


Effectiveness of Integrated Couples Therapy on Intimacy and Marital Forgiveness among Women Affected by Extramarital Relationships

Mohadeseh. Salehi¹, Bitanikoo Abkenar^{2*}, Maryam. Yeganeh Sarajari³

¹ M.A. Student, Department of Family Counseling, University of Mohaghegh Ardabili, Ardabil, Iran

² M.A., Department of Counseling, Hormozgan University, Hormozgan, Iran

³ M.A., Department of General Psychology, Science Research and Technology Branch (Hormozgan), Islamic Azad University, Hormozgan, Iran

* Corresponding author email address: bitanikoo66@gmail.com

Article Info

Article type:

Original Research

How to cite this article:

Salehi, M., Nikoo Abkenar, B., & Yeganeh Sarajari, M. (2023). Effectiveness of Integrated Couples Therapy on Intimacy and Marital Forgiveness among Women Affected by Extramarital Relationships. *Psychology of Woman Journal*, 4(3), 69-76.

<http://dx.doi.org/10.61838/kman.pwj.4.3.9>



© 2023 the authors. Published by KMAN Publication Inc. (KMANPUB), Ontario, Canada. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

ABSTRACT

Objective: One of the most significant factors that can disrupt family health is the breakdown of commitment and exclusivity in emotional and sexual relationships and the creation of extramarital relationships, or marital infidelity. The current study aimed to determine the effectiveness of integrated couples therapy on intimacy and marital forgiveness among women affected by marital infidelity.

Methods and Materials: This study was a quasi-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 sought counseling at Tehran counseling centers in 2023. Among them, 30 participants were selected through purposive sampling and were randomly assigned to either the experimental or control group. Data were collected using the Marital Intimacy Scale (Thompson & Walker, 1988) and the Marital Forgiveness Questionnaire (Rey et al., 2001). The experimental group received Emotion-Focused Therapy over 9 sessions (once a week for 90 minutes each). Data were analyzed using repeated measures ANOVA with SPSS version 22.

Findings: Results showed that integrated couples therapy significantly increased forgiveness ($F=5.54$, $P<0.001$) and marital intimacy ($F=9.37$, $P<0.001$) among women affected by marital infidelity.

Conclusion: It can be concluded that integrated couples therapy is effective in enhancing forgiveness and marital intimacy among women affected by marital infidelity and can be used to reduce psychological problems in these women.

Keywords: *Integrated couples therapy, marital forgiveness, marital intimacy, marital infidelity.*

1. Introduction

Researchers have defined intimacy in various ways, but the most common definition of intimacy is the feeling of self-disclosure, sharing one's inner self, and feeling

closeness with a spouse. Intimacy is also defined as the potential ability to build close relationships that encompass high levels of communication, closeness, and commitment (Mohammadi et al., 2022; Parsakia et al., 2023; Teymouri et al., 2020). Smith (2016) considers intimacy to include nine

dimensions: emotional, psychological, intellectual, sexual, physical, spiritual, aesthetic, social-recreational. The overall intensity of the need for intimacy and its nine dimensions varies from person to person. Individuals differ from one another in the intensity and type of intimacy based on individual differences. Considering these differences among individuals, it can be understood how a couple, whose overall need for intimacy is similar in intensity, may still be dissatisfied with sharing intimate experiences in their relationship (Ammari et al., 2023; 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 their needs. Couples entering therapy due to dissatisfaction with intimacy needs gradually learn that their differences in the intensity of overall needs and the intensity of need dimensions are simply related to individual differences (Mohammadi et al., 2022; Roddy et al., 2020).

The therapeutic model applicable in the treatment of marital infidelity and its resulting harms is integrated couples therapy, based on the trauma response theory (Christensen et al., 2020a). According to the integrated treatment model for infidelity, the treatment has three phases: 1. Identifying and understanding the traumatic effects of infidelity, 2. Understanding the factors leading to infidelity, and 3. Moving forward with this new understanding and necessary changes (Ammari et al., 2023). Empirical studies have supported this therapeutic model in reducing harms resulting from infidelity (Barraca et al., 2021; Barraca Mairal, 2015; Christensen & Doss, 2017; Christensen et al., 2020b; Dattilio, 2005; Finney & Tadros, 2019; Karimian et al., 2017; Poursardar et al., 2019; Snyder & Balderrama-Durbin, 2012; Sperry et al., 2006; Steele, 1997). Among these factors, considered as one of the threats to the foundation of today's families, is the reduction of marital forgiveness, defined as a serious change in decision-making to cease hostile behaviors towards an offending person. Reacting directly after unpleasant behavior may lead to negative interactions between spouses. In contrast, forgiveness prevents the occurrence of negative interaction cycles in the relationship (Ammari et al., 2023). Therefore, forgiveness enables the continuation of the relationship, the creation of intimacy after threats, and becomes an important tool for maintaining stable and long-term relationships (Ebrahimi et al., 2023; He et al., 2018).

Given the aforementioned issues and considering the nature of marital infidelity and its destructive effects on

couples' relationships, it seems reasonable that effective interventions should be implemented to help couples dealing with this harmful phenomenon to repair the attachment injuries resulting from this unfortunate event and to enhance spouses' loyalty to the marital bond with the resumption of secure bonds. Considering that in our country, there are spouses who, despite marital infidelity and its resulting harms, wish to repair their marital relationship and continue living with their unfaithful spouse, and in the process of adjusting to this situation and starting life with a new and more informed perspective, they need counseling services, the application of effective therapeutic interventions for addressing and treating the harms resulting from marital infidelity is of special importance. Given the statements mentioned and considering the successful application of integrated couples therapy in treating marital infidelity, and noting that no research has been designed and conducted in Iran regarding the effectiveness of integrated couples therapy in treating marital infidelity and its resulting harms, the present study was conducted with the aim of determining the effectiveness of integrated couples therapy on intimacy and marital forgiveness among women affected by marital infidelity.

2. Methods and Materials

2.1. Study Design and Participants

The present study was a quasi-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 sought counseling at Tehran counseling centers in the first six months of 2023. According to the counseling centers' officials, the total number of these individuals was 77. The study sample consisted of 30 women affected by marital infidelity who sought counseling at Tehran counseling centers in 2023, 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 30 individuals for each group using the 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 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 diploma to master's degree, not participating in other

educational and therapeutic classes concurrently, and a lapse of 3 to 6 months since the occurrence of marital infidelity. Exclusion criteria included lack of willingness to continue participating in the research, not meeting the entry criteria, and absence in therapy sessions.

The intervention lasted 2 months, and the intervention group was randomly divided into two groups of 15 people each. The experimental group underwent integrated couples therapy over 9 sessions (once a week for 90 minutes). The control group received no intervention. Three months after the post-test, a follow-up was conducted. For the execution of the research, all subjects responded to the research questionnaires and demographic questions before and after the therapeutic sessions. The researcher also committed to applying the intervention to the control group after the study's conclusion to adhere to ethical principles.

2.2. Measures

2.2.1. Marital Intimacy

This scale was developed by Thompson and Walker to measure couple intimacy. It consists of 17 questions, with scores ranging from 1 (never) to 7 (always), where higher scores indicate greater intimacy. The overall reliability coefficient of the scale using Cronbach's alpha was 0.96, indicating acceptable reliability. The reliability remained unaffected by the removal of any single item (Aziz et al., 2018). The reliability of this questionnaire in this study was obtained using Cronbach's alpha, reported to be 0.79.

2.2.2. Marital Forgiveness

This scale was developed by Ray et al. (2001) and consists of 15 Likert-type questions (from strongly agree to strongly disagree) designed to measure forgiveness towards the offending person. Factor analysis revealed two factors: one encompassing items that express negative thoughts, feelings, and behaviors towards the offender (absence of negativity) and the other representing positive thoughts, feelings, and behaviors (presence of positivity), thus measuring both negative and positive responses. Questions are scored from 1 to 5, with higher scores indicating greater forgiveness. Higher scores on this scale indicate more forgiveness towards the offender. There was a positive correlation between this scale and the Enright Forgiveness Inventory and positive correlations with measures of religiosity, spiritual health, hope, and social enthusiasm, and negative correlations with trait anger and state anger scales

($p < 0.001$, $n = 287$). Cronbach's alpha reliability was reported to be 0.87. The correlation obtained through item-total correlation was relatively high ($r = 0.50-0.75$) (Mohammadi et al., 2016).

2.3. Intervention

2.3.1. Integrated Couple Therapy

The intervention sessions of integrated couples therapy were developed and conducted over 9 sessions of 90 minutes each, once a week (Christensen et al., 2020a):

Session 1: Introduction and Assessment

The first session was dedicated to building rapport with the couples, explaining the therapy's goals, and assessing their current relationship status, with a focus on understanding the impact of infidelity. The therapist introduced the concept of integrated couples therapy, outlined the confidentiality norms, and encouraged open communication. Couples were asked to share their experiences and feelings about the infidelity, setting the stage for a collaborative therapeutic process.

Session 2: Understanding Marital Infidelity

This session aimed at exploring the factors leading to infidelity, acknowledging the emotions involved, and recognizing the effects on the relationship. Couples discussed the circumstances and personal vulnerabilities that contributed to the infidelity, facilitated by the therapist to foster empathy and a deeper understanding between partners.

Session 3: Addressing Emotional Responses

Focusing on the emotional aftermath of infidelity, the third session involved identifying and expressing the hurt, betrayal, and other intense emotions experienced by both partners. Therapeutic techniques were employed to help manage these emotions constructively, promoting emotional safety and validation within the therapeutic setting.

Session 4: Rebuilding Trust

In this session, the therapist worked with the couples to establish steps towards rebuilding trust. Activities included open discussions on what trust means to each partner, identifying behaviors that erode or build trust, and committing to specific, tangible actions that signify the rebuilding of trust.

Session 5: Enhancing Communication

This session concentrated on enhancing communication skills, with emphasis on effective listening, expressing needs and feelings without blame, and using "I" statements. Couples practiced these skills in session through guided

dialogues, aimed at improving mutual understanding and empathy.

Session 6: Intimacy Building

Focusing on rebuilding intimacy, this session encouraged couples to explore their emotional, physical, and sexual connection. The therapist guided couples through exercises designed to increase closeness and intimacy, such as shared activities or discussions about each other's needs and desires.

Session 7: Forgiveness and Letting Go

Dedicated to the process of forgiveness, couples were guided to understand forgiveness as a choice and an ongoing process. Discussions and exercises helped couples to express forgiveness, understand the difference between forgiveness and condoning the behavior, and acknowledge the pain while choosing to move forward.

Session 8: Planning for the Future

This session aimed at developing a future-oriented perspective, focusing on setting goals for the relationship and discussing strategies to maintain the improvements made during therapy. Couples worked together to outline their hopes and expectations for their future together, considering the tools and skills they have acquired.

Session 9: Closure and Follow-Up

The final session provided an opportunity for couples to review their journey, celebrate progress, and discuss any

remaining concerns. The therapist provided feedback and reinforced the importance of continued commitment to the relationship goals set during therapy. A plan for follow-up sessions or check-ins was also discussed to support the couple in maintaining their gains.

2.4. Data Analysis

Descriptive statistics used means and standard deviations, and inferential statistics used repeated measures ANOVA. To check the assumptions of inferential tests, Levene's test (for homogeneity of variances), Shapiro-Wilk test (for normal distribution of data), tests for homogeneity of regression, Mbox test, and Mauchly's test of sphericity were employed. Statistical analyses were performed using SPSS version 22.

3. Findings and Results

Demographic findings showed that there was no significant difference in age between the integrated couples therapy group and the control group ($P=0.275$). Similarly, there was no significant difference in educational levels between the two groups, indicating they were comparable in this regard ($P=0.583$).

Table 1

Central Tendency and Dispersion Indices for Research Variables in Experimental and Control Groups

Variable	Group	Pretest Mean (SD)	Posttest Mean (SD)	Follow-up Mean (SD)
Marital Intimacy	Experimental	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)
Marital Forgiveness	Experimental	28.20 (8.97)	30.33 (9.14)	30.28 (8.93)
	Control	28.86 (8.74)	29.60 (8.70)	29.41 (9.29)

To examine the significance of the difference between intimacy and marital forgiveness scores in the experimental and control groups, repeated measures analysis of variance was used. Before conducting the repeated measures ANOVA, the assumptions were checked using Box's M, Mauchly's sphericity, and Levene's test. Since Box's M test was not significant for any of the research variables, the assumption of homogeneity of variance-covariance matrices was met. The nonsignificance of all variables in Levene's test indicated that the assumption of equality of variances across

groups was met, and the variance of the dependent variable was equal across all groups. Finally, Mauchly's sphericity test was significant for the variables of intimacy and marital forgiveness, indicating that the assumption of sphericity (equality of variances of the differences) was not met (Mauchly's $W=0.45$; $df=2$; $p<0.0001$). Therefore, the Greenhouse-Geisser correction was used to examine the univariate test results for within-group effects and interaction effects.

Table 2

Results of Multivariate Analysis of Variance Test

Effect	Test Name	Value	F Test	df Hypothesis	df Error	Significance Level	Eta ²
Time	Pillai's Trace	0.364	7.062	1	29	0.001	0.364
	Wilks' Lambda	0.636	7.062	1	29	0.001	0.364
	Hotelling's Trace	0.573	7.062	1	29	0.001	0.364
	Roy's Largest Root	0.573	7.062	1	29	0.001	0.364
Time * Group	Pillai's Trace	1.117	16.017	1	29	0.001	0.558
	Wilks' Lambda	0.077	32.201	1	29	0.001	0.723
	Hotelling's Trace	9.516	57.096	1	29	0.001	0.826
	Roy's Largest Root	9.243	117.078	1	29	0.001	0.902

As observed in Table 2, the significance levels of all tests were significant at the 0.001 level, indicating that there was a significant difference in the mean scores for the effectiveness of integrated couples therapy on improving intimacy and marital forgiveness between the experimental and control groups. Notably, Wilks' Lambda with a value of

0.07 and an F-test of 32.20 showed a significant difference between the scores of the effectiveness of integrated couples therapy on improving intimacy and marital forgiveness in the experimental and control groups at the 0.001 significance level.

Table 3

Repeated Measures ANOVA for Comparing Pretest, Posttest, and Follow-up of Marital Intimacy and Forgiveness in Experimental and Control Groups

Scale	Source of Effect	Sum of Squares	Degrees of Freedom	Mean Square	F	Significance	Eta Squared
Marital Forgiveness	Time	62.64	1.43	43.74	153.94	0.001	0.83
	Time * Group	43.14	1.43	30.13	106.02	0.001	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	0.001	0.79
	Time * Group	31.68	1.43	22.08	54.58	0.001	0.64
	Group	253.50	1	253.50	9.37	0.001	0.23

The results in Table 3 indicate that the analysis of variance for the within-group factor (time) was significant. This means that the effect of time and group was significant.

The interaction between group and time was also significant. Post-hoc comparisons using the Bonferroni test were conducted for pairwise group comparisons.

Table 4

Bonferroni Post Hoc Test Results for Comparing Marital Intimacy and Forgiveness

Variable	Comparisons	Posttest	Follow-up
Marital Forgiveness	Pretest	*3.59	*4.81
	Posttest	-	0.91
Marital Intimacy	Pretest	*-6.59	*-7.90
	Posttest	-	-0.66

*p<0.01

Results in Table 4 show that the marital forgiveness score in the experimental group at the post-test stage was higher than that of the control group. In other words, the integrated couples therapy group had a high effectiveness on improving marital forgiveness. Furthermore, these results indicate that marital forgiveness in the follow-up stage in the integrated couples therapy group significantly increased compared to the control group. The intimacy score in the experimental group at the post-test stage was higher than that of the

control group. In other words, the integrated couples therapy group had a high effectiveness on improving marital intimacy. Additionally, these results indicate that marital intimacy in the follow-up stage in the experimental group significantly increased compared to the control group.

4. Discussion and Conclusion

The current study aimed to determine the effectiveness of integrated couples therapy on forgiveness and marital

intimacy among women affected by marital infidelity. According to the findings, the integrated couples therapy group demonstrated high effectiveness in improving marital intimacy. Also, these results indicate that marital intimacy in the follow-up phase in the integrated couples therapy group significantly increased compared to the control group. These findings are consistent with the previous research (Ammari et al., 2023; Barraca et al., 2021; Barraca Mairal, 2015; Christensen & Doss, 2017; Christensen et al., 2020a; Christensen et al., 2020b; Dattilio, 2005; Finney & Tadros, 2019; Karimian et al., 2017; Poursardar et al., 2019; Snyder & Balderrama-Durbin, 2012; Sperry et al., 2006; Steele, 1997).

In explaining this finding, it can be said that marital infidelity leads to various damages in the relationship and its members. Damages that manifest as emotional, cognitive, and behavioral disturbances in couple relationships. Situations such as severe emotional turmoil, anger, sorrow, cognitive disturbance in the affected individual, blame, destructive interaction patterns, humiliation, and insults in the relationship ultimately manifest in the couple's relationship. Integrated therapy strategies initially focus on identifying negative emotions and evoking the feelings of relationship members in the group with the help of techniques based on emotional mindfulness in the group, as well as providing a platform for group exchanges in the design of feelings to help with the exclusive mindset of the problem ("only I am facing this problem") helps individuals experience relatively less emotional turmoil and as a result, the intensity of negative interactions of relationship members in their shared relationship is reduced (Snyder & Balderrama-Durbin, 2012). It can also be said that cognitive techniques of integrated therapy, especially the thought-stopping technique or helping to control and manage cognitive disturbances alongside the contract setting technique for not returning to the issue occurred in couple communication patterns and practicing new behavioral patterns in dealing with the problem occurred in and out of the group with the help of techniques such as role-playing, role exchange, in connection with preventing further rumination in the affected individual. Cognitive reconstruction techniques, as one of the main and fundamental techniques of integrated couples therapy, help affected individuals to achieve cognitive correction and consequently react to the relationship and the issue occurred based on positive cognitions instead of negative ones (Finney & Tadros, 2019). Integrated couples therapy primarily focuses on behavioral changes and interactions of

couples and draws couples' attention to the explanations they have for each other's behavior and to the standards and mutual expectations they have from their marital relationship. Since the revelation of marital infidelity mostly leads to emotional turmoil and negative interactions in the couple's relationship, the strategies or direct structure of integrated couples therapy help members of the relationship experience less emotional turmoil and consequently have fewer negative interactions with each other. Therefore, the effectiveness of integrated couples therapy as a directive treatment on marital intimacy among women affected by marital infidelity has been correctly confirmed by research.

Given the findings, it is observed that the integrated couples therapy group had a high effectiveness on improving marital forgiveness. Also, these results indicate that marital forgiveness in the follow-up phase in the integrated couples therapy group significantly increased compared to the control group. These findings are consistent with the mention studies.

In explaining this finding, it can be said that one of the techniques in integrated couples therapy is cognitive reappraisal, through which the individual becomes aware of the reciprocal impact between thoughts and emotions, and automatic incompatible evaluations are identified (Karimian et al., 2017); therefore, it can be said that this technique in integrated couples therapy can cause affected women to become aware of inefficient cognitive processes leading to a decrease in forgiveness and, by revising cognitive processes and abandoning rumination thoughts, experience a better marital relationship and consequently report better marital forgiveness. Integrated couples therapy also teaches individuals how to confront their unpleasant emotions and cognitions and respond to their emotions and cognitions in a more compatible way (Christensen et al., 2020a). This treatment helps affected women have a better understanding of the interaction of thoughts, feelings, and behaviors in creating internal emotional experiences. Affected women learn to gain a better awareness of their emotional and cognitive experiences, challenge negative cognitive evaluations of their feelings and negative emotions, identify and correct emotion-driven behaviors, gain awareness and tolerance of negative feelings during internal exposure, and face their emotional experiences in situational and internal contexts. All these skills, by correcting inefficient cognitive and emotional habits, lead to a reduction in the intensity of incompatible cognitive and emotional experiences and return cognitive and emotional processing to a functional level. This process also causes, with changes in cognitive

processing with incomplete evidence, affected women to show better individual and marital functioning and consequently improve their marital forgiveness.

5. Limitations & Suggestions

Due to the study being conducted on women affected by marital infidelity seeking counseling in Tehran, it is not possible to generalize the results to women affected by marital infidelity in other cities and provinces. Subjects may have been influenced by the test conditions due to repeated responses to a questionnaire (pre-test and post-test), reducing their accuracy in responding. Despite the researcher's efforts to accurately implement the treatment plan, facing some challenges when working with women affected by marital infidelity cannot be overlooked, which was among the limitations of the current study. The current research was conducted cross-sectionally, and it is recommended that future researchers conduct qualitative and longitudinal studies. It is suggested that future research control for demographic variables such as economic status, religion, denomination, and ethnicity. It is recommended that future studies involve subjects with education levels below a diploma and a broader age range. Given the effectiveness of integrated couples therapy, it is suggested to use this method in counseling to improve marital forgiveness, marital intimacy, and impulsivity among women affected by marital infidelity.

References

- Ammari, S., Deyreh, E., Keykhosrovani, M., & Ganji, K. (2023). The Effectiveness of Couple Therapy on Depressive Symptoms and Sexual Function in Women Affected by Infidelity. *Razi Journal of Medical Sciences*, 29(7), 54-63. <https://www.magiran.com/paper/2520730>
- Arsalaneh, F., Habibi, M., Salimi, A., Shakarami, M., & Davarniya, R. (2018). Effectiveness of Inducing Positive Affect on Improvement Autobiographical Memory in Depressive Patients. *muk-zanko*, 18(59), 68-79. <http://zanko.muk.ac.ir/article-1-197-en.html>
- Aziz, N. N. A., Hassan, N. A., & Buhari, N. (2018). Intimacy in Marital Relationship: Effect of Internet Usage. *Malaysian Journal of Society and Space*. <https://doi.org/10.17576/geo-2018-1403-02>
- Barraca, J., Nieto, E., & Polanski, T. (2021). An Integrative Behavioral Couple Therapy (IBCT)-Based Conflict Prevention Program: A Pre-Pilot Study with Non-Clinical Couples. *International journal of environmental research and public health*, 18(19), 9981. <https://doi.org/10.3390/ijerph18199981>
- Barraca Mairal, J. (2015). Integrative Behavioral Couple Therapy (IBCT) as a third-wave therapy. *Psicothema*, 27(Número 1), 13-18. <https://reunido.uniovi.es/index.php/PST/article/view/10622>
- Christensen, A., & Doss, B. D. (2017). Integrative behavioral couple therapy. *Current opinion in psychology*, 13, 111-114. <https://doi.org/https://doi.org/10.1016/j.copsyc.2016.04.022>
- Christensen, A., Doss, B. D., & Jacobson, N. S. (2020a). *Integrative behavioral couple therapy: A Therapist's Guide to Creating Acceptance and Change* (2nd ed.). WW Norton. <https://www.amazon.com/Integrative-Behavioral-Couple-Therapy-Therapists/dp/0393713636>
- Christensen, A., Doss, B. D., & Jacobson, N. S. (2020b). *Integrative behavioral couple therapy: A therapist's guide to creating acceptance and change*. WW Norton & Company. <https://cir.nii.ac.jp/crid/1130294319493133850>
- Dattilio, F. M. (2005). INTRODUCTION TO THE SPECIAL SECTION: THE ROLE OF COGNITIVE-BEHAVIORAL INTERVENTIONS IN COUPLE AND FAMILY THERAPY. *Journal of marital and family therapy*, 31(1), 7-13. <https://doi.org/10.1111/j.1752-0606.2005.tb01539.x>
- Ebrahimi, E., Zargham Hajebi, M., & Navabi Nejad, S. (2023). The role of loneliness, sexual satisfaction and forgiveness in predicting depression in women affected by infidelity. *Journal of Applied Family Therapy*, 4(1), 134-156. <https://doi.org/10.22034/AFTJ.2023.335698.1507>
- Finney, N., & Tadros, E. (2019). Integration of Structural Family Therapy and Dialectical Behavior Therapy With High-Conflict Couples. *The Family Journal*, 27(1), 31-36. <https://doi.org/10.1177/1066480718803344>

Acknowledgments

We would like to express our appreciation and gratitude to all those who cooperated in carrying out this study.

Declaration of Interest

The authors of this article declared no conflict of interest.

Ethics Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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.

Funding

This research was carried out independently with personal funding and without the financial support of any governmental or private institution or organization.

Authors' Contributions

All authors contributed equally to this article.

- He, Q., Zhong, M., Tong, W., Lan, J., Li, X., Ju, X., & Fang, X. (2018). Forgiveness, marital quality, and marital stability in the early years of Chinese marriage: An actor-partner interdependence mediation model. *Frontiers in psychology*, 9, 1520. <https://doi.org/10.3389/fpsyg.2018.01520>
- Karimian, N., Zarei, E., Mohammadi, K., & Christensen, A. (2017). Integrative treatments, Sex and Couple Therapy: study and comparison of the effectiveness of integrative behavioral couple therapy (IBCT) and redecision therapy in improvement of marital commitment of competing couples. *Family Counseling and Psychotherapy*, 6(2), 21-38. https://fcp.uok.ac.ir/article_44536_f149dfbdf445f9185afea1df135deb2b.pdf
- Mohammadi, A., Imani, S., & Khoshkonesh, A. (2022). The Comparing Effectiveness of Narrative Exposure Therapy and Emotion-Focused Couple Therapy on Loneliness and Marital Intimacy among Women Affected Infidelity. *ijpn*, 10(5), 70-81. <https://doi.org/https://doi.org/10.22034/IJPN.10.5.4>
- Mohammadi, B., heydarnia, a., & Abbasi, H. (2016). Predicting Marital Commitment Basid on Marital Intimacy and Forgiveness [Research]. *Rooyesh-e-Ravanshenasi Journal(RRJ)*, 5(3), 31-50. <http://frooyesh.ir/article-1-151-en.html>
- Parsakia, K., Farzad, V., & Rostami, M. (2023). The mediating role of attachment styles in the relationship between marital intimacy and self-differentiation in couples. *Applied Family Therapy Journal (AFTJ)*, 4(1), 589-607. <https://doi.org/10.61838/kman.aftj.4.1.29>
- Poursardar, F., Sadeghi, M., Goodarzi, C., & Roozbehani, M. (2019). Integrative treatments and couple therapy: Comparison of the effectiveness of integrative approaches, therapy emotionally focused couple therapy and therapy integrative behavioral couple therapy on forgiveness in couples with marital conflict. *Family Counseling and Psychotherapy*, 8(2), 69-96. <https://doi.org/10.34785/J015.2018.004>
- Roddy, M. K., Walsh, L. M., Rothman, K., Hatch, S. G., & Doss, B. D. (2020). Meta-analysis of couple therapy: Effects across outcomes, designs, timeframes, and other moderators. *J Consult Clin Psychol*, 88(7), 583-596. <https://doi.org/10.1037/ccp0000514>
- Snyder, D. K., & Balderrama-Durbin, C. (2012). Integrative Approaches to Couple Therapy: Implications for Clinical Practice and Research. *Behavior therapy*, 43(1), 13-24. <https://doi.org/https://doi.org/10.1016/j.beth.2011.03.004>
- Sperry, L., Carlson, J., & Peluso, P. (2006). *Couples Therapy: Integrating Theory and Technique*. https://www.researchgate.net/publication/301566810_Couples_Therapy_Integrating_Theory_and_Technique
- Steele, J. J. (1997). *Applying an integration of solution focused therapy and family of origin therapy models in working with couples* <https://mspace.lib.umanitoba.ca/handle/1993/1647>
- Teymouri, Z., Mojtabaei, M., & Rezazadeh, S. M. R. (2020). The Effectiveness of Emotionally Focused Couple Therapy on Emotion Regulation, Anger Rumination, and Marital Intimacy in Women Affected by Spouse Infidelity. *gums-cjhr*, 5(4), 78-82. <https://doi.org/10.52547/cjhr.5.4.78>