Table 4 revealed the results of the mean and SD in pre-test and post-test in two groups. The paired sample t test analysis was used to investigate the efficacy of the intervention at post-test condition based on mean difference and effect size. The results showed a significant decrease in OASIS, ODSIS, PANAS-NA, DERS, PSWQ, HADS-A, and HADS-D between the pre-treatment scores and post-treatment scores in the treatment group after intervention in the post-test condition. ALSO, the result reveals the significant increase in ERQ, SMQ, AND PANAS-PA after Transdiagnostic intervention between the control group and treatment group after intervention in post-test condition. Thus, Transdiagnostic therapy was effective in reducing anxiety, depression and DERS scores and also, was effective in the improvement of emotion regulation. A within group Effect size was calculated at post-treatment condition in intervention group. Accordingly mean differences and effect size, the UP have been effective.

Table 4. Descriptive Statistics and Paired Sample Test Effect Sizes for Treatment Group

	Control group N=32		Transdiagnostic group N=32		PAIRED SAPLE T TEST for Treatment Group				
	Pre-test	Posttest	Pre-test	Postte st	Post-test pretest	95% Confidence Interval of the Difference		t-static	Cohen's d
MEASURE	MEAN (SD)	MEAN (SD)	MEAN (SD)	MEAN (SD)	MEAN (SD)	Lower	Upper		
ERQ	24.68 (3.40)	21.70 (3.80)	25.90 (4.49)	35.50 (3.69)	10.00 (6.53)	7.64	12.35	8.64	0.70
SMQ	32.97 (2.65)	29.25 (5.24)	30.34 (4.91)	49.09 (6.06)	18.75 (8.05)	15.84	21.65	13.16	0.64
DERS	129.1 (13.02)	133.2 (10.95)	134.5 (12.4)	101.6 (19.6)	-25.12 (16.39)	-31.03	-19.27	-8.68	1.65
PANAS-PA	27.06 (3.84)	26.63 (3.74)	24.44 (2.91)	33.84 (3.79)	9.40 (5.26)	7.50	11.30	10.10	0.9
PANAS-NA	26.19 (2.97)	28.31 (2.89)	28.38 (2.59)	23.03 (3.54)	-13.37 (3.62)	-14.69	12.05	-20.71	0.9
OASIS	9.38 (1.70)	10.91 (1.92)	9.22 (1.62)	7.68 (1.69)	-1.5 (1.9)	-2.22	-0.8	-4.51	1.6
ODESIS	9.25 (1.48)	9.78 (1.69)	9.25 (1.68)	4.65 (2.67)	-4.59 (2.58)	1.70	-5.52	-3.66	1.41
PSWQ	47.91 (8.15)	46.50 (8.10)	49.00 (9.46)	31.38 (9.25)	-17.62 (11.77)	-21.86	-13.38	-20.05	0.52
HADS-A	12.42 (1.52)	11.84 (1.37)	13.19 (1.51)	7.16 (1.53)	-6.03 (1.7)	-6.64	-5.41	-18.41	2.06
HAADS-D	11.66 (2.01)	12.90 (1.46)	13.06 (1.83)	7.12 (2.21)	-5.9 (3.08)	-7.05	-8.62	-10.87	1.13

The Parametric test of ANCOVA was used to assess the effectiveness of Transdiagnostic therapy. ANCOVA can be used when you have a two-group pre-test/post-test design (e.g. comparing the impact of two different interventions, taking before and after measures for each group). The scores on the pre-test are treated as a covariate to 'control' for pre-existing differences between the groups. The covariates were measured *prior to* the experimental manipulation. The ANCOVA assumptions were examined before submitting the test results. Accordingly, the results of the Kolmogorov-Smirnov test revealed non-violation of the pre-test and post-test data of the examined indices from the normality assumption (P>.05). Moreover, Homogeneity of *Variance was tested using* Levene's test, indicating insignificance of P-value (P>.05). Also, the homogeneity of regression assumption was examined. Participants' scores on the pre-intervention administration of the Fear of Statistics Test were used as the covariate in this analysis. Table 4 showed result of ANCOVA.

Effect on OASIS, HADS-A and PSWQ as the anxiety measures

A one-way between groups ANCOVA was conducted to assess the impact of the Transdiagnostic therapy of reported anxiety measures. The homogeneity of regression slopes assumption was met for HADS-A $F(1, 60) = 1.392$, $p = .243$, and PSWQ $F(1, 60) = .874$, $p = .354$ and OASIS $F(1, 60) = .277$, $p = .601$ variables in that there was no significant interaction between the covariate and the intervention. After adjusting for reliability corrected pre-intervention scores, Analysis of covariance (ANCOVA) in which the effect of treatment on post-treatment HADS-A and PSWQ was examined controlling for pre-treatment HADS-A, OASIS and PSWQ. The treatment effect was strongly significant, $F(1, 61) = 176.7$, $p < .001$, $\eta^2p = .74$, $F(1, 61) = 39.75$, $p < .001$, $\eta^2p = .39$, and $F(1, 61) = 51.42$, $p < .001$, $\eta^2p = .45$ for HADS-A, PSWQ, and OASIS respectively.

The effect on HADS-D and ODSIS as the depression measures

In according to ANCOVA results, the homogeneity of regression slopes assumption was met for both HADS-D $F(1, 60) = 2.53$, $p = .117$, and ODSIS $F(1, 60) = 3.34$, $p = .072$. After adjusting for reliability corrected pre-intervention scores, Analysis of covariance (ANCOVA) revealed the significant effect of the Transdiagnostic therapy on depression measures for the treatment group $F(1, 61) = 132.7$, $p < .001$, $\eta^2p = .68$, and $F(1, 61) = 86,36$, $p < .001$, $\eta^2p = .58$, for HADS-D, and ODSIS, respectively.

The effects on emotion regulation measures

The homogeneity of regression slopes assumption was met for ERQ $F(1, 60) = 3.781$, $p = .057$, SMQ $F(1, 60) = 1.20$, $p = .278$, PANAS-PA $F(1, 60) = 3.929$, $p = .52$, PANAS-NA $F(1, 60) = .065$, $p = .80$, DERS $F(1, 60) = 1.895$, $p = .174$. For all variables the effect of treatment was significant. The results showed for ERQ $F(1, 61) = 197.29$, $p < .001$, $\eta^2p = .76$, SMQ $F(1, 61) = 175.55.$, $p < .001$, $\eta^2p = .74$, for PANAS-PA $F(1, 61) = 52.96$, $p < .001$, $\eta^2p = .46$, for PANAS-NA $F(1, 61) = 318.71$, $p < .001$, $\eta^2p = .83$, and for DERS $F(1, 61) = 329.88$, $p < .001$, $\eta^2p = .84$.