

Comparison of the Effectiveness of Integrated Behavioral Couple Therapy and Schema-Focused Couple Therapy on Conflict Resolution Styles in Conflicting Couples

Shokoufeh. Kordavani¹, Shahnaz. Khaleghipour^{2*}, Fatemeh. Tabatabaeinejad³

¹ PhD Student, Department of Psychology, Naein Branch, Islamic Azad University, Naein, Iran

² Associate Professor, Department of Psychology, Naein Branch, Islamic Azad University, Naein, Iran

³ Assistant Professor, Department of Psychology, Naein Branch, Islamic Azad University, Naein, Iran

* Corresponding author email address: Sh.khaleghipour@iau.ac.ir

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ABSTRACT

Objective: This study aimed to compare the effectiveness of integrated behavioral couple therapy and schema-focused couple therapy on conflict resolution styles among conflicting couples in Shiraz.

Methods: The research employed a quasi-experimental design with pre-test, post-test, and one-month follow-up. The statistical population included all conflicting couples who visited the Fajr Counseling Center in Shiraz in 2022, from whom 45 couples were selected through convenience sampling and randomly assigned to three groups: integrated behavioral couple therapy, schema-focused couple therapy, and a control group. The Rahim Conflict Resolution Styles Questionnaire was used as the measurement tool. Experimental group one underwent a 16-session program of integrated behavioral couple therapy, and experimental group two a 13-session program of schema-focused couple therapy, while the control group was placed on a waiting list. Data were analyzed using repeated measures analysis of variance.

Findings: Results indicated that both interventions, integrated behavioral couple therapy and schema-focused couple therapy, were effective in addressing conflict resolution styles. There was a difference in the effectiveness of integrated behavioral couple therapy and schema-focused couple therapy on conflict resolution styles.

Conclusion: Based on the findings, both treatments are effective for couples' conflict resolution styles, but the effectiveness of integrated behavioral couple therapy is reported to be more effective.

Keywords: *Integrated behavioral couple therapy, schema-focused couple therapy, conflict resolution styles.*

1. Introduction

A stable family is one of the most important conditions for an active and healthy society. When the family environment is dynamic, healthy, and constructive, and there is warm and intimate interaction among its members, it can lead to the growth of family members and the advancement of society. Conflict and disagreement are at the heart of marital relationships, which, if used effectively, can be a fruitful factor in achieving a deeper understanding of reciprocal and productive relationships. Marital conflicts can be defined as conditions in which there are both positive and negative opinions between spouses. Marital conflict is an inseparable component of marital relations, and one of the criteria for assessing the health of marital relations is how conflicts are resolved. Therefore, whether a relationship is healthy or unhealthy depends on proper conflict resolution management (Havaasi et al., 2017).

Conflict resolution styles are related to marital conflicts and are considered primary indicators in marital relationships. Constructive resolution of marital conflicts is considered a determining factor in life satisfaction (Ünal & Akgün, 2022). Couples who have a constructive conflict resolution style, given their experience of marital differences, are less likely to experience relationship cooling and emotional divorce (Afkhami-Poostchi & Mirdoraghi, 2023). Conflict resolution styles are mechanisms that are used during conflicts, and if conflict is poorly managed, they can weaken marital relationships, threaten attachment security, and create uncertainty for couples. An intimate marital relationship requires that spouses learn how to communicate with each other and how to be different. What is important is the use of a conflict coping style that, if managed constructively, prevents stagnation in the positive relationships of spouses and protects the individual against family stress events (Makhanova et al., 2018).

Rahim (1983) identifies five conflict styles: integrating, dominating, avoiding, obliging, and compromising. Individuals who choose the integrating style have high participation and assertiveness, a "win-win" attitude predominates in their relationships, and they respect their own and others' interests. In the dominating style or competitive attitude "win-lose", the person does not care about others and has a strong interest in their own views. In the avoiding style or "lose-lose" situation, the person does not engage in conflict and avoids conflict by delegating their responsibilities to others. Those with the obliging style in a "lose-win" situation sacrifice their interests and desires for

others. Among other styles, the compromising style of conflict resolution, or bargaining with a "neither win-nor-lose" attitude, maintains a middle ground (Lu & Wang, 2017; Rahim, 2003).

Research shows that couple therapy has beneficial effects on family functioning. Modification, clarity, and rebuilding of the relationship through couple therapy can increase intimacy and improve the functioning of family members (Bhowmik, 2020). Experimental approaches in couple therapy include cognitive-behavioral couple therapy, integrated behavioral couple therapy, schema-focused couple therapy, and emotionally focused couple therapy (Kalai & Eldridge, 2021). Integrated behavioral couple therapy is a third-wave therapy that was designed to develop traditional behavioral couple therapy with a focus on emotional acceptance. The goal of therapy is not to eliminate problems but to help spouses respond in a way that creates intimacy rather than more arguments (Christensen & Doss, 2017). Integrated behavioral couple therapy identifies distress and stress in the relationship resulting from a combination of differences, emotional sensitivities, external stress factors, and interaction patterns (Kalai & Eldridge, 2021). This approach includes new techniques for enhancing acceptance and tolerance and focuses on behavioral couple therapy techniques such as behavior exchange, communication training, and problem-solving (Danlian Namagardi et al., 2022). Kalai and Eldridge (2021) confirmed the effectiveness of this therapeutic approach on marital conflicts and family functioning (Kalai & Eldridge, 2021). Danlian et al. (2022) research compared the effectiveness of integrated behavioral couple therapy and emotionally focused couple therapy and showed that both treatments are effective in marital adaptation and stress reduction (Danlian Namagardi et al., 2022). Zareei et al. (2016) showed that both decision-making therapy and integrated behavioral couple therapy were effective in improving couples' conflicts and maintaining therapeutic gains even two months after treatment, but integrated behavioral couple therapy was more effective and led to more changes (Zareei et al., 2016). Research has shown the effectiveness of behavioral couple therapy based on the Jacobsen approach in increasing couples' adaptability (Christensen et al., 2010), emotional self-regulation, marital adaptability (Baharloo et al., 2019).

Another psychological intervention for examining marital conflicts is schema-focused couple therapy. Maladaptive schemas that originate from harmful experiences during childhood gradually turn into patterns of

distorted thoughts and ineffective behaviors, shaping personal beliefs and worldviews. Even when evidence is presented that refutes the schema, many people distort their knowledge to maintain the credibility of the schemas. Schemas create biases in the interpretation of events. These biases manifest as misunderstandings, distorted attitudes, incorrect assumptions, goals, and unrealistic expectations in spouses, and these misperceptions affect perception, analyses, and how individuals relate to themselves and others, especially their partners. Early maladaptive schemas cause difficulty in emotional regulation, which plays an effective role in destroying interpersonal relationships and emotional divorce among couples (Letafati Beris et al., 2021).

Early maladaptive schemas are essentially derived from harmful experiences during childhood, gradually turning into patterns of distorted thoughts and ineffective behaviors. Since they are cultivated early in life, they remain as habits without any inquiry, often shaping personal perspectives and worldviews (Chavoshi et al., 2019).

Schemas related to marital relationships include fundamental beliefs about the nature of humans and relationships and are thought to be somewhat stable. In schema-focused couple therapy, schemas and mindsets help provide a comprehensive framework for understanding the factors and forces effective in the relationship. Schema therapy helps couples turn to a healthy adult mindset and also encourages them to lend a part of their healthy adult capacity to their spouse to find a way out of the traps of their joint life. Understanding mindsets strengthens the experiential process for individuals and couples in therapy. Reducing the complexity of interaction cycles makes schema therapy less challenging for couples (Alizadeh Asli & Jafar Nezhad Langroudi, 2018).

In the schema therapy approach, the focus is on increasing awareness and understanding of the role of schemas in maintaining problematic situations and correcting how schemas are activated and implemented. Therefore, an individual's maladaptive and defective schemas can have a negative impact on the crystallization of couples' behavior (Aghaei et al., 2021). Research has shown the effectiveness of this approach in the intimate functioning of couples on the verge of divorce (Panahifar et al., 2022), emotional regulation and reducing the desire for divorce in conflicted couples, maladaptive schemas of couples (Aghaei et al., 2021), emotional self-regulation of women with marital conflict, and increasing marital intimacy of couples (Aghaei et al., 2021; Alizadeh Asli & Jafar Nezhad

Langroudi, 2018; Letafati Beris et al., 2021; Panahifar et al., 2022). The goal of schema-focused couple therapy is to help couples find more adaptive ways to satisfy their emotional needs. Therefore, the dissatisfaction of spouses with each other and the disintegration of the family system and the negative impact of this separation on its members, highlight the need to address and resolve this problem. The overall goal of couple therapy is to identify interpersonal barriers and problems between couples that teaching the correct problem-solving method and appropriate behavioral pattern leads to better relationships and a feeling of satisfaction from shared life.

Given the importance of family health and that conflicts within the family cause the disintegration of family members and endanger the unity among family members, which ultimately leads to their disruption, attention to interventions that can enhance the quality of life of couples, protect spouses from psychological turmoil, and enable appropriate family functioning in the method of conflict resolution is considered. Also, the approaches of integrated behavioral couple therapy and schema-focused couple therapy in line with the effectiveness of integrated behavioral couple therapy and schema-focused couple therapy on conflict resolution styles of conflicting couples, this research sought to answer the question of which one of integrated behavioral couple therapy and schema-focused couple therapy is more effective in conflict resolution styles? Therefore, this research was conducted with the aim of comparing the effectiveness of integrated behavioral couple therapy and schema-focused couple therapy on the conflict resolution styles of conflicting couples.

2. Methods

2.1. Study design and Participant

This study was a quasi-experimental design with pre-test, post-test, and follow-up with a control group. The population consisted of conflicting couples who visited the Fajr Counseling Center in Shiraz in 2022. Forty-five individuals experiencing marital conflict were selected through convenience sampling and randomly assigned to two experimental groups and one control group. Inclusion criteria were an age range of 20-55 years, scoring above 126 on the Marital Conflict Questionnaire (MCQ), informed consent, and willingness to collaborate with the counselor to discuss marital life experiences. Exclusion criteria included addiction in one of the spouses, chronic physical illness, absence from more than one session, concurrent receipt of

parallel therapy, a history of couple therapy in the past two years, and unwillingness to continue treatment.

The intervention was implemented in autumn and winter of 2021 with a call through social media for couples interested in improving their marital relations to visit the Fajr Counseling Center in Shiraz. After assessing their marital conflicts, those meeting the research criteria were randomly assigned to two experimental groups and one control group. Experimental group A received integrated behavioral couple therapy, experimental group B received schema-focused couple therapy, and the control group did not receive any intervention. A follow-up test was conducted one month later. Ethical research principles included explaining the research objectives to couples, obtaining informed consent, the voluntary nature of the study, the right to withdraw, the non-harmful nature of the therapeutic interventions, confidentiality of information, providing group results to participants, and offering intensive treatment to the control group after the follow-up phase.

2.2. Measures

2.2.1. Marital Conflict

This questionnaire was standardized by Zaker and Barati (2008) to assess seven main dimensions of couples' conflicts, consisting of 42 items. The dimensions include decreased cooperation, reduced sexual relations, increased emotional reactions, increased child support seeking, increased individual relations with relatives, decreased family relations with spouse's relatives and friends, and separation of matters from each other. Items are rated on a 5-point Likert scale ranging from never (1) to always (5). Scores range from 42 to 210, with higher scores indicating more conflict and lower scores indicating better relationships (Alizadeh Asli & Jafar Nezhad Langroudi, 2018). The reliability of the questionnaire was obtained using Cronbach's alpha method, resulting in 0.71, and its content validity has been reported as satisfactory.

2.2.2. Conflict Resolution Styles

This questionnaire, designed by Rahim in 1983, assesses five styles of conflict resolution in relation to the spouse, comprising 28 questions rated on a 5-point Likert scale ranging from strongly disagree (1) to strongly agree (5). The integrating style includes items 1-7, the avoiding style items 8-13, the dominating style items 14-18, the compromising style items 19-22, and the obliging style items 23-28. The

score for each style, derived from the sum of items for each dimension, indicates the preference for that style in resolving conflicts with the spouse. Higher scores indicate a greater tendency towards that style. Rahim and Magner (1995) demonstrated that the questionnaire possesses satisfactory convergent and discriminant validity. Internal consistency reliability using Cronbach's alpha ranged from 0.76 to 0.85, as reported by Haghighi (2012) (Haghighi, 2012).

2.3. Interventions

2.3.1. Integrated Behavioral Couple Therapy

The content of the integrated behavioral couple therapy sessions followed the protocol designed by Jacobson and Christensen (1996), consisting of 16 100-minute sessions once a week over four months. During the sessions, individuals learned how to examine existing problems and create positive emotional changes by creating an environment in which couples could confront the positive aspects of their communication (Christensen et al., 2010; Christensen et al., 2020; Jacobson & Christensen, 1996).

Session 1: Introduction to therapy logic, explanation of the assessment process, discussion of existing relationship issues, and a review of the couple's history during non-conflict periods to understand healthy relationship dynamics.

Session 2: Evaluation of relationship turmoil and commitment levels, definition of conflict content, theme formulation, and identification of behavioral functions during conflicts. Focus on recognizing polarization and counteracting traps.

Session 3: Review of each partner's family history and relationship trajectory. Discussion about current issues based on initial assessments and interviews, focusing on feelings of security, desires, and expectations from each other.

Session 4: Feedback presentation on problematic areas and evaluation outcomes, reorganization of these issues into understandable themes, and fostering a mindset change from altering the partner to accepting their behaviors.

Session 5: Focus on interactive patterns, introducing interventions to prevent, interrupt, redirect, or limit problematic interactions. Redefinition of issues and behaviors, understanding negative behaviors as normal differences, and fostering an empathetic union.

Session 6: Deeper exploration of emotional awareness and empathy. Encouragement for couples to express softer

emotions and discuss their more profound emotional experiences in a constructive manner.

Session 7: Training in active listening and empathetic communication, focusing on the details in partner interactions, recognizing differences, and the resultant exchange patterns.

Session 8: Encourages exploration of unmet emotional needs and focuses on teaching couples to articulate these needs in a healthy, non-confrontational manner.

Session 9: Introduction to strategies for dealing with behaviors that are unlikely to change. Encourages seeing these behaviors as part of the partner's character, not something necessarily negative or personal.

Session 10: Describes themes and cycles that are destructive to relationships, provides insight into the linkage of events to reduce the destructive power of interactive patterns, and promotes active communication for resolving unresolved issues.

Session 11: Emphasizes tolerance building and magnification strategies, removing irrational efforts to change each other, and experiencing partner's negative behaviors without distress and conflict.

Session 12: Practice new communication skills, focusing on constructive communication methods that consider the desires and needs of both partners without questioning their validity.

Session 13: Role-playing negative behaviors in therapy and at home, asking couples to address problematic behavior when not emotionally charged and later informing the other that it was a simulation.

Session 14: Increasing self-care by learning new ways to meet needs that the partner cannot fulfill, such as engaging in social activities or managing life stressors.

Session 15: Strengthening behaviors that increase marital satisfaction, offering examples of reinforcing analysis, listing behaviors that enhance satisfaction, and teaching partners to do something beneficial for each other.

Session 16: Review of communication and problem-solving skills for resolving specific issues, practicing these skills, and completing post-test questionnaires.

2.3.2. Schema-Focused Couple Therapy

The content of the schema-focused couple therapy sessions was consisting of 13 100-minute sessions once a week over four months. During the sessions, a deep and needs-based understanding of what causes problems in the relationship was reviewed, and schemas and mindsets that

acknowledge and validate the couple's past experiences were identified and modified (Simeone-DiFrancesco et al., 2015).

Session 1: The first session is foundational, establishing the ground rules of the therapy and the therapeutic contract, setting up a safe space for both partners. It starts with crisis intervention, where the therapist and the couple dive into acute and chronic issues, discussing entrenched patterns and the sources of conflict. This session sets the tone for a collaborative and open therapy environment.

Session 2: This session introduces the concepts of schemas and mindsets, explaining how early maladaptive schemas are formed and their role in the couple's interaction. It covers the developmental origins and functions of these schemas, preparing the couple for deeper introspection and recognition of these patterns in their relationship dynamics.

Session 3: Focus shifts to assessing the origins of communication styles that the couple exhibits, especially how past neglect, violence, or indifference in their families of origin contribute to their current relational issues. It's about linking schema activation to emotional triggers and starting to map out schema influences on both partners' behaviors.

Session 4: Therapeutic work delves into teaching the couple about different schema modes, particularly identifying the modes that dominate their interactions such as the Child, Dysfunctional Parent, and Coping modes. The session uses visual aids like "mind maps" to help partners see how their schemas manifest in the relationship.

Session 5: Evaluation of the relationship continues with tools like genograms and personal relational narratives. The couple identifies core and compensatory schemas and explores schema coping styles. There is a focus on understanding how these schemas attract and repel within the dynamics of their relationship.

Session 6: Techniques specific to schema therapy are introduced, including schema validity testing and new definition forming. This session educates the couple on how to engage with and modify schemas using dialogue between their unhealthy and healthy sides, fostering healthier emotional responses.

Session 7: The therapist works with the couple on emotional differentiation, focusing on softening emotional experiences and expressing them in less aggressive ways. This involves recognizing and articulating softer emotions like sadness instead of anger or resentment.

Session 8: Empathy training is central to this session, where active listening skills are reinforced. The couple learns to focus on their conversations attentively,

appreciating the details and nuances of their interactions without judgment or defensiveness.

Session 9: The couple practices tolerating each other's behaviors that are unlikely to change and are not inherently destructive. It's about accepting these behaviors as parts of their partner's character and working towards not letting them disrupt the relationship.

Session 10: This session involves role-playing to address negative behaviors effectively. The couple is encouraged to act out these behaviors in a controlled setting, then discuss and analyze them together, fostering understanding and strategizing coping mechanisms.

Session 11: Focusing on reinforcing the couple's understanding of each other's emotional triggers and schemas. They practice skills to maintain and promote intimacy and empathy, moving towards a more secure emotional connection.

Session 12: Preparation for therapy conclusion starts, where couples review the skills and knowledge they have acquired. They prepare to apply these new strategies in real-life situations, ensuring the therapy's impacts extend beyond the sessions into their everyday interactions.

Session 13: The final session is about consolidation and future planning. The couple reviews their progress, sets

future goals, and discusses how to continue using the skills they have learned to manage and resolve conflicts as they arise, ensuring sustained improvements in their relationship.

2.4. Data Analysis

Data analysis was conducted using repeated measures analysis of variance in SPSS software.

3. Findings and Results

In the current study, 45 couples participated. The mean age in the experimental group was 37.41, and in the control group, it was 36.53. In the experimental group, 46.67% had one child, 40% had two children, and 13.33% were childless. In the control group, 40% had one child, 53.3% had two children, and 6.7% were childless. The educational levels in the experimental group were 33.33% PhD, 26.67% Master's, 20% Bachelor's, and 20% Associate's or Diploma. In the control group, 26.67% had a PhD, 40% had a Master's, 26.63% had a Bachelor's, and 6.7% had an Associate's or Diploma. The average marriage duration was 8.91 years in the experimental group and 7.36 years in the control group.

Table 1

Mean and Standard Deviation of Conflict Resolution Styles in Experimental and Control Groups Across Different Measurement Phases

Variable	Measurement Phase	Integrated Behavioral Couple Therapy		Schema-Focused Couple Therapy		Control Group	
		Mean	SD	Mean	SD	Mean	SD
Integrated Style	Pre-test	18.72	4.324	18.52	4.478	18.25	4.128
	Post-test	25.58	5.438	22.11	5.301	18.11	4.356
	Follow-up	24.67	4.949	21.19	4.896	18.19	4.476
Avoidant Style	Pre-test	20.44	4.127	19.30	4.096	19.26	4.123
	Post-test	15.45	5.137	16.45	5.163	19.56	4.575
	Follow-up	16.89	4.387	16.43	4.341	19.77	4.678
Dominant Style	Pre-test	19.01	3.968	19.39	3.845	19.25	3.485
	Post-test	14.70	4.024	16.20	4.123	19.20	3.753
	Follow-up	15.69	3.434	16.46	3.856	19.46	3.863
Compromise Style	Pre-test	11.58	3.760	11.63	3.547	11.63	3.547
	Post-test	16.12	3.190	14.12	3.142	11.59	3.674
	Follow-up	15.40	2.693	14.36	3.136	11.79	3.693
Obliging Style	Pre-test	14.96	4.942	14.26	4.021	14.45	4.489
	Post-test	18.44	3.264	16.99	3.425	14.69	4.596
	Follow-up	18.26	3.627	16.96	3.369	14.78	4.541

Initially, the statistical assumptions of the analysis of variance with repeated measures were examined. The Shapiro-Wilk test was used to check for the normality of the data. The statistics and probability values in the variable conflict resolution styles (Statistic = 0.819, sig = 0.517) indicated that the data were normally distributed. The

assumption of homogeneity of variances with the Levene's test in the conflict resolution styles variable ($F = 1.481$, sig = 0.298) confirmed the assumption of equal variances. The assumption of equality of covariance matrices was tested, showing that the assumption of equality of covariances was met (Box's $M = 0.710$, $F = 1.52$, sig = 0.161). The results of

testing the research hypotheses using analysis of variance with repeated measures are reported. Mauchly's test indicated that sphericity was not assumed for the conflict

resolution styles variable ($\text{sig} = 0.02$, $W = 0.08$). Accordingly, the Greenhouse-Geisser correction was used in testing hypotheses.

Table 2

Results of Repeated Measures Analysis of Variance for Research Variables

Variable	Source of Variation	Sum of Squares	df	Mean Square	F	p	Effect Size
Integrated Style	Time	119.46	1.13	92.71	148.15	<0.001	0.84
	Time $\times$ Group	93.95	2.26	72.91	116.52	<0.001	0.80
	Group	146.94	2	146.94	41.16	<0.001	0.59
Avoidant Style	Time	400.08	1.13	296.70	261.46	<0.001	0.90
	Time $\times$ Group	277.06	2.26	205.46	181.07	<0.001	0.86
	Group	260.10	2	260.10	4.93	0.035	0.35
Dominant Style	Time	230.46	1.70	160.14	79.16	<0.001	0.73
	Time $\times$ Group	418.17	1	418.17	38.86	<0.001	0.44
	Group	150.02	1.70	104.24	51.53	<0.001	0.64
Compromise Style	Time	87.62	2	43.81	164.78	<0.001	0.85
	Time $\times$ Group	131.61	1	131.61	15.25	<0.001	0.24
	Group	37.48	2	18.74	70.50	<0.001	0.71
Obliging Style	Time	20.844	1.091	19.106	86.017	<0.001	0.672
	Time $\times$ Group	37.378	2	18.689	13.39	<0.001	0.389
	Group	18.978	2.182	8.698	39.157	<0.001	0.651

In the subscales of conflict resolution styles, results from Table 2 show significant differences between the pre-test, post-test, and follow-up, and the interaction of time with the group. The partial eta squared for the time factor was 0.30, for the time and group factor 0.38, and for the group factor 0.65. In the bullying variable, the results show significant differences between the pre-test, post-test, and follow-up,

and the interaction of time with the group. The partial eta squared for time was 0.63, for time and group 0.54, and for group 0.36. In the marital adjustment variable, significant differences were found between the pre-test, post-test, and follow-up, and the interaction of time with the group. The partial eta squared for time was 0.49, for the interaction of time and group 0.68, and for the group 0.72.

Table 3

Results of Bonferroni Post-Hoc Test for Conflict Resolution Styles at Post-Test

Variable	Group i	Group j	Mean Difference	Standard Error	p
Integrated Style	Integrated Behavioral Couple Therapy	Schema-Focused Couple Therapy	3.63	0.61	<0.001
	Integrated Behavioral Couple Therapy	Control	6.81	0.61	<0.001
	Schema-Focused Couple Therapy	Control	4.18	0.61	<0.001
Avoidant Style	Integrated Behavioral Couple Therapy	Schema-Focused Couple Therapy	3.644	0.249	<0.001
	Integrated Behavioral Couple Therapy	Control	5.234	0.249	<0.001
	Schema-Focused Couple Therapy	Control	3.289	0.249	<0.001
Dominant Style	Integrated Behavioral Couple Therapy	Schema-Focused Couple Therapy	2.986	0.275	0.016
	Integrated Behavioral Couple Therapy	Control	5.733	0.275	<0.001
	Schema-Focused Couple Therapy	Control	3.422	0.275	<0.001
Compromise Style	Integrated Behavioral Couple Therapy	Schema-Focused Couple Therapy	2.600	0.215	0.024
	Integrated Behavioral Couple Therapy	Control	5.689	0.215	<0.001
	Schema-Focused Couple Therapy	Control	3.785	0.215	<0.001
Obliging Style	Integrated Behavioral Couple Therapy	Schema-Focused Couple Therapy	-2.289	0.511	0.021
	Integrated Behavioral Couple Therapy	Control	6.311	0.511	<0.001
	Schema-Focused Couple Therapy	Control	4.600	0.511	<0.001

Table 3 shows the results of the Bonferroni post-hoc test for comparing scores. In the experimental group, the mean scores for entitlement and bullying schemas in the post-test

phase decreased compared to the pre-test. Comparisons of post-test and follow-up scores show that the intervention's effect on entitlement and bullying schemas was sustained.

Also, in the experimental group, the mean score for marital adjustment in the post-test phase increased significantly compared to the pre-test. Comparisons of post-test and follow-up scores show that the intervention's effect on marital adjustment was sustained ($p < 0.05$).

Table 3 presents the results of the Bonferroni follow-up test for conflict resolution styles based on integrated behavioral couple therapy and schema-focused couple therapy for conflicting couples. This table shows that both integrated behavioral couple therapy and schema-focused couple therapy were significantly effective compared to the control group at the 95% level ($p < 0.05$). Additionally, the positive value indicates that the treatment led to an increase in constructive conflict resolution styles among couples. The table also shows that integrated behavioral couple therapy had a greater impact.

4. Discussion and Conclusion

This study aimed to evaluate the effectiveness of integrated behavioral couple therapy and schema-focused couple therapy on conflict resolution styles. The findings indicate significant differences between the means of conflict resolution styles across different intervals—pre-test, post-test, and follow-up—with the control variable. This demonstrates that both integrated behavioral couple therapy and schema-focused couple therapy were effective on the conflict resolution styles of conflicting couples. No research directly comparable to the current study was found regarding the impact of integrated behavioral couple therapy and schema-focused couple therapy on conflict resolution styles, but the findings of the current study align with previous studies (Danlian Namagardi et al., 2022; Kalai & Eldridge, 2021; Panahifar et al., 2022).

Mutual dialogue is the most significant predictor of adaptation and marital satisfaction for both women and men. Indeed, couples who use an integrated style to resolve their conflicts have better, more cooperative conversations. This strategy of flexible verbal strategies helps them express their feelings while seeking validation from their partner. They trust each other and, with mutual support, overcome problems, thereby feeling satisfaction and success while reducing marital conflicts. The dominating style is characterized by a greater emphasis on personal concerns and less on the concerns of others and is known as a competitive style. In this style, individuals impose their behavior and strive to achieve their goals without regard to others (Haghighi, 2012), making the dominating style

consistently recognized as destructive in conflict resolution. Individuals using the dominating style try to achieve their desires through authoritarian behavior and power exertion, disregarding others, thus increasing conflict. In every interaction, there is an action and a reaction, both of which are equally important. When conflicts arise, if spouses have the necessary skills to resolve their conflicts, they react according to the situation and conflict resolution method. This experience over time helps couples feel secure in finding constructive solutions, creating a foundation for intimacy and reducing marital conflicts. Conflict resolution styles are a factor in resolving family conflicts and can aid in successfully resolving couples' problems (Afkhami-Poostchi & Mirdoraghi, 2023).

The results suggest that integrated behavioral couple therapy helps couples by teaching problem-solving techniques to reduce conflicts and adapt to current issues in a constructive way, thereby changing their thoughts, perceptions, and behaviors towards constructive conflict resolution patterns. This approach does not focus much on the behavior of the partner but instead emphasizes the individual's understanding of behavior. In this therapeutic program, rather than focusing on rules and regulations, emphasis is placed on changing individuals' thoughts and feelings, helping couples recognize and change the destructive patterns within their relationship without blaming or directly engaging in these problems, thus increasing intimacy (Christensen et al., 2010; Christensen & Doss, 2017). The main goal of integrated behavioral couple therapy is to help couples better understand and accept each other and create a set of joint collaborations, so each spouse is willing to make the necessary changes to improve the quality of the relationship.

The results of Alizadeh et al. (2018) showed that in families where the emotional communication skills of family members are ineffective, family members are unable to resolve their problems and conflicts and perform poorly in role interactions and overall functioning. Based on the theoretical foundations mentioned, one of the factors causing conflicts in couples' relationships is inefficient conflict resolution styles (Alizadeh Asli & Jafar Nezhad Langroudi, 2018). This study also showed that integrated behavioral couple therapy consistently increased the use of conflict resolution styles and decreased the use of avoidant conflict resolution styles in conflicting couples. This finding aligns with prior studies (Baharloo et al., 2019; Danlian Namagardi et al., 2022).

The findings also indicate that there is a significant difference between the mean scores of conflict resolution styles of the control group and the schema-focused couple therapy group. Therefore, the results show that schema-focused couple therapy consistently increased the use of constructive and integrated conflict resolution styles and decreased the use of avoidant conflict resolution styles in conflicting couples. This recent finding aligns with prior findings (Aghaei et al., 2021).

Ineffective schemas and schema mindsets arise from unmet basic emotional needs during childhood. In conflict resolution styles, the fundamental issue is how to satisfy one's needs and those of the spouse, such that in inefficient styles, the goal of the spouse is to meet their own needs or just the needs of the spouse (Letafati Beris et al., 2021). In this study, schema-focused couple therapy helped couples reorganize their emotions, through improving schemas and managing mindsets, setting the stage for satisfaction. During the therapeutic process, it was clearly shown that inefficient mindsets, the "win-win" for meeting each other's needs in the context of communication, play an important role in resolving conflict. For example, in the mindset of a demanding and punitive parent, couples ignore their own needs, allow others to meet their demands, and try to please others by any means possible, otherwise, they feel guilty and blamed by their punitive parents. These individuals, by sacrificing themselves with a self-sacrificing schema, create a "lose-lose" situation, or in an avoidant conflict resolution style, couples withdrew from conflict. They ignored their own and their spouse's concerns and were often aloof. In these conditions, their vulnerable child mindset was activated, and with an avoidant coping style, they avoided engaging with conflict and problems. In both situations, many hidden conflicts arose between them. In this study, schema mindsets were precisely intertwined with conflict resolution styles. Also, during the group therapy sessions, the researcher observed that married individuals used constructive and destructive methods to deal with life's problems. During the therapy, couples became familiar with various types of constructive (cooperative, compromise) and inefficient (avoidant and dominating) conflict resolution styles, learning that sometimes repeating inefficient problem-solving styles can create barriers to communication and other problems. Gradually, couples changed their perspectives and opinions with the help of the therapist, and the result of this intervention was the dominance of an integrated style in their relationships, such that they tried together to both be winners. Conflict resolution style

reminds individuals of the attachment needs emphasized by schema mindsets. Many researchers believe that there is a relationship between secure and insecure attachment styles (which are the basis of schema therapy and the schema mindset model) and conflict resolution styles (Letafati Beris et al., 2021). The results of the study by Letafati Beris et al. (2021) showed that treatment based on schema mindsets consistently increased the use of compromise and integrated conflict resolution styles in newly married conflicting couples and decreased the use of avoidant and obliging conflict resolution styles (Letafati Beris et al., 2021).

Researchers believe that the methods people adopt when conflicts arise, and not the conflicts themselves, can play a role in relationship satisfaction and the stability or instability of the relationship. In couples where an open environment based on discussion, expressing their own opinions, and valuing the opinions of others exists, cooperation and participation in decision-making and consequently tranquility and relationship stability can be expected. However, in couples where a dictatorial environment based on imposing their own opinions on the spouse without regard to his or her opinions on issues prevails, troubled relationships and even separation are expected. Therefore, equipping couples with conflict resolution styles and appropriate expression of emotions are effective in the stability and success of marital life and consequently in reducing the occurrence of divorce. These factors together cause couples to effectively reduce their marital conflicts.

5. Suggestions and Limitations

In general, the results of the study showed that inefficient conflict resolution styles can be manipulated through therapeutic interventions based on integrated behavioral couple therapy and schema-focused couple therapy and can be useful in steering married individuals towards constructive conflict resolution styles. By employing combined and educational approaches, the attitudes and behaviors of married individuals can be strengthened regarding the use of positive constructive conflict resolution styles and also facilitate the avoidance of inefficient conflict resolution styles. This helps prevent various communication problems and conflicts in married life. This research faced limitations such as the length of time required to access the desired samples considering the goals of the research and the initial difficulty of member acceptance; therefore, it is recommended that subsequent researchers, considering the culture of the region, study the training of group counseling

for schema-focused couple therapy for same and opposite sexes separately. It is also recommended that family counseling centers, marriage counseling centers, and support organizations use the educational findings of this research to prevent and resolve conflicts among couples.

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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