

The effect of communication skills training and sexual difference (Sexual Knowledge) on Marital Satisfaction

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Abstract

Introduction: This study aimed to evaluate the effectiveness of teaching communication skills and sexual difference (sexual knowledge) on marital satisfaction in couples referred to the Mashhad city Health Center, Iran.

Methods: In This Quazi-experimental study, with pre test and post-test methods, 25 couples who referred to a Mashhad city health center, were randomly selected. Enrich marital satisfaction questionnaire was used to measure variables. Teaching communication skills and sexual difference as independent variables were held during 2 months in 14 sessions (communication skills in seven 2-hours sessions and sexual differences (sexual knowledge) in six 60-minute sessions). Paired T-test has used for data analysis.

Results: Results showed that there is significant difference between pre-test and post-test scores ($P < 0.0001$). This demonstrated that teaching communication skills in combination with sexual differences were effective on marital satisfaction.

Conclusion: Results of this study indicated that teaching communication skills and sexual differences (sexual knowledge) were effective on marital satisfaction and enhancement of psychological well-being of couples.

Key words: Marital, Skills, Sexual Difference

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Introduction:

In recent decades, the attention of numerous organizations have been drawn to the subject of marital satisfaction. Having a healthy society requires healthy families and healthy families are dependent on the satisfaction of couples from marriage (1). In the past decades researchers have been extensively studied marital satisfaction and adjustment, and their connection with various aspects of human life. In addition to marital

satisfaction and adjustment, variables such as quality of life and satisfaction with sex, conflict management and communication, are the most important determinants of family performance (2).

Researchers in an extensive review of research evidence concluded that marital satisfaction is one of the strongest determinants of life public satisfaction for adults, and this is true on a wide range of cultures (1). Marital satisfaction could be studied from two points of view, a) the effects of marital satisfaction on both individual and

community, and b) factors affecting marital satisfaction (3).

Divorce is one of marital dissatisfaction complications, whether emotional or physical and Iran have the fourth rank in the world. In 2010, one out of each four marriages ends with divorce in Tehran, Iran. In 2012 one out of each six marriages ends with divorce in Mazandaran, Kordestan, Qom, Khorasan razavi provinces in Iran (4).

In a research that has conducted on 402 Muslim divorcee in North America, following results have obtained, the highest amount of respondents were in the age group 20 to 40 years and that divorced in the first 2-5 years of marriage. In most situations, women demanding divorce. Reasons in order of importance were conflict, violence, emotional, verbal, physical and sexual abuse, financial abuse, family involvement and Traitorous.

Everyone has their own relationship, and if couples do not pay attention to their differences, there will be the possibility of misunderstanding. Although it is difficult to generalize gender differences in the field of communication, gender differences is the main reasons for the bad impression in marital relationships (5).

Research has shown that many factors are involved in enhancement of marital satisfaction including, companionship (6,7), amiability (8), trust, love and loyalty (9), intimacy and avoid hostile control (10), communications, and interest, love, empathy, satisfaction with sex, doing things together, recognizing emotions, understanding emotions and their origin, and proper management of emotions (11).

Bradbury and colleagues (2000) have a decade to investigate the nature and determinants of their marital satisfaction and adjustment; they found More than a hundred of research, in terms of marital satisfaction and adjustment (12). The extent of the investigation, proves the increasing importance of marital satisfaction and adjustment (13). Yoo and Bartle-Haring (2012) studied the associations between couple communication, emotional intimacy, sexual satisfaction, and relationship satisfaction. Findings suggest that both components of intimacy—emotional and sexual—should be comprehensively addressed in research and clinical work with couples (14).

Couples health, satisfaction and stability in relationship are main goals of relationship education. Research on couple education, however, seek for what influences marital satisfaction and factors in stability of relationship. These are explored in well-designed investigation (15). One of the key factors in any marital relationship is the feeling of satisfaction of each couple from that relationship. Amounts of Satisfaction from marital relationship has influence on sending and receiving messages. For instance, Disaffected husband pay attention to the negative events of relationship and has negative impressions from his wife, and vice versa. In contrast, satisfied husband has all positive impressions from his relationship. Therefore, the marriage relationship satisfaction can be part of the context of marriage, which effects on men and women exchanges (5).

One way of solutions of improving the quality of marital life is to educate necessary life skills to couples, to manage their feelings, thoughts and behaviors in order to strengthen their love (16).

The positive effect of sex education on couples has been confirmed in different researches. Relationship education is widely available to couples and is intended to reduce the prevalence of relationship distress, divorce, and the associated personal and social costs. To realize the potential benefits of couple relationship education, it needs to be evidence-based, offered in ways that attract couples at high-risk for relationship problems, and focused on factors that put couples at high-risk for future relationship problems (17). The aim of this study is to evaluate the evidence on the efficacy of relationship education in achieving its stated objective of helping couples maintain a mutually satisfying relationship. This study aimed to evaluate the effectiveness of teaching communication skills and sexual difference (sexual knowledge) on marital satisfaction in couples referred to the Health Center No. 2 of Mashhad. Methods: This study used a semi-plot study with two pre-test and post-test

Methods:

In this interventional study, from the population size of 250 couples referred to a health center of Mashhad city, 25 couples were chosen as sample who at least 6 months last from their marriage.

Written consent was received from the participants.

General health and psychological status of candidates were determined with General Health Questionnaire and those without such conditions were excluded (18).

Public Health Assessment Questionnaire, a "screening inventory" is based on self-reporting method in clinical set with the goal of tracing those who have a mental disorder been used (19). In this questionnaire, the two main categories of phenomena have considered, the inability of a person to a function "healthy" and the manifestation of new phenomena with disabled nature (19).

To evaluate marital satisfaction, Enrich questionnaire selected. This questionnaire is valid as a research tool in numerous researches and clinical practices (20). Enrich test martial scale is an overall measure of martial relationship includes idealistic distortion, marital satisfaction, personality issues, communication, conflict resolution, financial management, leisure activities, sex, children and parenting, family and friends, Equalitarian Roles of both female and male, Religious Orientation, Marital Cohesion and marital changes. 47 questions-form used in this study, with the written permission of Professor David Olson, translated by Asoodeh and colleagues (2010). This translation was send to three experts in Farsi and English languages, who their resumes also were send to Professor Olson, and after making some corrections the final edition was send to Professor Olson and the permission of application was issued (21).

Inter-individual communication skills, empathy, active listening, identification of body languages, and problem solving were teach in seven sessions. Each session was held in 120 minutes. Then in seven sessions, which each has duration of 60 minutes, sexual knowledge (sexual differences) was taught according to the reproductive health and sexuality education package that offer by Ministry of Health and Medical Education of Iran. The course of education included sexual information, the difference between sex and gender, male and female reproductive system, sex and sexuality, teaching variety good manners and positions of

usual and unusual sex, training sexual intimacy and training sexual coolants.

The present interventional and field study was performed as pre- and post-test. First measurements were done with the pre-test and second measurements were done after application of independent variable (educational intervention) using Enrich questionnaire. Statistical analysis was performed with paired t-test with SPSS software (SPSS for windows version 22).

Results:

Table 1 shows overall satisfaction (raw score) of couples referred to the Health Center of Mashhad in 2016 according to gender test before the intervention Enrich.

Table 1. Overall satisfaction (raw score) of couples referred to the Health Center

Gender	Average	Number	Standard deviation
Male	142.60	25	37.629
Female	157.56	25	36.616
Total	150.08	50	37.514

Table 2 shows the martial satisfaction of couples who referred to Mashhad Health Center of Mashhad before intervention. The results sort based on sex.

Table 2. Martial satisfaction of couples before intervention

Gender	Average	Number	Standard deviation
Male	37.88	25	13.182
Female	43.16	25	13.278
Total	40.52	50	13.363

Table 3 shows the martial satisfaction of couples who referred to Mashhad Health Center in 2016 before and after intervention. The results are based on raw and Enrich T scores. Martial satisfaction before intervention was 150.08, which is change to 180.62 after intervention. This is statistically significant ($P < 0.0001$).

Table 4 shows the martial satisfaction in couple who referred to Mashhad Health Center in 2016.

Table 3. Marital satisfaction of couples before and after intervention

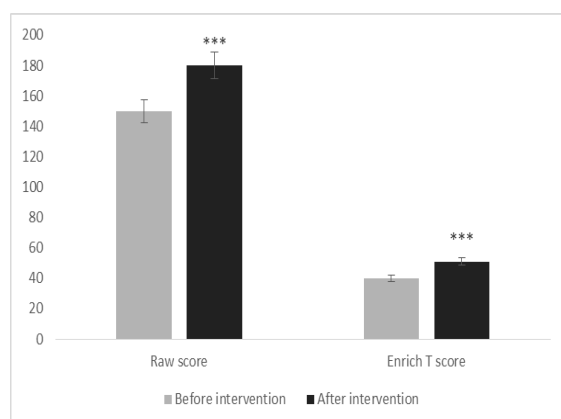
Total Satisfaction	Satisfaction based on raw score before intervention	Satisfaction based on raw score after intervention	Satisfaction based on T score before intervention	Satisfaction based on T score after intervention
Average	150.08	180.62	40.52	51.78
Median	151.50	183.50	40	52.50
Standard Deviation	37.514	25.825	13.363	9.765
Minimum Score	59	99	12	21
Maximum Score	212	233	63	72

Table 4. Marital satisfaction based on nine subscale

Total satisfaction	Before intervention				After intervention			
	Average	Standard deviation	Minimum score	Maximum score	Average	Standard deviation	Minimum score	Maximum score
Personality	4.14	1.069	2	6	4.360	1.025	2	6
Marital communication	3.40	1.212	1	6	4.480	1.054	3	6
Conflict resolution	3.10	0.995	1	5	4.420	1.031	2	6
Financial management	3.50	1.055	1	5	4.60	0.782	3	6
Leisure times	3.42	0.928	1	5	3.480	0.952	1	5
Sex	3.52	1.282	0	5	4.96	0.879	2	6
Children	3.74	1.139	0	5	2.66	1.042	0	5
Family and friends	2.94	1.077	0	5	2.98	1.039	0	5
Religious orientation	3.34	1.154	1	5	3.42	1.196	1	5

This table is based on nine subscales (Personality, marital communication, conflict resolution, financial management, leisure times, sex, children, family and friends, religious orientation) before and after intervention. Results demonstrated significant increase in raw and Enrich T scores, before and after intervention.

Figure 1 shows total marital satisfaction in couples who referred to Mashhad Health Center in 2016 before and after intervention based on raw and Enrich T score.

**Figure 1. Total marital satisfaction before and after intervention ($P < 0.001$)**

Conclusion:

In order to investigate this hypothesis which communication skills training has influences on marital satisfaction influences and sex differences, Enrich test scores between pre-test (before the intervention) and post-test (after the intervention of sex education, communication skills and sex knowledge), were compared using paired t-test analysis. The results show a significant difference between the scores of before and after intervention ($P < 0.001$). The results suggest that teaching communication skills and sexual differences have impacts on marital satisfactions and thus hypothesis is confirmed. The findings demonstrated that there is statistically significant difference in Enrich average scores before and after intervention ($P < 0.0001$). Furthermore, results showed that there is significant difference between subscales before and after intervention and subscales including, personality, marital communication, conflict resolution, financial management, sex, leisure times, religious orientations have improved, but there is no significant difference in subscales of children, family and friends.

Using random sampling in national research with 5039 couples, Fowers and Olson carefully distinguished between happy and unhappy couples with the 85-95% accuracy (20). Each subjects in this questionnaire is in connection with one of the important context of martial relationship. Evaluation of this context in a martial relationship could explain potential problems of couples or could identify their areas of strength and enhancement. This tool could also be used as recognizing tool for couples who search for marital counseling and seeking to strengthen their marital relationship. The results of this study are in consistent with the results of other investigations (22-26). In the similar study, Hussein pour and colleagues showed that pre-test scores were 120.15 (SD \pm 114.46) which post-test scores changed into 180.42 (SD \pm 15.16) (27). Also, jafari showed that, average scores of martial satisfaction in couples who received communication skills training were higher than couples who did not received this training (28). Results obtained from present study is in consistent with the results of the study of Pourheydari and colleagues, in which martial satisfaction changed from 29 in pre-test to 51 in post-test (29).

The other part of the results of present study showed that sexual education of young couples, has increased their sexual satisfaction. In this study, seven sessions were held on issues of common sexual disorders and sexual practices with an emphasis on cognitive-behavioral techniques and religious teachings. The results were in consistent with Markman and colleagues and Sprecher (30,31).

The couples who trained with communication skills and sexual knowledge could discover new and effective methods, which help them to enhance satisfaction and not only they could satisfy their needs but also could satisfy their partner in this goal. Communication skills training can help couples to identify their underlying causes of destructive conflict and use more constructive ways to deal with them. Promote the exchange of couples positive behavior, satisfies the emotional needs of the partner, and creates positive feelings toward each other (32).

Results of one study state that Empathy skills training help each spouse to satisfy emotional needs

and psychological of partner, result in the emergence honest and faithful behaviors (33).

Present interventional study has increased martial satisfaction of couples and indicated that could be successful and used as effective interventional program by Specialists and family therapists. However, in should be noted that subjects of this study have selected from one of the Mashhad Health Centers, and generalization to other groups should be discreet. Furthermore, this study showed the short-term effects of intervention and evaluations of their long-lasting effects seems to be necessary. However, due to effectiveness of communication skills and sexual knowledge training on martial satisfaction, it is recommended that psychologists and counselors in health care centers and counseling centers use this training in order to promote quality of martial life of individuals.

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