

Post-Traumatic Paradoxical Couple Therapy: Development and Effectiveness in Couples Affected by Extramarital Infidelity

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the opening paragraph beginning “Researches has identified multiple reasons for divorce...”, the literature is cited extensively but remains descriptive rather than analytical. I suggest synthesizing the cited studies into thematic categories (e.g., relational, psychological, sociocultural predictors) to demonstrate theoretical integration rather than enumeration of findings.

The sentence “Infidelity is defined as engaging in any form of secret emotional, sexual, or combined relationship outside the marital bond” would benefit from acknowledging competing conceptualizations of infidelity (behavioral vs. perceived betrayal models). Including definitional debate would enhance conceptual rigor.

The operational definition “a couple with a history of marital infidelity was defined as...” restricts infidelity to male perpetrators. The authors should justify this gender-specific criterion or discuss how it limits applicability to diverse couple dynamics.

The inclusion criteria paragraph is comprehensive; however, excluding participants using psychiatric medication may reduce ecological validity. Please explain whether this decision was methodological (control of confounds) or clinical (therapy compatibility).

The description of the GHQ-28 provides extensive psychometric information, yet it lacks explanation of why this instrument was chosen over trauma-specific measures. A rationale linking GHQ-28 domains to infidelity trauma outcomes is needed.

Across Sessions 1–8, intervention procedures are described in operational detail. However, the manuscript should include a conceptual therapy model figure summarizing therapeutic phases, mechanisms, and expected change pathways to help readers understand treatment coherence.

While session procedures are carefully outlined, no information is provided regarding therapist adherence or supervision. Please clarify whether fidelity monitoring or protocol standardization procedures were implemented.

The paragraph explaining visual analysis and cutoff scores correctly references clinical significance, yet it should also address limitations of visual inspection (subjectivity, observer bias) and whether independent raters verified graphical interpretation.

The detailed narrative descriptions of Couple 1 and Couple 2 are clinically valuable, but they resemble case reports rather than standardized participant summaries. Consider presenting demographic and clinical characteristics in a structured table for methodological consistency.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The paragraph citing “approximately 20% of married men and 13% of married women...” relies on a single statistical source. Given the cross-cultural variability of infidelity prevalence, I recommend contextualizing this statistic with methodological limitations (self-report bias, cultural reporting differences).

In the paragraph stating “Marital infidelity is recognized as a form of trauma...”, the manuscript assumes trauma equivalence without clearly linking infidelity experiences to established trauma diagnostic frameworks (e.g., PTSD criteria). Clarifying whether trauma is used clinically or metaphorically would strengthen theoretical validity.

The paragraph claiming that “most therapeutic models were not specifically developed for this issue” should provide a systematic comparison table or conceptual argument explaining precisely what dimensions existing models fail to address, thereby justifying the novelty of the proposed intervention.

The final paragraph of the Introduction clearly states the aim but could be improved by explicitly identifying primary and secondary outcomes (mental health vs. relational functioning). This distinction would align the introduction more tightly with the results section.

In the Methods section, the paragraph beginning “This study is applied in purpose and belongs to single-case designs...” mixes philosophical classification with methodological description. I recommend separating research purpose, design, and analytic logic into distinct sentences for methodological precision.

The statement “a purposive convenience sampling method was employed” requires stronger justification. Because single-case designs emphasize internal validity, explain why convenience sampling does not compromise selection bias or therapist expectancy effects.

Response: Revised and uploaded the manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.