Original Article

Comparing the effectiveness of imago therapy and object relations therapy on self-differentiation and self-regulation in women with multiple divorces

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Abstract

Introduction: Regarding the importance of emotional well-being in marriage sustainability, the present study was carried out to compare the effectiveness of imago therapy and object relations therapy on self-differentiation and self-regulation in women with multiple divorces.

Materials and Methods: The statistical population of this clinical trial included women who had multiple divorces and were referred to counseling centers in Tehran, Iran, in 2021. Thirty-six women were selected through the convenient sampling method, and they were assigned through a simple random method in the groups of imago therapy (12 participants), object relations therapy (12 participants), and control (12 participants). The experimental groups participated in therapy sessions, and during this period, the control group did not receive any intervention. The participants fulfilled the Differentiation of Self Inventory and Self-Regulation Questionnaire. Data were analyzed using descriptive statistics and analysis of variance with repeated measures.

Results: The findings revealed significant effects of object relations therapy and imago therapy on self-regulation and self-differentiation ($P< 0.05$). Also, regarding the effect sizes, it seems that object relations therapy had greater effects than imago therapy on self-differentiation (0.24 vs. 0.23) and self-regulation (0.82 vs. 0.72) in women with multiple divorces.

Conclusion: Based on the results, object relations therapy and imago therapy are effective in increasing self-differentiation and self-regulation in women with multiple divorces. However, it seems that object relations therapy is more effective.

Keywords: Couples, Differentiation, Imago therapy, Object-relations, Self-regulation

Introduction

The institution of family has traditionally provided individuals with a sense of security and stability, facilitating the transmission of cultural values across generations (1). However, in contemporary society, the dynamics of relationships and the stability of families have been significantly challenged, posing a threat to societal well-being (2). Divorce, particularly experienced multiple times, brings about profound consequences and psychological effects (3,4). Individuals who

have gone through multiple divorces often have complex backgrounds, including co-parenting responsibilities (5,6), ongoing interactions with ex-spouses (7), and personal characteristics that can negatively impact the stability and success of their current marriages (8). To address the mental health challenges and reduce psychological distress among this population, two important variables come into play: self-differentiation (9) and self-regulation (10).

Self-differentiation, rooted in psychological independence and emotional maturity, is pivotal in enhancing mental well-being. It represents a dynamic and enduring characteristic wherein individuals strive to maintain their psychological integrity. Cultivating self-differentiation can reduce social anxiety and improve overall social functioning (11).

Self-regulation refers to the psychological processes and efforts to control one's internal states and functions to achieve higher goals. Individuals with low self-regulation often experience low self-esteem, fear of failure, and a lack of control. On the other hand, individuals with effective self-regulation possess confidence in their abilities and believe they can utilize metacognitive skills to manage resources effectively and achieve desired outcomes (12).

One therapeutic approach that holds promise for promoting self-differentiation and emotional self-regulation in divorced women is imago relationship therapy. Imago relationship therapy is a couple-communication model that employs emotional and cognitive-behavioral interventions to facilitate understanding and inner change. It focuses on improving communication, addressing developmental issues, healing childhood wounds, and increasing differentiation within the couple (13-15).

Another theoretical framework utilized in this research is object relations theory. According to this theory, personality development is shaped by early childhood experiences and individuals' internal representations of themselves and others. These representations serve as templates for future relationships and become more complex, differentiated, and flexible with natural development. Psychological trauma can disrupt or impede the healthy progression of these growth patterns (16).

Conducted studies have yielded significant insights into the relationship between self-differentiation, primary thematic relationships, and overall happiness within couples (13,17). Research findings have consistently shown that higher levels of self-differentiation are associated with greater relationship satisfaction and emotional well-being (18,19). Individuals with higher self-differentiation can better maintain their sense of self while engaging in close relationships and more authentic and fulfilling connections with their partners (20).

Moreover, studies exploring the effectiveness of imago therapy have revealed its positive impact on various aspects of family and marital dynamics. For instance, research has shown that imago therapy interventions can effectively reduce conflict and improve communication patterns between couples (21). By addressing emotional wounds and childhood traumas within the therapeutic context, imago therapy promotes healing and facilitates emotional growth, increasing relationship satisfaction and stability (22).

In addition to imago therapy, object relations therapy has also been extensively studied in the context of improving self-differentiation and relationship outcomes. Research has highlighted the role of early childhood experiences in shaping individuals' object relations and subsequent relationship patterns (23). By addressing and resolving unresolved issues stemming from childhood, object relations therapy aims to enhance self-awareness, promote healthy attachment styles, and facilitate more satisfying relationships (24).

Notably, a study by Honarparvaran compared the effectiveness of imago therapy and object relations therapy in couples experiencing distress. The findings indicated that both therapeutic modalities significantly improved self-differentiation and relationship quality. However, the study also highlighted some differences in the mechanisms of change between the two approaches, suggesting that each therapy may offer unique benefits depending on the specific needs and characteristics of the individuals involved (25).

Furthermore, a meta-analysis conducted by Zamani and Isanejhad synthesized the results of multiple studies investigating the efficacy of imago therapy and object relations therapy. The analysis revealed that both interventions were associated with significant improvements in self-differentiation, self-regulation, and overall relationship functioning. However, the meta-analysis also indicated that object relations

therapy showed particular promise in addressing deep-seated psychological issues and facilitating long-term personal growth (26).

In summary, previous research has consistently demonstrated the importance of self-differentiation and its association with relationship satisfaction and emotional well-being. Both imago therapy and object relations therapy have shown effectiveness in improving family and marital factors, with some differences in their approaches and mechanisms of change. The body of literature suggests that these therapeutic interventions hold promise for enhancing self-differentiation, self-regulation, and overall relationship outcomes in individuals, particularly women, with multiple divorces. This research aims to highlight the effectiveness of imago therapy and object relations therapy as potential interventions to promote mental well-being and resilience in women with multiple divorces. Ultimately, this study seeks to contribute to developing more targeted and effective therapeutic approaches for this specific population.

Materials and Methods

The statistical population of this clinical trial included women who had multiple divorces and were referred to counseling centers in Tehran, Iran, in 2021. Thirty-six women were selected through the convenient sampling method, and they were assigned through a simple random method in the groups of imago therapy (12 participants), object relations therapy (12 participants), and control (12 participants). The experimental groups participated in therapy sessions, and during this period, the control group did not receive any intervention. Thirty days after the intervention, all participants completed the questionnaires as the follow-up stage. The inclusion criteria included not having a chronic psychological or physical illness, having experienced divorce two or more times, having at least a middle school education, lack of using psychoactive substances or alcohol, willingness to cooperate, and being available for six months. The exclusion criteria included absence from counseling sessions for more than one session and providing incomplete or invalid questionnaires.

The principles of ethical considerations were observed in this research. The researchers explained the process to the participants, who signed written consent forms. The individuals participated voluntarily, and the questionnaires were anonymous.

Research instruments

A) The Differentiation of Self Inventory: This test was prepared by Skowron and Friedlander. This inventory has 43 questions and four subscales: Emotional Reactivity (ER), Emotional Cutoff (EC), Fusion with Others (FO), and I-Position (IP). The questions are answered on a six-point Likert-type scale, ranging from one (not at all true for me) to six (very true for me); a high score in the total score and the subscale of IP means a high level of differentiation and IP, a low score means the lack of differentiation and IP. Also, in the subscales of ER, EC, and FO, a high score means the absence of these characteristics and is in the direction of increasing differentiation. Skowron and Friedlander calculated the internal correlation of the questions of this questionnaire with Cronbach's alpha method, the results of which are as follows: the internal consistency was 0.88, and for each of the subscales, respectively, it consists of ER 0.83, EC 0.88, FO 0.82 and IP 0.82. In Skowron's research, Cronbach's alpha coefficient was 0.81, which shows the acceptable reliability of this questionnaire. In the research of Jahanbakhshi and Kalantarkousheh, the reliability of the whole test was 0.69 with Cronbach's alpha method. For the subscales of ER, IP, EC, and FO, respectively, 0.73, 0.64, 0.61, and 0.75 were calculated (29). In another study, its Cronbach's alpha was equal to 0.66 (30).

B) Self-Regulation Questionnaire (SRQ): This questionnaire was developed by Brown, Miller, and Lawendowski to measure the components of self-regulation of adolescents and above; it consists of 63 items and has seven subscales of acceptance, assessment, search for alternatives (setting up), planning for change and carrying out the process of change (check and planning), change (performance), and evaluation. The scoring of this questionnaire is on a Likert scale from 1 to 5. The maximum time to complete the questionnaire is about 15 to 20 minutes. Calculate the total score of each question together to get the overall score of the questionnaire. To get the points related to each dimension, calculate the total points related to the questions of that dimension together. In this questionnaire, a score higher than 239 indicates high self-regulation, between 239 and 214

indicates moderate self-regulation and less than 213 indicates low self-regulation (31). Ahanchiyan et al. have been validated this questionnaire in Iran. They reported its reliability for total scale as 0.94, and its internal consistency as 0.91 (32). The experimental groups received therapy sessions of imago therapy or object relationship therapy in 10 90-minute sessions virtually through the

WhatsApp social network. The object relations treatment package based on the transference-oriented psychotherapy book (33) (Table 1) and the imago therapy package using Hendrix's theory (34) (Table 2) were carried out by the researcher under the supervision of the supervisor and doctoral dissertation advisor. The summary of treatment sessions is given in the table below.

Table 1. Content of imago therapy approach sessions

Session	Summary of the session
First	Getting to know each other and the general rules of treatment. Establishing a therapeutic relationship. Examining the motivation to participate. Defining of imago therapy. Evaluating the nature of the problem in the relationship. Evaluating the goals and expectations of members from the treatment.
Second	Getting to know the structure of the brain and defensive functions, conscious dialogue, imagistic dialogue, and mirroring.
Third	Conscious dialogue, imagistic dialogue, mirroring and validation
Fourth	Conscious dialogue, imagistic dialogue, mirroring, validation, empathy
Fifth	Learning about childhood development and experiences, guided mental imagery, helping participants understand how their childhood experiences have influenced their spouse selection process, helping them to remember their childhood memories and use those memories to consciously understand the purpose of the relationship.
Sixth	Expanding empathy and re-imagining, parent-child dialogue, cuddling practice, and the awareness of the people in the meeting that they can see that their choice of spouse was made unconsciously and based on the positive and negative characteristics of their caregivers in childhood.
Seventh	Attentive behaviors, and awareness of small surprises.
Eighth	Articulating Growth Maps: Explaining the importance of creating safety for rebuilding failures, pointing out the importance of failures as negative unexpressed desires, people understanding that their failures, together, go directly back to missing parts of themselves that now have the opportunity to rebuild.
Ninth	Sometimes a section about emotion regulation, the process of emotion regulation, carefully checking behavior change requests, emphasizing that changing all requested behaviors is a long-term process and requires practice, teaching emotional expression.
Tenth	Discussing the positive and negative points of view about the treatment sessions and their content, evaluating the changes and conducting the post-test.

Table 2. Content of object relations approach sessions

Session	Summary of the session
First	Getting to know each other and establishing a therapeutic relationship, getting familiar with the general rules of treatment
Second	Knowing the stages of growth and the rate of stopping of each member in its growth stage
Third	Getting to know the participant's childhood perceptions and distortions of the concept of intimacy and love
Fourth	Recognizing and retrieving internalized impressions and initial impressions of each member of the group about the concept of intimacy
Fifth	Recognizing self and other's desires in the relationship
Sixth	The degree of access to core emotions and the distinction between perceived and internalized emotions
Seventh	Raising awareness of one's values and the values of others
Eighth	Achieving non-selfish common goals (differentiation and sense of individual and couple cohesion)
Ninth	Assessment, intervention, and psychoanalysis
Tenth	Summary of meetings and final evaluation

We applied descriptive statistics, including mean, standard deviation, and frequency percentages. Also, we used Chi-Square tests to assess the relationship between qualitative variables. Meanwhile, the effects of the interventions were analyzed using independent t-tests and repeated measures of ANOVA. The data analysis and presentation of results were performed using SPSS 20th edition software.

Results

Table 3 presents the demographic variables of participants. Table 3 compares demographic variables and therapy approaches in imago therapy, an object relations therapy group, and a control group. The mean age of participants in all three groups is similar, ranging from 36 to 39 years. The duration of divorce and the number of divorces is consistent across the groups, with a mean duration of 3 years and 2-3 divorces per participant. The mean number of children is 1 for all groups. Differences are observed in the educational background, with the control group having a slightly higher proportion of participants with high school education compared to the therapy groups, with a higher proportion of participants with academic education. The descriptive statistics for self-regulation and its components (Table 4), as well as for self-differentiation and its components (Table 5), were presented by pre-test, post-test, and follow-up for the control and experimental groups.

Table 4 presents data on various scales measured in three groups: imago therapy, object relations therapy group, and a control group. The variables included acceptance, assessment, setting up, check, planning, performance, evaluation, and emotional self-regulation. The scores vary across the scales and time points, indicating potential differences in the effectiveness of therapy approaches in the measured domains.

Table 5 presents data on various scales measured in three groups: imago therapy, object relations therapy group, and a control group. The scales include emotional reaction, I-position, emotional cutoff, fusion with others, and differentiation. The table provides mean scores and standard deviations for pre-test, post-test, and follow-up assessments. The scores vary across the scales and time points, suggesting potential differences in emotional reactions, self-perception, emotional boundaries, interpersonal connections, and individual differentiation among the therapy and control groups. The results of the analysis of variance on the mean differentiation scores for the object relations therapy, imago therapy, and control groups are represented in the table below.

According to the results of Table 6, the significance of the stage effect indicates that there was a significant difference between the mean of the pre-test, post-test, and follow-up total scores of differentiation in the two experimental groups of object relations therapy and imago therapy training and the evidence ($P < 0.01$).

Regarding Table 7, the significance of the stage effect indicated a significant difference between the mean pre-test, post-test, and follow-up total self-regulation score in the two experimental groups of object relations therapy and imago therapy training and control ($P < 0.01$).

The results of Table 8 indicated a significant difference between the two groups. The effect size of imago therapy on self-differentiation in women with multiple divorces was 0.23, while this effect size was 0.24 in the object relations therapy. Also, the effect size of imago therapy on self-regulation in women with multiple divorces was 0.72, while this effect size was 0.82 in object relations therapy. So, it seems that object relations therapy had greater effects on self-differentiation and self-regulation in women with multiple divorces.

Table 3. Demographic characteristics of the participants

Demographic variables	Imago therapy group	Object relations therapy group	Control group
Mean of age (Year)	39	36	37
Age range	20-47	20-41	20-43
Mean duration of divorce (Year)	3	3	3
Duration of divorce range (Year)	1-5	1-3	1-4
Number of divorces (Range)	2-3	2-3	2-3
Mean number of children	1	1	1
Education- high school	2	2	1
Education- academic	10	10	11

Table 4. The mean, standard deviation, and normality of self-regulation score and components in imago therapy, object relations therapy, and control groups in the pre-test, post-test, and follow-up stages

Variable	Stage	Imago therapy		Object relations therapy		Control	
		Mean	Standard deviation	Mean	Standard deviation	Mean	Standard deviation
Acceptance	Pre-test	22.67	5.31	23.75	2.63	28.92	14.63
	Post-test	27.33	2.53	30.08	2.97	24.75	2.56
	Follow-up	28.33	2.27	29.58	3.32	25.83	2.04
Assessment	Pre-test	24.50	3.09	24.92	3.42	22.25	3.08
	Post-test	29.75	1.42	29.75	2.90	25.08	3.94
	Follow-up	29.58	2.64	26.92	2.02	24.92	3.32
Setting up	Pre-test	25.50	3.18	24.25	3.25	22.83	2.37
	Post-test	27.42	2.47	29.58	3.58	24.75	3.60
	Follow-up	28.17	2.82	28.08	2.81	24.92	2.91
Check	Pre-test	21.75	3.25	23.08	2.87	22.50	3.12
	Post-test	28.33	3.11	29.08	2.47	23.33	3.92
	Follow-up	26.08	2.39	26.75	2.70	26.50	3.53
Planning	Pre-test	24.17	4.49	22.50	2.88	22.83	3.56
	Post-test	27.75	2.67	30.67	3.85	23.42	2.71
	Follow-up	27.08	1.44	28.75	2.42	25.67	2.35
Performance	Pre-test	24.67	2.31	24.75	2.70	23.25	4.05
	Post-test	31.17	2.82	31.25	3.57	25.08	3.32
	Follow-up	29.83	3.27	29.08	3.29	26.58	3.96
Evaluation	Pre-test	25.08	3.58	25.25	3.05	24.00	2.26
	Post-test	27.83	2.72	29.92	3.53	23.92	3.34
	Follow-up	28.08	3.63	29.67	3.20	24.42	4.08
Emotional Self-regulation	Pre-test	168.33	12.49	168.50	9.19	166.58	15.55
	Post-test	199.58	7.37	210.33	9.96	171.92	5.42
	Follow-up	197.42	3.53	200.92	7.76	178.83	6.31

Table 5. The mean, standard deviation, and normality of the scores of self-differentiation and its components in imago therapy and object relations therapy groups in three stages

Scale	Stage	Imago therapy		Object relations therapy group		Control	
		Mean	Standard deviation	Mean	Standard deviation	Mean	Standard deviation
Emotional reaction	Pre-test	18.58	3.48	22.17	3.90	25.17	3.81
	Post-test	27.92	4.60	27.42	4.81	23.08	5.00
	Follow-up	24.00	4.77	24.92	6.05	19.33	3.55
I-position	Pre-test	45.33	5.79	48.00	8.47	47.58	7.73
	Post-test	55.42	7.56	56.33	6.39	48.17	10.54
	Follow-up	50.17	7.04	49.17	6.01	44.83	7.93
Emotional cutoff	Pre-test	25.50	3.97	22.42	4.42	22.50	5.14
	Post-test	26.42	5.04	27.00	4.61	23.17	7.41
	Follow-up	24.33	5.48	25.17	4.88	23.75	5.97
Fusion with others	Pre-test	36.83	5.89	33.58	6.13	34.42	6.01
	Post-test	39.58	4.85	37.83	7.43	32.08	5.40
	Follow-up	33.33	7.11	36.75	6.38	33.08	4.80
Differentiation	Pre-test	126.25	11.47	126.17	11.60	129.67	16.11
	Post-test	149.33	14.15	148.58	11.52	126.50	17.74
	Follow-up	137.33	23.85	138.42	16.24	121.00	13.97

Table 6. The results of the variance analysis with repeated measurements related to self-differentiation

Variable	Sum squares	Freedom degree	Mean square	F	P	Effect size	Test power
Level	3696.89	2	1848.44	9.63	0.00	0.23	0.98
Level*group	2987.11	4	746.78	3.89	0.01	0.19	0.88
Group	3432.16	2	1716.08	4.90	0.014	0.23	0.77
Error	11548.08	33	349.94				

Table 7. The results of the variance analysis with repeated measurements related to self-regulation

Variable	Sum squares	Freedom degree	Mean square	F	P	Effect size	Test power
Level	15480.02	2	7740.01	84.87	0.00	0.72	1
Level*group	4291.93	4	1072.98	11.76	0.00	0.42	1
Group	8543.57	2	4271.79	55.65	0.00	0.77	1
Error	2533.194	33	76.763				

Table 8. The results of the analysis of variance with repeated measurements in the follow-up scores of self-differentiation and self-regulation between object relations therapy group and imago therapy group

Group	Variable	Source	Sum of squares	Degree of freedom	Mean of squares	F	P	Effect Size
Imago therapy	Self-differentiation	Group	2556.12	1	2556.12	6.65	0.02	0.23
		Error	8452.19	22	384.19	-	-	-
	Self-regulation	Group	4608.00	1	4608. 00	57.59	0.00	0.72
		Error	1760.44	22	80.02	-	-	-
Object relations therapy	Self-differentiation	Group	2592	1	2592	7.10	0.01	0.24
		Error	8035.11	22	365.23	-	-	-
	Self-regulation	Group	7791.68	1	7791.68	99.37	0.00	0.82
		Error	1724.97	22	78.41			

Discussion

The results showed that both imago therapy and object-relation therapy were effective in self-regulation and self-differentiation, but it seems that object relations therapy had greater effects on self-differentiation and self-regulation in women with multiple divorces. There has been no research in this field. However, the effectiveness of imago therapy on self-regulation and self-differentiation was reported in the research by Nazarpour et al., Mohannaee et al., Matin et al., and Honarparvaran (15,21,22,25). The effectiveness of object-relation therapy on self-regulation and self-differentiation was concluded in studies conducted by Noori et al., Honarparvaran, and Jafari Soltanabadi et al. (13,25,35). In addition, Cheraey et al. found the effectiveness of imago therapy on the intimacy commitment of conflicting spouses (36), and Nasab et al. found the effectiveness of imago therapy to improve marital disturbance and

quality of life in women affected by marital infidelity (37). Also, Safavi et al. found the effectiveness of object-relations couple therapy on the marital intimacy of divorce applicants (38). All these studies support our findings.

In this line, Honarparvaran assessed the effectiveness of an integrated approach combining imago therapy and object relations in controlling emotions in couples dealing with infidelity. A total of 30 couples seeking counseling for infidelity were selected using targeted sampling and randomly assigned to either the experimental group (15 couples) or the control group (15 couples). The Control Emotions Inventory, measuring anger, depression, positive affect, and anxiety, was used as the assessment instrument. The results of this study indicated that the integrated approach of imago therapy and object relations therapy had a significant impact on controlling emotions, specifically in the areas of anger, depression, and

positive affect. However, it did not show significant effectiveness in reducing anxiety (25).

In addition, Khodadadi Jokar et al. investigated the effect of imago-couple therapy on emotion regulation strategies in couples applying for divorce. The statistical population of their study included all couples referred to one of the counseling centers under contract with the Armed Forces. The sample comprised 45 couples (15 couples in each group). Their results indicated that imago-couple therapy significantly affects increasing emotion regulation strategies among couples applying for divorce (39).

Also, Abbasi et al. examined the relationship between the dimensions related to object relations and marital satisfaction. A sample of 194 married men and women who had been married for at least two years and did not have an acute psychiatric disorder was purposefully selected in Tehran. The results indicated a significant and negative relationship between marital satisfaction and the dimensions of object relations (egocentricity, alienation, insecure attachment, and social inadequacy). Furthermore, the study found that egocentricity, insecure attachment, and social inadequacy were the most significant variables in predicting marital dissatisfaction. Results showed that egocentricity and social inadequacy in men, as well as egocentricity and insecure attachment in women, were predictors of marital dissatisfaction (40).

This result presents the effects of intervention based on imago therapy and object-relation therapy on self-regulation and self-differentiation in women with multiple divorces. These results can be explained through several factors. Firstly, imago therapy focuses on healing past wounds and developing a deeper understanding of oneself and one's partner. It emphasizes creating a safe and empathetic environment for couples to explore their emotions, needs, and vulnerabilities. Through imago therapy, women with multiple divorces can gain insight into their patterns of behavior and relationships, allowing them to develop better self-regulation skills.

Women can enhance self-regulation by understanding their emotional triggers and learning healthier ways to express and manage their emotions (41). Secondly, object-relation therapy examines the internalized representations of past significant relationships and how they influence current relationships (42). For women with multiple divorces, this approach can help them explore any unresolved issues or conflicts stemming from previous relationships, including attachment issues and difficulties with differentiation.

By addressing these underlying relational dynamics, object-relation therapy supports women in developing healthier ways of relating and establishing a stronger sense of self-differentiation. This, in turn, enables them to regulate their emotions more effectively within their current relationships.

The present study had several limitations. Firstly, the study sample was limited to a specific demographic group from a psychological center in Tehran city, which may restrict the generalizability of the findings to a broader population. Secondly, the study did not assess other potential moderating factors that could influence the results, such as individual differences or contextual variables.

Lastly, the effectiveness of the interventions was evaluated solely based on self-report measures, which may introduce biases or limitations in accurately assessing the outcomes. Further research could include a more diverse sample, explore moderating factors, utilize a mixed methods approach, conduct long-term follow-up assessments, and compare the effectiveness of imago therapy and object relations therapy with other approaches to enhance our understanding of their effectiveness in supporting women with multiple divorces.

Conclusion

According to the findings, object relations therapy and imago therapy significantly increased self-differentiation and self-regulation, but it seems that object relations therapy had greater effects on self-differentiation and self-regulation in women with multiple divorces.

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