

Comparison of the Effectiveness of Acceptance and Commitment Therapy and Emotion-Focused Therapy on Hope and Family Cohesion in Incompatible Couples

Akram. Ghassemy¹, Azam. Fattahi Andabil^{2*}, Farideh. Dokanehi Fard³

¹ Department of Counseling, Ki.C., Islamic Azad University, Kish, Iran

² Counseling Department, Ro.C., Islamic Azad University, Roudehen, Iran

³ Department of Psychology, Ro.C., Islamic Azad University, Roudehen, Iran

* Corresponding author email address: mfattahi20002001@yahoo.com

Editor

Manijeh Daneshpour^{id}
Department of Couple and Family
therapy, Alliant International
University, California, United
States of America
mdaneshpour@alliant.edu

Reviewers

Reviewer 1: Seyed Ali Darbani^{id}
Assistant Professor, Department of Psychology and Counseling, South Tehran
Branch, Islamic Azad University, Tehran, Iran.
Email: Ali.darbani@iau.ac.ir
Reviewer 2: Masoud Asadi^{id}
Assistant Professor, Department of Psychology and Counseling, Arak University,
Arak, Iran.
Email: m-asadi@araku.ac.ir

1. Round 1

1.1. Reviewer 1

Reviewer:

The quasi-experimental pretest-posttest design with a control group and a 3-month follow-up is an important methodological strength, as it allows the authors to examine both immediate and short-term maintenance effects of the interventions. Including three groups—ACT, EFT, and control—improves the comparative structure of the study. However, the manuscript should more clearly explain how random allocation was implemented after purposive-volunteer sampling, because the internal validity of the design depends heavily on the transparency of the assignment procedure and on whether allocation concealment was attempted.

The sampling strategy raises concerns about generalizability, since participants were recruited purposively and voluntarily from a single counseling clinic in District 2 of Tehran. Although this approach may be understandable in an applied clinical context, it limits the external validity of the findings and makes it difficult to determine whether the results would replicate in broader populations of distressed couples, including those from different socioeconomic, cultural, and treatment-seeking

backgrounds. The manuscript would benefit from a more explicit acknowledgment of this limitation and a more cautious framing of the conclusions.

The statistical reporting currently seems incomplete and should be strengthened substantially. The manuscript appears to report descriptive trends and indicates that Shapiro-Wilk tests supported normality assumptions, which is useful, but this is not sufficient for evaluating the rigor of the findings. The authors should provide the full inferential statistics used to test intervention effects, including the exact model, test statistics, degrees of freedom, p-values, effect sizes, and, ideally, confidence intervals. Given the repeated-measures structure, it is especially important to clarify whether repeated-measures ANOVA, mixed ANOVA, or another longitudinal analytic approach was used.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The sample size appears relatively small for a three-arm intervention study, with 45 couples divided into groups of 15 couples each. While the descriptive results suggest meaningful changes, the manuscript should report whether an a priori power analysis was conducted to justify the sample size and to estimate the study's ability to detect differences between ACT and EFT. Without such justification, it is difficult to determine whether the study was adequately powered, especially for between-group comparisons and follow-up effects.

The manuscript would benefit from more complete reporting of the intervention protocols, particularly for EFT. The retrieved text indicates that ACT is described as a 12-session, 90-minute weekly group intervention including acceptance, cognitive defusion, mindfulness, values clarification, and committed action, which is reasonably informative. In contrast, EFT is discussed theoretically in terms of attachment and the phases of de-escalation, restructuring, and consolidation, but the practical structure of the intervention as delivered in this study is less clearly documented. For reproducibility, the authors should specify the number of sessions, session duration, therapist training, treatment manual, and fidelity procedures for both interventions.

The choice of outcome variables is conceptually coherent and clinically meaningful, especially given the manuscript's framing of marital incompatibility as a problem that affects the whole family system. Hope and family cohesion are appropriate constructs for evaluating broader therapeutic effects beyond conflict reduction. That said, the manuscript should better justify why these two variables were prioritized over other potential relational outcomes such as marital satisfaction, emotional intimacy, conflict resolution, or attachment security, particularly since the interventions themselves are rooted in models that would plausibly influence those constructs as well.

There appears to be a possible inconsistency in the reporting of study variables, which should be corrected before publication. In the accessible text, the methods section reportedly refers at one point to dependent variables including "psychological distress, hope, and family cohesion," whereas the apparent focus of the article and the reported results center mainly on hope and family cohesion. This inconsistency creates uncertainty about the original scope of the study and may reflect either a drafting oversight or incomplete revision. The authors should review the manuscript carefully to ensure that the aims, methods, results, and discussion are fully aligned.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.

