Research on the Application Value of Positive Psychology in Clinical Practice

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Abstract

This study explores the application value of positive psychology in clinical practice among patients of various age groups. Employing quantitative research methods, the effects of positive psychological interventions on mental health and quality of life were examined. Results revealed that positive psychology interventions exerted significant positive impacts on patients across different age categories. These impacts were observed through changes in depression, anxiety, loneliness, and life satisfaction levels. Tailoring interventions to address unique age-related characteristics and needs proved vital, as individual response patterns varied. In the youth group, cognitive reconstruction, emotional regulation, and goal setting interventions significantly alleviated depression symptoms, leading to enhanced life satisfaction. The middle-aged group benefitted from emotional expression, coping skills training, and self-affirmation, resulting in reduced anxiety levels and improved self-esteem. Among the elderly, emotional regulation, social support, and meaning-seeking interventions diminished loneliness and elevated life satisfaction. Despite these promising outcomes, the study acknowledged the necessity for flexible intervention planning based on individual responses, varying needs, and intervention cycles. Future research could delve into specific mental health indicators and extend to qualitative methodologies, thus offering comprehensive insights for refined clinical practices.

Keywords

Positive Psychology, Clinical Applications, Mental Health, Quality Of Life, Happiness, Intervention Methods

1. Introduction

Positive psychology, as an emerging branch of psychology that emphasizes individual positive traits, emotions, and happiness, has attracted widespread attention[1]. In clinical practice, the application of positive psychology is gradually receiving attention from professionals and is believed to effectively improve individual mental health and quality of life[2].

2. Research materials and methods

2.1 General research materials

In this study, we selected patients from different age groups as the research subjects and divided them into the youth group, middle-aged group, and elderly group. The number of patients in the youth group is 50, with a patient age of 32.5 ± 3.2 years old. The number of patients in the middle-aged group is 60, with a patient age of 49.8 ± 2.7
years old. The number of patients in the elderly group is 45, with a patient age of $67.3 \pm 4.1$ years old. The selection of these age ranges aims to comprehensively understand the application effect of positive psychology in patients of different age groups, thereby providing more targeted intervention strategies for clinical practice[3].

2.2 Research Methods

In order to evaluate the application effect of positive psychology in clinical practice, this study adopted quantitative research methods, including literature review and data analysis. Firstly, this study conducted a comprehensive review of relevant literature to obtain existing research results on the application of positive psychology in patients of different age groups. By systematically organizing and summarizing existing literature, we can gain a deeper understanding of the impact of positive psychological interventions on mental health and quality of life.

Secondly, this study extracted relevant data from selected literature and conducted statistical analysis. This study calculated the changes in mental health and quality of life for patients of different age groups under positive psychological intervention. By processing and analyzing these data, this study can objectively evaluate the application effect of positive psychology in patients of different age groups, providing reliable basis for research conclusions.

2.3 Research standards

To uphold the utmost reliability and precision of the research data, a rigorous framework of research standards was meticulously established within the study. These standards were meticulously designed to safeguard the integrity of the investigation and enhance the veracity of the findings. One of the key aspects of this stringent approach was observed during the meticulous literature screening process, wherein a meticulous selection criterion was employed to identify and include only those sources that aligned with exceptionally high-quality standards.

The chosen standards encompassed an array of critical facets that are fundamental in upholding the scientific rigor of the study. One crucial criterion pertained to the scientific rigor of the research methodologies employed in the selected literature. It was imperative that these methodologies adhered to well-established and validated scientific practices, ensuring the robustness of the findings derived from them. This not only elevated the credibility of the research but also minimized the potential for methodological biases that could otherwise compromise the research outcomes.

Another pivotal standard revolved around the representativeness of the sampled data. It was imperative that the selected literature provided a well-rounded and diverse representation of the population under scrutiny[4]. This approach aimed to mitigate the risk of skewed conclusions by ensuring that the findings were applicable across a broader spectrum of the target population. This inclusivity fostered a more holistic understanding of the research topic and minimized the possibility of drawing conclusions solely based on a narrow subset of data.

2.4 Research Count Statistics

In this study, we summarized and analyzed selected literature to calculate the changes in mental health and quality of life of patients in different age groups under positive psychological intervention. By counting and analyzing the collected data, we can quantify the magnitude and degree of changes in patients of different age groups after positive psychological intervention. This certain amount of statistical methods can more objectively reveal the application effect of positive psychology in clinical practice, providing a scientific basis for drawing research conclusions[5].

3. Result

This study aims to explore the application value of positive psychology in clinical practice, especially its effectiveness in different age groups of patients. By using quantitative research methods, we intervened with young, middle-aged, and elderly patients and analyzed their changes under positive psychological intervention.

In the youth group, a total of 50 patients participated in positive psychological intervention. Intervention methods include cognitive reconstruction, emotional regulation, and goal setting. The intervention period is 12 weeks, with individual or group conversations held once a week. The results showed that under the intervention of positive psychology, the depression symptoms of the young group of patients were significantly reduced, and life satisfaction was significantly improved. The specific data is shown in Table 1.

In the middle-aged group, a total of 60 patients received positive psychological intervention. Intervention methods include emotional expression, coping skills training, and self-affirmation. The intervention period is 16 weeks, with two individual or group conversations per week. The results showed that under the intervention of positive psychology, the depression symptoms of the middle-aged group of patients were significantly reduced, and life satisfaction was significantly improved.
psychology, the anxiety level of middle-aged patients significantly decreased and their self-esteem level significantly increased. The specific data is shown in Table 2.

In the elderly group, a total of 45 patients participated in positive psychological intervention. Intervention methods include emotional regulation, social support, and meaning seeking. The intervention period is 20 weeks, with individual or group conversations held once a week. The results showed that under the intervention of positive psychology, the loneliness of elderly patients was significantly reduced and their life satisfaction was significantly improved. The specific data is shown in Table 3.

### Table 1: Intervention effects in the youth group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Pre-intervention Depression Level</th>
<th>Post-intervention Depression Level</th>
<th>Pre-intervention Life Satisfaction</th>
<th>Post-intervention Life Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth Group</td>
<td>25.6 ± 3.2</td>
<td>18.4 ± 2.1</td>
<td>56.2 ± 7.8</td>
<td>72.5 ± 6.4</td>
</tr>
</tbody>
</table>

### Table 2: Intervention effects in the middle-aged group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Pre-intervention Anxiety Level</th>
<th>Post-intervention Anxiety Level</th>
<th>Pre-intervention Self-esteem Level</th>
<th>Post-intervention Self-esteem Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Middle-Aged Group</td>
<td>32.1 ± 4.5</td>
<td>23.8 ± 3.6</td>
<td>45.6 ± 6.2</td>
<td>60.3 ± 5.1</td>
</tr>
</tbody>
</table>

### Table 3: Intervention effects in the elderly group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Pre-intervention Loneliness</th>
<th>Post-intervention Loneliness</th>
<th>Pre-intervention Life Satisfaction</th>
<th>Post-intervention Life Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elderly Group</td>
<td>18.7 ± 2.9</td>
<td>14.2 ± 2.1</td>
<td>48.9 ± 5.6</td>
<td>64.8 ± 4.9</td>
</tr>
</tbody>
</table>

4. Research analysis

### 4.1 Analysis of intervention effects in the youth group

In the intervention of the youth group, we adopted various positive psychological intervention methods such as cognitive reconstruction, emotional regulation, and goal setting. Cognitive reconstruction aims to help patients identify and correct negative self-awareness and thinking patterns, in order to promote a positive mindset and emotions. Emotional regulation aims to teach patients to manage emotions more effectively, cope with negative emotions, and improve their emotional adaptability. Goal setting focuses on guiding patients to set positive goals and enhancing their confidence and sense of achievement by achieving them. The implementation of these intervention methods needs to be guided by clinical psychologists, and communicated and trained through individual or group conversations[6].

Research data shows that in the young group of patients, the intervention of positive psychology has significantly alleviated their depressive symptoms. The changes in depression levels are mainly reflected in the reduction of symptoms and frequency. Specifically, the average level of depression before intervention was 25.6 ± 3.2, while the average level of depression after intervention was 18.4 ± 2.1. This indicates that the intervention method has to some extent improved the depression symptoms of patients, resulting in a positive adjustment of their psychological state.

The relief of depressive symptoms may be closely related to the effectiveness of intervention methods such as cognitive reconstruction and emotional regulation. Cognitive reconstruction helps patients change their negative self-awareness, reduces the impact of negative thinking, and thus reduces depressive symptoms. Emotional regulation enables patients to better manage their emotions and alleviate the impact of emotional fluctuations on depression. In addition, the implementation of goal setting also enhances patients’ confidence and positive emotions, which helps to suppress the generation of depression[7].

In addition to the improvement of depressive symptoms, the life satisfaction of young patients also significantly improved after intervention. The average life satisfaction before intervention was 56.2 ± 7.8, while the average life satisfaction after intervention was 72.5 ± 6.4. This indicates that the intervention methods of positive psychology not only affect the mental health of patients, but also to some extent improve their quality of life.
4.2 Analysis of intervention effects in the middle-aged group

In the middle-aged group intervention, we chose intervention methods such as emotional expression, coping skills training, and self-affirmation. These methods aim to help middle-aged patients better cope with emotional issues, enhance their ability to cope with stress and difficulties, and enhance their self-esteem and confidence. Emotional expression allows patients to freely express their inner emotions, alleviate emotional stress, and promote emotional release and release. Coping skills training helps patients learn methods to cope with negative emotions and stress, and improves their psychological resilience. Self-affirmation aims to guide patients to focus on their own strengths and achievements, and cultivate a positive self-image. These intervention methods promote interaction and communication between middle-aged patients and clinical psychologists through individual or group conversations.

According to the research results, in the middle-aged group of patients, the intervention of positive psychology significantly reduced their anxiety levels. The changes in anxiety levels are mainly manifested in the reduction of symptoms and emotional stability. The specific data shows that the average anxiety level before intervention is 32.1 ± 4.5, while the average anxiety level after intervention is 23.8 ± 3.6. This indicates that the intervention method has to some extent improved the anxiety symptoms of middle-aged patients, resulting in a positive adjustment of their emotional state.

The decrease in anxiety level may be related to the effectiveness of intervention methods such as emotional expression and coping skills training. Emotional expression helps patients release their inner emotions, alleviate emotional distress, and thus reduce anxiety levels. Coping skills training enables patients to master healthier coping styles, enhances their ability to cope with stress and anxiety, and helps to maintain emotional stability. In addition, the implementation of self-affirmation also enhances the self-confidence of middle-aged patients, making them more confident in dealing with challenges in life, thereby reducing anxiety.

While anxiety levels decreased, the self-esteem level of middle-aged patients also significantly improved. The average self-esteem level before intervention was 45.6 ± 6.2, while the average self-esteem level after intervention was 60.3 ± 5.1. This indicates that the intervention methods of positive psychology have significant effects on improving the emotional state and self-esteem of middle-aged patients.

4.3 Analysis of intervention effects in the elderly group

In the elderly group intervention, we chose intervention methods such as emotional regulation, social support, and meaning seeking. Emotional regulation aims to help elderly patients better cope with emotional fluctuations, enhance emotional adaptability, and alleviate emotional distress. Social support provides emotional and social support to elderly patients by organizing social activities and enhancing interpersonal communication, reducing loneliness. Seeking meaning guides elderly patients to think about the meaning and value of life, thereby cultivating a positive attitude towards life. These intervention methods are conducted in individual or group conversations to promote interaction and communication between elderly patients and clinical psychologists.

According to the research results, in the elderly group of patients, the intervention of positive psychology significantly reduced their sense of loneliness. The change in loneliness is mainly reflected in the increase in inner satisfaction and social participation. Specific data shows that the average loneliness before intervention was 18.7 ± 2.9, while the average loneliness after intervention was 14.2 ± 2.1. This indicates that intervention methods have to some extent improved the loneliness of elderly patients, improved their social satisfaction and quality of life.

The decrease in loneliness may be closely related to the effectiveness of intervention methods such as emotional regulation and social support. Emotional regulation enables patients to better cope with negative emotions, alleviate emotional distress, and thus reduce loneliness. Social support enhances patients’ sense of social participation and belonging by providing emotional and social support, which helps to reduce the generation of loneliness. In addition, the implementation of meaning seeking also makes elderly patients pay more attention to the value and meaning of life, thereby reducing their inner loneliness.

Accompanying the decrease in loneliness is a significant improvement in life satisfaction among elderly patients. The average life satisfaction before intervention was 48.9 ± 5.6, while the average life satisfaction after intervention was 64.8 ± 4.9. This indicates that the intervention methods of positive psychology not only affect the mental health of elderly patients, but also to some extent improve their quality of life.

4.4 Value and limitations of intervention methods

By analyzing the intervention effects of different age groups, it can be seen that the application of positive
psychology in clinical practice has certain value, but there are also some limitations. Firstly, as individuals age, their
dlife experiences, social roles, and psychological needs change, resulting in unique characteristics and needs for pa-
tients in different age groups when dealing with psychological problems. Therefore, a single intervention method
may not fully meet the needs of patients of different age groups, and it is necessary to tailor intervention plans ac-
garding to their aptitude to improve the personalized and targeted intervention effect.

Secondly, the intervention cycle and frequency have a certain impact on the intervention effectiveness. The inter-
vention cycle and frequency in this study are relatively fixed, but in practical applications, flexible adjustment of
intervention plans may be necessary due to individual differences and complexity of the condition. For example,
some patients may require longer intervention cycles to achieve stable improvement, while others may achieve sig-
nificant results in the short term. Therefore, in clinical practice, flexible adjustments need to be made based on the
patient's reactions and needs to ensure the effectiveness and sustainability of intervention plans.

5. Conclusion

This study aims to explore the clinical application value of positive psychology in patients of different age groups.
By analyzing the effects of different intervention methods on young, middle-aged, and elderly patients, we found
that positive psychology has a positive impact on improving mental health, reducing anxiety and depression, and
improving life satisfaction. However, patients of different age groups have different needs, and intervention plans
need to be tailored to their individual needs. In addition, factors such as intervention cycle, individual differences,
and external environment also need to be considered. In the future, further research can be conducted on the impact
of different intervention methods on different mental health indicators, as well as the application effect of positive
psychology in specific populations. At the same time, qualitative research methods can also be combined to gain a
deeper understanding of individuals' experiences and feelings under positive psychological intervention, providing
more comprehensive support for clinical practice.

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