




Effectiveness of Redecision Therapy on Rational Behavior and Psychological Well-being of Women

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Article Info

Article type:

Original Research

How to cite this article:

Tadayon Tajabadi, F., Jafari, F., & Fariborzi, E. (2024). Effectiveness of Redecision Therapy on Rational Behavior and Psychological Well-being of Women. *Journal of Adolescent and Youth Psychological Studies*, 5(5), 6-13. <http://doi.org/10.61838/kman.jayps.5.5.2>



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ABSTRACT

Objective: The family is considered one of the important institutions. If it functions properly, family members will also enjoy health and well-being. The aim of the present study was to examine the effectiveness of rededecision therapy on rational behavior and psychological well-being of married women aged 30 to 45 in Kerman city.

Methods and Materials: The research method was quasi-experimental with a pre-test and post-test design with a control group. The statistical population included married women aged 30 to 45 who attended counseling centers in Kerman from October to November 2021. The sampling method was convenience sampling. The rededecision therapy training sessions were conducted weekly for the experimental group over two and a half months, with each session lasting 90 minutes, based on the Goulding protocol (1979). The research instruments included the Psychological Well-being Questionnaire (Carl, 1989) and the Rational Behavior Questionnaire (Shorkey & Whiteman, 1997). Data analysis was performed in two sections: descriptive statistics and inferential statistics.

Findings: The results showed that rededecision therapy had a significant effect on increasing rational behavior ($F=12.07$, $P<0.001$) and psychological well-being of married women ($F=14.64$, $P<0.001$).

Conclusion: It can be concluded that rededecision therapy was effective on rational behavior and psychological well-being of married women aged 30 to 45 in Kerman city, and this training can be used to reduce psychological problems in married women.

Keywords: Redecision therapy, Rational behavior, Psychological well-being, Married women.

1. Introduction

The family is considered one of the important institutions. If it functions properly, family members

will enjoy health and well-being (Mahmoodian et al., 2021). Marriage is described as the most important and fundamental human relationship because it provides the primary structure

for establishing a family relationship and raising the next generation. Achieving a safe society requires a healthy family, and a healthy family can only be attained if its members have psychological well-being (Mahmoodian et al., 2021). Psychological well-being refers to an individual's perception of the harmony between themselves and the outcomes of their actions and is considered a continuous and relatively stable assessment of internal satisfaction throughout an individual's life (Frost et al., 2022). Psychological well-being includes the experience of positive emotions, low levels of negative mood, and high satisfaction with life (Kang & Kim, 2022). Psychological well-being encompasses the sense of coherence and continuity in life, emotional balance, and overall life satisfaction. It includes: 1) Self-acceptance: positive evaluations of oneself and one's past life; 2) Personal growth: a sense of continuous growth and development as a person; 3) Purpose in life: belief that one's life is purposeful and meaningful; 4) Positive relations with others: having quality relationships with others; 5) Environmental mastery: the capacity to manage one's life and the surrounding world effectively; 6) Autonomy: a sense of independence (Ryff & Keyes, 1995).

Individuals with high well-being primarily experience positive emotions and have a positive evaluation of their events and circumstances, whereas individuals with low well-being evaluate their events and life situations unfavorably and experience more negative emotions such as anxiety, depression, and anger (Espie et al., 2019). It should be noted that experiencing pleasant and positive emotions simultaneously with experiencing unpleasant and negative emotions leaves less time for negative emotions (Park & Peterson, 2019). Moreover, it should be noted that positive and negative emotions are not bipolar states where the absence of one guarantees the presence of the other; positive satisfaction does not solely arise from the absence of negative emotions, and the absence of negative emotions does not necessarily bring about positive emotions. Instead, positive emotions require other conditions and resources (Mohammadi Zadeh & Khorramdel 2023; Monika et al., 2023). One of the variables examined in this study is rational behavior. Researchers have not yet been able to provide a comprehensive definition of rational behavior. According to philosophical theories, rational behavior follows a series of rules and standards and is synonymous with normative behavior; therefore, behaviors that do not follow the standards and values of a society fall outside the realm of rational behaviors. Based on this definition, creative behaviors are considered abnormal and irrational because

the term creativity is used for unexpected and astonishing behaviors and ideas. However, the creative ideas of an individual play a significant role in the growth of the individual and society, solving complex problems, even when creative behaviors and ideas fail, what is lost is negligible compared to the numerous benefits of creativity (Osipov & Panov, 2021; Zhang et al., 2022).

The simplest definition of behavior is that it is an action that an individual performs or a word that an individual speaks. However, in behavioral psychology, this term is more precisely defined: "any activity that an organism does that can be observed or measured by another organism or a measuring instrument." In general, rational behavior can be categorized as normative behavior. According to behaviorist views, to correct abnormal behavior, appropriate learning conditions must be provided to change abnormal behaviors and replace them with normative behaviors. In fact, deciding whether behavior is normative or abnormal depends on the social and cultural conditions of the society in which the individual lives and the impact it has on the individual. Therefore, based on the theory of behavior therapy, irrational or abnormal behavior can be eliminated from human behavior and replaced with rational or normative behavior (Osipov & Panov, 2021). Cognition is only a belief or thought that therapists believe has a significant impact on relationships, emotions, and intra- and interpersonal processes. Researchers have found that the extent of realistic and rational beliefs in marital relationships is a strong predictor of marital quality. According to reported statistics in incompatible couples, misunderstandings, irrational and absolutist thoughts are more prevalent than other factors (60%) because irrational behaviors are exaggerated, inflexible, absolutist, and unrealistic (Abdi Dehkordi et al., 2019).

The therapeutic approach in which transactional analysis theory is combined with Gestalt therapy styles derived from the innovation of Frederick (Fritz) Perls was developed by Bob and Mary Goulding. According to Goulding, the root of individuals' early decisions is an emotional state. Thus, the individual must reconnect with the feelings experienced as a child during the initial decision and express those feelings to end the current state and replace the initial decision with a new and appropriate one. This can be done through imagination, fantasy, dreaming, or working on the initial scene where the client revisits a traumatic early scene to re-experience and remember it (Zhang et al., 2022). It can also be used with the theory that when an individual has a problem, it means that two parts of their personality are

exerting equal force in opposite directions. Therefore, the individual expends much energy without achieving any result, a situation called impasse. The theorizing of depicting impasses as something occurring between different ego states was expanded by Goulding. In Gestalt therapy, to resolve impasses, the two-chair technique is usually used. After the client imagines the conflicting parts of themselves in different chairs, they engage in dialogue to resolve the conflicts. During this process, the suppressed feelings of the child often surface and become apparent (Widdowson et al., 2016; Zhang et al., 2022). Since the first step to improving individuals' rational behavior is early educational programs, and on the other hand, the effectiveness of redecision therapy in reducing many individual and marital problems has been confirmed, conducting a study to determine the effectiveness of this approach on psychological well-being and rational behaviors seems essential and necessary.

Therefore, considering the family's vulnerability to major harms, any therapeutic approach must be able to enhance individuals' psychological well-being and behavior when facing challenges. Although over forty years of research and practice in personal performance have introduced a wide range of therapeutic methods, multiple studies have shown that well-being and irrational behavior significantly impact various aspects of individuals' lives. Since no research with this topic has been conducted in the country so far, the results of this study can be effective in increasing psychological well-being and rational behaviors and preventing many individual harms. This study seeks to answer whether redecision therapy affects the rational behavior and psychological well-being of married women aged 30 to 45 in Kerman city.

2. Methods and Materials

2.1. Study Design and Participants

The research method was quasi-experimental with a pre-test and post-test design with a control group. The statistical population of this study included all married women aged 30 to 45 who referred to counseling centers in Kerman city from October to November 2021. Eight centers were selected using random sampling, and one center was randomly chosen. The sample size of 20 individuals was selected, with one group of 20 in the control group and one group of 20 in the experimental group. The sampling method was convenience sampling, with individuals randomly assigned to groups. One group received group therapy with a reality therapy approach, while no therapeutic method was applied

to the control group. Before the sessions and at the end, participants responded to two questionnaires on rational behavior and psychological well-being. The sessions were held weekly for ten weeks for each group, achieving the research objectives.

2.2. Measures

2.2.1. Psychological Well-being

Psychological Well-being Questionnaire: This scale was developed by Carol Ryff in 1989. It contains 84 questions and covers six factors. Participants respond on a 6-point Likert scale (strongly disagree to strongly agree). Forty-seven questions are scored directly, and thirty-seven questions are scored inversely. The Psychological Well-being Scale includes six subscales: self-acceptance, positive relations with others, autonomy, purpose in life, personal growth, and environmental mastery. Each subscale has 14 questions in the 84-item form. Vakoch and Kokabi (2008) confirmed the validity and reliability (0.93) of the Persian version of the Psychological Well-being Questionnaire. In Iran, Etemadi (2005) reported the overall reliability of this questionnaire as 0.94 and the content validity as 0.68 (Chamani Ghalandary et al., 2019; Ryff & Keyes, 1995).

2.2.2. Rational Behavior

To measure rational behavior, a questionnaire with 37 items was used, covering dimensions such as magnifying misfortune, catastrophizing, perfectionism/shame, guilt, punishment, acceptance of independence, need for approval, care and help, compulsion/avoidance, defiance, self-display, and negative views of others. This questionnaire was derived from a valid study by Shorkey and Whiteman (1997). The scoring method is a 5-point Likert scale ranging from very good to very poor. Rashidi (2005) confirmed the validity of this questionnaire, and the reliability was obtained with a Cronbach's alpha coefficient of 0.89. To determine the reliability, a test-retest method with 10 individuals was conducted, resulting in a validity of 0.90 and reliability of 0.86. Hudson, Harrison, and Crosscup (1981) reported Cronbach's alpha reliability coefficients of 0.91 and test-retest reliability of 0.93 (Osipov & Panov, 2021). In the present study, the reliability of this questionnaire was obtained using Cronbach's alpha method, yielding 0.74.

2.3. *Intervention*

2.3.1. *Redecision Therapy*

Redecision therapy training sessions were conducted weekly for the experimental group over two and a half months, with each session lasting 90 minutes, based on the Gouling protocol (1979) (Abdi Dehkordi et al., 2019; Chamani Ghalandary et al., 2019; Espie et al., 2019; Mahmoodian et al., 2021; Mohammadi et al., 2021).

Session One: Introduction and Rapport Building

The first session aims to establish rapport and create a friendly atmosphere among participants. The session begins with introductions, followed by explaining the study's principles and regulations. Participants are then asked to complete a pre-test questionnaire to assess their baseline psychological well-being and rational behavior. This session sets the foundation for open communication and trust.

Session Two: Understanding Marital Conflict

The second session focuses on understanding the meanings and dimensions of marital conflict, its disadvantages, and its effects on children and couples. Participants discuss the potential outcomes of divorce and its impact. They are encouraged to share their marital problems during the session and are given a handout prepared by the counselor to study and prepare for the next session.

Session Three: Introduction to Redecision Therapy and Personality Structure

In the third session, participants are introduced to the rededecision therapy approach and the structure of personality, including the Parent, Adult, and Child states. They learn about personality development from Berne's perspective and the principles of Gestalt therapy. Participants are provided with a handout to study, which helps clarify any doubts and prepares them for the next session.

Session Four: Components of Redecision Therapy

The fourth session explains the components of rededecision therapy, including injunctions, decisions, impasses, and the life scripts that follow injunctions and drivers. Participants learn about the inhibitory and driving forces and how life scripts are formed. They are tasked with writing down the injunctions and drivers they remember from their parents.

Session Five: Discovering Life Scripts and Strokes

The fifth session teaches participants how to identify their life scripts and introduces the concept and types of strokes, including the single-stroke and stroke economy. Participants are asked to study the provided handout and list the strokes they received during childhood, preparing for the next session.

Session Six: Contracting and Personal Responsibility

In the sixth session, the concept of contracting is explained. The counselor discusses personal responsibility with each participant and establishes a contract with them. Participants are encouraged to exchange ideas about contracting and document the changes they expect in their marital life.

Session Seven: Identifying Family Rules and Cognitive Techniques

The seventh session focuses on identifying family rules and the dos and don'ts using cognitive techniques such as cognitive disputation, debates, and Socratic questioning. This helps participants understand their initial decisions. They identify faulty beliefs and suggest realistic beliefs.

Session Eight: Revisiting Initial Decisions with Gestalt Techniques

In the eighth session, participants revisit their initial decisions using Gestalt therapy techniques like role-playing, role reversal, and the empty chair technique. These methods help participants reconstruct past scenes that come to mind. They work on facing unfinished business through the empty chair technique.

Session Nine: Reviewing Initial Decisions

The ninth session involves discussing questions related to revising initial decisions. Participants are asked if they are willing to review some of their initial decisions, whether these decisions are still useful, and what new decisions they want to make. They are encouraged to specify weeks or days to act and behave in a new way in environments like home or work.

Session Ten: Post-Test and Feedback

The final session includes conducting a post-test and interviewing participants about the effectiveness of the therapy in their personal lives. Participants share the changes they have managed to implement in their real lives outside of therapy. This session assesses the impact of the intervention and provides closure to the therapy process.

2.4. *Data analysis*

Data analysis was conducted using the one-way ANCOVA. Participation was voluntary, and all respondents willingly completed the questionnaires. Confidentiality was maintained, and participants' names were not required, only their ages.

3. **Findings and Results**

Among the 40 participants in the study, 12 were in the age group 30-33 years, 15 were in the age group 34-37 years, and 13 were in the age group 38-40 years. Additionally, among the 40 participants, 12 had a high school diploma, 8 had an

associate degree, 10 had a bachelor's degree, 6 had a master's degree, and 4 had a doctorate.

Table 1 presents descriptive statistics of research variables.

Table 1

Descriptive Statistics of Research Variables in the Experimental and Control Groups

Research Variables	Group	Test	N	M	SD
Psychological Well-being	Experimental	Pre-test	20	193.53	13.33
		Post-test	20	238.86	29.42
	Control	Pre-test	20	209.53	36.34
		Post-test	20	212.93	43.84
Rational Behavior	Experimental	Pre-test	20	92.40	10.23
		Post-test	20	109.06	11.24
	Control	Pre-test	20	98.20	12.68
		Post-test	20	97.60	13.24

The results of the normality test showed that since the significance level of the Kolmogorov-Smirnov test for the variables of psychological well-being and rational behavior is greater than 0.05, the null hypothesis (normal distribution of data) is confirmed. To examine the homogeneity of variances in the experimental and control groups (redecision therapy), the variance error of the two groups in the dependent variables at a significance level of 0.05 did not differ significantly, therefore the assumption of homogeneity of variances is accepted ($p > 0.05$). The homogeneity of regression slopes showed that the regression coefficient of the dependent variable based on the pre-test

variables in the groups is the same. To examine this assumption for each component, analysis of variance (F-test) was used. Considering the calculated F coefficient, the interaction between the group and the pre-tests is not significant ($p > 0.05$). Consequently, no significant differences are observed between the coefficients and the assumption of homogeneity of regression coefficients is established for all variables. Given these assumptions, the data of this study are suitable for entering into covariance analysis, and the differences between the two groups in the dependent variables can be examined.

Table 2

Results of Univariate Covariance Analysis of Post-test Scores of Rational Behavior in Experimental and Control Groups

Statistical Index	Variables	SS	Df	F	Sig	Effect Size
Pre-test	1782.208	1	32.08	0.001	0.54	
Group	670.863	1	12.07	0.002	0.39	
Error	1499.79	37				

The results of Table 2 show that by removing the effect of the pre-test variable and considering the calculated F coefficient, there is a significant difference between the adjusted mean scores of rational behavior of participants

based on group membership ("experimental and control") in the post-test stage ($p < 0.05$). Therefore, it is concluded that redecision therapy training impacts and increases the rational behavior of married women.

Table 3

Results of Univariate Covariance Analysis of Post-test Scores of Psychological Well-being in Experimental and Control Groups

Statistical Index	Variables	SS	Df	F	Sig	Effect Size
Pre-test	4595.67	1	13.60	0.001	0.33	
Group	4948.909	1	14.64	0.001	0.35	
Error	9122.31	37				

The results of [Table 3](#) show that by removing the effect of the pre-test variable and considering the calculated F coefficient, there is a significant difference between the adjusted mean scores of psychological well-being of participants based on group membership ("experimental and control") in the post-test stage ($p < 0.05$). Therefore, it is concluded that redecision therapy training impacts and increases the psychological well-being of married women.

4. Discussion and Conclusion

The aim of this study was to investigate the effectiveness of redecision therapy on rational behavior and psychological well-being of married women aged 30 to 45 in Kerman. The data analysis results showed that redecision therapy training positively affects the rational behavior of married women in this age group, leading to an increase in rational behavior.

In explaining these results, it can be said that redecision therapy addresses both the alteration of negative behavior and the enhancement of positive behaviors. Redecision therapy not only facilitates emotional release and acceptance but also promotes behavior change and strengthens positive behavior patterns and outcomes. Additionally, this therapeutic method aims to increase the tolerance and resilience level of individuals receiving negative behavior so that, if the problematic individual does not change, the other partner can endure these irrational behaviors and unpleasant conditions. Redecision therapy creates an environment where members connect through special roles, emphasizing the family as a whole and the interactions between its subsystems. Interventions help individuals recognize their roles, understand their responsibilities, and guide their lives. Redecision therapy, by establishing structures, enables women to share their hidden thoughts with their spouses, revealing their feelings about life, the future, fears, concerns, and painful experiences that they rarely can overcome alone ([Chamani Ghalandary et al., 2019](#)). The results of this hypothesis align with the following research findings.

Prior results indicated that both emotion-focused couple therapy and redecision therapy had a significant impact on the resilience scores of married women, and redecision therapy was more effective than emotion-focused couple therapy in increasing resilience ([Mahmoodian et al., 2021](#); [Mohammadi et al., 2021](#)). [Widdowson et al. \(2016\)](#) investigated the impact of redecision therapy methods in coaching workshops on psychological well-being. The findings statistically showed significant improvement in psychological well-being, particularly in the subscales of

autonomy, environmental mastery, personal growth, and self-acceptance, indicating that redecision-based workshops are effective in enhancing subjective psychological well-being ([Widdowson et al., 2016](#)).

Additionally, other results of this study showed that redecision therapy training positively affects the psychological well-being of married women aged 30 to 45 in Kerman, leading to an increase in psychological well-being, thus confirming this hypothesis. To explain these results, it can be said that redecision therapy is based on concepts such as injunctions, early decisions, and new decisions. Married women make decisions based on past assumptions that were once suitable for meeting their vital needs but are no longer valuable. The redecision approach considers early decisions and psychological impasses as the factors causing psychological harm and declining individual functioning. Redecision therapy reveals early life decisions in each spouse and facilitates new decisions on cognitive and emotional levels to free women from the limitations of past decisions, thereby enhancing mental health and psychological well-being. Value clarification techniques used in this therapy helped the experimental group members discover their personal values that enrich their lives. Choosing values provided a way to create flexible and practical goals, leading to more successful performance and better efficiency for couples, ultimately improving their psychological well-being ([Mohammadi et al., 2021](#)). Furthermore, during this therapeutic period, women were assisted in examining their life paths and making choices consciously and freely, not based on worry, shame, or other negative thoughts. The therapy also encouraged the experimental group to set specific behavioral goals to achieve their values and commit to these behaviors, contributing to the growth of psychological well-being.

This hypothesis aligns with the results of the following studies. The study by [Moradi et al. \(2021\)](#) aimed to compare the effectiveness of structural couple therapy and redecision couple therapy on the psychological well-being of infertile couples in Sanandaj. The results showed that both therapies had a significant impact on the psychological well-being of infertile couples compared to the control group. [Chamani Ghalandary \(2019\)](#) examined the effectiveness of reality therapy training on the psychological well-being and happiness of soldiers in a military center in Tehran, finding that reality therapy positively impacted the soldiers' psychological well-being ([Chamani Ghalandary et al., 2019](#)). [Abdi Dehkordi \(2018\)](#) studied the effectiveness of group reality therapy on irrational beliefs, psychological

hardiness, and academic achievement of gifted students, concluding that group reality therapy positively improved the psychological well-being of students (Abdi Dehkordi et al., 2019). Gassmann-Pines et al. (2020) found that redecision therapy had a positive effect on well-being in his study on the effectiveness of redecision therapy on well-being (Gassman-Pines et al., 2020).

5. Limitations & Suggestions

This study, like others, has limitations. The findings are limited to married women in Kerman and cannot be generalized to other women. The COVID-19 pandemic also caused difficulties and challenges in the research process. It is suggested that family and marriage counselors and therapists use the redecision therapy approach in various therapy groups to reduce psychological problems, increase psychological well-being, and enhance rational behavior. Redecision therapy, as a short-term therapeutic approach, provides quicker therapeutic results for clients, making it beneficial for those seeking rapid improvement and better conditions. The simple, effective, and restorative techniques of this therapy model are easily teachable to all clients, emphasizing finding different solutions to problems, which fosters a different perspective on issues and strengthens hope for the future in clients. Based on the results of this study and other research indicating the effectiveness and efficiency of these approaches in improving clients' conditions, it is recommended that family and marriage counselors use this therapeutic approach to help clients achieve their goals in rational behavior and well-being in a shorter time. Additionally, it is suggested to prepare educational programs on the signs of weak rational behavior, its consequences, and coping strategies, and broadcast them in public media so that everyone becomes aware of this phenomenon. The results of this study can be used in counseling centers, psychological services, and marriage and family counseling centers to reduce unrealistic expectations and irrational beliefs and by teaching healthy communication patterns to enhance the psychological well-being of women, significantly contributing to reducing divorce rates.

Acknowledgments

We would like to express our appreciation and gratitude to all those who cooperated in carrying out this study.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Declaration of Interest

The authors of this article declared no conflict of interest.

Ethics Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

Funding

This research was carried out independently with personal funding and without the financial support of any governmental or private institution or organization.

Authors' Contributions

All authors contributed equally.

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