INTRODUCTION

Stabilization and continuation of a marriage need the development of the couple’s appropriate attitudes toward each other. As the Psychologist, Abraham Maslow put it, if couples accept each other, are faithful and committed to each other, and their relationship is based on love and amity, they understand each other well even in old age when they lose the beauty and vitality of young age. This mutual understanding rises from a mental and emotional understanding between wives and husbands that has been established by contribution of both parties since the beginning of the marriage and the result is a desirable marital life that the couple experience now.

Intimacy between spouses is the first step toward establishing a favorable marriage because intimacy is a fundamental need beyond other human needs. It is not only a desire or a wish but a real need with routes in the need for attachment. Intimacy is a mutual self-revealing need as two individuals continuously discover and re-discover each other. This is an infinite process because one’s personality has endless layers. Talking, having mutual experiences, and spending life together uncover the layers and reveal different new aspects of one’s personality. In fact, intimacy is a continuously renewed discovery. As people’s preferences change, their hopes and dreams change as well, so that, they spend the days and weeks in a way they like. Intimacy takes time.1

Amato PR2 believes that what affects the improvement of marital interaction quality is the intimacy between spouses. Intimacy is known as an

ABSTRACT

Objective: To determine the effect of training solution-focused couples therapy on dimensions of marital intimacy in Isfahan, Iran.

Methodology: This experimental study was conducted on a control and a case group using a pretest and a post-test. The case group and the control group both consisted of seven couples who were selected through convenience random sampling. The measurement instruments included a 32-item questionnaire with 8 dimensions on marital intimacy and a 44-item questionnaire with three dimensions on marital commitment. The data were analyzed using ANCOVA (analysis of covariance) method. In this respect, the pretest and the post-test were conducted on both the case and the control groups; however, the independent variable (the solution-focused therapy) was only performed on the case group.

Results: The results showed that training the solution-focused couples therapy affected the emotional intimacy, intellectual intimacy, physical intimacy, psychological intimacy, relationship intimacy, and sexual intimacy.

Conclusion: It is concluded that solution-focused therapy which leads to a positive attitude toward life can be applied for couples who suffer from marital conflicts and cannot achieve intimacy in their marriage.

KEY WORDS: Solution-focused couples therapy, Marital intimacy.


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important process in developing friendly relations. Now, reduced intimacy in marital interactions is the main concern of consulting, family, and marriage specialists. Technological, cultural, economical, social, and also religious changes play a fundamental role in the changes made in the initial function of marriage that includes love, intimacy, and affection between spouses. The role and the effectiveness of intimacy between spouses in improvement of marital interaction and satisfaction have been reported in studies as they considered intimacy as the most fundamental variable in marital stability because they described it as one of the most basic needs of humans.

Given that the first step to improve marital interactions is the early training program and the fact that the effectiveness of teaching problem-solving skills has been proved to improve marital interactions and reduce many marital problems, studies should be conducted in order to determine the effectiveness of the training program in marital intimacy. Marital intimacy is introduced as one of the significant variables affecting the quality of marriage and stabilizing the marriage. In this regard, the present study was conducted to determine the effectiveness of solution-focused couples therapy in intimacy between spouses.

**METHODOLOGY**

This experimental study was conducted on a control and a case group using a pretest and a post-test.

**Study plan:** The pretest and the post-test were performed on the control and the case groups. Both groups completed two questionnaires on marital intimacy. The first measurement was carried out as a pretest before conducting the experiment (solution-focused couples therapy) and the second measurement was carried out as a post-test after the experiment. Using the convenient random sampling method, the researcher selected 14 couples with marital conflicts who had already been admitted to Isfahan’s Welfare Counseling Center and had a file. The samples were selected randomly and divided into two groups, half of them (7 couples) in the case group and the other half (7 couples) in the control group. In this study, the case group was exposed to the independent variable (solution-focused couples therapy) but the control group was not.

**The statistical population:** All the couples who had marital conflicts and less intimacy, in Isfahan, Iran constituted the statistical population of the present study. No accurate statistics have been recorded in this regard.

**The sample size and the sampling method:** The samples included 14 couples with marital conflicts who had already been admitted to Isfahan’s Welfare Counseling Center and had records there. The control and the case group, each, consisted of 7 couples. The samples were selected using convenient sampling method.

**MEASUREMENT INSTRUMENTS**

**Marital intimacy questionnaire:** This questionnaire provided by Florian et al has 32 questions which measure 8 dimensions of the marital intimacy (psychological intimacy, spiritual intimacy, social-recreational intimacy, sexual intimacy, emotional intimacy, intellectual intimacy, physical intimacy, relational intimacy). Reliability and validity of the questions were checked using the internal consistency and the test-retest methods.

<table>
<thead>
<tr>
<th>Sessions</th>
<th>Descriptions of the sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st session</td>
<td>Communicating and developing good relationships, assessing nature of the problem and level of the marital conflict, finding the chief complaint, defining the problem according to a specific behavior, re-forming the framework of the participants’ problems, mutual understanding on a given problem, identifying the participants based on their visitor, complainer, and consumer relationships, asking graded questions, giving assignments and feedbacks.</td>
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<tr>
<td>2nd session</td>
<td>Revision of the previous session, examining the couples’ assignments, determining the objective, exploring the solutions to alleviate the compliant, formulation of solution-problem circles, giving up the old and usual solutions, paying attention to the couples’ resources in dealing with problems, giving assignments and feedbacks.</td>
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<tr>
<td>3rd session</td>
<td>Revision of the previous session, examining the couples’ assignments, identifying the exceptions, finding a positive story, giving assignments and feedbacks.</td>
</tr>
<tr>
<td>4th session</td>
<td>Revision of the previous session, examining the spouses’ assignments, using solution-focused questions, reduction argument, Straw man argument, praising the participants, giving assignments and feedbacks.</td>
</tr>
<tr>
<td>5th session</td>
<td>Revision of the previous session, examining the couples’ assignments, using the intensive -term solution-focused couples therapy techniques, giving assignments and feedbacks.</td>
</tr>
<tr>
<td>6th session</td>
<td>Revision of the previous session, examining the couples’ assignments, using graded questions, the extent to which the objectives of the therapy are reached, praising the participants for reaching the objectives.</td>
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questionnaire has been reported as 0.80 and 0.82, respectively by Florian et al.9

Implementation of the study: Fourteen couples with marital conflicts completed the marital intimacy questionnaire. The couples were divided equally and randomly into two control and case groups (7 couples in the case group and 7 couples in the control group). Then, an intensive course of solution-focused couples therapy was performed within 6 ninety-minute sessions for 2.6 months. After completion of the sessions, the samples in the control and the case groups completed the marital intimacy questionnaire (post-test). The overall format of the solution-focused couples therapy sessions was as follows:

Statistical analysis of the data: The inferential analysis of the data obtained through the measurement instruments was carried out using ANCOVA method.

RESULTS

Table-I & II show the obtained results of the study. Hypothesis: The solution-focused couples therapy training is effective in dimensions of marital intimacy in Isfahan, Iran.

As seen in the Table-I, the pretest mean values of the seven subscales of marital intimacy in the two groups are almost equal. However, the post-test of psychological, sexual, emotional, intellectual, physical, and relational intimacy subscales in the case group showed far greater mean values than those in the control group. This result showed the effectiveness of the solution-focused couples therapy training in marital intimacy of the case group. Meanwhile, mean values of the pretest and post-test of spiritual intimacy and social-recreational intimacy in the case group did not show any significant difference with those in the control group.
According to the results, the observed F value at the significance level of 0.05 (α=0.05) showed a significant difference between the post-tests of psychological, sexual, emotional, intellectual, physical, and relational intimacy subscales of the case and control groups. Therefore, it can be concluded that the solution-focused couples therapy training has influence on psychological, sexual, emotional, intellectual, physical, and relational intimacy subscales.

DISCUSSION

The results on the effectiveness of the solution-focused couples therapy training in marital intimacy subscales in Isfahan, Iran showed that such trainings are effective in psychological, sexual, emotional, intellectual, physical, and relational intimacy dimensions while they are not effective in spiritual and social-recreational intimacy. Through solution-focused couples therapy sessions, couples actually can acquire the skills to detect and define their problem, find out how to deal with the problem, and choose the best solution which creates mutual understanding for the couple. In this respect, marital intimacy increases and behaviors such as expressing real emotions by the couple, conveying feelings, understanding each other, active listening, consulting together when solving problems, accepting different beliefs of each other, desirable closeness and touch, mutual decision-making, lack of concealment, spending time to talk to each other, psychological understanding of each other, the pleasure to express sexual intercourse, discussing the sexual desires, and the heartfelt confidence to each other are developed in marriage.

Studies1,10-19 also showed that the couple therapy interventions in different methods result in reduction of marital conflicts and improvement of married life. Given that the results of the present study conform to the results of the above studies, it can be argued that in order to solve marital conflicts and improve the married life, couple therapy interventions can be used to teach the couples problem-solving and marital skills by which they will be capable of solving problems mutually and establishing a peaceful atmosphere in their life.

Therefore, intimacy together with love increases the psychological safety of the married life and consequently increases marriage satisfaction. Couples live together with more love and intimacy and bear the difficulties of life. Therefore, the results of the present study confirm the results of the abovementioned studies that show the effectiveness of the solution-focused couples therapy training on improvement of the marital satisfaction.

Christine F believes that certain marital problems are caused by lack of appropriate intimate relationship which indirectly influences other relations of the couples. However, if the couples enjoy their relationship, they may have better interaction and communication in other areas of life as respect, acceptance, and love grows between them more than ever. Moreover, the studies6,19-21 Studies have also showed that proper and pleasing sexual relationship is effective in marital commitment and lead to greater sense of commitment on the part of couples.

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