

The Effectiveness of Theater Therapeutic on Anxiety, Mental Health and Personality Profiling of Youth Who Referred to The House of Culture Of Department of Culture and Islamic Guidance of Shiraz City

Arash Ibrahim¹ and Kheirollah Nourian²

¹MA in Clinical Psychology, Islamic Azad University of Yasouj

²PhD in Psychology, faculty member of Islamic Azad University of Yasouj

Article history:

Received date: 03 January, 2020

Review date: 21 March 2020

Accepted date: 01 April 2020

Keywords:

Theater Therapeutic, Construction of Youth Personality Profiles, Anxiety, Mental Health, Culture House

Abstract

Objective: The effectiveness Theatre of therapy on anxiety, mental health and personality profiling referred to the House of Culture Youth Department of Culture and Islamic Guidance city. **Materials and Methods:** The study calls afterwards researcher sampling method were selected. A total of 15 young people referred to convenience sampling method referred to the House of Culture of the Youth Department of Culture and Islamic Guidance Shiraz city. And semi-structured clinical interview based on the DSM-IV was performed. The GHQ-28 scale (general health questionnaire), of Beck anxiety and personality characteristics were used for screening patients. **Results:** The results showed that theater therapeutic is effective on the mental health of youth who referred to culture houses of the Department of Culture and Islamic Guidance in Shiraz also theater therapeutic is effective on reducing anxiety of youth who referred to culture houses of the Department of Culture and Islamic Guidance in Shiraz and theater therapeutic is effective on construction of youth personality profiles of youth who referred to culture houses of the Department of Culture and Islamic Guidance in Shiraz.

Please cite this article as: Ibrahim A., Nourian N. 2020 .The Effectiveness of Theater Therapeutic on Anxiety, Mental Health and Personality Profiling of Youth Who Referred to The House of Culture Of Department of Culture and Islamic Guidance of Shiraz City KURMANJ; The Journal of Culture, Humanities and Social Science Volume 2, Number 2: (1-19)

Introduction:

Mental health is how we think, feel and act depends on the person. In general, people who are mentally competent, have a positive attitude towards life. And they are ready to deal with life's problems. Feel good about themselves and others. In the workplace and are responsible relationships because when they mentally competent expect the best things in life and they are ready to deal with any incident. We have better mental health by learning the characteristics of a balanced and they can achieve joyful spirit. In many cases such as physical health and mental health it needs to be considered. Mental health is essential for human happiness. To have mental health is no accidentally; time and effort to achieve this goal will be realized. Also do not forget that confidence is the key to mental health (Rahimnia, 2005). Personality can bring their models to predict the behavior and psychological states and individual differences of individual important factor that show why some people cope better than others with conditions and environmental variables and different levels of motivation, satisfaction and mental health (Rolinson et al, 1988). Character is a personal example of thoughts, emotions and behavior with hidden psychological mechanisms or back of the known pattern is detected, according to the biological, psychological and social person a system can be considered on a par with sub-systems of biological, psychological and social. In such an approach, in addition to biological factors, psychological factors such as personality psychological states and mental and physical health have a significant impact on the character of the most fundamental theories of psychological concepts such as social



This open-access journal is published under the terms of the Creative Commons Attribution-Noncommercial 4.0 International License.

learning theory, psychoanalytic theory and the theory of personality traits. According to this theory, personality can be described according to the number of continuous dimensions, each representing a trait (Shekari et al., 2009). Lazarus and Monat know character a unique psychological combination that is, the relatively fixed structures and psychological processes underlying human experiences and actions and reactions of individuals to shape the environment, although personality is formed early in life, some experts believe that the character is changed and modified with next experience (Shekari et al, 2009). According to social learning theory; personality differences are a result of a variety of learning experiences. In this theory, the importance of environmental or situational determinants of personality emphasis is on reform. His behavior to the characteristics of the person in interaction with his assessment of the situation depends on the person's behavior as a product of continuous interaction between character and environment variables. As long as the situations that people face and the role that it is expected to be relatively stable, they will behave the same way but as soon as environmental change the behavior of individuals affected by these behaviors as well as on the process of learning new experiences affect one's personality changes (Roshan, 2006). In psychological problems, anxiety is a physiological and psychological state characterized by a collection of cognitive, physical, emotional and behavioral symptoms. In fact, anxiety is a group of symptom which is a result of partial compliance with the stresses and tensions of life. Some of the symptoms are the following: the fear of a bad event, fear of losing control, fear of dying, instability, inability to relax, shortness of breath, palpitations, excessive sweating, hot flashes, numbness or tingling in the extremities, restlessness in the legs, dizziness or lightheadedness, feeling a shiver, hands shaking and indigestion. The fear of occurrence of a disaster is the most common symptom of anxiety disorders which is the most common mental disorders in the general population. This disorder affects nearly 30 million people in the United States and it is generally prevalence in women twice that of men (Labafiejad, Besaqzadeh, 2012). Theatre treatment is one of psychotherapy that is attractive to qualified mental health professional. And can be an important therapy in reducing anxiety. Theatre therapeutic also plays a significant role in the development of therapy in the treatment group and family therapy and individual therapy is also one of the leading creative and useful types of psychotherapy (Gholami et al, 2012). Emphasis on theatre therapeutic is one of the effective methods of psychotherapy, in individual psychotherapy only through dialogue between patient and therapist reopens the problem of finding and understanding the factors related to the emotions and thoughts is trying to be a substrate, while at theater therapeutic techniques are implemented with the help of therapist. In theater therapeutic we can cure thought, emotion and behavior which are intertwined to communicate and understand their contradictions (Gholami et al, 2012). The purpose of this study was to discover that theater therapy has effect on anxiety, mental health and youth personality profiles referred to the Department of Culture and Islamic Guidance Shiraz.

Materials & Methods:

Statistical population was youth who referred to the Department of Culture and Islamic Guidance Shiraz House of Culture and the Association of Performing Arts. The samples were randomly selected and are randomly assigned to experimental and control groups. In test method for sample selection it should be noted that in each subgroup must be at least 15 and to have sample that is a true representative of the population and have high external validity study, 40 subjects (n = 20 for each group) were considered. Then the experimental group received eight sessions of drama therapy, that was administered two hours each week and after eight weeks and a total of 16 hours of theater therapeutic, again the questionnaires were completed by them.

Research Tools:

In this study, to measure depression and marital satisfaction, Beck Depression Inventory-Short Form (BDI-13) and Marital Satisfaction Scale was used.

1-General Health Questionnaire (GHQ)

GHQ-28 questionnaire was designed by Goldberg and Hiller 1 (1979) and has 4 sub-scales and each scale has 7 questions. Measures include:

- 1- Physical Symptoms Scale-2
- 2- Anxiety Symptoms Scale and Sleep Disorders 3
- 3- Social function Scale 4
- 4- Depression Symptoms Scale 5

This scale was designed to measure anxiety and has 21 items. Each phrase reflects one of the symptoms of anxiety that usually people experience who are clinically anxious, or those who are in a state of great anxiety.

Validity and reliability:

This scale has achieved a high internal consistency and correlation of items include a range of 0.30 to 0.71 (average of 0.60). The test was conducted on 83 patients with an interval of one week to retest. High correlation of (0.75) was achieved.

BAI correlation was significant with the results of a clinical trial. Results of BAI correlation with HARS_R and HRSD were almost 0.51 and 0.25. BAI results were correlated with the BDI 0.48.

Five personality traits Assessment Questionnaire (NEO):

NEO questionnaire is one of the newest questionnaires to assess personality structure that is based on the factor analysis view. This test is reflected in five main factors, today is a comprehensive and integrated model is based on a factor analysis and the extent of its use in healthy people as well as personality assessment in clinical practice can be one of the most appropriate personality assessment tools. The test to the examination of various age groups and in different cultures has been done and it can be one of the most comprehensive personality assessment tests. The test subject during the last 15 years of research was clinical samples and healthy adults. Hence its usefulness in both groups was evaluated clinically and in the course of the investigation. NEO Personality Inventory is a replacement NEOPI-R test that was prepared in 1985 by McCrae and Costa. This questionnaire measures 5 personality traits and 6 characteristics, i.e. 30 properties per agent. And it gives collective assessment of personality. The questionnaire contains two forms of (S) to report personal traits and consists of 240 questions from strongly agree to strongly disagree five degrees that was graded by researcher and fit men and women of all ages. And other form is (R) or revised grading that is based on researcher observing. This form has the same 240 questions with this difference that it begins with third person pronouns. Form (R) can also be used independently to assess personality and as a complement to personal report form (S) and used its validity (Garousi Farshi, 2001).

It also has a short form questionnaire that is called (NEO-FFI) which is a 60-item questionnaire was used to evaluate five personality traits, if the test execution time is very limited and general information is sufficient character of this questionnaire will be used. On the other hand, the implementation of this test is cost-effective in terms of cost and time scales were highly reliable correlation between the scales is large. And most importantly, this test unlike other personality tests has been received less critical (Garousi Farshi, 2001).

B-Participants' Conditions

The test runs on the people who are normal. People with disorders mood such as psychosis and dementia, that these cases can affect them in a personal report form, should not complete this questionnaire. The questions can be responded by each individual having the educational level – higher than elementary.

Reliability and Validity of NEO Test:

Currently NEO five-factor test has global usage and it was translated to languages of; Czechoslovakia, Arabic, Dutch, French, German, Japanese, Norwegian, Polish and Swedish. NEO-FFI personality questionnaire was conducted by McCrae and Costa on 208 American college students within three months of the validity of 0.83 to 0.75 was obtained.

A Long-term reliability of the questionnaire was evaluated. A 6-year-long study on the annoyance scale, extraversion and openness to experience, ratio of 0.68 to 0.83 in reports and personal credit report has shown couples. Consistency and reliability coefficient of conscience within two years are respectively 0.79 and 0.63 (McCrae and Costa, 1983).

NEO in the validation test by GarousiFarshi (2001) on a sample size of 2,000 university students in two cities of Tabriz, Shiraz University of Medical Sciences, the five main dimensions of the correlation coefficient of 0.56/0 to 0.87 has reported. Cronbach's alpha coefficients for each of the main factors annoyance, extraversion, openness, and conscientiousness instrument carts are respectively 0.86, 0.73, 0.56, 0.68 and 0.87. The content of this test is to assess the validity of the correlation between self-report form (S) and evaluation form researcher (R), was used that maximum correlation between extraversion and its minimum of 0.66 to 0.45 was in adjustment factor. (Garousi Farshi, 2001).

In Atash Afrouz (2007) session using internal consistency, Cronbach's alpha coefficient for each of the five traits: annoyance, extraversion, openness, agreeableness and conscientiousness, respectively were 0.74, 0.55, 0.27, 0.38 and 0.77.

First session:**Meeting and introducing members to each other**

Preparation (warm-up) was used to introduce them to each other. Preparations in drama therapy, means the person gets familiar with the environment, people and new situations. The patient physically and mentally is prepared to know group members. In this case, the relationship between emotional, sensory, and trust in the therapist and group members is obtained. It also makes members to give more attention to the members and not make hasty and holistic judgments. The rehearsals were:

- 1- Breathing and stretching exercises
- 2- All were asked to walk and look at each other
- 3- Saying their names while they are walking and then smile
- 4- Divided into two circles. One inside the other so that the two circles facing each other and look at each other with precision. When the therapist pointed out they leave the circles and kindly and carefully look at each other
- 5- The two sat facing each other and talked about one of their childhood memories

Second Session:

Members were asked to play the best thing that has happened in their life and compare their best event with others and then ask themselves how do they feels about others best event in life? Are they jealous, happy for them or deserve it as their own right?

The leader should consider the important signs of people or protagonist and raise questions about it and then they were asked to recite the worst event of their lives or play that and compare it with others and answer the same question for previous case.

Third session:

The time allotted for each member to walk the street scene and would not talk and interact with others. When members of the group are moving in space little by little they whisper to themselves: I am afraid, I will love someone; I'm tired of this life. He gets close to one of the members of the group and says ... you understand I'm afraid of being alone, alone, alone ... all alone ... scared. The groups gathered around him and play the fear game. Fear of loneliness, darkness and after a while he began to play, look at the rest of them and runs away and hides behind one.

Find a character of fear and puts a name on it. Then, slowly, the groups play more relaxed and he began to be calm again. Groups get around him quietly, intimate relationship, and he began to laugh out. And fear goes away. This exercise was conducted in two sessions for all members.

Fourth Session:**Twofold**

People have been asked to help each other mutually. One plays the protagonist and the other one stand at his side and show a manifestation his protagonist role, and emotions that are not expressed, to facilitate awareness of unconscious thoughts and champion of internal processes and conflicting emotions, unknown and suppressed.

Fifth and sixth sessions:**Role play**

Members were encouraged to submit a new form. Through its new and behavior become someone else in such a way. In this way, individuals are faced with certain pre-designed personality type and characteristics of therapist which shall act in accordance with it. He should act I a way that it is him. Distinctive character designed for each new character requires his development. Many of the design features that come with the actual performance are in conflict with daily performances. Efforts have been made that character to be designed according to the processes that affect a person's perception of the whole system. The aim of this procedure is to rebuild the character as a whole. When another member was playing, the rest were asked to work on the same role for experience and explore their unconscious.

Seventh and eighth sessions;**Training roles**

During two sessions members were in playing position to learn social roles such as children, father, mother, sister, brother, uncle, aunt, uncle citizen workers and other social roles and with the help of improvisational theater games, improvisation and performance review and fix these defects in their roles. In this exercise, an

attempt was made to authorities be given such opportunity in a location far from their mind to emotional outflow.

Results:

To analyze the data, the multivariate analysis of variance (MANOVA) in SPSS 17 software was used.

The data in Table 1 indicate that the average mental health test of experimental and control groups was similar at pre-test but in the post-test and follow-up in the experimental group compared to the control group had lower scores which means theater therapy is effective on mental health of youth of culture houses of the Department of Culture and Islamic Guidance in Shiraz.

Multivariate analysis of variance including Pylayy effect, Lambda Wilks, the Hotelling effect and the largest Rey root (37.05, $p < 0.0001$) for two experimental and control groups was significant. These findings suggest that at least two groups are different in variables, and multivariate analysis can be used to compare them.

4-1 Inferential Results

First hypothesis: theater therapy is effective on mental health of youth referred to the House of Culture Department of Culture and Islamic Guidance Shiraz.

In this study, for the assumption of equal variances between the dependent variable Leven test was used that was not statistically significant for analyzed variable.

Table 1: Results of the assumption of equal variances between the dependent variable of Leven test

		Degree of freedom 1	Degree of freedom 2	Significant level
Intergroup effects	F			
Mental Health (post-test)	2.388	1	28	0.094
Mental Health (follow up)	0.126	1	28	0.725

In Tables 2 and 3 descriptive indicators of dependent variable of mental health of groups have been presented separately. As well as changes in intergroup in pretest and post-test was evaluated by correlation t-test. As you can see, the pre-test and post-test scores of the control group were not different. But between pre-test and post-test (drama therapy) significantly different $P < 0.0001$ was seen in a way that the mental health has increased in post-test.

Table 2: the mean and standard deviation of the pre-test and post-test scores of mental health in different groups

Variable	Group	Pre-test		Post-test		t	P
		Mean	SD	Mean	SD		
	Control	26.53	0.92	26.67	1.79	0.228	0.823
Mental health	Experiment	25.83	1.34	23.33	1.06	11.18	0.0001

As it can be seen in Table 3, there is no difference between mean scores of control groups in pre-test and follow up, but between the scores of pre-test and follow up in experiment group (theater therapy) significantly different $P < 0.001$, so that mental health in follow-up has increased. This means sustainability of intervention is used.

Table 3: the mean and standard deviation of the pre-test and follow up scores of mental health in different groups

Variable	Group	Pre-test		Follow up		t	P
		Mean	SD	Mean	SD		
Mental health	Control	26.53	0.92	26.20	1.39	0.780	0.448
	Experiment	25.83	1.34	24.03	1.44	4.265	0.001

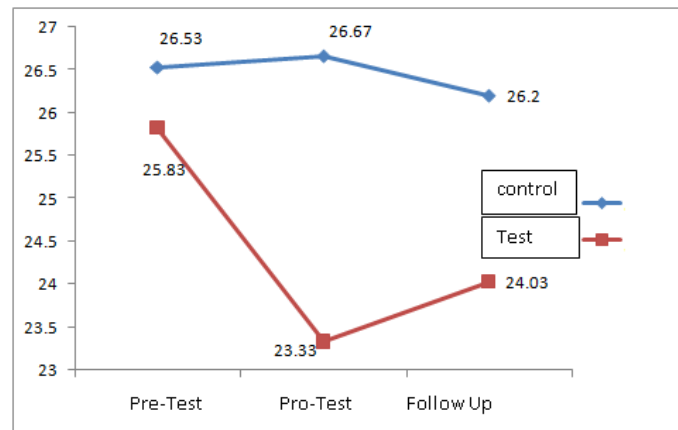


Figure 1: Mean score of mental health in the control and experimental groups at different stages

To analyze the changes between groups covariance (ANCOVA), was used. Results of covariance analysis on the impact of theater therapy on improving the mental health of groups in post-test and follow-up study is showed in Table 4 which the difference between the mean score of mental health in terms of group membership (control and experiment) is significant at post-test ($F=31.388$ and $P=0.0001$). The efficacy of this intervention was 1. Therefore, it is concluded there is a significant difference between the mental health after performing research in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on improving mental health in the post-trial stage. Statistical 1, showed statistically acceptable accuracy the impact. Results also show that the difference between the mean score of mental health in terms of group membership (control and experiment) was significant at follow-up step ($F=13.492$, $P=0.001$). The efficacy of this intervention was 0.333. Therefore, it is concluded there is a significant difference between the mental health in 2 months following step in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on improving mental health in 2 months following step. Statistical of 0.943, showed statistically acceptable accuracy the impact. Thus the first hypothesis is confirmed and thus it is concluded that theater treatment had effect on the mental health to youth referring to houses of culture,

Table 4: Analysis of covariance (ANCOVA) effect of group membership on mental health of research groups in post-test and follow-up

Dependent variable	stage	Variables	df	F	Mean square	P	Size effect	Statistic power
Mental health	Post-test	Pre-test	1	0.784	1.727	0.384	0.028	0.137
		Group membership	1	31.388	69.10	0.0001	0.538	1
	Follow up	Pre-test	1	1.079	2.177	0.308	0.038	0.171
		Group membership	1	13.492	27.213	0.001	0.333	0.943

4-1-2 Second hypothesis:

Theatre therapy is effective in reducing anxiety of youth who referred to the House of Culture of Department of Culture and Islamic Guidance in Shiraz.

In this study, for the assumption of equal variances between the dependent variable Leven test was used that was not statistically significant for analyzed variable.

Table 5: Results of the assumption of equal variances between the dependent variable of Leven test

		Degree of freedom 1	Degree of freedom 2	Significant level
Intergroup effects F				
Anxiety (post-test)	3.799	1	28	0.123
Anxiety (follow up)	2.568	1	28	0.120

In Tables 6 and 7 descriptive indicators of dependent variable of anxiety of groups have been presented separately. As well as changes in intergroup in pretest and post-test was evaluated by correlation t-test. As you can see, the pre-test and post-test scores of the control group were not different. But between pre-test and post-test (drama therapy) significantly different $P < 0.0001$ was seen in a way that the anxiety has increased in post-test.

Table 6: the mean and standard deviation of the pre-test and post-test scores of anxieties in different groups

Variable	Group	Pre-test		Post-test		t	P
		Mean	SD	Mean	SD		
	Control	18.40	0.737	18.40	1.454	0.0001	1
Anxiety	Experiment	18.07	0.884	15.40	0.910	12.649	0.0001

As it can be seen in Table 7, there is no difference between mean scores of control groups in pre-test and follow up, but between the scores of pre-test and follow up in experiment group (theater therapy) significantly different $P < 0.0001$, so that anxiety in follow-up has decreased. This means sustainability of intervention is used.

Table 7: the mean and standard deviation of the pre-test and follow up scores of anxiety in different groups

Variable	Group	Pre-test		Follow up		t	P
		Mean	SD	Mean	SD		
	Control	18.40	0.737	17.87	1.187	1.468	0.164
Anxiety	Experiment	18.07	0.884	15.83	0.939	9.788	0.0001

To analyze the changes between groups covariance (ANCOVA), was used. Results of covariance analysis on the impact of theater therapy on decreasing anxiety of groups in post-test and follow-up study is showed in Table 8 which the difference between the mean score of mental health in terms of group membership (control and experiment) is significant at post-test ($F=41.19$ and $P=0.0001$). The efficacy of this intervention was 0.0604. Therefore it is concluded there is a significant difference between the anxiety after performing research in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on decreasing anxiety in the post-trial stage. Statistical 1, showed statistically acceptable accuracy the impact. Results also show that the difference

between the mean score of mental health in terms of group membership (control and experiment) was significant at follow-up step ($F=23.85$, $P=0.0001$). The efficacy of this intervention was 0.469. Therefore it is concluded there is a significant difference between decreasing anxiety in 2 months following step in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on decreasing anxiety in 2 months following step. Statistical of 0.943, showed statistically acceptable accuracy the impact. Thus the second hypothesis is confirmed and thus it is concluded that theater treatment had effect on decreasing anxiety to youth referring to houses of culture.

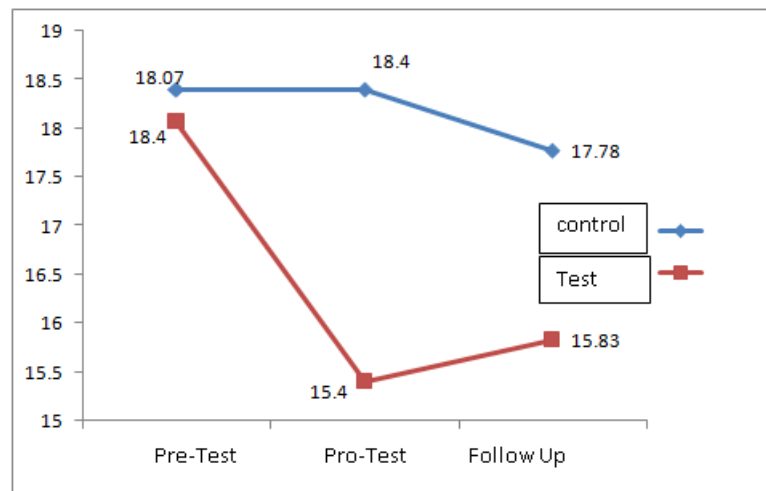


Figure 2: Mean score of anxiety in the control and experimental groups at different stages

Table 4: Analysis of covariance (ANCOVA) effect of group membership on anxiety of research groups in post-test and follow-up

Dependent variable	stage	Variables	df	F	Mean square	P	Size effect	Statistic power
Anxiety	Post-test	Pre-test	1	0.991	1.459	0.328	0.035	0.161
		Group membership	1	41.19	69.631	0.0001	0.604	1
	Follow up	Pre-test	1	1.720	1.921	0.201	0.060	0.244
		Group membership	1	23085	26.624	0.0001	0.469	0.997

Third hypothesis: theater therapy has effects on construction of youth personality profiles of youth who referred to the House of Culture of Department of Culture and Islamic Guidance in Shiraz.

Personality trait neuroticism (N)

In this study, for the assumption of equal variances between the dependent variable Leven test was used that was not statistically significant for analyzed variable.

In Tables 10 and 11 descriptive indicators of dependent variable of neuroticism (N) of groups have been presented separately. As well as changes in intergroup in pretest and post-test was evaluated by correlation t-test. As you can see, the pre-test and post-test scores of the control group were not different. But between pre-test and post-test (drama therapy) significantly different $P<0.0001$ was seen in a way that the neuroticism (N) has increased in post-test.

Table 9: Results of the assumption of equal variances between the dependent variable of Leven test

	Degree of freedom 1		Degree of freedom 2		Significant level
Intergroup effects	F				
Neuroticism (post-test)	4.394	1	28		0.71
Neuroticism (follow up)	2.278	1	28		0.602

Table 10: the mean and standard deviation of the pre-test and post-test scores of neuroticism (N) in different groups

Variable	Group	Pre-test		Post-test		t	P
		Mean	SD	Mean	SD		
Neuroticism (N)	Control	20.93	0.961	21.07	2.314	0.222	0.827
	Experiment	19.90	2.046	14.73	1.720	17.73	0.0001

As it can be seen in Table 11, there is no difference between mean scores of control groups in pre-test and follow up, but between the scores of pre-test and follow up in experiment group (theater therapy) significantly different $P < 0.0001$, so that neuroticism (N) in follow-up has decreased. This means sustainability of intervention is used.

Table 11: the mean and standard deviation of the pre-test and follow up scores of neuroticism (N) in different groups

Variable	Group	Pre-test		Follow up		t	P
		Mean	SD	Mean	SD		
Neuroticism (N)	Control	20.93	0.961	17.87	20.07	1.612	0.129
	Experiment	19.90	0.884	2.046	15.87	7.974	0.0001

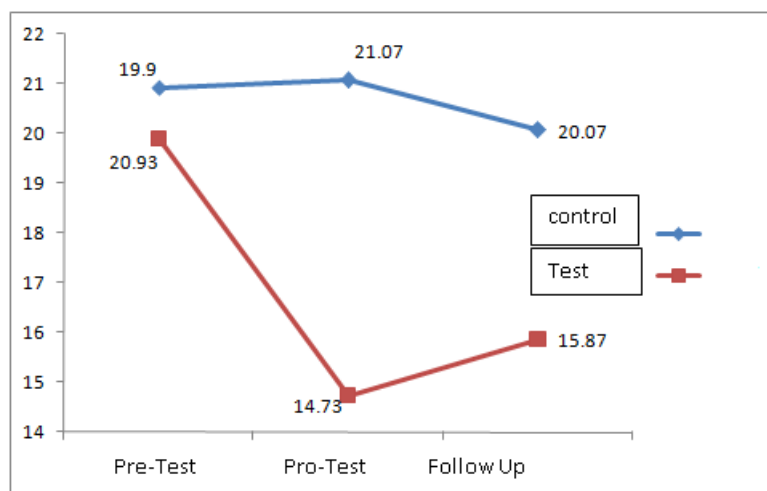


Figure 3: Mean score of neuroticism (N) in the control and experimental groups at different stages

To analyze the changes between groups covariance (ANCOVA), was used. Results of covariance analysis on the impact of theater therapy on decreasing anxiety of groups in post-test and follow-up study is showed in Table 12 which the difference between the mean score of neuroticism (N) in terms of group membership (control and experiment) is significant at post-test ($F=68.228$ and $P=0.0001$). The efficacy of this intervention was 0.716. Therefore it is concluded there is a significant difference between neuroticism (N)

after performing research in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on neuroticism (N) in the post-trial stage. Statistical 1, showed statistically acceptable accuracy the impact. Results also show that the difference between the mean score of neuroticism (N) in terms of group membership (control and experiment) was significant at follow-up step ($F=31.609$, $P=0.0001$). The efficacy of this intervention was 0.539. Therefore it is concluded there is a significant difference between neuroticism (N) in 2 months following step in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on neuroticism (N) in 2 months following step. Statistical of 1, showed statistically acceptable accuracy the impact. Thus the third hypothesis is confirmed.

Table 12: Analysis of covariance (ANCOVA) effect of group membership on neuroticism (N) of research groups in post-test and follow-up

Dependent variable	stage	Variables	df	F	Mean square	P	Size effect	Statistic power
Neuroticism (N)	Post-test	Pre-test	1	9.848	31.10	0.004	0.267	0.857
		Group membership	1	68.228	215.46	0.0001	0.716	1
	Follow up	Pre-test	1	2.868	8.995	0.102	0.096	0.372
		Group membership	1	31.609	99.124	0.0001	0.539	1

Extraversion (E) Personality trait:

In this study, for the assumption of equal variances between the dependent variable Leven test was used that was not statistically significant for analyzed variable.

Table 13: Results of the assumption of equal variances between the dependent variable of Leven test

		Degree of freedom 1		Degree of freedom 2		Significant level
Intergroup effects	F					
Extraversion (E) (post-test)	2/584	1		28		0/063
Extraversion (E) (follow up)	2/897	1		28		0/147

In Tables 14 and 15 descriptive indicators of dependent variable of extraversion (E) of groups have been presented separately. As well as changes in intergroup in pretest and post-test was evaluated by correlation t-test. As you can see, the pre-test and post-test scores of the control group were not different. But between pre-test and post-test (drama therapy) significantly different $P<0.0001$ was seen in a way that the extraversion (E) has increased in post-test.

Table 14: the mean and standard deviation of the pre-test and post-test scores of extraversion (E) in different groups

Variable	Group	Pre-test		Post-test		t	P
		Mean	SD	Mean	SD		
Extraversion (E)	Control	21.80	1.37	21.60	1.76	0.292	0.774
	Experiment	22.87	1.64	30.80	1.14	23.024	0.0001

As it can be seen in Table 15, there is no difference between mean scores of control groups in pre-test and follow up, but between the scores of pre-test and follow up in experiment group (theater therapy)

significantly different $P < 0.0001$, so that extraversion (E) in follow-up has increased. This means sustainability of intervention is used.

Table 15: the mean and standard deviation of the pre-test and follow up scores of extraversion (E) in different groups

Variable	Group	Pre-test		Follow up		t	P
		Mean	SD	Mean	SD		
Extraversion (E)	Control	21.80	1.37	21.73	1.83	0.112	0.913
	Experiment	22.87	1.64	28.87	1.35	14.105	0.0001

To analyze the changes between groups covariance (ANCOVA), was used. Results of covariance analysis on the impact of theater therapy on improving extraversion (E) of groups in post-test and follow-up study is showed in Table 16 which the difference between the mean score of extraversion (E) in terms of group membership (control and experiment) is significant at post-test ($F=242.86$ and $P=0.0001$). The efficacy of this intervention was 0.900. Therefore it is concluded there is a significant difference between extraversion (E) after performing research in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on extraversion (E) in the post-trial stage. Statistical 1, showed statistically acceptable accuracy the impact. Results also show that the difference between the mean score of extraversion (E) in terms of group membership (control and experiment) was significant at follow-up step ($F=122.01$, $P=0.0001$). The efficacy of this intervention was 0.819. Therefore it is concluded there is a significant difference between extraversion (E) in 2 months following step in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on extraversion (E) in 2 months following step. Statistical of 1, showed statistically acceptable accuracy the impact. Thus the third hypothesis is confirmed.

Table 16: Analysis of covariance (ANCOVA) effect of group membership on extraversion (E) of research groups in post-test and follow-up

Dependent variable	stage	Variables	df	F	Mean square	P	Size effect	Statistic power
Extraversion (E)	Post-test	Pre-test	1	0/013	0/031	0/909	0/0001	0/051
		Group membership	1	242/86	557/42	0/0001	0/900	1
	Follow up	Pre-test	1	0/851	2/220	0/364	0/031	0/145
		Group membership	1	122/01	318/335	0/0001	0/819	1

Personality trait of openness to experience (O)

In this study, for the assumption of equal variances between the dependent variable Leven test was used that was not statistically significant for analyzed variable.

Table 17: Results of the assumption of equal variances between the dependent variable of Leven test

		Degree of freedom 1		Degree of freedom 2		Significant level
Intergroup effects		F				
openness to experience (O) (post-test)	0/255	1		28		0/618
openness to experience (O) (follow up)	2/862	1		28		0/136

In Tables 18 and 19 descriptive indicators of dependent variable of openness to experience (O) of groups have been presented separately. As well as changes in intergroup in pretest and post-test was evaluated by correlation t-test. As you can see, the pre-test and post-test scores of the control group were not different. But

between pre-test and post-test (drama therapy) significantly different $P < 0.0001$ was seen in a way that the openness to experience (O) has increased in post-test.

Table 18: the mean and standard deviation of the pre-test and post-test scores of openness to experience (O) in different groups

Variable	Group	Pre-test		Post-test		t	P
		Mean	SD	Mean	SD		
openness to experience (O)	Control	25.13	1.06	27.13	1.41	6.831	0.001
	Experiment	26.87	1.36	32.13	0.91	14.189	0.0001

As it can be seen in Table 19, there is no difference between mean scores of control groups in pre-test and follow up, but between the scores of pre-test and follow up in experiment group (theater therapy) significantly different $P < 0.0001$, so that openness to experience (O) in follow-up has increased. This means sustainability of intervention is used.

Table 19: the mean and standard deviation of the pre-test and follow up scores of openness to experience (O) in different groups

Variable	Group	Pre-test		Follow up		t	P
		Mean	SD	Mean	SD		
openness to experience (O)	Control	25.13	1.06	26.20	2.57	2.086	0.056
	Experiment	26.87	1.36	30.93	1.03	12.306	0.0001

To analyze the changes between groups covariance (ANCOVA), was used. Results of covariance analysis on the impact of theater therapy on improving openness to experience (O) of groups in post-test and follow-up study is showed in Table 20 which the difference between the mean score of openness (o) in terms of group membership (control and experiment) is significant at post-test ($F=74.283$ and $P=0.0001$). The efficacy of this intervention was 0.733. Therefore it is concluded there is a significant difference between openness to experience (O) after performing research in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on openness to experience (O) in the post-trial stage. Statistical 1, showed statistically acceptable accuracy the impact. Results also show that the difference between the mean score of openness to experience (O) in terms of group membership (control and experiment) was significant at follow-up step ($F=18.01$, $P=0.0001$). The efficacy of this intervention was 0.983. Therefore it is concluded there is a significant difference between openness to experience (O) in 2 months following step in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on openness to experience (O) in 2 months following step. Statistical of 1, showed statistically acceptable accuracy the impact. Thus the third hypothesis is confirmed.

Table 20: Analysis of covariance (ANCOVA) effect of group membership on openness to experience (O) of research groups in post-test and follow-up

Dependent variable	stage	Variables	df	F	Mean square	P	Size effect	Statistic power
Openness to experience (O)	Post-test	Pre-test	1	5/791	6/97	0/023	0/177	0/641
		Group membership	1	74/283	89/41	0/0001	0/733	1
	Follow up	Pre-test	1	10/64	30/33	0/003	0/283	0/882
		Group membership	1	18/01	51/55	0/0001	0/400	0/983

Agreement personality trait (A)

In this study, for the assumption of equal variances between the dependent variable Leven test was used that was not statistically significant for analyzed variable.

Table 21: Results of the assumption of equal variances between the dependent variable of Leven test

		Degree of freedom 1		Degree of freedom 2	Significant level
Intergroup effects	F				
Agreement (post-test)	(A) 3/892	1		28	0/062
Agreement (A) (follow up)	2/747	1		28	0/109

In Tables 22 and 23 descriptive indicators of dependent variable of openness to agreement personality trait (A) of groups has been presented separately. As well as changes in intergroup in pretest and post-test was evaluated by correlation t-test. As you can see, the pre-test and post-test scores of the control group were not different. But between pre-test and post-test (drama therapy) significantly different $P < 0.0001$ was seen in a way that the agreement personality trait (A) has increased in post-test.

Table 22: the mean and standard deviation of the pre-test and post-test scores of agreement personality trait (A) in different groups

Variable	Group	Pre-test		Post-test		t	P
		Mean	SD	Mean	SD		
Agreement personality trait (A)	Control	19.80	1.37	19.73	1.87	0.093	0.927
	Experiment	20.73	1.62	24.80	1.15	11.35	0.0001

As it can be seen in Table 23, there is no difference between mean scores of control groups in pre-test and follow up, but between the scores of pre-test and follow up in experiment group (theater therapy) significantly different $P < 0.0001$, so that agreement personality trait (A) in follow-up has increased. This means sustainability of intervention is used.

Table 23: the mean and standard deviation of the pre-test and follow up scores of agreement personality trait (A) in different groups

Variable	Group	Pre-test		Follow up		t	P
		Mean	SD	Mean	SD		
Agreement personality trait (A)	Control	19.80	1.37	20.07	1.75	0.435	0.670
	Experiment	20.73	1.62	23.87	1.25	7.203	0.0001

To analyze the changes between groups covariance (ANCOVA), was used. Results of covariance analysis on the impact of theater therapy on improving agreement personality trait (A) of groups in post-test and follow-up study is showed in Table 24 which the difference between the mean score of agreement personality trait (A) in terms of group membership (control and experiment) is significant at post-test ($F=70.68$ and $P=0.0001$). The efficacy of this intervention was 0.724. Therefore it is concluded there is a significant difference between agreement personality trait (A) after performing research in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on agreement personality trait (A) in the post-trial stage. Statistical 1, showed statistically acceptable accuracy the impact. Results also show that the difference between the mean score of agreement personality trait (A) in terms of group membership (control and experiment) was significant at follow-up step ($F=39.73$, $P=0.0001$). The efficacy of this intervention was 0.595. Therefore it is concluded there is a significant difference between agreement personality trait (A) in 2 months following step in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth

referred to the House of Culture had an impact agreement personality trait (A) in 2 months following step. Statistical of 1, showed statistically acceptable accuracy the impact. Thus the third hypothesis is confirmed.

Table 24: Analysis of covariance (ANCOVA) effect of group membership on agreement personality trait (A) of research groups in post-test and follow-up

Dependent variable	stage	Variables	df	F	Mean square	P	Size effect	Statistic power
Agreement trait (A)	Post-test	Pre-test	1	0/016	0/040	0/900	0/001	0/052
		Group membership	1	70/68	176/16	0/0001	0/724	1
	Follow up	Pre-test	1	0/144	0/344	0/707	0/005	0/066
		Group membership	1	39/73	94/65	0/0001	0/595	1

Personality trait of conscientiousness (C)

In this study, for the assumption of equal variances between the dependent variable Leven test was used that was not statistically significant for analyzed variable.

Table 25: Results of the assumption of equal variances between the dependent variable of Leven test

	Degree of freedom 1	Degree of freedom 2	Significant level
Intergroup effects	F		
Personality trait of conscientiousness (C) (post-test)	3/900 1	28	0/058
Personality trait of conscientiousness (C) (follow up)	0/003 1	28	0/960

In Tables 26 and 27 descriptive indicators of dependent variable of openness to personality trait of conscientiousness (C) of groups has been presented separately. As well as changes in intergroup in pretest and post-test was evaluated by correlation t-test. As you can see, the pre-test and post-test scores of the control group were not different. But between pre-test and post-test (drama therapy) significantly different $P < 0.0001$ was seen in a way that the personality trait of conscientiousness (C) has increased in post-test.

Table 26: the mean and standard deviation of the pre-test and post-test scores of personality trait of conscientiousness (C) in different groups

Variable	Group	Pre-test		Post-test		t	P
		Mean	SD	Mean	SD		
personality trait of conscientiousness (C)	Control	22.40	1.64	22.47	2.85	0.069	0.946
	Experiment	22.93	2.12	26.07	1.85	7.296	0.0001

As it can be seen in Table 27, there is no difference between mean scores of control groups in pre-test and follow up, but between the scores of pre-test and follow up in experiment group (theater therapy) significantly different $P < 0.003$, so that personality trait of conscientiousness (C) in follow-up has increased. This means sustainability of intervention is used.

Table 27: the mean and standard deviation of the pre-test and follow up scores of personality trait of conscientiousness (C) in different groups

Variable	Group	Pre-test		Follow up		t	P
		Mean	SD	Mean	SD		
personality trait of conscientiousness (C)	Control	22.40	1.64	22.33	1.79	0.095	0.925
	Experiment	22.93	2.12	25.03	1.73	3.559	0.003

To analyze the changes between groups covariance (ANCOVA), was used. Results of covariance analysis on the impact of theater therapy on improving personality trait of conscientiousness (C) of groups in post-test and follow-up study is showed in Table 28 which the difference between the mean score of personality trait of conscientiousness (C) in terms of group membership (control and experiment) is significant at post-test ($F=15.43$ and $P=0.001$). The efficacy of this intervention was 0.364. Therefore it is concluded there is a significant difference between personality trait of conscientiousness (C) after performing research in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact on personality trait of conscientiousness (C) in the post-trial stage. Statistical 0.966 showed statistically acceptable accuracy the impact. Results also show that the difference between the mean score of personality trait of conscientiousness (C) in terms of group membership (control and experiment) was significant at follow-up step ($F=16.19$, $P=0.0001$). The efficacy of this intervention was 0.375. Therefore it is concluded there is a significant difference between personality trait of conscientiousness (C) in 2 months following step in experimental and control groups (drama therapy), in other words, theater therapeutic intervention in youth referred to the House of Culture had an impact personality trait of conscientiousness (C) in 2 months following step. Statistical of 0.972, showed statistically acceptable accuracy the impact. Thus the third hypothesis is confirmed.

Table 28: Analysis of covariance (ANCOVA) effect of group membership on personality trait of conscientiousness (C) of research groups in post-test and follow-up

Dependent variable	stage	Variables	df	F	Mean square	P	Size effect	Statistic power
personality trait of conscientiousness (C)	Post-test	Pre-test	1	0/342	2/025	0/563	0/013	0/087
		Group membership	1	15/43	91/22	0/001	0/364	0/966
	Follow up	Pre-test	1	0/112	0/362	0/740	0/004	0/062
		Group membership	1	16/19	52/28	0/0001	0/375	0/972

Discussion:

Discussion of first hypothesis

The first hypothesis states that: theater therapy is effective on mental health of youth referred to the House of Culture Department of Culture and Islamic Guidance Shiraz.

To investigate this hypothesis, data were analyzed by paired t-test and analysis of covariance one-sided (ANCOVA). Results showed that the mean scores of control group at pre-test and post-test did not differ but in experiment group there was a significant difference between pre-test and post-test $p<0.0001$ in a way that the mental health has increased in post-test. Also the mean scores of control group at pre-test and follow-up did not differ but in experiment group there was a significant difference between pre-test and follow-up $p<0.001$ in a way that the mental health has increased in follow-up. This finding means the sustainability of intervention. The findings inter-group changes of about the effect of theater therapy on improving mental health showed that the difference between the mean score of mental health in terms of group membership (control and experiment) at the post-test and also 1.5 month follow up is significant statistically (respectively, $p<0.0001$ and $p<0.001$). Thus the first hypothesis is confirmed and it is concluded that theater therapy is effective on mental health of youth referred to the House of Culture Department of Culture and Islamic Guidance Shiraz. The result is consistent with following studies; Ibrahim and Ardabili (2011), Sprose and Vienna, Koagliato and de Souza (2010), Hroitz, Kowalski and Anderberg (2010), Sumo (2008), Hmamsi (2006), Fung (2006), Calc Ogozan Oghlo and Osman (2005), Gholamzadeh Khader et al (2014), Gholami et al (2012), Zare et al. (2007) and Rahgouy et al (2006). In accordance with this study Zare et al (2007) showed that the theater in comparison to group counseling rational treatment to increase in general health and emotional expressiveness is more effective. Researches that are also being undertaken in this field are indicative of the effectiveness of theater therapeutic. Including research findings Hmamsy (2006) in Turkey as the integration of theater and cognitive therapy in the treatment of depression showed the level of depression in depressed patients who received two methods of psychological play with conventional

treatment has decreased. Sprose et al (2010) in line with the findings of a research study concluded that theater therapy has effect on improving the quality of life and reducing symptoms of anxiety and depression in Parkinson's disease. Dugan (2010) also aimed to determine the effectiveness of theater treatment on attachment style youth and evaluate benefits of this type of group therapy participants indicated; participants have been able to achieve the following: understanding of themselves, broaden their vision, awareness of their attachment, their nature, their future relationships, self-esteem. Also Costa, Antonio, Suarez and Moreno (2006) measured the effect of Psycho dramatic with pharmacotherapy in major depressive disorder on 20 patients with major depression and after 24 sessions of psychotherapy of Psycho dramatic realized this treatment are effective for major depression and are consistent with current results.

Also in line with the findings Kim (2003) showed theater therapeutic as a method of group psychotherapy in resolving individual issues, especially the releasing of excitement, anger management and emotional conflict resolution has brought beneficial results.

To explain these findings it can be said that theatre therapeutic is one of the non-drug ways that treatments in this method of psychological effects of Theatre Art on the mental patient. The overall goal of the theater is that enable the authorities clinicians using the tools of theater and the safe and secure environment cause the development. In the therapeutic theater references are given to express their thoughts and feelings and communicate with others. Theater play show opening doors and windows to the soul of man. Patients know and understand themselves differently. Subject displays placed at the disposal of the authorities and he creates a process that result is instant behavioral information which can be a metaphor by the therapist or client as an extension of the call habitual references to his life situations to be considered. In the process of creating theater, the whole brain gets involved with access to the left and right hemispheres. This has led to the integration of emotional, cognitive and thus a new understanding of the senses will be created.

On the other hand, art therapy is a care method to expand the process of psychotherapy, so that this process involves the reaction of verbal, visual and emotional references. Art describe all those things that saying or seeing them is difficult and painful, observable. Art help authorities to see clearer pictures and feel life in them better. When authorities will be asked to make a decision when the art work was done simply explain behavior, thoughts and feelings as much as in other situations it is clear transparent. The client as it feels, discovers, thinks and creates, new insights about himself, his life acquires relationships and patterns (Madadi, 2000).

Discussing second hypothesis:

Second hypothesis stated that theatre therapy is effective in reducing anxiety of youth who referred to the House of Culture of Department of Culture and Islamic Guidance in Shiraz.

To investigate this hypothesis, data were analyzed by paired t-test and analysis of covariance one-sided (ANCOVA). Results showed that the mean scores of control group at pre-test and post-test did not differ but in experiment group there was a significant difference between pre-test and post-test $p < 0.0001$ in a way that the anxiety has decreased in post-test. Also the mean scores of control group at pre-test and follow-up did not differ but in experiment group there was a significant difference between pre-test and follow-up $p < 0.0001$ in a way that anxiety has decreased in follow-up. This finding means the sustainability of intervention. The findings inter-group changes of about the effect of theater therapy on reducing anxiety showed that the difference between the mean score of mental health in terms of group membership (control and experiment) at the post-test and also 1.5 month follow up is significant statistically ($p < 0.0001$). Thus the second hypothesis is confirmed and it is concluded that theater therapy is effective on reducing anxiety of youth referred to the House of Culture Department of Culture and Islamic Guidance Shiraz. The result is consistent with studies of Suzan et al (2011). The results of the research imply that tragedy and display function to stimulate mental and emotional fluency is required to discharge. The methods by which emotions, fears and emotions that have been aroused be imitated. This could be known as the theater is the only direct contact with human emotions and be able to make a difference in people's lives (Landi, 2006). The results also show that the state of the art in the prevention, diagnosis and treatment effect is highly regarded. Throughout the history of art, consciously and unconsciously was used in treatment. Today art can be healing, calming, educator and coordinator is (Safarzadeh and Khosroshahi, 2009). Art enables the authorities with a tool to play with color and art work hard inner experiences to bring on sheet of paper and see and express himself in the mirror colors, lines and other artistic tools (Gholami et al., 1391). Theater can be projective platform for

visitors to create and prepare the way for externalized emotions (Ahmadi, 2009). In this regard, Moreno admitted to authorities should be allowed to play the role of ulterior motives and release emotional states.

In explaining the research findings, according to Wolpe (1958; Taghavi Larijani et al, 2009) it can be stated that the anxious person is unable to firmly tillage and optimal social functioning. Such a person because of "fear of losing respect" and "afraid of losing like" is unable to express his feelings or his differences with others. Therefore, the results can be deduced, rehearsal therapy, is a therapy that one can reveal it and that your efforts adapt with various parts of his life in the past, present and future (Apter, 2003).

The second explanation for the findings of this study can be said that to enact the situations in which the incident was tragic and painful to be repeated when the pressure is reduced, each time you enter the less pressure will be restored (Gibson and Michelle, 2001). Theater comforts the viewer and reduced the burden of grief and trauma and theater is cathartic and relieves the soul (Marsick, 2010).

Discussing third hypothesis:

Third hypothesis stated that theater therapy has effects on construction of youth personality profiles of youth who referred to the House of Culture of Department of Culture and Islamic Guidance in Shiraz.

To investigate this hypothesis, data were analyzed by paired t-test and analysis of covariance one-sided (ANCOVA). Results showed that the mean scores of control group at pre-test and post-test did not differ but in experiment group there was a significant difference between pre-test and post-test $p < 0.0001$ in a way that the characteristics of neuroticism (N) has decreased in post-test. Also the mean scores of Features extraversion (E), openness to experience (O), agree (A) and conscientiousness (C) at post-test has increased. The mean scores of control group did not differ in pre-test and follow up. But there was a significant difference ($p < 0.0001$) in pre-test and follow up of experiment group. In a way that mean score of characteristics of neuroticism (N) has decreased in follow up and the mean scores of features extraversion (E), openness to experience (O), agree (A) and conscientiousness (C) at follow up has increased. This means it had sustainability is the intervention. The findings of inter-group changes of about the effect of theater therapy on characteristics showed that the difference between the mean score of characteristics of neuroticism (N), features extraversion (E), openness to experience (O), agree (A) and conscientiousness (C) in terms of group membership (control and experiment) at the post-test and also 1.5 month follow up is significant statistically ($p < 0.0001$). Thus the third hypothesis is confirmed and it is concluded that theater therapy has effects on characteristics of neuroticism (N), features extraversion (E), openness to experience (O), agree (A) and conscientiousness (C) of youth who referred to the House of Culture of Department of Culture and Islamic Guidance in Shiraz. The results of this study are consistent with the results of researches of AMIRKHANI et al (2014). Yarmohamadian and Akhlaghi (2014) acknowledge the educational role art can easily learn and create conditions for favorable changes in different aspects of personality and human behavior.

In explaining the results of this study can be said theater therapeutic makes people to explore their thoughts and feelings and other members and understand that this problem is not only their own are therefore faced with empathy and participation of others. On the one hand a group activity gives identity with respect to gravity dramatic purpose and a feeling of usefulness, safety, belonging to the group, and the opportunity to assert, each of them can be effective in improving the personality profile.

On the other hand, most researchers believe that one of the techniques that can be used in improving a person's profile is playing a role; this technique is known as one of the most important principles is considered theater therapeutic. Due to positive and negative feedback from the members of the group to the individual enters, members can reasonably or not your thoughts, feelings and reach their desires. The theater's treatment can cause awareness of further violence as the active ingredient, and prevents the occurrence of violence in different situations (as quoted by Abolghasemi, 2014).

Some theorists such as Jones (1996) believe that theater is the only place that shows the relationship between the conscious and unconscious, change the insights, knowledge, and finally clear up the resistance. In the story presented in drama therapy sessions intended to ensure the recognition and the person would view as a means to break the resistance during exercise sessions. On the other hand, the therapeutic theater scenes and theatrical performances had a direct relationship with the real experience of the group, but engaging with the world built beliefs and metaphors are lead to discover the dark side of their personalities.

People by playing the roles, are outpouring their anxiety and attention increases in them. In some stories presented in the theater therapy sessions, children playing with playing good and bad roles are outpouring

their anxiety and vision and focusing increases in them (Bayati, Tajrishi and Zademohammadi, 2012). Therefore, the effectiveness of theater therapeutic on improving the personality profile of subjects is justified. In this context it is worth mentioning that the theater therapy is a treatment method in which characteristics of personality, interpersonal communication, conflicts and struggles of mental and emotional disorders by performing procedures were observed and examined. Given that the effect of variables in the study of mental health, anxiety and personality was shown, we should provide a context for the use of these methods. So the findings of the research can be applied to mental health of people, especially teenagers and young people.

References:

- Abolghasemi, A, Javanmiri L (2010) The role of social desirability, mental health and self-efficacy in predicting academic achievement School psychologists, First Year, Issue 5
- Ahmadvand, M (2010) Mental health. Tehran, PNU
- Akbari Zardkhane, Saeid Rostami, Mamghanie Maryam (2011) Maintenance of the relationship between personality traits and mental health of pets with pet owners, Journal of Veterinary Research, No. 196 pp 270-271.
- Amirkhani, Sudeh, Salimi H, Noein, A (2014) Theatre evaluate the effectiveness of treatment with moral reasoning, Journal of Military Medicine, Vol. XVI, No. 2 pp 45-47.
- Amraie, M. (2010). Psychodrama in way of revolution. 1th, Ed., Tehran: Danje press
- Arsalan A. (2009). Passing on psychodrama. Special Site of psychodrama: www.dramamahale.com.
- Atkinson, Rita, L. Richard, S; Hylgard, R. Ernst. (2001). Psychology
- Blanr, Adam (2001) - Inner processing
- Blatner, A. (2002). Morenean Approaches: Recognizing Psychodrama's Many Facets. journal psychotherapy, psychodrama & sociometry. Heldreof Publications. pp:170-159
- Brown, Dany (2005) Art therapy
- Chalipanlo Gholammreza, Garousi Farshi, Mirtaghi (2010) Ability of NEO inventory in mental health assessment Journal of Behavioral Sciences, University of Tabriz, Volume 4, Number 1, Spring 1389, 51-58
- Dadsetan Parirokh, 1997, Evaluation and treatment of anxiety. Journal of Psychology. 1. Page 31.
- Dogan, T.(2010) .The effects of psychodrama on young adults' attachment styles. journal The Arts in Psychotherapy. vol:37. pp:112-119.
- Fakhrian Behjat, Fouladi Sakineh, Epidemiology of mental disorders among high school female students in city of Neyshabur, M. primary education, higher education center in-service education of teachers Neyshabur city.
- Ganji, Hamzeh (2007) Mental Health, Third Edition, Arasbaran pub
- Gholami Ali, Boshlideh, Kiomars, Rafei Azimeh (2012) In a study to investigate the efficacy of the mental health of divorced women, psychological methods and models, Number 10 pp 45-64.
- Haghshenas, Hasan (2006) Five-factor personality traits and standardizing a test interpretation guide, Shiraz University of Medical Sciences.
- Heshmati, Omran (2008) Examine the relationship between religious beliefs and mental health treatment in Iran's senior students of Medical Sciences, Master Thesis, University of Medical Sciences
- Kaplan, Harold and Sadvk, Benjamin. (2007). Summary of Clinical Psychiatry
- Kaplan, Harold and Sadvk, Benjamin. (2008) Summary of Clinical Psychiatry, Volume 2
- Karatas, Z. & Gokcakan Z.(2009). A Comparative Investigation of the Effects of Cognitive-Behavioral Group Practices and Psychodrama on Adolescent Aggression. journal Kuram ve Uygulamada Egitim Bilimleri / Educational Sciences: Theory & Practice. vol: 9(3). pp: 1452-1441
- Labafinejad, Yaser, Bosaghzadeh, Asieh (2012) Prevalence of anxiety and its influencing factors among female students of Tehran University of Medical Sciences Journal of General Medicine Applied Health Volume 9, Number 3, pp14-25.
- Lee Mai 1994, character
- Letafati Beris, Amin (2009) Theorists mental health, psychotherapy 76 new quarterly, year XVI, number 55.
- Milanifar, Behrouz (2007), Mental Health, Tehran, Ghomes Pub

- Moharerir, Mohamadreza (2009) Journal of Thought and Behavior, Journal of Psychiatry and Clinical Psychology, Vol. I, No. 2 and No. 3, Fall and Winter (2009).
- Narimani Mohammad, Aghamohamadian Hamidreza, Rajabi Souran, (2011) Mental health of mothers of children with mental health exception to normal children Journal of Mental Health, No. 33 and 34, S15-24.
- P. Lawrence, John, Oliver. (2007). Personality Psychology
- Panahi Shahri, Mahmoud, 2008, A preliminary study of the reliability and credibility of state and trait anxiety inventory forms. MA thesis. Tarbiat Modarres University.
- Paul and Andayt. 2009. Stress and Anxiety Coping Methods
- Phil Jones (1995) Theatrical health and lives
- Pourafkari, Nosrat, Summary psychiatric .thran: Shahrabi. fourth edition
- Rahiminia, Abbas (2005) The relationship between psychological need satisfaction level of children and adolescents mental Baslamt family adaptation, family pathology congress abstracts, Tehran, Shahid Beheshti University.
- Roshan, Rasoul; Shoeiri Mohamadreza; Atrifard Mahdieh; Nikkhah Akbar; Ghaemmaghani Bahareh; Rahimi Rad Akram (2006) Evaluate the psychometric properties of "5-Factor Personality Inventory NEO", Journal of Scientific Research, Shahed University, in Issue 16.
- Ross, Alan A. (2003), personality psychology
- Saoundi Peter's (2002) theory of modern theater
- Schultz, Devon (1990) Theories of Personality
- Schultz, Devon, Schultz, Sydney Allen (1998) Theories of Personality
- Shamlo Saeid (2010) Mental Health, Tehran, ROSHD Pub
- Shamlo, Saeid (2003) Schools theory in personality psychology, Tehran, growth seventh edition, pp. 174-187.
- Shoarinejad, Aliakbar (1991) Developmental Psychology, Tehran, ETELAAT Pub , published XVI
- Shoarinejad, Aliakbar (2007) Developmental Psychology, Tehran, ETELAAT Pub , published XVI
- Shokri Omid; Khodayi Ali; Daneshvarpour Zahreh, Toulabi Saeid, Fouladvand, Khadijeh (2009) Thinking styles and five big personality traits, Journal of Behavioral Sciences, Volume 3, Issue 4, Pages 286-279.
- Zare, M. ; Shafiabadi, A. ; Navabinejad, Sh. ;Sharefi, H.(2007).Comparing influence of feeling intellectual group counseling, behavior,and style of psychodrama counseling to increase general health and excitement expression of visited women.Iranian psychologists section; vol:4(13); pp:25-41.
- Zeynali, Shirin, Eshraghian Parvaneh; Beyrami Mansour (2014) A comparative study of personality factors and mental health to heart disease and normal subjects, cross-Journal, Issue 42 pp 41-45.