

## Effectiveness of reality therapy on parent-child conflicts and happiness in adolescents of Ilam province

Sajad Sohrabnejad<sup>1</sup> , Akbar Azizifar<sup>2</sup> 

<sup>1</sup>Department of Counseling, Faculty of Counseling and Clinical Psychology, University of Social Welfare and Rehabilitation Sciences, Tehran, Iran

<sup>2</sup>Department of English Language, Faculty of Medicine, Ilam University of Medical Sciences

### Article Info

**Article type:**  
Research Article

**Article history:**

Received: 13 May 2021  
Revised: 24 July 2021  
Accepted: 23 September 2021  
Published online: 1 October 2023

**✉Correspondence to:**

Akbar Azizifar, Department of English Language, Faculty of Medicine, Ilam University of Medical Sciences, Ilam, Iran  
Tel: +98 9188430411  
Fax: +83 -  
**Email:** akb1354@yahoo.com

### ABSTRACT

**Introduction:** The present study aimed to investigate the effectiveness of reality therapy on parent-child conflicts with father-son and happiness in male adolescents in Ilam province.

**Materials and Methods:** This applied research was conducted by experimental method (pre and post-test control group and random assignment). The statistical population of the study consisted of all the first high school teenagers of Shahriari high school in Ilam in the 2021-2022 academic year, of which 30 individuals who were in the moderate to poor range in this questionnaire and randomly were assigned into intervention and control groups. To measure the dependent variable -the parent-child conflict- Murray Strauss scale and for the happiness variable Snider scale were used.

**Results:** The results of this research, which was conducted with multivariate covariance analysis, showed a decrease in the post-test scores of the experimental group compared to the control group ( $P < 0.05$ ). On the other hand, the results of covariance analysis showed that after the test, happiness scores in the experimental group decreased significantly compared to the control group ( $P < 0.05$ ).

**Conclusion:** Based on these results, it can be said that the reality therapy program reduces parent-child conflicts and increases happiness in teenagers.

**Keywords:** Reality therapy, Parent-child conflicts, Happiness

**How to cite this article:** Sohrabnejad S. Azizifar A. Effectiveness of reality therapy on parent-child conflicts and happiness in male adolescents of Ilam province. *J Bas Res Med Sci.* 2023; 10(1) :68-74.



© The Author(s).

Publisher: Ilam University of Medical Sciences

### Introduction

Adolescence is a period for understanding the identity and cognitive, physical, emotional, and behavioral changes (1), and sometimes mutually conflicting feelings towards time, destabilize juvenile temporary or permanently that affect their dimensions of life and causes tension and

anxiety and sometimes incompatibility and conflict in relation to the people around; behavioral and mood disorders is not far-fetched (2). On the other hand, the acquisition of coping skills against this broad range of internal and external changes can help adolescents at this stage of life, If the conflict is severe and the

person does not possess the necessary skills harmful consequences such as behavioral problems, personality, emotional, and social crime will be followed (3, 4). One of the incompatibility factors that psychologists are frequently emphasizing on is parent-child relationship which is an indicating factor for the future relations, and the conflict in this regard gradually occurs and causes the other parties not to achieve the goals in the relationship (5). Severity of conflict is closely associated with the psychological adjustment (6), this means that it has a considerable impact on the quality of relationships and improve the lives of people and also it improves the quality of communication (7), that an individual have what beliefs and attitudes about himself (self), it forms his happiness and this belief and feelings of worthiness influence all aspects of life and individuals' attitude to their ability (8, 9). Being hopeful as one of the most important factors in personality development and also in having good happiness, decision-making, innovation, health has a direct relationship with the amount of self-esteem and sense of self-worth (10). Deb, in a study on 118 patients with depression found that; women with lower self-esteem with depression and happiness were less depressed than men (11). Considering the problems that are caused by low self-esteem and also since almost all conducted research are descriptive, the need for intervention approaches is more needed. The interventions by Mac Manus (2009) with the cognitive-behavioral approach to change the recognition of individuals with low happiness who were anxious and depressed showed the effectiveness of this approach (12), Therefore efficiency of different approaches can lead to better individuals' understanding of their beliefs and self-worth. For the efficient control of life one should satisfy the needs which he or she considers them important and vital and does not prevent others from meeting their needs. If a person acts responsibly it will causes that his needs to be provided in

relation to others and the social environment (13, 14). Humans can create a better position for themselves by choosing the most appropriate and effective way to achieve pleasure, power, freedom, love, and belonging (15). In fact, although the underlying human needs are the same, but the specific actions that each person will choose to satisfy their basic needs to be achieved, is unique(16). Considering what about the parent-child conflicts and happiness and how control resources increase them (17) and considering the benefits of group therapy, the study intends to examine the effectiveness reality therapy on parent-child, father-son conflict, and happiness in male adolescents.

### Materials and Methods

This research is an experimental study with a pretest-posttest and control group. In this study, subjects were randomly assigned to control and experimental groups. The statistical population of this study consisted of 16-19 years old male high school adolescents, the sample consisted of 30 students from a community of 400 students in 2021-2022 academic year in Shahriari high school in the city of Ilam. After completing the parent-child, father-son conflict and happiness scale, students who achieved low to moderate scores were selected and randomly assigned into two control and experimental groups, the experimental group received 8 sessions of 90-minute intervention and the control group received no intervention and after the effectiveness of the intervention the control group was also involved. The content of training sessions is as follow:

First session: Greetings and meet each other in the group, expressing the rules governing the group and how to communicate with each other.

Second session: Focusing on knowledge and awareness of members on themselves, identifying the pros and cons and trying to learn to achieve a successful identity

Third session: Teaching of responsibility and how being responsible for all actions

and choices taken and communicating effectively with others

Fourth session: Decision-making skills training, focuses on the present and reviews the changes in thoughts, feelings, actions, and physiological in the present,

Fifth Session: Training and suiting the basic needs as provocative behavior and contributing to the planning for decisions taken

Sixth session: Training behavior assessment, evaluation of value judgments about themselves and others and recognition of the goals and values in relationships.

Seventh Session: Training on how to deal with positive and negative feedback during conflicts in life

Eighth Session: Problem-solving skills training and attention to psychological control method of choice theory in life

#### Research Tools

**Conflict Strategies scale:** This scale is made by Murray Strauss, and has 15 questions that measure the three strategies of conflict resolution skills, reasoning, verbal aggression, and physical aggression among family members. This questionnaire consists of 15 questions which measures 3 tactics of conflict resolution: the skills of reasoning, verbal aggression, and physical aggression among family members. This questionnaire is grading based on the Likert scale with five levels of very low to very high that shows amount of behavior in each question. The first five questions of the questionnaire that measures reasoning are grading in reverse. High scores on this scale indicate a conflict and lower scores are indicating less reasoning strategies. High score on this scale indicate conflict and greater use of verbal and physical aggression strategies. Each subscale scores range is between 5 and 25. Score of 5 indicates a lack of conflict and finally 25 represents the greatest conflict. The scores for the entire test range are between 15 and 75. The score of 15 indicates a lack of

conflict and finally 75 represents the relationship is deteriorated.

**Parent-child Conflict Scale reliability and validity:** Numerous studies have confirmed the internal consistency of subscales, verbal aggression, and physical aggression reasoning. Cronbach's alpha coefficients ranging have been achieved between 42% and 76% scale argument for scale between 62% and 88%, verbal aggression, physical aggression subscale for between 42% and 96% (18).

**Snyder happiness scale:** this test measures the person's attitude towards its own several features, especially in relation to peers, parents, and the school environment, such as humiliation, feelings of inadequacy, self-confidence, and ability to face the problems of life. This test contains 58 articles and measures self-esteem in 4 subscales and has a lie detector scale as well. To estimate the reliability of the questionnaire Pearson's correlation coefficient was used, amount of reliability coefficient was 83%, which was statistically significant(19). In another study about the internal consistency, Cronbach's alpha reliability coefficient was obtained 78%, it was statistically significant that after the implementation of reliability coefficient for the total sample, 75% were reported(20). Selection criteria for the people who were selected in this study was the cut point score of less than 23.

#### Results

In the results section the explanatory variables on the measures of parent-child conflict father-son and hopeful are discussed and to provide pre assumptions in each of the variables, and then the posttest variables scores were compared. As you can see in Table 1, the average scores of the experimental group compared to the pre-test and post-test stages, the components of the parent-child conflict questionnaire, father and son, have decreased significantly. This change is not observed in the control group.

**Table 1.** Descriptive indicators of data obtained from the implementation of parent-child conflict father-son pretest and posttest.

Variables	Experiment group (n=15)		Control group (n=15)	
	Pretest	Posttest	Pretest	Posttest
Reasoning	13.40 ± 1.63	6.86 ± 1.35	13.26 ± 1.38	13.20 ± 1.65
Verbal aggression	12.73 ± 1.16	8.86 ± 1.68	12.33 ± 0.89	12.40 ± 1.24
Physical aggression	13.00 ± 1.25	7.46 ± 1.24	13.13 ± 1.40	12.20 ± 1.61
Total score of conflict	39.13 ± 2.44	23.20 ± 2.78	38.73 ± 1.98	37.80 ± 2.45

Data are shown as mean ± SD.

The statistical significance of multivariate analysis indicators (Wilk's Lambda, Hotelling's Trace, Roy's Largest Root and Pillai's Trace) confirmed the issue that there was a significant difference in, at least, one

of the inventory component of parent-child conflict father-son (Table 2). Therefore, each of these components was analyzed. The results are presented in Table 3.

**Table 2.** The results of multivariate covariance tests.

Type of test	Amount	Presumed df	df error	F	P value
Pillai's Trace	0.93	3.00	23.00	109.021a	0.05
Wilks Lambda	0.06	3.00	23.00	109.021a	0.05
Hotelling's Trace	14.22	3.00	23.00	109.021a	0.05
Roy's Largest Root	14.22	3.00	23.00	109.021a	0.05

**Table 3.** Comparison of parent-child conflict father-son posttest with controlling effect of pre-test in both groups.

Variables	F		P value		Coefficient effect	
	Pretest	Posttest	Pretest	Posttest	Pretest	Posttest
Reasoning	19.80	214.18	0.000	0.005	0.44	0.89
Verbal aggression	8.40	59.85	0.008	0.005	0.25	0.70
Physical aggression	9.69	100.46	0.005	0.005	0.27	0.80

As depicted in Table 3, the data obtained from the comparison of the reasoning component posttest in the two groups by controlling effect of pre-test suggests that after attending the concepts of reality therapy sessions reasoning component scores of teenagers who participated in the experimental group rather than those who were replaced in the control group were significantly reduced. ( $f_{1,25}=214/18$ ,  $P < 0.005$ ). Results obtained from comparison of the verbal aggression component posttest in two groups by controlling effect of pre-test suggests that after attending the concepts of reality therapy sessions verbal aggression component scores of teenagers who participated in the experimental group rather than those replaced in the control group were significantly reduced. ( $f_{1,25}=59/85$ ,  $P < 0.005$ ).

Results obtained from comparison of the physical aggression component posttest in two groups by controlling effect of pre-test

suggests that after attending the concepts of reality therapy sessions physical aggression component scores of teenagers who participated in the experimental group rather than those replaced in the control group were significantly reduced ( $f_{1,25}=100/46$ ,  $P < 0.005$ ). The data from the implementation of happiness scale in the pretest and post-test to separate the group show the mean score of happiness in the post test of experimental group was higher than that of the pre-test. This change is not observed in the control group. To ensure the normal distribution of data obtained from scales and happiness, Kolmogorov-Smirnov test was used.

As shown in Table 4, the data obtained from the scale is distributed as self-normal (the Kolmogorov Smirnov happiness variable is not significant). The default normal distribution of the data was met.

The results showed that Leuven test was not significant ( $f_{1,25}=403/1$ ,  $P < 0.22$ ). This

indicates that the variances are equal. Thus, covariance analysis test to compare the happiness posttest is applicable.

The results obtained from the comparison of the happiness component posttest in two groups by controlling effect of pre-test suggests that after attending the reality therapy sessions happiness component scores of teenagers who participated in the experimental group rather than those replaced in the control group were significantly increased ( $f_{(1,27)}=15/16$ ,  $P < 0.001$ ).

### Discussion

According to the findings of this study, subjects who were undergoing training concepts of reality therapy comparing to those who did not receive training showed less parent-child father-son conflict and also greater happiness.

The findings of this research are consistent with the findings that show the effectiveness of psychotherapy approaches including cognitive behavioral therapy and reality therapy on parent-child conflicts, self-efficacy, self-esteem and happiness (13, 21, 22).

Concepts of reality therapy by emphasizing internal resources and accepting responsibilities try to reduce irresponsible behaviors and constantly encourage people to internal evaluation, people grow personally when they can accept responsibility for their choices, and on the other hand, happiness which is the result of responsible behavior that results from relationship management that is taught to people in the training of reality therapy concepts (23, 24).

To explain the findings of this study it seems that the concepts of reality therapy are emphasizing on internal control and responsibility of risk behaviors (25), concepts of reality therapy which are based on concepts such as problem-solving try to increase the reasoning skills among relations following this effort with the responsibility and one makes wise relations and highlights pleasant consequences of

this relationship, on the other hand, verbal and physical aggression with repeating selection is responsible for the overall behavior in the moment that in which we all choose our behavior; one should be fully aware of the responsibility we all deal with these behaviors conflicting relationships between parent-child (26).

Reality therapy by creating a welcoming and supportive environment using methods such as Deferring judgment about clients, helpful self-disclosure, attention to Metaphors in the way of self-expression of therapists, attention to topics and summarizing, context Provides to formulate, clarify and prioritize his mental perception of problems slow to change through his behavior and thinking. In the reality therapy of people with self-evaluation, focus They remove behavior that is out of a person's control and focus on controllable aspects. To reduce negative and ineffective emotions through positive internal dialogue Ability to be emphasized (25). As a result, a person can develop a sense of empowerment and happiness to experience On the other hand, reality therapy by promoting control and responsibility in people It can provide the basis for happiness (27).

Concepts of reality therapy based on values and beliefs, on the other hand, try to cultivate the ability and trust; a person believes in his own limitations and abilities and relies on these beliefs and values in different situations and in intimate relationships, he always respects. In order to be aware of their abilities to deal with and overcome obstacles and failures and increase their self-esteem, they rely on their internal control center (28), and this finding and explanation is consistent with the findings of studies that reality therapy increases a person's knowledge of his abilities and limitations (29, 30).

### Conclusion

It can be concluded from this study that training concepts of reality therapy to reduce conflicts between parent-child,

father-son, and increased happiness among children and adolescents has been effective, and those in charge of education, counselors, and psychologists. Using the results of this research, it is recommended to promote mental health in adolescents

### Acknowledgment

The authors would like to thank all the staff cooperating in this study.

### References

1. Stallman HM, Ralph A. Reducing risk factors for adolescent behavioural and emotional problems: A pilot randomised controlled trial of a self-administered parenting intervention. *Int J Ment Health Nurs*. 2007;6(2):1-13. doi:org/10.5172/jamh.6.2.125.
2. Sadeghian E, Moghadari Kosha M, Gorji S. The Study of Mental Health Status in High School Female Students in Hamadan City. *Avicenna J Clin Med*. 2010;17(3):39-45.
3. Muris P. Relationships between self-efficacy and symptoms of anxiety disorders and depression in a normal adolescent sample. *Pers Individ Differ*. 2002;32(2):337-48. doi:10.1016/S0191-8869(01)00027-7.
4. Klahr AM, McGue M, Iacono WG, Burt SA. The association between parent-child conflict and adolescent conduct problems over time: Results from a longitudinal adoption study. *J Abnorm Psychol*. 2011;120(1):46. doi:10.1037/a0021350.
5. A T. Effect of Life Skills Training program on parent-child conflict adolescents. Tehran: Tarbiate Moallem University; 2011.P.34-36.
6. Sadian F. The relationship between the structure of power in the family and marital conflict. *J Educational Sci Psychol*. 2003;13(6):43-6.
7. H A. Educational and vocational guidance compatibility. Tehran. Jihoon; 2014 .P.23.
8. John D, MacArthur CT. Research network on socioeconomic status and health. MacArthur Foundation. 2012.P. 54.
9. Robinson MD, Kirkeby BS. Happiness as a belief system: Individual differences and priming in emotion judgments. *Pers Soc Psychol Bull*. 2005;31(8):1134-44. doi:10.1177/0146167204274081.
10. Tavakoli N, Hasanzadeh R, Emadian S. Investigating the mediating role of information processing styles between achievement motivation and perceived academic stress in nursing students. *J. Med. Educ*. 2020;12(2):61-70. doi:10.29252/rme.12.2.61.
11. Deb S, Bhattacharjee A. Self-esteem of depressive patients. *J Ind Acad Appl Psychol*. 2009;35(2):239-44.
12. McManus F, Waite P, Shafran R. Cognitive-behavior therapy for low self-esteem: a case example. *Cogn Behav Pract*. 2009;16(3):266-75. doi:10.1016/j.cbpra.2008.12.007.
13. Valizadeh R, Younesi SJ ,Bahamein G, Sohrabnejad A. Effectiveness of concepts of reality therapy on parent-child conflicts father-son and self-esteem in male adolescents in Ilam province. *J Basic Res Med Sci*. 2015;2(3):42-8.
14. Peterson AV. Choice theory and reality therapy. *TCa J*. 2000;28(1):41-9. doi:org/10.1080/15564223.2000.12034563.
15. Fatemi VA, Shafiabadi A, Khalatbari J, Farhangi A. Comparison of the Effectiveness of Reality Therapy based on Choice Theory and Acceptance and

### Conflict of Interest

The authors declare that they have no conflict of interest.

### Financial Support

This study has received no funding or financial support.

- Commitment Therapy on Communication Skills of Female High School Students. *Razavi Int J Med.* 2021;9(4):81-8. doi:10.30483/rijm.2021.254219.1063.
16. Loyd BD. The effects of reality therapy/choice theory principles on high school students' perception of needs satisfaction and behavioral change. *Int J Real Ther.* 2005;25(1).
  17. Abbasi G, Hoseyni S. Correlation between Family Function, Self-Differentiation, and Life Satisfaction with Attitude toward Marriage of Veteran's Children. *Iran J War Public Health.* 2019;11(1):35-40. doi:10.29252/ijwph.11.1.35.
  18. Tahmassian K. The Impact of Anger Management Training on Anger Self-Regulation Skills and Parent-Adolescent Conflicts in Female Adolescents of Junior High (Guidance) Schools in Tehran. *J Fam Res.* 2010;6(3): 393-404.
  19. Javanbakht M. The effectiveness of group cognitive-behavioral training and group reality therapy on self-esteem of high school students. *J Fundam Mental Health.* 2012;14(54):80-172. doi:10.22038/JFMH.2012.986.
  20. Kaveh MH, Montazer M, Karimi M, Hassanzadeh J. Effects of a theory-based training program with follow-up home visits on self-management behavior, glycemic index, and quality of life among Iranian patients with type 2 diabetes mellitus. *BMC Public Health.* 2022;22(1):1559. doi:10.1186/s12889-022-13959-3.
  21. Bjørseth Å, Wichstrøm L. Effectiveness of parent-child interaction therapy (PCIT) in the treatment of young children's behavior problems. A randomized controlled study. *PloS one.* 2016;11(9):e0159845. doi:10.1371/journal.pone.0159845.
  22. Laursen B, Coy KC, Collins WA. Reconsidering changes in parent-child conflict across adolescence: A meta-analysis. *Interperson Develop.* 2017: 171-86.
  23. Nematzadeh A, Sary HS. Effectiveness of Group Reality Therapy in Increasing the Teachers' Happiness. *Procedia Soc Behav Sci.* 2014;116:907-12. doi:10.1016/j.sbspro.2014.01.318.
  24. Argyle M, Martin M, Lu L. Testing for stress and happiness: the role of social and cognitive factors. 1995.P.19.
  25. Biabangard E. Study of the relationship between concepts of locus of control, self-esteem and educational progress of junior high school students of Tehran in school year 1990-1991. *J Edu.* 1992;6(8):30-4.
  26. Louis GW. Using Glasser's choice theory to understand Vygotsky. *Int J Real Ther.* 2009;28(2):20.
  27. S S. The effectiveness of reality therapy training to increase happiness and responsibility in the mothers of children with Autism disorder. *Psychol Except Individ.* 2017;7(27):53-77. doi:10.22054/jpe.2018.18761.1487.
  28. Amel AK, Amel SK, Erfan A. Effectiveness of parents-focused cognitive-behavioral therapy on attention deficit hyperactivity disorder symptoms, obesity and self-esteem of overweight children with attention deficient hyperactivity disorder. *Adv Biomed Res.* 2018; 25;7:73. doi:10.4103/abr.abr\_170\_17.
  29. Epel N, Zohar AA, Artom A, Novak AM, Lev-Ari S. The effect of cognitive behavioral group therapy on children's self-esteem. *Children (Basel).* 2021;8(11):958. doi:10.3390/children8110958.
  30. Bana S, Sajedi F, Mirzaie H, Rezasoltani P. The efficacy of cognitive behavioral play therapy on self esteem of children with intellectual disability. *Iran Rehabil J.* 2017;15(3):235-42. doi:10.29252/nrip.irj.15.3.235.