The Effectiveness of Education Based on Schema Therapy on Family Performance in Married Women Clients at Tehran District Family Counseling Center

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Abstract

Introduction: Family performance is one of the most important indices warranting the family life quality and psychological health and shows family’s coping skill against distresses, conflicts and problems. So the present research seeks to study the efficacy of an education based on schema therapy in married women.

Materials and Methods: The present research was quasi experimental study with pre- and post- tests and control group. Statistical society was Tehran 5th district family counseling center’s married women clients. Sample size was estimated 30 people with G*power software. Volunteers through available sampling after considering inclusion criteria were randomly assigned into two experimental and control groups. Family performance in both groups assisted by Mc. Master Family assessment device (FAD) (1960). The experimental group received 13 educational sessions based on schema therapy. After the training and one month later, the participants completed again the questionnaire. The data was analyzed by means of SPSS software version 24 and MANCOVA at a significant level of 0.05.

Results: The mean age of the experimental group was 40.7 ± 4.6 and the control group was 40.3 ± 3.7 which did not differ significantly. Analysis by MANCOVA showed family performance in experimental group after education was significantly different compared to control group (p<0.05).

Conclusion: The results of this research showed significant improvement in family performance in experimental group compared to beginning of the survey. So, education based on schema therapy was effective on family performance.

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Introduction

Family performance is one of the most important indicators to ensure the quality of life and mental health of the family. The healthy functioning of the family is determined by the type of communication pattern they have with each other. According to cognitive models, schemas play a role in creating family problems. Schemas are fundamental beliefs about oneself, others, and the environment, and arise from the failure to satisfy basic needs, especially the emotional needs of childhood. Because schemas are formed in childhood that are used as a model for processing experiences and are an important factor in shaping behaviors and skills necessary for people's lives, it seems that education based on schema therapy is one of the ways to improve family functioning. There are a variety of educational programs that have proven to be effective in improving family functioning For example, in studies by Naghdi and colleagues and Refahi and colleagues in the field of the effect of schema-therapy on conflicts and increasing family performance achieved significant positive results. However, no research has been done on the effect of schema therapy on family functioning only with married women. Family performance is one of the most important indices warranting the family life quality and psychological health and shows family's coping skill against distresses, conflicts and problems. Is it possible to change the performance of the family by changing the schemas of married women? Therefore, this research was designed to evaluate the effectiveness of education based on schema therapy on family performance in married women.

Methodology

The present study was a quasi-experimental study with a pretest-posttest design and a control group. In this project, the experimental group received an education based on schema therapy and the control group was placed on a waiting list, and after the study, a training course was held for them. Statistical society was Tehran 5th district family counseling center’s married women clients. The statistical population of the study was married women who referred to the Family Counseling Center located in District 5 of Tehran with family problems. The sample size was obtained through G* power software, assuming the probability of the first type of error is 5% and the probability of the second type of error is 20%, and also assuming the standard deviation of 0.9, the sample size is about 15 people for each group. Volunteers through available sampling after considering inclusion criteria were randomly assigned into two experimental and control groups. Family performance in both groups assisted by Mc. Master Family assessment device (FAD) (1960). The experimental group received 13 educational sessions based on schema therapy. After the training and one month later, the participants completed again the questionnaire. The data was analyzed by means of SPSS software version 24 and MANCOVA at a significant level of 0.05. After obtaining informed consent, 30 women who volunteered to participate in the study were selected from among the clients who met the inclusion criteria and were randomly divided into two experimental groups (15 people) and a control group (15 people). Inclusion criteria were being in the age range of 20-45 years, having a minimum diploma level, having complaints about interpersonal problems in psychological interviews and not suffering from severe mental illness based on psychiatrist examination and exclusion criteria were failure to follow the rules of group therapy (having been absent for more than 3 sessions and not having active participation in the group). Both groups responded to a family performance questionnaire. The experimental group underwent education based on schema therapy for thirteen 90-minute sessions. At the end of the training period, both groups answered the family performance questionnaire again. One month after the end of the training, the questionnaire was given again to the participating women to follow up the duration of the training permanence. To analyze the data obtained from the study, version 24 of SPSS software and multivariate analysis of covariance with a significance level of 0.05 were used. Education based on schema therapy program was based on Jeffrey Young's schema-based therapy and Yousefi protocol, which was written based on Atkinson's original design and whose reliability and validity have been proven in previous studies.

Results

A total of 30 subjects (15 in the experimental group and 15 in the control group) participated in the study. The mean age of the experimental group
was 40.7 ± 4.6 and the control group was 40.3 ± 3.7 which did not differ significantly.

The results of covariance analysis for a significant between pre-test and post-test scores of the two groups in the family performance variable, indicate that after removing the pre-test effect, the mean family performance scores of the experimental group increased significantly compared to the control group. Therefore, education based on schema therapy significantly increased the performance scores of the subjects of the experimental group compared to the control group (about 14 points). The effect size is 57% (\( \eta^2 = 0.57 \)), which indicates the high effect of education.

In investigating the effect of education based on schema therapy on family performance subscales. As can be seen in Table 1 in the problem-solving subscales, relationship, role and behavior control between the experimental and control groups in the pretest and posttest, after removing the pretest effect, there is a significant difference (\( p<0.05 \)). But there was no significant difference between the subscales of emotional conflict and emotional responsiveness between the experimental and control groups in pretest and posttest, after removing the effect of pretest (\( p>0.05 \)).

As can be seen in Table 2, there was no significant difference between post-test and follow-up scores in the family performance subscales, which indicates that after One month of education based on schema therapy, therapeutic effects in family functioning persist.

### Table 1. Covariance analysis of the difference between the mean performance scores of the two groups

<table>
<thead>
<tr>
<th>( \eta^2 )</th>
<th>Significant level</th>
<th>F</th>
<th>Standard deviation</th>
<th>Mean</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.57</td>
<td>0.001</td>
<td>31.5</td>
<td>7.3</td>
<td>134.6</td>
<td>Pretest</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7.8</td>
<td>145.8</td>
<td></td>
<td>Posttest</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8.2</td>
<td>145.7</td>
<td></td>
<td>Pretest</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7.9</td>
<td>144.4</td>
<td></td>
<td>Posttest</td>
</tr>
</tbody>
</table>

### Table 2. Covariance analysis in family performance subscales

<table>
<thead>
<tr>
<th>( \eta^2 )</th>
<th>Significant level</th>
<th>Df</th>
<th>F</th>
<th>Mean square</th>
<th>sum of squares</th>
<th>variable</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.78</td>
<td>0.001</td>
<td>1</td>
<td>67.3</td>
<td>118.4</td>
<td>118.4</td>
<td>Problem solving</td>
</tr>
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<td>0.78</td>
<td>0.001</td>
<td>1</td>
<td>65.5</td>
<td>30.1</td>
<td>30.1</td>
<td>Relationship</td>
</tr>
<tr>
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<td>0.001</td>
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<td>89.2</td>
<td>89.2</td>
<td>Role</td>
</tr>
<tr>
<td>0.044</td>
<td>0.38</td>
<td>1</td>
<td>0.83</td>
<td>1.06</td>
<td>1.06</td>
<td>Emotional responsiveness</td>
</tr>
<tr>
<td>0.042</td>
<td>0.34</td>
<td>1</td>
<td>0.79</td>
<td>5.7</td>
<td>5.7</td>
<td>Emotional conflict</td>
</tr>
<tr>
<td>0.52</td>
<td>0.001</td>
<td>1</td>
<td>19.8</td>
<td>45.5</td>
<td>45.5</td>
<td>Behavioural control</td>
</tr>
</tbody>
</table>

### Discussion

The results of the study showed a significant difference between the mean scores of the experimental and control groups before and after training.

Explaining the results of this study, it can be said that the schema-based treatment model is an integrated model that has used cognitive-behavioral approaches, psychodynamics, Gestalt and attachment theory. Each person has cognitive, empirical, emotional and behavioral dimensions. The role of schemas in shaping beliefs, emotions, and behaviors, as well as as a model for processing experiences, is clear, influencing our thoughts, feelings, and relationships with others, and determining our coping style with situations. The insight that occurs in this treatment model is a deep awareness of the structures (schemas) that affect the interpretation of the situation and thus the interpersonal relationship. Studies have shown that there is a relationship between disconnection / rejection, impaired autonomy / performance and marital satisfaction. In the field of rejection, two schemes of emotional deprivation and social isolation have a great impact on interpersonal relationships. We need love, attention, empathy, respect, affection, understanding and guidance to communicate well with others, and we need to meet that need both in the family and among our peers. In the area of autonomy, the dependency / inadequacy scheme affects the performance of individuals. People who are trapped in this schema often do not have independent and separate selves and do not achieve emotional and behavioral...
independence. They fail in their performance independently and are not responsible. Thus, interpersonal communication is completely influenced by the schema. By modifying early maladaptive schemas, women can improve their relationship with others by changing their assessment of their situation and coping style in that situation, which in turn leads to improved performance at the family level. On the other hand, we know that by making a change in the field of autonomy, the feeling of self-sufficiency increases and people support each other when faced with a problem and choose the best solution to the problem with prudence and logic. Thus, by changing fundamental beliefs, women's performance in the areas of family role, communication, and problem solving improves, and the overall family performance resulting from these subscales improves.

But in the present study, there was no significant difference in the scales of emotional response and emotional conflict. In explaining this issue, it can be said that emotional attention and emotional response are influenced by the emotional inhibition schema, and this schema is a conditional response to the emotional deprivation schema. As we all know, schemas are rooted in a child's early experiences, and schemas that form sooner are stronger. Defects in the child's early environment lead to the formation of a pattern of emotional deprivation and abandonment, which often causes the most damage to interpersonal relationships. These schemas are formed at a younger age and their variability is more difficult than other schemas. For this reason, it seems that it is more resistant to change under the influence of our training course and leads to the continuation of problems in the subscales of emotional conflict and emotional response.

Conclusion
The results of this research showed significant improvement in family performance in experimental group compared to beginning of the survey. So, education based on schema therapy was effective on family performance. The results of the present study can be considered by other researchers by showing the effect of education to married women on the overall performance of the family.

Among the limitations of the research, we can mention the limited number of samples to the District 5 Counseling Center in Tehran and the available sampling method. Therefore, generalization of results to other areas and clinical specimens should be done with caution. It is suggested that the effects of this training be evaluated in married men as well as on other components and specialized training workshops based on schema therapy approach in counseling and psychological centers for premarital education for young couples and in clinical centers as well as counseling and psychotherapy centers.

Acknowledgment
Finally, we thank the family counseling centers and loved ones who participated in the research project and all those who helped us complete this study.

Conflict of Interest
The authors of this study have no conflict of interest in writing this article. We, the authors of the article, declare that we have no mutual interest in writing or publishing this article.
کارایی آموزش مبتنی بر طرح‌ورزی‌درمانی بر عملکرد خانواده در زنان متأهل مراجعه کننده به مرکز مشاور خانواده (کارایی آموزش مبتنی بر طرح‌ورزی‌درمانی بر عملکرد خانواده در زنان متأهل)

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کلیدواژه‌ها:
عملکرد خانواده، زنان متأهل، طرح‌ورزی درمانی

چکیده
عملکرد خانواده از مهم‌ترین شاخص‌های برای تخمین کیفیت زندگی و سلامت روان اعضای خانواده است و نواحی مقابل خانواده را با استرس‌ها و عناصری می‌دهد. بنابراین، به عنوان یکی از تدریس‌های بررسی کارایی آموزش مبتنی بر طرح‌ورزی‌درمانی در زنان متأهل عملکرد خانواده انجام شد. نتایج نشان داد که عملکرد خانواده در گروه آزمایش با ابزار نیازمندی‌ها در عملکرد کلی خانواده برابر با در مقایسه با آزمایش آزمایشهای آزمایش در مراحل قبلی مشابه تأثیر دارد. درمانی، به بهبود عملکرد خانواده نیازمند است که از ابزار از همراهی‌های غربی تا بالینی و سیستمی کسب‌وکارهای فراوانی‌های مختلفی برای جمع‌آوری داده‌های آزمایشی استفاده شود.
شناختی، طرح‌های‌ها در ایجاد مشکلات خانواده نش دارند (۳). آن‌های یک طرح‌های‌شناختی را به‌عنوان یکی از منفی در جویان و عملکرد در انجام‌های مغزی در طرح‌های بارها به‌نیا نمی‌کند. نه‌چون در بیش از یک درصد مطالعه، دو اثر مختلفی بر ایجاد آموزش و نیز برای استفاده از یک گروه داده شده است. 

یک طرح‌هایی باید اثر مشترک بین مشکلات خانواده‌ها را تغییر دهد و ممکن است به‌طور کلی به این روش‌ها باید توجه داده شود. 

۲. مواد و روش

پژوهش حاضر، از نوع نیمه‌تجربی با طرح‌پشت‌آزمون-پس آزمون و گروه گواهی بود. در این بخش، طرح‌های آزمایش‌داده شده بر طریق گزارش داده می‌شود و گروه گواهی، در این پایان مطالعه، دو اثر مختلفی بر ایجاد آموزش و نیز برای استفاده از یک گروه داده شده است. 

از طرف دیگر، طرح‌هایی باید اثر مشترک بین مشکلات خانواده‌ها را تغییر دهد و ممکن است به‌طور کلی به این روش‌ها باید توجه داده شود.
جدول 1. جلسات آموزشی مبتنی بر طرح‌ها

<table>
<thead>
<tr>
<th>جلسات</th>
<th>متن</th>
<th>1 problem solving</th>
<th>2 Communication</th>
<th>3 Roles</th>
</tr>
</thead>
</table>

در پژوهش حاضر با منظور جمع‌آوری داده‌ها از پرسشنامه سنگش عملکرد خواندن مک متای (1401) استفاده شد. این پرسشنامه 50 سوال دارد و شش گروهی از سیاست‌گذاران که به عنوان نماینده شرکت کرده بودند، پاسخگوی پرسشنامه شدند. در این پژوهش، پرسشنامه با استفاده از یک استوآر پاوری انجام شد.

2.3 یافته‌ها

در مجموع 30 نفر (15 نفر گروه آزمایش و 15 نفر گروه گوآ) در مطالعه شرکت کرده بودند. مانندگین سی سی گروه آزمایش گوآ در مطالعه شرکت کرده بودند. مانندگین سی سی گروه آزمایش گوآ در مطالعه شرکت کرده بودند. مانندگین سی سی گروه آزمایش گوآ در مطالعه شرکت کرده بودند.

در گروه، گوآ 30 نفر مایل به افزایش تعداد گروه‌های گوآ، گوآ 30 نفر مایل به افزایش تعداد گروه‌های گوآ، گوآ 30 نفر مایل به افزایش تعداد گروه‌های گوآ، گوآ 30 نفر مایل به افزایش تعداد گروه‌های گوآ.
به مرور بررسی نرم‌افزار داده‌های آزمون‌کمک‌رسانی اسکرین استفاده شد و بررسی‌های انجام‌شده. نتایج آزمون تحلیل کوواریانس (MANCOVA) شاخص به جدول ۲ و بررسی آزمون معناداری میانگین نمرات عملکرد خانواده دو گروه در نظر گرفته شد. مانند آزمون، تفاوت میانگین در طرح‌های بازسازی‌های عملکرد خانواده در جدول ۳ امکان‌پذیر می‌شود که مشاهده شود در بررسی معناداری حالت مسئله، ارتباط، نشانه و کنترل رفتار باعث پایداری عاطفی، درگیری عاطفی، کنترل رفتاری در دو گروه نشود.

جدول ۲. آزمون تحلیل کوواریانس برای آزمون معناداری میانگین نمرات عملکرد خانواده دو گروه

<table>
<thead>
<tr>
<th>کوه</th>
<th>سطح معنادار</th>
<th>آزمایش</th>
<th>پیش آزمون</th>
<th>پس آزمون</th>
</tr>
</thead>
<tbody>
<tr>
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<td>73/78</td>
<td>1/5</td>
<td>1/5</td>
<td>1/5</td>
</tr>
<tr>
<td>2/5</td>
<td>12/8</td>
<td>1/5</td>
<td>1/5</td>
<td>1/5</td>
</tr>
<tr>
<td>3/5</td>
<td>73/78</td>
<td>1/5</td>
<td>1/5</td>
<td>1/5</td>
</tr>
<tr>
<td>4/5</td>
<td>12/8</td>
<td>1/5</td>
<td>1/5</td>
<td>1/5</td>
</tr>
</tbody>
</table>

نتایج تحلیل کوواریانس برای هرکدام از بررسی‌های عملکرد خانواده در جدول ۴ امکان‌پذیر می‌شود که مشاهده شود در زیر می‌باشد. حالت مسئله، ارتباط، نشانه و کنترل رفتار باعث پایداری عاطفی، درگیری عاطفی، کنترل رفتاری در دو گروه نشود.

جدول ۳. آزمون تحلیل کوواریانس برای آزمون معناداری میانگین نمرات عملکرد خانواده

<table>
<thead>
<tr>
<th>کوه</th>
<th>سطح معنادار</th>
<th>آزمایش</th>
<th>پیش آزمون</th>
<th>پس آزمون</th>
</tr>
</thead>
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<td>73/78</td>
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<td>12/8</td>
<td>1/5</td>
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<tr>
<td>3/5</td>
<td>73/78</td>
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<td>1/5</td>
<td>1/5</td>
</tr>
<tr>
<td>4/5</td>
<td>12/8</td>
<td>1/5</td>
<td>1/5</td>
<td>1/5</td>
</tr>
</tbody>
</table>

نتایج تحلیل کوواریانس برای هرکدام از بررسی‌های عملکرد خانواده در جدول ۴ امکان‌پذیر می‌شود که مشاهده شود در زیر می‌باشد. حالت مسئله، ارتباط، نشانه و کنترل رفتار باعث پایداری عاطفی، درگیری عاطفی، کنترل رفتاری در دو گروه نشود.
بی‌منظور بررسی تأثیر نتایج آزمونی بر طرح‌واره پس از یک ماه بی‌پیگیری، از آزمون‌ورایان با ادعا گیری مکرر

جدول 5. نتایج تحلیل واریانس با اندازه‌گیری های مکرر نمره عملکرد خانواده در گروه‌های آزمایش و گویا

<table>
<thead>
<tr>
<th>متغیر مجموعه‌های</th>
<th>مجموع</th>
<th>F</th>
<th>د. ف.</th>
<th>P</th>
<th>Sط. صناعی</th>
<th>میانگین مجموعه‌های</th>
<th>د. ف.</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>نمره نهایی</td>
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مطلب: نمره نهایی از طریق تحلیل واریانس با اندازه‌گیری های مکرر نمره عملکرد خانواده در گروه‌های آزمایش و گویا، نوع ارتباط بین نمره‌های پیش‌زمایه و پی‌پیگیری در زمینه‌های مندرج در این مطالعه مشاهده شده است. نتایج نشان‌دهنده این امر می‌باشد که عملکرد خانواده پایدار می‌باشد.

4. بحث و نتیجه‌گیری

بی‌پیگیری حاضر با هدف بررسی تأثیر آموزش مثبت بر طرح‌واره‌پردازی بر هم‌بود عملکرد خانواده زنان متأهل انجام شد. نتایج نشان‌دهنده نشان دهنده نفوذ معنی‌دار بین میانگین نمرات نهایی بین آزمایش و گویا نشان دهنده این امر است که بررسی بیش‌تر بی‌پیگیری در زمینه‌های از دست داده و تأثیر آموزش مثبت است. نتایج نشان‌دهنده این امر می‌باشد که عملکرد خانواده پایدار می‌باشد. نتایج نشان‌دهنده این امر می‌باشد که عملکرد خانواده پایدار می‌باشد.
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[7]. Simeone - DiFrancesco C, Roediger E, Stevens BA. Schema therapy with couples: A practitioner’s guide to healing relationships. John Wiley & Sons; 2015


