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A Comparative Study on the Effect of Emotion-Focused Therapy and Self-Perception Training on Test Anxiety

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ABSTRACT

The present study was conducted with the aim of comparing the effects of emotion-focused therapy (EFT) with self-perception training on test anxiety. The present study is an applied research in terms of purpose with pretest-posttest with a control group design. The statistical population in this study consisted of female high school students of grade 2 in Ardabil. Multistep cluster sampling was used for sampling purposes. Out of two Educational Districts, one was selected randomly, 4 out of all schools of the district, two classes of each school, and 30 individuals of each class were selected randomly. The sample consisted of 50 students (25 students in the experimental group and under emotion-focused therapy, and 25 students in the control group). The data collection instrument in this study was Sarason's Test Anxiety Scale (TAS) (1984). The validity and reliability of the scale were already measured. The reliability of the retest was obtained at 0.88, internal consistency was obtained at 0.95, and criterion validity was obtained at 0.72. To test the effectiveness of interventions, multivariate analysis of covariance (MANCOVA) was used. Also, a one-sample Kolmogorov-Smirnov test was used to observe the statistical defaults of MANCOVA. Levene test and Box Test were used to test the normality of distribution. Tukey test was used to compare the effectiveness of therapeutic interventions. The results showed higher effectiveness of self-perception therapy compared to emotion-focused therapy in terms of explanation of the hypotheses. Hence, it could be claimed that the subjects can control emotions in addition to the achievement of locus of control in the self-perception method.

Keywords
Test anxiety, Emotion-focused therapy, Self-perception training

Introduction

Test anxiety is a common problem among individuals, especially students. Anxiety appears differently in people. The physical symptoms of test anxiety include increased heart rate, cold fingers, and low blood pressure (Moadeli and Ghazanfari Hesamabadi, 2005). Various factors such as personality traits can affect the reduction or indication of test anxiety. Personality traits such as introversion-extroversion and stability-instability (neuroticism) as the personality components can affect the severity of anxiety, test anxiety, and coping mechanisms while exposed to stressful sources (Khosravi and Bigdeli, 2008). According to the findings of the authors, the prevalence of test anxiety is reported about 10-30% among students. The value is reported about 17.2% in Iran for high school students (Ghadampour, Sabzian, and Beiranvand, 2013). Recent studies have reported a higher level of anxiety in females compared to males (Rezazadeh and Tavakoli, 2009; Gurses, Kaya, Dogar, Gunes & Yolcu, 2010). Since the test anxiety has been presented as a disorder, and special instruments have been created to measure that, various therapies and interventions have been also provided to decrease this type of anxiety. One of the mentioned methods has been emotion-focused therapy (EFT).

According to EFT, changes are made by creating emotions through expression, regulation, transfer, and analysis of emotions modified and changes in a communicative fabric facilitating the processes. Compare, Calugi, Marchesini, Molinari & DalleGrave (2013) found in a study on the effect of EFT that the method can affect the urgent responses and next interventions. Tie and Poulsen (2013) showed that EFT can affect mental health symptoms. Narimani, Aali, and Mosazadeh (2014) conducted a study with the aim of analysis of the effect of EFT and impulsion control on academic burnout and positive and negative emotions of students with a learning disability. They showed that EFT and impulsion control can be used, along with other educational interventions, to improve the performance of these students.

However, another emerging intervention is the self-perception method, which is focused on the concept of "self", and "self-perception". Suleiman Khan, Pushneh, Alizadeh (2011) investigated the relationship of self-perception, achievement motivation, and educational progress of elementary school girls and boys with and without ADHD. They

showed that boys with ADHD have higher self-perception than girls with ADHD. Bahrami, Abolghasemi, and Narimani (2013) compared the self-perception and safety behaviors in students with social anxiety symptoms, and normal students. They showed that self-perception in students with social anxiety was higher than normal ones, and could affect the prediction of social anxiety disorder.

In this study, the effect of self-perception training and EFT is emphasized. The imagination of abilities is affected by previous achievements and failures. As the imagination of a person of his/her abilities is an important factor to face stressful situations, inattentiveness to the diagnosis of test anxiety in students and treating it can be a threat to their physical health in addition to endangering their mental health. Therefore, such investigations and getting information for the advancement of adequate educational and executive programs can prevent the majority of failures, psychological failures, dropouts, and can also increase self-actualization. Also, using these results can decrease the test anxiety of students. Hence, conducting these studies is necessary for the education system. it is hoped that the results of this study can be applied by the education authorities, students of psychology, consultants, and other individuals interested in research. Accordingly, this study was conducted to compare the effect of emotion-focused therapy and self-perception training on test anxiety.

Theoretical framework

Test anxiety

Test anxiety is a serious and potential problem among high school and university students. The disabling nature of test anxiety can affect 10-30% of students. Also, 25% of students with test anxiety leave school because of dropout before graduation (Richardson et al, 1955). Sarason (1975), quoted from Abolghasemi, Asadi Moghadam, Najarian, and Shekarsen (1996) has defined test anxiety as a kind of mental self-employment specified with self-depreciation, and doubt on the abilities of self. Test anxiety can mainly result in negative cognitive evaluation, attention deficit, and academic failure. When test anxiety is created, the behavior, cognition, and physiology of individuals would be also affected. Hence, test anxiety interventions must be focused on emotional and cognitive forms too (Carter et al., 2008).

In other words, the individuals with test anxiety usually show emotional, physical, and cognitive symptoms, which vary in terms of severity. Some of these people cope with anxiety using explicit methods; although some others tolerate it in perfect silence (Mayer, 2008). Test anxiety is an underlying predictor of academic achievement (Sgoutas et al., 2007; Gagbois, 2007), and a high level of test anxiety can decrease the learning level (Branden, 2001). A high level of test anxiety makes individuals always think about the post-exam consequences and complications, and forget the scientific content (Zeidner, 1998).

The literature in this field shows a significant correlation between test anxiety and lack of study skills. However, the students with test anxiety can't use their skills during the test because of anxiety and emotional symptoms, even if they have gained adequate study skills. Therefore, study skill is just one of the most underlying variables to prevent test anxiety in students. Hence, combining this method with other therapeutic methods can affect the decreased level of test anxiety in students (Ergene, 2003).

Decrease in test anxiety by overcoming illogical beliefs from the perspective of Beck's cognitive therapy is on this basis that experience in individuals would result in the formation of assumptions or schema on self and the universe. Such schemas and assumptions on self can be sued to organize the perception, and control and evaluate the behavior. The ability to predict individual experiences and making them meaningful is useful and essential for normal function. However, some inflexible assumptions are resistant to extremist change and are ultimately inefficient. Spontaneous negative thoughts can be motivated by the activation of inefficient assumptions (Haljin et al., 2005).

Emotion-focused therapy (EFT)

Compare, Calugi, Marchesini, Molinari, and DalleGrave (2013) have studied the effect of emotion-focused therapy and found that the method can have a positive effect on the urgent responses and next interventions considered for the depression symptoms and psychological wellbeing of patients with nutrition disorders. Tie and Poulsen (2013) have found that emotion-focused therapy can affect the mental health of couples. According to relevant studies, it is essential to identify the students exposed to depression, relevant symptoms, and various challenges of their life, and using these results in the field of mental health and decreasing mental and physical disorders of individuals, especially students. Therefore, this study was aimed at presenting a comparative study of the effect of self-compassion cognitive training and emotion-focused therapy on the physical and mental health of students with depression.

Multiple studies have been conducted on decreasing the negative emotions of obsessive people, especially the obsessive symptoms on studying the effect of various therapies. However, emotion-focused therapy deals directly with emotions and has been recently used to overcome emotional problems. In this method, the patients are supported to be changed and improved by increasing their emotional knowledge and practicing (not coping with emotions) (Greenberg, 2010). Nowadays, scholars have made consensus in this field that activating and processing emotions is vital in making psychotherapeutic changes (Frach and Manin, 2007). Emotion-focused therapy can orient the emotions and emphasize them effectively (Sultani et al, 2014). This method as the basis of psychological structure and key determinant for self-organization (Greenberg, 2008) is one of the few methods including a combination of client-centered therapy, gestalt therapy, and cognitive therapy (MacKinnon et al,2016).

Self-perception training

Carl Jung called himself conscious mind; meaning the part of psych relevant to perception, thinking, feeling, and remembering. This part includes self-awareness, and the responsibility to take normal life activities at the time of awakening. Self has a selective function and makes those stimulants enter the conscious mind, to which the mind is constantly exposed. The major part of conscious perception and responsiveness to the surrounding area can be determined by extroversion and introversion perspectives. He believed that the libido can be directed toward the outside in extroversive mode, or towards the inside in introversive mode. Another aspect of Jung's theory emphasizes that how individuals fight with the opposite forces inside them. Jung uses the term "Persona" in this field, which means the mask used by actors or individuals to hide behind that and show themselves to someone else. People play various roles during their life and use different masks because all people play these roles. Concerning Jung, using different masks is not too harmful, and it can be even useful or essential to overcome various events. If someone believes that using masks can affect nature, such masks can be harmful. This is because; such a person is not an actor anymore, and has been changed into that role. As a result, "me" becomes the same masked person, and other personality traits can't be grown. The fruit of such a situation is anxiety (Psychology of Perfection, 1984).

Jung considers the self as the ultimate and final destination of life. Self indicates the effort for unity, and integration of all personality traits. When the self is grown, the person feels integration with the universe; otherwise, the person is deprived of perfect health. Finally, Jung refers to the realization of self: to achieve self, one should be aware of the neglected aspects of self. Hence, no one of the personality traits should be dominated by others. All traits must achieve a common character.

The scholars have found that students with supporting and interested teachers are more successful and motivated than those with non-supporting and uninterested teachers (Newman, 2002; Rian and Deci, 2000; from Biabangard, 2005). Need to achievement or academic motivation is a need, on which multiple studies have been conducted (Seif, 2005). Spalling (1992) defines motivation as a key for learning among students. Also, McCland (1989) believes that the future of society is dependent on the motivation and present achievement of students (Bohrani, 2005).

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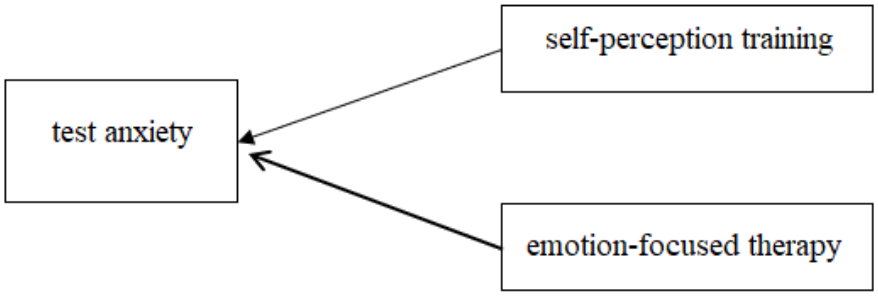


Figure 1. Theoretical Model (source: Test Anxiety Model of Sarason; Self-perception Model by Tanon (2002), and Greenberg's Emotion-focused Therapy)

Methodology

In terms of purpose, this is applied research in a kind of pretest-posttest design with a control group. The statistical population in this study consisted of female high school students in Ardabil. Sampling was multistep random sampling in this study. To this end, out of two Educational Districts, one was selected randomly, 4 out of all schools of the district, two classes of each school, and 30 individuals of each class were selected randomly. A total of 240 students participated in the study. The students were examined in terms of test anxiety using Sarason's Test Anxiety Scale. Finally, 75 students with higher test anxiety values were placed in 3 groups. It should be mentioned that the sample size in experimental studies is 15 subjects per subgroup (Delavar, 2003). However, the size was considered at 25 subjects per subgroup because of increased external validity and the probability of subject drop. Therefore, the study sample contained 75 subjects: 25 subjects in the self-perception training group, 25 subjects in an emotion-focused therapy group, and 25 subjects in the control group.

The data collection instrument in this study was Sarason's Test Anxiety Scale (1984). The scale contains 37 items and is a short form scale. The subjects have to answer the questions in form of True and False. Hence, this scale can provide the psychological modes and physiologic experiences of individuals before, during, and after tests based on a self-report method. The validity and reliability of this scale were already measured. The retest reliability was obtained at 0.88, internal consistency was obtained at 0.95, and criterion validity was obtained at 0.72, which are acceptable values (Cheraghian, Fereydoni Moghadam, Boraz Pardenjani, and Bavarsad, 2008).

Table 1. The steps of emotion-focused therapy (EFT)

Steps	Content of sessions
1	Communication and commitment in therapy: explaining the nature of anxiety, the symptoms, conceptualization on EFT, and observation and evaluation of subjects based on ability focused on internal experiences.
2	Identification of defected interactive cycle and identification of basic emotions as the infrastructure of interactive situations: identification of contradictory, dual, and critical emotions about self and effective people in life
3	Changing the infrastructures of emotional needs and desirable emotional cycle: providing conditions to express the unpleasant emotional experiences in communicative and family fabric, and challenging them.

4	Using relaxation technique: to relax the self-critical discourse and feelings, and to help to decrease the helplessness experience of subjects.
5	Identification and control of infrastructural needs, desires, and factors of emotions: to remove the sense of the insufficiency of subjects, and to make them explore two different aspects of experience.
6	Facilitating expression and description of emotions, needs, and desires: by describing and discussing on the voice mode, expressing sadness, anger, and pain
7	Providing new solutions for previous problems: training through the process of changing hopelessness, anger, and shame of subjects into creating and increasing ability to face the problems and changing important aspects of life.
8	Formation of a new cycle of behavior: examples of the quality of interpersonal relations in life provided for them to consolidate learning newly trained skills

Table 2. Harter's Self-Perception Profile

Session 1	Introducing self-perception and explaining that
Session 2	Evaluating the self-perception level and explaining that, and relevant factors of symptoms, the conceptualization of self-perception, and expressing the training goals
Sessions 2-4	Physical appearance: physical appearance, emotional reactions, and gestures created based on the present and past perceptions. While a person has no positive mental image of body and believes that his/her appearance is lower than the ideal criteria, he/she may face inadequate emotions and attitudes towards self, such as decreased self-esteem, low self-confidence, depression, and even academic dropout in some cases. This is because; the mental image of the body can play a key role in academic achievement.
Session 5	Behavioral management includes behavior effectiveness skills, decision making for self, differentiation of emotions and thoughts, self-assessment process, and logical behavior. Avoiding emotional and momentary reactions
Session 6	Academic competence: includes the process of comparing with other students, identifying educational talents, training academic achievement process
Sessions 7 and 8	Social acceptability (competence): social acceptability is the ability to take care of oneself, help and care for others. Training social competence includes four components: a) cognitive skills including database, processing skills, gaining information, and decision-making ability b) behavioral skills including negotiation, role-playing, assertiveness, Conversational skills to start and continue social interactions and learn to be friendly with others c) emotional skills to communicate others effectively, to create and expand trust and mutually supportive relations, identification and responsiveness to emotional symptoms in social interactions, and stress management d) motivational skills including valuable individual structure, ethical growth level, and sense of effectiveness and control, and sense of self-efficacy
Session 9	Total self-worth: includes training self-esteem, social skills, self-management, and self-awareness
Session 10	Consolidate and reinforce what has been learned

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Multivariate analysis of covariance (MANCOVA) was used to evaluate the effectiveness of interventions. Also, a one-sample Kolmogorov-Smirnov test was used to observe the statistical defaults of MANCOVA. Levene test and Box Test were used to test the normality of distribution. Tukey test was also used to compare the effectiveness of therapeutic interventions.

Results

The present study was aimed at comparing the effect of emotion-focused therapy and self-perception training on test anxiety. The results are presented in the rest of the paper.

Hypothesis 1: self-perception training can have a significant effect on the test anxiety of female high school students in Ardabil.

The study design was a pretest-posttest design with a control group. Hence, MANCOVA was used to control the effect of the pretest factor. The analysis needs some presumptions, which are presented in Table 3.

Table 3. Presumptions of MANCOVA

	Shapiro Wilk's Test	
1- Normality of data distribution	Z=0.795 P=0.504	
2- Homogeneity of variances	Levene	Box
	F=3.64 P=0.64	F=1.97 P=0.43
3- homogeneity of regression slopes	Sig level of the intervention group	Sig level of pretest group
	F= 3.87 P=0.92	F=2.87 P=0.84
4- Interval of dependent variable	Variable of test anxiety was measured in interval level	

According to Table 3, in the row of normality of data distribution, the significance level is higher than 0.05, which shows the normality of the research variables. In the second row, if the p-value is >0.05, H1 is rejected and H0 is confirmed. Hence, variances are equal, and MANCOVA can be used because the presumption of equality of variances has been observed. The third row shows the homogeneity of regression slope, so that significant levels (sig) of the interaction between the independent variable (group) and two covariate variables (test anxiety and pretest) is higher than 0.50, and is insignificant. As a result, the conditions of homogeneity of regression slope are observed to use MANCOVA.

Table 4. results of MANCOVA on mean values of test anxiety posttest (experimental group 1, and control group with pretest)

Source	SS	df	MS	F	P	Eta	Power
y-intercept	324.987	1	324.987	33.981	0.000	0.641	1.000
Anxiety	11.798	1	11.798	2.813	0.289	0.032	0.265

Anxiety*pretest	36.987	1	36.987	5.969	0.236	0.059	0.625
Anxiety*group	14.897	1	14.897	2.352	0.042	0.723	1.000
Error	798.357	46	17.355				
Total	145964.000	50					

According to the values in Table 4, it could be mentioned that self-perception training can affect the treatment of test anxiety of subjects. The value of test anxiety in the experimental group under self-perception training was significantly lower than the test anxiety of the control group receiving no intervention. Therefore, Hypothesis 1 has been accepted.

Hypothesis 2: Emotion-focused therapy can affect the test anxiety of female high school students in Ardabil.

Table 5. Presumptions of MANCOVA

	Shapiro Wilk's Test	
1- Normality of data distribution	Z=0.806 P=0.623	
2- Homogeneity of variances	Levene	Box
	F=2.49 P=0.83	F=1.32 P=0.54
3- homogeneity of regression slopes	Sig level of the intervention group	Sig level of pretest group
	F= 2.87 P=0.74	F=2.46 P=0.09
4- Interval of dependent variable	Variable of test anxiety was measured in interval level	

According to Table 6, in the row of normality of data distribution, the significance level is higher than 0.05, which shows the normality of the research variables. In the second row, if the p-value is >0.05, H1 is rejected and H0 is accepted. Hence, variances are equal, and MANCOVA can be used because the presumption of equality of variances has been observed. The third row shows the homogeneity of regression slope, so that significant levels (sig) of the interaction between the independent variable (group) and two covariate variables (test anxiety and pretest) is higher than 0.50, and is insignificant. As a result, the conditions of homogeneity of regression slope are observed to use MANCOVA.

Table 6. Results of MANCOVA on mean values of test anxiety posttest (experimental group 2, and control group with pretest)

Source	SS	df	MS	F	P	Eta	Power
y-intercept	338.438	1	338.438	34.236	0.000	0.684	1.000
Anxiety	12.327	1	12.327	3.451	0.291	0.041	0.271
Anxiety*pretest	38.597	1	38.597	7.264	0.301	0.063	0.735

Anxiety*group	15.623	1	15.623	3.186	0.013	0.768	1.000
Error	813.425	46	8.987				
Total	153627.000	50					

According to values obtained in Table 6, it could be found that emotion-focused therapy can affect the treatment of test anxiety of students significantly. The test anxiety value of subjects in experimental group 2 receiving EFT was significantly lower than the test anxiety of the control group receiving no intervention. Hence, Hypothesis 2 is confirmed.

Hypothesis 3: There is a significant difference between self-perception training and EFT of female high school students in Ardabil

To test the H3, an analysis of covariance (ANCOVA) was used. This test included assumptions, which should be provided to implement the test.

Table 7. Presumptions of ANCOVA

	Shapiro Wilk's Test	
1- Normality of data distribution	Z=0.628 P=0.329	
2- Homogeneity of variances	Levene	Box
	F=1.71 P=0.29	F=1.35 P=0.17
3- homogeneity of regression slopes	Sig level of the intervention group	Sig level of pretest group
	F= 2.14 P=0.83	F=2.72 P=0.60
4- Interval of dependent variable	Variable of test anxiety was measured in interval level	

According to Table 7, in the row of normality of data distribution, the significance level is higher than 0.05, which shows the normality of the research variables. In the second row, if the p-value is >0.05, H1 is rejected and H0 is accepted. Hence, variances are equal, and ANCOVA can be used because the presumption of equality of variances has been observed. The third row shows the homogeneity of regression slope, so that significant levels (sig) of the interaction between the independent variable (group) and two covariate variables (test anxiety and pretest) is higher than 0.50, and is insignificant. As a result, the conditions of homogeneity of regression slope are observed to use ANCOVA.

Table 8. MANCOVA on the mean values test anxiety posttest of subjects in experimental groups 1 and 2 with pretest control

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Test	Value	F	df	Df error	Sig
Pillai effect	0.721	1537.324	2	48	0.000
Wilk's Lambda	0.001	1537.324	2	48	0.000
Hoteling effect	134.397	1537.324	2	48	0.000
Largest root test	134.397	1537.324	2	48	0.000

The values in Table 8 showed that pretest control can make a significant difference between experimental groups 1 and 2 in terms of test anxiety ($p<0.01$, $F=1537.324$, Lambda= 0.001). Therefore, hypothesis 3 has been confirmed. To find out the significance of the effect of methods, Table 9 has presented ANCOVA in the context of MANCOVA.

Table 9. The results of ANCOVA on mean values of test anxiety posttest of subjects in experimental groups 1 and 2 with pretest control

Variables	Sum of squares	Df	Mean squares	F	Sig
Experimental group 1 (anxiety)	10.326	2	5.1632	2.294	0.000
Experimental group 2 (anxiety)	15.789	2	7.8945	6.692	0.001

According to Table 9, there was a significant difference between experimental group 1 ($P<0.05$, $F=2.294$) and experimental group 2 ($P<0.05$, $F=6.692$) in terms of test anxiety. The analysis showed that the mean value test anxiety in the posttest for the experimental group under the self-perception training was lower than group 2 under the EFT method. Hence, a significant difference was observed between self-perception effectiveness and EFT in terms of test anxiety of female high school students in Ardabil. In Table 10, the Bonferroni post hoc test has been used for a better understanding of the difference between the effects of training interventions on test anxiety.

Table 10. The results of the Bonferroni post hoc test in experimental groups 1 and 2

Dependent variable	Group comparison	Mean diff.	SD	Sig	The confidence level of 95%	
					Min	Max
Test anxiety	Experimental 1 and 2	-4.15	0.59	0.000	-2.78	-4.96

According to Table 10, the mean difference of test anxiety values in two experimental groups was obtained at 4.15, which has been confirmed statistically ($P<0.05$). Therefore, it could be mentioned that the effect of self-perception on decreasing test anxiety of female high school students of Ardabil is higher than emotion-focused therapy.

Conclusion

The main purpose of this study was a comparison of the effect of emotion-focused therapy (EFT) and self-perception on test anxiety. In terms of purpose, this was an applied study in a kind of pretest-posttest design with the control

group. The statistical population consisted of female high school grade 2 students in Ardabil. Sampling was done using multistep random sampling.

To explain the hypotheses and high effect of self-perception training compared to EFT, it could be claimed that self-perception training makes subjects have control on the emotions significantly in addition to the achievement of locus of control. According to Lazarus and Folkman (1984), individuals with an internal locus of control and self-perception can be motivated easily and act based on their goals. These individuals can achieve autonomous motivation and anxiety control. As emotion-focused therapy (EFT) is an empirical approach that considers emotion as the basis of experience concerning adaptive and maladaptive functions, the main problem in this intervention is negative emotion control.

However, self-perception training is a new therapeutic method based on the concept of self and self-perception. Perception of self is the comprehensive perception of a person about him/herself, which is formed under the experience and interpretation of others. According to Cole et al (2016), the more the durability of disorders in self-perception is, the more the disorders would be in academic and motivational fields. Hence, empowerment of self-perception can have a multidimensional effect and can cover various variables. The results showed that self-perception training is more effective than EFT in the field of decreasing test anxiety. This method includes scientific implications based on using self-perception training in the educational system for purpose of academic achievement..

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