The effectiveness of narrative therapy on marital satisfaction and mental health of couples

Naseri S.,*¹ Darvishi M.,² Islami Shadbad S.,³ Karmi G.,⁴ Mahmoudi F.⁵

Abstract

Introduction: Marital relationship in life like any other relationship has positive and negative aspects. One of the most important determinants of success in marriage is marital satisfaction and mental health, so the present study was conducted with the aim of investigating the effectiveness of narrative therapy on marital satisfaction and mental health of couples.

Method: The current research was a semi-experimental type of pre-test and post-test with a control group. The statistical population of the research includes all couples who have been married for 1 to 5 years and had referred to Avai counseling center in Tehran due to marital dissatisfaction. 60 people (30 couples) were selected by available sampling and assigned to two experimental (15) and control (15) groups. Enrich Marital Satisfaction Questionnaire and General Health Questionnaire (GHQ-28) were used to collect data. The narrative therapy training package was held in 8 sessions of 90 minutes for the experimental group. SPSS-24 software was used to analyze the data.

Results:The results showed that narrative therapy increased the mental health of couples.Also, this program led to a significant difference in marital satisfaction between the experimental group and the control group.

Conclusion: The results of this study showed that narrative therapy was an effective method to increase the mental health and marital satisfaction of couples; Therefore, counselors and therapists can use narrative therapy to increase mental health and marital satisfaction.

Keywords: marital satisfaction, mental health, Mariage, narrative therapy

Recieved: 1/ June/ 2022 Accepted: 16/August/ 2022

Citation: Naseri S., Darvishi M., Islami Shadbad S., Karmi G., Mahmoudi F. The effectiveness of narrative therapy on marital satisfaction and mental health of couples, family and health, 2022; 12(3): 104-114

¹ - Doctoral student of health psychology, International Kish University, University of Tehran, Iran. Corresponding author, <u>naseri.f@yahoo.com</u>

² - Master's Degree in General Psychology, Faizul Islam Non-Profit University, Isfahan, Iran. Maryamdrv68@gmail.com

³ - MSc in General Psychology, Islamic Azad University, Abdanan branch, Abdanan, Iran.

⁴ - MSc in General Psychology, Islamic Azad University, Abdanan branch, Abdanan, Iran.

Golnar1359@gmail.com

⁵ - Masters in Clinical Psychology, Islamic Azad University, Tehran Medical Sciences Unit, Tehran, Iran. <u>F.mohammaddi96@gmail.com</u>, ORCID: 0000000226144163

^{© 2020} The Author(s). This work is published by family and health as an open access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by-nc/4.0/). Non-commercial uses of the work are permitted, provided the original work is properly cited.

Introduction:

Marriage has always been considered as the most important and the highest social custom to achieve the emotional needs of people. Marriage is a voluntary and conscious relationship and currently it is understood as a conscious choice of a spouse. Demographers consider the first year of marriage or a little later as the most difficult adjustment period in marriage (1). In the first weeks and months of marriage, there are serious and frequent disagreements that, if not resolved, can threaten marital satisfaction and stability (2). Divorce is the most reliable indicator of marital turmoil (3) and it indicates that marital satisfaction is not easily achieved. In Iran, in the 1960s, the ratio of divorce to marriage was 3.6%, in the 1970s it was 3.8%, in the 1980s, it was 3.10%, and in 2016, it was 22.6%, and in the first six months of 2018, this figure was higher. gone. According to United Nations statistics, the divorce rate is higher in our country compared to other countries in the region, and it is either the same or lower than in developed countries.14% of divorces currently occur in the first year and 50% of divorces occur in the first 5 years of life (4). The high quality of marriage is generally related to physical and mental health (5) and brings higher levels of success and reduction of behavioral problems in families (6). This makes clear the importance and necessity of the attention and intervention of couples therapy specialists in the early years of marriage, as a measure to change the growth process of dissatisfaction and separation of couples. In general, the first stages of a couple's relationship are characterized by idealism, and it is natural that it will not last (7) and due to the conflict of ideals and ideals with reality, dissatisfaction with cohabitation and marriage will appear. Unreal fantasy love confronts reality and some couples do not replace their romantic love with developed intimacy and realistic expectations, and for this reason, they suffer from feelings of disappointment, growing resentment, and reclaiming individuality (8). There is not much agreement among experts in the definition of public health, and in general they have defined public health as the complete physical, mental and social well-being of a person in such a way that there is a dynamic and mutual influence between these three aspects. Despite the difference in the definition of public health, mental health is defined as the ability to communicate harmoniously with others, to change and modify the personal and social environment, and to resolve conflicts and personal desires logically and to have meaning and purpose in life (7). A person has mental health that is far from anxiety and symptoms of disability and can establish a constructive relationship with others and is able to deal with the pressures of life.

It should be said that today, different psychotherapy approaches have been proposed to treat marital problems, and these approaches can be useful for women who have marital problems. One of these approaches, which is derived from the views of postmodernism, is the narrative therapy approach, which is focused on the inner reality of everyone (9). The underlying assumption of this therapeutic approach is that the problem is the problem, and the individual and the family are not the problem. In narrative therapy, human problems are viewed as issues that arise from painful stories that affect a person's life (10). In this approach, therapy is an examination of how to analyze people's life stories by themselves, and general focus and reproduction to create and There are new meanings in life. Problems become stories that they have agreed to tell themselves. (9) The main

focus of narrative therapy is interpretation and interpretations of meanings that people attribute to events and incidents in their lives. Narrative therapists help clients to achieve broader and more unique interpretations about themselves and situations. The basic components of narrative therapy are emphasizing strengths, clients looking at clients and therapists as partners, accepting a Kurdish approach. Constructivist in the meaning of reproduction on the form of narrative meaning.(11) Narrative therapy is one of the methods of psychotherapy based on reporting fictional events from a person's life. Every person has a tendency to narrate his life like a story that has a beginning and an end. Based on the narrative that a person tells about himself, he becomes aware of his feelings and the whole of his life and gains new experiences. (12) Kurdish Narrative Therapy is where people project their life events in the dominant narrative and create a new narrative with a fresh look at it.(13) In narrative therapy, it is believed that people give meaning to their lives and experiences through narratives, and the existence of narratives full of problems leads to the occurrence of problems, and a problem is a story that is full of failure, despair and unhappiness. 14) Therefore, the main goal of narrative therapy is to help clients to revise and correct their lives.

may(11)Source Narrative therapy is especially useful for creating space and time to meet people's need for marital satisfaction. The narratives and stories we tell about our lives are important because these stories enable us to put order to the events of our lives. Let's forgive and build our past, present and future experiences based on logic. Also, one of the issues that play a major role in situations of marital dissatisfaction is the issue of time, so that the past time is too sad to be remembered, the present time is full of pain and the future time is unimaginable, so the victim or harm Visibility cannot regulate and control time, but narratives are not only organizers of time, but they also give meaning to our temporal experiences. So that the memories of the past are healed in narrative therapy, patience for today is increased and we begin a new imaginary future (15) Narrative therapy believes that people make sense of their lives and experiences through narratives. The existence of narratives full of problems leads to problems, and psychological changes and problem solving are possible through problematic narratives. Narrative therapy seeks to find narratives that shape the relationship between couples in marital relationships. It also seeks to facilitate the process of collaborative rewriting of their problematic narratives (16). In this approach, the client and the therapist are actually editors of the client's personal biography, and therapy is the editing of the personal biography. In other words, it provides an active role for clients in treatment. In this way one learns to take responsibility for the relief and recovery of one's psychological problems and to practice it because one thinks about it while writing one's life story. Select parts of it and leave out the less important parts, in fact it becomes the editor of its own story and this is what is emphasized in this approach. It means that people adjust and edit their life stories. (17) The process of creating new stories creates a sense of personal need in family members that enables them to fight for a better future.(18)

Narrative therapy is the process of helping people overcome their problems by engaging in therapeutic conversations that involve telling, listening, retelling, and re-hearing stories. This approach sees and imagines people as the main experts in their lives and problems as separate parts

of people. People have many skills, beliefs, values, and abilities that help them reduce the effects of problems in their lives, as well as a way to understand human experience and clinical expression.(19) In narrative therapy, human problems are considered as issues that arise from painful stories that affect a person's life. The treatment process is to examine how people analyze their life stories and the overall focus and emphasis is on creating serious meanings in life. Problems are seen in the form of stories that people accept to tell themselves (20) Narrative therapists pay less attention to objective claims and stories and are more interested in the social benefits that are expressed in the stories of a person's life. Also, in narrative therapy, life can be found in a different way and in a new perspective. In fact, the rewriting of life is the ultimate goal of the treatment process, and life will change with the writer's revision (21). Research has shown that couples who have the ability to express and cope with the narratives and stories of their past lives, cope more easily with current events (22).

Methods:

The current research was a semi-experimental type of pre-test and post-test with a control group. The statistical population of the research includes all couples who have been married for 1 to 5 years and have referred to Avai Tehran Counseling Center due to marital dissatisfaction. Among the couples, 60 (30) couples were selected by sampling method. and they were placed in two experimental (15) and control (15) groups. Enrich Marital Satisfaction Questionnaire and General Health Questionnaire (28 GHQ) were used to collect data. The narrative therapy training package was held in 8 sessions of 90 minutes for the experimental group. SPSS 24 software was used for data analysis.

The inclusion criteria are: 1. being a student, 2. people not participating in a previous treatment program, 3.not having a mental disorder or a history of mental illness and hospitalization in psychiatric departments, 4. not using drugs (in order to reduce the effects of the intervening factors of drug, narcotic and alcohol consumption, even in the form of tefani) and the exclusion criteria included 1- not attending treatment sessions. (28)

The 28-question form of the General Health Questionnaire was created in (1989) by Goldberg and Hillier and has 28 items and 4 subscales of 7 questions (physical symptoms, anxiety, impairment in social functions and depression). This questionnaire is graded as 0, 1, 2, 3, and research questions under the title of standardization of general health questionnaire were conducted on 571 female and male undergraduate students of Tarbiat Moalem University in 1375-76. The reliability of the entire questionnaire was estimated at 0.82 using Cronbach's alpha method, and the construct validity value of this questionnaire was also 0.82 (Qasemi and Sarokhani, 2014). In the present study, the reliability of the Cronbach's alpha method for the total mental health score was 0.77.

Enrich Couple Scale (ECS): Enrich Couple Scale (ECS) is a tool to check the level of marital satisfaction. This is a 35-question scale instrument that measures marital satisfaction in 4 areas: ideal distortion, marital satisfaction, communication, and conflict resolution on a 5-point Likert scale from completely agree (1) to completely disagree (5). The original form of this scale was implemented in 2000 on 25,501 married couples and the alpha coefficient of the scale for the

subscales of marital satisfaction, communication, conflict resolution and ideal distortion was obtained as 0.86, 0.80, 0.84, 0.80 respectively. The retest reliability of this scale was calculated as 0.86, 0.81, 0.90, 0.92 respectively for each subtest. The alpha coefficient of this scale in Asoodeh's research (2009) with the number of 365 couples; 730 people have obtained 0.68, 0.78, 0.77 respectively. The correlation coefficient of Inrich scale with marital satisfaction scales is from 0.32 to 0.42 and with family satisfaction scales from 0.41 to 0.60, which shows the construct validity of Inrich scale (12) All subscales of Inrichscale separate satisfied and dissatisfied couples and this shows that this scale has a good criterion validity.

Summary of narrative therapy sessions

1.Getting to know the members, explaining the logic and goals of training sessions, explaining and presenting the therapeutic-educational model.

2.Describing the story of life according to history in order to distinguish the dominant and marginal stories of women in the story of their common life.

3.Teaching the skills of overcoming the problem and its appropriate solutions, understanding the problem-oriented story and its supporting stories, listening carefully to the language, words and metaphors of the references, using the language of externalization and separating the problem from the identity and communication of the references / examining the narration of the statement each member from the other members' point of view.

4.Providing an external explanatory perspective of the problem to the couple by creating a new kind of relationship, encouraging clients to describe small narratives and externalize the problem (where the person differentiates between himself and the problem) and the method was to ask questions that people, traits that they attributed to themselves to change and using metaphor/encouraging the reference to clarify his reaction and opinions in front of these problems and events through effective questions to challenge the problematic story.

5.Having members share their stories with the discussion group about important people in their past and present lives to recall unresolved problems, naming the problem, deconstructing problematic narratives/reinterpreting, and re-meaning by relabeling the problem. Alternative and preferred narratives help clients gain awareness, empowerment, a sense of personal agency, and hope by discussing the unique consequences of encouraging members to engage in conflicting behaviors with problematic stories between sessions.

6.The expression of the types of skills are: a) Speaking skills: everyone should speak on their own behalf/describe their sensory information/express thoughts/express feelings/propose wishes b) listening skills asking clients for Writing unposted letters, forgiving, forgetting or letting go of bullies, abusers, and those who have caused unpleasant memories for clients in the past.

7.Creating a new window for the perceptions and assumptions of couples about the problem and authoring a new story by the reference based on the strengths and examining the new story of women.

8.Summing up the sessions and doing the post-test and getting feedback (Evaluating the results of the narrative therapy and fixing the defects, most of the work of the narrative therapy includes telling and retelling. The treatment ends when the client feels that his narrative has changed).

Results:

The mean and standard deviation of mental health variables and marital satisfaction in two narrative therapy training groups and the control group, separated by pre-test and post-test, are shown in Table (1).

Variable	Group	Average		The standard deviation		
		Pre-exam	post-		pre-	
		test		exam	post-test	
	Narrative Therapy	134/08	64/25	47/56	29/85	
Mental health						
	Control	68	151/47	9/78	21/42	
	Narrative	22/20.	18/68	1/95	1/78	
Marital	Therapy					
satisfaction		23/68.	21/66	1/75	1/87	
	Control					

Table (1): Mean and standard deviation of variables of mental health and marital satisfaction

As seen in Table 1, changes in pre- Test, post-test in mental health variables and marital satisfaction occurred in narrative therapy group. In narrative therapy, the mean and standard deviation of mental health and marital satisfaction scores decreased significantly in the post-test compared to the pre-test. In this research, the statistical test of covariance has been used due to its suitability and compatibility with the research hypotheses.

Table 2) Comparison of the difference between post-test and pre-test scores of mental
health and marital satisfaction in two groups of narrative therapy and control.

Source	The dependent variable	SS	DF	MS	F	Р
Group	Mental health	47611/06	1	47611/06	23/70	0/001
	Marital satisfacation	1604/41	1	1604/41	8/50	0/001
	Mentalhealth	18262/52	58	314/871		
Fault						
	Marital satisfacation	9/52	58	0/164		
	Mental health	121421/35	60			
Total						
	Maritalsatisfacation	2105/22	60			

According to the results of Table 2, after adjusting the pre-test scores, the difference between the groups is significant at the alpha level of 0.001; So,The research hypothesis based on the

effectiveness of narrative therapy on marital satisfaction and mental health of couples and the difference between groups in the post-test is approved.

Discussion and conclusión:

The present study was conducted with the aim of investigating the effectiveness of narrative therapy on marital satisfaction and mental health of couples. Results obtained from the post-test comparison of mental health and marital satisfaction in two groups, indicates that after participating in the meetings Narrative therapy, the mean scores of the variables mentioned in the post-test phase have decreased compared to the pre-test phase, so the narrative Therapy has had a significant effect on marital satisfaction and mental health of couples. The findings of this research with the researches of art educators and colleagues (23), Amini Sawlari and Baghban (24), Walsh (25); Denton (26), Sharma (27) who in the field of the effectiveness of the emotion-oriented approach The level of sexual satisfaction of the couple is consistent.

For example, Narimani, Abbasi, Bagian Koleh Marz and Bakhti (2013) came to the conclusion that narrative therapy can adjust incompatible schemas between couples. In explaining the effect of narration It can be pointed out that this approach has a significant effect in working with different groups such as conflicts Marital, there has been a desire for forgiveness and family function. Also, due to the fact that in all these groups there are some kind of couples had marital problems, so the effect of narrative therapy on marital satisfaction and mental health of couples can be justified.

Limitations:

Due to the circumstances, the opportunity to review long-term research is not possible. including borders Another was the small number of subjects and their evaluation tools. Therefore, it is better to observe some points in generalizing the results.

Conflict of interest:

The authors hereby declare that this work is the result of an independent research and there is no conflict of interest with organizations and has no other persons.

Acknowledgment:

The authors of the article express their appreciation and thanks to all the participants in the research.

References:

1- Fincham F., May R.W.. Infidelity in romantic relationships. Current opinion in psychology, 2017; 13:70 -74.

2- Fisher H.E., Aron A. Infidelity: when, where, why. IN WR Cupach and BH Spitzberg, the Dark Side of Close Relationships II, New York: Routledge, 2010: 175-196.

3- Harris C.R.. A review of sex differences in sexual jealousy, including self-report data, psychophysiological responses, interpersonal violence, and morbid jealousy. PersSocpsycholrev, 2019; 7 (2): 102-128. DOI:10.1207/S15327957PSPR0702_102-128

4- Mohammad Nejadi B., Rabiei M.. The effect of schema therapy on quality of life and psychological well-being of divorced women. Journal of Law Enforcement, 2015; 4(3): 179-190. [Persian]. Doi: <u>10.22055/PSY.2019.24944.2008</u>

5- Lamers SMA., Westerhof GJ., Kovacs V., Bohlmeijer ET. Differential relationships in the association of the Big Five personality traits with positive mental health and psychopathology, J Res perso, 2012; 46(5): 517-24.<u>https://doi.org/10.1016/j.jrp. 2012.05.012</u>.

6- Mojahed A., Kalantari M., Molavi H., Neshatdust H.T., Bakhshani NM. Comparison of Islamic oriented and classic cognitive behavioral therapy on mental health of martyrs and veteran wives. J Fundamentals of Mental Health, 2010; 11(4): 282-91[persian].

7- Panahifar S., Yousefi N., Amani A.. The Effectiveness of Schema-Based Couple Therapy on Early Maladaptive Schemata Adjustment and the Increase of Divorce Applicants Adaptability. Kuwait Chapter of the Arabian J Business and Management Review, 2014; 3(9): 339. [Persian] DOI:10.12816/0018357

8- Rahim Aghaei F., Hatamipour K., Ashoori J. The Effect of Group Schema Therapy on Depression Symptoms and Nurses' Quality of Life. Nursing Education J, 2017; 6(3): 17-22. [Persian]

9- Fazd M.. The emerging for Narrative exposure therapy: A review, clinical psychology review, 2010;,30(8):1030-1039. DOI:<u>10.1016/j.cpr.2010.07.004</u>

10- Nelson-Jones R.. Nelson-jones theory and practice of counseling and Rethinking Rumination. Prespective oh Psychological Science, 2013; 3(5): 400-424.

11- Polkinghorne D.E. Narrative therapy and postmodernism. In Angus, L. E & McLeod, J. (Edi). The handbook of Narrative and psychotherapy. Sage publications India Pvt. Ltd; 2014

12- Faircloth G.A. Qualitative Study/Counter-Story Telling: A Counter-Narrative of Literacy Education for African American Males. (Dissertation). University of Miami; 2015

13- Qadri Z., Khodadadi Z., Abbasi Z. The effectiveness of integrated group therapy with the method of re-decision and narrative therapy on emotion control in adolescent girls in Shiraz. Women and Society Quarterly, 2010; 1(3): 137.

14- Looyeh M.Y., Kamali K.H., Ghasemi A. Phuangphet Tonawanik Treating social phobia in children through group narrative therapy. The Arts in Psychotherapy, 2014; 41(2): 16-20. DOI:10.1016/j.aip.2013.11.005

15- Malcolm L., Ramsey J. On forgiveness and healing: Narrative therapy and the Gospel story. Word & World, 2010; 30(1): 23-32. <u>http://digitalcommons.luthersem.edu/faculty_articles/146</u>

16- Tabrizi M., Kardani M., Jafari F. Family describtive Dictionary. Tehran. Fararavan Publication; 2006

17- Banker J., Kaestle CH., Katherine A. Dating is Hard Work: A Narrative Approach to Understanding Sexual and Romantic Relationships in Young Adulthood. J Contemp Family Ther, 2010; (32): 173-191. DOI:<u>10.1007/s10591-009-9111-9</u>

18- Ball J., Mitchell P., Malhi G., Skillecorem A., Smith M. Co-Constructing a Marriage: Analyses of Young Couples' Relationship Narratives. Monographs of the Society for Research in Child Development, 2011; 12: 37-51. <u>https://doi.org/10.1111/1540-5834.00018</u>

19- Fiese B., Sameroff A. The Family Narrative Consortium: A Multidimensional Approach to Narratives. Monographs of the Society for Research in Child Development, 1999; 64(2): 1-36. DOI: <u>10.1111/1540-5834.00017</u>

20- Priscilla WB., Vandergriff-Avery M. Marital Therapy and Marital Power: Constructing Narratives of Sharing Relational and Positional Power. Contem Fam Ther, 2001; 23(3): 259-308. 21- Andrew SB., Brandt CG., Branden HH.Enhancing Narrative. Couple Therapy Process with an Enactment Scaffolding. Contem Fam Ther, 2003; 25(4): 391-414. DOI:10.1023/A:1027308719029

22- Nouri Tir-Tashi, E., Kazemi, N. The Effectiveness of Narrative Therapy on Amount of Forgiveness in Women. Journal of Clinical Psychology, 2012; 4(2): 71-78. doi:10.22075/jcp.2017.2090

23- Honar Parvaran N., Tabrizi M., Navabi Nezhad SH., Shafi Abadi A.. Efficacy of Emotion-Focused Couple Therapy Training with Regard to Increasing Sexual Satisfaction among Couples, Thought and Behavior in Clinical Psychology, 2010; 4(15): 59.

24- Amini Solari F., Yaghban A. The effectiveness of marital style narrative therapy on the marital satisfaction of Isfahan couples, Master's thesis, Isfahan University, Faculty of Educational Sciences and Psychology; 2010

25- Walsh S.B. Emotion-focused couple therapy as a treatment of somatoform disorder, thesis for doctor of philosophy in human development marriage & family therapy program Virginia Polytechnic Institute & State University; 2002

26- Denton W.H. Emotion- focused therapy for couple in the treatment of depression. The American Journal of Family Therapy. 2003; 31: 345-353. https://doi.org/10.1080/01926180390232266

27- Sherma R. A task analytic examination of dominance in emotionfocused couple therapy. thesis for degree of doctor of psychology of York university, Toronto; 2007