IPA
International Journal of Psychology
Vol. 15, No. 2, Summer & Fall 2021
PP. 131-152

Iranian **P**sychological
Association

Effectiveness of Gestalt Therapy on Differentiation of Self and Ego Strength of Men with Generalized Anxiety Disorder

Article Type: *Research Article*

Somayye Abbasi, MA*
Department of Psychology, Psychology Faculty,
University of Payamenoor, Tehran, Iran
somayyeabbasi11@gmail.com

Received: 27/ 12/ 2022 Revised: 18/1/ 2023 Accepted: 31/ 3/ 2023
Dor: 20.1001.1.20081251.2021.15.2.5.6

The current research investigated the effectiveness of gestalt therapy on anxiety, differentiation of self, and ego strength of men with generalized anxiety disorder working in Asaluyeh. This was a practical, quantitative, pretest, posttest, three-month follow-up design with a control group. The statistical population was 400 men with generalized anxiety disorder working in Asaluyeh. 30 men were selected by cluster sampling. They were randomly assigned to the control and experimental groups. For the experimental group, gestalt therapy intervention was conducted during 8 sessions for 2 months. To collect information, standard questionnaires were used, including the Psychological Inventory of Ego Strength (PIES), Differentiation of Self Inventory (DSI), and Beck Anxiety Inventory (BAI). To analyze the data, analysis of covariance was used. The difference inanxiety, differentiation of self, and ego strength between the two experimental and control groups in the post-test and follow-up was statistically significant. The obtained results indicated the effectiveness of gestalt therapy on anxiety, differentiation of self, and ego strength of men with generalized anxiety disorder working in Asaluyeh. Also, the effect of gestalt therapy on anxiety is stable in the long term.

Keyword: gestalt therapy, generalized anxiety disorder, differentiation of self, ego strength.

[Downloaded from mail.ijpb.ir on 2026-11-21]
[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

Anxiety disorders are among the most common psychological disorders (Essau, Lewinsohn, Lim, Moonho & Rohde, 2018). Unpleasant emotions are so strong that people suffering from anxiety disorders cannot do their daily activities. The anxiety of these people makes them unable to enjoy normal situations in their life. In addition, they try to avoid situations that make them anxious (Kring, Johnson, Davison & Neale, 2014).Among anxiety disorders, generalized anxiety disorder is one of the most resistant disorders to treatment.The breakout of this disorder is between 1 and 3 percent of the population. Its lifetime breakout is also more than other anxiety disorders (Newman & Przeworski, 2018).

Meanwhile, women suffer from this disorder two times more. This disorder has a high simultaneity with other psychological disorders, and it causes outstanding problems in various functional fields (Cho, Przeworski & Newman, 2019). General anxiety disorder increases the risk of developing medical diseases. It is known as a risk factor in the etiology of psychiatric disorders, especially depression and alcohol abuse, in such a way that its timely diagnosis and treatment is one of the important challenges in clinical matters. This disorder rarely improves by itself. Various therapeutic approaches are used to treat generalized anxiety disorder. Still, considering the empirical support, various types of psychotherapies have always faced challenges in treating this disorder. The common treatment for generalized anxiety disorder is cognitive behavioral therapy, but the results of some research have not reported the effectiveness of this approach in the long term (Rajabi, Imani, KhojasteMehr, Beirami & Beshlideh, 2014). Thiscan indicate the importance of more research in therapeutic interventions for this disorder. The main feature of generalized anxiety disorder is the excessive

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

worry that occurs in a person for at least 6 months. According to the fifth diagnostic and statistical manual of mental disorders of American psychiatric association, generalized anxiety disorder symptoms include muscle tension, overactive autonomic system, excessive worry aboutthe future, alertness, problem withsleep, problem in concentration, irritability, being easily tired (DSM-5). Affected people suffer from many physical and mental symptoms that interfere with their social, occupational, and practical functioning in life.In investigating the etiology of generalized anxiety disorder, some factors,including genetics, basal ganglia of the brain, GABA and Norepinephrine neurotransmitters, from the cognitive point of view, attention to the negative details of things, from the behavioral point of view, conditioning and the psychoanalytic point of view, unconsciously conflicts are mentioned. Also, generalized anxiety disorder is caused by neuroticism, childhood trauma, avoidance of worry, and interpersonal problems (Shafiei, Rezaei & Sadeghi, 2021). Existential psychologists have indicated the meaninglessness of life as one of the most important causes of anxiety (Sodock, Sodock, 2017).

One of the factors influencing psychological health from a psychoanalytic point of view is ego strength (Shafaghdoost & ShahamatDehsorkh, 2019). Freud, the founder of psychoanalysis, divided the human personality into three parts: id, ego, and superego. Ego is the center of conscious awareness in personality. Ego is the representative of intellect and logicand tries to balance between the demands of the id and super ego and between the demands of the id and the outside world. (Schultz & Schultz, 2016).Actually,Ego plays therole of mediator. If the ego cannot create balance, the person will experience anxiety. This statement clarifies the importance of ego strength (Jamil, AtefVahid, Dehghani & Habibi, 2015). Therefore, a powerful ego causes

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

fewersymptoms of pathology. Having a powerful ego can afford well-being. (Golmohammad & Mirhashemi, 2021). Freud considers anxiety a warning about a danger in our unconsciousness. In response to this warning, the ego uses defense mechanisms to prevent unpleasant emotions from entering the conscious mind. The inefficiencyof ego strength makes a person anxious facing life challenges. Recent research showed that ego strengthpredicts death anxiety in the elderly (Khedmati, 2020).

Differentiation of selfis another important factor in psychological health. In fact, differentiation of selfcan segregate emotional and intellectual reactions (Goldenberg & Goldenberg, 2017). Differentiation of self means not reacting automatically based on emotion and instead usingintellect (Nichols, Davis, 2020). Differentiation of self is a method to determine the balance between two life forces; the force of intimacy and the force of individuality. Intimacy is used in love, kinship and loyalty, while individuality is used in the concepts of personal responsibility, independence, and personal rules. New research found that differentiation of self plays an important role in anxiety (Lampis, Cataudella, Speziale & Elat, 2019). Bowen believes that chronic anxiety is transmitted through previous generations. Inefficiency of differentiation of self produces emotionally reactive children who may be overly dependent on their parents or show emotional avoidance. Both of these cases eventually lead to emotional fusion in marriage. In each generation, a child more involved in emotionalfusion reaches a lower level of differentiation of self, consequently, chronic anxiety. The inefficiency of differentiation of self makes a person not aware of their emotions and unable toexpress themselves. This person finds himself forced to take responsibility for the life of others, and he expects others to take

[Downloaded from mail.ijpb.ir on 2026-11-21]
[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

responsibility for his well-being. Skowron divided differentiation of self into four parts which are Emotional reaction, which means reacting to others automatically and based on emotions and away from reason and logic; I position, which shows having specific personal beliefs and opinions in life; Emotional cutoffwhichmeans avoiding emotional conflicts in relationships toparents; Emotional fusion, shows the weak boundaries between oneself and others (Skowron & Dendy, 2004).

Among psychological treatments, gestalt therapy's effects in treating anxiety disorders are very prominent. Gestalt therapy is an integrative approach based on phenomenology (Raffagnino, 2019). This approach emphasizesconcepts such as awareness, experience, responsibility, and boundary. Awarenessis a form of experience. Awareness is a nonverbal sensing or knowing what is happening here and now. Awareness is both knowing and being (Joyce & Sills, 2014). In Gestalt therapy, unfinished affairs, including suppressed emotions such as resentment, anger, hate, grief, fear, guilt, shame, and rejection, cause imperfect gestalt.

Since these emotions are not fully experienced consciously, they constantly pressurize the person to be perfect. In Gestalt therapy, people actually experience their problems instead of just talking about them. Using gestalt therapy techniques makes it possible for suppressed feelings to be released and their destructive power to be reduced (Nour MohammadianTajAbadi, Karimi, Mirzaie Shamsabad & Manzari Tavakoli, 2018). In Gestalt therapy, responsibility implies considering one’s portion in his life events, taking responsibility for his life and not blaming others for the deficiencies (Navabi Nejad, 2013). Gestalt therapy believes there should be a proper boundary between oneself and others. The importance of the boundary is revealed by contact with the other and at the same time distinguishing oneself from the other. Perls says pathology is dependence on others, not taking

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

responsibility, playing roles, and not being real. Treatment consists of increasing independence, developing relationships with others, self-actualization, and promoting self-awareness. Gestalt therapy helps a person to move from environmental support to personal support, which is maturity (Perls, 1969). According to the pathology of gestalt therapy, not being in the present time and fear of the future are the main causes of anxiety. Gestalt therapy helps the anxious person recognize gaps in life, which are the unfinished affairs and then fill the gaps through awareness and experience suppressed emotions, leading to integration. Gestalt therapy techniques include the present moment rule, you and myrule, the no gossip rule, direct awareness, personalizing pronouns, dreaming, spinning around, unfinished work, having a secret, conversation play, projection play, inversion technique, assumption responsibility, maintaining emotion, I might tell you a sentence, contact and retreat, practice and test, exaggerate, empty chair, hot chair. New research found that gestalt therapy can improve depression and increase the differentiation of self in the elderly (Shariat, Yarmohamadian, Solati & Cherami, 2020). Also, recent research concluded that group gestalt therapy effectively reduces students' social anxiety and test anxiety (Mohammadi Shahraji & Hafezian, 2019). One research showed that anxious parents after implementinggestalt therapy had lower anxiety levels, feweravoidance behaviors, more self-kindness, and more mindfulness (Leung & Khor, 2017). Considering what has been described and relatively little experimental research has been done about Gestalt therapy, the necessity, and importance of dealing with the issue becomes clear.

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

The purpose of this research is to investigate whether gestalt therapy affects generalized anxiety disorder, differentiation of self, and ego strength?

Therefore, the research hypothesis is proposed as follows: Gestalt therapy is effective on anxiety, ego strength, and differentiation of self in men with generalized anxiety disorder working in Asaluyeh.

Method

The current research is a practical, quantitative, and the pretest, posttest, three-month follow-up design with a control group. The statistical population was 400 men suffering from a generalized anxiety disorder, according to Beck's Anxiety Inventory and working in Asaluyeh city. Demographic characteristics of the sample include male, age 23-45 years, and education of diploma or higher (table 1). 30 men were selected through Cochran's formula and by cluster sampling. They were randomly assigned totwo control and experimental groups. For the experimental group, the intervention was conducted based on the gestalt therapy protocol during 8 sessions of 45 minutes, one session per week for 2 months. After that, a posttest was taken, and finally, to ensure the stability of the treatment effects, a follow-up test was taken after three months. The conditions for entering the sample include a score of 16 or higher onthe Beck anxiety questionnaire, as well as having symptoms of generalized anxiety disorder according to the results of the clinical interview, to have willing to attendthe research, not having psychotic disorders, not abusing or dependence on drugs and alcohol, not using other psychological interventions at the same time. The conditions for leaving the sample include unwillingness to continue the research and not attending therapy sessions. One of the ethical

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

considerations in this research was the participants' consent and to assure them of the confidentiality of the answers.

Table 1
Education Distribution of Sample

Education	Experimental group		Control group	
	Frequency	Percent	Frequency	Percent
Diploma	4	26.7	5	33.3
Associate Degree	4	26.7	5	33.3
Bachelor	4	26.7	3	20
Master's degree	3	20	2	13.3

Instruments

The following standard questionnaires were usedto collect information:

Beck Anxiety Inventory (BAI)

This scale was designed by Aaron Beck in 1988 (Beck, Epstein, Brown, Steer,1988). It has 21 questions and is measured on a four-pointLikert scale. Cronbach's alpha coefficient and retest coefficient of this scale are .92 and .75, respectively. The normalization results in Iranshow content validity of .72, reliability of .83, and Cronbach's alpha of .92 (Kaviani, Mousavi, 2007).

Psychological Inventory of Ego Strength (PIES)

This scale was created by Mark Strom in 1997 based on Erikson's psychosocial perspective (Markstrom, Sabino, Turner, Berman, 1997). The mentioned scale has 8 subscales, including hope, competence, loyalty, desire, purpose, love, care, and

[Downloaded from mail.ijpb.ir on 2026-11-21]
[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

wisdom. This scale has a 64-item version and a short form of 32 items. A five-point Likert scale measures this scale. The face validity, content validity, and structural validity of this questionnaireare are confirmed. The total Cronbach's coefficient alpha is .68. Normalization in Iran obtained Cronbach's alpha as .64 (Parviz, Aghamohamadian Sharbaf, Ghanbari, Hashemabadi, Dehghani, 2016).

Differentiation of Self Inventory (DSI)

It is a 46-itemscale designed by Skowron in 1998 (Skowron, Friedlander, 1998). This scale has one total score for differentiation of self and four scores for the subscales of emotional reaction, I position, emotional cutoff, and emotional fusion. The mentioned scale is measured based on a six-point Likert scale. The face validity, content validity, and structural validity of this questionnaireare Confirmed.Cronbach's alpha coefficient and reliability are .88 and .74, respectively. The normalization in Iran shows Cronbach's alpha coefficient is .84 (Ghavibazou, Abdollahi, Hosseinian, 2022).

The intervention method is based on the gestalt therapy protocol (Perls, 1969), given in Table 2.

Table 2
Gestalt Therapy Protocol

Session	Subject	Content
First	Living Now	To keep the patient in the present moment. It helps to be aware of motivations, desires, emotions, and avoidance behaviors andto face reality well.
Second	Awareness	pay attentionto how to experience the negative emotion of fear and its effect on the body.

[Downloaded from mail.ijpb.ir on 2026-11-21]
[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

Third	Embracing emotions	To face unpleasant emotions such as despair, grief, fear, and guilt that they have been avoiding until now, to experience and embrace them.
Fourth	Unfinished work, Emptychair	To review important past relationships from childhood until now and to recall them. To confront mentally the important person in life to express unstated.
Fifth	Projection and Responsibility	To take responsibility for things that he blames others forrepeating the phrase "and I take responsibility for it" loudly after every statement about himself.
Sixth	Exaggeration	To repeat the fear emotion several times each time.
Seventh	Reversal	To play the opposite role of the current anxiety behavior.
Eighth	Summarize	To summarize.

Results

SPSS22 statistical software was used to analyze the data collected fromthe standard questionnaires.

To check the demographic characteristics of the sample, Table 3 shows the age distribution of the participants.

Table 3

Age Distribution of the Sample

Age	Experimental group				Control group			
	Frequency	Percent	Mean	Standard deviation	Frequency	Percent	Mean	Standard deviation
25-30	4	26.6	28.25	0.96	3	20	27	1
30-35	5	33.3	33	0.71	5	33.3	33	1.58
35-40	4	26.6	37.25	1.71	5	33.3	38	1.58
40-45	2	13.3	44.5	0.71	2	13.3	42.5	.71

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

Descriptive indexes, including mean and standard deviation, have been used to describe the research findings. The results are presented in Table 4.

As shown in Table 4, the mean of anxiety in the experimental group after gestalt therapy has decreased compared to the control group. Also, the mean of ego strength and self-differentiation of men in the experimental group after gestalt therapy hasincreased compared to the control group.

Multivariate analysis of covariance (MANCOVA) was used to analyze the data. The assumptions, including data normality and variance homogeneity were investigated by the Kolmogorov-Smirnov test and Levin test, respectively. Also, the homogeneity of regression slope, equality of variance and covariance were confirmed.

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

[Downloaded from mail.ijpb.ir on 2026-11-21]
[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

Table 4

Mean and Standard Deviation of Anxiety, Ego Strength, and Differentiation of Self

Variable	Group	Frequency	Pretest		Posttest	
			Mean	S. D.	Mean	S. D.
anxiety	Experimental	15	15.07	4.65	6.60	2.69
	Control	15	15.23	4.05	15.00	4.01
Ego strength	Experimental	15	116.87	11.84	127.27	11.51
	Control	15	116.20	11.08	116.43	11.12
Differentiation of self	Experimental	15	182.53	23.77	198.80	26.72
	Control	15	182.48	23.94	182.92	23.96

Table 5

The Results of MANCOVA for Anxiety, Ego Strength, and Differentiation of Self

Test	Value	F	Hypothesis df	Error df	Significance	Eta square
Pillai's Trace	.676	16.032	3	23.000	.000	.676
Wilk's Lambda	. 324	16.032	3	23.000	.000	.676
Hotelling's Trace	2.091	16.032	3	23.000	.000	.676
Roy's Largest Root	2.091	16.032	3	23.000	.000	.676

It is indicated in table 5 that the four tests of multivariate covariance analysis are statistically significant($p<.001$). Therefore, the experimental group has a significant difference in at least one of the dependent variables compared to the control group in the post-test stage. In other words, gestalt therapy affects the mean of the experimental group compared to the control group in terms of at least one of the dependent variables in the post-test. The amount of this effect is equal to .676. Covarianceanalysis was usedto investigate gestalt therapy on each dependent variable.

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

Table 6

The Results of Covariance Analysis for Anxiety, Ego Strength, and Differentiation of Self

Variable	Sum of squares	D. F.	Mean square	F	Sig.	Eta square
Anxiety	433.200	1	433.200	14.372	.001	.347
Ego strength	480.00	1	480.00	9.763	.004	.266
Differentiation of self	1453.595	1	1453.595	6.781	.015	.201

From the results of Table 6, there is a significant difference between experimental and control groups for adjusted averages of anxiety (P<.001), for ego strength (p<.004), and differentiation of self (p<.015). Therefore, the research hypothesis is confirmed; gestalt therapy effectively affects anxiety, ego strength, and differentiation of self in men with generalized anxiety disorder working in Asaluyeh.

Table 7

The Results of MANCOVA for Anxiety, Ego Strength, and Differentiation of Selfin Followup

Test	Value	F	Hypothesis df	Error df	Sig.	Eta square
Pillai's Trace	.494	7.471	3	23.000	.001	.494
Wilk's Lambda	. 506	7.471	3	23.000	.001	.494
Hotelling's Trace	. 974	7.471	3	23.000	.001	.494
Roy's Largest Root	. 974	7.471	3	23.000	.001	.494

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

It is shown in Table 7 that the four tests of multivariate covariance analysis are statistically significant (p<.001). Therefore, the experimental group has a significant difference in at least one of the dependent variables compared to the control group in the follow-up. In other words, gestalt therapy affects the mean of the experimental group compared to the control group in terms of at least one of the dependent variables in the follow-up. The amount of this effect is equal to .494.

Table 8

The Results of Covariance Analysis for Anxiety, Ego Strength, and Differentiation of Self in Followup

Variable	Sum of squares	D. F.	Mean square	F	Sig.	Eta square
Anxiety	326.700	1	326.700	6.407	.018	.192
Ego strength	24.300	1	24.300	.264	.611	.010
Differentiation of self	3075.842	1	3075.842	7.058	.055	.207

As indicated in table 8, there is a significant difference inadjusted averages of anxiety between experimental and control groups in the follow-up (p<.018); Therefore, it can be concluded that gestalt therapy is permanently effective on anxiety. Also, table 8shows that there is noa significant difference for adjusted averages of ego strength (p<.611) and for differentiation of self (p<.055) between experimental and control groups in the follow-up. Thus, it can be derived that gestalt therapy is not permanently effective on ego strength and differentiation of self in men with generalized anxiety disorder working in Asaluyeh.

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

Discussion

The results of the research showed that there is a significant difference between the experimental and control groups for anxiety. Therefore, it can be concluded that gestalt therapy is effective in the anxiety of men with generalized anxiety disorder working in Asalouye. This finding is compatible with Leung and Khor's (2017) results and Mohammadi Shahraji and Hafezian (2019) results. Inreasoning these results, it could be stated that failuresand stressful or traumatic eventscause unpleasant emotions, includingfear, anger, despair, grief, and guilt. We avoid these emotions, especially in childhood because they are unpleasant. These suppressed emotions in the past do not allow a person to live in the present time freely. Suppressed emotionskeep a person in the pastand make himfearful offacing the future because we base our judgment on the past. Since a person avoids these unpleasant emotions, they are not fully experienced consciously. These suppressed emotions constantly pressurize the person for attention. In gestalt therapy, some techniques such as embracing emotions help a person to encounter suppressed emotions and fully experience them; this causes a person to free from the past, so he can live now without worrying about the future. This will reduce internal conflicts and leads to decrease anxiety.

The results of the research indicated that there is a significant difference between the experimental and control groups for ego strength. Thus, it can be concluded that gestalt therapy is effective on the ego strength of men with generalized anxiety disorder working in Asaluyeh. The results of this research are compatible with the results of the research of Khedmati (2020). Indetermining these findings, it could be stated thatego strengthis the power of the ego to balance between the needs and the

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]
[DOI: 10.66224/ijpb.15.2.131]

limitation of the outside world. In gestalt therapy, the key concepts of awareness and responsibility play important roles in empowering the ego. By enhancing awareness, a person becomes aware of his needs and his inner power to meet them. Hecan delay or reject a need; He is not necessarily affected by any desire or passion. He considers himself powerful and able to respond to life situations, not that he is a victim of them.

Moreover, gestalt therapy helps a person take responsibility for his life. Hetakes responsibility for what he does. He can easily consider his portion in his life. He does not depend on others to live. The basic support for his life is achieved by himself (Navabi Nejad, 2013). Taking responsibility makes the ego powerful to balance between needs and the limitation of the outside world greatly. Altogether, enhancing awareness and taking responsibility makesego so powerful that it can facelife challenges well and overcomedifficulties.

Also, the research findings determined that for differentiation of self, there is a significant difference between the experimental and control groups. As a result, gestalt therapy effectively differentiates self in men with generalized anxiety disorder working in Asaluyeh.The results of this research are compatible with the results of Shariat, Yar Mohamadian, Solati, and Cherami (2020). In explaining these findings, it could be stated that differentiation of self is intimacy and individuality simultaneously in relationships with otherswhich appears along with intellectual and logical responses in relationships, away from emotional reaction. Unhealthy emotional relationships with parents include emotional fusion or emotional cutoff, causinginefficiencyof self-differentiation. The undifferentiated person repeats this defective pattern of emotional relationships in relationships with others. By emphasizing living now and improving awareness, gestalt therapy helps a person to have lively

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

and rich contact with others, not according to past relationships, and also to have a proper boundary with otherswithout losing individuality. Also, gestalt therapy, using techniques such as an empty chair, causes releasing of suppressed emotions and expressing resentment in past relationships, especially with parents. One can free from defective patterns of emotional relationships and stop emotional conflicts with parents and others; from now on, his reactions will be more intellectual and logical and away from the force of emotions.

One of the limitations of this research is that the results should generalize cautiously due to small sample size.

According to the results, it is suggested that:

1- In the next research, the effectiveness of gestalt therapy on generalized anxiety disorder should be confirmed by increasing the sample size.

2- To compare the effectiveness of gestalt therapy with cognitive behavioral therapy on generalized anxiety disorder in the long term.

3- To train gestalt therapy practically in Iran.

Acknowledgments

The authors would like to express their appreciation for the collaboration of all participants in the present study.

References

American psychiatric association. (2013). Diagnostic and statistical manual of mental disorders (DSM-5). *American Psychiatric Pub*.

Beck, A. T., Epstein, N., Brown, G., & Steer, R. A. (1988). An inventory for measuring clinical anxiety: psychometric properties. *J Consult Clin Psychol*, *56*(6),893-897.

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

Cho, S., Przeworski, A., & Newman, M. G. (2019). *Pediatric Generalized Anxiety Disorder*. Amsterdam, Elsevier Academic Press.

Essau, C. A., Lewinsohn, P. M., Lim, J. X., Moon-ho, R. H., & Rohde, P. (2018). Incidence, recurrence and comorbidity of anxiety disorders in four major developmental stages. *Journal of Affective Disorders, 1*(228), 248-253.

Ghavibazou, E., Abdollahi, A., & Hosseinian, S. (2022). Validity of the persian translation of the differentiation of self inventory (DSI) among Iranian adults. *Heliyon, 8*(7), 1-6.

Goldenberg, I., & Goldenberg, H. (2017). *Family Therapy: An Overview (9th ed.)*. New York, Cengage Learning.

Golmohammad, A., &Mirhashemi, M., (2021). Psychological welfare forecast based on ego`s potency and social interest of students. *Journal of Analytical Cognitive Psychology*, *12*(47), 79-89. (In Persian)

Jamil, L., Atef Vahid, M., Dehghani, M., & Habibi, M. (2015). The mental health through psychodynamic perspective: the relationship between the ego strength, thedefense styles, and the object relations to mentalhealth. *Iran JournalPsychiatry Clin Psychol*, *21*(2), 54-144. (In Persian)

Joyce, Ph., & Sills, Ch. (2014). *Skills in gestalt counseling & psychotherapy (3th ed.)*. London, Sage.

Kaviani, H., & Mousavi, A. (2007). Psychometric characteristics of Beck's anxiety questionnaire in age and sex classes of Iranian population. *Journal of Medical School, 2*(66), 136-140. (In Persian)

Khedmati, N. (2020). The relationship between the sense of coherence, ego strength and death anxiety of the elderly. *Rooyesh-e-Ravanshenasi*, *9*(3), 51-58. (In Persian)

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

Kring, A. M., Johnson, Sh. L., Davison, G. C., & Neale, J. M. (2014). *Abnormal psychology (12th ed.)*. John Wiley and Sons.

Lampis, J., Cataudella, S., Speziale, R., & Elat, S. (2019). The role of differentiation of selfdimensions in the anxiety problems. *The Family Journal: Counseling and Therapy for Couples and Families*, *28*(1), 90-97.

Leung, G. S. M., & Khor, S. H. (2017). Gestalt intervention groups for anxious parents in Hong Kong: a quasi-experimental design. *Journal of Evidence-Informed Social Work*, *14*(3),1-18.

Markstrom, C. A., Sabino, V. M., Turner, B. J., & Berman, R. C. (1997). The psychosocial inventory of ego strengths: development and validation of a new Eriksonian measure. *J Youth Adolesc*, *26*(6), 32-705.

MohammadiShahraji, F., & Hafezian, M. (2019). The effectiveness of group gestalt therapy on social anxiety and test anxiety in female's students. *Rooyesh-e-Ravanshenasi*, *8*(5), 163-170. (In Persian)

NavabiNejad, Sh. (2013). *Gestalt Therapy*. Tehran, Fararvan. (In Persian)

Newman, M. G., & Przeworski, A. (2018). The increase in interest in GAD: commentary on asmundson&asmundson. *Journal of Anxiety Disorders*, *56*, 11-13.

Nichols, M., & Davis, S. (2020). *Family therapy: concepts and methods (12th ed.)*. London, Pearson.

Nour Mohammadian Taj Abadi, M., Karimi, M., MirzaieShamsabad, H., & ManzariTavakoli, V. (2018). The effectiveness of group gestalt therapy on hope and loneliness in older women. *Journal of Disability Studies*, *8*(53), 1-7. (In Persian)

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

Parviz, K., Aghamohamadian Sharbaf, H., GhanbariHashemabadi, B., & Dehghani, M. (2016). The relationship between ego strength and metacognition among male and female students. *Sci JournalEducation Strategies in Medical Science*, *9*(2), 26-118. (In Persian)

Perls, F. (1969). *Gestalt therapy verbatim*. California, Real People Press.

Raffagnino, R. (2019). Gestalt therapy effectiveness: a systematic review of empirical evidence. *Open Journal of Social Sciences, 7*(6), 66-83.

Rajabi, G., Imani, M., KhojasteMehr, R., Beirami, M., & Beshlideh, K. (2014). The study of the efficacy of acceptance-based behavior therapy and integrative behavioral couple therapy on women with distressed couples and general anxiety disorder. *Journal of Behavioral Sciences Research*, *11*(6), 600-619. (In Persian)

Schultz, D., P., & Schultz, S., E. (2016). *Theories of personality*. New York, Cengage Learning.

Shafaghdoost, M., & ShahamatDehsorkh, F. (2019). Mediating role of the object relations and the ego function in relation between family function and mental health in students. *Quarterly Journal of Research in Psychological Health*, *13*(3), 31-46. (In Persian)

Shafiei, M., Rezaei, F., & Sadeghi, M. (2021). Model of contrast avoidance of generalized anxiety disorder in people with symptoms of generalized anxiety disorder. *Journal of Psychology*, *1*(25), 98-117. (In Persian)

Shariat, A., Yarmohamedian, A., Solati, K., &Cherami, M. (2020). The effectiveness of gestalt therapy on depression, differentiation of self, integrative self knowledge and positive psychological characteristics of the elderly. *Aging Psychology, 6*(3), 249-267. (In Persian)

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]

Skowron, E. A., & Friedlander, M. L. (1998). The differentiation of self inventory: development and initial validation. *Journal of Counseling Psychology*, *45*(3), 235–246.

Skowron, E. A., & Dendy, A. K. (2004). Differentiation of self and attachment in adulthood: relational correlated of effortful control. *Contemporary Family Therapy*, *26*(3), 337-357.

Sodock, B. J., & Sodock, V. A. (2017). *Kaplan & Sadock's synopsis of psychiatry, behavioral sciences/ clinical psychiatry (12th ed.)*. Philadelphia, Lippincott Williams & Wilkins.

[Downloaded from mail.ijpb.ir on 2026-11-21]

[DOR: 20.1001.1.20081251.2021.15.2.5.6]

[DOI: 10.66224/ijpb.15.2.131]