







The Effectiveness of Emotionally Focused Couple Therapy on Self-Differentiation and Intolerance of Uncertainty in Couples Seeking Divorce

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ABSTRACT

Objective: This study aimed to investigate the effectiveness of Emotionally Focused Couple Therapy (EFCT) on differentiation of self and the reduction of intolerance of uncertainty in couples seeking divorce.

Methods: The research method was quasi-experimental with a pretest–posttest control group design. The statistical population consisted of couples seeking divorce in Tehran, from which 30 couples were selected through convenience sampling and randomly assigned to experimental and control groups. The experimental group underwent a 10-session EFCT intervention, each session lasting 90 minutes, while the control group did not receive any intervention.

Findings: Findings showed that Emotionally Focused Couple Therapy significantly increased differentiation of self and reduced intolerance of uncertainty in couples seeking divorce.

Conclusion: These results suggest that by focusing on core emotions and emotional interactions, it is possible to improve interpersonal relationships and facilitate more informed decision-making in marital relationships. Accordingly, the use of EFCT is recommended in psychological interventions related to divorce crises.

Keywords: divorce, Emotionally Focused Couple Therapy, differentiation of self, intolerance of uncertainty, marital relationships

1. Introduction

The family institution has historically been one of the most fundamental social structures, playing a pivotal role in the psychological and social well-being of its

members. Scholars assert that a healthy society emerges from healthy families, and the sustainability of a family depends on the presence of constructive and functional relationships among its members—particularly between spouses (Jahanbakhshie et al., 2025; Rastgar et al., 2025).

However, recent social, cultural, and economic changes have introduced new challenges into marital relationships. If unresolved, these challenges may lead to emotional detachment, severe conflicts, and ultimately, divorce (Asayesh et al., 2024; Golrokh et al., 2024).

Couples seeking divorce often experience negative emotions, psychological harm, and a lack of forgiveness, all of which impair their ability to continue their marital lives. One critical psychological factor in this context is intolerance of uncertainty—a condition in which individuals are unable to accept the ambiguity of their relationship's future, leading to anxiety, cognitive avoidance, and impulsive decision-making. In such situations, effective therapeutic interventions can play a crucial role in improving relational dynamics (Al-Dmour & Halim Arabiyat, 2024; Rastgar et al., 2025).

The concept of intolerance of uncertainty is considered a significant cognitive bias that influences how individuals interpret, process, and respond to uncertain situations (Carnahan et al., 2022; Dugas et al., 2004). This cognitive feature causes individuals to perceive ambiguous situations negatively and respond to them with avoidance or other maladaptive reactions (Brown & Medcalf-Bell, 2022; Karadoğan & Tagay, 2022). When people respond negatively to unfamiliar or unpredictable events, the phenomenon is termed “intolerance of uncertainty” (Carnahan et al., 2022).

Intolerance of uncertainty is defined as a trait in which individuals experience distress in ambiguous or uncertain situations (Frenkel-Brunswick, 1949). This construct encompasses a person's perception of uncertainty in daily life and their cognitive, emotional, and behavioral responses to such conditions (Freeston et al., 1994; Ladouceur et al., 2000). Some studies suggest that this trait is predominantly future-oriented and distinct from current psychological structures, making it a transdiagnostic process observed across a range of emotional disorders (Bottesi et al., 2019; McEvoy & Mahoney, 2012). Another definition views intolerance of uncertainty as a tendency to regard the possibility of a negative event—regardless of its actual likelihood—as unacceptable (Carleton et al., 2010; Carleton et al., 2012; Carleton et al., 2007). In recent years, this concept has been characterized as a deeply ingrained tendency based on negative beliefs about ambiguity and its consequences (Carleton et al., 2012). Originally introduced to explain anxiety (McEvoy & Mahoney, 2012), Carleton specifically defines it as the individual's inability to tolerate

negative responses caused by a lack of clear and certain knowledge about the future.

Another relevant concept in couples seeking divorce is self-differentiation. Self-differentiation refers to an intrapersonal capacity to maintain a balance between autonomy and healthy attachment within family relationships. It reflects emotional maturity and the ability to distinguish between thoughts and feelings (Namani et al., 2024; Tahmasebizadeh, 2024; Tang et al., 2024). This process involves regulated emotional responses, readiness for constructive interaction with others, the ability to temporarily disengage emotionally to preserve self-efficacy, and the attainment of a distinct “self” within relational contexts (Vaghee et al., 2017; Vahidi et al., 2022; Zarei, 2019).

In essence, the term “self-differentiation” denotes a developmental trajectory rather than a fixed endpoint—a path through which one gradually learns to experience emotional independence alongside healthy attachment, freeing oneself from unnecessary anxieties (Wiebe & Johnson, 2016). An individual's level of self-differentiation becomes evident in stressful family situations. One's ability to regulate behavior and make decisions based on clear principles and rational thinking—even under intense anxiety—reflects their true level of self-differentiation (Kermanshahi et al., 2023; Koerner et al., 2017; Kupferberg & Hasler, 2023). Highly differentiated individuals not only manage their behavior logically in crises but also maintain deep emotional bonds with important family members. In contrast, those with low self-differentiation often exhibit extreme emotional reactions and may suffer from reduced psychological resilience and impaired relational quality over time.

As individuals progress in the self-differentiation process and enhance their emotion regulation, rational thinking, and intrapersonal autonomy, significant changes emerge in their relational patterns and psychological resilience (Sahib et al., 2023).

Emotion-focused approaches emphasize the role of emotions and emotion regulation in individual attachment styles. This perspective highlights the importance of emotional processes and communication in shaping interaction and emotional patterns (Karukivi et al., 2014). Emotion-focused approaches to marital relationships, alongside behavioral approaches, have received considerable research attention (Denton et al., 2012). Findings from a meta-analysis by Wiebe and Johnson demonstrated that the effectiveness of Emotionally Focused

Therapy extends beyond mere categorization of couples and their problems, serving as an evidence-based approach for treating distressed couples and advancing research in family therapy (Wiebe & Johnson, 2016).

Intolerance of uncertainty is a transdiagnostic factor evident in emotional disorders and is associated with difficulties in emotion regulation (Sahib et al., 2023). Emotion-focused therapy, through emotion regulation strategies, can address intolerance of uncertainty, cognitive avoidance, and positive beliefs about worry—all of which play major roles in anxiety disorders (Koerner et al., 2017). Therefore, employing emotion regulation techniques and emotion-focused approaches can help reduce intolerance of uncertainty.

Numerous studies have shown that attachment styles and emotion regulation skills influence individuals' willingness to forgive. Avoidant attachment and negative thinking negatively predict the benevolence dimension of forgiveness. Anxious and avoidant attachment and empathy positively predict the avoidance dimension of forgiveness, and only anxious attachment predicts the healing dimension of forgiveness (Burnette et al., 2007).

According to attachment theorists, empathy—rather than self-protection or aggressive behaviors—is essential for forgiveness. Empathy is associated with secure attachment and develops without overwhelming emotional distress. Thus, secure relational experiences partially derive from internalized secure and empathic experiences, and relationships that allow for post-conflict repair foster these internal resources for emotional regulation and forgiveness (Karadoğan & Tagay, 2022).

Furthermore, after painful experiences, reassurance of forgiveness by key attachment figures can increase one's capacity for emotion regulation and forgiveness toward transgressors. For this reason, family counselors' work on enhancing emotion regulation skills is crucial, helping individuals express more forgiving behaviors toward their spouses.

Accordingly, the present study seeks to answer the question: Does Emotionally Focused Therapy influence intolerance of uncertainty and self-differentiation in couples seeking divorce?

2. Methods and Materials

2.1. Study Design and Participants

This study employed a quasi-experimental design using a pretest-posttest control group structure. The statistical

population consisted of all couples who sought divorce at family counseling centers in Tehran during the first half of 2024. From among the applicants, 30 couples (60 individuals) who met the inclusion criteria were selected via convenience sampling and were randomly assigned to the experimental group (15 couples) and the control group (15 couples).

The inclusion criteria were: an explicit desire for divorce (verified by family court referral and serious dissatisfaction with continuing the marital relationship), at least three consecutive months of cohabitation within the past year, a minimum age of 25 years for each partner, no participation in couple therapy during the past year, and no history of psychotic disorders or severe substance abuse (as reported by the center's psychologist).

In the pretest phase, both groups were assessed using two standardized instruments: the Differentiation of Self Inventory (DSI; Walsh et al., 1991) and the Intolerance of Uncertainty Scale (IUS; Carleton et al., 2007). The experimental group subsequently received ten one-hour sessions of Emotionally Focused Couple Therapy (EFT), while the control group received standard supportive psychotherapy, primarily consisting of active listening and general guidance. One week after the conclusion of the interventions, both groups completed the posttest using the same two instruments. One-month and three-month follow-up assessments were also conducted to examine the stability of treatment effects.

2.2. Measures

2.2.1. Intolerance of Uncertainty

The Intolerance of Uncertainty Scale (IUS) was developed by Freeston et al. (1994) to measure individuals' tolerance of uncertain and ambiguous situations. This scale comprises 27 items rated on a five-point Likert scale. Buhr and Dugas (2002) reported a Cronbach's alpha of 0.94 and a five-week test-retest reliability of 0.74. In an Iranian sample, Hamidpour and Andouz (2020) found a Cronbach's alpha of 0.88 and a three-week test-retest reliability of 0.76. In the present study, Cronbach's alpha for this scale was 0.85, confirming its reliability and validity.

2.2.2. Differentiation of Self

The Differentiation of Self Inventory–Short Form (DSI-SH) was initially developed by Drake (2011) and includes 20 items distributed across four subscales: Emotional

Reactivity (items 6, 9, 11, 14, 16, 18), "I" Position (items 1, 3, 10, 12, 19, 20), Emotional Cutoff (items 4, 7, 15), and Fusion with Others (items 2, 5, 8, 13, 17). Responses are recorded on a six-point Likert scale, ranging from "1 = Not at all true for me" to "6 = Completely true for me." The total score ranges from 20 to 120, with higher scores indicating greater self-differentiation. Drake (2011) reported Cronbach's alpha coefficients of 0.88 for Emotional Reactivity, 0.85 for the "I" Position, 0.79 for Emotional Cutoff, and 0.70 for Fusion with Others. Confirmatory factor analysis supported the four-factor structure. In an Iranian sample, Latifian and Etemad (2014) reported an overall Cronbach's alpha of 0.78 and subscale alphas of 0.67 ("I" Position), 0.78 (Emotional Reactivity), 0.73 (Emotional Cutoff), and 0.76 (Fusion with Others), with confirmatory factor analysis supporting the four-factor structure.

2.3. Intervention

The intervention protocol consisted of ten structured sessions of Emotion-Focused Therapy (EFT) aimed at improving emotional regulation and relational functioning in couples. In the first session, the therapist established rapport and clarified therapeutic rules. The second session involved maintaining the therapeutic alliance and collecting baseline emotional data using tools such as the daily emotion log and the basic emotion scale. In the third session, clinical interview forms and significant others scales were administered, and the previous homework was reviewed. The fourth session focused on integrating emotional assessment data, clinical history, and the client's social network to identify the core emotional issue. The fifth session introduced cognitive techniques like attentional shifting, sensory awareness, and positive imagery. In the sixth session, the discussion centered around the five basic emotions—fear, sadness, anger, disgust, and joy—while evaluating the client's emotional intensity. The seventh session involved teaching reattribution, labeling, and the "three questions" technique. In the eighth session, clients

were taught to experience and regulate emotions using adaptive strategies. The ninth session addressed cultural and gender-based factors related to emotion and introduced themes relevant to therapy termination, such as increasing self-efficacy and reinforcing new relational behaviors. The tenth and final session included a review of progress, validation of feelings related to ending therapy, and guidance for post-treatment contact and emotional processing.

2.4. Data Analysis

Data were analyzed using SPSS version 26. The primary statistical method was two-way repeated measures ANOVA. To assess demographic variables, Fisher's exact test was used. The Kolmogorov-Smirnov test was employed to test the assumption of normality, Mauchly's test was used for the assumption of sphericity, and Levene's test assessed homogeneity of variances. The level of significance for all tests was set at 0.05.

3. Findings and Results

The mean and standard deviation of the ages in the experimental and control groups were 43.40 ± 3.92 and 44.07 ± 4.49 years, respectively ($P = 0.669$). The results of the independent samples t-test for age and Fisher's exact test for gender, education level, and marital status indicated that there were no statistically significant differences between the experimental and control groups ($P > 0.05$).

According to Table 1, descriptive statistics for both groups at the pretest, posttest, and follow-up stages are presented. As shown in Table 1, the mean scores for the experimental group improved from pretest to follow-up. This improvement was reflected in increased self-differentiation scores and decreased intolerance of uncertainty scores, indicating the impact of the Emotionally Focused Therapy (EFT) intervention on these variables. In contrast, the control group showed minimal change.

Table 1

Descriptive Statistics

Variable	Group	Pretest (M ± SD)	Posttest (M ± SD)	Follow-up (M ± SD)
Intolerance of Uncertainty	Experimental	60.56 ± 3.67	44.40 ± 3.70	45.40 ± 3.70
	Control	58.80 ± 2.16	58.48 ± 3.38	59.12 ± 3.19
Self-Differentiation	Experimental	80.56 ± 3.67	105.40 ± 3.70	106.40 ± 3.70
	Control	86.80 ± 2.16	85.48 ± 3.38	85.12 ± 3.19

To analyze the data and test the hypotheses regarding self-differentiation and intolerance of uncertainty, a two-way repeated measures ANOVA was conducted. Prior to this analysis, assumptions of the ANOVA were examined. The Kolmogorov-Smirnov test results indicated that data distribution was normal at the 95% confidence level ($P > 0.05$). The Levene's test results were greater than 0.05, satisfying the assumption of homogeneity of variances. Mauchly's test of sphericity showed that the sphericity assumption was met for both self-differentiation ($\chi^2 = 3.56$, $P = 0.358$) and intolerance of uncertainty ($\chi^2 = 16.05$, $P = 0.055$), thus the Sphericity Assumed correction was applied.

To assess the equality of covariance matrices, Box's M test was used. The results confirmed that the assumption was satisfied for both self-differentiation (Box's $M = 3.051$, $F = 1.572$, $P = 0.514$) and intolerance of uncertainty (Box's $M = 4.179$, $F = 3.260$, $P = 0.508$).

Between-group analyses showed significant differences between the experimental and control groups in terms of mean self-differentiation ($P = 0.008$) and intolerance of uncertainty ($P = 0.024$). Within-group (time) analyses indicated that differences in mean scores of self-

differentiation ($P < 0.001$) and intolerance of uncertainty ($P < 0.001$) were statistically significant. In other words, the differences in the mean scores for self-differentiation and intolerance of uncertainty across the pretest, posttest, and follow-up stages were 67% and 78%, respectively, and statistically significant.

Furthermore, results from Table 2 demonstrate that the interaction effect between group and time on the variables of self-differentiation and intolerance of uncertainty was also significant ($P < 0.001$). This indicates that the intervention led to increased mean scores of self-differentiation and decreased scores of intolerance of uncertainty during the posttest and follow-up stages in the experimental group compared to the control group.

The effect size (η^2) for between-group, within-group (time), and interaction effects for the self-differentiation variable was 0.77, meaning that 77% of the variance in self-differentiation scores could be explained by these sources of change. The effect size for the intolerance of uncertainty variable was 0.71, indicating that 71% of the variance in intolerance of uncertainty scores was also explained by the same factors.

Table 2

Two-Way Repeated Measures ANOVA Results for the Effect of the Independent Variable on Self-Differentiation and Intolerance of Uncertainty

Variable	Source	SS	df	MS	F	P	η^2
Self-Differentiation	Group	205.589	1	205.589	4.688	0.033	0.27
	Time	96.572	2	48.286	24.416	<0.001	0.67
	Group * Time	120.001	2	60.000	30.888	<0.001	0.71
Intolerance of Uncertainty	Group	98.822	1	98.822	15.703	0.024	0.204
	Time	92.822	2	46.411	36.997	<0.001	0.785
	Group * Time	132.022	2	66.011	18.206	<0.001	0.653

4. Discussion and Conclusion

The present study aimed to investigate the effectiveness of emotion-focused therapy on intolerance of uncertainty and self-differentiation in couples who have experienced infidelity.

The findings related to self-differentiation are consistent with those of Keyhan et al. (2022), Imani-Rad et al. (2021), and Dalgleish (2013). Emotionally Focused Couple Therapy (EFCT) helps couples enhance their emotional awareness, express emotions effectively, and restructure emotional interactions, thereby improving their ability to maintain individual identity within a close relationship. This reflects

the concept of self-differentiation, in which an individual is able to remain emotionally connected to their partner without losing their sense of self.

In fact, when couples can process negative emotions resulting from conflict or infidelity in a constructive manner, they are less likely to experience emotional fusion or severe emotional distancing. The study by Keyhan et al. (2022) demonstrated that EFCT can improve couples' spiritual and psychological characteristics such as patience, acceptance, and constructive interaction—all key elements of self-differentiation.

Imani-Rad et al. (2021) also confirmed that working on core emotions and teaching the expression and regulation of these emotions can enhance individuals' awareness of

themselves and others, contributing to the development of healthy psychological boundaries. In such cases, individuals are able to acknowledge both their own and their partner's needs while maintaining balance in their interpersonal relationships (Imanirad et al., 2021).

Dalgleish (2013) emphasized that EFCT disrupts negative interaction cycles by helping individuals understand the emotional roots of their own and their partner's reactions, leading to more positive interactions and increased emotional security. This process directly contributes to higher levels of self-differentiation in couples (Dalgleish, 2013).

In sum, the emotion-focused approach—by providing a foundation for emotional awareness, acceptance, and emotional restructuring—can foster increased self-differentiation in couples seeking divorce, as it targets the internal conflicts between autonomy and intimacy and strengthens the ability to preserve individual identity within the relationship.

The findings of the current study regarding the reduction of intolerance of uncertainty are consistent with prior studies (Tanbakouchian, Zanganeh, et al., 2021; Tanbakouchian, Zanganeh Motlagh, et al., 2021). Consistent with prior research, individuals with high levels of intolerance of uncertainty interpret ambiguous and unpredictable situations as threatening when in a negative emotional state, and they demonstrate poorer cognitive performance. This condition increases their vulnerability to psychological—and potentially neurological—harm.

Emotion-focused therapy provides a suitable framework for addressing uncertainty by emphasizing the experience, expression, and processing of emotions. This approach, grounded in the assumption that emotions are adaptive, seeks to modify maladaptive and damaging emotions through increased emotional awareness, acceptance, and the replacement of these emotions with adaptive alternatives. Emotion-focused therapy helps clients redefine how they respond to and use their emotions and allows them to reconstruct dysfunctional psychological patterns through an empathetic therapeutic relationship.

Through techniques such as emotional and cognitive reappraisal, emotion-focused therapy teaches clients to view stressful situations more positively and compassionately. This leads to reduced emotional reactivity and better management of uncertainty and worry in individuals with anxiety disorders. As a result, reappraisal-based strategies can moderate negative emotional experiences and decrease intolerance of uncertainty.

Additionally, EFCT contributes to managing cognitive avoidance and positive beliefs about worry—factors that significantly influence the development and persistence of anxiety disorders—through emotion regulation strategies. Techniques such as emotional self-disclosure and cognitive reprogramming are central elements of this therapy, helping clients to accept ambiguous situations and enhance their tolerance for uncertainty.

As with any research, this study faced certain limitations that may impact the interpretation and generalizability of the results. One key limitation was the restricted sampling, which was limited to a specific geographic area and a specific population group, potentially limiting the generalizability of findings to broader populations. Furthermore, the use of self-report instruments may have introduced social desirability bias or self-critical response tendencies.

Given that most prior studies in this domain have employed cross-sectional designs, there is a need for longitudinal research to better understand causal relationships between the studied variables. Future research should aim to include larger and more diverse samples to enhance generalizability. Additionally, the use of multi-method assessment tools, including interviews and direct observations, could help reduce the biases associated with self-reporting. Researchers are also encouraged to examine the long-term effects of emotion-focused interventions across different age and cultural groups to gain updated insights into the efficacy of these therapeutic approaches.

5. Suggestions and Limitations

One limitation of the study was the lack of cooperation from some participants, which was addressed by building trust with them. Another limitation was the inability to hold sessions on fixed days of the week. To overcome this, the researcher adapted the schedule to meet participants' needs. Additionally, an unavoidable limitation was the absence of comparable studies on the effect of individual training on sexual self-esteem for direct comparison.

The findings of this study showed that neither individual nor group training significantly affected sexual self-esteem, but individual training was more effective than group training in improving sexual satisfaction. Therefore, it is recommended that individual training be used to enhance sexual satisfaction. It is also advised that educational designers and practitioners use the results of this study to hold workshops and sexual skills training courses

individually to increase women's knowledge in areas such as obstetrics, women's health, and marital skills—particularly for midwifery students, health care providers, and public health personnel. Doing so would ensure that those responsible for educating clients have sufficient knowledge to deliver these topics effectively.

Authors' Contributions

All authors have contributed significantly to the research process and the development of the manuscript.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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