




Effectiveness of Schema-Based Parenting on Emotion Regulation, Reflective Functioning, and the Parent-Child Relationship of Mothers with Children Under 6 Years Old

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ABSTRACT

Objective: This study aimed to examine schema-based parenting on emotion regulation, reflective functioning, and the parent-child relationship of mothers with children under 6 years old.

Methods and Materials: The present study is a quantitative research with a pretest-posttest and follow-up design, including two experimental groups and one control group. The statistical population of this study consisted of all mothers with children under 6 years old in the city of Isfahan. For sampling purposes, kindergartens in Isfahan were purposefully selected, and from among them, based on the cut-off point of questionnaires and inclusion and exclusion criteria, 30 participants were chosen. They were randomly assigned equally into two groups: an experimental group (15 individuals) and a control group (15 individuals). Subsequently, schema-based parenting training sessions (good enough parenting) based on the protocol by Mehrabian et al. (2022) were conducted for the experimental group, while the control group received no intervention. The research tools included the Parent-Child Relationship Scale by Pianta (1992), the Parental Reflective Functioning Questionnaire by Fonagy et al. (1991), and the Emotion Regulation Checklist by Shields and Cicchetti (1995). The data collected through questionnaires were analyzed using appropriate statistical tests (repeated measures ANOVA and Bonferroni post hoc test) and SPSS software.

Findings: Given that the calculated F value for intergroup (group membership effect) and intragroup (time effect) as well as the interactive effect of group and time is significant at a 99% confidence level ($P < 0.01$), these results indicate a significant difference between the two groups. Furthermore, the results show that this significant difference exists at least during one of the intervention times among the research groups. The Bonferroni post hoc test results indicated a significant difference between the scores of adaptive emotion regulation, instability/negativity, reflective functioning, and parent-child relationship during

the research stages between the experimental and control groups ($p < 0.01$). In other words, schema-based parenting training has had a significant impact on improving the research variables ($p < 0.01$).

Conclusion: These results confirm that this approach can be used as an effective strategy in enhancing parental abilities and reducing psychological challenges for mothers during the parenting period.

Keywords: *Schema-based parenting, Emotion regulation, Reflective functioning, Parent-child relationship.*

1. Introduction

Studies have shown that the parent-child relationship is a vital factor for the psychological adjustment of children. When discussing the parent-child relationship, the definition is often not clearly structured, and the elements and aspects of parent-child relationships are not well defined. Terms such as health or attachment, bonding (Phillips & Mychailyszyn, 2021) are frequently used when discussing parent-child relationships. Empirical studies define the quality of parent-child relationships as the feeling of openness between parents and children, the degree of openness, communication, and discussion (Phillips & Mychailyszyn, 2021; Popov & Ilesanmi, 2015; Ren & Liu, 2022; Sadeghi & Mazaheri, 2007). Problems and perceived conflicts between parents and children, feelings of rejection by parents, hostility/aggression between parents and children, the degree of interest shown by parents, and the time spent with parents (Bao et al., 2023; Bowlby, 2008; Cheraghi & Ebrahimi, 2018).

Sometimes, incorrect communication of parents with their children leads to behavioral disorders in children (Dehghan & Rasooli, 2016; DiMarzio et al., 2022); therefore, the quality of parent-child relationships in early childhood lays the foundation for future cognitive, social, and emotional development (Dehghan & Rasooli, 2016; Holden & Hawk, 2003). In fact, a mother's emotional care for the child provides a situation where the child feels that others love them and expects others to pay attention to them as a worthy individual. Despite the positive effects of a good relationship, the negative effects of insufficient and undesirable communication cannot be avoided. Some of the negative effects include a high rate of psychological health problems of parents, mutual interactions of parents, bidirectional parent-child communication, and sibling relationships, especially in children under 5 years old and even during elementary school (Mohajeri et al., 2013).

Research indicates that the capacity for mentalization develops within the context of attachment relationships, wherein parental reflective functioning, especially in the

early stages of development, plays a crucial role in the emergence of this capacity. The capacity for mentalization or parental reflective functioning plays a significant role in the child's reflective functioning capacity and, within the context of a secure attachment relationship, enhances their ability to regulate emotions, inhibition, and ultimately the development of a sense of autonomy and agency (Mohammadi et al., 2023; Ordway, 2014). Fonagy et al. (1993) first defined reflective functioning as the ability to imagine mental states in oneself and others. Through this reflective capacity, we create the ability to understand our own and others' behavioral responses as meaningful attempts to relate to those inner mental states (Slade, 2005, 2020). This ability indicates the parents' understanding of the child's psychological state, which ultimately enables the child to achieve this ability during development (Luyten, 2017). Parental reflective functioning means the capacity of parents or caregivers to imagine the child as an entity driven by internal states and psychological conditions such as feelings, desires, and intentions (Bateman & Fonagy, 2016; Bateman et al., 2016; Bateman, 2022). This requires parents or caregivers to have the capacity to see their own inner experiences and understand how their psychological state is shaped in relation to the child, how they change over time through interaction with the child, and ultimately how this psychological state influences the thoughts, feelings, and behaviors of the parent or caregiver (Bateman & Fonagy, 2016; Bateman et al., 2016; Bateman, 2022; Byrne, 2019; Fonagy et al., 2018). Parental reflective functioning is a concept that is driven by internal states and psychological conditions such as feelings, desires, and intentions. It requires parents or primary caregivers to have the capacity to see their own inner experiences, understand how their psychological state is shaped in relation to the child, and understand how they change over time through interaction with the child and ultimately how this psychological state affects the thoughts, feelings, and behaviors of the parent or caregiver (Luyten et al., 2020; Luyten, 2017). The ability to mentalize or parental reflective functioning plays an important role in the child's reflective functioning capacity

and, within the context of a secure attachment relationship, enhances their ability to regulate emotions, inhibition, and ultimately the development of a sense of autonomy and agency (Adkins, 2018; Bateman & Fonagy, 2004; Fonagy et al., 2018).

Individuals use various emotion regulation strategies when facing stressful conditions such as parenting. Emotion is the first organizing element of behavior in attachment. Emotions provide individuals with an opportunity to express their feelings about anything, and this emotional expression acts as a link between internal experiences and the external world (Saadati et al., 2020; Vismara et al., 2021), which interacts reciprocally with cognition and helps individuals evaluate situations related to personal values, needs, goals, or interests (Moreira & Canavarro, 2018; Pourebrahim & Doniamaly, 2021). During child-rearing, mothers experience various emotional, psychological, and marital problems that reduce interaction with the child, leading to feelings of guilt and problems such as depression, stress, and emotion regulation issues (Aghaziarati et al., 2022; Aghaziarati et al., 2023). On the other hand, the inability to regulate emotions in mothers can fundamentally disrupt the psychological functioning of family members in terms of thinking, mood, behavior, coping with emotional and psychological problems, and parenting. Since emotion is an inseparable part of every human's life, emotion regulation is one of the important variables, especially in the parent-child relationship. Emotion regulation can be defined as the processes through which individuals influence what emotions they have, when they have them, and how they experience and express them (Dennis, 2006; Ferreira et al., 2024). According to the theoretical model, emotion regulation is a unique process for modifying emotional experiences to achieve social desirability and to be in a physical and psychological state ready to respond appropriately to external and internal demands. Emotion regulation involves "organizing and regulating" emotional processes for adaptive functioning, and therefore, emotional dysregulation refers to regulatory processes that ultimately disrupt adaptive functioning (Keleynikov et al., 2023; McNeil & Repetti, 2018). Consequently, emotion regulation refers to the stage where individuals influence their emotions and how they express and experience them (Mehrdadfar et al., 2023; Roghani et al., 2022).

In this context, schema therapy has introduced a new perspective in the field of parenting, helping parents better understand their behavioral problems and establish more desirable relationships with their children. Research has

shown that given the important role of schema-based parenting (good enough parenting) in meeting basic emotional needs, shaping children's personalities, and preventing the formation of schemas, schema therapy-based parenting training is highly effective. Good enough parenting or schema-based parenting is a parenting method where parents make the utmost effort to express love to their children and meet their basic emotional needs in a balanced way. A common point in all parenting methods is that parents should establish empathetic relationships with their children and not cause frustration. In good enough parenting, if parents meet their children's basic emotional needs in a balanced way, the likelihood of children experiencing optimal growth and a sense of effectiveness in adulthood increases. Parents using good enough parenting meet their children's basic emotional needs to prevent the formation of maladaptive schemas, leading to the development of healthy personalities in children (Mehrabinia et al., 2022).

In summary, considering the mentioned points and research results, it can be concluded that parenting methods and parental interactions directly impact children's behaviors and their level of adaptability. Despite extensive research on parenting programs for children, the examination, comparison, and effectiveness of schema-based parenting programs considering the conditions and culture of Iranian children and parents is lacking. Parents of children need to receive training on parenting and make the right decisions regarding their communication methods with their children and their education. Considering the dynamic and bidirectional relationship between parenting and child behavior, addressing factors that improve this relationship and enhance parents' ability to cope with the challenges and difficulties of raising a child is essential. In this regard, among parenting programs, schema-based parenting has a very strong theoretical and empirical background. Therefore, the present study aims to examine the effectiveness of schema-based parenting training on emotion regulation and stress.

2. Methods and Materials

2.1. Study design and Participant

The present study is fundamental research and applied in terms of its purpose, using a quasi-experimental design with one experimental group and one control group with a pretest-posttest and two-month follow-up design to test the research hypotheses quantitatively. Both groups completed the mentioned questionnaires at the pretest stage, then the

experimental group received the intervention while the control group received no intervention. After the intervention period, both groups completed the questionnaires at the posttest stage, and after a two-month follow-up period, they were tested again. The statistical population of this study includes all mothers with children under 6 years old in the city of Isfahan. For sampling purposes, kindergartens in Isfahan were purposefully selected, and from among them, based on the cut-off point of the questionnaires and inclusion and exclusion criteria, 30 participants were chosen. They were randomly assigned equally into three groups: one experimental group (15 individuals) and one control group (15 individuals). The inclusion criteria for the study were being a mother, having a child under 6 years old, obtaining scores above the cut-off point in the questionnaires, and providing written consent. The exclusion criteria were taking psychiatric medication, substance abuse, participation in similar sessions, absence in more than two sessions, and unwillingness to continue the study.

Participants who met the inclusion criteria were selected and, after completing consent forms and matching for variables such as age, education, and occupation, were placed in two groups: an experimental group and a control group. Initially, both groups were assessed with the questionnaires mentioned in the research tools section; then, the experimental group received schema-based training sessions. At the end of the training period, both groups completed the posttest questionnaires.

2.2. Measures

2.2.1. Parent-Child Relationship

This scale, developed by Pianta (1992), consists of 33 items that assess parents' perception of their relationship with their child. The Parent-Child Relationship Scale includes domains of conflict, closeness, dependency, and overall positive relationship (sum of all domains). Scoring is based on a 5-point Likert scale ranging from (1) definitely does not apply to (5) definitely applies. This scale is used to measure the parent-child relationship at various ages (Tajeri et al., 2015). Driscoll and Pianta (2001) reported Cronbach's alpha for this questionnaire as 0.75, 0.74, 0.69, and 0.80 for the conflict, closeness, dependency, and overall positive relationship domains, respectively. Tahmasebi (2007) translated the Parent-Child Relationship Scale, and its content validity was confirmed by experts. Ebrahimi et al. (2009) reported the reliability of this questionnaire using

Cronbach's alpha for the conflict, closeness, dependency, and overall positive relationship domains as 0.86, 0.70, 0.61, and 0.86, respectively (Roghani et al., 2022).

2.2.2. Emotion Regulation

The Emotion Regulation Checklist was developed by Shields and Cicchetti in 1995 to assess emotion regulation in children aged 5 to 12 years. This questionnaire has 24 items and 2 subscales: Adaptive Emotion Regulation (8 items: 1, 3, 4, 5, 9, 11, 15, 18) and Instability/Negativity (16 items: 2, 6, 7, 8, 10, 12, 13, 14, 16, 17, 19, 20, 21, 22, 23, 24). The subscale scores are independent of each other, and the questionnaire does not have a total score. Scoring is based on a 4-point Likert scale, where "never" is scored as 1, "sometimes" as 2, "often" as 3, and "almost always" as 4. The minimum score is 24, and the maximum score is 96. Higher scores in the adaptive emotion regulation subscale indicate greater capacity to manage and moderate emotional arousal, while higher scores in the instability/negativity subscale indicate extreme emotional reactions and frequent mood changes unrelated to external events or stimuli. Shields and Cicchetti (1995) reported the internal consistency reliability of this questionnaire for the instability/negativity subscale in preschool children as 0.85 and in school children as 0.88, and for the adaptive emotion regulation subscale as 0.71 and 0.79. The creators of the ERC reported good fit using confirmatory factor analysis, and convergent validity was confirmed by correlating the ERC with emotion regulation scales and affect regulation measures. Medical research in 2021 reported the internal consistency reliability of this questionnaire for the total scale as 0.94. Shafi Tabar et al. (2020) reported the internal consistency reliability of this questionnaire for its two factors as 0.76 and 0.69, respectively. The checklist's information function indicated that the instability/negativity factor had the highest informativeness in the trait level range of -2 to 3, and the adaptive emotion regulation factor had high informativeness and low measurement error in the range of -3 to 2 ($p < 0.01$). Medical research in 2021 revealed two factors through exploratory factor analysis: instability/negativity and adaptive emotion regulation, which together explained 63.90% of the total scale variance. Confirmatory factor analysis results also showed good fit for the model. The adaptive emotion regulation subscale had a significant negative correlation with CBCL components, and the instability/negativity subscale had a significant positive correlation with CBCL components. Shafi Tabar et al.

(2020) confirmed the two factors of instability/negativity and adaptive emotion regulation through exploratory and confirmatory factor analysis (Aghaziarati et al., 2023; Roghani et al., 2022).

2.2.3. Reflective Functioning

Fonagy et al. (1991) conducted a study to test the hypothesis that a parent's capacity to see their child as a psychological entity with mental experiences and to attune to the child's psychological states can play a key role in parenting. They designed a scale to measure the parent's capacity to understand psychological states. Initially, this scale was called the "Self Reflective Functioning Scale" and assessed an individual's capacity to recognize and respond to their own mental experiences. A revision by Fonagy et al. (1998) led to the creation of the "Reflective Functioning Scale." Until 2005, no study had used this scale to measure parental reflective functioning. Luyten et al. (2009) designed the "Parental Reflective Functioning Questionnaire" to measure the caregiver's capacity to respond to their own and their child's mental experiences. This self-report multidimensional scale assesses the parent's capacity to consider their child as a psychological unit. This questionnaire is designed for mothers with children under 5 years old and consists of 18 items, scored on a Likert scale from 1 (strongly disagree) to 7 (strongly agree). Very low scores indicate a lack of interest and attention to the child's psychological state, while very high scores indicate excessive and intrusive mentalization. According to Luyten et al. (2017), Cronbach's alpha for the subscales of prementalizing mode, certainty about mental states, and interest and curiosity was reported as 0.70, 0.82, and 0.74, respectively. Goudarzi et al. (in press) examined the psychometric properties of this questionnaire and reported internal consistency reliability for the subscales of prementalizing mode, certainty about mental states, and interest and curiosity as 0.67, 0.74, and 0.72, respectively. Scoring is as follows: prementalizing mode (items 1, 4, 7, 10, 13, 16), certainty about mental states (items 2, 5, 8, 11, 14, 17; item 11 is reverse scored), and interest and curiosity (items 3, 6, 9, 12, 15, 18; item 18 is reverse scored). This questionnaire was translated into Persian by Mousavi, Bahrami, Rostami, and Rahimi Nejad, with permission from the creators, and its validity and reliability were obtained. Cronbach's alpha for the subscales of prementalizing mode, certainty about mental states, and interest and curiosity in an

Iranian sample were 0.68, 0.72, and 0.68, respectively. The overall test reliability was 0.70 (Mohammadi et al., 2023).

2.3. Intervention

2.3.1. Schema-Based Parenting Training

The training includes 12 sixty-minute sessions based on a program prepared and localized by Mehrabian et al. (2022). The summary of the content of schema-based parenting training sessions (good enough parenting) is as follows (Mehrabinia et al., 2022):

Session 1: Introduce good enough parenting and its importance. Discuss the five basic emotional needs of children.

Session 2: Introduce the need for security and stability and its importance. Explain the schemas formed due to unmet attachment needs.

Session 3: Examine the abandonment/instability and mistrust/abuse schemas. Identify and address negative schemas.

Session 4: Introduce and reinforce the need for love, relationship, and acceptance. Conduct practical exercises to strengthen these needs in children.

Session 5: Discuss emotional regulation strategies for children and parents. Conduct practical exercises to improve emotional regulation.

Session 6: Introduce the basic emotional needs of self-regulation, competence, and identity. Discuss methods to strengthen these needs in children.

Session 7: Examine schemas related to dependency and incompetence. Provide practical techniques to reduce the impact of these schemas.

Session 8: Introduce the need for freedom to express needs and healthy emotions. Conduct activities and games to strengthen these needs.

Session 9: Identify and manage schemas formed due to incorrect limitations and entitlement.

Session 10: Discuss strategies to strengthen responsibility and self-discipline in children. Conduct practical exercises for parents and children.

Session 11: Discuss ways to encourage children towards spontaneity and healthy recreation. Conduct exercises to strengthen children's sense of identity and independence.

Session 12: Review key course content and address any remaining questions. Discuss and provide feedback on the strengths and weaknesses of the educational program.

2.4. Data Analysis

Finally, the collected data will be analyzed using SPSS software, employing descriptive statistics (mean, standard deviation, frequency, skewness, kurtosis) and inferential statistics (multivariate analysis of variance with repeated measures and post hoc tests and mean comparisons).

3. Findings and Results

In terms of demographic characteristics, the mean (standard deviation) age of participants in the schema-based

parenting group was 32.40 (2.15) years, and in the control group, it was 32.07 (3.00) years. Regarding economic status, in the schema-based parenting group, 5 individuals (33%) had a good economic status, 5 individuals (33%) had a moderate economic status, and 5 individuals (33%) had a poor economic status. In the control group, 3 individuals (20%) had a good economic status, 7 individuals (47%) had a moderate economic status, and 5 individuals (33%) had a poor economic status.

Table 1

Descriptive Analysis of Variables

Variable	Group	Pretest Mean	Pretest SD	Posttest Mean	Posttest SD	Follow-up Mean	Follow-up SD
Adaptive Emotion Regulation	Schema-Based Parenting Group	18.40	4.73	21.44	4.52	21.59	4.62
	Control Group	17.93	4.00	18.05	4.73	17.99	4.60
Instability/Negativity	Schema-Based Parenting Group	37.03	7.32	33.03	7.49	33.18	7.16
	Control Group	38.22	7.70	38.50	7.15	38.10	6.96
Reflective Functioning	Schema-Based Parenting Group	68.93	11.73	75.43	11.92	75.80	11.40
	Control Group	70.71	9.78	70.80	10.79	70.42	11.10
Parent-Child Relationship	Schema-Based Parenting Group	91.58	15.32	101.07	16.70	101.66	15.80
	Control Group	98.00	14.20	97.20	13.92	97.23	14.72

Table 1 presents the mean and standard deviation scores of the participants in the study sample for the variables of adaptive emotion regulation, instability/negativity, reflective functioning, and parent-child relationship. As observed, participants in the study had low scores in adaptive emotion regulation, reflective functioning, and parent-child relationship, and high scores in instability/negativity at the pretest stage before the intervention. According to the table, there was a noticeable increase in the mean scores for adaptive emotion regulation, reflective functioning, and parent-child relationship and a noticeable decrease in the scores for instability/negativity in the experimental group. This finding indicates that the implementation of intervention sessions resulted in changes in the dependent variables' scores, whereas the scores of the control group showed no significant changes. Furthermore, as observed, there is no noticeable change in the follow-up stage compared to the posttest stage in the scores of the research variables in the experimental group, indicating the stability of the intervention effects. To examine these changes more precisely, inferential data analysis was conducted, and the results are presented.

Given the significance levels of the Shapiro-Wilk test ($p > 0.05$), the normality assumption is met for all groups. Therefore, with a high probability of normal distribution (greater than 95%), parametric tests can be used. The Levene's test was used to test the assumption of equal variances between the two groups in the population; the results showed no significant difference in the variances between the experimental and control groups for any variable ($p > 0.05$). Considering the non-significance of the interaction between group and pretest in the variables of adaptive emotion regulation, instability/negativity, reflective functioning, and parent-child relationship in the study sample ($p > 0.05$), the assumption of homogeneity of interactive effects is met, and repeated measures analysis of variance (ANOVA) can be used to address the research hypotheses. To examine the effectiveness of schema-based parenting on the dependent variables in the study sample, repeated measures ANOVA was used. In this analysis, posttest scores were entered as dependent variables, group (with two levels) as the independent variable, and pretest scores as covariates in the repeated measures ANOVA equation. The results of Mauchly's test also indicated that the

covariances of the dependent variables are equal across the three stages, and this assumption for using repeated measures ANOVA is met ($p > 0.05$). Therefore, no

correction was applied to the degrees of freedom. The summary results of the ANOVA are reported in [Table 2](#).

Table 2

Summary of Repeated Measures ANOVA to Determine the Effectiveness of Schema-Based Parenting

Variable	Source of Effect	Sum of Squares	df	Mean Square	F Value	Significance	Eta Squared	Power
Adaptive Emotion Regulation	Within-Group							
	Time	689.16	2	344.58	74.84	0.001	0.63	1
	Time × Group	150.42	2	75.21	8.58	0.003	0.36	1
	Error	5970.49	56	106.61	-	-	-	-
	Between-Group							
Instability/Negativity	Group	3006.94	1	3006.94	25.89	0.001	0.44	1
	Error	2439.84	28	87.14	-	-	-	-
	Within-Group							
	Time	1130.18	1.76	643.42	1187.56	0.001	0.97	1
	Time × Group	988.44	3.52	280.81	366.24	0.001	0.95	1
Reflective Functioning	Error	400.71	49.28	8.13	-	-	-	-
	Between-Group							
	Group	553.64	1	553.64	241.04	0.001	0.74	1
	Error	483.96	28	17.28	-	-	-	-
	Within-Group							
Parent-Child Relationship	Time	1386.24	2	693.12	352.23	0.001	0.89	1
	Time × Group	541.69	2	270.85	32.29	0.001	0.61	1
	Error	653.07	56	11.66	-	-	-	-
	Between-Group							
	Group	696.13	1	696.13	67.88	0.001	0.76	1
Adaptive Emotion Regulation	Error	1143.47	28	40.84	-	-	-	-
	Within-Group							
	Time	1863.24	2	931.62	352.23	0.001	0.89	1
	Time × Group	641.69	2	320.85	32.29	0.001	0.61	1
	Error	853.07	56	15.23	-	-	-	-
Instability/Negativity	Between-Group							
	Group	696.13	1	696.13	67.88	0.001	0.76	1
	Error	1143.47	28	40.84	-	-	-	-
	Within-Group							
	Time	1863.24	2	931.62	352.23	0.001	0.89	1
Reflective Functioning	Time × Group	641.69	2	320.85	32.29	0.001	0.61	1
	Error	853.07	56	15.23	-	-	-	-
	Between-Group							
	Group	696.13	1	696.13	67.88	0.001	0.76	1
	Error	1143.47	28	40.84	-	-	-	-

Given that the calculated F values for intergroup effects (group membership effect) and intragroup effects (time effect) and the interactive effect of group and time are significant at the 99% confidence level ($P < 0.01$), these results indicate a significant difference between at least two groups. Furthermore, these results show that this significant

difference exists at least during one of the intervention times among the research groups. To examine the nature of these effects and the differences between groups and measurement times more precisely and test the research hypotheses, the Bonferroni post hoc test was used.

Table 3

Results of Bonferroni Post Hoc Test for Comparing Adjusted Mean Scores in the Experimental and Control Groups

Variable	Pretest-Posttest Mean Difference	Significance	Pretest-Follow-up Mean Difference	Significance	Posttest-Follow-up Mean Difference	Significance
Adaptive Emotion Regulation	2.95	0.001	3.08	0.001	0.10	1.00
Instability/Negativity	-5.75	0.001	-5.63	0.001	-0.12	1.00
Reflective Functioning	6.32	0.001	6.60	0.001	0.28	1.00
Parent-Child Relationship	9.11	0.001	9.60	0.001	0.49	1.00

The results of [Table 3](#) show that the reflective functioning scores in the schema-based parenting group were

significantly higher in the posttest stage compared to the pretest stage ($p < 0.01$). Additionally, the results show that

reflective functioning scores in the schema-based parenting group did not significantly differ between the follow-up stage and the posttest stage ($p > 0.05$), but significantly differed from the pretest stage ($p < 0.01$), indicating the stability of the intervention effects on reflective functioning scores. Therefore, it can be concluded that schema-based parenting had a significant effect on the reflective functioning of participants, and this effect remained stable at the follow-up stage.

Similarly, the results show that the adaptive emotion regulation and instability/negativity scores in the schema-based parenting group were significantly higher and lower, respectively, in the posttest stage compared to the pretest stage ($p < 0.01$). The results also indicate that the subscale scores of emotion regulation (adaptive emotion regulation and instability/negativity) in the schema-based parenting group did not significantly differ between the follow-up stage and the posttest stage ($p > 0.05$), but significantly differed from the pretest stage ($p < 0.01$), indicating the stability of the intervention effects on emotion regulation scores. Therefore, it can be concluded that schema-based parenting had a significant effect on the emotion regulation of participants, and this effect remained stable at the follow-up stage.

Finally, the results show that the parent-child relationship scores in the schema-based parenting group were significantly higher in the posttest stage compared to the pretest stage ($p < 0.01$). The results also indicate that the parent-child relationship scores in the schema-based parenting group did not significantly differ between the follow-up stage and the posttest stage ($p > 0.05$), but significantly differed from the pretest stage ($p < 0.01$), indicating the stability of the intervention effects on parent-child relationship scores. Therefore, it can be concluded that schema-based parenting had a significant effect on the parent-child relationship of participants, and this effect remained stable at the follow-up stage.

The results also confirm the significant differences observed between the intervention and control groups. For pain self-efficacy, the mean difference was 15.22 ($SE = 2.21$, $p < .001$), indicating a substantial improvement in the intervention group. For meta-emotions, the mean difference was 14.13 ($SE = 2.64$, $p < .001$), showing significant enhancement in the intervention group. In terms of catastrophizing, the intervention group had a mean difference of -15.44 ($SE = 2.13$, $p < .001$), reflecting a significant reduction in catastrophizing compared to the control group.

4. Discussion and Conclusion

This study examined the impact of schema-based parenting training on emotion regulation, reflective functioning, and the parent-child relationship among mothers with children under six years old. The findings of this research indicate that schema-based parenting training significantly improves the reflective functioning of mothers with children under six. These findings align with the results of prior studies (Farmanbar, 2023; Spivak & Konichezky, 2022), suggesting that schema-based training can enhance parental reflective functioning. These trainings, by providing tools for identifying and modifying maladaptive schemas, enable parents to become aware of their unconscious influences on parent-child relationships and move towards more constructive interactions. There are limited studies directly conflicting with these findings; however, the vast majority of research confirms the importance of schema-based training in improving reflective functioning.

To explain these findings, it can be said that these trainings, which focus on identifying and modifying maladaptive schemas and children's needs, help mothers to better understand the impact of their mental states on parent-child relationships (Farmanbar, 2023; Mehrabinia et al., 2022; Spivak & Konichezky, 2022). In other words, this allows parents to respond to their children's needs and emotions with greater awareness and precision, which not only improves parent-child relationships but also reduces conflicts and increases empathy within the family. Furthermore, strengthening reflective functioning through these trainings can help mothers better manage the stress of parenting and create a more constructive environment for their children's growth and development (Mehrabinia et al., 2022). Therefore, schema-based parenting training is confirmed as an effective intervention for improving parental reflective functioning, which can positively impact the quality of parent-child relationships and the psychological health of families.

The findings of this study also show that schema-based parenting training significantly improves emotion regulation in mothers with children under six years old. These findings align with the results of prior studies (Hosseini, 2024; Keyvanlo et al., 2022; Mahvash et al., 2024; Pourjaberi et al., 2023; Safikhani, 2022), which emphasize that schema-based training can improve mothers' emotion regulation. These trainings, focusing on identifying and modifying maladaptive schemas and children's needs, help mothers

better understand and regulate their emotions and those of their children, leading to enhanced positive parent-child interactions (Louis et al., 2021). These trainings provide parents with tools to identify and work with their maladaptive emotions, leading to healthier and less stressful family relationships (Lin et al., 2023; Louis et al., 2021; Mehrabinia et al., 2022; Rajaeinia, 2022). This underscores the importance of schema-based educational programs that provide parents with tools to identify and utilize support resources when needed. Consequently, schema-based parenting training is recognized as an effective intervention for improving mothers' emotion regulation, which can positively impact the quality of parent-child relationships and the overall mental health of the family. Implementing these trainings as part of support programs can help parents develop the skills needed to effectively respond to their children's emotional needs, thereby strengthening the foundations of a healthy and balanced family.

The research findings indicate that schema-based parenting training positively impacts improving the parent-child relationship in mothers with children under six years old. These findings align with previous research results (Askari et al., 2017; Fitzpatrick & Ritchie, 1994; Kaveh et al., 2011; Khorasani Zadeh et al., 2019), suggesting that schema-based parenting training can improve parent-child relationships. These trainings provide parents with tools for better managing family communications and strengthening emotional bonds with their children. To explain this finding, it can be said that these trainings, by providing knowledge and skills to identify needs related to children's maladaptive schemas, help mothers establish healthier and more effective communications with their children. These trainings help parents better understand their children's individual differences and communicate with their emotions and needs more constructively. Thus, schema-based parenting training can reduce family conflicts and increase empathy and mutual understanding between parents and children. Implementing these trainings as part of support programs can strengthen the foundations of a healthy and balanced family, as strengthening the parent-child relationship is essential for the healthy growth and development of children (Louis et al., 2021; Mehrabinia et al., 2022). Ultimately, schema-based parenting training helps parents work with their children's maladaptive schemas and allows them to create a positive and supportive environment for their children's emotional and cognitive development. This, in turn, can enhance the mental and social health of the entire family (Mehrabinian et al., 2022).

5. Limitations and Suggestions

Like other studies, this research faced limitations. For example, selecting samples from a specific geographic area and using non-random sampling may limit the generalizability of the results to other populations. Given that the research was conducted over a limited period, the long-term effects of the interventions may not be fully apparent. The assessment tools used in the research may have limitations regarding accuracy and validity. Self-reported data always carry some degree of error. External and environmental factors that may influence the results were not controlled in this research. This study only used a limited number of educational methods, which may not cover all aspects of the impact of competency-based training. Comparing different methods can provide a more comprehensive view. The lack of access to qualitative information limits a deeper understanding of the experiences and feelings of the participants. Qualitative data can provide more information on how educational programs impact students. Finally, the following research suggestions are offered:

Examine the Long-term Effects of Training: Conduct research with longer follow-up periods to evaluate the long-term effects of schema-based parenting training on emotion regulation and stress in mothers.

Compare with Other Approaches: Compare the effectiveness of these interventions with other parenting or psychological interventions to identify more effective methods.

Analyze Factors Influencing Effectiveness: Examine the role of factors such as parents' education level, socio-economic status, and children's age in the effectiveness of these trainings.

Impact on Other Variables: Assess the impact of the trainings on other variables related to mental health and parenting abilities, such as parental self-efficacy and life satisfaction.

Examine the Impact of Parents' Gender: Study potential differences in the effectiveness of the trainings between mothers and fathers with children under six years old.

Conduct Qualitative Research: Conduct qualitative studies to gain a deeper understanding of parents' experiences during and after participating in these trainings and how they impact family relationships.

Causal Modeling: Use causal modeling to determine causal relationships among the studied variables and identify

mediating factors that play a role in the effectiveness of the trainings.

Based on the findings of this study, the following practical suggestions are provided:

Develop Educational Programs: Develop and implement schema-based parenting training programs in health centers, schools, and kindergartens to help parents better manage stress and strengthen parent-child relationships.

Parent Training Workshops: Conduct training workshops and support groups for parents to share experiences and learn new parenting skills.

Integrate into Public Policy Programs: Incorporate schema-based parenting training into public policy programs related to family health and the prevention of psychological problems.

Train Specialists: Train mental health professionals, counselors, and child educators to use these approaches when working with families.

Produce Educational Content: Produce educational content, including books, videos, and online programs, to provide parents with easier access to educational resources.

Support Further Research: Encourage and support further research in this field to improve and develop parenting training programs.

Cultural and Awareness Activities: Conduct cultural and awareness activities in the community to emphasize the importance of parenting education and its role in strengthening the mental health of families.

Authors' Contributions

Authors contributed equally to this article.

Declaration

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

Transparency Statement

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Declaration of Interest

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