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Schema therapy and marital intimacy

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Abstract

This study investigates the effectiveness of schema therapy on the marital agreement of client who attends counselling clinic centre services on region five of the city of Tehran. The population were all of the clients who attend the services during 2011 winter and looking for family counselling services. Among 14 clients, seven couple revised schema therapy and seven were under control group that they have chosen randomly from volunteers. The sympathy between couples and research hypothesis are investigated by covariance test. The result shows that schema therapy was effective to improve the effectiveness of schema therapy on marital intimacy between couples and could be a good method for family therapy for Iranian couples.

Keywords: Schema therapy, couple therapy, marital intimacy.

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1. Introduction

Family is the most fundamental organisation and the most essential component of society; in addition, the family is a unique social system in which, membership forms based on biological, legal, emotional, geographical and historical factors. In fact, the family plays the most important and the most basic role in every society. Hence, many psychologists attempt to achieve effective factors on the performance of the family so that they would be able to provide mental health of the society. Family performance is one of the most important indicators which, guaranteeing the quality of life and mental health of the family and its members. Family performance usually points out to their ability to cope with stress, conflicts and problems, so that, the family would be able to fulfil and accomplish the related roles, tasks and practices. Although in the early days of marriage, couples feel permanent commitment to each other, some couples day by day experience marital conflict. Marital conflict means the lack of a constant and continual agreement between the couple which, one of them reveal it. Therefore, displeasure and conflict are inevitable and essential in a family relationship. As a result of the marital conflict, the wife or husband increases their relative relationship, and gradually, replace it with their marital relationship.

Marriage stands amongst the deepest and most complex relational factor amongst the human beings and marital satisfaction is a condition in which the spouses are mostly happy and satisfied with one another. Satisfaction and adjustment are created through mutual interest, caring for one another, acceptance, understanding and satisfaction of needs (Baucom et al., 2013). There exists no perfect couples and creating an absolute non-problematic relation is an exceptionally rare opportunity; however, there can always be improvements and even the divorce-related grounds can be controlled and decreased. The phenomenon of divorce has always been in the limelight of researchers as being one of the objective demonstrations of family crisis. Divorce as one of the devastating increasing social phenomena which imbalances the human beings and exerts negative effects is inevitably observed in whatever research in the realm of social pathology, social deviations and social delinquency. In other words, every society should control this phenomenon in the search of health (Amato & Previti, 2003).

From birth till death, relationships occupy a great role in humans' lives due to the fact that we are always creating relationships. According to Watzlawick, human can't help establishing relationships (Watzlawick, Beaven & Jackson, 1967; cited in Goldenberg & Goldenberg, 2007). Family relationships are the most intense condition for having interpersonal conflicts, one of which is marital conflict. Conflict is inevitable in intimate relationships and marriage is not an exception because couples' frequent and various interactions give rise to a variety of reasons for conflict (Lim Hong, 2000; cited in Atkins et al., 2005). Therefore, between-couple conflict is a natural issue that can't be avoided and stems from the differences.

So, marriage, like any concept, has complicated definition and characteristics that make not easy to discuss. For example, one definition of the marriage is a close relationship with authority and flexibility, the intimacy of the marriage is fundamentally different from the relationship between mother and child. Lor and Kontor on 1995 define Intimacy in a healthy marriage as the kind of relationship which is based on self-disclosure, understanding and trust and deep experienced. Intimacy on the healthy relationship in which two adult members consciously considering each other needs spend their time together, this is different from mother–child nurturance relationship which is mostly one-sided parental affections (Hosseini, 2011). The intimacy of families in areas such as self-discovery, caring and admiration of personal uniqueness is obvious. Intimacy is including the negotiation of emotional and physical distance.

On the other hand, studies show that marital relationship quality is the strongest predictor of marital satisfaction. It is obvious that when two strange people with different tastes come together, continuity and quality of their relationship depends on their knowledge and skills of how to consolidate the relationship (Esmaeilpour, Khajeh & Mahdavi, 2013). Quality of marital relationship has a fundamental role in evaluating the overall quality of family relations. A decent marriage enables

people to achieve a sense of identity in their lives. Segrin and Flora (2005) define the quality of relationship as a transition process in which people create meaning, share and adjust. Communication skills such as active listening and explicit talking can increase the quality of the relationship, which in turn can be a good predictor of marital satisfaction (Ebrahimi & Janbozorgi, 2008) Therapists with different approaches have tried to improve relationships by formulating marital problems and finding roots of conflicts. For example, Cognitive approach relates satisfaction or dissatisfaction of couples to different thinking toward actions and behaviours of their spouse. Cognitive psychologists believe that most marital misunderstandings have roots in prejudiced and illogical thinking of the couples. believes that unreasonable attitudes and imaginations can play a big role in creating an inefficient emotional relationship. From a cognitive point of view, some factors can weaken the effectiveness of a relationship and result in a lack of understanding or correct decoding of the message. Some examples include false beliefs, prejudices and negative attitudes. Hawton et al. (1994). have found cognitive behavioural methods to reduce communication issues and increase the quality of the marital relationship. On the other hand, behavioural approaches have emphasised the relationship between communication skills and marital adjustment. For example, Rezazadeh's (2008) research showed that there is a significant relationship between couples' communication skills and marital adjustment. Marital adjustment in couples with strong communication skills is higher than those with weak communication skills. Therapists, who follow this approach, use education of communication as their main intervention. Other research studies have also shown the role of communication skills training in increasing marital satisfaction and enhancing family performance in problem-solving, communication, roles, emotional accompaniment, affective involvement, behaviour control and general family function. On the other hand, the schema-based approach is built on the fundamental belief that the unique circumstances that person experiences during childhood play an important role in creating a set of beliefs about self and others, which is called maladaptive schemas. Early maladaptive schemas are deep and inclusive patterns or themes that form in childhood or during teen years and remain throughout the path of life. These schemas concern the relationship of a person with self and others and are strongly inefficient. In addition to the schemas that they bring to the relationship, each couple creates some schemas in the ongoing relationship too, which is specific to the current one. Incompatible nature of schemas is revealed when patients interact with others, especially their spouse, in such a way that their schemas are approved. Early maladaptive schemas always reveal themselves in the course of a relationship and affect family interaction. Schema therapy, which was created by Yang, is a new and integrated treatment, mainly built on the extension and expansion of methods and concepts of classic cognitive behaviour therapy. In this treatment, the therapist aims to identify these schemas and try to correct or change them. Based on the patient's problem, schema therapy can be short, medium or long-term. Since maladaptive schemas remain throughout the life of the person, they can cause personal and family problems and these problems can result in the reduction of marital satisfaction and quality of the relationship, and consequently, the breakdown of family life. The aim of Hatamii and Fadayi (2015) study was Malfunction in the intimacy, marital conflict and early maladaptive schemas have always been considered as one of the principal reasons for couples' divorce. Employment of effective therapies may help in the improvement of couples' problems and a decrease of divorce. The present research employed a single-subject research design and selected three women suing for divorce from among all the couples referred to family court centres. The research tools included Young schema Questionnaire Long form, Marital Conflict Questionnaire, Intimacy in Marriage Questionnaire and Marital Conflict Questionnaire. Results indicated that schema therapy is effective in the increase of intimacy, decrease of conflict and early maladaptive schemas among the women who have sued for divorce.

The aim of Nia (2015) study was to investigate and compare the relationship between early maladaptive schemas and marital dissatisfaction in married persons in India and Iran. The tools of this research were Young Schema Questionnaire-Short Form and Marital Satisfaction Questionnaire. A sample of 107 Indian and 97 Iranian was selected randomly. The age group of sample was 20–50 female and male in Iran (*M* = 31/39, SD = 6/58) and Indian (*M* = 34/40, SD = 6/00). Data analyses comprised of the methods of descriptive statistics and deductive statistics (hierarchical and multiple

regression) and were obtained by conducting SPSS 20. Results derived from the analysis of data showed that abandonment, dependence and subjugation are significant predictors for marital dissatisfaction in Iran and emotional deprivation is a predictor for marital dissatisfaction in India. Likewise, the results yielded that subjugation mediate the relationship between marital satisfaction and abandonment in Iran. Early maladaptive schemas to some extent can predict marital satisfaction. Moreover, conditional schemas mediated unconditional schemas in this research. The results of this study can be used in clinical and counselling setting to help problematic couples.

2. Schema therapy and marital intimacy

Schema therapy and marital intimacy between the couple or among family members. In each case, the goal is to create a sense of balance and autonomy. Intimacy as one of the important factors to bring feelings of warmth, respect, unity and a sense of intimacy in couples' relationships leading to enrichment of sexual satisfaction and identifying it. (Randall & Comoros, 2007).

True intimacy is an interactive process that is composed of several components, the core process of identifying, understanding and acceptance of the other person, sympathy with his/her feelings and appreciation of his/her unique perspective to the world. Intimacy is built on trust and mutual respect. The pair could have shared thoughts and feelings without fear of being judged or ridiculed evaluation.

Some researchers believe marital intimacy is the result of cognitive styles and stable couple relationships and dependent on their cognitive biases (Linda et al., 2011). Cognitive development can make changes on couple cognitive attributions and will lead to greater marital satisfaction (Yunusi, 2010). A form of insight that is involved in the marital relationship is the schema. The term schema was introduced in the field of cognitive therapy by Beck (1990 and then the concept of 'early maladaptive schemas' was established by Yang (1990), its emotional patterns that are damaging during development and have been formed in the mind and the life cycle (Yang, 2003).

3. Schema therapy and marital intimacy

comes to relationships but also some specific schemes from their current relationships coming to the relation and led to marital problems (Datylyv & Birashk, 2007)

Partner selection is one of the most common mechanisms which schemas are continuing. Schema therapy approach therapist combining and applying cognitive, experiential, behavioural, interpersonal schemas for a couple and tries to improve healthy styles to replace maladaptive coping styles (Yang, 2003; Hamid Poor, 1386).

Schema therapy process consists of two stages: the first stage, assessment stage and change and training. In the first step, the therapist helps the person to know their schemas, traced its roots in childhood and adolescence, and relates these schemas to their current problems and in the process changed the composition of the therapist and the applying cognitive, experiential, behavioural, and between the dead, tries to improve individual schemas and healthier behavioural styles successor to his maladaptive coping styles (Rizzo, tweets, Stephen, Young, 2007).

4. Method

This study was a quasi-experimental, pre-test post-test control group with randomly chosen. The dependent variables (intimacy) were measured before and after the implementation of the independent variable (Schema Therapy). The population consisted of all couples who attend clinic in the winter of 91 in order to solve their marital problems, they have presented from five districts in Tehran and have the following conditions of at least three years past from their marriage. Minimum qualification of couples was a high school diploma. They consider as having no mental or personality problems. Living together and not divorced. They were less than 40 years old. Two persons (couples

and wife) desire to continue to participate in the study and treatment sessions (10 sessions) medium. They insist to solve problems related to their sexual relationships and who present no acute conflict. Couples who are qualified with conditions of the study were asked to register if you wish to participate in the study. Couples who were willing to participate were a randomly selected sampling of 14 couples (28 individuals) who were selected to participate. After the 14 couples were divided into two groups (Schema therapy) and control group (each group of seven couples) and were assigned to the experimental group. Schema therapy was administered to the control group received no intervention.

5. Schema therapy and marital intimacy

Schema therapy and marital intimacy questionnaires have been resolved and the need to answer all the questions for both groups was explained. In addition, regular therapy sessions and cooperation of the subjects, the duration of the meetings and their rules were explained.

Research was determined and informed them about the date agreed upon by the participants attending therapy sessions. The experimental group received 10 sessions, twice per week for two sessions for half an hour in schema therapy. In the second period, all members of the experimental and control groups participated in the post-test and completed the intimacy scale. Finally, the collected data from the pre-test and post-test experimental and control groups were studied to analyse the results.

Research Tools: Bagarvzy Intimacy Scale (2002)

This questionnaire by Bagarvzy (2002) has prepared 41 questions, each of examiner answer them in the scale of 10 degrees. It is examined to assist Intimacy and the eight dimensions of intimacy needs (emotional, cognitive, intellectual, sexual, physical, spiritual, aesthetic and social-recreational). Answers would be about the answer to the question of 'I have a strong need ….'. The scoring scale for each question is given a score between 1 and 10. So the minimum total score of 41 and a maximum score for this test is equal to 410. And the dimensions of intimacy (except for the spiritual dimension) minimum score is between 5 and 50.

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Update, modify and confirm the validity of the final questionnaire. The final modified questionnaire was conducted on 30 couples and Cronbach's Alpha reliability coefficient of the questionnaire was 93%.

7. Results

Table 1. Statistical indicators of intimacy scores in test and control groups

Group	Women (SD)	Mean (SD)	Men (SD)	Mean (SD)	Overall (SD)	Mean (SD)
Pre-test						
Schema Therapy	229.29	28.20	221.00	27.44	221.64	26.74
Control	212.43	32.14	209.86	31.69	211.14	30.69
Post-test						
Schema Therapy	269.71	24.91	265.86	24.23	267.79	23.69
Control	215.14	27.66	218.71	25.54	216.93	25.64

Table 1 describes the statistical pre-test and post-test scores of intimacy (or sympathy) among the population and sex groups are presented accordingly. According to this result, the mean of intimacy has increased in the post-therapy test group but had little change in the corresponding control group.

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Table 2. The results of covariance analysis of difference of the treated mean of intimacy scores of couples

Source of Variation	The sum of squares	Degree of freedom	Mean of squares	The F ratio	The level of meaningfulness	The effect volume
Pre-test	14367.713	1	1437.713	242.113	0.001	0.906
Group (independent)	12081.951	1	12081.951	203.596	0.001	0.906
Variance of error	14833.573	25	59.343	–	–	–
Sum	1678.592	28	–	–	–	–

9. Discussion

'Couple relationship' has a specific process; this relation was a feature during the time, past, present and future. Excessive focus on any of these time sections is not the right. Couple relationship creates a balance between stability and dynamism. Couple therapy methods can improve these dynamics in relationships in various fields, including intimacy. Couples therapy is focusing on both partner in a marriage or is an unmarried relationship (Kergo, 2006). To explain these results, we can say that the emotional basis of human forms during childhood in the family system, therefore the couples lead to the formation of severely and early maladaptive schemas in their children's character based on the type of interactions with them, and these schemas, like deposits and early lessons in nature, affect the characteristics, interpersonal relationships and satisfaction in their adult life. Findings of this research that exhibit the effect of schemas in marital satisfaction are in accordance with those of Stiles and Zolfaghari et al. that showed the relationship between early maladaptive schemas and intimacy in a romantic relationship and marital satisfaction. This explains that with increasing early maladaptive schemas, marital satisfaction and intimacy decreases. These findings and their alignment with other research studies indicate the undoubtable and decisive role of schemas in couples' marital dissatisfaction. Schemas affect behaviours of the spouses and direct them in the framework of a marital relationship. Also, the effectiveness of schema therapy on marital relationship quality shows the significance of communication in the family for its strength and stability in dealing with problems and crises. These findings are in accordance with the results of research studies performed by Keshtkaran, Payne, and Huber et al. Gottman and Notarius show that good quality of communication plays a significant role in the stability and durability of family life. Much of the conducted research literature on quality of communication verifies that the stability of marriage and family life is dependent on proper communication between the members of the family. Certainly, a family in which members cannot share their feelings, emotions and decisions cannot function properly in dealing with problems (Khatamsaz, 2017).

10. Schema therapy and marital intimacy

The result shows that difficulties in communication are the basic reason for the marriage dissatisfactions; therefore, it is logical that schema therapy that focusing on relationship improvement and satisfaction would be effective on couple relationship. The level of closeness is dependent on the amount of emotion, thought and behaviour that they shared. Needs had a very important effect on these results, and the first step to create the deep intimate relation. The necessary field to make change is provided through the influence of therapeutic schema, on the multi-faceted dimensions of every individual including: cognitive, experimental, emotional and behavioural dimensions. Over the years, the people highlighted the data consistent with the schema and emphasise on them and ignore the incompatible data, continue this process in their marital relationships and, directly observe how the schema involved in the marital relationships fights for its own survival. Therapeutic schema which is a summary of healthful responses of the person, identifying the origin of the schema and, inefficient thoughts, is the best and, most helpful tool for the person in order to determine the situation of the

stimulus has stimulated the schema, identify negative behaviours and, how to substitute healthy behaviours in the marital relationship which increases the person awareness and, provide the needed field for changes in the individual and consequently, in the marital–spousal relationships. The schema-centred approach, due to operating on the psychological themes or, the primary incompatible schemas in relation to those who desire to divorce is effective on modifying of their opinions and, thoughts as well in reduction of a tendency to divorce. The schema-centred approach would remarkably help the couples to express their suppressed and, concealed emotions which, ultimately result in censoring and, repressing of their emotions, difficulties in feelings and, spiritless marital relations, meanwhile, as a consequence of therapeutic schema, the person would try to behave and, act in his or her marital relationships according to the confirmed beliefs and, schemas, which, regular behavioural pattern, perfectionism, preciseness, punctuality, obsession are among these recently acquired manners. It seems that to combine cognitive, experimental and, behavioural approaches of the therapeutic schema would be effective on the couples challenging with marital problems.

11. Schema therapy and marital intimacy

With instamatic, sympatric relations, therefore schema therapy is able to increase the intimacy between couples.

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