




# Effectiveness of Integrative Couple Therapy on Sexual Function, Marital Intimacy, and Impulsivity in Women Affected by Marital Infidelity

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## ABSTRACT

**Objective:** One of the most significant factors that can disrupt family health is the breaking of commitment and exclusivity in emotional and sexual relationships and the creation of extramarital relationships, namely marital infidelity. This study aimed to determine the effectiveness of integrative couple therapy on sexual function, marital intimacy, and impulsivity in women affected by marital infidelity.

**Materials and Methods:** This study was a quasi-experimental research with a pre-test, post-test, and three-month follow-up design, accompanied by a control group. The study population included all women affected by marital infidelity who sought help from Yarigar and Organic counseling centers in Tehran during the first six months of 2023. According to the counseling centers' officials, the total number of these individuals was 93. The study sample consisted of 30 women affected by marital infidelity who referred to counseling centers in District 2 of Tehran in 2023, selected through purposive sampling and then randomly divided into experimental and control groups. Data were collected using the Marital Intimacy Scale, the Barratt Impulsiveness Scale, and the Female Sexual Function Index. In this study, the experimental group underwent emotion-focused therapy in 9 sessions (one 90-minute session per week). Data were analyzed using repeated measures analysis of variance and SPSS software version 22.

**Findings:** The results showed that integrative couple therapy effectively increased sexual function ( $F=54.5$ ,  $P<0.001$ ), marital intimacy ( $F=9.00$ ,  $P<0.001$ ), and decreased impulsivity ( $F=7.09$ ,  $P<0.001$ ) in women affected by marital infidelity.

**Conclusion:** It can be concluded that integrative couple therapy is effective in improving sexual function, marital intimacy, and impulsivity in women affected by marital infidelity and can be used to reduce the psychological problems of these women.

**Keywords:** Integrative couple therapy, sexual function, marital intimacy, impulsivity, marital infidelity.

## 1. Introduction

Fundamental changes in marriage goals require altering expectations, duties, roles, and enhancing spouses' skills to achieve these goals and needs. Studies and clinical experiences indicate that in contemporary society, couples face severe and widespread difficulties in establishing and maintaining intimacy and fulfilling each other's expectations and needs (Mohammadi et al., 2022). Creating and maintaining intimate relationships and satisfying emotional and psychological needs during marriage is a skill and art that, in addition to mental health and healthy early experiences, requires having rational attitudes and acquiring specific skills and tasks (Parsakia et al., 2023).

Researchers have defined intimacy in various ways, but the most common definition involves a sense of self-disclosure, sharing one's inner self, and feeling closeness with one's spouse. Intimacy is also defined as the potential ability to build close relationships that encompass high levels of communication, closeness, and commitment (Badihi Zeraati & Mosavi, 2016; Solmaz et al., 2023). Smith (2016) considers intimacy to include nine dimensions: emotional, psychological, intellectual, sexual, physical, spiritual, aesthetic, social-recreational intimacy. The overall intensity of the need for intimacy and its nine dimensions varies from one individual to another. People differ from one another in the intensity and type of intimacy due to individual differences. Considering these differences among individuals, it can be understood how a couple with similar overall needs for intimacy might still be dissatisfied with sharing intimate experiences in their relationship (Arsalandeh et al., 2018). Unfortunately, many spouses interpret these differences as good or bad, healthy or unhealthy, desirable or unacceptable. One of the primary tasks of therapists is to help couples understand and accept differences in the intensity of needs. Couples who seek therapy due to dissatisfaction with their intimacy needs gradually learn that their differences in the intensity of overall needs and the intensity of specific needs dimensions are simply related to individual differences (Roddy et al., 2020).

One of the factors affecting the happiness of couples is their sexual function (Kato & Okubo, 2023; Luo & Yu, 2022). Sexual function is an important aspect of marital life quality and a real psychophysiological experience defined by the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), as a four-stage response cycle including sexual desire, arousal, orgasm, and

resolution (Birnbaum et al., 2022). Sexual activity is influenced by the individual, early relationships, family, society, culture, environmental complexity, personal and partner's sexual history, past communications, and hormonal status (Andersson, 2022; Solmaz et al., 2023). Sexual activity disorder is very common in women of any age, cultural, social, and economic status, and significantly affects quality of life, self-confidence, mood, and relationship with the spouse (Asadpour & Veisi, 2017; Pérez-López et al., 2020).

Stress caused by marital infidelity is associated with poor self-control and leads to impulsivity (Kertzman et al., 2022). Impulsivity is an important topic in clinical psychology and requires clinical intervention. Impulsive individuals act based on their momentary feelings without considering the rules or specifics of any situation, without any mental or behavioral filter. This trait is directly related to an inability in self-control and behavior inhibition, inherently risky with harmful consequences, lack of planning, and emotional instability (Kertzman et al., 2022). Impulsivity is associated with significant psychological harm in society, being a key factor in diagnosing impulse control disorders, mood disorders, personality disorders, substance abuse, and paraphilias (Alacreu-Crespo et al., 2022). These individuals engage in behaviors dangerous to themselves or others, such as reckless driving, gambling, initiating fights, high-risk trading, promiscuous sexual behaviors, compulsive buying, poor anger control skills, family conflicts, domestic violence, and attempts to harm themselves or others, including suicide. A negative relationship exists between the level of impulsivity in couples and marital satisfaction and stability, increasing the risk of divorce (Blake et al., 2022; Kertzman et al., 2022).

The therapeutic model applicable to treating marital infidelity and its resulting harms is integrative couple therapy based on the trauma response theory. According to the integrative treatment model for infidelity, therapy comprises three phases: 1. Identifying and understanding the traumatic effects of infidelity, 2. Understanding the factors leading to infidelity, and 3. Continuing life with this new understanding along with necessary changes (Scheinkman et al., 2022; Sevier et al., 2008; Snyder & Balderrama-Durbin, 2012). Empirical studies of this therapeutic model have supported its effectiveness in reducing harms caused by infidelity (Panahi et al., 2018; Poursardar et al., 2019; Snyder & Balderrama-Durbin, 2012; Young & Long, 1998).

Given the discussed issues and considering the nature of marital infidelity and its destructive effects on couples'

relationships, it seems reasonable that effective interventions be implemented to assist couples grappling with this harmful phenomenon. Such interventions aim to repair attachment harms caused by this unfortunate event and, by resuming secure bonds, enhance spouses' loyalty to the marital bond. Considering that in our country, there are spouses who, despite marital infidelity and its resulting harms, desire to repair their marital relationship and continue life with their unfaithful spouse, and in the process of adjusting to this situation and starting life with a new and more informed perspective, require counseling services, applying effective therapeutic interventions for addressing and treating the harms caused by marital infidelity is of special importance. Given the discussed content and considering the successful application of integrative couple therapy in treating marital infidelity, and noting that in Iran, no research has been conducted on the effectiveness of integrative couple therapy in treating marital infidelity and its resulting harms, this study aimed to determine the effectiveness of integrative couple therapy on sexual function, marital intimacy, and impulsivity in women affected by marital infidelity.

## 2. Methods and Materials

### 2.1. Study Design and Participants

The present study was a semi-experimental research with a pre-test, post-test, and three-month follow-up design, including a control group. The study population consisted of all women affected by marital infidelity who had sought help from Yarigar and Organic counseling centers in Tehran during the first six months of 2023. According to the officials of these counseling centers, the total number of these individuals was 93. The study sample consisted of 30 women affected by marital infidelity who had referred to counseling centers in District 2 of Tehran in 2023. They were selected through purposive sampling and then randomly assigned to either the experimental or control group. The required sample size for this design was determined to be 45 individuals per group using G\*power software, based on an effect size of 0.35, an alpha error probability of 0.05, and a test power of 0.75, across three groups and with three measurements (pre-test, post-test, and follow-up). Inclusion criteria included informed consent, the ability to participate in group therapy sessions, a history of marital infidelity by the spouse (sexual and emotional infidelity), age 20 to 50 years, education from high school diploma to master's degree, not participating in other educational and therapeutic classes concurrently, and a

period of 3 to 6 months since the occurrence of marital infidelity. Exclusion criteria included unwillingness to continue participating in the study, not meeting the entry criteria, and absence in therapy sessions.

The intervention lasted two months, and the intervention group was randomly divided into two groups of 15. The experimental group underwent integrative couple therapy over 9 sessions (one 90-minute session per week). The control group received no intervention. A follow-up was conducted three months after the post-test. All participants were tested before and after the therapy sessions, responding to all survey items and demographic questions. The researcher committed to providing the intervention to the control group after the study's conclusion, adhering to ethical principles.

### 2.2. Measures

#### 2.2.1. Marital Intimacy

Developed by Thompson-Walker to measure couple intimacy. It consists of 17 items with scores ranging from 1 (never) to 7 (always), where higher scores indicate greater intimacy. The total scale reliability using Cronbach's alpha was 0.96, indicating acceptable reliability. The reliability of this questionnaire in this study was calculated using Cronbach's alpha as 0.79.

#### 2.2.2. Impulsiveness

Barratt Impulsiveness Scale (BIS-11): Developed by Barratt et al. (2004), this 30-item questionnaire assesses impulsiveness on a four-point scale (1-never/rarely; 2-sometimes; 3-often; 4-almost always/always), with 11 items scored inversely. The scale evaluates cognitive/attentional impulsiveness, motor impulsiveness, and non-planning impulsiveness. Its validity and reliability were confirmed with Cronbach's alpha coefficients ranging from 0.79 to 0.83. In this study, the reliability of the questionnaire reported using Cronbach's alpha was 0.78 (Yarmohammadi Vassel et al., 2015).

#### 2.2.3. Sexual Function

Created by Rosen et al. (2000) for assessing sexual function in women, this questionnaire contains 19 questions across six domains. Scores are calculated to reflect overall sexual function, with higher scores indicating better sexual function. In a study by Mohammadi et al. (2007), the scale's reliability was found to be 0.70 or higher, aligning with

findings from other research, indicating acceptable reliability (Rosen, 2000; Solmaz et al., 2023).

2.3. Data analysis

2.3.1. Integrative Couple Therapy

The intervention sessions for integrative couple therapy were conducted over 9 sessions of 90 minutes each, once a week (Solmaz et al., 2023; Solomon & Thompson, 2021).

2.4. Data analysis

Descriptive statistics included mean and standard deviation, while inferential statistics used repeated measures

ANOVA. To ensure the inferential test assumptions were met, the Levene, Shapiro-Wilk, homogeneity of regression, Box's M, and Mauchly's tests were conducted. Statistical analyses were performed using SPSS software version 22.

3. Findings and Results

Demographic findings indicated that there were no significant differences in age (P=0.275) between the integrative couple therapy group and the control group. Additionally, there were no significant differences in educational levels between the two groups (P=0.583), indicating homogeneity in these demographic variables.

**Table 1**

*Central Tendency and Dispersion Indices of Research Variables in Experimental and Control Groups*

Variable	Group	Pre-test (Mean, SD)	Post-test (Mean, SD)	Follow-up (Mean, SD)
Marital Intimacy	Integrative Couple Therapy	44.68, 8.25	50.68, 10.19	52.43, 11.15
	Control	42.75, 7.23	43.56, 8.09	43.37, 8.31
Sexual Function	Integrative Couple Therapy	14.50, 3.30	18.31, 4.19	19.62, 4.22
	Control	14.63, 3.11	14.25, 2.86	14.56, 2.82
Impulsivity	Integrative Couple Therapy	36.43, 6.54	31.37, 4.45	30.00, 4.59
	Control	35.75, 5.23	34.62, 5.25	34.31, 5.30

To assess the significance of differences in marital intimacy, sexual function, and impulsivity scores between the integrative couple therapy group and the control group, repeated measures ANOVA was utilized. Prior to conducting the repeated measures ANOVA, preconditions were checked through Box's M, Mauchly's test of sphericity, and Levene's test. The Box's M test was not significant for any of the variables, confirming the homogeneity of variance-covariance matrices. Similarly, non-significance in

Levene's test for all variables indicated equality of error variances across groups, and all dependent variables in the groups were equal. However, Mauchly's test of sphericity was significant (Mauchly's W=0.45; df=2; P<0.0001) for marital intimacy, sexual function, and impulsivity, suggesting that the sphericity assumption was violated. Therefore, the Greenhouse-Geisser correction was applied for the examination of within-subject effects and interaction effects.

**Table 2**

*Results of Multivariate Analysis of Variance*

Effect	Test Name	Value	F-test	df1	df2	Significance Level	Eta <sup>2</sup>
Time	Pillai's Trace	0.86	97.02	2	29	<0.0001	0.87
	Wilks' Lambda	0.13	97.02	2	29	<0.0001	0.87
	Hotelling's Trace	6.69	97.02	2	29	<0.0001	0.87
	Largest Root	6.69	97.02	2	29	<0.0001	0.87
Time * Group	Pillai's Trace	0.83	73.80	2	29	<0.0001	0.83
	Wilks' Lambda	0.16	73.80	2	29	<0.0001	0.83
	Hotelling's Trace	5.09	73.80	2	29	<0.0001	0.83
	Largest Root	5.09	73.80	2	29	<0.0001	0.83

As observed in Table 2, the significance levels of all tests were P<0.001, indicating significant differences in the effectiveness of integrative couple therapy on improving

marital intimacy, sexual function, and impulsivity between the experimental and control groups. It is noteworthy that Wilks' Lambda test also indicated a significant difference,

with a value of 0.16 and an F-test of 73.80, demonstrating significant differences between the experimental and control groups in terms of the effectiveness of integrative couple

therapy on improving marital intimacy, sexual function, and impulsivity at  $P < 0.001$ .

**Table 3**

*Repeated Measures ANOVA for Comparing Pre-test, Post-test, and Follow-up of Marital Intimacy, Sexual Function, and Impulsivity in Experimental and Control Groups*

Scale	Source of Effect	Sum of Squares	Degrees of Freedom	Mean Squares	F	Significance	Eta Squared
Sexual Function	Time	62.64	1.43	43.74	153.94	<0.0001	0.83
	Time * Group	43.14	1.43	30.13	106.02	<0.0001	0.77
	Group	22.04	1	22.04	5.54	0.001	0.15
Marital Intimacy	Time	66.89	1.43	46.62	115.22	<0.0001	0.79
	Time * Group	31.68	1.43	22.08	54.58	<0.0001	0.64
	Group	253.50	1	253.50	9.00	0.001	0.23
Impulsivity	Time	68.39	2	34.19	239.05	<0.0001	0.88
	Time * Group	47.02	2	26.99	164.34	<0.0001	0.84
	Group	40.04	1	40.04	7.09	0.001	0.19

The results in Table 3 indicate that the repeated measures ANOVA for the within-group factor (time) across groups was significant, meaning that both the effects of time and

group were significant. The interaction between group and time was also significant. Post-hoc Bonferroni tests were used for pairwise comparisons of the groups.

**Table 4**

*Bonferroni Post-hoc Test Results for Comparing Marital Intimacy, Sexual Function, and Impulsivity*

Variable	Stages	Post-test	Follow-up
Sexual Function	Pre-test	*3.59	*4.81
	Post-test	-	0.91
Marital Intimacy	Pre-test	*-6.59	*-7.90
	Post-test	-	-0.66
Impulsivity	Pre-test	*5.59	*5.93
	Post-test	-	1.37

\* $p < 0.01$

The findings in Table 4 reveal that the sexual function scores in the experimental group were higher in the post-test phase than in the control group. In other words, the integrative couple therapy group showed a high effectiveness in improving sexual function. Additionally, these results demonstrate that sexual function in the follow-up phase in the integrative couple therapy group significantly increased compared to the control group. The marital intimacy scores in the experimental group in the post-test phase were higher than in the control group, indicating that the integrative couple therapy group significantly improved marital intimacy. Furthermore, marital intimacy in the follow-up phase in the experimental group significantly increased compared to the control group. The impulsivity scores in the experimental group in the post-test phase were lower than in the control group, meaning that

the integrative couple therapy group significantly improved impulsivity. These results show that impulsivity in the follow-up phase in the experimental group significantly decreased compared to the control group.

#### 4. Discussion and Conclusion

The current study aimed to determine the effectiveness of integrative couple therapy on sexual function, marital intimacy, and impulsivity in women affected by marital infidelity. These findings are consistent with the previous research (Niazi et al., 2019; Panahi et al., 2018; Poursardar et al., 2019; Rodríguez-González et al., 2019; Salary Feyzabad et al., 2022; Scheinkman et al., 2022; Sevier et al., 2008; Snyder & Balderrama-Durbin, 2012; Solmaz et al., 2023; Solomon & Thompson, 2021; Young & Long, 1998).



One interpretation of these findings is that one of the techniques in integrative couple therapy is cognitive reappraisal, through which individuals become aware of the interplay between thoughts and emotions, and automatic maladaptive evaluations are identified (Panahi et al., 2018). Thus, it can be said that this technique in integrative couple therapy can lead to women affected by infidelity becoming aware of the inefficient cognitive processes that result in decreased sexual desire and performance, and by revising cognitive processes and setting aside ruminative thoughts, they experience better marital relations and, consequently, report better sexual function. Moreover, integrative couple therapy teaches individuals how to confront their unpleasant emotions and cognitions more adaptively (Solomon & Thompson, 2021). This therapy helps affected women to have a better understanding of the interplay of thoughts, feelings, and behaviors in creating internal and sexual emotional experiences. Affected women learn to gain a better awareness of their emotional and cognitive experiences, challenge negative cognitive assessments of their feelings and emotions, identify and amend emotion-driven behaviors, gain awareness and tolerance for negative feelings during introspective exposure, and confront their emotional experiences in situational and introspective contexts. All these skills, by correcting inefficient cognitive and emotional habits, lead to a reduction in the intensity of maladaptive cognitive and emotional experiences and restore cognitive and emotional processing to a functional level. This process also causes a change in cognitive processing with incomplete evidence, allowing affected women to display better individual and marital functioning, thereby improving their sexual function. Furthermore, the integrative couple therapy model is based on emotion regulation skills and is applicable to a wide range of emotional disorders and related factors (Snyder & Balderrama-Durbin, 2012).

Moreover, the cognitive techniques of integrative therapy, particularly the thought-stopping technique or helping to gain more control over cognitive disturbances, alongside contract setting to avoid revisiting the issue in couple communication patterns and practicing new behavioral patterns in confronting the problem both within and outside the group through role-play techniques, contribute significantly to reducing rumination in the affected individual. Cognitive restructuring, as a primary technique of integrative couple therapy, aids affected individuals in cognitive correction, allowing them to react based on positive cognitions instead of negative ones in

relation to the issue at hand (Panahi et al., 2018). Integrative couple therapy focuses primarily on behavioral changes and interactions between couples, directing their attention towards explanations for each other's behavior, standards, and mutual expectations from the marital relationship. Since the revelation of marital infidelity typically leads to emotional disturbances and negative interactions between couples, the structured strategies of integrative couple therapy help members of the relationship experience fewer emotional disturbances and, consequently, engage in fewer negative interactions. Therefore, the effectiveness of integrative couple therapy as a directive treatment for marital intimacy in women affected by marital infidelity is empirically validated.

Given the findings, it is observed that integrative couple therapy has high effectiveness in improving impulsivity. These results demonstrate that impulsivity in the follow-up phase in the integrative couple therapy group differed significantly from the control group. These findings are consistent with previous research.

Integrative couple therapy, originally developed for distressed couples with marital issues, uses structured and direct techniques including emotional and cognitive mindfulness, self-disclosure, and cognitive restructuring techniques, emphasizing emotional discharge in individuals affected by marital infidelity. These strategies help affected individuals to confront their negative thoughts and feelings more effectively, replace negative emotions and thoughts with positive ones, thereby experiencing fewer emotional disturbances, and consequently, reducing the intensity of negative interactions in their shared relationship (Zhang et al., 2021). Additionally, couples need to interact in a healthy and constructive manner, and integrative couple therapy, with an emphasis on behavioral techniques, helps couples to replace destructive communication patterns with constructive ones, making it highly suitable for achieving constructive interactions in marital relationships.

## 5. Limitations & Suggestions

Due to the research being conducted on women affected by marital infidelity who sought counseling in District 2 of Tehran, the results cannot be generalized to affected women in other cities or provinces. The accuracy of participants' responses might have been affected by repeated questionnaire administration (pre-test and post-test) under test conditions. Despite the researcher's efforts in precise therapy implementation, some challenges in working with

women affected by marital infidelity cannot be overlooked, which constitutes one of the limitations of the current study. The study was cross-sectional; future researchers are suggested to conduct qualitative and longitudinal studies. Future research should control for demographic variables such as economic status, religion, sect, and ethnicity. It is recommended that future studies include participants with education levels below high school diploma and a broader age range. Given the effectiveness of integrative couple therapy, it is recommended for use in counseling to improve sexual function, marital intimacy, and impulsivity in women affected by marital infidelity.

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### Declaration

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

### Declaration of Interest

The authors of this article declared no conflict of interest.

### Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants. This research was approved by the Islamic Azad University - Birjand Branch with the ethics ID 1402.004.IR.IAU.BIRJAND.REC.

### Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

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### Authors' Contributions

All authors equally contributed in this article.

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