

Predicting marital satisfaction based on sexual self-efficacy and early maladaptive schemas in married women

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Abstract

Introduction: one of major problems in married women is low sexual efficacy & early maladaptive schemas which effect to marital satisfaction them. The purpose of this study was to predicting marital satisfaction on based to sexual efficacy & early maladaptive schemas in 30-50 years married women.

Method: The research method was descriptive and correlation design. The statistical population consists of all Married Women (30-50 years) located in Tehran City in 1400. One hundred women by convenience sampling selected. The research tools included questionnaires of Vaziri & lotfi Sexual self-efficacy scale, yang & brown early maladaptive schemas test & inrich marital satisfaction. The statistical method of the study was Hierarchical multivariate regression.

Results: The findings show that the relationship between Sexual self-efficacy and marital satisfaction was examined in the first hypothesis. The results indicated that Sexual self-efficacy can predict marital satisfaction in married women (%26/7). The relationship between early maladaptive schemas and marital satisfaction was examined in the second hypothesis. The results indicated that early maladaptive schemas level can predict marital satisfaction in married women. This study revealed that there is a significant relationship between women Sexual self-efficacy with their early maladaptive schemas and marital satisfaction (%55/8).

Conciusion: As the results indicated, growth and promotion of the Sexual self-efficacy can be considered as methods for improving patient's early maladaptive schemas. This can be promoted and revolted through a rich Sexual self-efficacy environment and leads to better performance in the life.

Keywords: early maladaptive schemas, marital satisfaction, married women, Sexual self-efficacy

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Introduction:

Marital satisfaction is generally a process that occurs during the life of a couple. Since it requires the adaptation of tastes, cognition, personality traits, the creation of behavioral rules and the formation of constructive communication patterns between husband and wife, the study of marital satisfaction and its determining factors has always been considered by researchers (1). Larson believes that this is a process that occurs during the life of couples since it requires the adaptation of tastes, cognition, personality traits, the creation of behavioral rules and the formation of communication patterns, marital satisfaction involved objective feelings of satisfaction and pleasure experienced by a spouse when all aspects of their marriage are considered (2).

Marital satisfaction is also defined as the emotional reaction resulting from the subjective evaluation of couples from the positive and negative dimensions of the marital relationship (2). Studies suggest that people with high satisfaction feel more positive emotions, have a more positive evaluation of themselves and others, and describe them as pleasant, while people with low satisfaction have negative evaluation of past and future and life events and experience more negative emotions (3). The level of emotion plays a high role in marital satisfaction and early maladaptive schemas is one of the factors involved in the expressed emotion. Early maladaptive schemas are deep and pervasive patterns or themes that are formed in childhood or adolescence and persist in the course of life, and are related to one's relationship with oneself or others, and are highly inefficient (4).

In the psychology and psychotherapy, schemas are generally considered as a general organizing principle that is essential to understanding one's life experiences. Schemas control a person's thoughts and behaviors and have evolved over the years. The content of the schemas covers all aspects of a person's life, whether consciously or unconsciously. Also, the evolution of schemas is affected by culture, family, religion, and gender, age, or personality factors. In other words, schemas are stored to be activated under certain conditions. Schemas lead to bias in our interpretation of events, and these biases in interpersonal psychological pathology are characterized by misunderstandings, distorted attitudes, misconceptions, unrealistic goals and expectations (5).

Young identified a set of schemas and stated that these early maladaptive schemas have characteristics such as deep, inclusive, repetitive, and highly inefficient themes derived from memories, cognitions and bodily emotions. When they are activated, they include high levels of emotions that are result of the child's mood interaction with his or her inefficient experiences with family and others in the first years of life that continue in the course of life, have deep structures, and are undeniable and unchangeable. Researchers believe that schemas are being created due to non-satisfying the basic emotional needs of secure attachment to others, such as the need for security, articulation of needs and healthy emotions, self-motivation, recreation, and realistic limitations and self-control in childhood (4).

Beck stated that schemas may be inactive at some point in time and then gain energy and be activated rapidly as a result of changes in the type of inputs they receive from the environment. It leads to biases in our interpretation of events, and these biases manifest themselves in the psychological pathology between the couples in the form of misunderstandings, distorted attitudes, misconceptions, unrealistic goals and expectations. When a particular need is not met, maladaptive schema is created in that environment.

Due to non-meeting the needs of attachment and intimacy and frustration with the initial emotional relationship, maladaptive schemas related to intimate relationships and attachment are created. These beliefs and schemas related to interpersonal relationships are manifested in adulthood and in marital relationships and have a harmful effect on it (6). Schemas are also strongly associated with marital satisfaction because of the relationship and the effect they have on sexual self-efficacy. Researchers (7, 8) have emphasized the relationship between marital satisfaction and sexual self-efficacy. Sexual self-efficacy is a multidimensional structure that includes each individual's belief in his or her ability to function effectively, be desirable to a sexual partner, evaluation of his or her ability, and self-efficacy in sexual behavior.

Sexual function is associated with a higher understanding of sexual self-efficacy, and this sexual self-efficacy leads to better social and psychological functioning in people lives. Thus, when sexual self-efficacy is high, the sexual function will be more desirable (7). Sexual self-esteem is a predictor of higher sexual self-efficacy and, accordingly, increased sexual self-efficacy is needed to improve healthier sexual function. In addition to sex hormones, psychological factors also affect satisfaction and its components such as attractiveness, skills and experience, control of thoughts, feelings and sexual behaviors.

Selecting the right training method is important in strengthening the feeling of sexual self-efficacy and the sense of worth plays a major role in strengthening psychological factors. Most people who work in the treatment of sexual problems have observed that in evaluating the sexual problem and determining its nature, evaluating sexual drive, examining sexual growth and development, and in the information obtained, sexual self-efficacy and introversion or extroversion of pleasure play a key role as an intervening variable (9).

In addition to sex hormones, psychological factors have a significant impact on sexual satisfaction and self-esteem and its components such as attractiveness, skills and experience, control of thoughts, feelings and sexual behavior. Researchers state that women are better able to express their feelings, which can be used to promote their sexual satisfaction, and there is a positive and significant correlation between sexual satisfaction and marital satisfaction (10). Also, investigating the sexual satisfaction and its relationship with marital happiness has revealed that happiness and marital satisfaction have a very significant relationship with sexual satisfaction and marital satisfaction is significantly related to sexual satisfaction (8). Several factors play a role in the formation of sexual satisfaction and subsequently marital satisfaction. In this regard, sexual self-esteem and sexual self-efficacy are interrelated with this issue. One of the ways to increase marital satisfaction can be to enhance sexual self-efficacy by experienced staff in spouses, especially women. Given what was stated above, the present study was conducted with the aim of predicting marital satisfaction based on sexual self-efficacy and early maladaptive schemas in married women.

Methods:

The present study is applied research in terms of aim and the research method is correlational. The statistical population of the study included all married women aged 30-50 years living in District 4 of Tehran. A convenience sampling method was used. The sample size was determined at 100 people based on Tabachnick and Fidel formula. Research tools:

Enrich Marital Satisfaction Questionnaire: This questionnaire is a general measure of marital relationships. The scales of this questionnaire include: 1- ideal distortion, 2- marital

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satisfaction, 3- communication, 4- conflict resolution. The questionnaire is in the 5-point Likert scale, including the options of “strongly disagree”, “disagree”, “no idea”, “agree”, and “strongly agree”. Olson et al. have stated that the alpha of this questionnaire was 0.92 and according to the results obtained by Soleimanian in Iran, the alpha was 0.95. In a study conducted by Mir Kheshti (1996), Cronbach's alpha coefficient was 0.92, which indicates a high coefficient. The correlation coefficient of "Enrich Questionnaire" with family satisfaction scales is from 0.41 to 0.60, with life satisfaction scales from 0.32 to 0.41, which is a sign of construct validity. All subscales of the Enrich Questionnaire distinguish between satisfied and dissatisfied couples, indicating that the questionnaire has good discriminative validity (12).

Young Schema Questionnaire: This questionnaire has 76 items and was designed by Young and Brown and its original form has 215 items. To make the test shorter, the shortened form of this questionnaire was designed in 1999 and each item is scored on a 6-point scale. In this questionnaire, 5 questions measure a schema. In a study conducted by Welbern, Christine, Doug, Pontt Forgest, and Jordan, all 15 subscales of the short form of the schema questionnaire had sufficient to excellent internal consistency. Cronbach's alpha of all schemas was calculated from 0.63 to 0.94. Also, the reliability of the shortened form of the questionnaire was obtained at 0.76 by test-retest method (4). Fatehizadeh and Abbasian examined the concurrent validity of the questionnaire by examining the relationship between the schema test and the irrational beliefs test, which had a significant correlation of 0.16. Also, the face validity of the questionnaire was confirmed by 12 professors of Isfahan University (13).

Sexual self-efficacy questionnaire: The self-efficacy questionnaire was developed by Vaziri and Lotfi Kashani. The prepared questionnaire has 10 questions scored on a 4-point Likert scale from zero means not correct at all to 3 means completely correct. In preliminary studies, the reliability of the sexual self-efficacy questionnaire was obtained 0.86 using Cronbach's alpha method, 0.81 using Spearman-Brown split-half method, and 0.81 using Guttman method. Also, content validity of the questionnaire in Iran has been confirmed by the researcher and Cronbach's alpha has been obtained at 0.78 (7). Hierarchical regression test was used to analyze the data by observing the assumptions of statistical analysis.

Results:

Out of 100 subjects, 34 of the respondents were 30-34 years old, 23 were 35-39 years old, 25 were 40-44 years old, and 18 of the subjects were 45-50 years old. In terms of marital status, the highest number of participants in this study was related to the group with 12 years of marriage with 30 people.

Table 1: Mean and standard deviation of scores of subjects based on the research variables

Variable	mean	SD	Cronbach's alpha
Marital Satisfaction	41.41	13.07	0.72
Sexual self-efficacy	16.86	5.32	0.79

Early maladaptive schemas	234	11.12	0.77
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Before performing the analysis, its assumptions, including normality of distribution, equality of variances and linearity of the data were first examined. Kolmogorov-Smirnoff test was used to test the normality of the data distribution. The variables are at the level of interval measurement. To diagnose the linear relationship, tolerance and VIF tests were used. In the tolerance test, the obtained value should not be less than 0.1 and in the VIF test value should not be more than 10. In other words, the closer the tolerance value to 1 indicates that there is a linear relationship between the variables. The results of these two analyses are reported below. As seen, the results of these two tests show that the criterion values are not violated, so there is a linear relationship between the variables. To test this assumption, Durbin-Watson statistic was used, which was obtained at 2.412. Therefore, the assumption of correlation of residuals was rejected. Significance level is greater than 0.05 normal. It can be concluded that the variables have been distributed normally. Since the calculated F is not statistically significant, the assumption of regression homogeneity was confirmed.

Table 2: Results of Kolmogorov-Smirnoff test, Tolerance & VIF tests

Variable	tolerance	VIF	Kolmogorov-Smirnoff		
			Statistic	df	sig
Marital Satisfaction	0.623	1.43	0.21	99	0.619
Sexual self-efficacy	0.410	2.13	0.17	99	0.16
Early maladaptive schemas	0.623	1.43	0.32	99	0.231

Multivariate hierarchical regression analysis was used to test the research hypotheses. Thus, the variables of sexual self-efficacy in the first step and the early maladaptive schemas in the second step were entered into the equation of predicting marital satisfaction as predictor variables. The results are shown in Table 4-11. The variable of sexual self-efficacy, which was included in the equation in the first step of predicting marital satisfaction, significantly predicted marital satisfaction at the level of 0.01 ($p < 0.01$). Examination of the obtained multiple squared correlation showed that the value of the multiple correlation coefficient (R^2) is 0.267. It indicates that sexual self-efficacy explained 26.7% of the variance of marital satisfaction. The value of regression coefficient indicates that sexual self-efficacy ($p < 0.01$, $\beta = 0.278$) positively and significantly predicts marital satisfaction.

Table 3: multivariate regression to predict marital satisfaction based on sexual self-efficacy & early maladaptive schemas

Variables	b	SE	β	R^2	ΔR^2
The first step (beliefs ...)					
Sexual self-efficacy	1.223	0.234	0.278**	$R^2=0.278$	

Step 2 (Schemas)Early maladaptive schemas	-0.53	0.317	-0.322**	R ² =0.588	ΔR ² =0.291
				F=39.715	adjR ² =0.544

Based on the results of the table, by entering the early maladaptive schemas into the equation of predicting marital satisfaction in the second step, the R² value reached 0.558. This result means that early maladaptive schemas along with the sexual self-efficacy variable predict 55.8% of the total variance of marital satisfaction. The value of changes in R² (ΔR²) was 0.291. This result means that with inclusion of early maladaptive schemas in the prediction equation, and by controlling the effect of sexual self-efficacy, the level of variance explained by marital satisfaction has increased by approximately 29%, which is statistically significant at the level of 0.01 (p < 0.01, F=39.715). Accordingly, it was concluded that early maladaptive schemas predict marital satisfaction at a significance level of 0.01 and there is a two-way relationship between them.

Discussion and Conclusion:

Studies have indicated that sexual self-efficacy is related to marital satisfaction. Results of this study are in line with the results of previous studies, including; Besharat, Hooshmand, Rezazadeh, Gholam Ali Lavasani, Bryloskaya, Schunfield, Kochetko and Margraf, Hu, Jing, Wang, Rastgoo, Golzari, and Baratizadeh. Marriage is the most important intimate and emotional relationship that is very different from other relationships in all indicators of intimacy. Couples spend a lot of time together and as a result they experience high levels of satisfaction or conflict (6). Satisfaction with married life is the feeling of pleasure experienced by a couple when all aspects of their married life are considered (14). Marital satisfaction is a personal experience in marriage in which couples feel satisfied with being together. Several factors are involved in creating satisfaction in married life. In general, three important factors include a) Intrapersonal factors, with components such as personality traits and individual habits, expectations, attitudes and values. B) Interpersonal factors such as communication skills, ability to resolve conflict, issues related to sex, commitment and c) External issues such as relationships with relatives, children, parents and friends.

Meeting basic psychological needs is one of the most important aspects of an individual that is expected to be realized in close and intimate relationships and is one of the basic principles and foundations in marital relationships. Meeting these needs helps to increase marital satisfaction. Among various interpersonal factors, sex is one of the most important human needs, inefficiency of which causes many problems to the extent that it leads to lasting and profound disorders in marital relationships, hatred of spouse, resentment, jealousy, and competition for oppression of each other, blaming the spouse for many problems in life, a sense of unconscious revenge, a sense of humiliation by the spouse, a sense of insecurity, and sense of being ignored. These issues are reinforced or manifested by other tensions and differences, and widen the gap between spouses. Sexual self-awareness is also a set of primary and secondary sexual traits (direct and indirect physical and psychological sexual changes during life, especially during puberty, menopause and old age), sexual identity (which forms the independent and defined personality of adolescent girls and adolescent boys, men, women, parents, and sexual roles),

marital information (including sexual intercourse, pleasure, intercourse, etc.), sexually transmitted diseases (such as AIDS, hepatitis, gonorrhea, etc.) have a great importance.

Sexual awareness, as a component of sexual self-awareness, deals with a person's tendency to think and reflect on the nature of sexual issues. As mentioned, paying attention to it leads to marital satisfaction, so that sexual self-awareness has an effect on improving sexual function (7) and increasing knowledge in this regard has a direct effect on increasing sexual satisfaction and as a result sexual satisfaction increases marital satisfaction (16). Also, testing the second hypothesis of the study revealed that early maladaptive schemas are related to marital satisfaction. The results of this study are consistent with the results of previous studies (5, 2, 17, 4). It should be noted that early incompatible schemas have certain characteristics. These schemas are activated as accepted realities around themselves or the environment.

They are mixed with a significant level of emotion when they are activated. They are usually due to the interaction of the child's nature with different experiences and developmental period in relation to family members or caregivers. Early maladaptive schemas persist and are thus resistant to change. Early maladaptive schemas are applied when an incident occurs in the external environment that is related to that particular schema. With the onset of schema activity, thoughts are created in the mind that are negative and associated with a high level of emotional arousal (4).

The emotions experienced will vary depending on the conditions of the activated schema (such as hopelessness and depression), and the level of these emotions is much greater than the level of emotion produced by the underlying assumptions. Unmet basic emotional needs are considered as the main source of early maladaptive schemas, and unpleasant childhood experiences are considered as the evolutionary root of schemas.

Other factors, such as mood and cultural factors also play a role in this regard. Healthy styles are closely tied with happiness as opposed to exhaustion. When a person feels supported in social interaction, he or she will have an identity and work independence and feel satisfied and happy. This issue can also be due to the fact that appropriate skills increase people's performance and motivation, and when people perceive a high degree of collaborative atmosphere, they establish a more interactive relationship with each other (2). Maladaptive schemas that act as deep unconscious cognitions are internally related to mental health. From a schema point of view, most communication problems that people experience are influenced by their perception of themselves and others and this cognitive process is called schema. Early maladaptive schemas are fixed and long-term themes that are created in childhood and continue to adulthood, and are highly dysfunctional. Schemas affect the way people think, feel and behave, and after marriage, the factor of marital intimacy is explained by the schemas to some extent. Arousing schemas creates sexual attraction in romantic relationships, and sometimes couples' communication problems are a part of their lifestyle, rather than their current relationship with their spouses. The results of a study conducted by Andooz and Hamidpour (17) to investigate the relationship between early maladaptive schemas, attachment styles and marital satisfaction in couples showed that increasing maladaptive schemas reduces marital satisfaction secure attachment style is associated with adaptive schemas.

Regarding the characteristics of early incompatible schemas, it should be noted that when it is stated that a person has a schema, it means that the schema is always active, but the schema is an attribute that may not be active in a particular moment and in the absence of environmental

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activating factors, it might be improved or not aroused. They can also exhibit different behaviors depending on what coping style people use to respond to the schema depending on their mood. Hence, according to Young, the most damaging and powerful schemas are the four schemas of abandonment / instability, mistrust / misconduct, emotional deprivation, and defect / shame, which are in the first domain. In the present study, the limitations of the research included the specific age range of the sample, availability of the sample method and the descriptive nature of the present research design. Finally, it is recommended that this study be conducted in other cities and at other ages, with short and intensive classes, it is recommended to challenge and change early maladaptive schemas and self-efficacy of the married women.

Ethical considerations

The researchers followed the ethical protocols of the Helsinki studies and the subjects' information remained anonymous, and after the study, all this information will remain confidential. Also, all participants signed an informed consent form to participate in the research, the aim, importance and necessity of the research were explained to all of them and the control group was treated with behavioral methodology after determining the effectiveness of the intervention method.

Conflict of interest

Authors of the present study declared no conflict of interest for this research.

Practical application of the research

In the present study, married women with early maladaptive schemas lacked sexual self-efficacy and it showed an association with marital satisfaction. Also, by enhancing sexual self-efficacy and correcting the early maladaptive schemas of these women, marital satisfaction can be improved.

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