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Comparing the effectiveness of pleasure ability therapy based on healthy human theory and cognitive behavioral therapy on rumination and metacognitive beliefs of women involved in emotional divorce

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Abstract

This research was conducted to compare the effectiveness of the treatment of the ability to enjoy based on the healthy human theory and cognitive behavioral therapy on rumination and metacognitive beliefs of women involved in an emotional divorce in Isfahan city. The current study was quasi-experimental with a pre-test-post-test design and a 1-month follow-up with a control group. The statistical population of the present study was all women involved in emotional divorce who referred and were referred to counseling centers in Isfahan city. Among these people, 54 were replaced in three groups of 18 people (two test groups and one control group) using the available sampling method. The treatment course was the ability to enjoy based on the healthy human theory and cognitive behavioral therapy in 8 treatment sessions (2 hours and two times a week). However, the control group did not receive any intervention. The research tools were the emotional divorce questionnaire (Gottman, 1994), the rumination questionnaire (Nolen-Hoeksma & Morrow, 1991), and the metacognitive beliefs questionnaire (Wells, 1997). For data analysis, analysis of variance with repeated measurements was performed using SPSS 24 software. The results showed that the treatment of the ability to enjoy based on the healthy human theory effectively reduced rumination and metacognitive beliefs in women involved in an emotional divorce in the post-test and follow-up phase. Its effect remained stable over time ($p < 0.05$). Also, cognitive behavioral therapy effectively reduced rumination only in the post-test phase and reduced metacognitive beliefs in the post-test and follow-up phase, and its effect remained stable over time. According to the obtained results, pleasure therapy based on healthy human theory and cognitive behavior is considered one of the effective methods in treating cognitive problems.

Keywords: *Emotional divorce, ability to enjoy, healthy person, cognitive behavioral therapy, rumination, metacognitive beliefs.*

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Introduction

Family is an emotional unit and a network of intertwined relationships that begins with the marriage of a man and a woman. At the beginning of life, most spouses consider their joint venture as love and mutual interest (Pamuk & Dermos, 2015). However, when the married life does not go as expected by the husband and wife, the couple experiences despair and reaches a state of reduced affection towards each other (Hinman & Hinman, 2017). After a long period of conflict, each of the spouses will face the stage of hatred and then the state of indifference. It is the last stage of the emotional relationship between a man and a woman, which leads to an emotional divorce and finally a real divorce (Habibolahzadeh, Shafiabadi, Ghamari, 2020). In fact, the process of divorce usually goes as follows: Minor disagreements, repetition of minor disagreements and their seriousness, separation or reluctance of one spouse to the other party, long and repeated quarrels, tiredness of couples from quarrels and conflicts, emotional divorce and finally legal divorce. Divorce is a process that begins with the experience of an emotional crisis in the context of a dysfunctional family communication pattern. Couples who are not able to respond to each other's basic needs and marital expectations and have low psychological skills and toughness, couples' communication conflicts and family system chaos increase (Azimi, Hosseini, Arefi and Parandin, 2019).

According to estimates, the prevalence of emotional divorce among Iranian spouses is reported as 40.9%, which indicates the high prevalence of emotional divorce in Iran (Hasan Khani, 2016). In emotional divorce, husband and wife withhold their feelings from each other and turn away from each

other, because their trust in each other and their attraction for each other has ended. In fact, emotional divorce is an abnormality in the family system. Although it does not lead to the separation of the couple and for various reasons the husband and wife continue to live together, but their married life lacks intimacy, companionship and emotional exchange (Afrasiabi, Dehghani Daramroud, 2016). The research results have shown that the following factors are the causes of emotional divorce: Failure to meet emotional needs; male negligence; communication problems; Incorrect choice of spouse; lack of empathy and companionship; violent behavior; Not spending time with each other; financial department; sexual dissatisfaction; mistrust; The man's lack of responsibility; Male mental imbalance such as morbid fear, depression, paranoid ideas, psychosis, interpersonal sensitivity, intellectual-practical obsession, anxiety and hostility (Bastani, Golzari, Roshni, 2011; Ebrahimi, Bani-Fatemeh, 2012).

Emotional divorce causes depression and anxiety in couples, domestic violence, extramarital relationships and many problems for children (Khojastehnam, 2018). There is a significant relationship between emotional divorce and other components of behavioral, emotional and cognitive disorders (Sabaghi, Salehi, Moghadamzadeh, 2017). Research has shown that emotional divorce has a significant relationship with difficulty in regulating emotions and self-control, communication skills, irrational beliefs and despair, rumination and metacognitive beliefs in couples (Habibolahzadeh, Shafiabadi, Qamari, 2020).

It seems that women's rumination is one factor in ineffective management of marital

conflicts. Rumination is defined as repeatedly focusing on negative thoughts and emotions about a stressful factor (Andalib, Abedi, Neshat Dost, Aghaei, 2020). A person's involuntary focus on negative and pessimistic thoughts is accompanied by a bias in attention towards negative stimuli such as loss of a life partner and infidelity (Gotlib, Krasnoperova, Neubauer, & Joorman, 2004). Rumination leads to a more negative interpretation of events, which results in a decreased desire to participate in pleasurable activities. Although people often ruminate to understand their negative feelings and problems, rumination not only does not identify the feelings or problems, but also has harmful effects on mental health and well-being (Nolen-Hoeksma, Wisko, & Loyomirski, 2008). Ruminative responses to negative mood and other depressive symptoms are thoughts and beliefs that repeatedly focus one's attention on negative emotions, their nature, and their consequences. When people experience depression or a depressed mood, they isolate themselves from others, think of their problems as the cause of dissatisfaction, without doing anything to solve their problems (Namdarpour, Fatehizadeh, Bahrami, Mohammadi Fesharaki, 2018).

In fact, rumination encourages fruitless and ineffective problem solving (Nolen-Hoeksma et al., 2008) and causes problems to be evaluated as unsolvable and confusing. Rumination prolongs the negative emotions associated with the negative event (Felt, Nepon, Hewitt, 2016) and leads to an increase in behavioral dysregulation through a decrease in executive control that determines impulsivity (Valdrama, Miranda, Jaclik, 2016). Women consistently report higher levels of worry and rumination. Women believe more than men that it is

difficult to control negative emotions such as sadness, fear and anger, the difficulty in controlling negative emotions makes a person lead to negative rumination. They think that they are socially less able to control their emotions than men, because they have not learned active coping strategies since childhood. Women believe that the source of negative emotions in them is less controllable than men, and they report the feeling of control over important life events less than men. People are different in their ways of coping with the difficulties of life. But it has been seen that many conflicts remain unresolved and sometimes intensify. Most of the clients of counseling centers are women and apparently more than men report their dissatisfaction with the relationship and cry out for help. Considering that rumination is reported in women more than men and can cause many problems for the individual, therefore it seems that rumination plays an important role in the creation and continuation of marital problems (Namdarpour, Fatehizadeh, Bahrami, and Mohammadi Pasharaki, 2018).

The results of the studies (Van Derheiden & Van Dermeulen, 2012; Fisher and Wells, 2008; Samadifard, Narimani, Mikaili and Sheikhul Islami, 2015, Tabatbainejad, Ibn Yamin, 2020; Tabrizi, Qamari, Farahbakhsh, Bazarian, (2019); Samadi Fard, (2016); Andalib, Abedi, Neshat Dost, Aghaei, (2020); Zahimani, Fazeli Niko, (2019), Ashuri, Vakili, Ben Saeed and Noei, (2009) indicates that metacognitive beliefs It can be one of the other influential factors in married life and couples' relationships. Metacognition refers to psychological structures, knowledge and processes involved in controlling, modifying and interpreting thoughts, and it is the collection of information that a person has from his

cognitive system. In fact, metacognition is awareness. and monitoring thoughts is thinking about the thinking process and mental response related to people's actions (Desander et al., 2016). Metacognitive beliefs are divided into two main categories: positive and negative. Positive beliefs are related to control strategies related to internal events in Beliefs such as "worrying about the future means I can avoid danger" are examples of positive metacognitive beliefs. In contrast, Bau Negative coping are beliefs about the importance, controllability, and dangerousness of past events. A belief such as "I have no control over my thoughts" is an example of negative metacognitive barriers (Ebrahimi & Heydari, 2020).

People who have incompatible metacognitive beliefs may face problems in reviewing and correcting their actions, behavior, and cognitive processes such as their cognitions and thoughts. As a result, they cannot understand the consequences of their way of thinking and, as a result, their behaviors with appropriate force, and as a result, they are drawn to undesirable behaviors to experience short-lived pleasant emotions and neglect the long-term consequences of such actions. Also, disturbed metacognitive beliefs can cause the use of counter-strategies that are not beneficial, in fact psychological pressure, which these strategies are formed as a result of cognitive interactions (incompatible beliefs) and behavioral interactions (ineffective behaviors) in them (Shafii, Sayadi and Sharifi, 2019). Samadi Fard et al. (2016) showed that spouses who had high metacognitive beliefs were prone to emotional divorce, but spouses who reported low metacognitive beliefs were not prone to emotional divorce. This means that the higher the level of metacognitive belief, the

higher the emotional divorce, and the lower the level of metacognitive belief, the lower the emotional divorce of spouses. Therefore, the use of metacognitive strategies will be associated with the emotional divorce of spouses. Spouses who use metacognitive strategies are not satisfied with their life situation and are more likely to experience emotional divorce. The effects and consequences of emotional divorce have irreparable consequences not only for women and men, but also for children (Lamela, Figuerdo, Bastos, Fitberg, 2016). Considering that individual, family and social psychological damages caused by the emotional divorce of couples in the society appear more for women due to gender discrimination, it makes the need for psychological interventions necessary for this group.

Cognitive behavioral therapy is one of the interventions that has been shown to be effective on metacognitive beliefs and rumination related to emotional divorce in women in various studies (Tabatabaiejad, Ibn Yamin, 2020; Kiani-Rad, Pasha, Asgari, Makvandi, 2020). Cognitive behavioral therapy emphasizes cognitive processes such as thoughts, beliefs, ideas, schemas, values, opinions, expectations and hypotheses (Len, Sher, 2019). The cognitive-behavioral intervention of psychological problems in the context of couple relationships changes the way of interpersonal communication among family members and eliminates or reduces tensions and problems (Datilio, 2009). Cognitive behavioral therapy emphasizes the connection between thoughts, feelings, and behavior. In this approach, it is believed that people can deal with mental pressure by reframing their thoughts. In fact, in this approach, people are encouraged to pay attention to negative

spontaneous thoughts and identify cognitive distortions and challenge them. Then by reconstructing thoughts, they experience better feelings and show more appropriate behaviors (Petersen et al., 2019).

The theory of a healthy person in 2017 by a gentleman based on Iranian culture, one principle (meaning), and twelve characteristics (1. peace, 2. flow, 3. happiness, 4. contentment, 5. generosity without eyes, 6. ability to pass and forget, 7. Satisfaction, 8. Embed, 9. The ability to enjoy, 10. The ability to understand genuine sadness, 11. Communication with the Creator, love for creation, and kindness to oneself, and 12. Having metacognition and using it) are the characteristics. It is called a healthy human being; it was compiled and proposed. These features are included in a range from healthy people to sick people. The more a person has these characteristics, the closer one is to health, and the less one has, the closer they are to disease and a sick person. One of these characteristics is the ability to enjoy (Moradi, Aghaei, Golparvar, 2020).

Pleasure is a mental experience that, even in completely similar conditions, everyone can feel and experience its amount and type. In the treatment of the ability to enjoy based on the theory of a healthy person, a healthy person feels and perceives some pleasure in the process of doing any work and task or makes that work and task enjoyable and joyful for himself and others. The meaning of ability to enjoy is a kind of psychological ability that a person who creates a kind of pleasure from any topic and activity with complete awareness and consciousness and takes the ultimate pleasure in such a way that the re-creation of its memory is also accompanied by pleasure. The result of this pleasure and the memory of it also arouses

the desire to repeat that pleasure in the future. The most important feature of this art is the presence and existence of mindfulness while enjoying. The greater the presence of the whole being and the conscious mind in these situations, the greater the feeling and perception of pleasure. Suppose we follow the path of the stimulus to the feeling of pleasure. In that case, there is another element between the pleasurable stimulus and the feeling of pleasure: the sense organ or organ related to the type of stimulus. That is, from the sensory stimulus (pleasurable) to the sensory organ or organ such as the eye, ear, nose, tongue, skin, and finally, the feeling. This is a mechanical process, and a stimulus-response function carried out in almost all living things, including humans, similar to each other and did not require thinking and understanding. Unfortunately, most human beings are subject to the same mechanical and predetermined law of the early creation of mankind in the field of pleasure. After feeling pleasure, they are less able to perceive and recognize pleasure or pay attention. Suppose the art of real enjoyment is in the perception, understanding, and recognition of pleasure. It means two or at least one step ahead of just feeling it. That is, sensory stimulus, sensory organ or organ, feeling, perception, cognition and metacognition. The technique of enjoyment based on a healthy person, considering the factors involved in emotional divorce, can improve the effects of emotional divorce along with upcoming problems such as rumination and metacognitive beliefs in people by strengthening the five senses and mindfulness (Aghaei, 2018).

According to the research background explained in relation to the target variables (rumination and metacognitive beliefs) in the treatment of the ability to enjoy and

cognitive behavioral therapy on women with emotional divorce, conducting this research can be important in many ways: First, the prevalence of divorce Emotionality is high in different strata of Iranian couples (Kianirad, Pasha, Asgari, Makvandi, 2020; Berzouki, Tokel, Borg, 2015). ; Secondly, although in the past few decades, studies of emotional divorce and its causative factors have been introduced as one of the main determinants of the tendency to divorce (Atli, 2012; Latifian et al., ; Afrasiabi et al., 2016). The effectiveness of cognitive behavioral therapy on marital problems has been proven in various studies. Nevertheless, there has been no research on the effectiveness of therapy based on the ability to enjoy based on the healthy human theory on emotional divorce. On the other hand, comparing this method, which is based on the theory of logic and Iranian culture, with cognitive behavioral therapy, can be useful in increasing marital satisfaction and reducing emotional divorce, rumination, and metacognitive beliefs in women with emotional divorce. Therefore, the current research was conducted to compare the effectiveness of pleasure-taking therapy based on healthy human theory and cognitive behavioral therapy on rumination and metacognitive beliefs. Therefore, the present study seeks to answer the question of whether there is a significant difference between the effectiveness of the treatment of the ability to enjoy based on the healthy human theory and cognitive behavioral therapy on rumination and metacognitive beliefs of women involved in the emotional divorce.

Method

The current research method was quasi-experimental with a pre-test-post-test design and a 1-month follow-up with a control group. The independent variable was the

treatment of the ability to enjoy based on the healthy human theory and cognitive behavioral therapy that was applied only to the experimental groups and the control group did not receive any intervention. The effect of these two treatment methods on the scores of emotional divorce, rumination and metacognitive beliefs were compared in the post-test and follow-up of the experimental groups compared to the control group. The statistical population of the present study consisted of all female clients with emotional divorce, either self-referred clients or referred by the family court of Isfahan city to Isfahan city counseling and welfare centers in the summer of 2020. According to Delavar (2019), the minimum sample size in intervention studies is fifteen people for each group. Based on this, in order to prevent possible losses, 54 people were selected from among the women with emotional divorce using the available sampling method and replaced by random method in three equal groups (18 people in each group). At first, from the clients referred for emotional divorce problems, a clinical and specialized interview was conducted in the field of marital problems and emotional divorce, and these problems were confirmed by a clinical psychologist. Also, it was re-evaluated through Guttman's Emotional Divorce Scale and scores higher than 8 were confirmed for them in this scale. Criteria for entering the research: having marital disputes in the last three months due to domestic violence or communication problems; not using drugs or psychoactive drugs; not having mental disorders and specific physical diseases; age range 20-45 years old; Having at least a third middle school education; Scores above eight (8+) on the Guttman Emotional Divorce Scale. Also, if any of the participants did not participate in at least one of the treatment

sessions, participated in other work and psychological interventions, or did not meet any of the above criteria, they were excluded from the study. In order to comply with the ethical principles, the conditions of the intervention course were explained to the participants and they were assured about the confidentiality of the information, and then a written consent form was received from them. The participants who volunteered to participate in the research while meeting the entry and exit criteria were randomly divided into three groups. After justifying the participants and initial assessment with research tools, treatment sessions on the ability to enjoy based on the healthy human theory and cognitive behavioral therapy were conducted in three stages: pre-test, post-test and follow-up for the experimental groups. The course of treatment was the ability to enjoy based on the healthy human theory and cognitive behavioral therapy each in 8 treatment sessions (2 hours and 2 times a week). The content of the sessions was prepared and compiled based on the book *Theory of a Healthy Human* (Aghaei, 2018) and the book *Meaning and Wonder* (Aghaei, 2019). The evaluation result of this protocol was done by 6 expert evaluators in the field of psychology and the content validity ratio (CVR) was equal to 0.99. In this way, the implementation capability of the protocol was proved. The treatment plan was carried out in a cognitive-behavioral way in accordance with the practical manual of stress management in a cognitive-behavioral way. The order of the sessions of these two interventions is briefly presented in Tables 1 and 2. In order to evaluate the stability of therapeutic effects over time, a follow-up meeting was held one month after the end of the group therapy sessions. 30 participants in the study again completed the scale used in

the design. To comply with the ethical aspects, after the end of the evaluation phase and in the follow-up meeting, brochures and summaries of topics and techniques that were presented to the experimental group during the treatment sessions were also given to the control group. Finally, the data collected in the pre-test, post-test and follow-up were analyzed using descriptive and inferential statistics (variance analysis with repeated measurements) and SPSS 24 software.

Materials

Emotional Divorce Scale. This scale was designed by Gottman in 1994 in 24 questions. The questions are answered as yes (score 1) and no (score zero) and the range of scores in this scale is between 0 and 24. A high score in this scale indicates emotional divorce in people, and a score of 8 is the cut-off point in this scale, and it means that the person's marital life is subject to separation and signs of emotional divorce are evident in him. Gottman (1994) has estimated the concurrent validity of this scale in couples to be 0.72 and the reliability with Cronbach's alpha method to be 0.75. This tool was translated and validated in Iran by Mousavi and Rahiminejad (2015) using exploratory factor analysis. In total, 4 factors (separation and distance from each other, feeling of loneliness and isolation, need for companionship and conversation, and feeling of boredom and restlessness) were significantly identified with a factor load of 0.49 to 0.80. Cronbach's alpha reliability was reported as 0.93. The reliability of this scale in the present study was obtained using Cronbach's alpha, 0.85.

Rumination scale. This 22-item scale was designed by Nolen-Hoeksma and Morrow (1991) to assess four different types of reaction to negative mood. The questionnaire consists of two subscales of rumination

responses and the scale of distracting responses. Respondents are asked to rate each on a scale from 1 (never) to 4 (often), with a range of 22 to 88. Using Cronbach's alpha, this scale ranges from 0.88 to 0.92, which indicates its high internal consistency (Lumit, 2004). The intraclass correlation for five times of measurement is 0.75 and the retest correlation is 0.67 for a period of more than 12 months (Pappageorgior and Wells, 2003). Cronbach's alpha in Iranian samples is 0.90 and the retest reliability coefficient is 0.82 with a time interval of three weeks (Latfinia, 2007). In the present study, the convergent validity and Cronbach's alpha coefficients of this scale were obtained as 0.81 and 0.74, respectively.

Metacognitive Beliefs Scale (MCQ). The first version of the Wells Metacognitive Belief Scale (MCQ-30), which had 65 items, was developed by Wells and Cartwright-Houghton in 1997. Due to the large number of items, in 2004, a 30-item version of this scale was created by Wells and Cartwright-Houghton. Like the original form, this scale has 5 subscales of uncontrollability and risk, positive beliefs about worry, cognitive attitude or cognitive self-awareness, confidence in memory or cognitive confidence, and the need to control thoughts.

The subscales are added together to obtain a total score. This tool is scored on a four-point scale from do not agree to strongly agree. The range of scale scores will be between 30 and 120. A higher score indicates a high metacognitive belief and a low score means a low metacognitive belief. In the original version, Dorney similarity was obtained for the whole scale of 0.93 and for the subscales between 0.72 and 0.93. Also, the retest reliability of this scale was 0.75 within four weeks and 0.59 to 0.87 for the subscales (Wells and Cartwright-Houghton, 2004). In the Iranian version of the scale, Cronbach's alpha method was used to determine the periodicity of the scale and Cronbach's alpha was 0.91 for the whole scale and between 0.60 and 0.83 for the subscale. Concurrent validity was obtained by calculating the correlation with the Spielgerger trait anxiety scale for the scale of 0.43. Therefore, the findings show that this scale has favorable psychometric properties (Shirinzadeh Dastgerdi, Guderzi, Rahimi, and Naziri, 2009). In this research, the reliability coefficient of the scale using Cronbach's alpha method was between 0.70 and 0.94 and the Cronbach's alpha coefficient for the questionnaire was 78.

Table 1: Summary of treatment sessions for the ability to enjoy based on the healthy human theory (Aghaei, 2018)

| Session | Title | Content |
|---------------------|---|---|
| Introduction | General description and objectives | Self-introduction, asking clients about why they participate in meetings, determining the day and time of meetings, emphasizing punctuality |
| 1 | Communicating with people and motivating them to participate in treatment | Explaining that therapy has various educational and skill components that require a logical sequence based on weekly sessions and that frequent absences or delays can make it difficult, determining a phone number to call in case of emergency |
| 2 | Familiarizing people with the function of the five senses | We explain the purpose of pleasure therapy based on the healthy human theory. |

| | | |
|---|--|---|
| 3 | The technique of pleasure from the five senses (pleasure of the eyes or vision) | (Aim: creating skills to improve marital relationship), answering people's questions |
| 4 | The technique of enjoying the five senses (enjoying hearing or the sense of hearing) | Introducing and familiarizing the group members with each other, creating a safe and reliable environment, conducting the pre-examination, familiarizing with the general rules of treatment. General explanations about the technique of the ability to enjoy, explaining the purpose of the treatment of enjoyment based on the healthy human theory. |
| 5 | Enjoying the five senses (enjoying the tongue or sense of taste) | Acquainting people with the five senses and the use of each one in improving and creating intimate relationships in couples, teaching the technique of enjoying the five senses. |
| 6 | Enjoying the five senses (senses of smell and touch) | Teaching the techniques of enjoying the eyes or the sense of sight, getting to know the pleasurable details of life by understanding it according to the sense of sight. |
| 7 | Paying attention to each other's inner feelings according to the existential philosophy of these feelings jointly and equipping for the future | Teaching the technique of enjoying the five senses (pleasure of the ear or the sense of hearing), couples reaching a common feeling through the pleasure of listening to each other. |
| 8 | Observing the enjoyment of others and being a role model | Teaching the technique of enjoying the five senses (pleasure of the tongue or the sense of taste), obtaining a common and pleasant feeling for couples through the sense of taste to improve relationships. |

Table 2: Summary of cognitive behavioral therapy and general structure of sessions

| Session | Goal | Content |
|---------|--|---|
| 1 | Communicating with people and motivating. Education about the public health psychology model | Education about stress, anxiety and psychological depression in the virtual therapy program, providing home practice |
| 2 | Paying attention to the self-centered formulation based on the cognitive-behavioral approach | Cognitive model training and training through formulation in the areas of general status, thoughts, feelings, behavior and physical sensations. Providing home practice |
| 3 | Cognitive restructuring training (first part) | Cognitive restructuring training, Beck's cognitive style training and thoughts, feelings and behavior cycle training. Paying attention to negative and ineffective thoughts, cognitive errors and reconstruction of thoughts. Homework includes self-monitoring of a case of negative mood and selected behaviors |

| | | |
|---|---|--|
| 4 | Cognitive restructuring training (part two) | Continuing the discussion around the triple cycle and progressive muscle relaxation training, visual imagery. Providing home practice |
| 5 | Stress and anxiety management | Related definitions, understanding the fight-flight response cycle, examining the relationship between stress and performance, teaching ways to reduce stress, learning the schedule, etc. |
| 6 | Communication skills | Abdominal breathing training, listening skills training and active mutual understanding, communication barriers training in the workplace including superiors, colleagues, subordinates. Providing home practice |
| 7 | Effective problem solving | Teaching attitude and effective problem solving skills. Training regular problem solving skills including 1) problem definition and formation, 2) attention to alternative solutions, 3) decision making, and 4) implementation and approval. Providing home practice |
| 8 | Focusing on skills to improve the quality of life and pleasant activities, sleep hygiene, relapse prevention strategies and termination of treatment. | Anger management training and techniques related to it, key concepts and skill enhancement in happiness, job concerns and choosing a professional policy, paying attention to fun and hobbies, understanding the necessity of sleep, training ways to improve sleep quality. Providing home practice |

Findings

In this study, 36 people were in the experimental groups and 18 people were in the control group, and 6 people in the experimental groups did not continue their cooperation until the follow-up stage. In order to homogenize the groups, 3 people were randomly removed from the control group and analyzes were performed on 15 people in each group. The mean and standard deviation of the age group of the ability to enjoy pleasure based on the healthy human theory was 38.26 years, for the cognitive behavioral therapy group was 30.80 years, and for the control group was 35.06 years. The education of the participants in the enjoyment ability group was 5 diploma and

under diploma, 8 postgraduate and bachelor and 2 postgraduates. In the cognitive-behavioral education group, the participants were 5 graduates and under-graduates, 9 graduates and bachelors and 1 graduate. In the educational certificate group, there were 4 participants with diploma and under-diploma, 7 people with postgraduate diploma and bachelor's degree, and 4 people with postgraduate education. Table 3 shows the mean and standard deviation of emotional divorce, rumination, and metacognitive beliefs variables in the pre-test, post-test, and follow-up stages for the groups of the ability to enjoy therapy, cognitive behavioral therapy, and evidence presented.

Table 3: Mean and standard deviation of emotional divorce, rumination and its metacognitive beliefs in treatment stages in three groups

| Variable | Control group | | cognitive behavioral therapy | | Pleasure therapy | |
|----------|---------------|---------------------------|------------------------------|---------------------------|------------------|---------------------------|
| | <u>Mean</u> | <u>Standard deviation</u> | <u>Mean</u> | <u>Standard deviation</u> | <u>Mean</u> | <u>Standard deviation</u> |
| | | | | | | |

| | | | | | | | |
|------------------------------|-----------|-------|--------|-------|--------|--------|-------|
| Emotional Divorce | Pre-test | 17/73 | 4/847 | 14/33 | 3/418 | 15/66 | 6/261 |
| | Post-test | 16/13 | 3/907 | 10/33 | 4/864 | 11/00 | 4/825 |
| | Follow-up | 17/40 | 3/501 | 10/73 | 5/338 | 12/73 | 5/637 |
| Rumination | Pre-test | 47/93 | 10/977 | 49/73 | 10/937 | 44/80 | 7/729 |
| | Post-test | 41/53 | 9/014 | 42/20 | 12/219 | 36/66 | 8/549 |
| | Follow-up | 45/00 | 7/387 | 38/20 | 8/385 | 38/800 | 8/046 |
| Metacognitive beliefs | Pre-test | 75/46 | 10/39 | 79/60 | 9/014 | 73/73 | 9/888 |
| | Post-test | 76/33 | 9/005 | 69/40 | 7/528 | 69/33 | 8/981 |
| | Follow-up | 74/93 | 8/827 | 67/40 | 9/477 | 68/93 | 7/722 |

As can be seen in Table 3, the average scores of women with emotional divorce in the experimental groups have changed in the research variables (rumination and metacognitive beliefs) in the three stages of pre-test, post-test and follow-up. To know whether these changes in the post-test and follow-up scores are statistically significant, repeated-measures analysis of variance was used. The use of this test requires compliance with some basic assumptions, which were first examined. The Shapiro-Wilk test was used to check the normality of the distribution of variable scores. Its values were not significant for the variables of emotional divorce, rumination and metacognitive beliefs in the pre-test and post-test stages in the experimental groups ($P < 0.05$), which indicates the normality of the distribution of scores in these variables.

The results of the M. Box test to check the assumption of homogeneity of the covariance matrices showed: variables of emotional divorce ($F = 1.14$, Box's $M = 15.33$, $p = 0.319$), rumination ($F = 0.579$, Box's $M = 7.5$, $P = 0.861$) and metacognitive beliefs ($F = 0.355$, Box's $M = 4.75$, $p = 0.978$) is not significant in the present sample, so this assumption is established ($p < 0.05$). The results of Lon's test showed that the homogeneity of variances was established in the variables of emotional divorce,

rumination and metacognitive beliefs ($p < 0.05$). The results of Mochli's test in order to check the assumption of sphericity of emotional divorce scores in the pre-test, post-test and follow-up stages showed that Mochli's statistic is not significant for time and this assumption is valid ($P < 0.05$). On the other hand, for rumination and metacognitive beliefs, F will be reported based on Epslin Greenhouse-Geisser.

Table 4 shows the variance analysis results with repeated measures to examine the within-subject and between-subject effects. The results indicate that the effect of treatment stages on emotional divorce, rumination and metacognitive beliefs is significant ($p > 0.001$). Therefore, the research variables differ between the three stages of pre-test, post-test and follow-up. Also, significant levels are observed in the group effect according to the F values. There is a significant difference between the treatment groups of ability to enjoy and cognitive behavioral therapy and the control group in emotional divorce, rumination and metacognitive beliefs ($p > 0.001$). In the following, Bonferroni's post hoc test was used to check the pairwise difference of the means between the two experimental and control groups and to check the pairwise difference of the means in the measurement stages separately for each group.

Table 4: The results of the analysis of variance with repeated measurements related to the effects of in-group and out-group periods

| Variable | Source | | Sum of squares | Df | Mean squares | F statistics | Sig | Eta squared | Effect size |
|------------------------------|---------|--------------------|----------------|----|--------------|--------------|-------|-------------|-------------|
| Emotional Divorce | Within | Factor | 231/304 | 2 | 115/652 | 5/118 | 0/008 | /1090 | 0/810 |
| | | Interactive effect | 680/607 | 4 | 17/152 | 0/759 | 0/555 | /2350 | 0/235 |
| | | error | 1898/089 | 84 | 22/596 | - | - | - | - |
| | Between | group | 618/059 | 2 | 309/030 | 11/425 | 0/000 | /3520 | 0/990 |
| | | error | 1136/044 | 42 | 27/049 | | | | |
| Rumination | Within | Factor | 1513/970 | 2 | 756/985 | 8/287 | 0/001 | 0/165 | 0/957 |
| | | Interactive effect | 356/296 | 4 | 89/074 | 0/975 | 0/426 | 0/044 | 0/296 |
| | | error | 7673/067 | 84 | 91/346 | | | | |
| | Between | group | 529/615 | 2 | 264/807 | 3/241 | 0/049 | 0/134 | 0/587 |
| | | error | 3431/467 | 42 | 81/702 | | | | |
| Metacognitive beliefs | Within | Factor | 850/770 | 2 | 425/385 | 5/221 | /0070 | /1110 | 0/818 |
| | | Interactive effect | 661/407 | 4 | 165/352 | 2/030 | 0/098 | 0/088 | 0/584 |
| | | error | 6843/822 | 84 | 81/474 | | | | |
| | Between | group | 572/015 | 2 | 286/007 | 3/516 | 0/039 | 0/143 | 0/624 |
| | | error | 3416/178 | 42 | 81/338 | | | | |

According to the information in Table 5, there is no statistically significant difference between the effectiveness of the interventions ($p < 0.05$). While there is a significant difference between the average scores of the control group and the group of cognitive behavioral therapy and the treatment of the ability to enjoy based on the healthy human theory from pre-test to post-test ($p < 0.01$).

Regarding the effect of two methods of treatment on emotional divorce, it is observed that there is no significant

difference between the mean of pre-test with follow-up and post-test with follow-up. In fact, it can be said that both methods of treatment of the ability to enjoy based on the healthy human theory and cognitive behavioral therapy have effectively reduced emotional divorce in women involved in emotional divorce only in the post-test phase. While it did not have a significant effect on the follow-up stage. Regarding the effect of two treatment methods on rumination, it can be said that only the intervention method of the ability to enjoy treatment based on the

healthy human theory has effectively reduced rumination in women involved in emotional divorce in the post-test and follow-up phase. Also, its effect has remained stable over time.

In sum, regarding the effect of two methods of treatment on metacognitive beliefs, it can

be said that both methods of treatment have effectively reduced inconsistent metacognitive beliefs in women involved in emotional divorce in the post-test and follow-up phase. Its effect has remained constant over time.

Table 5: Bonferroni test results for pairwise comparison of groups in dependent variables

| Dependent variable | group and time(i) | time and group (j) | Difference of means (i-j) | Standard deviation error | Sig |
|------------------------------|-------------------|--------------------|---------------------------|--------------------------|-------|
| Emotional Divorce | CBT | Control | 4/956* | 1/096 | 0/000 |
| | Pleasure therapy | Control | 3/956* | 1/096 | 0/002 |
| | CBT | Pleasure | -1/000 | 1/096 | 1/000 |
| | Pre-test | Post-test | *3/089 | 0/973 | 0/008 |
| | Pre-test | Follow-up | 20/289 | 1/119 | 0/141 |
| | Post-test | Follow-up | -0/800 | 0/901 | 1/000 |
| Rumination | CBT | Control | 1/444 | 1/096 | 0/275 |
| | Pleasure therapy | Control | 4/733 | 1/096 | 0/050 |
| | CBT | Pleasure | 3/289 | 1/906 | 1/000 |
| | Pre-test | Post-test | *7/356 | 2/134 | 0/004 |
| | Pre-test | Follow-up | *6/822 | 1/812 | 0/002 |
| | Post-test | Follow-up | -0/533 | 2/084 | 1/000 |
| Metacognitive beliefs | CBT | Control | 4/6444 | 1/901 | 0/048 |
| | Pleasure therapy | Control | 4/911* | 1/901 | 0/040 |
| | CBT | Pleasure | 1/467 | 1/901 | 1/000 |
| | Pre-test | Post-test | 4/578 | 1/865 | 0/049 |
| | Pre-test | Follow-up | *5/844 | 2/001 | 0/017 |
| | Post-test | Follow-up | 1/267 | 1/838 | 1/000 |

Discussion

The present study was conducted to compare the effectiveness of the treatment of the ability to enjoy based on the healthy human theory and cognitive behavioral therapy on rumination and metacognitive beliefs in women with emotional divorce. The findings showed that cognitive behavioral therapy significantly reduced rumination and metacognitive beliefs of women with emotional divorce. These results are consistent with the findings of the following studies. The studies of Petersen et al. (2019), Tabatabai-nejad, Ibn-Yemin (2020), Kiani-Rad et al. (2020), Zimzhani and Fazeli Niko (2019), Parse et al. (2015), Samadi-fared et al. (2016).

In explaining the effectiveness of cognitive-behavioral therapy on rumination and metacognitive beliefs of women with emotional divorce, it can be said that emotional divorce can be influenced by various economic, cultural, social and family factors (Afrasiabi et al., 2016). Dissatisfaction with emotional relationships and lack of intimacy between couples creates a kind of emotional separation and blind relationship for some couples over time, and they accept emotional separation more easily. After a long period of arguments and constant arguments, the husband and wife go from the state of enmity and hatred to the state of indifference. Indifference is the last stage of a relationship where only the

physical body of two people is together and there is no psychological connection between them, and at this time moral deviations, social and psychological injuries occur (Ebrahimi, Heydari, 2020). Coldness of relationship and indifference towards each other becomes a habit after some time. As a person withholds his feelings from his wife, the conversation between the couple fades and an invisible wall is created between them; a wall that prevents emotional support from each other. The emotional needs that all people need in their intimate relationships are not met.

In women who have an emotional divorce, the impact of these challenges on their negative thoughts is so great that its consequences are fully evident in their behaviors and emotions. A negative attitude towards life and the future, guilt and self-blame for existing conditions, and a series of negative thoughts and fears about the existence of these beliefs lead to unrealistic worries. Such beliefs can initiate a vicious cycle of metacognitive beliefs, including uncontrollability, positive beliefs about worry, and predicting the experience of negative emotions such as anxiety, depression, and rumination (Namdarpour et al., 2018). According to Wells (2009), metacognitive factors (cognitive self-awareness, positive belief about worry, cognitive certainty, having a negative belief about the need to control thoughts and belief about the uncontrollability of worry) include an important part of people's cognitive activities. . Then, due to the activation of metacognitive beliefs based on uncontrollability and danger, another type of worry under the name of meta-anxiety is formed in them. Metacognitive beliefs that people have in the form of negative meta-evaluations of the uncontrollability and

dangerousness of their worries, which are the main factor in the formation of anxiety and worry. A defect in metacognition causes a decrease in the satisfaction of married life (Wells, 2009).

Spada, Monta, Nikovich, and Wells (2008) believe that activating the metacognitive belief of uncontrollability and danger causes people to experience emotional tension. Experiencing emotional tension in people who have a high score in the dimension of uncontrollability and risk causes these people to engage in incompatible coping strategies (avoidance, thought suppression, etc.). Using these strategies makes the concepts of threat more accessible in processing and intensifying stress and negative emotions. Teaching appropriate metacognitive strategies to couples improves their marital satisfaction. Also, rumination is a process based on critical, evaluative and judgmental thinking about oneself and others. Therefore, changing the style of thinking and behavior to a state of compassion for oneself and others is a useful way to get out of the flow of rumination.

In cognitive behavioral therapy, the continuity of thoughts, feelings and behavior was emphasized and metacognitive beliefs and thought patterns were targeted in therapy. Because metacognitive beliefs affect how a person responds to negative thoughts, beliefs, symptoms and emotions. As a result, cognitive behavioral therapy by emphasizing on challenging metacognitive beliefs and reducing unhelpful cognitive processes and facilitating cognitive processing styles has been able to affect the subjects' metacognitive beliefs. People can deal with mental pressure by reframing their thoughts. This approach encourages people to experience better feelings by paying attention to negative spontaneous thoughts

and identifying cognitive distortions and challenging them, and then by reconstructing thoughts. Also, show more appropriate behaviors (Len & Sherr, 2019). In fact, by teaching negotiation strategies, compromise and problem solving, positive behaviors and thoughts, negative communication patterns in a couple that often dominate the relationship verbally and behaviorally will be changed. Actually, this feeling is created in them that they receive as much from the relationship as they give rise to it (Datilo, 2020). Obviously, in such a situation, providing rewards and behavioral reinforcements is considered an effective factor in stabilizing the behavior. (Patterson et al., 2019). In general, it can be concluded that cognitive-behavioral bases emphasize mutual recognition of couples and consider recognition as an inseparable part of the couple change process. Finally, the philosophical basis of this perception is that behavior change alone is not enough to correct dysfunctional interactions, but rather the way of thinking of people in incompatible relationships and behavior patterns should be emphasized.

In cognitive behavioral therapy, women involved in emotional divorce are encouraged to witness their own interpretations of marital life events and learn skills so that they can test the validity of these interpretations through gathering and processing information. Also, in this intervention method, there are strategies such as suggesting how to express inner experiences that have probably never been expressed; Encouraging couples to remember the positive feelings that originate from their behavioral differences; teaching couples how to express and listen to each other's inner experiences and feelings; Reframing the problem, pointing out that

behavioral differences are the result of their different learning histories rather than what each one does to the other; Teaching how to correctly criticize each other, etc. (Parse et al., 2015). In the behavioral treatment of this intervention, applying the principles of behavioral therapy such as behavioral exchange, reinforcement and punishment will correct the behavior and prevent the formation of inappropriate interactions and conflicts in couple relationships. For example, in violent situations, the person's thoughts, feelings and conditions are identified before and after the violence. In the early stages of treatment, functional analysis helps the patient identify the determinants or risk situations that increase the likelihood of domestic violence and the reasons for its occurrence. In the later stages of treatment, the functional analysis of violence can help identify difficult situations or conditions for a person to face. In the skills training component, therapists and couples focus on learning non-violence and teaching skills such as anger management in the husband, communication skills, assertiveness and daring, and relaxation techniques (Kyani-Rad, Pasha, Asgari, Makvandi, 2020).

In explaining the effectiveness of the treatment of the ability to enjoy based on the healthy human theory, it can be said that in women with emotional divorce, their emotional and communication exchanges are completely interrupted or continue without desire and satisfaction, which causes problems and conflicts in couple relationships. The treatment of the ability to enjoy based on the theory of a healthy human being is also investigated by applying written training in establishing communication and understanding the five senses and enjoying the anxiety and metacognitive beliefs that

arise from it with the assignments presented in the group and at home. It has also raised the level of understanding of women involved in emotional divorce with regard to the problems and intellectual concerns around them and has reconstructed their beliefs about this issue from another point of view (Aghaei, 2018). In fact, this treatment increases a person's attention and awareness toward physical and psychological feelings. It also leads to a feeling of trust in life, deep compassion, a feeling of love for others, and true acceptance of life's events, which can make a person know his abilities and deal with life's stresses. People with high mindfulness have proper knowledge and insight about their cognitive processes and capabilities, and also use effective strategies to deal with assignments and use skills. This approach increases a person's awareness of himself, others, and the current situation, and this increase in awareness can indicate that the increase in signs of health and adaptability will appear in parallel with these capabilities. In the theory of enjoyment based on the theory of a healthy person, a healthy person feels and perceives some kind of pleasure in the process of doing any work and task, or makes that work and task enjoyable and joyful for himself and others. The meaning of the ability to enjoy is a kind of psychological ability that a person creates a kind of pleasure from any subject and activity with a conscious mind and gets the ultimate pleasure, in such a way that the recreation of its memory is also accompanied by pleasure. The result of this pleasure and the memory of it also arouses the desire to repeat that pleasure in the future. From this, in this treatment, by emphasizing communicating with people and motivating them to participate, they make people well acquainted with the functions of the five

senses. Finally, when people have established a good relationship with their five senses, the teaching to look for a cause and philosophy of existence beyond every feeling is explained. As a result, they can deeply understand their feelings about the days they spent together. Finally, to strengthen all these steps, it is emphasized to teach others how to enjoy and model it in achieving pleasure in life.

The limitations of the research include the quasi-experimental nature of the research and lack of control throughout emotional divorce as an influencing variable in the effectiveness of the intervention due to limited access to a larger number of samples. Also, in the intervention, the group of women was used alone, which, considering that the problems of emotional divorce are usually bilateral, conducting interventions as a couple is likely to be associated with better results. Therefore, it is suggested that therapists and researchers design and implement these interventions in pairs while controlling some demographic variables in order to achieve more favorable and comprehensive results of the effectiveness of these therapeutic approaches on the studied variables.

Ethics

In this research, ethical standards including obtaining informed consent, ensuring privacy and confidentiality were observed.

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Conflict of Interest

According to the authors, this article has no financial sponsor or conflict of interest.

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