

Choice Theory Implementation on Negative Automatic Thoughts, Suicide Cogitation and Quality of Life in Depressed Individuals

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Introduction

Depression ranges among the most impairing mental disorders worldwide, and its early detection is a global health priority (Gundel, Pedersen, Munk-Olsen, and Dalsgaard, 2018). The World Health Organization recently announced depression, particularly in adolescents and young adults, as especially important, and selected this impairing mental disorder for their World Health Day 2017 (The World Health Organization, 2017). Depression is associated with higher negative thoughts (Giy, 2014), increased risk of suicide (Laursen, Musliner, Benros, Vestergaard and Munk-Olsen, 2016) and lower life quality (Vojta, Kinosian, Glick, Altshuler and Bauer, 2010). Identifying groups at high-risk of developing depression is an important public health concern and aids clinicians to diagnose the disorder earlier, can potentially reduce individual, familial and societal costs. The research was purposed to investigate the effects of choice theory implementation on negative automatic thoughts, cogitating suicide and quality of life in depressed clients in therapeutic clinics of Ahvaz.

Material and Method

The sample consisted of 30 subjects of the mentioned population whom were selected randomly via simple random sampling procedure. The participants were allocated to two experimental and control groups, 15 each. The research design was a pretest-posttest with control group and follow up. Automatic Thoughts Questionnaire- 30 (ATQ-30, Kendall and Hollon, 1980), Beck Scale for Suicidal Ideation (BSSI) (1991) and WHO Quality of Life Questionnaire (WHO QoL-BREF, 2000) were utilized as data source. The two groups were pretested. Choice theory based intervention was implemented for 8 sessions, 90 minutes each, on experimental group. The

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control group received none. Then the two groups were post tested and one month follow-up was finally proceeded. To analyze data, multiple analysis of covariance (MANCOVA) and one way analysis of covariance (ANCOVA) were used as statistical main procedures.

Results

The results indicated decreasing negative automatic thoughts and suicide cogitation but increasing the life quality in depressed individuals. The results were persistent after one month follow-up.

Discussion

Choice theory, with the seven caring habits, supporting, encouraging, listening, accepting, trusting, respecting and negotiating differences replaces external control and the seven deadly habits, criticizing, blaming, complaining, nagging, threatening, punishing and bribing (rewarding to control).

The only person whose behavior we can control is our own. All we can give another person is information. All long-lasting psychological problems are relationship problems. The relationship problem is always part of our present life. What happened in the past has everything to do with what we are today, but we can only satisfy our basic needs right now and plan to continue satisfying them in the future. We can only satisfy our needs by satisfying the pictures in our Quality World. All we do is behave. All behavior is Total Behavior and is made up of four components: acting, thinking, feeling and physiology. All Total Behavior is chosen, but we only have direct control over the acting and thinking components. We can only control our feeling and physiology indirectly through how we choose to act and think. All Total Behavior is designated by verbs and named by the part that is the most recognizable. While the choice theory implementation via controlling the feeling and through how we choose to act and think demolishing negative automatic thoughts, lowering suicide cogitation risks and finally elevating quality of life.

Conclusion

The results confirmed the effects of choice theory implementation on negative automatic thoughts, suicide cogitation and quality of life in depressed individuals while the outcome was continuing to endure over a prolonged period.

Keywords: Choice Theory, Negative Automatic Thoughts, Suicide Cogitation, Quality of Life