

The Effectiveness of Emotion Schema Therapy on Rumination and the Extreme accountability of patients with Obsessive-compulsive disorder

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Abstract

Due to the prevalence of obsessive-compulsive symptoms, there are some measures to be taken to improve the symptoms. The purpose of the present research was to determine the effectiveness of emotion schema therapy on rumination and the extreme accountability of patients with obsessive-compulsive disorder. It was semi-experimental research with pre-test, post-test, and follow-up. The population of the study included people with obsessive-compulsive disorder who referred to the Artiman Counseling Center of Mashhad in 2019. A number of 16 individuals were selected by available sampling and they were divided randomly into two experimental and control groups. The treatment program was Leahy emotional schema therapy consisted of 15 intervention sessions, in 45-minute group sessions. The results of Analysis of variance with repeated measures showed that emotion schema therapy effects on reducing rumination and extreme accountability of individuals with obsessive-compulsive disorder.

Keywords: Accountability, emotion schema therapy, obsessive-compulsive disorder, rumination

Introduction

Obsessive-compulsive disorder is a disabling and chronic neuropsychiatric disorder that is associated with social damages and significant disease burden. Most patients with OCD suffer from dysfunctional beliefs (American psychiatric association, 2013). Dysfunctional beliefs consider as a kind of irrational hypothesis about the individual, the world around him, and fixed thoughts around the situation (Lam, et al., 2005). Conley and Wu (2018) mostly emphasize the effect of dysfunctional and obsessive beliefs in the development and persistence of the obsessive-compulsive disorder. Luppino, et al. (2018) emphasize the key role of extreme accountability in OCD. Rumination has anomalies in the cognitive basis of patients with OCD (Nolen-Hoeksema, et al., 2008). Various treatments have been performed on people with OCD, one of which is emotional schema therapy. It is perceived that there is a relationship between emotion schema therapy and the continuation of obsessive. Studies showed that emotion schema therapy effects clinical symptoms and emotion schema of patients with OCD and depression and rumination in people with major depressive disorder

(Ahowan, et al., 2017; Rezaee, et al.,2016). Due to the prevalence of obsessive-compulsive disorder, therefore, the purpose of the present research was to study the effectiveness of emotion schema therapy on reducing rumination and the extreme accountability of patients with OCD.

Method

It was semi-experimental research with pre-test, post-test, and follow-up, along with a control group waiting for treatment. The population of the research includes all patients with OCD who referred to the Artiman Counseling Center of Mashhad in 2019. 22 patients referred to the counseling center, but only 18 patients agreed to participate in the study. 16 male and female patients were diagnosed with OCD with score of above 20 in the questionnaire and were selected based on a clinical interview by clinical psychiatric and psychologist, then they were divided randomly into two groups of 8 individuals, one experimental group and the other control group waiting for treatment later on. The treatment program was **Leahy (2018) emotional schema therapy** consisted of 15 intervention sessions, in 45-minute group sessions at Artiman Counseling Center. An informed consent received from the participants, and also they assured about the privacy of information. The tools were:

Maudsley Obsessive-Compulsive Questionnaire (MOCAL): It contains 30 items in four subscales of Checking, Washing, Slowness - Repeating and Doubting. The correlation between test-retest is 0.80 and internal consistency is 0.70 - 0.80 (Hodgson & Rachman, 1977). In present research, internal consistency 0.70, 0.70, 0.80, and 0.70 for four subscales.

Ruminative Responses Style (RRS): It is one of subscales of the response styles questionnaire which has 22 items of 4 Likert options to respond, with psychometrics proprieties supported two-factor model of ruminant responses, the first of which was reflecting and the second one was brooding. In the present study Cronbach's alpha coefficient for two factors was 0.77 and 0.68, respectively.

Accountability of California Questionnaire: It has 42 items, with test-retest reliability coefficients ranging from 0.53 to 0.80 (Groth-Marnat & Wright, 1995). In present research, the Cronbach's alpha validity of the scale was 0.79.

Data were collected in three phases: pertest, posttest, and follow up and the analysis carried out by Variance analysis, repeated measures test using SPSS-22.

Findings

The present research was carried out on 16 individuals with obsessive-compulsive symptoms in two groups of emotion schema therapy (n=8) and control (n=8).

According to table 1, average scores of post-test and after 1-month follow-up in the experimental group are less than average pre-test scores in terms of rumination and extreme accountability. The required defaults should be studied for multi-variate covariance analysis. Kolmogorov-Smirnov test was utilized to study the normal distribution of variables. The

results show the normal distribution of variables ($p < 0.05$). Also, Leven's test was utilized to study the homogeneity default of error variances. The results showed that the mentioned default is established ($P > 0.05$). The box test was used to study the homogeneity hypothesis in matrix of covariance and the results showed that this default is established ($M = 19.91$, $F = 1.07$, $P > 0.05$). The results of regression slope homogeneity analysis showed that there is no significant interaction between associated variables (pre-tests) and dependent variables (post-tests and follow-up after one month) in operating levels (experimental and control groups) ($P > 0.05$).

Table 1: Mean and standard deviation of Rumination and the Extreme accountability variables in individuals with obsessive-compulsive symptoms

Variable	Control group			EST group		
	Pre test	Post test	Follow up	Pre test	Post test	Follow up
Rumination	104.32 (8.98)	105.23 (8.76)	105.87 (8.74)	106.2 (9.62)	70.54 (11.02)	63.44 (12.11)
Extreme accountability	24.93 (6.29)	29.13 (6.32)	28.89 (6.33)	29.31 (6.32)	22.31 (9.83)	20.01 (10.02)

Analysis of variance with repeated measures were utilized to study the effectiveness of emotion schema therapy on extreme responsibility and rumination. The Levin test was used to measure variance equality of groups in extreme responsibility and rumination of more than 0.05. therefore, we can say that it is possible to judge with 0.95 confidence that the experimental and control group are similar in terms of scattering of extreme responsibility and rumination scores in the pre-test, post-test, and follow-up. Also, statistics, the F Related to Mokhli sphericity tests, and M-box in variables of extreme responsibility and rumination obtained respectively for measuring the spherical shape of the variance matrix of more than alpha level of 0.05. Therefore, all the stated assumptions were established for repeated measurement statistical analysis.

the results of table 2 shows that the F in variables of extreme responsibility and rumination was significant in experimental group ($p < 0.05$). It shows the positive effect of emotion schema therapy on rumination and extreme responsibility in the pre-test, post-test, and follow-up.

Table 2. the results of intragroup effect tests (repeated measures)

Variable	The third type of squares	Degree of freedom	F	P
Rumination	520.78	1	3.38	0.0002
Extreme accountability	425.32	1	5.42	0.0001

Conclusion

The findings of the research indicated that emotion schema therapy effects on reducing extreme accountability and rumination of participators. Findings of the present research are consistent with the study of Rezaee, et al. (2016), and Ahowan, et al. (2017). Available sampling considers as one of the limitations in the present research, and it is suggested to use random sampling methods for future studies. It is suggested to carry out appropriate longitudinal research to study the long term effects of this interventional program, and also to investigate the rate of reduction in obsessive-compulsive disorder symptoms over the next few years. Eventually, according to the results, it is suggested for the therapists to consider emotion schema therapy procedure in patients with obsessive symptoms and also in regulating the therapeutic programs.

Acknowledgement

We are grateful to Artiman Counseling Center for approving the plan of the present research. We also thank all participants of the study and counseling center staff for their cooperation and patience.

Financial support

This article has not received any financial support.

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