

Investigating the Effectiveness of Cognitive-Behavioral Therapy on Self-Compassion and Experiential Avoidance in Women Who Have Experienced Marital Infidelity

Yasaman. Sanati^{1*}, Shole. Hosseini¹, Fatemeh. Abbasi²

¹ M.A. Student in clinical psychology, Department of Psychology, Tehran West Branch, Islamic Azad University, Tehran, Iran

² M.A. Student in General Psychology, Department of Psychology, Varamin-Pishva Branch, Islamic Azad University, Tehran, Iran

* Corresponding author email address: yasaman.snti1354@gmail.com

Article Info

Article type:

Original Research

How to cite this article:

Sanati, Y., Hosseini, S., & Abbasi, F. (2024). Investigating the Effectiveness of Cognitive-Behavioral Therapy on Self-Compassion and Experiential Avoidance in Women Who Have Experienced Marital Infidelity. *Applied Family Therapy Journal*, 5(2), 112-120.

<http://dx.doi.org/10.61838/kman.afj.5.2.13>



© 2024 the authors. Published by KMAN Publication Inc. (KMANPUB), Ontario, Canada. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

ABSTRACT

Objective: Marital infidelity is one of the most significant threats to the stability of marital relationships and a leading cause of divorce across various cultures. This study aimed to examine the effectiveness of cognitive-behavioral therapy (CBT) on self-compassion and experiential avoidance in women who have experienced marital infidelity.

Methods: The current research was a quasi-experimental study with a pre-test and post-test design, involving experimental and control groups and a three-month follow-up. All women who had experienced marital infidelity and attended psychotherapy and counseling clinics in Tehran during the year 2021-2022 constituted the statistical population of this study, from which 30 were selected via convenience sampling based on the inclusion criteria and randomly assigned to two equal groups of 15. Data were collected using the Self-Compassion Scale (Neff, 2003) and the Acceptance and Action Questionnaire - Second Version (Bond et al., 2007). Participants in the experimental group received 8 sessions of intervention. Data analysis was conducted using descriptive statistics and one-way analysis of variance with SPSS version 26.

Findings: The mean self-compassion score and its dimensions in the experimental group significantly improved post-intervention compared to the control group ($p < 0.05$). Cognitive-behavioral therapy was beneficial in reducing experiential avoidance in the experimental group, unlike the control group ($p < 0.05$). The effects of this therapeutic program on dependent variables continued during the three-month follow-up period ($p < 0.05$).

Conclusion: Cognitive-behavioral exercises can be used as an effective intervention method to improve the cognitive-emotional status of women who have experienced marital infidelity.

Keywords: Cognitive-behavioral therapy, self-compassion, experiential avoidance, marital infidelity.

1. Introduction

Marriage is the most significant event in every person's life and is described as the most fundamental and essential human relationship, as it establishes the primary structure for forming familial relationships and raising the next generation (Babaei, 2022). The cornerstone of marriage and one of the main elements of any long-term and romantic relationship is the fidelity of the spouses to each other (Zamani, 2022). Among the damaging factors that threaten the fidelity of the spouses to the marriage covenant and sometimes lead to their separation is marital infidelity (Agboola, 2022).

Marital infidelity has considerable theoretical complexity, and achieving a universal definition accepted across all cultures is somewhat unexpected (Ariapooran, 2021). Nevertheless, marital infidelity is recognized as the most painful and harmful event that destroys the intimate relationship of the spouses and breaks their secure bonds. This unfortunate event weakens the loyalty of the spouses to the marriage, destroys the structure and stability of their relationship, and if untreated, leads to divorce and separation (Yuan, 2019). Generally, infidelity is defined as establishing any intimate relationship, sexual and emotional, with a third person, which violates the marital relationship commitment and is accompanied by emotional suffering in the victimized individual (Zangeneh, 2022). Furthermore, marital infidelity can eliminate the trust between a couple, leading to symptoms such as post-traumatic stress disorder and crises like depression, anger, despair, and feelings of incompetence, which result in the spouses drifting further apart, creating a rift in intimate relationships and ultimately separation from the marital life (Ariapooran, 2021).

Scientific reports show that marital life quality is affected by various factors, among which some researchers have attributed a positive role to self-compassion (Gewirtz-Meydan, 2023; Sadiq, 2022). To the extent that research findings have shown a positive relationship between psychological health and the self-compassion of couples with marital compatibility, stating that self-compassion among couples can explain changes in marital adaptation and have a positive impact on their interaction style and conflict resolution (Wang, 2023). Self-compassion is defined as the inclination to support and show compassion towards oneself instead of harsh judgment when one becomes aware of personal shortcomings. Self-compassion is a protective factor that leads to the development of

cognitive flexibility and effective coping and arises from attachment and bonding behavioral systems (Neff, 2023).

Compassion can be considered a strategy for emotion regulation in various ways, where it does not prevent the experience of disturbing and undesirable emotions, but rather strives to accept feelings in a kind manner (Aghaie, 2021). Individuals with high self-compassion have more adaptive strategies for coping with stressful events such as cognitive restructuring and use less avoidance and escape (Helminen, 2023). Neff & Beretvas (2013) note that self-compassion is distinctly related to the level of communication quality between couples, and self-compassionate individuals experience healthier romantic relationships and greater relational well-being (Neff & Beretvas, 2013).

Furthermore, findings indicate that individuals with high self-compassion often use mindfulness to resolve their disagreements. As they do not suppress their negative emotions and do not engage in rumination, they experience more positive emotions and fewer negative emotions (Dodson, 2022; Helminen, 2023). Meanwhile, researchers believe that experiential avoidance is a common causal process and a pathogenic factor among many behavioral and emotional problems (Martinez, 2022). Experiential avoidance is essentially an effort to avoid painful experiences and includes two elements: an unwillingness to make contact with personal experiences (physical sensations, emotions, thoughts, behavioral contexts) and efforts to avoid painful experiences or to avoid events that trigger these experiences; this construct is the opposite of acceptance, which means the individual's willingness to accept thoughts, emotions, and behavioral manifestations without trying to avoid them. The function of experiential avoidance is to control or minimize the impact of distressing experiences (Bagheri, 2023).

It is assumed that experiential avoidance plays an important role in the etiology, persistence, and modification of various forms of psychological damage, especially anxiety and mood disorders among couples and other individuals in society, and according to such results, experiential avoidance comprises a broad transdiagnostic risk factor that leads to individual vulnerability in the face of life's difficulties and hardships (Spencer, 2023). Various researches have shown that experiential avoidance is associated with more negative emotions and coping problems (Kim, 2023). Individuals with greater experiential avoidance employ more self-destructive, denial, emotional support, and self-blame strategies, and experience more

intense emotional and negative experiences in response to pleasant and unpleasant stimuli (Haywood, 2023).

Therapists use various approaches to treat infidelity and reduce the associated damages. One of the most commonly used therapeutic approaches in this area is cognitive-behavioral therapy (CBT) (Borhani Kakhki, 2021). This therapeutic approach is based on the assumption that incorrect and discouraging beliefs, ineffective coping behaviors, and negative mood states are influential in the formation and persistence of problems. Cognitive-behavioral therapy is founded on a structured psychoeducational model and emphasizes the role of homework (Walsh, 2023). This therapy has unique features that include cognitive strategies such as the discovery of cognitive distortions and anxiety-inducing thoughts, cognitive restructuring, and the reinforcement of effective coping self-statements, as well as behavioral strategies including modeling, exposure, role-playing, muscle relaxation, coping skills training, and increasing self-control (Scott, 2023). Reviews of reports indicate that cognitive-behavioral therapy has been beneficial for various constructs in the marital realm such as the social well-being of couples (Hajloo, 2021), quality of life and marital satisfaction among couples seeking divorce (Borhani Kakhki, 2021), reduction of marital problems (Zamani, 2022) and schemas of love and marital satisfaction (Shahmoradi, 2021).

In view of the issues raised and considering the nature of marital infidelity and its destructive impact on the relationships of couples, it seems reasonable that effective interventions be implemented to help couples who are grappling with this damaging phenomenon so that the attachment damages caused by this unfortunate event can be repaired, and with the resumption of secure bonds, the spouses' loyalty to the marital bond can be enhanced. Considering that in Iran, there are spouses who, despite marital infidelity and the damages arising from it, desire to repair the marital relationship and continue living with their unfaithful spouse and, in adapting to this situation and starting life with a new perspective and greater awareness, need psychological therapy and counseling services, the application of effective therapeutic interventions for confronting and treating the damages resulting from marital infidelity is of special importance. Given the information presented and considering the successful application of cognitive-behavioral therapy in various marital areas, this study was conducted with the goal of determining the extent of the impact of cognitive-behavioral therapy on self-

compassion and experiential avoidance in women who have experienced marital infidelity.

2. Methods

2.1. Study design and Participant

The current study was a quasi-experimental design, employing a pre-test, post-test, and a three-month follow-up with a control group. The statistical population consisted of all married women who had experienced marital infidelity and sought counseling and psychotherapy services in Tehran in the years 2022-2023. The sampling method used was convenience sampling. The sample was selected from 76 individuals who voluntarily responded to an invitation to participate in therapy sessions at counseling and psychotherapy centers. After an initial evaluation and considering the entry criteria for the study, 30 participants were selected and divided into two equal groups of 15 each.

The inclusion criteria for the research were participants' consent and willingness to participate in the study, living with a spouse at the time of recruitment and throughout the study, having experienced marital infidelity by the spouse, being married for at least 2 years, being aged between 25 to 50 years, being literate, answering all questions on the self-report instruments, and being able to attend all therapy sessions. Exclusion criteria included having any psychological disorders as determined by structured clinical interviews according to the Diagnostic and Statistical Manual of Mental Disorders, current drug abuse or dependency, taking specific medications under the supervision of a psychiatrist or a medical doctor for physical or gynecological conditions, having a history of separation or initiating divorce by either spouse, missing more than two intervention sessions, receiving any other psychotherapeutic methods concurrently with the intervention, not seriously performing the tasks during the program, and occurrence of unforeseen events (such as illness or death).

2.2. Measures

2.2.1. Self-Compassion

This self-report instrument was developed by Neff in 2003 to measure self-compassion. It consists of 26 items with six subscales including self-kindness, self-judgment, common humanity, isolation, mindfulness, and over-identification. Items are scored on a 5-point Likert scale from 1 (almost never) to 5 (almost always), with items 12, 11, 9, 8, 4, and 1 being reverse scored. The developer

reported a Cronbach's alpha of 0.90. In Iran, the Cronbach's alpha for this tool has been reported between 0.76 and 0.80 (Janbozorgi et al., 2020).

2.2.2. *Experiential Avoidance*

This self-report instrument was developed by Bond et al. in 2007 to measure acceptance and experiential avoidance. It consists of 10 items each rated on a 7-point Likert scale. Higher scores indicate greater psychological flexibility. Psychometric properties of the original version are as follows: Results from 2,816 participants across six samples showed that this instrument has satisfactory reliability, validity, and construct validity. The mean alpha coefficient was 0.84 (ranging from 0.78 to 0.88) and test-retest reliability over 3 and 12 months was 0.81 and 0.79, respectively. The results indicated that the Acceptance and Action Questionnaire - Second Version can predict a range of outcomes from mental health to workplace absenteeism, consistent with its underlying theory. This tool also demonstrates appropriate discriminant validity (Abasi, 2012).

2.3. *Interventions*

2.3.1. *Cognitive-Behavioral Therapy*

The experimental group received the intervention in group sessions of 60 minutes each (two sessions per week) conducted by an experienced psychotherapist in separate rooms at the counseling center, while the control group received no educational intervention (Hajloo, 2021; Shafiei, 2017). No issues occurred during the session proceedings, and all participants attended all sessions. To further motivate participants, therapy sessions were offered for free, and the control group was assured that they would receive free therapy after the research and follow-up phase were completed.

The intervention protocol for this study consists of an eight-session Cognitive-Behavioral Therapy (CBT) program designed for women who have experienced marital infidelity. The sessions are structured to address the emotional and psychological impacts of infidelity, enhance self-compassion, and reduce experiential avoidance. Each session builds upon the previous one, incorporating psychoeducation, relaxation exercises, desensitization techniques, cognitive restructuring, and behavioral activation. Homework assignments are integral to each

session to reinforce learned skills and facilitate real-life application.

Session Descriptions:

Session 1: Introduction and Assessment

The first session serves as an introduction to the group therapy process. The therapist welcomes the participants, outlines the group rules and guidelines, and facilitates introductions among the members. This session includes a discussion on the definition of marital infidelity and its various consequences. The cognitive-behavioral therapy approach is introduced, and a pre-test is administered to assess baseline levels of self-compassion and experiential avoidance.

Session 2: Relaxation Techniques

In the second session, participants learn relaxation techniques to manage stress and emotional upheaval related to infidelity. The session covers breathing exercises that participants can use to reduce anxiety. Homework is assigned to practice these techniques at home, reinforcing the skills learned during the session.

Session 3: Desensitization and Introduction to Self-Compassion

This session reviews the previous homework and introduces desensitization techniques. The therapist helps participants create a hierarchy of avoidance situations related to the infidelity experience. Self-compassion is introduced as a tool for emotional healing. The session combines exposure techniques with relaxation practices learned earlier. Participants receive homework to practice these techniques.

Session 4: Worry Management

The fourth session involves reviewing the previous session's homework followed by exercises in managing worries. Participants identify their most common worries and are taught techniques to manage these, including worry postponement and identifying cognitive distortions. A cost-benefit analysis technique is also introduced. Homework for the next session is assigned to stabilize these new cognitive skills.

Session 5: Cognitive Distractions and Activity Planning

Participants review their homework focused on delaying rumination and learn attention diversion techniques. Activity planning is also introduced to structure their daily routines positively. Homework involves applying these distraction and planning techniques in daily life.

Session 6: Behavioral Activation

This session reviews all previous homework and introduces the concept of behavioral activation. The

therapist explains the relationship between depressed moods and inactivity. Participants identify activities that align with their goals and are encouraged to integrate these into their daily routines. Homework is assigned to continue this practice.

Session 7: Cognitive Restructuring

The seventh session is dedicated to cognitive restructuring. Participants learn to identify negative thoughts and challenge them. The therapist helps replace these negative thoughts with more realistic and balanced ones. Homework for the next session involves practicing these cognitive restructuring techniques.

Session 8: Stress Coping and Problem-Solving Skills

The final session reviews the homework and covers stress management and problem-solving skills. These skills are crucial for handling future stressors effectively and maintaining improvements made during therapy. The session concludes with a post-test to assess changes from the baseline measures taken in the first session.

2.4. Data Analysis

Data were analyzed using descriptive tests and repeated measures analysis of variance. Post-hoc comparisons of the effectiveness of the two intervention methods were conducted using the Bonferroni test with SPSS software version 26. Normal distribution of data was assessed using the Kolmogorov-Smirnov, M-Box, Mauchly's sphericity, and Levene's tests at a significance level of 0.05.

3. Findings and Results

Initially, descriptive indices related to the scores of experiential avoidance, self-compassion, and its dimensions in both groups at different assessment stages were presented. The Kolmogorov-Smirnov test was used to examine the normality of the distribution of variables, confirming that the data were normally distributed. Examination of the homogeneity of regression slopes indicated that the interaction between the pre-test and the group for the dependent variables (post-tests) was not significant, thus the regression slopes were considered equivalent across the three groups. The assumption of multivariate correlation of the dependent variables was checked with Mauchly's test. The significance level for each of the dependent variables was 0.001, thus the sphericity assumption was rejected. Violation of the sphericity assumption causes the F statistic in analysis of variance to be inaccurate. To enhance the accuracy of the F statistic, degrees of freedom were corrected using both Greenhouse-Geisser and Huynh-Feldt methods. Accordingly, the Greenhouse-Geisser correction was used in the present study. The assumption of homogeneity of the variance-covariance matrix was checked with the Box's M test, which was also adhered to. Given these prerequisites, all assumptions necessary for conducting a two-way ANOVA with repeated measures were met.

Table 1

Means and Standard Deviations of Research Variables by Group and Assessment Stage

Dependent Variable	Group	n	Pre-test (M ± SD)	Post-test (M ± SD)	Follow-up (M ± SD)	Kolmogorov-Smirnov	P
Experiential Avoidance	Experimental	15	115.14 ± 14.28	74.59 ± 8.33	73.75 ± 9.68	.876	.460
	Control	15	112.60 ± 13.99	108.80 ± 13.52	107.50 ± 12.22	.694	.341
Self-Kindness	Experimental	15	10.97 ± 2.20	16.23 ± 2.79	16.20 ± 2.34	.880	.413
	Control	15	12.20 ± 2.64	12.07 ± 2.66	11.13 ± 2.47	.863	.276
Common Humanity	Experimental	15	11.93 ± 2.21	17.63 ± 1.85	17.70 ± 1.16	.779	.513
	Control	15	11.47 ± 2.36	11.37 ± 2.25	10.29 ± 2.13	.956	.315
Mindfulness	Experimental	15	9.20 ± 2.27	15.63 ± 2.01	14.30 ± 2.00	.730	.614
	Control	15	9.73 ± 1.84	9.87 ± 1.78	9.10 ± 1.56	.590	.412
Self-Judgment	Experimental	15	14.80 ± 2.73	10.23 ± 1.98	10.21 ± 1.76	.675	.418
	Control	15	10.67 ± 1.88	10.60 ± 1.59	10.64 ± 1.70	.756	.210
Isolation	Experimental	15	13.70 ± 1.73	8.90 ± 1.18	8.93 ± 1.23	.924	.313
	Control	15	13.11 ± 1.90	13.40 ± 1.67	13.36 ± 1.14	.769	.503
Over-identification	Experimental	15	11.27 ± 2.97	8.37 ± 1.81	8.35 ± 1.68	.904	.388
	Control	15	10.13 ± 2.21	10.00 ± 2.12	10.02 ± 2.09	.655	.712
Self-Compassion	Experimental	15	71.87 ± 14.11	76.99 ± 11.62	75.69 ± 10.17	.834	.611
	Control	15	67.31 ± 12.83	57.31 ± 12.04	64.54 ± 11.09	.798	.553

Table 1 presents the mean and standard deviation of research variables by group and assessment stage.

Table 2

Analysis of Variance with Repeated Measures for Dependent Variables at Three Stages

Dependent Variable	Source of Variation	F Statistic	Significance Level	Partial Eta Squared	Statistical Power
Self-Kindness	Stage	16.19	.031	.498	.595
	Group	21.46	.026	.366	.623
	Stage * Group	15.79	.015	.562	.714
Common Humanity	Stage	14.38	.012	.391	.434
	Group	17.44	.008	.567	.397
	Stage * Group	15.79	.010	.491	.608
Mindfulness	Stage	31.06	.014	.591	.533
	Group	23.82	.027	.431	.486
	Stage * Group	19.62	.011	.585	.690
Self-Judgment	Stage	5.11	.016	.243	.561
	Group	3.45	.014	.287	.615
	Stage * Group	8.66	.018	.449	.589
Isolation	Stage	15.40	.017	.393	.490
	Group	19.03	.019	.610	.476
	Stage * Group	17.56	.012	.590	.618
Over-Identification	Stage	22.09	.004	.565	.588
	Group	25.86	.017	.623	.675
	Stage * Group	21.43	.009	.610	.622
Self-Compassion	Stage	39.13	.019	.561	.665
	Group	44.59	.022	.623	.721
	Stage * Group	36.73	.014	.619	.706
Experiential Avoidance	Stage	18.25	.017	.612	.818
	Group	143.08	.033	.634	.912
	Stage * Group	11.57	.015	.601	.834

Table 2 indicates that there are significant differences between the scores for experiential avoidance, self-compassion, and its dimensions across the pre-test, post-test, and follow-up ($p < .05$). Additionally, the scores for the dependent variables in the experimental group show significant differences from the pre-test to the post-test and follow-up ($p < .05$). The effects of the cognitive-behavioral intervention in reducing experiential avoidance and improving self-compassion and its dimensions were maintained after a three-month follow-up ($p < .05$). To examine effect size, partial eta squared was used. Eta squared for the variables studied was greater than .10, indicating that the differences between groups are notable. The results suggest that the cognitive-behavioral therapy intervention was effective in reducing experiential avoidance and improving self-compassion in women who have experienced marital infidelity.

4. Discussion and Conclusion

This study was conducted to determine the impact of cognitive-behavioral therapy (CBT) on self-compassion and

experiential avoidance in women who have experienced marital infidelity. The initial findings of the research demonstrated that cognitive-behavioral therapy significantly increased the self-compassion scores of women who have experienced marital infidelity. These findings are consistent with the prior results (Borhani Kakhki, 2021; Hajloo, 2021; Shafiei, 2017; Shahmoradi, 2021; Zamani, 2022; Zhang, 2020) regarding the positive impact of cognitive-behavioral therapy among couples seeking divorce.

In explaining these findings, it should be noted that the goal of cognitive-behavioral therapy is to correct irrational beliefs, inefficient beliefs, incorrect interpretations, and cognitive errors, as well as to facilitate constructive self-talk and strengthen coping skills. Cognitive-behavioral therapy emphasizes that thought processes are as important as environmental effects. Accordingly, this therapeutic approach, which is a combination of cognitive and behavioral strategies, uses structured discussions and organized behavioral assignments to help individuals change distorted thinking patterns and ineffective behaviors. Cognitive-behavioral therapy is effective in creating and

enhancing capabilities such as decision-making, motivation to accept responsibility, positive interaction with others, happiness, self-esteem development, problem-solving skills, emotional cognitive self-regulation, and more (Zhang, 2020). Therefore, cognitive-behavioral therapy, by controlling and regulating emotions and feelings, managing psychological stress, establishing effective communication, and self-control, reduces psychological and emotional stress in women who have experienced marital infidelity and subsequently improves self-acceptance and self-compassion through leveraging structures of value and self-efficacy.

Another interpretation could be that since cognitive-behavioral therapy reduces cognitive errors in an individual, this skill could enable a person to be compassionate towards themselves when dealing with life's adversities and bitter events, such as failure. Moreover, after undergoing cognitive-behavioral therapy, clients, as they gain insights into cognitive distortions involving certainty and ignoring probabilities in situations of assurance and uncertainty, this flexible perspective and belief in probability can also reduce an individual's negative and critical view of their own weaknesses, thus reducing self-judgment and self-criticism (Zamani, 2022; Zhang, 2020). Therefore, it lays the groundwork for increasing self-compassion among the participants in the cognitive-behavioral therapy group.

Another finding of the research indicates the positive effect of cognitive-behavioral therapy on reducing experiential avoidance in women who have experienced marital infidelity which aligns with prior research (Atadokht, 2019; Shafiei, 2017; Spencer, 2023). This finding suggests that the therapy might challenge individuals' thoughts and reduce cognitive errors, thereby changing their beliefs and attitudes. Furthermore, it could increase participation in pleasurable activities and impact the range and quality of relationships and thereby affect social support, possibly increasing their adaptation to their problems (Spencer, 2023). Proper use of emotions, awareness of emotions, and timely acceptance and expression, especially of positive emotions in life situations, could reduce their negative feelings, consequently increasing their adaptability and moderating experiential avoidance. In other words, this treatment can play a significant role in reducing experiential avoidance of life memories with a spouse by making an individual aware of positive and negative emotions, and timely acceptance and expression.

5. Suggestions and Limitations

Every research comes with its limitations, and this study is no exception. Since the participants were married women visiting counseling centers in Tehran who had experienced marital infidelity, caution should be exercised in generalizing the findings to other communities in Iran with different cultures and customs. Other limitations of the current study include the use of convenience sampling, the use of a quasi-experimental design, and the unidimensional assessment of variables (assessment of the dependent variable solely with a quantitative tool). It is suggested that researchers interested in this field study this research among other members of society (such as divorce applicants, those involved in extramarital relationships, domestic violence, etc.) and use other experimental designs and random sampling. The inability to conduct a long-term follow-up (6 months) was also a limitation of this research. It is suggested that the impact of these interventions be followed over longer periods to determine the stability of the results over time. Given the effectiveness of cognitive-behavioral therapy on the studied variables, it is recommended that family counselors and couple therapists learn and apply the practical techniques and methods of this approach in counseling centers and clinical settings to reduce marital problems.

Authors' Contributions

All authors have contributed significantly to the research process and the development of the manuscript.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

Acknowledgments

We would like to express our gratitude to all individuals helped us to do the project.

Declaration of Interest

The authors report no conflict of interest.

Funding

This research was carried out independently with personal funding and without the financial support of any governmental or private institution or organization.

Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

References

- Abasi, E., Fti, L, Molodi, R, Zarabi, H. (2012). Psychometric properties of Persian Version of Acceptance and Action Questionnaire –II. *Psychological Models and Methods*, 3(10), 65-80. https://jpm.m.marvdasht.iau.ir/article_61_
- Agboola, E. B., Ojo, Tolulope Funmilola. (2022). Marital Infidelity and Domestic Violence among Married Couples in Ekiti State, Nigeria. In *Families in Nigeria: Understanding Their Diversity, Adaptability, and Strengths* (Vol. 18, pp. 123-135). Emerald Publishing Limited. https://www.emerald.com/insight/content/doi/10.1108/S1530-353520220000018010/full/www.wikipedia.org/wiki/domestic_violence/full/html
- Aghaie, A., Khanjani Veshki, Sahar, Pasha, Shima. (2021). The Effectiveness of Compassion-Based Education on Reducing Emotional Turbulence in Women Experiencing Marital Infidelity. *Journal of Applied Psychological Research*, 12(1), 299-313. <https://doi.org/10.22059/japr.2021.303377.643528>
- Ariapooran, S., Hajimoradi, Razieh. (2021). The Role of Spirituality Well-being, Forgiveness, and Marital Self-Disclosure in Internet Infidelity in Couples: A Survey Study. *Family Counseling and Psychotherapy*, 11(1), 1-34. <https://doi.org/10.22034/fcp.2021.61960>
- Atadokht, A., Masoumeh, Gharib Bolouk, Mikaeli, Nilofar, Samadifard, Hamid Reza. (2019). Effect of Emotion-focused Cognitive Behavioral Therapy on Social Adjustment and Experiential Avoidance in Iranian Disabled Veterans. *Military Caring Sciences*, 6(3), 176-186. <https://doi.org/10.29252/mcs.6.3.3>
- Babaei, R., Mohsenzadeh, Farshad, Zaharakar, Kianoush. (2022). Factors Affecting the Occurrence of Divorce Ideation Among Divorce Applicants: A Grounded Theory. *Family Counseling and Psychotherapy*, 11(2), 203-236. <https://doi.org/10.22034/fcp.2022.62607>
- Bagheri, M., Tajik Esmaceli, Azizollah, Farzad, Valiollah, Abdollahi, Mohammad Hossein, Raiisi, Fatteme. (2023). The role of experiential avoidance with the mediation of distress tolerance in predicting corona anxiety in the period of covid-19 outbreak: structural equation model. *Shenakht Journal of Psychology and Psychiatry*, 10(1), 116-127. <https://doi.org/10.32598/shenakht.10.1.116>
- Borhani Kakhki, M., Narimani, Mohammad, Mousazadeh, Tavakkol. (2021). The effectiveness of cognitive behavioral couple therapy on the quality of life and marital satisfaction of uncompromised divorce applicants. *Women and Family Studies*, 13(50), 133-147. <https://sanad.iau.ir/journal/jwsf/Article/676307?jid=676307&lang=en>
- Dodson, S. J., Heng, Yu Tse. (2022). Self-compassion in organizations: A review and future research agenda. *Journal of Organizational Behavior*, 43(2), 168-196. <https://doi.org/10.1002/job.2556>
- Gewirtz-Meydan, A., Lassri, Dana. (2023). The role of self-compassion and relation satisfaction in the association between child sexual abuse and sexual functioning. *The Journal of Sexual Medicine*, 20(5), 661-670. <https://doi.org/10.1093/jsxmed/qdad013>
- Hajloo, N., Pourabdol, Saeed, Saravani, Shahrzad, Sobhi Gharamaleki, Nasser, Mousavi, Babak. (2021). The Effectiveness of Cognitive-Behavioral Couple Therapy on Components Social Well-being in Couples with Marital Conflict. *Clinical Psychology Studies*, 12(45), 113-137. <https://doi.org/10.22054/jcps.2022.60508.2568>
- Haywood, S. B., Hasking, Penelope, Boyes, Mark E. (2023). Associations between non-suicidal self-injury and experiential avoidance: A systematic review and Robust Bayesian Meta-analysis. *Journal of affective disorders*, 325(no), 470-479. <https://doi.org/10.1016/j.jad.2023.01.027>
- Helminen, E. C., Ducar, Dallas M, Scheer, Jillian R, Parke, Kari L, Morton, Melissa L, Felver, Joshua C. (2023). Self-compassion, minority stress, and mental health in sexual and gender minority populations: A meta-analysis and systematic review. *Clinical Psychology: Science and Practice*, 30(1), 26. <https://doi.org/10.1037/cps0000104>
- Janbozorgi, F., Darbani, S. A., & Parsakia, K. (2020). The structural model of predicting family health based on communication patterns and self-efficacy with the mediating role of self-compassion in women. *Psychology of Woman Journal*, 1(3), 66-80. <http://psychowoman.ir/article-1-22-en.html>
- Kim, H., Newman, Michelle G. (2023). Worry and rumination enhance a positive emotional contrast based on the framework of the Contrast Avoidance Model. *Journal of anxiety disorders*, 94(no), 102671. <https://doi.org/10.1016/j.janxdis.2023.102671>
- Martinez, J. H., Eustis, Elizabeth H, Arbid, Natalie, Graham-LoPresti, Jessica R, Roemer, Lizabeth. (2022). The role of experiential avoidance in the relation between racial discrimination and negative mental health outcomes. *Journal of American College Health*, 70(2), 461-468. <https://doi.org/10.1080/07448481.2020.1754221>
- Neff, K. D. (2023). Self-Compassion: Theory, Method, Research, and Intervention. *Annual review of psychology*, 74(Volume 74, 2023), 193-218. <https://doi.org/10.1146/annurev-psych-032420-031047>
- Neff, K. D., & Beretvas, S. N. (2013). The role of self-compassion in romantic relationships. *Self and identity*, 12(1), 78-98. <https://doi.org/10.1080/15298868.2011.639548>
- Sadiq, U., Rana, Filza, Munir, Mubeena. (2022). Marital Quality, Self-compassion and Psychological Distress in Women with Primary Infertility. *Sexuality and Disability*, 40(1), 167-177. <https://doi.org/10.1007/s11195-021-09708-w>
- Scott, H., Cheung, Janet M. Y, Muench, Alexandria, Ivers, Hans, Grandner, Michael A, Morin, Charles M, Perlis, Michael L. (2023). Baseline sleep characteristics are associated with gains in sleep duration after cognitive behavioral therapy for insomnia. *Sleep Medicine*, 102, 199-204. <https://doi.org/10.1016/j.sleep.2023.01.009>
- Shafiei, M., Sadeghi, M, Ramezani, S. (2017). Effectiveness of cognitive-behavioral therapy on executive function and experiential avoidance in veterans with post-traumatic stress disorder. *Iranian Journal of War and Public Health*, 9(4), 169-175. <https://www.magiran.com/paper/1774738/effectiveness-of-cognitive-behavioral-therapy-on-executive-function-and->

[experiential-avoidance-in-veterans-with-post-traumatic-stress-disorder?lang=en](#)

- Shahmoradi, M., Nicknam, M., Khakpour, R. (2021). The Effectiveness of Cognitive-Behavioral Couple Therapy on Love Schemes and Marital Satisfaction of Married Women. *Community Health Journal*, 15(4), 14-24. <https://doi.org/10.22123/chj.2022.263692.1638>
- Spencer, S. D., Meyer, Monet S, Masuda, Akihiko. (2023). A Case-Series Study Examining Acceptance and Commitment Therapy for Experiential Avoidance-Related Mixed Anxiety and Depression in a Telehealth Platform. *Clinical Case Studies*, 22(1), 78-96. <https://doi.org/10.1177/15346501221115113>
- Walsh, E. A., Boland, Cody L, Popok, Paula J, Pedreira, Patricia B, Fox, Rina S, Moreno, Patricia I, Yanez, Betina, Penedo, Frank J. (2023). Marital status and perceived stress in men with advanced prostate cancer: A randomized-controlled trial of cognitive behavioral stress management. *Journal of psychosomatic research*, 167, 111198. <https://doi.org/10.1016/j.jpsychores.2023.111198>
- Wang, D., Xie, Ruibo, Ding, Wan, Yuan, Zhifan, Kayani, Sumaira, Li, Weijian. (2023). Bidirectional longitudinal relationships between parents' marital satisfaction, parenting stress, and self-compassion in China. *Family Process*, 62(2), 835-850. <https://doi.org/10.1111/famp.12785>
- Yuan, S., Weiser, Dana A. (2019). Relationship dissolution following marital infidelity: comparing European Americans and Asian Americans. *Marriage & Family Review*, 55(7), 631-650. <https://doi.org/10.1080/01494929.2019.1589614>
- Zamani, T., Isanejad, Omid. (2022). Meta-analysis of Studies Related to the Effectiveness of Cognitive-Behavioral Couple Therapy on Reducing Marital Problems. *Biannual Journal of Applied Counseling*, 12(1), 131-152. <https://doi.org/10.22055/jac.2022.39931.1866>
- Zangeneh, A., Arefi, M. (2022). Predicting the attitude towards marital infidelity based on conflict resolution styles, marital satisfaction and forgiveness of couples in Kermanshah city. *Journal of Islamic-Iranian Family Studies*, 2(1), 62-77. <https://sanad.iau.ir/en/Journal/iifsj/Article/692117?jid=692117>
- Zhang, Q., Yang, Xia, Song, Huimin, Jin, Yi. (2020). Cognitive behavioral therapy for depression and anxiety of Parkinson's disease: A systematic review and meta-analysis. *Complementary Therapies in Clinical Practice*, 39, 101111. <https://doi.org/10.1016/j.ctcp.2020.101111>