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Effectiveness of Paradoxical Therapy on Emotion Regulation Difficulties in College Entrance Examination Students

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ABSTRACT

Objective: This study aimed to determine the effectiveness of paradoxical therapy on emotion regulation difficulties in students preparing for university entrance exams.

Methods: The present research employed a quasi-experimental pretest-posttest design with a control group. The population included all university entrance exam students residing in boarding schools in Qom during the 2023–2024 academic year. Using purposive sampling, 30 students were selected and randomly assigned to an experimental group (n = 15) and a control group (n = 15). The instruments used were the Difficulties in Emotion Regulation Scale (DERS; Gratz & Roemer, 2004) and the Test Anxiety Scale (TAS; Sarason, 1977). The experimental group received paradoxical therapy intervention over six sessions, each lasting up to 45 minutes, conducted every two weeks. The control group received no intervention. Data were analyzed using SPSS version 25 and one-way ANCOVA.

Results: Findings indicated that paradoxical therapy significantly improved emotion regulation in the students preparing for university entrance exams.

Conclusions: Paradoxical therapy can be employed as a complementary therapeutic approach to enhance emotion regulation in students.

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Introduction

In contemporary societies, the acquisition of knowledge has become increasingly important. Students around the world spend many years in schools and compete to gain admission to top universities. This competition is also present in Iran, as attending prestigious universities guarantees better facilities, employment opportunities, and future income. Iranian students face the national university entrance exam (Konkur) as a major hurdle, which plays a crucial role in determining their academic and professional futures (Khosravi & Nekoukar, 2024).

On the other hand, students preparing for the Konkur often experience various psychological challenges due to academic pressures and social expectations, including difficulties in emotion regulation, which can significantly impact both their academic and personal lives. Emotion regulation refers to a set of automatic and controlled processes involved in initiating, maintaining, modifying, and managing emotions. It affects the intensity and duration of emotional experiences and is considered one of the most important factors influencing individuals' mental health (Watt, Boeksel, et al., 2024). Emotion regulation difficulties are defined as problems in awareness, understanding, and acceptance of emotions, lack of access to adaptive strategies in response to different emotions, or inability to control behavior when experiencing strong emotional arousal (Gratz & Roemer, 2004). Individuals with emotion regulation difficulties may struggle to identify their own emotions, have difficulties managing anger, experience anxiety or sadness, or suffer from certain cognitive impairments that interfere with emotion regulation (Horwood & Anglim, 2021). Such difficulties can lead to communication problems, unhealthy relationships, and other psychological and social challenges. Accordingly, the use of maladaptive emotion regulation strategies can result in significant psychological and social harm (Miller & Racin, 2022).

Given the negative consequences of emotion regulation difficulties in students preparing for the Konkur, it is essential to identify effective therapeutic approaches to improve these skills and, consequently, reduce associated psychological problems. One such approach, which has received relatively little attention, is paradoxical therapy. Paradoxical therapy is a novel and emerging approach designed by Besharat considering the cultural characteristics of Iranian society. It is a non-invasive method with validated effects and a very low relapse rate (Besharat, 2021). The paradoxical therapy model is based on various theories and models and is designed to exaggerate the way an individual thinks about fear or unwanted behaviors, helping the person realize that they

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are not identical to their perceptual symptoms (Besharat, 2017). This therapeutic model integrates concepts from psychodynamic and systemic theories and applies techniques derived from these frameworks. It offers a novel form of brief, effective, ethical, and economical couples therapy with the highest success rate and the lowest relapse rate compared to existing approaches (Besharat, 2018).

Paradoxical therapy addresses systemic, behavioral, and analytic dimensions and, by identifying contradictions, can be applied to a wide range of disorders. Two core elements accelerate the therapeutic process: the first, the paradox, involves prescribing a behavioral symptom or a symptom of the disorder; the second, the timing schedule, requires the client to recreate and experience the prescribed symptom or behavior within a specific time frame. In the paradoxical timing technique, clients are instructed to intentionally experience their symptoms during designated periods (Chitgarzadeh et al., 2023). Studies have demonstrated the effectiveness of paradoxical couples therapy in improving emotion regulation in incompatible couples (Chitgarzadeh et al., 2023), enhancing emotion regulation in the treatment of fear of flying (Lotfizadeh et al., 2024), interpersonal emotion self-regulation in individuals with obsessive-compulsive disorder (Abri & Sharifirad, 2024), and emotional self-regulation in women experiencing marital conflict (Hashemizadeh et al., 2024).

Admission to preferred and popular university programs is the aspiration of most Konkur candidates and their families. Given that the Konkur largely determines students' professional future and social status in Iran, it holds great significance for both students and their families. Moreover, since Konkur students are more vulnerable to psychological difficulties due to academic pressures and social expectations, implementing effective therapeutic methods to reduce these problems is of high importance (Bibi et al., 2020). Therefore, the present study aims to examine the effectiveness of paradoxical therapy on emotion regulation difficulties in Konkur students and seeks to answer the question: Does paradoxical therapy have an effect on emotion regulation difficulties in students preparing for the Konkur?

Material and Methods

The present study employed a quasi-experimental design with a pretest-posttest format. The statistical population consisted of all Konkur students residing in dormitories in the city of Qom

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during the 2023–2024 academic year. Considering that a minimum of 15 participants per group is recommended for experimental designs (Delavar, 2019), a purposive sample of 30 students was selected and randomly assigned to the experimental group and control group, with 15 participants in each group.

Inclusion criteria were: being a Konkur student, providing informed consent to participate in the study, and exhibiting symptoms of test anxiety, operationalized as scoring above the cut-off point on the Test Anxiety Scale. Exclusion criteria included missing more than two intervention sessions, non-cooperation, or incomplete completion of research instruments.

Measures

Difficulties in Emotion Regulation Scale (DERS): This 36-item scale assesses deficits and difficulties in emotion regulation across six dimensions: nonacceptance of negative emotions, difficulty engaging in goal-directed behavior under distress, difficulty controlling impulsive behavior under distress, limited access to effective emotion regulation strategies, lack of emotional awareness, and lack of emotional clarity. Items are rated on a 5-point Likert scale from 1 (almost never) to 5 (almost always). Scores for each subscale and the total score reflect the degree of difficulty in emotion regulation, with higher scores indicating greater difficulty. The psychometric properties of the DERS, including internal consistency, test-retest reliability, construct validity, and predictive validity, have been confirmed in both clinical and nonclinical populations (Gratz & Roemer, 2004; Gratz & Tull, 2010). The psychometric properties of the Persian version have also been validated in clinical (n = 187) and nonclinical (n = 763) samples (Besharat, 2007). Cronbach's alpha coefficients for the subscales in these studies ranged as follows: nonacceptance of negative emotions, 0.73–0.88; difficulty in goal-directed behavior, 0.72–0.89; difficulty controlling impulsive behavior, 0.75–0.90; limited access to effective strategies, 0.76–0.85; lack of emotional awareness, 0.72–0.86; lack of emotional clarity, 0.77–0.90; and total scale score, 0.79–0.92, confirming the internal consistency of the Persian version (Azizi et al., 2010).

Test Anxiety Scale (TAS): Developed by Sarason (1977) and originally designed in 1957, the TAS is a short 37-item scale with true/false response options. It assesses individuals' psychological states and physiological experiences during exams, both before and after testing, via self-report. The scale was validated in Persian by Ghasemi (2014). Scores range from 0 to 37, with cut-offs defined as: mild anxiety (≤12), moderate anxiety (13–20), and severe anxiety (>20). Internal

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consistency (Cronbach's alpha) for the total sample, female participants, and male participants were 0.94, 0.92, respectively. Concurrent validity was established using the Anxiousness Questionnaire (Najarian et al., 1996) and the Coopersmith Self-Esteem Inventory (1967). In this study, Cronbach's alpha for the TAS was 0.87, indicating acceptable reliability (Ghasemi, 2014).

Procedure

Ethical considerations were strictly observed. All participants were assured of confidentiality, and only aggregated data were used in the analysis. An initial orientation session was held, during which consent forms and demographic questionnaires were distributed. Each participant was assigned a unique code. Following recruitment and assignment, both groups completed pretest assessments.

The experimental group then received six sessions of paradoxical therapy, conducted every two weeks, with a maximum session length of 45 minutes, while the control group received no intervention. Post-intervention, both groups completed the research instruments again. The therapeutic intervention was based on Besharat's paradoxical therapy protocol (2017), whose validity and reliability were confirmed by faculty members at the University of Tehran. A summary of the sessions is provided in Table 1.

Table 1. Summary of the Paradoxical Therapy Protocol

Session	Description
1	Social interview: welcome, general introductory topics (e.g., employment status), and discussion of specific family or social issues if needed. Problem-focused interview: reason for referral, detailed description of problems or disorders by the client and any accompanying individuals, explanation of treatment plan, goal-setting, and assignment of minimal tasks for between-session practice (e.g., paradoxical timing program).
2	Behavioral analysis: review of previously assigned tasks, potential challenges, outcomes from client's perspective, estimation of treatment change percentage, and continuation or adjustment of tasks as needed.
3	Behavioral analysis: review of previous tasks, outcomes, estimation of treatment change, continuation of tasks, and application of first complementary technique if necessary (e.g., no effort to reduce symptoms per PTC anxiety reduction principle).
4	Behavioral analysis: review, outcomes, continuation of tasks, application of second complementary technique if necessary (e.g., maintaining symptoms at current level per PTC principle).
5	Behavioral analysis: review, outcomes, continuation of tasks, termination of therapy if treatment goals achieved, or continuation until goals are met, including self-therapy plan for the future.
6	Emphasis on practicing skills learned, assessment of progress, follow-up testing, relapse prevention, and additional guidance.

All ethical principles were observed, including confidentiality, informed consent, and voluntary withdrawal. Data were analyzed using SPSS version 25 with univariate analysis of covariance (ANCOVA).

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Results

The present study was conducted on 30 female Konkur students, randomly assigned to two groups (experimental and control) with 15 participants in each. Table 2 presents the age characteristics of participants in both groups. As shown, in the experimental group, 3 participants were under 17 years old (20%), 5 were 18 years old (33.3%), and 7 were over 18 years old (46.7%). In the control group, 2 participants were under 17 years old (13.3%), 5 were 18 years old (33.3%), and 8 were over 18 years old (53.3%).

Table 2. Demographic Characteristics of the Experimental and Control Groups

Variable	Experimental Group (Frequency)	%	Control Group (Frequency)	%
Age	Under 17	3	20	2
	18	5	33.3	5
	Over 18	7	46.7	8

Descriptive statistics of the research variable are reported in Table 3. The results indicate that the mean scores of emotion regulation difficulties decreased in the experimental group (paradoxical therapy) compared to the control group from pretest to posttest.

Table 3. Descriptive Statistics for Emotion Regulation Difficulties in the Study Groups

Group	Variable	Pretest Mean	Pretest SD	Posttest Mean	Posttest SD
Control	Emotion regulation difficulties	113.5	21.7	110.2	9.2
Paradoxical Therapy	121.8	20.4	100.6	17.5	

To examine the effect of paradoxical therapy on emotion regulation difficulties across pretest and posttest, a univariate analysis of covariance (ANCOVA) was conducted. Prior to analysis, ANCOVA assumptions were tested. Normality of score distribution was confirmed using the Kolmogorov-Smirnov test ($p < 0.05$). Homogeneity of variance was verified with Levene's test for emotion regulation difficulties ($F = 3.115$, $p = 0.086$). Box's test indicated equality of covariance matrices (Box = 21.52, $F = 1.336$, $p = 0.157$). Another key assumption, equality of regression slopes between the two groups, was not significant ($F = 0.846$, $p = 0.301$), confirming the homogeneity of regression slopes. Therefore, the assumptions for ANCOVA were satisfied. The ANCOVA results are presented in Table 4.

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Table 4. ANCOVA Results

Variable	Source of Variation	Sum of Squares	df	Mean Square	F	p	Effect Size
Emotion regulation difficulties	Group	61.895	1	61.895	4.571	0.042	0.145

The results indicate that, after controlling for the pretest scores as a covariate, the effect of group assignment on posttest scores was significant ($F = 4.571$, $p = 0.042$). This suggests that paradoxical therapy accounted for more than 14% of the variance in posttest scores of emotion regulation difficulties.

Discussion

The present study aimed to examine the effectiveness of paradoxical therapy on emotion regulation difficulties in Konkur students. The results indicated a significant difference between the two groups, showing that paradoxical therapy effectively reduced emotion regulation difficulties in these students. This finding is consistent with previous studies in this area (Chitgarzadeh et al., 2023; Lotfizadeh et al., 2024; Abri & Sharifirad, 2024; Hashemizadeh et al., 2024).

The observed effect can be explained by the subtle, refined, and therapeutic nature of the paradoxical therapy model, which alleviates negative emotions from individuals and their interactions quickly and without imposing any pressure. According to Besharat (2020), the guiding principle of paradoxical therapy is to remove negative emotions through the simplest and fastest possible approach. By assigning roles and tasks, the therapist implements exercises that allow the client to experience and reconstruct their symptoms at predetermined times. In the paradoxical timing approach, the client experiences everything normally, without trying to tolerate, accept, or reduce their anxiety. This process fosters a greater sense of personal empowerment, emphasizing the strengthening of the self, which enables the individual to better cope with challenges.

Furthermore, paradoxical therapy actively engages the client, facilitating deep personality changes through the individual's own efforts. Exercises such as directive assignments and artificial reconstruction provide clients the opportunity to defend their thoughts and opinions without tension or conflict, while simultaneously promoting kindness through practice. Additionally, by separating problems and conflicts from negative emotions within a structured, adaptive relational framework, clients are afforded the opportunity to experience positive emotions, thereby

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enhancing positive relationships. Consequently, by eliminating negative emotions and evaluating their own emotional responses, individuals achieve a higher level of emotion regulation.

No study is without limitations, and the present research is no exception. Limitations include the lack of control over variables influencing emotion regulation in Konkur students and the reliance on self-report measures. Therefore, it is recommended that future research replicate this study with larger and more diverse samples to enhance generalizability. Based on the present findings, it is also suggested that paradoxical therapy be applied in educational and therapeutic centers to improve emotion regulation and that psychotherapists adopt this method as an effective and efficient intervention to enhance the mental health of Konkur students.

Data availability statement

The original contributions presented in the study are included in the article/supplementary material, further inquiries can be directed to the corresponding author.

Ethics statement

The studies involving human participants were reviewed and approved by ethics committee of Islamic Azad University.

Author contributions

All authors contributed to the study conception and design, material preparation, data collection and analysis. All authors contributed to the article and approved the submitted version.

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Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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