# Optimism in the Youth Mental Health Online Counselling Environment

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*Abstract*— **Optimism is part of positive mental health that is very important for achieving prosperity. Teenagers who have high optimism have a tendency to believe in expecting the best in their lives. But in the social development of adolescents is still questionable. The purpose of this study is to try to find out the experiences of adolescents in the school environment to be optimistic and to be able to inform intervention strategies aimed at improving the positive mental health of adolescents in schools through the online counselling environment approach. This study uses a mixed-method approach with a quantitative primary quasi-experimental strategy. The study sample involved 89 teenage students aged 16-20 years. Findings from the research results show that adolescents have low optimism when online counselling is given, optimism has a positive relationship with mental health. All of these results have implications for online counsellors in the future, especially for treatment in adolescence.**

*Keywords*: *optimism, mental health, counselling environment*

## I. INTRODUCTION

Optimism is the most important thing to achieve prosperity [1]. Optimism is defined as the inclination and belief to anticipate what best will come [2]. The benefits of optimism are very important for someone's physical health as well as life accomplishment [3]. Although considered a trait, optimism can change throughout the whole journey and experience of life and can be implanted also fostered through the provision of interventions [1]. Optimism is even analyzed as a protective factor for someone in adapting to his/her life situations involving risks and difficulties [4].

Optimism is very important as something positive in childhood and adolescence [2]. This study aims to find out the experiences of adolescents in the school environment to be optimistic and to be able to inform intervention strategies aimed at improving the positive mental health of adolescents in schools.

Simultaneously and over time. In particular, we analyze optimism in adolescents at the school level. We gather students on each variable and are examined at the school level. We focus on the social experience of adolescents in schools due to the important role of the school surrounding the development of youth [5]. As children step into adolescence, relationships with friends and old people outside the home are increasingly instrumental in shaping positive character development in optimistic attitudes [6]. We concentrate on adolescence aged 16 to 20 years because they have formative time in the development marked by a transition period in social relations [6].

This research expands on the study of optimism in youth in some ways. Firstly, through a cross-sectional way that connects adolescent optimism early with the wider on the various ecology inside and outside of school [7]. Previous studies have explained adolescent optimism early through individualized behavior [7], but it is very little to explain the optimism of the youth in the social environment of the school. This research provides an opportunity to simultaneously consider individual factors and the school environment. Therefore, analysis of social relations at the school level and predictions of adolescent optimism can reveal whether the contextual climate of students in schools is related to positive mental health for their individuals

A small but growing study has begun to investigate the effectiveness of online counselling [8]. Services that provide a process of assistance that prioritizes potentially safer privacy and emotionality, so young people can feel comfortable in expressing various mental health problems [9]. Moreover, wider audiences can be reached as well as those who uncomfortable with and who may not be able to access the face-to-face services [10].

## II. OPTIMISM

Optimism is an indicator of mental health in adolescence. The study of optimism is informed in positive psychology [11]. Bringing positive psychology into schools aimed at creating an environment that stimulates the development of children and adolescents' health [11]. Positive psychology researchers seek to understand valuable and strength factors in the everyday life of young people which help them to develop [12]. Developmental system theory views human development as two directions, namely between individual and relational process contexts; Adaptive regulation between individuals and

context is very important for positive development and developing [13]. Schools are considered as the main context devoting to healthy and positive development in youth [14].

In particular, optimism in adolescence has been shown to be associated with high levels of psychological and subjective well-being[15], more adaptive health behaviors [16], having low symptoms of depression[16]. Most optimism researchers have learned ways of predicting positive development and health in life, and most importantly, is showing positive mental health [2]. This study reflects the perspective taken in this study. In particular, we focus on understanding the factors of social relationships in schools that may be related to children's optimism during the developmental stages of adolescence.

## III. METHOD

The samples in this study amounted to 89 teenagers between 16 and 20 years old. These teenagers are taking online teen web counselling services from January to May 2018. the recruitment of participants was done through WhatApp Web service, they were given some questions. The first question asks the age of them, "are you 16-20 years old and do you want to participate in surveys about your experience? After participants click the link, they read and approve the form approval. Then they complete the online survey. All participant participation is voluntary and they choose their own, however, there were incentives through the chance to win gift vouchers for unlimited online data packages for 2 months. Initially, there were 108 teenagers accessing online questionnaires, Unfortunately, 20 of them did not finish the survey, generating a response rate of 78.4%. It is unknown how many youths access the service during this time period. There are 68 (86.4%) Female and 20 (13.6%) Men, who are generally consistent with the demographics of other online services that show that about 80% of clients are women [17].

### A. Procedure

The services provided are online and give support to mental health friendly, confidential and give free information to adolescents at the age of 16 to 20 years. The services provided are linked to psychological, psychosocial, career, and issues of education. as long as the beginning session, the counselee was given supportive counselling services and psycho-education, with the aim that the counselee was more structured, oriented to problem-solving, motivating, and positive cognitive construction. Participants were told that they would do so, they were asked how their feeling about different aspects of their lives and their optimism about online chat counselling, and the survey would use the time about 10 to 15 minutes to finish.

### B. Measure

A questionnaire of self-report consisting of 32 items was developed to gather data related to demographics, optimistic counselling, psychological distress, and life satisfaction. These questions gather the information of the background about the gender of participants, age, location, and the number of previous online sessions attended.

The complete Optimism Scale (MDI) has six questions about demography, and 72 items about the development of social-emotional, the relation of socials with friends, old people, the experience in school, health, and prosperity, and using constructive time as long as hours after school [7]. MDI is based on the scale and items that have been validated and predetermined. The study has saved the psychometric properties of MDI which showing the evidence for scale reliability, structural factor, and convergent and discriminant validity, as well as construct validity [7] there are four items including questions such as " When I have a problem, I can find many ways to solve it'' were used measures goal-oriented- thinking. Respondents have answered the questions on a 6 point scale in every item (There is no time for all time), as well as the answers were averaged to score from 1 to 6. CHS-PTPB had shown the voice of psychometric nature, with the consistency of internal satisfying ( a 0.87) and the validity of convergent [18].

## IV. RESULTS

Preliminary analysis shows that the deviation standard for each variable is exhibited in two groups of age. They are under 18 years old who remain associated in institutions such as schools, and those over the age of 18. The average optimistic score proved to below. It shows below the middle point of the scale that ranges from 1 to 6. In contrast, the optimistic score was high, because the average score is above the midpoint scale ranging from 1 to 3. Whilst, the optimistic score was as similar as reported by Bickman et al [19]. For clinical samples of teens accessing face-to-face services, the confident mark was lower than the deviation of standard indicated by face-to-face clients.

The low score of optimism is significantly increasing with a cut-off 30, indicates severe psychological health [20]. The score for social relations is low. It averages below the mid-point scale from 1 to 5. Moreover, More than half the current sample of more than one deviation of a standard below average reported by Bickman et al [19] for a face-to-face sample.

Correlational analysis for measuring the size and direction of linear relationships between optimism, psychological pressure (mental health), and life satisfaction. The correlated analysis shows that optimism has a small positive correlation with optimism, a moderate negative correlation to the psychological distress, and a strong positive correlation with a life of satisfaction. Pearson (r) bivariate moment-product coefficient (r) according to Cohen (1988), r 0.1 can be considered on of small, r 0.3 can be considered moderate, and r 0.5 can be considered large. Moreover, hope has a small positive connection with the satisfaction of life, and the satisfaction of life has a strong negative correlation with the pressure of psychological.

In determining whether optimism varies depending on the number of online counselling received, two analyses of

one-way covariance tests (ANCOVA) are used to compare the value of optimism from the client's online chat to the amount of the existence of sessions. The distress of the psychological and satisfaction of life are controlled as covariates because they are closely related to the hopes. The number of sessions presented range from 0 to more than 5, with very positive results. As a result, Samples were divided into three groups of those attending zero sessions (49.7%), those who had attended between one and three sessions (23.8%), and those who had attended four or more sessions (26.5%). The results show that after mastering the health of mental effect (f (1, 1028), p < 001, partial h2 increasing 0.073) and wellbeing alive (f (1, 1028) and wellbeing of life (f (1, 1028) and wellbeing of life (f (1, 1028), measuring 204.54, p < 001, partial h2 0.166), optimism does not differ significantly according to the number of sessions attended. Similarly, for optimism, after controlling life satisfaction (f (1,1027)) significantly 25.85, p < 001, partial h2 0.025), there is no difference in optimism with the number of sessions attended.

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## V. DISCUSSION

This study aims at exploring the optimism as well as optimism of online counselling clients, their relationship with each other and the client's level of mental health and life satisfaction. The results show that online clients are presented with low levels of optimism, far lower than those reported in the face-to-face sample, although they report high optimism for the results of the counselling process, in accordance with face-to-face clients [19]. Optimism is associated with mental health and satisfaction of life, optimism has only a minor correlation with life satisfaction. Unexpectedly, optimism had almost no correlation, and the connections between all of them were weaker. There is no difference, however, in psychological pressures or a life of satisfaction that results from unharmonious optimism and optimism.

Finally, it was found that after controlling for mental health and life satisfaction, the number of sessions present did not have an impact on client optimism. This study shows clients online have a lower degree of optimism, which means that they may not believe that they can develop to achieve their goal [18]. The results previously supported the finding that the level of optimism is low. It is closely connected to the weak stage of mental health as well as the psychological compulsion and the lower stage of well- being [21].

Considering the relationship between optimism and achieving goals, mental health, and satisfaction of life, this finding should be a significant concern in the online process [22]. An online process to help clients achieve the goals required collaborative arrangements that aim to help increase high optimism [23].

When online processes have shown they are able to accomplish an aim, it can increase their mind in thinking, helping in establish and reach their own goals[24]. This is a hopeful indicator because positive optimism has been associated with better results [25]. However, an online counselor must realize the higher hopes were linked to their own hazard. Considering the high difficulty and low optimism levels reported by online members, their prospects regarding the results of the counselling process may be unrealistic. it is very important to realize, to consider about 30% of participants completed counselling after the beginning session [26]. And the first session of online chat counselling only reported basic effects [17]. Online counsellors need to manage client optimism by providing convincing reasons, providing educational results, and comparing client progress with the optimism that should be [27].

However, because this is a modality the emergence of client optimism and optimism may not be realistic as well as might not be constructed accurately by main beliefs, science and the norms of culture as well as might not be realistic. Online clients expect equal results from therapy but, because of the easy access, anonymity, and the absence from the online surroundings. the client does not have a high commitment to implement cognitive and behavioral changes. This is important for online consultants to manage client optimism, especially in the form of hope [28].

It has been anticipated that high client optimism plus a low level of expectation will signal incompatible cognition, resulting in further psychological discomfort in online counselling [29]. While two-thirds of the sample was found to have incompatible optimism, their level of psychological pressure was the same as people who held congruent optimism. It might be suggested that online clients did not find this belief in conflict and not pressured.

On the contrary, instead, the client sees online chat counselling from solving problems that cannot be solved alone. Online counsellors are expected to be able to regulate the pace of online chat and can restraint their ability to complete interventions [30]. Research has shown that online counsellors focus on developing relationships rather than completing assignments with adolescents [31] and if the online clients do not feel that it meets with their expectations, they can exit the service [32]. In particular, the results of online counselling show that reduction tends to be a fundamental result for adolescents. Moreover, adolescents did not have the ability to reach themselves. Therefore, they have a high hope which online service would assist them to accomplish a thing which can not do by themelves alone. It might be very important that online counselor make effort to decrease clients hope that are out of line and hope by helping teens reduce direct pressure, it can improve their agency, facilitate involment continuously as well as getting best result for the clients [28].

The results do not show differences in optimism according to the number of online counselling received, or differences in the level of psychological pressure associated with different amounts of service provision with differentiate number of service stock. The cross-sectional of current research, however, means it is impossible to determine the effects of more or less online counselling, as this requires a longitudinal study of changes over time. In this research, it is probably to attend more sessions on more serious issues, and this might have lowered hopes or their hopes. It may prove that the

psychological pressure level is equivalent to the number of access services.

## VI. IMPLICATIONS

Current research shows it may be uneasy for the counsellors to treat young people that use online help because they have less belief in themselves to get tips and achieve their goals, even, they hope to the doctors to overcome their problems. As long as, the session of introduction is probably important for doctors online to construct expectations on clients exposing entrusting reasons for care, increasing trust in doctors and clients, and providing realistic results education [27].

The confidence clients, their doctors, and the technique will be more motivated to involve with the care. Furthermore, it is essential for the youth who seek assistance to care the significant psychology, the improvement may not happen in sudden yet it will happen at the right time because it will be able to decrease the risk of the expectations of clients [32].

Therefore, it is very important that the online doctors handle the expectation of clients and give a positive experience to look for help that can improve the number of sessions that attending by the clients, and increase help-seeking agents for the future.

*Limitations and directions for further research*

There are some limitations that should remember when interpreting the results. While this research has given some insight into expectations and the expectation of online clients due to the cross-sectional of research design, the causal conclusions can not be explained clearly that there are no changes in client expectations and expectations in accordance with the number of sessions they attend. Moreover, being a naturalistic study, we cannot handle the factors of subjects for instance personality or preferences to seek online help, which might affect the results. The voluntary character of the participants may have introduced into some level bias in the findings, especially the high proportion of young women ( however, it reflects the services use pattern based on the gender).

Likewise, because of not being able to involve the members below the 16 years old limits the results of ability to be suitable with the service client profile. However, there is a benefit in doing online study is that allows us to get more members in general than recruit face to face. This study relies on the methods by self-report that may not too accurate for problems that are hugged or minimized. Although, the methods of self-reports are still a good method to collect the data about the feeling that is inherently subjective and the online participant generally as honest as paper and pencil for participants [33].

This study has presented a number of ways to identify and optimize adolescent mental health. This research recommendation explores collaborative client goals and manages client expectations. Specifically regarding online client optimism. While clients who have a healthy mentality

and are always optimistic, affect the results of counselling. Generally, the level of mental health that is not aligned is reported by clients online, future research must find out whether this discrepancy affects the results of online counselling. The last, the future study needs to be investigated to the sophistication of the clients in time changes.

## VII. CONCLUSION

The study at this time has discovered mental health clients in chatting online, a general factor influencing the counselling process has not been discovered yet in an online environment. This research found that online clients in chatting felt depressed, the level expectation was very low, luckily the level of the expectation counselling process was relatively high. Online counsellors need to act on this difference cognition adjusting the strategies of intervention. It is going to be an important key in overcoming direct pressure, providing convincing rational care, collaboratively developing achievable goals, providing educational outcomes, comparing the advancement with hopes as well as it ensures clients get a positive experience in looking for assistance through online.

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