

Psychological Studies Vol.20, No.3, Autumn 2024, Serial No.76 Submitted Date:2024-05-07 Accepted Date:2024-08-29 Pages: 7-23 DOI :10.22051/psy.2024.47061.2955 https://psychstudies.alzahra.ac.ir/article 8008.html



Research paper

Comparing the Effectiveness of Narrative Therapy and Emotion Focused Therapy on Primary Maladaptive Schemas, Impulsivity and Depression in Students with Suicidal Thoughts

Hatami Nejad, Mohammad ¹; Sadri Damirchi, Esmaeil²; Jafari Moradlo, Mahdi ³; Akhavi Samarein, Zahra ⁴; Noroozi Homayoon, Mohammadreza ⁵

- 1. PhD student in Clinical Psychology, Faculty of Psychology and Educational Sciences, University of Tehran, Tehran, Iran.<u>hatamimohamad314@yahoo.com</u>
- 2. Professor, Department of Counseling, Faculty of Education and Psychology, University of Mohaghegh Ardabili, Ardabil, Iran. <u>e.sadri@uma.ac.ir</u>
- 3. MSc Family Counseling, Faculty of Educational Sciences and Psychology, University of Mohaghegh Ardabil, Ardabil, Iran. <u>mahdi.778621@gmail.com</u>
- 4. Associate professor, Department of Counseling, Faculty of Education and Psychology, University of Mohaghegh Ardabili, Ardabili, Iran. z.akhavi@uma.ac.ir
- 5. Corresponding Author: PhD Student in Counseling, Faculty of Educational Sciences and Psychology, University of Mohaghegh Ardabili, Ardabil, Iran. <u>mohammadreza.noroozi@uma.ac.ir</u>

Abstract

The present study compared the effectiveness of narrative therapy and emotion-focused therapy on early maladaptive schemas, impulsivity, and depression among students with suicidal thoughts. The design was semiexperimental, pretest-posttest approach, with a control group. The population was male high school students in District 14 of Tehran. A sample of 60 was selected through cluster sampling and randomly assigned to three groups. The tools were Young's Early Maladaptive Schemas Questionnaire, Barratt Impulsivity Scale, and the Beck Depression Inventory. The two therapies were applied to two experimental groups, 8 group sessions each. Analysis of covariance revealed both narrative and emotion-focused therapies were effective in reducing early maladaptive schemas, impulsivity, and depression. Significant improvements comparing to the control group, with no substantial difference between the two therapies. Hence, both therapies positively impacted the reduction of these issues among students with suicidal thoughts.

Keywords: Depression and suicidal thoughts, emotion focused therapy, impulsivity, narrative therapy, primary maladaptive schemas

Introduction

Suicide remains a significant global concern, with extensive research conducted on its prevalence, causes, and potential management strategies (Okechukwu et al., 2022). Suicide is the second leading cause of death for individuals aged. Consequently, there is a growing need to enhance suicide prevention interventions (Chen et al., 2024). Early maladaptive schemas have been identified as a significant factor in suicide risk. A study highlights the impact of these schemas, alongside factors such as psychological resources and social isolation, on suicidal thoughts (Milesi et al., 2023). Impulsivity is another key factor, linked with risky behaviors and difficulties in cognitive and emotional regulation. Depression also plays a critical role, with individuals experiencing profound sadness, hopelessness, and social withdrawal,

which are strongly associated with suicidal behavior (Ghosh & Halder, 2024). This study tests three hypotheses:

-Narrative therapy is effective in reducing early maladaptive schemas, impulsivity, and depression among students with suicidal thoughts.

-Emotion-focused therapy is effective in reducing early maladaptive schemas, impulsivity, and depression among students with suicidal thoughts.

-It evaluates which of these therapeutic approaches is more effective in addressing early maladaptive schemas, impulsivity, and depression in students with suicidal tendencies.

Method

The present study adopts a quasi-experimental design with a pretest-posttest approach and a control group. The study utilized cluster sampling to select schools from the 14th district of Tehran in the years 1401-1402. The self-harming thoughts test was administered to 574 students, and 328 students were excluded due to low scores. Among the remaining 246 students who scored higher, 20 students were randomly assigned to three groups: two experimental groups and one controlled group. The experimental group underwent narrative therapy and emotional therapy, with 8 sessions of 90-minute per week. The research recorded data before and after the intervention. Data were analyzed by covariance analysis with SPSS26 software.

Tools

Young's Early Maladaptive Schemas Questionnaire (YSQ-SF): This 75-item short form, assesses early maladaptive schemas, covering 15 schemas, with a 6-point Likert scale response. The internal consistency of this tool with Cronbach's alpha was reported from 0.75 to 0.96 (Young et al., 2003). In the present study, the reliability of the overall scale was 0.76.

Barratt Impulsivity Scale - 11th Edition (BIS-11): Developed by Barratt et al. (2004), which includes 30 items, evaluating various impulsivity dimensions such as motor impulsivity, cognitive impulsivity, and lack of planning. The reliability of this scale was 0.81 by Cronbach's alpha method. The reliability Cronbach's alpha was 0.81 for the total scale.

Beck Depression Inventory - Second Edition (BDI-II): Developed by Beck et al. (1996), this 21-item inventory measures the severity of depression, with responses scored from 0 to 3. The reliability of this inventory reported with Cronbach's alpha 0.84 and validity 0.67. The reliability by Cronbach's alpha was 0.81 for total BDI, in this research.

Results

Table 1 present's descriptive statistics, including means and standard deviations for primary maladjustment, impulsivity, and depression in both test and control groups. The assumptions for checked, with normality verified using the Kolmogorov-Smirnov test, which confirmed normal distribution with 95% confidence. Homogeneity of variances and covariance matrices was confirmed by Levin's test, which showed no significant differences. Additionally, the homogeneity of slope variances was validated before performing the covariance test. The analysis in Table 1 demonstrated that both narrative therapy and emotion-focused therapy were effective in improving the research variables.

Var	iables	Sources	F	Sig	Coefficient	Power
Early Schemas	Maladaptive	time	167.62	0.001	0.73	1.00
		group	49.21	0.001	0.56	1.00
		time $ imes$ group	48.57	0.001	0.55	1.00
Impulsivity		time	119.27	0.001	0.63	1.00
		group	39.63	0.001	0.58	1.00
		time $ imes$ group	28.55	0.001	0.54	1.00
Depression		time	110.34	0.001	0.74	1.00
		group	31.59	0.001	0.64	1.00
		time $ imes$ group	37.78	0.001	0.67	1.00

 Table 1. The results of AVOVA on interventions' effects on maladaptive schemas, impulsivity, and depression, controlled for pre-test scores

The results presented in Table 1 demonstrate the effectiveness of the interventions on the research variables.

Variables	Group	Mean Difference	Sig
	Narrative therapy - control	.56.32	0.001
Early Maladaptive Schemas	Emotion therapy - control	-53.76	0.001
	Narrative therapy - emotional therapy	-2.56	0.34
Impulsivity	Narrative therapy - control	-14.2	0.001
	Emotion therapy - control	-16.61	0.001
	Narrative therapy - emotional therapy	0.35	1
Depression	Narrative therapy - control	-10.04	0.009
	Emotion therapy - control	-8.77	0.04
	Narrative therapy - emotional therapy	-1.27	0.45

Table 2. Bonferroni test on variables between groups

A post-hoc test indicated that both experimental groups were significantly more effective than the control group in reducing primary maladaptive schemas, impulsivity, and depression. However, no significant difference was found between the two experimental interventions in their effectiveness.

Discussion and Conclusion

This study aimed to compare the effectiveness of narrative therapy and emotion-focused therapy on early maladaptive schemas, impulsivity, and depression in students with suicidal thoughts. In the first hypothesis, narrative therapy led to reductions in all three variables. This therapy encourages individuals to reinterpret and reconstruct their life stories, allowing them to distance themselves from negative experiences and develop more positive perspectives. By revising their narratives, individuals gain a sense of control and create more constructive outlooks on their lives. In the second hypothesis, emotion-focused therapy also resulted in a

reduction of early maladaptive schemas, impulsivity, and depression. This approach helps individuals identify, accept, and manage their emotions, rather than suppressing them. Through emotional processing, individuals reduce negative schema patterns and learn to engage with their emotions more constructively, leading to improved mental health outcomes. The third hypothesis compared both therapeutic approaches and found that they were equally effective in reducing maladaptive schemas, impulsivity, and depression. Although they employ different techniques, narrative therapy through life-story reconstruction and emotion-focused therapy through emotional processing both achieved similar outcomes. Thus, both methods can be effectively used for students with suicidal thoughts. This study also had limitations, including a limited sample size, which may affect the generalizability of the results. Therefore, it is recommended that future studies increase the sample size and include diverse populations, such as female students and different age groups, to improve the precision and generalizability of the findings. Investigating the long-term effects and conducting research in various cultural and social contexts to ensure the stability of the results is essential.

References

- Barratt, E., Stanford, M. S., Kent, T. A., & Felthous, A. (2004). Neuropsychological and cognitive psycho- physiology substrates of impulsive aggression. *Biological Psychiatry*, 41, 1045-1061. [Doi:10.1016/S0006-3223(96)00175-]_
- Beck, A. T., Steer, R. A., & Brown, G. K. (1996). *Beck Depression Inventory Second Edition (BDI-II)*. Psychological Corporation.
- Ghosh, S., & Halder, S. (2024). Neurocognitive profile of individuals having depression with suicidal ideation. *Journal of Psychosocial Research*, *19*(1), 53-63. [Doi:10.32381/jpr.2024.19.01.6]
- Milesi, I. P., de Araújo, R. M. F., & Bücker, J. (2023). Suicidal behavior and early maladaptive schemas and schema domains. *The Journal of Nervous and Mental Disease*, 211(7), 514-518. [Doi:10.1097/NMD.00000000001642]
- Young, J. E., Klosko, J. S., & Weishaar, M. E. (2003). Schema Therapy: A Practitioner's Guide. Guilford Press.
- Chen, J. I., Roth, B., Dobscha, S. K., & Lowery, J. C. (2024). Implementation strategies in suicide prevention: a scoping review. *Implementation Science*, 19(1), 20. [https://doi.org/10.1186/s13012-024-01350-2].
- Okechukwu, F. O., Ogba, K. T., Nwufo, J. I., Ogba, M. O., Onyekachi, B. N., Nwanosike, C. I., & Onyishi, A. B. (2022). Academic stress and suicidal ideation: moderating roles of coping style and resilience. *BMC Psychiatry*, 22(1), 1-12. [Doi: https://bmcpsychiatry.biomedcentral.com]

Acknowledgment

We extend our gratitude to all the teachers in Tehran who contributed to the implementation of this study through their participation.

Funding

All the financial resources of this research were provided by the authors of the research. **Conflicts of interest**

No conflicts.



This article is an open-access article distributed under the terms and
conditions of the Creative Commons Attribution-Noncommercial4.0International(CCBYN4.0license)(https://creativecommons.org/licenses/by-nc-nd/4.0/).