

Effectiveness of Imago Therapy on Cognitive Flexibility and Post-Traumatic Growth in Women Affected by Extramarital Affairs

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ABSTRACT

Objective: The present study aimed to determine the effectiveness of Imago therapy on cognitive flexibility and post-traumatic growth in women affected by extramarital affairs.

Methods: The research community included all women affected by extramarital affairs in the city of Isfahan (including the Nik Ovin Psychological Clinic and the Hazrat Abolfazl Charity Institute) in the spring of 2024. Accordingly, a group of women affected by extramarital affairs was randomly divided into two groups: an experimental group (15 individuals) and a control group (15 individuals). The experimental group received Imago therapy sessions, while the control group received no treatment. The data were analyzed using repeated measures tests with SPSS software version 23.

Findings: The findings indicated that Imago therapy was effective in enhancing psychological flexibility and its subscales, as well as post-traumatic growth and its subscales, in women affected by extramarital affairs ($P < 0.05$).

Conclusion: The obtained results showed that Imago therapy could be utilized as an effective approach for improving women affected by extramarital affairs, playing a significant role in enhancing their quality of life.

Keywords: *Imago therapy, cognitive flexibility, post-traumatic growth, women affected by extramarital affairs*

1. Introduction

Extramarital affairs are among the experiences that have a direct impact on individuals' psychological, social, and emotional abilities. Women, in particular, may reach a point where they need professional help to cope with such relationships due to various reasons, including psychological and social trauma (Ghezelseflo et al., 2023). Marital infidelity undoubtedly brings numerous problems to family

life and especially to couple relationships. Studies have shown that an individual's reaction to a spouse's infidelity resembles post-traumatic stress symptoms such as shock, confusion, anger, and depression. Additionally, it can lead to feelings of shame and guilt, anger, and hopelessness in the betrayed spouse (Alipour et al., 2018).

Cognitive flexibility, one of the variables of response to infidelity, is a topic within positive psychology. It can be

defined as positive traits in thoughts, feelings, and behaviors that help individuals improve their quality of life and efficiency (Khodabakhsh et al., 2015). On the other hand, some stressful and painful situations can provide a suitable context for individuals' growth. Growth after an infidelity experience can be an important process for individuals. The trauma resulting from infidelity can have profound effects on relationships and trust. However, this experience allows individuals to learn and grow from it (Greup et al., 2017; Tedeschi & Calhoun, 1996, 2004).

Imago therapy is a therapeutic approach that uses images and drawings to improve and change an individual's attitudes and feelings about themselves and others, including in relationships. Imago therapy, or relational imagery therapy, is a short-term treatment that combines insights and practical skills. This approach first educates couples about how and why conflicts arise and then provides them with tools and techniques to resolve these conflicts (Luquet, 2017). The goal of this therapy is to maintain contact between couples, allowing them to create healthy contact with each other and empathize more through conscious conversation and creating a safe environment to heal childhood wounds (Gehlert et al., 2017; Nikkhah et al., 2019).

Various studies have been conducted on the effectiveness of couples therapy in general and Imago therapy on marital quality, both domestically and internationally, addressing different aspects of this research area. Research has shown that Imago therapy is effective in increasing intimacy among couples and enhancing friendly intimate relationships (Nikkhah et al., 2019), improving marital satisfaction and intimacy (Gehlert et al., 2017), marital commitment and trust, sexual passion, and love (Alipour et al., 2018; Honarparvaran, 2017), improving emotional, psychological, sexual, physical, and social-recreational functioning, and marital intimacy among women (Fatemi et al., 2016; Sheydanfar et al., 2020), and increasing marital satisfaction (Movahedi et al., 2019; Sheydanfar, 2021).

Given the importance of this topic, the present study aimed to investigate the effectiveness of Imago therapy on cognitive flexibility, psychological empowerment, executive functions, and post-traumatic growth in women affected by extramarital affairs. This research is highly significant as it can contribute to new and effective recovery methods for this group of individuals, playing an important role in improving their quality of life.

2. Methods

2.1. Study Design and Participants

The primary objective of this study was to evaluate the impact of Imago therapy on cognitive flexibility and post-traumatic growth in women affected by extramarital affairs. The research community included all women affected by extramarital affairs in the city of Isfahan (including the Nik Ovin Psychological Clinic and the Hazrat Abolfazl Charity Institute) in the spring of 2024. For selecting the subjects, a convenience sampling method was used (considering entry criteria including informed consent, age range of 25 to 45 years, having at least a high school diploma, having been married for at least two years, not intending to divorce, willingness to regularly attend sessions, and absence of physical and psychological problems). A group of women affected by extramarital affairs was randomly divided into two groups: an experimental group (15 individuals) and a control group (15 individuals). The experimental group received Imago therapy sessions, while the control group received no treatment. The extent of changes in cognitive flexibility and post-traumatic growth in the two groups was then evaluated.

After sampling, participants were randomly divided into experimental (Imago therapy) and control groups. Following the pre-test phase and completion of questionnaires (online), the experimental group underwent ten online group training sessions, while no intervention was administered to the control group. After the final stage, participants completed the mentioned questionnaires again. Additionally, to follow up on the stability of treatment results, participants were asked to complete the questionnaires again after two months.

2.2. Measures

2.2.1. Cognitive Flexibility

The Cognitive Flexibility Index was developed by Dennis and Vander Wal (2010). This questionnaire is used to assess an individual's progress in clinical and non-clinical settings and to evaluate their advancement in developing flexible thinking. It consists of 20 items rated on a seven-point Likert scale, with three components: a) willingness to perceive difficult situations as controllable, b) ability to perceive multiple alternative explanations for life events and human behavior, and c) ability to create multiple alternative solutions for difficult situations. Items are rated on a 7-point Likert scale (strongly disagree = 1 to strongly agree = 7). Scoring includes factors like perceiving different options (items 3, 5, 6, 12, 13, 14, 16, 18, 19, 20), perceiving

controllability (items 1, 2, 4, 7, 9, 11, 15, 17), and perceiving behavioral justification (items 8, 10). Items 2, 4, 7, 9, 11, and 17 are reverse-scored. Dennis and Vander Wal (2010) reported a concurrent validity with the Beck Depression Inventory of -0.39, a convergent validity with the Cognitive Flexibility Scale by Martin and Robin of 0.75, and a Cronbach's alpha of 0.90 for the entire scale and 0.87, 0.89, and 0.55 for the subscales, respectively. The Persian version, unlike the original scale, which had only two factors, has three factors: perceiving controllability, perceiving different options, and perceiving behavioral justification (Ghorbani et al., 2021; Hasheminejad et al., 2024). The reliability of this tool in the present study was obtained using a Cronbach's alpha of 0.84.

2.2.2. *Post-Traumatic Growth*

The Post-Traumatic Growth Inventory, developed by Tedeschi and Calhoun (1996), measures growth after trauma. It is a self-report instrument consisting of 21 items and five subscales: 1) relating to others, 2) new possibilities, 3) personal strength, 4) spiritual change, and 5) appreciation of life. Respondents rate their answers on a six-point Likert scale (0 = I did not experience any change to 5 = I experienced a great deal of change). Tedeschi and Calhoun (1996) reported significant positive correlations between the subscales and the overall inventory score (0.88, with a significance level of $P < 0.001$) and a Cronbach's alpha of 0.92 for the entire inventory. In Iran, the inventory's validity was confirmed through a test-retest correlation coefficient of 0.94, and its reliability was confirmed with a Cronbach's alpha of 0.92 for the entire test and a range of 0.66 to 0.90 for the subscales. Heidarzadeh et al. (2015) examined the psychometric properties of the Persian version of the Post-Traumatic Growth Inventory in adult cancer patients and found good fit indices in confirmatory factor analysis. The five-factor structure of the instrument was also confirmed. The Cronbach's alpha for the entire instrument was 0.57, and the coefficients for the main five-factor subscales ranged from 0.57 to 0.77 (Mohammad & Borjali, 2021; Zadhan & Gholamzadeh Jofreh, 2023). The reliability of this tool in the present study was obtained using a Cronbach's alpha of 0.88.

2.3. *Intervention*

2.3.1. *Imago Therapy*

The content of the Imago therapy intervention was designed by Hendrix (2006) and its validity was confirmed

by many researchers (Alipour et al., 2018; Gehlert et al., 2017; Luquet, 2017; Mohannaee et al., 2019; Muro et al., 2016; Nikkhah et al., 2019). The objectives and content of this therapy by session are presented below:

Session 1: (Objective: Introduction, method explanation, and goal setting) Introduction of members, stating session rules and regulations, explaining the goals of Imago therapy, providing a brief description of Imago therapy, and explaining the role of Imagos in couples' communication.

Session 2: (Objective: Planning for future relationships) Familiarizing couples with positive traits of significant others, planning for suitable future relationships with their spouse, exploring the potential for relationship development with their spouse, and finding common ground.

Session 3: (Objective: Increasing self-awareness) Reviewing past memories, discovering childhood frustrations and reactions to them, fostering a positive mental image, using the method of returning to childhood and reviewing memories, writing down positive and negative traits of parents and their impact on the individual, and identifying childhood needs and negative feelings.

Session 4: (Objective: Understanding the spouse) Deep understanding of the spouse and its impact on current marital relationships, using the method of expressing the spouse's positive and negative traits, comparing the spouse with one's mental image, and understanding its impact on the individual.

Session 5: (Objective: Recognizing each other's needs and hurts) Familiarizing with the spouse's various needs, becoming aware of different hurts, and learning how to deal with the spouse's needs and hurts.

Session 6: (Objective: Closing exit strategies) Creating mutual commitment and ensuring togetherness, increasing intimacy and fulfilling different needs, and mutual agreement.

Session 7: (Objective: Renewing romantic memories and improving relationships) Creating a safe zone and increasing intimacy, healing emotional wounds, reviewing good past behaviors and memories, determining current methods to please the spouse, identifying unmet needs and wishes, and giving unexpected gifts and engaging in enjoyable joint activities.

Session 8: (Objective: Learning new behaviors) Creating a safe zone, increasing happiness and emotional bonding, using methods to identify bothersome and disappointing behaviors, identifying wishes and requests, and writing thoughts about intimate relationships.

Session 9: (Objective: Releasing anger and negative emotions) Expressing and releasing anger in a safe and constructive environment to reduce and resolve past resentments and heal emotional wounds, practicing anger release, and learning ways to manage anger.

Session 10: (Objective: Summarizing discussions) Reviewing the goals of previous sessions, summarizing the content of previous sessions, emphasizing efforts to maintain and continue positive changes, and receiving feedback from participants.

Table 1

Descriptive Indices of Psychological Flexibility and Post-Traumatic Growth in Experimental and Control Groups

Variable	Stage	Imago Therapy		Control	
		Mean	SD	Mean	SD
Perception of Different Options	Pre-test	40.65	7.742	38.46	8.596
	Post-test	47.38	5.268	37.42	7.868
	Follow-up	47.69	4.973	36.08	8.66
Perception of Controllability	Pre-test	33.85	4.059	34.25	5.562
	Post-test	43.77	7.037	32.33	6.372
	Follow-up	43.62	6.862	32.58	6.345
Perception of Behavioral Justification	Pre-test	8.08	3.378	7.5	2.153
	Post-test	12.00	2.415	8.5	2.276
	Follow-up	11.38	2.631	9.08	2.193
Psychological Flexibility (Total)	Pre-test	82.58	8.044	80.21	13.337
	Post-test	103.15	9.1	78.25	10.323
	Follow-up	102.69	7.146	77.75	11.733
Relationship with Others	Pre-test	13.04	4.361	13.00	3.971
	Post-test	21.46	3.666	11.92	3.029
	Follow-up	21.31	3.425	11.17	3.589
New Possibilities	Pre-test	17.23	3.444	16.67	2.57
	Post-test	24.46	5.19	14.14	3.516
	Follow-up	24.46	5.301	14.33	3.651
Personal Strength	Pre-test	10.08	4.271	8.67	2.57
	Post-test	15.54	5.425	6.67	3.114
	Follow-up	15.69	5.663	7.00	3.191
Spiritual Changes	Pre-test	3.61	3.155	2.35	2.505
	Post-test	8.36	2.907	2.19	2.222
	Follow-up	8.59	2.151	2.27	2.313
Appreciation of Life	Pre-test	6.15	2.309	4.6	2.205
	Post-test	9.31	1.974	4.27	2.283
	Follow-up	9.31	1.494	4.6	2.293
Post-Traumatic Growth (Total)	Pre-test	50.1	10.912	45.28	8.775
	Post-test	79.13	9.597	39.04	7.432
	Follow-up	79.36	9.787	39.37	8.192

Table 1 shows that the mean scores of the experimental group increased from pre-test to post-test and follow-up in

2.4. Data analysis

The data were analyzed using repeated measures tests with SPSS software version 23.

3. Findings and Results

Descriptive indices of psychological flexibility and post-traumatic growth variables in the experimental and control groups in pre-test, post-test, and follow-up are presented below.

dimensions of psychological flexibility and post-traumatic growth and their total scores.

Table 2

Multivariate Test Results for Between-Group Differences in Psychological Flexibility and Post-Traumatic Growth

Variable	Source of Variations	Wilks' Lambda	F	Significance Level	Partial Eta Squared
Perception of Different Options	Test	0.585	12.081	0.001	0.415
	Test × Group Membership	0.588	5.169	0.001	0.233
Perception of Controllability	Test	0.384	27.236	0.001	0.616
	Test × Group Membership	0.443	8.546	0.001	0.335
Perception of Behavioral Justification	Test	0.432	22.378	0.001	0.568
	Test × Group Membership	0.777	2.280	0.001	0.118
Psychological Flexibility	Test	0.309	38.074	0.001	0.691
	Test × Group Membership	0.388	10.282	0.001	0.377
Relationship with Others	Test	0.414	24.079	0.001	0.586
	Test × Group Membership	0.356	11.476	0.001	0.403
New Possibilities	Test	0.660	8.741	0.001	0.340
	Test × Group Membership	0.560	5.721	0.001	0.252
Personal Strength	Test	0.742	5.915	0.006	0.258
	Test × Group Membership	0.575	5.422	0.001	0.242
Spiritual Changes	Test	0.536	14.717	0.001	0.464
	Test × Group Membership	0.542	6.094	0.048	0.264
Appreciation of Life	Test	0.719	6.636	0.004	0.281
	Test × Group Membership	0.654	4.029	0.005	0.192
Post-Traumatic Growth	Test	0.304	38.992	0.001	0.696
	Test × Group Membership	0.265	16.019	0.001	0.485

Table 2 shows that the multivariate Wilks' Lambda test concerning test stages and the interaction between the test and group membership is significant for psychological

flexibility and its subscales, as well as for post-traumatic growth and its subscales ($P < 0.05$).

Table 3

Bonferroni Post Hoc Test for Comparing Mean Psychological Flexibility and Post-Traumatic Growth Based on Approach and Test Stages

Variable	Comparison 1	Comparison 2	Mean Difference	Standard Error	Significance Level
Perception of Different Options	Imago Therapy	Control	7.924*	2.539	0.011
	Pre-test	Post-test	-6.217*	1.254	0.001
		Follow-up	-5.772*	1.293	0.001
		Post-test	Follow-up	0.444	0.448
Perception of Controllability	Imago Therapy	Control	7.355*	2.055	0.003
	Pre-test	Post-test	-6.720*	0.954	0.001
		Follow-up	-6.624*	0.885	0.001
		Post-test	Follow-up	0.096	0.33
Perception of Behavioral Justification	Imago Therapy	Control	2.126*	0.798	0.035
	Pre-test	Post-test	-2.872*	0.449	0.001
		Follow-up	-2.912*	0.454	0.001
		Post-test	Follow-up	-0.041	0.298
Psychological Flexibility	Imago Therapy	Control	17.405*	3.526	0.001
	Pre-test	Post-test	-15.809*	1.876	0.001
		Follow-up	-15.309*	1.731	0.001
		Post-test	Follow-up	0.5	0.664
Relationship with Others	Imago Therapy	Control	6.575*	1.189	0.001
	Pre-test	Post-test	-4.382*	0.654	0.001
		Follow-up	-4.209*	0.598	0.001
		Post-test	Follow-up	0.173	0.207
New Possibilities	Imago Therapy	Control	7.051*	1.308	0.001
	Pre-test	Post-test	-3.214*	0.804	0.001
		Follow-up	-3.325*	0.795	0.001

Personal Strength	Post-test	Follow-up	-0.111	0.136	1.00
	Imago Therapy	Control	6.325*	1.36	0.001
	Pre-test	Post-test	-2.410*	0.692	0.004
Spiritual Changes		Follow-up	-2.239*	0.696	0.008
	Post-test	Follow-up	0.171	0.313	1.00
	Imago Therapy	Control	4.587*	0.938	0.001
Appreciation of Life	Pre-test	Post-test	-2.247*	0.439	0.001
		Follow-up	-2.127*	0.418	0.001
	Post-test	Follow-up	0.12	0.321	1.00
Post-Traumatic Growth	Imago Therapy	Control	3.765*	0.714	0.001
	Pre-test	Post-test	-1.157*	0.346	0.006
		Follow-up	-1.357*	0.401	0.005
	Post-test	Follow-up	-0.201	0.313	0.987
	Imago Therapy	Control	28.303*	3.033	0.001
	Pre-test	Post-test	-13.410*	1.499	0.001
		Follow-up	-13.258*	1.661	0.001
	Post-test	Follow-up	0.152	0.677	1.00

The results of the Bonferroni post hoc test for comparing means based on group membership in Table 3 show that the difference between the mean psychological flexibility and its subscales in the Imago therapy group and the control group is significant ($P < 0.01$). Therefore, it can be said that Imago therapy is effective on psychological flexibility in women affected by extramarital affairs.

Moreover, the results of the Bonferroni post hoc test for comparing means based on group membership in Table 3 show that the difference between the mean post-traumatic growth and its dimensions in the Imago therapy group and the control group is significant ($P < 0.01$). Therefore, it can be concluded that Imago therapy is effective on post-traumatic growth in women affected by extramarital affairs.

4. Discussion and Conclusion

Given the results obtained, a significant difference was observed between the psychological flexibility and post-traumatic growth of women in the experimental group, who received Imago therapy, and the control group. This research aligns with the findings of Mohannaee et al. (2019), which showed that Imago therapy increased constructive communication patterns and reduced avoidance, demand/withdrawal, and emotional divorce patterns among couples seeking divorce (Mohannaee et al., 2019). The results of Alipour et al. (2017) suggested that Imago therapy increased understanding and forgiveness in women affected by marital infidelity (Alipour et al., 2018).

Imago therapy is a therapeutic method that uses images and drawings to stimulate changes in attitudes, emotions, and behaviors. It is recognized as a form of psychotherapy and art therapy that promotes mental health improvement and self-awareness. Imago therapy is based on the idea that

visual experience, as a non-verbal language, can help convey deeper feelings and experiences and assist individuals in changing their attitudes and thoughts about various issues (Nikkhah et al., 2019).

The effectiveness of Imago therapy on cognitive flexibility, meaning an individual's ability to adapt to different situations and issues, has been noted. Cognitive flexibility includes the ability to change and adapt thoughts, attitudes, and behaviors. Imago therapy affects this flexibility by encouraging individuals to experience and visualize different realities through images and drawings, thereby enhancing cognitive and thinking efficiency. Related studies have shown that Imago therapy can positively affect an individual's psychological state. For example, a study by Greup et al. (2018) on the effectiveness of Imago therapy on emotional regulation showed significant improvement in the individual's emotional regulation. In other instances, Imago therapy has also improved social and communication skills (Greup et al., 2017).

The results of this study indicate that Imago therapy can create significant improvement in cognitive flexibility in women affected by extramarital affairs. These findings suggest that Imago therapy can be used as an effective approach for improving the quality of life in these women.

Furthermore, post-traumatic growth refers to an individual's ability to change and improve following an incident or adverse event. This growth includes acceptance and adaptation to changes, enhancing self-awareness, strengthening social relationships, and finding meaning and purpose in life. Imago therapy can be an effective tool in this process because it encourages individuals to experience and visualize different realities through images and drawings,

helping them to cope with experiences related to trauma and psychological injuries (Tedeschi & Calhoun, 1996, 2004).

Related research has shown that Imago therapy can significantly improve post-traumatic growth. Imago therapy can help individuals connect with their experiences and find meaning and purpose in their lives. Additionally, other studies have shown that Imago therapy can help individuals adapt to changes and developments following trauma and achieve greater personal and professional growth (Honarparvaran, 2017).

5. Suggestions and Limitations

Imago therapy can be used as an effective method to facilitate and accelerate post-traumatic growth, including psychological injuries, and create significant improvement in an individual's daily life and performance. It is important to note that the use of a small sample group limited to women affected by extramarital affairs may restrict the generalizability of the results to larger populations. Future research should include larger and more diverse sample groups of women and also men affected by extramarital affairs to enhance the generalizability of the results to broader populations and across different cultures and regions.

Authors' Contributions

All authors have contributed significantly to the research process and the development of the manuscript. This article is derived from the first author's doctoral dissertation.

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.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

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

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