and achievements.

2.4. Data Analysis

In the descriptive statistics section, frequency distribution tables and standard deviations were presented. At the inferential level, the Shapiro-Wilk test was used to assess

normality, Levene's test for homogeneity of variances, and mixed-design analysis of variance was employed to test the hypotheses. Post-hoc Bonferroni tests were used to examine the impact of each of the provided protocols for the experimental groups. The research data were analyzed using SPSS software.

3. Findings and Results

The descriptive findings related to the research variables, broken down by groups and research stages, are presented in [Table 1](#).

Table 1

Mean and Standard Deviation of Pretest and Posttest Scores for the Research Variables by Group

Variable	Group	Pretest Mean	Pretest Standard Deviation	Posttest Mean	Posttest Standard Deviation	Follow-up Mean	Follow-up Standard Deviation
Behavioral Modification and Management	Positive Psychology Therapy	35.82	4.6	36.67	3.97	38.04	3.59
	Dialectical Behavior Therapy	33.65	5.1	36.53	3.41	37.57	2.46
	Control	33.6	3.8	32.07	3.41	32.33	3.01
Self-awareness	Positive Psychology Therapy	43.36	3.06	59.18	2.87	57.45	2.84
	Dialectical Behavior Therapy	42.56	2.88	49.78	2.15	48.47	1.64
	Control	43.6	1.95	43.27	1.79	43.4	1.55
Meaning of Life	Positive Psychology Therapy	32.45	2.84	48.63	1.86	47.64	1.78
	Dialectical Behavior Therapy	31.08	2.62	39.82	1.92	38.87	1.63
	Control	34.2	2.11	33.55	1.65	32.93	1.58

The null hypothesis for the normal distribution of scores across the three groups in the pretest for all research variables was confirmed ($P < 0.05$). Similarly, in the posttest phase, the normality assumption was confirmed for all research variables across the three groups ($P < 0.05$). This assumption was also validated in the follow-up phase for all research variables ($P < 0.05$). To investigate this research question, the effectiveness of the two independent variables (Positive Psychology Therapy and Dialectical Behavior

Therapy) on the total score of behavioral modification and management, self-awareness, and meaning of life in vulnerable adolescents was examined. Initially, the assumption of data sphericity, which is a specific assumption in mixed ANOVA, was tested. The results of Mauchly's test indicate that the assumption of sphericity for the research variables—behavioral modification and management, self-awareness, and meaning of life in vulnerable adolescents—was met.

Table 2

Mixed-Design ANOVA Results for Examining the Within-Group and Between-Group Effects of Positive Psychology Therapy and Dialectical Behavior Therapy on Behavioral Modification and Management, Self-awareness, and Meaning of Life in Vulnerable Adolescents

Variable	Source of Change	Sum of Squares	Degrees of Freedom	Mean Squares	F-value	P-value	Effect Size
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Behavioral Modification and Management	Time	101.65	2	50.82	21.17	0.0001	0.32
	Group Membership	756	1	756	17.13	0.0001	0.34
	Time × Group Interaction	193.57	2	96.78	40.32	0.0001	0.45
	Error	230.44	96	2.40			
Self-awareness	Time	128.98	2	30.29	19.16	0.0001	0.28
	Group Membership	303.97	1	303.97	14.47	0.001	0.29
	Time × Group Interaction	128.98	2	64.49	40.80	0.0001	0.45
	Error	151.72	96	1.58			
Meaning of Life	Time	118.76	2	59.38	17.82	0.0001	0.27
	Group Membership	721.53	1	721.53	15.23	0.001	0.31
	Time × Group Interaction	233.32	2	111.66	33.52	0.0001	0.41
	Error	319.75	96	3.33			

The results of the mixed-design ANOVA in Table 2 indicate that, based on the computed F-values, the factor of time or stage of evaluation had a significant effect on behavioral modification and management, self-awareness, and meaning of life in vulnerable adolescents ($P < 0.001$). The effect size suggests that the time factor explained 32%, 28%, 27%, and 28% of the variance in the scores of behavioral modification and management, self-awareness, and meaning of life, respectively. Additionally, based on the

computed F-values, the effect of group membership on behavioral modification and management, self-awareness, and meaning of life was significant ($P < 0.001$). Therefore, it can be concluded that the factor of group membership or the type of therapy received had a significant impact on these variables in vulnerable adolescents. Further analysis is conducted using Bonferroni post-hoc comparisons to evaluate pairwise differences in mean scores across the stages of assessment.

Table 3

Pairwise Comparison of Mean Scores for the Meaning of Life Dimensions by Stage of Assessment Using Bonferroni Post-hoc Test

Variables	Baseline Stage	Comparison Stage	Mean Difference	Standard Error	Significance
Behavioral Modification and Management	Pretest	Posttest	-1.85	0.38	0.0001
		Follow-up	-1.61	0.35	0.0001
	Posttest	Pretest	1.85	0.38	0.0001
		Follow-up	0.23	0.13	0.27
Self-awareness	Pretest	Posttest	-1.45	0.32	0.0001
		Follow-up	-1.20	0.25	0.0001
	Posttest	Pretest	1.45	0.32	0.0001
		Follow-up	0.25	0.15	0.31
Meaning of Life	Pretest	Posttest	-1.92	0.47	0.0001
		Follow-up	-1.84	0.39	0.0001
	Posttest	Pretest	1.92	0.47	0.0001
		Follow-up	0.08	0.13	0.71

As shown in the results of Table 3, significant differences were found between the mean scores of pretest, posttest, and follow-up stages for the variables of behavioral modification and management, self-awareness, and meaning of life in vulnerable adolescents. This indicates that the Positive Psychology Therapy and Dialectical Behavior Therapy packages resulted in significant changes in behavioral modification and management, self-awareness, and meaning of life when compared to the pretest stage. Additionally, no significant differences were found between the posttest and follow-up stages. This finding can be interpreted to suggest

that the changes in behavioral modification and management, self-awareness, and meaning of life observed in the posttest stage were maintained throughout the follow-up period.

4. Discussion and Conclusion

Based on the obtained findings, the relationship between the pre-test, post-test, and follow-up scores of the dependent variables has been found to be significant. By controlling this relationship, the mean scores of the dependent variables

in the post-test and follow-up stages show significant differences between the experimental and control groups. The results of this study are consistent with prior findings (Beckstead et al., 2015; Sobhi-Gharamaleki & Rajabi, 2011; Wenzel et al., 2009).

In explaining this hypothesis, it can be stated that positive psychology emphasizes mental states such as hope, optimism, happiness, satisfaction, peace, and intimacy at the mental level. At the individual level, this approach focuses on traits such as honesty, patience, wisdom, and loyalty, while at the social level, creativity, maintaining a positive attitude, civic virtues, and progress are key objectives of this positive paradigm. The therapeutic approach of positive psychology primarily emphasizes individuals' internal capabilities and positive characteristics. In this therapy, counselors help clients focus on positive traits that have been overlooked and encourage individuals to apply their abilities and traits in key life areas, such as work, parenting, love, and so on, treating this as a personal responsibility. This approach centers on maintaining the mental and physical health of vulnerable adolescents by focusing on their internal strengths; it seeks to directly manifest positive emotions in the subjects by eliminating the negative symptoms resulting from self-harm among adolescents and creating a transformative meaning in the life of the affected individual. On the other hand, by emphasizing positive emotional experiences, the individual's mental ability to adapt to the external environment is also improved. As a result, interventions based on positive psychology contribute to the increase of self-discipline, personal self-regulation, and management of destructive behaviors, such that individuals are taught to cope with maladaptive strategies like self-blame and blaming others by relying on hope, optimism, and positive thinking.

To explain this result, it can be argued that mindfulness based on the positive psychology approach can increase vulnerable adolescents' awareness of life's meaning. Mindfulness refers to a particular way of experiencing, in which individuals gain awareness of both their inner and outer selves, purposefully, in the present moment, and without judgment. The concept of mindfulness has roots in Buddhist tradition and is based on the idea that attention and awareness transform actively. Mindfulness is typically defined as a non-judgmental and non-reactive awareness of present-moment experiences, including emotions, cognitions, bodily sensations, and external stimuli, such as sights and sounds. Previous studies show that dialectical behavior can enhance the meaning and purpose of life by

promoting attention to thoughts and feelings. Mindfulness has a direct effect on positive psychological well-being and physical outcomes. People learn not to get caught in their rumination patterns and avoid the anxiety caused by the influx of negative thoughts related to rumination. Therefore, elements and processes based on positive psychology and mindfulness not only influence the ability to plan and enhance life meaning but also reduce anxiety in individuals. This hypothesis can also be explained by stating that the effectiveness of mindfulness interventions may result in improved ability to remain calm and an increased positive feeling toward oneself and the world. Research on positive psychology-based treatments has shown that these treatments can have a broad effect on various psychological variables such as problem-solving, happiness, mental health, positive emotion, delusions, resilience, and effectiveness. Research findings indicate that emotional regulation and planning are positively associated with life meaning. In fact, positive psychology affects subscales of anger control, including feelings of anger, the need to express anger physically, angry moods, angry reactions, internalization, and externalization of anger and its control. It has been found that subjects trained in positive psychology show faster improvement in sad moods.

To explain this finding, it can be stated that both positive psychology therapy and dialectical behavior therapy have influenced the modification and management of behavior, self-awareness, and life meaning for vulnerable adolescents under the welfare coverage of Tehran. However, the effect of positive psychology therapy has been reported as more significant than dialectical behavior therapy, with differences found between the two methods. This difference can be explained by stating that positive psychology therapy has conveyed teachings and concepts in a more tangible and comprehensible way to the adolescents, allowing them to understand it better than dialectical behavior therapy. Additionally, variables such as life meaning have been more closely integrated with the nature and content of positive psychology therapy, making it easier and more facilitated for adolescents to understand these concepts compared to dialectical behavior therapy. As a result, adolescents in the positive psychology therapy group experienced less anxiety and established more rational communication with the therapist. In recent years, the approach of positive psychology, with the slogan of focusing on human talents and capabilities, has attracted the attention of researchers in various fields of psychology. Positive psychology emphasizes building and expanding positive emotions to

create a shield against psychological disorders and to increase individuals' well-being. A positive person accepts themselves as they are, values themselves, and can establish honest relationships with others. Furthermore, positive thinking is a key factor in life purpose and personal growth. On the contrary, negative thinking damages individual willpower, social relationships, self-acceptance, and life goal-setting. In positive therapy, it is assumed that forming and enhancing positive emotions and strengths, and giving meaning to life, strengthens and increases life satisfaction.

Few studies have been conducted on the effectiveness of positive psychology and dialectical behavior therapy in modifying and managing behavior, self-awareness, and life meaning among vulnerable adolescents under the welfare coverage of Tehran, which limits the comparison of results with other research. Since the participants in this study were vulnerable adolescents under welfare coverage in Tehran, the findings' generalizability to people outside the studied population is limited. The tool used in this study was a self-report questionnaire, and like similar research, this study has limitations due to the use of self-report measures. There were also limitations in accessing vulnerable adolescents from other institutions such as the Committee for the Care of the Impoverished to participate in the training sessions.

The research was conducted in two centers for the care and supervision of orphaned and vulnerable adolescents in Tehran. It is suggested that this study be implemented at the county, provincial, and national levels. Similar research could be conducted with other age groups, such as young adults or children, to facilitate comparison of results. A similar study is also suggested to compare other related approaches, such as integrated treatment approaches, with regular follow-ups to examine the sustainability of the effects. Given that the results of this research show the effectiveness of positive psychology interventions in modifying and managing behavior, self-awareness, and life meaning among vulnerable adolescents under welfare coverage, it is recommended that these adolescents participate in public courses on positive thinking skills and private sessions held at the centers where they are cared for, in order to learn essential life skills. The findings highlight the need for policymakers, psychologists, and psychiatrists to pay special attention to the issues of vulnerable adolescents, as family is the most fundamental social institution whose health or illness can have profound and widespread impacts.

Authors' Contributions

Authors contributed equally to this article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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