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## **Effectiveness of training components of structural approach in the quality of marital relationships**

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### **Abstract**

Communication plays a central role in the marriage and effective and efficient communication (marital quality) between husband and wife stands amongst the most important aspects of family. Families with optimal performance are the smallest components that compose a healthy society with low damage. Therefore, in this research, components of structural approach were taught to enhance marital quality in couples referred to counseling clinics of psychology department of Mashhad. The sample included 10 couples (10 women, 10 men) referred to the counseling and psychology clinic of the Department of Educational Sciences, Ferdowsi University who were randomly assigned into two experimental and control groups. Both responded to the marital quality scale (RDAS) in the pre-test and post-test. As a therapy group, structural approach component was taught to the experimental group. The results were analyzed using covariance analysis. Results indicate the significant differences between the effects of structural approach in the marital quality of the experimental group in comparison with the control group. According to the results of the survey, we can devote more attention to the structural approach in couple therapy and family therapy and it could be considered as a potentially useful approach in this area.

**Keywords:** Structural approach, marital quality, couples.

### **Introduction**

There have been many studies in the field of the quality of life; however, there is no exact definition on the quality of life (Lee, 2006). Although people instinctively and easily understand its meaning but there's no exact definition of that. Many studies do not convey any meaning for the quality of life, which might be due to its simplicity or due to its complex nature. Due to the lack of consensus on the definition of this term, we expect the related research and studies to define this concept and its dimensions clearly (Fayers and Machin, 2000). Most experts in this field agree that the quality of life considers positive and negative facts of life beside each other and has several dimensions. On the other hand, it can be seen as a dynamic and subjective concept which should be based on the individual's opinion and

not a substitute individual. The World Health Organization (1996) defines the quality of life as people's perception and assessment of their life situation, affected by the values that define the circumstances in which they live. From the perspective of this organization, quality of life is defined as Individuals' beliefs of his culture and the system of values and the relation of these intakes with expectations, goals, values, and priorities.

History of the concept of quality of life of human perception dates back to 385 BC. Aristotle deals with human happiness in Nicomachean book of ethics. What is the bliss? What activities does it involve? And how can we be happy? (Fayers and Machin, 2000). But the term quality of life was not used until the twentieth century. Arthur Cecil Pigou used the term "quality of life" in 1920 in the book entitled "Economy and Welfare".

After the decade 1930, American researchers began to evaluate the quality of life in different parts of the United States. Theoretical frameworks of family therapy were developed in different forms in the late 1940s and early 1950s. Previously proposed structures in systems theory primarily focused on the circular path or cycle and behavior of the feedback. Structures such as communication, information process, positive and negative feedback, etc., were all presented. Traditional verification of epistemological frameworks with systematic and phenomenological constructs has been challenged to understand the modernity and this has caused the redirection from the relationship between the individuals to the events and situations in which they are (Khodayarifard and Abedini, 2010).

Structural family therapy is one of the system approaches that know the root of the lack of quality of marital relationships in relationships and interactive patterns of family (Baghban and Moradi, 2004). In particular, the structural family therapy considers the interactions among the participants and pays particular attention to the couples' behavior towards each other with their emotional needs (Lindsay and Powell, 1994). In general, in structural family therapy, family sub-systems, as well as the boundaries between different systems and between the family and the larger environment are brought into light. General principles that have been proposed due to the therapy are the following:

A- The borders meaning who are participating in specific interactions.

B- The coalition meaning the implicit and explicit intermittent or continuous unity between two or more members of the nuclear family or the extended family (Kaplan, Sadock, 2003). Every family should take the organization of the hierarchy into account and these realities that who is in the first base of power and who is in the secondary base must be specified, because when the positions fail in the hierarchy, tension arises and its witness is the power struggle (Haley, 1976). The family structure is outlined with three characteristics: richness or poverty of family function, flexibility or lack of flexibility and unity or lack of unity in family (Barker, 2007).

Family structure is an invisible set of family characteristics through which family members are related to each other. Family reaches healthy functioning when that boundaries, rules, roles and power is obvious and clear in the family (Minuchin, 1946). In Minuchin's structural approach some changes should be made in family structure before removing the morbid symptoms. Structural family therapists emphasize on the whole family system, impact on family functioning, and interconnected hierarchy of sub system as key determinants of well-being. Underlying structure of family is the flexibility in responding to changing conditions throughout the life cycle of family which will give rise to effective or ineffective patters. In addition, it is supposed that changing behavior and decrease of symptoms of an individual appears subsequent to changing the context of family interactions

(Goldenberg and Goldenberg, 2012). Review of the overseas literature makes it clear that researchers have done many studies on marital quality:

Marital quality in couple's communication (Hazan and Shaver, 1990; Dewitte and Houwer, 2008; Crowley, 2006; Collins, 1996).

Marital quality and marital satisfaction (Simpson, 1990)

Marital quality and spousal interactions (Feeney, et al. 1994)

Marital quality and conflict (Simpson, 1990; Creasey, 2002)

Marital quality and conflict adaptation model (Alexandrow, 2003; Pietromonaco, et al. 2004)

Marital quality and Pattern of desire - avoid (Eldridge and Christensen, 2002; Haseley, 2006)

Marital quality and style of expressing emotions (Dewitte and Houwer, 2008)

Marital quality and marital relationship violence (Kimberly and Baker, 2008)

Marital quality and marital satisfaction (Haseley, 2006)

Evidence show that overseas research on marital quality is increasing and studies in the field of components of structural approach training are being vastly conducted. However, few studies have been done in Iran and this issue requires further study. The present study sought to assess the impact of structural components approach on the quality of marital relationships.

### Method and materials

The semi-experimental method with pre-test, post-test and control group design was employed. The study population in this study included all the couples who referred to the counseling center in the department of Education and Psychology of Ferdowsi University for their problems with the quality of life. The inclusion criteria were a minimum qualification of school, having a minimum length of three years of marriage, lack of acute mental – personality disorders and being non-addicted. For selection, at first the clients were debriefed in meeting announcements and registration requirements were explained to them. Then, after a preliminary registration of volunteers, a clinical interview was conducted and marital quality questionnaire was completed by the qualified couples. 10 couples (20 people) who had scored the lowest on marital quality were selected as the sample. Then, component structural approach was presented in 8 two-hour sessions to the experimental group. After finishing the training course, the questionnaire was administered again. Structure of training courses of structural approach is listed in Table 1.

session	Titles and therapeutic purposes
First	Meet the Members, help to understand the factors affecting marital quality. Stated objectives and provisions of the Group, the construction and the general treatment of marital quality
Second	Family assessment, familiarity with the concept of sub-system, focusing on the family system, couple's engagement for change in family The whole family system. The influence of the degree of family system - an interconnected system of its sub- systems
Third	Training techniques of Couples therapy and do more and better communication patterns.
Fourth	Expression of common communication patterns, the triangles around family problems
Fifth	Meet the family unity of the family system. Organizational hierarchy of the family. Independence of system performance.
Sixth	Restructuring and changes in family
Seventh	Practice these concepts, and advance the process.
Eight	An overview of all sessions and the strategies to improve the situation.

Marital quality scale, revised form (RDAS): The questionnaire was designed by Busby et al. (1995) and includes 14 items. The original form of this scale has 32 items and is based on the theory of Levis May and Spinner on marital quality (Cody and Richard, 2005). Bradbury et al (2000) introduced this 14-item questionnaire as suitable tool for assessing marital quality after discussing the theories about marital quality. The questionnaire is scored on 6-point Likert scale (between 0 permanent disagreements and 5 permanent agreements). The three subscales of this questionnaire include agreement (statements 1 to 6), satisfaction (statements 7 to 10) and cohesion (statements 11 to 14) that compose the total score of marital quality and high scores indicate higher marital relationship quality.

The original questionnaire was in English which was translated into Persian. The content validity were determined by the experts and limited reforms were carried out; thus, the Persian form of the scale was prepared following multi-stage assessments, reviews, changes and corrections. Cronbach's alpha reliability of the questionnaire in the study by Cody and Richard (2005) for the three subscales of agreement, satisfaction, cohesion are .79, .80 and .90, respectively. The questionnaires which were used for criterion validity included Marital Satisfaction Inventory (ENRICH), a questionnaire for assessing family cohesion and adjustment (FACES-III) and Couple Adjustment Scale (DAS). The psychometric properties of the scale were revised in 2011 by Yoosefi (Yoosefi, 2011).

### Results and findings

In Table 2, the average and standard deviation of marital quality variables of the sample is reported. The covariance analysis was used for analytical results of this study. Therefore, the parametric tests should be conducted to assess the pre-assumptions of this test.

groups	pre-test					post-test			
	Numb er	Mean	Standar d Deviation	Ma x	Min	Mean	Standar d Deviation	Max	Min
treatment	10	31.50	9.25	45	20	46.30	8.78	57	30
control	10	26.90	6.08	35	18	26	6.07	34	18

Table 3 - Evaluation of the homogeneity of variances

Scale	Slope homogeneity of variance				
	Sum of squares	df	Mean squares	f	sig
Marital quality	102.052	1	102.052	2.488	0.134

In general, the pre-assumptions are applied and therefore, covariance analysis can be used.

Table 4 - Results of ANCOVA marital quality scores

Variables	Sum of squares	df	Mean squares	F	Sig	Eta Squared
pre-test	267.711	1	267.711	6.001	0.025	0.261
group	1483.877	1	1483.877	33.262	0.000	0.662

error	758.389	17	44.611	-	-	-
total	29223.000	20				-

As shown in the table, synchronous variables on the dependent variable are deleted and the factor F is calculated, as it can be seen there is significant difference between the adjusted mean scores of marital quality in the post-test, ( $p < .01$ ). Therefore, the main hypothesis was confirmed. The training component structural systems approach has positively affected the marital quality of the participants in the experimental group. The effect of the post-test was .662.

### Discussion and conclusion

The aim of the present study was to investigate the effectiveness of training component of the structural system approach on the quality of marital relationships. Mechanism of changes in structural family therapy, through interventions such as the incorporation of technology, outsourcing and etc. produced impact on the reconstruction of the family including setting boundaries, resolving the conflicts of marital subsystems and effective training in the field of therapeutic intervention that led to positive changes in family structure and functioning of the family. The test scores of marital quality subsequent to the training sessions represent the effect of this training on marital quality.

According to the results, our hypothesis was confirmed. This result suggests that training the components of structural systems approach is effective in marital quality. These results are consistent with the results of the findings of previous research on marital quality. Structural approach helps couples with the knowledge of structuring their families and becoming familiar with the implicit operation of their family. In a sense, structure of the family is an invisible set of special family roles through which family members are related to each other. Structure will have better or worse effect on families and families who have open and proper construction improve more quickly and run better in the long run as compared with families without such an arrangement. The structural approach focuses on the family as a whole and the interactions between the systems as well as family members. From this perspective, families are conceptualized as living systems. Moreover, subsystems are important aspects of this theory. Subsystems of family are smaller units of the system as a whole and exist to do many tasks of family.

It can be said that marital quality issue has a significant impact on the family system and its borders that consists of several systems such as the constellation of marriage, parenthood, and etc. Therefore, the education and enrichment of the quality of marital family has always been in dire importance and the need for further research in this realm is clearly marked.

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