



EFFECTIVENESS OF COGNITIVE BEHAVIOR THERAPY IN THE MANAGEMENT OF PSYCHOSOCIAL FACTORS AMONG BRIDES AND GROOMS

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ABSTRACT

Psychosocial factors are characteristics that influence individuals psychologically and/or socially. Psychosocial factors that influence individuals are such as self-esteem, self-concept, emotional maturity, depression, anxiety and stress. These factors can describe individuals in relation to their environment and how these affect their physical and mental health. Psychosocial factors play a role in behaviour change. There is a relationship between psychosocial factors and health risk behaviour. Cosmetics such as lipstick or powder applied to the face, used to enhance or alter the appearance. In the makeup, so many products such as primer, moisture, colour corrector, concealer, foundation, transfusion powder, compact, eye products, lipsticks and fixer to enhance bride/groom beauty and make them look special on their marriage day. In the modern world, makeup is all about to influence self-image or self-esteem, which can serve as a symbol of wealth and social class status. Makeup helps to develop personality and enhance self-esteem of brides/grooms. The aim of the study is to find out the

effectiveness of cognitive behaviour therapy in the management of psychosocial factors among brides and grooms. Psychosocial factors such as self-esteem, self-concept, depression, anxiety and stress impair marital happiness, family and occupational life among brides/ and rooms. Once it is identified at an early stage, brides and grooms can be helped in enhancing self-esteem, self-concept and emotional maturity through intervention and manage effectively depression, anxiety and stress. The objective of the study is to find out the psychosocial factors that influence brides and grooms psychologically and to find out the gender differences, if any, among brides and grooms, in the management of psychosocial factors after intervention. Self-esteem Inventory to assess the level of self-esteem among brides/grooms. Self-concept Questionnaire to find out the level of self-concept among brides and grooms. Emotional Maturity Scales assesses the level of emotions and feelings among brides and grooms. DASS-21 to find out the level of depression, anxiety and stress among brides and grooms. 120 brides and grooms, low on self-esteem self-concept and emotional maturity are allotted randomly to 3 control and experimental groups. They are exposed to cognitive behaviour therapy at Kavins Beauty School, Hosur, separately. Similarly, 120 experimental brides and grooms high on depression, anxiety and stress are exposed to cognitive behaviour therapy. The results show that there is a significant difference ($p > .0001$) existing in the performance. The experimental group is faster ($p > .0001$) than the control group in enhancing self-esteem, self-concept and emotional maturity through intervention. The experimental group is faster ($p > .0001$) than the control group in the management of depression, anxiety and stress after intervention. Experimental brides are faster ($p > .0001$) than the grooms in enhancing self-esteem, self-concept and emotional maturity after intervention. Similarly, experimental brides are faster ($p > .0001$) than the control grooms in the management of depression, anxiety and stress after intervention. Cognitive behaviour therapy is less time-consuming, more economical and one of the best techniques in the management of psychosocial factors, promoting psychological wellbeing among brides and grooms.

KEYWORDS: Psychosocial factors, self-esteem, self-concept, emotional maturity, depression anxiety and stress, brides and grooms, control and experimental group, cognitive behaviour therapy



CHAPTER I

INTRODUCTION

The first chapter is presented in four sections to highlight the key aspects pertaining to the importance of psychosocial factors and the cognitive behaviour therapy to achieve success in family and occupational life, considering the available theoretical and conceptual framework.

Section 1 : Presents the introduction highlighting the background of the study, definition of self- concept

Section II: Presents the introduction highlighting the background of the study, definition of self-esteem

Section III: Presents the introduction highlighting the background of the study, definition of emotional maturity

Section IV : Presents the introduction highlighting the background of the study, definition of depression, anxiety and stress

Section V : Need for the study

Section VI : Type of intervention for enhancing self-concept and self-esteem among college students

Section V Conceptual framework of the study

Section 1 : Presents the introduction highlighting the background of the study, definition of self- concept

The construct self- concept has been widely evoked to explain overt behaviour across a wide spectrum of situations and the attainment of positive self-concept has been posted as a desirable goal in education, in child and personality development, in clinical treatment and in wide variety of others settings. Its importance notwithstanding, review of research and evaluation using self-concept continue to point out short comings such as the lack of theoretical basis for defining and interpreting the construct and particularly the poor quality measurement instruments used to measure it.

Lowe (1961) defines self-concept as one's attitude towards self. Panderson (1965) defines self-concept as an organised configuration, of perceptions, beliefs, attitudes and values which the individual views as a part of characteristics of himself/herself. Rogers (1951) self-concept as an organised configuration of the perception of the self, which are admissible to awareness. It compares such elements as the perceptions of one's characteristics and abilities, the percepts and concepts of self in relation to others and the experiences and the goals and ideals which are perceived as having positive or negative valence. Saraswat & Gaur (1981) describes self-concept is the individual way of thinking, feeling and behaving.

Self -concept or self-identity refers to the global understanding as well as the world around us and a sentient being has of himself/herself. It presupposes but can be distinguished from self-consciousness, which is simply an awareness of one' self. It is also more general than self-esteem, which is purely evaluative element of the self-concept. Self - concepts is of two types, namely personal self- concept and Social self - concept. Personal self-concept is the facts or one's own opinions about one self. For example, I am attractive. Social self-concept refers to one's perceptions of how one is regarded by others. For example, I want to be a lawyer. Self-concept is composed of relatively permanent self-assessment, such as personality attributes, knowledge of one's skills and abilities, once's occupation and hobbies and awareness of physical attributes. An individual's self-concept may change with time, possibly going through turbulent periods of identity crisis and reassessment.

According to Rogers, one's self – concept influences how one regards both oneself and one's environment. Self-concept of mentally healthy individual consistent with his/her actual experiences is a chronic source of anxiety and can even result in mental disorders. According to Rogers, a strong self -concept is flexible and allows an individual to confront new experiences and ideas without feeling threatened. According to theory of social learning, Julian B Rutter claims that the expected outcome of an action and the value determine much of our behaviour.

The self-concept is the accumulation of knowledge about the self, such as beliefs in infancy. Children acquire and organise information about themselves as a way to enable them to understand the relations between the self and their social world. This developmental process is a direct consequence of children's emerging cognitive skills and their social relationships with both family and peers. During early childhood, children's self-concepts are less differentiated and centered on concrete characteristics such as physical attributes, possessions and skills. During middle childhood, the self-concept becomes more integrated and differentiated as the child engages in social comparison and more clearly perceives the self as consisting of internal psychological characteristics. Throughout later childhood and adolescence, the self-concept becomes more abstract, complex and hierarchically organised into cognitive mental representation of self- schemas, which direct the processing of self-relevant information.

Section II : Presents the introduction highlighting the background of the study definition of self-esteem

Life is not a bed of roses for many individuals. They have to come across a lot of hurdles and problems to reach the present state. These hurdles are nothing but stress. Stress is conceived as pressure from the environment, then as a strain on the individual. Stress is emanating from interaction between the situation and the individual. Stress is the psychological and physiological state that results when the resources of the individual are not sufficient to cope with the demands and pressures of the day-to-day life events. individual has the ability to withstand the stresses. There are always individual differences. The World Health Organization conceptualise mental health as a, "Wellbeing, in which, the individual realises his/her own abilities can cope up with normal stresses of life. He/she can work productively and fruitfully".

The term “self-esteem” is coined by William James (1892) in his book on, the Principles of Psychology,. Self-esteem is defined as a ratio of goal to attainment. Rosenberg (1965) defines self-esteem as the “evaluation which the individual makes and customarily maintains with regard to himself/herself, expressed as an attitude of approval”. Coopersmith (1967) defines self-esteem as “a personal judgement of worthiness that is expressed in the attitudes that individual holds towards himself/herself. It is a subjective experience which the individual conveys to others by verbal reports and other overt expressive behaviour”.

California Task Force (1990) defines self-esteem as an “appreciating one’s own worth and importance and having the character to be accountable for myself and to act responsibly towards others”. Student’s self-esteem is based on a combination of objective information about oneself and the subjective evaluation of that information.

Self-esteem varies according to situation, individuals suffer from low self-esteem. Self-esteem resides largely within the individual. Individual has the power to change self-esteem. Self-esteem is affected by a variety of influences, ranging from formation of childhood experiences in relation to our parents, to our own standards or ideal self. Individuals with low self-esteem are managed through treatment. Self-esteem is influenced by our experiences of success or failure. Self-esteem or self-image is affected by all the experiences such as success, failure or compliments, personal expectations, expectation of others. Learning is a growth – intellectual, physical, psychological, social spiritual and combinations of those in every aspect of learning. There is the potential damage to maintain or increase self-esteem. Self-esteem in students mirrors the appraisal of others, in particular, parents and teachers. Teachers view clearly affects learner’s achievement. Positive appraisals tend to increase the level of learning. Negative appraisals tend to lower learning experiences. Students tend to perform in accordance with teacher expectations and treatment. An individual’s self-esteem is based on the combination of objective information about oneself and subjective evaluation of that information (Loomns & Loomzns, 1994).

The individual disorder can be diagnosed using the specific and unique symptoms, triggering events and timing. For individuals with low self-esteem and emotional maturity, there are numerous treatments and strategies

that can improve their mood, behaviour, ability to function efficiently in day-to-day life, balancing feelings and emotions.

Some of the characteristics of individuals with high self -esteem such as perceives reality, relatively undefensive, spontaneous, natural, task centered, self-reliant, relationships are intimate, feeling valuable, makes growth choices, nonjudgemental of others, wholeness, enjoys being alone, acceptance and experiences without self-consciousness.

Some of the characteristics of individuals with low self -esteem such as avoids reality to avoid anxiety, defensive, reserved, plays a role, self-centered, dependent, relationships are causal, feeling unworthy, makes fear choices, critical of others, a feeling of not belonging, oriented towards approval of others, strive to perform and avoids mistakes and considers what others think as most important.

When our self-esteem is high, we are confident, feel free to be ourselves and to express ourselves. When it is low, attempt to hide ourselves.

Section 1II: Presents the introduction highlighting the background of the study, definition of emotional maturity

Section 1V : Presents the introduction highlighting the background of the study, definition of depression, anxiety and stress

The symptoms of anxiety and stress are feeling faint or dizzy, restlessness, numbness or tingling, shortness of breath, sweating, chills or hot flashes, dry mouth, distress, fear, apprehension and worry.

Section V: Details the need for focusing on enhancing psychosocial factors among college students

Students in colleges are facing lots of problems. There has been a great concern regarding the mental wellbeing of the students. Students in developed countries are likely to face more difficulties because of poor psychosocial factors and socioeconomic backgrounds. Although Student Counselling has been widely developed and accepted in developed countries, Students counsellor skills and practices are still underdeveloped in many countries. Many diseases are due to mental depression, anger, grief, uninhibited sexual indulgence, anxiety, discontent, distrust and other psychosomatic disturbances. Many people, who are mentally weak, suffer from diseases of their imagination, which in many cases prove fatal. By developing such qualities as good thought, enthusiasm, courage, hope and optimism, even the weak body and mind can turn into strong and healthy ones. Low psychosocial factors impair academic, family and occupational life. Cognitive behaviour therapy helps college students in enhancing self-concept and self-esteem. The present study is undertaken in this direction.

OBJECTIVES

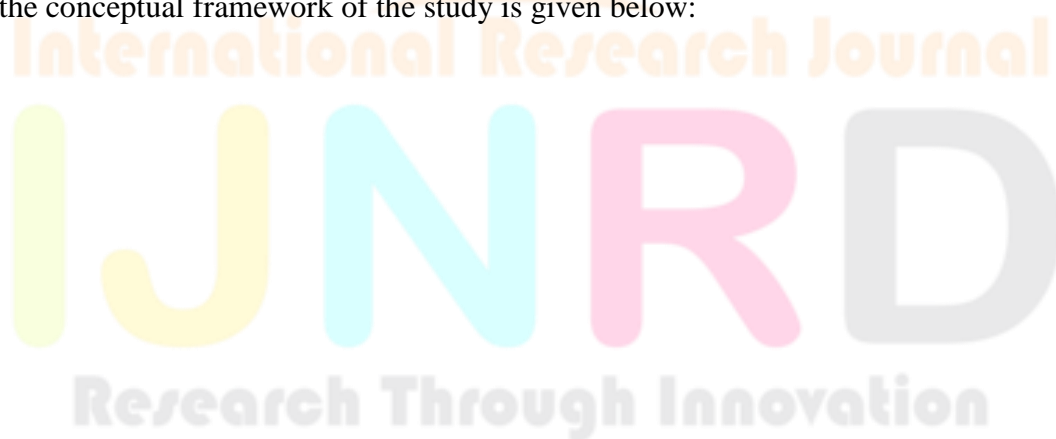
Poor psychosocial factors impair academic success. Once it is identified at an early stage, students are helped to enhance psychosocial factors such as self-concept, self-esteem, emotional maturity, depression, anxiety and stress through intervention. The main objectives of the study are to

- Find out the effectiveness of cognitive behaviour therapy in enhancing self-concept and self-esteem among brides and grooms
- To find out the gender differences, if any, among brides and grooms, in enhancing self-concept and self-esteem through intervention
- Find out the effectiveness of cognitive behaviour therapy in enhancing self-esteem among brides and grooms
- To find out the gender differences, if any, among brides and grooms, in enhancing self-esteem through intervention
- Find out the effectiveness of cognitive behaviour therapy in enhancing emotional maturity among brides and grooms
- To find out the gender differences, if any, among brides and grooms, in enhancing emotional maturity through intervention

- Find out the effectiveness of cognitive behaviour therapy in the management of depression, anxiety and stress among college students
- To find out the gender differences, if any, among brides and grooms, in enhancing emotional maturity through intervention

Section V: Deals with the conceptual framework for the investigation

Brides and grooms are exposed to cognitive behaviour therapy for 6 months, in the morning, reporting at Kavins Beauty School at Hosur. Psychodiagnostics is carried out at the end of 6 months to find out the progress / improvement. The details of the cognitive behaviour therapy are discussed. After careful investigation of those factors and its negative consequences on brides and grooms, it is intended to administer interventions to enhance/overcome psychosocial factors and promote psychological wellbeing and mental health. Since there is no systematic identification, classification and mitigation procedures for psychological wellbeing among brides and grooms and its negative consequences on family and occupational life. This study is intended to address and empower brides and grooms for necessary mitigating interventions at the individual level. It is further understood that maintaining normal psychological wellbeing and the acquisition of coping strategies and skills will enable those brides and grooms to enhance their peaceful life both at present and in the future. A graphical representation of the conceptual framework of the study is given below:



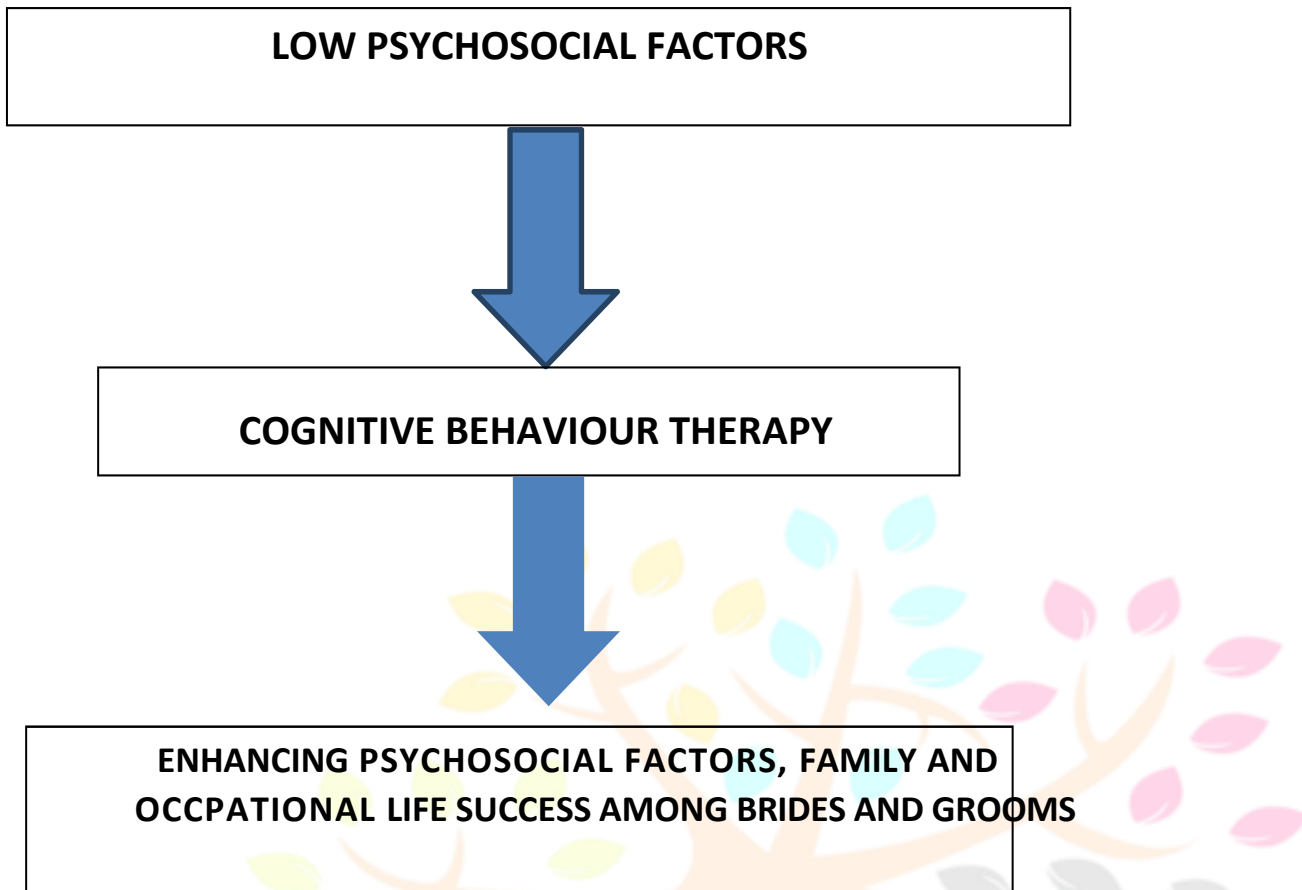


Figure 1.1 : Conceptual frame work of the study

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CHAPTER II
REVIEW OF LITERATURE

Meyez et al., (2023) stress the important concept of cognitive training for athletes that are attempting to achieve optimal sporting performance by learning how to actively control and improve their thoughts and cognitive processes. They discuss why it can be beneficial to train the brain alongside the body of an athlete and how cognitive training techniques can help to improve physical performance. Kahneman's Dual Systems Theory distinguishes cognitive performances and slow thinking, to understand how subconscious and conscious thinking work and why the differentiation is important in elite sports. This study provides methods and practical applications for mental and psychological training, such as the importance of self-talk and the rise of gaming to improve the brain with discussions on how these techniques can help transfer into improve sporting performance.

Younghoom Bae (2023) studies the effect of physical self-concept and self-management on satisfaction and post-activity behavior of social sports participants, and to provide important clues to researchers in the field of sports psychology. have. In order to achieve this purpose, as a result of a survey of 387 participants in social sports, the following conclusions are obtained. First, in the effect of physical self-concept on satisfaction and post-activity behavior of social and physical education participants, physical self-concept factors that affect satisfaction appeared as health, flexibility, and strength. Appearance, health, strength, and endurance are found to have an effect. Second, in the effect of self-management on satisfaction and post-activity behavior of social sports participants, the factors affecting self-management on satisfaction are body management and interpersonal management. Reparticipation intention is mental management, word of mouth intention is interpersonal. Management and mental management are found to have an effect.

Dijama Ivanisevic & Haris Sunje (2022) examine the self-concept of athletes and Esports players and to determine the relationship between these possibly different self-concepts, and how they differ between athletes and Esports players. Exactly 67 participants are involved in the research, namely 37 athletes who play sports at the highest level in Bosnia and Herzegovina, and 30 Esports players, who compete semi-professionally or professionally, at the state or regional level. The average age of the respondents is 23 years and 4 months. Sociodemographic variables are measured by the Sociodemographic Characteristics Questionnaire, which is constructed for research purposes. Self Discrepancy Scale is used to examine self-concept. The obtained results suggest the existence of a statistically significant difference in self-

concept between athletes and Esports players, in relation to physical ($p < 0.05$), emotional ($p < 0.05$) and social self ($p < 0.05$). In addition, it is shown that there is no statistically significant difference between athletes and Esports players, regarding cognitive ($t = 1.04$, $p > 0.05$) and moral self ($t = 0.19$, $p > 0.05$). Therefore, athletes have a more positive perception of their physical, emotional, and social self, because it is possible that in interaction with the community due to active sports participation and good performances they receive a positive and supportive reaction from the environment, which further contributes to the fact that they experience and present their physical, emotional and cognitive self in a more positive way than Esports players.



Chapter-III

METHODOLOGY



CHAPTER III

METHODOLOGY

Methodology part is more important of any research, which guides the researcher to take the right steps in completing the research endeavor. In the last chapter literature survey presented the important research studies in the related topics on psychosocial factors.

PURPOSE OF THE STUDY

Low psychosocial factors impair family and occupational life. Aim of the present study is to find out the effectiveness of cognitive behaviour therapy in enhancing psychosocial factors among brides and grooms. Once brides and grooms are free from psychosocial factors, they can lead a happy marital life and successful at the workplace. The objective of the study is to find out the effectiveness of cognitive behaviour therapy in the management psychosocial factors and to find out the gender differences, if any, among brides and grooms, through intervention.

HYPOTHESIS

The following hypotheses are drawn from the review of worldwide literature:

- ❖ Cognitive behaviour therapy enhances Self-concept among brides and groom
- ❖ Grooms are faster than the brides in enhancing Self-concept through cognitive behaviour therapy
- ❖ Cognitive behaviour therapy enhances Self-esteem among brides and groom
- ❖ Grooms are faster than the brides in enhancing Self-esteem through cognitive behaviour therapy
- ❖ Cognitive behaviour therapy enhances emotional maturity among brides and groom
- ❖ Boys are faster than the girls in enhancing emotional maturity through cognitive behaviour therapy
- ❖ Cognitive behaviour therapy is effective in the management of depression among brides and grooms
- ❖ Boys are faster than the girls in the management of depression through cognitive behaviour therapy
- ❖ Cognitive behaviour therapy is effective in the management of anxiety among brides and grooms
- ❖ Boys are faster than the girls in the management of anxiety through cognitive behaviour therapy

- ❖ Cognitive behaviour therapy is effective in the management of stress among brides and grooms
- ❖ Boys are faster than the girls in the management of stress through cognitive behaviour therapy

TOOL FOR THE TESTING

For matching the group in experimental design, the following psychological tests are used to assess the level of self-esteem, self-concept, emotional maturity, depression, anxiety and stress among brides and grooms, 2000 brides and grooms, age ranging from 18-25 years, visiting the Beauty Clinic, at Hosur are administered with various psychological tests such as

- Self-concept Questionnaire
- Self-esteem Inventory
- Emotional Maturity Scale
- Dass - 21

Short details of various psychological tests are given below:

SELF – CONCEPT QUESTIONNAIRE

Self-concept Questionnaire has been developed by Saraswat (2008) to assess the level of self-concept among individuals. Self-concept Questionnaire assesses 6 dimensions of self-concept such as Physical, Social, Temperamental, Educational, Moral and Intellectual. Each dimension contains 8 items. Reliability and validity of the test is .67 and .88, respectively. There are 48 items and it usually takes 30 minutes to complete the test.

The operational definitions of self-concept dimensions are given below:

Physical - Individual's view of their body, health, physical appearance and strength

Social – individual's sense of worth in social instances

Temperamental – Individual's view of their prevailing emotional state or predominance of a particular kind of emotional reaction

Educational – Individual’s view of themselves in relation to school, teachers and extracurricular activities

Moral – Individual’s estimation of their intelligence and capacity of problem- solving and judgements

Intellectual – Individual’s awareness of their intelligence and capacity of problem- solving and judgements

SCORING : Ratings for the alternatives are given as 5, 4, 3, 2, 1. Whether the items are positive or negative, the summated score of all the alternatives of 48 statements provide a total self-concept score of an individual. The score ranges from 48 to 240. There are 8 items in each dimension. The items for each dimensions are given below:

DIMENSIONS OF SELF-CONCEPT	ITEM NUMBERS
Physical	2,3,9,20,22,27,29,31
Social	1,8,21,37,40,43,46,48
Temperamental	4,10,14,16, 19,23,24, 28
Educational	5,13,15,17,25,26,30,32
Moral	6,34,35, 41,42,44,45,47
Intellectual	7,11,12,18,33, 36,38,39

SELF-ESTEEM INVENTORY - Karunanithi (1996) has developed Self-esteem Inventory to assess the level of self-esteem among brides and grooms. Self-esteem Questionnaire has both positive and negative items. There are 83 items. Each item will have 4 ratings such as Always, Many of the time, Sometimes, Never. Self-esteem Inventory has 6 dimensions such as Competency (16 items), Global self-esteem (16 items), Moral and self Control (13 items), Social-Esteem (12 items), Family (11 items) and Body and physical Appearance (9 items). Students will be asked to circle the numbers on the Rating Scale. It usually takes 45 minutes to complete the test. The meaning of various dimensions of self-esteem are given below:

Competency - it is the ability to evaluate and understand one’s personal resources. These feelings reflect esteem based on his/her skills, talents and unique achievements

Global self-esteem - it is the general appraisal of the self and it is based on brides and grooms evolution of all parts of himself/herself. A positive global self-esteem would be reflected in feelings such as I am a good person or I respect myself

Moral and self-control - it is the reflection of feeling good as being honest, sincere, adhering to social values. Brides and grooms, who value these supposed to have the feeling of -good about themselves

Social esteem - it encompasses the adolescents feeling about himself/herself as a friend to others. Do others value his/her ideas and include him/her in their activities? Does he/she feels satisfied with his/her interaction and relationship with peers? A child whose social needs are being met, will feel comfortable with these aspects of himself/herself

Family self-esteem - it reflects his/her feelings and himself/herself as a member of his/her family. A person, who feels he/she is a valued member of his/her family, who make his/her own unique contributions and who is secured in love and respects he/she receives from parents and siblings will have high positive self - esteem in their areas.

Body and Physical appearance - it is the body image as a contribution to physical appearance and capabilities. The student's self - esteem in this area is based upon his/her satisfaction with the way his/her body looks and performs.

Scoring : The Raw Score ranges from 83 to 308, excluding lie scores (24).

EMOTIONAL MATURITY SCALE - Dr Yashvir Singh and Dr Mahesh Bhargava (1990) have developed the Emotional Maturity Scale to assess the level of emotional maturity among adolescents. It is a 5 - point Rating scale and the ratings are Very Much (5), Much (4), Undecided (3), Probably (2) and Never (1). The Emotional Maturity Scale assesses 5 areas of emotional maturity such as Emotional Instability, Emotional regression, Social maladjustment, personality Disintegrative and Lack of Independence. The details of the areas are given below:

Emotional stability - Characteristics of an individual that does not allow him/her to react excessively. He/she is emotionally stable and high on stress tolerance

Emotional Progression - Characteristics of a person that refers to a feeling of adequate advancement and growing vitality of emotions in relative to the environment to ensure a positive thinking inhibited with righteousness and contentment.

Social adjustment - Process of interaction between the needs of a person and demand of the social environment.in any given situation. So that they can maintain and adapt a desired relationship with the environment.

Personality integration - is the process of firmly terrifying the diverse elements of an individual's motive and dynamic tendencies, resulting in harmonious co-action and de-escalation of the inner conflict in the undaunted expression of behaviour.

Independence - Capacity of a person's attitudinal tendency to be self-reliant or to resistance to control by others, where he/she can make his/her decision on his/her own judgement based on facts by utilising his/her intellectual and creative potentialities.

The Reliability and Validity of the the scale are .75 and .64. There are 48 statements and it usually takes 30 minutes to complete the test.

Scoring : It is self-reporting 5 -point rating scale. The ratings are scored Very much (5), Much 4), Undecided (3), Probably (2) and Never (1). Scores range from 48 to 240. Total score constitutes the raw score for that particular dimension. Summing up all the raw scores gives a total emotional maturity score. The score ranges from 48 to 240. The higher the score, the more the emotional maturity.

DASS - 21

DASS-21 is used to assess the level of mental health problems among Infertile couples. DASS-21 is a self-reporting form that measures negative emotions such as depression, Anxiety and Stress. DASS-21 has 21 questions, 7 questions each for assessing the level of Depression, Anxiety and Stress. It takes to minutes to complete the testing.

Scoring : Standard scoring procedure is adopted

COGNITIVE BEHAVIOUR THERAPY

Beck (2021) perceives psychological problems as stemming from common place process such as faulty thinking, making incorrect inferences on the basis of inadequate or incorrect information and failing to distinguish between fantasy and reality. Cognitive behaviour therapy is an insight-focused therapy with strong psychoeducational component that emphasizes recognizing and changing unrealistic negative thoughts and maladaptive behaviours. Cognitive behaviour therapy is a psychotherapy that is based on the cognitive model: the way that individuals perceive a situation is more closely connected to their reaction than the situation itself. Cognitive behavioural therapy works on the premise "changing adolescents attitudes and their behaviour by focusing on the thoughts, images, beliefs and attitudes that are held in the person's cognitive processes and how these processes relate to the way a person behaves, as a way of dealing with emotional problems". Cognitive behaviour therapy is a short-term, goal-oriented psychotherapy treatment that takes a hands-on, practical approach to the problem-solving.

PARAMETERS	SELF-CONCEPT	
	Control	Experimental
Brides	30	30
Grooms	30	30

SAMPLING DESIGN

120 college students with low self-concept, 60 brides and 60 grooms, are allotted randomly to control and experimental group, with 30 brides and 30 grooms in each group. Experimental group is exposed to cognitive behaviour therapy for one month whereas the control group is not exposed to any therapeutic intervention.

Table 3.1

Frequency distribution of the Sample (n=120)

PARAMETERS	SELF-ESTEEM	
	Control	Experimental
Brides	30	30
Grooms	30	30



Figure 3.1: Pie Chart shows Frequency distribution of Sample

Table 3.1 and Figure 3.1 Pie Chart show Frequency distribution of Sample. The group is made up of 60, thirty brides and 30 grooms in the control are matched with the experimental group of 60, thirty brides and 30 grooms on the dependent variables, with low self-concept. A random sampling method is adopted for the selection of samples.

Table 3.3

Frequency distribution of sample (n=500)

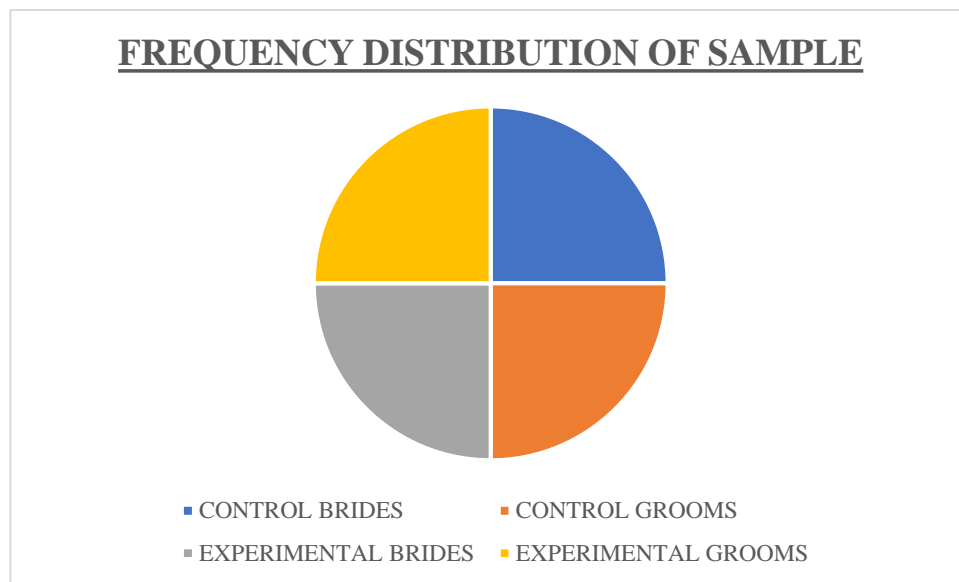


Figure 3.2 : *Pie Chart shows frequency distribution of sample*

Table 3.2 and Pie Chart 3.2 show the frequency distribution of the sample. 500 college students are exposed to Emotional Maturity Scale. Out of 500 grooms and bride, 300 (60%) brides and grooms are high in self-esteem. 200 (40%) brides and grooms are low in self-esteem. Out of 200 low self – esteem brides and grooms, 120 brides and grooms with low self-esteem are allotted randomly to control and experimental group, 60 brides and grooms in each group, with 30 brides and 30 grooms for the final study.

Table 3.3

Frequency distribution of sample (n=120)

CONTROL		EXPERIMENTAL	
Brides	Grooms	Brides	Grooms
30	30	30	30

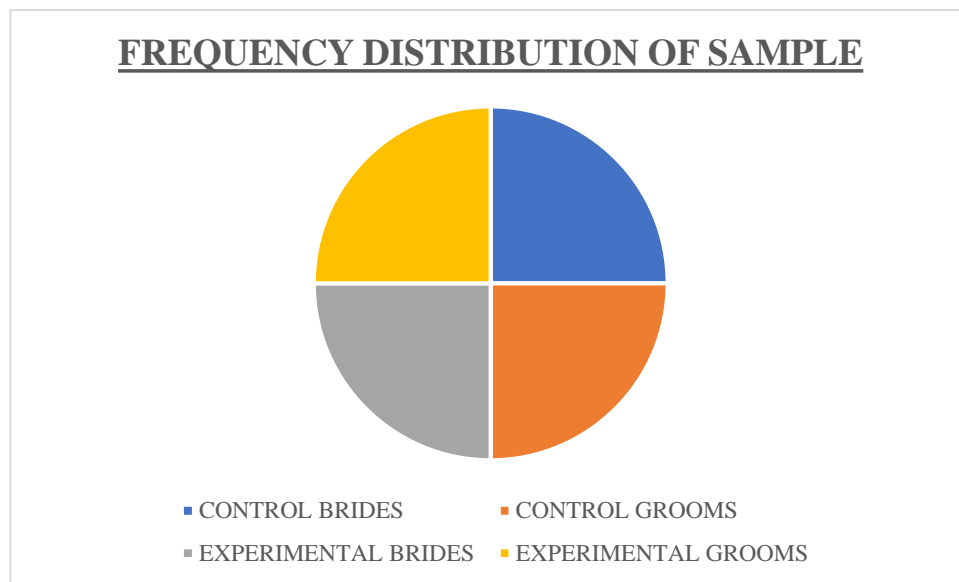


Figure 2: Phi Graph shows Sample characteristics

Table 3.3 and Figure 3.3 Phi graph show frequency distribution of the sample. The group is made up of 60, thirty brides and 30 grooms in the control group, are matched with the experimental group of 60, thirty brides and 30 grooms, on the dependent variable with signs of low emotional maturity. 120 with low emotional maturity, 60 brides and 60 grooms are allotted randomly to control and experimental group, with 30 brides and 30 grooms in each group. Experimental group is exposed to cognitive behaviour therapy for one month whereas the control group is not exposed to any therapeutic intervention.

Table 3.4

Frequency distribution of sample (n=120)

CONTROL		EXPERIMENTAL	
Brides	Grooms	Brides	Grooms
30	30	30	30

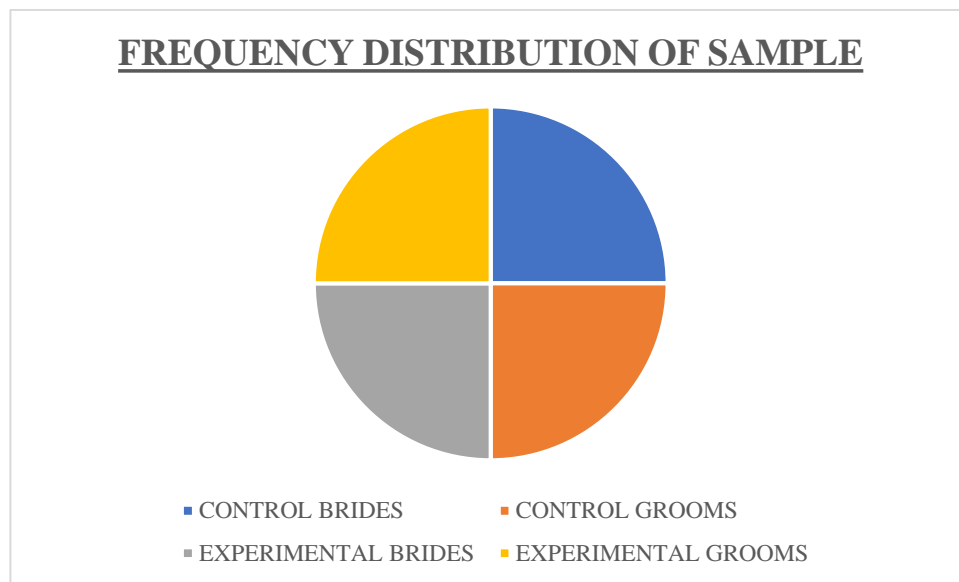


Figure 3.4: Phi Graph shows frequency distribution of the sample

Table 3.4 and Figure 3.4 Phi graph show frequency distribution of the sample. The group is made up of 60, thirty brides and 30 grooms in the control group, are matched with the experimental group of 60, thirty brides and 30 grooms, on the dependent variable with signs of depression. 120 with low emotional maturity, 60 brides and 60 grooms are allotted randomly to control and experimental group, with 30 brides and 30 grooms in each group. Experimental group is exposed to cognitive behaviour therapy for one month whereas the control group is not exposed to any therapeutic intervention.

Table 3.5

Frequency distribution of sample (n=120)

CONTROL		EXPERIMENTAL	
Brides	Grooms	Brides	Grooms
30	30	30	30

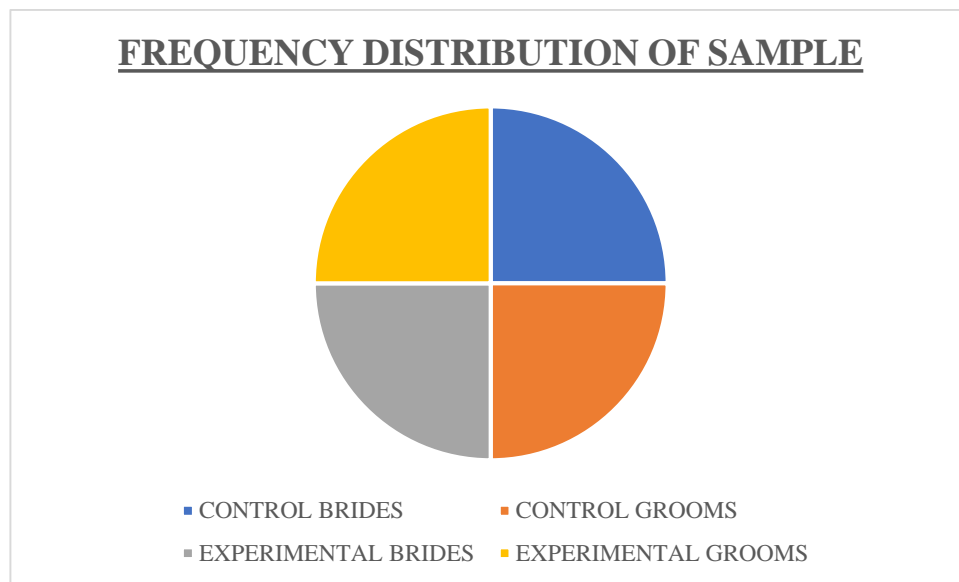


Figure 3.5: Phi Graph shows Sample characteristics

Table 3.5 and Figure 3.5 Phi graph show frequency distribution of the sample. The group is made up of 60, thirty brides and 30 grooms in the control group, are matched with the experimental group of 60, thirty brides and 30 grooms, on the dependent variable with signs of anxiety. 120 with anxiety, 60 brides and 60 grooms are allotted randomly to control and experimental group, with 30 brides and 30 grooms in each group. Experimental group is exposed to cognitive behaviour therapy for one month whereas the control group is not exposed to any therapeutic intervention.

Table 3.6 Frequency distribution of sample (n=120)

CONTROL		EXPERIMENTAL	
Brides	Grooms	Brides	Grooms
30	30	30	30

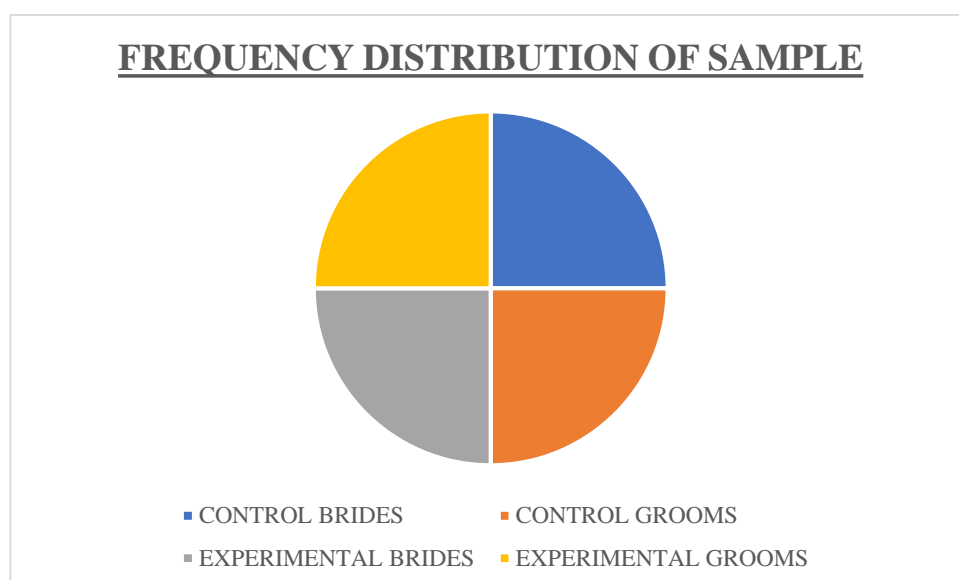


Figure 3.6: Phi Graph shows Sample characteristics

Table 3.6 and Figure 3.6 Phi graph show frequency distribution of the sample. The group is made up of 60, thirty brides and 30 grooms in the control group, are matched with the experimental group of 60, thirty brides and 30 grooms, on the dependent variable with signs of stress. 120 with stress, 60 brides and 60 grooms are allotted randomly to control and experimental group, with 30 brides and 30 grooms in each group. Experimental group is exposed to cognitive behaviour therapy for one month whereas the control group is not exposed to any therapeutic intervention.

RESEARCH DESIGN

The present study is conducted, using matched group design for testing the hypotheses. The area of study for the research is Beauty Clinic, Hosur. The study is conducted in three phases. In phase one, preliminary formalities and administration of the test are done. In the second phase, intervention in the form of cognitive behaviour therapy is conducted. In the third phase, posttest, after one month of intervention and follow up are planned i.e., six months after intervention, are taken care off.

STATISTICS

Data is subjected to Mean, Sd and ANOVA to test the hypotheses and other variables to find out the impact of emotional maturity on loneliness and locus of control through SPSS Version 21..

CHAPTER IV

RESULTS AND DISCUSSION

The purpose of the study is to explore the extent to which cognitive behaviour therapy helps in the management of psychosocial factors among brides and grooms and further help them to live psychologically wellbeing. The secondary purpose of this study is to explore further whether there are significant gender differences among brides and grooms after intervention are scored and analyzed, using appropriate statistical methods to draw meaningful inferences on the effect of intervention.

Mean, SD and ANOVA are used to compare the means of criterion variables between brides and grooms and over three point of time such as pretest phase, posttest phase and follow up phase. The obtained results are presented in the following sections:

Section I: Presents the results of the statistical analyses with regard to the Criterion variable self-concept among brides and grooms

Section II: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable self-concept among brides and grooms

Section III : Presents the results of the statistical analyses with regard to the Criterion variable self-esteem among brides and grooms

Section IV: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable self-esteem among brides and grooms

Section V: Presents the results of the statistical analyses with regard to the Criterion variable emotional maturity among brides and grooms

Section VI: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable emotional maturity among brides and grooms

Sector VII: Presents the results of the statistical analyses with regard to the Criterion variable depression among brides and grooms

Section VIII: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable emotional maturity among brides and grooms

Sector IX: Presents the results of the statistical analyses with regard to the Criterion variable anxiety among brides and grooms

Section X: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable anxiety among brides and grooms

Sector XI: Presents the results of the statistical analyses with regard to the Criterion variable stress among brides and grooms

Section XII: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable stress among brides and grooms

Section I: Presents the results of the statistical analyses with regard to the Criterion variable self-concept among college students

The results of the present study are discussed in tables and figures

Table 4.5

Self - concept Questionnaire dimensions mean raw scores and Sd of control (n=60) Vs. experimental group (n=60) over three phases of training

Test Phase	Category	Mean	Sd	"t" - Value	P - Value
Self - concept Questionnaire- Mean Raw score Pretest	Control group	84	3		NS
	Experimental group	84	3		
Posttest	Control group	84	3*		p<.0001
	Experimental group	190	2		
Follow-up	Control group	84	3*		p<.0001
	Experimental group	230	2		

ANNOVA: Self - concept Questionnaire dimensions mean raw scores of control (n=60) Vs. experimental group (n=60) over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Self - concept Questionnaire					
Mean raw scores					
Pretest	1.6333	1 119	1.6333	0.4333	NS
Posttest	909.68 9.73	1 119	909.68 0.28	3151.25	P>.0001
Follow-up	1896.08 2.85	1 119	1896.08 0.02	6804.16	P>.0001

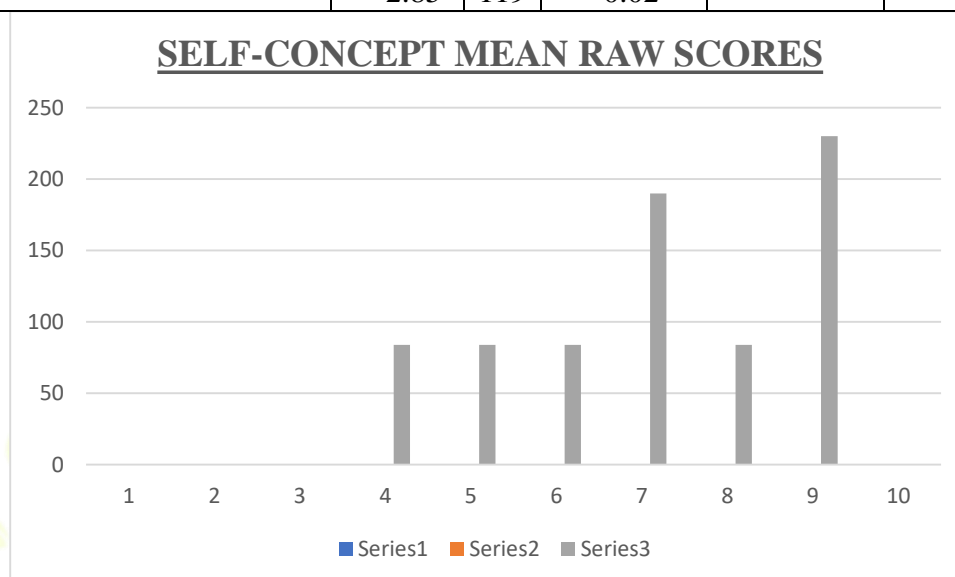


Figure 4.5 Bar Diagram shows Mean Self - Concept Questionnaire raw scores of control Vs. experimental group over three phases of training

Table 4.5-4.6 and Figure 4.5 Bar Diagram show Self - Concept Questionnaire dimensions mean raw scores of control Vs. experimental group over three phases of training. It is seen from the table that there is no significant difference existing between the control and experimental group on the performance. Both the group of college students are suffering from poor Self - Concept Questionnaire dimensions mean raw scores, during the pretest. Hence, the sample selected for the study is a homogeneous sample. There is an extremely significant difference ($p < .0001$) existing in Self - Concept Questionnaire dimensions mean raw scores from pretest to posttest (F - value 3151.25) and follow-up (F - value 6804.14) phase. The experimental group is faster ($p > .0001$) than the control group in enhancing self - concept through intervention. .

Posttest and follow-up analysis reveal that the experimental group is high in Self - Concept Questionnaire dimensions mean raw scores, compared to the pretest. With intervention, the experimental group

is faster ($p>.0001$) than the control group in the enhancement of Self - Concept Questionnaire dimensions mean raw scores through intervention. Cognitive behaviour therapy leads to success among college students. College students are emotionally well balanced and focus very well on the success of the academic. The experimental group are able to understand the environment around them during studies. They are able to view their body, health, physical appearance and strength. They understand their importance in social situations. They understand their prevailing emotional state. They view their relationship with their classmates and teachers. They have the capacity to solve their problems and be accurate in their judgement. They are very intelligent in solving their problems and making judgements about their studies. They are high in all the dimensions of self - concept such as physical, social, intellectual, moral, educational and temperamental and able to enhance psychological wellbeing and mental health.

Hypothesis stated (H_a) “Cognitive behaviour therapy enhances self-concept among experimental group. college students” is accepted. In fact, experimental group is high in self-concept through intervention. Cognitive behaviour therapy is helpful in enhancing self-concept among college students, enhancing psychological as well as physiological wellbeing and mental health among college students

Section III: Presents the results of the statistical analyses with regard to gender differences on the criterion variable self - concept among college students

The findings of the study are discussed in table 4.7 - 4.8 and Figure 4.6.

Section II: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable self-concept among brides and grooms

The findings of the study are discussed in table 4.7 - 4.8 and Figure 4.6.

Table 4.7

Self - Concept Questionnaire dimensions mean raw scores and Sd of control grooms ($n=30$) Vs. experimental bridwes ($n=30$) over three phases of training

Test Phase	Category	Mean	Sd	“t” - Value	P - Value
Self- concept Questionnaire Mean raw scores					
Pretest	Control boys	84	2		NS

	Experimental girls	84	3		
Posttest	Control boys	84	3*		p>.0001
	Experimental girls	190	2		
Follow-up	Control boys	84	3*		p>.0001
	Experimental girlse	230	2		

Table 4.8

ANNOVA: Self - Concept Questionnaire dimensions mean raw scores of control grooms (n=30) Vs. experimental brides (n=30) over three phases of training

Pameters	Sum of Square	df	Mean Square	F- Value	P - Value
Self - concept					
Mean raw score					
Pretest	2389.47	1 29	2389.47	0.6516	NS
Posttest	68082.74 653.67	1 29	68082.74 9.47	6538.84	p>.0001
Follow-up	9444.8 831.87	1 29	9444.8 9.29	7696.03	p>.0001

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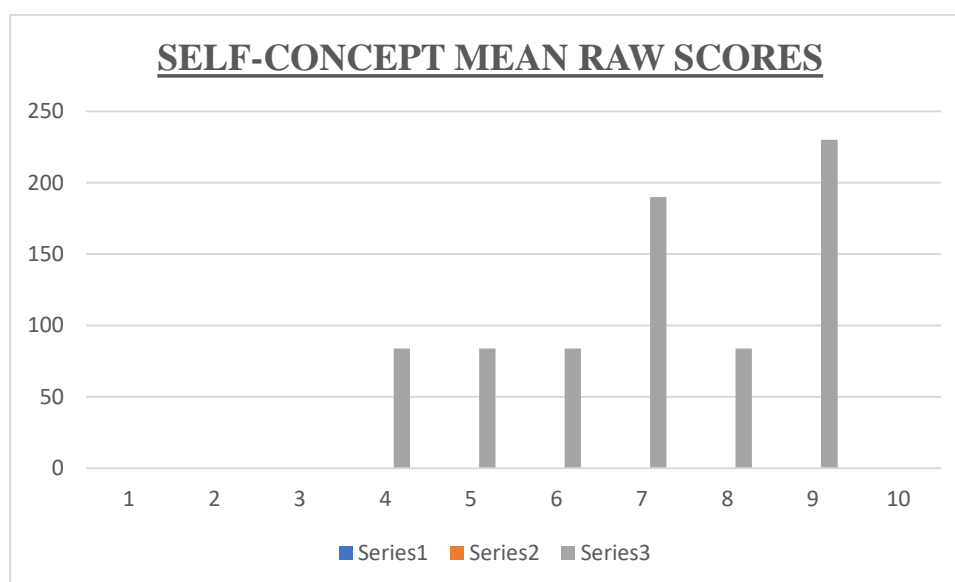


Figure 4.6: Bar Diagram shows Mean Self - Concept Questionnaire raw scores of control grooms Vs. experimental brides over three phases of training

Table 4.7 - 4.8 and Figure 4.6 Bar Diagram show Self - Concept Questionnaire dimensions mean raw scores and Sd of control grooms Vs. experimental brides over three phases of training. It is seen from the table that there is no significant difference existing between the control grooms and experimental brides in the performance. The low raw score shows that both the groups of brides and grooms are suffering from low self – concept, during the pretest. Hence, the sample selected for the study is a homogeneous sample.

There is an extremely significant difference ($p > .0001$) existing on Self - Concept Questionnaire dimensions mean raw scores from pretest to posttest (F - value 6538.84) and follow-up (F - value 7696.03) phase. The experimental brides are faster ($p > .0001$) than the control grooms in enhancing self-concept through intervention. Posttest and follow-up analysis reveal that the experimental brides are high on self - concept, compared to the pretest. With the intervention, the experimental brides are faster ($p > .0001$) than the control grooms in enhancing self-concept through intervention. Cognitive behaviour therapy helps to enhance self-concept among brides and grooms. The experimental brides are able to understand the environment around them during job. They are able to view their body, health, physical appearance and strength. They understand their importance in social situations. They understand their prevailing emotional state. They view their relationship with their friends, family members and others. They have the capacity to solve their problems and be accurate in their judgement. They are very intelligent in solving their problems and making judgments about their work. They are high in all

the dimensions of self - concept such as physical, social, intellectual, moral, educational and temperamental and able to enhance psychological wellbeing and mental health. Brides and grooms are emotionally well balanced and focus very well on the success of the academic.

Hypothesis stated H_a : “Grooms are faster than girls in enhancing self-concept through cognitive behaviour therapy” is rejected. In fact, brides are better than grooms in enhancing self-concept through cognitive behaviour therapy. Cognitive behaviour therapy is effective in enhancing self-concept among brides and grooms, promoting psychological wellbeing and mental health after the intervention.



Section II : Presents the results of the statistical analyses with regard to the Criterion variable self-esteem among brides and grooms

The findings of the study are discussed in table 4.9 - 4.10 and Figure 4.7.

Table 4.9

Self-esteem Inventory dimensions mean raw scores of control (n=60) Vs. experimental (n=60) group grooms and brides over pretest Vs. posttest phases of training

LEVELS OF SELF - ESTEEM		
DIMENSIONS	CONTROL PRETEST	EXPERIMENTAL POSTTEST
Competence	29	64
Global self-esteem	29	64
Moral and self-control	21	48
Social esteem	24	52
Family self-esteem	20	44
Body and Physical appearance	21	36
Overall Dimensions	144/308	308/308

Table 4.10

ANOVA: Self - esteem Inventory dimensions mean raw scores of control (n=60) Vs. experimental (n=60) group grooms and brides over three phases of training

Parameters	Sum of Square	df	Mean Square	F-Value	P - Value
Pretest	2.1333	1 119	2.1333	1.5834	NS
Posttest	76469.63	1 119	96469.63 5.24	28839.46	p>.0001
Follow-up	85157.43	1 119	85157.63 2.18	32654.16	p>.0001

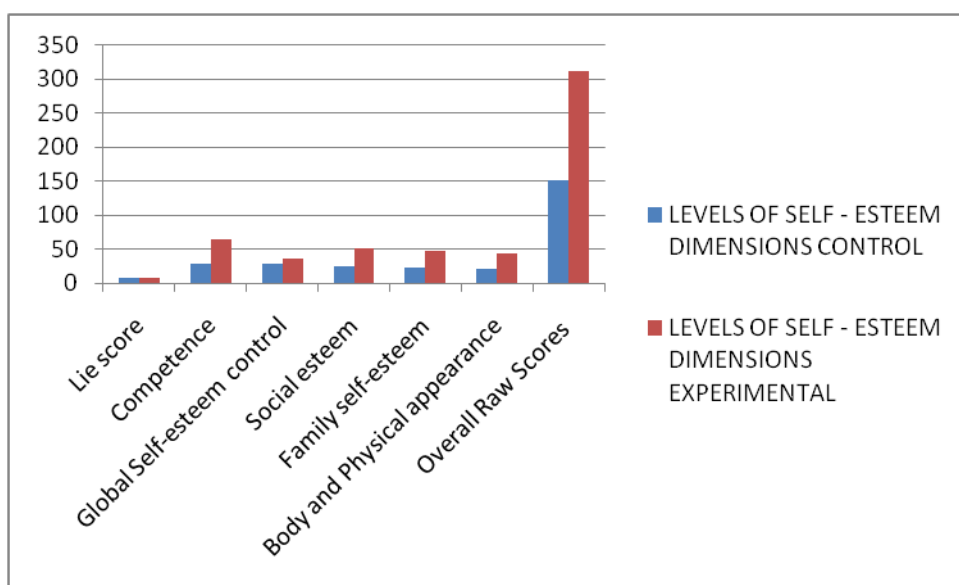


Figure 4.7: Bar Diagram shows Self - esteem Inventory dimensions mean raw scores of control Vs. experimental group grooms and brides over pretest Vs. posttest phases of training

Tables 4.9-4.10 and Figure 4.7 Bar Diagram show Self - esteem Inventory dimensions mean raw scores of control Vs. experimental group grooms and brides over pretest and posttest phases of training. It is seen from the table that control and experimental group grooms and brides are low on Self-esteem Inventory dimensions mean raw scores, during pretest. Calculated F - value (1.5834) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides are low on self-esteem dimensions.

Posttest and follow-up analysis reveal that experimental group grooms and brides are high on Self-esteem Inventory dimensions mean raw scores than the control group over three phases of training, compared to the pretest. Calculated posttest F- Value (28839.46) and follow-up F - Value (32654.16) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. The experimental group grooms and brides are higher ($p > .0001$) than the control group grooms and brides on Self-esteem Inventory dimensions mean raw scores over posttest and follow-up phases of training. Experimental group students are faster ($p > .0001$) than the control group students in enhancing the self-esteem dimensions

With intervention the experimental group college students are higher ($p>.0001$) than the control group students on Self-esteem Inventory dimensions mean raw scores over three phases of training. This may be due to regular practice of cognitive behaviour therapy. Experimental group college students are having the ability to evaluate and understand one's personal resources, self-esteem based on his/her skills, talents and unique achievements; excellent on self-appraisal based on patients' evolution of all parts of himself/herself (Competence). A positive global self-esteem is reflected in feelings such as I am a good person or I respect myself, reflection of feeling good as being honest, sincere, adhering to social values (Global esteem). Grooms and brides, who values these supposed to have the feeling of good about themselves. are feeling about himself/herself as a friend to others. Do others value his/her ideas and include him/her in their activities? Does he/she feels satisfied with his/her interaction and relationship with peers? (Moral and self-control). A child whose social needs are being met, will feel comfortable with these aspects of himself/herself (Social esteem); family self-esteem reflects his/her feelings and himself/herself as a member of his/her family. A groom and bride, who feels he/she is a valued member of his/her family, who make his/her own unique contributions and who is secured in love and respects he/she receives from parents and siblings will have high positive self - esteem in their areas (Family self-esteem). Body and Physical appearance are the body image as a contribution to physical appearance and capabilities. The grooms and brides's self - esteem in this area is based upon his/her satisfaction with the way his/her body looks and performs (Body and Physical appearance).

Table 4.11

ANOVA: Self - esteem Inventory Competence dimension mean raw scores of control ($n=60$) Vs. experimental ($n=60$) group grooms and brides over three phases of training

Parameters	Sum of Square	Df	Mean Square	F- Value	P - Value
Pretest	34.13 4033.07	1 119	34.13 4033.07	0.7898	NS
Posttest	2203.3 63	1 119	2203.3 53	4126.85	$p<.0001$
Follow-up	1510.40 42.91	1 119	1510.40 0.37	4319.24	$p<.0001$

Table 4.11 and Figure 4.7 Bar Diagram show Self-esteem Inventory Competence dimension mean raw scores of control Vs. experimental group over pretest Vs. posttest phases of training. It is seen from the table that control

and experimental group are low on Self-esteem Inventory Competence dimension mean raw scores during pretest. Calculated F - Value (0.7898) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of students are low on Competence dimension.

Posttest and follow-up analysis reveal that experimental group college students are higher ($p > .0001$) than the control group on Self-esteem Inventory Competence dimension mean raw scores over posttest and follow-up phases of training, compared to the pretest. Calculated posttest F- Value (4126.85) and follow - up F - Value (4319.24) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. Experimental group grooms and brides are higher ($p > .0001$) than the control group students Self-esteem Inventory Competence dimension mean raw scores over posttest and follow-up phases of training. Experimental group grooms and brides are faster ($p > .0001$) than the control group grooms and brides in enhancing the Competence dimension.

With training the experimental group grooms and brides are higher ($p > .0001$) than the control group grooms and brides on Self-esteem Inventory Competence dimension mean raw scores during training. This may be due to regular practice of cognitive behaviour therapy. Experimental group grooms and brides are having the ability to evaluate and understand one's personal resources, self-esteem based on his/her skills, talents and unique achievements; excellent on self-appraisal based on grooms and brides' evolution of all parts of himself/herself

Table 4.12

ANOVA: Self - esteem Inventory Global-self-esteem dimensions mean raw scores of control (n=60) Vs. experimental (n=60) group grooms and brides over three phases of training

Parameters	Sum of Square	Df	Mean Square	F- Value	P - Value
Pretest	34.13 4033.07	1 119	34.13 4033.07	0.7898	NS
Posttest	32032.3 63	1 119	32032.3 5.32	4326.85	$p < .0001$
Follow-up	45109.40 42.91	1 119	15109.40 0.37	5319.24	$p < .0001$

Table 4.12 and Figure 4.7 Bar Diagram show Self-esteem Inventory Global self-esteem dimension mean raw scores of control Vs. experimental group over three phases of training. It is seen from the table that control and experimental group are low on Self-esteem Inventory Global self-esteem dimension mean raw scores during pretest. Calculated F - Value (0.7898) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides are low on Global self-esteem dimension.

Posttest and follow-up analysis reveal that experimental group grooms and brides are higher ($p > .0001$) than the control group on Self-esteem Inventory Global self-esteem dimension mean raw scores over three phases of training, compared to the pretest. Calculated posttest F- Value (4326.85) and follow - up F - Value (5319.24) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. Experimental group grooms and brides are higher ($p > .0001$) than the control group grooms and brides. Self-esteem Inventory Global self-esteem dimension mean raw scores during the training. Experimental group grooms and brides are faster ($p > .0001$) than the control group grooms and brides in enhancing the Global self-esteem dimension. A positive global self-esteem is reflected in feelings such as I am a good person or I respect myself, reflection of feeling good as being honest, sincere, adhering to social values

With training the experimental group grooms and brides are higher ($p > .0001$) than the control group grooms and brides on Self-esteem Inventory Global self-esteem dimension mean raw scores posttest and follow up phases of training. This may be due to regular practice of cognitive behaviour therapy. Experimental group grooms and brides are having the general appraisal of the self. and it is based on grooms and brides' evolution of all parts of himself/herself. A positive Global self-esteem will reflect in his/her feelings such as I am a good person or I respect myself

Table 4.13

ANOVA: Self - esteem Inventory Moral and self-control dimension mean raw scores of control (n=60) Vs. experimental (n=60) group college students over three phases of training

Parameters	Sum of Square	df	Mean Square	F- Value	P - Value
Pretest	30.63 278.11	1 119	30.63 278.11	1.4	NS
Posttest	4600.41 2.01	1 119	4600.41 2.01	2211.06	p<.0001
Follow-up	4675.01 237.32	1 119	4675.01 237.32	2324.53	p<.0001

Tables 4.13 and Figure 4.7 Bar Diagram show Self - esteem Inventory Moral and self-control dimension mean raw scores of control Vs. experimental group over three phases of training. It is seen from the table that control and experimental group are low on Self-esteem Inventory Moral and self-control dimension mean raw scores during pretest. Calculated F - Value (1.5834) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of students are low on Moral and self-control dimension.

Posttest and follow-up analysis reveal that experimental group grooms and brides are high on Self-esteem Inventory Moral and self-control dimension mean raw scores than the control group over three phases of training, compared to the pretest. Calculated posttest F- Value (2211.06) and follow - up F - Value (2324.53) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. The experimental group grooms and brides are higher ($p > .0001$) than the control group grooms and brides on Self-esteem Inventory Moral and self-control dimension mean raw scores over three phases of training. Experimental group grooms and brides are faster ($p > .0001$) than the control group in enhancing the Moral and self-control dimension.

With intervention the experimental group students are higher ($p > .0001$) than the control group students on Self-esteem Inventory Moral and self-control dimension mean raw scores over three phases of training. This may be due to regular practice of cognitive behaviour therapy. Experimental group college students, who values these

supposed to have the feeling of good about themselves. College students are feeling about himself/herself as a friend to others. Do others value his/her ideas and include him/her in their activities? Does he/she feels satisfied with his/her interaction and relationship with peers?

Table 4.14

ANOVA: Self - esteem Inventory Mean Social esteem dimensions mean raw scores of control (n=60) Vs. experimental (n=60) group grooms and brides over three phases of training

Parameters	Sum of Square	df	Mean Square	F- Value	P - Value
Pretest	34.13 4033.07	1 119	34.13 4033.07	0.7898	NS
Posttest	22032.3 63	1 119	22032.3 53	4166.85	p<.0001
Follow-up	15109.40 42.91	1 119	15109.40 0.37	4393.24	p<.0001

Table 4.14 and Figure 4.7 show Self-esteem Inventory Social esteem dimension mean raw scores of control Vs. experimental group over pretest Vs. posttest phases of training. It is seen from the table that control and experimental group grooms and brides are low on Self-esteem Inventory Social esteem dimension mean raw scores, during the pretest. Calculated F - value (0.7898) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides are low on Social esteem dimension.

Posttest and follow-up analysis reveal that experimental group grooms and brides are higher ($p > .0001$) than the control group on Self-esteem Inventory Social esteem dimension mean raw scores over three phases of training, compared to the pretest. Calculated posttest F- value (4166.85) and follow up F - value (4393.16) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. Experimental group grooms and brides are higher ($p > .0001$) than the control group Self-esteem Inventory Social

esteem dimension mean raw scores over three phases of training. Experimental group grooms and brides are faster ($p > .0001$) than the control group grooms and brides in enhancing the Social esteem dimension.

With training the experimental group grooms and brides are higher ($p > .0001$) than the control group on Self-esteem Inventory Social esteem dimension mean raw scores over three phases of training. This may be due to regular practice of cognitive behaviour therapy. A groom and bride whose social needs are being met, will feel comfortable with these aspects of himself/herself.

Table 4.15

ANOVA: Self - esteem Inventory Family self-esteem dimension mean raw scores of control ($n=60$) Vs. experimental ($n=60$) group grooms and brides over three phases of training

Parameters	Sum of Square	df	Mean Square	F-Value	P - Value
Pretest	30.63 278.11	1 119	30.63 278.11	1.4	NS
Posttest	4600.41 2.01	1 119	4600.41 2.01	2211.06	$p < .0001$
Follow-up	4675.01 237.32	1 119	4675.01 237.32	2324.53	$p < .0001$

Tables 4.158 and Figure 4.7 Bar Diagram show Self-esteem Inventory Family self-esteem dimension mean raw scores of control Vs. experimental group grooms and brides over pretest Vs posttest phases of training. It is seen from the table that control and experimental group grooms and brides are low on Self-esteem Inventory Family self- esteem dimension mean raw scores during pretest. Calculated F - Value (1.4) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides are low on Social esteem dimension.

Posttest and follow-up analysis reveal that experimental grooms and brides are high on Self-esteem Inventory Family self- esteem dimension mean raw scores than the control over three phases of training, compared to the

pretest. Calculated posttest F- value (2211.06) and follow up F - value (2324.53) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. Experimental group is higher ($p > .0001$) than the control group on Self-esteem Inventory Family self-esteem dimension mean raw scores over three phases of training. Experimental group grooms and brides are faster ($p > .0001$) than the control group in enhancing the Family self- esteem dimension

With training the experimental group is lower than the control group on Self-esteem Inventory Family self- esteem dimension mean raw scores over three phases of training. This may be due to regular practice of cognitive behaviour therapy. Experiment group grooms and brides his/her feeling and himself/herself as a member of his/her family. family self-esteem reflects his/her feelings and himself/herself as a member of his/her family. A groom and bride, who feels he/she is a valued member of his/her family, who make his/her own unique contributions and who is secured in love and respects he/she receives from parents and siblings will have high positive self - esteem in their areas

Table 4.16

ANOVA: Self - esteem Inventory Body and Physical Appearance dimension mean raw scores of control (n=60) Vs. experimental (n=60) group grooms and brides over three phases of training

Parameters	Sum of Square	df	Mean Square	F-Value	P - Value
Pretest	12.10 699.59	1 119	12.10 5.9	1.05	NS
Posttest	5240.45 617.58	1 119	5240.45 5.23	1001.27	$p < .0001$
Follow-up	5508.01 580.92	1 119	5508.01 4.92	1118.84	$p < .0001$

Tables 4.16 and Figure 4.7 show Self-esteem Inventory Body and Physical appearance dimension men raw scores of control grooms and brides Vs. experimental group over pretest Vs posttest phases of training. It is seen from the table that control and experimental group grooms and brides are low on Self-esteem Inventory Body and Physical appearance mean raw scores during pretest. Calculated F - value (1.05) is lower than the tabular value,

hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides low on Body and Physical appearance dimension.

Posttest and follow-up analysis reveal that experimental group is low on Self-esteem Inventory Body and Physical appearance mean raw scores than the control over three phases of training, compared to the pretest. Calculated posttest F- value (1001.27) and follow up F - value (1118.84) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. Experimental group grooms and brides are higher ($p > .0001$) than the control group Self-esteem Inventory Body and Physical appearance dimension mean raw scores over three phases of training. Experimental group grooms and brides are faster ($p > .0001$) than the control group in enhancing the Body and Physical appearance dimension

With training the experimental group grooms and brides are higher ($p < .0001$) than the control group grooms and brides on Self-esteem Inventory Body and Physical appearance dimension mean raw scores over three phases of training. This may be due to regular practice of cognitive behaviour therapy. The body image is contributing to physical appearance and capabilities. Grooms and brides self - esteem in this area is based upon his/her satisfaction with the way his/her body looks and performs.

Hypothesis stated “ H_a Cognitive behaviour therapy is effective in enhancing the self-esteem dimensions among grooms and brides” is accepted. Cognitive behaviour therapy helps grooms and brides to enhance various dimensions of self- esteem after intervention.

The findings of the present study is corroborated with the research findings of Newman, (2020); Merikan Aren & Aruna Rauna Duamit (2020); Atayi, et al., (2018); Marami Goswami & Piyali Roy, (2018); Galanakis, et al (2016); Bindu & Vajeela, (2015); Lal Kumar, (2014); Tiwari & Ojha, (2014); Jose, et al., (2014); Jean Clore & Scott Gaynor, (2006); Masuda, et al., (2004); Vispoel, et al., (2001) Loomans & Loomans, (1994); Lalkini, (1992); Schwarty & Garamoni, (1989); Kalkin et al., (1981). They have brought out the fact that Cognitive behaviour therapy is more effective in enhancing self-esteem among grooms and brides.

Section II: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable self-esteem among brides and grooms

Table 4.19

Self-esteem Inventory Mean Overall dimensions raw scores of control grooms Vs. experimental brides over pretest and posttest phases of training

LEVELS OF SELF-ESTEEM		
DIMENSIONS	CONTROL GROOMS	EXPERIMENTAL BRIDES
Competency	29	64
Global Self-esteem	29	64
Moral and Self-control	21	48
Social esteem	24	52
Family	20	44
Body and Physical appearance	21	36
Overall dimensions raw score	144/308	308/308

Table 4.20 ANOVA: Self-esteem Inventory dimensions mean overall raw scores of control grooms (n=30) Vs. experimental brides over three phases of training

Parameters	Sum of Square	df	Mean Square	F-Value	P - Value
Pretest	34.13 4033.07	1 29	34.13 0.04	0.9987	NS
Posttest	5576.03 630.33	1 29	5576.03 5.35	1043.85	p<.0001
Follow-up	5508.01 580.92	1 29	5508.11 4.92	1118.84	p<.0001

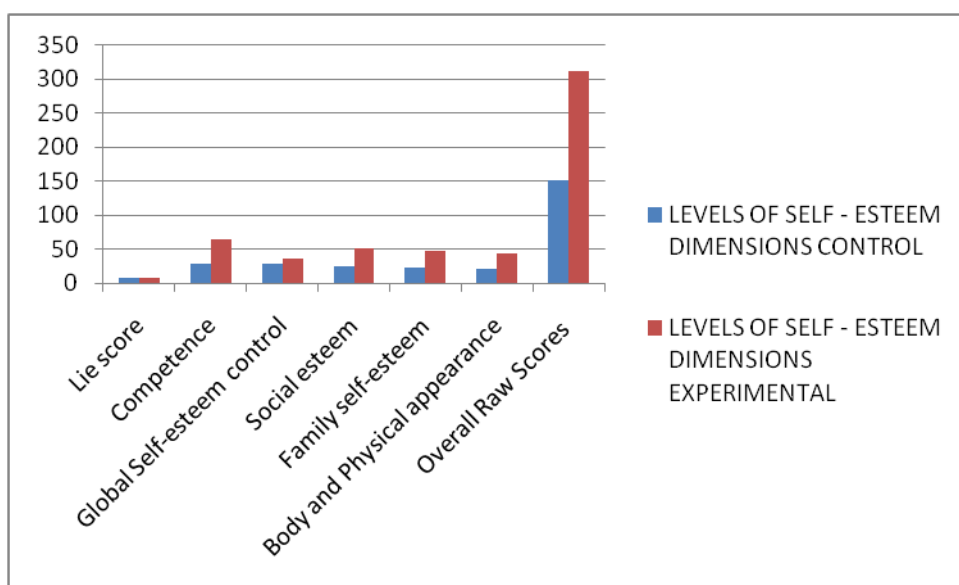


Figure 4.8: *Self-esteem Inventory dimensions mean overall raw scores of control grooms Vs. experimental brides over three phases of training*

Tables 4.20-4.21 and Figure 4.8 Bar Diagram show Self-esteem Inventory dimensions mean overall raw scores of control grooms and experimental brides over pretest Vs., posttest phases of training. It is seen from the table that control grooms and experimental brides are low on Self-esteem Inventory dimensions overall dimensions mean raw scores, during the pretest. Calculated F - Value (0.9987) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides are low on overall self-esteem dimensions.

Compared to the pretest, posttest and follow-up analysis reveal that experimental girls are higher ($p > .0001$) than the control grooms on Self-esteem Inventory dimensions mean overall dimensions raw scores over three phases of training. Calculated posttest F- value (1043.85) and Follow-up F - value (1118.84) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance. Experimental brides are higher ($p > .0001$) than the control grooms on Self-esteem Inventory dimensions mean overall raw scores over three phases of training. Experimental girls are faster ($p < .0001$) than the control in enhancing self-esteem.

With training the experimental girls are higher ($p<.0001$) than the control group on Overall Self-esteem Inventory dimensions Raw scores over three phases of testing. This may be due to regular practice of cognitive behaviour therapy. Cognitive behaviour therapy is more effective in enhancing self-esteem among college students.

Hypothesis stated “Ha Grooms are faster than the brides in enhancing self-esteem dimensions through cognitive behaviour therapy” is rejected. In fact, brides are faster than the grooms in enhancing various dimensions of self-esteem after intervention. Cognitive behaviour therapy is more effective in enhancing self-esteem dimensions among grooms and brides.

Section V: Presents the results of the statistical analyses with regard to the Criterion variable emotional maturity among brides and grooms

The findings of the present study are discussed in Tables 4.22-4.23 and Figure 4.8

Table 4.22

Emotional Maturity Scale mean raw scores and Sd of control (n=60) Vs. experimental group (n=60) over three phases of training

Test Phase	Category	Mean	Sd	“t”- Value	P - Value
Emotional Maturity Scale Mean Raw scores Pretest	Control group	83	2		NS
	Experimental group	83	3		
Posttest	Control group	83	3*		$P>.0001$
	Experimental group	220	2		
Follow-up	Control group	83	3*		$P>.0001$
	Experimental group	245	2		

Table 4.23

ANNOVA : Emotional Maturity Scale mean raw scores of control (n=60) Vs. experimental group (n=60) over three phases of training

Parameters	Sum of Square	df	Mean Square	F- Value	P - Value
Emotional Maturity Scale					
Raw scores					
Pretest	22.53	1	22.53	0.39	NS
	199.33	119	1.64		
Posttest	6149.52	1	6149.52	6829.51	P>.0001
	70.84	29	0.63		
Follow-up	6424.03	1	6424.03	8290.08	P>.0001
	93.67	119	0.62		

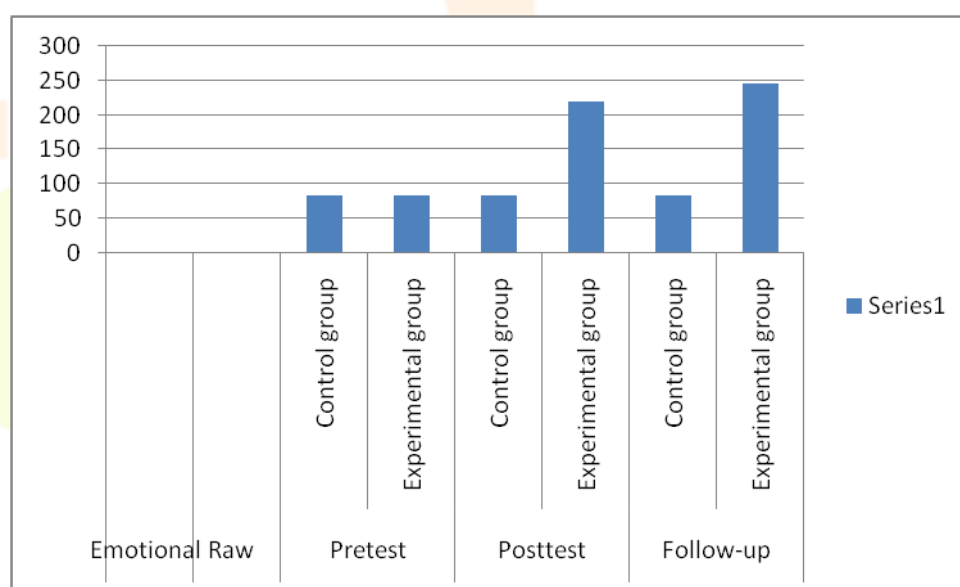


Figure 4.8 : Emotional Maturity Scale mean raw scores of control Vs. experimental group over three phases of training

Tables 4.22 – 4.23 and Figure 4.8 Bar Diagram shows the Emotional Maturity Scale mean raw scores of control Vs. experimental group over three phases of training. It is seen from the table that the control and experimental groups are low on Emotional Maturity Scale mean raw scores, during pretest. Calculated F - value (0.39) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides are low on overall self-esteem dimensions. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow up analysis reveal that the experimental groups are high on Emotional Maturity Scale mean raw scores, compared to the pretest. Calculated posttest F- value (6829.51) and follow up F - value (8290.08) are higher ($p > .0001$) than the tabular value, hence, there is an extremely significant difference existing in the performance. The experimental group is higher ($p > .0001$) than the control group on Emotional Maturity Scale mean raw scores. The experimental group is faster ($p > .0001$) than the control group in enhancing emotional maturity after intervention. Experimental group is high on emotional maturity areas such as Emotional Instability, Emotional regression, Social maladjustment, personality Disintegrative and Lack of Independence. Brides are stable emotionally, high on stress tolerance, positive thinking in their environment, maintain desired interpersonal relationship with environment, personality integration and self-reliant and independent in using his/her intellectual and creative potential.

Hypothesis stated (H_a) “Cognitive behaviour therapy enhances emotional maturity among experimental group” is accepted. In fact. the experimental group is high in emotional maturity various dimensions after intervention. Cognitive behaviour therapy is enhancing emotional maturity, psychological wellbeing and mental health among brides and grooms,

The findings of the present study are corroborated with the research work of Shane Ann Jose & Kanchana Charmiah (2022), Anuradha Kumar & Manik Rewat (2022), Okan Bureak & Nuri Bog Gunga (2020), Johnson (2020), Dr KS Ramachandran (2019), Dr Poonam (2019), Ghosh (2019), Biswas (2018), Aleema Maria Samy (2018), Anwarali & Zamirulla Khan (2016) and Kalai Selvan (2016).

Section VI: Presents the results of the statistical analyses with regard to Gender differences on the criterion variable emotional maturity among brides and grooms

Table 4.24

Mean Emotional Maturity Scale raw scores of control males (n=30) Vs. experimental females (n=30) over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Emotional Maturity Scale Raw Scores Pretest	Control males	83	3	NS
	Experimental female	83	3	
Posttest	Control males	83	3*	P>.0001
	Experimental female	220	2	
Follow-up	Control males	83	3*	P>.0001
	Experimental female	245	2	

Table 4.25

ANNOVA :Emotional Maturity Scale mean raw scores of control males (n=30) Vs. experimental females (n=30) over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Emotional Maturity Scale Mean Raw Scores Pretest	13.33	1 29	13.33	1.01	NS
Posttest	8545.08 231.74	1 29	8545.08 0.35	1843.45	p>.0001
Follow-up	9568.05 153.58	1 29	9568.05 0.84	2329.79	p>.0001

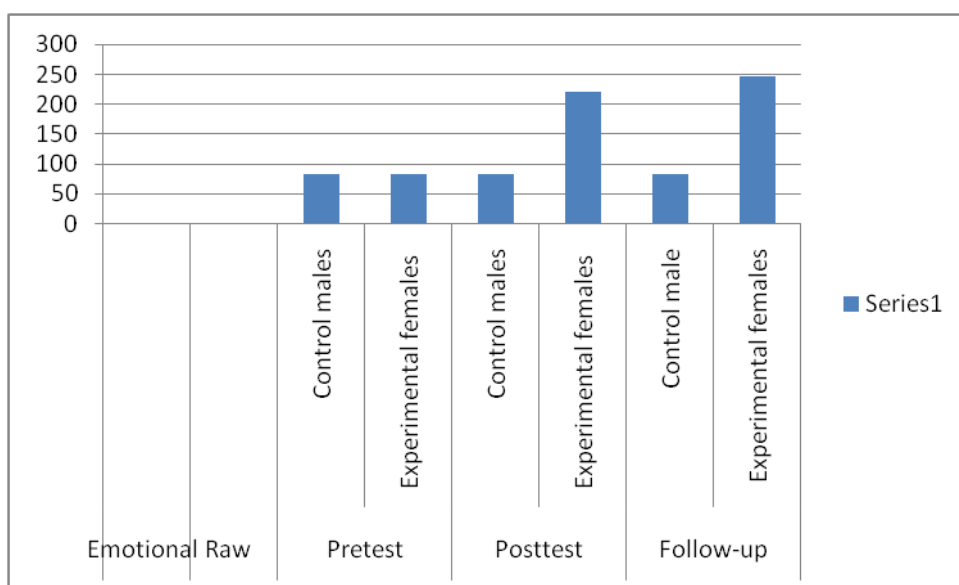


Figure 4.9: Bar Diagram shows Mean Emotional Maturity Scale raw scores of control grooms Vs. experimental brides over three phases of training

Tables 4.24-4.25 and Figure 4.9 Bar Diagram show Mean Emotional Maturity Scale raw scores of control grooms Vs. experimental brides over pretest and posttest phase of training. It is seen from the table that control grooms and experimental brides are low on emotional maturity raw scores during pretest. Calculated F - value (1.01) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of grooms and brides are low on overall self-esteem dimensions. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that experimental females are high in Mean Emotional Maturity Scale raw scores, compared to the control males. Calculated posttest F - value (1843.45) and follow up F - value (3329.79) are higher than the tabular value, hence, there is an extremely significant difference ($p > .0001$) existing in the performance.

Experimental group brides are faster ($p > .0001$) than the control grooms in enhancing emotional maturity symptoms after intervention. With intervention, the experimental group brides are higher ($p < .0001$) than the control group Emotional Maturity Scale mean raw scores. The experimental brides are emotionally well balanced and focus very well on the success of the academic. They are high on 5 areas of emotional maturity dimensions

such as Emotional instability, Emotional regression, Social maladjustment, Personality disintegration and Lack of independence. They are stable emotionally, high on stress tolerance, positive thinking in their environment, maintain desired interpersonal relationship with environment, personality integration and self-reliant and independent in using her intellectual and creative potential. Brides are emotionally well-balanced and focus very well on the success of the examinations.

Hypothesis stated H_a : “Grooms are better than brides in enhancing emotional maturity through cognitive behaviour therapy” is rejected. In fact, brides are faster than grooms in enhancing emotional maturity through cognitive behaviour therapy. Cognitive behaviour therapy is enhancing emotional maturity, psychological wellbeing and mental health after the intervention.

Section II. Presents the results of the statistical analyses with regard to the Criterion variables depression among brides and grooms

Table 4.26

Mean DASS Depression raw scores and Sd of control (n=60) Vs. experimental group (n=60) couples over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression Pretest	Control group	11.66	1.02	NS
	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	0.0001
	Experimental group	1.05	0.27	
Follow-up	Control group	11.66	1.02*	0.0001
	Experimental group	0.69	0.91	

Table 4.27

ANOVA: Mean DASS Depression raw scores of control (n=60) Vs. experimental group (n=60) couples over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Pretest	22.53 199.33	1 119	22.53 1.64	0.39	NS
Posttest	608.02 54.83	1 119	608.02 0.95	643.13	<.0001
Follow-up	1749.6 86.13	1 119	1749.6 1.54	1534.42	<.0001

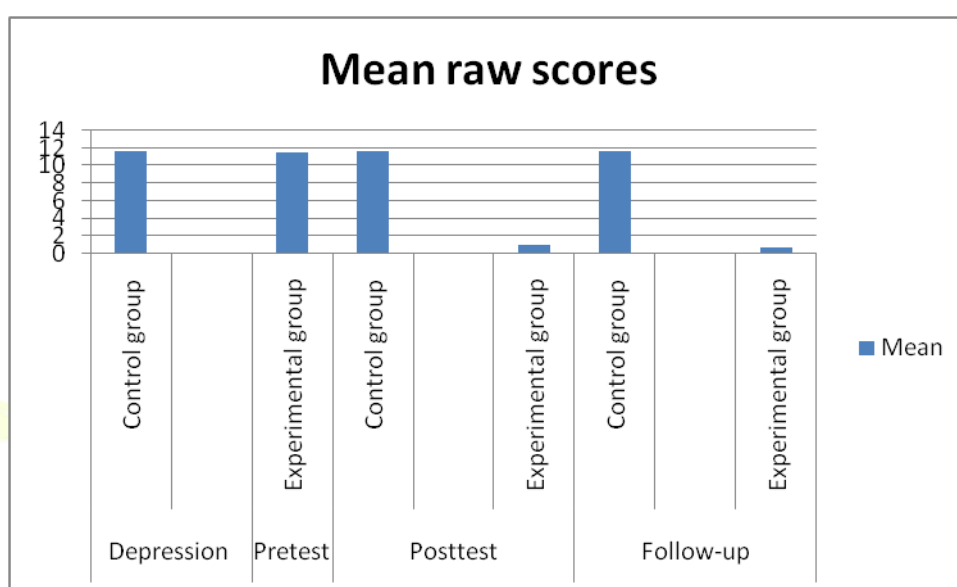


Figure 4.10 : Mean DASS Depression raw scores of control Vs. experimental group couples over three phases of training

Table 4.25 - 4.26 and Figure 4.10 show Mean DASS Depression raw scores of control Vs. experimental group couples over three phases of training. Calculated F - Value (0.39) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of couples are suffering from mild depression symptoms

Posttest and follow-up analysis reveal that experimental group is low on DASS Depression raw scores, compared to the pretest. Calculated posttest F - Value (643.13) and Follow - up F - Value (1534.42) are higher than the tabular value, hence, there is an extremely ($p<.0001$) significant difference ($p<.0001$) existing in the

performance. Experimental group couples are lower ($p<.0001$) than the control group on DASS Depression raw scores. Experimental group is faster in overcoming the suicidal ideation symptoms.

With intervention, the experimental group is low DASS Depression raw scores than the control group. This may be due to regular exposure to counselling. They are capable of overcoming ill-effects of depression symptoms and remain emotionally well balanced. Experimental group couples are lower ($p<0.001$) than the control group on depression symptoms after intervention.

Posttest and follow-up analysis reveal that experimental group is free from depression symptoms, compared to the pretest. With intervention, the experimental group couples are free from depression symptoms than the control group. This may be due to counselling by the couples. Couples are having complete control over their feelings and emotions, more happy mentally and psychologically wellbeing after the intervention.

Many couples feel significant changes in their mental status after intervention. They learn to overcome disturbed mind easily. They are having the maturity and self-confidence to lead their life successfully. They are emotionally well balanced and remain psychologically well being. They have opportunity to use this intervention throughout their life.

Hypothesis stated “ H_a : Cognitive behaviour therapy is effective in the management of depression among brides and grooms” is accepted.

Gender Difference

Table 4.27

Mean DASS Depression raw scores and Sd of control males ($n=30$) Vs. experimental group females ($n=30$) couples over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression Pretest	Control group	11.66	1.02	NS
	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	0.0001

	Experimental group	0.87	1.11	
Follow-up	Control group	11.66	1.02*	0.0001
	Experimental group	0.69	0.95	

Table 4.28

ANOVA : Mean DASS Depression raw scores of control males (n=30) Vs. experimental group females (n=30) couples over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Pretest	1.2	1 29	1.2	0.7338	NS
Posttest	3320.98 136.27	1 29	3320.98 1.15	2831.19	<.0001
Follow-up	3547.53 100.93	1 29	3547.53 9.46	3750.28	<.0001

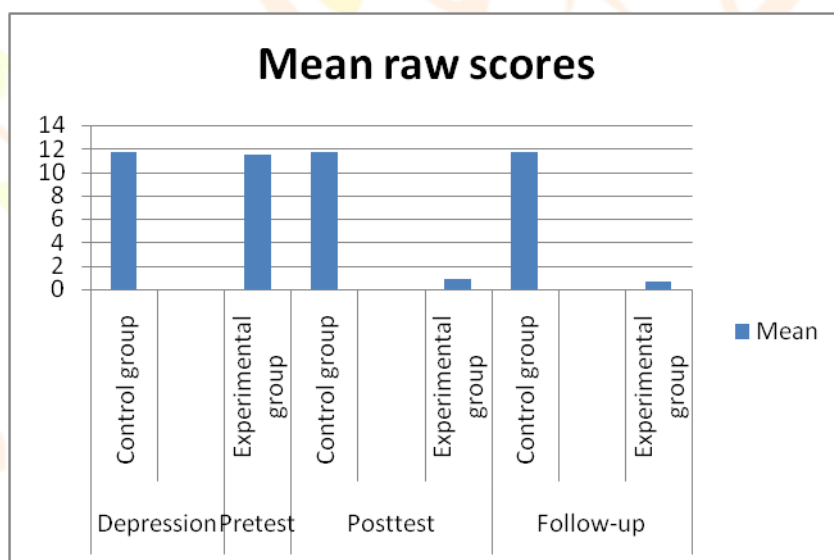


Figure 4.11 : Mean DASS Depression raw scores of control males Vs. experimental group females over three phases of training

Table 4.26 - 4.27 and Figure 4.10 show Mean DASS Depression raw scores of control males Vs. experimental group females over three phases of training. It is seen from the table that control and experimental group are suffering from symptoms of depression during pretest.. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that experimental group females are free from the ill-effects of depression symptoms, compared to the pretest. With intervention, the experimental group is free from depression ($p<.0001$) than the control group. This may be due to regular exposure to Counselling. Couples are emotionally well balanced and focus very well on the success of their family and occupational life. Counselling promotes mental health among couples.

Hypothesis stated “ H_a : Females are faster than the males in the management of depression through cognitive behaviour therapy” is rejected. In fact, females are faster in overcoming the ill-effects of depression symptoms through counselling.

ANXIETY INTERPRETATION

Table 4.28

Mean DASS Anxiety raw score and Sd of Control (n=60) Vs. Experimental group (n=60) over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Anxiety Pretest	Control group	8.58	1.02	NS
	Experimental group	8.51	0.50	
Posttest	Control group	8.58	1.02*	0.0001
	Experimental group	1.80	0.53	
Follow-up	Control group	8.58	1.02*	0.0001
	Experimental group	0.67	1.91	

Table 4.29

ANOVA: Mean DASS Anxiety raw scores of control (n=60) Vs. experimental group (n=60) couples over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Pretest	22.53	1	22.53	0.39	NS
	199.33	119	1.64		
Posttest	608.02	1	608.02	1243.13	<.0001
	54.83	119	0.95		
Follow-up	1749.6	1	1749.6	1534.42	<.0001
	86.13	119	1.54		

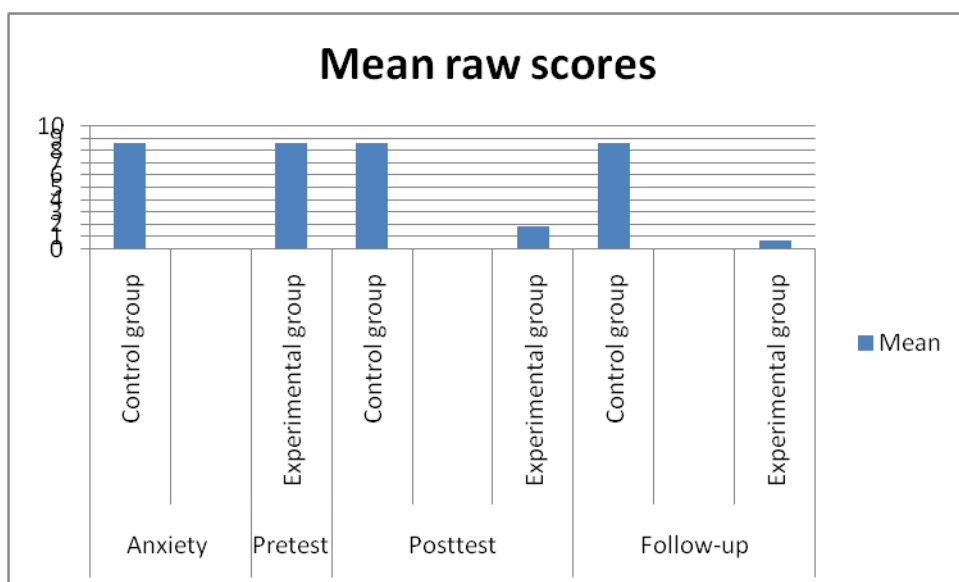


Figure 4.11 : Mean DASS Anxiety raw score of Control Vs. Experimental group over three phases of training

4.28 - 4.29 and Figure 4.11 show Mean anxiety raw score and Sd of control Vs. experimental group over three phases of training. It is seen from the table that control and experimental group are showing the symptoms of anxiety. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that experimental group is free from ill effects of anxiety, compared to the pretest. With intervention, the experimental group is free from symptoms of anxiety than the control group. This may be due to regular exposure to Counselling. Couples are more emotionally stable and focus very well on the success of the family and occupational life.

Hypothesis stated “ H_a : Nutritional Counselling and psychosexual education is effective in the management of anxiety among brides and grooms” is accepted.

Gender Difference*Table 4.30*

Mean DASS Anxiety raw scores and Sd of control males (n=30) Vs. experimental group females (n=30) couples over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression Pretest	Control group	11.66	1.02	NS
	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	0.0001
	Experimental group	0.87	1.11	
Follow-up	Control group	11.66	1.02*	0.0001
	Experimental group	0.69	0.95	

Table 4.31

ANOVA: Mean DASS Anxiety raw scores of control males (n=60) Vs. experimental group (n=60) females couples over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Pretest	0.1596 29.16	1 29	0.1396 1.22	0.5395	NS
Posttest	1355.93 151.97	1 29	1355.93 1.31	1035.02	<.0001
Follow-up	1459.53 127.05	1 29	1459.53 1.40	1332.58	<.0001

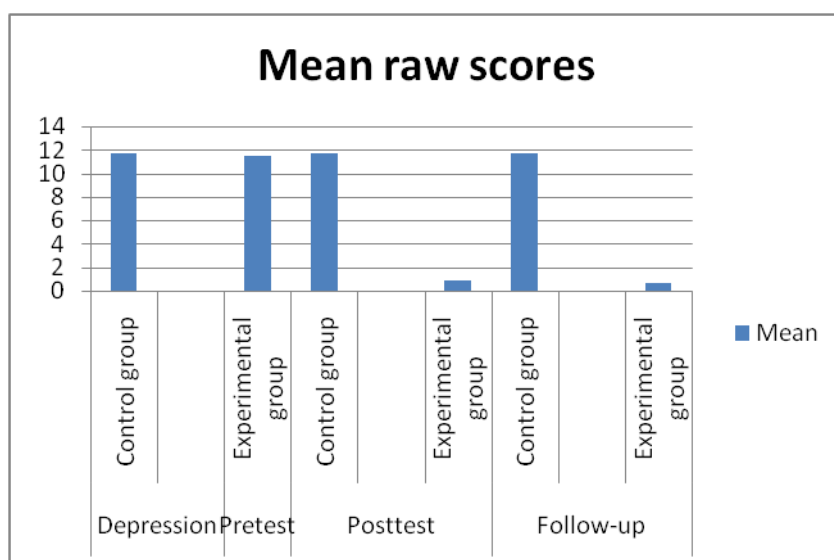


Figure 4.12 : Mean DASS Anxiety raw scores of control males Vs. experimental group females over three phases of training

Table 4.30 - 4.31 and Figure 4.12 show Mean DASS Anxiety raw scores of control males Vs. experimental group females over three phases of training. It is seen from the table that control and experimental group are suffering from symptoms of depression during pretest.. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that experimental group females are free from the ill-effects of anxiety symptoms, compared to the pretest. With intervention, the experimental group is free from anxiety ($p < .0001$) than the control group. This may be due to regular exposure to Counselling. Couples are emotionally well balanced and focus very well on the success of their family and occupational life. Counselling promotes mental health among couples.

Hypothesis stated “ H_a : Males are better than the females in overcoming the symptoms of anxiety through counselling” is rejected. Infact, females are faster in overcoming the ill-effects of anxiety symptoms through counselling.

STRESS INTERPRETATION*Table 4.32*

Mean DASS Stress raw score and Sd of Control (n=60) Vs. Experimental group (n=60) over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Stress Pretest	Control group	8.58	1.02	NS
	Experimental group	8.51	0.50	
Posttest	Control group	8.58	1.02*	0.0001
	Experimental group	1.80	0.53	
Follow-up	Control group	8.58	1.02*	0.0001
	Experimental group	0.67	10.91	

Table 4.33

ANOVA: Mean DASS Stress raw scores of control (n=60) Vs. experimental group (n=60) couples over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Pretest	0.8475 141.22	1 119	0.8475 1.22	0.6961	NS
Posttest	3215.73 147.59	1 119	3215.73 1.21	2527.38	<.0001
Follow-up	7235.39 108.03	1 119	7235.39 0.9313	7768.91	<.0001

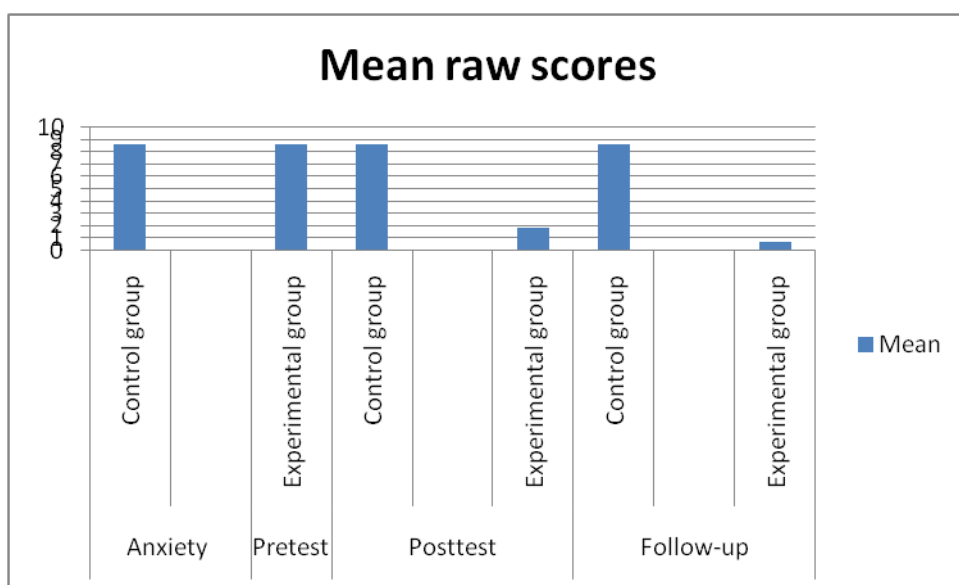


Figure 4.13 : Mean DASS Stress raw score of Control Vs. Experimental group over three phases of training

Table 4.32 -4.33 and Figure 4.13 show Mean DASS Stress raw score and Sd of control Vs. experimental group over three phases of training. It is seen from the table that control and experimental group are showing the symptoms of stress. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that experimental group is free from ill effects of stress, compared to the pretest. With intervention, the experimental group is free from symptoms of stress than the control group. This may be due to regular exposure to Counselling. Couples are more emotionally stable and focus very well on the success of the family and occupational life.

Hypothesis stated “ H_a : Nutritional Counselling and psychosexual education is effective in management of stress among couples” is accepted.

Gender Difference

Table 4.34

Mean DASS Stress raw scores and Sd of control males (n=30) Vs. experimental group females (n=30) couples over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression Pretest	Control group	11.66	1.02	NS
	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	0.0001
	Experimental group	0.87	1.11	
Follow-up	Control group	11.66	1.02*	0.0001
	Experimental group	0.69	0.95	

Table 4.35

ANOVA: Mean DASS Stress raw scores of control males (n=60) Vs. experimental group (n=60) females couples over three phases of training

Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Pretest	392.42	1 29	22.53	1.324	NS
Posttest	3215.73 147.59	1 29	3215.73 1.21	2527.20	<.0001
Follow-up	3320.98 126.37	1 29	3320.98 1.17	2731.19	<.0001

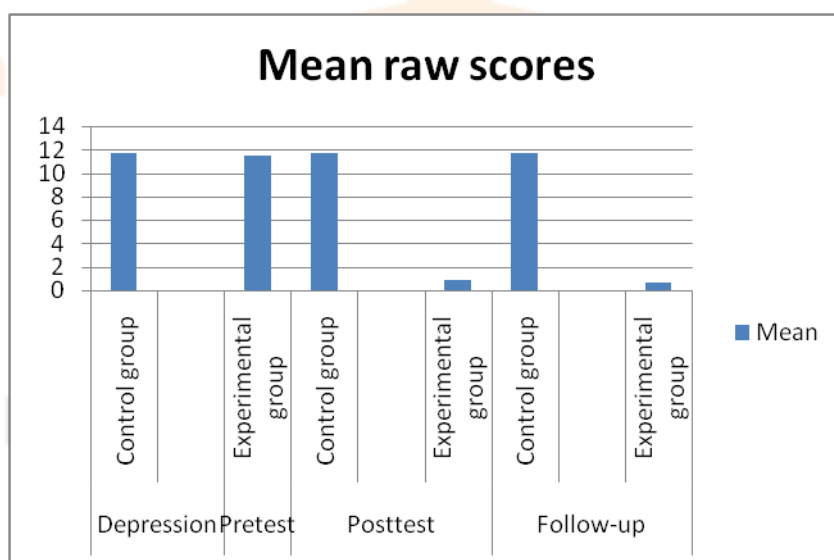


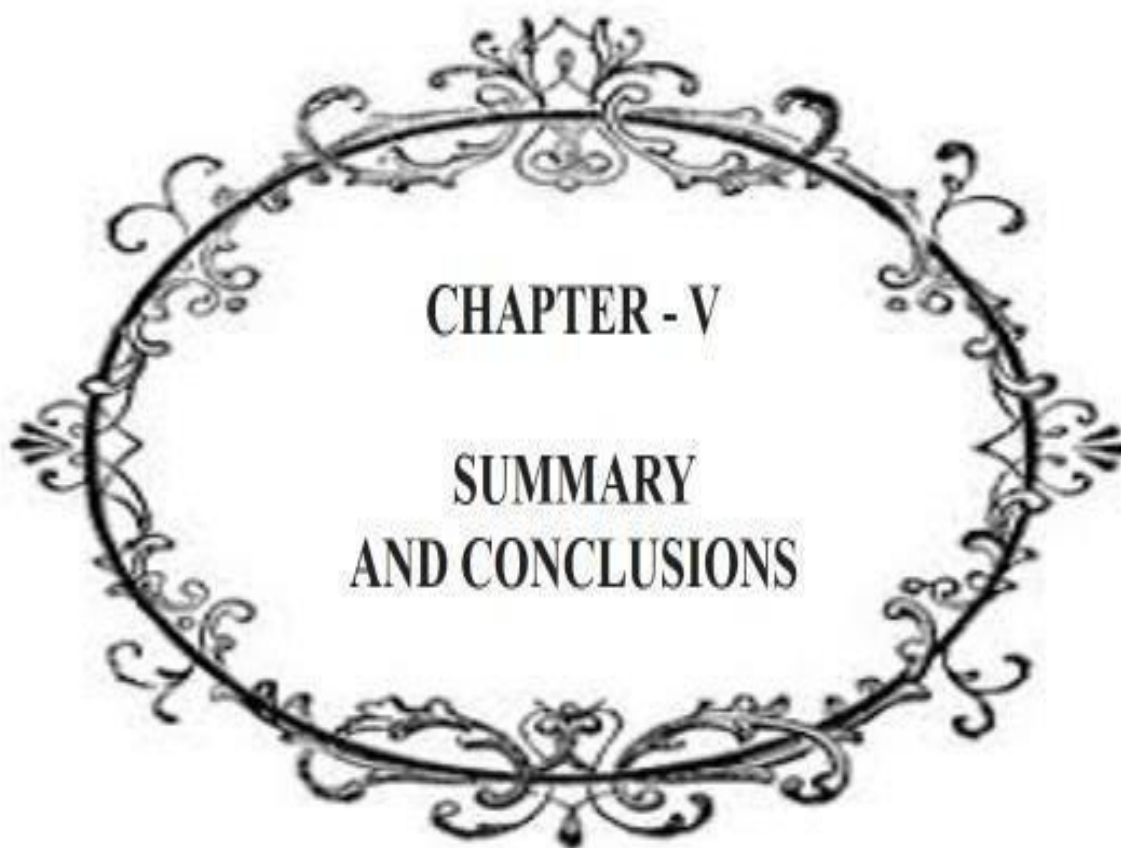
Figure 4.14 : Mean DASS Stress raw scores of control males Vs. experimental group females over three phases of training

Table 4.34 - 4.35 and Figure 4.14 show Mean DASS Stress raw scores of control males Vs. experimental group females over three phases of training. It is seen from the table that control and experimental group are suffering from symptoms of stress during pretest. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that experimental group females are free from the ill-effects of stress symptoms, compared to the pretest. With intervention, the experimental group is free from stress ($p < .0001$) than the control group. This may be due to regular exposure to Counselling. Couples are emotionally well balanced and focus very well on the success of their family and occupational life. Counselling promotes mental health and psychological wellbeing among couples.

Hypothesis stated “ H_a : Females are better than the males in overcoming the symptoms of stress through counselling” is rejected. In fact, females are faster in overcoming the ill-effects of stress symptoms through counselling.





CHAPTER V

SUMMARY AND CONCLUSIONS

This study is intended to explore the extent to which cognitive behaviour Therapy is effective in enhancing self-esteem, self-concept, emotional maturity, promoting psychological wellbeing and mental health. Brides and groom face more emotional, social and behavioural problems. Low self-esteem, self-concept, and emotional maturity impairs and high depression, anxiety and stress impair family life and psychological wellbeing. Practicing cognitive behaviour therapy regularly leads to success in the examinations. Experimental group brides are practicing cognitive behaviour therapy - Benson Relation therapy, Systematic Desensitisation, Mental imagery, morning and evening, on an empty stomach, for one month.

Students in colleges are facing lots of problems. There has been a great concern regarding the mental wellbeing of the students. Students in developed countries are likely to face more difficulties because of poor socioeconomic backgrounds. Although Student Counselling has been widely developed and accepted in developed countries, Students counsellor skills and practices are still underdeveloped in many countries. Many diseases are due to mental depression, anger, grief, uninhibited sexual indulgence, anxiety, discontent, distrust and other psychosomatic disturbances. Many people, who are mentally weak, suffer from diseases of their imagination,

which in many cases prove fatal. By developing such qualities as good thought, enthusiasm, courage, hope and optimism, even the weak body and mind can turn into strong and healthy ones. Low self-esteem and emotional maturity impair academic, family and social life. Cognitive behaviour therapy helps students in enhancing self-esteem and emotional maturity. The present study is undertaken in this direction. The present study is an attempt in this direction.

The aim of the present study is to find out the effectiveness of cognitive behaviour therapy in enhancing self-esteem and emotional maturity among college students.

OBJECTIVES

Poor Self-esteem and emotional maturity impair academic success. Once it is identified at an early stage, students can be helped to enhance self-esteem and emotional maturity after intervention. The main objective of the study is to

- Find out the effectiveness of cognitive behaviour therapy in enhancing self-esteem and emotional maturity among college students
 - To find out the gender differences, if any, in enhancing the self-esteem and emotional maturity after intervention
- Hence, the present study is an attempt in this direction.

HYPOTHESIS

The following hypotheses are drawn from the review of worldwide literature:

- ❖ Cognitive behaviour therapy enhances Self-esteem among college students
- ❖ Boys are faster than the girls in enhancing Self-esteem through cognitive behaviour therapy
- ❖ Cognitive behaviour therapy enhances emotional maturity among college students
- ❖ Boys are faster than the girls in enhancing emotional maturity through cognitive behaviour therapy

TOOL FOR THE TESTING

For matching the group in experimental design, the following psychological tests are used to assess the level of self-esteem and emotional maturity among college students:

- Self-esteem Inventory
- Self – concept Questionnaire
- Emotional Maturity Scale
- DASS -21

FINDINGS OF THE STUDY

The experimental group is free from depression, anxiety and stress ($p > .0001$) than the control group in the mean posttest means raw scores after the intervention. The results clearly indicate that there is an extremely significant difference ($p > .0001$) existing in the performance. Experimental group is faster than the control group in the management of depression, anxiety and stress through cognitive behaviour therapy. Brides are faster ($p > .0001$) than the grooms in the management of self-esteem, self-concept, emotional maturity and in the management of depression, anxiety and stress after intervention. Follow up assessment is carried out six months after the posttest and regular practice of cognitive behaviour therapy. It is evident from the study that cognitive behaviour therapy is leading to success among brides and grooms. Practicing cognitive behaviour therapy, can sustain the psychological wellbeing and mental health even after six months of therapeutic intervention. Practicing cognitive behaviour therapy regularly leading to family and occupational success and thereby promoting psychological wellbeing and mental health among brides and grooms. Of all the therapeutic techniques, cognitive behaviour therapy is less time-consuming, more economical and one of the best techniques in the management of depression, anxiety and stress.

CONCLUSIONS

From the findings it is concluded that:

- Experimental group is high in emotional maturity areas such as Emotional Instability, Emotional regression, Social maladjustment, personality Disintegrative and Lack of Independence
- Changes are much higher in the girls than the boys
- Also, the changes in the psychological wellbeing and mental health have been carried out for longer time duration, indicating that real learning has taken place
- Cognitive behaviour therapy is the best method of therapeutic intervention for the sustenance of psychological wellbeing and mental health among college students
- College students achieve psychological wellbeing and mental health within the short span of time
- Cognitive behaviour therapy enables psychological wellbeing, mental health, positive outlook and positive emotional state as assessed through psychological tests
- This study strongly suggests that cognitive behaviour therapy is leading to success in college students, enhancing psychological wellbeing and mental health among brides and grooms
- Of all the techniques, practicing Cognitive behaviour therapy leads to success in the academic and enhances emotional maturity symptoms. It is less time- consuming and more economical way of maintaining psychological wellbeing and mental health among brides and grooms



REFERENCES



Research Through Innovation

APPENDIX
CONSENT FORM SAMPLE
DEMOGRAPHIC DETAILS AND CONSENT FORM

1. NAME:

2. AGE:

3. SEX:

4. PHONE NUMBER:

5. EDUCATIONAL QUALIFICATION

6. EMPLOYED AS:

7. TEMPORARY ADDRESS:

8. PERMANENT ADDRESS:

9. LENGTH OF STAY IN BANGALORE:

10. HAVE YOU HAD ANY LIFE CHANGING EXPERIENCES OVER THE PAST ONE YEAR?

(POSITIVE/NEGATIVE)

11. ARE YOU ON ANY MEDICATION

ANY SPECIFY THE MEDICATION AND DURATION:

12. ANY HABITS – NICOTINE / ALCOHOL

I, _____ AGREE TO PARTICIPATE IN THE RESEARCH STUDY BY

PRARTHNA DEVI, D., AND I AM AWARE OF THE PURPOSE OF THIS STUDY.

THE INFORMATION PROVIDED BY ME FOR THE PURPOSE OF THIS STUDY IS TRUE TO THE BEST OF MY KNOWLEDGE

SIGN AND DATE

SELF - CONCEPT QUESTIONNAIRE

INSTRUCTIONS: This questionnaire has some probable answers given against each question. It is a 5 Point Rating Scale such as 5, 4, 3, 2 and 1. Indicate your responses by tick marking inside the appropriate box of the Rating Scale. There is no Right or Wrong answers. There are 48 questions and it usually takes 30 minutes to complete the test. Do not leave any statements. Answer all the statements.

SI No	QUESTIONS	5	4	3	2	1
1	Do your friends come to you for your advice?					
2	What do you think about your appearance?					
3	How do you find yourself in doing physical activity?					
4	How do you find your temperament?					
5	How do you like school studies?					
6	Do you believe in religious customs and traditions?					
7	Do you participate In criticizing others?					
8	Do your express your ideas frankly in the presence of others?					
9	How do you like your complexion?					
10	Do you think yourself one of the cheerful persons?					
11	Do you behave normally?					
12	Do you think yourself an experienced person?					
13	Do you think about teachers?					
14	Do you think yourself a cool-tempered person?					
15	Are you regular in doing your home work assignments?					
16	Do you insult others?					
17	Do you have difficulty in understanding something when teacher explains in class?					
18	Do you think if you get an opportunityyou can discover something new?					
19	Do you feel irritated if somebody finds faults					
20	How do you find your personality?					
21	How do you like the company of others ?					
22	How much are you satisfied with your weight?					
23	Do you feel irritated while you face petty difficulties?					
24	Are you coward by nature?					
25	How much are you satisfied with present position of your studies in the class?					
26	How do you like school examinations?					
27	What is your voice?					
28	Are you curious to know the end while reading a novel or seeing a movie?					
29	How of you find your health?					
30	How is your attendance in class?					
31	How much are you satisfied with your height?					
32	Do you try to get first Position in the tests given in the class?					
33	Do you take care of the merits and demerits of the work before doing it?					
34	Where do you place yourself while speaking truth?					
35	Where do you place yourself in obeying public rules,for e.g., rules pertaining to public places like park and railway station					
36	Are you more intelligent than your colleagues?					

SI No	QUESTIONS	5	4	3	2	1
37	Do you want to organise it when your classmates are going to picnic ?					
38	Do you solve your difficulties and problems of your studies ?					
39	How much do you attend to artistic aspect of photographer while seeing/making of it ?					
40	What will you do if you are doing some important work friends asked you to accompany them for a walk ?					
41	While taking the examination you are not able to answer some questions book of the same subject lying near you ,will you take help of that book ?					
42	If you get an opportunity to drink water in the house of so-called low caste person ,what would you do ?					
43	Do you hesitate in mixing with the people of opposite sex ?					
44	You are standing in the bus queue for a long time when the bus comes and the conductor takes some passengers and stops at your turn because there is no space in the bus, what would you do in these circumstances?					
45	What would you do if you came to know of immoral character of your friend ?					
46	You have to do four tasks (a)you have to call your doctor to show you have sick brother (b)you have to do the next day (c) the friendship is going away, (d) go to see him. What will you do in the first place ?					
47	Your friend gives you thousand rupees to keep ,when you keep you count there are eleven hundred, What will you do ?					
48	Do you like to do the work keeping in the mind the desire of others ?					

SELF - CONCEPT QUESTIONNAIRE

ANSWER SHEET

INSTRUCTIONS : Below are given 48 statements about yourself. This questionnaire has some probable answers given against each questionnaire. It is a 5-point rating scale such as 5, 4, 3, 2, 1. Read each question carefully and put a tick mark on any one of the 5 alternative responses. There is no right or wrong answers. Do not think too long while answering. Answer all the statements. It takes 30 minutes to complete the test.



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SL NO.

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Total Score

SELF - CONCEPT QUESTIONNAIRE**SCORING**

Self - concept Questionnaire provides 6 dimensions of self-concept such as Physical, Social, Tempermental, Educational, Moral and intellectual. There are 8 items in each dimension.

SL NO.	SELF-CONCEPT DIEMNSIONS	ITEM NUMBERS
1	Physical	2, 3, 9, 20, 22, 27, 29, 31
2	Social	1, 8, 21, 37, 40, 43, 46, 48
3	Tempperamental	4, 10, 14, 16, 19, 23, 26, 30, 32
4	Educational	5, 13, 15, 17, 25, 26, 30, 32
5	Moral	6, 34, 35, 41, 42, 44, 45, 47
6	Intellectual	7, 11, 12, 18, 33, 36, 38, 39

Score ranges from 8 to 40 for each dimension. The total score of all the dimensions constitutes the self - concept score of an individual. The score ranges from 48 to 240 for the total test.

EMOTIONAL MATURITY SCALE

INSTRUCTIONS Self concept questionnaire has 5 options given against each question. It is a five point rating scale such as 5,4,3,2 and Indicate your responses by tick marking inside the appropriate box of the Rating scale. There is no right or wrong answers. It usually takes 30 minutes to complete the test. Do not leave any statements . Answer all the statements.

<i>Sl No</i>	<i>ITEMS</i>	<i>VERY MUCH</i>	<i>MUCH</i>	<i>UNDECIDED</i>	<i>PFOBABLY</i>	<i>NEVER</i>
EMOTIONAL INSTABILITY						
1	Are you involved in any sort of mental tension?					
2	Do you get frightened about the future?					
3	Do you stop in the middle of any work before reaching the post?					
4	Do you take the help of other to complete your personal work?					
5	Is there any difference between your desires and your objectives?					
6	Do you feel within yourself that you are short-tempered?					
7	Do you feel that you are very stubborn?					
8	Do you feel jealous of other people?					
9	Do you get wild due to anger?					
10	Do you get lost in imagination and daydreaming?					
EMOTIONAL REGRESSION						
11	Do people consider as independent?					
12	Do people disagree with your views?					
13	Would you like to be a follower?					
14	Do you disagree with the opinion of your group?					
15	Do people think of you as an irresponsible person?					
16	Do you feel yourself as exhausted?					
17	Is your behaviour more aggressive than your friends' and others' behaviour?					
18	Do you get lost in the world of imagination?					
19	Do you feel that you are self-centered?					
20	Do you feel that you are dissatisfied with yourself?					
SOCIAL MALADJUSTMENT						
21	Do you have a strained relationship with your classmates or colleagues?					
22	Do you hate others?					

23	Do you praise yourself?					
24	Do you avoid joining in social gatherings?					
25	Do you spend much of your time for your yourself ?					
26	Do you lie?					
27	Do you bluff?					
28	Do you like very much to be alone a lot?					
29	Are you proud by nature?					

PERSONALITY DISINTEGRATION

30	Though you know some work, do you pose as if you know it?					
31	Even you do not know some work, do you pretend as if you do not know it?					
32	Even if you do not know about some work, do you pose as if you know it?					
33	Knowing you are fault, instead of accepting it, do you try to establish that you are right?					
34	Do you suffer from any kind of fear?					
35	Do you lose your mental balance (poise)?					
36	Are you in the habit of stealing anything?					
37	Do you indulge freely without bothering about moral codes of conduct?					
38	Are you pessimistic about life?					
39	Do you have a weak will (self-will and determination) ?					
40	Are you tolerant about the views of others?					

LACK OF INDEPENDENCE

41	Do people consider you as independent?					
42	Do people disagree with your views?					
43	Would you like to be a follower?					
44	Do you disagree with the opinions of your group?					
45	Do you think of you as an irresponsible person?					
46	Don't you evince interest in other's work?					
47	Do people hesitate to take your help in any work?					
48	Do you give more importance to your work than other's work?					

SL NO.

VERY MUCH

MUCH

UNDECIDED

PROBABLY

NEVER

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SL NO.

VERY MUCH

MUCH

UNDECIDED

PROBABLY

NEVER

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Total Score

EMOTIONAL MATURITY SCALE

ANSWER SHEET

INSTRUCTIONS : Below are given 48 statements about yourself. Read each question carefully and put a tick mark on any one of the 5 alternative responses mode, such as Very much, Much, Undecided, Probably and Never. Indicate your level of agreement with the particular content of the statements. Do not think too long while answering. Your responses will be kept confidential.

EMOTIONAL MATURITY SCALE - SCORING

It is self-reporting 5 -point rating scale. The ratings are scored Very much (5), Much 4), Undecided (3), Probably (2) and Never (1). Scores range from 48 to 240. Total score constitutes the raw score for that particular dimension. Summing up all the raw scores gives a total emotional maturity score. The higher the score, the more the emotional maturity. The other areas of emotional maturity are given below:

Emotional stability - Characteristics of an individual that does not allow him/her to react excessively. Hehe is emotionally stable and high on stress tolerance

Emotional Progression - Charatistics of a person that refers to a feeling of adequate advancement and growing vitality of emotions in relative to the environment to ensure a positive thinking inhibited with righteousness and contentment.

Social adjustment - Process of interaction between the needs of a person and demand of the social environment.in any given situation. So that they can maintain and adapt a desired relationship with the environment.

Personality integration - is the process of firmly terrifying the diverse elements of an individual's motive and dynamic tendencies, resulting in harmonious co-action and deescalation of the inner conflict in the undaunted expression of behaviour.

Independence - Capacity of a person's attitudinal tendency to be self-reliant or to resistance to control by others, where he/she can make his/her decision on his/her own judgement based on facts by utilising his/her intellectual and creative potentialities.

CONSENT FORM SAMPLE

DEMOGRAPHIC DETAILS AND CONSENT FORM

1. NAME:

2. AGE:

3. SEX:

4. PHONE NUMBER:

5. EDUCATIONAL QUALIFICATION

6. EMPLOYED AS:

7. TEMPORARY ADDRESS:

8. PERMANENT ADDRESS:

9. LENGTH OF STAY IN BANGALORE:

10. HAVE YOU HAD ANY LIFE CHANGING EXPERIENCES OVER THE PAST ONE YEAR?

(POSITIVE/NEGATIVE)

11. ARE YOU ON ANY MEDICATION

ANY SPECIFY THE MEDICATION AND DURATION:

13. ANY HABITS – NICOTINE / ALCOHOL

I, _____ AGREE TO PARTICIPATE IN THE RESEARCH STUDY BY

PRARTHNA DEVI, D., AND I AM AWARE OF THE PURPOSE OF THIS STUDY.

THE INFORMATION PROVIDED BY ME FOR THE PURPOSE OF THIS STUDY IS TRUE TO THE BEST OF MY KNOWLEDGE

SIGN AND DATE