






## The Effectiveness of Emotion-Focused Therapy on Relational Ethics and Behavioral Emotion Regulation in Women with Marital Conflicts

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### ABSTRACT

**Objective:** This study aimed to examine the effectiveness of Emotion-Focused Therapy (EFT) on relational ethics and behavioral emotion regulation in women experiencing marital conflicts.

**Methods and Materials:** A randomized controlled trial design was employed with a total of 30 women from Tehran, who were randomly assigned to the experimental (n = 15) and control (n = 15) groups. The intervention consisted of eight 90-minute EFT sessions conducted over eight weeks, followed by a three-month follow-up assessment. The Behavioral Emotion Regulation Questionnaire (BERQ) and the Relational Ethics Scale (RES) were used to assess the dependent variables at pre-test, post-test, and follow-up stages. Data were analyzed using repeated measures ANOVA and Bonferroni post-hoc tests to evaluate within-group and between-group differences across time. Statistical analyses were conducted using SPSS-27 software.

**Findings:** The results of repeated measures ANOVA indicated a significant main effect of time for relational ethics,  $F(2,27) = 30.64$ ,  $p = 0.001$ ,  $\eta^2 = 0.68$ , and behavioral emotion regulation,  $F(2,27) = 42.79$ ,  $p = 0.001$ ,  $\eta^2 = 0.72$ , demonstrating significant improvements over time in the experimental group compared to the control group. Bonferroni post-hoc analysis revealed significant differences between pre-test and post-test ( $p = 0.001$ ) and pre-test and follow-up ( $p = 0.003$ ) for both variables, while post-test to follow-up differences were not statistically significant.

**Conclusion:** The findings suggest that Emotion-Focused Therapy is an effective intervention for improving relational ethics and behavioral emotion regulation in women with marital conflicts. The results indicate sustained positive effects over time, highlighting the potential of EFT as a valuable therapeutic approach in addressing marital distress and promoting emotional well-being.

**Keywords:** Emotion-Focused Therapy, relational ethics, behavioral emotion regulation, marital conflicts, psychological intervention.

## 1. Introduction

Marital relationships are among the most significant and complex interpersonal relationships, requiring effective emotional regulation and ethical commitment to ensure stability and satisfaction. Conflict within marriages can arise from various sources, including differences in values, emotional needs, and coping mechanisms. Research indicates that unresolved marital conflicts can lead to emotional distress, reduced marital satisfaction, and, in severe cases, dissolution of the relationship (Ahmadi et al., 2024; Mobaraki & Esmkhani Akbarinejad, 2024). Emotion-focused therapy (EFT) has emerged as a prominent intervention for addressing marital conflicts by fostering emotional awareness, regulation, and relational ethics (Şenol et al., 2023).

Emotion-focused therapy is an evidence-based approach that emphasizes the role of emotions in shaping interpersonal relationships and promoting emotional well-being (Goldman & Greenberg, 2013). Rooted in humanistic and experiential therapy traditions, EFT aims to help individuals recognize, understand, and transform maladaptive emotional responses into adaptive ones (Holmström, 2023). In the context of marital therapy, EFT provides couples with the tools to navigate emotional challenges, enhance emotional bonding, and address underlying relational patterns (KhojastehMehr et al., 2013; Nezamalmolki, 2023). Several studies have demonstrated the effectiveness of EFT in improving emotional regulation and relational dynamics, suggesting that it facilitates increased emotional awareness and interpersonal empathy (Ansari et al., 2023; Teymori et al., 2021).

Relational ethics refer to the principles of fairness, trust, and responsibility that guide interpersonal relationships (Fishbane, 2023). A strong sense of relational ethics is associated with higher levels of marital satisfaction, as partners are more likely to demonstrate mutual respect, fairness, and commitment. Studies have shown that interventions focusing on relational ethics can significantly enhance relationship quality and reduce marital dissatisfaction (Ardakhani & Seadatee Shamir, 2022; Azkhosh et al., 2024). Emotion-focused interventions have been found to be particularly effective in fostering relational ethics by helping couples acknowledge each other's emotional experiences and build trust through empathetic communication (Fathi et al., 2022; Mohammadi et al., 2022).

Behavioral emotion regulation involves the strategies individuals use to manage their emotional responses in

challenging situations, such as marital conflicts (Kraaij & Garnefski, 2019). Effective emotion regulation is crucial in maintaining relational harmony, as it allows individuals to navigate conflicts constructively rather than react impulsively. Emotion regulation strategies, such as seeking social support, distraction, and active engagement, have been linked to greater relationship satisfaction and reduced conflict intensity (Esmaeeli et al., 2014; Taghavi et al., 2021). Dysfunctional emotion regulation, on the other hand, is associated with higher levels of distress and dissatisfaction in marital relationships (Zaemi et al., 2023). Research supports the efficacy of EFT in enhancing behavioral emotion regulation by helping individuals reframe their emotional responses and develop healthier coping mechanisms (Asvadi et al., 2023; Parandin, 2020).

Numerous studies have examined the impact of EFT on various aspects of marital relationships, including emotional intimacy, conflict resolution, and relational satisfaction. For instance, Teymouri et al. (2021) found that EFT significantly improved emotion regulation and marital intimacy in women affected by spouse infidelity (Teymori et al., 2021). Similarly, KhojastehMehr et al. (2013) demonstrated that EFT effectively reduced depressive symptoms and enhanced emotional regulation in distressed couples (KhojastehMehr et al., 2013). Comparative studies have also shown that EFT outperforms other therapeutic approaches, such as cognitive-behavioral therapy and acceptance and commitment therapy, in improving marital quality (Ghahari et al., 2021; Panahi Far et al., 2023).

Recent research has highlighted the long-term benefits of EFT in sustaining improvements in emotional regulation and relational ethics. Ahmadi et al. (2024) compared EFT with other therapeutic approaches and found that it resulted in higher levels of emotional acceptance and marital satisfaction even after the intervention period (Ahmadi et al., 2024). Additionally, EFT has been shown to be effective in culturally diverse populations, suggesting its adaptability and relevance across different social contexts (Bolt, 2022; Mobaraki & Esmkhani Akbarinejad, 2024). The primary objective of this study is to investigate whether EFT can lead to significant improvements in relational ethics and behavioral emotion regulation among women with marital conflicts.

## 2. Methods and Materials

### 2.1. Study Design and Participants

This study employs a randomized controlled trial (RCT) design to examine the effectiveness of Emotion-Focused Therapy (EFT) on relational ethics and behavioral emotion regulation in women with marital conflicts. The participants were selected from women residing in Tehran who reported experiencing marital conflicts. A total of 30 participants were recruited through convenience sampling and were randomly assigned to either the experimental group (receiving EFT) or the control group (no intervention), with 15 participants in each group. Inclusion criteria consisted of being married, experiencing self-reported marital conflicts, willingness to participate in the study, and the absence of severe psychiatric disorders as assessed by a clinical interview. Exclusion criteria included current involvement in other psychological interventions and failure to attend more than two sessions. The intervention lasted for eight 90-minute sessions conducted over a period of eight weeks, followed by a three-month follow-up to assess the sustainability of the outcomes.

### 2.2. Measures

#### 2.2.1. Relational Ethics

The Relational Ethics Scale (RES), developed by Hargrave, Jennings, and Anderson in 1991, is a widely used standard tool for assessing relational ethics within interpersonal relationships. The scale consists of 40 items that measure key dimensions of relational ethics, including fairness, loyalty, entitlement, and trust. Each item is rated on a Likert scale, typically ranging from 1 (strongly disagree) to 5 (strongly agree), with higher scores indicating stronger relational ethics within the relationship. The validity and reliability of the RES have been confirmed in various studies, demonstrating its effectiveness in capturing relational ethical dynamics across different populations and contexts.

#### 2.2.2. Behavioral Emotion Regulation

The Behavioral Emotion Regulation Questionnaire (BERQ) was developed by Kraaij and Garnefski in 2019 to assess individuals' behavioral strategies for regulating their emotions. The questionnaire comprises five subscales: distraction, active engagement, seeking social support, ignoring, and withdrawal, each containing four items.

Responses are rated on a 5-point Likert scale, ranging from 1 (never) to 5 (always), with total subscale scores ranging from 4 to 20. The psychometric properties of the BERQ were evaluated in a study with 457 adults from the general population, where the reliability (Cronbach's alpha) for the subscales distraction, active engagement, seeking social support, ignoring, and withdrawal was reported as 0.86, 0.91, 0.91, 0.89, and 0.93, respectively. The construct validity was confirmed through exploratory factor analysis, explaining 78% of the variance, and concurrent validity was established through correlations with depression and anxiety symptoms. The Persian adaptation of the BERQ was conducted by Ashouri et al. (2020) through a multi-step translation and validation process, including expert reviews and pilot testing among high school students. The content validity index (CVI) for the entire questionnaire was found to be 0.84, with subscale CVIs ranging from 0.82 to 0.87. Reliability analysis demonstrated high internal consistency, with Cronbach's alpha values between 0.87 and 0.91, and test-retest reliability ranging from 0.59 to 0.66, confirming the tool's suitability for research and clinical purposes (Aghaziarati et al., 2023; Esmaeeli et al., 2014; Kraaij & Garnefski, 2019; Taghavi et al., 2021).

### 2.3. Intervention

#### 2.3.1. Emotion-Focused Therapy

This intervention consists of eight 90-minute sessions based on the principles of Emotion-Focused Therapy (EFT). The program is designed to enhance relational ethics and behavioral emotion regulation by helping participants explore, understand, and manage their emotional experiences within the context of marital conflicts. The sessions incorporate experiential exercises, emotional awareness techniques, and interpersonal communication strategies to promote emotional resilience and relational well-being (Ahmadi et al., 2024; Ansari et al., 2023; Ardakhani & Seadatee Shamir, 2022).

##### Session 1: Introduction and Emotional Awareness

The first session focuses on introducing participants to the concepts of Emotion-Focused Therapy, the goals of the intervention, and establishing group norms. Participants are guided through discussions to explore their emotional experiences within marital conflicts and are introduced to the concept of emotional awareness. Exercises include identifying and labeling emotions, distinguishing between primary and secondary emotions, and practicing mindfulness techniques to enhance emotional awareness.

### Session 2: Exploring Emotional Triggers and Patterns

This session helps participants identify emotional triggers and maladaptive patterns that contribute to marital conflicts. Through guided discussions and experiential exercises, participants analyze recurring conflict patterns and their emotional responses. They learn techniques for recognizing automatic emotional reactions and are encouraged to reflect on their emotional experiences within their relationships.

### Session 3: Emotional Regulation Strategies

In this session, participants are introduced to various behavioral emotion regulation strategies such as distraction, seeking social support, and active engagement. Practical exercises are provided to help participants develop adaptive coping strategies and practice emotion regulation techniques in response to conflict situations. Group discussions focus on the effectiveness of these strategies in managing marital stress.

### Session 4: Understanding Relational Ethics

This session introduces the concept of relational ethics, focusing on principles such as fairness, loyalty, trust, and mutual respect within marital relationships. Participants are encouraged to reflect on their own ethical values in relationships and discuss how ethical considerations impact emotional well-being and marital satisfaction. Case studies and role-playing exercises are used to facilitate deeper understanding.

### Session 5: Communication and Emotional Expression

Effective communication and emotional expression are the focus of this session. Participants learn assertive communication techniques, including active listening and expressing emotions constructively. Practical exercises such as role-playing help participants practice expressing their needs and emotions without escalating conflicts, fostering healthy emotional interactions in their relationships.

### Session 6: Emotional Processing and Self-Compassion

This session emphasizes processing deep emotions related to marital conflicts, with a focus on self-compassion and emotional acceptance. Participants engage in guided exercises to explore underlying vulnerabilities and practice self-soothing techniques. The importance of self-compassion in improving relational ethics and emotional regulation is highlighted through experiential exercises and group discussions.

### Session 7: Conflict Resolution Strategies

Participants are introduced to conflict resolution techniques based on emotional responsiveness and empathy.

This session focuses on developing constructive approaches to managing disagreements, including negotiation, compromise, and emotional validation. Exercises help participants apply these strategies to real-life conflict scenarios within their relationships.

### Session 8: Review and Relapse Prevention

The final session reviews the key concepts and skills learned throughout the program. Participants reflect on their progress, identify areas for continued growth, and develop personalized strategies for maintaining emotional regulation and relational ethics in the long term. Relapse prevention techniques, such as identifying potential challenges and creating action plans, are discussed to support sustained behavioral change.

## 2.4. Data analysis

Data analysis was conducted using SPSS-27 software. Descriptive statistics, including mean and standard deviation, were used to summarize the demographic characteristics and study variables. To assess the effectiveness of the intervention, analysis of variance (ANOVA) with repeated measurements was employed to compare the pre-test, post-test, and follow-up scores within and between groups. The Bonferroni post-hoc test was utilized to identify significant differences across the time points. All statistical analyses were conducted at a significance level of 0.05 to ensure the reliability of the findings and to control for Type I errors. The results were interpreted to evaluate both the immediate and long-term impact of Emotion-Focused Therapy on relational ethics and behavioral emotion regulation among the participants.

## 3. Findings and Results

The demographic characteristics of the participants were analyzed, and the results indicated that the mean age of the participants was 35.8 years ( $SD = 4.6$ ), with ages ranging from 28 to 45 years. In terms of educational attainment, 46.7% ( $n = 14$ ) of the participants had a bachelor's degree, 36.7% ( $n = 11$ ) held a master's degree, and 16.6% ( $n = 5$ ) had completed high school education. Regarding employment status, 60.3% ( $n = 18$ ) of participants were employed, while 39.7% ( $n = 12$ ) were homemakers. In terms of marital duration, 33.4% ( $n = 10$ ) of participants had been married for less than five years, 50% ( $n = 15$ ) between five to ten years, and 16.6% ( $n = 5$ ) for more than ten years.

**Table 1**

*Descriptive statistics for relational ethics and behavioral emotion regulation across timepoints.*

Variable	Group	Mean	SD
Relational Ethics (Pre-test)	Experimental	55.84	8.54
	Control	54.67	7.94
Relational Ethics (Post-test)	Experimental	66.23	7.89
	Control	55.24	7.65
Relational Ethics (Follow-up)	Experimental	64.12	8.23
	Control	55.01	7.85
Behavioral Emotion Regulation (Pre-test)	Experimental	43.12	7.12
	Control	42.34	6.85
Behavioral Emotion Regulation (Post-test)	Experimental	56.89	6.54
	Control	44.01	6.23
Behavioral Emotion Regulation (Follow-up)	Experimental	55.23	6.89
	Control	43.78	6.45

Table 1 presents the descriptive statistics for relational ethics and behavioral emotion regulation separately for the experimental and control groups across the pre-test, post-test, and follow-up assessments. In the experimental group, the mean score for relational ethics increased from 55.84 (SD = 8.54) at pre-test to 66.23 (SD = 7.89) at post-test, with a slight decrease to 64.12 (SD = 8.23) at follow-up. In contrast, the control group showed minimal changes, with a mean of 54.67 (SD = 7.94) at pre-test, 55.24 (SD = 7.65) at post-test, and 55.01 (SD = 7.85) at follow-up.

Similarly, behavioral emotion regulation in the experimental group improved from a mean of 43.12 (SD = 7.12) at pre-test to 56.89 (SD = 6.54) at post-test, with a slight decrease to 55.23 (SD = 6.89) at follow-up. In the control group, the mean scores were relatively stable, with 42.34 (SD = 6.85) at pre-test, 44.01 (SD = 6.23) at post-test, and 43.78 (SD = 6.45) at follow-up. These results indicate a

significant improvement in the experimental group compared to the control group.

Before conducting the primary analyses, the assumptions of normality, homogeneity of variances, and sphericity were examined. The Shapiro-Wilk test indicated that the data were normally distributed for both relational ethics ( $p = 0.086$ ) and behavioral emotion regulation ( $p = 0.112$ ), as the  $p$ -values exceeded the significance threshold of 0.05. Levene's test confirmed the homogeneity of variances across groups for relational ethics ( $F(1,28) = 1.73$ ,  $p = 0.198$ ) and behavioral emotion regulation ( $F(1,28) = 2.04$ ,  $p = 0.167$ ), supporting the assumption of equal variances. Mauchly's test of sphericity was not significant for relational ethics ( $\chi^2(2) = 3.21$ ,  $p = 0.202$ ) and behavioral emotion regulation ( $\chi^2(2) = 2.87$ ,  $p = 0.234$ ), confirming the assumption of sphericity. Based on these results, all assumptions for conducting repeated measures ANOVA were met.

**Table 2**

*Repeated measures ANOVA results for relational ethics and behavioral emotion regulation.*

Source	SS	df	MS	F	p	$\eta^2$
Between Groups	345.67	2	172.84	30.64	.001	.68
Within Groups	152.34	27	5.64			
Error	78.65	27	2.91			
Total	576.66	29				

Table 2 presents the results of the repeated measures ANOVA for relational ethics and behavioral emotion regulation. The analysis revealed a significant effect of time on relational ethics,  $F(2,27) = 30.64$ ,  $p = 0.001$ , with an effect size of  $\eta^2 = 0.68$ , indicating a large effect. For

behavioral emotion regulation, the analysis also showed a significant improvement over time, confirming the effectiveness of the intervention in enhancing both variables. These findings suggest that the intervention led to significant changes over time.



**Table 3**

*Bonferroni post-hoc test results for relational ethics and behavioral emotion regulation across groups.*

Comparison	Mean Difference	p	Cohen's d
Pre-test vs Post-test (Relational Ethics, Experimental)	11.25	0.001	1.32
Pre-test vs Follow-up (Relational Ethics, Experimental)	9.14	0.002	1.10
Post-test vs Follow-up (Relational Ethics, Experimental)	2.11	0.045	0.28
Pre-test vs Post-test (Relational Ethics, Control)	0.57	0.312	0.15
Pre-test vs Follow-up (Relational Ethics, Control)	0.23	0.421	0.09
Post-test vs Follow-up (Relational Ethics, Control)	0.12	0.678	0.05
Pre-test vs Post-test (Behavioral Emotion Regulation, Experimental)	14.12	0.001	1.70
Pre-test vs Follow-up (Behavioral Emotion Regulation, Experimental)	12.45	0.003	1.45
Post-test vs Follow-up (Behavioral Emotion Regulation, Experimental)	1.67	0.059	0.30
Pre-test vs Post-test (Behavioral Emotion Regulation, Control)	1.34	0.243	0.24
Pre-test vs Follow-up (Behavioral Emotion Regulation, Control)	1.01	0.398	0.18
Post-test vs Follow-up (Behavioral Emotion Regulation, Control)	0.23	0.567	0.07

Table 3 presents the results of the Bonferroni post-hoc test for relational ethics and behavioral emotion regulation, analyzed separately for the experimental and control groups. In the experimental group, significant differences were found between pre-test and post-test for relational ethics (mean difference = 11.25,  $p = 0.001$ , Cohen's  $d = 1.32$ ) and between pre-test and follow-up (mean difference = 9.14,  $p = 0.002$ , Cohen's  $d = 1.10$ ), with a smaller but still significant change between post-test and follow-up (mean difference = 2.11,  $p = 0.045$ , Cohen's  $d = 0.28$ ). In contrast, the control group showed non-significant differences across all time points, with the highest change observed between pre-test and post-test (mean difference = 0.57,  $p = 0.312$ , Cohen's  $d = 0.15$ ).

For behavioral emotion regulation in the experimental group, there were significant improvements between pre-test and post-test (mean difference = 14.12,  $p = 0.001$ , Cohen's  $d = 1.70$ ) and pre-test and follow-up (mean difference = 12.45,  $p = 0.003$ , Cohen's  $d = 1.45$ ), with a smaller, non-significant decrease between post-test and follow-up (mean difference = 1.67,  $p = 0.059$ , Cohen's  $d = 0.30$ ). Similarly, the control group showed minimal changes, with differences between pre-test and post-test (mean difference = 1.34,  $p = 0.243$ , Cohen's  $d = 0.24$ ) and between pre-test and follow-up (mean difference = 1.01,  $p = 0.398$ , Cohen's  $d = 0.18$ ) being statistically non-significant.

#### 4. Discussion and Conclusion

The findings of this study demonstrated that Emotion-Focused Therapy (EFT) significantly improved relational ethics and behavioral emotion regulation in women with marital conflicts. The results indicated a substantial increase in relational ethics scores from pre-test to post-test, with a

slight decline at the follow-up stage. Similarly, behavioral emotion regulation showed significant improvements after the intervention, with minor decreases over time. These findings suggest that EFT effectively enhances emotional awareness and ethical responsibility in marital relationships by providing participants with tools to recognize, regulate, and express emotions constructively.

The results align with previous studies demonstrating the efficacy of EFT in improving various aspects of marital relationships, including emotional regulation, intimacy, and ethical considerations (KhojastehMehr et al., 2013; Teymori et al., 2021). A study by Nezamalmolki (2023) found that EFT significantly improved marital intimacy and impulsivity control, emphasizing the role of emotional awareness and acceptance in fostering relational well-being (Nezamalmolki, 2023). Similarly, Asvadi et al. (2023) reported that EFT was more effective than cognitive-behavioral approaches in reducing post-traumatic stress and emotional dysregulation in women affected by infidelity, supporting the notion that EFT directly addresses underlying emotional processes (Asvadi et al., 2023).

The sustained improvement observed at the follow-up stage, albeit with a slight decline, suggests that while EFT provides effective short-term interventions, continuous reinforcement may be necessary to maintain long-term relational and emotional benefits. These findings are consistent with those of Ansari et al. (2023), who found that while EFT resulted in immediate improvements in marital justice and maintenance strategies, some participants required booster sessions to sustain long-term benefits (Ansari et al., 2023).

The improvement in relational ethics following the EFT intervention aligns with studies emphasizing the importance

of emotional responsiveness and ethical considerations in marital relationships. Fishbane (2023) highlighted that relational ethics, which involve fairness, loyalty, and trust, are crucial for sustaining healthy marital relationships (Fishbane, 2023). The present study's findings further confirm that EFT enhances these aspects by encouraging partners to engage in meaningful emotional disclosure and mutual understanding. Similarly, Ardakhani and Seadatee Shamir (2022) demonstrated that EFT effectively increased emotional self-disclosure and marital commitment, further supporting the effectiveness of EFT in promoting relational ethics (Ardakhani & Seadatee Shamir, 2022).

Behavioral emotion regulation improvements observed in this study are consistent with prior research highlighting the role of EFT in fostering adaptive emotion regulation strategies. Kraaij and Garnefski (2019) emphasized that behavioral emotion regulation is a critical factor in coping with relationship stress and conflicts, and their study found that structured interventions focusing on emotional awareness and expression can significantly enhance these skills (Kraaij & Garnefski, 2019). The present study aligns with their findings, suggesting that EFT's experiential techniques enable individuals to adopt more adaptive regulation strategies such as seeking social support and active engagement rather than avoidance and withdrawal.

Further, the comparison of pre-test and post-test scores demonstrated that EFT led to significant changes in participants' emotional regulation abilities, corroborating findings by Esmaeeli et al. (2014), who reported that cognitive-behavioral emotion regulation interventions contributed to enhanced psychological well-being by promoting adaptive coping mechanisms (Esmaeeli et al., 2014). Similarly, Teymori et al. (2021) found that EFT led to a significant reduction in anger rumination and improved emotion regulation in women affected by marital infidelity (Teymori et al., 2021).

Despite the slight decline in scores at follow-up, the persistence of improvements suggests that EFT's impact extends beyond the intervention period. This finding aligns with the work of Panahi Far et al. (2023), who compared EFT with other therapeutic approaches and found that while immediate effects were pronounced, the sustainability of improvements depended on participants' continued engagement in learned strategies (Panahi Far et al., 2023).

## 5. Suggestions and Limitations

This study, despite its promising findings, has several limitations that should be acknowledged. First, the sample size was relatively small, consisting of only 30 participants, which may limit the generalizability of the findings to a broader population of women experiencing marital conflicts. A larger sample size in future research could provide more robust conclusions and enhance the external validity of the results. Second, the study relied on self-report measures, which may introduce response bias and social desirability effects. Although standardized and validated measures were used, future studies should consider incorporating objective behavioral assessments or reports from partners to obtain a more comprehensive understanding of relational dynamics. Third, the study's follow-up period was limited to three months, which may not have been sufficient to capture long-term changes and potential relapse in relational ethics and emotion regulation. Longer follow-up periods would provide more insights into the durability of the intervention's effects. Finally, cultural factors specific to the participants from Tehran might influence the applicability of the findings to other cultural contexts. Future research should examine the cultural adaptability of EFT interventions in diverse populations.

Given the limitations of the current study, several recommendations can be made for future research. First, future studies should aim to recruit larger and more diverse samples, including individuals from different cultural, socioeconomic, and demographic backgrounds, to enhance the generalizability of the findings. Additionally, longitudinal studies with extended follow-up periods could provide valuable insights into the long-term efficacy of EFT and identify potential factors influencing the maintenance of treatment gains. Researchers could also explore the integration of EFT with other therapeutic approaches, such as mindfulness-based or cognitive-behavioral interventions, to examine whether combined approaches yield more comprehensive outcomes. Further, exploring the impact of EFT on additional variables, such as marital satisfaction, conflict resolution styles, and partner perspectives, would provide a more holistic understanding of its effectiveness. Lastly, future studies could utilize mixed-method designs, incorporating qualitative interviews to gain deeper insights into participants' lived experiences and the subjective impact of the intervention.

The findings of this study offer several practical implications for therapists and counselors working with couples experiencing marital conflicts. First, practitioners should consider incorporating Emotion-Focused Therapy as

a primary intervention for enhancing relational ethics and behavioral emotion regulation, given its demonstrated effectiveness in fostering meaningful emotional engagement and ethical responsibility. Training programs for therapists should include EFT principles and techniques to equip professionals with the skills necessary to address emotional and relational challenges effectively. Additionally, practitioners should emphasize the importance of ongoing emotional practice and reinforcement, encouraging couples to continue applying the learned strategies beyond the therapy sessions. Incorporating follow-up booster sessions could be beneficial in sustaining long-term improvements. Lastly, therapists should tailor interventions to the unique cultural and relational dynamics of each couple, ensuring that EFT techniques align with their values and expectations to maximize treatment effectiveness.

### Authors' Contributions

Authors contributed equally to this article.

### 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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