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Article:	Treating Irrational Romantic Beliefs: Effectiveness of REBT and NLP
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ABSTRACT

The present study was an attempt to explore the best-suited intervention for treating irrational romantic beliefs and the related psychological distress. The sample of the study consisted of 15 university students (8 females, 7 males) who were referred to the university counseling center with primary complaint of problems in romantic relationships. The research design employed was non-equivalent pretest and posttest control group design. There were three groups, two of them received interventions and the third group was a control group. Research instruments used were Semi structured interview Irrational Romantic Beliefs Scale (Majeed, Ijaz, Naz, & Tariq, 2018) and Mental Health Inventory (Viet & Ware, 1983). This study was conducted in three phases. Phase I was about the pre assessment, phase II was about offering intervention to the experimental groups and the third phase was about the post assessment. Post therapy assessment on IRBS and MHI ($Z=-2.02$, $p<.05$) for REBT and NLP groups showed the effectiveness of both treatment modalities in reducing irrational romantic beliefs and psychological distress and in improving psychological well being as compared to the control group. Between groups analysis revealed that REBT was a better treatment option for irrational romantic beliefs (χ^2 (2 N=15) = -8.40, $p<.05$) as compared to the control group while NLP served effectively in reducing psychological distress (χ^2 (2 N=15) = -6.80, $p<.05$) and psychological well being (χ^2 (2 N=15) = -8.80, $p<.05$) as compared to the control group.

Key words: irrational romantic beliefs, mental health, intervention for romantic relationship problems, REBT, NLP, university students

Introduction:

Romantic relationships are considered an important part of the developmental journey of young people. They cannot be strictly defined because of the diversity involved in the experiences. Romantic involvements can range from idealistic involvements (one sided) in impossible others, to a complete dating relationship (Brown et al., 1999). Among all other important aspects of development, relationships are another highlighting feature of young adult's life (Furman & Buhrmester, 1992) and affect the personal, social and emotional development more than other relationships in life (Sardoğan, 2014). Young peoples' beliefs about their intimate relationships are of great significance because of their contribution to relationship satisfaction and their own expectations about the relationship. They enter the relationship with a relatively firm or rigid mind set about the norms of romance. These norms are mostly based on the irrational romantic beliefs (mostly extracted from media) and significantly affect the quality of the relationship (Ellis, 1993, 2003a; Greene, 2006). Irrational beliefs are defined as lacking in logic, are excessively exaggerated, and are far away from reality. Since these beliefs are a creation of one's own imagination and are not grounded in reality, they cause emotional problems for the individuals making them suffer through unproductive emotions and behaviors and psychological disorders (Ellis, 1993, 2003; Greene, 2006).

Ellis (2003) defined irrational relationship beliefs as unrealistic beliefs about self, about the romantic partner and relationship. These irrational romantic beliefs tend to elevate self-defense and incompatibility with the partner (Greene, 2006). Epstein and Eidelson, (1981) followed the footsteps of Ellis and defined the irrational romantic expectations more specifically as "disagreement is destructive", "mind reading is expected", "partners cannot change", "sexual perfectionism", and "the sexes are different". According to the authors, high endorsement of these beliefs is related to greater marital dissatisfaction (Epstein & Eidelson, 1981). In the similar direction, Baucom, Epstein, Sayers and Sher (1989), based on Beck and Ellis's work outlined five categories of irrational romantic expectations about marital relationships. These included selective attention, attributions, expectancies, assumptions, and standards. Likewise, Ellis, Sichel, Yeager, DiMattia, and DiGuiseppe (1989) as cited in Hamamci and Büyüköztürk (2004) have enlisted irrational romantic beliefs as demandingness, neediness, intolerance, awfulizing and damning. Highly romantic beliefs also tend to endorse irrationality. These highly romantic beliefs include, love at first sight, love can overcome any barrier, soul mate, idealistic beliefs about the relationship and the partner, living happily ever after and so on and so forth. When an individual enters a relationship with such expectations the likely result is dissatisfaction and disappointment. (Huston, Niehuis, & Smith, 1997 as cited in Sharp & Gong, 2000)

Beliefs about romantic relations are very important in defining the nature of the relationship. In case if these beliefs turn irrational, they cannot only produce, psychiatric symptoms like depression but also may negatively impact one's sociability and optimism in young adults (Cash, 1984; Macavei, 2005; Küçük, Gür, Sener, Boyacıoğlu, & Cetindağ, 2016; Oltean & David, 2017). Irrational beliefs about one's own self, about the partner or about the relationship itself have found to be one of the important factors contributing to relationship dissatisfaction, conflicts and maladjustment in relationships (Huber & Milstein, 1985;

Markman, Floyd, Staneley, & Storaasli, 1988; Ellis, 1993, 2003a; Friedman & Whisman, 1998; Sharp & Ganong, 2000; Flett, Hewitt, Shapiro, & Rayman, 2001; Demirtas-Zorbaz, Ulas, & Kepir-Savoly, 2015).

The increasing problems related to romantic relationships problems call for appropriate interventions. The magnitude of the problem is increasing as relationship difficulties is one of the leading causes of consultation in university/college counseling centers (Creasy, Kershaw & Boston, 1999; Aluede, Imhonde & Eguvoen, 2006; Erkan, Cihangir-Cankaya & Terzi, Ozbay, 2011). As far as treatment of romantic irrationality is concerned, cognitive school of thought seems to be an answer. Between the two big tenets (REBT & CBT), REBT seems to take a lead in treating irrational romantic beliefs (Markman, Renick, Floyd, Stanely & Clements, 1993; Yilmaz & Kalkan, 2010; Duran & Hamamci, 2010; Yalçin & Ersever, 2015; Oqbuanya et al., 2017).

Huber and Milstein (1985) have shown the powerful impact of various therapeutic techniques from REBT in increasing the marital satisfaction of seventeen couples in six therapeutic sessions. Kalkan and Ersanli (2008) have reported the successful implementation of a marriage enrichment program based on cognitive techniques for increasing marital adjustment of couples. This marriage enrichment program was a combination of Beck's cognitive therapy and Ellis's Rational Emotive Behavior Therapy. Similarly, REBT training has been useful in treating irrational beliefs of couples. In a study of comparison of belief system of trained and normal couples, REBT based training has been proven to be the differentiating factor for the irrational beliefs in the couples (Moradi, 2012). Most of the literature has focused on the issues and intervention of the married couples' problems. Recently researchers have started to talk about the need for intervention for university students. There are evidences reporting the success of premarital training programs for university students (Yilmaz & Kalkan, 2010; Duran & Hamamci, 2010; Yalçin & Ersever, 2015).

Contrary to the traditional cognitive school of thought, there is a new phenomenon that explains that human cognitions are largely based in unconscious mind, therefore cannot be readily accessed and treated. This new theoretical framework suggests that most of human feelings, behaviors and thinking patterns are based on an implicit neural network that cannot be self-reported because of inaccessibility. In author's words implicit theory of cognition asserts that "our presentation—a belief, expectancy, view of self, view of others—is a network of information-processing units (neurons in connectionist models) that have been activated together in the past and have the potential to be activated together in some fashion again"(Westen, 1998a, 2000b).

One such treatment modality that is based on implicit theory of cognition is Neurolinguistic Programming. It is a fast medium of psychotherapy where practitioners maneuver inner sensory processes and thoughts to change the behavior (Zaharia, Reiner & Schutz, 2015). It is gradually gaining research support but in comparison to other popular treatment modalities like CBT, REBT or Behavior Therapy, its scope seems limited but is slowly making its place in the wide research arena. In a meta-analysis of 12 studies NLP has been reported as an effective mode of treatment in treating various psychological conditions (Zaharia, Reiner & Schutz, 2015). These findings were further reinforced when Dhingra and Dhingra (2016) in their study reported the therapeutic effectiveness of NLP in treating various psychological difficulties. In another meta-analysis neuro linguistic programming has been

found to equate the effects with rational emotive behavior therapy in treating panic disorder (Simpson & Dryden, 2011). Moreover, it has been successfully employed as a way of treating marital difficulties in relationship counseling (Davis & Davis, 1983; Baddeley, 1992) and for divorcing couples (Bertoli, 2002; Taylor, 2004).

Method

This study was conducted in three phases. The first one was about pre assessment, the second one was about intervention and the third one was related to post assessment.

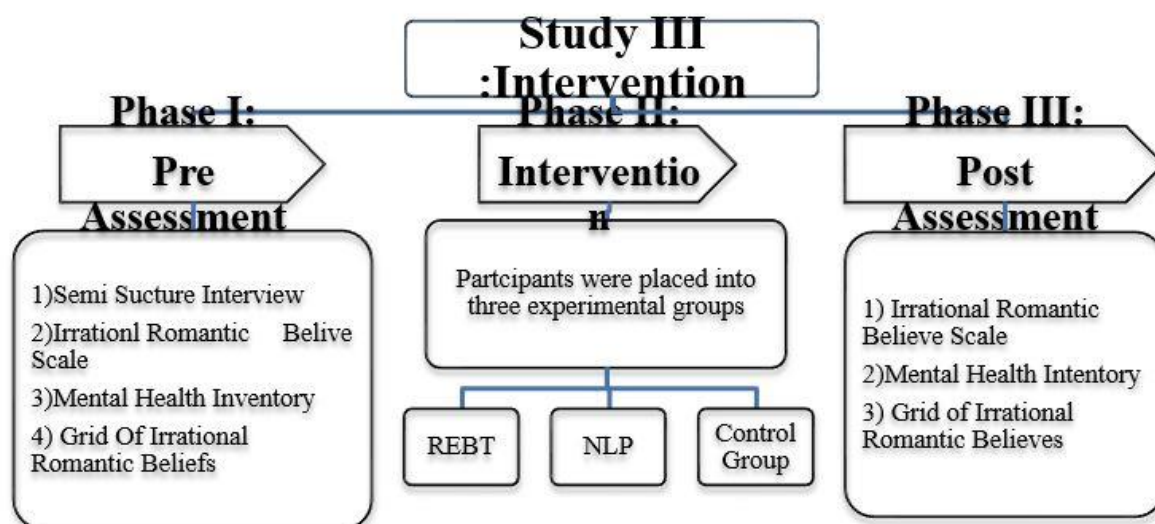
Sample.

The sample of this phase of the study consisted of 15 university students, enrolled in B.A/B.Sc, M.A/M.Sc programs were selected through purposive sampling. Though initially it was aimed to have at least 10 participants in the each group but because of iteration and limited time span of the study, researcher ended up in having five participants in each group. The referred students visiting university counseling centers with relationship problems were included in the sample. Since the sampling was based on the self-referral, therefore students were placed in the respective groups i.e. experimental group I, II and the control group on the basis of their arrival to the counseling center. Based on gender three groups were tried to be matched. Students who were primarily referred with problems in romantic relationships were included and those referred with other primary reasons of referral were excluded from the sample.

Figure 1

Flow Chart Showing Three Phases of Intervention Study.

Figure 1 about here



Phase I: Pre Assessment. This phase of the study was about the pre assessment of the referred students on Semi structured interview, IRBS and MHI. After taking consent, the students referred to the university counseling center with relationship problems were assigned to both experimental groups and control group. Each group had five participants. Research design employed was non-equivalent pretest and posttest control group design.

Instruments.

Semi Structured Interview. Semi structured interview was done to understand the problems of the students in the detail from a psychosocial perspective.

Irrational Romantic Beliefs Scale (Majeed, Ijaz, Naz, & Tariq, 2018). The Irrational Romantic Beliefs Scale (Majeed, Ijaz, Naz, & Tariq, 2018) was converted to the repertory grid format and this grid was used for pre and post assessment of irrational beliefs of the participants. Details are mentioned in the study II.

Mental Health Inventory (Veit & Ware, 1983). Mental health Inventory (Veit & Ware, 1983) was used to measure the mental health of the students. Details are mentioned in the study II.

Demographic Form. Age, gender, current relationship status, number of and nature of romantic relationships were included as demographic variables.

Procedure. Semi structured interviews were carried out in order to understand the problems in detail. After conducting the interviews Irrational Romantic Beliefs Scale and Mental Health Inventory (Veit & Ware 1983) were administered before starting the treatment. Participants were ensured about the confidentiality of the data and it was also explained to them that they could leave the research at any point in time.

Phase II: Intervention. This phase of the study was about providing the intervention to the two experimental groups i.e. REBT and NLP. Each group had a separate intervention protocol.

Intervention protocol. Intervention protocol with respect to experimental groups is described below:

Group I: Rational Emotive Behavior Therapy. Since it is established in the literature that REBT views thoughts, feelings and behaviors as interconnected therefore in treatment plan they were treated separately at cognitive, emotional and behavioral levels (Ellis & McLaren, 1998). The cognitive level of the treatment is used by the following mentioned techniques.

1. The very first technique was about educating the clients about ABC model suggesting the differences among thoughts feelings and actions. This model helped in understanding the clients the interrelationship among the three and served as the basics for learning REBT (Ellis, 1962).
2. In order to identify the irrational beliefs of the clients we have to assess the consequences (Cs) of cognitive emotional and behavioral disturbances, after that activating events (As) are assessed, then rational or irrational beliefs that evaluate any activating event are assessed. This assessment helps clients understand the complete anatomy of their ABC model (Ellis, 1962).
3. Disputing is a way of challenging unrealistic belief systems that interfere with the normal functioning of human beings. Initially it involves Didactic as well as Socratic approach of questioning that helps the clients reaching to a logical stance in contrast to their already held unproductive belief systems. Disputing is done on four levels i.e. functional, empirical, logical and philosophical. Functional Disputes addresses the practical and functional levels of any belief and its accompanying emotions and behaviors. Empirical Disputes ask about the factual components of the beliefs. These disputes are evidence based and seek for the proof of any held belief. Logical Disputes are logic driven and seek for logic of holding any belief. Philosophical Disputes addresses the life satisfaction issues. This set of questions help your clients to separate the problematic area of life from other problem free areas. It can help the clients in

changing their problem skewed perception to a more normal and adaptive vision (Ellis & Dryden 1997; Ellis & McLaren, 1998)

4. After a thorough disputing, rational coping statements are used in order to reinforce the changed ideas. These statements are rational in nature and are rooted in reality. Clients are asked to repeat them inside their heads and use them in their self-talk in order to counteract against the typical orthodox belief systems (Ellis & Dryden 1997; Ellis & McLaren, 1998).
5. Reframing is the next technique which helps your client to develop an alternative perspective of the problem other than the one already held. It reframes the client's old orthodox vision of the issues at hand and helps him develop a new and more functional perspective (Ellis & Dryden 1997; Ellis & McLaren, 1998).
6. Cognitive Homework helps the client practice the learned techniques outside therapy sessions. It helps in reinforcing the newly learned strategies and helps the client generalize them (Ellis & Dryden 1997; Ellis & McLaren, 1998).

After cognitive techniques, the emotional level was treated by rational emotive imagery technique. This technique helps your client identify the more rational and appropriate emotions he would like to feel in the problematic situations. Secondly, having a set of rational statements and coping mechanisms and practicing them in imagery to the extent that they start occurring naturally in the problematic situations. In REBT you make your client imagine the problematic situation, after he cues you about experiencing that emotion, you ask your client to change the problematic emotion with the more adaptive and reasonable response. Having changed the problematic emotion, the client cues you again and then you ask your client to come out of the imagination and ask him about his coping strategies. These coping strategies are your client's individually tailored remedies for his problems (Ellis & Dryden 1997; Ellis & McLaren, 1998).

At the tertiary level, behavioral techniques were used to facilitate the actions built upon rational beliefs.

1. Sometimes the problem of the client is because of lack of relevant skills. Through skill training you can help your client learn the required skill for coping with the problem. These skills can range from social skills training to any other life skill training according to the need of your client (Ellis & Dryden 1997; Ellis & McLaren, 1998).
2. Acting on rational beliefs is a technique, which involves asking your client to act as if he only had rational beliefs. It can also be called behaving the way you would like to feel. This practice provides a reality test and practical applicability of the rational thoughts (Ellis & Dryden 1997; Ellis & McLaren, 1998).

Group II: Neurolinguistic Programming. The basic emphasis of this mode of therapy is on the study of the subjective experiences. It began as a model of how we communicate with ourselves and others. In NLP certain patterns of human behaviors and perceptions are recognized and replicated in a way that they become available for skill training and can be used for behavior modifications.

1. In NLP practice like traditional psychotherapy, the first focus of the therapist is rapport building. It is considered as a tool to get you the desired response from the other person. The basis of rapport is considered that when people are like each other they like each other and when people are not like each other, they do not like each other. So it's very

important to be like your clients in order to build rapport with them. There are few steps to be followed while building rapport in NLP practice. The first major step is to pace and match the modality the person is in. Pacing is about matching the components of other person's body language. But this is not a mere imitation rather it's an integration of other person's style into your own. The second important element is physical mirroring of the client's physiology. Then matching with their voice tone and breathing, then match with the size of the pieces of information and finally match with their common experiences. This is the first step to lay a strong foundation to work with your client (Vaknin, 2010; O'Connor & Seymour, 2011).

2. Every therapy begins with developing a trustworthy relationship with the client. NLP also asserts the same by emphasizing the importance of communication in building a working alliance with the client. According to the proponents of NLP, when we communicate with someone, words count only 7% rest of the communication consists of 55% of body language and 38% of tonality. By understanding this composition of communication, we get a hint for developing effective rapport with the clients. Firstly, it is essential to match the modality with the client. This can be done by effective observation and use of predicates used by your client, physically mirroring the client's physiology, matching with their voice and breathing patterns, matching with the size of the information chunks they are sharing and finally by matching with their experiences. Effective rapport can bring a flow to the communication (Vaknin, 2010; O'Connor & Seymour, 2011).
3. An anchor can be applied to a person when he or she is in an intense emotional state (state is a combination of physiology & internal representation of an event). Anchoring is based on Pavlovian conditioning. When an individual experiences the peak of an experience, we can anchor it by applying a stimulus, so that the state and the stimulus become neurologically linked and that particular state could be continually produced by setting off that stimulus. There are four steps in anchoring; firstly, therapist needs to get the fully associated intense state of association of your client, secondly therapist has to provide a specific stimulus to the intense emotional state the client is in. Mostly specific stimuli are kinesthetic as in touching the knuckle of their hands. Time duration of application of an anchor should be from 5 to 15 seconds. The third step of anchoring is changing the state of your client, make them come out of their state they were in. It can be done at least by making them take a deep breath or make the walk around. Finally set off the anchor by applying it exactly at the same place and in same way in order to discover if they go back into the original state or not. If the client successfully goes back into the peaked emotional state then it will be considered successful anchoring. The successful keys to anchoring are timing, intensity, replication, uniqueness and frequency of the anchor. (Vaknin, 2010; O'Connor & Seymour, 2011).
4. Collapse anchor is the technique used to collapse the negative state the client is holding. For this purpose therapist has to anchor both negative and positive states separately i.e. on each hand. After the successful anchoring both negative and positive states are set off, together in order to create the integration that is signaled by the client with the sign of confusion. Then the negative anchor is released and positive one is held for five seconds. The idea behind the concept is that positive experiences can take over the

negative ones. In order to confirm whether the negative experience is successfully collapsed, negative anchor is randomly fired and tested if it exists or not. If it still exists then therapist has to repeat the process until the desired result is achieved. (Vaknin, 2010; O'Connor & Seymour, 2011).

5. NLP is of the view that certain emotional experiences create different parts at unconscious level of one's mind. These integration parts are autonomous in generating their own beliefs, values and ultimately resultant behaviors. At times overwhelming and disturbing behaviors are a product of these conflicting parts. Parts integration is used to create a harmonious relationship between the parts at unconscious level and as a result, conflicting behavior is fixed. For doing parts integration two opposing parts are identified and symbolized metaphorically on each hand. Each part is focused separately, and asked for its intentions and beliefs. After that each part is separately asked for its resources for solving the problem at hand and onwards each part is asked to share these resources for the greater good i.e. conflict resolution. Therapist asks the two parts to get united to make a third new part that is uniform and has no conflict in it (this is shown when client's both hands start moving towards each other. when they come to a point of union therapist internalizes the image by asking the client to absorb the new part by placing both hands on their hearts (Vaknin, 2010; O'Connor & Seymour, 2011).
6. Swish pattern is technique to pave the way for a compelling future. At times, instead of changing old habits, pacing towards a bright and happening future is required, for such occasions swish patterns is the best-suited technique. Client is asked for a pictorial representation of the state he would like to change (i.e. disturbing thoughts, feelings, behaviors) and the ideal picture of the state he would like to be in. then the client is asked to get dissociated e.g. watching oneself in a movie. Then the client is asked to increase the visual intensity (brightness, size, distance) of the desired state to the fullest, and then client is asked to step out of the picture to create full dissociation. In the next step client is asked to bring back the old picture with full association. Then the client is asked to insert in the lower left hand corner a small and dark picture of the desired state and simultaneously have the old picture of the current state to recede into a distant point and have the picture of the dark state explode into the fullest. The important point is that that this exchange of the states should be done very speedily it can be accompanied by internal or external swish sound but it is not necessary. Speed is very important. This point should be repeated at least five times for the lasting results (Vaknin, 2010; O'Connor & Seymour, 2011).
7. According to NLP practitioners anything gets meaning with a frame, an experience is good or bad is decided by the frame we apply to it. In NLP, reframing is done at two levels one is context and the other one is content reframing. Context reframing carries NLP presupposition that all behavior carries some meaning in every situation so by using a meaningful context you can change your behavior in any situation. Another NLP presupposition is that that all behavior has a positive intent, finding out that positive intent changes meaning of the behavior and ultimately the situation (Vaknin, 2010; O'Connor & Seymour, 2011).

Group III: Control group .Participants in control group did not receive any of the treatment conditions. They were put on a waiting list of six weeks.

Procedure. In this phase, therapy was provided to both experimental groups. Rational Emotive behavior Therapy was delivered to the first experimental group and Neurolinguistic Programming was offered to the second experimental group. Control group was offered no treatment and was given an appointment after six weeks were elapsed. Each group was offered twelve sessions with average time duration of 60-90 minutes twice a week.

Phase III: Post Assessment. This phase of the study was about the post assessment of the participants of the measures of irrational romantic beliefs and mental health.

Instruments.

Irrational Romantic Beliefs Scale (Majeed, Ijaz, Naz, & Tariq, 2018). The Irrational Romantic Beliefs Scale (Majeed, Ijaz, Naz, & Tariq, 2018) was converted to the repertory grid format and this grid was used for pre and post assessment of irrational beliefs of the participants. Details are mentioned in the study II.

Mental Health Inventory (Veit & Ware, 1983).Mental health Inventory (Veit & Ware, 1983) was used to measure the mental health of the students. Details are mentioned in the study II.

Procedure. After the 12 therapeutic sessions ended, every participant from all three groups had a post assessment on the measures of irrational romantic beliefs and mental health. Finally, after the experiment was completed, control group was debriefed and were offered therapy for their problems.

Ethical Considerations

Consent was taken, verbally and in written form, from all the participants at every stage of the study. The researcher did not oppress the participants to take part in the study. They were given full right to withdraw from research at any stage. After assessments participants were debriefed and all the queries were duly answered. Confidentiality of the data was maintained throughout. Control group after the completion of the study was provided with complete therapy.

Results

In this part of the study results are based on nomothetic mode of assessment. Within group analyses are done through Wilcoxon Sign Rank Test while between group analyses are done through Kruskal Wallis Test.

Table 3.44

Frequencies and Percentages of Demographic Variables of University Students (N=15)

Variables	F	%
Gender		
Male	7	46.7
Female	8	53.3
Year		
Preliminary years (I-II)	2	13.3
Final years (III-IV)	13	86.7
Father		
Alive	14	93.3
Deceased	1	6.7
Mother		
Alive	15	100
Deceased	0	0
Family Type		
Intact family structure	12	80
Disrupted family structure	3	20
Father's education		
Under metric and metric	4	26.7
Intermediate to graduation	6	40
Masters and above	5	33.3
Mother's education		
Under metric and metric	4	26.7
Intermediate to graduation	6	40
Masters and above	5	33.3
Current relationship status		
Committed	4	26.7
Broken	11	73.3
Past romantic relationships		
Yes	4	26.7
No	11	73.3

Table describes the profile of the sample of the study. In comparison to males (46.7%) females are more in number (53.3%). Majority of the participants were from the final years (86.7%) compared to preliminary years (13.3%). Majority of the sample had their fathers alive (93.3%) as compared to those having deceased father (6.7%). The entire sample had their mothers alive (100%). Most of the students belonged to intact family structure (80%) as compared few who had disrupted family structure (20%). The education level of most of the parents was from intermediate to graduation level as compared to 33.3% who had degrees of masters and above and very few (26.7%) had education level of metric and below. Most of the students had broken relationship status (73.3%) as compared to very few who were committed in a romantic relationship (26.7%). Similarly majority of the students (73.3%) did not have a

past romantic relationship as compared to very few who had a past romantic involvement (26.7%).

Within Group Analyses. Within group analysis was done by employing Wilcoxon Sign Rank Test (a measure of related samples) to determine the pre and post therapy changes among both the experimental groups and control group.

Table 2

Median and Z scores of pre and post tests on Irrational Beliefs Scale, Psychological Distress and Psychological Well-being of experimental group 1 (n=5)

Scales	Mdn		Z	p
	Pre test	Post test		
Irrational Romantic Beliefs	103	54	-2.02	.05
Psychological Distress	111	62	-2.02	.05
Psychological Well being	26	52	-2.02	.05

Note. * $p < 0.5$

Wilcoxon Sign Rank test was used to test the pre and post test scores of experimental group 1 (REBT) on irrational romantic beliefs, psychological distress and psychological well-being. Results show that there are significant difference ($Z = -2.02$, $p < .05$) in pre and post test scores on irrational romantic beliefs. This means that rational emotive behavior therapy helped in reducing irrational romantic beliefs among referred university students. Similarly psychological distress also reduced significantly ($Z = -2.02$, $p < .05$), showing the effectiveness of REBT in lessening the psychological distress. Likewise psychological well-being was found to be improved significantly ($Z = -2.02$, $p < .05$) after receiving therapy. Overall results show efficacy of REBT in reducing irrational romantic beliefs and psychological distress and also in improving psychological well-being of referred university students.

Table 3

Median and Z scores of pre and post tests on Irrational Beliefs Scale, Psychological Distress and Psychological Well-being of experimental group 2 (n=5)

Scales	Mdn		Z	p
	Pre test	Post test		
Irrational Romantic Beliefs	98	64	-2.02	.05
Psychological Distress	106	49	-2.02	.05
Psychological Well Being	34	67	-1.82	.05

Note. * $p < 0.5$

Wilcoxon Sign Rank Test was used to test the pre and post test score differences in experimental group 2 who received Neurolinguistic Programming as therapy for irrational romantic beliefs and psychological distress. Results showed significant differences ($Z = -2.02$, $p < .05$) in pre and posttest scores on irrational romantic beliefs showing efficacy of NLP in reducing irrational romantic beliefs. Likewise there was a significant reduction ($Z = -2.02$, $p < .05$) in psychological distress and improvement in psychological well-being as a result of NLP ($Z = -1.82$, $p < .05$). Overall results showed that Neurolinguistic programming is an effective mode of treatment for treating irrational romantic beliefs and psychological distress in referred university students.

Table 4

Median and Z scores of pre and post tests on Irrational Beliefs Scale, Psychological Distress and Psychological Well-being of control group (n=5)

Scales	Mdn		Z	p
	Pre test	Post test		
Irrational Romantic Beliefs	112	126	-1.82	.06
Psychological Distress	98	103	-.36	.71
Psychological Well Being	36	33	-.81	.41

Note. * $p < 0.5$

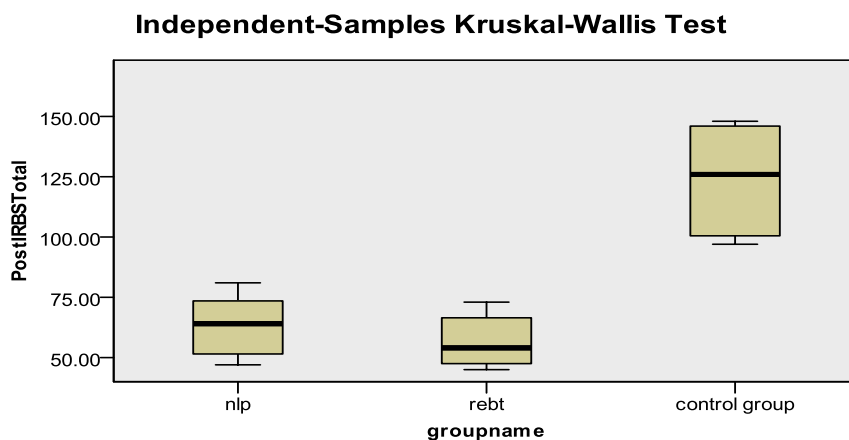
Results of Wilcoxon Sign Rank Test showed no significant differences in pre and posttest scores of control group on irrational romantic beliefs, psychological distress and psychological well-being of referred university students.

Between Groups Analysis. In order to compare the groups on the measures of irrational romantic beliefs and mental health, Kruskal Wallis Test (a measure of independent samples) was used. It was to find out between group differences among both the experimental groups i.e. REBT and NLP and control group on irrational romantic beliefs, psychological distress and psychological well-being.

Irrational romantic beliefs. For irrational romantic beliefs results showed significant difference ($p < .05$) between mean rank of at least one pair of groups. Dunn's pair wise tests were performed on all three pairs of groups i.e. REBT and NLP; REBT and Control; and NLP and Control. Results suggested a considerable evidence $\chi^2 (2 \text{ N}=15) = -8.40, p < .05$ of difference between REBT and Control group. The median of posttest scores on irrational romantic beliefs for control group was 126 as compared to that of REBT group that is 54. No significant differences were found between REBT and NLP and NLP and control groups. Overall results depicted REBT to be an effective therapeutic modality for treating irrational romantic beliefs as compared to control group. No differences between REBT and NLP groups show that both therapeutic modalities are equally effective in treating irrational romantic beliefs among university students.

Figure 2

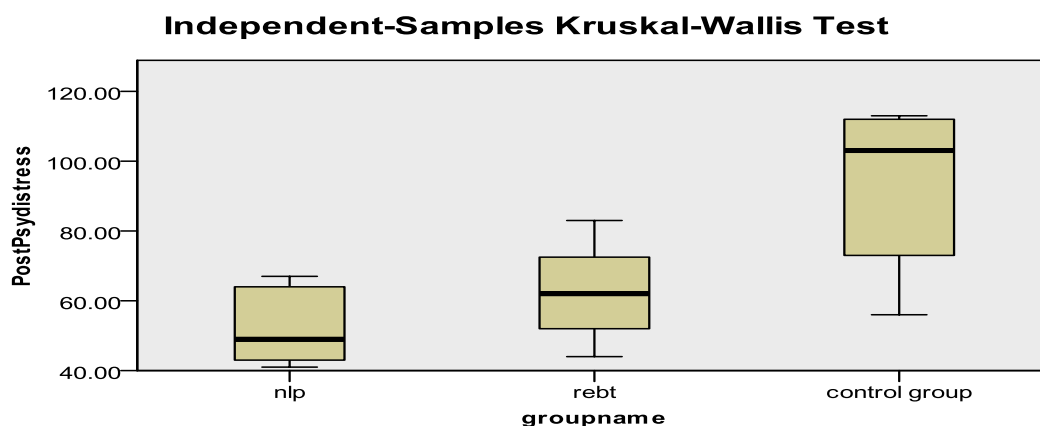
Graph Showing Post Therapy Differences in REBT, NLP and Control Groups on Measure of Irrational Romantic Beliefs (n=15)



Psychological Distress. On Psychological distress results of Kruskal Wallis Test showed significant difference ($p < .05$) between at least one pair of groups. In order to figure out where actually this difference lied, Dunn's pair wise tests were carried out on all three pairs of groups. Results highlighted significant difference between NLP and Control group $\chi^2 (2 N=15) = -6.80, p < .05$). The difference in median value of NLP 49 and control group 103 shows significant difference between the two groups. Results highlighted the efficacy of NLP in reducing psychological distress as compared to control group. No significant differences were found between REBT and NLP and REBT and control group in reducing psychological distress among referred university students. Overall results showed that NLP was an effective mode of treatment for treating psychological distress as compared to Control group. There were no significant differences observed between REBT and NLP groups in treating psychological distress. This depicts that both the interventions are equivalent in treating psychological distress among university students.

Figure 3

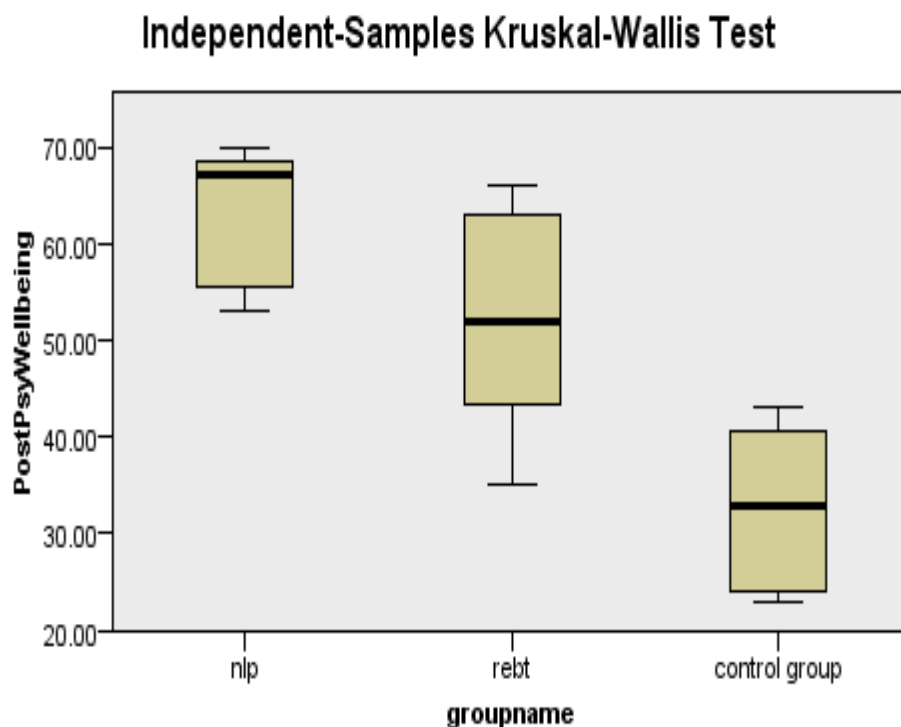
Graph Showing Post Therapy Differences among REBT,NLP and Control Groups on Psychological Distress(n=15)



Psychological Well-being. For psychological well-being Kruskal Wallis test was computed to figure out the differences among three groups i.e. REBT, NLP and Control group. Results showed a significant difference ($p < .05$) between at least one pair of groups. Further for post hoc analysis Dunn's pair wise tests were performed on all three pairs. Results showed a significant difference $\chi^2 (2, N=15) = -8.80, p < .05$ between NLP and control group with a median score of 67 for NLP and 33 for control group. No significant differences were found between REBT and NLP and REBT and Control group on psychological well-being. Overall test results showed that NLP was an effective therapeutic intervention for improving the psychological well-being of university students as compared to control group. No differences between REBT and NLP showed the equivalence of both modalities for improving psychological well-being among university students

Figure 4

Graph Showing Post Therapy Differences among REBT, NLP and Control Groups on Psychological Wellbeing (n=15)



Discussion

This study was an effort to explore the best suited intervention for treating romantic irrationality. For this purpose two therapeutic modalities i.e. REBT and NLP were compared in their efficacy. Wilcoxon Sign Rank Test was employed to measure the difference in pre and post test scores of experimental group I on IRBS and MHI. This group received therapy based on selected REBT techniques for 12 sessions. Results showed that REBT helped in reducing irrational romantic beliefs and psychological distress in referred university students. Moreover, therapy also helped in improving the psychological well-being of the students. These results emphasize on the effectiveness of rational emotive behavior therapy in treating irrational romantic expectations and also in reducing psychological distress and elevating the psychological well-being of referred university students. These findings are consistent with the existing literary work that suggests REBT as an effective mode of treatment in treating irrational romantic beliefs and psychological distress in romantic relationships. It helps in providing a more realistic approach of romance i.e. that is minimal in irrationality thus ensuring a better mental health of the individuals (Markman, Renick, Floyd, Stanely,& Clements, 1993; Kalkan, 2008; Yilmaz & Kalkan, 2010; Duran & Hamamci, 2010; Moradi, 2012)

The second experimental group that received a therapy based on NLP techniques for 12 sessions also showed a significant decrease in their pre test scores on irrational romantic beliefs and mental health. The irrational romantic beliefs of this group decreased significantly resulting in the reduction of psychological distress and also an improvement in the

psychological well-being. This means that NLP appeared to be an effective treatment modality in dealing with irrational romantic beliefs. It also helped in reducing psychological distress and enhancing psychological well-being of the referred university students. These findings are kind of ground breaking in the field because to our knowledge, no previous research has addressed the issue of romantic irrational beliefs being treated through NLP. Though there are findings claiming the successful use of NLP in for treating romantic relationship difficulties (Davis & Davis, 1985; Baddeley, 1992; Bertoli, 2002; Taylor, 2004) but the entire focus of these studies was not the cognitive element of romantic relationships. Therefore current study presents a new therapeutic modality i.e. NLP for treating romantic irrational beliefs.

Between groups analysis revealed that both REBT and NLP were equally effective in treating irrational romantic beliefs and psychological distress among referred university students. This is an interesting finding claiming the equality of REBT and NLP in treating irrational romantic beliefs of referred university students. REBT is an established therapeutic modality with embedded research support but NLP is a relatively new school of thought with less or almost no research evidence for treating irrational romantic expectations. NLP has been found to equate cognitive school of thoughts in has particular REBT (Simpson & Dryden, 2011) in treating various psychological conditions (Dhingra & Dhingra, 2016). Therefore, the current findings support the existing work claiming equality of NLP and REBT in dealing with various psychological conditions. On irrational romantic beliefs, REBT was found to be significantly different from the control group showing its effectiveness as a treatment modality for treating irrational romantic beliefs (Ellis, 1957; Markman, Floyd, Stanely & Storaasli 1998; Yalçın & Ersever, 2015). On psychological distress and well-being NLP was significantly different from the control group showing effectiveness of NLP in treating psychological distress (Bolocofsky, Spinler, & Coulthard-Morris, 1985; Allison & Faith, 1996; Krisch, 1996; Zaharia, Reiner & Schutz, 2015).

Conclusion

Overall it is concluded that both REBT and NLP are effective in treating romantic irrationality and the related psychological distress.

Limitations & Suggestions

Despite the best efforts to ensure the best prospect of study it has some limitations attached to it. The number of the sample in the intervention phase of the study was limited, future researcher can test the efficacy of the treatments with increased sample size. The study remained restricted to only two treatment modalities, in future other treatment modalities can also be tested for their efficacy. Finally, the results of the intervention phase of the study were analyzed through non parametric testing therefore the generalizability of the results is limited. It is recommended to use a larger sample in future to increase the generalizability of the results.

Future Implications

This study has provided us with a valuable intervention protocol that is a combination of techniques from REBT and NLP to treat irrational romantic beliefs of referred university students. This treatment protocol can be very helpful for counselors and professional dealing with the romantic relationship problems of university students.

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