

Original Article

The Effectiveness of Reality Therapy-Based Parenting Styles Training on Realism, Stress Tolerance and Self-Esteem of Anxious Mothers of Adolescents

Sekineh Mohammad Yousefi¹, Ghodratollah Abbasi^{1*}, Seyedeh Olia Emadian¹

¹Department of Psychology, Sari Branch, Islamic Azad University, Sari, Iran

Received: 2 Jan 2022; Revised: 18 Jan 2022; Accepted: 16 Feb 2022

Abstract

Background and Aim: Anxiety is one of the issues that humans have always been involved with over time and research suggests that 20 to 65 percent of mothers suffer from depression and anxiety. The aim of this study was to determine the effectiveness of reality therapy-based parenting styles training on realism, stress tolerance and self-esteem of anxious mothers of adolescents.

Materials and Methods: The present study was an applied and semi-experimental study with pre-test and post-test with control group. The statistical population of this study included all mothers with children aged 11-16 years in Babol in the first quarter of 2019. The sample consisted of 50 mothers with children aged 11-16 years in Babol who were selected by convenience sampling method and were assigned to two groups of teaching reality therapy parenting methods (25) and control group (25 persons) using cluster sampling method. Data were collected using anxiety questionnaire, realism and stress tolerance scale and self-esteem questionnaire. Data were analyzed using multivariate analysis of covariance and SPSS.22 software.

Results: The results showed that teaching reality therapy-based parenting methods was effective on realism, stress tolerance and self-esteem of anxious mothers ($P < 0.001$).

Conclusion: It can be said that teaching parenting styles based on reality therapy emphasizes on creating and maintaining a good, intimate and satisfactory relationship between parents and children by applying relationship-linking behaviors and refraining from destructive behaviors of relationships.

Keywords: Reality therapy, Parenting, Realism, Stress tolerance, Self-esteem

***Corresponding Author:** Ghodratollah Abbasi, Department of Psychology, Sari Branch, Islamic Azad University, Sari, Iran. Email: gh_abbasi@iausari.ac.ir

ORCID: 0000-0003-0488-8396

Please cite this article as: Mohammad Yousefi S, Abbasi Gh, Emadian SO. The Effectiveness of Reality Therapy-Based Parenting Styles Training on Realism, Stress Tolerance and Self-Esteem of Anxious Mothers of Adolescents. *Int. J. Appl. Behav. Sci.* 2022;9(1):46-53.

Introduction

Women make up half of the population and are responsible for motherhood and upbringing of the next generation (1).

Anxiety is one of the issues that humans have always been involved with over time (2). This phenomenon is pervasive and universal and exists in all humans and even the most compatible people have experienced it, research suggests that 20 to 65 percent of mothers suffer

from depression and anxiety (3). All of these stresses are planned in the woman's body, but their psychological dimensions depend on her personal, family and social life history (4), in other words, the biological structure of the woman's body is built in such a way that she becomes more susceptible to anxiety than men, so maternal health is the safest way to achieve quality life and their capacity building and empowerment are the main prerequisites for improving health and achieving community health goals. (5). As anxiety increases in mothers, a large part of the mental health of the individual, family and society will be compromised. On the other hand, adolescence is an important stage of social, cognitive and psychological development (6).

In this age period, the importance and role of parents, especially the mother, is evident in better passing it. Because adolescence is a critical period due to its specific developmental period, and parents are the first to put the foundation of a healthy adolescent personality (7). On the other hand, since the mother plays an essential role in the family, if she is anxious, she cannot well estimate the needs of herself and her teenage children, and this is where her mental health is messed up. As a result of his skill balance impaired his physical and health is also compromised (8).

Many factors can play a role in the mental health of anxiety-affected mammals. Research has shown that the ability to control impulse provides cognitive inhibition and better decision-making process for mothers. Flexibility plays a role in improving parent-child relationships of empathy in successful interpersonal functions of mothers (9). Realism also enhances mothers' ability to monitor emotions and manage emotions and endure stress, increases the ability to withstand events, pressure situations and rebuilds the normal state of mothers (10-11). Self-esteem as a protective factor also plays a role in mothers' acceptance and value (12)

Many treatments have focused on mothers' mental health so far, one of these treatments is acceptance and commitment therapy. Many studies and theories have been conducted on the study of methods and treatments affecting anxiety and stress. Parenting styles are one of the most important features of parents. They have defined parenting style as an inclusive condition that plays a role in both family

functions and raising children (13). In other words, parenting styles are activities in the field of child development that cause growth in many areas. The theory of choice as a theory explains human behavior is a very new perspective. The theory of choice is about human behavior and explains how we, as human beings, choose to achieve what we want. According to this theory, all we do is behave, and all behaviors are intentional and are provoked from within us. The theory of choice says that for scientific reasons, we choose everything we do, including negative feelings such as anger, anxiety, depression, and misery. This thinking is contrary to theories that say that we are in a world of external control and are provoked by external factors (14).

Parents are anxious to feel successful and reach the right level of satisfaction. They need to think about parenting style and how effective their role is because parents who are confident in their parenting abilities perform their parenting duties more effectively and have more positive results about their children's development (15). Parenting styles are child-rearing activities that promote growth in many areas (16). Tyrannical parenting styles try, shape and control their children's behaviors and attitudes following a set of standards of conduct that are usually absolutist, belief-driven, and exalted (17), but powerful parents with great support and scrutiny, create democratic conditions (18). The style of parenting is authoritative and resolute but logical, warm, nurturing, and loving. Relaxing parents provide a calm and welcoming environment for their children, have few demands from their children, and have no control over what they do (19).

Now, considering the above and the importance of healthy communication between parents and children, and since prevention takes precedence over treatment in any work and education is more preventive, it seems that cognitive behavioral therapy and parenting practices training based on choice theory to increase and awareness and ability of people to deal properly with each other to create a mutual and intimate relationship and thus improve realism, tolerance of psychological pressure and the self-esteem of the mothers is anxious. On the other hand, considering the importance of healthy communication between parents, especially mothers and children, and somehow the mental health and well-being of the community, in

order to improve the adjustment and mental health of mothers in the family, the aim of this study was to investigate the effectiveness of reality therapy-based parenting methods training on realism, stress tolerance and self-esteem of anxious mothers of adolescents aged 11-16 years in Babol.

Methods

The present study was an applied and semi-experimental study with pre-test and post-test with control group. The statistical population of this study consisted of all mothers with 11 to 16 year-old children in Babol in the first quarter of the year 2019, which were 871 people. In this study, all the mothers with 11 to 16 year-old children in Babol city were chosen as the studied population, and 269 people were selected as a sample by cluster sampling method according to Kerjce and Morgan table, and those with a lower score than cut-off point of the questionnaire were selected. Fifty participants were divided into two groups by simple random sampling (25 in the control group, 25 in experimental group). Inclusion criteria included mothers of children aged 11 to 16 years; the participant who was interviewed and administered questionnaire and scored lower than the cut-off point of the Beck anxiety inventory. Mothers lived in Babol city. Exclusion criteria were absence of more than two sessions in treatment sessions. This article has a code of ethics IR.IAU.SARI.REC.1397.037 from Islamic Azad University of Sari.

Materials

Beck Anxiety Inventory

This questionnaire was designed by Beck (20) to measure anxiety and consisted of 21 items. Each phrase reflects one of the symptoms of anxiety that usually people who are clinically anxious experience with those who are in an anxious situation. Each question has 4 options: at all, mild, moderate and sedative, with 0, 1, 2 and 3 scores, respectively, the range of scores from 0 to 63 can be high scores indicating that anxiety is more severe. Scores 0 to 21 indicate very low anxiety, 26 to 35 indicate moderate anxiety and above 36 indicate high anxiety and require follow-up and treatment. Beck (20) reported the

reliability of this instrument 0.92. Kaviani and Mousavi (21) reported its validity, reliability was 0.83 and internal consistency was 0.92. In this study, the reliability of the questionnaire using Cronbach's alpha was 0.81.

Bar-On Emotional Intelligence Questionnaire

The Bar-On Emotional Intelligence Questionnaire is used to assess stress tolerance. Bar Emotional Intelligence Questionnaire - It is intended for a set of non-cognitive abilities, competencies and skills that affect a person's ability to cope with environmental demands and pressures. The answer to the questionnaire is set on a 5-point scale in the Likert scale (strongly agree / agree / neither agree nor disagree / disagree / strongly disagree). The subscales of the questionnaire are: emotional self-awareness, self-esteem, self-esteem, self-fulfillment, independence, empathy, social responsibility, interpersonal relationships, realism, flexibility, problem solving, stress tolerance, impulse control, optimism and happiness. In this study, only subscales of realism and stress tolerance have been used. Bar Ann (22) determined the validity of the questionnaire scales by calculating Cronbach's alpha coefficient between 0.69 and 0.86 with an average of 0.76. In Iran, the average total internal consistency coefficient of the questionnaire was 0.76.

Rosenberg Self-Esteem Questionnaire

Rosenberg Self-Esteem Scale (23) measures overall self-esteem and personal value. This scale consists of 10 general phrases that measure the level of life satisfaction and having a good feeling about yourself. This scale has a higher correlation coefficient than Coopersmith Self-Esteem Questionnaire (SEI) and has higher validity in measuring self-esteem levels. Rosenberg's self-esteem questionnaire is composed of 10 articles in which the subject is asked to respond accurately based on the four-point Likert scale from fully agreed to the opposite. The range of scores of this scale ranged from 10 to 40, with higher scores indicating higher self-esteem. 5. Its expression is presented positively (items 1 to 5) and 5 other phrases negatively (items 6 to 10). The method of scoring this scale is as follows: questions 1 to 5, I completely disagree = zero, disagree = 1, I agree=2 and I totally agree it has a score of 3. Also, in questions 6 to 10, I totally agree = zero, I agree = one, I disagree=2 and I completely disagree has a score of 3. The validity and

reliability of Rosenberg self-esteem questionnaire reported the re-authority of the scale to be 0.9 and its analogy was 0.7. Cronbach's coefficients for this scale were 0.87 for men and 0.86 for men in the first period and 0.88 for men and 0.87 for women in the second innings (23). Test-retest correlation was 0.82-0.88 and Cronbach's internal consistency coefficient or alpha ranged from 0.77 to 0.88. This scale has satisfactory validity (0.77). Also, it has a high correlation with the New York national questionnaire and Guttman's self-esteem assessment, so its content validity is confirmed. In this study, the reliability of the questionnaire using Cronbach's alpha was 0.78.

After data collecting, data were analyzed by using SPSS software version 22, and also descriptive and inferential statistics were analyzed. Mean and standard deviation indices were used to describe the

data, and in inferential analysis, after testing the validity of the underlying assumptions, multivariate covariance analysis was applied.

Results

The mean (SD) age of the reality therapy was 36.7 (7.4), and the control group was 35.1 (6.7) years. The two experimental and control groups were similar in age ($F=1.17$, $P>0.05$). Following tables represent mean and standard deviation of realism, stress tolerance and self-esteem in pre-test and post-test of the experimental and control groups.

As can be seen in Table 3, the significance levels of all the research variables in both pre-test and post-test phases in experimental and control groups are greater than the error level of 0.05. Given the number of

Table 1: Content of parenting styles based on reality therapy sessions (24).

Session	Setting agenda
One	Introductions, introduction and discussion of parenting styles, introduction to choice theory, internal control and its general comparison with an external control and its application in parenting, assignment includes finding an approximate difference in the severity of your needs, child and spouse, attention, and notes of what the parent and child are doing to satisfy their needs.
Second	Playing, checking assignments and opinions, discussing the purpose of human behaviors and linking each behavior to needs, discussing desires, and differentiating desires across individuals. The needs of the child and how to teach them, the need for fun, discussing the need for fun, especially for teens, and ways to help and engage with the teenager. Bread to meet this need, Homework: Consider the difference between your favorite world and your child's.
Third	Checking homework and presenting group comments, discussing the need for love and belonging and the importance of relationship in parenting, introducing destructive behaviors in the relationship such as criticism, linking habits including introductory, supportive and caring, acceptance and participation, respect for encouragement, non-judgmental listening, group work as a practice in non-judgmental 4-person groups, the task consisted of practicing three of the destructive behaviors and recording some of the punishments they had previously performed and suggesting a consequence instead.
Fourth	Play, members stand in a circle, the initiator calls a member's name and throws the ball at him. checking assignments and presenting group comments in aggregate, how to negotiate? Practice in groups of four and the role of adolescents and parents in discussing the law in one case, discussing the language of choice theory, and providing examples of how to use it. The task involves giving parents a few diabolic to become the language of choice theory and practicing the skills of negotiating and speaking with a teenager.
Fifth	Checking homework's and group opinions, discussing the language of choice theory and providing examples of how to use it, group practice: multiple dialogues given to parents to become the language of choice theory, further discussion of negotiation and legislation, and role-playing by a coach and parent. A group exercise in which everyone describes an example of a car's general behavior and how the car can be changed by focusing on the front wheels. The task involves applying the skills of negotiation and conversation with the teenager, trying to use bonding behaviors rather than destructive ones, and practicing to focus on the front wheels of the behavior machine and the result note.

Table 2: Mean and standard deviation of the scores of dependent variables studied in pre-test and post-test.

Statistical variable		Pre-test				Post-test			
		Control		Experimental		Control		Experimental	
		M	SD	M	SD	M	SD	M	SD
Parenting education	Realism	8.92	2.36	9.76	2.40	9.32	1.84	22.64	2.36
	Stress tolerance	10.96	2.30	10.28	2.20	10.08	2.17	22.04	1.94
	Self-esteem	15.48	6.01	12.16	4.03	13.76	4.59	33.20	5.10

Table 3: Results of covariance analysis between control and experiment groups by controlling the realism, stress tolerance and self-esteem.

Source of variance	SS	df	MS	F	P	Eta square
Realism	2812.50	1	2812.50	16.47	0.001	0.13
Stress tolerance	2664.50	1	2664.50	18.43	0.001	0.14
Self-esteem	5554.58	1	5554.58	18.75	0.001	0.15

significance levels, the data distribution is considered to be following the normal distribution. The skewness observed for the studied variables is in the range of (2, -2). That is, the skewness of the studied variables in pre-test and post-test is normal, and their distribution is symmetric. The elongation of the variables is also in the interval of (2, -2), respectively. This indicates that the distribution of variables has normal elongation.

As Table 4 indicates, while controlling for the pre-test effect, there was a significant difference between the post-test scores of the experimental and control groups in terms of realism, stress tolerance and self-esteem. The effect of parenting styles based on reality therapy on realism ($P < 0.001$, $F = 16.47$), stress tolerance ($P < 0.001$, $F = 18.43$) and empathy was ($p < 0.001$, $F = 18.75$). were significant.

Discussion

The aim of this study was to compare the effectiveness of cognitive behavioral training and reality therapy-based parenting styles on realism, stress tolerance and self-esteem of anxious mothers with children aged 11-16 years in Babol. The results showed that teaching reality therapy-based parenting styles has an effect on the realism of anxious mothers. The results of this

finding were in line with O'Connor et al (17), and Chambless (18).

In explaining this finding, it can be said that holding training sessions on parenting methods based on reality therapy has been able to smooth the roughness of the relationship between parent and child. In fact, communication care, elimination of destructive habits and utilization of linking habits such as active listening skills and coordination between words and non-verbal messages, trust, respect for the needs and images of children's world and unconditional love for children, along with the use of negotiations to resolve disagreements, will lead to understanding and empathy and establishing a healthy relationship (25). Therefore, reality therapy-based parenting curriculum is effective in improving parent-child relationships. The reason that reality therapy-based parenting improves the realism of anxious mothers is because this theory emphasizes the current relationship. In this regard, avoiding addressing the past and not indulging in complaints and paying attention to what authorities can do not only improve realism in mothers, but also show them that they can run their lives without conflict (26). In this theory, the emphasis is mainly on the present and the choice. The past only matters when it is related to the actions of the present. What has gone on us in the past has a tremendous and undeniable effect on our present

situation, but we can satisfy our fundamental needs properly and plan to satisfy them in the future. Obviously, in the present time, treatment seekers can choose change (27).

The results showed that teaching reality therapy-based parenting styles has an effect on stress tolerance in anxious mothers. In explaining this finding, it can be said that Golsar believes that all human being's behaviors are their choices to satisfy their needs. This view reflects that our behavior at any time is our best effort to control the world around us and ourselves as part of this world; The theory of choice with an emphasis on internal control and responsibility of behaviors that make human beings aware of the consequences and directs the person toward internal control and continuous evaluation of behavior that on the one hand increases self-care and instead rewards himself with this consequence, and the individual directs environmental support to the personal support that is finally personal development so that the person can control himself and his relationship and always (28).

The results showed that teaching reality therapy-based parenting styles has an effect on self-esteem of anxious mothers. In explaining this finding, it can be said that teaching parenting styles based on reality therapy emphasizes on creating and maintaining a good, intimate and satisfactory relationship between parents and children by applying relationship-linking behaviors and refraining from destructive behaviors of relationships, and believes that good parent-child relationship makes the child able to choose what behavior to perform and take responsibility for his behavior without external control (29). He states that we have developed in a world where everyone has tried to control us. Parents, teachers, etc. Accordingly, we have learned to control and we are unaware of our ability to choose (30). We are so accustomed to controlling that we have forgotten that we can choose. The theory of choice is an internal control psychology that believes that although the past has affected our current behavior, it is not the main determinant of our current behavior, but the accountability and the type of choices we make determine our current behavior. The meaning of choice theory is discretion. Teaching and learning the theory of choice leads to our freedom and personal discretion in all walks of life.

Consequently, it can be said that applying reality therapy-based parenting training increases the self-esteem of anxious mothers.

There were some limitations to the current study. First, the statistical population of the study consisted of a specific group of mothers, namely mothers with children of 11 to 16 years, which makes it impossible to generalize the results to other populations. Then, in this study, the program was only for mothers, and we would achieve better results if both parents participated in this research. The use of two methods of instruction may affect disrupting the curriculum for the researcher. Additionally, the research design is semi-experimental and does not have the benefits of real experimental designs. Data collection was based on self-report scales. Therefore, the other limitation of this study is the measurement; because these reports are prone to distortion due to unconscious defenses, the bias in response, self-presentation methods, and overall social desirability.

Given that this study was carried out on the mothers of 11 to 16 year-old children in Babol, it is suggested that they do the same research in other communities, too. Since the present study is quantitative, it is suggested that in future research a qualitative research (semi-structured interview-based field theory) based on the viewpoint of individuals and experts will be used. Due to the limitations of intergroup research methods (experimental research), it is recommended that future researchers use single-subject experimental designs to investigate two methods of cognitive-behavioral education and teaching parenting styles based on reality therapy from experimental designs, using single testable. Given that one of the most controversial and significant trends in the field of psychology and counseling, that is nowadays widely considered, is the parental domain with adolescent children, it is recommended that family counselors and psychologists use the findings of this study.

Conclusion

It can be said that teaching parenting styles based on reality therapy emphasizes on creating and maintaining a good, intimate and satisfactory relationship between parents and children by applying relationship-linking

behaviors and refraining from destructive behaviors of relationships.

Acknowledgment

None.

Conflict of Interest

The authors declare that they have no conflict of interest.

References

- Wuyts D, Soenens B, Vansteenkiste M, Van Petegem S, Brenning K. The Role of Separation Anxiety in Mothers' Use of Autonomy Support: An Observational Study. *J Child Fam Stud*. 2017;26(7):1949–57.
- Lee KW, Ching SM, Hoo FK, Ramachandran V, Chong SC, Tusimin M, et al. Neonatal outcomes and its association among gestational diabetes mellitus with and without depression, anxiety and stress symptoms in Malaysia: A cross-sectional study. *Midwifery*. 2020;81.
- Umuziga MP, Adejumo O, Hynie M. A cross-sectional study of the prevalence and factors associated with symptoms of perinatal depression and anxiety in Rwanda. *BMC Pregnancy Childbirth*. 2020;20(1).
- Rizal MF, Budiardjo SB, Shofiyah ES, Sovaria M. Anxiety in mothers and children with sensory impairments after dental treatment. *J Int Dent Med Res*. 2017;10(Specialissue):525–8.
- Trumello C, Candelori C, Cofini M, Cimino S, Cerniglia L, Paciello M, et al. Mothers' depression, anxiety, and mental representations after preterm birth: A study during the infant's hospitalization in a neonatal intensive care unit. *Front Public Heal*. 2018;6:22–31.
- Parisi L, Salerno M, Maltese A, Tripi G, Romano P, Folco A Di, et al. Anxiety levels in mothers of children affected by x-fragile syndrome. *Acta Medica Mediterr*. 2017;33:495–9.
- Ribeiro MKA, Alcântara-Silva TRM, Oliveira JCM, Paula TC, Dutra JBR, Pedrino GR, et al. Music therapy intervention in cardiac autonomic modulation, anxiety, and depression in mothers of preterms: Randomized controlled trial. *BMC Psychol*. 2018;6(1):25–41.
- Sinclair S, Beamer K, Hack TF, McClement S, Raffin Bouchal S, Chochinov HM, et al. Sympathy, empathy, and compassion: A grounded theory study of palliative care patients' understandings, experiences, and preferences. *Palliat Med*. 2017;31(5):437–47.
- Çöltekin A, Francelet R, Richter KF, Thoresen J, Fabrikant SI. The effects of visual realism, spatial abilities, and competition on performance in map-based route learning in men. *Cartogr Geogr Inf Sci*. 2018;45(4):339–53.
- Lee JK, Chiang HM. Parenting stress in South Korean mothers of adolescent children with autism spectrum disorder. *Int J Dev Disabil*. 2018;64(2):120–7.
- Lisanti AJ, Allen LR, Kelly L, Medoff-Cooper B. Maternal stress and anxiety in the pediatric cardiac intensive care unit. *Am J Crit Care*. 2017;26(2):118–25.
- Poornima C, Sudhir PM, Pratyusha P V., Jacob P. Parenting styles and their correlates in adolescents diagnosed with obsessive compulsive disorder. *J Indian Assoc Child Adolesc Ment Heal*. 2021;17(2):102–21.
- Shaidurova OV, Goncharevich NA, Rostovtseva MV, Kovalevich IA, Dogadaev ON, Shestakov VN. Development of adolescents' positive self-attitude: The influence of parenting style. *Sci Educ Today*. 2019;9(3):28–41.
- Espinoza-García A. Estilos de socialización parental en una muestra de adolescentes chilenos. *Rev Psicol Clin con Niños y Adolesc*. 2020;7(1):46–51.
- Pinheiro Mota C, Costa M, Pinheiro M, Nunes F. Parental styles and bullying behaviour, in adolescents and young adults: Moderating effect of personality. *Anal Psicol*. 2019;37(4):447–61.
- Hickey G, McGilloway S, Furlong M, Leckey Y, Bywater T, Donnelly M. Understanding the implementation and effectiveness of a group-based early parenting intervention: a process evaluation protocol. *BMC health services research*. 2016;16(1):490.
- O'Connor KJ, Schaefer CE, Braverman LD. *Handbook of Play Therapy: Second Edition. Handbook of Play Therapy: Second Edition*. Wiley Blackwell; 2015: 1-701.
- Chambless DL. Adjunctive Couple and Family Intervention for Patients With Anxiety Disorders. *J Clin Psychol*. 2012;68(5):548–60.
- Germer CK, Neff KD. Self-compassion in clinical practice. *J Clin Psychol*. 2013;69(8):856–67.
- Beck AT, Steer RA. Relationship between the beck anxiety inventory and the Hamilton anxiety rating scale with anxious outpatients. *J Anxiety Disord*. 1991;5(3):213–23.
- Kaviani H, Mousavi AS. Psychometric properties of the Persian version of beck anxiety inventory (Bai). *Tehran Univ Med J*. 2008;66(2):136–40. [Persian]
- Bar-On, R. *The emotional quotient inventory (EQ-i): a test of emotional intelligence*. Toronto: Multi-Health Systems, 1997.
- Rosenberg M. Rosenberg self-esteem scale (RSE). *Acceptance and commitment therapy. Measures package*. 1965;61(52):18.
- Mohiuddin Z, Haque MM, Ahmad SA. Parenting Stress of Mothers Having Children with Thalassemia. *J Prev Soc Med*. 2020;38(2):22–9.
- Deblinger E, Pollio E, Dorsey S. Applying Trauma-Focused Cognitive-Behavioral Therapy in Group Format. *Child Maltreat*. 2016;21(1):59–73.
- Settipani CA, Kendall PC. The Effect of Child Distress on Accommodation of Anxiety: Relations with Maternal Beliefs, Empathy, and Anxiety. *J Clin Child Adolesc Psychol*. 2017;46(6):810–23.
- David OA, David D, Dobrean A. Efficacy of the rational positive parenting program for child externalizing behavior: Can an emotion-regulation enhanced cognitive-behavioral parent program be more effective than a standard one? *J Evidence-Based Psychother*. 2014;14(2):159–78.
- Babadi A, Kajbaf MB, Nouri A, Abedi MR. The impact of lived-experience based therapy and cognitive-behavior therapy on body mass index and self-esteem among obese women. *International Journal of Applied Behavioral Sciences*. 2019;6(3):52–60.
- Mota N, Kraskian-Mujembari A, Pirnia B. Role of Sexual Function in Prediction of Anxiety, Stress and Depression in Patients with Multiple Sclerosis. *International Journal of Applied Behavioral Sciences*. 2019;5(3):27–33.
- Oraki M, Ghorbani M. The effectiveness of mindfulness-based eating awareness training (MB-EAT) on perceived stress and body mass index in overweight women. *International Journal of Applied Behavioral Sciences*. 2019;6(3):1–8.

© **Sekineh Mohammad Yousefi, Ghodratollah Abbasi, Seyedeh Olia Emadian**. Originally published in the International Journal of Applied Behavioral Sciences (<https://journals.sbm.ac.ir/ijabs/index>), 23.5.2022. This article is an open-access article under the terms of Creative Commons Attribution License (<https://creativecommons.org/licenses/by/4.0/>); the license permits unlimited use, distribution, and reproduction in any medium, provided the original work is properly cited in the International Journal of Applied Behavioral Sciences. The complete bibliographic information, a link to the original publication on <https://journals.sbm.ac.ir/ijabs/index>, as well as this copyright and license information must be included.