

The Effectiveness of Training the Components of Redecision Therapy on the Increase of Resilience Among Female Tehran Students

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Abstract

Background: In facing with difficult situations some people cannot stand and give up, while others who are called "resilient" stand and solve their problems.

Objectives: This study is a semi-experimental research with pre-test and post-test conducted to investigate the effectiveness of training the components of Redecision therapy on the increase of resilience among female Tehran students.

Patients and Methods: The participants of this study comprised 20 students from third grade high school with low scores in CD-RISC selected by random cluster sampling and randomly assigned into two experimental and control groups of 10. Sessions of Redecision therapy were implemented for experimental group and the control group received no interventions. We used Connor and Davidson resilience scale or CD-RISC (2003). The reliability (the Cronbach's α) and factor analytic structure of the scale were evaluated.

Results: The reliability obtained was 0.85. The results showed a significance difference between the control group and experimental group ($P < 0.01$). Training of Redecision therapy has increased the resilience among students.

Conclusions: Redecision therapy help people to identify negative parental messages and make new decisions; we can expect this training improve the resilience among students.

Keywords: Resilience, Redecision Therapy, Transactional Analysis, Gestalt Therapy

1. Background

At the end of childhood, individual enters a phase of life quite different in terms of the previous period. This period is known as "adolescence" (1). Most psychologists are of the opinion that the distinction between adolescence and other developmental periods is because adolescent or the yesterday's child is still not ready for facing with a difficult life. Hence, adjustment would be a difficult task for him, and will further make problems for him (2).

Psychological resilience is defined as an individual's ability to properly adapt to stress and adversity (3). Resilience is not running away from problems but to deal with them, the ability to pass through problems, cope with stress, and enjoy life. Resilience refers to the capacity to return to good mental health after challenging and difficult situations. Some researchers define it as the return to normal (or better than normal) functioning after exposure to a high-risk experience or environment. Resilience allows individuals to manage difficult episodes or chronic challenges in their lives (4).

Related to resiliency some psychologists believe that: It is the style of thinking (more than heredity, intelligence and any other single factor) that determines people's ability in the face of difficulties and stressful situations.

Therefore, interventions that aim to impress thought processes, knowledge, the abilities and features of the individual can be an important step in the development of skills and abilities related to resilience (5).

Different approaches and theories can be used to help people improve their self-understanding, among which is the "transactional analysis". Environment and social relations are of great importance in transactional analysis (TA), however, it is the individuals who are ultimately responsible their life and behavior. One must accept his/her responsibility and consider his/her own role in life more than anything else. Transactional analysis pays a special attention to individual's inner problems and relationships besides interpersonal relations. TA suggests that if individuals have healthy, sincere and honest relationships with each other as alternatives to destructive, negative and degrading relationships, they would be able to reduce their and others' stress and enjoy their life (6).

TA was a powerful driving force for the exchange of inter-personal views. The future of transactional analysis is embedded in the combination with other psychotherapy systems. Redecision approach binds transactional analysis with Gestalt therapy (7).

Redecision therapy which was developed by Gouliding in 1970 is a compilation of Eric Berne's transactional analysis and Perlz Gestalt therapy (8, 9). According to transactional analysis approach, child in reaction to parental orders, including verbal and nonverbal messages shows emotional responses and then makes decisions (e.g. I'm not good enough, I'm not worth being loved, I cannot do that, etc.) and carry the decisions made with himself into adulthood (10). This approach helps individuals be able to write a new story about their life. Re-decision-making approach is effective for the treatment of individuals living with negative parental messages (7). The assumption of this process is that under stressful circumstances, individuals re-experience familiar ways of seeing the world and re-practice the patterns parallel with their past decisions (11).

The therapist in the therapy process wants the client to go back to the original scene related to his/her current problem, and speak of the emotions, behaviors and relationships he/she had at the time. Gestalt techniques are applied to express the emotional issues that were not resolved earlier (12). First, the clients would be asked to give examples of their problem. Then, they are asked to explain the feelings they experience and express them in their own words. Afterwards, the clients are asked to explain the circumstances similar to those they had in their childhood. After the initial contact was made with the stage show, Gestalt techniques are applied to express the emotional issues that were not resolved at first (11). According to this approach, if individuals cannot express their emotions like old resentments, frustrations, sorrows, even feelings of guilt and love that were not expressed, can prevent their further growth and development (12). So, Redecision therapy, is not the end but a beginning, so doing, the person starts to think, feel and behave in a new way (8).

According to an idea by Henderson (13), students with low resilience keep the concept of "failure" rather than "success" and messages like: "I'm not lovable", "I'm not lovely" in their self-concept. To help such students, a context is needed to provide them with new experiences and opportunities to discover themselves as important and lovely.

2. Objectives

Given the significance of the issues raised regarding the importance of and the tense situation during adolescence period which makes adjustment, tolerance, and stress-coping ability difficult, this study seeks to answer this question: "Does rededecision therapy increase the resilience of students?"

3. Patients and Methods

3.1. Participants

The sample was gathered according to a semi-experimental (pre-test post-test) plan with a control group, using

convenience sampling method. The participants of this study comprised 20 students from third grade high school with low scores in CD-RISC (2003) randomly assigned into two experimental and control groups of 10. In order to evaluate the effectiveness of training the components of Redecision therapy on the increase of resilience among students, the experimental group received 8 sessions of 90-minute training in Redecision therapy components, while the control group received no training.

3.2. Resiliency Scale

We used Connor and Davidson resiliency scale or CD-RISC (2003). The scale comprises of 25 items, each rated on a 5-point scale (0-4), with higher scores reflecting greater resilience. Although the scale measures different aspects of resilience, it is based on a total score. The reliability (the Cronbach's α) and factor analytic structure of the scale were evaluated, and reference scores for study samples were calculated. The reliability obtained was 0.85.

4. Results

According to Table 1, after the intervention the experimental group showed a significant difference in resiliency scores compared with the control group.

In order to measure how much the variables of the studied groups change together, after adding the independent variable we used analysis of covariance, the results of which are shown in Table 2. The post-test scores are more than pre-test scores in both groups.

As shown in Table 2, after removing the effect of pre-test from the post-test results of the 2 groups, the difference between groups is statistically significant at a significance level of 0.99. Thus, the null hypothesis is rejected, and the alternative hypothesis is accepted. The results of group covariance analysis by resiliency showed that the experimental group given training in the components of Redecision therapy significantly revealed an increase in resilience, while for the control group with no training or intervention the pre-test and post-test showed no significant changes in the resilience.

Table 1. Descriptive Analysis

| Groups | No. | Mean \pm SD | Variance |
|---------------------|-----|-------------------|----------|
| Experimental | | | |
| Pre-Test | 10 | 43.50 \pm 11.87 | 140.94 |
| Post-Test | 10 | 66.90 \pm 11.21 | 125.87 |
| Control | | | |
| Pre-Test | 10 | 45.50 \pm 9.80 | 97.167 |
| Post-Test | 10 | 49.70 \pm 9.85 | 97.122 |

Table 2. Test of Between-Subjects Effect for Resilience

| Source | SS | df | MS | F | P | Effect size |
|----------|----------|----|----------|--------|------|-------------|
| Pre-test | 1385.443 | 1 | 1385.443 | 36.469 | 0.04 | 0.428 |
| Group | 1755.835 | 1 | 1755.835 | 50.694 | 0.00 | 0.749 |
| Error | 589.338 | 17 | 34.667 | | | |
| Total | 71464.00 | 20 | | | | |

5. Discussion

The results indicated that the training of the components of Redecision therapy among students caused a significant increase in resilience in the experimental group, while no significant change was observed in the post-test as compared to the pre-test for the control group which did not undergo any training. Based on the effect of family on resiliency, the family is an environment where the individual spends most of his/her childhood period, and has interactions and relationships in it. On the other word, Family is the first inevitable environment that the child communicates with. This is in line with Campos (14) which stated that several factors, including family are affecting the formation of life story. He also noted that during early years of life, parents are the main source of information for children, and any message from the parents affect child's beliefs and thoughts. Other factors affecting the resilience are the communications and peer support. According to the results obtained by Masten (3), individuals working in difficult and destructive situations, if enjoy a friendly relationship or a supportive family can tolerate stress better. This concept is much overlapped by the concept of "stroke" in rededecision therapy. Stroke is of the most essential human needs, or as Eric Berne elaborates: even "the spinal cord dies without stroking" (7). These findings are in line with the idea of Hohmuth (15) stating the group members through sharing strokes resist their parental critical messages. Parental messages negatively affect the child's self-concept based on which he/she decides that 'I'm no good', or 'you're good'. The result is a lack of confidence in his/her abilities. Fayedeh (16) with the application of Redecision therapy helped students with poor self-concept re-discover the necessary self-assertiveness and motivation and assist themselves in resolving stressful situations. Also, by training individuals with low resilience and no resistance against life difficulties in rededecision therapy we can help them learn through problem-solving techniques solve their problems and have more adjustment with different issues. Accordingly, Raisi (17) in his study concluded that rededecision therapy training is effective on the increase of adjustment.

This research, attempted to determine the effectiveness of rededecision therapy on the increase of resilience among female Tehran students. Based on the result, training of rededecision therapy has been effective on the resilience of students. One of the affecting factors on resilience is

"family". The study limitation was the inclusion of only female students; therefore the results could not be generalized to male students. In lieu of the limitation of the current study, we recommend the following items: The results of this study recommend counselors and therapists in order to increase the resilience, and also teachers and parents who are of environmental and familial protective factors use this approach. We also recommend similar researches on other school degrees as well as on male students. In addition, as this study is conducted on a small group, we recommend repeating on larger group. Finally, we recommend more extensive researches on certain mental states that most individuals experience (e.g. anger, suppressed anger, remorse, grief, suppressed grief, fear, anxiety, shame, guilt, sorrow and regret) using rededecision therapy.

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