

Effectiveness of Emotional Schema Therapy on the Quality of Relationship Dimensions and Conflict Resolution Styles in Betrayed Spouses

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1. Round 1

1.1. Reviewer 1

Reviewer:

While the references provide empirical support, a clearer theoretical explanation of why ST and EST are particularly suited for this issue would strengthen the argument.

The phrase “emotional schema” is mentioned early in the introduction but not explicitly defined. Adding a definition from Leahy’s framework would improve clarity.

The article mentions that the Relationship Quality Dimensions Scale (RQDS) and the Conflict Resolution Styles Scale (CRSS) were used but does not provide details on their psychometric properties for an Iranian population. If available, include Cronbach’s alpha or validation studies.

Provide more details on how these assumptions were tested (e.g., Shapiro-Wilk test, Levene’s test).

The article attributes improvements solely to EST but does not discuss alternative explanations, such as spontaneous recovery or social support effects. Acknowledge these as potential confounds.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The introduction asserts: “Schema Therapy, originally developed by Young, posits that early maladaptive schemas (EMS) developed in childhood can significantly influence relational patterns in adulthood.”

The citations (e.g., Barzegaran et al., 2021; Asgari & Goodarzi, 2019; Letafati Beris et al., 2021) are used multiple times in the introduction. Consolidate references where possible to improve readability.

The EST intervention sessions are described well, but there is no mention of therapist training or adherence checks. Were the therapists certified in EST? How was treatment fidelity ensured?

In Table 1, the control group shows little change in scores. Address whether any trends (even if non-significant) were observed in the control group that could suggest a placebo or Hawthorne effect.

Discuss the practical implications of this finding. Does this suggest the treatment effects are stable, or does it indicate a potential ceiling effect?

While the statistical significance is clear, discuss clinical significance. Were effect sizes calculated? What threshold would indicate meaningful change in relationship quality and conflict resolution?

Response: Revised and uploaded the manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.