

Effect of communication skills training through Religion-based cognitive-behavioral approach on intimacy and the satisfaction with life among couples

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Abstract

Introduction: Intimacy and the satisfaction with life are solid foundations of a family. This study aims at analyzing communication skills training through religion-based cognitive-behavioral approach on increasing intimacy and the satisfaction with life.

Methods: This study was a quasi-experimental trial with pretest, posttest, follow-ups and control group. Our sample in this study consisted of 30 couples whose SD, according to the intimacy and satisfaction with life questionnaires, was less than mean value. Likewise, these couples were completely homogeneous in terms of age, socioeconomic status, duration of marriage and other variable followed by the author. The experimental group received ten training sessions of religion-based communication skills; however, control group did not any receive any intervention. Broucke and Vertommen's Marital Intimacy Questionnaire (MIQ) and Diener's satisfaction with Life Scale were used in this study. Data were analyzed by SPSS 16.

Results: The results indicated that there is a significant difference between experimental and control groups in terms of intimacy and the satisfaction with life ($P < 0.001$). It means that the posttest scores of intimacy and satisfaction among couples' tests have been increased significantly in contrast to their scores in pretest and control group. Such results have been continued during two follow-up periods ($P < 0.001$).

Conclusion: Communication skills training through religion-based cognitive behavioral approach increases intimacy and the satisfaction with life among couples.

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Introduction:

Karl Jaspers, the German Philosopher, claims that best achievement of human being in this universe is making good and effective communication with others. Different studies have indicated that inclination to make communication

and interaction with other people is a strong universal need among human beings. Interaction and deepening their relations are pleasant for human beings; if people are not able to make an intimate and significant relationship with others, they will feel loneliness, dissatisfaction and depression (1). Family has a unique communication

system which is different from friendship and professional communication. Reaching such organized communication system is realized only production and marriage, a family is so strong that despite hundreds kilometers distance between members and even death of some of them, its effect never dies and continues to survive. Previous studies have confirmed the effect of communication skill on self-concept, self-esteem and assertiveness (2). Several studies on the effect of spirituality and religion on psychological variables of personality, personal and social compatibility and psychotherapy have been carried out (3). Cognitive treatments are considerably influenced by cultural fields, beliefs and intra-family values. Likewise, effectiveness of such treatments is influenced by cultural values and popular beliefs (4). Therefore, in psychological treatment, not only the biologic condition of visitors, their cultural and religious beliefs shall be considered (5). Other studies focused on Cognitive behavior therapy (CBT) with religious cognitive therapy (RCT) for patients with religious beliefs. The results showed that depression level decreased significantly in 59% of patients (6). Lohrer and Cross studied about the effect of religion on violence among sexual partners. Their results suggested that religious beliefs reduce people's vulnerability against violence (7). Besides couple's personal traits in marital satisfaction, Medatil and Bin Schouf introduced four subscales including lovemaking, economic problems, mutual respect and intimacy as the important criteria of marital satisfaction. Zadhoush et al. showed that the effectiveness of cognitive behavioral group along with religious recommendation was higher than the effectiveness of classic behavioral cognitive group and control group to improve quality for women' (8). Intimacy is amongst the most important needs of couples and at the same time is among the important features of a successful marriage. An intimate relationship is defined with real self-disclosure and understanding needs of spouse in the equal relation and development of an intimate relationship needs time. Another study on this regard has dealt with analyzing intimacy and its relationship with marital satisfaction in women with chronic pains. The results suggested that there is a significant relationship between intimacy and marital satisfaction and women's perception of

chronic pains (9). Many studies about marital life and psychological health, which are among the determining factors of the satisfaction with life, suggested that there is a relationship between them, and pressures of marriage are related to psychological traumas, particularly depression, anxiety disorders and physical diseases (6). Hansoun and Landberg showed that couples whose interactions were problematic revealed more psychiatric symptoms and also were dissatisfied with their marital life. In a study, 12 couples who have referred to court [for getting divorce], received violence reduction plans including anger management, problem solving skills and skills to face severe conflicts. Then they faced three different controversial situations through video recording and it was observed that when couples use effective communication skills a less conflict is experienced. Di-Year and Stilser studied marital skills training to Spanish couples. The results indicated that training workshops was effective on improving the marital satisfaction for Spanish couples. This study analyzed positive relationship components, solving conflicts, negative interactions and committed relationship. The results suggested that the lowest effect was found in committed relationship, whereas the highest one was found in the reduced negative interactions. Similarly, communication skill training had the highest effect on younger couples and couples whose financial and education levels were intermediate. Religious people gained significant higher scores in intimacy and satisfaction with life posttest. In his study, Spercher concluded that communication skills are the main determinants of marital compatibility and mutual marital relationship. Dadler and Kousingy studied the religious ideological relationship, religious rituals and marital satisfaction experience. Their results showed that there is a high and significant correlation between marital satisfaction and special religious deeds, internal motivation and religious experience (intimacy with god feeling) (10).

This study aims at analyzing the effect of communication skills training through religion - based cognitive behavioral approach on intimacy and satisfaction with life among young couples.

Methods:

This study was a quasi-experimental trial with pretest, posttest, follow-ups and control group. Our population included all couples referred to the Counseling Center in Ahwaz City in 2013. Voluntary available and matching method was used in this study for sampling purposes. The statistical samples included 30 couples. These people were homogeneous in terms of age, socioeconomic status, marriage duration, gaining a $SD < \text{mean}$ value in intimacy and satisfaction with life, to be free from serious physical and mental disease and other variables of this study. Most participants were employees of medical centers. They must live together at least for two years and also they should refer to counseling centers in Ahwaz City. Then, these 30 couples were divided casually into two groups, each group had 15 couples. Data were analyzed using SPSS 16. Marital Intimacy Questionnaire (MIQ) and Diener's satisfaction with Life scale were used to collect data.

Marital Intimacy Questionnaire (MIQ): MIQ was designed by Broucke and Vetrommen (1998) and has 56 questions that its five factors assess intimacy among couples. Factors of the questionnaire are intimacy-related problems (14 questions), couples' agreement (12 questions), truthfulness (12 questions), affection (8 questions) and fulfillment of commitments (10 questions). In this study, Likert scale was used to assess interviewees' attitudes, as very high, high, medium, low and very low are scored with 5 to 1. Cronbach's alpha coefficient was measured for each subtest of intimacy-related problems, agreement, affection, truthfulness, and fulfillment of commitments 0.86, 0.86, 0.83, and 0.70, respectively (Erfani Akbari, 1999). The questionnaire was validated in Iran by Erfani Akbari (1999).

In this study, the questionnaire's reliability was measured using Cronbach's alpha method and fulfillment of commitments was measured 0.78, 0.92, 0.80, 0.69, and 0.72, respectively. Likewise, face validity method was used to analyze its validity. As several professors of counseling and psychology analyzed the mentioned questionnaire and confirmed that it can assess the couple's intimacy.

The Satisfaction with Life Scale: satisfaction with life scale has been used in this study. The scale was designed by Diener, Emmons, Larsen and Griffin (1985) and then Diener and Pawt (1993) revised it for all age groups. The scale includes five points (each point includes five levels vary from completely disagree (1) to completely agree (7); as the possible range of score will vary from 5 (low satisfaction) to 35 (high satisfaction). Oishi and Lucas (2003) studied the scale reliability and reported its alpha coefficient 0.87. The satisfaction with life scale's reliability was studied by Baiani, Muhammad Kochaki and Godarzi (2007) in a statistical population containing 109 students. In this study, the scale reliability was measured by Cronbach's alpha method (0.83) and test retest method (0.71).

Results:

Table 1 summarizes mean value, SD of intimacy and satisfaction with life in both experimental and control groups in pretest, posttest and follow-up stages.

Results of table 2 indicate that controlling pretest may result in at least a significant difference between experimental and control groups in terms of at least marital intimacy and satisfaction with life variables ($P < 0.0001$ and $F = 97.54$). To figure out this difference, one-way analysis of covariance was carried out. Table 3 shows the results.

Results of table 3 indicate that controlling pretest may result in a significant difference between experimental and control groups in terms of marital intimacy ($P < 0.0001$ and $F = 141.75$). It means that communication skill through religion-based cognitive behavioral approach increases marital intimacy in the experimental group. On the other hand, there is a significant relationship between the experimental and control group with pretest in terms of satisfaction with life ($P < 0.0001$, $F = 15$). It means that religion-based cognitive behavioral treatments increases couples satisfaction with life in the experimental group.

Results of table 4 indicate that controlling pretest between experimental and control groups, there is a significant difference in terms of at least one of variables of marital intimacy and satisfaction with life.

Table 1. The mean value, SD of intimacy and satisfaction with life in both experimental and control groups in pretest, posttest and follow-up stages

Varizable	Stage	Statistical factor		Mean value	SD
		GRoup			
Mater	Pretest	Experimental		285.21	2.45
		Control		294.72	3.71
	Posttest	Experimental		345.63	5.01
		Control		251.26	5.3
	Follow-up	Experimental		348.74	3.36
		Control		246.19	2.69
Satisfaction	Pretest	Experimental		23.85	5.11
		Control		25.32	5.45
	Posttest	Experimental		32.87	2.64
		Control		26.21	4.91
	Follow-up	Experimental		31.97	3.87
		Control		24.13	2.92

Table 2. Multivariate Analysis of Covariance (MANCOVA) for the mean scores of marital intimacy and satisfaction with life posttest

Test	Value	Df. Hypothesis	Df. Error	F	Significance level	Eta squared	Statistical power
Pillai's trace	0.859	2	25	97.54	0.0001	0.85	1
Wilks' lambda	0.152	2	25	97.54	0.0001	0.85	1
Hotelling trace	5.64	2	25	97.54	0.0001	0.85	1
Roy's largest root	5.64	2	25	97.54	0.0001	0.85	1

Table 3. Results of one-way MANCOVA for the mean scores of marital intimacy and satisfaction with life posttest

Variable	Source of changes	Sum of squares	Degree of freedom	Mean squares	F	Significance level	Eta squared	Statistical power
Material intimacy	Pretest	445.5	1	445.27	25.06	0.0001	0.80	0.691
	Group	13315.05	1	13315.05	141.75	0.0001	0.86	1
	Error	3376.23	26	129.855	-	-	-	-
Satisfaction with life	Pretest	48.75	1	48.75	215.11	0.0001	0.61	1
	Group	5.22	1	5.22	15.26	0.0001	0.49	0.997
	Error	7.64	26	0.2938	-	-	-	-

Table 4. Results of MANCOVA for the mean scores of follow-up of marital intimacy and satisfaction with life components

Test	Value	F	Df. error	Df. hypothesis	Significance level
Pillai's trace	0.84	37.8	2	25	0.0001
Wilks' lambda	0.16	37.8	2	25	0.0001
Hotelling trace	5.92	37.8	2	25	0.0001
Roy's largest root	5.92	37.8	2	25	0.0001

Table 5. Results of one-way ANCOVA for the mean scores of marital intimacy and satisfaction with life follow-up

Variable	Source of changes	Sum of squares	Degree of freedom	Mean squares	F	Significance level	Eta squared	Statistical power
Material intimacy	Pretest	325.21	1	325.21	28.17	0.0001	0.87	0.77
	Group	1465.12	1	1465.12	136.18	0.0001	0.76	1
	Error	2172.07	26	83.54	-	-	-	-
Satisfaction with life	Pretest	6987	1	69.87	26.26	0.0001	0.64	1
	Group	9.23	1	9.23	14.92	0.0001	0.56	0.98
	Error	6.12	26	0.23	-	-	-	-

Results of table 5 show that there is a significant difference between experimental and control groups in terms of marital intimacy in follow-up stage ($P < 0.0001$, and $F = 136.18$). It means that religion-based cognitive behavioral approach increases marital intimacy in the experimental group. On the other hand, there was a significant relationship between experimental and control groups in terms of satisfaction with life in follow-up stage ($F = 14.92$, $P < 0.0001$). It means that religion-based cognitive behavioral treatment enhances satisfaction with life in couples of experimental group.

Conclusion:

This study was started in order to analyze the effectiveness of communication skill through religion-based cognitive behavioral approach on enhancing intimacy and satisfaction with life. Regarding the results of this study, which are summarized in table 2, there is a significant difference between experimental and control groups at least in terms one of two variables of marital intimacy and satisfaction with life through controlling the pretest. Using one-way MANCOVA in table 3, the results showed that there is a significant relationship in terms of marital intimacy between experimental and groups. It means that communication skill through religion-based cognitive behavioral approach enhances marital intimacy in the experimental group. The results of this study were consistent with the results of a study analyzed the effectiveness of communication skill training on the mental health of students of social welfare sciences of Kerman University. It means that people's mental health was improved after receiving communication skill (11). Likewise, Wiger suggested that couples, who employed the Demand/Withdraw Pattern of Communication, believed that their spouses do not understand them and they felt they are loveable and they had a low marital satisfaction (12). Another study showed that there is a significant difference between experimental and control groups in terms of increasing intimacy among couples and other subscales of intimacy (i.e. emotional, intellectual, psychological, religious, sexual, communicational, physical, social, and recreational) (13). On the other

hand, results in table 3 showed that there is a significant difference between experimental and control group in terms of satisfaction with life through controlling pretest. It means that communication skill training through religion-based cognitive behavioral approach enhances satisfaction with life among couples in the experimental group. This finding was compatible with the results of a study dealt with the effect of cognitive behavioral treatment on enhancing the satisfaction with life and intimacy among veteran couples hurt by chemical weapons in Sardasht City. It means that religion-based cognitive behavioral treatment training enhanced significantly the level of intimacy and marital satisfaction in the experimental group during posttest stage. In general, religion-based cognitive behavioral treatment improves satisfaction with life and marital intimacy among couples (14). On the other hand, results of our study were consistent with results of another study, whose objective was analyzing the effectiveness of cognitive behavioral treatment on satisfaction with life, intimacy and quality of life among students of medical students. The results indicated that both treatments of cognitive behavioral and religious approaches significantly have increased students' satisfaction with life and intimacy (15). In our study, results of one-way MANCOVA on mean scores of marital intimacy and satisfaction with life in follow-up stage showed that there is a significant difference between experimental and control groups in follow-up stage. It means that communication skill training through religion-based cognitive behavioral approach enhances marital intimacy in experimental group. On the other hand, there was a significant difference between experimental and control in terms of satisfaction with life in the follow-up stage. It means that communication skill training through religion-based cognitive behavioral approach enhances satisfaction with life among couples in the experimental group. To explain the results it can be said that many problems among couples are due to negative thoughts and wrong beliefs which prevent development of a constructive and intimate relationship and hence dissatisfaction with life among couples. Communication skills training based on religion-based cognitive behavioral approach modify the wrong beliefs and misunderstandings in relations between couples and

exert a fundamental change in people's perspective to themselves, others and the universe. As a result couples learn Islamic teachings such as forgiveness, humbleness and most importantly the divine observation in their relations. Behavior modification in couples brings about intimacy and satisfaction with life. A study dealt with growth and evaluation of communication skill training course of nursing students. The results implied that the communication skill training was effective and even the students enjoyed the treatment (16). In another study, analyzing the effectiveness of cognitive-behavioral treatment group on satisfaction with life in people with anxiety disorder showed that group-based cognitive behavioral treatment has a positive and significant effect on satisfaction with life in such people in posttest and follow-up stages (17). This study is important because the satisfaction couples feel during their marriage is one of very important sidelines in a marital system.

Conflicts in marital relationships decrease marital satisfaction and endanger the marriage, as official data show that 61% of divorced people have reported excessive and long disputes as the main cause of their divorce (18).

Regarding findings of this study, it can be concluded that communication skill training through religion-based cognitive behavioral approach, as a combined treatment approach and consistent with the cultural and religious fields of Iran, can improve significantly the intimacy and satisfaction with life among couples. The most important constraint of this study was a small population and sample because of difficulty in finding couples with all inclusion and exclusion criteria. Without doubt it makes difficult generalizing the results. Likewise, following results for a long term was impossible because of time limits. Generally, it is recommended that for extending findings, the study needs to be repeated in a larger sample with a longer follow-up period.

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