

Strategic Mitigation of Depression through the Instrumentality of Critical and Positive Thinking for Mental Health

Abstract

Negative thinking breeds as well as paves way for depression, a perplexed state of mind leading to disorders, chronic health issues, sudden death and suicide among individuals. The aim of this study is to show that positive thinking (PT) is a strategy for mitigating depression. Data were sourced from 150 oral respondents, observation, and library and internet textual materials. Mixed methods, techniques and tools were used to analyse the data. The study is anchored on Asouzu's Theory of Noetic Propaedeutic (TNP), which explains how mind concealment negates realities and magnifies situations to transcend into depression, as a result of negative thoughts. The analysis proves critical thinking to be the base of positive thinking, which produces positive and creative thoughts for the individual to mitigate depression. Positive thinking, a concern of positive psychology, is affirmed to be a viable strategy for mitigating depression to a very large extent. Regrettably, PT is currently used at an unappreciable extent. The study concludes that depression is increasingly alarming, particularly among young people, because many individuals fail to think critically and positively in order to manoeuvre depression.

Keywords: Positive thinking, Depression, Critical thinking, Strategy, Mitigation

Introduction

Repetitive negative thoughts are results of a cognitive process of repetitive self-centred thinking (Segerstrom et al., 2003). Negative thinking, the opposite of positive thinking, grounds repetitive self-centred thinking that magnifies certain issues into depression, stress and/or other socio-psychological and health issues. Studies confirm negative thoughts to be responsible for many disorders, and thereby consider positive thinking as the panacea (Mahmoudfakhe et al., 2021; Palmieri et al., 2021; Zhao et al., 2019; Bekhet & Garnier-Villarreal, 2018; Topper et al., 2014; Watkins, 2011; Joormann et al., 2006; Segerstrom et al., 2003; among others). In this bubbling contemporary era, depression is now on the high increase among youths and adults alike, though with youths being the highest victims. It accounts for suicide, sudden death and various chronic ailments or health challenges (McCarty, Violette & McCauley, 2011; Fergusson et al., 2005; Costello et al., 2002; Weissman et al., 1999).

This study seeks to prove its argument that positive thinking, rooted in critical thinking, is one viable strategy for mitigating depression. Its other central argument is that many persons (tend to) often disregard PT strategy and look for treatment or prevention remedy elsewhere. For this reason, it shall empirically determine from primary data the extent to which PT is currently used. The unique scholastic intervention of this study is the intended task of dissecting the viability of positive thinking in mitigating depression in relation to critical thinking, with a view showing the latter (critical thinking) as the base and minimal pair of the former (positive thinking). In other words, the present study intends to show that positive thinking, which is borne from critical thinking, is capable of mitigating depression. It also seeks to argue and show that any workable measures or strategies for containing depression are products of positive thoughts borne out of

critical thinking. Apart from proving PT to be a viable strategy for mitigating depression, the extent to which it serves this purpose and to which it is used shall be determined by the study.

Aim and Objectives

The aim of this study is to show descriptively and statistically that positive thinking (PT) can mitigate depression. Its specific objectives are to:

- (i) Ascertain whether or not positive thinking (PT) can serve as a strategy for mitigating depression;
- (ii) Determine the extent to which PT can serve as a strategy for mitigating depression;
- (iii) Establish the extent to which (depressed) people use it to mitigate depression.

Research Questions

The following research questions are designed to guide the study:

- (i) Can positive thinking (PT) serve as a strategy for mitigating depression?
- (ii) To what extent can PT serve as a strategy for mitigating depression?
- (iii) To what extent do (depressed) people use it to mitigate depression?

Perspectives on Critical and Positive Thinking, and Depression

This study considers critical thinking to be the base of positive thinking. The concept of critical thinking describes the act of being active, persistent, careful and considerate about any act, practice, belief or supposed form of knowledge as regard the grounds that support it, and the further conclusions to which it tends to (Nwode, 2022; Besong, 2021). For this study, critical thinking (CT) is the act of engaging in in-depth logical or rational reflection on situations, events, life, and ways of life, phenomena, problems, mis/deeds, health and ill-health, conflict, relationship, behaviour, re/actions, etc. in order to form well reasoned opinions about them.

Nwode (2022) is of the opinion that critical thinking skills are needed for productive, refined, innovative and interactive learning. This present study adds that CT is also needed for positive and creative thinking. The skills of CT make one to think and act positively and showcase creativity. Besong (2021) points out the following benefits of critical thinking:

- (i) CT betters our own humanity and that of other persons in general;
- (ii) With it, discoveries, innovations and new world orders are made;
- (iii) It makes us to remain steadfast in pursuing our dreams;
- (iv) CT makes one to refuse to give up on anything, no matter the situation;
- (v) With CT, individuals keep on pushing harder and harder in life until they attain success and greatness or realise their dreams;
- (vi) CT makes it possible for us to endure and be tougher than tough times;

(vii) CT causes significant changes in various regards.

Again, several scholars agree that CT has several other benefits. They are of the opinion that with critical thinking, we rely on ourselves, while at the same time relying on others; show wisdom, innate knowledge, understanding and intellectuality; express positive things about ourselves; accept ourselves as unique individuals, whether others accept us or not; and see the need for being resilient and self-dependent (Nwode, 2022; Robert, Besong & Danjuma, 2022; Besong, 2021; Moore, 2021; Baumeister, 1987).

Positive thinking (PT), as Olan-Shimon and Gasselin (2011) note, is the process by which the mind of an individual focuses or reflects on positive, constructive and good things, and thereby expels the otherwise things, such as negative or destructive thoughts and emotions. For this study, positive thinking (PT) refers to the sustained or occasional good mental reflections on self, others, and life with its entirety. Thinking positively is extremely beneficial to everyone who thinks as such. Among others, PT is characterised by optimism, which sees reasons to be optimistic at all times, even while facing the worst of life that one could ever face. This is basically why some persons face the severest difficulties and predicaments of life without being depressed, whereas others suffering or facing some similar or less severe ones get depressed, or even commit suicide.

The person who thinks positively either hardly gets depressed or easily manoeuvres the hard situations that could cause depression. Meanwhile, the same hard situations cause some other persons depression. That is to say, the persons who are susceptible to depression are those who seldom (do not) think positively. Also, it is an indisputable fact that positive thinking (PT) is informed or grounded by critical thinking (CT). One who thinks critically sees the need to be positive minded about issues. For instance, with critical reflections on looming life issues and realising that pessimism is not working out any result, one becomes poised to thinking positively. Critical thinking would make one know why they have to think positively and how to do so (Bisong, 2020).

Given the above affirmed reality, it is quite true that critical thinking makes it possible for one who feels depressed, or suffers depression, to know why and how s/he should think positively about the issues at stake, which cause him/her depression. In the course of doing so, the positive thinking used by the person(s) as a strategy thereby enables them to face the situations head-on. With critical thinking, a depressed, or one getting depressed, would undoubtedly know 'how to think' rather than 'what to think' about the issues at stake, in such ways that either s/he would escape (prevent) depression or surmount it (Bisong, 2020, p. 33). According Bisong (2020, p. 33), 'the aim of critical thinking is to promote independent assessment, personal autonomy and reasoned judgement in thought and action.'

Considering the said aim of critical thinking, it follows that the aim of deploying CT in addressing depression is to rouse and promote PT about situations warranting depression;

independent assessment of the situations; taking control of the issues at stake or the depression; and having a reasoned judgement in thoughts and actions about depression and factors behind it. The essence is to approach depression and its associate issues with rationality, in-depth evaluation and well thought out solutions to the issues rousing or culminating to depression. From the foregoing analogy, it is quite agreeable that critical thinking is the base of positive thinking. Both of them are the base of creative thinking, positive thoughts and productive thoughts, actions and deeds, with which depression and the likes are handled or surmounted.

It is imperative to note that persons of all ages, who suffer depression, are proven to have less adaptive and more limited coping repertoires in comparison with those without depression (Garnefski et al., 2002; Goodwin, 2006). For instance, persons, particularly youths, with depression are likely bound to use less primary control and secondary control (McCarty, Violette & McCauley, 2011). Primary control includes 'efforts to cope by making objective conditions conform to one's wishes,' while secondary control includes 'efforts to cope by adjusting oneself to fit objective conditions' (McCarty, Violette & McCauley, 2011, p. 3). Certain cognitive factors, as life styles, are distinct features susceptible to depression. These include excessive negative thoughts and low levels of perceived control (Weisz, Southam-Gerow & McCarty, 2001; McCarty et al., 2008). The implication is that these and other cognitive factors ground the development or rise of depression.

Apart from cognitive, social and environmental factors responsible for depression, there are other risk factors for the development of depression among youths and even adults (Sander & McCarty, 2005). These include poor parent-child relationships and family communication as well as other familial issues putting up pressure on individuals, as members of their respective families. It is quite obvious that there are studies on depression, which have confirmed the viability as well as efficacy of positive thinking as a strategy for mitigating depression. And, such studies also advocate sustained and effective use of this strategy. Nevertheless, such studies or most of them leave out critical thinking as the base and minimal pair of this strategy for mitigating depression. By minimal pair, this study means that positive thinking and critical thinking combine as a functional cognitive pair of complementary phenomena. The presence, operation and functionality of one require those of the other. Each of them relies on, and interacts and correlates with the other.

Theoretical Framework

This study is anchored on Asouzu's (2003, 2007 & 2011) philosophical theory of Noetic Propaedeutic (TNP hereafter). TNP theorises the phenomenon of concealment, being what causes the mental negation of realities and the magnification of situations such as those that cause or heighten depression. Asouzu (2011, p. 95) postulates that the phenomenon of concealment is 'one of the major impediments' to 'objectivity and progress in our society'. He states that concealment is 'the thing that impairs vision' or 'the thing that covers the eyes' (Asouzu, 2011, p. 95). This phenomenon is affirmed to manifest in various or even all human

existential situations (Udoh, 2016; Asouzu, 2011). In the context of this study, it follows that the vision about positive thinking and positive realities is impaired or covered by the phenomenon of concealment.

The positive realities of the depressive or frustrating situations are most often made negative by negative thinking. Thus, since depression is an issue concerning the mind, TNP is adopted as a model that offers the mind training that would get rid of negative thoughts and reposition the trained mind with positive thoughts. Of course, positive thoughts do not pave way for depression. Noetic propaedeutic is affirmed to be a viable theoretical mechanism for dealing with various situations and problems of life. Udoh (2016, p. 5) agrees to this position, when he says that 'Asouzu's Noetic Propaedeutic is needed to effectively and objectively manage and address issues of tribalism, nepotism, religious sentiments and political affiliations' in Nigeria as well as beyond. If Noetic Propaedeutic deals appropriately with issues arising from concealment, such as the aforementioned, it could also deal with issues of depression that have traces to the mind.

The negative tendency rising from 'inherent primitive instinct of self-preservation' (Asouzu, 2003, p. 15) makes individuals to magnify certain situations with negative thoughts until they get to depression state or the enabling factors of depression. According to Asouzu (2003, pp. 15-6), the self-interest preservation attempts present a paradox in that as one tries to preserve his or her interest, they undertake things that rather lead to or bring to place their own destruction. The opposite of what is intended is realised in the end. He regrets that humans are confronted with the challenge of dealing with the ambivalence of human interest (Asouzu, 2003, p. 15). Asouzu (2003, p. 15) suggests that noetic propaedeutic is the panacea for concealment, being a model with which the trained mind becomes and remains positive, critical, refined, truthful, humane, healthy, and receptive to others that concealment repels.

As Asouzu (2011, p. 95) notes, concealment has the adverse effect of beclouding our intellect, twisting our consciousness, and inducing us to misperceive and misinterpret situations. This postulation highlights how concealment makes individuals susceptible to depression and the like situations that could be ordinarily surmounted if concealment does not exert its effects on the mind of those involved. Asouzu maintains that critical thinking (philosophising) should be based on the mental harmonising faculty, which ensures equilibration or harmonisation of existential differences that are harboured in the mind (Asouzu, 2007a, p. 323). The act of harmonising the mental faculty harmonises all factors or forces that tend toward divisiveness, polarisation and exclusiveness by controlling the ambivalent-laden existential situations, and ensures that the phenomenon of concealment does not make the mind go a unilateral way. It ensures that concealment does not turn intelligence and wisdom hegemonic but remain positive (Asouzu, 2007a, p.323-4).

Asouzu (2007a, p. 323-4) avers that the mind can never err culpably if it acts in harmony to the dictates of these categories, which include fragmentation (relativity), unity, totality, universality, comprehensiveness, wholeness and future reference. Where the categories are made active by the

harmonising faculty, the mind would have the capacity to adhere to the demands of the principle of non-contradiction (Asouzu, 2007b, p. 241). The solution to concealment is thus the harmonisation of the mental faculty. When it clears the mind of concealment, it enables the transcendent categories to remain active, known as 'complementary transcendent existential conversion' (Asouzu, 2007a, p. 329). At this point, Asouzu's espoused mind training is attained. Such a trained mind is positive about life, self and others, situations, difficulties and what have you. Upon the conversion, individuals undergo the harmonisation of the mind with the transcendent categories of being in a non-contradictory manner (Asouzu, 2007a, pp. 328-9). It is at this point that virtues, positive thoughts, etc. take precedence over all the otherwise opposites, such as negative thoughts (Asouzu, 2007a/b & 2011).

Seligman and Csikszentmihalyi (2014), among others, confirm that since everything originates from human's mind, where thoughts are conceived, humans are made by and suffer from what their thoughts put up. Be it so, it follows that depression and the likes are products of thoughts, conceived in the mind and allowed to manifest inwardly in and outwardly on the body. That is why one emaciates whenever s/he seriously engages in negative thoughts, which are usually unproductive. The thoughts for evils are results of negative thoughts, while those for morals and virtues are manifestations of positive thoughts. This assertion highlights the dire need for positive rather than negative thinking. One, who thinks and forms the ontology 'I can never be depressed, no matter what,' is bound remain and live above depression, by virtue of his/her consistent positive deeds that avert or overcome depression or any other like situations. Thus, it is a question of mind training by the individual, as to what thoughts to form and internalise perpetually and those not to.

In order for the mind to be or remain so, it has to be trained to expel the negative mental activities that blur it from being positive. The phenomenon of concealment, espoused by Asouzu (2007a/b, 2011, 2012 and 2017), is one of such mental activities to get rid of right in the mind. One has to be positive minded, increase the awareness of thoughts and actions, be positively decisive, and admit faults without self condemnation but adjustment (Peterson et al., 2009). PT is a way of teaching self and/or others how to adapt to even the most unbearable conditions of life without compounding them with negative thoughts (Mahmoudfakhe et al., 2021). Positive thinking produces positive thoughts, which thereby bring forth peace of mind and body (Seligman, 2007). Even beliefs are products of human thoughts, which have got institutionalised. Thus, training the mind to be positive and critical is extremely beneficial. This is simply because the mind of the positive thinking person focuses on positive, constructive and good things (Esmaili-Douki, Elyasi & Hasanzadeh, 2019; Simon & Gasselin, 2011) and finds hope and solution in even the worst situations of life.

Having positive thinking sessions with depressed people, the getting depressed or those suffering various disorders, health challenges and life predicaments can help reduce their worries, anxieties, sadness, etc. This assertion is proven true by Rezaei, Oladrostam and Nematollahi (2017), who show that positive thinking sessions reduce perceived stress and have an increasing

effect on happiness in patients with thalassemia major. In the same vein, Mahmoudfakhe et al. (2021) and Esmaeili-Douki, Elyasi and Hasanzadeh (2019) confirm that positive thinking training reduces stress, anxiety and depression in patients with coronary heart disease. It is quite interesting that these recent studies, among others, confirm the efficacy of PT in depression and the likes.

Related Studies

The effect of repetitive negative thoughts on various disorders has been reported by different studies. Negative thoughts are found to have adverse effect on eating and thereby cause eating disorder (Palmieri et al., 2021). The study carried out by Topper et al. (2014) reveals that people with mental disorders often think about their problems or negative experiences, with the thoughts about their experiences being so difficult to control. The effect of negative thoughts in depressive disorders is reported by Watkins (2011). Other disorders associated with repetitive negative thoughts include anxiety disorders, e.g. social anxiety (Joormann et al., 2006); obsessive-compulsive disorder (Abramowitz et al., 2003); panic disorder (Eccleston et al., 2001); and post-traumatic stress disorder (Clohessy & Ehlers, 1999).

The findings of the study carried out by Day and Thorn (2017) show that positive thinking is a multifaceted way of dealing with emotions and distress, including depression. Considering their findings, Mahmoudfakhe et al. (2021) emphasise the dire to engage in positive thinking and do away with negative thoughts. They agree that to engage in and sustain PT as such, one has to consistently engage in exercises, effective interpersonal and intergroup communication, smooth and healthy relationships, positive, critical and creative learning, using faulting skills, imbibing and putting into practice the positive approach of positive psychology, and so on. Positive psychology is a recently emerged branch of psychology that studies human strength and happiness (Dastgheib, Alizadeh & Farrokhi, 2012).

It is observed that the age of first onset of depression has become younger, yet many adolescents with depressive symptoms remain untreated (Weissman, 1987). This observation highlights the category of persons that are most susceptible to depression. It also highlights the fact that those vulnerable to depression are mostly left untreated. Similarly, Wickramaratne et al. (1989) held that depression is rampant among adolescents. This statement also highlights the category of persons that are most susceptible to depression. Nevertheless, there might be a change to that from time to time. The study by Jung et al. (2016) reveals that positive thinking is negatively correlated with depression. This implies that positive thinking, which does not correlate with depression, usually works against depression. Naseem and Khalid (2010) hold that PT is one of the ways of coping with stress, anxiety and depression. By their observation, it is quite clear that PT does not only help one to overcome depression, but stress and anxiety too. The implication of their observation is that PT is a viable mechanism for containing depression, pressure, stress, anxiety, trauma and other psychological and behavioural issues.

As Sin and Lyubomirsky (2009) have shown in their meta-analysis of 51 positive interventions, positive interventions have moderate effect on depression, as well-being is enhanced, and depression is alleviated. Different intervention programmes have been developed to treat and prevent adolescent depression. These usually involve borrowing strategies from cognitive behavioural therapy and focusing on changing the overly negative and unrealistic thoughts of participants (Thapar et al., 2012). It is quite clear that PT is one way of dealing with depression, because it is a viable means of changing the overly negative and unrealistic thoughts of participants. Parks and Biswas-Diener (2013) have noted that different interventions were developed and tested under rigorous experiments, based on the findings of studies in positive psychology.

Positive psychology has offered a better insight to positive interventions in depression matters. Studies in positive psychology look into human features such as positive emotions, character strengths, engagement, and positive social institutes (Seligman and Csikszentmihalyi, 2014; Sheldon and King, 2001). Positive psychology interventions (PPIs) are intentional activities or treatment methods devised to ensure, rouse and instil in individuals positive traits, such as positive attitude, perception, psychological and behavioural ideals, views, thoughts, skills and cognitions, in order to either avert depression and/or the like or heal one of depression, trauma and the likes (Sin & Lyubomirsky, 2009). Focusing on positive emotions, characteristics and situations, the study done by Schueller and Parks (2012) confirms positive psychology to be a good tool for a good life. This reality captures positive thinking as such a tool too. These aspects of positive psychology are noted to increase psychological well-being (Schueller & Parks, 2012). PT is an aspect and a concern of positive psychology.

Damreihani et al. (2018) confirm that positive intervention has been effective in increasing mental well-being, hope, life satisfaction and meaning of life. It follows that PT is a positive intervention (i.e. an aspect of positive intervention). Nevertheless, in their study on a few randomised controlled trials in positive thinking training, Celano et al. (2017) show conflicting results. In comparison with positive psychology, cognition-focused intervention was found to be associated with significantly greater improvements in hopelessness at six weeks and improvements in depression, suicidal ideation, optimism, and gratitude at six and twelve weeks (Celano et al., 2017). Motamed-Jahromi, Fereidouni and Dehghan (2017) discovered that the therapeutic package of PT provided some cognitive and behavioural skills for participants or depressed persons.

Methodology

The mixed methods of data collection and analysis were employed. Thus, qualitative and quantitative, empirical and positional, and survey design and quasi-experimental methods were combined. Content analysis, four-scale coding, objectivity, percentage, tables, figures and other allied techniques and suitable tools were employed. The primary data were drawn from

observation and responses from 150 randomly selected respondents across Abakaliki, Ebony State, South-East, Nigeria.

Out of the 150, 40 students (20 each) of Psychology and Nursing, Ebony State University, Abakaliki were involved in the studies. These students are professionally and experientially familiar with the research topic. That is the rationale behind involving them. 50 male and female respondents were drawn from markets, where different persons with varied life burdens and issues are found in high numbers. The other 60 respondents were randomly got from the Psychiatry Department of the Federal Medical Centre (FMC), Abakaliki. Here, 20 staff and 40 patients were involved in the study. With the mixed methods, techniques and tools adopted, reliable firsthand data were sourced. The data gathered were subjected to critical discourse analysis, using content analysis and the adopted techniques and tools.

Presentation and Analysis of Data of Research Questions

Here, the data from field survey on the three research questions are presented and analysed accordingly. The results realised about each of the questions constitute the empirical findings gathered on the subject matter of discourse of the study.

Research Question 1: Do you agree that positive thinking can serve (PT) as a strategy for mitigating depression?

Variables	No of Responses	Percentage
Strongly Agreed	105	70
Agreed	18	12
Strongly Disagreed	—	—
Disagreed	27	18
Total	150	100%

Source: Researcher's Field Survey, 2022

Put together, 123 of 82% respondents confirmed positive thinking to be a strategy for mitigating depression. The implication of this result is that thinking negatively about difficult situations leads to or aggravates depression. On the contrary, thinking positively about same (or such) situations either prevents or gets rid of depression. Being positive minded gives no room for depression, since the mind is occupied with positive thoughts. Clearly, depression arises from negative thoughts about hard situations. The situations in themselves do not get one depressed, What get one depressed are the thoughts about them, which cause emotional tension, trauma, pain, hurtfulness, heartbreak, uncertainty, discouragement, loss, recluse, incommunicado, feelings of disappointment and shame, and what have you.

In contrast, 27 of 18% respondents held otherwise that positive thinking cannot be a strategy for mitigating depression. The implication of this otherwise claim is that these respondents felt that PT in itself cannot mitigate depression. If so be their thought or the base of their thought, it means that they failed to realise that any positive and feasible measures that handle depression are products of PT borne out of CT. That is, to come up with positive ways of (measures for) containing depression, one has to think critically and positively for creative, valuable and productive results. These results are what constitute any kind of attestable positive measures for containing depression. Based on the above results, this study hypothesises that PT can aptly serve as a strategy for mitigating depression. This is because from the data got, it is quite clear that the people considered PT as a strategy for mitigating depression. The above results validate the stated hypothesis.

Research Question 2: To what extent can positive thinking (PT) mitigate depression?

Variables	No of Responses	Percentage
Very Large Extent	95	63.3
Large Extent	28	18.7
Very Small Extent	—	—
Small Extent	27	18
Total	150	100%

Source: Researcher’s Field Survey, 2022

Data in the above table confirm the extent to which PT can serve as a strategy for mitigating depression. Accordingly, 95 of 63.3% respondents said PT can mitigate depression to a very large extent. They were supported by 28 of 18.7% respondents, who indicated ‘Large Extent’ rather than any other variable. It means that the two sets of respondents confirmed the extent to which PT can mitigate depression. They were 123 respondents, representing 82% of the total. This ratio makes the responses indicating otherwise to be inconsequential. The inconsequential responses were 28 of 18.7%. Given the above, this study hypothesises that PT is a viable strategy for mitigating depression to a very large extent.

Research Question 3: To what extent do (depressed) people use PT to mitigate depression?

Variables	No of Responses	Percentage
Very Large Extent	—	—
Large Extent	—	—

Very Small Extent	98	65.3
Small Extent	52	34.7
Total	150	100%

Source: Researcher's Field Survey, 2022

From the above table, it is quite clear that despite the viability as well as efficacy of PT in mitigating depression, many people fail or see no need to use it. The implication of this assertion is that supposing many persons resort to using PT, they would be able to surmount pressure and difficult situations that cause depression. The extent to which people use PT is currently very low. That is why 98 of 65.3% respondents indicated that the extent of PT usage for mitigating depression was very small or low. This response ratio was supported by 52 (34.7%) of the 150 (100%) respondents, who indicated that the extent of usage is currently insignificant.

The usage being to a very small extent implies being insignificant. Thus, consistent public awareness campaign on both old and new media, stressing the need for using PT to contain depression, is required to increase the usage of PT for mitigating depression. Increasing the use of PT could also be done through face-to-face sensitisation of different persons by psychiatrists, psychologists, nurses, doctors, therapists, guidance and counsellors, and other like professionals. Doing so would rouse the consciousness of many to the use of PT to contain depression.

Presentation and Analysis of Testimonial Data

While statistical analysis with its tools was employed in presenting and analysing the above data on the research questions, descriptive analysis with its tools will be used in presenting and analysing the testimonial data gathered at fieldwork. To start with here are several hypothetical postulations. With PT, even the poorest of the poor or the most plagued with hard situations, would undoubtedly remain hopeful, steadfast and optimistic. It is just a question of training or repositioning one's mind to be positive rather than negative. Of course, life presents two opposites to every individual and so one has to be pessimistic while being optimistic. This is to avoid being taken unawares by eventualities that could lead to depression. It is said that variety is the spice of life. As such realising and internalising the reality that life can never be all smooth and free of predicaments would keep one forearmed for eventualities. For example, having it at the back of one's mind that a smooth, loving and pleasing relationship could turn otherwise at the slightest moment someday would forearm one ahead of any possible relationship eventualities. Being forearmed, the party at the receiving end of the relationship eventualities would be able to surmount the odd happening(s) without getting depressed.

Let us consider the testimony of one married woman, who applied PT strategy to surmount the pressure and likely depression that (would have) accompanied her husband's act of infidelity. A married woman whose husband cheats or flirts about can overcome the pain of her husband's extra-marital affairs if she deploys and steadily applies positive thinking strategy. Recently,

social media spread news of the tragedy that befell a wife in Calabar, who never resorted to applying positive thinking to the situation of her husband's extra-marital affairs. Her negative thinking about the situation made her miss the right approach to resolving the problem. She took the wrong option, which led to her death. While tracking her husband, who was driving with his girlfriend, the woman lost control of the vehicle she was driving behind her husband's and had a ghastly motor accident that claimed her life. The loss of control might be as a result of her outside mindedness, a symptom of depression.

Positive thinking, borne out of critical thinking, would have made her to realise some facts. She would have realised that no woman can take her real place in her husband's life as long as she is alive, but if dies, that same woman would immediately take her place in her husband's life. Having this thought would have made her to take well-reasoned and non-violent actions. Talking to the man repeatedly in a polite manner, and finding out his reasons for cheating would have possibly changed the man. Nagging over only fuels the act to the brim. Also, positive thinking would have made her to realise that being extremely worried about her husband's act of infidelity could lead her to ruin or ill-health (e.g. hypertension, heart attack, heart failure, stroke, etc:).

But she never adopted positive thinking, because she never thought of the whole situation critically. Critical thinking would have engendered positive thinking in her. Unfortunately, she hadn't this skill and never developed it, or trained her mind to be optimistic that things will turn around someday. Critical thinking and positive thinking would have made her to realise that no man or woman, who cheats do so forever without getting tired someday. Positive thinking would have also made her to realise that instead of taking drastic actions that would affect her health, prestige or social status or cause her death, divorce would be the alternative remedy someday. Certainly, if prayers, family, friends or clerics could not change him, divorce would be a better alternative. If the man wanted her dearly, he would rather change than divorce her at that point in time. Obviously, it would have been better if that late woman in Calabar divorced the man than losing her precious life in the course of tracking him in the act of cheating on her. Being divorced and alive means still being with as well as being there for her children, siblings, parent, friends, associates and what have you. But being dead means everything about her had ended the very day she died.

The essence of the above reflection is to highlight the imperative of thinking critically about difficult situations that pressure and tense someone up, and employing PT strategy to surmount or address the situations. PT strategy has a lot to it, which include viable positive measures. She testified how she practically demonstrated the application of positive thinking, borne out of critical thinking along with positive measures, to critical marital situation that would have got her depressed, sick, out of marriage and/or dead, if she had exhibited or held on to negative thinking and measures.

Conclusion

So far, this study has shown that positive thinking (PT) is a viable strategy for mitigating depression. It has also shown that PT is borne out of critical thinking (CT). Both PT and CT give rise to or allow for positive thoughts and actions that give no room for the occurrence of depression. The study demonstrates that depression is of cognitive processes and so preventing or surmounting (getting healed) of it requires being positive minded and training the mind to be positive, productive and creative rather than the otherwise. The otherwise mind is a fertile ground for depression. The study teaches that those who resort to negative rather than positive thinking are susceptible to depression and other like disorders arising from mental tension and imbalance.

On the whole, the study has confirmed that PT is a viable strategy for mitigating depression and other like disorders. It is capable of serving as such to a very large extent. The problem is that its usage for mitigating depression is still insignificant (to a very small extent). This is because many undermine the efficacy of positive thinking. They allow themselves to be overwhelmed by negative thoughts and most often resort to applying negative measures that rather worsen the situations warranting depression and other issues. Given the foregoing, the study concludes that depression is increasingly alarming, particularly among young people, because of its poor or neglected use as a viable strategy to mitigate depression.

Recommendations

The following recommendations are made:

- (i) Sustained awareness campaigns should be made by government, the media, corporate organisations, professionals in medical, health, psychology, psychiatric, guidance and counselling education fields, etc. on the dire need for and the benefits of positive thinking, particularly when overwhelmed by difficulties and frustrating situations of life. The campaigns would impact on the masses in various regards.
- (ii) Patients of various disorders and depressed persons should be trained how to think positively and thereby surmount various issues that could cause depression and various other disorders. The training, like the public sensitisation, should tell the stories of those who successfully manoeuvre their critical situations with PT and CT (e.g. Mrs Beatrice above) and those who died or became ill as a result of negative thinking.
- (iii) Experts should take up the task of arming individuals with how to manage stress and various issues that are capable of metamorphosing into depression and the like disorders. Agents of socialisation have to shoulder the task with all level of commitment.

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