




Original Article

Comparing the effectiveness of schema-based and emotionally focused couple therapies on self-differentiation and marital disillusionment in couples in Mashhad

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Abstract

Background: Reducing self-differentiation and marital frustration in couples weakens the marital bond. The aim of the study was to compare the effectiveness of schema-based couple therapy (SBCT) and emotion-focused couple therapy (EFCT) on self-differentiation and marital frustration in couples.

Methods: This study was a quasi-experimental design involving couples referred to counseling centers in Mashhad Regions 1 and 2 due to marital dissatisfaction in 2023. Of these, 45 couples were randomly selected as a sample and placed in two experimental groups and a control group. The experimental group 1 received SBCT, the experimental group 2 received EFCT, and the control group received only general counseling. The research tools included the Self-Discrimination Questionnaire (DSI) by Skowron and Friedlander (1998) and the Kaiser Marital Dissatisfaction Questionnaire (1993) and afterward, a post-test was administered. The data were analyzed using SPSS software (version 24) and a multivariate analysis of covariance (ANCOVA) test.

Results: The results of the pairwise comparison showed that there is no significant difference between the mean scores of self-differentiation as a result of SBCT and EFCT ($P > 0.05$), while SBCT had a greater effect on marital disillusionment than EFCT ($P < 0.05$).

Conclusion: Based on the results, SBCT can be effective in reducing marital disillusionment among couples.

Keywords: Couple Therapy; Emotionally Focused Therapy; Schema Therapy; Differentiation of Self.

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Introduction

Marriage forms the foundational structure for family creation and raising the next generation. As a pivotal life event, it serves as the basis for family formation. Research indicates that marital relationships significantly influence individuals' emotional well-being, with compatible couples reporting greater satisfaction and success than incompatible

ones (1). Marriage is a voluntary, conscious partnership, now widely regarded as an intentional choice. Demographic research highlights the first year of marriage—or the immediate period following it—as the most challenging phase of spousal adjustment (2). Research shows that self-differentiation and marital disillusionment are among the variables that strongly affect couple

relationships (3). Self-differentiation enhances couples' adaptability by enabling them to navigate life's challenges with greater flexibility. Self-differentiation is important for couples because it can provide greater adaptation in the family (3). It defines as the ability of individuals to be flexible and act wisely, especially in the face of anxiety (4). Differentiation theory comprises four key components: emotional reactivity, emotional detachment, integration with others, and maintaining an I-Position (5). Self-differentiation is the ability of an individual to separate rational and emotional processes, and their intimacy and autonomy from others. In fact, these individuals have a specific definition of themselves and their beliefs and can direct their lives (6). Individuals with high self-differentiation can assess situations thoughtfully, act autonomously, and remain composed in relationships. They exhibit a well-defined sense of self, maintain firmly established values, and preserve emotional equilibrium in interpersonal dynamics (7). Theoretically, low self-differentiation contributes to problems such as marital discord, triangulation, physical and psychological distress, emotional reactivity, chronic anxiety, and assortative mating with similarly undifferentiated partners (8). Therefore, it is very important to examine the distinct self in couples.

Another factor that causes marital instability is marital disillusionment. Marital disillusionment is a gradual process in which emotional attachment declines, leading to increased emotional distance, decreased attention toward one's spouse, and growing feelings of indifference and disinterest. In other words, over time, neutral emotions replace positive ones (9). Increased negative interactions between spouses lead to increased feelings of frustration, and this accumulation of frustration acts as an emotional barrier to future positive interactions between spouses (10). There are three main patterns of frustration: erosion, dialectic, and crisis. The erosion type is referred to as the

gradual development of feelings of frustration. The dialectic pattern refers to a state in which there are intense positive and negative feelings in the relationship, and each person experiences a wide range of emotions. The crisis pattern occurs with serious or unforeseen events such as chronic illness in the relationship that are difficult for both partners to recover from (9). Couples may differ in the degree of marital disillusionment. In some cases, both parties experience frustration, while in other cases, the frustration is only about one person, but the other party is interested in his (9, 11). Meta-analytic findings show that sustained disillusionment in marital interactions strongly predicts lower levels of reported marital satisfaction (12, 13) and a higher levels of emotional divorce (14).

The stability and progress of society are deeply influenced by the quality of couple relationships. Greater compatibility between spouses enhances societal well-being and improves community mental health. Conversely, low self-differentiation and marital disillusionment disrupt family equilibrium, creating detrimental effects (15). These relational challenges often stem from early maladaptive schemas (EMS)—deep-seated negative patterns developed in childhood. Given their roots in these schemas, schema-based couple therapy (SBCT) emerges as a promising intervention (15). Schema therapy is a type of combined therapy that is formed by integrating cognitive behavioral theory, thematic communication, Gestalt therapy, and attachment theory (16). This therapy has been relatively successful in treating numerous marital problems with empirical support (17, 18). Schema therapy represents an integrative therapeutic approach that is mainly based on the expansion and development of the concepts and methods of classical cognitive-behavioral therapy (19). SBCT targets the core of deep-seated cognitive patterns and using cognitive, emotional, behavioral, and interpersonal strategies, it helps clients overcome these schemas, a central focus of this therapeutic

approach. One type of cognition that plays a major role in communication performance is “schemas.” Vulnerable schemas (emotional reactions and emotional deprivation) can be treated and reconstructed during couples therapy sessions (20). People who face the emotional deprivation schema constantly feel that they are not loved and are not given the attention they need from others. SBCT focuses on fundamental psychological themes, intervening in EMS and associated self-defeating emotional and cognitive patterns. These schemas, rooted in unmet childhood needs, perpetuate across the lifespan (21), and are predictors of conflict or compatibility between couples. SBCT, by targeting these schemas (emotional deprivation), improves the level of couples' relationships and reduces resentment. The primary goal of this therapy is to foster psychological awareness and enhance conscious control over maladaptive schemas, ultimately transforming them into healthier patterns and improving coping strategies (19, 22). In several studies, the effectiveness of SBCT on improving the performance of couples' relationships has been confirmed (7, 23).

Emotionally Focused Couple Therapy (EFCT) integrates experiential and systemic approaches, demonstrating efficacy in enhancing self-differentiation and resolving marital disillusionment, particularly for couples at risk of divorce. The therapy unfolds in three overlapping stages: attachment formation and awareness building, recall and discovery, and emotional reconstruction (an eight-step transformative process). This client-centered approach positions the individual as the authority on their lived experience, while the therapist adopts a facilitative guidance role (24). EFCT is a short-term, effective approach that addresses problematic interaction patterns, reconstructs emotional responses, and fosters the development of secure attachment. It is believed that each partner learns to organize and process emotional

experiences more effectively, strengthening positive interaction patterns (25). By fostering constructive interactions and identifying secure attachment patterns, EFCT promotes satisfaction and mitigates cognitive distortions, ultimately using changes in attachment behaviors to improve relationships (26). The effectiveness of EFCT on marital variables has been confirmed in various studies (27, 28).

Research indicates that both SBCT and EFCT are effective in treating marital problems (23, 29). However, a critical question remains: which of these treatments is most effective for specific marital problems? This research aims to determine whether self-differentiation and marital disillusionment are rooted in EMS or are better understood as emotional problems. Civil registration reports reveal an increasing divorce rate in Iran since 1988 (30), and Mashhad is no exception. Marital dissatisfaction is a primary contributor to divorce. Consequently, investigating effective treatments for the underlying problems is crucial. Despite the demonstrated effectiveness of both therapies, no prior research has directly compared SBCT and EFCT in addressing self-differentiation and marital disillusionment specifically in couples from Mashhad. Therefore, to address this research gap, a comparative study is both necessary and essential. Identifying the more effective treatment through this research will also help prevent wasted time and resources. This study examines the comparative efficacy of SBCT and EFCT on self-differentiation and marital disillusionment among couples in Mashhad. The research hypothesis is that a significant difference exists between the effectiveness of two therapeutic approaches on the measured outcomes in couples.

Methods

This quasi-experimental study employed a pre-test-post-test design with experimental and control groups. The target population consisted of couples seeking counseling

services for marital dissatisfaction across Mashhad's Districts 1 and 2 during 2023. The initial sample consisted of 115 couples. Out of 115 couples, 70 couples were excluded during screening for failing to meet study inclusion criteria. 45 couples were randomly assigned to one of three groups: SBCT intervention group, EFCT intervention group, and control group (15 couples in each group).

The inclusion criteria for participation in the study were: providing informed consent, both partners attending treatment sessions, a cohabitation duration of at least one year and no more than five years (Most couples' dissatisfaction is reported in the early years of life), and reported marital dissatisfaction. Participants were excluded for either exceeding two session absences or failing to complete prescribed homework assignments.

In this study, all participants completed baseline assessments. The experimental groups received protocolized interventions: Group 1 (SBCT) underwent ten 90-minute schema therapy sessions, while Group 2 (EFCT) received ten 90-minute emotionally focused therapy sessions. The control condition consisted of eight brief counseling sessions (non-protocolized) with waitlist status for structured intervention. A post-test, administered under identical conditions, was given to all three groups following the interventions. In addition, all questionnaires were completed in person.

Throughout all sampling processes and stages, the research objectives were fully explained to the couples while obtaining their consent. All participants received written and verbal assurances regarding the confidential use of their data exclusively for research purposes, with personally identifiable information being securely stored and accessible only to the research team. Questionnaires were completed anonymously in a calm and peaceful environment, without the use of names or identifying codes. Participants were

explicitly informed of their unconditional right to withdraw from the study at any point without penalty. Additionally, stringent confidentiality protocols ensured that no treatment details would be shared with family members or third parties without express written consent.

In this study, data were collected using two validated instruments: the Differentiation of Self Inventory (Skowron & Friedlander, 1998), Kaiser's (1993) Marital Disillusionment Questionnaire, and also a structured clinical interview assessing mental health status.

The Differentiation of Self Inventory (DSI): The Differentiation of Self Inventory-Revised (DSI-R; Skowron & Friedlander, 2003), a 46-item self-report measure, assesses core dimensions of self-differentiation through four validated subscales: Emotional Reactivity (heightened emotional responses), I-Position (maintaining self in relationships), Emotional Cutoff (relationship avoidance), and Fusion with Others (poor psychological boundaries). Items are rated on a 6-point Likert scale (1=not at all true of me; to 6=completely true of me), yielding a total score range of 46-276. DSI-R total scores were categorized using clinical benchmarks: Low differentiation: 46-115, Moderate differentiation: 116-161, High differentiation: ≥ 162 . In the study of Drake, DSI showed strong reliability ($\alpha = 0.89$) and was established construct validity through confirmatory factor analysis (31). The DSI's cultural appropriateness for Iranian populations was established by Jahanbakhshi and Kalantarkousheh (2021), with acceptable internal consistency for the total scale ($\alpha = 0.69$) and subscales: Emotional Reactivity ($\alpha = 0.77$), I-Position ($\alpha = 0.63$), Emotional Cutoff ($\alpha = 0.74$), and Fusion ($\alpha = 0.76$). In the present study, the Cronbach's alpha for the DSI was 0.78.

The Marital Disillusionment Questionnaire: This questionnaire designed by Kayser (1993), is a 21-item instrument assessing relational disaffection

through three theoretically-derived subscales: attachment, emotional alienation, and emotional support. Items are scored on a 4-point Likert scale (1 = 'false' to 4 = 'very true'), producing a total score range of 21-84. The average score on this scale in the Kayser study was 7.44, with scores above this average considered indicative of high disillusionment (9 Seyed Alitabar et al. (33) demonstrated strong psychometric properties in the Iranian context and reported excellent internal consistency ($\alpha = 0.92$) and high test-retest reliability ($r = 0.85$). Here, the Cronbach's alpha coefficient was obtained 0.82.

Intervention programs

The SBCT intervention sessions based on the Young et al., (19) therapy protocol are summarized in Table 1. Also, the EFCT intervention sessions based on the Rashid et al., (34) approach are summarized in Table 2. These intervention programs were implemented in 10 sessions of 90-minute on the first and second experimental groups, respectively.

Data were analyzed using SPSS-22 with a two-phase analytical approach. Descriptive statistics (means, standard deviations)

characterized baseline measures. Inferential analyses first verified normality assumptions via Kolmogorov-Smirnov tests (all $p > .05$). Then, MANCOVA was employed to examine group differences and Bonferroni post hoc comparisons to identify specific treatment effects.

Results

Participants in the study ranged in age from 20 to 50 years, with a high school diploma to a master's degree, and had been married for 1 to 5 years. Table 3 shows the mean of the scores of the variables studied by the participants in the three research groups, separated by each stage.

To examine the MANCOVA assumptions, the Kolmogorov-Smirnov test, M Box test and Levine test were used. The M Box results showed that the value ($F = 1.09$) is not significant ($P < 0.26$), so the covariance matrices observed in the groups of dependent variables are equal. Levine's F value also showed that this value is not significant between the groups for the equality of variances of the research variables in three stages.

Table 1. Summary of the schema-based couple therapy protocol

Session	Content
First	Conducting a pre-test, initial assessment and evaluation, clarifying the raw schema model in simple and clear language to couples and how schemas are formed, types of schemas and coping styles, and placing information from the couple's assessment session in the raw schema model.
Second	Teaching the A.B.C technique and giving homework appropriate to the technique
Third	Using the downward arrow technique to identify couples' core beliefs using assessment session and questionnaire information
Fourth	Teaching the technique of confirming and rejecting evidence
Fifth	Teaching profit and loss techniques and giving assignments related to each technique
Sixth	Dialogue between the schema aspect and the healthy aspect and learning healthy side responses by couples, writing a letter to the originator and cause of the schema
Seventh	Mentally visualizing problematic situations and confronting the most problematic behavior
Eighth	Behavioral pattern breaking: Behavioral techniques (to increase motivation to change behavior)
Ninth	Teaching the flashcard technique and preparing cards appropriate to the couples' schemas for times when couples are in situations of stimulation or ineffective communication cycles that do not act based on the schemas, and playing the roles of couples in different life situations.
Tenth	Overcoming barriers to behavior change and post-test implementation

Table 2. Summary of emotionally focused couple therapy intervention sessions

Session	Content
First	Getting to know and establishing a trusting therapeutic relationship with the participants; Clarifying the general rules and structure of the treatment process; Assessing the participant’s readiness and commitment to therapy; Providing a clear explanation of emotions and their role in the therapeutic context; Examining the nature of the issue(s) and dynamics within the relationship, and Identifying the spouses’ expectations and desired outcomes from therapy.
Second	Pinpointing the negative interaction patterns and facilitating open disclosure between partners; Evaluating the attachment bond and emotional connection within the couple; Identifying attachment-related challenges and obstacles in the relationship; Introducing Emotionally Focused Couple Therapy (EFCT) principles and the role of emotions in relationship dynamics; Promoting healthier communication and adaptive behavioral flexibility; Establishing mutual goals and commitments for therapy.
Third	Identifying and exploring unexpressed emotions that drive interactional patterns; Prioritizing attachment-related fears, needs, and vulnerabilities in therapy; Establishing a secure environment for open, non-judgmental communication; Guiding couples in expressing and affirming each other’s attachment needs and longings; Addressing reactive emotions (e.g., anger, frustration) to reveal deeper, unmet attachment emotions.
Fourth	Reframing relational conflicts in terms of unmet attachment needs and underlying emotions; Encouraging clients to authentically express emotions and engage in secure attachment behaviors with their partner; Highlighting how protective mechanisms and attachment fears distort emotional/cognitive responses.
Fifth	Helping partners recognize and reclaim disowned needs and suppressed aspects of themselves to foster wholeness and self-acceptance; Guiding couples to observe and reflect on their interaction patterns with curiosity, empathy, and non-judgmental awareness; Creating a safe space for partners to articulate unmet attachment needs and longings that have been avoided or dismissed.
Sixth	Helping partners recognize underlying emotions and understand their role in the relational dynamic; Promoting empathy and validation of each partner’s emotional experience to foster secure connection; Monitoring and exploring known emotions to deepen awareness and facilitate emotional processing.
Seventh	Underlining and restating attachment requirements and pointing out that they are well and accepted.
Eighth	Cultivating early emotional experiences within the framework of attachment; enabling individuals to recognize and articulate their internal needs and relational bonds; Promoting the development of new, secure attachments between partners, thereby strengthening marital cohesion and emotional security.
Ninth	Identifying and modifying entrenched relational behaviors, while fostering constructive interactions aligned with secure attachment principles; clarifying dysfunctional patterns and reinforcing awareness of attachment needs.
Tenth	Review of previous sessions, questions and answers, and post- test implementation

That is, the scores of the research groups in the variables of self-differentiation, marital frustration and cognitive fusion have equal variances. Normality assumptions were also examined using Kolmogorov-Smirnov test. As shown in Table 4, the distribution of scores of variables and their subscales is normal.

The results of the multivariate analysis of variance with repeated measures (Table 5) presented that the measurements of self-

differentiation and marital disillusionment scores in the three stages are significantly different. In other words, there is a substantial differences in self-differentiation and marital disillusionment scores between pre-test and post-test measurements (P=0.006).

These results show the effectiveness of SBCT and EFCT on improving self-differentiation and marital disillusionment in couples.

Table 3. Mean scores of self-differentiation and marital disillusionment in the three study groups

Variable	Stage	Schema therapy	Emotionally focused therapy	Control	
		Mean \pm SD	Mean \pm SD	Mean \pm SD	
Self-differentiation	Emotional reactivity	Pre-test	33.37 \pm 7.58	35.37 \pm 7.02	34.3 \pm 6.74
		Post-test	44.4 \pm 7.09	43.1 \pm 7.79	32 \pm 6.78
		Follow-up	42.03 \pm 7.61	41.8 \pm 6.4	33.2 \pm 6.15
	I-position	Pre-test	39.5 \pm 8.58	40.53 \pm 8.13	39.13 \pm 6.62
		Post-test	47.6 \pm 7.65	45.77 \pm 7.78	39.8 \pm 7.54
		Follow-up	42.03 \pm 9.28	43.03 \pm 10.20	39.17 \pm 7.39
	Emotional cutoff	Pre-test	36.37 \pm 6.57	38.47 \pm 6.8	37.77 \pm 8.31
		Post-test	48.13 \pm 9.67	49.33 \pm 8.96	38.73 \pm 9.25
		Follow-up	46.63 \pm 9.81	49.57 \pm 10.67	39.07 \pm 8.54
	Fusion with others	Pre-test	34.8 \pm 6.71	36.4 \pm 5.82	33.93 \pm 7.74
		Post-test	42.17 \pm 9.11	43.87 \pm 8.09	35.13 \pm 6.86
		Follow-up	40.97 \pm 9.14	41.83 \pm 8.47	33.53 \pm 7.45
Total	Pre-test	144.03 \pm 18.77	150.77 \pm 14.42	145.13 \pm 18.12	
	Post-test	182.3 \pm 14.7	182.07 \pm 18.13	145.67 \pm 17.47	
	Follow-up	171.67 \pm 23.29	176.23 \pm 20.73	144.97 \pm 14.8	
Marital Disillusionment	Attachment	Pre-test	27.33 \pm 5.49	26.97 \pm 4.52	26.63 \pm 6.11
		Post-test	17.47 \pm 3.22	19.37 \pm 4.17	27.2 \pm 4.46
		Follow-up	17.43 \pm 4.29	19.6 \pm 3.39	26.33 \pm 4.4
	Emotional alienation	Pre-test	19.6 \pm 4.06	20.47 \pm 4.24	20.4 \pm 4.03
		Post-test	15.97 \pm 2.48	16.8 \pm 3.56	21.67 \pm 3.89
		Follow-up	16.37 \pm 2.49	17.13 \pm 3.69	22.17 \pm 3.41
	Emotional support	Pre-test	15.5 \pm 2.04	15.63 \pm 2.05	15.1 \pm 1.97
		Post-test	10.2 \pm 2.84	12.27 \pm 2.86	15.8 \pm 2.59
		Follow-up	12.17 \pm 2.57	11.53 \pm 2.8	15.03 \pm 2.74
	Total	Pre-test	62.43 \pm 6.95	63.03 \pm 6.57	62.13 \pm 7.46
		Post-test	43.63 \pm 4.82	48.43 \pm 5.61	64.67 \pm 6.76
		Follow-up	45.97 \pm 3.37	48.27 \pm 4.92	63.53 \pm 6.72

According to the results, the average scores of self-differentiation and marital disillusionment in the experimental group in the post-test compared to the pre-test are significantly different. Therefore, the results of change in the mean in different stages show a significant trend in the improvement score of self-differentiation and marital disillusionment.

As shown in Table 6, the repeated measures ANOVA (between-group and within-subject) for the experimental and control groups indicated a statistically significant difference in factor scores for both self-differentiation and marital disillusionment ($P=0.007$).

Table 4. Checking the normality of research variables in the pre-test of research groups

Variable	Pre-test	
	Z	P-value
Emotional reactivity	0.81	0.51
I-Position	0.77	0.57
Emotional cutoff	1.01	0.25
Fusion with others	0.98	0.28
Self-differentiation	1.14	0.14
Attachment	1.13	0.14
Emotional alienation	0.86	0.44
Emotional support	0.52	0.94
Marital disillusionment	0.78	0.56

Table 5. Results of comparing self-differentiation and marital disillusionment across groups and time points

Change Source	Value	F	df Hypothesis	df error	P-value	Effect size	Eta
Pillai's Trace	0.83	70.92	6	82	0.001	0.83	1.00
Wilks Lambda	0.16	70.92	6	82	0.001	0.83	1.00
Hotelling's Trace	5.16	70.92	6	82	0.001	0.83	1.00
Roy's Largest Root	5.18	70.92	6	82	0.001	0.83	1.00

A significant difference was also found in the factor scores of self-differentiation and marital disillusionment between the experimental and control groups (P=0.005). These results indicate that SBCT and EFCT were effective in improving self-differentiation and marital disillusionment in the experimental groups.

Table 7 presents the results of Bonferroni post hoc tests for pairwise comparisons of means across the study variables. Results indicated that both SBCT and EFCT are statistically significant differences compared to the control group (P=0.007). Also, the results indicated that SBCT has a stronger effect than EFCT on reducing marital disillusionment, based on mean score comparisons. However, no significant difference was found between the two interventions in terms of improving self-differentiation among couples.

Table 6. Results of analysis of variance examining between-group and within-group changes in self-differentiation and marital disillusionment

Variable	Components	Sources of changes	SS	df	MS	F	P-value	Effect coefficient
Self-differentiation	Intragroup	Time	14009.689	1	14009.689	49.25	0.001	0.36
		Time*Group	7173.011	2	50683586	12.61	0.001	0.22
		Error	24744.300	87	42.804			
	Between-group	Group	10409.277	2	5204.638	82840	0.001	0.48
		Error	11092.277	87	127.498			
Marital disillusionment	Intragroup	Time	4460.089	1	4460.089	106.43	0.001	0.55
		Time*Group	2922.178	2	1461.089	34.86	0.001	0.33
		Error	3645.733	87	41.9			
	Between-group	Group	2734.462	2	1367.231	114.631	0.001	0.72
		Error	1034.667	87	11.62			

Discussion

This study compared the effectiveness of SBCT and EFCT on self-differentiation and marital disillusionment in couples. The results indicated that SBCT have a more effect on couples' marital disillusionment than EFCT. The current findings align with research by Ahmadzadeh et al., (23) and Panahifar and Sadeghi (29).

In explaining the greater effect of SBCT, it can be said that couples who experience marital disillusionment often have maladaptive schemas in the area of rejection and disconnection, especially emotional deprivation, which means that the individual's desires and needs for emotional support from their spouses have not been satisfied sufficiently.

Table 7. Pairwise results for comparing the mean scores of research variables in the three experimental groups

Groups comparison			Mean difference	Standard error	P-value
Self-differentiation	Schema therapy	Emotionally focused therapy	-3.69	2.91	0.62
	Schema therapy	Control	20.74	2.91	0.0001
	Emotionally focused therapy	Control	24.43	2.91	0.0001
Marital disillusionment	Schema therapy	Emotionally focused therapy	-2.58	0.89	0.01
	Schema therapy	Control	-12.77	0.89	0.0001
	Emotionally focused therapy	Control	-10.19	0.89	0.0001

Participants reported high emotional deprivation scores on a schema inventory. Emotional deprivation and abandonment also have many effects on couples' relationships and marital despair, SBCT may have reduced hopelessness by targeting this schema. It can be inferred that schema therapy has targeted emotional deprivation and has reduced the level of deprivation and reduced frustration in the participants. When the emotional deprivation schema becomes active and persistent in one of the couples, the couple becomes cold and indifferent to each other and cannot express positive feelings and emotions such as love, warmth, intimacy, attention, and support, and they become frustrated in their relationships with various failures in the marital relationship (34). The schema therapy intervention incorporating communication enrichment appears to enhance acceptance by increasing participants' awareness of their maladaptive schemas. This process facilitates insight into how these schemas contribute to problematic relationship patterns, while helping individuals recognize the developmental origins of their current interpersonal behaviors. Through identifying the developmental origins of maladaptive schemas, individuals come to recognize how early experiences shaped their cognitive and emotional responses to failure and frustration. This awareness creates an opportunity for transformation, as therapeutic strategies help clients modify these entrenched patterns. The therapeutic techniques employed in this intervention

effectively reduced activation of EMS while equipping couples with adaptive coping strategies to manage schema-driven responses. SBCT intervention increased couples' understanding of the fact that they come from different family environments and also led to the discovery of couples' central belief systems about the roles of men and women in couples' relationships. Consequently, couples develop essential skills in conflict resolution and marital problem-solving, enabling them to break negative relational patterns. The intervention reduces maladaptive emotional responses—such as frustration, anger, worthlessness, and depression—while enhancing communication, empathy, and mutual understanding of each other's needs. These improvements foster greater marital commitment and decrease overall relational distress (35).

In EFCT, at the beginning of treatment, subjects are expected to observe and accept their thoughts and feelings, but this group of couples feels insecure in times of stress or crisis due to the severity of the problems they have experienced due to their expectations of their spouse's emotional responsiveness not being met. This insecurity causes each partner to feel alone in facing life's stresses, which leads to a lack of control over life and increased frustration. Therefore, although in the EFCT process, the therapist attempts to eliminate this feeling of insecurity, the problems related to the negative interaction cycles of insecure attachment cause the

cognitions and emotions of this group of couples to report a higher level of frustration than the SBCT group.

The results of this study indicated no statistically significant difference in self-differentiation score changes between couples receiving SBCT and EFCT. This finding aligns with research by Rathgeber et al., (36), Seidyousefi et al., (37), and Ghasemi-Nejad et al., (38). In explaining this result, it can be said that the research subjects, due to negative beliefs about marital problems, cannot use their emotions usefully in different life situations, whether in happy or sad states. This causes other problems, including negative self-perception, concern about the future of married life, and family functions. Therefore, both SBCT and EFCT facilitated emotional regulation through techniques like schema reconstruction, which modulates the experience of positive and negative emotions. This emotional modulation subsequently influences cognitive processes (e.g., judgment patterns) and enhances self-perception in couples, thereby potentially improving self-differentiation capacity (36, 39). Farshchian Yazdi et al. (40) demonstrated that Emotion-Focused Couples Therapy (EFCT) is not superior to other treatments; however, it is an effective training method that employs an emotion-focused approach to enhance couples' interaction patterns by increasing emotional awareness and agency in their experiences, as well as facilitating change processes. Therefore, it can be stated that because both couples therapy approaches rather than simplistic emotion lead to fundamental changes in the way they communicate, solve problems, negotiate differences, find comfort, and create emotional support from their spouses within them. Accordingly, in EFCT, the therapist helps clients change the elements of the destructive relationship. In essence, the purpose of EFCT is to help clients express and reprocess the emotional responses that underlie their negative interaction patterns to achieve appropriate

emotional differentiation. EFCT helps individuals achieve an appropriate level of self-differentiation by affecting emotional reactivity. Then couples can send new emotional signs to their spouses that allow interface patterns to move toward more availability and responsiveness, resulting in a safer and more satisfying connection. This secure connection created in the relationship between couples and their spouses allows them to address their sexual needs and the emotional symptoms that accompany them with their husbands by addressing and talking about their sexual dissatisfaction; therefore, by increasing self-differentiation, they can achieve greater marital satisfaction in their life together (41). On the other hand, it can be said that SBCT is also an educational approach to improve couples' relationships, increase self-differentiation, and consequently increase the level of couples' differentiation. The family is constantly struggling to balance the feeling of togetherness and unity, and self-separation or self-differentiation in its members. For this reason, fear and anxiety about re-experiencing marital problems and disagreements is the main basis of the individual's problems, and the only way to decrease it is to achieve self-differentiation. Self-differentiation, which is the most basic concept of Bowen's theory, includes four components: emotional reactivity, emotional disengagement, integration with others, and the ability to gain my place, which predict the self-differentiation level in different individuals (4). Schema therapy, by affecting emotional reactivity and emotional disengagement, provides flexibility and wise action, especially in dealing with marital problems. Schema therapy with couples helps to improve their ability to separate rational and emotional processes, and their intimacy and autonomy, thereby increasing the level of differentiation. A process through which the individual learns to chart his/her own path rather than constantly following the guidelines of the family or others.

Accordingly, in the schema therapy intervention based on the communication enrichment program, individuals learn to accept without experiencing disabling fears and anxieties about abandoning their relationships, and they want to have more intimacy in their relationships without drowning in emotions. They are not easily influenced by others to share or absorb thoughts and feelings, and do not express issues, failures, anxieties, and signs of damage because of others, and by increasing differentiation, they help improve their relationships and increase marital satisfaction. Therefore, it is not far from being expected that the difference between these two approaches on differentiation is not statistically significant (42).

Among the factors that could have contributed to this result are the social norms of Mashhad society, so caution should be exercised in generalizing the results. The small sample size and lack of long-term follow-up are other limitations of this study. Another limitation of this study is that quasi-experimental studies have lower internal validity than real experiments and are therefore not effective in establishing causality. Another limitation of this study is that quasi-experimental studies have lower internal validity than real experiments and are therefore not effective in establishing causality. It is suggested that in future studies, to reduce possible bias and control for confounding variables, the sample size should be larger and be drawn from different cities and groups, so that the results of the research can be generalized with greater confidence. It is suggested that therapists use effective treatments to reduce couples' dissatisfaction, marital disillusionment, and increase the level of self-differentiation. It is also suggested that training centers teach therapists SBCT and EFCT.

Conclusion

According to the results of the study, SBCT and EFCT interventions can be used to

reduce couples' tension and dissatisfaction, as well as improve self-differentiation in couples. There is no doubt that using these types of treatments to improve couples' self-differentiation is of great importance. Also, couples' frustration, which is one of the main factors of divorce and family risks, can be treated with the help of SBCT. Therapists should prioritize SBCT for couples with high frustration associated with maladaptive schemas. Future studies should examine longitudinal effects and larger and more diverse samples.

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Authors' contribution

Study conception and design: Nazer GM and Bakhshipour A; data collection: Nazer GM; analysis and interpretation of results: Ghasemi Motlagh M; draft manuscript preparation: Nazer GM and Bakhshipour A. All authors approved the final version of the manuscript.

Ethical considerations

All participants received comprehensive information regarding the study objectives and procedures. Written informed consent was obtained prior to participation, with explicit guarantees of data confidentiality and anonymity throughout the research process.

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Conflicts of interest

The authors declare no known competing financial interests or personal relationships that could have influenced the reported study.

References:

1. Lavner JA, Clark MA. Workload and marital satisfaction over time: Testing lagged spillover and crossover effects during the newlywed years. *Journal of vocational behavior*. 2017;101:67-76.

2. Fincham FD, Beach SR. Forgiveness in marriage: Implications for psychological aggression and constructive communication. *Personal Relationships*. 2002;9(3):239-51.
3. Lampis J, Cataudella S, Agus M, Busonera A, Skowron EA. Differentiation of self and dyadic adjustment in couple relationships: A dyadic analysis using the actor-partner interdependence model. *Family process*. 2019;58(3):698-715.
4. Bhopal K. Identity, empathy and 'otherness': Asian women, education and dowries in the UK. In *Black and postcolonial feminisms in new times 2013* (pp. 27-39). Routledge.
5. Peleg-Popko O, Dar R. Marital quality, family patterns, and children's fears and social anxiety. *Contemporary Family Therapy*. 2001;23:465-87.
6. Moral MA, Chimpén-López CA, Lyon TR, Adsuar JC, editors. The relationship between differentiation of self and psychological adjustment to separation. *Healthcare*; 2021: MDPI.
7. Simon HLM, DiPlacido J, Conway JM. Attachment styles in college students and depression: The mediating role of self differentiation. *Mental Health & Prevention*. 2019;13:135-42.
8. Calatrava M, Martins MV, Schweer-Collins M, Duch-Ceballos C, Rodríguez-González M. Differentiation of self: A scoping review of Bowen Family Systems Theory's core construct. *Clinical psychology review*. 2022;91:102101.
9. Kayser K. When love dies: The process of marital disaffection: Guilford Press; 1993.
10. Schofield T. Exploration of Perceptions of Marriage Dissatisfaction Among African American Couples. 2016.
11. Asefi Far F, Shams Esfandabad H, Shaterian Mohammadi F. Sensation Seeking and Extramarital Relationships: Mediation Role of Marital Frustration. *Iranian Evolutionary Educational Psychology Journal*. 2022;4(4):64-75.
12. Niehuis S, Bartell D. The marital disillusionment scale: development and psychometric properties. *North American Journal of Psychology*. 2006;8(1).
13. Renshaw KD, Blais RK, Smith TW. Components of negative affectivity and marital satisfaction: The importance of actor and partner anger. *Journal of research in personality*. 2010;44(3):328-34.
14. Rasheed A, Amr A, Fahad N. Investigating the relationship between emotional divorce, marital expectations, and self-efficacy among wives in Saudi Arabia. *Journal of Divorce & Remarriage*. 2021;62(1):19-40.
15. Ismaeilzadeh N, Akbari B. The effectiveness of schema therapy on sexual self-efficacy, marital satisfaction and early maladaptive schemas in couples with marital conflicts. *medical journal of mashhad university of medical sciences*. 2021;64(1):2286-96.
16. Bach B, Lockwood G, Young JE. A new look at the schema therapy model: organization and role of early maladaptive schemas. *Cognitive behaviour therapy*. 2018;47(4):328-49.
17. Bernstein DP, van Wijk-Herbrink MF, Kersten T. Forensic schema therapy and safe-path: individual-and milieu-therapy approaches for complex personality disorders and externalizing behavior problems. *Clinical Forensic Psychology: Introductory Perspectives on Offending*. 2022:587-608.
18. Wibbelink CJ, Arntz A, Grasman RP, Sinnavee R, Boog M, Bremer OM, et al. Towards optimal treatment selection for borderline personality disorder patients (BOOTS): a study protocol for a multicenter randomized clinical trial comparing schema therapy and dialectical behavior therapy. *BMC psychiatry*. 2022;22(1):89.
19. Young JE, Klosko JS, Weishaar ME. *Schema therapy: A practitioner's guide*: guilford press; 2006.
20. Tilden T, Dattilio FM. Vulnerability schemas of individuals in couples relationships: a cognitive perspective. *Contemporary Family Therapy*. 2005;27:139-62.
21. Arntz A, Rijkeboer M, Chan E, Fassbinder E, Karaosmanoglu A, Lee CW, Panzeri M. Towards a reformulated theory underlying schema therapy: Position paper of an international workgroup. *Cognitive Therapy and Research*. 2021:1-4.
22. Salehi F, Shiani A, Arefi M. The Effectiveness of Schema Therapy on the Coping Strategies and Psychological Hardiness of Mothers with Children who Stutter. *Journal of Clinical Research in Paramedical Sciences*. 2024;13(1).
23. Ahmadzadehaghadah E, Karimisani P, Goudarzi M, Moradi O. The effectiveness of couple therapy with schema therapy approach on disaffection and marital commitment in couples. *Iranian Journal of Psychiatric Nursing (IJPN) Original Article*. 2020;8(5).
24. Afeli SA. Academic accommodation strategies for pharmacy students with learning disabilities: what else can be done? *Currents in Pharmacy Teaching and Learning*. 2019;11(8):751-6.
25. Janke KK, Nelson MH, Bzowycykj AS, Fuentes DG, Rosenberg E, DiCenzo R. Deliberate integration of student leadership development in doctor of pharmacy programs. *American Journal of Pharmaceutical Education*. 2016;80(1):2.

26. Geller SM, Greenberg LS. Therapeutic presence: A mindful approach to effective therapy: American Psychological Association; 2012.
27. Esmailpour K, Tavakoli M, Roknizadeh A. The Effectiveness of Emotional Couple Therapy on Marital Adjustment and Self-Differentiation of Married Athletes. *Razi Journal of Medical Sciences*. 2022;29(3):203-11.
28. Tie S, Poulsen S. Emotionally focused couple therapy with couples facing terminal illness. *Contemporary Family Therapy*. 2013;35:557-67.
29. Panahifar S, Sadeghi M. Comparison of the effectiveness of schema-based couple therapy, emotional focused couple therapy, and acceptance commitment couple therapy in the reduction of marital stress among couples on the brink of divorce in military families. *Military Caring Sciences Journal*. 2022;9(1):68-80.
30. Abbasi-Shavazi MJ, McDonald P, Hosseini-Chavoshi M. The fertility transition in Iran. 2009.
31. Drake JR. Differentiation of self inventory-short form: creation and initial evidence of construct validity: University of Missouri--Kansas City; 2011.
32. Jahanbakhshi Z, Kalantarkousheh SM. Relationship between dimensions of Early Maladaptive Schemas and desire for marriage among females and males students at Allameh Tabataba'i University. *Family counseling and psychotherapy*. 2012;2(2):234-56.
33. Sayed Alitabar SH, Mohammad Alipour Z, Habibi F, Sarvestani A, Javanbakht A. Reliability, validity and factor structure of the marital disillusionment scale. *Pajoohandeh Journal*. 2016;20(6):342-9.
34. Rashid T, Summers RF, Seligman ME. Positive psychology. *Psychiatry*. 2015:489-98.
35. Kover L, Szollosi GJ, Frecska E, Bugan A, Berecz R, Egerhazi A. The association between early maladaptive schemas and romantic relationship satisfaction. *Frontiers in Psychology*. 2024;15:1460723.
36. Rathgeber M, Bürkner PC, Schiller EM, Holling H. The efficacy of emotionally focused couples therapy and behavioral couples therapy: A meta-analysis. *Journal of marital and family therapy*. 2019;45(3):447-63.
37. Seidyousefi M, Mohamadian F, Nademi A. Comparing the Effectiveness of Schema-Focused Couple Therapy and Emotionally focused Couple Therapy on Marital Offense Forgiveness in Couples with Marital Discrepancies. *Applied Family Therapy Journal (AFTJ)*. 2024;5(1):155-66.
38. Ghaseminejad Rinie F, Golparvar M, Aghaei A. Comparison of the effectiveness of emotionally focused therapy based on attachment injuries and eclectic spirituality based schema therapy on hopelessness and mental health of women affected by husband's infidelity. *Shenakht Journal of Psychology and Psychiatry*. 2022;9(3):151-66.
39. Goldman R, Greenberg L. Clinical handbook of emotionally focused therapy. Washington DC: American Psychological Association Press Goldman, R, Greenberg, LS, & Angus, L(2006) The effects of adding emotionally focused interventions to the client-centered relationship conditions in the treatment of depression *Psychotherapy Research*. 2019;16(5):537-49.
40. Farshchiyan Yazdi M, Bagherzadeh Golmakani Z, Mansouri A. Comparison of the Effectiveness of Emotionally Focused Therapy and Self-Compassion Skills Training on Differentiation of Self and Sexual Intimacy of Women Affected by Marital Infidelity. *Razavi International Journal of Medicine*. 2021;9(3):34-43.
41. Agha AI, Shoaib S, Solangi A, Shahid A, Ahmed F. Differentiation of Self and Life Satisfaction in Married Women: Moderating Role of Mental Wellbeing. *Pakistan Journal of Psychological Research*. 2023;38(4).
42. Sarabandi M, Mohammadifar M A, Sotodeh Asl N. Comparison of the effectiveness of schema therapy and emotional-based couple therapy on couples' young self-differentiation. *Iranian Journal of Psychiatric Nursing*. 2022;10(2):48-60.