

Positive Self-Talk Training to Reduce Romantic Partner Selection Anxiety in Early Adult Women

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Abstract

Young adult women are prone to experiencing anxiety when selecting a life partner; however, research on cognitive-based interventions specifically targeting this form of anxiety remains limited, particularly in the Indonesian context. This study aims to examine the effect of positive self-talk training on reducing anxiety related to selecting a partner among young adult women. This study should be understood as an initial exploratory study. Participants consisted of six women aged 20–25 years in Makassar, selected using purposive sampling. A single-group quasi-experimental design with pre-test – post-test and follow-up was used. The measurement scale demonstrated acceptable initial construct validity based on Confirmatory Factor Analysis (CFA), with three items removed due to low factor loadings (< 0.45), and high internal consistency (Cronbach's $\alpha = 0.939$). The training module also demonstrated good feasibility (83.5%). Ethical procedures were ensured through informed consent. The Friedman test revealed a significant difference in anxiety scores across the three measurement points ($\chi^2 (2) = 9.00$, $p = 0.011$), with scores decreasing from the pre-test ($M = 45.33$) to the post-test ($M = 17.00$), followed by a slight increase at the follow-up stage ($M = 19.17$). The Durbin–Conover post hoc test indicated a significant difference between the pre-test and post-test ($p = 0.001$), but not between the post-test and follow-up ($p = 1.000$). These findings suggest that positive self-talk training may be effective in reducing anxiety in the short term; however, the absence of a control group and the small sample size limit the generalizability and causal interpretation of these results.

Keywords: Early Adult Women, Partner Selection Anxiety, Positive Self-talk.

1 INTRODUCTION

Early adulthood is a developmental phase typically occurring between the ages of 19 and 25, characterized by identity exploration and the establishment of significant life roles. At this stage, individuals face the psychosocial conflict of *intimacy versus isolation*, reflecting the need to form intimate, stable, and committed relationships [21], [24]. One important manifestation of this developmental task is selecting a life partner [4], [20]. However, this process does not always occur adaptively, particularly among women in early adulthood who are more vulnerable to experiencing anxiety in relational contexts.

Early adult women tend to experience greater relational and marital pressure due to social expectations regarding marriage and starting a family. Social expectations surrounding age, marriage and future family roles can increase women's psychological vulnerability when making decisions in romantic relationships [37]. This indicates that partner

selection is not solely a rational decision-making process but is also influenced by emotional and cognitive factors that may trigger anxiety.

Concerns regarding long-term relationships are further reinforced by social conditions, including the high divorce rate reported by Statistics Indonesia [8]. For instance, Makassar City recorded approximately 12,200 divorce cases in 2024. Contributing factors such as conflict, domestic violence, economic problems, substance abuse, and infidelity not only reflect instability in maintaining relationships but also shape negative perceptions of marriage. Exposure to frequent news reports about divorce and relationship breakdowns can contribute to vicarious learning and social modelling in which a person develops a heightened perception of the risks of marriage based on the experiences of others [55]. These conditions can increase individuals' fear of relationship failure, thereby contributing to romantic partner selection anxiety.



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This phenomenon is reflected in the growing discourse of “marriage is scary,” which has gained attention among young people. Although this phenomenon has long existed, it has become more visible due to increased access to information and greater awareness of mental health issues [28]. Observations from social media trends in August 2024 further suggest that this concern is predominantly expressed by women, indicating a gendered pattern in the experience of relational anxiety.

In addition, demographic trends show an increasing tendency among women to delay marriage. A survey conducted by Maruf [15] indicates a significant rise in the number of unmarried women under the age of 30, with an increase of 10.15% over the past decade, compared to 7.42% among men. The proportion of women over 30 who postpone marriage has also increased annually. This trend suggests that the decision to delay marriage may be associated with anxiety and uncertainty in selection a partner.

From a cognitive perspective, anxiety in selection a partner is closely related to negative thinking patterns. Women in early adulthood tend to focus on worst-case scenarios and perceive themselves as unable to cope with relational challenges [10]. These tendencies are linked to cognitive distortions, in which individuals believe that negative past experiences will recur [14]. As a result, individuals may generalize negative experiences and develop heightened anxiety when making decisions about romantic relationships.

Empirical findings also support this condition. Symptoms of anxiety in a partner include cognitive responses such as persistent negative thoughts, as well as physiological responses such as nervousness, heart palpitations, and nausea [27]. Furthermore, previous studies indicate that anxiety levels among early adult women tend to be high and are higher than those of men in the context of partner selection [18], [26]. These findings highlight that anxiety in selection a partner is a significant psychological issue that requires appropriate intervention.

One cognitive-based intervention that can help reduce anxiety is positive self-talk. Positive self-talk work through cognitive restructuring by interrupting automatic negative thoughts and replacing distorted perceptions with more adaptive and realistic appraisals. This strategy is considered practical, accessible, and self-administered, allowing individuals to self-regulated anxiety responses in everyday situations [47], [56].

Despite the growing body of research on anxiety, most studies have focused on general anxiety or broader relationship dynamics. Previous studies have also demonstrated the effectiveness of positive self-talk in reducing general anxiety and performance-

related anxiety. Research specifically examining romantic partner selection anxiety, particularly among early adult women, remains limited. However, previous research has rarely specifically examined positive internal dialogue in the context of anxiety about selection a romantic partner. In addition interventions targeting this specific form of anxiety are still underdeveloped, especially those based on simple and practical cognitive approaches such as *positive self-talk*. This indicates a clear research gap regarding the application of cognitive-based interventions to reduce anxiety in partner selection.

Therefore, this study aims to examine the effect of positive self-talk training in reducing romantic partner selection anxiety among women in early adulthood. This study is expected to contribute theoretically by enriching the literature on relational anxiety and cognitive-based interventions, and practically by providing an accessible strategy to help individuals manage anxiety more adaptively in the context of romantic decision-making.

2 LITERATURE REVIEW

2.1 Early Adulthood

Early adulthood represents a developmental stage characterized by increasing independence and adjustment to new social roles and expectations [24]. This period, typically ranging from 19 to 25 years, is marked by various developmental tasks, including the formation of intimate relationships and partner selection. At this stage, individuals are expected to achieve emotional and psychological readiness to establish long-term commitments, such as marriage [34].

For early adult women, selection a partner is a complex and multifaceted process that involves evaluating compatibility, future expectations, and relationship stability [35]. Marriage is often perceived as a means to achieve long-term happiness and emotional fulfilment [36]. However, this process is not always straightforward, as prior negative experiences and environmental influences may shape maladaptive perceptions toward relationships.

Therefore, readiness in cognitive, emotional, and psychological domains is essential in supporting adaptive decision-making in partner selection. Adequate readiness enables individuals to evaluate potential partners more objectively, which may contribute to better relationship outcomes and long-term well-being.

2.2 Romantic Partner Selection Anxiety

Partner selection anxiety refers to a psychological condition characterized by excessive worry, fear, and uncertainty when making decisions

regarding future romantic relationships and marital commitments. This anxiety arises from the interaction of cognitive and emotional processes in interpreting potential risks, such as fear of making the wrong choice or worry about relationship failure. Previous studies have shown that partner selection anxiety can be influenced by factors such as past negative experiences, perceived incompatibility with partner criteria, career priorities, and social pressure to marry [18], [37].

As a result, individuals especially young adult women tend to delay or reconsider marriage decisions [38]. From a psychological perspective, partner selection anxiety is reflected through interrelated emotional, cognitive, and physiological responses [39]. Emotionally, individuals experience tension, sadness, and irritability; cognitively, they exhibit excessive worry, irrational thoughts, and difficulty making objective decisions. Physiologically, they may experience symptoms such as increased heart rate and muscle tension. These responses interact and reinforce each other, causing difficulty in evaluating potential partners and increasing uncertainty in decision making [40], [41].

Overall, anxiety in selection a partner can be understood as a cognitive-emotional state influenced by maladaptive thought patterns, personal experiences, and sociocultural demands. Negative thought patterns, such as fear of failure and excessive expectations about relationships, play a central role in maintaining this anxiety. Therefore, interventions that target cognitive processes are crucial, as modifying maladaptive cognitions can reduce anxiety and improve individuals' self-confidence and decision-making quality in partner selection.

2.3 CBT and Positive Self-Talk

The cognitive approach emphasizes the interrelationship between thoughts, emotions, and behavior in shaping individual responses to situations [7]. Maladaptive cognitive patterns, particularly negative interpretations, play a central role in the development of anxiety [42]. Cognitive Behavioral Therapy (CBT) is a psychological intervention that focuses on identifying and modifying dysfunctional thought patterns to improve emotional and behavioral outcomes [7], [43].

It is based on the principle that emotional distress is influenced by individuals' interpretations of events rather than the events themselves [29]. As a non-pharmacological approach, CBT has been widely recognized as effective in reducing anxiety. One of the techniques within CBT is *positive self-talk*, which involves transforming negative self-talk into more rational, adaptive, and realistic thoughts [44].

This technique is particularly relevant in the context of partner selection anxiety, where individuals especially early adult women often experience persistent negative thoughts, such as fear of making the wrong choice or concerns about relationship failure. *Positive self-talk* refers to internal or verbal communication that enables individuals to recognize, evaluate, and restructure negative cognitions [45], [46].

It plays a significant role in cognitive functions such as reasoning, problem-solving, attention, and motivation [47]. By promoting more adaptive interpretations, positive self-talk helps reduce cognitive distortions and anxiety-related thinking patterns [48], [49]. Conceptually, self-talk can be categorized into negative and positive forms. Negative self-talk is associated with irrational thinking patterns that contribute to anxiety [50], whereas positive self-talk functions as a strategy to replace maladaptive thoughts with healthier cognitions [51].

Therefore, positive self-talk serves as an effective cognitive mechanism to challenge irrational beliefs and foster adaptive thinking. In the context of partner selection, positive self-talk facilitates more objective evaluation, reduces excessive worry, and enhances confidence in decision-making. Thus, it contributes to lowering anxiety and improving psychological well-being among early adult women.

3 RESEARCH METHODS

This study employed a quantitative approach using a quasi-experimental method, as participant selection was based on specific criteria [12]. The research design applied in this study was a quasi-experimental one-group pre-test-post-test design with an additional follow-up measurement. An experimental design without a control group using a pre-test-post-test format was considered appropriate for achieving the objectives of this study [23]. The inclusion of a follow-up measurement aimed to evaluate the sustainability of the intervention effects after the completion of the training procedures.

Table 1. Research Design

Before	Treatment	After	Follow up
O ¹	X ¹	O ²	O ³

Descriptions:

- O¹ : Experimental group before receiving the treatment (Screening/pre-test)
- X¹ : Treatment (Training Intervention)
- O² : Experimental group after receiving the treatment (post-test)
- O³ : Follow-up test (after the intervention)

The selection of a one-group pre-test-post-test design without a control group was based on several practical considerations, including time constraints, limited availability of participants willing to complete the entire training process, and cost efficiency. Therefore, this design was considered the most feasible approach for achieving the research objectives under the given conditions.

Nicholson and Herman [31] stated that although post-test results are often sufficient to demonstrate intervention effectiveness, follow-up measurements are essential to ensure that the positive changes achieved can be maintained over time after the intervention has concluded. By incorporating follow-up assessments, researchers can avoid premature conclusions based solely on post-test results and determine whether the intervention effects are temporary or sustained. Additionally, this approach allows for the identification of potential relapse after the intervention.

The aim of this study was to examine the effect of positive self-talk training in reducing romantic partner selection anxiety among early adult women. The study involved six participants who met the predetermined inclusion criteria and completed all stages of the intervention process. Participants who agreed to take part in the study were required to sign an informed consent form prior to participating in the training procedures, which were conducted over two weeks in three sessions.

The instruments used in this study included a training module and a scale measuring romantic partner selection anxiety. The module, developed by the researcher, represented the experimental procedures. Participants were selected using purposive sampling, a non-probability sampling technique in which subjects are chosen based on specific criteria determined by the researcher [53]. The inclusion criteria were women aged 20–25 years, unmarried, having experienced negative romantic relationships, possessing high levels of romantic partner selection anxiety, and residing in Makassar.

The module was validated using descriptive quantitative analysis by calculating the mean scores and feasibility percentages based on expert judgments. The validation results indicated a score of 83.5%, suggesting that the module was valid and appropriate for use. This finding is consistent with Novitasari and Pratiwi [52]. Who stated that a module with a feasibility percentage above 61% can be considered valid.

A pilot test was subsequently conducted to evaluate the experimental procedures. Feedback from participants was used to revise aspects of the module that had the potential to cause errors [54]. The anxiety scale for selection a partner was adapted from Penalun

[19]. The adaptation process considered cultural and language differences, resulting in 10 items retained from the original 13 items. Validity testing was conducted using Aiken's V with the assistance of Microsoft Excel, yielding a value of 0.75, indicating acceptable validity. According to Azwar [53], validity values range from 0 to 1; therefore, all items demonstrated high validity coefficients.

Reliability testing was conducted using Cronbach's Alpha through *Jamovi software* 2.6.44, resulting in a coefficient of 0.939. This indicates that the instrument has excellent reliability, as it exceeds the minimum acceptable threshold of 0.70. Data analysis was conducted using nonparametric statistical tests due to the small sample size. Changes in anxiety scores at the pre-test, post-test, and follow-up measurements were analyzed using the Friedman test and the Wilcoxon signed-rank test with *Jamovi software* 2.6.44.

Screening was conducted using the anxiety scale to identify participants anxiety levels. Those categorized as having high anxiety were selected as research subjects. This study focused on the experimental group to examine changes in anxiety levels before and after the intervention. Participants underwent positive self-talk training conducted in three sessions. The first session focused on delivering material and introducing concepts to help participants identify negative thought patterns and understand the basic principles of positive self-talk.

The second session aimed to strengthen positive meaning construction by enhancing cognitive awareness and promoting more adaptive thinking patterns. In this session, participants were assigned a *positive card* task to support independent practice and reinforce positive affirmations over one week. The third session consisted of a follow-up assessment using the anxiety scale to evaluate the sustainability of the training effects. The session concluded with a debriefing activity to provide a comprehensive explanation of the training objectives.

4 RESULTS AND DISCUSSION

4.1 Description of Research Participants

This study involved six participants experiencing anxiety in selection a partner, as measured using a partner selection anxiety scale developed by Penalun [19] and adapted by the researcher. All participants were female and unmarried. The following table presents participant characteristics based on age, marital status, and type of negative experience.

Table 2. Participant Description

Initials	Age	Gender	Marital Status	Type Experience
ASW	21	Female	Unmarried	Traumatic family experiences and being a victim of infidelity
AINR	21	Female	Unmarried	Experienced repeated infidelity, deception, manipulation, and avoidance in conflict
AISS	21	Female	Unmarried	Long-term relationship with negative impacts on life
AAT	21	Female	Unmarried	Poor relationship and infidelity; fear due to past family experiences
AAP	21	Female	Unmarried	Infidelity experience
ANM	22	Female	Unmarried	Differences in mindset and poor communication

According to Table 2, there were six participants, with four aged 21 and two aged 22. This age range falls within the early adulthood stage, which is developmentally characterized by the demands of establishing intimate relationships and selecting a life partner. During this phase, individuals tend to be more susceptible to anxiety in decision-making regarding romantic relationships [18]. All participants also had negative experiences in romantic relationships, potentially influencing their levels of anxiety. These experiences can shape negative thought patterns, such as fear of relationship failure or betrayal, thus increasing romantic partner selection anxiety [37].

The characteristics of the participants in this study were relatively homogeneous in terms of gender, marital status, and age range. This homogeneity allows for greater control of external variables; however, it also limits the generalizability of the findings to a broader population. These characteristics are relevant to the research objectives, which focus on romantic partner selection anxiety among early adult women. The participants also demonstrated variations in the nature of their negative relational experiences. Some participants reported traumatic family backgrounds related to parental relationships, while others experienced repeated infidelity and betrayal in romantic relationships. These differences may contribute to variations in cognitive and emotional responses toward romantic partner selection anxiety, particularly regarding trust, fear of betrayal, and relationship expectations.

4.2 Description of Participants' Pretest, Posttest, and Follow-Up Results

Table 3 presents the participants' anxiety scores measured using the adapted partner selection anxiety scale across the pretest, posttest, and follow-up phases, along with their corresponding categories.

Table 3. Participant Anxiety Scores

Initial	Age	Pre	Cat	Post	Cat	Follow up	Cat
ASW	21	43	high	17	low	19	low
AINR	22	48	high	13	low	17	low
AISS	21	41	high	22	low	19	low
AAT	21	44	high	17	low	12	low
AAP	21	46	high	17	low	15	low
ANM	22	50	high	16	low	31	moderate

Table 3 shows the participants' anxiety scores during the pretest, posttest, and follow-up phases. Overall, all participants initially demonstrated high levels of anxiety during the pretest phase. After the intervention, all participants experienced a decrease in anxiety scores, shifting from the high category to the low category during the posttest phase.

During the follow-up phase, most participants maintained low anxiety levels, indicating relatively stable intervention effects.

However, participant ANM showed an increase in anxiety score from 16 during the posttest phase to 31 during the follow-up phase, resulting in a shift from the low category to the moderate category. This finding suggests a possible rebound or relapse effect following the intervention. These findings indicate that positive self-talk training may contribute to reducing partner selection anxiety among early adult women. Nevertheless, the increase in ANM's anxiety score during follow-up suggests that the sustainability of the intervention effects may vary depending on individual psychological factors and external stressors.

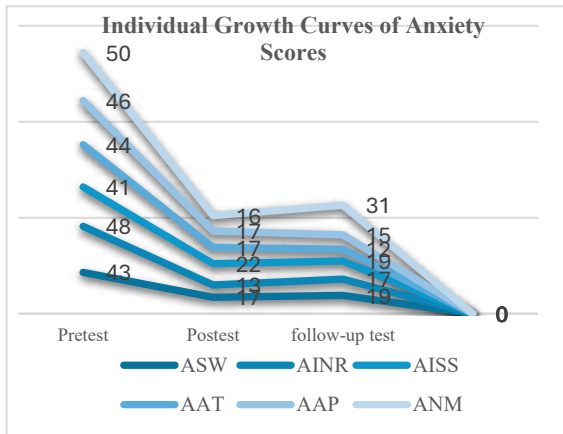


Figure 1. Individual growth curves of romantic partner selection anxiety scores across pretest, posttest, and follow-up assessments.

Figure 1 illustrates individual changes in anxiety scores across the pre-test, post-test, and follow-up phases. Most participants demonstrated a relatively stable decrease in anxiety scores following the intervention. However, participant ANM showed a substantial increase in anxiety during the follow-up phase, indicating a possible relapse or reduced sustainability of the intervention effects. Based on the results, all participants ($n = 6$) initially exhibited high levels of romantic partner selection anxiety (scores > 37). After participating in the positive self-talk training, all participants demonstrated decreased anxiety scores, shifting into the low-anxiety category (scores < 23). Overall, these findings indicate positive changes following the intervention.

Table 4. Descriptive Statistic

Measurement time	Mean	SD	Min	Max
Pre-test	45.33	3.27	41.00	50.00
Post-test	17.00	2.16	13.00	22.00
Follow-up	19.17	2.79	12.00	31.00

More specifically, a descriptive analysis was conducted to summarize the numerical data on anxiety in partner selection, as presented in Table 4. The mean anxiety score at the pre-test stage was 45.33 ($SD = 3.27$), which decreased to 17.00 ($SD = 2.16$) at the post-test stage. This decrease reflects a substantial change after the intervention, with a mean difference of 28.33 points, equivalent to a decrease of approximately 62.5% from baseline. However, at the follow-up stage, there was a slight increase in the mean score to 19.17 ($SD = 2.79$), although overall it remained in the low category. This increase indicates that the intervention effect was not completely stable across all participants. Furthermore, the standard deviation at the follow-up stage increased compared

to the post-test, indicating greater variability in participant responses during this phase.

Furthermore, the individual growth curves indicate that most participants maintained a relatively stable decrease in anxiety scores throughout the follow-up phase. However, ANM participants showed a significant increase in anxiety scores from 16 at post-test to 31 during follow-up, suggesting a possible relapse or waning effect after the intervention. This finding suggests that the effectiveness of positive self-talk may diminish when participants encounter new psychological stressors or receive limited post-intervention reinforcement.

At the individual level (Table 3), all participants showed a decrease in anxiety scores from pre-test to post-test, although the magnitude of the change varied across individuals. The largest decrease was observed in AINR participants (-35 points), while the smallest decrease was found in AISS participants (-19 points), indicating variability in participant response to the intervention. During the follow-up phase, fluctuations in anxiety scores were observed. Three participants (AINR, ASW, and ANM) showed an increase in anxiety scores compared to the post-test phase, while the remaining participants (AISS, AAT, and AAP) showed further decreases. Specifically, ANM participants showed the most significant increase in anxiety scores, shifting from the low category at post-test to the moderate category during follow-up.

Overall, these findings suggest that positive self-talk training has the potential to reduce anxiety in the short term. However, the sustainability of intervention effects appears to vary across individuals and may be influenced by personal characteristics, the ability to maintain cognitive changes, and external stressors encountered after the intervention. Figure 1 illustrates fluctuations in individual anxiety scores across the pre-test, post-test, and follow-up phases.

4.3 Hypothesis Testing Results

Hypothesis testing was conducted to determine whether positive self-talk training was statistically effective in reducing anxiety. The analysis used the Friedman test followed by the Durbin-Conover post hoc test, conducted using *Jamovi 2.6.44*.

Table 5. Friedman Test Results

χ^2	df	p
9.00	2	0.011

Based on the results of the analysis using the Friedman test, a chi-square (χ^2) value of 9.00 was obtained with degrees of freedom ($df = 2$) and a significance level of 0.011; in this case, $p < 0.05$. The

effect size, as measured using Kendall's W, was approximately 0.75, indicating a strong intervention effect. This indicates that the observed changes were not only statistically significant but also significant in magnitude.

Table 6. Durbin-Conover Post Hoc Test

<i>Pairwise-Comparisons (Durbin-Conover)</i>	Statistic	p
<i>Pre-test-Post-test</i>	4.74	<.001
<i>Pre-test-Follow-Up test</i>	4.74	<.001
<i>Post-test- Follow-Up test</i>	0.00	1.000

Table 6 shows further analysis using the Durbin-Conover post hoc test, revealing significant differences between pre-test and post-test ($p < 0.001$), and between pre-test and follow-up ($p < 0.001$). However, no significant difference was found between post-test and follow-up ($p = 1.000$). These results are consistent with the descriptive findings, which showed a substantial decrease in mean anxiety scores after the intervention.

These findings indicate that positive self-talk training was associated with a significant reduction in anxiety levels from pre-test to post-test. Furthermore, the absence of a significant difference between post-test and follow-up indicates that the relative reduction in anxiety was maintained throughout the follow-up period. Thus, the research hypothesis that positive self-talk training reduces anxiety is supported.

However, some variability was observed among participants during the follow-up phase, suggesting that changes in anxiety levels may not have fully stabilized and may still be influenced by external factors or individual differences. Furthermore, these findings should be interpreted with caution due to the lack of a control group and the small sample size, which limits the ability to attribute the observed changes solely to the intervention. Therefore, these results provide initial evidence regarding the potential effectiveness of positive self-talk training in reducing anxiety.

4.4 Qualitative Results

Qualitative data were collected through observations by two observers, positive response cards, evaluation forms, and follow-up assessments. The analysis followed at categorization and identification of recurring patterns across participants. Overall, the results indicate positive changes in cognitive, affective and behavioral aspects. All participants demonstrated engagement during the

training, although the level of verbal participation varied. These changes were reflected in participants ability to express more adaptive thoughts (e.g, Positive affirmation). increased self-awareness, and reduced signs of anxiety during session

These findings are supported by a decrease in anxiety scores from the pre-test to the post-test, indicating that positive internal dialogue training is effective in reducing anxiety related to partner selection. At the follow-up stage, most participants were able to maintain or even further reduce their anxiety levels, suggesting that positive internal dialogue strategies have been internalized and are being applied independently in daily life. Analysis of the positive internal dialogue cards also revealed increased self-awareness, self-acceptance, and the ability to construct adaptive and hopeful affirmations.

However, one participant (ANM) showed increased anxiety at follow-up, indicating potential difficulties in sustaining cognitive restructuring over time or the influence of emerging external stressors and relational conflicts. These findings suggest that while positive self-talk may be effective in the short term, some individuals may require ongoing reinforcement or additional sessions to maintain long-term emotional stability.

Overall, positive self-talk training demonstrated effectiveness in reducing anxiety in partner selection among early adult women. The findings are consistent with the Cognitive Behavioral Therapy (CBT) approach, which emphasizes cognitive restructuring as a key mechanism in reducing anxiety [7]. Positive self-talk may function by replacing maladaptive thoughts with more adaptive cognitions, thereby reducing emotional distress and improving behavioral responses.

Nevertheless, Fluctuations in anxiety scores were observed during the follow-up phase, indicating that cognitive changes may not yet be fully stabilized and may still be influenced by external factors and negative thought patterns. These qualitative findings support the quantitative results, highlighting improvements in cognitive, affective, and behavioral domains. These findings align with previous studies showing that positive self-talk is effective in reducing anxiety across various populations [17], [22]. Overall, positive self-talk training appears to be effective in the short term; however, reinforcement sessions may be necessary to help sustain these changes over time.

5 CONCLUSION

This study indicates that positive self-talk training is potentially effective in reducing romantic partner selection anxiety among young adult women in the short term. The findings showed a significant

decrease in anxiety scores from pre-test to post-test, with no significant differences between post-test and follow-up phases, indicating that the intervention's effects tended to be stable over time.

Qualitative findings also support these results, demonstrating improvements in cognitive and emotional aspects, such as increased self-affirmation, self-awareness, and anxiety management skills. However, the effects of the intervention may vary depending on internal and external individual factors. This study provides an initial contribution to the development of cognitive-based interventions to address romantic partner selection anxiety, particularly among young adult women in Indonesia.

Practically, positive self-talk training has the potential to be applied in various settings, such as counselling services, psychological training, and personal development programs. It can also be combined with other approaches such as mindfulness, individual counselling, or group therapy to achieve more comprehensive and sustainable results. However, this study has several limitations, including the small sample size and the lack of a control group. Furthermore, differences in individual circumstances, characteristics, and personal experiences that emerged during the sharing sessions likely influenced participants' responses to the training.

Future studies are recommended to employ more rigorous and longitudinal research approaches with larger and more diverse samples to further evaluate the long-term effectiveness of positive self-talk interventions. In conclusion, positive self-talk training appears to be a promising yet preliminary approach for reducing romantic partner selection anxiety among early adult women; however, further research is needed to examine its effectiveness across broader populations and over longer periods.

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