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The Effectiveness of Eye Movement Desensitization and Reprocessing (EMDR) Therapy on Forgiveness Among Women Affected by Extramarital Relationships

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ABSTRACT

Objective: The increase in extramarital relationships in recent years has become one of the most significant social problems, leading to family breakdown, divorce, and reduced mental health in society. The present study aimed to investigate the effectiveness of Eye Movement Desensitization and Reprocessing (EMDR) therapy on forgiveness among women affected by extramarital relationships.

Methods: This semi-experimental study was conducted using a pre-test–post-test design with a control group and a two-month follow-up stage. The statistical population consisted of women affected by extramarital relationships who had referred to psychology clinics in Tehran. Among them, 30 participants were selected through convenience sampling and based on their willingness to participate in the study. Data were collected using the Forgiveness Questionnaire by Thompson et al. (2005). The experimental group underwent six weekly 90-minute EMDR intervention sessions, while the control group did not receive any intervention. Data were analyzed using SPSS version 26 and repeated-measures analysis of variance. The significance level was set at 0.05.

Results: The results indicated that EMDR therapy had a significant effect on increasing forgiveness among women affected by extramarital relationships ($p < 0.05$).

Conclusions: Based on the findings, EMDR can be used as an effective approach in treating psychological harm caused by extramarital relationships.

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Introduction

The primary function of the family is to provide psychological security and emotional well-being for its members (Aman et al., 2021). However, like other social institutions, the family is not immune to various threats and may encounter difficulties and challenges throughout its life course (Weiser et al., 2023). Marriage, as one of the most common human bonds, is sometimes confronted with the issue of extramarital relationships. Such relationships represent one of the major threats to family health and are regarded as the most significant factor undermining the stability and continuity of marital life (Moradi et al., 2020). Extramarital involvement is defined as a violation of emotional and/or sexual commitment without the partner's consent, leading to detachment from the core marital relationship and often resulting in profound emotional consequences for the spouses (Selterman et al., 2019). Occurring outside the marital framework, it constitutes a breach of trust and violation of marital norms (Munsch, 2018), signaling a crossing of marital boundaries through emotional or physical intimacy with someone other than the spouse (Apostolou, 2019). Studies have shown that reactions to spousal infidelity may resemble symptoms of post-traumatic stress, including shock, confusion, anger, and depression (Mohammadipour et al., 2023; Wróblewska-Skrzek, 2021).

Achieving a satisfying marital relationship requires qualities such as trust and cooperation. In this regard, Gordon (2020) emphasized that forgiveness becomes critical when marital commitments or relational standards are violated, allowing the relationship to continue despite mistakes, betrayals, or failures. From a therapeutic perspective, forgiveness occurs when the wronged individual voluntarily relinquishes negative thoughts, emotions, and behaviors toward the offender and replaces them with more positive attitudes and behaviors (Asgari et al., 2023). Forgiveness thus enables the continuation of the relationship, transforms threats into intimacy, and serves as an essential mechanism in maintaining long-term relational stability (Rathgeber et al., 2019). Indeed, acts of forgiveness can positively alter marital dynamics, facilitate both personal and interpersonal growth, and strengthen marital commitment and satisfaction (Fahd & Hanif, 2019).

Given the destructive consequences of extramarital relationships, the development of effective interventions to support couples dealing with this issue is imperative. Among the psychological treatments available, Eye Movement Desensitization and Reprocessing (EMDR) has recently been employed (Rousseau et al., 2019). EMDR is an exposure-based intervention in which the patient

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focuses on traumatic memories while simultaneously attending to external stimuli, typically guided eye movements. This dual attention process helps individuals recall distressing events without overwhelming negative emotions (Ahmadizadeh et al., 2022; Auren et al., 2022). The eye movement component interferes with working memory, thereby reducing the vividness and emotional intensity of the traumatic memory (Thoresen et al., 2022). The therapeutic process involves modifying negative cognitions, inducing positive reappraisals, and regulating physiological responses through techniques such as imaginal exposure, cognitive restructuring, bilateral brain stimulation, and rhythmic eye movements (Fox, 2020; Rezaei & Ahmadizadeh, 2021). EMDR has proven effective for individuals suffering from trauma-related experiences, anxiety, phobias, distressing memories, post-traumatic stress disorder (PTSD), grief, and emotional difficulties in general (Beiranvand et al., 2023). Research has also supported its effectiveness in enhancing parents' quality of life (Rezayi & Khanjani, 2018), improving life satisfaction among surgical patients (Abdoli Bidhendi, 2022), and fostering marital forgiveness through acceptance- and emotion-focused couple therapies (Asgari et al., 2022). Furthermore, studies have demonstrated the efficacy of mindfulness-based interventions (Aghili & Valizadeh, 2022), as well as reality therapy and meaning-centered therapy in promoting forgiveness among women affected by marital infidelity and divorce (Gholipour Firozjaei et al., 2023).

With rising rates of infidelity and extramarital involvement, the persistence of this trend poses risks to the integrity of families and the moral fabric of society (Akesteh & Aganj, 2021). Despite its growing prevalence, little systematic effort has been made by relevant institutions to address the issue. Thus, conducting empirical studies in this field is crucial, both for identifying contributing factors and for developing appropriate psychological interventions to assist affected individuals and families in rebuilding their lives. Such research can also inform marital education, guide premarital counseling, and help prevent extramarital tendencies. Left unaddressed, the hostile emotions and consequences of revealed infidelity can fuel further social problems such as addiction, divorce, and economic burdens on healthcare and judicial systems. Accordingly, preventive and therapeutic strategies are urgently needed. Given the research gap concerning the use of EMDR for women affected by extramarital relationships in the national context, the present study aims to examine the effectiveness of EMDR on marital forgiveness among women who have experienced spousal infidelity. Specifically, it seeks to answer the question: Is Eye Movement

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Desensitization and Reprocessing effective in enhancing forgiveness among women affected by extramarital relationships?

Material and Methods

The present study employed a quasi-experimental design with a pretest–posttest control group and a two-month follow-up phase. The study population consisted of women affected by extramarital relationships who sought psychological services at several counseling and psychology clinics in Tehran. The sample included 30 women meeting the inclusion criteria, selected through convenience sampling. The sample size was determined using G*Power software with an effect size of 0.25, $\alpha = 0.05$, and power = 0.80, yielding 15 participants per group. Participants were then randomly assigned to either the experimental group (n = 15) or the control group (n = 15).

Inclusion criteria were: (a) women affected by extramarital relationships, (b) minimum educational level of high school diploma, (c) age between 18 and 55 years, (d) absence of other psychiatric or personality disorders confirmed by clinic psychiatrists, (e) not participating in concurrent therapeutic programs, (f) not receiving individual counseling or psychopharmacological treatment, and (g) willingness and availability to attend treatment sessions. Exclusion criteria included: absence from more than two sessions, lack of cooperation during sessions, initiation of psychotropic medication during the study, and incomplete questionnaire data.

Instrument

The study used the Forgiveness Questionnaire, developed by Thompson et al. (2005). This 18-item scale consists of three subscales: self-forgiveness (items 1–6), forgiveness of others (items 7–12), and forgiveness of situations (items 13–18), rated on a 7-point Likert scale (1 = strongly disagree to 7 = strongly agree). Items 2, 4, 6, 7, 9, 11, 13, 15, and 17 are reverse scored. Total scores range from 18 to 126, with higher scores indicating greater forgiveness. Thompson et al. (2005) confirmed construct validity through factor analysis and reported Cronbach's alphas of 0.78, 0.77, and 0.73 for the three subscales. In an Iranian validation study, Dehghan et al. (2014) reported content validity and Cronbach's alpha coefficients ranging from 0.76 to 0.83. In the present study, Cronbach's alpha for the overall scale was 0.83.

Procedure

To ensure ethical considerations, participants were assured of confidentiality, anonymity, and

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voluntary participation. A briefing session was held prior to data collection, during which informed consent forms and demographic questionnaires were distributed. Each participant was assigned a unique code to safeguard privacy.

After random assignment, both groups completed the forgiveness questionnaire at baseline (pretest). The experimental group then received Eye Movement Desensitization and Reprocessing (EMDR) treatment in six weekly sessions, each lasting 90 minutes, based on Shapiro's (2005) EMDR protocol. The control group received no intervention. Following the intervention, both groups again completed the forgiveness questionnaire (posttest). A follow-up assessment was conducted two months later using the same measure.

EMDR Intervention

The intervention followed Shapiro's (2005) standardized EMDR protocol, summarized in Table 1.

Table 1. Summary of EMDR Treatment Sessions

Session	Goal	Content
1	Introduction to EMDR	Personal history taking, treatment planning, assessment of suitability, establishing rapport, overview of EMDR, relaxation training (homework), clarifying expectations and participation, pretest administration
2	Assessment	Identifying target issues; identifying core negative/positive cognitions
3	Desensitization	Focusing on negative beliefs while following therapist's hand movements
4	Cognitive restructuring	Installing and strengthening positive cognitions to replace previously learned negative beliefs
5	Body scan	Monitoring somatic responses and continuing cognitive replacement
6	Reevaluation	Closure, reassessment, additional desensitization if needed, posttest administration

Ethical considerations

All ethical principles, including confidentiality, informed consent, and the right to withdraw, were strictly observed.

Data Analysis

Data were analyzed using SPSS v.26. A repeated measures analysis of variance (ANOVA) was conducted to compare groups across pretest, posttest, and follow-up assessments. Assumptions for the analysis were tested, and a significance level of 0.05 was adopted.

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Results

Descriptive statistics for the forgiveness variable across the three measurement points (pretest, posttest, and follow-up) are presented in Table 2.

Table 2. Means, Standard Errors, and Confidence Intervals for Forgiveness Across Time Points

Variable	Time	Mean	SE	95% CI (Lower)	95% CI (Upper)
Forgiveness	Pretest	74.52	2.179	70.100	78.955
Forgiveness	Posttest	67.25	2.708	61.753	72.760
Forgiveness	Follow-up	59.19	1.560	56.025	62.346

As shown in Table 2, the mean forgiveness score was 74.52 at pretest, which decreased to 67.25 at posttest, and further declined to 59.19 at the two-month follow-up. This pattern suggests a progressive reduction in forgiveness levels over time in the experimental group.

To examine whether these differences were statistically significant, repeated measures analyses were conducted. Pairwise comparisons with Bonferroni adjustments are reported in Table 3.

Table 3. Pairwise Comparisons of Forgiveness Scores Across Time Points

Variable	Time (1)	Time (2)	Mean Difference	SE	p-value	95% CI (Lower)	95% CI (Upper)
Forgiveness	Pretest	Posttest	7.27	2.205	0.007	1.72	12.82
Forgiveness	Pretest	Follow-up	15.34	2.857	0.001	8.15	22.53
Forgiveness	Posttest	Follow-up	8.07	3.302	0.060	-0.24	16.38

The results indicate that forgiveness significantly declined from pretest to posttest (p = .007), and from pretest to follow-up (p = .001). However, the difference between posttest and follow-up was not statistically significant (p = .060), although the trend suggested a continued decline. Overall, these findings demonstrate that EMDR treatment had a significant impact on forgiveness in women affected by extramarital relationships, with effects persisting at follow-up. However, the nonsignificant difference between posttest and follow-up suggests that the reduction in forgiveness stabilized after the intervention phase, without further substantial decline during the follow-up period.

Discussion

In recent years, extramarital relationships have been on the rise, representing one of the most serious threats to marital stability, family cohesion, and, ultimately, public health. Given the profound impact of infidelity on marital dissolution and divorce, the present study aimed to

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examine the effectiveness of Eye Movement Desensitization and Reprocessing (EMDR) therapy on forgiveness among women affected by extramarital relationships. The findings revealed that EMDR significantly increased forgiveness in these women, suggesting that this therapeutic approach can be a valuable intervention in mitigating the negative psychological consequences of marital betrayal.

To date, no previous studies have specifically investigated the effect of EMDR on forgiveness in women affected by spousal infidelity. However, the results of the present study align with similar research in related areas. For example, Rezayi and Khanjani (2018) demonstrated that EMDR combined with cognitive restructuring significantly improved quality of life in parents of children with disabilities. Similarly, Abdoli Bidhendi (2022) found that EMDR was effective in enhancing quality of life among patients undergoing coronary artery bypass surgery. Negash et al. (2018) also reported that EMDR functioned as an integrative therapy in alleviating trauma associated with betrayal, supporting its application in relational contexts. Furthermore, Asgari et al. (2022) showed that emotion-focused couple therapy and acceptance and commitment–based couple therapy significantly enhanced marital forgiveness in posttest and follow-up phases, supporting the broader effectiveness of therapeutic interventions aimed at rebuilding relational trust and intimacy.

The effectiveness of EMDR in this study can be explained by its unique therapeutic process. Unlike traditional exposure therapies, EMDR encourages patients to focus on negative cognitions and memories without direct attempts to reinterpret or suppress them. This dynamic and fluid re-experiencing of traumatic events helps reactivate emotional responses associated with distressing cognitions, enabling a Pavlovian extinction of maladaptive behavioral and emotional patterns (Otgaar et al., 2021). By modifying negative cognitions and reducing the intensity of emotional responses, EMDR provides fertile ground for forgiveness to emerge.

Shapiro (2005) emphasized that the effectiveness of EMDR is not limited to its eye movement component—although its neurophysiological underpinnings accelerate the processing of maladaptive information—but also lies in the structured flow of the therapeutic protocol itself. Exposure to highly distressing content in short, repeated bursts may facilitate habituation, thereby accelerating adaptation. This process of emotional information reprocessing, mediated by bilateral stimulation of the limbic system and amygdala, appears to explain the rapid and robust effects of EMDR on distressing marital memories (Mirzaei Feizabadi et al., 2020).

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From a clinical perspective, women experiencing marital betrayal often report intrusive cognitions tied to emotionally charged images such as discovering intimate text messages, witnessing their partner with another individual, or viewing photos symbolizing betrayal. These memories often provoke persistent negative self-beliefs ("If I were more beautiful…," "If I were kinder…," "If I had children…"), fueling anxiety, shame, guilt, anger, and rumination. Such cognitive intrusions create a state of hypervigilance and emotional suppression, lowering distress tolerance and sometimes provoking retaliatory tendencies. EMDR, by directly targeting these distressing images and beliefs, enables clients to reprocess the painful memory and assign new meaning to the event. Through imagery exposure, cognitive restructuring, and bilateral stimulation, EMDR helps transform traumatic experiences into more adaptive interpretations, creating the psychological space necessary for forgiveness.

Despite promising findings, this study is not without limitations. The use of convenience sampling, the relatively small sample size, and the restriction of participants to women in Tehran limit the generalizability of the results. Future research should employ larger, randomly selected samples, include male participants, and explore populations across diverse sociocultural contexts to enhance external validity.

The results highlight important clinical implications. EMDR can be considered a practical and effective therapeutic intervention for psychologists and psychotherapists working with women affected by spousal infidelity. By facilitating emotional reprocessing and enhancing forgiveness, EMDR may contribute to reducing the risk of marital breakdown, mitigating long-term psychological distress, and promoting healthier family and community structures.

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Data availability statement

The original contributions presented in the study are included in the article/supplementary material, further inquiries can be directed to the corresponding author.

Ethics statement

The studies involving human participants were reviewed and approved by ethics committee of Islamic Azad University.

Author contributions

All authors contributed to the study conception and design, material preparation, data collection and analysis. All authors contributed to the article and approved the submitted version.

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Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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