

Review the impact of implementing a consistent family plan (based on the MBCT approach) with the interaction of parent child interaction) on the reduction of parental beliefs and anxiety of parents and the disorder of children and adolescents.

Narges Rehmani

Department of Psychology, Islamic Azad University, Torbat Jam Branch, Torbat Jam, Iran

rahelle2014@gmail.com

Saeed Teymouri

Department of Psychology, Islamic Azad University, Torbat Jam Branch, Torbat Jam, Iran

Sdteimory28@yahoo.com

Abstract

anxiety disorders of children and adolescents , emotional beliefs and health anxiety in parents constitute a lot of functional disorders . this study seeks to investigate the effect of implementing the family plan , which is consistent with the reduction of Metamorph beliefs and anxiety of parents and social anxiety disorder of children and adolescents .

keywords : Metamorph beliefs , health anxiety , social anxiety , Compat family plan.

introduction : anxiety disorders are one of the most common psychiatric disorders that affect various aspects of life and its quality . one - quarter of the world 's population suffers from at least one of the anxiety disorders and its prevalence is estimated to be about 80 - 94 % in children and 16 - 94 % in adolescents [26] , as well as the prevalence of it for all life is estimated to be estimated to be about 80 % . in this regard , one of the common anxiety disorders that are common among children and adolescents is social anxiety disorder social anxiety (sad) . social anxiety refers to fear or anxiety of negative evaluation in social interactions or social functions . if anxiety is constant and excessive and interferes with everyday life ,

it can provide a social anxiety disorder . social anxiety disorder is normally started from childhood and its prevalence is estimated to be about 80 - 80 % .

the research method : the present study was semi exper with pre - test - test design with control group . in this study , 60 children and teenagers from the age group of 8 to 16 years were analyzed by questionnaire - - K - (SCARED - 71) and the Welsh anxiety questionnaire anti by accident in two experiment groups and control (each group 30) . after implementing the individual intervention plan on 11 sessions on the test group , the two groups were examined by means of measurement . Findings - The scores of children 's social anxiety disorder , Metamorph 's beliefs and the anxiety of parents in both the pre - pre - pre - pre - test and control groups showed little difference between the mean scores in the two experimental and control groups ; but at the Post-tes stage , the mean scores in the test group were reduced to the control group . In this regard , the family program training was meaningful on the Post-tes scores of these variables , so that the average scores scores ($001 / 0 p < , 47 / 94 = F$) , parental health anxiety ($001 / 0 p < , 15 = 46$) , and the test

group were significantly less than the control group and had significant differences .

Conclusion : Education of Family Programs It affects the reduction of Metamorph beliefs , anxiety of parents , impaired social anxiety disorder of children and adolescents .

researches show that anxiety disorder among parents may affect children of that family . the study of parent - child mediators found that levels of parental stress , increased parental anxiety , and parent - child interaction in the coalition between stress life and severity of anxiety symptoms were linked . therefore , it seems that social anxiety disorder is affected by family situation . in this regard , it is suggested that social anxiety disorder in families occurs and is raised from this way . in fact , along with genetic factors , it seems that modeling and breeding of parents would lead to transmission of this disorder . the reason for this is that his temperament and his characteristics are affected by the quality and quantity of care . in this way , parenting methods in children ' s characteristics and growth of his abnormal features are effective . in other words abnormal growth of children depends on various social and environmental conditions which include children ' s family and peer system and important social and cultural backgrounds . thus , the principle of mutual coupling is quite evident in the parent - child interaction . therefore , anxiety disorders are higher among children with anxiety disorder and depression . as in a research , it was found that a group of variables cause social anxiety disorder . in particular , five risk factors are child temperament , parent anxiety , attachment processes in parent - child pair , biases of information processing and parent ' s actions . thus , it is likely that parents and anxiety and their actions affect the social anxiety of children . in this regard , it was shown that unstable mood states , negative emotional regulation , coping style in communication with children , obsessive - compulsive disorder and anxiety in mother can predict anxiety in children and severity of

anxiety symptoms . also irregular and irregular emotional regulation of mother and attempted failure to communicate with children can act as mechanisms of anxiety in family . the results of other studies showed significant effect of parental vulnerability on children with anxiety disorders .

one of the disorders of parents affecting children ' s lives is meta - meta cognition . for the first time , worry was identified by wales as a process of concern about anxiety . in fact , it involves assessing anxiety as non - controlled and dangerous , and it is thought that a meta - cognitive assessment tool is dysfunctional . in other words , meta worry is caused by negative metacognitive beliefs about self - concern or negative evaluation of worry . the worry of worry (the second type concern) can be distinguished from worry (type of one) , concerns about events such as foreign locations or internal body symptoms , while meta worry is associated with fundamental negative beliefs (trait variables) that people have about nature and consequence . indeed , concern is described as part of the distress and chain of autonomic ideas and notions associated with possible outcomes of the threat and their potential outcomes , which are repetitive and are primarily associated with potentially negative outcomes . hence , it usually facilitates stress - focused coping in adults . however , when excessive and relatively non - controlled anxiety can be handled with poor performance (low resolution , low perceived control , avoidance strategies) , it is associated with great distress and anxiety [13] . on the other hand , meta worry is a part of meta cognition model . ~ meta worry is also a cycle of effort , to suppress dangerous thoughts and monitor thinking that are associated with negative emotions . for this reason , the meta worry is considered as the main component of meta - cognitive model of pervasive anxiety disorder .

on the other hand , health anxiety is another anxiety disorder that threatens the mental health of the family . health anxiety is that the person suffers from severe anxiety and

anxiety about his body and health without being at risk or suffering from a certain illness . ~ these people suffer from health anxiety or severe state of illness . health anxiety involves continuous care about health and the person 's belief that he is ill or may become a disease . in the so - called diagnosis , people whose health anxiety causes anxiety is the diagnosis of atherosclerosis . people with health anxiety , too , are seeking reassurance from their health and are increasingly focused on their physical fitness , making themselves different from others . this belief creates extreme anxiety and keeps the person constantly examining himself or making sure of others . health anxiety and especially disorder with extreme concern about the disease and especially in critical illness , disability in ignoring simple physical symptoms and selective attention to these symptoms after hearing by reading about a disease , listening to an extremist ring , referring to the doctor and health centers and also with an extreme fear of death . high level of health anxiety leads to safety behaviors to ensure health and receive assistance (including referral to a physician) and to repeat them in order to improve health and / or disease denial . therefore , health anxiety in a continuum from mild to severe is strongly affected by a severe level of disruption , and mild levels of it with excessive use of health care services and the destruction of interpersonal relationships . due to the effects of anxiety disorders on family , different treatment methods have been designed and implemented . although some of the treatments have shown acceptable effects in different trials , but in most cases these treatments have not been effective in prevention of recurrence , and patients with residual symptoms such as persistence of anxious thoughts are struggling and difficult . one of the methods used today in the treatment of anxiety disorders is family planning . consistent family planning is one of the methods used to improve the relationships between parents and children . the family plan is designed

based on the book from cowards to tiger . reproduced with permission of the copyright owner . during the session , the program is based on game based on parent - child interaction and mentally retarded children and children . on the one hand , mindfulness is focused on one objective , focusing on a goal , at present and without any judgment that the result of this development is increasing individual awareness of the internal experiences including thoughts and feelings . ~~~ on the other hand , parent - child interaction has mainly aims such as improving the quality of parent - child relationships , reducing behavioral problems and increasing social behaviors . therefore , in view of these goals , it is expected that the adaptive family therapy approach can predict the symptoms of psychopathology in addition to the acceptance that the child or parents are not independently responsible for all problems . in fact , the main objective of cognitive therapy based on the consciousness is that the patient should be aware of the potential effects of being active in the " self - monitoring " and through applying and creating the " presence of mind " in the mentality and to observe his thoughts and feelings by performing frequent rehearsal on a neutral object (e . g . in this regard , parent - child interaction , derived from social and developmental theories and attachment , is a social learning disorder directed to interactions among family members as a source of distress and compassion . in this context , it is emphasized that the treatment of parent - child interaction causes parents to manage child behaviors more effectively and thereby increase the desired behavior of the child and decrease undesirable behaviors . also , in other research [154] it is emphasized that the treatment of parent - parent interaction by encouraging parents - child interaction and parental education helps to understand how stable the parent - child interaction and parental education helps foster the negative behaviors of the parent - child cycle . researchers [therapists] believe that the treatment of parent - child interaction

will reduce parenting stress and attribution style in parents . others also believe that parent involvement in the treatment of parent - child interaction to control children use less physical punishment . in this regard , parents are taught through interaction therapy - parent parent to form constructive styles to cope with negative emotions and anxiety . studies have shown that parent - child relationship therapy can significantly reduce child anxiety symptoms .

Therefore , it seems that the combination of these two methods of mindfulness and parent - child interaction in a treatment called " compatible family " can improve parents and children " problems in anxiety . according to this , the purpose of this study was to investigate the effect of adaptive family planning (based on interpersonal approach) along with parent - parent interaction) on the reduction of meta worry and anxiety in parents and social anxiety disorder in children and adolescents . the method of this study was Semi-experimental (Semi) with pre - test - test design with control group . the study population consisted of all children and teenagers who accompanied their parents to specialized clinics in mashhad city . among them were 30 (based on the size instrument ; from the age group 8 to 16) had anxiety disorders along with their parents . it should be noted that first , a group of children and teenagers of the age group were analyzed using questionnaire questionnaire 71 and the number of children and teenagers who had symptoms of social anxiety disorder , as well as their parents , who were responsible for mental anxiety disorder , were selected by accident and were tested in two groups of experiment and control (each group of 30) . in fact , the experiment and control group were used by means of research tool before the intervention was carried out . after Table 1

implementing the individual intervention project at eleven o ' clock meeting on the test group , the two groups were examined by means of measurement instrument . The duration of these personal performances from the Avalanche to September 1398 lasted for 20 months . data collection questionnaires were collected by Welsh anxiety questionnaires , version 71 A story and emotional disorders related to Anxiety K - - (SCARED - 71) . The Welsh anxiety questionnaire was made by Wales and Davis (1994) and assesses anxiety thoughts on three measures of social anxiety , physical anxiety and anxiety anxiety (Metamorphosis) . the questionnaire has been investigated by 20 clinical psychologists and psychiatrists and confirmed its content validity . its internal consistency was calculated by applying 60 students with cronbach's alpha method , in which the rate for social phobia was 67 , physical anxiety of 67 / 0 and the Metamorphosis anxiety is 68 / 0 [31] . SCARED questionnaire - 71 pervasive anxiety , social anxiety , separation anxiety , anxiety disorder, anxiety disorder (PTSD) , and a specific disease . The internal consistency in the Normal group is 0.95 - 0.91 and is 0.86 in the clinical group 0.94 - 0.86 . Test - test reliability , simultaneous validity and therapeutic sensitivity have also been reported satisfactory [32] . data analysis was carried out with the help of software 16 spss and the levin test method and the analysis of univariate covariance . Findings from the research in Table 1 , the mean and standard deviation of scores on the research variables included the beliefs of the parents , the anxiety of parents , and the disorder of the social anxiety of children and adolescents in both the pre - pre - pre - pre - pre - pre - test and Post-test phases .

Variables\ Statistical indicators	Group	
	examination (n=30)	control group (n=30)
	Average (Standard deviation)	Average (Standard deviation)

	Pre-test	Post-test	Pre-test	Post-test
Parental meta-worry beliefs	30.23 (53.2)	70.15 (17.1)	86.23 (76.2)	93.21 (67.2)
Parental health anxiety	46.20 (97.1)	53.14 (85.1)	20.20 (29.2)	36.18 (10.2)
Social anxiety disorder in children and adolescents	66.24 (94.3)	66.18 (72.2)	26.27 (79.3)	33.25 (33.4)

The results of the test table indicate that there is no significant difference between the mean scores of the two groups in the pre - test stage . however , in the post - test , the mean scores in the experimental group were decreased compared to the control group . the multivariate analysis of covariance (ancova) was used to determine the significance of the mean differences . but before use of this test , the assumptions were investigated . normality of data , skew and kurtosis values , and assuming equality of variances , levin 's test results were investigated . the variable that has normal distribution (i.e. , variable that

has an average width) , the skew and the kurtosis are about zero . however , the numerical values for skewness and kurtosis are acceptable . in the study of the scores of meta worry beliefs , parents " health anxiety and social anxiety disorder children and adolescents , the skew and kurtosis values in the range of parents and adolescents indicate that these variables are normal . also , the results of levine test showed that the assumption of equality of variances was observed for ancova test in all three variables ($p > 0.05$)

Table 2

Variable	Source of Changes	Sum of squares	Degrees of freedom	Average of squares	F-value	Significance level	Square of parabolic η
Parental meta-worry beliefs	Pre-test	81.113	1	81.113	29.48	001.0	45.0
	Group	01.522	1	01.522	47.221	001.0	79
	Error	34.134	57	35.2			
	Total	98.830	59				
Parental health anxiety	Pre-test	01.75	1	01.75	87.27	001.0	32.0
	Group	04.236	1	04.236	70.87	001.0	0.60
	Error	41.153	57	69.2			
	Total	85.448	59				
Social anxiety disorder in children and adolescents	Pre-test	68.364	1	68.364	58.52	001.0	48.0
	Group	12.320	1	12.320	15.46	001.0	44.0
	Error	34.395	57	93.6			
	Total	85.1406	59				

The results of single variable covariance analysis in order to compare the two groups in the scores of the meta worry beliefs in the table shows that by controlling pre - test scores , the effect of group on test scores of this variable is significant ($p < 0.0001$) . in other words , there was a significant difference between the experimental and control groups in the mean scores of meta worry beliefs in the post - test . according to the descriptive indices in table 1 , this difference is so that the average scores of meta worry beliefs in the experimental group are significantly more than the control group . also the results for parents ' health anxiety variable are also significant ($p < 0.0001$) . there was a significant difference between the two groups in the mean scores of parents ' health anxiety scores . the results of this study showed that the mean scores of parents ' health anxiety scores in the experimental group were significantly more than the control group . finally , the results of single variable covariance analysis for social anxiety disorder scores of children and adolescents showed that there was a significant difference between the experimental and control groups in the mean scores of this variable in the post - test ($p < 0.0001$) . the results of this study showed that the mean scores of social anxiety disorder in children and adolescents in experimental group were significantly more than the control group .

the purpose of this study was to assess the effectiveness of adaptive family planning (based on interpersonal approach) along with parent - parent interaction in reducing the reduction of meta worry and anxiety anxiety of parents and social anxiety disorder of children and adolescents . according to the hypothesis that there is a significant difference between pre - test and post - test scores of experimental and control groups . the results showed that in the pre - test , there was no significant difference between the mean scores of variables such as meta worry and parental health anxiety and social anxiety disorder in children and adolescents in both

experimental and control groups . but in post - test , the mean scores in the experimental group were decreased compared to the control group . so that the mean scores of meta worry beliefs and parents ' health anxiety and social anxiety disorder in children and adolescents in experimental group were significantly more than control group . in explaining this finding , it should be said that because the family plan is based on two treatment and interaction between parents and children , it consists of two parts : one way of coping of parents against anxiety problems of children . ~~~ one of them is educating parents against anxiety problems . in this way , there is a number of instructions on the agenda that provides the context for reducing anxiety , for example , although the treatment does not seek to provide relaxation in individuals , training for such treatment , such as body scans , practice of sitting and breathing , can cause relaxation in the parent . doing exercises with pleasant and unpleasant events , the course of breathing and awareness of thoughts , walking with consciousness , the presence of mind in the recording of sounds and thoughts and doing them at the meeting and outside it as well as the introduction of home assignments and having programs that are all in the direction of increasing attention and staying in the present time , will greatly increase the attention of clients and reduce anxiety symptoms . this includes person 's attention to experience , feelings , thoughts and feelings . also , these exercises increased self - control because focusing attention on a neutral actuator , such as breathing , makes the environment a proper attention .

these exercises help people with anxiety sensitivity to change attention , much review and focus attention on internal and external cues related to meta worry and health anxiety . in fact , mindfulness training teaches people how to form habitual skills and by focusing on breathing , they can change information processing resources . therefore , in mindfulness training , one can learn to stop health anxiety and meta worry beliefs and

relate to their thoughts and feelings differently . thus , people with anxiety anxiety and meta worry beliefs are exposed to anxiety feeling because of specific thoughts and mindfulness training program increases their mental concentration and mental health .

on the other hand , family planning compatible with the education of parents against anxiety problems of children and providing guidance to create balance and calm in family environment and protection of children in the field of social anxiety can improve the quality of improvement .

considering that the family therapy is compatible with specific therapeutic techniques , the result of this study is quite probable and the main reason for its effectiveness is the use of current therapy techniques that all contribute to decreased anxiety . in summary , it can be said that this therapy will improve the emotions of anxious people by taking part of the subjects during the session . therefore , according to the mechanism of these practices , we can justify the causes of anxiety reduction in the present study .

conclusion: These findings imply and support the implementation of a consistent family plan . The study is characterized by a series of strengths . designing such studies and treatments allows us to work in a timely manner in the treatment of such disorders , such as meta worry , parents ' health anxiety , and social anxiety disorder in children and adolescents . this result may indicate that intervention in meta worry and health anxiety of parents may be useful for all people suffering from these thoughts .

according to the current guidelines for evidence - driven methods in psychology that are limited to a number of methods , according to the experimental evidence in this study , we conclude that the adaptive family plan (based on the mindfulness and parent - child interaction) measures the criteria and outcome of an appropriate treatment . researchers should provide society with information that helps decision making .

this study showed that adaptive family program (mindfulness - based and parent - parent interaction) is effective in helping parents to reduce child behavioral problems . this method is a method to satisfy the needs of clients . ~~~ by doing so , it can be reduced to family function for many years in view of family function , reduce the stress of families , reduce crime and antisocial and antisocial paths .

acknowledgements the participants expressed their appreciation and appreciation for the specialized medical and psychological clinic of children and adolescents in the soroush centre in mashhad .

ethical approval was obtained from participants in the study of written and informed consent .

conflict of interest : no conflict of interest is stated by the authors .

Financial resources : this paper is part of a doctoral dissertation entitled " design and implementation of compatible family planning (based on proactive approach coupled with parent - child interaction) on reducing anxiety , anxiety sensitivity of parents and reducing anxiety disorders of children and adolescents " approved by islamic azad university , khorasan razavi province .

Authors '

share: Narges Rehmani (first writer), mainr esearcher, Said Timur (2nd author)

Resources:

- 1) Sohrabzadeh Fard A, Hakim Shoostari M, Alibaba S. Comparison of Psychopathology and Personality Traits in Three Groups of Mothers of Children With Anxiety Disorders, Obsessive-Compulsive Disorder and Healthy Group. *IJPCP*. 2018; 24 (2):164-175.
- 2) Kjernisted KD, Bleau P. Long-term goals in the management of acute and chronic anxiety disorders. *Canadian journal of psychiatry*. 2004 Mar;49(1):51-63.
- 3) Wren FJ, Scholle SH, Heo J, Comer DM. Pediatric mood and anxiety syndromes in primary care: who gets identified?. *The*

International Journal of Psychiatry in Medicine. 2003 Mar;33(1):1-6.

4) Colonnese C, Nikolić M, de Vente W, Bögels SM. Social anxiety symptoms in young children: investigating the interplay of theory of mind and expressions of shyness. *Journal of abnormal child psychology*. 2017 Jul 1;45(5):997-1011.

5) Platt R, Williams SR, Ginsburg GS. Stressful life events and child anxiety: Examining parent and child mediators. *Child Psychiatry & Human Development*. 2016 Feb 1;47(1):23-34.

6) Bögels SM, Perotti EC. Does father know best? A formal model of the paternal influence on childhood social anxiety. *Journal of Child and Family Studies*. 2011 Apr 1;20(2):171-81.

7) Masen PK, Jerome H, Karoul A, Kanjer JV. Child development and personality. Translated by Mahshid Y. Tehran: Publication of Media. 2007: 300-12.

8) Mash EJ, Wolff AD. Psychological morbid child, translated by Mozaffari MM, forughaldin A. Tehran: Publication of Roshd. 2010:212-90.

9) Ollendick TH, Benoit KE. A parent-child interactional model of social anxiety disorder in youth. *Clinical Child and Family Psychology Review*. 2012 Mar 1;15(1):81-91.

10) Kerns CE, Pincus DB, McLaughlin KA, Comer JS. Maternal emotion regulation during child distress, child anxiety accommodation, and links between maternal and child anxiety. *Journal of anxiety disorders*. 2017 Aug 1;50:52-9.

11) Riskind JH, Sica C, Bottesi G, Ghisi M, Kashdan TB. Cognitive vulnerabilities in parents as a potential risk factor for anxiety symptoms in young adult offspring: An exploration of looming cognitive style. *Journal of behavior therapy and experimental psychiatry*. 2017 Mar 1;54:229-38.

12) Myhr P, Hursti T, Emanuelsson K, Löfgren E, Hjemdal O. Can the Attention Training Technique Reduce Stress in Students? A Controlled Study of Stress

Appraisals and Meta-Worry. *Frontiers in psychology*. 2019;10.

13) Wells A. The metacognitive model of GAD: Assessment of meta-worry and relationship with DSM-IV generalized anxiety disorder. *Cognitive Therapy and Research*. 2005 Feb 1;29(1):107-21.

14) Mahdavi A, Yazdanbakhsh K, Sharifi M. The effectiveness of mindfulness-based cognitive therapy in reducing psychological symptoms, meta-worry and thought fusion of multiple sclerosis patients. 2016: 16-21.

15) Benedetto L, La Fauci E, Ingrassia M. Exploring meta-worry and perceived parenting behaviors in adolescents' anxiety. *LIFE SPAN AND DISABILITY*. 2018 Jul 1;21(2):117-41.

16) Fisak B, Mentuccia M, Przeworski A. Meta-worry in adolescents: Examination of the psychometric properties of the meta-worry questionnaire in an adolescent sample. *Behavioural and cognitive psychotherapy*. 2014 Jul;42(4):491-6.

17) Davoudi I, Nargesi F, Mehrabizadeh HM. The Comparison of dysfunctional beliefs and Personality traits between teachers with and without health anxiety. *Gentashapir*, 2012; 3 (4): 21.

18) Davoudi I, Nargesi F, Mehrabizadeh HM. Gender Differences in Health Anxiety and Related Functional Beliefs: Controlling Age Variability. *Health Psychology*, 2012; 3: 1-9.

19) Cartwright-Huttons s, Leski B, Right S, McNally D, Timur S (1977) From coward to tiger: treatment guidelines for parenting anxious children. Tehrani S, Tehranchi A, Azizi E (Translators 2018). Faraangizesh Puplicher (Persian).

20) Talenizadeh ZM, Shqhmir E, Jafari FS. Effectiveness Of Mindfulness-Based Cognitive Therapy in the Decrease of Depression and Maniac Symptoms of Individuals Diagnosed with Bipolar Disorder. *Thought and Behavior in Clinical Psychology (Thought and Behavior)*, 2012; 7(26): 17-26.

21) Brinkmeyer MY, Eyberg SM. Parent-child interaction therapy for oppositional

- children. New York: Guilford; 2003: 204-223.
- 22) Thomas R, Zimmer-Gembeck MJ. Behavioral outcomes of parent-child interaction therapy and Triple P—Positive Parenting Program: A review and meta-analysis. *Journal of abnormal child psychology*. 2007 Jun 1;35(3):475-95.
- 23) Crane R. *Mindfulness-based cognitive therapy: Distinctive features*. Routledge; 2017 Sep 19.
- 24) Baer RA. Mindfulness training as a clinical intervention: A conceptual and empirical review. *Clinical psychology: Science and practice*. 2003 Jun;10(2):125-43.
- 25) Didonna F. *Clinical handbook of mindfulness*. New York, NY: Springer; 2009.
- 26) McDiarmid MD, Bagner DM. Parent Child Interaction Therapy for Children with Disruptive Behavior and Developmental Disabilities. *Education & Treatment of Children*. 2005 May 1;28(2).
- 27) Boggs SR, Eyberg SM, Edwards DL, Rayfield A, Jacobs J, Bagner D, Hood KK. Outcomes of parent-child interaction therapy: A comparison of treatment completers and study dropouts one to three years later. *Child & Family Behavior Therapy*. 2005 Jan 11;26(4):1-22.
- 28) Timmer SG, Urquiza AJ, Zebell N. Challenging foster caregiver–maltreated child relationships: The effectiveness of parent–child interaction therapy. *Children and Youth Services Review*. 2006 Jan 1;28(1):1-9.
- 29) Chaffin M, Silovsky JF, Funderburk B, Valle LA, Brestan EV, Balachova T, Jackson S, Lensgraf J, Bonner BL. Parent-child interaction therapy with physically abusive parents: efficacy for reducing future abuse reports. *Journal of consulting and clinical psychology*. 2004 Jun;72(3):500.
- 30) Karami J, Zabet M. Efficacy of Child-Parent Relationship Therapy in Reducing Anxiety Syndrome in Preschool children. *Quarterly Journal of Child Mental Health*. 2015 Dec 10;2(3):39-47.
- 31) Hosseini Ghafari F, Mohammadkhani P, Pourshahbaz A, Dolatshahi B, Mohammadi F. The effectiveness of group metacognitive therapy on metacognitive beliefs, worry and worry domains in patients with Generalized Anxiety Disorder. *Clinical Psychology*, 2013; 23 (180): 11-20.
- 32) Palahang H, Rabiei M, Khorramdel K, Zerehpoush A, Sajjadian P. Validity, Reliability and Factor Structure Analysis of the Revised Version of the Screen for Child Anxiety Related Emotional Disorders-71 (SCARED-71). *Iranian Journal of Psychiatry and Clinical Psychology*. 2012 Nov 15;18(3):202-10.
- 33) Kaviani H, Javaheri F, Bahiray H. Efficacy of Mindfulness-Based Cognitive Therapy in Reducing Automatic Thoughts, Dysfunctional Attitude, Depression And Anxiety: A Sixty Day Follow-Up. *Advances in Cognitive Sciences*. 2005; 7 (1) :49-59.