Clinical Trial Protocol
Iranian Registry of Clinical Trials

18 Sep 2026

The Effectiveness of Intensive Short-Term Dynamic Psychotherapy (ISTDP) on Mindfulness, Attachment Styles and Well-Being in Women with Marital Conflict

Protocol summary

Study aim

1. Determining the effect of Intensive Short-Term Dynamic Psychotherapy (ISTDP) on Mindfulness, Attachment Styles and Psychological Well-Being in women with marital conflicts.

Design

A clinical trial with an experimental group and a control group, randomized by lottery with a sample size of 30 people

Settings and conduct

First, the research will explain to all women with marital discord who will inform the center in 1401 in Tehran. After getting their consent and recognizing the presence of marital conflict in women based on the marital conflict questionnaire of Kenzas et al. (1985) and clinical interview, as well as having other inputs and outputs of the research, 30 people were randomly selected and randomly divided into two groups. Trial. and control will be placed. The experimental group will undergo short-term psychodynamic intervention twice a week for 10 sessions of 1 hour, but intervention will be required in the control group and they will be placed on the waiting list.

Participants/Inclusion and exclusion criteria

Entry requirements: minimum score of the Kansas Marital Conflict Questionnaire; Having a marital conflict in the clinical interview; not having a divorce; Absence of death of loved ones. Conditions of non-entry: substance abuse; Having mental retardation

Intervention groups

Experimental group: two one-hour sessions per week for ten sessions based on Dovanlo's intensive short-term dynamic psychotherapy protocol (adjusted method) will be subjected to intervention. Control group: no intervention will be done

Main outcome variables

Mindfulness, Attachment styles and Psychological well-being are dependent variables

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20220705055380N1**
Registration date: **2022-07-30, 1401/05/08**
Registration timing: **prospective**

Last update: **2022-07-30, 1401/05/08**
Update count: **0**

Registration date

2022-07-30, 1401/05/08

Registrant information

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Name of organization / entity

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Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2022-08-06, 1401/05/15

Expected recruitment end date

2022-09-11, 1401/06/20

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date
empty

Scientific title
The Effectiveness of Intensive Short-Term Dynamic Psychotherapy (ISTDP) on Mindfulness, Attachment Styles and Well-Being in Women with Marital Conflict

Public title
Investigating the Effect of Short-Term Dynamic Psychotherapy (ISTDP) on Mindfulness, attachment Styles and Psychological Wellbeing

Purpose
Supportive

Inclusion/Exclusion criteria
Inclusion criteria:
All married women with marital conflict Having a minimum score of the Kansas Marital Conflict Questionnaire. Confirmation of marital conflict in clinical interview. Absence of acute and chronic diseases. Absence of a divorce in one year before and during the implementation of the research. Absence of death of closed relative in the past 6 months or during the implementation of the research.
Exclusion criteria:
Having substance abuse Having mental retardation

Age
No age limit

Gender
Female

Phase
N/A

Groups that have been masked
No information

Sample size
Target sample size: **30**

Randomization (investigator's opinion)
Randomized

Randomization description
Each of the people in the sample will be assigned a special number, then we will write each of the numbers on a small piece of paper and fold them and put them in a container and mix them, then tear the papers one by one and divide them into intervention groups. and control group

Blinding (investigator's opinion)
Not blinded

Blinding description

Placebo
Not used

Assignment
Parallel

Other design features

Secondary Ids

empty

Ethics committees

1

Ethics committee
Name of ethics committee
Research ethics committee of Islamic Azad University, Semnan branch
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Sharak Daneshgahi Islamic Azad University Semnan Branch
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Semnan
Province
Semnan
Postal code
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Approval date
2022-05-24, 1401/03/03

Ethics committee reference number
IR.IAU.SEMNAN.REC.1401.006

Health conditions studied

1

Description of health condition studied
Women with marital conflict

ICD-10 code

ICD-10 code description

Primary outcomes

1

Description
Mindfulness, the score obtained from the Freiburg Mindfulness Questionnaire.

Timepoint
Measurement periods at the beginning of the study and before the intervention and one week after the intervention

Method of measurement
Freiburg measuring scale

2

Description
Attachment styles: the score obtained from Hazen and Shaver's attachment questionnaire

Timepoint
Measurement periods at the beginning of the study and before the intervention and one week after the intervention

Method of measurement
Hazen and Shaver measurement scale

3

Description
Psychological well-being: score obtained from RIF questionnaire

Timepoint
Measurement periods at the beginning of the study and before the intervention and one week after the

intervention

Method of measurement

Reef measurement scale

Secondary outcomes

empty

Intervention groups

1

Description

Intervention group: In this research, Davanlo's intensive and short-term psychodynamic psychotherapy (adjusted method) is used, and the treatment method is as follows. Treatment process: The first treatment session lasts between one and a half to 3 hours, and after that the sessions are weekly and one hour long. This treatment can be divided into seven distinct stages, each of which is explained. First stage: In this stage, we start from the nature of the patient's problem and ask for an explanation of a specific and objective example of his problem. In the process of questioning the patient's problems, it is emphasized on providing personal, objective and specific explanations that give clarity to the patient's speech. At this stage, the patient's emotional tolerance capacity is actually evaluated. Patients enter the treatment with 4 different states: 1- emotional activation 2- anxiety activation 3- defense activation 4- without any of the mentioned symptoms .We continue questioning the patient until the signal is activated (defense, anxiety or emotion). If the patient comes in with anxiety, we will adjust the anxiety, if he comes in with defense, we will clarify and challenge him with defense, and if he comes in with a feeling, we will help him to fully experience that feeling on three levels, cognitive, physical and with impulse, and if none of these We will continue the questioning without being active. The second stage: pressure for more objective answers and experience of feeling, in this stage, the main defense systems are gradually activated in the patient. The therapist asks the patient for specific and objective answers. The patient is asked to give an example of the events that caused problems for him. An attempt is made to direct the interview to anxiety-provoking issues. Third step: identifying, clarifying and challenging the defenses. The therapist at this stage through pressure enters the stage of defense analysis and verification, since the purpose of this method is to create experience for experience at the highest level, all defenses against the experience of emotion are identified and challenged to be neutralized. . At this stage, the therapist pays attention to the types of defenses that are active in clients, events that caused problems for him. An attempt is made to direct the interview to anxiety-provoking issues. If the client uses tactical and non-verbal defenses such as lack of eye contact, involuntary laughter, reasoning, etc., the therapist tries to make these defenses clear and specific. This point is checked whether the client is aware of such defensive behaviors or can he simply become aware? Attention should be paid to the patient's ability to understand his defenses to avoid emotions. In patients with low ability, defenses in all dimensions of life are identified and clarified by performing appropriate interventions. The fourth stage: transference resistance In the fourth stage, the therapist watches the transference symptoms, which are mostly non-verbal. Signs that may be used to defend one's anger, such as clenching fists, clinging to the chair, tension and cramping, sighing, etc. When the therapist feels that the tension has increased to a suitable level, he directs the interview to focus on the transference. And in this process, he directs the patient's attention to the non-verbal signs that he shows. . The characteristics of this intervention are: targeting the therapeutic contract and mobilizing it against resistance, emphasis on transference resistance, special emphasis on clients' refusal to get emotionally close to the therapist and not allowing the therapist to enter their private world. The fifth stage: direct access to the unconscious in the fifth stage, focusing on defenses, identifying and clarifying and challenging them leads to the movement of intense and complex transference emotions in the patient. The pressure and challenge continues until the unconscious shows signs that emotions and impulses are approaching the surface. When the patient is able to express his feeling to the therapist, he is asked to describe his inner experience of that feeling. All three components of an emotion must be experienced for full penetration and real touching of emotions. Transference emotions are usually complex. Anger is the first layer of transitional emotions, followed by guilt and grief. But instead of the first anger, it may be a feeling of sadness and regret. The sixth stage: Systematic analysis of the transition, the result of the intrapsychic crisis is a major reduction in tension and a significant change within the patient, followed by the predominance of the therapeutic contract. Transference feelings lead to the opening of the patient's repressed memories and feelings either spontaneously or by asking the therapist. As a result, it becomes possible to explore areas outside of transmission. Seventh stage: dynamic exploration of the unconscious In the seventh stage, due to the dominance of the therapeutic contract, traumatic events that cause anxiety and unconscious feelings of anger, sadness and guilt are revealed and experienced. The therapist helps the person gain insight into them. After the systematic analysis of the transference and the triangle of conflict and person, the therapist explores the current and past relationships of the patient, and in this direction, the conflict structure and the core of the patient's disorder are clarified. Facing painful emotions may provoke some resistance, but resistance can be easily overcome with a little push and challenge. The therapist's effort is to bring the patient's most painful feelings to the surface and enable him to experience them directly. The second session to the tenth session continues according to the protocol that was explained in the first session and according to the conflict triangle and the person triangle and the follow-up of other referral problems.

Category

Other

2

Description
Control group: Control group: no intervention is done for the control group. Before the intervention, a pre-test was taken from the control group and they were put on the waiting list. At the end of the intervention, they will be given a post-test and the results will be analyzed.

Category
Other

Recruitment centers

1

Recruitment center

Name of recruitment center
Agah

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Sponsors / Funding sources

1

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Grant name

Grant code / Reference number

Is the source of funding the same sponsor organization/entity?
Yes

Title of funding source
Islamic Azad University

Proportion provided by this source
100

Public or private sector
Public

Domestic or foreign origin
Domestic

Category of foreign source of funding
empty

Country of origin

Type of organization providing the funding
Academic

Person responsible for general inquiries

Contact

Name of organization / entity
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Position
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Sharing plan

Deidentified Individual Participant Data Set (IPD)
No - There is not a plan to make this available
Justification/reason for indecision/not sharing IPD
There is no further information.
Study Protocol
No - There is not a plan to make this available
Statistical Analysis Plan
No - There is not a plan to make this available
Informed Consent Form
No - There is not a plan to make this available
Clinical Study Report
No - There is not a plan to make this available
Analytic Code
Not applicable
Data Dictionary
No - There is not a plan to make this available