

The effect of training solution-focused couples therapy on dimensions of marital intimacy

Ahmadreza Hajian¹, Somayeh Mohammadi²

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.

doi: [http://dx.doi.org/10.12669/pjms.291\(Suppl\).3525](http://dx.doi.org/10.12669/pjms.291(Suppl).3525)

How to cite this:

Hajian A, Mohammadi S. The effect of training solution-focused couples therapy on dimensions of marital intimacy. *Pak J Med Sci* 2013;29(1)Suppl:321-324. doi: [http://dx.doi.org/10.12669/pjms.291\(Suppl\).3525](http://dx.doi.org/10.12669/pjms.291(Suppl).3525)

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/3.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

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

1. Ahmadreza Hajian, MSc, Isfahan Behavioral Sciences Research Center, Isfahan University of Medical Sciences, Isfahan, Iran.
2. Somayeh Mohammadi, BSc, Faculty of Psychology, Khorasgan Branch, Islamic Azad University, Isfahan, Iran.

Correspondence:

Ahmadreza Hajian,
E-mail: ahmad.r_haj4@yahoo.com

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.³ The role and the effectiveness of intimacy between spouses in improvement of marital interaction and satisfaction have been reported in studies⁴⁻⁸ 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 al⁹ 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

Sessions of the solution-focused couples therapy.

Sessions	Descriptions of the sessions
1st session	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.
2nd session	Revision of the previous session, examining the couples' assignments, determining the objective, exploring the solutions to alleviate the complaint, 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.
3rd session	Revision of the previous session, examining the couples' assignments, identifying the exceptions, finding a positive story, giving assignments and feedbacks.
4th session	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.
5th session	Revision of the previous session, examining the couples' assignments, using the intensive -term solution-focused couples therapy techniques, giving assignments and feedbacks.
6th session	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.

Table-I: Mean and standard deviation of the pretest and post-test of marital intimacy subscales for the control and case groups.

Intimacy subscale	Statistical	Pretest		Post-test	
	Index Group	Mean	Standard deviation	Mean	Standard deviation
Psychological intimacy	Case	9.11	2.33	14.38	2.34
	Control	9.43	2.28	9.12	2.26
Spiritual intimacy	Case	12.64	2.54	12.95	2.37
	Control	12.90	2.72	12.91	2.43
Social-recreational intimacy	Case	11.59	2.97	11.86	2.52
	Control	12.08	2.64	12.02	2.36
Sexual intimacy	Case	8.17	2.24	14.19	2.08
	Control	9.22	2.54	9.10	2.69
Emotional intimacy	Case	7.44	2.85	15.13	2.30
	Control	8.52	2.62	8.46	2.50
Intellectual intimacy	Case	8.58	2.60	13.12	2.69
	Control	8.09	2.55	8.11	2.64
Physical intimacy	Case	9.15	2.57	13.25	2.44
	Control	8.95	2.43	9	2.82
Relationship intimacy	Case	8.56	2.59	14.28	2.74
	Control	8.50	2.68	8.22	2.80

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

Tables-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.

Table-II: The results of the ANCOVA analysis of the effect of solution-focused couples therapy training on marital intimacy subscales.

Intimacy subscale	Source	Total square	Degree of freedom	Mean square	Eta coefficient	Statistical power of test
Psychological intimacy	Pretest	98.51	1	98.51	0.22	0.79
	Group	1268.8	1	1268.48	0.79	1
Spiritual intimacy	Pretest	163.93	1	163.93	0.77	1
	Group	3.18	1	3.18	0.06	0.27
Social-recreational intimacy	Pretest	121.45	1	121.45	0.83	1
	Group	2.19	1	1.18	0.08	0.35
Sexual intimacy	Pretest	60.50	1	60.50	0.30	0.92
	Group	1697.03	1	1697.03	0.92	1
Intellectual intimacy	Pretest	98.51	1	98.51	0.22	0.79
	Group	1268.48	1	1368.48	0.79	1
Physical intimacy	Pretest	53.12	1	53.12	0.29	0.91
	Group	805.74	1	805.74	0.60	1
Relationship intimacy	Pretest	76.93	1	76.93	0.23	0.80
	Group	2338.48	1	2338.48	0.90	1

According to the results, the observed F value at the significance level of 0.05 ($\alpha=0.05$) showed a significant difference between the post-tests of psychological, sexual, emotional, intellectual, physical, and relationship 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.

Studies^{1,10-19} 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 above-mentioned studies that show the effectiveness of the solution-focused couples therapy training on improvement of the marital satisfaction.

Christine F⁴ 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 studies^{6,19-21} 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.

REFERENCES

1. Sharry J, Dannody M, Maddan B. A Solution - Focused Approach To Working With Clients Who Are Suicidal, British J Guidance Solution- Focused E Counseling. 2002;30(4).
2. Amato PR. Studying marital interaction and commitment with survey data. J Marriage Family. 2010;23:53-70.
3. Shah Siah M. The effect of sex education on marital quality of couples in Isfahan, Ms thesis in the field of Family Counseling, School of Psychology and Educational Sciences, University of Isfahan. 2008.
4. Christine F. Long- term satisfying marriages: perceptions of contributing factors. Am J Family Therapy. 2011;24:153-170.
5. Hendrsoon D. Re Claiming Her Story: Erickson Solution. Focused Therapy For Sexual Abuse, Adolescence. 2010;31(122):499.
6. Murray C. Solution - Focused Premarital Counseling: Helping Couples Build A Vision for Their Marriage. J Harital Family Therapy. 2008;130(3):346.
7. Saetr S, Lopalo R. The impact of attitude on marriage behavior, department of population dynamics. John Hopkins Uni. 2005 <http://www.jhsph.edu/popcenter/publications>
8. Shile H, Perkins J, Offarre LT. Ivlaritai and Family Therapy in Alcoholism Treatment. J Substance Abuse Treatment. 2005;6:23-29.
9. Florian EG, Rusebult CE, kumashioro M, Hannon PA. Dealingwhite betragal in elose relationship: Dose commitment for tiveness?. J Personality Social Psycol. 2011;82(6):954-974.
10. Simpson LE, Gattis K, Christensen A, Bakermans K, Berg-Cross LI, Marian J. Therapist-collples relationship, family relationship, parent-child Relationships 2010 [On-Line]. Available: <http://www.familyjrank.org>.
11. Howells A, McGillivray. Working at intimate relationships: Links between attachment. Self regulation, communication and relationship satisfaction. Proceedings of the APS psychology of relationship interest 6 Annllal Conference. 2009:71-79.
12. Wilson KL, Charker J, Lizzio A, Halfird K, Kimlin S. Assessing how much couples work at their relationship: The behavioral self-regulation for effective relationship scale. J Family Psychology. 2005;19(3):385-393.
13. Lethem L. Brief Solution - Focused Therapy, Child and Adalescent Mental Health. 2003;7(4):186-192.
14. Roy F, Baumeister KD. Handbook of self-reglliation: Research, theory & application, New York: VOHS the Guilford press. 2004.
15. Keem KL. Efficacy Social Skills training in family conflict. New York: Grun & strattion. 2005
16. Halford WK, Sanders MR, Behrence BC. Can skills training prevent relationship problems in at-risk couples? Fear-year effects of a behavioral relationship education problem. Am J Family Psychol. 2001;5(4):750-768.
17. Halford WK. Best practice in couple relationship education. J Marital Family Therapy. 2002;29(3):385.
18. Karoly P. Mechanisms of self - regulation: A systems view. Ann Review Psychol. 1993;44:23-52.
19. AbbasiMolid H, Ahmadi SA, Fatehizadeh M, Bahrami F. Study of the correlation between marital commitment and sexual satisfaction in couples in Isfahan, Abstracts of articles in the Fifth Congress on Islamic Consultation. Sexual health and family counseling, Research Institute for Islamic Counseling, April-May 2009.
20. Nazari AM. Study and comparison of the effect of the solution-focused consultation and relationship enrichment program on marital satisfaction of the couples who are both working. PhD. Thesis in the field of Counseling, Teacher Training University of Tehran. 2004.