

## **Therapeutic Schema and Compassion-Focused Therapy and Evaluating Its Effectiveness on the on Women's Marital Burnout**

*Emadi far, F., et al.*

### **Extended Abstract**

#### **Aim**

The purpose of the present study was to develop and evaluate a therapeutic model based on schema therapy centered on compassion, as well as to evaluate its efficacy on marital burnout among women with marital conflict and primary incompatible schemas related to the field of cut and rejection.

#### **Method**

In the qualitative part, the present study employed thematic analysis by comparative method, whereas the quantitative part employed a semi-experimental pre-test-post-test design with a control group and a two-month follow-up period. The statistical population of the present study consisted of women with marital conflict who visited counseling centers in the city of Isfahan in the summer of 2019. A total of 26 women were selected using a non-random sampling technique and assigned to the experimental and control groups at random. During two and a half months, the experimental group received the therapeutic model intervention based on schema therapy and compassion-focused therapy. Statistical software SPSS-23 was used to conduct a mixed variance analysis on the research data obtained.

#### **Findings**

According to experts, the results demonstrated that the schema therapy- and compassion-based therapeutic model has sufficient content validity. Using the concepts of schema therapy and therapy focused on compassion, the therapeutic model based on schema therapy and therapy focused on compassion can be an effective therapy to reduce the marital despondency of women with marital conflict and primary incompatible schemas related to the field of cutting and Exclusion, according to the findings of this study.

#### **Discussion**

In the explanation of the findings of the current research on the effectiveness of the therapy model based on schema therapy and compassion-focused therapy on marital heartbreak of women with marital conflict and primary incompatible schemas related to the field of cut and rejection, it can be stated that schema therapy emphasizes the modification of incompatible coping strategies. And it attempts to correct the incompatible childhood schemas. Also, by teaching how schemas affect how to process and confront life events in therapy, rather than using ineffective coping styles and strategies, it provides an opportunity for women with marital conflict who have primary incompatible schemas to avoid situations that trigger schemas and use normal and adaptive coping strategies.

By affecting the primary maladaptive schemas of individuals with a negative attitude toward their emotions and abilities, schema therapy is also said to result in the correction of their ineffective beliefs and thoughts. Consequently, schema therapy using cognitive strategies challenges the cognitive beliefs associated with negative emotional beliefs, and then using experimental techniques such as mental imagery, identifies excessive perfectionism and unmet emotional needs that are the source of incompatible schemas. This knowledge enables women experiencing marital conflict to use schema therapy to break the cycle of incompatible schemas and modify their interactions with their spouses through the application of techniques.

On the other hand, the women in the study learned that by practicing mindfulness, they could reduce ruminations caused by bothersome cognitive and emotional processes, and that, based on the human commonality component, they could abandon experiences that lead to comparison and judgment of their spouses. By normalizing the not-so-positive aspects of married life and the fact that these conflicts may occur in the lives of most couples, they experience fewer negative emotions towards their partner, and less boredom.

The research is limited to women with marital conflict with initial incompatible schemas related to the field of cutting and rejection referring to the counseling centers of the city of Isfahan, the presence of some uncontrolled variables, such as the causes of marital conflicts of the women in the study, the financial status of the families, the number of children, and their social position and the absence of random sampling methods were limitations of this research; therefore, in order to increase the generalizability of the results, it is suggested, at the level of the research proposal, that this study be conducted in other cities, regions, and communities with different cultures, other women, control of the aforementioned factors, and random sampling method. In addition, it is recommended that in future studies, the efficacy of therapy models based on schema therapy centered on compassion on marital distress in other statistical communities, such as divorced women, couples with marital conflicts, and infertile couples, be investigated.

**Keywords:** Conflicting Women, Early Maladaptive Schemas, Marital Burnout, Therapeutic Schema, Compassion-Focused Therapy.