



Effectiveness of schema therapy on quality of life and psychological well-being of women heads of households

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ABSTRACT

The present study aimed to determine the Effectiveness of schema therapy on quality of life and psychological well-being of women heads of households of Hamedan. In this research was used semi-experimental methods and pretest and posttest with a control group. The target population included all women heads of households who referred to social work clinics of Hamedan province. Individuals wishing to participate in the study selected purposefully from the clinic and were replaced in experimental and control groups. The number of participants was 30 which each group contained 15 people, respectively. First, for both experimental and control groups was conducted quality of life and psychological well-being questionnaire. Then schema therapy sessions for the experimental group was done in 10 sessions but the control group did not receive any intervention. And immediately after the intervention, was conducted post-test by the quality of life and psychological well-being questionnaire for the experimental group and the control group. Finally, the data analysis was conducted by using the SPSS software version 20. The analysis of covariance showed that schema therapy increases the significantly quality of life and psychological well-being of women heads of households. Therefore, it is suggested the counselors and therapists use this method more than ever for treatment women heads of household.

Keywords: schema therapy, quality of life, psychological well-being, women heads of household

INTRODUCTION

Today, women heads of households and their children are among the vulnerable members of society that for the purpose of providing mental health should be supported by society and authorities. The research there have been on these women shows that these women are facing with stressful factors such as physical, psychological, legal and economic and thus to provide family health, need to psychological well-being and high performance of family (Nyikahadzoi and et al, 2013). Quality of life defines as conscious cognitive judgment about individual satisfaction of life (Win born, 2000). For the quality of life mentioned six areas, including physical health, mental status, levels of independence, social relationships, environmental communications, and spiritual interests. Various dimensions effect on quality of life such as economic status, social, the spiritual and psychological and occupational (King, 1994). One of the important concepts in finding quality of life and positive psychology approach is the concept of welfare. Historically, philosophers at ethical theories, especially in epicurean hedonic approaches widely have paid to the concept of happiness and well-being. But for the first time Denier check out the term well-being and its related structures systematically in the field of psychology and replaced it and synonyms with happiness were (Eid Larsen, 2005). The concept of psychological well-being is a multi-dimensional structure attitude to life. Ryff studied based on developmental psychology and personality, that's mean the theoretical description of positive psychology and as well as the multilateral model of psychological well-being (Ryff & Keyes, 1995). If early maladaptive

schema of women heads of households is not resolved and not achieve to a positive solution, can lead to stress in life. The identification and solving of the early maladaptive schema of women heads of households can play an effective role in improving the quality of life of women heads of households and their mental health. Early maladaptive schemas are beliefs people have about themselves, others and the environment. Typically originated from not satisfied basic needs, especially emotional needs in childhood (Zhang & he, 2010). Given all the mentioned factors the importance of addressing this issue is clearer. In particular, research in the area of women heads of households in the country is low. The research gaps reveal the effectiveness of schema therapy on quality of life and psychological well-being of women heads of households more and more. The sum of these factors lead researchers addressing the issue and problem. Based on mentioned points, the problem and question of research are: What is the effect of schema therapy on quality of life and psychological well-being of women heads of households? To address the raised issue, the following hypotheses presented:

1. Schema therapy has an effect on the quality of life of women heads of households.
2. Schema therapy has an effect on the psychological well-being of women heads of households.

MATERIALS AND METHODS

This research in terms of purpose is practical. In this research was used semi-experimental methods and pretest and posttest with a control group. The target population included all women heads of households who referred to social work clinics of Hamedan province. Individuals wishing to participate in the study, selected purposefully from the clinic and were replaced in experimental and control groups. The number of participants was 30 which each group contained 15 people, respectively. In replacement of individuals for both groups (experimental and control), it was tried to be matched in terms of age, education and culture.

The procedure was that meant that after coordination with the authorities of clinics in Hamedan, the study began. First, for both experimental and control groups was conducted quality of life and psychological well-being questionnaire. Then schema therapy sessions for the experimental group was done in 10 sessions but the control group did not receive any intervention. And immediately after the intervention, was conducted post-test by the quality of life and psychological well-being questionnaire for the experimental group and the control group. After 2 months of implementation of the post-test in order to assess the durability of the effect of schema therapy, research questionnaires was broadcast between Subjects with the aim of test the keep track and required data was collected. Finally, the data analysis was conducted by using the SPSS software version 20.

Research Tools:

a) Quality of Life Questionnaire (QOL):

This test involves 24 questions. Scores of each item are in a range of (1 to 5) respectively never, low, medium, high and perfectly. On reported results by the World Health Organization Cronbach's alpha coefficient 0/73 and 0/89 for the four subscales and total scale has been reported.

b) Psychological well-being questionnaire:

This scale was created in 1989 by Carol Ryff. This test involves 84 questions and 6 factors which 47 questions directly and 37 questions are scored in reverse. The results of the correlation with the each scale were acceptable (Reef, 1989). The Obtained Cronbach's alpha have been reported for self-acceptance (0/93), positive relationships with others (0/91), autonomy (0/86), mastery of the environment (0/90) and personal growth (0/87). In 2012 the Kalantar and Navarbafi in a population of 860 people standardized the psychological well-being questionnaire and it has been reported for the entire 0/92.

Findings

In this study participated 30 women heads of households who referred to social work clinics of Hamedan province.

Table 1. Distribution of the sample according to groups and age

Age	Experiment	Control
Under 30 years	2	1
Between 30 and 40 years	7	8
Over 40 years	6	6
Total	15	15

Table 2. Results of covariance analysis test for quality of life scores women heads of households

Source of changes	Sum of squares	DF	Mean Square	F	Sig.
Pre-Test	707/89	1	707/89	19/15	0/000
Group (independent variable)	771/60	1	771/60	20/87	0/000
Error	997/83	27	36/95		
Total	81050/00	30			

The sum of squares of the independent variable is equal to 771/60 which leads to the $t F = 20/87$. The size of the F in $P < 0/01$ is significant. In other words, between the control and experimental groups in the overall quality of life, even after adjusting for pretest, the difference is significant. It can be concluded that schema therapy has a positive and significant impact on the quality of life of women heads of households.

Table 3. Results of covariance analysis test for psychological well-being scores women heads of households

Source of changes	Sum of squares	DF	Mean Square	F	Sig.
Pre-Test	24222/16	1	24222/16	23/112	0/000
Group (independent variable)	5368/09	1	5368/09	7/12	0/007
Error	28296/89	27	1048/03		
Total	934561/00	30			

The sum of squares of the independent variable is equal to 5368/09 which leads to the $t F = 7/12$. The size of the F in $P < 0/01$ is significant. In other words, between the control and experimental groups in the overall psychological well-being, even after adjusting for pretest, the difference is significant. It can be concluded that schema therapy has a positive and significant impact on the psychological well-being of women heads of households.

CONCLUSION

The first findings showed that schema therapy significantly increases the quality of life of women heads of households who referred to social work clinics of Hamedan province. These findings are consistent with the research of Rash (2007) and Aktas and et al (2012). Schema therapy looks very realistic to the human condition and its main goal is to contribute to the roots of human problems and maladaptive schemas to understand and ultimately solve the causes of the maladaptive schemas. Given that in intervention approach, in addition, schema therapy used for treatment changes of the early maladaptive schema by cognitive emotion techniques; by applying the techniques of behavioral pattern breaking try to improve and maladaptive coping styles and ineffective coping responses are closely related to reducing of the quality of life. So in general, it can be inferred that schema therapy by improve negative emotions, releasing of excitement, change and reform of early maladaptive schema and particularly maladaptive coping styles and inefficient responses can increase the quality of life of women heads of households. On this basis, and the results of this research it can be concluded that schema therapy is effective in improving the quality of life of women heads of households .

The second findings showed that schema therapy significantly increases the psychological well-being of women heads of households who referred to social work clinics of Hamedan province. These findings are consistent with the research of Shihi and Horan (2004), Rash (2007) and Menez et al (2010). The ability of schema therapy is necessary for behavioral pattern breaking. This strategy helps to authorities to replace the adaptation behavior patterns instead of inconsistent and inefficient coping responses plan and implement the behavioral assignments. For example, in the therapeutic relationship the therapist tried to satisfy the unsatisfied needs of clients within the boundaries of health and ethical principles.

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