

# The Effectiveness of Imago Therapy Training on Emotional Acceptance and Spirituality among Married Female Students with Marital Conflicts

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## ABSTRACT

Marital conflict is among the most common issues faced by couples, and unresolved conflicts can lead to numerous familial problems. This study aimed to examine the effectiveness of Imago therapy training on emotional acceptance and spirituality among married female students experiencing marital conflicts. Imago Therapy is a relational and integrative approach based on attachment and developmental theories, which helps partners explore unconscious childhood patterns that influence their adult relationships. By fostering mutual empathy, emotional awareness, and dialogue, it facilitates greater acceptance of emotions and nurtures a deeper sense of spirituality and connection within relationships. The statistical population included all married female students who referred to the counseling center of Islamic Azad University, Central Tehran Branch, during the 2024-2025 academic year. The sample consisted of 30 participants, selected through convenience sampling, who were randomly assigned to experimental and control groups (15 in each). After a pretest, participants in the experimental group received Imago therapy training based on the standard ten-session protocol (each session 90 minutes). A posttest and a two-month follow-up were conducted thereafter. Data were collected using the Marital Conflicts Questionnaire (MKCS) and the relevant subscales of the Connor-Davidson Resilience Scale (CD-RISC) assessing emotional acceptance and spirituality. Data analysis was performed using mixed repeated measures ANOVA in SPSS 26. The results showed that Imago therapy significantly increased emotional acceptance and spirituality among married female students with marital conflicts ( $p < .05$ ). Accordingly, Imago therapy can play an effective role in enhancing emotional acceptance and spirituality, thereby improving the quality of marital relationships among female students.

**Keywords:** Imago therapy training, emotional acceptance, spirituality, marital conflicts

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## INTRODUCTION

Family is a fundamental social institution that plays a vital role in individuals' well-being and quality of life by fulfilling their physical, emotional, and intellectual needs (Thomas et al., 2017). Understanding the interdependence among family members and identifying effective ways to meet these needs are essential for improving life satisfaction and personal

growth. Accordingly, events that affect the family system can also influence the dynamics and health of marital relationships (Pauly et al., 2023). Research has consistently shown that marital conflict is one of the most significant stressors within family life, negatively impacting the structure and functioning of family relationships. Such conflicts may arise from various factors, including poor communication, unmet emotional needs, financial problems, sexual dissatisfaction, physical

abuse, and chronic illness, which can lead to emotional distance, infidelity, and diminished psychological flexibility (Daks et al., 2020). Among the signs of marital conflicts are depression, feelings of guilt, hopelessness, anxiety, social isolation, and a pessimistic attitude toward oneself, one's spouse, and the future (Ho, 2025). Marital conflict is considered an inevitable component of shared life and is often viewed as an expression of relational crises (Feeney & Karantzas, 2017). Clinical experts emphasize that couples' differing personality, familial, and gender backgrounds contribute to the diversity of their interactions, and the degree to which they experience and manage conflicts determines the overall health of their marital life (Chen et al., 2018).

As marital conflict intensifies, it can erode the foundation of the marriage, reducing relationship quality, sexual satisfaction, intimacy, and, ultimately, leading to emotional or legal divorce (Uhlich & et al., 2022). Studies have indicated that when couples manage conflicts constructively during times of stress, the psychological and relational damage resulting from marital disputes can be minimized (Chen et al., 2018). Thus, the ability to analyze and resolve conflicts plays a crucial role in marital adjustment and interpersonal harmony (Asfaw et al., 2023).

All individuals face challenges throughout life, and cognitive resources play an essential role in how they handle problems logically and effectively. Conversely, some people tend to give up easily when confronted with difficulties. In recent years, emotional acceptance and spirituality as key constructs in psychology have attracted increasing scholarly attention (Güleç, 2025). These concepts explain why individuals react differently to stressors. Higher emotional acceptance and spirituality enable people to cope more effectively with stress and psychological distress. Resilience, in this context, refers to the ability or process of successfully adapting to adverse or threatening conditions (Başak et al., 2024).

Emotional acceptance and spirituality represent positive adaptation in response to difficult and stressful experiences (Safara et al., 2023). They go beyond mere resistance to adversity, encompassing active engagement with one's environment and maintaining biopsychological balance in risky conditions (Cordero et al., 2022). In other words, emotional acceptance and spirituality denote a person's capacity to restore and even elevate psychological equilibrium when faced with life challenges (Alinejad et al., 2025).

In family contexts, this capacity helps couples confront crises, such as prolonged caregiving stress, by strengthening family belief systems and establishing social support networks that foster optimal functioning under pressure (Oluwatumilara et al., 2024). Hence, emotional acceptance and spirituality enable couples to approach negative life events with calmness and acceptance, facilitating healthier coping responses (Milville et al., 2024). Modern therapists employ different counseling approaches to reduce marital conflicts and enhance emotional acceptance and spirituality among couples. One of the most effective approaches is Imago Therapy, a relational therapeutic method designed to address unconscious defensive patterns and unhealed childhood wounds rooted in early attachments (Azimi et al., 2023). Imago Therapy encourages partners to reflect on their emotional experiences,

identify deep-seated beliefs, and establish empathetic, conscious communication. Evidence suggests that many marital problems originate from maladaptive partner choices influenced by individual or contextual factors. Conversely, higher marital satisfaction enhances adaptability, social relationships, life expectancy, and psychological well-being (Arab Bafrani et al., 2023). Imago Therapy provides couples with insight into their unconscious dynamics, helping them move beyond superficial problem-solving toward a deeper understanding of conflicts (Hosseini et al., 2023).

Empirical studies indicate that this method can significantly improve marital satisfaction and reduce marital conflicts (Dehnavi et al., 2023). Given the prevalence and consequences of marital conflict and the limited research addressing its relationship with emotional and spiritual dimensions, the present study seeks to examine the effectiveness of Imago Therapy training on emotional acceptance and spirituality among married women with marital conflicts. This research aims to offer a therapeutic model that restores emotional harmony in couples and explores whether Imago Therapy can meaningfully enhance emotional acceptance and spirituality among married female students.

## STATISTICAL POPULATION, STUDY SAMPLE GROUP AND SAMPLING METHOD

This research was designed as a quasi-experimental study employing a pretest-posttest control group design with a two-month follow-up. The statistical population consisted of all married female students who referred to the counseling center of Islamic Azad University, Central Tehran Branch, during the 2024-2025 academic year. For sample selection, non-random and volunteer sampling methods were employed, followed by convenience sampling and random assignment of participants to groups. The sample size included 30 participants, who were randomly assigned to two groups: an experimental group (n = 15) and a control group (n = 15). This grouping was implemented to evaluate the effects of Imago Therapy training on marital conflicts among married female students.

## MEASUREMENT INSTRUMENT

### Connor-Davidson Resilience Scale (CD-RISC)

This questionnaire was developed by Connor and Connor (2003) to assess individuals' resilience the ability to cope effectively with adversity and stress. The CD-RISC consists of 25 items, each rated on a 5-point Likert scale ranging from 0 ("not true at all") to 4 ("true nearly all the time"). The total score ranges from 0 to 100, with higher scores indicating greater resilience. Each participant's overall score is obtained by summing their item ratings.

To measure dimensions related to emotional acceptance and spirituality, two subscales of the CD-RISC were employed:

- 1- Positive and secure emotional acceptance (items 1, 2, 4, 5, and 8)
- 2- Spirituality (items 3 and 9)

According to the study by Connor and Connor (2003), the reliability of the questionnaire measured on 24 patients diagnosed with Generalized Anxiety Disorder (GAD) and Post-Traumatic Stress Disorder (PTSD) was reported to be 0.78 (Cronbach's  $\alpha$ ). Furthermore, the convergent validity of the CD-RISC was examined using the Kobasa Hardiness Questionnaire on 30 psychiatric patients, yielding a correlation of 0.83 between the resilience and hardiness scales and -0.76 with perceived stress. These findings indicate that higher resilience scores are associated with lower levels of experienced stress. The scale has also been standardized and validated in Iran, where the obtained Cronbach's  $\alpha$  was 0.89, confirming its internal consistency. Factor analysis results indicated that, with the exception of three items, factor loadings ranged between 0.14 and 0.64. In the current study, the Cronbach's  $\alpha$  for the total scale was 0.78, indicating satisfactory internal reliability.

### Marital Conflicts Questionnaire (KMCS)

The Marital Conflicts Questionnaire (KMCS) was developed by Eggeman et al. (1985) to assess the level of marital conflict among couples. The instrument consists of 27 items, each rated on a five-point Likert scale ranging from 1 ("never") to 5 ("almost always"). The total possible score ranges from 27 to 108, with higher scores indicating lower levels of marital conflict. Each participant's overall score is obtained by summing the ratings across all items. Several items in the questionnaire are reverse-scored, specifically items 5, 7, 9, and 11. Additionally, in item 16, all responses except "respect toward you" are reverse-scored. Items 18, 20, 21, 22, and 23 are also reverse-scored. This procedure ensures that higher total scores consistently represent lower levels of marital conflict and healthier

relationship functioning. Interpretation of total scores is as follows:

- 27 – 54: High marital conflict
- 55 – 67: Moderate marital conflict
- 68 and above: Low marital conflict

In the original validation study by Eggeman et al. (1985), the instrument's reliability and validity were established based on the Kansas Marital Conflict Scale (1985), showing satisfactory internal consistency. Reported reliability coefficients ranged from 0.91 to 0.95 for men and 0.88 to 0.95 for women. Cronbach's  $\alpha$  coefficients for the subscales were as follows:

- Planning: 0.86 (for men), 0.90 (for women)
- Dispute: 0.89 (for men and women)
- Negotiation: 0.87 (for men), 0.89 (for women)

In a more recent study, Nabiei et al. (2021) reported a Cronbach's  $\alpha$  of 0.88 for the total KMCS, confirming its reliability in the Iranian population. In the present study, Cronbach's  $\alpha$  for the KMCS was 0.79, indicating acceptable internal consistency within the sample of married female students.

### TRAINING PROCEDURE (IMAGO THERAPY INTERVENTION)

The educational program implemented in this study was designed based on multiple sources and under the supervision of expert faculty members. The sequence and content of the Imago Therapy training sessions were structured according to the standardized educational protocol developed by Hendrix (2006), as described in the book *Getting the Love You Want: A Guide for Couples*, and further adapted using the procedures outlined in Azimi et al. (2023) and Hosseini et al. (2023).

**Table 1.** Imago Therapy Educational Protocol

Session	Content Summary
Session 1	Establishing initial rapport and introducing participants; explaining workshop regulations; presenting goals and structure of the educational program; administering the pre-test for both experimental and control groups.
Session 2	Explaining the function of the primitive brain and the formation of unconscious relational patterns; discussing stages of life development as a cosmic journey and exploring participants' current life situations.
Session 3	Teaching communication and dialog skills to foster psychological safety; strengthening reflection, validation, and empathy skills; assigning related home exercises.
Session 4	Reviewing the vision of relationships and developing a positive outlook; identifying individual needs and aspirations; planning for relational growth; practicing intimacy-enhancing techniques and related assignments.
Session 5	Presenting lists of enjoyable shared activities and surprise moments; conducting exercises designed to strengthen intimacy and enhance couples' psychological well-being.
Session 6	Enhancing self-knowledge and partner understanding; exploring the impact of past experiences and childhood wounds on present relationships; introducing the Imago brain structure and its influence on relational dynamics.
Session 7	Teaching flexibility in building emotional safety and connection through behavior-change lists and conscious dialogue; reinforcing gratitude and behavior-change assignments.
Session 8	Training in constructive expression of anger and understanding it as an emotional wound; practicing Imago-style dialogue to promote emotional security.
Session 9	Fostering inner cohesion and mutual synergy; deepening emotional intimacy; working on healing emotional injuries and reclaiming the lost self.
Session 10	Summarizing all previous sessions (experimental group only); conducting the post-test for both experimental and control groups.

Participants in the experimental group attended 10 consecutive weekly sessions, each lasting 90 minutes, conducted in a face-to-face group format. Each session focused on specific educational themes and therapeutic objectives designed to enhance emotional awareness, empathy, and effective communication between partners. The training program included interactive discussions, experiential exercises, and feedback activities aimed at strengthening emotional acceptance, deepening relational understanding, and promoting self-reflection. The overview of session content and objectives is presented in Table 1.

**RESEARCH PROCEDURE**

In the present study, after obtaining the required approval from the Research Ethics Committee, the researcher referred to the Counseling Center of Islamic Azad University. Among female students attending the center, eligible participants were selected through purposive sampling and then randomly assigned to two groups: an experimental group and a control group (15 participants in each). All participants were asked to cooperate actively with the researcher during the Imago Therapy training sessions. They also completed the Connor and Davidson Resilience Scale (2003) and the Kansas Marital Satisfaction Scale (1985) as a pre-test. The experimental group participated in ten 90-minute sessions of Imago Therapy training, while the control group received no intervention. At the end of the training period, both groups completed the same instruments again as a post-test. For the experimental group, a follow-up assessment was conducted two months after the intervention to evaluate the persistence of

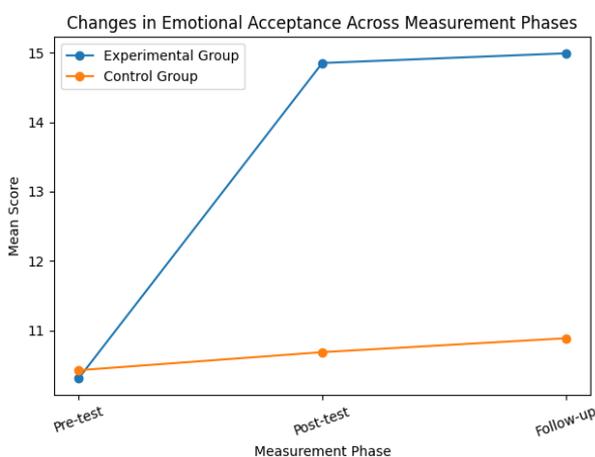
the training effects. In the descriptive statistics section, demographic characteristics of the sample were analyzed using indicators of central tendency and dispersion, including the mean, standard deviation, frequency distribution tables, and charts. For inferential statistics, after confirming the normal distribution of the data through the Kolmogorov-Smirnov test, analysis of covariance (ANOVA) and mixed repeated-measures tests were conducted to examine group differences. All statistical analyses were performed using SPSS version 27.

**FINDINGS**

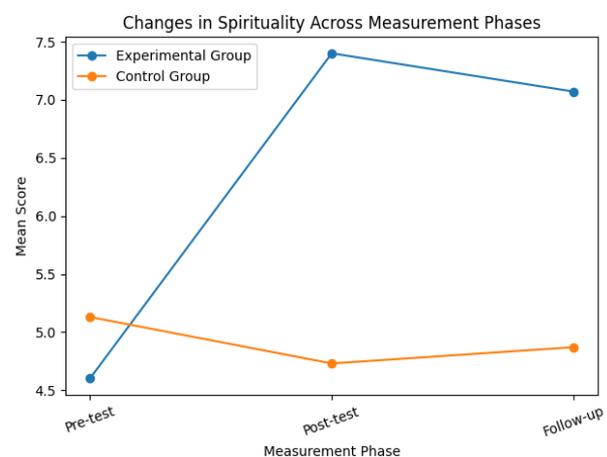
Based on the obtained results, in the control group, 7 participants were aged 25 to 35 years, 5 participants were 36 to 45 years, and 3 participants were 46 to 55 years old. In the experimental group, 8 participants were aged 25 to 35 years, 6 participants were 36 to 45 years, and 1 participant was 46 to 55 years old. Regarding marital duration, in the control group, 7 participants had been married for 1 to 5 years, 4 participants for 6 to 10 years, 3 participants for 11 to 15 years, and 1 participant for more than 15 years. In the experimental group, 6 participants had been married for 1 to 5 years, 5 participants for 6 to 10 years, and 4 participants for 11 to 15 years. Table 2 presents the descriptive findings of the research variables along with their components. According to the results shown in Table 2, the mean scores of the variables “emotional acceptance” and “spirituality” in the Imago Therapy training group increased in the post-test and follow-up phases compared with the pre-test stage, while no such improvement was observed in the control group.(Fig 1)

**Table 2.** Descriptive Statistics of Emotional Acceptance and Spirituality

Group	Variable	Pre-test Mean (SD)	Post-test Mean (SD)	Follow-up Mean (SD)
Control	Positive and secure emotion acceptance	10.43 (3.46)	10.69 (3.19)	10.89 (3.32)
	Spirituality	5.13 (2.36)	4.73 (2.09)	4.87 (1.88)
Experimental	Positive and secure emotion acceptance	10.31 (4.50)	14.85 (3.83)	14.99 (3.93)
	Spirituality	4.60 (2.13)	7.40 (2.29)	7.07 (2.12)



**Figure 1.** Changes in emotional acceptance across pre-test, post-test, and follow-up in experimental and control groups.



**Figure 2.** Changes in spirituality across pre-test, post-test, and follow-up in experimental and control groups.

Before conducting the between-subjects repeated-measures ANOVA, the assumption of normality was examined using the Kolmogorov-Smirnov test. (Fig2)

This assumption indicates that the observed difference between the sample score distribution and the normal distribution in the population is equal to zero. The results showed that all variables in the pre-test, post-test, and follow-up phases followed a normal distribution. Furthermore, to verify the assumption of equal variances among groups, Mauchly's test of sphericity and Levene's test were used to examine the homogeneity of variances.

The results of the between-subjects repeated-measures ANOVA for comparing the two groups in the variables emotional acceptance and spirituality across the pre-test, post-test, and follow-up stages are presented in Table 3 (Levene et al., 1960). Based on the results shown in Table 3, the differences among the scores of the components positive and secure emotion acceptances ( $p < 0.01$ ) and spirituality

( $p < 0.01$ ) across the three measurement phases were statistically significant. The findings indicate that approximately 15%, 14.3%, 13.8%, 22.9%, and 24.1% of the individual differences in these components were attributable to between-group differences. In addition, the interaction effect between research phase and group membership was significant for all study variables ( $p < 0.01$ ).

In other words, the difference in scores across the three phases (pre-test, post-test, and follow-up) significantly varied between the two groups. Therefore, it can be concluded that Imago Therapy training had a significant effect on emotional acceptance and spirituality among women experiencing marital conflict. According to these findings, the differences among the pre-test, post-test, and follow-up stages were significant for all variables. Thus, the results of the pairwise mean comparisons across the three stages, using the Bonferroni test, are presented in Table 4.

**Table 3.** Mixed Repeated-Measures ANOVA Results for the Two Groups

Variable	Source of Variation	Sum of Squares	df	Mean Square	F	Sig. (p)	Effect Size( $\eta^2$ )
Positive and secure emotion acceptance	Phases	123.425	1.161	106.279	24.430	0.001	0.466
	Groups	165.378	1	165.378	4.501	0.043	0.138
	Phases $\times$ Group	90.182	1.161	77.654	17.850	0.001	0.389
Spirituality	Phases	26.600	1.165	22.839	0.096	0.042	0.100
	Groups	46.944	1	46.944	8.884	0.006	0.241
	Phases $\times$ Group	44.822	1.165	38.484	5.217	0.024	0.157
Planning	Phases	350.142	1.683	84.592	53.335	0.001	0.656
	Groups	469.386	1	386.469	7.629	0.010	0.214
	Phases $\times$ Group	372.141	1.683	84.011	52.969	0.001	0.654
Conflict	Phases	822.186	1.605	116.417	27.950	0.001	0.500
	Groups	111.321	1	321.111	8.912	0.006	0.241
	Phases $\times$ Group	022.144	1.605	89.746	21.547	0.001	0.435
Negotiation	Phases	794.120	1.548	78.042	25.085	0.001	0.473
	Groups	669.251	1	251.669	7.929	0.009	0.221
	Phases $\times$ Group	356.111	1.548	71.945	23.125	0.001	0.452

The results presented in Table 3 showed that both the main effect of time and the interaction effect between time and group were significant for the dependent variables. This finding indicates that the mean scores of positive and secure emotion acceptance and spirituality significantly differed over time and between groups ( $p < 0.01$ ).

Furthermore, the repeated-measures ANOVA revealed a significant main effect of group for all dependent variables ( $p < 0.05$ ), suggesting that Imago Therapy increased participants' acceptance of emotions and enhanced their spirituality.

In addition, the results demonstrated that the mean scores of the dimensions of marital conflict significantly changed over time and differed between groups ( $p < 0.01$ ).

The main effect of group was also significant for all dependent variables ( $p < 0.01$ ), indicating that Imago Therapy effectively reduced marital conflict among participants. To further examine the differences in mean scores across the three phases (pre-test, post-test, and follow-up), pairwise comparisons were conducted using the Bonferroni test, and the results are presented in Table 4.

**Table 4.** Pairwise Comparisons of Resilience Components Across Groups and Phases

Group	Dependent Variable	Phase 1	Phase 2	Mean Difference	Std. Error	Sig. (p)
Control	Positive and Secure Emotion Acceptance	Pre-test	Post-test	-0.260	0.650	1.000
		Pre-test	Follow-up	-0.453	0.729	1.000
		Post-test	Follow-up	-0.193	0.240	1.000
	Spirituality	Pre-test	Post-test	0.400	0.892	1.000
		Pre-test	Follow-up	0.267	0.914	1.000
		Post-test	Follow-up	-0.133	0.297	1.000
Experimental	Positive and Secure Emotion Acceptance	Pre-test	Post-test	-4.533	0.650	0.001
		Pre-test	Follow-up	-4.673	0.729	0.001
		Post-test	Follow-up	-0.140	0.240	1.000
	Spirituality	Pre-test	Post-test	-2.800	0.892	0.012
		Pre-test	Follow-up	-2.467	0.914	0.035
		Post-test	Follow-up	0.333	0.297	0.814
Control	Planning	Pre-test	Post-test	-0.267	0.483	1.000
		Pre-test	Follow-up	0.333	0.443	1.000
		Post-test	Follow-up	0.600	0.322	0.219
	Conflict	Pre-test	Post-test	-0.600	0.710	1.000
		Pre-test	Follow-up	-0.067	0.775	1.000
		Post-test	Follow-up	0.533	0.481	0.832
	Negotiation	Pre-test	Post-test	-0.260	0.623	1.000
		Pre-test	Follow-up	0.133	0.653	1.000
		Post-test	Follow-up	0.393	0.386	0.950
Experimental	Planning	Pre-test	Post-test	-5.533	0.483	0.001
		Pre-test	Follow-up	-5.033	0.443	0.001
		Post-test	Follow-up	0.500	0.322	0.396
	Conflict	Pre-test	Post-test	-6.000	0.710	0.001
		Pre-test	Follow-up	-5.400	0.775	0.001
		Post-test	Follow-up	0.600	0.481	0.669
	Negotiation	Pre-test	Post-test	-5.067	0.623	0.001
		Pre-test	Follow-up	-4.493	0.653	0.001
		Post-test	Follow-up	0.573	0.386	0.445

The results of the pairwise comparisons of mean differences across the three testing phases presented in Table 4 indicate that, in the Imago Therapy training group, the differences between the mean scores of the pre-test and those of the post-test and follow-up phases were significant ( $p < .05$ ).

A comparison of the mean scores across the three phases shows that the mean levels of emotional acceptance and spirituality significantly increased in the post-test and follow-up compared to the pre-test phase.

The difference between the post-test and follow-up scores was not significant ( $p > .05$ ), indicating the stability of therapeutic effects over time. In the control group, no significant differences were observed among the pre-test, post-test, and follow-up mean scores ( $p > .05$ ).

Accordingly, it can be concluded that Imago Therapy was effective in improving emotional acceptance and spirituality among married female students experiencing marital conflict. Furthermore, the results of the pairwise comparisons of mean differences across the three testing phases indicate that, in the Imago Therapy group, the differences between the mean scores of the pre-test and those of the post-test and follow-up phases were significant ( $p < .01$ ). A comparison of the means across the three phases shows that the mean scores of marital

conflicts significantly decreased in the post-test and follow-up phases compared to the pre-test phase.

The difference between the post-test and follow-up scores was not significant ( $p > .05$ ), indicating the persistence and stability of the therapeutic effects over time. Similarly, in the control group, no significant differences were observed among the pre-test, post-test, and follow-up mean scores ( $p > .05$ ). Based on these findings, it can be concluded that Imago Therapy was effective in reducing marital conflict among women experiencing marital conflict.

## DISCUSSION

The findings of the present study demonstrated that Imago Therapy significantly enhanced emotional acceptance and spirituality among married female students experiencing marital conflicts. This result aligns with prior research emphasizing the effectiveness of Imago-based interventions in improving emotional regulation, self-awareness, and interpersonal understanding (Salarifar et al., 2020; Marandi et al., 2021 Farahani et al., 2018; Schmidt et al., 2015; Dehnavi & Yousefi, 2023).

Imago Therapy facilitates self-reflection through guided imagery, helping individuals reframe negative emotional

patterns and perceive marital conflicts as manageable rather than threatening. From a psychological perspective, strengthening emotional acceptance through imagery-focused techniques enables individuals to tolerate distress and maintain constructive emotional connections, while spiritual growth fosters meaning-making and resilience (Ben-Ari, 2022; Patterson, 2017).

Therefore, the observed improvements may reflect both cognitive reappraisal and a deepened sense of personal coherence generated during therapeutic sessions. These findings suggest that Imago Therapy can be effectively integrated into marital counseling programs to promote adaptive coping, emotional flexibility, and mutual empathy among couples. The intervention's emphasis on positive mental imagery and relational awareness may enhance long-term marital satisfaction and well-being. Consequently, Imago Therapy represents a valuable evidence-based approach

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## CONFLICT OF INTEREST

This article is derived from the subcomponents of a master's thesis in Family Counseling at the Islamic Azad University, Central Tehran Branch. The authors declare that there is no conflict of interest associated with this study.

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