

# The Impact of Emotion-focused Counseling on Marital Issues of Infertile Couples: A Systematic Review

Nasim Shahrahmani (MSc)<sup>1</sup>, Sanaz Mollazadeh (MSc)<sup>1</sup>, Ali Taghipour (PhD)<sup>2,3</sup>, Malihe Mahmoudinia (MD)<sup>4</sup>, Robab Latifnejad Roudsari (PhD)<sup>5,6\*</sup>

<sup>1</sup> PhD Student in Reproductive Health, Student Research Committee, Mashhad University of Medical Sciences, Mashhad, Iran

<sup>2</sup> Professor, Social Determinants of Health Research Center, Mashhad University of Medical Sciences, Mashhad, Iran

<sup>3</sup> Department of Epidemiology, School of Health, Mashhad University of Medical Sciences, Mashhad, Iran

<sup>4</sup> Assistant Professor, Fellowship of Infertility, Maternal & Neonatal Research Center, Mashhad University of Medical Sciences, Mashhad, Iran

<sup>5</sup> Professor, Nursing and Midwifery Care Research Center, Mashhad University of Medical Sciences, Mashhad, Iran

<sup>6</sup> Department of Midwifery, School of Nursing and Midwifery, Mashhad University of Medical Sciences, Mashhad, Iran

ARTICLE INFO	ABSTRACT
<p><i>Article type:</i> Review article</p>	<p><b>Background &amp; aim:</b> Infertile couples face different marital issues in their relationships. Emotion-focused counseling has been proposed as one of the approaches in the counseling process of infertile couples in several studies in Iran. Since effective counseling approaches with the greatest impact could help therapists to adopt the best counseling method. This systematic review was conducted to determine the effect of emotion-focused counseling on the marital issues of infertile couples.</p> <p><b>Methods:</b> This systematic review was conducted according to the Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA). English and Persian databases including Pubmed, Scopus, Web of Science, Cochrane Library, Embase, Proquest, Magiran, SID, and Irandoc were searched by two independent researchers using the keywords of "infertility," "barrenness," "childlessness," "sterility," "emotion-oriented couple therapy" and "emotion-focused counselling" and their combinations using Boolean operators without time limit until Feb. 2023. Inclusion criteria were experimental studies that investigated the effect of emotion-focused counseling on the marital issues of Iranian infertile couples. The Cochrane risk of bias tool were used for assessing quality of articles.</p> <p><b>Results:</b> Out of 88 articles, six articles with a sample size of 586 people were included in the systematic review. The findings revealed a significant increase in marital compatibility and commitment and a significant decrease in marital boredom and conflicts in the group receiving emotionally focused counseling. No significant effect was observed in marital satisfaction.</p> <p><b>Conclusion:</b> Emotionally focused couple therapy is one of the effective counseling methods that can be used to improve the marital issues of infertile couples.</p>
<p><i>Article History:</i> Received: 04-Oct-2022 Accepted: 20-Feb-2023</p>	
<p><i>Key words:</i> Counseling Infertility Emotionally focused Couple Therapy Systematic Review</p>	

► Please cite this paper as:

Shahrahmani N, Mollazadeh N, Taghipour A, Mahmoudinia M, Latifnejad Roudsari R. The Impact of Emotion-focused Counseling on Marital Issues of Infertile Couples: A Systematic Review. Journal of Midwifery and Reproductive Health. 2023; 11(4): 3884-3895. DOI: 10.22038/JMRH.2023.68272.2001

## Introduction

Nowadays, infertility is one of the medical problems, which its rate has increased by 50% since 1955, and now 10-15% of couples suffer from this problem (1-2). The mean global prevalence of infertility is 9%, which has a range

of 3.5-16.7% in developed countries. The prevalence of lifelong infertility in Iran is 10.9% (3). According to the World Health Organization, infertility is one of the global public health problems that can threaten individual, marital and social balance (4).

\* Corresponding author; Robab Latifnejad Roudsari, Professor, Nursing and Midwifery Care Research Center, Mashhad University of Medical Sciences, Mashhad, Iran. Email: rlatifnejad@yahoo.com, LatifnejadR@mums.ac.ir

Physiological and pathological factors cause infertility; however, its psychosocial aspects should not be neglected. Infertility can affect various aspects of the life of infertile women. It may lead to depression, despair, feelings of guilt and worthlessness (5), a crisis in marital relationships, increased marital tension, the disintegration of sexual life (6), decreased sexual desire, sexual pain, and the inability to reach the peak of sexual pleasure (7). Sexual satisfaction and marital relations may decrease even after infertility diagnosis and during infertility treatment (8). In the study conducted by Abdul Qadir (2014), 15.7% of the infertile people examined complained of a lack of marital satisfaction (9). Studies have shown that marital problems are one of the main reasons for termination of treatment among infertile patients, although they still have a chance of pregnancy. The reason is that infertility can cause a decrease in intimacy in marital relationships and disrupt the quality of the relationship, termination of the marital relationship, and eventually separation and divorce (10). Anderson et al. (2003) also showed in their research that the marital satisfaction and expression of the passion of infertile couples is significantly less than that of fertile couples (11). Not paying attention to the marital issues and emotional disorders of infertile couples creates a vicious cycle that reduces the possibility of infertility treatment (12). Consequently, a key component of the success of infertility treatment is paying attention to the sexual needs that are influenced by psychological issues; because it can affect the couple's relationship during the treatment; particularly when they require their partner's compassion and support. According to the results of the studies, poor communication support, particularly from the spouse, disintegrates sexual activity and raises marital conflict (13, 14). There are numerous counseling techniques available to address the psychological and sexual effects of infertility, including group counseling on infertility adaptation (15), a mindfulness-based program for infertility (16), and cognitive behavioral

counseling on sexual performance (17). Psychotherapists have suggested various approaches, such as individual, couple, and family approaches, to address the issues brought on by infertility. To help couples cope with the stressful event of infertility, infertility counselors should try to use holistic approaches (13, 18-20). However, experts contend that when a whole family or a two-person unit is looking for the treatment of family life issues, the family or couple therapy approach is more effective than individual therapy (21).

One of the approaches that are important for improving marital issues in couples is emotion-oriented therapy. Recent pioneers in the field of couple therapy, Greenman and Johnson, introduced this approach. This treatment identifies the emotional experiences of individuals and, through processing and reorganization, the interaction patterns that lead to troubles in marital relationships eliminates and improves (22). Additionally, in this therapeutic approach, couples' compatibility, intimacy, and satisfaction are increased by identifying safe attachment patterns and engaging in constructive interactions with one another. This approach also emphasizes changing attachment behaviors to repair troubled relationships (23). Due to its structure and step-by-step treatment plan for couples, emotion-focused couple therapy is more effective than other approaches. As a result, the likelihood of marital issues recurrence is extremely low, and its effect is more significant (24). Focused couple therapy identifies the suppressed and hidden emotions that feed this destructive communication cycle. Using interventions whose efficacy has been supported by numerous studies, this cycle will stop, and the relationships of couples will improve (25, 26). Tracy et al. (2013), while expressing the multifaceted problems associated with infertility, including emotional, physical, and social problems, stated that emotion-focused couple therapy, along with medical treatments, is one of the most necessary things in the treatment of infertility, and the related biological, physical and psychological

problems (27). The outcomes of the study by Alavi et al. (2019) also revealed that emotion-focused couple therapy boosts marital trust and intimacy (28). Given that infertility has a detrimental impact on marital satisfaction, it is advised that infertility clinics offer the necessary training to minimize marital conflicts. Teaching marital relations to infertile couples can help them avoid divorce and instead strengthen their family foundation (10).

Several studies have been conducted on the effect of emotion-focused couple therapy on various aspects of the marital problems of infertile couples in Iran. Therefore, the present study was conducted to analyze, summarize, and synthesize the findings of clinical trials conducted in Iran regarding the effect of emotion-focused couple counseling on infertile couples' marital issues.

## Materials and Methods

This systematic review was written based on the latest version of the Preferred Reporting Items for Systematic reviews and Meta-Analyses

**Table 1.** Search strategy

Number	Search strategy
1	'Emotionally Focused Therapy' OR 'Emotion-focused Couples Therapy' OR 'Emotionally Focused Couples Therapy' OR 'Emotion-focused Therapy for Couples' OR 'Emotionally Focused Therapy for Couples' OR 'EFT'
2	'infertility' OR 'subfertility' OR 'subfecundity' OR 'sterility' OR 'infecundity' OR childlessness)
3	'Iran'
4	1 AND 2 AND 3

As a search tool in this study, the PICOS model was applied as follows: Population: infertile couples; Intervention: emotion-focused treatment; Comparison group: infertile couples with no intervention; Outcome: marital issues including marital compatibility, commitment, boredom and conflict, as well as sexual satisfaction; Study type: experimental studies.

This systematic review included all experimental studies that looked at how emotional-focused treatment affected marital issues of infertile couples in Iran. The exclusion criteria, on the other hand, included observational and descriptive studies, case reports, case series, editorials, abstracts presented at the conferences, unpublished data,

(PRISMA, 2020). English language databases including PubMed, ProQuest, Scopus, Web of Science, Cochrane Library, Embase, and Persian language databases of Magiran, SID, and IranDoc were used to search the published articles. In the English language databases, we looked for the keywords "infertility," "subfertility," "subfecundity," "sterility," "infecundity," "childlessness," "unresolved infertility," and "Emotionally Focused Therapy," "Emotion Focused Couples Therapy," "Emotionally Focused Couples Therapy," "Emotionally Focused Therapy for Couples," "Emotionally Focused Therapy for Couples," "EFT". In the Persian language databases Persian equivalents of the mentioned keywords were used. " Also, their combinations were evaluated by two independent researchers using Boolean operators ("and," "or") without any time limit until Feb. 2023. The cases of contradiction were then discussed with the third author and looked into manually using references from related articles. Table 1 displays the search strategy for databases in English and Persian.

national and local reports, as well as the article with no full text.

In the process of selecting articles, at first, the retrieved studies searched from English and Farsi databases were entered into the Endnote version 7 software, and then duplicates were removed. After their titles and abstracts were reviewed, the articles that had no relationship to the objectives of the study were removed. Following a full-text review of the relevant articles considering the inclusion and exclusion criteria, the eligible studies were included in the systematic review. The aforementioned procedure was carried out by two independent researchers (NS and SM) to increase the validity of the study.

Two independent researchers extracted data using a self-structured checklist. This checklist was divided into four sections: general information about the article (names of the authors, year in which the study was conducted, location of the study), participants' characteristics (age, duration of infertility), data about the intervention and control groups (type of study, number of participants, number of groups, percentage of dropout, type of intervention, type of control, and data collection tool), the outcomes under investigation (marital issues including marital compatibility, commitment, marital boredom and conflict as well as sexual satisfaction) (Table 2).

In this study, two researchers (NS and SM) independently assessed the quality of studies. In instances of disagreement, a third researcher (RLR) participated in the assessment to reach a consensus. The Risk of Bias tool developed by the Cochrane Collaboration was used to evaluate the quality of studies. The results of quality assessment were presented graphically using the Review Manager program (RevMan 5.3). This tool evaluates the quality of articles in terms of 1) selection bias (random sequence generation and allocation concealment), 2) implementation bias (blinding of participants and personnel), 3) detection bias (blinding of outcome assessment), 4) attrition bias (incomplete outcome data), 5) reporting bias (selective reporting and 6) other biases. Each item examined by this tool has a particular level of bias including low, medium, or ambiguous. No studies were excluded based on their quality score. The achieved coefficient of inter rater of the quality of articles was 0.80. Synthesis of the data carried out qualitatively.

The research team followed all ethical guidelines, including honesty and trustworthiness in text analysis, when

conducting this study and presenting its findings.

## Results

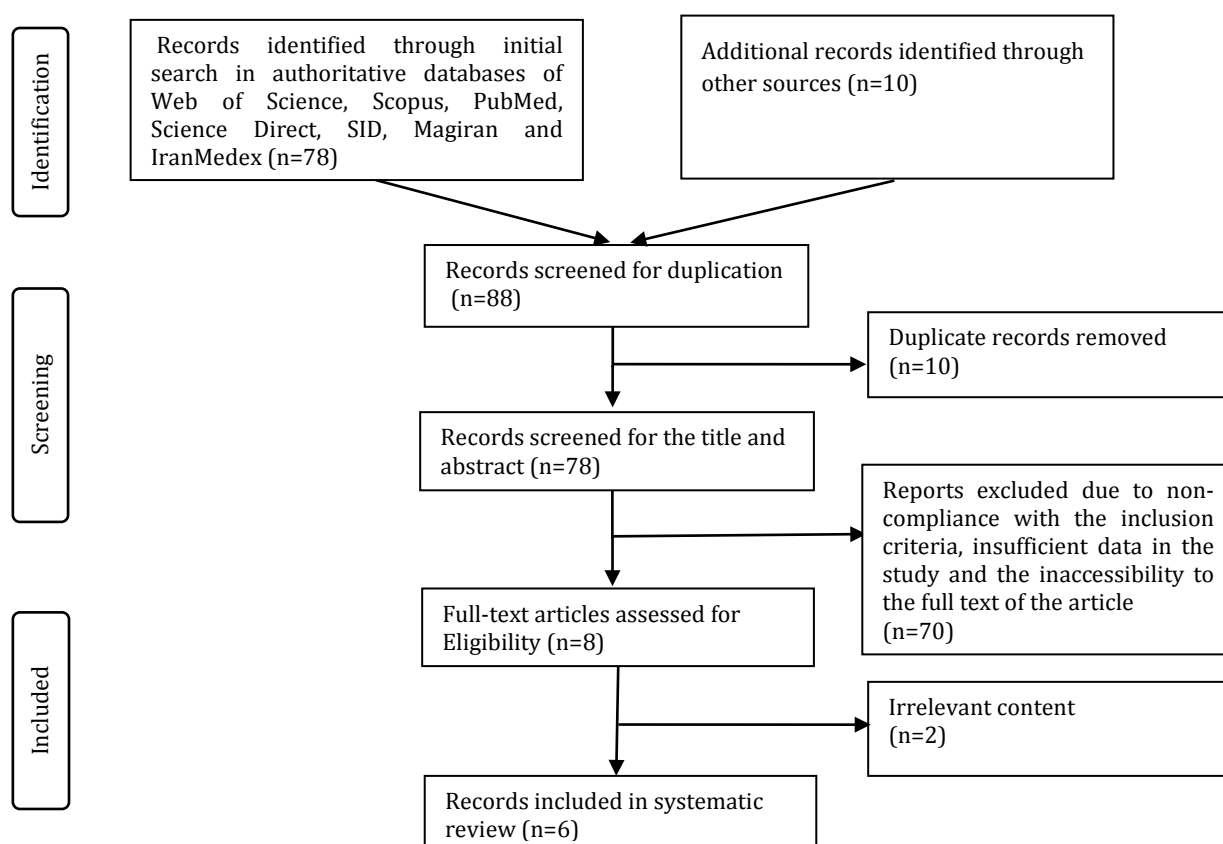
### 3.1. Characteristics of studies

Figure 1 shows the flowchart of the study selection process. In the initial stage of the search, 88 articles were identified. Then, 10 duplicate articles, 72 irrelevant articles, and two articles that did not meet the inclusion criteria were removed, and finally, six articles were included in the study. The total sample size was 456 people. Four studies were published in English (29-32) and two in Persian language (33-34).

### 3.2. Risk of bias of included studies

Figures 2 and 3 show the quality of the articles included in the study using the Cochrane Collaboration's tool for assessing risk of bias (35).

In terms of selection bias, in contrast to one study (29), where the randomization process was poorly described, the risk of bias was low in other studies (30-34). There were incomplete explanations in all of the studies about the random allocation method of concealment (29-34). Regarding implementation bias, all studies had a high level of bias regarding participant and evaluator blindness (29-34). In relation to detection bias, in some studies, the blinding of statistical analyst was not adequately explained. With respect to attrition bias, in two studies, explanations (33, 34) were ambiguous, but other studies showed a low risk of sample attrition bias (29-32). Respecting reporting bias, in all studies, the risk of this bias was low (29-34). Finally, the risk of bias was low in terms of other items (29-34).



**Figure 1.** Steps of study selection based on the PRISMA 2020 flow diagram

### 3.3. The effectiveness of emotion-focused therapy on couples' compatibility, commitment, boredom, conflicts, and marital satisfaction

Three studies on marital compatibility (30-32), one on marital commitment and boredom(34), one on marital conflicts (33), and one on marital satisfaction (29) were examined in this systematic review. The treatment lasted 10 sessions in 6 studies. In two studies, each session lasted 90 minutes, and in four, it lasted 120 minutes.

#### Marital compatibility

Emotion-focused couple therapy increased marital compatibility, intimacy, and the quality of relationships between couples, according to the research findings of Maryam Najafi et al.

(2013) (30), Soltani et al. (2013) (32) and Soleimani et al. (2015) (31). The intervention group received treatment weekly for 120 minutes over 10 sessions. Spanier's Marital Compatibility Questionnaire was employed in these three studies. Couple therapy improved marital adjustment, satisfaction, solidarity, agreement, expression of affection, quality of life, and psychological health of couples in these three studies. Teaching the skills of paying attention to the cycle of each other's daily interactions, identifying excitement, emotions, and pure feelings, focusing on oneself, and identifying the underlying fears of couples gave them a clearer and deeper view of their emotions and relationships with their spouses. As a result, they gained more peace, and their mental health improved.

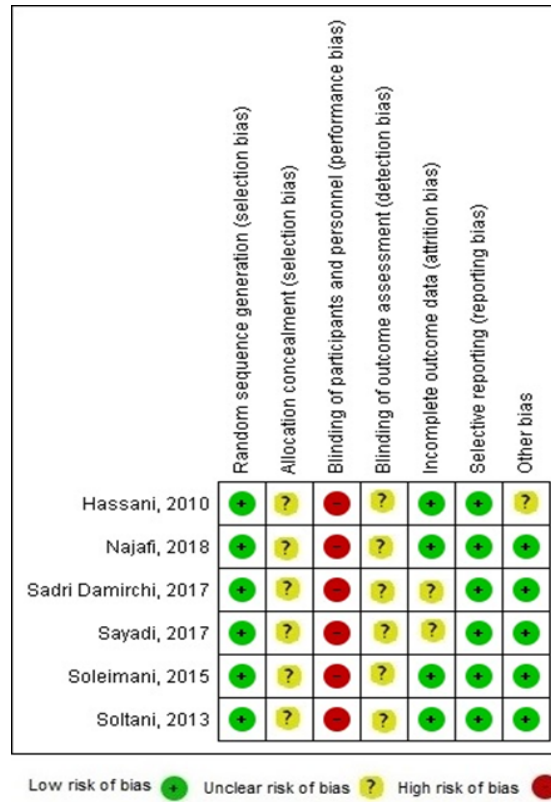


Figure 2. Risk of bias for each included studied based on the Cochran risk of bias tool

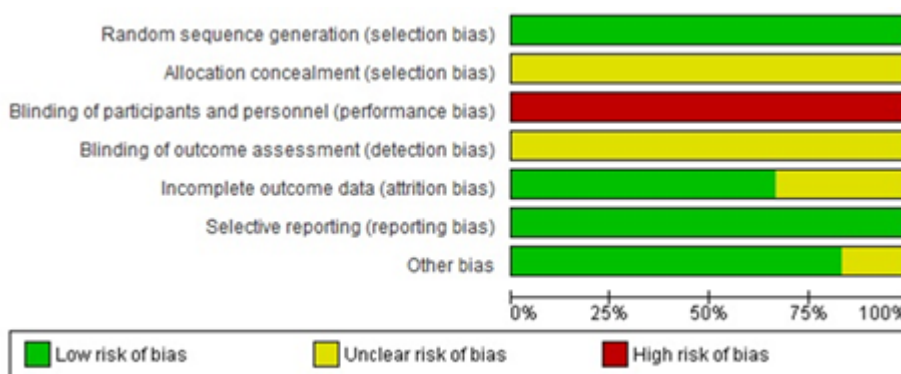


Figure 3. Risk of bias across all included studies based on the Cochran risk of bias tool



**Table 2.** Characteristics of the studies included in the systematic review

Author's name, Year	Place of study	Design of study	Mean age (years) (interve ntion/c ontrol)	Number of particip ants (treatm ent/ control)	Duration of infertility	Duration of treatment	Tool to measure outcomes	Main findings	Quality score
Sadri et al. 2017 (33)	Ardebil	Experimental	36/37	18 couples/ 18 couples	More than a year	10 sessions, once a weekly, each lasting 90 minutes.	1. Marital Conflict Questionnaire of Harris and Bozorgi 2. Relationship quality questionnaire	↓ marital conflict, ↑ quality of relationship	4
Sayadi et al. 2017 (34)	Qom	Experimental	39/40	15 couples/ 15 couples	10 years	10 sessions, twice a week, each lasting 120 minutes.	1. Marital commitment questionnaire 2. Pines Marital Depression Questionnaire	↑marital commitment, ↓marital boredom	3
Soleimani et al. 2015 (31)	Tehran	Experimental	33	15 couples/ 15 couples	10 years	10 sessions, twice a week, each lasting 120 minutes.	Spanier Marital Compatibility Questionnaire in couples with marital conflicts	↓marital conflict,	3

Author's name, Year	Place of study	Design of study	Mean age (years) (interve ntion/c ontrol)	Number of particip ants (treatm ent/ control)	Duration of infertility	Duration of treatment	Tool to measure outcomes	Main findings	Quality score
Najafi et al. 2015 (30)	Kerman - shah	Experimental	33	30 couples/ 30 couples	10 years	10 sessions, twice a week, each lasting 120 minutes.	Spanier Marital Compatibility Questionnaire	↑marital adjustment	4
Soltani et al. 2013 (32)	Tehran	Experimental	-	6 couples/ 6couple s	-	10 sessions, once a week, each lasting 120 minutes.	Spanier Marital Compatibility Questionnaire	↑marital adjustment	4
Hasani 2010(29)	Tehran	Experimental	-	30 couples/ 30 couples	More than a year	10 sessions, once a week, each lasting 90 minutes.	Enrich Marital Satisfaction Questionnaire	No impact on marital satisfaction	3



### Marital commitment

In the research of Sayadi et al. (2017) (34), the couples of the intervention group were treated for 10 sessions and each lasted for 120 minutes per week. In this study the Marital Commitment Questionnaire was used. In the intervention group, emotion-focused couple therapy significantly raised the mean post-test scores of the marital commitment variable and its subscales (personal commitment, moral commitment, and structural commitment).

### Marital boredom

In the study conducted by Sayadi et al. (2017) (34), the couples of the intervention group were treated for 10 sessions and each lasted for 120 minutes per week. In this study the marital boredom Questionnaire was used. The results showed that emotion-focused couple therapy could decrease couples' burnout in the intervention group.

### Marital Conflicts

According to the results of study by Sadri et al. (2017) (33), intervention group were treated for 10 sessions with duration of 90 minutes per week. The Harris and Bozorgi Marital Conflict Questionnaire was used in this study. The emotion-focused couple therapy was effective in marital conflict and improving the quality of couples' relationships. This therapy aims to reveal vulnerable emotions and facilitate the ability of couples to create these emotions safely and lovingly. Processing emotions in a safe environment results in a healthier and more innovative interaction pattern, which lowers the level of confusion, boosts affection between partners, and ultimately improves compatibility and marital satisfaction.

### Marital satisfaction

According to Hassani et al. (2010) (29), couples in the intervention group were treated for 10 sessions of 90-minutes duration per week. Enrich Marital Satisfaction Questionnaire was used in this research. The Mann-Whitney U test results revealed no significant difference in the ability of emotion-focused couple therapy to improve marital satisfaction in couples.

## Discussion

This study aimed to examine how emotion-focused therapy could affect marital issues in Iranian infertile couples. .. Six articles were ultimately included in the systematic review. According to these studies, marital compatibility and commitment increased significantly in the group receiving emotion-focused therapy, while marital boredom and conflicts decreased significantly. Regarding marital satisfaction, however, there was no discernible effect.

The findings of this study demonstrated that emotion-focused therapy in couples experiencing infertility resulted in enhanced compatibility. In this regard, Woolley and Girard (36), Rathgeber et al. (37), and Wiebe et al. (38) also demonstrated the benefits of emotion-focused couple therapy. They indicated that finding unspoken emotions and resolving them in a relationship can increase a couple's marital compatibility, lower interpersonal tensions, and increase their level of agreement (24) According to they study conducted by Ramezanzadeh et al., in the study of emotional compatibility concluded that due to the high prevalence of psychiatric disorders (especially anxiety and depression) in infertile people, marital dissatisfaction and marital incompatibility are more than fertile women. (39). On the other hand, Hosseinabadi et al. (40), in the study of the effectiveness of emotion-focused therapy on marital compatibility and positive emotions of couples, concluded that emotion-focused couple therapy has favorable results in the subscale of satisfaction, solidarity, and expression of marital affection. However, in the scale of agreement and compatibility, they observed no effect.

Another finding of this study was the effect of the emotion-focused therapy approach on reducing marital conflicts. according to Johnson (41) and Mirzadeh (42). The result is similarly consistent with the findings of the study of Forouzanfar et al. (2019)(43). In their most recent meta-analysis, they concluded that emotion-focused couple therapy was more effective than other couple therapy approaches at treating psychological issues related to

communication style and minimizing conflicts(24).

The findings of Torkan (2019) (44) revealed that couples who tended to resolve conflicts were experiencing higher levels of positive emotions. This suggests that emotion-focused therapy has contributed to the development of a sense of responsibility in the couple's conflict. Ardehaee et al. (45), found that emotion-focused couple therapy improved negative interactive cycles, rebuilt interactive patterns, and encouraged novel approaches to address long-standing communication issues. As a result, marriage performance and the psychological well-being of women with marital conflicts improved, which is congruent with the findings of our study.

This study also found that emotion-focused therapy had a favorable effect on boosting marital commitment. According to Cohen's research in 2014, emotion-focused couple therapy can increase marital commitment and honesty (46). Onat et al. (2012), similarly, reported that couple training with an emotion-focused approach has a significant impact on enhancing sexual intimacy and commitment in relationships (47).

The findings of the current study also suggested that this therapy approach may successfully lower marital boredom. According to Johnson (48), Ellen (49), and Denton (50), an emotion-focused approach can assist couples in rebuilding their relationship with their spouse and lessen marital dissatisfaction. This process can take place by growing emotional awareness, emotional symbolization, awareness of the role of experience and changing processes, emphasis on caring for the spouse, and identification and removal of negative interactive cycles in marital life. While the research findings of Addis and Jacobson (51) showed that not considering the underlying issues of the relationship and the emotional injuries of the spouses will lead to the recurrence of turmoil shortly after couple therapy, Barrett et al. (52) in their research made it clear that mere changes in the couple's behavior do not lead to the improvement of marital quality, but it is the perceived positive

and negative emotions of the couple that plays an important role.

In this review no significant effect was observed in marital satisfaction, which is congruent with the findings reported by Hassani (2008), who found couples' marital satisfaction does not significantly increase as a result of emotion-focused couple therapy (29). However, Merzadeh et al. (2016) found that emotion-focused couple therapy successfully modified avoidant and anxious attachment styles and improved marital satisfaction (53). Similarly, Dalglish (2015) (54), reported that emotional control, relationship trust, and attachment security all improve before and after treatment, which leads to more changes in marital satisfaction. According to Rostami (2014), couples who participated in emotion-focused couple therapy sessions expressed greater satisfaction in the quality of their communication than couples in the control group (55), which was inconsistent with the findings of our study. Couples endure a lot of pressure during infertility treatment, while emotionally focused therapy is effective in reducing mild to moderate problems of couples, in order to create marital satisfaction, couples need to receive more education and try to spend more time together (29).

Therefore, the findings of the present studies demonstrated that it is possible to highlight the crucial role of emotions in all couples' communication when attempting to explain the effectiveness of emotion-focused couple therapy in enhancing and increasing communication. Therefore, the emotion-focused couple therapy approach can be used because it is a subset of couple therapy and puts emotions at the center of its therapeutic work.

One of the strengths of this study was its summary of the benefits of emotion-focused couple therapy for various marital problems. On the other hand, one of the research weaknesses was that all studies, regardless of quality score, were included in this study due to the small number of articles. The most significant limitation of this study was the small number of articles were included in the review, due to the

limited number of studies conducted in Iran. Also publication bias could be a possible threat for the validity of the results like previous studies in the field of infertility (56, 57), therefore the findings should be interpreted with caution.

It is suggested that researchers use and compare this therapy method with other methods. Regarding the effectiveness of emotion-focused couple therapy on marital satisfaction, we recommend researchers conduct further studies with more advanced design. In general, future research should consider studies with stronger designs, larger sample size and more attention to confounding variables.

### Conclusion

The findings of this study demonstrated that emotion-focused therapy could increase marital compatibility and commitment, while lowering marital boredom and conflicts. However, it was ineffective in raising marital satisfaction. As a result, it can be said that emotionally focused couple therapy is one of the most effective types of counseling for helping infertile couples with their various marital issues. The results of this study, while creating a clear and practical outlook for counselors and psychotherapists, especially family therapists, can be an effective guide for improving the relationships of infertile couples and subsequently reducing marital conflicts. It can be used as a practical guide for boosting marital relationships, revealing and correcting inconsistencies in couples' communications and behavioural patterns.

### Acknowledgements

This study was supported financially (grant number: 4011074) and approved ethically at Mashhad University of Medical Sciences (ethical code: IR.MUMS.NURSE.REC.1401.120). We would like to thank the university authorities and all the authors whose articles were included in this review.

### Conflicts of interest

The authors declared no conflicts of interest.

### References

1. Ebrahimzadeh ZS, Latifnejad RR, Janghorban R, Mousavi BSM, Amirian M. The Needs of Infertile Couples after Unsuccessful Treatment with Assisted Reproductive Technologies: A Systematic Review of Literature. *Journal of Isfahan Medical School*. 2019; 37(531): 531.
2. Oliva A, Spira A, Multigner L. Contribution of environmental factors to the risk of male infertility. *Human Reproduction*. 2001; 16(8): 1768-1776.
3. Nasr Esfahani M, Kalantar SM, Montazri F, Rajabi M, Daneshmand F. Aneuploidy Assessment of X, Y, 18 Chromosomes in Sperm of Oligoteratospermia Using FISH Technique. *SSU\_Journals*. 2022; 29(11): 4312-4321.
4. Direkvand-Moghadam A, Delpisheh A, Direkvand-Moghadam A. Effect of infertility on sexual function: a cross-sectional study. *Journal of Clinical and Diagnostic Research*. 2015; 9(5): QC01.
5. Nelson CJ, Shindel AW, Naughton CK, Ohebshalom M, Mulhall JP. Prevalence and predictors of sexual problems, relationship stress, and depression in female partners of infertile couples. *The Journal of Sexual Medicine*. 2008; 5(8): 1907-1914.
6. Latifnejad Roudsari R, Allan H, Smith P. A qualitative inquiry into the mediating role of religion and spirituality in adjusting marital relationships of infertile women. *Journal of Midwifery and Reproductive Health*. 2013; 1(1): 33-41.
7. Read J. Sexual problems associated with infertility, pregnancy, and ageing. *British Medical Journal*. 2004; 329(7465): 559-561.
8. R Ferraresi S, AS Lara L, FS de Sa M, M Reis R, CJS Rosa e Silva A. Current research on how infertility affects the sexuality of men and women. *Recent Patents on Endocrine, Metabolic and Immune Drug Discovery*. 2013; 7(3): 198-202.
9. Hussein A. Effect of psychological intervention on marital satisfaction rate of infertile couples. *International Journal of Educational Policy Research and Review*. 2014; 1(3): 028-036.
10. Zamani Zarchi MS, Sayadi M, Safarpour F. The effectiveness of emotionally focused couple therapy on perceived social support and feeling of loneliness among infertile couples. *Journal of Psychological Science*. 2020; 19(87): 313-320.
11. Anderson K, Sharpe M, Rattray A, Irvine D. Distress and concerns in couples referred to a specialist infertility clinic. *Journal of Psychosomatic Research*. 2003; 54(4): 353-355.
12. Van Den Akker OB. Coping, quality of life and psychological symptoms in three groups of sub-

- fertile women. *Patient Education and Counseling*. 2005;57(2):183-189.
13. Roudsari RL, Allan HT. Women's experiences and preferences in relation to infertility counselling: a multifaith dialogue. *International Journal of Fertility and Sterility*. 2011; 5(3): 158.
  14. Roudsari RL, Bidgoli MR. The effect of collaborative infertility counseling on marital satisfaction in infertile women undergoing in vitro fertilization: a randomized controlled trial. *Nursing and Midwifery Studies*. 2017; 6(2): 7.
  15. Kheirkhah M, Vahedi M, Jenani P. The effect of group counseling on infertility adjustment of infertile women in Tabriz al-Zahra clinic. *The Iranian Journal of Obstetrics, Gynecology and Infertility*. 2014; 17(113): 7-14.
  16. Galhardo A, Moura-Ramos M, Cunha M, Pinto-Gouveia J. How does the mindfulness-based program for infertility (MBPI) work in reducing depressive symptoms. *Mindfulness*. 2018; 9(2): 629-635.
  17. Sahraeian M, Lotfi R, Qorbani M, Faramarzi M, Dinpajoo F, Ramezani Tehrani F. The effect of Cognitive Behavioral Therapy on sexual function in infertile women: A randomized controlled clinical trial. *Journal of Sex and Marital Therapy*. 2019; 45(7): 574-584.
  18. Latifnejad Roudsari R, Rasolzadeh Bidgoli M, Mousavifar N, Modarres Gharavi M. The effect of collaborative counseling on perceived infertility-related stress in infertile women undergoing IVF. *The Iranian Journal of Obstetrics, Gynecology and Infertility*. 2011; 14(4): 22-31.
  19. Hadizadeh-Talasaz F, Latifnejad Roudsari R, Simbar M. Decision for disclosure: The experiences of Iranian infertile couples undergoing assisted reproductive donation procedures. *Human Fertility*. 2015; 18(4): 265-275.
  20. Rasoulzadeh Bidgoli M, Latifnejad Roudsari R. The effect of the collaborative infertility counseling model on coping strategies in infertile women undergoing in vitro fertilization: A randomized controlled trial. *International Journal of Women's Health and Reproduction Sciences*. 2018; 6(1): 47-54.
  21. Bobes T, Rothman B. *Doing couple therapy: Integrating theory with practice*: WW Norton and Company. 2th ed. Santa Barbara. 2002.
  22. Linhof AY, Allan R. A narrative expansion of emotionally focused therapy with intercultural couples. *The Family Journal*. 2019; 27(1): 44-49.
  23. Beasley CC, Ager R. Emotionally focused couples therapy: a systematic review of its effectiveness over the past 19 years. *Journal of Evidence-Based Social Work*. 2019; 16(2): 144-159.
  24. Kelly S, Bhagwat R, Maynigo P, Moses E. *Couple and marital therapy: The complement and expansion provided by multicultural approaches*. 2th ed. American Psychological Association; Guilford Press. 2014.
  25. Wiebe SA, Johnson SM. A review of the research in emotionally focused therapy for couples. *Family Process*. 2016; 55(3): 390-407.
  26. Mckinan J. Revealing vulnerable emotion in couple therapy: Impact on session outcome. *Journal of Family Therapy*. 2013; 35: 303-319.
  27. Tracy K, Syiem K, Raddy J. The multifaceted aspects of infertility. *International Journal of Sciences and Research*. 2013; 2(11): 168-170.
  28. Alavi SZ, Amanuelahi A, Attari Y, Koraei A. The effectiveness of emotionally focused couple therapy on emotional and sexual intimacy of incompatible couples. *Family Counseling and Psychotherapy*. 2019; 8(2): 25-46.
  29. Hassani F. Psychology of infertility and the comparison between two couple therapies, in infertile pairs. *International Journal of Innovation, Management and Technology*. 2010; 1(1): 25.
  30. Najafi M, Soleimani AA, Ahmadi K, Javidi N, Kamkar EH. The effectiveness of emotionally focused therapy on enhancing marital adjustment and quality of life among infertile couples with marital conflicts. *International Journal of Fertility and Sterility*. 2015; 9(2): 238.
  31. Soleimani AA, Najafi M, Ahmadi K, Javidi N, Kamkar EH, Mahboubi M. The effectiveness of emotionally focused couples therapy on sexual satisfaction and marital adjustment of infertile couples with marital conflicts. *International Journal of Fertility and Sterility*. 2015; 9(3): 393.
  32. Soltani M, Mohammad, Shaeiri R, Roshan R. The effects of emotional focused therapy on increasing the marriage suitability of barren couples. *International Journal of Behavioral Sciences*. 2013; 6(4): 383-389.
  33. Sadri Damirchi E, Sheikholeslami A, Tarvirdizadeh H. The effect of emotional-focused couple therapy on the infertile couples' quality of relationship, marital conflict, and intimacy. *Journal of Family Counseling and Psychotherapy*. 2017; 7(1): 125-145.
  34. Sayadi M, Shahhosseini tazik S, Madani Y, Gholamali lavasani M. Effectiveness of Emotionally Focused Couple Therapy on Marital Commitment and Couple Burnout in Infertile Couples. *Journal of Education and Community Health*. 2017; 4(3): 26-37.
  35. Higgins JP, Altman DG, Gøtzsche PC, Jüni P, Moher D, Oxman AD, et al. The Cochrane Collaboration's tool for assessing risk of bias in randomised trials. *British Medical Journal*. 2011; 10(1136): 343.

36. Girard A, Woolley SR. Using emotionally focused therapy to treat sexual desire discrepancy in couples. *Journal of Sex and Marital Therapy*. 2017; 43(8): 720-735.
37. Rathgeber M, Bürkner PC, Schiller EM, Holling H. The efficacy of emotionally focused couples therapy and behavioral couples therapy: A meta-analysis. *Journal of Marital and Family Therapy*. 2019; 45(3): 447-463.
38. Wiebe SA, Elliott C, Johnson SM, Burgess Moser M, Dagleish TL, Lafontaine M-F, et al. Attachment change in emotionally focused couple therapy and sexual satisfaction outcomes in a two-year follow-up study. *Journal of Couple & Relationship Therapy*. 2019; 18(1): 1-21.
39. Ramazanzadeh F, Noorbala A, Abedinia N. Emotional adjustment in infertile people. *Iranian Journal of Reproductive Medicine*. 2009; 7(3): 97-103.
40. Hossein-Abadi H, Mojarad S, Soltanifar A. study effectiveness of coping and positive emotions Brsazgary married couples have relationships outside marriage. *Research in Clinical Psychology and Counseling*. 2011; 1(2): 1-7.
41. Johnson SM, Whiffen VE. Made to measure: Adapting emotionally focused couple therapy to partners' attachment styles. *Clinical Psychology: Science and Practice*. 1999; 6(4): 366.
42. Ghazanfari B, Keshavarzi Arshadi F, Hassani F, Emamipour S. Comparing the Effects of Emotion-Focused Couple Therapy and Choice Theory-Based Couple Therapy on Relationship Quality in Couples With Marital Conflicts. *Middle Eastern Journal Of Disability Studies*. 2021; 11(19): 1-8.
43. Forouzanfar A, Sayadi M. Meta-analysis of the effectiveness of emotionally focused therapy on reducing marital problems. *Armaghane Danesh*. 2019; 24(1): 97-109.
44. Torkan A, Farhadi H, Golparvar M. Comparative study of the effectiveness of emotional-focused couple therapy and narrative couple therapy on marital conflicts. *Journal of Research in Behavioural Sciences*. 2019; 17(1): 159-170.
45. Naghinasab Ardehaee F, Jajarmi M, Mohammadipour M. Effectiveness of emotion focused couple therapy on marriage function and psychological well-being of women with marital conflicts. *Journal of Gorgan University of Medical Sciences*. 2018; 20(3): 1-10.
46. Cohn B. An integrative approach to couple therapy: Altering the treatment Study of Emotionally Focused Couples Therapy. *Journal of Marital and Family Therapy*. 2014; 12(1): 35-41.
47. Onat G, Beji NK. Marital relationship and quality of life among couples with infertility. *Sexuality and Disability*. 2012; 30(1): 39-52.
48. Johnson SM. The practice of emotionally focused couple therapy: Creating connection. 3th ed. Routledge; 2019.
49. Allan R. The use of emotionally focused therapy with separated or divorced couples. *Canadian Journal of Counselling and Psychotherapy*. 2016; 50(3s): 1-7.
50. Denton WH, Wittenborn AK, Golden RN. Augmenting antidepressant medication treatment of depressed women with emotionally focused therapy for couples: A randomized pilot study. *Journal of Marital and Family Therapy*. 2012; 38: 23-38.
51. Jacobson NS, Addis ME. Research on couples and couple therapy: What do we know? Where are we going. *Journal of Consulting and Clinical Psychology*. 1993; 61(1): 85.
52. Barrett LF, Gross J, Christensen TC, Benvenuto M. Knowing what you're feeling and knowing what to do about it: Mapping the relation between emotion differentiation and emotion regulation. *Cognition & Emotion*. 2001; 15(6): 713-724.
53. Merzadeh Z, Behboudi M. The Effectiveness of Circuit Emotion Therapy Couples on Attachment Styles and Marital Satisfaction. *Psychometry*. 2017; 6(21): 29-40.
54. Dagleish TL, Johnson SM, Burgess Moser M, Lafontaine MF, Wiebe SA, Tasca GA. Predicting change in marital satisfaction throughout emotionally focused couple therapy. *Journal of Marital and Family Therapy*. 2015; 41(3): 276-291.
55. Rostami M, Taheri A, Abdi M, Kermani N. The effectiveness of instructing emotion-focused approach in improving the marital satisfaction in couples. *Procedia-Social and Behavioral Sciences*. 2014; 114: 693-698.
56. Shojaeian Z, Sadeghi R, Latifnejad Roudsari R. Calcium and vitamin D supplementation effects on metabolic factors, menstrual cycles and follicular responses in women with polycystic ovary syndrome: A systematic review and meta-analysis. *Caspian Journal of Internal Medicine* 2019; 10(4): 359-369.
57. Maleki-Saghooni N, Amirian M, Sadeghi R, Latifnejad Roudsari R. Effectiveness of infertility counseling on pregnancy rate in infertile patients undergoing assisted reproductive technologies: A systematic review and meta-analysis. *International Journal of Reproductive BioMedicine* 2017; 15(7): 391-402.