

Al-Quds Open University
Deanship of Graduate Studies



**The Effectiveness of a Positive Psychological Counseling
Program Based on Laughter Yoga in Developing Learned
Optimism Among Adolescents**

Preparation

Mutaz A. M. Maraqa

**This Thesis is submitted in Partial Fulfillment of the Master's
Degree in Psychological and Educational Counseling
Al-Quds Open University (Palestine)**

February 2023

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This thesis was discussed and approved in 6.13/2023

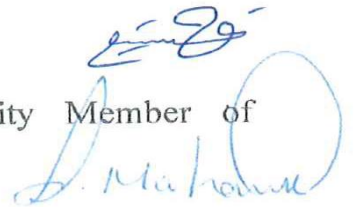
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Dedication

This dissertation is dedicated to the Palestinian people who are subject to harmful and horrifying psychological effects as a result of the occupation. I hope this research will be a positive addition to Palestinian society and offer a candle of optimism illuminating the hearts of its people.

I dedicate it especially to the new generation of Palestinians who are the hope and strength of the future Palestinian state.

Researcher

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Researcher

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**The Effectiveness of a Positive Psychological Counseling Program Based on
Laughter Yoga in Developing Learned Optimism among the Adolescents
Preparation; Mutaz A. M. Maraqa
Supervision; Prof. Mohammed Ahmed Shaheen
2023**

Abstract

The study aims to investigate the effectiveness of a positive psychological counseling program based on Laughter Yoga in developing Learned Optimism among the adolescents. To achieve this, a scale of Learned Optimism was developed, as well as a positive counseling program. This is a quasi-experimental study conducted in the school academic year 2022/2023. The study sample consists of 30 adolescents, their ages ranged between (13-15) years, from Hebron Girls Basic School- UNRWA, who obtained the lowest scores on the Learned Optimism scale and then were divided equally into two groups: control and experimental, with (15) for each group. The counseling program was applied to the experimental group, in 8 sessions, two sessions a week, each of 90 minutes.

The results show that there are statistically significant differences between the experimental and control groups in the post measurement on the learned optimism scale in favor of the experimental group, and the differences are also significant between the pre and post measurements on the experimental group in favor of the post measurement, while no significant differences appears between the post and follow-up measurements among the participants of experimental group, which indicates the effectiveness of the applied counseling program in developing learned optimism among adolescents, and the continuity of its effectiveness after a four-week follow-up period. Based on the results, the study recommends increasing the scope of using laughter yoga skills and positive psychology interventions in Palestinian schools and educational institutions.

Key words: Positive Psychology, Laughter Yoga, Learned Optimism.

فاعلية برنامج إرشادي نفسي إيجابي قائم على يوجا الضحك في تنمية التفاؤل المتعلم لدى المراهقين
إعداد: معتز أسعد مرقة

بإشراف: الاستاذ الدكتور محمد احمد شاهين

2023

ملخص

هدفت الدراسة إلى التحقق من فاعلية برنامج إرشادي نفسي إيجابي قائم على يوجا الضحك في تنمية التفاؤل المتعلم لدى المراهقين، ولتحقيق ذلك طُور مقياس التفاؤل المتعلم وبرنامجاً إرشادياً إيجابياً. استخدمت الدراسة المنهج شبه التجريبي، وتكونت عينة الدراسة من (30) مراهقة، تراوحت أعمارهن ما بين (13-15) عام، من مدرسة بنات الخليل الأساسية- الأونروا في العام الدراسي 2022/2023، اخترن من أفراد المجتمع الأصلي للدراسة اللواتي حصلن على درجات متدنية في مقياس التفاؤل المتعلم، وقسمن إلى مجموعتين متكافئتين تجريبية وضابطة، قوام كل مجموعة (15) طالبة. طبق البرنامج الإرشادي على المجموعة التجريبية في (8) جلسات، بواقع جلسيتين في الأسبوع، مدة كل منها (90) دقيقة.

أظهرت النتائج وجود فروق دالة إحصائياً بين المجموعتين التجريبية والضابطة في القياس البعدي على مقياس التفاؤل المتعلم لصالح المجموعة التجريبية، وكانت الفروق دالة أيضاً بين القياسين القبلي والبعدي على المجموعة التجريبية لصالح القياس البعدي، في حين لم تظهر فروق دالة بين القياسين البعدي والتتبعي لدى أفراد المجموعة التجريبية، ما يشير إلى فاعلية البرنامج الإرشادي المطبق في تنمية التفاؤل المتعلم لدى المراهقين، واستمرارية فاعليته بعد فترة تتبع مدتها أربعة أسابيع. بناءً على النتائج، توصي الدراسة بزيادة نطاق استعمال مهارات يوجا الضحك وتدخلات علم النفس الإيجابي في المدارس والمؤسسات التعليمية الفلسطينية. الكلمات المفتاحية: علم النفس الإيجابي، يوجا الضحك، التفاؤل المتعلم.

Chapter One

Background and Problem of the Study

1.1 Introduction

Historical Palestine is largely characterized by their youth population. Arguably, the youth group is the most influential group in Palestinian society and a promising force to catapult change and build a worthwhile future. The youth may serve as a pivotal resource and effective investment for the Palestinian people. Accordingly, all community institutions of society (governmental, private, and civil) must invest in the youth to bring about real and sustainable development and change to society. This situation is especially dire and need of attention due to Palestinian youth's reality of living under occupation, increased challenges due to Covid-19 pandemic, and social/ economic changes to Palestinian society.

Because of these issues and the centrality of the youth to Palestinian society, this group requires psychological attention and appeals to their mental health. Positive psychology may assist in fostering an atmosphere and attitude of learned optimism necessary for the well-being of Palestinian youth, especially among adolescents 13-18 years of age. To target this age group, schools and education systems should be altered and addressed given their foundational role in building children's personality and character (WHO, 2006). Additionally, a therapy known as laughter yoga, which has garner fruitful results elsewhere, may assist in this process as well.

Currently, there are 1.16 million young men and women aged 18-29 years in Palestine, who constitute more than one-fifth of the Palestinian society. In 2021, 22% of the total population in Palestine was reported to be 22.3% in the West Bank and 21.8% in the Gaza Strip, and the sex ratio among young people was about 105

males for every 100 females (PCBS, 2021). From a mental health standpoint, this group has suffered greatly from psychological distress, depression, and anxiety.

A study by the World Health Organization conducted a study on a group of Palestinian youth and reported the following among them: global distress (46%), depression (55%), and (37%) anxiety, 47% had been a personal victim, 71% had witnessed violence, and 69% had heard about violence experienced by someone close to them. In a logistic regression analysis that controlled for other bivariate correlates, exposure to any act of violence, as well as any of the 3 types of violence exposure, were independently associated with each of the 3 measures of elevated psychiatric symptomatology. Females were 4 times more likely to report elevated psychopathology, despite being less likely to experience each type of violence (Wagner, 2020).

In addition, a study conducted by the Gaza Mental Health Program found that 32% of adolescents aged 10-19 suffer from post-traumatic stress symptoms and that the percentage is higher in males than in females (58% males compared to 42% females, as indicated by a study) (Zakrison et al., 2004). In the Bethlehem region of the West Bank, 42% of children suffer from both emotional and behavioral psychological problems. Similarly, the study of the Treatment and Rehabilitation Center for Victims of Torture (Al-Krenawi et al., 2004) indicated that 38.1% of children suffer from post-traumatic stress symptoms and 3.1 acute stress. Save the Children in cooperation with the National Plan Secretariat (The Ministry of Planning and International Cooperation, 2003) found that 93% of the children who were examined felt insecure and fear for themselves and their families.

Evidently, as these statistics suggest, Palestinian adolescents are in need of psychological assistance and mental health care. I argue in favor of a positive psychology approach that will promote learned optimism among adolescence 15-18 year of age. Martin Seligman, the father of positive psychology, argues that optimists

recover from their momentary helplessness immediately. After an obstacle, optimists pick themselves up, shrug it off, and start trying again. For optimists, defeat is a challenge, a mere setback on the road to inevitable victory. Moreover, they see defeat as temporary and specific, not pervasive and unyielding. (Seligman, 2006).

Other similar studies, such as the results of Khademi's study, demonstrate that learned optimism had a significant effect on achievement motivation and its subscales including confidence and perseverance; it had no effect however, on other subscales like foresight and being hardworking. Learned optimism also had no effect on academic resilience and its subscales (communication skills, orientation for the future, and orientation for the problem-based). As these results suggest, focus on emotional and optimism in educational system leads to increase motivation in students and prevents failure and dropping out of school (Khademi & Kadkhodaie 2015).

Like positive psychology, Laughter yoga, one of the increasingly used methods among complementary health approaches in the world, has also gained traction for its success and benefits (Alici & Dönmez, 2020).

Kataria in India started laughter yoga in 1995 which is a practice involving laughter followed with deep yogic breathing and is quickly spreading around the world (Kasper et al., 2013). There are currently over 10,000-laughter yoga clubs in more than 100 countries including Japan. Laughter yoga has reportedly been effective in treating depression among adolescents (Shahidi M, 2013). Madan Kataria (2002) combines the best practices of yoga with laughter in a way that enhances health, reduces stress, and increases vitality in different levels of physical, mental, behavioral health including numerous beneficial effects on the body and mind (Beckman, 2007).

Perhaps no better place to implement and test the results of laughter yoga and Positive Psychology lies in the Arab world. The political landscape of the Arab world is burdened with wars, armed conflicts, political instability, and displacement in countries such as Iraq, Lebanon and Palestine. These issues point to an urgency in reducing mental illness and promoting mental health and psychological well-being through the activation of positive psychology interventions (Basurrah et al., 2021). Positive Psychology should be prioritized considering the Arab population's struggle for justice, the need for improved quality of education, the urgency of universal health care, understanding of extremist behavior, violence, recurrent cases of suicide, and drug addictions, all of which impede and threaten the Arabs world's path towards openness and development. (Tiliouine & Bougaci 2022).

Arab children often receive great pressure from their parents and teachers to perform well in school and on exams. These imposed expectations push children towards unrealistic goals. When unfulfilled, these expectations result in serious distress disturbing the children's mental and physical health. Incidentally, laughter therapy is an effective method for decreasing levels of stress thereby improving the well-being of high school students (Heema & Rani 2017).

Positive psychology uses new methods and strategies in psychotherapy, including instilling hope, developing the skill of optimism, developing flow experiences, developing self-efficacy, and building barriers. These and other methods act as a wall against the individual's exposure to psychological or mental injury and work to increase maximum strength. Learning optimism prevents mental illnesses in children, adults, and youth. Because learned optimism promotes learning skills, developing perseverance, and cultivating a practical approach to life, adherents are less likely to experience prolong hurt or existential psychology, such as emptiness of meaning or existential frustration.

Given these issues intrinsic to the Arab world and the need to address the well-being of the adolescents, I argue that laughter yoga and positive psychology may garner fruitful results. As suggested earlier, the connection between the variables in this research reveals the impact of laughter yoga and positive psychology have on developing Learned Optimism among adolescents. As far as I know, research dealing with these variables has yet to be conducted in the Arab world. While studies exist elsewhere globally, they too do not link these variables in a direct manner. Therefore, I expect that this study will be useful for scientific research as a qualitative addition.

1.2 The Study Problem

Adolescence is characterized by significant physical, intellectual, and social changes; schools play a large role in this development. The pressure on young people to perform well in a variety of academic, sports and extracurricular activities creates an extremely stressful environment for adolescence. Receiving psychological support at this stage in life is crucial to ensure that positive changes occur in their lives.

What remains promising however is that optimism can be learned, created, and strengthened for individuals? This phenomenon is known as learned optimism whereas learned helplessness is its opposite. In the cases of acquired helplessness, a person learns that the results obtained have nothing to do with his effort and no matter how hard s/he tries, he cannot achieve success. In fact, such a person attaches pessimistic expectations to the results of his performance and expects dissatisfaction. This situation leads to feelings of helplessness, hopelessness, lack of purpose and decreased self-esteem (Abramson, et al., 1978). On the other hand, learned optimism encourages individuals to maintain optimistic and pleasant expectations about his performance and even when unpleasant things happen, to interpret them in an

optimistic way (Seligman, 2011). Documents style refers to how a person categorizes pleasant or unpleasant events in his life. An optimistic or adaptive referral style leads to positive expectations for the individual, whereas a pessimistic or inconsistent referral style leads to unpleasant expectations. While individuals may have a greater proneness towards one over the other, these proclivities are not permanent; optimism can be learned through training.

Through optimism training, people can be taught to change their maladaptive beliefs that lead to feelings of helplessness and lack of control over life events and how to replace them with adaptive beliefs that create a sense of optimism and control in the person (Alloy, et al., 1984). Moreover, a person's posture towards his successes and failures can be changed by modifying the style of his documents or making them optimistic, and in this way, positive feelings such as gratitude, pride, and hope may replace negative feelings encouraging individuals to work harder and achieve success and progress (Weiner, 1985).

Laughter yoga, mentioned above, may serve as a powerful tool in fostering positive psychology amongst the youth. Proposed links between humor and positive wellbeing are intuitive; it makes sense that those with a good sense of humor will be in a better position to weather difficult situations, enjoy more cohesive relationships, find humor in all sorts of experiences, and benefit from more positive mental and physical health (Martin, 2019). The importance of the cited study is that it attempts to pinpoint the relationship between laughter yoga and positive psychology, especially learned optimism.

From my experience in volunteering with the Palestinian Red Elders in the field of psychological support, I found that there is a significant impact on the different target groups using the techniques of positive psychology and laughter yoga. In this study, I aimed to link the variables that I used in my practical experience.

1.3 Study Questions and Hypotheses

For my study, I will attempt to link the variables and obtain results that help clarify the effectiveness of this counseling program. This study will attempt to answer the following main question:

What is the effectiveness of a positive psychological counseling program based on laughter yoga in developing learned optimism among the adolescents?

From this main question, the following sub-questions emerged:

The first question: Are there significant differences between the average scores of the experimental group members and the control group members on the Learned Optimism Scale after applying the counseling program?

The second question: Are there significant differences between the average scores of the experimental group members in the pre-and post-measurements on the Learned Optimism Scale attributed to the counseling program?

The third question: Are there significant differences between the average scores of the experimental group members on the Learned Optimism Scale in the post and follow-up measurements after four weeks of applying the counseling program?

To answer the study questions, the following null hypotheses were formulated:

The first hypothesis: There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members and the control group members on the Learned Optimism Scale after applying the counseling program.

The second hypothesis: There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members in the pre-and post-measurements on the Learned Optimism Scale attributed to the counseling program.

The third hypothesis: There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members on the Learned Optimism Scale in the post and follow-up measurements after four weeks of applying the counseling program.

1.4 Objectives of the Study

The study aims to achieve the following objectives:

1. Testing the effectiveness of a positive psychological counseling program based on laughter yoga in developing learned optimism among the adolescents.
2. Constructing a scale that studies optimism as an independent trait from pessimism in adolescents.
3. Detection of the impact size of the applied positive psychological counseling program based on laughter yoga in developing learned optimism among the adolescents.
4. Building a positive psychological counseling program based on Laughter Yoga in developing learned optimism among the adolescents that can be used by professionals and counselors in mental care.
5. Developing a scale of learned optimism for a Palestinian context.

1.5 Significance of the Study

The significance of this study lies in its subject matter-- the development of a Learned Optimism among the adolescents in Palestine through Laughter Yoga. It should also be noted that this study focuses on theoretical and practical aspects. The importance of the study can be determined from both the theoretical and practical perspectives as follows:

Theoretical significance:

The theoretical importance of this study is mainly to shed light on the adolescents in the West Bank as well as the link between positive psychology and Laughter Yoga as one of its promising techniques in developing Learned Optimism among adolescents. It also sheds light on the importance of educational institutions assisting in the psychological formation of adolescents.

Practical significance:

The practical significance of this study stems from the development of a positive psychological counseling program based on Laughter Yoga in developing Learned Optimism among adolescents. This study should benefit psychologists, teachers, and social workers and should translate to programs dealing with similar situations and disorders as these methods are not commonly used in Arab healthcare systems.

1.6 Study Limits and Determinants

The limits of the current study are as follows:

Human limits: The positive psychological counseling program was limited to a School-Based Sample of Adolescents from (13-15 years) in: Hebron Girls Basic School- UNRWA.

Spatial limits: This study was applied in Hebron Girls Basic School- UNRWA in Hebron, Palestine.

Time limits: This study was applied in the first semester of the academic year 2022/2023.

Conceptual limits: This study was limited to the following concepts: Positive Psychology, Counseling Program, Laughter Yoga, Learned Optimism, Adolescents.

Procedural limits: The results of the study are determined by the tools used and their psychometric properties, which are:

- a) A scale of learned optimism prepared by the researcher.
- b) A positive psychological counseling program based on laughter yoga in developing learned optimism among the adolescents which were prepared by the researcher.

The generalization of the results of the current study is restricted by the indications of the validity and reliability of the tools used and the objective response of the study sample members to these tools.

1.7 The Conceptual and Procedural Definitions of the Study Variables

The Effectiveness:

Effectiveness is defined as “the extent of the effect that the experimental treatment can have as an independent variable in a dependent variable.” (Salem and Mustafa, 2006: 94).

The researcher defines it procedurally: “The extent to which the Positive Psychological Counseling Program Based on Laughter Yoga in Developing Learned Optimism among the Adolescents will have achieved its objectives, and it will be measured by learned optimism scale”

Positive psychology:

Seligman and Csikszentmihalyi definition of Positive Psychology: “The field of positive psychology at the subjective level is about valued subjective experiences: well-being, contentment, and satisfaction (in the past); hope and optimism (for the future); and flow and happiness (in the present). At the individual level, it is about positive individual traits: the capacity for love and vocation, courage, interpersonal skill, aesthetic sensibility, perseverance, forgiveness, originality, future mindedness, spirituality, high talent, and wisdom. At the group level, it is about the civic virtues

and the institutions that move individuals toward better citizenship: responsibility, nurturance, altruism, civility, moderation, tolerance, and work ethic” (2014, 5).

The researcher defines positive psychology procedurally as “the optimal use of experiences and positive personal qualities in the individual to elevate and develop them to create a person with an effective positive personality using positive counseling methods, relying on a group of positive psychology techniques (optimism, instilling hope, flow, self-efficacy, relaxation exercises) in order to develop learned optimism among the adolescents.”

Counseling Program:

“It is an organized and planned process considering scientific foundations to provide direct and indirect counseling services, individually and collectively, and to improve the mental health of individuals and groups” (Zahran, 2005: 499).

The counseling program is defined procedurally as a set of specific and structured steps based on the techniques and counseling methods that depend on the Laughter Yoga exercises and PPIs. The program includes a set of information, expertise, organized and active training, and skills that facilitate the participants of the experimental sample (Hebron Girls Basic School-UNRWA) to develop learned optimism.

Laughter Yoga (LY):

According to Kataria (1999: 12), Laughter Yoga “combines unconditional laughter with yogic breathing (Pranayama). Anyone can laugh for no reason, without relying on humor, jokes or comedy. In a session, laughter is simulated as a bodily exercise within a group. The group maintains eye contact and childlike playfulness, and laughter soon becomes genuine and contagious. The concept of Laughter Yoga is based on a scientific fact that the body cannot differentiate between fake and real laughter as long as it is done with willingness. One gets the same physiological and psychological benefits purely from the motion”.

The researcher defines it procedurally as a set of well-known exercises that include unconditional laughter, deep breathing, clapping, and active movement which aims to develop learned optimism among adolescents.

Learned optimism:

Learned optimism is the process of perceiving events as local, temporary, and changeable (El Sayed & Humble, 2018). Optimism can be learned and developed through cognitive techniques. Learned optimism in a higher education context views students as willing and tasks as achievable allowing higher education providers to shift the focus away from pessimism and towards goal-oriented planning and thinking which supports the success of students (Hoy et al., 2006). Learned optimism is a source of motivation for achieving goals even when met with challenges and encourages students and staff to persist until they are successful.

Learned optimism is defined procedurally as the degree obtained by the examinee adolescents on the scale of learned optimism.

Adolescence:

“There is currently no standard definition of “adolescent.” Although often understood as an age range, age is just one way of defining adolescence. Adolescence can also be defined in numerous other ways considering such factors as physical, social, and cognitive development as well as age. For the purposes of this document, adolescents are generally defined as youth ages 10 to 18” (APA, 2002: 4).

Adolescence is defined procedurally: the age at which the Positive Psychological Counseling Program Based on Laughter Yoga in Developing Learned Optimism is applied in this study.

Chapter Two

Theoretical Framework and Previous Studies

In this chapter, a presentation of the theoretical framework and previous studies will be presented. The first part of this chapter presents the main study variables represented in: Laughter Yoga, Learned Optimism, and the Adolescents. The second part of this chapter explores previous studies related to the subject of the study, where Arab and foreign studies are presented from newest to oldest.

2.1 Theoretical Framework

In this part, theoretical concepts will be described in detail and will include the following concepts: Positive psychology (PP), Counseling Program, Laughter Yoga (LY), Learned Optimism, Adolescents.

Laughter Yoga (LY) (Hasyayoga)

What is laughter?

Laughter is a universal sign of happiness. Laughter is at the center of research attention for two reasons: 1.) it can increase mood, optimism, energy, and cognitive function; and 2.) it can reduce anxiety, stress, loneliness, depression, and tension (Gonot-Schoupinsky & Garip 2018).

Laughter can be described as a physical reaction characterized by rhythmical contractions of the diaphragm and other elements of respiratory processes. It also involves grimaces, vocalization, and postural movements (Caruana, 2017). There are several laughter mechanisms, other than humor stimuli, that may contribute to one's well-being. In general, through laughter endorphins, the so-called happy hormones, are released which promote an overall sense of well-being (Bennett,

2008). Also, dopamine, a hormone that comes from the neurological reward system and leads to feelings of pleasure, is released when laughing (Colom et al., 2011).

Laughing is widely available, has few contraindications, and is therefore widely appealing.

The Concept & Philosophy of Laughter Yoga.

Kataria (2011) defined the following concepts of Laughter Yoga:

- A. Motion creates Emotion: The connection between the body and mind is innate. The body experiences whatever the intellect experiences. People who are depressed and sad often have depressed bodies. Their body movements are sluggish and listless, and they speak and walk slowly. What occurs in the body also affects the mind.
- B. Two-fold Link between Body and Mind: Every mental feeling has a corresponding physical activity. Any emotional activity that is physically expressed results in equivalent mental state changes. The link between the mind and body as well as the body and mind are reciprocal.
- C. The Childlike Model: Children don't use any of the brain's intellectual faculties when they laugh; it simply comes from the body. This demonstrates unequivocally that their laughing originates from within the body. Given one can move and use the body for their benefit, one must choose to do so in dire situations or as daily practice. The crucial aspect of this approach is that the subject must actively engage in amusing activities like laughing.
- D. Difference between Happiness and Joy: Happiness is a conditional response. It is dependent on the fulfillment of certain desires of the mind and is concerned with occurrences in the past and the future and hardly ever addresses the present. In contrast, joyfulness is unconditional commitment to be happy in the moment and to have fun despite life's problems.

- E. Fake It Until You Make It: Medical research shows that even if you pretend to laugh or act happy, your body produces happy chemicals.
- F. Difference between Being Funny and Having Fun: The difference between being funny and having fun is that when one is being funny, he is performing and acting to make others laugh. On the other hand, in Laughter Clubs, the people are not making others laugh; they are making themselves laugh.
- G. Laughter Can Be Programmed into Your Body: By repeating any bodily behavior over a period of time, the mind begins to generate a predictable response. The body learns to produce a knee-jerk reaction without involving the rational brain or the process of thinking. This is called conditioning.
- H. Willingness and Commitment to Laugh: The willingness of the participants to laugh is the most crucial element of Laughter Clubs. The group laughs voluntarily and wholeheartedly. When the mind is willing to engage in such a practice, the groups' laughter is made easy and possible.
- I. Inner Spirit of Laughter Yoga: Many of the laughter exercises focus on forgiveness, generosity, compassion, and helpfulness. Laughter Yoga gives participants the opportunity to actively enhance the lives of others.
- J. World Peace through Laughter: Our ultimate objective is to spread good health, joy, and achieve world peace through laughter.

What is Laughter Yoga?

Kataria (2011), the founder of laughter yoga confirms that Laughter Yoga combines unconditional laughter with yogic breathing (Pranayama). Anyone can laugh without reason, without relying on humor, jokes or comedy. In a session, laughter is simulated as a bodily exercise within a group. The group maintains eye contact and childlike playfulness allowing laughter to become both organic and contagious. The concept of Laughter Yoga is based on a scientific fact that the body

cannot differentiate between fake and real laughter if it is done willingly. One gets the same physiological and psychological benefits purely from the motion itself.

The popularity of LY is demonstrated in its spread. Originating in India from physician Madan Kataria, LY quickly spread worldwide. Since its foundation in 1995, the so-called Laughter Yoga movement established some 6000 Laughter Clubs, in more than 60 countries. In LY, laughter is first simulated and therefore independent of external factors, such as jokes or humor. As a result, the evoked laughter is less dependent on cognitive capacities or other individual differences (Kataria, 2011).

The researcher believes that intensive studies should be conducted on laughter yoga in the Arab world given their exposure to a range of negative psychological consequences stemming from revolutions, wars, and social changes.

A systematic review of the effect of laughter yoga on physical function and psychosocial outcomes in older adults (Alici & Dönmez 2020): a total of 3210 studies were examined and seven publications (six quasi experimental and one randomized control trial) all of which were in accordance with the inclusion criteria and were included in the study and evaluated. The results indicated that significant differences were found in the effectiveness of laughter yoga on physical function (blood pressure, cortisol level, sleep quality) and psychosocial health (life satisfaction, quality of life, loneliness, death anxiety, depression, mood, and happiness) in older adults.

Who can participate?

Houston (2021) explained that virtually anyone can participate in a Laughter Yoga session from young children to seniors however, there are a few conditions that may exclude you from participating at a particular point in time. See if any of the conditions apply to you. If so, check with your doctor or health care practitioner

before participating. Everyone will be reminded to stay safe, to explore their comfort levels, and to gently expand their comfort zones.

Participation Precautions

Some physical exertion and a rise in intra-abdominal pressure can be expected. It is contraindicated for people experiencing conditions that are in a severe and uncontrolled stage such as, but not limited to:

- Uncontrolled high blood pressure
- Advanced heart disease
- Major surgery within the last three months
- Epilepsy
- Complications associated with hemorrhoids
- Any persistent cough
- Incontinence of urine
- Severe backache
- Any kind of uncorrected hernia
- Active psychosis / paranoid ideation

Learned Optimism

Optimism and Psychological Health

Optimism is a positive personality trait that many people view as a core indicator of mental health. The term is also widely understood. For instance, a famous quote from Winston Churchill describes both pessimism and optimism: “the pessimist sees difficulty in every opportunity. The optimist sees opportunity in every difficulty.”

Numerous scientific studies indicate that optimism is a central factor in enabling a person to positively adapt and effectively confront stressful life events, difficult circumstances, misfortunes, and various hardships. Optimism is linked to appropriate responses to various difficulties from the simplest to the most severe (Zeidner & Hammer, 1992).

By helping people conform to unusual events, optimism seems to play a protective role. As follows, optimism positively contributes to life satisfaction and self-esteem (Lucas et al., 1996). The results of other studies such as the study of (Taylor et al., 1996) indicate that optimists are more likely and inclined to engage in problem-solving behaviors when facing difficulties or troubles and that this matter increases their psychological well-being and quality of life.

Optimists also tend to accept reality with its troubles and difficult situations without denial, exaggeration or underestimation; optimists view their troubles through the brightest side (Scheier & Carver 1993).

Learned Optimism in School Education

Modern theories view optimism as a goal, a cognitive trait, or a haphazard attribution. Having multiple dimensions, optimism includes a drive to achieve one's own objectives (agency) and a propensity to organize strategies for doing so (pathway) (Tariq & Zubair, 2015). A response to the adage "is the glass half full or half empty," learned optimism offers a remedy by retraining our minds to view the world differently. It is the notion that we can develop our own optimism and happiness (El Sayed, 2018). Students who display self-control such as resilience, a positive outlook, and learned optimism, are frequently recognized as self-starters with persistence and overcome challenges more frequently (Zito et al., 2007).

Researchers who pioneered learned optimism found that people's propensity to give up trying to change undesirable outcomes was a result of their belief that

undesirable outcomes are caused by internal, stable, and universal characteristics. When negative events occur, learned hopelessness is associated with an increased risk of depression, subpar academic performance, and stress-related illness (Peterson et al., 1988). The construct has changed slightly to include mindset (optimistic or pessimistic) as a sign of success. Ability and motivation are two personality traits linked to achievement. Without the conviction that one will succeed, the capacity to succeed and the desire to succeed are not always enough. Learned optimism is essential to students' success in higher education because the ability to succeed and the desire to succeed are sometimes insufficient without the conviction that one will succeed (Schulman, 1999). The process of viewing events as local, transient, and malleable is known as learned optimism. Cognitive techniques can be used to cultivate optimism (Hoy et al., 2006). Learned optimism can be developed through organizations to support both individuals and businesses, and it enables people to break free from learned pessimism. Learned optimism motivates people to achieve goals despite obstacles and inspires faculty and staff to keep going until they succeed.

Can a Pessimist Become an Optimist?

Martin Seligman began his scientific career by studying the topics of depression, psychological stress, and anxiety. Through the results of his research studies in this field, Seligman discovered what would be later known as the optimism explanatory style and considered it one of the most important factors in preventing the emergence and development of depression amid difficult life circumstances or stressful situations (Seligman, 2011).

The result of these studies raises a general question: is it possible to learn or acquire the method of optimistic interpretation? To answer this question, several studies were conducted including one that offered evidence supporting the

possibility of teaching children and providing them with the method of optimistic interpretation (Gillham et al., 1995).

In response to this research path, several educational curricula were created conveying the method of optimistic interpretation and put into application for school children. The children preferred the ability to form and reshape their personality. These curricula were applied within the framework of what is known as the Penn Resiliency Program (PRP), which primarily aims to instill optimism in the psychology of children as a mechanism that protects them from depressive symptoms in the future and as a kind of “psychological immunization or strengthening the psychological immune system.”

The application of this program depends on teachers and school counselors in (12) intervention sessions focusing on changing their way of thinking and moving them away from the method of pessimistic interpretation towards the method of optimistic thinking. One of the most important empirical studies conducted in this path is the study (Gillham et al., 2007). Its sample consisted of (700) children from three middle school students that employed the Pennsylvania Resilience Program and other programs to enhance behavioral acquisitions. The focus was on developing children's ability to deal with general psychological pressures in their lives, as well as developing self-esteem, resisting peer pressure, and dealing with family conflicts. This study was conducted with a control group of students not exposed to the intervention program. The students were evaluated two weeks after the end of the program, and evaluations were conducted once every six months for the next three years. The results concluded that in two of the three schools only (20%) of the children had depressive symptoms, (10%) of the children's symptoms remained at a low level, and the rest of the children's depressive symptoms dissipated.

These results reinforce the idea of the current research-- that optimism can be learned when children are equipped with the method of optimistic interpretation.

These findings give legitimacy to Martin Seligman's terms of "learned optimism" and "learned competency" as opposed to "learned pessimism." and "learned helplessness".

Seligman notes that we can all use educated optimism regardless of the level of pessimism we present. Seligman also clarifies that pessimists display different degrees of pessimism. The first step towards embracing the path of optimism is to determine one's level of optimism through evaluation and psychological measurement in accordance with standardized measurement tools. If the level of optimism is low, this does not necessarily mean that a person is pessimistic and expects the worst; it rather implies one's level of optimism can be overcome and improved through certain mechanisms (Seligman, 2011).

Dispositional Optimism and Optimistic Explanatory/Attributional Style

Scheier and Carver (1985) theorized about the "disposition" towards optimism in their studies known as "dispositional optimism" and considered such a quality of an equilibrated personality that, over time and in different contexts, affects how people make sense of present, past, and future occurrences in their lives. People that are optimistic have a positive outlook on daily happenings. Positive relationships between optimism and physical/mental well-being have been established within this study through this perspective. Positive people are more likely to have protective attitudes, to be more resilient to stress, and to adopt more effective coping mechanisms.

In contrast, research by Peterson and Seligman (1987) that were primarily directed towards the understanding of the psychological bases of pessimism led to the conception of its opposite—optimism. These findings categorized optimism as an "attributional style", characterized by the tendency to believe that negative events are inconstant (i.e., the negative event will not repeat itself), external (i.e., I am not

responsible for the event) and specific (i.e., the event is “specific”, self-limiting and will not influence any other activities of mine and my life). Optimists believe that positive events are more stable and frequent than negative ones. They have a more optimistic outlook on life and believe they can prevent issues from occurring which helps them deal with difficult situations better than pessimists (Peterson & De Avila, 1995).

To build a scale of learned optimism, the researcher relied on the dimensions of Dispositional Optimism and Optimistic Explanatory Styles which ensured more accurate results about optimism (see the researcher's learned optimism scale).

Positive Psychology:

Martin Seligman's presidency talk at the American Psychological Association convention in 1998 served as the first public introduction of the positive psychology movement. Seligman argues that the social sciences and the field of psychology operate largely from a deficit-based viewpoint which assumes that the typical human state is fraught with suffering and difficulties, and that the expert's job was to treat illness and find solutions. Seligman acknowledges the important contributions made by this approach but at the same time, advises psychology academics to also adopt systematic research that prioritizes and addresses positive aspects of human existence that make life worthwhile.

Positive psychology is the science of studying, understanding, and developing personal well-being. In other words, it seeks to understand and closely study the components of positive life and positive emotions which may be characterized as satisfaction with the past, happiness in the present, and hope for the future. This science also aims to study, understand, and develop positive qualities such as courage, resilience, curiosity, tolerance, love, self-knowledge, integrity, compassion, and creativity.

Additionally, this science also aims to study and develop positive societal measures at the institutional level society and not only at the level of individuals (Seligman, 2011). It is also worth noting that positive psychology is one of the branches of psychology that focuses on improving the mental efficiency of the individual, so that his efficiency is better than the normal level of mental health (Seligman & Csikszentmihalyi, 2000). The International Society of Positive Psychology has also defined it as the scientific study for the Flourishing of Individuals and Society. According to Seligman and colleagues (Seligman, Steen, Park & Peterson 2005), the goal of positive psychology on the subjective level is to develop satisfaction, contentment, self-contentment (the past), hope and optimism, self-experience and happiness (The present and the future); it also targets the individual level to develop tolerance, love and religiosity, and strives towards the collective level in order to inspire responsibility, moderation, morals and endurance. According to Aspinwall and Staudinger (2003), positive psychology focuses on the study of three main axes:

The first axis: focuses on subjective positive experiences, such as flourishing, subjective well-being, emotional, social/psychological happiness, religiosity, hope, the Explanatory/Attributional Style, positive emotion, positive thinking, emotional empathy, and gratitude.

The second axis: studies the working values and virtues (character strengths) of individuals and its compatibility with positive and common values associated with positive human personality traits that are also believed to be universal like tolerance, justice, humility, perseverance, vitality, and religiosity. (Park, Peterson & Seligman, 2006).

The third axis: Dealing with the social context and positive social institutions, the third axis aims to study the personality in a special social context allowing for positive psychology to not only effect the individual, but institutions as well. Among

the most important topics related to the study of the relationship between management and subordinates in the field of work is the relationship between classrooms of cooperation and positive competition and the relationship between sports teams of different activities and levels. In order to form a body and institution based on the development of the positive side that may contribute to education and access to good citizenship, this axis moves beyond self-interest to general goals for the benefit of the group, organization, or institution (Fredrickson & Losada, 2005).

Applied fields of positive psychology

First: positive health

Focusing on health rather than disease will result in less financial and material burdens. By positive health, we mean the interaction of the biological, functional, and personal factors of the individual working together to achieve development and growth in the health level and reducing the state of disease.

Second: positive psychotherapy

Positive psychotherapy is a scientific orientation that was initially established with the aim of guiding, treating, and providing psychological services for depression patients whose approach was starkly different compared to other types of treatments in this field. A variety of therapies have been developed to gain and develop positive feelings of well-being, gratitude, creativity, and interpersonal relationships. In general, positive psychotherapy strategies and treatments seek to acquire and develop positive feelings in accordance with the theory of expansion and construction. This treatment also aims to provide techniques that rely heavily on positive fundamentals for interacting with others such as: warmth, empathy, kindness, trust, and participating in a mutually respectful relationship. These fundamentals contribute to the following:

A. The alleviating of suffering.

B. Increasing feelings of happiness and self-contentment (Seligman, Rashid, & Parks, 2006).

Consisting of 14 proposed treatment sessions, the treatment program's results of the post-measurement are compared with the pre-measurement; this is done to evaluate the extent to which depressive symptoms, which were present prior to the program, decreased. Note that the proposed treatment program includes three training objectives derived from the positive aspect in which they are based:

A. Training to enjoy and feel positive emotions.

B. Engagement.

C. The meaning of life.

Third: Positive Neuroscience

It is a modern scientific trend that aims to study the processes carried out by the human brain instead of studying disease and mental disorder as an introduction to this science. Researchers in positive neuroscience are interested in the neural and cerebral processes of cognitive psychology, which through their understanding, can provide a prosperous life for the individual and society. This science also draws from several modern techniques such as radiation for the nerves and the brain and its various processes as well as studying the behavioral level to reveal its neurobiological basis. The latter can be studied through the cognitive aspect (i.e., optimism and creativity). This technique also elicits a more comprehensive understanding of what is called (healthy aging).

The PERMA Model

Seligman's (2011) PERMA model of flourishing describes a multi-dimensional approach to well-being that includes constructs of Positive Emotion, Engagement, Relationships, Meaning, and Accomplishment.

Seligman's new theory posits that well-being consists of the nurturing of one or more of the five following elements:

- A. Positive emotion: many human behaviors are motivated by positive emotions. People read, travel, or engage in whatever activities bring them happiness and satisfaction. Positive emotions enrich relationships, improve physical health, improve performance at work, and inspire optimism and hope for the future.
- B. Engagement: A key concept is flow meaning: when time seems to stand still and one loses one's sense of self, they concentrate intensely on the present. In positive psychology, flow describes a state of utter, blissful immersion in the present moment. When we focus on doing the things we truly enjoy and care about, we can begin to engage completely with the present moment and enter the state of being known as flow (Seligman, 2011).
- C. Relationships: we enhance our own well-being by building strong networks of relationships around us with other people in our lives. Positive relationships, such as strong ties with family, friends, or colleagues, lead to a sense of belonging (Sandstrom & Dunn, 2014).
- D. Accomplishment: this signifies leading a productive, meaningful life. This pathway is pursued for its own sake, even when it brings no positive emotion, no meaning, and nothing in the form of positive relationships (Seligman 2011).
- E. Meaning: utilizing one's talents for aims that are seen as essential rather than for oneself is what it means to have meaning. When we invest time in something bigger than ourselves, we perform at our best. This could be doing volunteer work, joining a community, civic, or religious organization, or learning with a particular objective in mind. These pursuits have a feeling of purpose and offer a compelling justification for why people engage in them.

The relationship between Counseling Psychology and Positive Psychology

Given their similar philosophies of human capabilities and optimal functioning, positive psychology and counseling psychology, these two branches of psychology can help inform the other towards advancing their respective areas of specialization (Gerstein, 2006). For example, positive psychology can help bring forth counseling psychology's roots in humanistic psychology thus its emphasis on positive growth, a long held defining characteristic of the discipline. Admittedly, counseling psychology struggles to "transcend our rhetoric and integrate into practice a model of thinking and intervention consistent with the basic tenets of counseling psychology" (Gerstein, 2006: 278). For counseling psychologists to truly embrace a positive perspective then, the specialization will need to eclipse formidable barriers that have pushed them towards more medical and deficit methods. Counseling psychologists must consider their underlying theoretical presuppositions and their training curricula must incorporate a more optimistic view of human nature. At the same time, it is critical for positive psychologists to acknowledge the lengthy history of a growth-oriented approach apparent within counseling psychology. As follows, putting these two disciplines in constructive conversation could promote the advancement of both.

The following points represent the possible relationship between positive psychology and psychological counseling (Vossler et al., 2015):

- A. Counseling psychology traditionally emphasizes the facilitation of optimal lifelong development including building on strengths and developing new skills and originally had a decidedly preventative rather than curative function.
- B. Recent decades have seen a shift in counseling psychology practice towards a focus on disease and distress rather than health and well-being.

- C. Both counseling psychology and positive psychology have shared roots in humanistic approach.
- D. Counseling psychology could develop a more balanced and strengths-oriented method that places greater emphasis and recognition of positive elements inherent in traditional therapeutic approaches.
- E. A stronger focus on strengths and optimal human functioning in counseling psychology training curricula is recommended.
- F. News areas of positive psychology research, such as hope, gratitude, strengths, and posttraumatic growth offer new ways of working that will be of interest to counseling psychologists.
- G. In engaging with the positive psychological framework, counseling psychology has the chance to reflect on its fundamental assumptions and take steps towards a more growth than deficit-oriented discipline.

Adolescents

Meaning and definition of adolescence

Development is a continuous process and all human beings pass through specific stages or phases of development (Baron, 2008). According to Subhaarati (2019), human development occurs in stages and each of the stages has its own distinctive features or characteristics. These stages are:

- Infancy
- Childhood
- Adolescence
- Adulthood
- Aged or old age

One of the stages of human development that everyone must experience is adolescence. Everyone enters the adult world by passing through the adolescent

door. Some teenagers transition into mature adults quite rapidly but the majority struggle to do so.

The word adolescence is derived from the Latin verb *adolescere*, which means “to grow into adulthood”. The World Health Organization (WHO) defines adolescence as the second decade of life (10–19 years of age) a time when significant physical, psychological, and social changes occur. During this period of development, adolescents gain more advanced patterns of thinking and reasoning, seek to forge their own identities, form new social relationships and attachments, and develop an increased sense of responsibility and independence. It is also a time when adolescents may face social challenges such as inadequate educational opportunities, limited prospects for finding rewarding work, and health challenges such as early and unintended pregnancy, sexually transmitted infections, violence, anxiety, and depression (Richter, 2006).

The United Nations Population Fund (UNFPA) also defines adolescents as being between the ages of 10 and 19 which is similar to the definition to which the World Health Organization adheres. The World Program of Action for Youth, The World Bank and The International Labor Organization (ILO) refers to adolescents as “youth” who are between the ages of 15 and 24.

Adolescence is frequently defined differently among nations and regions in accordance with cultural norms and customs.

Importance of Adolescence period

The effectiveness of positive psychology treatments in adolescent samples applied to schools has been displayed through systematic reviews within the field (Cilar et al., 2020). In order to take into account, the findings of PPIs' effectiveness for young people, Owens and Waters (2020) advised that periodic evaluations of positive education be undertaken. The effects of such interventions on children in

the setting of schools alone have not been the subject of a single systematic review. In the current study, we aim to control the learned optimism variable, specifically in the supportive educational center for school education (something not controlled in past studies), to fill this gap in research and regularly examine the potential and benefits of positive education.

Palestinian Adolescents

Children, adolescents, and youth below 29 years of age make up a very significant portion of the Palestinian population. Children 0-14 years made up 39.4% of the total population (2015) while those between 15-29 years made up 30% of the population (36% between 15- 19 and 64% between 20-29) . According to the Palestinian Central Bureau of Statistics, youth has previously been defined between the ages of 15-29 and PCBS recently re-defined youth to be defined between 18-29, while adolescents fall between 12 and 17. This includes the very formative high school years. The percentage of youth between 18 and 29 years of age in Palestine was about 22% or 1.14 million of the total population of 5.10 million. The percentage of youth was about 23% in the West Bank (WB) and 22% in Gaza Strip (GS) (PCBS, 2015).

Difficulties among Palestinian adolescents

Although the Palestinian community has consistently been referred to as a "young society," young Palestinians nevertheless confront numerous difficulties that have an impact on their economic, social, and physical well-being. High risk behaviors are more likely to occur when there is an unfavorable political, social, and economic climate for youth and adolescents. Malnutrition, a lack of sport and exercise, and commonly practiced addictive habits like smoking, alcohol, and drug use increase young people's feelings of dispersion and, as a result, their propensity

to migrate. Lack of awareness, information, and services catered to adolescents and young people makes these issues worse. Due to the prevalent medical conception of youth as a healthy population, crucial health services have gone unmet causing negative social, emotional, and psychosocial repercussions. Additionally, adolescents are not engaged and given the power to make decisions that affect their well-being through meaningful participation in programs designed to address youth concerns. According to the national youth study, the unemployment rate in Palestine has reached 30%, with girls aged 18 to 24 experiencing the highest rate, which is 60% (Young People, 2020).

We cannot also neglect the psychological impact on Palestinian adolescents during the coronavirus disease (Covid-19). A study prepared by the World Health Organization (2021) about the impact of COVID-19 on the Psychosocial and Mental Well-being of Palestinian Adolescents confirmed that among the factors reportedly causing a lot of stress for adolescents (more often for females than males) were staying at home all day, not going to school, unable to attend recreational activities and distance learning. The study added that mental health services for adolescents should be made available and accessible to support their psychosocial and mental health needs (Veronese et al., 2021).

Palestinian adolescents under occupation

Since the Arab-Israeli War of 1967, also known as the Six-Day War, Palestine has been subject to a persistent occupation that permeates every area of its present existence and future growth. The area is divided into the West Bank, East Jerusalem, and the Gaza Strip, each of which has its own government, legal system, and distinct development and human rights background.

Young people and adolescents have been very much influenced by this situation, externally by the forces of occupation, and internally, by Palestinian

fragmentation, loss of identity, and a patriarchal society. Humans must develop their identities, beliefs, and behaviors as they transition from childhood to adulthood during their formative years of adolescence. It is exceedingly harmful to be exposed to high levels of violence and discrimination during this crucial period of development. In this context, it is obvious that there is a need to connect human development interventions to the extraordinarily complex environments of the territories, especially in order to develop youth resilience so that they can maintain hope during the occupation and channel their positive energy toward the development of themselves and their communities. Although youth concerns are already on the PA agenda, it is important to add greater nuance and understanding to ensure that the most vulnerable young people are being targeted and supported. Moreover, even if youth issues are already on the PA agenda, it's critical to add more complexity and awareness to make sure that the most at-risk young people are identified and given mental health support (UNFPA, 2017).

In a recent UNFPA study (2021), suggested that the conditions that adolescents in the GS are living under are contributing to deteriorating psychological and mental wellbeing among young people and adolescent girls in particular. In addition, the continuous range of vulnerabilities from economic hardships to prolonged political uncertainty, significantly influence adolescents' deteriorating their psychological states.

The current study comes to confirm and give voice to the importance of the mental health of Palestinian adolescents considering the difficult circumstances they endure through seeking solutions bent towards increasing optimism as one of the components of a good life for their future.

2.2 Previous Studies

This part addresses previous studies related to the topic of the current study. They are divided into previous studies related to laughter yoga and others related to counseling programs that are developing learned optimism. They are listed from newest to oldest.

Studies Related to Positive Psychology (PP)

The systematic review of **Basurrah et al. (2021)** aimed to assess the effects of positive psychology interventions in Arab countries. Systematic searches of randomized controlled trials (RCTs) and quasi-experimental studies investigating PPIs in Arabia were conducted in six English and Arabic databases from the inception of positive psychology in 1998 to 28 February 2022. The quality of the studies was assessed using the Cochrane risk-of-bias tools. The protocol was published in the BMJ Open. Forty-four studies from 10 Arab countries (n = 3598 participants) were included. Of these, 12 were RCTs and 32 were quasi-experimental. The studies mainly focused on adults (73%) and healthy populations (86%). PPIs included mindfulness, positive thinking, strengths, hope, optimism, self-compassion, positive traits, and multiple PPIs. Nearly all studies (91%) mentioned cultural adaptation; however, the studies offered little detail. This is the first review in Arabia. PPIs appear to be effective for promoting well-being and reducing mental health issues. However, there were some risks of bias concerns. Future research should include younger and clinical populations using larger samples and providing more details about adaptation.

The systematic review and Meta-analysis of **Tejada-Gallardo et al. (2020): Effects of School-based Multicomponent Positive Psychology Interventions on Well-being and Distress in Adolescents** aimed to evaluate and compare the immediate but also long-lasting effects of school-based multicomponent positive

psychology interventions geared towards increasing well-being indicators of mental health (i.e., subjective and psychological well-being) and reducing the most common psychological distress indicators (i.e., depression, anxiety, and stress) in adolescents. A total of 9 randomized and non-randomized controlled trials from the searched literature met inclusion criteria for the meta-analysis. The results showed small effects for subjective well-being ($g = 0.24$), psychological well-being ($g = 0.25$), and depression symptoms ($g = 0.28$). Removing low-quality studies led to a slight decrease in the effect sizes for subjective well-being and a considerable increase for psychological well-being and depression symptoms. The relevant moderation analyses had an effect on subjective well-being and depression symptoms. The present systematic review and meta-analysis found evidence for the efficacy of school-based multicomponent positive psychology interventions in improving mental health in the short and long-term. Small effects for subjective well-being, psychological well-being, and depression symptoms were identified. Effects for psychological well-being and depression symptoms remained significant over time. In light of our results, education policy-makers and practitioners are encouraged to include positive practices within the schools' curriculum as effective and easily implemented tools that support adolescents' mental health. Further research is needed in order to strengthen the findings about school-based multicomponent positive psychology interventions in adolescents.

Laughter Yoga - a Positive Psychology Intervention: User Experiences and Effects on Mental Well-Being, Self-Compassion and Health Promoting Behaviors is a study of **Illner (2019)**. It aimed to seek evidence about the experience of LY and its effectiveness across different concepts. A quasi-experimental pre-post design with an intervention group and a non-randomized waitlist-control group (WLC) was employed. Participants (≥ 18 years) were assigned to the LY ($N=24$) or the wait-list control group ($N=24$). Four LY sessions having a duration of 30 minutes were given

twice a week for a duration of two weeks. At baseline and shortly after the intervention period, data was collected on the outcome variables (1) mental well-being (primary outcome) (2) self-compassion (secondary outcome) and (3) health promoting behavior (secondary outcome). Repeated measures ANCOVA (2 group by 2 time) were applied to test whether there was an impact of LY on primary and secondary outcomes. The motivation and the mood of the participants in the LY group was assessed by using repeated measures ANOVA. Furthermore, a mediation analyses with the PROCESS tool was implemented to examine whether self-compassion might be an underlying working mechanism between the effects of LY on mental well-being. Finally, a few days after the intervention period, a semi-structured interview with two participants of the study at hand was conducted about their motivation, experience, and perceived psycho-physiological effects. Participants in the LY group did increase on the subscale emotional well-being ($p < 0.01$) compared to the control group. After ruling out the confounding variables of age and experience in yoga, self-compassion was non-significant ($p = 0.06$). No significant enhancements of health promoting behavior (including alcohol and smoking) were found compared to the control group ($p = 0.87$). Self-compassion was not a mediator between the relations between LY on mental well-being. The motivation average was high, but it did not increase over time. The mood of the participants from pre-post for each LY session significantly increased.

Studies Related to Laughter Yoga (LY)

The qualitative study of **Hatchard & Worth (2021)** sought to understand the experiences and perceptions of laughter yoga of members of a UK-based laughter club who met once a month for one hour. Nine laughter club members were interviewed using semi-structured techniques. To explore the perceived benefits of laughter yoga, interviews were recorded and transcribed, and data was analyzed using inductive reflexive thematic analysis to identify themes. Key findings of this

study suggest that laughter yoga presented an opportunity for human connection and personal growth and provided an inoculation against the stresses of life, all of which serve as valued coping strategies in the face of life's challenges. Laughter yoga also represented an overarching narrative journey from initially being skeptical about laughter yoga, to becoming an advocate for laughter yoga.

Alici & Dönmez (2020) aimed to determine the effectiveness of laughter yoga on physical function and psychosocial outcomes in older adults. In this systematic review, electronic searches were performed in CINAHL, Web of Science, COCHRANE, Scopus, ProQuest databases from May 2010 to May 2020. The screening process was conducted by two authors independently and later came to a consensus together. The review was reported according to PRISMA guideline. A total of 3210 studies were examined and seven publications (six quasi experimental and one randomized control trial), in accordance with the inclusion criteria, were also included in the study and evaluated. Among older adults, the results pointed to the effectiveness of laughter yoga in bettering physical function (blood pressure, cortisol level, sleep quality) and psychosocial health (life satisfaction, quality of life, loneliness, death anxiety, depression, mood, and happiness).

The study of **Namazi et al (2019)** aimed to determine the effect of laughter yoga on the mental well-being of cancer patients undergoing chemotherapy. This randomized controlled trial was conducted on 69 cancer patients undergoing chemotherapy at Reza Medical Center, Mashhad, Iran, in 2018. The intervention group was subjected to four 20-30 min sessions of laughter yoga prior to chemotherapy. Additionally, the control group received routine self-care training. The mental well-being scores were measured using the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) before and after the laughter yoga sessions. The results showed a significant increase in the mean post-test WEMWBS score in the intervention group ($P < .001$). Implications for Practice: Laughter yoga can promote

the mental well-being of patients undergoing chemotherapy; therefore, LY's clinical applications are recommended in this study.

The study of **Iman (2021)** explores the merits of a counseling program based on the therapeutic laughter strategy for mothers who were quarantined during the COVID-19 pandemic and if such a program could reduce psychological and social pressures. Using the quasi-experimental approach, a sample that includes 30 of these women who obtained the highest scores of psychological and social stresses are then divided equally between the two experimental and control groups. The counseling program was applied to the experimental group for 12 sessions that occurred biweekly and for a duration of 90 minutes each. In favor of the experimental group, the results of the study show that there are statistically significant differences between the experimental and control groups in the post-measurement on the psychological and social stress scale. The differences are also significant between the pre and post-measurements within the experimental group in favor of the post-measurement.

Studies Related to Learned Optimism

The study of **Shawahneh et al. (2020)** investigated the level of learned optimism and its relationship to achievement motivation among Abu Dhabi University students in the United Arab Emirates. The study sample consisted of 189 male and 166 female students from Abu Dhabi University. The results of the study indicated that the average response of the sample on the learner optimism scale was moderate. The average response of the sample on the motivation scale for achievement was also moderate. The results of the study indicated that there is a positive correlation between the areas of learner's optimism and achievement motivation. In addition, there were statistically significant differences in the response average on the level of learner's optimism and motivation for academic

achievement. High-achieving students were more optimistic and more motivated while low-achieving students were less optimistic and less motivated.

The study of **Haroon & Bahiraei (2020)** considered the effectiveness of positivism training on life satisfaction and character strengths in elderly men. It was a quasi-experimental study with pretest, posttest, and control group design. The statistical population of the study included all elderly men who were retirees of Oil Company in Khoram Abad in 2020. The samples of this study consisted of 30 male elderlies (60-70 age) selected using convenience sampling and in accordance with inclusion criteria. The experimental group received eight ninety-minute sessions for two months while the control group didn't receive any intervention for the duration of the study. The applied questionnaires in the study included Character Strengths Scale and Life Satisfaction Scale. Data was analyzed using Univariate analysis of covariance in SPSS-22 software. The results showed that there was a significant difference between experimental and control groups in terms of life satisfaction and character strengths ($p < .001$). In other words, positivism training resulted in life satisfaction and character strengths among elderly men. According to the findings of the current study, positivism training can be suggested as an effective method to increase life satisfaction and character strengths for elderly men.

The research of **Chamuah & Sankar (2019)** was executed to evaluate the efficacy of learned optimism through perceived happiness among university students. The sample consisted of 60 students studying postgraduate courses in Annamalai University, Tamil Nadu. They were assessed by locus of control scale, learned optimism scale, and happiness scale. The results of the correlation coefficient indicated that all the studied variables were significantly correlated to happiness. Additionally, the regression analysis showed that locus of control and learned optimism could predict happiness significantly. The implications and limitations of the research are discussed.

Studies Related to Adolescence

The study of **Muhammad (2020)** aimed to identify the effectiveness of a training program based on educated optimism to develop critical thinking among adolescents with hearing impairment in addition to identifying the permanent impact of the program on these students. A semi-experimental approach was used with two groups design, an experimental group and a control group, and the pre- and post- and sequential measurement of the variables of study. The study sample also included (16) male and female students in the first and second grade of the secondary school at the “Special Education for the Deaf and Hard of Hearing and Intellectual Education” at its centers in Beni Suef Governorate. The students were divided into two groups: experimental group (n=8) exposed to the training program and control group (n=8) students who were not exposed to the training program. The study relied on the following tools: a critical thinking measurement or "researcher preparation", and the training program or "researcher preparation". Using appropriate statistical methods (Mann Whitney test, Wilcoxon test) and using the SPSS statistical program (V.12) to perform all statistical treatments, the results of the study showed the effectiveness of the training program in developing critical thinking in the experimental group as there was a survival of the impact of the program.

The study of **Burešová (2020)** titled by Predictors of Mental Health in Adolescence: The Role of Personality, Dispositional Optimism, and Social Support, contributed to the identification of possible sources affecting mental health in adolescence. This cross-sectional study focuses on the role of personality traits, dispositional optimism, and perceived social support in predicting mental health in adolescence. Mental health was assessed using Mental Health Continuum, personality traits using Big Five Inventory, dispositional optimism using Life Orientation Test—Revised, and social support by Close Relationships and Social Support Scale. The research sample consisted of 1,239 respondents aged 12 to 19

years (mean age 15.56 years), 54.3% females and 45.7 % males. Sequential regression analysis revealed that demographic variables and personality characteristics together explained 33.5% of mental health variance, the strongest predictors being extraversion and neuroticism. Including dispositional optimism and perceived social support resulted in a significant increase of the explained variance. All predictors together explained 46.0% of the mental health variance

The study of **Mahmoudi & Khoshakhlagh (2018)** investigated the effectiveness of positive psychotherapy on psychological well-being and self-esteem in adolescents with depression. The research method was a controlled randomized trial with a two-month follow-up period. The statistical population of this study was adolescents with depression disorder in Isfahan city in the academic year of 2011-2012 .By a multi-stage random cluster sampling , 30 adolescents with depression disorder were picked and randomly assigned into one control group (15 adolescents) and one test group (15 depressed adolescents). The test group received positive psychotherapy intervention for 2 months and a half (10 sessions), while the control group received no intervention during the study. In this study, data collection tools were s psychological well-being questionnaire, self-esteem questionnaire, and depression questionnaire. Data was analyzed using repeated measure ANOVA. The results of the data analysis indicated that mean scores of psychological well-being and self-esteem in adolescents with depression disorder in district 2 of Isfahan significantly increased as a result of positive psychiatric intervention in post-test and follow-up stages (P-value < .001).

Here is a brief table showing a comparison between previous studies.

Table 2.2 Comparison of previous studies

No	Researcher	Design	Variables	Sample	Results
1.	Basurrah et al. (2021)	Systematic review	PPIs/Arab countries		PPIs effective for promoting well-being & reducing mental health issues.
2.	Tejada-Gallardo et al. (2020)	Systematic review and Meta-analysis	PPIs/Well-being/ Distress	Adolescents	School-based multicomponent PPIs effective in improving mental health in the short and long-term.
3.	Illner (2019)	A quasi-experimental pre-post design	LY/ PPI/mental well-being / self-compassion/ health promoting behavior	Participants (≥ 18 years)	LY increase emotional well-being.
4.	Hatchard & Worth (2021)	Qualitative study	LY/ stress inoculation	Members of a UK-based laughter club	LY presented an opportunity for human connection and personal growth.
5.	Alici & Dönmez (2020)	Systematic review	LY/ physical function/ psychosocial outcomes	older adults	LY presented an opportunity for human connection and personal growth and psychosocial health.
6.	Namazi et al (2019)	A quasi-experimental pre-post design	LY/ mental well-being	Cancer patients undergoing chemotherapy	LY can promote the mental well-being of patients undergoing chemotherapy.
7.	Iman (2021)	A quasi-experimental pre-post design	Therapeutic laughter/ psychological and social pressures	Mothers who were quarantined during the COVID-19 pandemic	The results show that there are statistically significant differences between the experimental and control groups.

8.	Shawahneh et al. (2020)	Descriptive Design	Learned optimism/ achievement motivation	Abu Dhabi University students	There is a positive correlation between the areas of learner's optimism and achievement motivation.
9.	Haroon & Bahiraei (2020)	A quasi-experimental pre-post design	Positivism training/ life satisfaction/character strengths	Elderly men	Positivism training resulted in life satisfaction and character strengths among elderly men.
10.	Chamuah & Sankar (2019)	A quasi-experimental pre-post design	Learned optimism/happiness	University students	The correlation coefficient indicated that all the studied variables were significantly correlated to happiness.
11.	Muhammad (2020)	A semi-experimental approach	Learned optimism /critical thinking	Adolescents	The effectiveness of the training program in developing critical thinking.
12.	Burešová (2020)	Predictive approach	Personality/ Dispositional Optimism/ and Social Support/ mental health	Adolescents	Dispositional optimism and perceived social support resulted in a significant increase of the explained variance.
13.	Mahmoudi & Khoshakhlagh (2018)	Controlled randomized trial	Psychotherapy/ psychological well-being/ self-esteem	Adolescents	Mean scores of psychological well-being and self-esteem in adolescents with depression disorder in district 2 were significantly.

When comparing previous studies, they gathered the positive impact of Positive Psychology and Laughter Yoga both on the physical level and on the level of mental health. Previous studies also advise to delve into the studies regarding the impact of Positive Psychology and Laughter Yoga on various samples.

All previous studies did not use a positive counseling program that relies on laughter yoga as the positive psychology intervention method.

Basurrah's and others (2022) study recommended using younger populations. In accounting for this recommendation, this current study uses adolescents as a sample.

As prevalent within the above research, a counseling program based on laughter yoga has not been implemented in the Arab world.

There is an abundance of foreign studies from all over the world, but I could not find Laughter Yoga studies pertaining to the Arab world. Given the lack of scholarship and study on laughter yoga in this part of the world, this study fills an important gap. In addition, all previous studies did not utilize a positive psychological counseling program while this study does.

Chapter Three

Methodology & Procedures

This chapter deals with the methods and procedures that were followed including defining the study methodology used, the study population, and the sample, and presenting the practical steps and procedures that were followed in developing and building the study tools and their characteristics. Sequentially, this chapter explains the study design scheme and its variables referring to the types of statistical tests used in analyzing the study data.

1.3 Study methodology

Based on the nature of the current study, the Quasi-experimental approach was used, which is based on two groups, one of which is a control group and the second is an experimental group.

2.3 The Study Population and Its Sample

The study population consisted of all adolescents in Hebron Governorate. With regard to the study sample, it was selected according to the following stages:

1.2.3 The pilot study sample

To verify the psychometric properties of the study scale, a Pilot sample was selected from the study population and outside its original sample, which amounted to (40) adolescents

2.2.3 The field study sample

The study scale was distributed to a sample of (76) adolescents to select the control and experimental study sample consisting of (30) adolescents who obtained the lowest scores on the Learned Optimism Scale.

3.2.3 Experimental study sample (study members)

The study Participants consisted of (30) adolescents, those who wish to participate in the program and whose ages ranged (13-15), and who obtained the lowest scores on the Learned Optimism scale. They were then divided equally into two groups of (15): control and experimental.

3.3 Study tools

For the purposes of data collection, the researcher developed two tools based on previous studies and theoretical literature: the Learned Optimism Scale, and the Positive Psychological Counseling Program

First: The Learned Optimism scale

The researcher built the scale to measure optimism only that is without linking it to pessimism. In constructing the scale, the researcher relied on merging two measures of optimism. These measures of optimism relate to two different approaches in positive psychology that have varied interpretations of optimism:

1 .Carver and Shier's theory of dispositional optimism (Carver & Scheier, 2014), which adopts the Life Orientation Test (LOT) (Andersson, 1996).

2 .Seligman's theory of learned optimism (Seligman, 1998), which adopts the Optimism/Pessimism Scale- Explanatory style.

This scale was not used according to its current structure in any previous study that I know of.

1.3.3 Psychometric properties of the Learned Optimism scale

A) Validity of the Scale:

The researcher used two types of validity as follows:

1- Face Validity

To verify the apparent validity of the learned optimism scale, the scale was presented in its initial form to a group of specialists who hold doctorate degrees in psychological and educational counseling and psychology. They numbered (11) arbitrators as shown in Appendix C. All arbitrators agreed not to amend the learned optimism scale. The standard of agreement (80%) was also adopted as a minimum for accepting the paragraph, and based on the observations and opinions of the arbitrators, the proposed amendments were made.

2- Construct Validity

To verify the validity of the scale, the researcher used the construction validity on a pilot study consisting of (40) adolescents from outside the target study sample and utilized the Pearson Correlation coefficient to extract the values of the correlation coefficient of the items with the dimension to which they belong (as shown in Table (3.1)).

Table (3.1)
The values of the Items Scale of Learned Optimism correlation coefficient with the dimension you belong to (N=40)

Item	Correlation with the dimension	Item	Correlation with the dimension	Item	Correlation with the dimension	Item	Correlation with the dimension
	PsG		PmG		PvG		DO
4	.09	9	.28	19	.43**	1	.52**
5	.49**	10	.56**	20	.60**	2	.70**
6	.40**	11	.32*	23	.55**	3	.27
7	.58**	12	.83**	24	.83**	15	.50
8	.55**	14	.78**	25	.78**	16	.15
13	.58**	21	.64**	26	.63**	27	.05
17	.75**	22	.66**	28	.59**	31	.54**
18	.37**	29	.48**	30	.10	32	.51**

Significance Level (*P < .05) * Significance Level (**P < .01)**

It is noted from the data in Table (3.1) that the correlation coefficient of the items ranged between (.32-.83) and all correlation coefficients were of acceptable and statistically significant degrees. These findings comply with Garcia's (2011) statement-- that the value of the correlation coefficient less than (.30) are considered

weak, values that fall within the range (.30 - Less or equal to .70) are considered average, and a value greater than (.70) is considered strong. As follows, the items (3, 4, 9, 16, 27, 30) were deleted, and the number of items on the scale became (26) items as depicted in Appendix E.

Reliability of the Learned Optimism Scale

To ensure the reliability of the Learned Optimism scale, the scale was distributed to a pilot study consisting of (40) adolescents outside the target of the study sample. To verify the stability of the internal consistency of the scale and its dimensions, the equation (Kuder-Richardson (KR-20) was used as it is best suited for dichotomous scales (yes, no) according to Adamson & Prion (2013). Additionally, formula (20) does not assume the equality of the difficulty coefficient of items as in formula (21) as Table (3.2) explains:

Table (3.2)
The reliability coefficient of the Learned Optimism scale using the Kuder-Richardson (KR-20) method.

The dimension	Number Of Items	KR-20
PsG	7	.73
PmG	7	.62
PvG	7	.76
DO	5	.60
Total Score	26	.66

It is clear from Table (3.2) that the values of the Kuder-Richardson (KR-20) reliability coefficient for the dimensions of the Learned Optimism Scale ranged between (.60-.76). It is also noted that the reliability coefficient (Kuder-Richardson (KR-20) for the total score reached (.66).

Correcting the Learned Optimism Scale

The scale of Learned Optimism in its final form consisted of (26) items, as shown in Appendix E. The respondent is asked to estimate his answers by answering (yes or no), and the weights were given to the items as follows: Yes (1) degree, No (0) zero (also shown in Appendix E). The items were distributed on four dimensions as follows:

- i) Personalization Good: abbreviated as (PsG) and its items were represented (5, 6, 10, 13, 14).
- ii) Permanent Good: abbreviated as (PmG) and its items were represented (7, 8, 11, 17, 18, 24).
- iii)c) Pervasiveness Good: abbreviated as (PvG) and its items were represented (15, 19, 20, 21, 22, 23).
- iv) Dispositional Optimism: abbreviated as (DO) and its items were represented (1, 2, 12, 25, 26).

Second: Positive Psychological Counseling Program Based on Laughter Yoga in Developing Learned Optimism

After reviewing the theoretical literature and previous studies that used counseling programs based on Laughter Yoga and Positive Psychology, the researcher prepared Positive Psychological Counseling Program Based on Laughter Yoga in Developing Learned Optimism to achieve the desired goals of this study.

Definition of the current ccounseling program

The counseling program consists of (8) sessions of two sessions per week lasting (90) minutes each. Each session includes a set of specific and structured steps based on the techniques and counseling methods that depend on the Laughter Yoga exercises and PPIs. The program includes a set of information, expertise, organized and active training, and skills that facilitate the participants of the

experimental sample to develop learned optimism among them. After preparing the program in its initial form, the researcher presented the program to some experts and specialists in the field of psychological and educational counseling to ensure the sincerity of the program, its strategies, techniques, and procedures, and its standardization in the Palestinian context.

The objectives of the counselling program

1- General objective:

To develop Learned Optimism among adolescents using a positive psychological counseling program based on laughter yoga.

2- Sub-objectives:

- 1 .Adolescents should acquire the characteristics and techniques of positive psychology such as: optimism, hope, flow, positive emotions, self-efficacy, self-confidence, and positive thinking.
- 2 .That the teenager realizes the importance of positive self-talk to address the events he is facing.
- 3 .The teenager should practice the techniques and exercises of laughter yoga and apply them correctly.
- 4 .That the teenager be able to perform laughter yoga exercises on his own at any time.
- 5 .That the teenager realizes the importance of optimism and the mechanisms of its internal explanation.
- 6 .The student should realize the beneficial effects laughter has on mental and physical health.
- 7 .Building a counseling relationship based on trust, acceptance, cooperation, and respect between the group participating in the program and the researcher implementing the program.

8 .Adolescents should acquire positive personality traits and deal with positivity and optimism in facing current and future life problems.

9 .The participating advisory group should be trained to introduce the skills of fun and laughter into daily life in order to reduce psychological and social pressures.

10. To be able to build stronger relationships with his peers through fun and shared laughter.

3- The strategies and techniques used in the counselling program:

a) Lecture: The applied content of this technique depends on simplified information that are appropriate for the adolescents' level and may convey theoretical and practical concepts more easily.

b) Group Discussion: In this technique, opinions are exchanged between the counselor and the adolescents on the subject of the session on the one hand, and among the adolescents on the other, and thus the scientific material of the lecture becomes a subject of discussion among all.

c) Positive reinforcement: Adolescents receive positive reinforcement through praise for correct answers and appropriate responses during the discussion. The aim of using this technique is to stimulate correct thinking and positive behavior so that it becomes part of their lives.

d) Positive Psychology Techniques:

- Gratitude
- Mindfulness
- Strengths
- Techniques of learned optimism
- Increasing self-knowledge
- Positive Thinking

- Context
- Flow
- Meaning
- The Method of the Bracelet
- The Method of Affirmation
- The technique of affirmative questions (The Method of Affirmation)

c) Laughter yoga techniques

- Relaxation exercises
- Breathing exercises
- Laughing exercises
- Clapping
- Gibberish

The table (3.3) shows a summary of the contents of the counseling sessions:

Table (3.3)
Contents of the Counseling Sessions

No.	Session Topic (Title)	Session Objectives	Counseling techniques
1.	Getting acquainted and building trust with the experimental group	1 -The researcher introduces himself to the participants and the counseling program that will be applied. 2 -Breaking barriers between participants. 3 -Adolescents introduce themselves through an acquaintance exercise. 4 -Introducing adolescents to the program and its workflow. 5 -Clarifying the objectives of the program to be achieved. 6- Practicing laughter yoga.	Dialogue and discussion. Laughter yoga exercises. Interpretation and clarification. Feedback and summarization. Homework. Pre-test measure.
2.	Introducing the concept of laughter yoga and therapeutic laughter	1. Clarify the concept of laughter yoga. 2. Explain the importance of laughter and its psychological and physical impact.	Laughter yoga exercises. Dialogue and discussion. Brainstorming The brief lecture.

		<p>3. Clarify the results of studies that support this.</p> <p>4. Explain the concept of positive and negative emotions.</p> <p>5. Clarify that laughter is one of the means of psychological release.</p>	<p>Feedback and summarization.</p> <p>Positive reinforcement.</p> <p>Modeling.</p> <p>Breathing exercise.</p> <p>Homework.</p>
3.	Introducing positive psychology	<p>1. Explain the most important concepts of positive psychology.</p> <p>2. Clarifying the relationship of positive psychology to happiness and fun.</p> <p>3. An explanation of how the teenager uses some of its techniques.</p>	<p>Laughter yoga exercises.</p> <p>Relaxation exercises.</p> <p>Breathing exercises.</p> <p>Lecture.</p> <p>Interpretation and clarification.</p> <p>Gratitude.</p> <p>Mental alertness.</p> <p>Positive thinking.</p> <p>The flowing.</p> <p>Instill hope.</p> <p>Homework.</p>
4.	Introducing the concept of learned optimism	<p>1. Explain the concept of optimism and pessimism in general.</p> <p>2. Clarify the concept of learned optimism.</p> <p>3. Explain the dimensions of learned optimism.</p> <p>4. Clarifying the relationship between learned optimism and positive psychology.</p> <p>5. Explain the importance of optimism in a teenager's life.</p>	<p>Laughter yoga exercises.</p> <p>Breathing exercise.</p> <p>Lecture.</p> <p>Interpretation and clarification.</p> <p>Gratitude.</p> <p>Internal interpretation of events.</p> <p>Positive thinking.</p> <p>Homework.</p>
5.	Emotional Debriefing	<p>1. Adolescents are able to express what is going on inside them including repression and tension.</p> <p>2. Alleviating the negative feelings of adolescents.</p> <p>3. Participants' expression of feelings, emotions, and reactions to events.</p> <p>4. Participants' expression of the problem as one of the dimensions of its solution.</p> <p>5. Adolescents acquire the skill of listening to the other.</p> <p>6. Practicing laughter yoga.</p>	<p>Laughter yoga exercises.</p> <p>Relaxation exercises.</p> <p>Lecture.</p> <p>Interpretation and clarification.</p> <p>Gratitude.</p> <p>Internal interpretation of events.</p>
6.	Create a beautiful, optimistic day.	<p>1. Focusing on the positive aspects of life.</p> <p>2. Testing the adolescent's ability to interact optimistically with life.</p>	<p>Laughter yoga exercises.</p> <p>Relaxation exercises.</p> <p>The lecture.</p>

		3. Increasing the internal explanation of the teenager about the dimensions of optimism. 4. Raising the adolescent's ability to plan and implement positive feelings. 5. Increasing the interaction of the teenager with the environment. 6. Practicing laughter yoga.	Interpretation and clarification. Affirmation technique. The context. The flowing. The meaning.
7.	The development of Meaning in Life in your life.	1. Recognizing the concept of the meaning of life. 2. Recognizing the concepts related to the meaning of life: such as optimism, hope, and love of life. 3. Clarifying the importance of the positive meaning in life and its sources. 4. Adolescents discover goals that make life worth living. 5. Discovering meaning through suffering. 6. Practicing laughter yoga.	Laughter yoga exercises. Relaxation exercises. Lecture. Interpretation and clarification. Gratitude.
8.	Closing session.	1. Program Evaluation. 2. Summarize the counseling program. 3. Thank the participants. 4. Post- test measure of learned optimism. 5. Agreeing on a follow-up measurement date.	Dialogue and discussion. Brainstorming The brief lecture. Feedback and summarization. Post- test measure.

4. 3 Study design and variables

a) Study Design:

The study used the Quasi-experimental approach that depends on the control and experimental groups, a pre-and post-measurement of the learned optimism, and through the implementation of the following measurements for the two study groups:

The experimental group: pre-measurement - conducting the counseling program - post-measurement - follow-up measurement after (4) weeks.

Control group: pre-measurement, no treatment, post-measurement.

The study design can be expressed in Table (3.4):

Table (3.4)

Study Design				
Group G	Processing			
	Pre-test Measurement	Counseling program	Post-test Measurement	Follow-up Measurement
E	O	X	O	O
C	O	-	O	-

(E) Experimental Group, (C) Control Group, (O) Measurement (Pre -, Post -, Follow-Up), (X) Treatment, (-) No Treatment.

b) Study variables:

The study included the following independent and dependent variables:

1- The independent variable (treatment): The counseling program.

2- Dependent variables (output): Learned Optimism.

5.3 Study implementation procedure

In implementing the study, the researcher followed several steps as follows:

1. Reviewing the theoretical framework and previous studies that dealt with the topics of the study and its variables and preparing the initial picture of the appropriate study tools.
2. Presenting the study tools to a group of arbitrators to ensure their suitability for the study and its sample.
3. Apply the study scale to a pilot study to verify its psychometric properties.
4. Determine the sample of the field study and then divide it into two groups, one experimental and the other control.
5. Apply pre-measurement and verify the equivalence of the control and experimental groups before applying for the program.

6. Implementation of the counseling program prepared for the development of Learned Optimism among the study sample.
7. Applying the telemetry to the experimental and control groups, then applying the tracking measurement to the experimental group after a tracking period of (4) weeks.
8. Analyze data and extract results for interpretation and discussion.

6.3 Statistical treatments

To process the data and after collecting it, the researcher used the statistical packages program for the social sciences (SPSS, 28) using the following statistical treatments:

1. Means and standard deviations.
2. Pearson correlation to know the relationship or correlation between the item and the dimension to which it belongs.
3. Cronbach's Alpha formula for reliability testing.
4. Check the normal distribution to see if the data follows the normal distribution.
5. Independent samples t-test and Paired Samples t-test.
6. ANCOVA test.
7. MANCOVA test.

Chapter Four

The Study Results

This chapter deals with a presentation of the results of the study in light of its hypothesis that was presented. The results were organized according to a specific methodology in the presentation and always presented in the light of its hypothesis. Such is also represented in the presentation of the text of the hypothesis followed directly by an indication of the type of statistical treatments used, then tabulating the data, and placing it under appropriate headings. Comments are given for the most prominent results draw. Thus, the results associated with each hypothesis are presented separately.

Normal Distribution Test

To ensure that the data follows the normal distribution, use the Shapiro-Wilk test and the Kolmogorov–Smirnov test, which is necessary to determine the statistical methods that will be used to test the hypotheses of this study, whether they are parametric tests or non-parametric tests, as most parametric tests require that the distribution of data be normal. Table (1.4) shows the normal distribution test for variables and the Skewness and Kurtosis tests:

Table (4.1)
Results of the Shapiro-Wilk test, the Kolmogorov-Smirnov test, and the Skewness and Kurtosis tests

Variable	The Group	N	KS test	Sig	Shapiro-Wilk	Sig	Skewness	Kurtosis
Post-test	Control	15	.289	.052	.908	.126	.580	1.121
Post-test	Experimental	15	.195	.129	.868	.031	.580	1.121

Table (4.1) shows that the statistical significance values of the Shapiro-Wilk test and Kolmogorov-Smirnov test were greater than the statistical significance level ($\alpha < .05$) excluding the statistical significance value of the Shapiro-Wilk test in the

post-measurement of the learning optimism of the experimental group. It is also noted that the Skewness values were within acceptable limits according to Finney & Finney & DiStefano (2006), who confirmed that if the Skewness values are between (± 2) and Kurtosis between (± 7), they are acceptable. It should be noted that the Normal Distribution Test can be dispensed with as long as the size of the study sample is greater than or equal to (30) observations, according to the Central Limit Theorem (CLT), and one of the conditions can be dispensed with as long as the other conditions are met (Hahs-Vaughn & Lomax, 2013), indicating that the data follows the normal distribution, and that the study used parametric tests in data analysis.

Group equivalent for the Learned Optimism scale:

To verify the equivalence of groups, the means and standard deviations of the response of the study sample individuals were extracted on the scale of Learned Optimism in the pre-measurement according to the group variable (control, experimental. To show the significance of the statistical differences between the means, use the Independent Samples t-test as Table (4.2) shows:

Table (4.2)

The values of the means, standard deviations, and t-test according to the group variable on the scale of Learned Optimism in the pre-measurement

Variable	The Group	N	Mean	Std. Deviation	t	Sig
	Control	15	3.07	1.223	1.183	.247
	Experimental	15	2.53	1.246		
	Control	15	2.73	1.163	1.237	.226
	Experimental	15	2.27	0.884		
	Control	15	2.93	0.799	-1.288	.208
	Experimental	15	3.33	0.900		
	Control	15	2.20	1.207	-1.137	.265
	Experimental	15	2.60	0.632		
	Control	15	10.93	1.534	0.357	.724
	Experimental	15	10.73	1.534		

Table (2.4) shows that there are no statistically significant differences at the significance level ($\alpha \leq .05$) between the means of the pre-measurement of the

Learned Optimism scale according to the group variable (control, experimental), where the value of "t" for the total score was (0.357). And with a statistical significance (.724), this result indicates the equivalence of the groups.

1.4 Results related to the first hypothesis:

There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members and the control group members on the Learned Optimism Scale after applying the counseling program.

To examine the first hypothesis, the means and standard deviations of the scores of the study individuals were calculated on the Learned Optimism scale in the post-measurement. The results of Table (4.3) show that:

Table (4.3)
Means and standard deviations of the scores of the control and experimental groups on the Learned Optimism scale in post-measurement

Group	N	Post-test	
		Mean	Std. Deviation
Control	15	10.67	1.175
Experimental	15	17.93	1.534

It is clear from Table (4.3) that there are apparent differences between the average performances of the two group. The control and the experimental group on the Learned Optimism scale in the (post) measurement, show average performance of the control group on the post measurement was (10.67), while the average performance of the experimental group was (17.93). Such indicates the differences between the two averages. To further verify the substantiality of the apparent difference, The ANCOVA test was used for the post-measurement of the Learned Optimism measure among adolescents according to the group and after neutralizing the effect of the pre-measurement for them as shown in Table (4.4):

Table (4.4)

The ANCOVA test for the post-measurement of Learned Optimism among adolescents, according to the group, after neutralizing the effect of the pre-measurement for them.

Source of variation	Type III Sum of Squares	df	Mean Square	F	Sig.	Effect Size η^2
Pre-test	6.318	1	6.318	3.713	.065	.121
Group	400.988	1	400.988	235.626	.000*	.897
Error	45.948	27	1.702			

(* p < .05)

Table (4.4) shows that there are statistically significant differences at the level of significance ($\alpha \leq .05$) attributed to the group variable where the calculated value of (F) was (235.626), statistically significant (.000).

To specify in favor of any of the two groups of the study were the differences, the arithmetic averages adjusted for the post-measurement of the Learned Optimism Scale for adolescents were calculated, according to the group and its standard errors, as shown in Table (4.5):

Table (4.5)

The modified arithmetic means of the post-measurement of the Learned Optimism scale for adolescents according to the group and their standard errors

Group	Mean	Std. Error
Controller	10.636 ^a	.337
Experimental	17.964 ^a	.337

It is noted from Table (4.5) that the adjusted arithmetic mean of the experimental group that used the counseling program applied in developing Learned Optimism among adolescents was the largest, reaching (17.964), while it reached (10.636) for the control group. These results indicate that the difference was in favor of the experimental group. In other words, the applied counseling program was effective in developing Learned Optimism among adolescents. Note that the size of the effect of the counseling program amounted to (.897).

Means and standard deviations were also calculated for the post-measurement of the dimensions of Learned Optimism among adolescents in accordance with both the control and experimental groups as shown in Table (4.6)

Table (4.6)

The values of the means and standard deviations of the post-measurement of the dimensions of Learned Optimism among adolescents according to the group

Dimensions	Group	N	Post-test	
			Mean	Std. Deviation
	Control	15	3.27	1.223
	Experimental	15	4.27	1.100
	Control	15	2.07	1.163
	Experimental	15	4.73	1.033
	Control	15	2.87	.990
	Experimental	15	4.73	.799
	Control	15	2.47	1.060
	Experimental	15	4.20	.676

It is noted from Table (4.6) that there are apparent differences between the arithmetic averages of the post-measurement of the dimensions of Learned Optimism. To verify the significance of the apparent differences and to demonstrate the significance of the statistical differences between the arithmetic means, the MANCOVA test was conducted on the dimensions of Learned Optimism. Before conducting this test, its assumptions related to (Absence of Multicollinearity) were found by calculating the correlation coefficient in the post-measurement of the dimensions of Learned Optimism, followed by the Bartlett test, as the correlation coefficient did not exceed the value of (.51), and the value of χ^2 for the Bartlett test came ($18.978 = \chi^2$), with statistical significance ($P > .004$). These calculations indicate that this condition is fulfilled, (Homogeneity of Covariance) was verified through Box's M test with a value of (9.799) and a statistical significance of (.603), and is considered appropriate according to Hahs-Vaughn, 2016 as it is greater than (.001). Table (4.7) shows the results of the MANCOVA test:

Table (4.7)

The MANCOVA test of the effect of the group on the dimensions of the measure of Learned Optimism among adolescents after neutralizing the effect of the pre-measurement for them

Dependent Variable	Source of variation	Type III Sum of Squares	df	Mean Square	F	Sig.	Effect Size η^2
PsG (Covariate(s))	PsG	2.849	1	2.849	2.247	.147	.086
PmG (Covariate(s))	PmG	9.232	1	9.232	11.875	.002	.331
PvG (Covariate(s))	PvG	6.076	1	6.076	9.171	.006	.276
DO (Covariate(s))	DO	8.755	1	8.755	16.910	.000	.413
	PsG	9.032	1	9.032	7.124	.013*	.229
	PmG	61.357	1	61.357	78.922	.000*	.767
	PvG	18.293	1	18.293	27.608	.000*	.535
	DO	14.157	1	14.157	27.345	.000*	.533
	PsG	30.426	24	1.268			
	PmG	18.658	24	.777			
	PvG	15.902	24	.663			
	DO	12.425	24	.518			

(* p < .05)

Table (4.7) shows that there are statistically significant differences at the significance level ($\alpha \leq .05$) between the arithmetic means of the post-measurement of the dimensions of Learned Optimism among adolescents according to the group. To specify in favor of any of the two studies groups was a significant difference; the adjusted arithmetic means of the dimensions of Learned Optimism among adolescents were calculated, according to the group and its standard errors, as shown in Table (4.8):

Table (4.8)

Adjusted Means for the post-measurement of the dimensions of Learned Optimism among adolescents, according to the group

Dependent Variable	Group	Mean	Std. Error
	Controller	3.160	.306
	Experimental	4.373	.306
	Controller	1.819	.240
	Experimental	4.981	.240
	Controller	2.937	.222
	Experimental	4.663	.222
	Controller	2.574	.196
	Experimental	4.093	.196

It is clear from Table (4.8) that the significant differences between the two modified arithmetic mean for the post-measurement of the dimensions of Learned Optimism among adolescents were in favor of the experimental group who underwent the counseling program compared to the control group who did not receive the counseling program indicating the effectiveness of the counseling program in developing optimism adolescent learner.

2.4 Results related to the second hypothesis:

There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members in the pre-and post-measurements on the Learned Optimism Scale attributed to the counseling program.

To examine the second hypothesis, means and standard deviations were calculated for the performance of the experimental group members on the pre-test and post-test, and the Paired Sample t-test was used to detect the effectiveness of the counseling program in developing Learned Optimism among adolescents. Table (4.9) shows that:

Table (4.9)

The results of the Paired Sample t-test to examine the differences between the pre and Post-test of the Learned Optimism measure among the experimental group members

Variable	The Test	N	Mean	Std. Deviation	Df	t	Sig
	Pre-test	15	2.53	1.246	14	-6.104	.000*
	Post-test	15	4.27	1.100			
	Pre-test	15	2.27	.884	14	-10.435	.000*
	Post-test	15	4.73	1.033			
	Pre-test	15	3.33	.900	14	-5.501	.000*
	Post-test	15	4.73	.799			
	Pre-test	15	2.60	.632	14	-7.483	.000*
	Post-test	15	4.20	.676			
	Pre-test	15	10.73	1.534	14	-15.659	.000*
	Post-test	15	17.93	1.534			

(* p < .05)

It is clear from Table (4.9) that the value of the calculated significance level was reached on the total score and dimensions of the Learned Optimism scale (.000) and this value is less than the value of the significance level specified for the study ($\alpha \leq .05$). Therefore, there are differences in the learner's optimism among the study individuals between the pre-and post-measurements, showing that the average performance of the experimental group individuals on the total degree in the pre-measurement are (10. 73) and in the post-measurement are (17. 93) confirming the effectiveness of the applied program in developing Learned Optimism among adolescents.

3.4 Results related to the third hypothesis:

There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members on the Learned Optimism Scale in the post and follow-up measurements after four weeks of applying the counseling program.

To test the hypothesis, means and standard deviations were calculated for the performance of the experimental group members on the post-test and follow-up. In addition, the Paired Sample t-test was used to detect differences between the two post-measurements and follow-up of the dimensions of Learned Optimism and the total score of adolescents. The results of Table (4.10) show that:

Table (4.10)
Results of the Paired Sample t-test to detect differences between the two post-measurements and the follow-up of the dimensions of Learned Optimism and the total score of adolescents

Variable	The Test	N	Mean	Std. Deviation	Df	t	Sig
	Post-test	15	4.27	1.100	14	-.619	.546
	Follow-up	15	4.40	1.352			
	Post-test	15	4.73	1.033	14	-1.146	.271
	Follow-up	15	4.93	1.223			
	Post-test	15	4.73	.799	14	1.293	.217
	Follow-up	15	4.47	.990			
	Post-test	15	4.20	.676	14	-.564	.582
	Follow-up	15	4.27	.704			
	Post-test	15	17.93	1.534	14	-.354	.728
	Follow-up	15	18.07	1.335			

Table (4.10) shows that there are statistically significant differences at the significance level ($\alpha < .05$) between the two post-measurements and the follow-up among the experimental group, as the mean of the post-measurement was (17.93) while the mean of the follow-up measurement was (18.07). These results indicate the continuity of the effect of the counseling program in developing Learned Optimism among adolescents that is, the improvement received by the experimental group members continued after the follow-up period.

Chapter Five

Explanation and Discussion of the Results

This chapter included a discussion of the results of this study, through its questions and the hypotheses that emerged from them, and by comparing them with the results of previous studies. This chapter also offers recommendations that can be presented in the light of these results.

5.1 Explanation and discussion of the results of the first hypothesis

There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members and the control group members on the Learned Optimism Scale after applying the counseling program.

Results of the ANCOVA test indicated that the significant differences between the two arithmetic means modified for the post-measurement of learned optimism were in favor of the experimental group who underwent the counseling program compared to the control group who did not receive the counseling program indicating the effectiveness of the counseling program in developing Learned Optimism among the adolescents.

It is noted from the data contained in Table (4.4) that the effect size of the counseling program as a whole amounted to (.897), for the post-measurement of Learned Optimism, which is a high value according to the standard (Cohen, 1977: 287-284). Such indicates that the counseling program interpreted (90%) from the variation in the dependent variable related to developing Learned Optimism.

This result in the current study agrees with the results of the following studies: (Illner, 2019) which used a quasi-experimental design, it proved LY as PPI could

increase emotional well-being, (Namazi et al, 2019). As a quasi-experimental, it showed that LY can promote the mental well-being of patients undergoing chemotherapy, (Shaheen & Badran, 2021). Its quasi-experimental design showed that there are statistically significant differences between the experimental and control groups. (Haroon & Bahiraei, 2020) is also a quasi-experimental design which demonstrated positivism training resulted in life satisfaction and character strengths among elderly men. Systematic review and Meta-analysis of (Tejada-Gallardo et al., 2020) study showed that school-based multicomponent PPIs are effective in improving mental health in the short and long-term. The study of (Alici & Dönmez, 2020) results also showed LY as an opportunity for human connection and personal growth and psychosocial health. Burešová (2020) study came to a conclusion that dispositional optimism and perceived social support resulted in a significant increase of the explained variance.

(Chamuah & Sankar, 2019) study is a quasi-experimental pre-post design in which the correlation coefficient indicated that all the studied variables (optimism/happiness) were significantly correlated to happiness.

This remarkable result in the size and effect of the applied program can be attributed to the researcher's experience in applying similar programs to different groups including children and adolescents with disabilities, the elderly, school students, prisoners and cancer patients as well as what was included in the counseling program of laughter yoga exercises that attract adolescents and the techniques of positive psychology that stimulate the positive part of thinking and contribute to optimism. The counselling techniques of PP and LY have added an additional effect to the program: Gratitude, Mindfulness, and Techniques of Learned Optimism, Positive Thinking, Context, Flow, Meaning, and The Method of The Bracelet, The Method of Affirmation, Relaxation, Clapping, Gibberish, the Exercises of Breathing, and LY Exercises. Also, the counseling program gave

enough time to explain the dimensions of the Learned Optimism in detail as clear and sufficient examples were given on these dimensions.

5.2 Explanation and discussion of the results of the second hypothesis

There are no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members in the pre-and post-measurements on the Learned Optimism Scale attributed to the counseling program.

The results indicated that there were differences between the average scores of the experimental group members in the pre-and post-measurements on the Learned Optimism Scale attributed to the counseling program.

This result related to the effectiveness of the counseling program can be attributed to the components used in it: psychological techniques used in this program, using the four dimensions of the scale as part of explaining the meaning of learned optimism, the researcher's experience, the real need of adolescents for program information, and the number and duration of sessions. All these factors gave adolescents new skills that developed their understanding of learned optimism.

The program also provided an opportunity to understand the benefits of laughter, positive thinking and optimism on the level of life in general and on the level of study in particular. The program also explained how to practice yoga exercises collectively and individually daily which assist in gaining a daily dose of optimism.

This result agreed with all previous studies that confirmed the positive effectiveness of LY and PPIs on mental and physical health: (Basurrah et al., 2021) showed that PPIs effectiveness for promoting well-being & reducing mental health issues, (Tejada-Gallardo et al, 2020) resulted that School-based multicomponent PPIs is effective in improving mental health in the short and long-term, (Illner, 2019) it proved LY as PPI could increase emotional well-being, (Hatchard & Worth, 2021)

LY presented an opportunity for human connection and personal growth, (Alici & Dönmez, 2020) LY presented an opportunity for human connection and personal growth and psychosocial health, (Namazi et al, 2019) LY can promote the mental well-being of patients undergoing chemotherapy, (Iman ,2021) Gelotherapy reduced psychological and social pressure, (Burešová , 2020) dispositional optimism and perceived social support resulted in a significant increase of the explained variance.

5.3 Explanation and discussion of the results of the third hypothesis

There will be no statistically significant differences at ($\alpha \leq .05$) between the average scores of the experimental group members on the Learned Optimism Scale in the post and follow-up measurements after four weeks of applying the counseling program.

The statistical results showed that there are statistically significant differences at the significance level ($\alpha < .05$) between the two post-measurements and the follow-up among the experimental group as the mean of the post-measurement, was (17.93) while the mean of the follow-up measurement was (18.07). Refers to the continuity of the effect of the counseling program in developing Learned Optimism among adolescents. That is, the improvement received by the experimental group members continued after the follow-up period.

This result agreed with the studies: (Iman, 2021) the differences are also significant between the pre and post measurements within the experimental group in favor of the post-measurement, (Mahmoudi & Khoshakhlagh, 2018) were significantly increased by positive psychiatric intervention in post-test and follow-up stages, (Muhammad, 2020) the effectiveness of the training program in developing critical thinking in the experimental group.

This is due to the counseling sessions, which included some experiences and attitudes that were addressed and implemented through the use of some techniques and methods that were based on the strategy of LY and PPIs and various counseling techniques, such as: Gratitude, Mindfulness, and Techniques of learned Optimism, Positive Thinking, Context, Flow, Meaning, and The Method of The Bracelet, The Method of Affirmation, Relaxation, Clapping, Gibberish, the Exercises of Breathing, and LY Exercises All of these contents gave the program the ability to teach and alter ways of thinking and looking at things which gave way to a certain modification in the philosophy of life among the members of the experimental group. These factors had the greatest impact on the continuity of the impact of the counseling program in developing Learned Optimism among the adolescents.

It was also remarkable for the participants' motivation, keenness, and follow-up to participate and attend the counseling sessions. Their participation during the sessions was remarkable which reinforced their positive thinking and optimism. In addition, the participants continued to apply the strategies they learned during the subsequent sessions. It was also noted the tangible and clear change in their thoughts from one session to the next. The counseling program provided the participants with the opportunity to give examples of how to interpret situations in their lives in a positive way and give examples of situations that had happened with them. These situations were discussed using positive psychology techniques encouraging participants to build a positive and optimistic way of thinking. These tools and skillsets allowed participants to transfer the experiences they gained during counseling program to their different and respective life situations.

To conclude the discussion, it should be noted all previous studies, including the current study, have proven the effectiveness of LY and PPIs on mental and physical health. What distinguishes the results of this study however is that these

practices were applied in the Arab community for the first time and that it combined positive psychology and laughter yoga within one counseling program.

Recommendations and Suggestions

Recommendations

In light of the results of the current study, the study proposes the following recommendations:

1. Focusing on working with Positive Psychology Interventions and its use in individual and group psychological counseling.
2. Teaching Laughter Yoga skills as a method of group and self-discharge in Palestinian schools and various educational institutions.
3. Establishing Laughter Yoga clubs as one of the methods of improving mental and physical health in Palestine. These clubs were one of the goals of the founder of Laughter Yoga, Dr. Madan Kataria.
4. Benefit from the current counseling program in UNRWA schools and public and private schools. The results of all studies, including the current study, demonstrated the positive impact of this type of psychological programs in increasing mental health.
5. Inclusion in the counseling plans of psychological and educational counselors in Palestinian institutions and centers of counseling programs that contribute to increasing optimism among adolescents.

Suggestions

The researcher also offers the following suggestions to be used in subsequent studies:

1. Conducting similar studies on different samples and age groups related to Positive Psychology in Palestinian universities as there are few scientific studies in the field of Positive Psychology in the Arab world.
2. Increasing the number of scientific studies related to the effect of Laughter Yoga with different groups in the Palestinian society.
3. More research is needed on the long-term effects of LY on Learned Optimism, using longer term follow-ups.
4. Conducting new studies on laughter yoga as one of the interventions of positive psychology and its impact on well-being and happiness.

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Appendices
Appendix A: Study scale before arbitration
(In Arabic)



جامعة القدس المفتوحة
عمادة الدراسات العليا

بسم الله الرحمن الرحيم

حضرة الأستاذ الدكتورالمحترم/ة

تحية طيبة وبعد،

يقوم الباحث بدراسة لاستكمال متطلبات الحصول على درجة الماجستير في الإرشاد النفسي والتربوي بعنوان: "فاعلية برنامج إرشادي نفسي إيجابي قائم على يوجا الضحك في تنمية التفاؤل المتعلم لدى المراهقين". ولتحقيق ذلك، تقتضي متطلبات البحث إعداد مقياس التفاؤل المتعلم، كأداة يتوافر فيها الصدق والثبات والموضوعية. ولما كنتم من أهل العلم والدراسة والاهتمام في هذا المجال، فإنني أتوجه إليكم لإبداء آرائكم وملاحظاتكم القيمة في تحكيم فقرات مقياس الدراسة الحالية، من حيث مناسبتها لقياس ما وضعت لقياسه، ووضوح الفقرات وسلامة صياغتها اللغوية، وإضافة أي تعديل مقترح تروونه مناسباً، من أجل إخراج الأداة بالصورة المناسبة لتحقيق أهداف الدراسة.

مع بالغ شكري وتقديري،

الباحث: معتر أسعد فخري مرقة

بإشراف: أ. د. محمد أحمد شاهين

بيانات المحكم	
الاسم:	التخصص:
الدرجة العلمية:	الجامعة:
رقم الهاتف أو البريد الإلكتروني:	

نبذة عن الأداة:

يقوم الباحث بإعداد هذه الأداة لتقنين مقياس للتفاؤل المكتسب (المتعلم) (Learned Optimism)، وفي سبيل تحقيق ذلك، اتبعت الخطوات الآتية:

1. إعداد إطار نظري يحتوي على خلاصة ما كُتب عن التفاؤل المكتسب.
2. الاطلاع على عدد من المقاييس العربية والأجنبية التي تقيس التفاؤل من الناحية النفسية، ومن أبرز هذه المقاييس:

- مقياس سيلجمان للتفاؤل والتشاؤم (The Optimism-Pessimism Scale) (Seligman's attributional) (model and the assessment of explanatory style): قنن للبيئة الفلسطينية من قبل (بركات، 1998)، في رسالته "دراسة في سيكولوجية الشخصية: التفاؤل والتشاؤم وعلاقته ببعض المتغيرات المرتبطة بالطالب الجامعي".

- مقياس التوجه نحو الحياة المنفتح ((The Revised Life Orientation Test (LOT-R)): طُور بواسطة مايكل شير وآخرون (1994).

- مقياس التفاؤل والتشاؤم لديمير (1989) ((Optimism/Pessimism Instrument (OPI)): ترجمه وأعاد تقنيه مجدي الدسوقي (2002).

- مقياس التفاؤل والتشاؤم القصير (SOP2) (The Optimism-Pessimism Short Scale-2): طُور بواسطة كيمبر وآخرون (2013).

- القائمة العربية للتفاؤل والتشاؤم إعداد أحمد عبد الخالق (1996).

- قنن محمد شاهين (شاهين، 2015) هذا المقياس للبيئة الفلسطينية في رسالته "التفاؤل والتشاؤم لدى طلبة جامعة القدس المفتوحة في فلسطين وعلاقتها ببعض المتغيرات".

- مقياس التفاؤل والتشاؤم إعداد بدر الأنصاري وعلي مهدي كاظم (2007).

وقد اعتمد في بناء المقياس على دمج مقياسين للتفاؤل والتشاؤم لنهجين في علم النفس الإيجابي، يختلفان إلى حد ما في تفسير التفاؤل، هما:

1. نظرية كارفر وشاير حول التفاؤل الاستعدادي (Dispositional optimism) (Scheier & Carver,) (2000)، التي تعتمد مقياس التوجه نحو أهداف الحياة ((Life Orientation Test (LOT)).

2. نظرية سيلجمان حول التفاؤل المكتسب (Learned Optimism) (Seligman, 1998)، التي تعتمد مقياس سيلجمان للتفاؤل والتشاؤم (The Optimism/Pessimism Scale- Explanatory style).

- وقد ارتكز في هذه الدراسة على مقياس التفاوض المتعلم لسيلجمان، مستخدماً المواقف التي تقيس التفاوض فقط في هذا المقياس، بالإضافة لبعض فقرات مقياس التوجه نحو أهداف الحياة، وقسم المقياس إلى أربعة أبعاد:
- (1) بعد الشخصية (التفسير الداخلي): ويتمثل في (8) مواقف، ويُرمز له اختصاراً بـ (PsG) (Personalization Good).
- (2) استمرارية الأحداث السارة: ويتمثل في (8) مواقف، ويُرمز له اختصاراً بـ (PmG) (Permanent Good).
- (3) انتشار الأحداث السارة: ويتمثل في (8) مواقف، ويُرمز له اختصاراً بـ (PvG) (Pervasiveness Good).
- (4) نزعة (سمة) التفاوض في الشخصية: ويتمثل في (8) مواقف (Dispositional Optimism).
- توزيع المواقف حسب الأبعاد الأربعة:

(PmG)	(PsG)
1- افترقت أنت وصديقك/ صديقتك بعد مشاجرة وقعت بينكما: أ- أنا دائماً شخص مسامح. ب- سأصفح عنه/ عنها.	1- المشروع الذي تتولى مسؤوليته هو نجاح كبير: أ- ظللت أراقب عن كثب عمل الجميع. ب- كرس الجميع الكثير من الوقت والطاقة لها.
2- قمت بإقامة مأدبة غداء ناجحة: أ- لقد كنت مسروراً في تلك الليلة خاصة: ب- إنني مضيف ماهر.	2- يفاجئك زوجك صديقك/ صديقتك بهدية: أ- حصل للتو على علاوة في العمل. ب- أخذته إلى مأدبة عشاء خاصة في الليلة السابقة.
3- محلك التجاري يدر عليك مائلاً وقيراً: أ- قررت أن أشرع في شيء جديد. ب- أنا مستثمر ماهر.	3- يمكنك إيقاف جريمة عن طريق استدعاء الشرطة: أ- ضجيج غريب لفت انتباهي. ب- كنت في حالة تأهب في ذلك اليوم.
4- فزت بمسابقة رياضية: أ- كنت أشعر بأنني لا أهزم. ب- كنت أتمرن بجد.	4- كنت بصحة جيدة طوال العام: أ- القليل من المرضى كانوا حولي، لذلك لم أتعرض للعدوى. ب- لقد تأكدت من أنني أكلت جيداً وأني حصلت على قسط كافٍ من الراحة.
5- دائماً ما كان يطلب منك أن ترقص في الحفلة: أ- إنني شخص مرح وانبساطي في الحفلات. ب- كنت على أتم هيئة في تلك الليلة.	
6- لقد كنت ماهراً في المقابلة الشخصية بشأن الوظيفة: أ- لقد كنت أشعر بثقة كبيرة أثناء تلك المقابلة. ب- دائماً ما أكون ماهراً في المقابلات الشخصية.	

<p>7- اصطحتك صديقتك/ اصطحك صديقك في رحلة لمكان ما: أ- إنه/ها بحاجة إلى قضاء بعض الأيام بعيداً عن البيت. ب- إنه/ها يريد/ تريد أن يكتشف/ تكتشف أماكن جديدة. 8- طُلب منك أن ترأس مشروعاً هاماً: أ- لقد أتممت لتوي مشروعاً مماثلاً له. ب- إنني مشرف ماهر .</p>	<p>5- يختارك مضيف برنامج الألعاب من بين الجمهور للمشاركة في العرض: أ- كنت جالساً في المقعد الأيمن. ب- بدوت أكثر حماسة. 6- أنت تقول نكتة ويضحك الجميع: أ- كانت النكتة مضحكة. ب- التوقيت كان ممتازاً. 7- لديك وقت رائع في الحفلة: أ- كان الجميع ودودين. ب- كنت ودوداً. 8- لقد ربحت اليانصيب: أ- كانت محض فرصة. ب- اخترت الأرقام الصحيحة.</p>
<p>(Dispositional Optimism)</p>	<p>(PvG)</p>
<p>1- عندما تكون الظروف المحيطة بي صعبة: أ- أتوقع الأحسن. ب- أتوقع الأسوأ. 2- إذا قررت القيام بعملية الاسترخاء: أ- من السهل علي أن أسترخي. ب- من الصعب علي أن أسترخي. 3- في العادة إنني أنظر إلى الأمور في حياتي: أ- من الجانب المشرق. ب- من الجانب المظلم. 4- بالنسبة لمستقبل حياتي: أ- أنا متفائل دائماً.</p>	<p>1- تلقيت وردة من معجب/ معجبة سرية (لا أعرفها): أ- أشعر بأنني جذاب/ جذابة بالنسبة له/ لها. ب- إنني شخص محبوب (أو معروف). 2- تقوم بخوض حملة انتخابية على منصب اجتماعي، ثم فزت فيها: أ- إنني أخصص كثيراً من الوقت والطاقة لخوض الحملة. ب- إنني أعمل بجد في أي عمل أؤديه.</p>

- ب- أنا متشائم دائماً.
- 5- عندما أكون بصحبة أصدقائي:
أ- أستمتع دائماً.
ب- غالباً لا أستمتع.
- 6- المقولة القائلة (بعد العسر يسرا):
أ- أوّمن بها.
ب- لا أوّمن بها.
- 7- حالة القلق:
أ- تتمكن مني بسهولة.
ب- لا تتمكن مني بسهولة.
- 8- الأمور التي أريدها:
أ- سوف تتحقق.
ب- لن تتحقق أبداً.

- 3- أعطى لك رئيسك في العمل فترة قصيرة جداً لكي تتجز فيها عملك، بيد أنك قد فرغت منه على كل حال:
أ- أنا ماهر في وظيفتي.
ب- إنني شخص كفوء.
- 4- أنقذت شخصاً من الموت خنقاً:
أ- إنني على دراية بالأسلوب العلمي، لإنقاذ أي شخص من الموت خنقاً.
ب- أعرف كيف أتصرف في الأزمات.
- 5- أتاك موظف لديك، لئسدي له نصيحة:
أ- إنني دائماً ذو خبرة فيما أسأل عنه.
ب- إنني ماهر في إسداء النصح.
- 6- شكرك صديق لك على مساعدتك إياه في اجتياز محنته:
أ- إنني أشعر بسعادة عندما أساعده في الأوقات العصيبة.
ب- إنني أهتم بأمور الناس.
- 7- أخبرك الطبيب بأنك في حالة صحية جيدة:
أ- أحرص دائماً على أداء التمرينات الرياضية.
ب- إنني على وعي تام بصحتي.
- 8- فزت بجائزة كبيرة في عملك لأنك:
أ- قمت بحل مشكلة مهمة.
ب- كنت أفضل موظف.

تعليمات الاختبار:

عزيزتي الطالبة/ عزيزي الطالب

بين يديك مجموعة من المواقف التي تواجهك في حياتك اليومية الاجتماعية، وقد صيغت على شكل مواقف لكل منها بديلين للإجابة، هما (أ/ب)، والمطلوب منك بعد قراءة كل موقف تضع دائرة حول حرف البديل الذي تتفق معه سواءً أكان "أ"، أم "ب"، وأن تترك البديل الذي لا يوافقك من دون أي علامات.

تذكر أنه لا توجد إجابات صحيحة أو خطأ، لذا نرجو أن تعكس إجاباتك طريقة تعاملك مع الأمور، علماً أن إجاباتك لن تستخدم إلا لأغراض البحث العلمي، ولا داعٍ لذكر الاسم في الإجابة، مع بالغ الشكر لتعاونك.

الباحث

يرجى تدوين المعلومات الآتية:

الجنس: ذكر ()، أنثى ()

الحرف الأول من الاسم:.....

الحرف الأول من اسم الأب:.....

الصف:.....

فقرات مقياس التفاؤل المكتسب للتحكيم

الرقم	الفقرة	ملائمة الفقرة		صياغة الفقرة		التعديل المقترح ان وجد
		ملائمة	غير ملائمة	مناسبة	غير مناسبة	
1-	المقولة القائلة (بعد العسر يسرا): أ- أؤمن بها. ب- لا أؤمن بها.					
2-	حالة القلق: أ- تتمكن مني بسهولة. ب- لا تتمكن مني بسهولة.					
3-	الأمور التي أريدها:					

					أ- سوف تتحقق. ب- لن تتحقق أبداً.
					4- المشروع الذي تتولى مسؤوليته هو نجاح كبير: أ- ظللت أراقب عن كثب عمل الجميع. ب- كرس الجميع الكثير من الوقت والطاقة لها.
					5- كنت بصحة جيدة طوال العام: أ- القليل من المرضى كانوا حولي، لذلك لم أتعرض للعدوى. ب- لقد تأكدت من أنني أأكلت جيداً، وأنني حصلت على قسط كافٍ من الراحة.
					6- لديك وقت رائع في الحفلة: أ- كان الجميع ودودين. ب- كنت أنا ودوداً.
					7- يفاجئك زوجك (صديقك/ صديقتك) بهدية: أ- حصل للتو على علاوة في العمل. ب- أخذته إلى مأدبة عشاء خاصة في الليلة السابقة.
					8- يمكنك إيقاف جريمة عن طريق استدعاء الشرطة: أ- ضجيج غريب لفت انتباهي. ب- كنت في حالة تأهب في ذلك اليوم.
					9- افترقت أنت و(صديقك/ صديقتك) بعد مشاجرة وقعت بينكما: أ- أنا دائماً شخص مسامح. ب- سأصفح عنه/ عنها.
					10- قمت بإقامة مأدبة غداء ناجحة:

					أ- لقد كنت مسروراً في تلك الليلة خاصة. ب- إنني مضيف ماهر .	
					11- محلك التجاري يدر عليك مالاً وثيراً: أ- قررت أن أشرع في شيء جديد. ب- أنا مستثمر ماهر .	
					12- فزت بمسابقة رياضية: أ- كنت أشعر بأنني لا أهزم. ب- كنت أتمرن بجد .	
					13- لقد رحبت اليانصيب: أ- كانت محض فرصة. ب- اخترت الأرقام الصحيحة .	
					14- طُلب منك أن ترأس مشروعاً مهماً: أ- لقد أتممت لتوي مشروعاً مماثلاً له. ب- إنني مشرف ماهر .	
					15- إذا قررت القيام بعملية الاسترخاء: أ- من السهل علي أن أسترخي. ب- من الصعب علي أن أسترخي .	
					16- في العادة إنني أنظر إلى الأمور في حياتي: أ- من الجانب المشرق. ب- من الجانب المظلم .	
					17- يختارك مضيف برنامج الألعاب من بين الجمهور للمشاركة في العرض:	

					أ- كنت جالساً في المقعد الأيمن. ب- بدوت أكثر حماسة.
					18- أنت تقول نكتة ويضحك الجميع: أ- كانت النكتة مضحكة. ب- التوقيت كان ممتازاً.
					19- تلقيت وردة من معجب/ معجبة سرية (لا أعرفها): أ- أشعر بأنني جذاب/ جذابة بالنسبة له/ لها. ب- إنني شخص محبوب (أو معروف).
					20- تقوم بخوض حملة انتخابية على منصب اجتماعي، ثم فزت فيها: أ- انني أخصص كثيراً من الوقت والطاقة لخوض الحملة. ب- إنني أعمل بجد في أي عمل أؤديه.
					21- دائماً ما كان يطلب منك أن ترقص في الحفلة: أ- إنني شخص مرح وانبساطي في الحفلات. ب- كنت على أتم هيئة في تلك الليلة.
					22- اصطحبتك صديقتك/ اصطحبك صديقك في رحلة لمكان ما: أ- إنه/ها بحاجة إلى قضاء بعض الأيام بعيداً عن البيت. ب- إنه/ها يريد/ تريد أن يكتشف/ تكتشف أماكن جديدة.
					23- أتاك موظف لديك، لثُدي له نصيحة: أ- إنني دائماً ذو خبرة فيما أسأل عنه. ب- إنني ماهر في إسداء النصح.
					24- شكرك صديق لك على مساعدتك إياه في اجتياز محنته:

					أ- إنني أشعر بسعادة عندما أساعده في الأوقات العصيبة. ب- إنني أهتم بأمور الناس.
					25- أخبرك الطبيب بأنك في حالة صحية جيدة: أ- أحرص دائماً على أداء التمرينات الرياضية. ب- إنني على وعي تام بصحتي.
					26- فزت بجائزة كبيرة في عملك: أ- لأنك قمت بحل مشكلة مهمة. ب- كنت أفضل موظف.
					27- عندما تكون الظروف المحيطة بي صعبة: أ- أتوقع الأحسن. ب- أتوقع الأسوء.
					28- أعطى لك رئيسك في العمل فترة قصيرة جداً لكي تنجز فيها عملك، بيد أنك قد فرغت منه على كل حال: أ- أنا ماهر في وظيفتي. ب- إنني شخص كفوء.
					29- لقد كنت ماهراً في المقابلة الشخصية بشأن الوظيفة: أ- لقد كنت أشعر بثقة كبيرة أثناء تلك المقابلة. ب- دائماً ما أكون ماهراً في المقابلات الشخصية.
					30- أنقذت شخصاً من الموت خنقاً: أ- إنني على دراية بالأسلوب العلمي، لإنقاذ أي شخص من الموت خنقاً. ب- أعرف كيف أتصرف في الأزمات.

					31- بالنسبة لمستقبل حياتي: أ- أنا متفائل دائماً. ب- أنا متشائم دائماً.
					32- عندما أكون بصحبة أصدقائي: أ- أستمتع دائماً. ب- غالباً لا أستمتع.

Appendix B: List of arbitrators for the current study

No	Name	Academic rank	Specialization	The university
1	Ahmed A. Abu Asaad	Professor	Educational and Psychological Counseling	Mutah University
2	Husni M. Awad	Professor	Educational and Psychological Counseling	Al-Quds Open University
3	Omar T. Al-Rimawi	Professor	Cognitive Psychology	Al-Quds University
4	Fayez Mahamid	Associated Prof.	Educational and Psychological Counseling	An-Najah National University
5	Kamal A. Salama	Associated Prof.	Educational and Psychological Counseling	Al-Quds Open University
6	Fakher Khalili	Assistant Prof.	Educational and Psychological Counseling	An-Najah National University
7	Ibrahim S. Masri	Assistant Prof.	Educational and Psychological Counseling	Hebron University
8	Iyad Ishtaya	Assistant Prof.	Psychological Counseling	Al-Quds Open University
9	Mariam Abu Turki	Assistant Prof.	Psychological Counseling	Aman Counseling Center
10	Shadi K. Abualkibash	Assistant Prof.	Psychological Counseling	An-Najah National University
11	Layla F. Hirzallah	Assistant Prof.	Social work	Arab American University

Appendix C: The study scale after arbitration and psychometric characteristics

The items (3, 4, 9, 16, 27, 30) were deleted, and the number of items on the scale became (26) items.



عزيزتي الطالبة/ عزيزي الطالب

بين يديك مجموعة من المواقف التي تواجهك في حياتك اليومية الاجتماعية، وقد صيغت على شكل مواقف لكل منها بديلين للإجابة، هما (أ/ب)، والمطلوب منك بعد قراءة كل موقف تضع دائرة حول حرف البديل الذي تتفق معه سواءً أكان "أ"، أم "ب"، وأن تترك البديل الذي لا يوافقك من دون أي علامات. تذكر أنه لا توجد إجابات صحيحة أو خطأ، لذا نرجو أن تعكس إجاباتك طريقة تعاملك مع الأمور، علماً أن إجاباتك لن تستخدم إلا لأغراض البحث العلمي، ولا داعٍ لذكر الاسم في الإجابة، مع بالغ الشكر لتعاونك.

الباحث

يرجى تدوين المعلومات الآتية:

الجنس: ذكر ()، أنثى ()

الحرف الاول من الاسم:

الحرف الاول من اسم الاب:

الصف:

- 1- المقولة القائلة (بعد العسر يسرا):
أ- أوّمن بها.
ب- لا أوّمن بها.
- 2- حالة القلق:
أ- تتمكن مني بسهولة.
ب- لا تتمكن مني بسهولة.
- 3- كنت بصحة جيدة طوال العام:
أ- القليل من المرضى كانوا حولي، لذلك لم أتعرض للعدوى.
ب- لقد تأكدت من أنني أكلت جيداً، وأنني حصلت على قسط كافٍ من الراحة.
- 4- لديك وقت رائع في الحفلة:
أ- كان الجميع ودودين.
ب- كنت أنا ودوداً.
- 5- يفاجئك زوجك (صديقك/ صديقتك) بهدية:
أ- حصل للتو على علاوة في العمل.
ب- أخذته إلى مأدبة عشاء خاصة في الليلة السابقة.
- 6- يمكنك إيقاف جريمة عن طريق استدعاء الشرطة:
أ- ضجيج غريب لفت انتباهي.
ب- كنت في حالة تأهب في ذلك اليوم.
- 7- قمت بإقامة مأدبة غداء ناجحة:
أ- لقد كنت مسروراً في تلك الليلة خاصة.
ب- إنني مضيف ماهر.
- 8- محلك التجاري يدر عليك مالاً وفيراً:
أ- قررت أن أشرع في شيء جديد.
ب- أنا مستثمر ماهر.
- 9- فزت بمسابقة رياضية:
أ- كنت أشعر بأنني لا أهزم.
ب- كنت أتمرّن بجد.
- 10- لقد ربحت اليانصيب:
أ- كانت محض فرصة.
ب- اخترت الأرقام الصحيحة.

- 11- طُلب منك أن ترأس مشروعاً مهماً:
أ- لقد أتممت لتوي مشروعاً مماثلاً له.
ب- إنني مشرف ماهر.
- 12- إذا قررت القيام بعملية الاسترخاء:
أ- من السهل علي أن أسترخي.
ب- من الصعب علي أن أسترخي.
- 13- يختارك مضيف برنامج الألعاب من بين الجمهور للمشاركة في العرض:
أ- كنت جالساً في المقعد الأيمن.
ب- بدوت أكثر حماسة.
- 14- أنت تقول نكتة ويضحك الجميع:
أ- كانت النكتة مضحكة.
ب- التوقيت كان ممتازاً.
- 15- تلقيت وردة من معجب/ معجبة سرية (لا أعرفها):
أ- أشعر بأنني جذاب/ جذابة بالنسبة له/ لها.
ب- إنني شخص محبوب (أو معروف).
- 16- تقوم بخوض حملة انتخابية على منصب اجتماعي، ثم فزت فيها:
أ- انني أخصص كثيراً من الوقت والطاقة لخوض الحملة.
ب- إنني أعمل بجد في أي عمل أؤديه.
- 17- دائماً ما كان يطلب منك أن ترقص في الحفلة:
أ- إنني شخص مرح وانبساطي في الحفلات.
ب- كنت على أتم هيئة في تلك الليلة.
- 18- اصطحبتك صديقتك/ اصطحبتك صديقك في رحلة لمكان ما:
أ- إنه/ها بحاجة إلى قضاء بعض الأيام بعيداً عن البيت.
ب- إنه/ها يريد/ تريد أن يكتشف/ تكتشف أماكن جديدة.
- 19- أتاك موظف لديك، لتُسدي له نصيحة:
أ- إنني دائماً ذو خبرة فيما أسأل عنه.
ب- إنني ماهر في إسداء النصح.
- 20- شكرك صديق لك على مساعدتك إياه في اجتياز محتنته:
أ- إنني أشعر بسعادة عندما أساعده في الأوقات العصيبة.
ب- إنني أهتم بأمور الناس.

12- أخبرك الطبيب بأنك في حالة صحية جيدة:

أ- أحرص دائماً على أداء التمرينات الرياضية.

ب- إنني على وعي تام بصحتي.

22- فزت بجائزة كبيرة في عملك:

أ- لأنك قمت بحل مشكلة مهمة.

ب- كنت أفضل موظف.

23- أعطى لك رئيسك في العمل فترة قصيرة جداً لكي تنجز فيها عملك، بيد أنك قد فرغت منه على كل حال:

أ- أنا ماهر في وظيفتي.

ب- إنني شخص كفوء.

24- لقد كنت ماهراً في المقابلة الشخصية بشأن الوظيفة:

أ- لقد كنت أشعر بثقة كبيرة أثناء تلك المقابلة.

ب- دائماً ما أكون ماهراً في المقابلات الشخصية.

25- بالنسبة لمستقبل حياتي:

أ- أنا متفائل دائماً.

ب- أنا متشائم دائماً.

26- عندما أكون بصحبة أصدقائي:

أ- أستمتع دائماً.

ب- غالباً لا أستمتع.

Appendix D: The counselling program presented to arbitration



جامعة القدس المفتوحة

عمادة الدراسات العليا

بسم الله الرحمن الرحيم

حضرة الأستاذ الدكتورالمحترم/ة

تحية طيبة وبعد،

يقوم الباحث بدراسة لاستكمال متطلبات الحصول على درجة الماجستير في الإرشاد النفسي والتربوي بعنوان: "فاعلية برنامج إرشادي نفسي إيجابي قائم على يوجا الضحك في تنمية التفاؤل المتعلم لدى المراهقين". ولتحقيق ذلك، تقتضي متطلبات البحث تطوير برنامج إرشادي نفسي إيجابي قائم على يوجا الضحك في تنمية التفاؤل المكتسب لدى المراهقين، لتطبيقه على أفراد المجموعة التجريبية، ضمن إجراءات الدراسة. ولما كنتم من أهل العلم والدراية والاهتمام في هذا المجال، فإنني أتوجه إليكم لإبداء آرائكم وملاحظاتكم القيمة في تحكيم البرنامج الإرشادي، راجياً منكم التكرم وإفادتنا برأيكم بشأن أهداف البرنامج، وجلساته، وهدف كل جلسة وإجراءاتها، وسيكون لملاحظاتكم وتوجيهاتكم بالغ الأثر في الارتقاء بهذا البرنامج وهذه الدراسة، وهي موضع تقدير وعرفان. مع بالغ شكري وتقديري،

الباحث: معنز أسعد فخري مرقة

بإشراف: أ. د. محمد أحمد شاهين

بيانات المحكم

الاسم:	التخصص:
الدرجة العلمية:	الجامعة:
رقم الهاتف أو البريد الإلكتروني:	

برنامج إرشادي نفسي إيجابي قائم على يوجا الضحك في تنمية التفاؤل المكتسب لدى المراهقين

1) تعريف البرنامج

يُعرف الباحث البرنامج الإرشادي النفسي الإيجابي القائم على يوجا الضحك إجرائياً بأنه: خطة محددة ومنظمة تشمل مجموعة من الجلسات الإرشادية والمعارف والأنشطة والتمارين القائمة على بعض الفنيات النظرية في علم النفس الإيجابي والتمارين العملية في يوجا الضحك، لتقديم خدمات إرشادية بناءة، تهدف إلى تنمية التفاؤل المكتسب لدى المراهقين. وقد صمم الباحث البرنامج الإرشادي القائم على بعض فنيات علم النفس الإيجابي وتمارين يوجا الضحك متمشياً مع طبيعة هذين العلمين والأثر الإيجابي لهم في تنمية التفاؤل المكتسب.

2) مصادر إعداد البرنامج

تعتبر تجربة الباحث العملية في تقديم برامج مشابهة لفئات متعددة، تحت إشراف قسم الصحة النفسية في جمعية الهلال الأحمر الفلسطيني، وما توصل إليه الباحث من استنتاجات وملاحظات أثناء ذلك، المصدر الأول في بناء هذا البرنامج بصيغته الحالية. بالإضافة إلى المصادر النظرية المستقاة من دراسات علم النفس الإيجابي، ويوجا الضحك، والتفاؤل المكتسب، والبرامج الإرشادية المشابهة.

3) أسس بناء البرنامج

يمكن تحديد الأسس التي يقوم عليها البرنامج بالآتي:

- الاستناد إلى القواعد والفلسفة التي تقوم عليها العملية الإرشادية بشكل عام.
- مبادئ علم النفس الإيجابي.
- خصائص وفنيات علم النفس الإيجابي: الأمل، والتفاؤل، والتدفق النفسي، والكفاءة الذاتية، والاسترخاء، والتفكير الإيجابي.
- تمارين يوجا الضحك.
- خصائص يوجا الضحك المبنية على التنفس، والضحك، والتصفيق، والرطن، والطفولة.
- الخصائص النفسية والجسدية لمرحلة المراهقة.
- السلامة النفسية والالتزان النفسي للمراهقين.
- الاهتمام بالخبرة الذاتية الإيجابية والسمات الشخصية الإيجابية وتنميتها.
- تقديم المعلومات والخبرات التعليمية بما يتفق مع طبيعة وخصائص ومستوى مرحلة المراهقة.
- تهيئة البيئة الإرشادية التدريبية بما يلائم العمل في مجموعات والعمل في فريق والعمل الجماعي، وتوفير فرص التعاون والمشاركة والمناقشة.

- تنظيم بيئة الإرشاد والتدريب في القاعة بصورة يسودها الود والحب والاحترام والأمان، وتكون محفزة للطالبات للمشاركة بفعالية وإيجابية في البرنامج.
- استخدام أساليب ووسائل التقويم المتنوعة، والتأكيد على التقويم الحقيقي.
- أن يتصف بمرونة كافية تسمح بتعديله عند اللزوم، وفي ضوء نتائج التقويم بما يتناسب مع خصائص العينة.

(4) أهداف البرنامج الإرشادي

الهدف العام:

تنمية التفاوض المتعلم لدى المراهقين باستخدام برنامج إرشادي نفسي إيجابي قائم على يوجا الضحك.

الأهداف الفرعية:

1. أن يكتسب المراهق خصائص وفتيات علم النفس الإيجابي، مثل: التفاؤل، والأمل، والتدفق، والانفعالات الإيجابية، كفاءة الذات، والثقة بالنفس، والتفكير الإيجابي.
2. أن يدرك المراهق أهمية الحديث الذاتي الإيجابي حول الأحداث التي يمر بها.
3. أن يتدرب المراهق على فنيات وتمارين يوجا الضحك، ويطبقها بطريقة صحيحة.
4. أن يتمكن المراهق من تأدية تمارين يوجا الضحك بشكل ذاتي في أي وقت.
5. أن يدرك المراهق أهمية التفاوض وآليات شرحه الداخلي.
6. أن يدرك الطالب أهمية الضحك على الصحة النفسية والجسدية.
7. بناء علاقة إرشادية مبنية على الثقة والتقبل والتعاون والاحترام بين المجموعة المشاركة في البرنامج والباحث المنفذ للبرنامج.
8. أن يكتسب المراهق السمات الشخصية الإيجابية، ويتعامل بإيجابية وتفاوض في مواجهة المشكلات الحياتية الحالية والمستقبلية.
9. أن تتدرب المجموعة الإرشادية المشاركة على إدخال مهارات المرح والضحك في الحياة اليومية للتخفيف من الضغوط النفسية والاجتماعية.
10. أن يتمكن من بناء علاقات أقوى مع أقرانه عبر المرح والضحك المشترك.

(5) الاستراتيجيات والفنيات المستخدمة في البرنامج الإرشادي

- أ) المحاضرة: يتمثل المضمون التطبيقي لهذه الفنية في تقديم معلومات مبسطة وبعبارات تتناسب مع مستوى المراهقين، لإيصال المفاهيم النظرية والعملية بسهولة.
- ب) المناقشة الجماعية: وفي هذه الفنية يجري تبادل الرأي بين المرشد والمراهقين حول موضوع الجلسة فيما بينهم من جهة أخرى، وبالتالي المادة العلمية للمحاضرة تصبح موضوع للنقاش، وتهدف هذه الفنية إلى إعادة البناء المعرفي للمراهقين، وتعديل الأفكار الخاطئة في إطار استراتيجية البرنامج، وتعزيز التواصل بين أعضاء المجموعة.

ت) التعزيز الإيجابي: وهي مدعّمات الثناء والمدح للمراهقين على الإجابات الصحيحة والاستجابات الملائمة في أثناء النقاش، والهدف من استخدام هذه الفنية هو تحفيز التفكير السليم والسلوك الإيجابي بحيث يصبح جزءا من حياتهم.

ث) فنيات علم النفس الإيجابي:

- ✓ الامتتان (Gratitude)
- ✓ التيقظ العقلي (Mindfulness)
- ✓ نقاط القوة (Strengths)
- ✓ فنيات التفاؤل المكتسب (Techniques of learned Optimism)
- ✓ زيادة المعرفة بالذات (Increasing self-knowledge)
- ✓ التفكير الإيجابي (Positive Thinking)
- ✓ السياق (Context)
- ✓ التدفق (Flow)
- ✓ المعنى (Meaning)
- ✓ فنية السوار (The Method of The Bracelet)
- ✓ فنية التأكيد (The Method of Affirmation)
- ✓ فنية الاسئلة التوكيدية (The Method of Affirmation)
- ج) فنيات يوغا الضحك
 - ✓ الاسترخاء (Relaxation)
 - ✓ التنفس (Breathing)
 - ✓ تمارين الضحك (Laughing exercises)
 - ✓ التصفيق (Clapping)
 - ✓ الرطن (Gibberish)

6) تصميم البرنامج الإرشادي ومواضيع الجلسات الإرشادية

تتضمن كل جلسة من جلسات البرنامج الإرشادي الجمعي عدد من الخطوات، هي:

- بدء الجلسة بمراجعة وتلخيص للجلسة السابقة (باستثناء الجلسة الأولى).
- مناقشة الواجب البيتي السابق.
- مناقشة موضوع وأهداف الجلسة.
- العمل على تطبيق الفنيات والأساليب الإرشادية التي تتضمنها الجلسة من بين أساليب البرنامج الإرشادي وفنياته.
- عمل تلخيص للجلسة وإعطاء الواجب البيتي.
- استخدام نموذج خاص يطبق بعد كل جلسة من جلسات البرنامج الإرشادي لأغراض التقييم والتوثيق.

7) عرض تفصيلي لجلسات البرنامج الإرشادي النفسي الإيجابي القائم على يوجا الضحك في تنمية التفاؤل المكتسب لدى المراهقين

الجلسة الأولى

العنوان: التعارف وبناء الثقة مع المجموعة الإرشادية.

المدة: 90 دقيقة

الفنيات والأساليب الإرشادية: الحوار والمناقشة الجماعية، طرح الاسئلة، تمارين يوجا ضحك، التفسير والإيضاح، التلخيص والتغذية الراجعة، الواجبات المنزلية، فعالية شبكة التعارف.

أدوات الجلسة: لوح، بوستر يوجا الضحك، حاسوب محمول، بروجكتر، سماعة صوت، عرض بوربوينت عن أهداف البرنامج الإرشادي، مسافة آمنة لممارسة تمارين يوجا الضحك.

أهداف الجلسة:

- 1- تعريف المرشد بنفسه وبالبرنامج الإرشادي الذي سيتم تطبيقه.
- 2- التعارف بين المرشد والمسترشدين وكسر الحواجز بينهم.
- 3- تعريف المسترشدين بأنفسهم من خلال تمرين التعارف.
- 4- تعرف المسترشدين بالبرنامج وسير العمل به.
- 5- توضيح أهداف البرنامج المراد تحقيقها.
- 6- ممارسة تمارين يوجا الضحك (عدد 2).

الخطوات الإجرائية التي ستتبع في الجلسة:

- 1- يبدأ الباحث بالترحيب بالمشاركين، والتعبير لهم عن سروره وامتنانه لحضورهم.
- 2- يقوم الباحث بتقديم نفسه للمسترشدين وتوضيح طبيعة عمله، والهدف الذي جاء من أجله من خلال تطبيق البرنامج الإرشادي.
- 3- يطلب الباحث من المسترشدين التعريف عن أنفسهم من خلال تمرين التعارف "أنا اسم ورمز"؛ حيث يتقدم المشارك ويعرف عن اسمه ورمزه في الحياة ويحاول باقي المشاركين أن يفهموا الرمز.
- 4- الاتفاق مع المشاركين على قوانين الجلسة وتأكيد مبدأ السرية.
- 5- وبعد ذلك يطلب الباحث من كل طالب أن يتحدث عن زميله المسترشد الآخر؛ حيث يشمل الحديث عن اسمه وتعليمه وهواياته... الخ من أجل تثبيت التعارف، والألفة بينه وبين المسترشدين الآخرين.
- 6- بعد ذلك قام الباحث باستخدام تمرينين ليوجا الضحك: (أ) تحية الضحك على النمط الغربي، (ب) تحية الضحك على النمط الشرقي.
- 7- تنتهي الجلسة الأولى بالاتفاق المحدد للجلسة المقبلة وموضوعها، وترك مجال آخر لأي تعليق أو إضافة من قبل المشاركين على نقطة جرى مناقشتها خلال فترة الجلسة الأولى.
- 8- يلخص الباحث أحداث الجلسة للطلاب ويقيم فاعليتها.

الواجب البيتي:

مدونة التفاؤل: وهي أن يسجل المراهق على ورقة الأماكن والأشخاص الذين يحفزون التفاؤل فيه، على أن يجري بحثه ومناقشته في الجلسة المقبلة.

تقييم الجلسة:

ينفذ تقييم هذه الجلسة من خلال تفاعل الطلاب، وكذلك رأي الطالب وانطباعاته عن الجلسة.

الجلسة الثانية

العنوان: التعريف بمفهوم يوغا الضحك والضحك العلاجي.

المدة: 90 دقيقة

الفنيات والأساليب الإرشادية: تمارين يوغا الضحك، الحوار والمناقشة، العصف الذهني، المحاضرة المختصرة، التغذية الراجعة والتلخيص، التعزيز الإيجابي، النمذجة، الواجب المنزلي، تمرين التنفس، الواجب البيتي، غرس الأمل.

أدوات الجلسة: لوح، بوستر، حاسوب محمول، بروجكتر، سماعة صوت، عرض بوربوينت يوضح ماهية يوغا الضحك، مسافة آمنة.

أهداف الجلسة:

- 1- مراجعة الواجب البيتي وشرحه.
- 2- التعرف إلى مفهوم يوغا الضحك: المفهوم اللغوي والاصطلاحي والعملية.
- 3- الاطلاع على انتشار نوادي يوغا الضحك حول العالم.
- 4- التعرف إلى أهمية الضحك وأثره النفسي والجسدي.
- 5- الاطلاع على نتائج الدراسات التي تدعم أثر يوغا الضحك الإيجابي كعلاج تكميلي نفسي وجسدي.
- 6- التعرف إلى مفهوم المشاعر الإيجابية والسلبية.
- 7- التحقق من أن الضحك هو أحد وسائل التفريغ النفسي.
- 8- ممارسة تمارين يوغا الضحك (عدد 2).

الخطوات الإجرائية التي ستتبع في الجلسة:

- 1) يبدأ الباحث بالترحيب بالمسترشدين والثناء عليهم وشكرهم على الحضور والالتزام بالموعد.
- 2) يقوم الباحث بمناقشة الواجب المنزلي مع الطلاب، حيث طلب منهم الباحث تدوين الأماكن والأشخاص الذين يحفزون التفاؤل لديهم، وشرح لهم أهمية اختيار الأصدقاء من ضمن فئة المتفائلين.
- 3) يفسر الباحث مفهوم كلمة يوغا ومفهوم الضحك ولمحة تاريخية عنها وانتشارها السريع في العالم.
- 4) يوضح الباحث مكونات يوغا الضحك وأهمية كل مكون: التنفس، الضحك، التصفيق، الحركة، الرطن.
- 5) يوضح الباحث فوائد الضحك على المستوى الجسدي والنفسي.

- (6) يشرح الباحث مفهومي المشاعر الإيجابية والسلبية وكيفية التعرف إليهم في داخلنا، وكيفية التغلب على المشاعر السلبية.
- (7) استخدامات يوغا الضحك في مجالات مختلفة: التفرغ النفسي، زيادة التواصل بين الأشخاص، نشر المحبة والمشاعر الإيجابية.
- (8) ممارسة تمرينين ليوغا الضحك: نمل في البنطال، غسيل الدماغ.
- (9) تأدية تمارين التنفس: التنفس السطحي والعميق.
- (10) شرح أهمية التصفيق كمحفز لنشاط الأعضاء الداخلية.
- (11) تنتهي الجلسة الثانية بالاتفاق المحدد للجلسة المقبلة وموضوعها، وترك مجال آخر لأي تعليق أو إضافة من قبل المشاركين على نقطة جرى مناقشتها خلال فترة الجلسة الأولى.
- (12) يلخص الباحث أحداث الجلسة للطلاب ويقدم فاعليتها.
- الواجب البيتي:**

مدونة الامتتان: وهي أن يسجل المراهق على ورقة المواقف والأشخاص الذين كانوا سبباً في شعوره للشكر لهم.

تقييم الجلسة: ينفذ تقييم هذه الجلسة من خلال الاستبيان القبلي والبعدي التالي:

استبيان

التقديرات من الاسوء الى الافضل						السمة
5	4	3	2	1	0	
						الحماس لحضور الجلسة
						مستوى الطاقة
						المزاج
						التفاؤل
						مستوى التوتر
						مستوى الصداقة مع المجموعة
						الانتباه لعملية التنفس
						الاسترخاء العضلي
						الاسترخاء الفكري
						القدرة على الضحك بدون مسبب

الجلسة الثالثة

العنوان: التعريف بعلم النفس الإيجابي.

المدة: 90 دقيقة

الفنيات والأساليب الإرشادية: تمارين يوغا الضحك، الاسترخاء، التنفس، المحاضرة، التفسير والإيضاح، الامتحان، التيقظ العقلي، التفكير الإيجابي، التدفق، غرس الأمل، الواجب البيئي.

أدوات الجلسة: لوح، بوستر فنيات علم النفس الإيجابي، حاسوب محمول، بروجكتر، سماعة صوت، عرض بوربوينت علم النفس الإيجابي، مسافة آمنة (لممارسة تمارين يوغا الضحك).

أهداف الجلسة:

1. مراجعة الواجب البيئي وشرحه.
2. التعرف إلى مفهوم علم النفس الإيجابي.
3. إدراك علاقة علم النفس الإيجابي بالسعادة والمرح.
4. التعرف إلى كيفية استخدام المراهق بعض فنياته في حياته اليومية.
5. الاطلاع على نتائج الدراسات المتعددة في علم النفس الإيجابي.
6. التعرف إلى الفرق بين علم النفس التقليدي وعلم النفس الإيجابي.
7. ممارسة تمارين يوغا الضحك (عدد 2).

الخطوات الإجرائية التي ستتبع في الجلسة:

- 1) يبدأ الباحث بالترحيب بالمسترشدين والثناء عليهم وشكرهم على الحضور والالتزام بالموعد، كما يراجع ويلخص الجلسة السابقة.
- 2) يقوم الباحث بمناقشة الواجب المنزلي مع الطلاب؛ حيث طلب منهم الباحث تدوين أن يسجل المراهق على ورقة المواقف والأشخاص الذين كانوا سبباً بشعوره للشكر لهم، ليجلب انتباههم إلى الجانب الإيجابي في الحياة.
- 3) يوضح الباحث مفهوم علم النفس الإيجابي: نظرتة العامة، تجارب الدكتور سيلجمان، فنياته، أهدافه.
- 4) يفسر مفهوم علم النفس الإيجابي: نظرتة العامة، تجارب الدكتور سيلجمان، فنياته، أهدافه.
- 5) يوضح كيفية استخدام المراهق بعض فنياته في حياته اليومية، مثل: الامتحان، والتدفق، وعمل الخير، ويعرض أمثلة تطبيقية على ذلك.
- 6) يشرح الباحث الدراسات التي يقوم عليها هذا الفرع الحديث في علم النفس.
- 7) ممارسة تمرينين ليوغا الضحك: اوركسترا الضحك، جزاة العشب.
- 8) تأدية تمارين التنفس: التنفس السطحي والعميق.
- 9) تنتهي الجلسة الثانية بالاتفاق المحدد للجلسة المقبلة وموضوعها، وترك مجال آخر لأي تعليق أو إضافة من قبل المشاركين على نقطة جرى مناقشتها خلال فترة الجلسة الأولى.
- 10) يلخص الباحث أحداث الجلسة للطلاب ويقيم فاعليتها.

الواجب البيتي:

زيارة الامتحان: في هذا التمرين، سيحدد المراهق الشخص الذي تشعر بالامتنان إليه وتقوم بزيارته، وستخبره كيف أثر في حياتك.

تقييم الجلسة:

ينفذ تقييم هذه الجلسة عبر الإجابة عن الاستمارة التالية:

أشعر ان الجلسة كانت:

أ) مفرحة ومفيدة.

ب) مفيدة.

ت) مفرحة.

ث) لا شيء.

الجلسة الرابعة

العنوان: التعريف بمفهوم التفاؤل المكتسب.

المدة: 90 دقيقة

الغنيات والأساليب الإرشادية: تمارين يوغا الضحك، تمرين التنفس، المحاضرة، التفسير والإيضاح، تمرين التنفس، الامتحان، التفسير الداخلي للأحداث، التفكير الإيجابي، الواجب البيتي.

أدوات الجلسة: لوح، بوستر، حاسوب محمول، بروجكتر، سماعة صوت، عرض بوربوينت يوضح ابعاد التفاؤل، مسافة آمنة.

أهداف الجلسة:

1. مراجعة الواجب البيتي وشرحه.
2. التعرف إلى مفهوم التفاؤل والتشاؤم بصورة عامة.
3. إدراك مفهوم التفاؤل المكتسب.
4. التعرف إلى أبعاد التفاؤل المكتسب.
5. إدراك العلاقة بين التفاؤل المكتسب وعلم النفس الإيجابي.
6. التعرف إلى أهمية التفاؤل في حياة المراهق.
7. ممارسة تمارين يوغا الضحك (عدد 2).

الخطوات الإجرائية التي ستتبع في الجلسة:

- 1) يبدأ الباحث بالترحيب بالمسترشدين والثناء عليهم وشكرهم على الحضور والالتزام بالموعد.

- (2) يراجع ويلخص الباحث الجلسة السابقة بإيجاز.
- (3) يقوم الباحث بمناقشة الواجب المنزلي مع الطلاب؛ حيث يطلب منهم الباحث القيام بزيارة شخص يشعره بالامتنان إليه ليشعرهم بأهمية الامتتان والعلاقات الاجتماعية.
- (4) شرح مفهوم التفاؤل والتشاؤم بصورة عامة من وجهات نظر شعبية وعلمية.
- (5) إيضاح مفهوم التفاؤل المكتسب كأحد مفاهيم علم النفس الإيجابي الأساسية.
- (6) شرح أبعاد التفاؤل المكتسب: بعد الشخصية (التفسير الداخلي)، استمرارية الأحداث السارة، انتشار الأحداث السارة، نزعة (سمة) التفاؤل في الشخصية.
- (7) إيضاح العلاقة بين التفاؤل المكتسب وعلم النفس الإيجابي.
- (8) شرح أهمية التفاؤل في حياة المراهق وأثره على رفاهية الحياة.
- (9) تنتهي الجلسة الرابعة بالاتفاق المحدد للجلسة المقبلة وموضوعها، وترك مجال آخر لأي تعليق أو إضافة من قبل المشاركين على نقطة جرى مناقشتها خلال فترة الجلسة الأولى.
- (10) يلخص الباحث أحداث الجلسة للطلاب ويقيم فاعليتها.

الواجب البيتي:

تطوير المعنى لحياتك: من خلال إنشاء قصة سردية قصيرة لا تتجاوز الصفحة عن حياة المراهق.

التقييم:

توزيع استمارة على الطلاب للتعرف إلى فهمهم للتفاؤل:

برأيك التفاؤل علامة على:

- (أ) ضعف الشخصية.
- (ب) قوة الشخصية.
- (ت) لا أعرف.

الجلسة الخامسة

العنوان: التفرغ الانفعالي.

المدة: 90 دقيقة.

الأساليب والفنيات المستخدمة: طرح الأسئلة، التلخيص، التوضيح، عكس المشاعر، الإصغاء، الإقناع، التعاطف، تمارين يوغا الضحك، الاسترخاء، المحاضرة، التفسير والإيضاح، التنفس، الامتتان، التفكير الإيجابي.

الأدوات: لوح، بوستر، حاسوب محمول، بروجكتر، سماعة صوت، عرض بوربوينت يوضح ماهية التفرغ الانفعالي، مسافة آمنة.

أهداف الجلسة:

- 1- تمكن المراهقين من التعبير عما يدور بداخلهم من كبت وتوتر .
- 2- التخفيف عن المشاعر السلبية الموجودة لدى المراهقين.
- 3- تعبير المشاركون عن المشاعر والانفعالات وردود الأفعال تجاه الأحداث.
- 4- تعبير المشاركون عن المشكلة كأحد أبعاد حلها.
- 5- اكتساب المراهقين مهارة الاستماع إلى الآخر.
- 6- ممارسة تمارين يوغا الضحك (عدد 2).

الخطوات الإجرائية المتبعة للجلسة:

- 1) يقوم الباحث بالترحيب بالمسترشدين والثناء عليهم وشكرهم على الحضور والالتزام بالموعد.
- 2) يطلب الباحث من أحد الطلاب تلخيص الجلسة السابقة، ومن ثم يناقش الواجب المنزلي مع المسترشدين، ويتيح المجال للحديث لجميع الطلاب وتشجيعهم على ذلك.
- 3) يبدأ الباحث بالحديث عن مفهوم التفريغ الانفعالي، ومدى أهميته، وأثاره الإيجابية في تحقيق الراحة النفسية، والتخفيف من أعراض الضغط النفسي.
- 4) يطلب الباحث من كل مراهق أن يتحدث عن أهم الأعراض التي يعاني منها وتشعره بالضيق، وبصورة مفصلة والكلام الذي يقال يكون له سرية كاملة.
- 5) يطلب الباحث من المراهقين الحديث عن شعورهم بعد التفريغ الانفعالي للأحزان والكبت الموجود في داخلهم، ويشجع الجميع على المشاركة والتفاعل.
- 6) ممارسة تمريني يوغا الضحك: سياره الجليد، الرطن.
- 7) وفي النهاية يقوم الباحث بعمل تقييم للجلسة ويشكر المسترشدين والثناء عليهم، ومن ثم توزيع الضيافة، والتأكيد على موعد الجلسة القادمة.

الواجب البيتي:

كتابة أهم أفكار المراهق عن مستقبله بعد أن ينهي المدرسة، ومدى تقاؤله بتحقيقها.

التقييم:

من خلال الاستمارة التالية:

التفريغ الانفعالي يشعرني:

أ) بالفرح والتقاؤل والراحة.

ب) بالحزن والتشاؤم.

ت) لا شيء.

الجلسة السادسة

العنوان: صمم يوماً جميلاً متفائلاً.

المدة: 90 دقيقة.

الأساليب والفنيات المستخدمة: طرح الأسئلة، التلخيص، التوضيح، تمارين يوغا الضحك، الاسترخاء، المحاضرة، التفسير والإيضاح، التنفس، التفكير الإيجابي.

الأدوات: لوح، بوستر، حاسوب محمول، بروجكتر، سماعة صوت، عرض بوربوينت يوضح مخطط اليوم المتفائل، مسافة آمنة.

أهداف الجلسة:

1. التركيز على الجوانب الإيجابية في الحياة.
2. اختبار إمكانية المراهق على التفاعل بتقاؤل مع الحياة.
3. زيادة الشرح الداخلي للمراهق حول أبعاد التقاؤل.
4. رفع قدرة المراهق على التخطيط والتنفيذ للمشاعر الإيجابية.
5. زيادة تفاعل المراهق مع المحيط.
6. ممارسة تمارين يوغا الضحك (عدد 2).

الخطوات الإجرائية المتبعة للجلسة:

- 1) يقوم الباحث بالترحيب بالمسترشدين والثناء عليهم ويشكرهم على الحضور والالتزام بالموعد.
- 2) يطلب الباحث من أحد الطلاب تلخيص الجلسة السابقة، ومن ثم يناقش الواجب المنزلي مع المسترشدين، ويتيح المجال للحديث لجميع الطلاب ويشجعهم على ذلك.
- 3) يعرض المخطط لهذا على شكل بوستر اليوم ويشرحه، والمخطط هو الآتي:
اختر يوماً ما في المستقبل، وخطط لكيفية جعله أقرب ما يكون إلى الكمال قدر الإمكان. هذا النشاط سيؤتي ثماره مرتان: أثناء التخطيط وأثناء التنفيذ.

نصائح صمم يوماً جميلاً متفانلاً:

احرص على إشراك الآخرين في يومك الجميل المتفانلاً. هذا لا يعني أنه لا يمكنك قضاء أي وقت بمفردك، لكن لا يجب أن تكون وحيداً طوال اليوم!

قم بتضمين التفاصيل الصغيرة في خطتك. هل تريد أن تتناول الخبز والقهوة أول شيء في الصباح؟ اكتبه. ومع ذلك، لا تدع يومك يصبح خالياً تماماً من العفوية.

اكسر الروتين وافعل شيئاً جديداً. لا يجب أن يكون مكلفاً أو إنتاجياً كبيراً: فقط مختلف. عندما يكون يومك الجميل أخيراً، اعلم أنه لن يكون كما خططت تماماً. اقبل المنعطفات عند قدومها وتذوقها.

استخدم اليقظة لتقدير يومك. عش اللحظة. قدّر الإحساس بأشعة الشمس، أو صوت الأمواج، أو برائحة الزهور. الهدف هو أن تكون سعيداً ومستمتعاً، وليس أن تتحقق من كل شيء في قائمة المرجعية ليوم جميل.

4) ممارسة تمريني يوغا الضحك: الوجه المغطى بالشرشف، الرطن.

5) وفي النهاية يقوم الباحث بعمل تقييم للجلسة وشكر المسترشدين والثناء عليهم، والتأكيد على موعد الجلسة القادمة، وتوزيع الواجب البيتي.

الواجب البيتي:

كتابة مخطط لليوم المقترح.

التقييم:

ينفذ تقييم هذه الجلسة من خلال تفاعل الطلاب، وكذلك رأي الطالب وانطباعاته عن الجلسة.

الجلسة السابعة

العنوان: تطوير المعنى لحياتك.

المدة: 90 دقيقة.

الأساليب والفنيات المستخدمة: تمارين يوغا الضحك، المحاضرة، التدفق، المعنى، التفكير الإيجابي، التفسير والإيضاح، الواجب البيتي، الامتحان.

الأدوات: لوح، بوستر، حاسوب محمول، بروجكتر، سماعة صوت، عرض بوربوينت يوضح فنية معنى الحياة، مسافة آمنة.

أهداف الجلسة:

1- التعرف إلى مفهوم معنى الحياة.

- 2- التعرف إلى المفاهيم المرتبطة بمعنى الحياة: كالتفاؤل والأمل وحب الحياة.
- 3- استيضاح أهمية المعنى الإيجابي في الحياة ومصادره.
- 4- قيام المراهقين باكتشاف أهداف تجعل الحياة جديرة بأن تعاش.
- 5- اكتشاف معنى من خلال المعاناة.
- 6- ممارسة تمارين يوغا الضحك (عدد 2).

الخطوات الإجرائية المتبعة للجلسة:

- 1) قام الباحث بالترحيب بالمسترشدين والثناء عليهم وشكرهم على الحضور والالتزام بالموعد.
 - 2) طلب الباحث من أحد الطلاب تلخيص الجلسة السابقة، ومن ثم ناقش الواجب المنزلي مع المسترشدين، وأتاح المجال للحديث لجميع الطلاب وشجعهم على ذلك.
 - 3) عرض المخطط لهذا على شكل بوستر اليوم وشرحه، والمخطط هو الآتي:
- يمكن أن يساعد الاستشعار بالمعنى المرتبط بماضيك وحاضرك ومستقبلك في تحسين الرفاهية في حياتك. يمكن اكتشاف المعنى من خلال إنشاء قصة سردية عن حياتك. نقترح إكمال هذا النشاط على مدار عدة أسابيع، ولكن يمكن تعديل الإطار الزمني حسب الضرورة.

تعليمات تطوير المعنى لحياتك

اكتب قصة ماضيك. صف كيف تغلبت على التحديات الكبيرة باستخدام نقاط قوتك. يجب أن يكون هذا السرد حوالي 1-2 صفحة. امنح نفسك ساعة أو ساعتين للكتابة وانتظر بضعة أيام ثم عد وراجع ما كتبت. لا تتردد في عمل المراجعات!

بعد ذلك، أكتب عن من أنت الآن. اكتب كيف تختلف نفسك الحالية عن نفسك السابقة. قم بتضمين مناقشة حول كيفية تطور نقاط قوتك. يجب أن يكون هذا الإدخال بطول صفحة واحدة تقريبًا، ولكن لا تتردد في الانتقال لفترة أطول.

أخيرًا، اكتب عن نفسك المستقبلية المتخيلة. أي نوع من الأشخاص تتمنى أن تصبح؟ كيف ستتمو قوتك؟ ما الذي تود تحقيقه؟ أخيرًا، كيف يمكنك المضي قدمًا في تحقيق هذه الأشياء؟ يجب أن يكون هذا السرد أيضًا حوالي صفحة واحدة.

احفظ كتاباتك وراجعها بانتظام. قم بتحديث رواياتك أثناء نموك.

- 4) ممارسة تمريني يوغا الضحك: التصفيق مع الضحك، ضحكات العمر المختلفة.
- 5) وفي النهاية قام الباحث بعمل تقييم للجلسة وشكر المسترشدين والثناء عليهم، والتأكيد على موعد الجلسة القادمة، وتوزيع الواجب البيتي.

الواجب البيتي:

الكتابة عن تحدي واحد في حياة المراهق، وكيف تغلب عليه.

التقييم:

ينفذ تقييم هذه الجلسة من خلال تفاعل الطلاب، وكذلك رأي الطالب وانطباعاته عن الجلسة.

الجلسة الثامنة

العنوان: الجلسة الختامية.

المدة: 90 دقيقة.

الأساليب والفنيات المستخدمة: تمارين يوغا الضحك، المحاضرة، التفسير والايضاح، التغذية الراجعة.

الأدوات: لوح، بوستر، حاسوب محمول، بروجكتر، سماعة صوت، مسافة آمنة.

أهداف الجلسة:

1. تقييم البرنامج.
2. تلخيص مجمل البرنامج.
3. تقديم الشكر للمشاركين.
4. القياس البعدي للتفاؤل المكتسب.
5. الاتفاق على موعد القياس التتبعي.

الخطوات الإجرائية المتبعة للجلسة:

- 1) يرحب الباحث بالمرهقين، وأثنى عليهم ويشكرهم على الحضور والالتزام بالموعد.
- 2) يطلب الباحث من أحد المسترشدين تلخيص الجلسة السابقة، ومن ثم يناقش الواجب المنزلي مع المسترشدين، ويتيح المجال للحديث لجميع المسترشدين ويشجعهم على ذلك.
- 3) يناقش الباحث الطلاب الصعوبات التي واجهتهم خلال مشاركتهم بالبرنامج، ومدى الاستفادة منه.
- 4) ثم بعد ذلك يقوم الباحث بتطبيق المقياس البعدي (مقياس التفاؤل المكتسب) للتعرف إلى أثر البرنامج في زيادة التفاؤل، ومن ثم يعبر الباحث عن شكره الجزيل للمسترشدين على تعاونهم معه في إنجاح البرنامج، والتزامهم بجلساته، ويتمنى لهم التوفيق، والنجاح والارتقاء في حياتهم.
- 5) يتفق الباحث مع المسترشدين على موعد جلسة المتابعة بعد مرور شهرين من الانتهاء من البرنامج.

التقييم:

ينفذ تقييم هذه الجلسة من خلال تفاعل الطلاب وكذلك رأي الطالب وانطباعاته عن الجلسة.

8) ملخص لآلية تنفيذ البرنامج الإرشادي

فيما يلي جدولاً يلخص جميع جلسات البرنامج: عنوان الجلسة، وأهدافها، وإجراءات التنفيذ للجلسة، والوسائل والأدوات المستخدمة في كل جلسة، وكذلك الفنيات والأساليب الإرشادية المستخدمة، إضافة إلى المدة الزمنية لكل جلسة:

الجلسة	موضوع الجلسة	إجراءات التنفيذ	الوسائل والأدوات	الفنيات والأساليب الإرشادية	الزمن
الأولى	التعارف وبناء الثقة مع المجموعة الإرشادية	<ul style="list-style-type: none"> • التعارف بين الباحث وأعضاء المجموعة الإرشادية والتعارف بين الأعضاء أنفسهم. • الاتفاق مع أعضاء المجموعة على قوانين الجلسات. • التأكيد على مبدأ السرية. • أن يتعرف أفراد المجموعة التجريبية إلى أهداف ومخرجات البرنامج الإرشادي. • التعرف إلى توقعات أعضاء المجموعة التجريبية من البرنامج الإرشادي القائم. 	<ul style="list-style-type: none"> • حاسوب. • محمول. • بروجيكتور. • سماعة. • صوت. • عرض. • بوربوينت. • مسافة آمنة. 	<ul style="list-style-type: none"> • الحوار والمناقشة الجماعية. • تمارين يوغا. • ضحك. • التفسير والإيضاح. • التلخيص والتغذية الراجعة. • الواجبات المنزلية. • فعالية شبكة التعارف. 	90 دقيقة
الثانية	التعريف بمفهوم يوغا الضحك والعلاجي	<ul style="list-style-type: none"> • توضيح مفهوم يوغا الضحك. • توضيح أهمية الضحك وأثره النفسي والجسدي. • توضيح نتائج الدراسات التي تدعم ذلك. • شرح مفهوم المشاعر الإيجابية والسلبية. • توضيح أن الضحك هو أحد وسائل التفريغ النفسي. 	<ul style="list-style-type: none"> • حاسوب. • محمول. • بروجيكتور. • سماعة. • صوت. • عرض. • بوربوينت. • مسافة آمنة. • أوراق وأقلام. 	<ul style="list-style-type: none"> • تمارين يوغا الضحك. • الحوار والمناقشة. • العصف الذهني. • المحاضرة المختصرة. • التغذية الراجعة والتلخيص. • التعزيز الإيجابي. • النمذجة. • الواجب المنزلي. • تمرين التنفس. • الواجب البيتي. • غرس الأمل. 	90 دقيقة

90	• تمارين يوغا • الضحك. • الاسترخاء. • التنفس. • المحاضرة. • التفسير والإيضاح. • الامتحان. • التيقظ العقلي. • التفكير الإيجابي. • التدفق. • غرس الامل • الواجب البيتي.	• حاسوب • محمول. • بروجكتر. • سماعة • صوت. • عرض • بوربوينت. • مسافة آمنة. • أوراق وأقلام. • التندق.	• شرح أهم مفاهيم علم النفس الإيجابي. • إيضاح علاقة علم النفس بالسعادة والمرح. • شرح لكيفية استخدام المراهق بعض فنياته.	التعريف بعلم النفس الإيجابي	الثالثة
90	• تمارين يوغا • الضحك. • تمرين التنفس. • المحاضرة. • التفسير والإيضاح. • تمرين التنفس. • الامتحان. • التفسير الداخلي للأحداث. • التفكير الإيجابي. • الوجب البيتي.	• حاسوب • محمول. • بروجكتر. • سماعة • صوت. • عرض • بوربوينت. • مسافة آمنة. • أوراق وأقلام. • التفكير الإيجابي. • الوجب البيتي.	• شرح مفهوم التفاؤل والتشاؤم بصورة عامة. • إيضاح مفهوم التفاؤل المكتسب. • شرح أبعاد التفاؤل المكتسب. • إيضاح العلاقة بين التفاؤل المكتسب وعلم النفس الإيجابي. • شرح أهمية التفاؤل في حياة المراهق.	التعريف بمفهوم التفاؤل المكتسب	الرابعة
	• تمارين يوغا • الضحك. • الاسترخاء. • المحاضرة. • التفسير والإيضاح. • التنفس. • الامتحان.	• حاسوب • محمول. • بروجكتر. • سماعة • صوت. • عرض • بوربوينت.	• تمكن المراهقين من التعبير عما يدور بداخلهم من كبت وتوتر. • التخفيف عن المشاعر السلبية الموجودة لدى المراهقين.	التفريغ الانفعالي	الخامسة

- تعبير المشاركون عن المشاعر والانفعالات وردود الأفعال تجاه الأحداث.
- مسافة آمنة. أوراق وأقلام.
- التفسير الداخلي للأحداث.
- التفكير الإيجابي.
- تعبير المشاركون عن المشكلة كأحد أبعاد حلها.
- اكتساب المراهقين مهارة الاستماع إلى الآخر.
- الوجب البيئي.
- ممارسة تمارين يوغا الضحك (عدد 2).

90 دقيقة.	تمارين يوغا الضحك. الاسترخاء. المحاضرة. التفسير والإيضاح. فنية التوكيد. فنية الأسئلة التوكيدية. السياق. التدفق. المعنى.	حاسوب. محمول. بروجكتر. سماعة صوت. عرض بوربوينت. مسافة آمنة. أوراق وأقلام	<ul style="list-style-type: none"> • التركيز على الجوانب الإيجابية في الحياة. • اختبار إمكانية المراهق على التفاعل بتقاؤل مع الحياة. • زيادة الشرح الداخلي للمراهق حول أبعاد التقاؤل. • رفع قدرة المراهق على التخطيط والتنفيذ للمشاعر الإيجابية. • زيادة تفاعل المراهق مع المحيط. • ممارسة تمارين يوغا الضحك (عدد 2). 	السادسة	صمم يوماً جميلاً متفائلاً
90 دقيقة	تمارين يوغا الضحك. المحاضرة.	حاسوب. محمول. بروجكتر.	<ul style="list-style-type: none"> • التعرف إلى مفهوم معنى الحياة. 	السابعة	تطوير المعنى لحياتك

- التعرف إلى المفاهيم
- المرتبطة بمعنى الحياة:
- كالتفاؤل والأمل وحب الحياة.
- استيضاح أهمية المعنى الإيجابي في الحياة ومصادره.
- قيام المراهقين باكتشاف أهداف تجعل الحياة جديرة بأن تعاش.
- اكتشاف معنى من خلال المعاناة.
- ممارسة تمارين يوغا الضحك (عدد 2).

الثامنة	الجلسة	تقييم البرنامج.	حاسوب	تمارين يوغا	90 دقيقة
الختامية	تلخيص مجمل البرنامج.	محمول.	الضحك.		
	تقديم الشكر للمشاركين.	بروجكتر.	المحاضرة.		
	القياس البعدي للتفاؤل المكتسب.	سماعة	التفسير		
	الاتفاق على موعد القياس التتبعي.	صوت.	والإيضاح.		
		عرض	التغذية الراجعة.		
		بوربوينت.			
		مسافة آمنة.			
		أوراق وأقلام			

انتهى

Appendix E: Abbreviations

Term	Definition
Et al.	and others
GS	Gaza Strip
NATs	Negative automatic thoughts
PCBS	Palestinian Central Bureau of Statistics
PP	Positive Psychology
PPIs	Positive Psychology Interventions
UNFPA	United Nations Population Fund
WB	West Bank
WHO	World Health Organization

**Appendix F: An official letter to facilitate the student's task from Al-Quds
Open University
(in Arabic)**

Al-Quds Open University
Academic Affairs
Deanship of Graduate Studies
Ramallah - P.O. Box 1804 - Postcode: P6058238
Tel: 02/2976240 - 02/2956073
Fax: 02/2963738
Email: fgs@qou.edu

جامعة القدس المفتوحة
الشؤون الأكاديمية
عمادة الدراسات العليا
رام الله - ص. ب. 1804 - الرمز البريدي: P6058238
هاتف: 02/2956073 - 02/2976240
فاكس: 02/2963738
بريد الكتروني: fgs@qou.edu

Ref.: 22/2547/ ع. د. ع.
Date: 2022/11/12 التاريخ:

حضرة أ. جعفر الطيبي المحترم
مدير مديرية التربية والتعليم في وكالة الأمم المتحدة لإغاثة
وتشغيل اللاجئين
تحية طيبة وبعد،

تسهيل مهمة

فتهديك عمادة الدراسات العليا في جامعة القدس المفتوحة أطيب التحيات، وبالإشارة إلى الموضوع أعلاه يقوم الطالب (معتز أسعد فخري مرققة)، بإعداد رسالة ماجستير في تخصص "الإرشاد النفسي والتربوي" بعنوان: (The Effectiveness of a Positive Psychological Counseling Program Based on Laughter Yoga in Developing Learned Optimism among the Adolescents). وعليه، أمل من حضرتكم تسهيل مهمة الطالب في الحصول على المعلومات التي تساعد في إعداد رسالته وتوزيع أداة الدراسة المتعلقة به على مدارس وكالة الغوث/ الخليل وتطبيق البرنامج الإرشادي، شاكرين لكم جهودكم في خدمة البحث العلمي، ومعالجة قضايا مجتمعنا الفلسطيني.

وتفضلوا بقبول فائق الاحترام والتقدير،

محمد شاهين
مدير الدراسات العليا

نسخة:
• الملف.

Appendix G: The approval of Mr. Jafar Titi/ Area Education Officer at UNRWA to implement the counselling program in the UNRWA's schools (in Arabic)

11/12/22, 1:50 PM رسالة ماجستير الطالب معزز مرفقة الإرشاد النفسي والتربوي - Gmail

<mutaz.mmm111@gmail.com> Mutaz Maraqa 

رسالة ماجستير الطالب معزز مرفقة الإرشاد النفسي والتربوي

10 نوفمبر 2022 في 7:45 من <J.TITI@unrwa.org> TITI, Jafar
<mutaz.mmm111@gmail.com> "mutaz.mmm111@gmail.com" إلى:
نسخة إلى: <H.MADIEH@unrwa.org> "MADIEH, Hilda"

عزيزي معزز

لا مانع من تطبيق الدراسة ، ارجو ابلاغي بالمدارس المستهدفة حتى نعلمهم ونسهل المهمة لك

احترامي وتقديري و امنياتي لك بالتوفيق

Jafar I. Titi | HEBRON AREA EDUCATION OFFICER 
unrwa | department of education | west bank
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ملاحظة هامة: بحسب تعليمات قسم الاتصالات و تكنولوجيا المعلومات IMTD في وكالة الفوت سيتم لفظ المراسلة عبر الإيميلات الشخصية لمدراء المدارس و كافة الموظفين في المدارس ، وحسابات المدارس سيتم اغلقتها في وقت قريب، لذا ارجو استخدام الحسابات الشخصية من الان فصاعدا.

<From: SALAMEH, Mohd <mo.salameh@unrwa.org>
Sent: Thursday, November 10, 2022 7:03 AM
<To: TITI, Jafar <J.TITI@UNRWA.ORG>
Subject: RE: رسالة ماجستير الطالب معزز مرفقة الإرشاد النفسي والتربوي

Approved

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