




The Effectiveness of Couple Therapy Based on Reality Therapy and Emotion-Focused Therapy on Sexual Intimacy in Betrayed Couples

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E d i t o r	R e v i e w e r s
Izet Pehlic ¹  Full professor for Educational sciences, Islamic pedagogical faculty of the University of Zenica, Bosnia and Herzegovina izet.pehlic@unze.ba	Reviewer 1: Fahime Bahonar ¹  Department of counseling, Universty of Isfahan, Isfahan, Iran. Email: Fahime.bahonar@edu.ui.ac.ir Reviewer 2: Mahdi Khanjani ¹  Associate Professor, Department of Psychology, Allameh Tabataba'i University, Tehran, Iran. Email: khanjani_m@atu.ac.ir

1. Round 1

1.1. Reviewer 1

Reviewer:

In the first paragraph, the description “infidelity is among the most disruptive relational stressors...” is compelling; however, the introduction might benefit from a more explicit transition connecting the multifaceted nature of infidelity to the decision to study sexual intimacy as the primary dependent variable.

The rationale for conducting this comparative study is clear but somewhat implicit. The paragraph starting “The empirical base for couple therapy after affairs is still developing...” (p. 44) should explicitly state the gap—e.g., lack of head-to-head comparison between EFT and RTCT in post-infidelity contexts—before transitioning to study aims.

The final paragraph of the Introduction states: “We therefore anticipate time-by-group differences...” While theoretically informed, this prediction should be formalized into explicit hypotheses (H1, H2, etc.), including directional expectations for each group.

The section on Measures attributes the Sexual Intimacy Questionnaire to Batlani et al. (2010), whereas the introduction cites Bagarozzi (2001) as a conceptual foundation. The authors should clarify whether the scale is a Persian adaptation of Bagarozzi’s tool or an independently validated measure.

The reliability (Cronbach's $\alpha = 0.84$) is reported, but the paper does not indicate whether internal consistency was recalculated for the current sample. Reporting α for this study's data would confirm the instrument's reliability within this population.

The Discussion effectively attributes EFT's superiority to emotional reorganization but could deepen the explanation by linking specific therapeutic techniques (e.g., enactments, emotion labeling) to observed changes in intimacy metrics.

The sentence "The superiority of EFT over RTCT can also be understood through neurobiological and motivational frameworks..." is an insightful addition, but referencing concrete neurobiological studies or mechanisms (e.g., oxytocin, reward circuitry) would make the argument more empirically grounded.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The introduction effectively integrates Western and Iranian literature but could better articulate cultural moderating factors—particularly how Iranian sociocultural norms around sexuality and emotional expression might influence both the treatment process and outcomes.

When introducing both therapeutic models (pp. 41–42), the paper states that "EFT is rooted in attachment science..." and "Reality therapy... takes a different route." The contrast is theoretically clear but would be strengthened by summarizing their hypothesized mechanisms of change in a comparative table or conceptual model.

The paragraph beginning "Reality therapy, derived from choice theory..." (p. 42) includes several consecutive citations. While comprehensive, excessive citation stacking can obscure the narrative. Consider synthesizing key references to improve readability while maintaining academic rigor.

EFT was conducted in 12 sessions while RTCT consisted of 8 sessions. This imbalance in treatment exposure might confound outcome comparisons. The authors should justify the session disparity or statistically control for exposure duration in future analyses.

The Intervention section lacks information about therapist training, supervision, and fidelity monitoring. Including such details (e.g., use of fidelity checklists or session recordings) would increase confidence in the internal validity of the comparative findings.

The Data Analysis section is methodologically strong but includes a potential inconsistency: the reported F-values and degrees of freedom for the "Time \times Group" interaction ($F(1.175, 57)$) appear inconsistent with standard mixed-design ANOVA notation. Verify the statistical reporting for accuracy.

In Table 1, the mean post-test score for EFT (94.72) is much higher than RTCT (85.54). While this is noted narratively, the discussion could more explicitly interpret this difference in practical terms—perhaps referencing minimal clinically important difference thresholds for sexual intimacy scales.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.