

Comparison of the Effectiveness of Emotionally-focused Therapy and Cognitive-behavioral Therapy on Improving Emotion Regulation and Marital Satisfaction in Couples with Conflicts with Alertness-inhibition early Maladaptive Schema

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Received 2024 April 28; Accepted 2025 February 28.

Abstract

Background: Family is arguably, the most important social institution and it is very necessary to deal with family affairs.

Objectives: The aim of the present study was to compare the effect of emotionally-focused therapy (EFT) and cognitive-behavioral therapy (CBT) on improving emotion regulation (ER) and marital satisfaction (MS) in couples with conflicts with early maladaptive schema (EMS) of alertness-inhibition.

Methods: The current research was a semi-experimental type with a pre-test and post-test design, two experimental and a control group.

The statistical population included all marital conflict clients who referred to Mehrpaya clinic in Mashhad in 1402, who have active alertness-inhibition schema. The sample included 45 members that were selected by available sampling method and randomly placed in three groups of 15 people. All participants completed the Emotion Regulation Questionnaire (DERS) and ENRICH Marital Satisfaction (EMS) as a pre-test. Then, the first experimental group was subjected to EFT with protocol of Greenberg and Watson, and the second experimental group was subjected to CBT, and the people of the control group did not receive any intervention, and after the intervention, all participants completed the questionnaires used in the pre-test. completed in post-test conditions.

Results: The results of MANCOVA indicated the significant effectiveness of both interventions on improving ER and MS in couples ($P < 0.05$), and no difference was observed between the effectiveness of the two interventions.

Conclusion: According to the results, it can be said that both interventions can be useful for improving ER and MS in couples with conflicts with alertness-inhibition schema.

Keywords: Emotion-Focused Therapy, Cognitive Behavioral Therapy, Emotional Regulation, Marital Satisfaction, Cognitive Schemas

1. Background

As the most important and fundamental

human foundation, the family has always played the most fundamental role in preserving and enhancing human culture.

Numerous studies have shown that family health plays an important and fundamental role in the mental health of individuals and the health of society (1). Experts believe that the health of the family is rooted in the success of the relationship between the couple (2). Studies show that healthy and successful relationships between couples in a joint life increase physical and mental health, and marital incompatibility and dissatisfaction after marriage not only affect the psychosocial actions of the husband and wife, but also the growth and development of the children of that family. It also leaves a side effect (3). Also, studies have shown that failure in married life and the reduction of relations between couples do not always lead to formal divorce, because, according to social and cultural conditions, sometimes couples are forced to live together. In this situation, the family structure is preserved, but the family is empty from the inside. Families are faced with the reduction of emotional space and the cooling of the family environment, which leads to emotional divorce and sometimes the desire for divorce. Dissatisfaction with married life, reduction of intimacy and emotional distancing of couples causes the desire to divorce in married people (4, 5).

Many studies have investigated the causes of marital conflicts. Studies show that some early maladaptive schemas are significantly repeated among divorce applicants or people who have less marital satisfaction (6). Also, studies show that initial incompatible schemas play a major role in marital incompatibility as a scale for measuring the quality of couple relationships (7).

Schemas are considered the deepest and most fundamental cognitive structures in the organization of the human psyche (8). As one of the most important concepts in cognitive psychology, schemas affect things like how people think, how they perceive and process, and how they remember information. From Yang's point of view, early maladaptive schemas are self-harming emotional cognitive

patterns that are formed in the mind early in development and evolution and are repeated throughout life, and primary schemas include people's beliefs about themselves, others, and the environment, which are caused by not satisfying needs. First, especially emotional needs are formed (9). Schemas, through filtering experiences, provide an interpretation of them that is consistent with their structure and lead to choices that are consistent with them. Of course, schemas are not necessarily compatible and have a natural function. Yang et al. (10) listed eighteen early maladaptive schemas in five domains that are maladaptive and dysfunctional.

Falehkar et al. (11) showed that the initial incompatible schemas of cutting and rejecting and listening to excessive ringing can significantly predict marital satisfaction. Also, Dehghani and Esmailian (12) showed that divorce applicants have primary incompatible schemas (emotional deprivation, abandonment and rejection, mistrust, pessimism and emotional inhibition), personality traits (neuroticism, empiricism, agreeableness, and conscientiousness) being), and family functioning (problem solving, roles, and behavior control) differ from each other. Statistical analysis showed that the demand for divorce is explained by the above subscales. It seems that paying attention to such variables play an important role in primary and secondary prevention.

The results of other studies showed that there is a negative and significant relationship between initial maladaptive schemas and marital adjustment for men and women. There is a positive and significant relationship between the total score of early maladaptive schemas and the fear of intimacy score for men and women. Also, the findings related to path analysis showed that fear of intimacy mediates the relationship between early maladaptive schemas and marital adjustment. Based on the findings of this research, it can be concluded that initial incompatible schemas

play a major role in marital incompatibility through fear of intimacy. Therefore, the need to pay attention to variables such as initial incompatible schemas and fear of intimacy in working with couples is felt more than before (13).

Studies showed that the early maladaptive schemas of emotional deprivation, shame / deficiency, failure, untransformed self / predicament, obedience, sacrifice, emotional inhibition, and emotional regulation are related to emotional divorce. In step-by-step regression analysis, "Sacrifice" schema was the best predictor of couples' emotional divorce, and then "Emotion suppression" was one of the predictors of emotional divorce (14). Early maladaptive schemas have been predictive of a range of marital problems through emotion regulation (6, 15, 16). In the following, the definition of emotional regulation is discussed.

Thompson (17) defines emotion regulation as internal and external processes that are responsible for monitoring, evaluating and modulating emotional reactions, especially intense and fleeting forms to achieve individual goals. This definition includes several emotion regulation processes.

So far, several treatments have been used to improve the level of emotional regulation and marital satisfaction of couples. For example, emotionally focused therapy has been used to improve emotional regulation (18), and marital satisfaction (19). But as far as we know, this intervention has not been used to improve the emotional regulation and marital satisfaction of couples who have early maladaptive schemas. In addition, cognitive behavioral therapy has been used to improve emotional regulation (20) and marital quality (21), and the effectiveness of this intervention on maladaptive schemas in person with marital problems (22) have been showed. Based on what we know based on the searches conducted, no study has been conducted to investigate the effect of the CBT and EFT on the emotional regulation and marital satisfaction of couples who have initial

incompatible schemas. On the other hand, it seems that the existence of early maladaptive schemas should be investigated before planning treatment. Therefore, the current research has investigated the effectiveness of two interventions on emotion regulation and marital satisfaction in couples with primary incompatible schemas. In the following, eft and CBT interventions have been examined.

One of the advantages of the EFT method, which makes this approach more effective than many other treatment approaches, is being structured and having a step-by-step treatment plan. These features have reduced the probability of recurrence of disorders after using this treatment method (23). Assessment of communication style is the first step of EFT method. By performing this stage, all kinds of defenses of the person are revealed and its consequences are explained for the person, by repeating these steps, hidden and suppressed emotions are revealed to the person and he is able to improve the negative communication cycle that was caused by the presence of these hidden and suppressed emotions. forgive other features of EFT method include emphasis on secure and adaptive attachment styles, through attention, support and mutual care to meet the needs of the individual and those around him (24).

Emotion-focused therapy is based on the key principle that everything is fluid and in motion. This approach emphasizes that the process of experience affects personality traits, interpersonal relationships, and even client changes. On the other hand, this treatment is based on dialectic theory. According to this type of human structuralism, a dynamic system is considered in which its various components are continuously producing, experiencing and acting. The second theoretical basis of EFT method is the biological theory of emotion, which is based on the dialectical structuralist view of the concept of personality (25). Another intervention proposed in this plan is CBT, which will be discussed further.

The cognitive behavioral model is an empirical and evidence-based treatment that integrates cognitive and behavioral science theories, along with clinical psychology, to conclude that how people perceive a situation determines their reaction more than the actual situation. This model provides a useful tool that can be used to create or facilitate revision of beliefs such as cognitive restructuring or exposure / response prevention. These protocols have been applied to both groups and individuals, even if the individual format is used more often than the group format (26).

This treatment plan uses patients' cooperation as a motivational factor to create changes in their behavior, beliefs and habits that can be self-reinforcing. In fact, this model actively involves patients in their treatment so that they know that the way to improve their lives is to adjust their thinking and approach to everyday situations. Common assignments of the approach include recommendations for client participation in skill acquisition and patient cooperation in self-problem solving, and these assignments predict that the risk of relapse will decrease after treatment termination. In other words, the client becomes his own therapist (27).

2. Objectives

In fact, the current research examines the issue of which of the two emotion-based therapies as an EFT method and CBT as a cognition-based therapy can improve marital satisfaction and intimacy as well as attachment and adjustment styles. Emotion is more effective in couples suffering from a specific maladaptive schema.

Therefore, according to what has been said, the basic question of this research is whether treatment based on emotion and cognitive behavioral psychotherapy is effective in improving marital satisfaction and adjustment, attachment styles and emotional regulation of couples with marital conflict with primary active

maladaptive schemas. No, and if effective, is there a significant difference in the effectiveness of these two interventions?

3. Methods

Study design and participants

The current research design was semi-experimental with three groups with pre-test, post-test and control group, and it is considered practical in terms of application. The statistical population included all marital conflict clients who referred to Mehrpaya clinic in Mashhad in 1402, who have active primary maladaptive schemas. The sample included 45 members of the statistical community who met the criteria for entering the research. The people of the sample group were selected by available sampling method and randomly placed in three groups of 15 people. Random assignment was achieved using a computer-generated randomization list. All participants completed the marital satisfaction and emotional regulation questionnaire as a pre-test. Then, the first experimental group was subjected to EFT method according to the eight-session protocol of Greenberg and Watson (Table 1), and the second experimental group was subjected to CBT, and the people of the control group did not receive any intervention, and after the intervention, all participants completed the questionnaires used in the pre-test. completed in post-test conditions.

Entry criteria will include the following. The person has referred to resolve marital conflicts. In the questionnaire of Yung's schemas, he scored higher than the cut-off line in the schemas of the ear-to-ring area of over-inhibition. At the same time as participating in the research, the individual or his spouse should not participate in any other intervention. None of the spouses should be addicted to drugs and stimulants. The person should be between 25 and 55 years old. The entry criteria were checked

by the researcher in the introduction meeting. Then, Young's schema test was performed and if the person was qualified, they were included in the study while being aware of the ethical codes.

Instruments

Gertz and Roemer's (2004) Emotion Regulation Questionnaire (DERS):

The difficulty in emotional regulation questionnaire was designed and made by Gertz and Roemer in 2004 to evaluate the difficulty in emotional regulation with a clinical approach. The items of this scale were compiled based on numerous conversations with experts in the field of emotional regulation, and the generalized expectation scale of negative emotional regulation was used as a model for designing this questionnaire. The range of responses in this scale includes a 5-point Likert scale. This questionnaire includes 6 subscales, which are: non-acceptance of emotional responses, difficulty in performing purposeful behavior, difficulty in impulse control, lack of emotional awareness, limited access to emotional regulation strategies, and lack of emotional clarity. This questionnaire has a high internal consistency, which is equal to 0.93, and all six subscales have Cronbach's alpha above 0.80. Also, this questionnaire has a significant correlation with the Generalized Expectation Scale of Negative Emotional Regulation and the Hayes Acceptance and Action Questionnaire. Also, Cronbach's

alpha of this questionnaire was estimated at 0.92 in Iran (28).

The ENRICH Marital Satisfaction (EMS) Scale:

The Enrich Marital Satisfaction Questionnaire, whose 47-question form was prepared by Olson (1998), includes 12 scales, which are: contractual response, marital satisfaction, personality issues, marital relationship, conflict resolution, financial supervision, leisure activities, Sexual relations, marriage and children, relatives and friends, egalitarian roles and ideological orientation are made. This tool is considered as five options (completely agree, agree, neither agree nor disagree, disagree, completely disagree), each of which is given from one to five points. The alpha coefficient of "Enrich Questionnaire" in Olson's report was between 0.7 to 0.9 so it was evaluated at an acceptable level for its subscales (29).

Emotionally Focused Therapy (EFT):

In this study, the Emotionally Focused Therapy (EFT) intervention (30) was implemented based on the eight-session protocol developed by Greenberg and Watson. The intervention focused on improving emotional regulation and marital satisfaction through exploring emotions, addressing attachment needs, and restructuring interaction patterns. A summary of the session content is presented in [Table 1](#).

Table 1. Emotionally Focused Therapy (EFT) Eight-Session Protocol of Greenberg and Watson

Session	Focus	Description
1	Establishing Alliance and Identifying Patterns	Building trust and rapport, identifying negative interaction patterns, and introducing EFT concepts.
2	Exploring Emotions and Attachment Needs	Identifying core emotional experiences and unmet attachment needs.
3	Accessing Primary Emotions	Helping partners express primary emotions underlying secondary reactive emotions.
4	Deepening Emotional Engagement	Encouraging partners to vulnerably share emotions and attachment needs.
5	Restructuring Interaction Patterns	Facilitating new ways of interacting to meet attachment needs and build security.
6	Integrating New Patterns	Reinforcing adaptive interaction patterns and exploring their effects on the relationship.
7	Addressing Unresolved Emotional Injuries	Focusing on repairing emotional injuries that undermine trust and security.
8	Consolidating Changes and Planning for the Future	Reviewing progress, reinforcing changes, and setting goals for maintaining the new relational dynamic.

Cognitive Behavioral Therapy (CBT):

In this study, the Cognitive Behavioral Therapy (CBT) intervention (31) was conducted following standard protocols designed to address maladaptive schemas, improve emotional regulation, and enhance

marital satisfaction. The intervention emphasized cognitive restructuring, emotion regulation strategies, and schema-focused techniques. A summary of the session content is presented in [Table 2](#).

Table 2. Cognitive Behavioral Therapy (CBT) Protocol

Session	Focus	Description
1	Introduction and Goal Setting	Building rapport, setting therapy goals, and educating participants about CBT principles.
2	Identifying Maladaptive Schemas	Exploring core beliefs and schemas contributing to marital conflicts and emotional dysregulation.
3	Cognitive Restructuring	Teaching participants to identify and challenge negative automatic thoughts and schema-driven beliefs.
4	Emotion Regulation Strategies	Introducing techniques such as mindfulness, relaxation, and distress tolerance.
5	Behavioral Experiments	Engaging in activities to test new behaviors and challenge maladaptive schemas in real-life contexts.
6	Communication Skills Training	Teaching effective communication techniques to improve marital interactions.
7	Consolidating New Patterns	Reinforcing adaptive cognitive and behavioral changes and integrating them into daily life.
8	Relapse Prevention and Future Planning	Developing strategies for maintaining progress and preventing relapse after the therapy concludes.

4. Results

In this research, the data of 45 people who were divided into three groups of 15 people (two experimental groups and one control group) was analyzed. In order to investigate the research hypotheses, due to the existence of an inter-subject variable (group) which has three levels and the

existence of two dependent variables in an interval scale (marital satisfaction and emotional regulation), MANCOVA method was used. SPSS-29 software was used for calculations. Descriptive indicators including age, level of education and duration of marriage are reported in [Table 3](#).

Table 3. Demographic indicators by three research groups

Variable (n=45)		Mean \pm standard deviation/frequency (percentage)			Sig.
		Exp. 1	Exp. 2	Control	
Education level	Diploma or less	2(13)	7(47)	4(26)	.097
	Bachelor	11(74)	7(47)	8(54)	
	Masters and higher	2(13)	1(6)	3(20)	
Duration of marriage (years)		8.05 \pm 3.21	7.44 \pm 2.93	6.31 \pm 2.11	.941
Age (years)		33.93 \pm 7.15	34.60 \pm 8.87	33.80 \pm 9.75	.963

The assumptions of using the MANCOVA statistical method were investigated. The assumptions of homogeneity of regression slopes, homogeneity of variances and covariances (examined by Box's M Test of Equality of Covariance Matrices), and normality of the distribution of subjects' scores (using Shapiro-Wilk test of normality), was investigated. All assumptions were met ($P>0.05$). Therefore,

there is no prohibition to use MANCOVA. The results of MANCOVA indicate that the effect of interventions had a significant effect on two variables of marital satisfaction, and emotion regulation, and the results of between-subjects effects tests shows significant effects of interventions on each dependent variable (marital satisfaction, and emotion regulation). In addition, the results of Bonferroni's post

hoc test showed that the intervention used in the 1th group (EFT) had a significant effect on both dependent variables (comparison of the 1th group and the control group), and the intervention used in the 2th group (CBT), also had a significant effect on improving each It had two

dependent variables (comparison of the 2th group and the control group), but no significant difference was observed in the effectiveness of the intervention used (EFT and CBT) on any of the dependent variables (comparison of the 1th and 2th groups). The results are reported in [Table 4](#).

Table 4. Descriptive indices of research variables and MANCOVA results

variable (n=45)		Mean \pm standard deviation		Multivariate Test	Tests of Between-Subjects Effects	Pairwise Comparisons with Bonferroni test		
		Pre-test	Post-test	Wilks' Lamb.	group	Ex1-Co.	Ex2-Co.	Ex1-Ex2
ER	Exp. 1	7.73 \pm 22.66	7.09 \pm 16.53	$F_{(4,78)} = 4.86$ $P = .001$	$F = 6.14$	$P = .016$	$P = .006$	$P = 1.00$
	Exp. 2	6.83 \pm 19.80	5.70 \pm 13.40		$P = .005$			
	Control	9.81 \pm 26.13	9.91 \pm 24.66		$\eta_p^2 = .235$			
MS	Exp. 1	10.17 \pm 79.26	14.45 \pm 89.66	$\eta_p^2 = .200$	$F_{(2,135)} = 6.47$	$P = .029$	$P = .036$	$P = 1.00$
	Exp. 2	8.04 \pm 81.86	7.08 \pm 99.00		$P = .018$			
	Control	10.75 \pm 86.60	14.81 \pm 86.40		$\eta_p^2 = .183$			

5. Discussion

The effect of EFT on marital satisfaction and emotion regulation

Early maladaptive schemas (EMSs) are enduring and pervasive themes or patterns comprised of memories, emotions, cognitions, and bodily sensations regarding oneself and one's relationships with others. They develop during childhood or adolescence and continue throughout life, influencing how individuals perceive and interpret their experiences (13).

Alertness-inhibition is one such schema, which can significantly impact marital satisfaction (19), and emotion regulation (6, 15, 16). This schema can lead to a heightened state of alertness and a tendency to inhibit or suppress emotions, which can create difficulties in interpersonal relationships, including marital relationships. People with alertness-inhibition schemas may struggle with expressing their emotions and needs, leading to misunderstandings and conflicts

within the relationship. They may also have difficulty trusting their partners, leading to feelings of insecurity and dissatisfaction.

In other hand Emotionally Focused Therapy (EFT) is a type of short-term treatment (30) used to improve attachment and bonding in adult relationships. It is based on the psychology of attachment bonds and helps people understand their attachments to others to improve their relationships. EFT encourages engagement with emotions, which may foster greater emotional regulation and thus transform relational processes to become more positive and less negative. From a bioecological perspective, the goal of EFT may be to enhance the resource characteristics of responsiveness and emotional regulation/expression to improve the proximal processes within the microsystem of the couple's relationship. EFT focuses on emotions and emotional communication in relationships and their influence on patterns of interaction. It also recognizes emotion as a powerful agent of

change, rather than simply part of the relationship problem. So, EFT looks at how individuals process their experiences, particularly their emotional responses, along with how partners interact together in patterns.

The therapist aims to guide the distressed couple away from rigid, harmful, and destructive ways of reacting and toward sensitive, flexible ones that support intimate and secure bonds⁴. This process can help couples see how they have been able to change and how new interaction patterns prevent conflict.

Research has found that EFT can improve interactions between partners and reduce the amount of stress that people experience in their relationships. In conclusion, while Alertness-inhibition Early Maladaptive Schemas can negatively affect marital satisfaction, Emotionally Focused Therapy (EFT) can be an effective approach to improve marital satisfaction by focusing on emotions and emotional communication in relationships.

EFT can improve emotion regulation through understanding emotions and patterns. EFT focuses on emotions and emotional communication in relationships and their influence on patterns of interaction. It recognizes emotion as a powerful agent of change, rather than simply part of the relationship problem. EFT looks at how individuals process their experiences, particularly their emotional responses, along with how partners interact together in patterns. EFT also can improve emotion regulation through guiding towards healthy emotional responses. The therapist aims to guide the distressed couple away from rigid, harmful, and destructive ways of reacting and toward sensitive, flexible ones that support intimate and secure bonds. This process can help couples see how they have been able to change and how new interaction patterns prevent conflict. EFT can also

improve emotion regulation through processing emotions. Emotionally focused therapists use different methods to help you process emotions and improve your relationship bonds. They include using empathy and repetition to encourage you to reflect on your beliefs, validating your emotional experiences, and giving you a chance to reenact important emotional experiences and come to healthier conclusions. EFT can improve emotion regulation through improving emotional intelligence. the essence of EFT is rooted in our awareness and relationship to our own emotions, both positive and negative, subsequently boosting emotional intelligence and improving our reactions to events and external behaviors. In the context of Alertness-Inhibition Early Maladaptive Schemas, where individuals may struggle with expressing their emotions and needs, EFT can provide a safe and supportive environment to explore these emotions. By understanding and changing the emotions that motivate their behavior, individuals can improve their emotion regulation, leading to healthier and more satisfying relationships. However, it's important to note that the effectiveness of EFT can vary depending on the specific circumstances and needs of the couple. Therefore, it's recommended to consult with a mental health professional for personalized advice.

The effect of CBT on marital satisfaction and emotion regulation

The results of statistical analysis showed that the use of CBT can significantly improve the level of marital satisfaction and emotional regulation skills in couples with Alertness-Inhibition schema. To explain these findings, it can be said that, as mentioned before, Alertness-Inhibition is a schema that can significantly impact marital satisfaction and emotion regulation.

in other hand, Cognitive Behavioral

Therapy (CBT) is a widely used therapeutic approach that can affect couple's emotion regulation through some capabilities and techniques (31). Actually, emotion regulation is a crucial aspect of CBT. It refers to the process by which individuals influence which emotions they have, when they have them, and how they experience and express their feelings. Emotion regulation can be automatic or controlled, conscious or unconscious, and may have effects at one or more points in the emotion-producing process.

CBT for emotion regulation typically comprises four sets of techniques. Mindfulness: This is an important element of CBT for emotion regulation. It teaches people to recognize their feelings before they get out of control. Cognitive Control Strategies: These teach people not to fixate on ways of thinking that only increase feeling overwhelmed. Exposure: This involves slowly facing fears until they are no longer intimidating. Challenging Schemas: This involves exercises like challenging schemas.

In the context of couples therapy, these techniques can be applied to help couples identify, understand, and modify their Alertness-Inhibition Early Maladaptive Schemas. For instance, mindfulness can help couples become more aware of their emotional responses and triggers. Cognitive control strategies can help them challenge and change maladaptive thought patterns that contribute to their schemas. Exposure can help them confront and overcome fears associated with their schemas, and challenging schemas can help them restructure maladaptive schemas into more adaptive ones. In conclusion, CBT, with its focus on emotion regulation and schema therapy, can be a powerful tool in helping couples with Alertness-Inhibition Early Maladaptive Schemas. By identifying and understanding these schemas, and by learning and applying emotion regulation techniques, couples can significantly

improve their emotional well-being and the quality of their relationship.

In order to explain the results reported about the effectiveness of CBT on marital satisfaction, it can be said that CBT can affect marital satisfaction through understanding alertness-Inhibition EMS. Alertness-Inhibition EMS are characterized by a heightened state of alertness to potential threats and a tendency to inhibit or suppress one's emotional responses. This schema often develops in response to childhood environments where expressing emotions was discouraged or punished. In a marital context, this can lead to difficulties in communication and emotional intimacy, as one or both partners may struggle to express their needs and feelings effectively.

CBT Intervention Strategies for couples with Alertness-Inhibition EMS involves several key strategies include: Schema Identification and Education: Therapists work with couples to identify the presence of Alertness-Inhibition EMS and educate them on how these schemas influence their interactions and emotional experiences. Understanding the origin and impact of these schemas is crucial for change. Cognitive Restructuring: Couples are taught to recognize and challenge the automatic thoughts and assumptions that arise from their schemas. For example, a partner with Alertness-Inhibition may assume that expressing emotions will lead to conflict or rejection. CBT helps them to question these beliefs and develop more balanced thoughts. Behavioral Experiments: Couples engage in behavioral experiments where they test out new ways of interacting. This could involve taking small risks in expressing emotions and observing the outcomes, which often contradicts their schema-based expectations.

6. Conclusion

In conclusion, Early Maladaptive Schemas (EMSs), particularly the Alertness-

Inhibition schema, can significantly impact both marital satisfaction and emotion regulation. However, the results of the current study showed that the CBT and the EFT had effective results on improving marital satisfaction and emotional regulation of conflicted couples who have an Alertness-Inhibition schema. EFT offers a promising approach to address these challenges. Also, CBT offers a promising approach to helping couples with Alertness-Inhibition Early Maladaptive Schemas improve their emotion regulation and, consequently, their marital satisfaction.

Applying these two interventions helps couples to identifying and understanding maladaptive schemas developed during childhood, couples can begin to challenge and modify their maladaptive thought patterns. Techniques such as mindfulness, cognitive control strategies, exposure, and challenging schemas play a crucial role in this process. Mindfulness increases awareness of emotional responses and triggers, cognitive control strategies help in changing maladaptive thought patterns, exposure aids in confronting and overcoming fears associated with schemas, and challenging schemas assists in restructuring maladaptive schemas into more adaptive ones. Therefore, CBT and EFT provide a comprehensive framework for couples to navigate their emotional landscapes more effectively, fostering healthier and more satisfying relationships. Further research is encouraged to continue exploring and refining these techniques within the context of couple's therapy.

Acknowledgements: Hereby, we express our gratitude to staff of Mehrpaya clinic of Mashhad, as well as all the participants who provided the basis for the implementation of this research. The current research was registered by the Ethics Committee of Islamic Azad University of Zahedan with the ethics identifier IR.IAU.ZAH.REC.1402.025

and in the Clinical Trial Registration Center of Iran with the trial identifier of IRCT20230618058511N2.

Availability of data and materials:

Availability of Data and Materials: The data collected during this study are not publicly available due to the limited sample size, which could potentially compromise participant anonymity. However, they are available from the corresponding author upon reasonable request via email.

Conflicts of interests: This study does not have any conflict of interests. Financial disclosure The Azad University of Zahedan was responsible for the financial issues of this research.

Consent for publication: All participants provided informed consent for the publication of anonymized data derived from this study. No identifiable individual information is included in this manuscript.

Ethics approval and consent to participate:

This study was approved by the Ethics Committee of Islamic Azad University of Zahedan with the ethics identifier IR.IAU.ZAH.REC.1402.025. It was also registered with the Clinical Trial Registration Center of Iran under the trial identifier IRCT20230618058511N2. All participants provided written informed consent prior to their participation in the study, in accordance with the ethical guidelines of the Declaration of Helsinki.

Financial disclosure: This research was conducted as part of a project approved with funding by the Islamic Azad University of Zahedan. The study was supported through the allocated budget for this approved project. The funding body had no role in the design of the study, data collection, analysis, interpretation, or writing of the manuscript.

Author contributions: The current research

is taken from the research plan which has been approved in Zahedan Islamic Azad University and all the authors of the current article had a direct role in the implementation of this research.

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