

Comparing the Effectiveness of Emotion-Focused Cognitive Therapy and Acceptance and Commitment Therapy on Interpersonal Forgiveness in Women Affected by Marital Infidelity

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1. Round 1

1.1. Reviewer 1

Reviewer:

The rationale for selecting only women as participants is underdeveloped. The sentence “women affected by marital infidelity often experience chronic emotional pain” implies gender-specific vulnerability but does not provide a sufficiently rigorous justification for excluding men or couples. The authors should support this methodological decision using gender-based trauma or relational coping literature and clarify whether the findings are intended to generalize only to women in patriarchal cultural settings.

The theoretical distinction between “emotion-focused therapy” and “emotion-focused cognitive therapy” is not sufficiently clarified. In several sections, the manuscript uses these terms interchangeably, although they represent conceptually different intervention models. The authors should specify whether they employed Greenberg’s Emotion-Focused Therapy model or Power’s Emotion-Focused Cognitive Therapy framework and explicitly describe how emotional processing was integrated with cognitive restructuring. Without this clarification, the intervention lacks theoretical precision.

The literature review on ACT is comprehensive but insufficiently connected to the construct of forgiveness. For example, the sentence “ACT addresses these maladaptive coping patterns by encouraging acceptance of emotional experiences” explains emotional regulation mechanisms but does not adequately explain how acceptance processes specifically translate into interpersonal forgiveness after betrayal trauma. The authors should include more direct theoretical pathways linking cognitive defusion, experiential acceptance, and forgiveness outcomes.

The description of the ACT intervention contains a possible citation inconsistency. The manuscript refers to the “McKay and Lev Skin (2016)” protocol, but the reference list does not include this source. The authors should verify the intervention manual citation and ensure consistency between the intervention description and the reference section. This discrepancy raises concerns regarding protocol transparency and scholarly accuracy.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The final paragraph of the Introduction appropriately identifies the research gap; however, the novelty claim remains somewhat overstated. The sentence “few studies have directly compared these approaches” should be supported by a more systematic synthesis of comparative intervention studies. The authors are encouraged to provide a brief structured comparison table or at minimum summarize prior comparative findings to demonstrate precisely how the present study advances existing literature.

In the Methods section, the sampling procedure requires substantially greater detail. The authors state that “45 participants were selected through purposive sampling,” but the manuscript does not explain how counseling centers identified eligible participants, whether referrals were clinician-based, or how selection bias was minimized. The recruitment process should be described transparently to improve methodological reproducibility and external validity.

The justification for the sample size calculation is statistically unclear. The manuscript mentions “an effect size of 0.40, a confidence level of 0.95, and statistical power of 0.80,” but no software, statistical formula, or reference study is cited. Moreover, the rationale for estimating “five individuals per group” as dropout risk appears arbitrary. The authors should provide a formal power analysis explanation and indicate whether the final sample size adequately met repeated-measures ANCOVA assumptions.

The inclusion criterion “male-to-female infidelity” is problematic both conceptually and ethically because it assumes a gendered direction of betrayal without explanation. The authors should justify this restriction scientifically and discuss how cultural norms in the Iranian context may have influenced participant selection and interpretation of forgiveness. This issue is particularly important because cultural expectations surrounding marital loyalty may influence treatment outcomes.

The psychometric description of the Family Forgiveness Scale is incomplete. Although Cronbach’s alpha values are reported, no information is provided regarding construct validity, factor structure, or cultural adaptation procedures for the Iranian population. Additionally, the current study’s reliability coefficient of 0.78 is noticeably lower than the original validation study. The authors should discuss possible reasons for this discrepancy and report subscale reliabilities if applicable.

The intervention descriptions are informative but insufficiently standardized for replication purposes. For example, the emotion-focused cognitive therapy section states that “relaxation techniques, deep breathing exercises, progressive muscle relaxation, emotional exposure, and emotional role-playing were incorporated,” but the sequence, duration, and session-specific objectives are not described. The manuscript would be substantially strengthened by including a structured intervention table summarizing each session’s goals, techniques, and homework assignments.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.