

The Study of Two Psychotherapy Approaches (Rogers Self Theory and Ellis Rational Theory) in Improvement of Bowen Self-differentiation and Intimacy

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Objective: To compare the effectiveness of rational, behavioral and emotive therapy (REBT) and person-centered therapy (PCT) on self-differentiation and intimacy among divorce clients.

Methods: In quasi-experimental study, 42 divorce clients (both males and females) who presented to the Counseling Center of Sanandaj, Iran were sampled. They were categorized into three groups of PCT, REBT, and control group (each group contained 14 subjects). The recovery indices (dependent variables) employed were the subject of self-differentiation and intimacy, which were measured twice before and after intervention of Differentiation of Self Inventory-2 (DSI-2) and intimacy. The therapy involved 8 one-hour sessions. It was held twice a week and therapeutic effects were traced after 8 months.

Results: The results showed that REBT and PCT were effective on self-differentiation scale and intimacy. Also they were influential in recovery self-differentiation scale and intimacy follow up stage.

Conclusion: REBT and PCT were effective on self-differentiation and its subscales (Emotional reactivity, "I" position, Emotional cut off and Fusion with other) and general intimacy.

Declaration of interest: None.

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Introduction

Psychotherapy is aimed at strengthening the individual's mental and emotional resources so that he can function more effectively. Two forms of psychotherapy are Person-Centered Therapy (PCT) and Rational-Emotive-Behavior Therapy (REBT) (1, 2). PCT is often called self-theory, non-directive counseling or Rogerian counseling. Rogers (3), who introduced this therapy, labeled it as "client-centered therapy". Recently, Rogers labeled it as PCT. PCT was originated in the US. This approach stresses on the ability of clients to determine the issues important to them and to solve their problems (4). The most important quality of

the counseling relationship is the establishment of warm, permissive and accepting climate that permits clients to explore their self-structure in relation to their unique experiences. The person-centered approach to counseling is based on a very positive view of human nature. The method utilizes active listening, reflection of feelings, clarification and facilitation (5).

Ellis (6) formulated REBT. He stated that he views humans as both rational and irrational (6). Emotional problems lie on illogical beliefs. Blame and anger are viewed as dysfunctional and irrational feelings (7). The rational-emotive-behavioral practitioner believes that no person is to be blamed for any thing he or she does, but each person is responsible for his or her behavior. Ellis has formulated a theory of personality identified as the A-B-C-D theory (8). When an individual has an emotional reaction point C (the emotional consequence), after some activating agent, event, or experience has occurred (point A), it is viewed as the result of the system (point B).

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A does not cause C, but the belief system that is held about A leads to C (8).

Self-differentiation, the most central concept in Bowen's theory, has both intra-psychic and interpersonal dimensions. On an intra-psychic level, differentiation refers to the ability to distinguish emotional feelings from other intellectual processes. With the interpersonal level in mind, differentiation involves the capacity to develop a balance of autonomy while maintaining closeness with others. Intra-psychic dimensions of differentiation include emotional reactivity and difficulty in taking an "I" position, while interpersonal dimensions include emotional cut-off and fusion with others. These persons tend to engage in fusion with or emotional cut-off from others in most of their close relationships when under stress (9-13).

In interpersonal situations, poorly-differentiated persons are thought to engage in fusion or emotional cut-off in response to stress or overwhelming anxiety (14-16).

Researchers believe that low differentiation levels contribute to marital conflicts (17-19). In marital relationship, whenever the differentiation level falls low, fusion takes place between couples, leading to low marital quality and compatibility (13, 16, 17, 20-26).

Using a Philippine sample, Tuason and Friedlander (27) tested the cross-cultural applicability of Bowen's theory and reported a significant influence of differentiation on anxiety, similar to the results from USA samples (28). Haber (29), for example, found that couples with higher levels of differentiation had lower levels of relationship conflicts. Another study of married couples also found a significant relationship between differentiation and marital satisfaction (30). In a similar vein, Skowron (31) found a positive correlation between differentiation and marital satisfaction, with husbands' emotional cut-off scores particularly correlating with both husbands' and wives' marital satisfaction scores.

Former studies have examined the relationship between differentiation of self level and subjective well-being (13, 32), mental health dimensions and symptoms of psychic disorders (33-35), marital adjustment (36), styles

of marital relationship (21, 37-39), couple's compatibility (40), marital satisfaction (18, 41), cordiality and sexual satisfaction (42, 43).

Sternberg (44) believes that intimacy is a feeling creating closeness, belonging and contact. Intimacy is the main and real need of human being and it is not just a desire.

The research showed that in high-commitment marriages, there is more intimacy and love and marital conflicts are less observed (45, 46).

Hefazati et al (47) and Sobhi (48) found that three components of excitement, intimacy and commitment are correlated with marital satisfaction. Mitchell et al. (49) in prediction of intimacy factors between couples in their study found that self-disclosure and emphatic responding are the most important behaviors in terms of intimacy of couples. It has been shown that couples do not have significant difference in five dimensions of intimacy, namely relationship orientation, caring, concern, sexuality and communication (50).

What did this study explore?

The present study attempts to answer this questions: Are REBT and PCT effective on self-differentiation and intimacy?

Materials and Methods

Design

The methodology used in this research involved a quasi-experimental design.

Target Population

All divorce clients who presented to the Counseling Center of Sanandaj, Iran, were considered as the target population.

Sampling

On-hundred and seventy-eight clients (woman and man) were selected through stratified random sampling method. Then 42 subjects (11 males and 31 females) were selected through random sampling method and were randomly assigned to three groups (14 subjects in each group): PCT group, REBT group, and control group.

Measurement

The sample was surveyed regarding

self-differentiation and intimacy disorder diagnosis with Differentiation of Self Inventory-2 (DSI-2) and intimacy Scale

Interventions

Two groups of clients (male and female) who complained of marital conflicts were exposed to two different therapeutic interventions:

Group one (PCT group): Subjects in this group were treated through Roger's PCT procedure individually by a trained counselor in the Counseling Center. This method was offered in eight one-hour sessions. It was held two times a week. After eight months, therapeutic effects were traced. Manual of person-centered therapy:

Session1: According to Rogers, how we think and feel about ourselves (our sense of self-worth) is fundamental both to psychological health and to the likelihood that we can achieve goals and ambitions in life. Session 2: Positive regard: it is to do with how other people evaluate and judge us in social interaction. Session 3: Self-concept and congruence/incongruence: the self-concept consists of perceived self; how someone actually sees himself/herself, the respondent answers to: "Who am I? What do I think and feel? etc.". Session 4: Congruence: the aim of PCT is to increase the client's congruence. Session 5: Unconditional positive regard: to create an atmosphere of psychological safety (warmth and acceptance) within the counselling relationship. Session 6: Acceptance: within the counselling relationship. Session 7: Empathic understanding: the person-centered therapist should sense the client's world, their subjective experiences and perceptions, as if it were her or his own. Session 8: Self-actualization: it can be defined as a state of psychological fulfillment, including acceptance of self and others.

Group two (REBT group): In this experimental group, Ellis REBT method was implemented. This method was performed by an experienced and well-informed counselor in the Counseling Center. The therapy involved 8 one-hour sessions. It was held twice a week and therapeutic effects were

traced after 8 months. Manual of REBT: Session1: Cognitive-affective-behavioral theory: irrational beliefs are beliefs that are unrealistic, illogical, and absolutist. It is a person's irrational belief that leads to great anxiety, depression, shame, anger, guilt, not the event which he/she is experiencing. Session 2: Therapy: A-B-C-D-E. A: activating event: Ali asks Maryam if she would go out with him, and she replies that she is busy every Saturday night this year. Session 3: B. Irrational believes. Session 4: C. undesirable consequences: Eotions: feelings of worthlessness, feel anxiousness, and depressed. Session 5: disputing irrational believes is it awful that she rejected me? How am I worthless because she refused me? Where is the evidence that no desirable woman will ever accept me? Session 6: E. emotional effects appropriate feelings: sorrow, frustration, disappointment, self-acceptance, and hopeness. Session 7: E. behavioral effects. Session 8: desired behaviors: improve myself, keep pursuing, ask someone else for dining out.

Ethics

The clients were informed that this intervention is a part of the research. Besides the results would be useful for them, the items that are discussed in the therapy sessions are not discussed with any family member, even spouse without the satisfaction of the clients. In addition, their identity about the results of the questionnaire regarding intimacy would be considered confidential and they can be informed of the results of the test via E-mail or mail. Following the study, they had this chance to continue the therapy sessions alone. After the end of the therapy sessions of the two experimental groups, control group that was waiting for therapy received family therapy sessions.

Measurement Instrument

Differentiation of Self Inventory-2 (DSI-2): The DSI (13) is a 43-item questionnaire ranging from 1 (not all true for me) to 6 (very true of me) using 6-point scales. The DSI contains four subscales: emotional reactivity (ER = 11 items), "I" position (ID = 11 items),

emotional cut-off (EC = 13 items), and fusion with others (FO = 8 items). Confirmatory Factor Analysis (CAF), by Skowron (13) has confirmed the mentioned subscales. The reliability of the questionnaire was calculated by internal consistency using Cronbach's alpha. For ER, ID, EC and FO, the calculated values were, respectively 0.89, 0.81, 0.84 and 0.86 (35). In the present study, this questionnaire was translated into Persian and submitted to the instructors of the Counseling Department of Isfahan University, Iran in order to examine its content validity. Then, the questionnaire was tested on 40 clients (17 men and 23 women). These clients were chosen randomly from those who were referred to the counseling centers throughout Isfahan. The subjects were asked to note down whatever ambiguity or question they had about the items. Results revealed that there is no need to correct the items. At the end, the Cronbach's alpha figures for the mentioned scales were respectively 0.89, 0.91, 0.81 and 0.86 which seems adequate for research goals.

Couples intimacy inventory: This questionnaire has been introduced by Olya et al. (51). It includes 85 questions in the form of Likert spectrum. It covers nine dimensions of marital intimacy: emotional intimacy (11 predicates), intellectual intimacy (8 predicates), physical intimacy (6 predicates), social-recreational intimacy (8 predicates), communication intimacy (11 predicates), spiritual intimacy (9 predicates), psychological intimacy (9 predicates), sexual intimacy (8 predicates), and general intimacy (15

predicates). In this research, general intimacy was used. To determine content validity, 5 family counseling experts were used to give their comments (52). To determine its reliability, Cronbach's alpha was used and total Cronbach's alpha was calculated as 98.58. In this research, in initial study, reliability of the inventory by internal consistency method (Cronbach's alpha) was 0.86.

To analysis the data, descriptive statistics methods (means and standard deviations (SD) and inferential statistics methods including multivariate analysis of covariance (MANCOVA), analysis of variance (ANOVA), and Bonferroni test were used.

Results

Table 1 shows summary of the subjects' demographic variables.

Table 2 shows that means (SD) of self-differentiation and general intimacy were different in three phases of the study (pre-test, post-test and follow-up).

The results presented in table 3 indicate that according to the post-test outcomes, there was a significant difference between the groups in terms of means of self-differentiation and its subscales (emotional reactivity, "I" position, emotional cut-off and fusion with others) and general intimacy ($p < 0.0001$, $F = 46.09$). However, The results showed that there was also a significant difference between PCT and REBT on post-test regarding means of the subscales (emotional reactivity, "I" position, emotional cut off and fusion with other) and general intimacy for group.

Table 1. Summary of the demographic variables of the studied sample.

| Index | Variables | Males (N = 11) | Females (N = 31) |
|---------------------------|-------------------|----------------|------------------|
| Age | Mean | 35.2 | 33.1 |
| Education | Below Junior high | 41% | 51% |
| | High school | 33% | 44% |
| | Bachelor | 22% | 3% |
| | Master or Doctor | 0.4% | 2% |
| Employed | Yes | 65% | 9% |
| | No | 35% | 91% |
| Length of marriage (year) | Mean | 8 | 9 |
| | Range | 1-15 | 2-17 |
| Income (US\$/month) | Mean | 301.34 | 54.23 |
| Current living situation | Live with spouse | 21% | 14% |
| | Live with parents | 6% | 84% |
| | Live alone | 73% | 2% |

Table 2. Means and standard deviations of self-differentiation and its subscales and general intimacy

| Statistics Groups | | Means \pm SD | | |
|-----------------------------------|-----------------------|--------------------|--------------------|--------------------|
| | | Pre-test | Post-test | Follow-up |
| Person-Centered Therapy | Self- Differentiation | 214.34 \pm 13.83 | 87.45 \pm 13.61 | 84.67 \pm 14.28 |
| | Emotional reactivity | 52.23 \pm 9.28 | 18.78 \pm 8.48 | 21.57 \pm 7.35 |
| | "I" position | 49.33 \pm 10.29 | 17.56 \pm 8.65 | 19.34 \pm 8.57 |
| | Emotional cut off | 57.12 \pm 8.18 | 23.45 \pm 6.98 | 21.67 \pm 8.89 |
| | Fusion with other | 39.34 \pm 12.32 | 15.12 \pm 11.76 | 13.35 \pm 9.09 |
| Rational-Emotive-Behavior Therapy | General intimacy | 75.12 \pm 14.54 | 36.19 \pm 13.43 | 33.87 \pm 15.15 |
| | Self- Differentiation | 201.45 \pm 11.61 | 81.54 \pm 14.23 | 79.32 \pm 12.49 |
| | Emotional reactivity | 57.34 \pm 8.17 | 21.43 \pm 9.59 | 18.89 \pm 9.09 |
| | "I" position | 47.21 \pm 11.31 | 16.98 \pm 7.35 | 20.01 \pm 14.17 |
| | Emotional cut off | 55.35 \pm 9.56 | 26.06 \pm 9.11 | 24.61 \pm 11.35 |
| Control | Fusion with other | 37.25 \pm 17.43 | 14.42 \pm 10.47 | 16.11 \pm 12.11 |
| | general intimacy | 72.67 \pm 15.46 | 34.18 \pm 12.68 | 37.54 \pm 10.38 |
| | Self- Differentiation | 201.45 \pm 14.67 | 197.02 \pm 16.35 | 213.03 \pm 17.06 |
| | Emotional reactivity | 57.34 \pm 11.28 | 54.11 \pm 12.78 | 59.43 \pm 14.12 |
| | "I" position | 47.21 \pm 15.54 | 52.45 \pm 13.67 | 56.34 \pm 17.14 |
| | Emotional cutoff | 55.35 \pm 12.43 | 52.06 \pm 14.34 | 53.32 \pm 13.45 |
| | Fusion with other | 37.25 \pm 16.49 | 32.89 \pm 17.45 | 39.08 \pm 16.66 |
| | general intimacy | 72.87 \pm 13.21 | 35.85 \pm 11.21 | 32.05 \pm 15.87 |

Table 3. Multi-analysis of covariance (MANCOVA) on post-test means of self- differentiation and its subscales (emotional reactivity, "I" position, emotional cut-off and fusion with others)

| Variables | Name of test | Values | df error | df Hypoth | F | p | Eta Squared | Observation Power |
|--------------------------------|--------------------|--------|----------|-----------|-------|--------|-------------|-------------------|
| Self- Differentiation | Wilks' Lambda | 0.783 | 47 | 6 | 0.214 | 0.819 | 0.04 | 0.12 |
| pre-test, Emotional reactivity | Wilks' Lambda | 0.872 | 47 | 6 | 0.412 | 0.643 | 0.03 | 0.09 |
| pre-test, "I" position | Wilks' Lambda | 0.432 | 47 | 6 | 1.03 | 0.178 | 0.091 | 0.23 |
| pre-test, Emotional cut off | Wilks' Lambda | 0.213 | 47 | 6 | 1.88 | 0.128 | 0.03 | 0.56 |
| pre-test, Fusion with other | Wilks' Lambda | 0.902 | 47 | 6 | 1.32 | 0.341 | 0.13 | 0.34 |
| pre-test, general intimacy | Wilks' Lambda | 0.734 | 47 | 6 | 0.745 | 0.563 | 0.21 | 0.52 |
| Groups | Pillai's Trace | 0.704 | 107 | 6 | 8.45 | 0.0001 | 0.46 | 1.00 |
| | Wilks' Lambda | 0.074 | 103 | 6 | 46.09 | 0.0001 | 0.81 | 1.00 |
| | Hotelling's Trace | 9.230 | 8 | 6 | 36.12 | 0.0001 | 0.79 | 1.00 |
| | Roy's Largest Root | 9.450 | 47 | 3 | 125.1 | 0.0001 | 0.89 | 1.00 |

Table 4. Multi-analysis of covariance (MANCOVA) on post-test means of self- differentiation and its subscales (emotional reactivity, "I" position, emotional cut-off and fusion with others) and general intimacy

| Variables | Source variable | Sum Squared | df | Means Squared | F | P | Eta Squared | Observation Power |
|-----------------------|-----------------|-------------|----|---------------|--------|--------|-------------|-------------------|
| Self- Differentiation | pre-test | 9.34 | 1 | 8.53 | 0.436 | 0.324 | 67 | 0.01 |
| | Group | 6432.23 | 2 | 3613.17 | 167.34 | 0.0001 | 1.00 | 0.92 |
| | Error | 743.64 | 47 | 13.35 | 0.0001 | | | |
| Emotional reactivity | pre-test | 7.12 | 1 | 6.31 | 0.315 | 0.239 | 89 | 0.01 |
| | Group | 4211.12 | 2 | 1502.28 | 143.45 | 0.0001 | 1.00 | 0.86 |
| | Error | 531.23 | 47 | 11.02 | 0.0001 | | | |
| "I" position | pre-test | 5.25 | 1 | 7.73 | 0.421 | 0.348 | 74 | 0.01 |
| | Group | 5326.46 | 2 | 2419.06 | 174.16 | 0.0001 | 1.00 | 0.87 |
| | Error | 653.34 | 47 | 12.13 | 0.0001 | | | |
| Emotional cut off | pre-test | 4.73 | 1 | 5.94 | 0.741 | 0.504 | 91 | 0.01 |
| | Group | 6149.67 | 2 | 2132.43 | 214.16 | 0.0001 | 1.00 | 0.93 |
| | Error | 543.68 | 47 | 9.67 | 0.0001 | | | |
| Fusion with others | pre-test | 4.98 | 1 | 6.31 | 0.523 | 0.415 | 86 | 0.01 |
| | Group | 5948.21 | 2 | 2311.04 | 232.36 | 0.0001 | 1.00 | 0.91 |
| | Error | 439.08 | 47 | 16.21 | 0.0001 | | | |
| General intimacy | pre-test | 7.65 | 1 | 6.74 | 0.547 | 0.348 | 64 | 0.01 |
| | Group | 6856.42 | 2 | 5347.34 | 136.42 | 0.0001 | 1.00 | 0.94 |
| | Error | 615.25 | 47 | 31.26 | 0.0001 | | | |

The results presented in table 4 indicate that on post-test analyses, means of self-differentiation and its subscales and general intimacy for groups, a significant difference was found ($p < 0.001$).

The results presented in table 5 indicate

that Bonferroni post-hoc test was employed to compare the means of self-differentiation and its subscales and general intimacy in various pairs of groups. There was a significant difference between PCT and REBT with control group.

Table 5. The results of Bonferroni post-Hoc test to compare means of self- differentiation and its subscales(emotional reactivity, "I" position, emotional cut-off, and fusion with others) and general intimacy among the three studied groups

| Variables | Groups | Means | PCT [†] | REBT [‡] | Control |
|-----------------------|-------------------|-------|------------------|-------------------|-------------|
| Self- differentiation | PCT [†] | 21.34 | — | (p < 0.005) | (p < 0.003) |
| | REBT [‡] | 17.45 | (p < 0.004) | — | (p < 0.003) |
| | Control | 43.21 | (p < 0.001) | (p < 0.001) | — |
| Emotional reactivity | PCT [†] | 17.06 | — | (p < 0.005) | (p < 0.005) |
| | REBT [‡] | 13.56 | (p < 0.003) | — | (p < 0.001) |
| | Control | 42.56 | (p < 0.001) | (p < 0.001) | — |
| "I" position | PCT [†] | 19.79 | — | (p < 0.001) | (p < 0.001) |
| | REBT [‡] | 16.49 | (p < 0.005) | — | (p < 0.001) |
| | Control | 41.61 | (p < 0.001) | (p < 0.005) | — |
| Emotional cut off | PCT [†] | 16.83 | — | (p < 0.001) | (p < 0.004) |
| | REBT [‡] | 15.06 | (p < 0.005) | — | (p < 0.001) |
| | Control | 39.32 | (p < 0.001) | (p < 0.001) | — |
| Fusion with others | PCT [†] | 18.36 | — | (p < 0.005) | (p < 0.005) |
| | REBT [‡] | 17.84 | (p < 0.001) | — | (p < 0.001) |
| | Control | 37.73 | (p < 0.005) | (p < 0.001) | — |
| General intimacy | PCT [†] | 21.34 | — | (p < 0.005) | (p < 0.005) |
| | REBT [‡] | 19.49 | (p < 0.001) | — | (p < 0.001) |
| | Control | 42.57 | (p < 0.005) | (p < 0.001) | — |

[†] Person-Centered Therapy; [‡] Rational, Behavioral and Emotive Therapy

Table 6. Comparing mean differences of post-test and follow-up scores on dependant variables of self-differentiation and its subscales (emotional reactivity, "I" position, emotional cut-off and fusion with others) and general intimacy through the t test.

| Dependent Variable | Groups | DF | Post-test | Follow-up | T- test (Post- Follow test) | p |
|-----------------------|-------------------|----|-----------|-----------|--------------------------------|-------|
| Self- Differentiation | PCT [†] | 1 | 87.45 | 84.67 | 2.78 | 0.34 |
| | REBT [‡] | 1 | 18.78 | 21.57 | 2.79 | 0.317 |
| | Control | 1 | 17.56 | 19.34 | 1.78 | 0.632 |
| Emotional reactivity | PCT [†] | 1 | 23.45 | 21.67 | 1.78 | 0.701 |
| | REBT [‡] | 1 | 15.12 | 13.35 | 1.77 | 0.462 |
| | Control | 1 | 36.19 | 33.87 | 2.32 | 0.138 |
| "I" position | PCT [†] | 1 | 81.54 | 79.32 | 2.22 | 0.627 |
| | REBT [‡] | 1 | 21.43 | 18.89 | 2.54 | 0.784 |
| | Control | 1 | 16.98 | 20.01 | 3.03 | 0.432 |
| Emotional cut off | PCT [†] | 1 | 26.06 | 24.61 | 1.45 | 0.226 |
| | REBT [‡] | 1 | 14.42 | 16.11 | 1.69 | 0.413 |
| | Control | 1 | 34.18 | 37.54 | 3.36 | 0.514 |
| Fusion with other | PCT [†] | 1 | 197.02 | 213.03 | 16.01 | 0.852 |
| | REBT [‡] | 1 | 54.11 | 59.43 | 5.32 | 0.321 |
| | Control | 1 | 52.45 | 56.34 | 3.36 | 0.902 |
| General intimacy | PCT [†] | 1 | 52.06 | 53.32 | 1.26 | 0.784 |
| | REBT [‡] | 1 | 32.89 | 39.08 | 6.19 | 0.534 |
| | Control | 1 | 35.85 | 32.05 | 3.08 | 0.854 |

[†] Person-Centered Therapy; [‡] Rational, Behavioral and Emotive Therapy

The results presented in table 6 indicate that there was not a significant difference in post-test and follow-up stages of the study between PCT and REBT. However, there was not any significant difference in the other two phases of the study (post-test and follow-up) between PCT and REBT.

Discussion

The results obtained here are in agreement with previous reports about the effectiveness of the cognitive therapy method on improving the implicated variables (32-35). The current study is in conformity with other studies such as Timm (36), Skowron (31), Hobby (37), Baum and Shnit (38), Teasing (21), and

Hollander (39). The results of this research are in accordance with the theoretical findings and concepts of this approach, since Ellis approach is, in fact, a direct method and sometimes a therapist moves ahead of the client and uses verbal shock. Based on clinical experiences, it seems

that especially in the culture of Kurdistan province, Iran this method is more effective on self-differentiation and its subscales (41). Studies by Elieson (33) are cases in point. Persuading the clients to be active is more important than that we can stimulate the clients. The current study is in conformity with other studies such as Timm (36), Skowron (31), Hobby (37), Baum and Shnit

(38), Teasing (21), and Hollander (39).

Although the results show that both Ellis's cognitive therapy method and client-centered therapy method have been effective on self-differentiation and its subscales, it can be assumed that self-differentiation individuals suffer from cognitive problems such as irrational thinking or that they have a biological tendency of self-destruction. According to the present study Ellis's cognitive approach sought to change the individuals' irrational attitude about the outside event to rational attitude so that its behavioral consequences could be changed. Since according to Roger and Ellis's approach both anxiety therapies have been successful, the results of the current study is in conformity with studies conducted by Bartle-Haring and Gregory (25) Killen and Wainryb (24), and Peleg-Popko (26).

The results of the study point to several issues related to prevention and intervention of psychological distress for Iranian clients and couples. There was valid evidence that adjustment difficulties or marital conflict may be a sign of underlying differentiation in couples. Rather than simply treating adjustment problems, therefore, therapists may need to focus on how poor health status can influence psychological conflicts. Although Iranian individuals are considered collectivistic and thus it is necessarily encourage individuals to achieve self-differentiation, and psychological rational and empathy with another, we believe that there is a valid need for Iranian individuals to strive for empathy and self-differentiation. As noted by Rogers, in a collectivist culture, respect for the process of actuality a self means working with, not against, the individuals's values and norms (3). Indeed, in such a situation, clinicians need to be very attentive to the fact that the marital conflict process in the Iranian divorce clients is very different from other cultures. In order to increase therapeutic effects clients and couples who experience marital conflict, counselors and psychotherapists need to make effort to increase process of rational and understand of empathy which is closely related to well-individual functioning. In collectivistic and hierarchical Iranian culture, individuals

functioning level can be improved when therapists who use the Ellis and Rogers approaches focus on rational processes and understand empathy and thus protect the dignity of the individual and honors the good name of the divorce clients. We expect that the results of the present study would have meaningful implications for the prevention and treatment of individuals and families. Future research on this issue should include several type participants and include individual measures to discern whether the similarities and differences found in the present study result from individual level of value orientation or from belonging to specific belief. It will be also valuable to examine the problem belief in the relationship of individual functioning with self and another, since high process of rational and understand of self-differentiation are assumed to be predicated on family functioning and the definition of marital conflict functioning may be different across different cultures.

In sum, it can be stated that the present study's hypotheses were confirmed. The current study was a valuable study of its kind in the examination of the effects of counseling therapy, especially person-centered methods and rational-emotive-behavioral approach on self-differentiation. It is hoped that the findings of the current study be noted in Iran and other parts of the world so that counselors and therapists would be able to choose appropriate approaches for family behavioral problems in any fields and achieve therapy aims. Thus, using this approach to modify processing of excitements of couples and improving their emotional skills, intimacy and communication can be effective.

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Author's contribution

NY conceived and designed the evaluation, drafted the manuscript, collected the clinical data, analyzed and interpreted them, and revised the manuscript. MAK helped in

reviewing literature, distributing and filling questionnaires, editing and finalizing the manuscript. Both authors read and approved the final manuscript.

References

1. Yoosefi N, Hosseiny E. [The study of mental disorder among high school students in City of Saghez. *Education, Comette of Research*]. *J Edu Saghez* 2003; 1(2): 10-4. Persian.
2. Francis G. Introduction in psychotherapy. *J Coun psycho Quart* 2007; 20(7):147-56.
3. Rogers CR. On becoming a person. London, UK: SAGE; 1961: 11-20.
4. Bott D. Carl Rogers and postmodernism: continuing the conversation. *J Fam Ther* 2002; 24(3): 326-9.
5. Priest H. An approach to the phenomenological analysis of data. *Nur Res* 2002; 10(2): 50-63.
6. Ellis, A. The role of irrational beliefs in perfectionism. In: Flett GL, Hewitt PL, editors. *Perfectionism: Theory, research, and treatment*. Washington, DC: American Psychological Association; 2002. p. 217-29.
7. Backx W. REBT as an international therapy. In: Dryden W, editor. *Rational emotive behavior therapy, Theoretical developments in REBT*. New York, NY: Brunner-Rutledge; 2003. p. 55-76.
8. David D, Schnur J, Belloiu A. Another search for the "hot" cognitions: appraisal, irrational beliefs, attributions and their relation to emotion. *J Ration Emo Cog Behav Ther* 2003; 20(2): 93-131.
9. Bowen M. *Family therapy in clinical practice*. New York, NY: Aronson 1978. p. 25-39.
10. Goldenberg I, Goldenberg H. *Family therapy: on overview*. 4th ed. Pacific Grove, CA: Brooks/cole; 2000. p. 179-211.
11. Roytburd LF, Myrna. L. Predictors of Soviet Jewish refugees' acculturation: Differentiation of self and acculturative stress. *Cultur Divers Ethnic Minor Psychol* 2008; 14(1): 67-74.
12. Kerr ME, Bowen M. *Family evaluation*. New York, NY: Norton; 1988. p. 34-89.
13. Skowron EA, Friedlander ML. The differentiation of self inventory: Development and initial validation. *J Counsel Psychol* 2009; 56(4): 597-8.
14. Nichols MP, Schwartz RC. *Family therapy: Concepts and methods*. 5th ed. Boston, MA: Allyn & Bacon; 2000. p. 114-67.
15. Murphy FM. Is the Bowen theory universal? Level of differentiation of self and marital adjustment among Asian-Americans [Dissertation]. Berkeley, CA: Wright Institute, Graduate School of psychology; 1999. p. 65-89.
16. Harrison MD. Partners' level of differentiation of self and perceived relationship quality in gay and lesbian couples [Dissertation]. Santa Barbara, CA: Fielding Graduate Institute; 2003. p. 87-111.
17. Kruse N. The relationship between self differentiation and the levels of trust, shame, and guilt in intimate relationships [Dissertation]. Alhambra, CA: Alliant International Univ.; 2007. p. 35-88.
18. Arpita L. Relationship among differentiation of self, relationship satisfaction, partner support, depression, monitoring/blunting style, adherence to treatment and quality of life in patients with chronic lung disease [Dissertation]. Columbus, OH: The Ohio State Univ.; 2006. p. 124-67.
19. Asch M. *Dictionary of psychology*. New Delhi, India; 2003. p. 68-109.
20. Showers CJ, Ryff CD. Self-differentiation and well-being in a life transition. *Pers Soc Psychol Bulletin* 1996; 22(5): 448-50.
21. Campos B, Keltner D, Beck JM, Gonzaga GC, John OP. Culture and teasing: the relational benefits of reduced desire for positive self-differentiation. *Person and Soc Psycho Bull* 2007; 33(1): 3-16.
22. Gushue GV, Constantine MG. Examining individualism, collectivism, and self-differentiation in African American College Women. *J Ment Heal Counsel* 2003; 25(1): 1-5.
23. Kagitcibasi C. Autonomy and relatedness in cultural context: Implications for self and family. *Cross Cul Psychol* 2005; 36(4): 403-22.

24. Killen M, Wainryb C. Independence and interdependence in diverse cultural contexts. In: Harkness S, Raeff C, Super CM, editors. *Variability in the social construction of the child*. New Directions for Child and Adolescent Development, New York, NY: Basic Books; 2000. p. 5-21.
25. Bartle-Haring S, Gregory P. Relationship between differentiation of self and the stress and distress associated with predictive cancer genetic counseling and testing: Preliminary evidence. *J Fam Syst Heal* 2003; 21(4): 357-81.
26. Peleg-Popko O. Bowen theory: A study of differentiation of self, social anxiety, and physiological symptoms. *J Contem Fam Ther* 2002; 24(2): 355-69.
27. Tuason MT, Friedlander ML. Do parent's differentiation levels predict those of their adult children? And other tests of Bowen theory in a Philippine sample. *J Counsel Psychol* 2000; 47(1): 27-35.
28. Chung H, Gale H. Comparing Self-differentiation and psychological well-being between Korean and European American Students. *Contem Fam Ther* 2006; 28(3): 367-81.
29. Haber JF. An investigation of the relationship between differentiation of self, complementary psychological need patterns and marital conflict. [Dissertation]. New York, NY: New York Univ.; 1984. p.87-156.
30. Richards ER. Self reports of differentiation of self and marital compatibility as related to family functioning in the third and fourth stages of the family life cycle. *Sch Inq Nurs Pract* 1989; 3(3): 163-78.
31. Skowron E. The role of differentiation of self in marital adjustment. *J Counsel Psychol* 2000; 47(2): 229-37.
32. Bohlander RW. Differentiation of self, need fulfillment and psychological well-being in married men. *Psychol Rep* 1999; 84: 1274-80.
33. Elieson MV, Rubin LJ. Differentiation of self and major depressive disorders: A test of Bowen theory among clinical, traditional, and Internet groups. *Fam J* 2001; 28: 125-42.
34. Skowron E, Stephen RW, Razia A. Differentiation of self mediates college stress and adjustment. *J Counsel Develop* 2004; 82(1):69-89.
35. Murray TL, Daniels M, Harry M, Christine E. Differentiation of self, perceived stress, and symptom severity among patients with fibromyalgia syndrome. *J Fam Syst Heal* 2006; 24(2): 147-59.
36. Timm TM, Keiley MK. He Effects of differentiation of self, adult attachment, and sexual communication on sexual and marital satisfaction: A path analysis. *J Sex Marital Ther* 2011; 37: 206-23.
37. Hobby MLM. Adult daughters of alcoholic fathers: differentiation of self in family of origin and couple relationships. Alliant International Univ., San Francisco, CA: Bay press, 2004. p. 21-49.
38. Baum N, Shnit D. Self-differentiation and narcissism in divorced parents' Co-parental relationships and functioning. *J Div Remarr* 2005; 42(3); 33-60.
39. Hollander S. Differentiation of self and emerging adulthood unpublished doctoral dissertation [Dissertation]. Greater Miami, FL: Florida International Univ.; 2007. p. 154-36.
40. Richter SD. Couple similarity in differentiation of self [Dissertation]. Denton, TX: Texas Woman's Univ.; 1998. p. 82-93.
41. McCullough RB. The relationship among ethnic identity, differentiation of self and marital and partner satisfaction in Latino-American [Dissertation]. New York, NY: Columbia Univ.; 2005. p. 43-54.
42. Birditt KS, Antonucci TC. Relationship quality profiles and well-being among married adults. *J Fam Psychol* 2008; 21(4): 595-604.
43. Heller PE, Wood B. The process of intimacy: Similarity, understanding and gender. *Mrital Fam Ther* 1998; 24(3): 273-85.
44. Sternberg, RJ. The triangle of love: Intimacy, passion, commitment. New York, NY: Basic Books; 1987. p. 112-28.
45. Bagarozzi DA. Enhancing intimacy in

- marriage. New York, NY: Branner-Rouledge, member Tylor & Forancis Group; 2001. p. 15-34.
46. Abasimolid H. [The investigation of the effect of group education of real therapy on marital commitment of couples in Khomeinishahr] [Dissertation]. Isfahan, Iran: Isfahan Univ.; 2009. p. 42-78. Persian.
 47. Hefazati T, Firoozabadi M, Haqshenas AH. [The investigation of relation between love components and couples satisfaction.] *J Med Scien Univ Mazandaran* 2006; 54(16): 99-109. Persian.
 48. Sobhi, A. [The comparison of intimacy in traditional and non-traditional marriages from the view of women] [Dissertation]. Roudehen, Iran: Islamic Azad Univ.; 2002. p. 43-59. Persian.
 49. Mitchell AE, Castellani AM, Herrington RL, Joseph JI, Doss BD, Snyder DK. Predictors of intimacy in couples' discussions of relationship injuries: An observational study. *J Fam Psychol* 2008; 22 (1): 21-9.
 50. White KM, Speisman JC, Jackson D, Bartis S, Costos D. Intimacy maturity and its correlates in young married couples. *J Pers Soc Psychol* 1986; 50 (1): 152-62.
 51. Olya N, Fatehizadeh M, Bahrami F. [The effect of enriching marital life on increasing couples intimacy.] *J Fam Res* 2006; 6: 119-35. Persian.
 52. Sanayi B. [Marriage, motivations, conflict and its health.] *J Tarbyat Moaalem Univ* 2000; 3(4): 19-43. Persian.