

## EFFECTIVENESS OF PROBLEM SOLVING SKILLS TRAINING ON PERPLEXITY REDUCTION

Zahra Heidari soufiani\*

Rahmatollah Kharazmirahimabadi\*\*

### **Abstract**

**Introduction:** The goal of present study was to investigate the effectiveness of problem solving training on reducing Perplexity in schoolgirls. **Materials and Methods:** The sample of this study consists of high school students in the two experimental groups and two control groups (each group 30 person) that using systematic thinking and focus on objective tests, Personal Deviance Scale and demographic characteristics inventory. Two experimental groups received the problem solving training during 10 sessions over two months. Collected data were analyzed through analysis of variance and statistical t-test. **Findings:** The results showed that first experimental group's posttest mean Perplexity scores has decrease in compare with pretest mean score of the same group. Also, after training the control groups was observed obvious reduction between the first and second groups variance. **Conclusions:** Problem-solving skills training reduces Perplexity in girls.

**Keywords:** problem-solving skills ,cognitive - behavioral therapy, Perplexity, students

\* Researcher in CCLD Dehkhoda "Correction Center For Learning Disorder", Rasht, Iran

\*\* Department of Education, Farhangian University, Imam Ali (PBUH)Branch, Rasht, Iran

## Introduction

Problem solving training provides a process to find an responds. In this regard, the process of problem solving (Dzurilla and Goldfride, 1971; Spivak, Platt, Shure, 1976) has many applications so far and has provided skills in this context. (Goldstein, Carr, Davidson, Wehr, 1981).

Some clinicians have emphasized advantage of cognitive – behavioral tendencies in treatment of Perplexity (Bandura, 1977; Mahoney, 1977; Nelson, 1375).

It is possible various methods of treatment (such as placing the model, verbal reinforcement and encouragement) all be effective in changing children's behavior, this is because each of them can added to child understanding of his/her performance (Bandora, 1977).

Also, multivariate statistical analysis on Perplexity, have shown that almost without exception, problematic behaviors associated with verbal and physical aggressive behaviors and interrelation of children is undesirable with adults or peers (Patterson and Anderson, 1964; Quay, 1966; Urbain and Kendall, 1980).

The purpose of this study was to investigate effectiveness of cognitive – behavioral therapy, type of problem solving training on Perplexity reduction in adolescents.

## Methods

This study was Semi-empirical and statistical society research of high school girls in district one of a city of Qazvin.

The sample of this study consists of 120 schoolgirls in Rasht city and selected by voluntarily participate in this study. Participants randomly divided into two experimental groups and tow control groups.

To control the effect of pretest in results of the posttest, a group of experimental subjects and a group of control subjects hasn't received Perplexity inventory in pretest.

Practice form of problem solving skills and demographic characteristics inventory was used for assembling data of Personal Deviance Scale inventory. Personal Deviance Scale measures the level of Perplexity. Correlation coefficient was 89% to evaluate inventory reliability in the test retest method (Human, 1376).

Also, practice form and appropriate feedback after solving exercises was provided with problem solving skills training (Ross, 1376)..

Two groups (an experimental group and a control group) completed the Perplexity inventory before training and after the training all four groups responded to the inventory.

**Analysis** of variance and t-test was used to analyze research data. In this test, we provided the partially stories and was asked individuals that help here to solve self interpersonal issues (Sharifi, 1373).

**Findings:**

The data obtained from the pretest and posttest groups are presented in Table 1.

Analysis of variance results was supported the research hypothesis that is effect of training on reducing Perplexity ( $F = 7/84, p < 0/01$ ).

Groups	Mean	variance	The smallest score	The biggest score
pretest	82/7	71/48	69	<b>101</b>
posttest	78/2	27/64	68	<b>85</b>
Pretest	-	-	-	-
posttest	79/9	48/52	64	<b>90</b>
pretest	79/9	62/52	66	<b>94</b>
posttest	83/6	75/62	65	<b>104</b>
pretest	-	-	-	-
posttest	83/25	62/2	71	<b>97</b>

Table 1 - Mean, variance, the smallest and the largest pretest and post test scores Personal Deviance (PDS) in four groups studied

Also, the t-test showed significant difference between the control group pretest and posttest scores ( $t = 3/492, p < 0/01$ ).

Hence the hypothesis is confirmed. It means that there is a significant average difference between the two study groups (an experimental group and a control group) in terms of efficacy of problem solving training on Perplexity ( $p < 0/01$ ).

## Discussion

The results showed that problem solving training is effective in reducing Perplexity and the results support the findings of Tozendejani et al (1379) on the effects of cognitive - behavioral therapy on Perplexity.

Also, Sharifi were reported similar findings about the effects of problem-solving training on social adjustment and depression.

In general we can say that problem solving training is effective in reducing Perplexity. On the other hand the pretest was ineffective to posttest and level of training effects on reducing Perplexity.

The limitations in the research are considered general note to Perplexity and lack of attention to its various levels, restrictions of teaching in schools, lack of attention to psychological conditions, the lack of specific and useful time for teaching and drop subjects.

It is suggested for more generalizable findings, the study be implemented in boy students also. it also other therapies are investigated. Also implementation of the project on mentally subnormal children to teach some general and social issues is recommended.

**Reference**

1. Bandura, A. (1977a). Self-efficacy: Towards a unifying therapy of behavior change. *Psychological Review*, 84, 191-215.
2. Bandura, A. (1977b). *Social learning theory*. Englewood Cliffs: Prentice-Hall.
3. Dzurilla, T. J., & Goldfried, M. R. (1971). Problem solving and behavior modification. *Journal of Abnormal Psychology*, 78, 107-126.
4. Goldstein, A. P., Carr, E. G., Davidson, W. S., & Wehr, P. (1981). *In response to Perplexity*. New York: Pergamon Press.
5. Homan, Heidar Ali (1376). *Understanding of the scientific method in the behavioral sciences*. Tehran, Azmoon Publication.
6. Mahoney, M. J. (1977). Reflections on the cognitive learning trend in psychotherapy. *American Psychologist*, 32, 5-13.
7. Nelson, Rita Vix (1375). *Children behavioral disorders, (Fifth Edition)*. Translation of Mohammad Taghi Monshi Toosi. Tehran: Astan Quds Razavi Publication. (P. 142-143).
8. Patterson, G. R., & Anderson, D. (1964). Peers as social reinforcers. *Child Development*, 35, 951-960.
9. Quay, H. C. (1966). Patterns of Perplexity, withdrawal and immaturity. In H. C. Quay, J. S. Werry (Eds.). *Psychopathological disorders of childhood*. New York: Wiley.
10. Ross, Allen, O. (1376). *Children's Mental disorders*. Translation: Amir Houshang Mehryar. Tehran: Roshd Publication.
11. Sharifi, Gholam Reza. (1373). *Review the relationship between depression and problem solving skills training*. Master's thesis in psychology. Tehran University of Medical Sciences and Health Services- Tehran therapy.
12. Sharifi, Gholam Reza. (1375). *Review of relationship between problem solving training and students social adjustment of Tehran*. Tehran: Education Institute. Ministry of Education.
13. Spivack, G., Platt, J. J., & Shure, M. (1976). *The problem-solving approach to adjustment*. San Francisco: Jossey-Bass.
14. Tozندهjani, Hassan; Kamal Pour, Nasrin (1379). Measure the relative efficacy cognitive - behavioral therapy in controlling Perplexity. *Moshaver Quarterly*, No. 7, 112-117
15. Urbain, E. S., & Kendall, P. C. (1980). Review of social cognitive problem-solving interventions with children. *Psychological Bulletin*, 88, 109-143.