

Effect of Transactional Analysis Intervention on Parent-adolescent Conflict and Emotional Regulation Among Adolescents in Bangladesh

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ABSTRACT

Transactional Analysis (TA) focuses on the paradigm of the parent, adult, and child ego states. TA therapy tools have successfully reduced conflicts between parents and adolescents, emotional regulation, and depression. The main objective of this study is to examine the effect of transactional analysis intervention on parent-adolescent conflict and emotional regulation. This research uses pre-test, post-test control and experimental group design. The subjects were 60 students randomly allocated to one of two groups: experimental (TA Intervention) or control (non-TA Intervention). The descriptive analysis described the participants' demographic profile, including age, gender, education grade, and parental marital status. The independent sample t-test evaluated the mean scores of parent-adolescent conflict, emotional regulation, and depression between the experimental and control groups' post-test findings. The MANOVA determined the considerable effect of groups and genders on Parent-adolescent conflict, emotional regulation, and depression. The findings demonstrated that Transactional Analysis was more successful for adolescents dealing with parent-adolescent conflict, emotional regulation, and depression in the experimental group than in the control group. The current study is a pioneer experimental investigation in Bangladesh to determine the effect of

TA on parent-adolescent conflict, emotional control, and depression, which will assist mental health professionals in better treating adolescent conflict, emotional regulatory strategies, and depression in Bangladeshi adolescents.

Keywords: Emotional regulation, parent-adolescent conflict, transactional analysis intervention

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INTRODUCTION

Adolescence is a stage of human development and maturation in the life cycle. It refers to transitioning from childhood to adulthood, around 12 to 18 years old, and from puberty to adulthood. During the transition, most adolescents will encounter rapid changes and growth in their lives, as well as physical, emotional, cognitive, and social elements (Vijayakumar et al., 2018). Adolescents will monitor and ensure parents' availability to meet the former's attachment needs in the context of co-parenting conflict, thereby affecting the development of parent-adolescent attachment during adolescence (Zou et al., 2019). During the transition, parent-adolescent relationships become increasingly egalitarian, with adolescents striving for more autonomy (Hadiwijaya et al., 2017). Previous research indicated that inter-parental conflict has an indirect effect on adolescents' psychological disadvantage through experienced threat (the cognitive component) and perceived mother and paternal disapproval (contextual factor) (Khaleque et al., 2016). School-based group therapy is found to help decrease parent-adolescent conflict. Moreover, intervention with parents and adolescents effectively reduces stress at home (Haddad & Shechtman, 2019). Transactional analysis can help adolescent pupils to manage their conflicts and depressive symptoms. Even though this empirical investigation found that TA reduced parent-adolescent conflict and aggressiveness, the control group received no intervention (Kulashekara & Kumar, 2014). The current study includes

structured treatment for the control group to obtain meaningful and trustworthy results. Despite the need to examine the usefulness of transactional analysis in improving parent-adolescent relationships, relatively few studies have been undertaken in Bangladesh.

Emotional regulation is a process that people use to manage the emotions they experience when they happen and how they are experienced and expressed. It is indispensable to adapt to social dynamics, maintaining good physical and psycho-emotional health, and healthy and productive interpersonal relationships (Bonilla et al., 2020). Two types of emotional regulation are adaptive and maladaptive, where adaptive emotional regulation is a reassessment of positive or neutral interpretations of events and problem-solving abilities (Aldao & Nolen-Hoeksema, 2010). Meanwhile, maladaptive regulation of emotions refers to repression and prevention (Gross, 1998). Several studies have found a link between parenting approaches and children's emotional regulation abilities. Harsh parenting and poor upbringing impact children's ability to regulate and be accountable for emotional dysregulation (Chang et al., 2003; Morris et al., 2007). According to a recent survey conducted in Bangladesh, prevention and intervention of psychopathology have been proven to be practical techniques for improving maladaptive cognitive strategies such as ruminating, overthinking, and self-blame into more adaptive systems such as productive thinking and positive reappraisal

(Hossain et al., 2017). More research is needed to confirm that psychological intervention is essential for improving adolescent mental health in Bangladesh. Almost 7 million people in Bangladesh experience depressive and anxiety disorders respectively (World Health Organization, 2020). In Bangladesh, depression, anxiety, and stress levels have been reported to be as high as 54.3%, 64.8%, and 59.0%, respectively (Mamun et al., 2019, 2021). A family history of depressive symptoms, bad domestic parental connections, sexual abuse, and reproductive sickness have caused adolescent depression. Research indicates that a counseling intervention program helps reduce depressive symptoms in Bangladesh; however, it is essential to investigate the impact of transactional analysis on depression in addition to other treatments in Bangladesh (Nasreen et al., 2016).

Depression has been seen as a significant public health problem. Depression implies a sad, vacant, or irritable mood characterized by physical and cognitive alterations affecting individuals' functions. The American Psychiatric Association (2013) describes depressive disease as a classic condition. It defines the symptoms over a similar timespan of two weeks, which implies a change from the initial state with at least one sign: i) a depressed mood or ii) a loss of interest or pleasure. Depression frequently occurs in painful situations with a sense of melancholy, soft feelings, emptiness, impatience, and loss of interest or pleasure (Hanafiah & Bortel, 2015). The therapeutic methods of transactional analysis have been

demonstrated to reduce separation anxiety, dysfunctional mood, and avoidant decision-making patterns (Rahmanian et al., 2019). The effectiveness of group transactional analysis intervention improves disruptive adolescents' capacity for dealing with stress and their communication abilities (Jabbari et al., 2019). The transactional analysis was similar to brief strategic family therapy in dealing with negligence and misconduct and improving the relationship (Darbani et al., 2019). However, research on transactional analysis in the Asian cultural context was restricted. Considering the gaps discussed above, this study aims to investigate the effectiveness of the transactional analysis technique on parent-adolescent conflict and emotional regulation with depression. The study also aimed to examine the significant gender differences regarding the effects of transactional analysis. It will establish a broader scope for future professionals in Bangladesh to accelerate applying the transactional analysis approach as an intervention and counseling approach in dealing with mental health crises.

LITERATURE REVIEW

Parent-adolescent Conflict

Conflicts among parents and adolescents may be among the most aggravating family experiences of adolescence for parents and adolescents alike. The parent-adolescent relationship is meaningfully associated with adolescent and parent adaptation (Tanni et al., 2021). Hadiwijaya et al. (2017) performed a study to examine how the development of adolescents' perceived

relationship with their parents aligns with the four viewpoints. The findings reported turbulent relationships with their parents, low support, and high conflict. In contrast, most adolescents had the same conflicting relationship with their parents throughout their studies. Furthermore, Mastrotheodoros et al. (2019, 2020) explained that parent-adolescent conflict was studied throughout adolescence. According to the findings of this study, under-controlling fathers and over-controlling adolescents had more father-adolescent disparities. The Network of Relationships Inventory (NRI) assessed conflict intensity. Their findings revealed that parents and adolescents had different perspectives on conflict severity, thus leading to inconsistencies.

Haddad and Shechtman (2019) studied movie intervention as a potential therapeutic technique in school-based counseling groups to reduce parent-adolescent conflict. The findings found that group counseling aimed at reducing parent-adolescent conflict was beneficial among Arab adolescents. Xu et al. (2017) investigated the family structure, family cohesiveness, family conflict differences between parents and adolescents, and their relationship to adolescence deficit. Tanni et al. (2021) findings show that the relationships between emotional regulation and depression, greater extents of 'suppression-focused' emotional regulation styles appear to be related to the reporting of more borderline clinical depression, while more cognitive 'reappraisal-focused' styles are not significantly associated with the symptoms of depression.

Emotional Regulation

Emotional regulation (ER) is a set of extrinsic and internal mechanisms for tracking, assessing, and changing emotional reactions, particularly their intensity and temporal characteristics, to achieve a goal. It is defined as "shaping which emotions one has when they occur, and how one feels or displays them" (Gross, 2013). A study by Bailey et al. (2020) investigated the impact of age on emotional regulation, empathy, and prosocial conduct. The results implied that less spontaneous suppression as an emotional regulation technique is linked to more significant pain replication in older individuals, possibly because suppression efforts overload their cognitive resources. It also examined the bonding and emotional control methods of depressed adolescents. The findings of this study indicated that depressed adolescents exhibited fewer secure attachments to their mothers and peers than healthy adolescents, as well as less secure attachments to their fathers as compared to the other two groups.

Clear et al. (2020) studied the attachment and emotional regulation of sadness and anger based on common and distinct depression, anxiety, and aggression correlations. The findings of this study showed that more anxious attachment was related to more emotional dysregulation, whereas more avoidant attachment was associated with more emotional suppression. In addition, more sorrow dysregulation was linked with depression and social anxiety but not aggressiveness, whereas greater anger dysregulation was connected with

aggression but not depression and anxiety. On the other hand, Zhang et al. (2019) attempted to establish trait mindfulness profiles and investigate their relationships with emotional regulation. The findings revealed varied patterns of trait mindfulness in early adolescents, and the connections of trait mindfulness with emotional regulation should be examined holistically rather than individually. Several studies have investigated emotional regulation in the context of Bangladesh. Hossain et al. (2017) explored the connection between cognitive emotion control techniques and psychopathology among Bengali adolescents. The findings suggested a link between cognitive emotion control techniques and psychopathology among Bangladeshi adolescents.

Depression

Depression is a persistent and debilitating illness that usually begins during childhood or early adulthood (Stevanovic et al., 2011). Major depressive disorder is the leading cause of years lived with disability worldwide, and it is expected to become the second most significant cause of disability-adjusted life years in the future (Olin et al., 2012). Clayborne et al. (2019) illustrated that adolescents' depression is linked to a higher risk of failing to complete secondary school, unemployment, pregnancy, and parenting, and a lower risk of being employed or attending tertiary training and postsecondary education. Verma et al. (2019) reported that 40% of depression incidents happened among adolescents. According to Perchtold

et al. (2019), adolescent girls may feel or perceive more stress than boys and/or respond to stress in ways that are more likely to raise the likelihood of depressive symptoms. Hanspal et al. (2019) found that adolescents between 15 and 19 years old were discovered to be substantially linked with depression. It was also reported that parents who fought regularly were shown to be strongly related to depression.

Grover et al. (2019) conducted a review study that revealed that the prevalence of depression/affective disorders ranged from 1.2% to 21% in clinic-based research, 3% to 68% in school-based studies, and 0.1% to 6.94% in community studies. Adding to the discussion, Verma et al. (2019) investigated the incidence of stress and depression among adolescents within the Udupi taluk district in Karnataka. Cross-sectional research was conducted involving teenagers between the ages of 14 and 17. The findings reported that the prevalence of stress and depression among teenagers was 30.5% and 40%, respectively. Furthermore, this study discovered that females were more likely to suffer from anxiety and sadness than males. Moreover, research conducted by Rentala et al. (2019) showed that the impact of the holistic group health promotion program lasted for three months. The outcome variables were assessed using the self-reporting method.

Transactional Analysis Counselling

Transactional analysis counseling is defined by the European Association for Transactional Analysis (2008) as a

professional activity that occurs within a contractual partnership. Through improving its abilities, resources, and functioning, the counseling process allows clients or client systems to acquire awareness, alternatives, and skills for issue management and personal growth in daily life. Its goal is to give people more control over their social, professional, and cultural environments. During World War II, Bern began performing group therapy at a United States military hospital, and these discussions with warriors were officially recognized as ‘therapeutic’ by the Ministry of War (Berne, 1966). Berne then proceeded to visit his patients in groups. Transactional analysis was therefore created in a group environment following Berne’s findings on the relational dynamics that evolved among group members. Since then, transactional analysis approaches have been used in fields other than medicine. Non-psychotherapy usage was classified as a particular area until the 1990s (Cornell, 2013).

However, Rahmanian et al. (2019) examined the efficacy of TA in decreasing illogical beliefs and the avoidant decision-making style. The findings indicated that transactional analysis could be beneficial in reducing irrational beliefs and reliant and avoidant decision-making styles. In addition, intervention might improve adolescents’ logical decision-making abilities. TA was also helpful in reducing separation anxiety symptoms among participants in conjunction with emotional control (Heyrat & Fatemeh, 2021; Rajabi & Nikpoor, 2018). Tanni et al. (2021) findings show that the relationships between emotional

regulation and depression, higher extents of ‘suppression-focused’ emotional regulation styles appear to be related to the reporting of more borderline clinical depression, while more cognitive ‘reappraisal-focused’ styles are not significantly associated with the symptoms of depression.

Adolescence is a critical stage of development characterized by significant physical, emotional, cognitive, and social changes (Khalili et al., 2022). In Bangladesh, like in many other cultures, parent-adolescent conflict, emotional dysregulation, and depression among adolescents pose substantial challenges to their well-being and overall development. Despite the recognition of these issues, there is a gap in understanding the effectiveness of transactional analysis intervention in addressing parent-adolescent conflict, improving emotional regulation, and alleviating depression among adolescents in the specific cultural context of Bangladesh. Therefore, the problem at hand is to investigate the effect of transactional analysis intervention on parent-adolescent conflict, emotional regulation, and depression among adolescents in Bangladesh and provide insights into the potential benefits and implications of this intervention in improving adolescent mental health. The objectives of the study are:

1. To examine the difference in parent-adolescent conflict between the experimental and control groups.
2. To examine the difference in emotional regulation between the experimental and control groups.

Theoretical Framework of the Study

The theoretical framework of this study showed a link connecting Transactional Analysis theory (life script) and Attachment theory (attachment type with parental Figure 1). It also explained the underlying principles of transactional analysis intervention and attachment theory. Furthermore, this theoretical framework explained how the two theories are associated with dealing with communication patterns, improving self-esteem, and comprehending the correlation between the implementation of life script and attachment style. A script is a continuing pattern, created in infancy underneath family involvement, which governs the participant’s conduct in the most significant

elements of his life (Berne, 2011) based on choices taken at any growth phase that stifle originality and restrict versatility in problem-solving and interpersonal interactions.

According to Bowlby (1973), a child’s inner working model gives him a feeling of seeing if he is desirable or unsuitable from the perspective of primary caregivers. To make some effort toward meeting needs, they adapt and accommodate the relationship between the attitudes of prominent people. Consistent with earlier identity physical and affective responses, attachment patterns are unconsciously sub-metaphoric operational memory methods (Bowlby, 1988). Individual scripts are generated

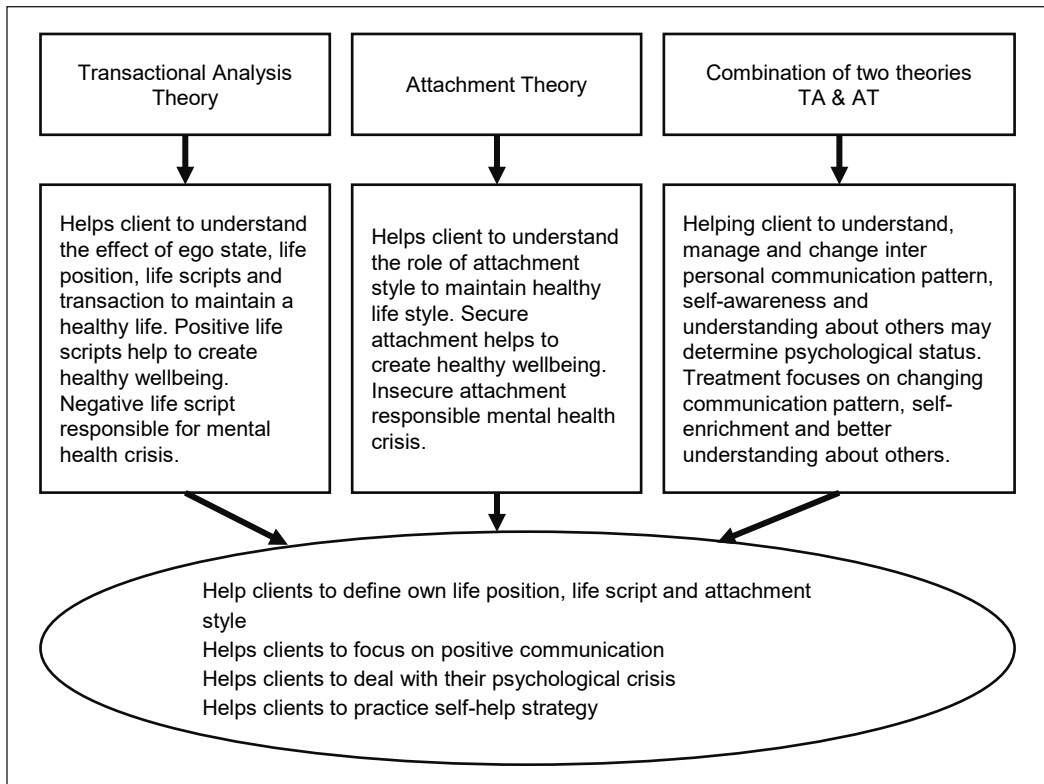


Figure 1. Theoretical framework of the study (Tanni, 2020)

by people's formative experiences, even if they may not know them. Core beliefs are formed because of these experiences. These beliefs shape individual identities, interpersonal relationships, and positions in society. Adolescents build their opinions of themselves on how their parents or other primary caregivers treat them. People learn how relationships work by watching how their parents interact and handle the situation, authority, closeness, and interaction. In this research, the ideas of life scripts and attachment styles were combined to support each client's good functioning.

MATERIALS AND METHODS

This study employed a quantitative research method through experimental design using the pre-test and post-test control and experimental group design to investigate the effectiveness of the transactional analysis intervention following the conceptual framework previously discussed. This randomized control trial comprised one experimental and one control group to assess the independent and dependent variables. In a randomized design, participants are randomly assigned to the experimental and control groups (Maxwell et al., 2017). The scores of the dependent variables were determined using a pre-test and post-test trial. A pre-test was given to all study subjects to assess their level of parent-adolescent conflict, emotional regulation, and depression. The target population of this study is adolescent students in Dhaka, Bangladesh. A simple random sampling using the lottery method selected one high-

achieving secondary school from Dhaka's 15 high-achieving secondary schools with a counseling support unit. The lottery method also randomly assigns participants to different groups or conditions (Creswell, 2002). It helps ensure that the groups are comparable and that any observed differences are not biased by pre-existing characteristics. Most schools in Bangladesh practice gender-segregated classrooms where it is common to have a single-sex classroom. So, four classrooms (two male-oriented classes and two female-oriented classes) were selected as the subjects of this study.

Instrumentations

The study employed three scales to evaluate the dependent variables (i.e., parent-adolescent conflict, emotional regulation, depression) to obtain the answers to the research questions. For this purpose, the Conflict Behavior Questionnaire (Robin & Foster, 1984) was used to assess parent-adolescent conflict, the Emotion Regulation Questionnaire (Gross & John, 2003) was used to assess emotional regulation, and the Beck's Depression Inventory (Beck et al., 1996) was used to assess depression. These three scales have been commonly used in past studies and literature.

Data Collection Procedure

The data collection process consists of three phases. Phase 1 comprised the screening process, pre-test, intervention program, and post-test. The pre-test involved administering the Conflict Behavior Questionnaire, Emotion Regulation Questionnaire, and

Beck's Depression Inventory. Phase 2 involved administering the intervention. Six sessions were conducted separately with the experimental and control groups. The sessions were scheduled every week for a maximum of 90 minutes per session, which were done throughout twelve weeks. Meanwhile, the control group received standardized group counseling. Phase 3 involved a post-test that was conducted after the twelfth session.

RESULTS

Respondent Profile

The subjects were 13 to 14-year-old adolescents who experienced conflicting issues with their parents, emotional regulation, and depression. A total of 60 adolescents were randomly selected and assigned to the two experimental groups and two control groups based on gender.

The Difference of Parent-adolescent Conflict Between Groups

The first objective is to see the difference in parent-adolescent conflict between the experimental and control groups. The mean scores of these two questionnaires differed in the experimental and control groups. The mean scores for both father and mother were higher in the control group. They lowered in the experimental group, mainly due to the transactional analysis treatment provided to the latter. It indicates that the experimental group had lower parent-adolescent conflict than the control group.

An Independent sample t-test was conducted to compare the post-test scores

of the experimental and control groups, where the former received transactional analysis therapy. At the same time, the latter was provided with the usual treatment. A significant mean score difference related to the parent-adolescent conflict with father and mother, as evident by the post-test scores between the experimental group ($M = 8.37, 7.40; SD = 1.809, 1.958$) and control group ($M = 10.00, 10.87; SD = 1.174, 1.736$). The results indicated that the experimental group's mean scores for conflict behavior with father and mother were ($M = 8.37, 7.40$). In contrast, the control group's mean scores were ($M = 10.00, 10.87$), showing that the experimental group's scores were lower than the control group's. It indicates that after completing the post-test questionnaire, participants in the experimental group had a more contentious connection with their parents than those in the control group.

Furthermore, the results indicate that transactional analysis therapy influenced the parent-adolescent conflict between parents and adolescents, particularly among the experimental group, as their lower score on the Conflict Behavior Questionnaire represented lower conflict with parents. The independent sample t-test showed a significant difference between the mean scores of parent-adolescent conflict with father between the experimental and control group ($t(49) = -4.147; p < .05$). Therefore, the null hypothesis is rejected. The results showed that the control group had a higher mean score ($M = 10.00$) compared to the experimental group ($M = 8.36$), thus representing less conflict in the experimental group than the control group. There is also a significant difference in the mean scores of

conflict with father between the experimental and control group, with the latter scoring higher than the former 1.63(95% CI, -2.42 to -.84), $t(49)=-4.15, p=.000$.

Similarly, the independent sample t-test results showed a significant difference between the mean scores of parent-adolescent conflict with mother between the experimental and control group ($t(58) = -7.255; p < .05$). The null hypothesis is thus rejected. It was found that the control group had a higher mean score ($M = 10.86$) compared to the experimental group ($M = 7.40$), hence representing less conflict in the experimental group than the control group. There was also a significant difference in the mean scores in conflict with the mother between the experimental and control group, with the latter scoring higher than the former, $-3.47(95\% \text{ CI}, -4.42 \text{ to } -2.51)$, $t(58)=-7.25, p=.000$ as in Table 1.

The hypothesis investigated whether the experimental and control groups' post-test mean scores differed significantly. The results showed that the experimental group's mean scores for conflict behavior with father and mother were ($M = 8.37, 7.40$).

In contrast, the control group's mean scores were ($M=10.00, 10.87$), indicating that the experimental group's scores were

lower than the control group. It signifies that the conflicted relationship experienced by subjects in the experimental group with their parents was better than that experienced by those in the control group after completing the post-test questionnaire. Furthermore, results of the independent sample t-test revealed a significant mean score difference between the experimental and control groups, indicating that transactional analysis counseling effectively reduced parent-adolescent conflict behavior with the father and mother for the experimental group. According to Saberinia and Niknejadi (2019), transactional analysis training is beneficial in improving parent-child contact with the mother and increasing the parents' psychological state; good and long-term efforts may be implemented to eradicate or ameliorate children's behavioral issues.

The Difference of Parent-adolescent Conflict in the Experimental Group

A paired sample t-test was utilized to compare the outcome of the transactional analysis therapy on the parent-adolescent conflict between the experimental and control groups. The Conflict Behavior Questionnaire scores were collected from the pre-test and post-test. Table 2 shows the mean value of the parent-

Table 1
Independent sample t-test of Parent-adolescent Conflict with Father and Mother for experimental and control group

Questionnaire	Group	N	Mean	Mean different	SD	df	t	p
PAC(Father)	Experimental	30	8.36	-1.63	1.81	49	-4.147	.000
	Control	30	10.00		1.17			
PAC(Mother)	Experimental	30	7.40	3.47	1.96	58	-7.255	.000
	Control	30	10.87		1.74			

adolescent conflict (CBQ-Father) for the pre-test and post-test of the experimental group. The mean value of the parent-adolescent conflict scores recorded by the experimental group during the pre-test was 11.10 before dropping to 8.37 after the therapy. Such a decrease indicates the therapy's positive effect and a reduction in the parent's conflict with the father.

A similar procedure was implemented to compare the mean scores of parent-adolescent conflicts with the father during the pre-test and post-test that were recorded by subjects who had undergone the transactional analysis counseling therapy. Results show a significant difference between the mean scores of parent-adolescent conflict before ($M = 11.10$, $SD = 1.35$) and after ($M = 8.37$, $SD = 1.81$) the treatment in the experimental group ($t(29) = 6.298$, $p < 0.05$). Therefore, the null hypothesis is rejected. The results also showed a higher pre-test mean score for conflict with father ($M = 11.10$) than the post-test ($M = 8.37$) for the experimental group. It indicates that the conflict scores in the experimental group decreased after receiving the treatment. There was a significant difference in the pre-test and post-test mean scores for conflict with the father, with the pre-test scoring higher than the post-test, 2.73 (95% CI, 1.84 to 3.62), $t(29) = 6.298$, $p = .000$.

Meanwhile, Table 2 shows that the mean score of parent-adolescent conflict for mothers in the experimental group during the pre-test was $M = 10.70$, and it later decreased to $M = 7.41$ after the therapy. Such decline suggests that the therapy has a positive effect and reduces parent-adolescent conflict with the mother. A paired sample t-test was conducted to compare the pre-test and post-test mean scores of parent-adolescent conflicts with mothers among subjects who underwent the transactional analysis counseling therapy. Results in Table 2 show a significant difference between the mean scores of parent-adolescent conflict before ($M = 10.70$, $SD = 1.56$) and after ($M = 7.41$, $SD = 1.96$) the treatment for the experimental group ($t(29) = 7.415$, $p < 0.05$). Therefore, the null hypothesis is rejected. There was a significant difference in the pre-test and post-test mean scores in conflict with the mother, with the former scoring higher than the latter, 3.30 (95% CI, 2.39 to 4.21), $t(29) = 7.415$, $p = .000$.

The Difference in Emotional Regulation Between Groups

The independent sample t-test was used to compare the experimental and control groups' outcomes of transactional analysis therapy on emotional regulation. The experimental and control group scores

Table 2
Paired sample T-test of parent-adolescent conflict with father and mother for experimental group

Outcome	Pre-test		Post-test		n	95% ci for the mean difference	t	df	sig
	M	SD	M	SD					
PAC Father	11.10	1.35	8.37	1.81	30	2.733	6.298	29	.000
PAC Mother	10.70	1.56	7.40	1.96	30	3.300	7.415	29	.000

were calculated from the post-test of the Emotional Regulation Questionnaire (ERQ). Table 3 shows that the mean scores of emotional regulations (i.e., cognitive reappraisal and expressive suppression) were different in the experimental and control groups. In this regard, the mean score for cognitive reappraisal was higher in the experimental group and lower in the control group, indicating that subjects in the experimental group used cognitive appraisal more in their behavior than the control group. On the other hand, a lower mean score in expressive suppression was recorded by the experimental group than the control group, thus suggesting that subjects in the experimental group used minimal expressive suppression time compared to the control group after receiving transactional analysis counseling therapy. Following the transactional analysis of counseling therapy, the experimental subjects used more cognitive reappraisal and less expressive suppressive behavior than those in the control group.

An independent sample t-test was conducted to compare the post-test scores of the experimental and control groups, where the former received the transactional analysis therapy. At the same time, the

latter underwent the standardized treatment. Results in Table 3 show a significant mean score difference of cognitive reappraisal in the post-test scores between the experimental ($M = 26.10$, $SD = 2.23$) and control group ($M = 21.70$, $SD = 2.51$), as well as in expressive suppression (experimental group: $M = 8.73$, $SD = 2.56$; control group: $M = 19.47$, $SD = 2.43$).

Furthermore, the results in Table 3 show that transactional analysis therapy influences the experimental group's emotional regulation (cognitive reappraisal), as the higher score recorded by the cognitive reappraisal facet represents a higher functional emotional regulation strategy. At the same time, the lower score obtained by the experimental group in emotional regulation (expressive suppression) suggests a lower dysfunctional emotional strategy. Such finding indicates that following the transactional analysis therapy, the experimental subjects used a more functional and less dysfunctional emotional regulation strategy than those in the control group. Moreover, the independent sample t-test results illustrate a significant mean score difference in emotional regulation (cognitive reappraisal) between the experimental and control group ($t(58) = 7.17$, $p < .05$).

Table 3

Independent sample t-test of emotional regulation (Cognitive Reappraisal and expressive suppression) for experimental and control group

Questionnaire	Group	N	Mean	Mean different	SD	df	t	Sig. p
Cognitive Reappraisal	Experimental	30	26.10	4.40	2.23	58	7.17	.000
	Control	30	21.70		2.51			
Expressive Suppression	Experimental	30	8.73	-10.74	2.56	58	-16.65	.000
	Control	30	19.47		2.43			

Therefore, the null hypothesis is rejected. The higher mean score obtained by the experimental group ($M = 26.10$) compared to the control group ($M = 21.70$) thus represents more functional emotional regulation among the former. There was also a significant mean score difference in cognitive reappraisal between the experimental and control groups, with the latter recording a higher score of 4.50 (95% CI, 3.17 to 5.63), $t(58) = 7.17, p = .000$.

The independent sample t-test also showed a significant mean score difference in emotional regulation (expressive suppression) between the experimental and control group ($t(58) = -16.65, p < .05$). This posits that the control group had a higher mean score ($M = 19.47$) than the experimental group ($M = 8.73$), in which such higher mean score represents more dysfunctional emotional regulation. Furthermore, there was also a significant mean score difference in expressive suppression between the experimental and control group, with the latter obtaining a higher score than the former, -10.74 (95% CI, -12.02 to -9.44), $t(58) = -16.65, p = .000$.

The experimental group's mean scores for cognitive reappraisal and expressive suppression were ($M = 26.13, 8.73$), while the control group was ($M = 21.70, 19.47$), which indicates that upon completing the post-test questionnaire, the emotional regulation mechanism of the experimental group was functioning more effectively than that of the control group. Furthermore, the independent sample t-test revealed a significant difference between the mean

scores of the experimental and control groups, indicating that transactional analysis counseling helped regulate functional and emotional regulation among the experimental group.

Previous research has shown that transactional analysis intervention can mitigate dysfunctional emotional regulation and promote optimal emotional regulation. Properly functioning emotion regulation strategies can assist individuals in identifying specific emotions and selecting the appropriate strategy to regulate them (Keshavarzi et al., 2016). The TA intervention assists individuals in being free of the influence of their psychological states and life script on individual relations with other people, as well as preventing the establishment of inadequate emotional regulation and unawareness decisions. The effects of TA on psychological disruption indicators, consciousness, and personality states were shown to be stable. Previous findings also confirmed that, following TA intervention, an individual might balance their feelings and sense of self-worth regarding love in their child and parent states by being in their adult state. People learn to place themselves in the best possible state (I'm OK, you're fine) to avoid self-doubt, remorse, low self-esteem, or even blaming the other side and retaining ill willpower and disdain for it (Rajabi & Nikpoor, 2018).

DISCUSSION

The findings of this study resume that TA intervention effectively reduces parent-adolescent conflict among adolescents in

Bangladesh. It signifies that the conflicted relationship experienced by subjects in the experimental group with their parents was better than that experienced by those in the control group after completing the post-test questionnaire. Furthermore, results revealed a significant mean score difference between the experimental and control groups, indicating that transactional analysis counseling effectively reduced parent-adolescent conflict behavior with father and mother for the experimental group. Similar findings from Saberinia and Niknejadi (2019) showed how transactional analysis therapy helped adolescents reduce hostile behavior with their parents. The first objective is for the person to get self-knowledge, an insight that will allow him or her to explain the patterns of action and behavior in various life situations. One of the critical outcomes of gaining this knowledge is the improvement of communication abilities, which has been supported by various empirical research. In terms of effectiveness, transactional analysis psychotherapy is comparable to cognitive behavioral therapies used in the United Kingdom to treat anxiety and depression. For clients in the clinical range of depression and anxiety, transactional analysis psychotherapy in a group or individual setting resulted in good outcomes and high effect sizes (Rijn & Wild, 2016).

The results of this research are linked to other past transactional analysis research that documented its advantage on parameters such as conflict between parents and adolescents, aggression, and depression.

Transactional, analytical therapy has been reported as effective counseling to promote improvement in parent-adolescent conflict and as a treatment for adolescent aggressive behavior (Kulashekara & Kumar, 2014). Additionally, prior research suggested that mindfulness techniques helped parents reduce parenting stress and improve adolescents' emotional well-being (Burgdorf et al., 2019). Further research revealed that school group counseling could influence the relationship between young people and their parents, thus reducing home anxiety (Haddad & Shechtman, 2019).

In addition, the therapist provided several psychoeducation slots on how to deal with a crisis scenario. Transactional analysis therapy has been identified as a successful counseling treatment to strengthen the connection between parent-adolescent conflict and coping with aggressive adolescent behavior (Kulashekara & Kumar, 2014). The goal of the TA treatment was to rescue the adult ego-state from the negative influences of the parent and child ego-states, resulting in the desired behavioral improvements. Adolescents can examine the challenges and consequences of ego in a safe and supportive atmosphere through TA group therapy. Addressing ego-related concerns and concepts thus leads to insight, self-awareness, and resistance reduction and ultimately serves as a treatment to decrease depressive symptoms.

The findings of this study are consistent with the findings of Rajabi and Nikpoor

(2018) that the TA approach assists individuals in being independent of the influence of their psychological states and life script on their interactions and relationships, preventing the creation of inefficient relationships and the general ignorance of decisions. Transactional analysis treatment is beneficial in reducing irrational beliefs as well as dependent and avoidant decision-making styles (Rahmanian et al., 2019). Furthermore, emotion dysregulation plays a significant role in psychopathology, directly and indirectly, by channeling the harmful influence of anxious attachment (Clear et al., 2020). Košutić et al. (2019) discovered that emotional dysregulation was directly linked to adolescent depression regardless of gender, age, or the family's birth order. As a result, treatment programs for adolescents with depressive illness need to prioritize and empower cognitive reappraisal as a social skill for emotional control. The intervention also considerably enhanced the mean score of the experimental group's functional emotion control techniques. It advocates previous research that TA can help people avoid self-criticism, feeling guilty, undermining their self-esteem, or even blaming the other side and feeling angry (Rajabi & Nikpoor, 2018). Results of the means comparison and paired sample t-test showed that subjects in the experimental group showed improved emotional control after receiving the transactional analysis treatment, particularly in improved cognitive reappraisal and less expressive suppression than the control group.

IMPLICATIONS

Psychiatrists and therapists can benefit from findings on how effective transactional analysis treatments are, which highlight the need for a change in communication skills and increase adolescent awareness about parental and child ego contamination, script life, and psychological awareness of games (Berne, 1961). The results can assist professionals in mental health in better treating the conflict between adolescents and parents, emotional regulatory strategies, and depression. The therapy sessions using the TA method generally investigate how a person's personality has been influenced by their experiences, particularly those from infancy. It helps to shed light and awareness on harmful feelings and behaviors, which can be altered to produce better results. Throughout the transactional analysis psychotherapy, the therapist assisted the adolescents in locating solutions to present difficulties. Therapists have also created valuable everyday tools that may be utilized to identify future answers, allowing adolescents to keep autonomous control over their lives in the future and as a potential to improve self-awareness. In this study, the transactional analysis therapy encouraged personal introspection, assisted adolescents in finding more effective communication methods, and assisted in eliminating unhelpful thoughts, feelings, and behaviors in taking responsibility for their thoughts and actions (Berne, 2016).

Furthermore, adolescents learned to recognize the three ego states (Parent, Adult, and Child) in which they functioned

to attain this aim. They also studied how the rules they acquired and assimilated as youngsters influence their current behavior and how to identify the life script that governs their behaviors. Early in childhood, people frequently create a script they will follow throughout their lives without even realizing it. The therapist offered psychoeducation reading TA throughout the session that children and adolescents reacted to environmental stressors, received injunctions, and made early judgments about themselves and others based on such signals. Such fundamental decisions are manifested in the contemporary ways of thinking, feeling, and behaving. The therapist urged the adolescent to recollect and re-experience early circumstances when incorrect learning occurred. Adolescents eventually realize that they can re-decision and begin a new course in life and may alter what is not working while keeping what does. The constructive learning regarding TA will help them to deal with practical life stressors productively.

CONCLUSION

Transactional analysis (TA) is a well-known outcome of modern psychology, and it is also one of the most accessible theories in the field. It is intended to assist people in growing and changing. Thus, it is considered a cornerstone treatment for improving well-being and supporting people in reaching their full potential in all aspects of life. The transactional analysis provides a framework for assisting clients in therapy and actively providing treatment to address

behavior patterns noticed and indicated in the ego dynamical system. The evidence reported in this study indicates that TA significantly influences the settlement of crisis relationships, dysfunctional emotional issues, and depression. The current study's findings contribute to the expanding body of information concerning the effectiveness of TA in resolving parent-child conflict and emotional regulation. Furthermore, the findings indicate that Transactional Analysis therapy is an effective treatment for parent-adolescent conflict, emotional control, and depression. The attitude conflict among adolescents with their parents improved after the TA intervention. The participants of this study also used more functional emotional regulation rather than dysfunctional emotional control, thus improving their depressed mood. It provides a new perspective on the relevance of using TA to address mental health issues among adolescents in Bangladesh.

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