



Effectiveness of Emotion-Focused Couple Therapy in Marital Burnout, Marital Forgiveness, and Communication Styles of Couples Affected by Extramarital Relationships

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Abstract

Background and Objective: Extramarital affairs or marital infidelity can be considered one of the most complex and traumatic emotional problems between couples. This study aimed to determine the effectiveness of emotion-focused couple therapy in burnout, marital forgiveness, and communication styles of couples affected by extramarital relationships.

Materials and Methods: This quasi-experimental study was conducted based on an applied research method and pretest-posttest design with a control group. The statistical population included all people referred to counseling centers in Sari, Iran, with extramarital affairs between April and June 2020. The study sample consisted of 30 individuals selected by convenient sampling method and randomly divided into an experimental (emotion-focused couple therapy; n=15) and a control group (n=15). The data were collected using the Couple Burnout Measure (CBM), Forgiveness Questionnaire, and Communication Styles Questionnaire. Subsequently, the obtained data were analyzed in SPSS software (version 22) through univariate analysis of covariance.

Results: The findings showed that emotion-focused couple therapy had a statistically significant effect on the subjects regarding the Mutual Constructive Communication ($F=7.64$; $P<0.001$), Expectant Male/Female Sidetaker ($F=74.18$; $P<0.001$), Expectant Female/Male Sidetaker ($F=47.11$; $P<0.001$), Mutual Avoidance Communication ($F=59.97$; $P<0.001$), Forgiveness ($F=80.15$; $P<0.001$) and Marital Boredom ($F=347.92$; $P<0.001$).

Conclusions: It can be concluded that emotion-focused couple therapy was effective in burnout, marital forgiveness, and communication styles of couples affected by extramarital relationships.

Keywords: Couple therapy, Emotions, Extramarital relations, Forgiveness, Marriage

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Background

The relationship between couples is one of the useful components in their satisfaction and dissatisfaction that is divided into several forms. Communication is one of the oldest and best human outputs [1]. Today, despite cultural changes and lifestyles, many people lack essential abilities in dealing with life issues. This has made them vulnerable in the face of difficulties, as well as the problems of daily life and its requirements [2]. When two people live together as a couple due to the nature of the spouse's interaction, there are times when disagreements arise or their needs go unanswered resulting in angry spouses. Therefore, men and women should be able to communicate effectively; however, they would be prepared to deal with it through a systematic problem-solving

strategy. The lack of a healthy relationship between couples upsets them, and along with other conditions, weakens the family [3].

Forgiveness is a variable that is regarded as an important and useful aspect in improving the attachment damage caused by marital infidelity and is directly related to promoting public health and safe bonds between couples [4]. When forgiveness occurs in response to the disruptive damage of an intimate relationship (extramarital affair), wounds of intimacy are healed, trust in the relationship is restored, and secure bonds between damaged couples are active. Moreover, forgiveness can have beneficial consequences for the relationship, such as improvement of communication processes and resolving conflicts

between the affected couples, which will result in the repair of damaged relationships and the creation of safe interactions [5].

The chief complaint of many people who refer to psychologists and family counseling centers is to have suspicions about their spouse or their apparent extramarital relationship. Various factors, such as self-separation and marital burnout, can affect the relationship and are effective in marriage [6]. In the theory of self-segregation, the family is continuously struggling to balance the feeling with its unity and segregation among members. Anxiety arises when families engage with forces focused on integration and individuality. If agreement prevails, the family is led to higher emotional functioning, reduced self-esteem, and endangered mental health, thereby increasing extramarital affairs in couples [7]. Burnout, on the other hand, occurs when couples realize that despite their best efforts, their relationship does not and will not give meaning to life. When a couple distances themselves from love and infatuation, any sad incident seems to justify their spouse's negative labeling. In this situation, the husband is considered insensitive even if he does not show sensitivity once. If the wife does not meet the expectation of her husband's love even once, she becomes unkind. Therefore, these factors can play a decisive role in increasing extramarital affairs [8].

One of the treatment approaches that seem useful on the problems caused by couples' extramarital affairs is emotion-focused couple therapy. The first basic premise of emotion therapy states that the most influential factor in adult intimacy is the emotional chains between them. Therefore, the main issue of marital conflicts should be the security of this chain based on the two factors of accountability and availability [9]. Injuries, such as infidelity and extramarital affairs of spouses in any society, can be somewhat different from those of other nations; accordingly, it is necessary to take measures and treatment strategies for such injuries according to their cultural, human, and social characteristics.

The present study attempted to teach people through psychotherapy interventions to discharge negative emotions and feelings, heal past wounds, and make changes in their lives using forgiveness to create more love and meaning, as well as continue the married life.

Objectives

this study aimed to determine the effectiveness of emotion-oriented couple therapy in burnout, marital forgiveness, and communication styles (expectation/withdrawal communication, reciprocal constructive

communication, and reciprocal avoidance relationship) of couples affected by extramarital relationships.

Materials and Methods

This quasi-experimental study was conducted based on an applied research method using a pretest-posttest design with a control group. The statistical population included all people referred to the counseling centers of Bahar, Bavar, and Elixir in Sari, Iran, with extramarital affairs between April and June 2020. The study samples included people who referred to the counseling centers with the extramarital affairs of their spouses in Sari, Iran. A control group (n=15) was also included in this study. Individuals who volunteered to participate in the study were asked to complete the research questionnaires at the pretest-posttest stages. A follow-up test was also performed after two months. The inclusion criteria were: 1) willingness to participate in the study, 2) ability to attend group therapy sessions, 3) no history of chronic physical illness, 4) age range from 25 to 50 years, and 5) lack of participation in any other psychological training classes at the same time. On the other hand, the participants who were absent in more than two sessions of therapy were excluded from the study. The study protocol was approved by the Ethics Committee of Bojnourd Branch, Islamic Azad University, Bojnourd, Iran (IR.IAU.BOJNOURD.REC.1399.007).

Couple Burnout Measure

The Couple Burnout Measure is a self-assessment tool designed by Pines in 1996 to measure the degree of marital burnout among couples. This 20-item questionnaire includes three main components of physical fatigue (e.g., feeling tired, lethargic and having sleep disorders), emotional exhaustion (e.g., feeling depressed, hopeless, trapped), and mental exhaustion (e.g., feeling worthless, frustrated, and anger toward spouse). All of these are rated on a seven-point Likert scale. Levels 1 and 7 indicate a lack of and high levels of experience, respectively [10]. Evaluation of the validity coefficient of the Marital Burnout Scale in different studies showed an internal consistency among the variables in the range of 0.84 and 0.90. Navidi [11] calculated the validity of this scale at 0.86 using Cronbach's alpha among 240 people in Iran.

Forgiveness Questionnaire

This scale was developed by Ray et al. in 2001 to measure forgiveness for the offender. It consisted of 15 items which are rated on a five-point Likert

scale of strongly agree=1 to strongly disagree=5. High and low scores demonstrate forgiveness and no forgiveness, respectively. Moreover, higher scores on this scale indicate more forgiveness than an annoyance. A positive correlation has been obtained between this scale and the Enright Forgiveness Inventory. On the other hand, there is a negative association between this scale and the scales of religiosity, spiritual health, hope, social desire, positive relationship, anger traits, and anger scales ($P < 0.001$). The Cronbach's alpha credit was reported to be 0.87, and the correlation obtained by the matching method was relatively high ($r = 0.75-0.50$) [12].

Communication Patterns Questionnaire

This self-assessment tool was designed to assess the couples' marital relationship. The Communication Patterns Questionnaire consists of 35 questions and assesses couples' behaviors during the three stages of marital conflict. Couples rate each behavior on a nine-point Likert scale ranging from 1 (not at all possible) to 9 (very

possible). This questionnaire consists of three subscales, namely expectation/ withdrawal relationship, reciprocal constructive relationship, and reciprocal avoidance relationship. The expectation/withdrawal relationship includes two parts of expected man/woman resigns and expected woman/man resigns. Cronbach's alpha of this tool was obtained at $r = 0.96$ in a study conducted by Zandipour [13].

The obtained data were analyzed in SPSS software (version 22) through descriptive and inferential statistics. Furthermore, mean and standard deviation indices were used to describe the data. Multivariate covariance analysis was also applied in inferential analysis after testing the validity of the underlying assumptions.

Results

To better understand the nature of the group that has been studied in the study and to be more familiar with the study variables, it is necessary to describe these data before the statistical data are analyzed.

Table 1. Structure of emotion-focused therapy sessions

Session	Meeting	Meeting Content
Pre-meeting	Preliminary Session	Initial interview, stating the rules, goals, and number of meetings and closing the contract of treatment, performing pre-tests
1	Establishing a therapeutic relationship	Exploring and presenting an emotionally-based approach, establishing a therapeutic relationship, and creating a sense of security, support, understanding
2	An investigation into the incident (marital infidelity)	Summarizing the pre-session and reviewing the task of the prior session, encouraging the person's wife not to disown the wife's feelings and not understating the subject.
3	The effect of marital infidelity on safe attachment	Summary of the pre-session and task review of the previous session, describing the event by a spouse who has committed marital infidelity.
4	Problem reframing based on attachment needs and cycle infrastructure excitements	Summary of pre-session and task review of pre-session, problem reframing, increasing familiarity with attachment needs, and aspects of self-renunciation.
5	Increasing the acceptance of each couple, compared to another experience	Summary of pre-session and task assessment of pre-session, increasing acceptance of each couple from other couples' experience.
6	Facilitating the expression of needs and demands for the regeneration of interaction	Facilitating the expression of needs and demands, creating bonding events, receiving feedback, and providing the task.
7	Facilitating the emergence of new solutions to old problems	Summary of pre-session and task review of pre-session, creating new solutions to old problems.
8	Strengthening new positions and cycles of attachment behavior and ending treatment	Summary of pre-session and task review of pre-session, consolidation of new positions, and cycles of attachment behavior, implementation of post-tests, and time of follow-up stage.

Table 2. Mean and standard deviation of the research variables

Variable	Step	Control		Experimental	
		M	SD	M	SD
Mutual Constructive Communication	Pretest	19.62	5.65	20.25	2.90
	Posttest	22.75	5.57	25.68	2.08
Expectant Male/Female Sidetaker	Pretest	18.62	4.24	16.50	4.70
	Posttest	19.25	4.17	14.87	4.16
Expectant Female/Male Sidetaker	Pretest	15.31	4.28	16.75	4.52
	Posttest	15.75	4.89	14.37	3.96
Mutual Avoidance Communication	Pretest	22.06	3.10	20.68	2.27
	Posttest	23.43	2.44	19.37	2.24
Forgiveness	Pretest	37.43	6.06	37.68	8.61
	Posttest	38.06	7.43	54.31	11.23
Marital Boredom	Pretest	94.18	10.02	101.25	8.49
	Posttest	102.00	8.50	90.25	8.08

Table 3. Multivariate analysis of covariance, posttest scores of research variables with emotion-based program training and pretest covariance scores

		Df	Ss	Ms	F	Sig	η^2
Group Effect	Mutual Constructive Communication	1	49.18	49.18	7.64	0.01	0.22
	Expectant Male/Female Sidetaker	1	54.08	54.08	74.18	0.0001	0.74
	Expectant Female/Male Sidetaker	1	59.56	59.56	47.11	0.0001	0.64
	Mutual Avoidance Communication	1	75.59	75.59	59.97	0.0001	0.69
	Forgiveness	1	1834.21	1834.21	80.15	0.0001	0.74
	Marital Boredom	1	2190.08	2190.08	347.92	0.0001	0.92

The results of the Kolmogorov-Smirnov test showed a normal data distribution in the two groups at pretest and posttest stages. Furthermore, the F-Levin level for an equal variance of research variables in the experimental and control groups at the posttest showed that the variance of research components was unequal among the groups; accordingly, the covariance analysis condition F was established in this study.

As can be seen in Table 3, the effect of emotion-focused training was significant on the subjects regarding the Mutual Constructive Communication (F=7.64; P<0.001), Expectant Male/Female Sidetaker (F=74.18; P<0.001), Expectant Female/Male Sidetaker (F=47.11; P<0.001), Mutual Avoidance Communication (F=59.97; P<0.001), Forgiveness (F=80.15; P<0.001) and Marital Boredom (F=347.92; P<0.001). The eta-squared value also showed that emotion-based education explained Mutual Constructive Communication (22%), Expectant Male/Female Sidetaker (74%), Expectant Female/Male Sidetaker (64%), Mutual Avoidance Communication (69%), Forgiveness (74%), and Marital Boredom (92%).

Discussion

The results of this study showed that emotion-focused couple therapy was effective in boredom, marital forgiveness, and communication styles of the couples affected by extramarital relationships. Moreover, the findings were consistent with the results of the studies performed by Vagipili and Reese [15], as well as Hawasi, Zahra Kar, and Mohsenzadeh [16].

Regarding the effectiveness of emotion-focused therapy in research variables, it can be said that this kind of therapy is a treatment method whose primary emphasis is on the participation of emotions in permanent patterns of incompatibility in disturbed couples. This treatment aims to reveal the vulnerable feelings in each couple and facilitate their ability to create these emotions in safe and loving ways [16]. It is believed that processing these emotions in a safe context creates healthier and newer interaction patterns that calm the level of turmoil, thereby increasing love, intimacy, and more satisfying communication. One of the substantial

concerns reported by the couples participating in this study was the symptoms of marital incompatibility, disruption of appropriate communication styles, and a lack of forgiveness.

During the sessions, the subjects were helped to meet their psychological needs, and improve each other's marital functions, such as security, partnership, comfort, and sexual intimacy. In increasing the positive experiences of couples with each other, positive emotions also returned to their relationship. They also increased their hope for positive interactions in the future and recalled positive memories of the past more efficiently [17]. According to this approach, when people feel that their spouse is not available and responsive and is critical or rejecting, they often use emotion regulation strategies that inadvertently perpetuate the relationship disorder, or intensify and weaken the bond between them [18]. In the second phase (reconstruction), the couples try to discover and share their attachment fears and desires and gradually find ways to articulate those fears and hopes in some way clearly. The expression of the feelings results in closeness, emotional access, and responsiveness, which facilitates a safer bond. The couple then enters stage three, which is to consolidate the benefits of treatment. Changes in emotion-focused therapy occur when therapists help spouses change the destructive relationship [18]. When the negative cycle is disrupted, and the responses begin to change, a more positive period occurs that helps the couple move toward a safer bond. The goal of emotion therapy is to make spouses access, express (self-disclose), and reprocess the emotional responses that underlie their negative interaction pattern. Spouses can then send out new emotional cues that allow constructive interactive models to move toward greater accessibility and responsiveness, resulting in a safer and more satisfying bond [19].

In the middle stage of the treatment using emotion-focused therapy, two crucial events (regarded as transformation points and of significance) emerged. The first event is "reclusive conflict." In this case, he (the withdrawn couple) changes his interactive status and becomes active to improve the relationship and takes the position of availability for

his wife. A quiet and always distant spouse may become angry at these steps and express his or her need to be respected and supported in the relationship so that their spouse has a chance to respond to his or her expressed needs. The second event is the "softening" of a spouse who was previously hyperactive and critical and can now take the risk of expressing his or her needs and vulnerabilities. He is now beginning to trust his wife again. Research on the process of change has shown that this event is one of the most critical predictors in reducing marital turmoil [20]. In the eighth step of treatment, the couple's daily routines were no longer the hotbed of their conflicts. Due to the atmosphere of security and trust created, the couple explored new solutions and did not have an intense emotional conflict.

Instead of spending their time on negative emotions, couples could use their problem-solving skills beneficially and effectively. As the communication context changes, the couple's understanding of the nature of the problems also changes, and work is being done to improve this understanding. Instead of teaching skills, couples enter the treatment for each other in the role of therapist. Couples discuss the obstacles to their happiness in the past. The therapist deepens the conversation and reveals the couple's attachment needs that have caused the conflict. Furthermore, the therapist sought to identify barriers that block desirable responses among couples and help couples face them. In the final steps of this stage, orbital attachment events that resembled the first examples of the attachment in a relationship emerged, and spouses began a new interactive cycle with the characteristics of "re-engagement" and "accountability." These types of attachment-oriented events (usually occurring in step seven) were significant because of the healing of past injuries and the redefinition of the nature of attachment.

Conclusion

It can be concluded that emotion-oriented couple therapy was effective in burnout, marital forgiveness, and communication styles of couples affected by extramarital relationships.

Ethical Considerations

All ethical principles were considered in this study. The participants were informed about the purpose of the study and its stages. Moreover, informed consent was obtained from the subjects. They were also assured of the confidentiality of their information. In addition, the subjects were free to withdraw from the study if desired. They were also informed that they would be provided with the results of the research.

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Authors' contributions

Conceptualization [Seyedeh Taraneh Alavimoghadam]; Methodology [Abdollah Mafakheri]; Investigation [Ali Jahangiri]; Writing- Original Draft [Ali Jahangiri]; Writing-Review and Editing, Author names [all author]; Funding Acquisition, [all author]; Resources, [all author]; Supervision, [Abdollah Mafakheri].

Conflict of interest

The authors declare that they have no conflict of interest.

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