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## THE EFFECT OF GROUP GESTALT THERAPY ON STRESS COPING STRATEGIES AMONG WOMEN

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### ABSTRACT

**Background and aim:** Today, there is much information about the different kinds of intelligible psychological pressures in life. Dynamic world, complexity of the life conditions, emotional issues, personality features, a person position in the society and such issues can be stressful for human being and obliges him to attempt for adaptability. Women due to keeping the children at home, house chores and working outside receive more stress and it can disturb their life balance. The present study evaluated the effectiveness of group gestalt therapy on stress coping strategies among 30-45 years women and the components were problem-solving, emotion control and avoidance strategies.

**Methodology:** The study was semi-empirical and pre-test and post-test with control group. As the plan was aimed to improve therapy process, it is an applied study. The data collection instrument was coping strategies questionnaire including 49 questions in three items problem-oriented, emotional-oriented and avoidance-oriented strategies. The validity coefficient was 0.80. The study population was women 30-45 years old of Pardis new city. The study sample was 120 people and the sampling method was multiple-stage random. The study analysis was performed by descriptive and inference statistics. In descriptive statistics, frequency table, plotting chart, central measures and dispersion were used and in inference statistics, covariance analysis was used.

**Results:** The results showed that the mean of post-test scores in stress coping strategies in experiment group in problem-oriented was increased and it showed the positive experiment effect in experiment group on stress coping strategy via problem solving among women and it is reduced in emotional-oriented and avoidance-oriented items. This showed the positive effect of experiment effect on stress coping strategies via controlling emotional and avoidance. But in control group, there was no significant difference in problem-oriented component and it was increased in emotional-oriented and reduced in avoidance-oriented components.

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### INTRODUCTION

Today, stress in families is taken into account by various aspects. In some cases, stress is defined as a psychological and physiological reaction of the body to the stressful conditions. In another group, stress is investigated based on life stressful events and in another group they are focused on daily arguments between the couples. If these arguments continue, it will have adverse effect for a person. Also, stress is considered based on imbalance.

According to the researches, women are more sensitive as they dedicate most of their time to keep the children and house chores and sometimes working outside. The time limitations and reduction of related flexibility make the work relations stressful as psychological effects of this problem on women are four time more than men (Hastings, 2008).

These conditions can lead to the increase of risk of psychosomatic diseases, high blood pressure, cardiovascular system, gastric disease, lack of concentration, memory dysfunction and thinking skills and increase of Shaking behaviour and other risky behaviours among them and if they don't manage their stress, they will have many problems including depression, anxiety, dissatisfaction of self and life, anger and enmity (Ebrahimi, 2007).

Women besides the financial problems and pressures of responsibility of family are faced with some pressures as unsuitable attitude of society and people. The negative attitude to women created some problems as anger, anxiety, hate, depression and inclination to lose touch with the acquaintances and some relatives (Khojastemehr, 2005).

According to Lazarous & Foulkman (1984), coping is an attempt to manage the situation and adjusting with it, not

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controlling it. Thus, coping is the efforts of a person in emotional, cognitive and behavioural items that are used in encountering with psychological pressure to cope, tolerate or decrease the psychological pressure outcomes (Gallagher and Nelson, 2007). Thus, it can be said that

Coping is a process.

Cognitive evaluation plays an important role in coping.

Coping depends upon the cognitive, behavioural and emotional effort of a person.

Coping is done with the aim of keeping mental health.

According to Krohne (2009), the researchers defined four coping strategies as:

Active behaviour or problem-oriented strategy: This method directly deals with the problem and its results.

Evaluation-oriented/cognitive: This method aimed to control and evaluate stressful situation.

Emotion-oriented strategy: This method controls the stressors of emotional and keeping balance.

Avoidance strategy: The aim of this method is to avoid stress and stressful situations.

Among various approaches, group gestalt therapy is mostly considered by the researcher due to the emphasis on responsibility of people, their active nature in life events, using emotion facilitating techniques in working with groups, encouraging the search of internal support instead of external support and encouraging achieving personal self-autonomy. According to Gestalt therapists, a person who searches for help is dealing with "what he should be" and "what he thinks is" and never resembles himself as completely with them. Gestalt therapist asks the patient to attempt to be what he is at that time. This change in patient is acquired via understanding, play role and a part of unwanted personality of self (Goldenberg, Translated by Hossein Shahi Baravati and Naghshbandi, 2009).

In this method, more than considering the abstract issues about various situations and events, preparing the ground for direct experience is emphasized and therapist helps the patients to understand avoidance behaviours by which balance is created in a person. Considering the time and place (present) and creating maximum awareness is the basis of gestalt therapy. A person getting knowledge can expand the relationship between problem and background by gestalt principles and define the unfinished business and correct them. Unfinished business is unmet needs that put great psychological pressure on a person and his behaviour is affected (Yusefi, 2010).

Gestalt therapy's aim is developing awareness and responsibility of the patients. Awareness is achieving knowledge to the environment; a person is more in natural communication with the real environment of self (Heris, 2009).

The general purpose of the study is determining the effectiveness of group gestalt therapy on stress coping strategies among women 30-45 years old in new city of Pardis. The main question of the study was "Is gestalt therapy effective on stress coping strategies among women 30-45 years old?"

### Theoretical basics

Now, stress is one of the main phenomena in human

communities. Numerous people suffer from acute or chronic depression, various views refer to the great range of stressful stimuli as personal, family, job, academic issues, economic, social and political conditions. Various theories are use in this regard and some of them are

### Psychoanalysis theory

Alexander (1990) is the prominent psychoanalyst in mental-physiological reactions and this type of disorders are the outcome of emotional states or unconscious emotional state (Khodayarifard, 2010,p.32).

### Somatic weakness theory

According to somatic weakness theory, stress beside special mental-physiological disorder leads to specific somatic weakness theory. Genetic factors, heart diseases, diet, etc disturb special body organ. This system is vulnerable against future stresses even weak and mild stresses. Based on this theory, disease is due to the interaction between individual physiology and stress (Davidson and Niel, 1990)

### Evolution theory and autonomic balance

This theory states that in a healthy body, complex balance of sympathetic and parasympathetic should be kept. The start of the activity of sympathetic system should be increased by the activity it is compensated by parasympathetic. In order that the blood vessels and glands are not damaged, none of the systems should use their energy for a long time or use it frequently. Such condition leads to sympathetic and parasympathetic imbalance and body changes are occurred that it is exceeding the physical power of organism. Thus, psychological-physiological dysfunctions are occurred (Khodayarifard, 2011, p.33).

### Information processing theory

This theory is the distinction between psychological and physiological tensions. In information processing theory, the interpretation of the stimulants is emphasized as tension factor. This theory is focused on cognitive evaluation and selective attention. This view is important about the decision of a person about the fact that which stimulants can be processed in short-term memory or they are ignored in stress severity. Based on this theory, stress sources are two types:

The prediction of risk or physical pain and complexity of the stimulator requiring the complex answers.

### Group Gestalt therapy

Based on the items, one of the main stress coping strategies is group Gestalt therapy. In group consulting, most of the members have interpersonal problems and the group provides a good space to investigate and solve these problems. Indeed, the group is a small society in which the members experience the contradictions of their routine life and by receiving feedback from the other members achieve better self-knowledge. Also, information transfer is facilitated in the group and people practice new behaviours in the group. By observing the behaviours of others, they learn the suitable performance and by being aware of the others problems, find about the lack of uniqueness of their problem. In Gestalt therapy, members experience their past problems with re-display in the group and implement it as



now something is happened. Thus, gestalt therapy is focused on the experiences of the clients at the present time and the barriers on a person awareness. It is assumed that people should determine the past events affecting their present performance to reach the autonomy and by experiencing from the past events increase their awareness at present time and achieve the generality.

Gestalt therapy is aimed to attain awareness and it is considered a therapeutic factor. Without awareness, a person cannot change his personality but by increasing awareness, he is successful to find some resources for solving the problems and create the conditions in which change is possible. The aim of therapy is not analysis and it is uniformity of contradictory dimensions of a person in order that a person gets back some dimensions of his existence being taken out of his ownership. In this therapy, it is assumed that a person by increase of awareness can cope with his problems and solve them. To avoid problems, people find many solutions and but sometimes these solutions are barriers to their development but therapy interventions help them to organize the existence concepts (Gerald, Kuri, Translated by Asgari *et al.*, 2011, p.176).

### Techniques of group Gestalt therapy

#### Verbal practices

In gestalt therapy, it is assumed there is an association between verbal models and personality. Verbal models indicate our feelings, thoughts and behaviours and by emphasis on identification of verbal models, we can increase person self-awareness.

Verbal can separates us from ourselves and help us to know ourselves. The following verbal practices can help the group leader to guide the members. These practices may not be applied in all the situations but based on phenomenological view, it can be used in suitable situations (Gerald, Kuri, Translated by Asgari *et al.*, 2011).

#### Non-verbal practices in Gestalt therapy

The group leader not only deals with the verbal practices but also it deals with the non-verbal movements and communications and identifies the implicit meanings of the words. The meanings that are revealed by considering the voice tone speed of verbal or strengths of verbal. By mentioning the inadaptability between verbal and non-verbal gestures of the members, they have the opportunity to identify the meanings of the non-verbal movements. To consider the non-verbal behaviour, there are four reasons:

**First**, any behaviour manifests a person personality in the moment.

**Second**, people consider what they say than what they do with their body.

**Third**, non-verbal behaviours are self-motivated while before doing verbal behaviours, we think about them.

**Fourth**, people have coordinated verbal and non-verbal behaviours uniformly (Khodabakhshi *et al.*, 2011, 182).

### Stress coping strategies

It refers to the logical methods of coping with stress in life. This term is used for the coping methods with stress source (Pourafkari, 2007).

To classify the coping process, there are two major approaches, one of the approaches emphasizes on focus of coping, orientation and activity of a person to respond the stressful factor. In the second approach, it is focused on coping style.

By combining these two approaches, we find an organized concept. It means that we can consider the orientation of a person to the stressful factor and divided coping strategy to avoidance and inclination fields.

#### Emotion-oriented strategy

This strategy requires finding some methods for controlling the emotions and to be hopeful to face with the stressful situations. The people who use this strategy, besides having control on their emotions show some feelings as anger or hopelessness.

#### Avoidance-oriented strategy

This strategy requires rejecting or neglecting stressful situations. The people who use this method, reject stressful thoughts consciously and use other thoughts. The people who experience more anxiety and stress use emotional-oriented and avoidance-oriented strategies more than task-based strategy (Lindler and Parker, 1990).

#### Problem solving strategy

It can be said that coping and planning for problem solving is one of the cognitive-behavioural strategies for problem solving (problem focus) while others include cognitive-behavioural efforts to reduce emotional confusions (emotion focus).

As it was said, some of the studies showed that various methods of reaction to stress depend upon some factors as personality features, gender and age differences (Joshi, 2007).

People by various reasons including the personal differences and personality features react to the emotions by various forms. The studies conducted regarding the comparison of introvert and extrovert people showed that the stress experienced in introvert people was more than extrovert people (Burder, 2002).

The study of Mishara & Ystgaard (2006) showed the effect of teaching coping strategies on reduction of academic stress and increasing the satisfaction of the students. Cultural or social factors are effective in learning specific behaviour. Regarding the effect of cultural factors, the study of Yue (2004) showed that Chinese students to cope with the psychological pressure of academic failure, emotional failure and interpersonal contradictions apply different kinds of strategies in accordance with China culture (e.g. religious beliefs and cultural-social factor). Cognitive component is based on the mental process of evaluation of a person of situation (Naughton, 2007). A method used by a person in evaluation of an event not only is important in his response to stress but also is important in stress coping strategies type (Corden, 2005).

The results of the study of Eschan *et al.*, (2005) showed that Mexican-American teenagers who experience more emotional helplessness were violent toward their peers (Aldridge & Roesch, 2008). The finding of the meta analysis study of Ortqvist & Wincent (2006) regarding the



significant relation between perceived stress and stress coping strategies emphasized on this issue.

health, mental health, life environment and social relations in intervention group compared to control group.

**Table 1** The descriptive analysis of pre-test and post-test scores of group gestalt therapy on stress coping strategies in women experiment group

		N	Min score	Max score	Mean	SD	Variance
Problem-oriented	Pre-test	15	37/00	48/00	42/20	3/48	12/17
	Post-test	15	36/00	51/00	43/06	4/77	22/78
Emotion-oriented	Pre-test	15	33/00	55/00	42/80	6/17	38/17
	Post-test	15	32/00	51/00	40/80	6/04	36/60
Avoidance-oriented	Pre-test	15	15/00	30/00	22/73	3/88	15/06
	Post-test	15	17/00	30/00	21/46	2/85	8/12

As various views referred to wide range of stressful stimulators as personal, family, academic issues and economic, social and political conditions (psychology and counseling services center and counseling of Tulsa University, Huffman, 2006; Kumar *et al.*, 2002), a wide range of coping answers are possible. The personal differences in response to stress affected wide range of physiological changes, disease and psychological factors (McDoil, 2006). Some of the studies showed that various methods of reaction to stress depend upon some factors as personality features, gender and age differences. The researches conducted about the comparison of introvert and extrovert people showed that the stress severity experience in introvert people was more than that of extrovert people (Burger, 2002).

The study Dehghani Arani (1995) showed the significant difference between women and men about coping responses variables, mental health and social support.

Hekmatpour (2001) in his study showed that women more than men applied emotion-oriented strategy but there was no significant difference in terms of using problem and avoidance-oriented strategies. Hajebi *et al.* (2005) in their study found that using emotional and physical control in girls is more than boys. But the study of Akbar Samari (2006) showed that in terms of problem-oriented strategy, there was no difference between two genders but difference in emotion-oriented strategy was significant between two genders.

**Table 2** The descriptive analysis of pre-test and post-test scores of group gestalt therapy on stress coping strategies in women control group

		N	Min score	Max score	Mean	SD	Variance
Problem-oriented	Pre-test	15	40/00	48/00	43/46	2/26	5/12
	Post-test	15	40/00	48/00	43/13	2/58	6/69
Emotion-oriented	Pre-test	15	33/00	56/00	43/20	6/52	42/60
	Post-test	15	36/00	57/00	44/20	6/18	38/31
Avoidance-oriented	Pre-test	15	20/00	29/00	25/40	3/50	12/25
	Post-test	15	20/00	30/00	24/40	3/66	13/40

Honarmand (2009) in a study evaluated the effectiveness of gestalt therapy on self-esteem, depression and loneliness of depressed divorced women under the coverage of Wellbeing of Khoramshahr. The results of the data analysis showed that group gestalt therapy reduced depression, loneliness and the increase of self-esteem of the divorced women of experiment group compared to control group.

Jahedi (2009) in a study "Effectiveness of gestalt therapy and Cognitive therapy on improvement of the life quality of war injured veterans found that there is a significant difference between the life quality dimensions as physical

Rezayi (2009) in a study evaluated the effect of gestalt therapy by group method in improving the mental health of the girl students of Islamic Azad University of Islamshahr that implementation of Gestalt therapy as group was effective in reduction of the physical symptoms, dysfunction in social performance, depression and increase of mental health as generally but implementation of this therapy strategy was not effective in reduction of anxiety and sleep problems.

Adsoo (2005) investigated the effectiveness of personal growth training with gestalt orientation on self-esteem. The results showed that positive self-descriptive speech in experiment group was increased significantly compared to control group (Farahani, 2009).

Olery & Peach (2007) investigated the effect of Gestalt Training on anger, responsibility and self-esteem of 14 subjects with problems in the mentioned items. They were divided into two groups, 7 people in control group received no therapy. Age, gender and the plans the groups received were similar. The results showed that reduction of anger, increase of responsibility and self-esteem among the experiment and control group had significant difference (Farahani, 2009).

Andere (2008) investigated 5000 patients with depression and loneliness feeling from 11 states of south of America. These people were divided into experiment and control groups and experiment group underwent therapy by

cognitive method (gestalt therapy) and control group by meditation method. After the end of therapy, the results showed that symptoms of 63% of control group and 90% of experiment group.

After 1 year, the results of follow up showed that disease return among the participants in treatment and experiment group was lower than control group.

Rvznr, Bvtr (2006) compared gestalt therapy and cognitive therapy in treatment of depression and divided 38 depressed patients in experiment and control group. These patients were diagnosed with severe depression, with score 16 or above in Hamilton Psychiatric Rating Scale for Depression (HPRSD).

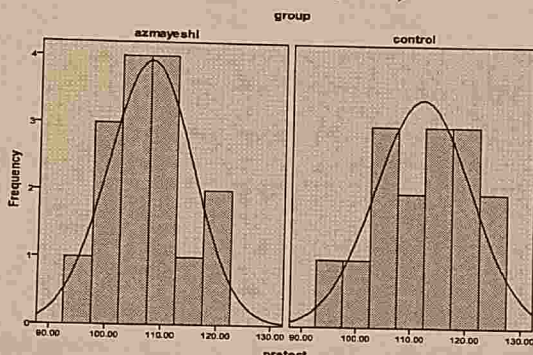
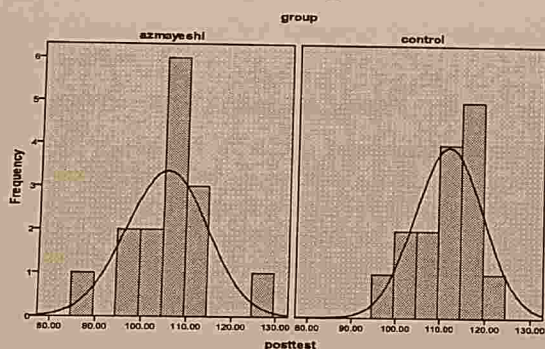


**Table 3** Covariance analysis about the effect of group gestalt therapy on stress coping strategies among women

	Sum of squares	Degree of freedom	Squared mean	F ratio	Sig/
Intragroup	24/116	1	24/116	1/376	/251
Pre-test	1441/185	1	1441/185	82/252	/000
Groups	47/608	1	47/608	27/17	/001
Error	473/082	27	17/522		
Total	355606/000	30			

a/ R Squared = /787 (Adjusted R Squared = /771)

The experiment group (21 people) underwent gestalt therapy and control group (17 people) underwent cognitive therapy and after 20 weeks of training and therapy by the mentioned methods, the results showed that there was no significant difference between gestalt therapy and cognitive therapy in treatment of depression and both of them had similar effect in treatment of depression (Farahani, 2009).

**Chart 4-1** The comparison of the pre-test scores of experiment and control group on group gestalt therapy on stress coping strategies among women**Chart 4-2** The comparison of the post-test scores of Experiment and control group on group gestalt therapy on stress coping strategies among women

## STUDY METHODOLOGY

In this study, semi-empirical method of pre-test and post-test with control group was used. As the aim of implementation of this plan is improving therapy process, the study was applied.

### Study population

The study population was women 30-45 years old of new city of Pardis and in accordance with the statistics of central section of Bakhshdari, they were about 10 thousand people. The study population by Morgan table was 114 people and for better result, 120 people were considered.

### Sampling

Sampling was done by multi-stage random method and at first residential phases of Pardis was identified and in each phase, 2 townships were selected randomly and from each

township, 10 women 30-45 years old were selected randomly. Stress coping strategies test was conducted on them and 30 of them with low score in the test were selected and they were divided into 15 control and experiment groups. Stress coping strategies test was done in both groups. Then, for each experiment group, 10 sessions of group gestalt therapy was conducted and stress-coping strategies were conducted on experiment and control group again.

Descriptive statistics were used in the present study for the analysis of demographic data of statistical sample. At first, the distribution of variables of each of the questions of study hypotheses was considered and then by central measures and dispersion, descriptive analysis of each of the study variables was done and in inference statistics, covariance analysis was applied.

### Data collection measure

In this study, coping strategies questionnaire was including 49 questions in the form of multiple-choice in three items of problem-oriented as 17 questions and emotion-oriented including 20 questions and avoidance-oriented strategies including 12 questions and it was designed by Rezakhani (2009). The validity and reliability of the study measure in coping strategies survey, the validity of problem-oriented was 47.42, emotion-oriented 51.07 and avoidance-oriented as 52.45 and reliability coefficient of each of them was 0.67, 0.79, 0.59, respectively and the general reliability coefficient was 0.80 (Rezakhani, 2009). The scale being used in this study is rank scale. To rank the study data, Likert scale was used.

### The results of the study

Based on the results of the study, the post-test scores mean in stress coping strategies in experiment group in problem-oriented strategy was increased and it was reduced in emotional-oriented and avoidance-oriented strategies. But in control group, there was no significant difference in problem-oriented and in emotion-oriented, it was increased and in avoidance-oriented it was decreased.

The results showed that group gestalt therapy on stress coping strategies via avoidance in women in experiment and control group ( $p=0/001$  and  $F=20/66$ ) had significant difference and the mean of post-test scores in experiment group was reduced in avoidance and it showed that positive effect of experiment effect via avoidance in women.

### The main hypothesis of the study

Group Gestalt therapy had influence in stress coping strategies among women Based on the results of study, group gestalt therapy on stress coping strategies in experiment and control groups ( $F=27/17$ ,  $p=0.001$ ) had significant difference and 78% of variance of the effect of



**Table 4** Covariance analysis about the effect of group gestalt therapy on problem-solving among women

	Sum of squares	Degree of freedom	Squared mean	F ratio	Sig/
Intra group	7/523	1	7/523	/826	/372
Pre-test	166/633	1	166/633	18/286	/000
Groups	6/920	1	6/920	75/9	/000
Error	246/034	27	9/112		
Total	56141/000	30			

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**Table 5** Covariance analysis about the effect of group gestalt therapy on emotion control among women

	Sum of squares	Degree of freedom	Squared mean	F ratio	Sig/
Intragroup	26/496	1	26/496	2/723	/111
Pre-test	786/056	1	786/056	80/776	/000
Groups	70/451	1	70/451	72/40	/002
Error	262/744	27	9/731		
Total	55323/000	30			

**Table 6** Covariance analysis about the effect of group gestalt therapy on avoidance among women

	Sum of squares	Degree of freedom	Squared mean	F ratio	Sig/
Intragroup	61/494	1	61/494	8/896	/006
Pre-test	114/699	1	114/699	16/593	/000
Groups	14/284	1	14/284	20/66	/001
Error	186/634	27	6/912		
Total	16144/000	30			

a/ R Squared = /490 (Adjusted R Squared = /452)

group gestalt therapy on stress coping strategies among women are determined by experiment method.

### First hypothesis of the study

Group Gestalt therapy had influence in problem-solving among women.

a/ R Squared = /404 (Adjusted R Squared = /360)

Based on the results of study, group gestalt therapy on stress coping strategies via problem solving among women in experiment and control groups ( $F=75.9$ ,  $p<0.005$ ) had significant difference and the mean of the post-test scores in problem solving was increased and this showed the positive effect of experiment effect in experiment group on stress coping strategy via problem solving among women.

### Second hypothesis of the study

Group Gestalt therapy had influence in emotion control among women.

a/ R Squared = /769 (Adjusted R Squared = /751)

Based on the results of study, group gestalt therapy on stress coping strategies via emotion control among women in experiment and control groups ( $F=72.40$ ,  $p=0.002$ ) had significant difference and the mean of the post-test scores in emotion control was decreased and this showed the positive effect of experiment effect in experiment group on stress coping strategy via emotion control among women.

### Third hypothesis of the study

Group Gestalt therapy had influence in avoidance among women.

Based on the results of the study, the effect of group gestalt therapy on stress coping strategy via avoidance among women in experiment and control groups ( $F=20.66$ ,  $P=0.001$ ) had significant difference.

It can be said that the effect size for experiment and control groups were  $R^2=0.490$ . This showed that about 49% of variance of group gestalt therapy on stress coping strategies is determined via avoidance among women by applying experiment method.

## DISCUSSION AND CONCLUSION

Based on the results of the study, the mean of post-test scores in stress coping strategies in experiment group in problem-oriented strategy was increased and it was reduced in emotion-oriented and avoidance-oriented items.

But in control group, there was no significant difference in problem-oriented strategy, it was increased in emotion-oriented and it was reduced in avoidance-oriented.

As it was said, Mishara & Ystgaard (2006) study showed the effect of training coping strategies of reduction of academic stress and increase of students satisfaction. Also, the social or cultural factors are effective in teaching specific behaviour. Regarding the effect of cultural factors, the study of Yue (2004) showed that the students to cope with mental pressure of academic failure, emotional failure and interpersonal contradictions apply different strategies of Chinese culture (religious beliefs and cultural-social factor). Cognitive component is based on mental process of a person evaluation of the situation (Naughton, 2007).

A method applied by a person in evaluation of an event is important not only in his response to stress but also in the type of stress coping strategies (Corden, 2005). The results of the study of Eschan *et al.*, (2005) showed that Mexican-American teenagers who experience more emotional helplessness were violent toward their peers (Aldridge & Roesch, 2008).



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As various views referred to wide range of stressful stimulators as personal, family, academic issues and economic, social and political conditions, a wide range of coping answers are possible (Huffman, 2006).

The personal differences in response to stress affected wide range of physiological changes, disease and psychological factors. Some of the studies showed that various methods of reaction to stress depend upon some factors as personality features, gender and age differences. The researches conducted about the comparison of introvert and extrovert people showed that the stress severity experience in introvert people was more than that of extrovert people (Burger, 2002).

The study Dehghani Arani (1995) showed the significant difference between women and men about coping responses variables, mental health and social support.

Hekmatpour (2001) in his study showed that women more than men applied emotion-oriented strategy but there was no significant difference in terms of using problem and avoidance-oriented strategies. Hajebi *et al.* (2005) in their study found that using emotional and physical control in girls is more than boys. But the study of Akbar Samari (2006) showed that in terms of problem-oriented strategy, there was no difference between two genders but difference in emotion-oriented strategy was significant between two genders.

By the review of the studies, it is inferred that in all the items, three different items of cognition, emotion and behaviour were considered. Using experience of self and others, learning and evaluation of a person of stressful situation is important in selection of coping strategy. Mckera and Gusta (1986) in his study showed that selection of good coping strategies had association with happiness and satisfaction of life (Witing and Diner).

In a study conducted by Mohammadi (2010) "The effectiveness of group gestalt therapy on reduction of aggressiveness of learners" showed that 1- Group gestalt therapy was effective on reduction of aggressiveness, 2- Group gestalt therapy was effective on reduction of aggressiveness. 3- Group gestalt therapy was effective on reduction of anger. 4- Group gestalt therapy was effective on reduction of spite.

In a study done by Pourshahsavari (2009) "the study of the applicability of group counseling in reduction of the anxiety of students of Al-zahra University with emphasis on problem-solving method, it was shown that anxious people had significant difference in adequacy of problem solving and personal control with each other.

In a study done by Sodani (2006) "the comparison of the effect of personal and group counseling methods with emphasis on intellectual-affective method in reduction of the illogical beliefs of the single male students of teacher of basic sciences aged 18-24 of Shahid Chamran University, the results of the study are: Illogical beliefs including the expectation of being approved by others,

concern with anxiety, avoiding problem, dependency, helplessness for change) with group counseling showed high reduction.

Illogical beliefs including extreme expectations of self, blaming oneself, reaction with helplessness to failure, perfection with personal counseling method showed considerable reduction. There was no significant difference between personal and group counseling in reduction of illogical belief and affective irresponsibility.

In a study done by Keli (2006), "the comparison of the effect of personal and group counseling methods with emphasis on client-based method in increasing self-conception of the male, single students of technical and engineering major aged 18-24 of Shahrood University, the results were as following: 1- Personal counseling increased self-conception of male students. 2- Group counseling increased self-conception of male students. 3- There was no significant difference between the effect of individual and group counseling in increasing the self-conception of the students. In a study done by Hassanzade Pashang (2010) "effectiveness of training stress coping strategies on tolerance, anxiety, depression and stress of patients with spinal lesion" the results showed that a) training stress-coping strategies increased the tolerance of patients with spinal lesion. b) Training stress coping strategies reduced the depression of patients with spinal lesion. c) Training stress coping strategies didn't reduce the anxiety of patients with spinal lesion significantly. d) Training stress coping strategies reduced the stress of the patients with spinal lesion.

In a study done by Zare (2010) "the study of the relation between job stress and stress coping style with mental health (case study: Electricity company of Marvdasht), the findings of the study showed that despite the previous study results, the people with problems of coping responses, problem-oriented strategy and problem, perception and cognition, emphasized on mental processes and applied active coping, positive interpretation, searching social support and self-control and this leads to the reduction of total psychological dysfunction and increase of general health. Keywords: Organization, job stress, mental health and stress coping styles.

In a study done by Sadeghi (2009) with the metacognitive effect on stress coping strategies among the students of MA of Isfahan University, the results for hypothesis test, the significance of the difference between the application of stress coping strategies and the effect of training metacognitive strategies in using three strategies of problem-oriented, emotion-oriented and social support were applied. Finally, the results of study analysis showed that there was a significant difference in the application of the students of coping strategies and mostly social support strategy is used. Also, metacognitive was effective in using problem-oriented strategy but it had no effect on using emotion-oriented strategies and social support.

Also, in a study done by Malakuti (2010), "the study of stressful factors, coping strategies and its relationship with mental health in infertile couples "showed that the infertile couples had more stress and low mental health compared to fertile couples.



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