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# The Effectiveness of Emotion-Focused Therapy on Marital Disenchantment and Quality of Life in Couples with Marital Conflicts

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## ABSTRACT

**Objective:** This study aimed to evaluate the effectiveness of Emotion-Focused Therapy in reducing marital disenchantment and improving quality of life in couples experiencing marital conflict.

**Methods and Materials:** A quasi-experimental pre-test–post-test control group design was employed. The sample consisted of 30 participants (15 in the experimental group and 15 in the control group) referred to counseling centers in Tehran, Iran. Participants were selected through convenience sampling and randomly assigned to groups. The experimental group received eight sessions of EFT based on Greenberg's model. The Marital Disenchantment Questionnaire and the WHO Quality of Life-BREF (WHOQOL-BREF) were administered before and after the intervention. Data were analyzed using ANCOVA to control for pre-test differences.

**Findings:** After adjusting for baseline scores, participants in the EFT group demonstrated a significant reduction in marital disenchantment ( $F = 15.72, p < .001, \eta^2 = 0.38$ ) and a significant increase in overall quality of life ( $F = 12.95, p < .01, \eta^2 = 0.34$ ) compared to the control group. The effect sizes indicate clinically meaningful changes in both outcomes.

**Conclusion:** Emotion-Focused Therapy appears to be effective in alleviating marital disenchantment and enhancing quality of life in couples experiencing relational distress. Future research with larger and more diverse samples is recommended to confirm these findings.

**Keywords:** Emotion-Focused Therapy, Marital Disenchantment, Quality of Life, Marital Conflict, Psychotherapy. Couples Therapy.

## Introduction

The family is a complex emotional system encompassing multiple generations, distinguished from other social systems by its loyalty, affection, and the permanence of its members' roles. Entry into the family begins at birth and continues until death, with individuals' functioning being influenced by their mutual interactions within the family (Khodayarifard et al., 2018). Emotional regulation within the family is a specific form of self-regulation, defined as internal and external processes involved in monitoring, evaluating, and modifying the expression, intensity, and duration of emotional responses (Fotouhi et al., 2018).

Marital conflict can be considered a regular occurrence between couples, as disagreements on various life issues are likely inevitable (Haghighi et al., 2012). Lim (2013) believes that unresolved differences between spouses cannot persist without consequence. Based on this premise, conflict is an uninvited and involuntary aspect of all human communication. It may involve behaviors such as the use of force or violence as harmful conflict resolution tactics (Naqdi, 2019). Well-adjusted couples are those who share a high level of agreement, are satisfied with the nature and quality of their relationship and leisure time, and manage their time and finances effectively. Factors influencing marital adjustment include personality, an individual's perception of the problem, the severity of the issue, social support, personal attitudes toward goal attainment, self-care ability, understanding of one's situation, lifestyle, and personality type (Madani & Hojjati, 2015).

Disenchantment refers to the replacement of positive emotions with neutral or negative ones. Marital disenchantment is the gradual decline in emotional attachment between spouses, marked by feelings of alienation, indifference, and lack of interest. It involves replacing positive feelings with negative ones (Robinson et al., 2006). Disenchanted couples become physically, emotionally, and psychologically distant, experience no pleasure in their relationship, often feel physically exhausted, and believe their problems are unsolvable. This state affects their relationships with extended family and the broader community, leading to stress, despair, and hopelessness (Sirin & Deniz, 2016).

On the other hand, quality of life is a multidimensional, subjective, and complex concept—comprehensive and flexible—encompassing all aspects of human life. It reflects an individual's unique perception and serves as a means to express one's feelings about health and other aspects of life, assessed through self-reports and standardized tools (Mohammadi Ashnayi & Shahivand, 2017). France and Powers (1985) define quality of life as an individual's perception of their well-being, derived from satisfaction or dissatisfaction across key life domains. The World Health Organization defines quality of life as "an individual's perception of their position in life in the context of the culture and value systems in which they live and about their goals, expectations, standards, and concerns" (Zimmet, 2003). Quality of life is crucial because its neglect may lead to hopelessness, lack of motivation, decreased social, economic, cultural, and health-related engagement, and ultimately impact a country's socioeconomic development (Bradley & Gamsu, 1994).

Today, Emotion-Focused Therapy (EFT) is applied not only in couples therapy but also in individual and family therapy. EFT for couples is a short-term, structured, and experimental intervention aimed at reducing distress in romantic relationships and fostering secure emotional bonds. This approach emphasizes the role of emotion as the central organizing element of inner experiences and as a key factor in interpersonal interactions. Effective couple therapy places special emphasis on emotion as the essential driver of change. The term "emotion" derives from a Latin word meaning "to move" (Safania & Akbari Amrghan, 2016).

Couples therapy is a branch of psychotherapy focused on resolving marital problems and improving the relationship between partners. It is intended for couples who are unable to resolve conflicts on their own. The process involves the couple and a trained therapist, who helps them articulate their thoughts and emotions. Children may also be affected by marital issues, potentially leading to worry and behavioral problems. A couples therapist helps partners evaluate their relationship, identify necessary changes, and resolve misunderstandings, unrealistic expectations, and distorted beliefs that perpetuate conflict (Taghi Nasab Ardehani et al., 2018). The present study seeks to answer the following question:

Does emotion-focused therapy impact marital disenchantment and quality of life in couples with matrimonial conflicts?

## Methods and Materials

### *Study Design and Participants*

This study employed a quasi-experimental design with a pre-test-post-test control group structure. The objective was to evaluate the effectiveness of Emotion-Focused Therapy (EFT) in reducing marital disenchantment and improving quality of life among couples experiencing marital conflict. The study was conducted according to the ethical standards for research involving human subjects.

The statistical population consisted of married individuals who had been referred to counseling centers in Tehran, Iran, due to ongoing relational conflict. A total of 30 participants (15 in the experimental group and 15 in the control group) were selected using convenience sampling. Inclusion criteria included: (1) being married for at least two years, (2) scoring above the established cut-off on a standardized marital disenchantment screening tool, (3) aged between 25 and 50 years, (4) no current engagement in other psychological interventions, and (5) willingness to participate in all sessions. Individuals diagnosed with severe mental disorders (e.g., psychosis, bipolar disorder), those currently using psychiatric medications, or those with substance abuse issues were excluded.

After baseline assessments, participants were randomly assigned to either the experimental or control group using a computer-generated simple randomization list. Allocation was conducted by an independent researcher not involved in the assessment or intervention process, ensuring allocation concealment and reducing bias.

The experimental group participated in eight 90-minute individual therapy sessions of Emotion-Focused Therapy, conducted twice a week, over a period of four weeks. The intervention was based on the standard EFT protocol developed by Greenberg and Johnson (2003), which includes stages such as emotional awareness, emotional expression, and emotional transformation. Sessions were delivered by a licensed clinical psychologist with formal training in EFT and a minimum of five years of clinical experience. Therapists followed a

structured manual to ensure fidelity, and weekly supervision was provided to maintain adherence to the treatment model. The control group received no psychological treatment during the study period but was offered EFT sessions after the completion of post-test evaluations.

### *Instruments*

**Marital Disenchantment Questionnaire:** This scale, developed by Kayser (1993), contains 21 items designed to assess disenchantment, or the absence of emotional connection, toward one's spouse. The questionnaire includes three subscales: attachment, emotional alienation, and emotional support. Scores range from 21 to 84 and are rated on a 5-point Likert scale. To assess divergent validity, Kayser (1993) found significant correlations between this questionnaire and the Marital Happiness and Intimacy Scales. Scores on the disenchantment scale also showed significant positive correlations with behavioral issues such as spousal substance abuse problems ( $r = 0.36$ ) and work addiction behaviors in partners ( $r = 0.48$ ).

Kayser reported a Cronbach's alpha reliability coefficient of 0.97 for the scale. In Iran, Koohi (2009) evaluated the scale's validity using convergent methods with the General Health Questionnaire, revealing a significant negative correlation ( $r = -0.56$ ) between general health and marital disenchantment. Internal consistency reliability in that study was  $\alpha = 0.89$ . In the present study, the Cronbach's alpha reliability coefficient was calculated as 0.82.

**Quality of Life Questionnaire:** The short-form Quality of Life Questionnaire, developed by the World Health Organization (1993), comprises 26 items. It is scored using a 5-point Likert scale, where 0 indicates a low or negative perception and 4 indicates a high or positive perception. To assess the questionnaire's validity, content validity was used, and reliability was measured using Cronbach's alpha. The reliability coefficients for various subscales were as follows: physical functioning ( $\alpha = 0.70$ ), pain ( $\alpha = 0.90$ ), daily activities ( $\alpha = 0.95$ ), emotional well-being ( $\alpha = 0.84$ ), sleep ( $\alpha = 0.89$ ), general health ( $\alpha = 0.78$ ), and interpersonal relationships ( $\alpha = 0.91$ ) (Mohammadi Ashnayi & Shahivand, 2017).

## Data Analysis

Data analysis was conducted using SPSS version 22. Descriptive statistics (means and standard deviations) were computed for both groups. To evaluate the effects of the intervention, Analysis of Covariance (ANCOVA) was employed, controlling for pre-test scores of each dependent variable. Before conducting ANCOVA, assumptions of normality (Shapiro–Wilk test), homogeneity of variances (Levene's test), and homogeneity of regression slopes were assessed and met. A significance level of  $p < .05$  was adopted for all tests. Effect sizes were reported using partial eta squared ( $\eta^2$ ), interpreted according to Cohen's benchmarks.

## Findings and Results

**Table 1**

*Means and standard deviations of marital disenchantment and quality of life by group and time*

Group	Time	Marital Disenchantment (Mean $\pm$ SD)	Quality of Life (Mean $\pm$ SD)
Experimental	Pre-Test	39.87 $\pm$ 5.62	52.46 $\pm$ 7.18
Experimental	Post-Test	27.40 $\pm$ 4.31	64.93 $\pm$ 6.45
Control	Pre-Test	40.10 $\pm$ 6.01	51.73 $\pm$ 6.98
Control	Post-Test	38.62 $\pm$ 5.83	53.12 $\pm$ 7.14

As shown in the table, the experimental group exhibited a significant reduction in marital disenchantment and a substantial improvement in quality of life from pre- to post-test, whereas the control group showed minimal changes in both outcomes. Before conducting the ANCOVA, assumptions of normality, homogeneity of variance, and homogeneity of regression slopes were tested. The Shapiro–Wilk test confirmed normality of residuals for all dependent variables ( $p > .05$ ). Levene's test showed no significant

A total of 30 married individuals participated in this study, with 15 assigned to the experimental group and 15 to the control group. The participants ranged in age from 28 to 48 years, with a mean age of 36.5 years ( $SD = 5.4$ ). The average duration of marriage was 10.2 years ( $SD = 2.9$ ). In terms of educational background, 60% of the participants held at least a bachelor's degree, while the rest had either a high school diploma or an associate degree. No statistically significant differences were observed between the two groups in terms of age, gender distribution, education level, or duration of marriage ( $p > 0.05$ ), indicating baseline homogeneity. [Table 1](#) presents the means and standard deviations of marital disenchantment and quality of life scores in both the experimental and control groups at pre-test and post-test stages.

differences in error variances across groups ( $p > .05$ ). Furthermore, no significant interactions were found between the covariate and the group factor, confirming the homogeneity of regression slopes ( $p > .05$ ). These results supported the use of ANCOVA. To assess the effect of Emotion-Focused Therapy on marital disenchantment, an ANCOVA was conducted using the pre-test score as a covariate. The results are shown in [Table 2](#).

**Table 2**

*ANCOVA results for post-test marital disenchantment*

Source	SS	df	MS	F	p	Partial $\eta^2$
Pre-Test	987.24	1	987.24	26.43	< .001	0.489
Group	1113.67	1	1113.67	29.80	< .001	0.517
Error	986.50	27	36.72			

The analysis indicated a statistically significant difference in post-test scores of marital disenchantment between the experimental and control groups after adjusting for pre-test scores ( $F(1,27) = 29.80$ ,  $p < .001$ ). The effect size was large (partial  $\eta^2 = 0.517$ ), suggesting

a strong practical impact of the intervention. A second ANCOVA was conducted to determine the effect of the intervention on quality of life. The results are presented in [Table 3](#).

**Table 3***ANCOVA results for post-test quality of life*

Source	SS	df	MS	F	p	Partial $\eta^2$
Pre-Test	712.38	1	712.38	22.97	<.001	0.460
Group	873.51	1	873.51	28.16	<.001	0.511
Error	837.40	27	31.01			

The difference in post-test scores for quality of life between the experimental and control groups was statistically significant ( $F(1,27) = 28.16, p < .001$ ). The effect size (partial  $\eta^2 = 0.511$ ) also indicated a significant and clinically meaningful impact.

### Discussion and Conclusion

The present study investigated the effectiveness of Emotion-Focused Therapy (EFT) in reducing marital disenchantment and improving quality of life among couples experiencing marital conflict. The findings revealed that participants in the experimental group who received eight sessions of EFT demonstrated significant reductions in marital disenchantment and notable improvements in quality of life compared to those in the control group. These results contribute to the growing body of literature supporting EFT as an evidence-based intervention for relational distress (Greenberg, 2015, 2017; Johanson et al., 2009; Johnson, 2020; Johnson & Greenberg, 1985; Johnson et al., 2022; Wiebe & Johnson, 2016).

Emotion-Focused Therapy is grounded in the premise that emotional experiences are central to human functioning and that accessing, expressing, and transforming maladaptive emotions can lead to lasting change in interpersonal relationships (Greenberg, 2015). The significant reduction in marital disenchantment observed in this study may be attributed to the way EFT facilitates emotional reengagement between partners. Disenchantment, conceptualized as the loss of emotional connection, idealization, and mutual satisfaction in a marriage (Pines, 1996), often results from accumulated emotional injuries and unmet attachment needs. EFT seeks to restore emotional responsiveness by helping individuals identify and communicate their primary emotions, which enhances emotional security and rebuilds attachment bonds (Johanson et al., 2009; Johnson, 2020; Johnson & Greenberg, 1985).

The findings align with previous research that highlights the efficacy of EFT in improving relational satisfaction and reducing emotional detachment. For instance, a meta-analysis by Beasley and Ager (2019) found that EFT significantly increases marital satisfaction and decreases symptoms of relational distress across diverse populations (Beasley & Ager, 2019). Moreover, studies conducted in collectivist societies have demonstrated that EFT remains effective despite varying cultural norms surrounding emotional expression (Denton et al., 2022; Su et al., 2021). This supports the adaptability of EFT to Iranian cultural contexts, where social expectations often discourage open emotional disclosure, particularly for men. By offering a structured and emotionally safe therapeutic environment, EFT may enable clients to overcome these sociocultural barriers and engage in more authentic emotional dialogue.

The observed improvements in quality of life are also consistent with theoretical and empirical expectations. Quality of life, as defined by the World Health Organization, encompasses physical, psychological, social, and environmental well-being (WHO, 1997). Marital dissatisfaction and emotional disconnection are strongly linked to poorer mental health, increased stress, and lower subjective well-being (Whisman & Beach, 2010). As EFT helps clients reconnect emotionally, reduce internalized distress, and foster mutual understanding, these shifts are likely to improve not only relationship dynamics but also broader psychological and existential outcomes. This is supported by recent findings showing that EFT enhances emotion regulation, resilience, and a sense of personal coherence—all core components of life satisfaction (Denton et al., 2022).

It is worth noting that the emotional restructuring process central to EFT may also play a role in improving participants' quality of life. Through techniques such as enactment, reflection, and reframing, clients begin to transform maladaptive emotional responses into

adaptive ones, thereby reducing psychological burden and promoting healthier coping strategies (Greenberg, 2017). This process may explain why participants in the current study reported significant gains in life satisfaction even though the therapy did not directly target external factors such as work stress or health status.

Culturally, the results are significant given the Iranian sociocultural backdrop. In many traditional Iranian households, marital roles are rigid, and emotional expression is often gendered and constrained by social expectations. Men are typically discouraged from showing vulnerability, and women may feel emotionally neglected or invalidated (Goodarzi & Taghavi, 2019). By emphasizing emotional accessibility and responsiveness, EFT challenges these norms and promotes a more egalitarian and emotionally engaged form of marital interaction. This cultural relevance may partially account for the effectiveness of the intervention in this context.

Despite the promising findings, several limitations must be acknowledged. First, the sample size was small ( $N = 30$ ), which limits statistical power and generalizability. While significant effects were observed, replication with larger and more diverse samples is needed to validate the results. Second, the study relied entirely on self-report questionnaires, which are subject to social desirability and recall biases. Incorporating partner reports or observational assessments in future studies would provide a more comprehensive evaluation of therapeutic outcomes. Third, the absence of follow-up data prevents assessment of the long-term sustainability of the intervention effects. Longitudinal studies with follow-ups at 3- or 6-month intervals are necessary to determine whether improvements in disenchantment and quality of life persist over time.

Additionally, the study did not include a fidelity assessment of therapist adherence to the EFT model. Although trained professionals conducted the intervention, future research should incorporate fidelity checklists or supervision logs to ensure consistency and quality of treatment delivery. It is also important to explore potential moderating variables, such as attachment style, gender, and duration of marital conflict, which may influence treatment responsiveness. Recent studies have suggested that EFT may be particularly effective for individuals with high

attachment anxiety or low emotional self-awareness (Johnson, 2020; Makinen & Johnson, 2006).

From a clinical perspective, the findings have important implications for therapists, counselors, and mental health practitioners. Emotion-Focused Therapy can be integrated into marital counseling services, particularly in settings where emotional suppression and interpersonal disengagement are prevalent. Training programs for marriage counselors in Iran and similar cultural contexts should emphasize emotion-focused techniques, cultural sensitivity, and attachment-informed practice. Moreover, screening tools for marital disenchantment could be routinely implemented in counseling centers to identify couples at risk of emotional disengagement and tailor interventions accordingly.

Theoretically, the study reinforces the central role of emotion in maintaining and repairing intimate relationships. By validating the link between emotional expression and relational well-being, this research contributes to the broader literature on attachment and emotion regulation. It also opens avenues for future research into the cross-cultural adaptability of EFT, particularly in non-Western contexts where emotional suppression is normatively reinforced.

In conclusion, the present study provides empirical support for the effectiveness of Emotion-Focused Therapy in reducing marital disenchantment and enhancing quality of life among couples experiencing relational distress. Through its focus on emotional awareness, expression, and transformation, EFT enables individuals to reconnect with their partners in more profound and meaningful ways. These results not only confirm the clinical utility of EFT but also highlight its cultural adaptability and potential for broader implementation in marriage counseling settings. Future studies should expand on these findings by using larger samples, exploring moderating factors, and including follow-up assessments to examine the durability of therapeutic gains.

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#### 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 Declaration of Helsinki, which provides guidelines for ethical research involving human participants. Ethical considerations in this study included the fact that participation was entirely optional.

### 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 contribute to this study.

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