Investigation of the Influence of Emotion-Focused Couple Therapy on Improvement of Emotional Coldness and Marital Conflicts in Couples Who Were Under Coverage of Imam Khomeini Assistance Committee in Rasht City

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ABSTRACT

The current study has been conducted in order to investigate the effectiveness of emotion-focused couple therapy approach on the emotional coldness improvements and marital conflicts of the couples covered by Imam Khomeini Relief Foundation (IKRF). This study is an experimental research of pretest-posttest type with control group. In this regard, 60 couples were selected as the sample. Then, the sample was divided into two 30-couple groups, which one of them was randomly selected as the experimental and the other was selected as the control group. Next, Marital Conflict Questionnaires (MCQ) of Barati and Sanaei (1996) and Positive Feelings Questionnaire (PFQ) of Sanaei (2000) were distributed among these groups. Then, the approach of emotion-focused couple therapy was performed for experimental group in ten 90-min sessions. Finally, both groups were again assessed by this questionnaire. Data obtained from the questionnaire was analyzed by the Multivariate Analysis of Covariance. Findings indicated that the approach of emotion-focused couple therapy impacts on the marital conflicts and emotional coldness improvements (P < 0.01). The approach of emotion-focused couple therapy can affect the marital conflicts with F (1,56)=136.86 (P < 0.01). There is no different between the impact of emotion-focused couple therapy approach on the emotional coldness improvements of women and men covered by Imam Khomeini Relief Foundation (P > 0.01). There is a different between the impact of emotion-focused couple therapy approach on the emotional coldness improvements of women and men covered by Imam Khomeini Relief Foundation (P > 0.01). The results show that the approach of emotion-focused couple therapy is an appropriate method to improve the couples’ marital conflicts and emotional coldness.

KEY WORDS: Emotional Coldness Improvement, Couple Marital Conflicts, Emotion-focused Couple Therapy

INTRODUCTION

Family is a primary social entity in which an individual's and society’s health is guaranteed. Individuals are not only affected by their families but also they are impacted psychologically and emotionally by their families because family is a context in which individuals can complete their personalities and get ready to take part in their societies (Movahhed and Azizi, 2011). Yong and Long believe that in a friendly marital relationship, couples should learn how to communicate each other. Couples’ conflicts occur when they disagree in cooperating and making shared decisions. The disagreements can be ranged from weak conflict to severe conflict (Afkhami et al, 2007). Conflict may have different forms and may be expressed in the form of depression in one or both couples, misbehavior with each other or physical and verbal quarrel between the couples and may end up in divorce (Sayers et al, 2001). These conflicts may reduce happiness, satisfaction with life and self-esteem and may increase psychological disorders (Hawkins & Booth, 2005). Marital conflict is arisen from responding to individual differences and it is abnormal it takes the form of anger, hostility, spite, hatred, jealousy, verbal and physical misbehavior (Callian & Siewgeok, 2009). Framo (1990; as quoted from Bahari et al, 2011) believes that individuals' problems with establishment of good relationships have roots in their own families. He believes that we cannot see our wives clear and obvious and we draw images on them. Therefore, interactions among these mutual imaginations cause problems in couples because couples do not discuss their real problems but they discuss their imaginations and mental images which are related to their past relations (Horoway, 2005). From a systematic viewpoint, most couples have conflicts because each tries to change the other. However, this kind of change is usually accompanied by alienation which may be expressed in future. Emotion-focused couple therapy is a method which assumes that key factors of marital resentment are continuous inference of attraction of unhappy emotional states and surrounded destructive interaction models which are prior to this emotion (Donovan, 1999). Catherall (2007) believes that the feeling of resentment in one of the couples is the base of conflicts in their friendly relationships. An individual's positive feeling towards him or her or the other side is what is affected. When feelings about oneself are affected negatively, pride is
experiences. Another assumption of this approach is that emotions are not only the basic factor in marital decreased, shame is activated and self-esteem is threatened and when feelings about the other side are affected negatively, trust is reduced, mistrust is activated and attachment is threatened. In applied psychology, different couple therapy approaches have been formed in order to reduce conflicts and relational problems among couples (Hasan Abadi et al, 2011). Emotion-focused couple therapy is one of these approaches which is based upon clear concepts of marital confusions and adulthood love. This approach assumes that marital confusions are formed and continued along with immersive mode of negative emotions and attachment harms (Johnson et al, 2005). This approach also assumes that marital conflicts form when each of the couples is not able to express his or her needs regarding satisfaction and security. Therefore, this approach has been titled as emotion-focused because it deals with the importance of emotion and conversations arisen from emotions in creation of important experiences. Another assumption of this approach is that emotions are not only the basic factor in marital conflicts but also a powerful and necessity element in changing maladaptive relations (Johnson, 2004). Emotion-focused couple therapy emphasizes on maladaptive attachments via mutual care, support and attention for one's and the spouse's needs. Couples express emotions which are less threatening instead of expression of powerful emotions (Javidi et al, 2013). This approach assumes that marital distress are formed and continued along with immersive mode of negative emotions and attachment harms (Miller et al, 2002). In such conditions, a therapist can analyze problems and ask couples to have active participation in therapy and create new forms of relational conversations in order to grow secure attachment (Sherma, 2007). In this approach, it is assumed that marital conflicts occur when spouses are not able to satisfy each other's attachment needs for security, safety and satisfaction. In other words, distressed marital relations indicate couples' failure to establish relationships with secure attachment style. Therefore, emotion-focused couple therapy concentrates on couples' emotional relations and removes their problems (Javidi et al, 2013). The influence of this approach on improvement of marital compatibility (Fallah Zadeh et al, 2012; Hasan Abadi et al, 2013; Greenberg et al, 2010), increase in intimacy (Fallah Zadeh et al, 2013), treatment of relational problems (Javidi et al, 2013; Zoukarini, 2012; Botler et al, 2002) and improvement of family performance (Javidi et al, 2013) was verified. Hasan Abadi et al (2012) investigated the influence of emotion-focused treatment on marital compatibility and positive emotions towards spouse in individuals who had relationships outside marriage. Results showed that there was a significant difference between experiment and control group. This shows that emotion-focused approach increased marital compatibility and positive feelings towards spouse in individuals who had relationships outside marriage. Dalgleish et al (2014) showed that emotion-focused therapy created positive changes in couples' marital satisfaction. Inefficient communicational models do not contribute to dissolution of important life problems and cause conflict in couples (Zang, 2007). Considering the above discussion, it can be said that it is important to deal with couples' communications and family problems. Psychologists believe that couples need specialists' helps in order to improve their communications. If communicational models are correct, marital conflicts are decreased and families and marriages become stronger. Therefore, it is important to investigate methods which help individuals. Because this approach has not received a lot of attention in Iran up to now, the present research tries to test effectiveness and efficiency of this approach. The present research tries to answer this question: "whether emotion-focused couple therapy influences on improvement of emotional coldness and marital conflicts in couples under coverage of Imam Khomeini Assistance Committee in Rasht City?"

**RESEARCH METHODOLOGY**

Because the present research tries to investigate the effectiveness of emotion-focused couple therapy on improvement of improvement of emotional coldness and marital conflicts in couples under coverage of Imam Khomeini Assistance Committee in Rasht City, research methodology was experimental with pretest-posttest design and with one control group.

Statistical population: the statistical population of the research included all couples who were under Imam Khomeini Assistance Committee coverage and had marital conflicts in the first quarter of 2014. This committee has offices in districts 1, 2, 3 in Rasht City and districts called Khomam, Khoshk Bijar, Sangar, Kuch Safhan, Lasht Nesa and Shaft. In total, these districts included 282 couples. 60 couples were selected by means of simple random sampling method. Couples who had conflicts and referred to consultancy centers of this organization were surveyed by means of marital conflict questionnaire and emotional coldness questionnaire. There are three criteria for classification of couples' conflicts in marital conflict questionnaire. Individuals whose scores ranged from 115 to 134 were selected as sample members after consulting supervisor professor. After implementation of the survey, the number of individuals who had conflicts was 60. In the next stage, this number was divided by two groups each containing 30 couples. They were put randomly in experiment and control groups.

Marital conflict questionnaire (MCQ): this questionnaire was designed by Barati and Sanayee (1996). It contains 42 questions which investigate 7 areas of couples' conflicts: reduction in cooperation, reduction in sexual relationship, increase in emotional response, and increase in relationship with one's relatives, reduction in spouse's relatives, separation of financial affairs, increase in attraction of child's support and total marital
conflicts. The questions were based on 5-point Likert scale from 1 to 5. The maximum score of the questionnaire is 210 and minimum score is equal to 42. Maximum score of each subscale is equal to the number of corresponding questions multiplied by 5. In this questionnaire, a higher score means higher conflict and lower score means better relationship (Sanayee, 2000). Individuals whose scores ranged from 115 to 134 were considered as individuals who had conflicts. Dehghan normalized the questionnaire on a sample of 30 individuals and calculated Cronbach's alpha to be equal to 0.71 for total questionnaire, 0.73 for reduction of cooperation, 0.60 for reduction in sexual relationship, 0.74 for increase in emotional response, 0.81 for increasing attraction of child's support, 0.65 for increase in relationship with one's relatives, 0.81 for reduction in relationship with spouse's relatives and friends, and 0.69 for separation of financial affairs. Total reliability of this instrument was equal to 0.52 (Barati, 1996) and 0.69 (Farahbakhsh, 2005). Total reliability of this questionnaire (Cronbach's alpha) was equal to 0.74.

Positive feelings towards spouse questionnaire:
This questionnaire contains 17 questions which have been designed to evaluate positive feelings and love towards spouse (Sanayee, 2000). This questionnaire has been prepared in two sections with 8 and 9 questions. A respondent is asked to specify his or her overall feeling towards his or her wife or husband within the past few months with numbers 1 (for severely negative feeling) to 7 (for severely positive feeling). The total score of the questionnaire is calculated by simply adding the score of questions. Reliability of this questionnaire was reported to be equal to 0.94 by means of retest method with a period of 1 to 3 weeks. Internal consistency of the questionnaire in Iran was equal to 0.89. This questionnaire has a significant correlation with marital compatibility, Navran relationship scale, Beck's depression questionnaire and therefore has a good concurrent validity (Sanayee, 2000). In the present research, the reliability coefficient was calculated by means of Cronbach's alpha (0.76).

Emotion-focused couple therapy treatment package: this package is 10 sessions each lasting 90 minutes. Treatment process sessions are as follows:
1. Acceptance and relationship establishment step, primary evaluation
2. Evaluation and diagnostics of the subject of relational conflict between couples
3. Deeper evaluation of couples interactions cycles/formula for the problem
4. Individual evaluations and achieving primary emotions-single-individual depletion/two-individual depletion
5. achieving infrastructural unknown emotions
6. a) re-forming the problem (we specify the main factor which caused conflict) via attention to negative cycles of interactions, b) increase in cognition about emotions, needs, communication is also taught in this stage.
7. Facilitation of expression of needs and demands and creation of emotional involvement
8. Strengthening of new positions and new cycles in relations, new strategies for solving old relational problems
9. stabilization of relations and integration
10. Conclusion of sessions and general analysis, posttest implementation

RESEARCH RESULTS

Table 1: distribution of research sample group in terms of education

<table>
<thead>
<tr>
<th>education</th>
<th>woman</th>
<th>Man</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>frequency</td>
<td>Frequency percentage</td>
</tr>
<tr>
<td>Primary school</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>Secondary school</td>
<td>5</td>
<td>16.67</td>
</tr>
<tr>
<td>Below high school</td>
<td>7</td>
<td>23.33</td>
</tr>
<tr>
<td>High school degree</td>
<td>4</td>
<td>13.33</td>
</tr>
<tr>
<td>Associate's degree</td>
<td>2</td>
<td>6.67</td>
</tr>
</tbody>
</table>

As it can be seen in table 1, most women had education level up to primary school (40% and most men had education level below associate's degree (30%).

Table 2: descriptive indices of the age of research sample group

<table>
<thead>
<tr>
<th>variable</th>
<th>Woman</th>
<th></th>
<th>Man</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>mean</td>
<td>SD</td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>age</td>
<td>24.67</td>
<td>3.27</td>
<td>32.04</td>
<td>3.05</td>
</tr>
</tbody>
</table>
As it can be seen in Table 2, men's age is more than that of women's.

Table 3: Descriptive information about marital satisfaction and emotional coldness in pretest, posttest, experiment group and control group

<table>
<thead>
<tr>
<th>Group</th>
<th>Test</th>
<th>Statistical index</th>
<th>Marital conflicts</th>
<th>Improvement in emotional coldness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiment</td>
<td>Pretest</td>
<td>Mean</td>
<td>138.32</td>
<td>47.34</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SD</td>
<td>4.67</td>
<td>3.68</td>
</tr>
<tr>
<td></td>
<td>Posttest</td>
<td>Mean</td>
<td>89.13</td>
<td>77.33</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SD</td>
<td>18.73</td>
<td>13.74</td>
</tr>
<tr>
<td>Control</td>
<td>Pretest</td>
<td>Mean</td>
<td>137.29</td>
<td>48.18</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SD</td>
<td>5.76</td>
<td>4.61</td>
</tr>
<tr>
<td></td>
<td>Posttest</td>
<td>Mean</td>
<td>142.73</td>
<td>49.17</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SD</td>
<td>15.96</td>
<td>12.32</td>
</tr>
</tbody>
</table>

Descriptive information about research variables in pretest and posttest has been presented in Table 3. Considering the research design (pretest-posttest with follow-up and control group), the best method for data analysis is use of multivariate covariance analysis.

Table 4: Wilk's Lambda test for mixed impact of emotion-focused couple therapy on improvement of emotional coldness and marital conflicts

<table>
<thead>
<tr>
<th>Wilk's Lambda Value</th>
<th>F</th>
<th>df1</th>
<th>df2</th>
<th>Sig</th>
<th>H</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.265</td>
<td>76.16</td>
<td>2</td>
<td>55</td>
<td>0.01</td>
<td>0.64</td>
</tr>
</tbody>
</table>

As it can be seen, after adjustment of mean value in which we eliminated the impact of auxiliary random variables statistically, experiment group and control group have differences in posttest of marital conflicts and improvement of emotional coldness. In order to investigate the significance of this difference, MANCOVA analysis with Bonferroni's correction was conducted in (0.025) significance level. Results of covariance analysis have been shown in Table 4. Considering Table 4 and based on Bonferroni's adjusted alpha (0.025), emotion-focused couple therapy had a significant influence on improvement of emotional coldness and couples' marital conflicts in a mixed variable (partial eta=0.64, Wilk's lambda=0.265, F(2, 55)=76.17, p<0.01). Significance in the mixed variable showed that participants in the two groups are different from each other and the independent variable had significant impact on means of groups. In other words, emotion-focused couple therapy was effective in improvement of emotional coldness and couples' marital conflicts that were under Imam Khomeini Assistance Committee coverage in Rasht City. Further, eta square values in Table 4 show a share of the variance which is related to the new mixed variable. As a general rule, if this value is greater than 0.14, the impact size is great. Eta squared is 0.64 which indicates a very high impact size.

CONCLUSION

The present research investigated the impact of emotion-focused couple therapy on improvement of emotional coldness and couples marital conflicts. Results showed that emotion-focused couple therapy has a significant influence on improvement of emotional coldness and couples' marital conflicts in a mixed variable (partial eta=0.64, Wilk's Lambda=0.265, F(2, 55)=76.16, and p<0.01), this result is consistent with the results of studies conducted by Hasan Abadi et al (2012), Bahari et al (2011), Zoucarinini et al, (2012), Greenberg et al (2010), Johnson et al (2005). As Zuccarini et al (2012) showed that emotion-focused couple therapy reduces conflicts and couples' communicational problems. Further, Javidi et al (2013) and Hasan Abadi et al (2012) showed that this approach was effective in improvement of couples' communicational behaviors and increase in marital satisfaction and positive emotions towards spouse. Emotion-focused couple therapy is a reliable method which helps reduce couples' conflicts and teaches them to establish good relationships. Clinical experiences of the researcher also shows that most conflicting and incompatible couples have weak communicational skills, low toleration of criticism, are weak at dissolving marital problems and low understanding of their life partners. They have positive viewpoints towards themselves and negative viewpoints towards their spouses. It can be said that couples who have conflicts and emotional coldness have lower psychological health. Such couples feel afraid and embarrassed in their friendly relationships with their spouses and therefore feel dissatisfied with their marriages. Emotion-focused couple therapy is based on attachment theories and directs couples towards their needs. Couples look for secure bases in elimination of their needs. This secure space is affected by couples' attachment styles (Johnson, 2004). In fact, individuals' attachment styles specify their communicational models and individuals transfer their emotions via communicational model. Therefore, when couples are angry, they
react with avoidance or demanding style. This approach believes that when attachment of one of the couples is harmed, their communications are harmed. Emotions are also effective both directly and indirectly in sexual and marital satisfaction because emotional need is completely related to attachment. In fact, this kind of therapy emphasizes on emotional participation in permanent incompatibility models. This approach tries to specify vulnerable emotions in couples and enable couples to create emotions securely and affectionately. In the present research, participants managed to receive the trainings well and use them in their relations. Contacting relatives and friends is the first way of confronting with fear and anxiety. Attachment controls human fears and is an antidote for unhappiness and sense of insignificance. According to attachment theory, for most adults spouse is the primary source of attachment, safety and sense of comfort. All these items regard emotions. According to this theory, isolation and absence of relationship with an attachment style (emotional coldness towards spouse) is dangerous and results in fear and absence of safety and is accompanied by responses like war, escape and yielding. This approach helps couples with re-establishing relationship with their spouses and tries to reduce emotional coldness. Just like all other studies, the present research also had some restrictions. This research lacked a follow-up stage. Presence of both partners in treatment sessions was another limitation which resulted in smaller sample, more limited access and longer therapy. Because emotion-focused couple therapy is useful in many marital aspects, it can be used as one of the preparation programs which can be taught to couples before marriage in psychological clinics and centers under Imam Khomeini Assistance Committee coverage.

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