

## The Effectiveness of Training Bowen's Family Therapy Approach on Marital Satisfaction of Married Women in the Aligodarz of City (In the West of Iran), in 2019

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### ABSTRACT

**Introduction:** Marital satisfaction is one of the most important signs of a favorable relationship between couples. This research aimed to survey the effectiveness of training using Bowen's family therapy approach on marital satisfaction of married women in the city of Aligodarz (In the west of Iran).

**Method:** This study was a quasiexperimental study using a pretest-posttest design with a control group. The statistical population consisted of counseling applicant married women in the city of Aligodarz in 2019. By convenience sampling, 30 married women were selected and participated in this study. After recording the subjects' scores in the pre-test stage, the experimental group was exposed to the intervention (training course), but no operations were performed on the control group. Data gathering was carried out using a demographic questionnaire and ENRICH marital satisfaction scale. Frequency, percentage, mean and standard deviation indices were used to describe and Chi-square test was used to examine the homogeneity of the two groups in terms of study variables and multivariate analysis of covariance were performed in SPSS 24 software with a significance level of 5%.

**Results:** Descriptive findings showed that the mean (standard deviation) of the total score of the marital satisfaction variable in the pre-test and post-test stages was 131.60 (26.89) and 142.81 (25.24) in the experimental group and 132.66 (24.09) and 132.26 (21.92) in the control group, respectively. The inferential findings showed that Bowen's family therapy approach has a significant effect on some of the dimensions of marital satisfaction (religious orientation, equality of women and men, children and parenting, sexual relation, financial management, conflict resolution, and marital satisfaction) ( $p < 0.05$ ). On the other hand, this approach was not practical in improving other aspects of marital satisfaction (relationship with family and friends, leisure time, marital relationship, personality issues, and contractual responses) ( $p > 0.05$ ).

**Conclusion:** The present study results showed an increase in marital satisfaction of married women using the Bowen family therapy approach. Therefore, it is recommended to use Bowen's family therapy approach to improve women's marital satisfaction with family problems.

**Keywords:** Bowen's family therapy approach, Marital satisfaction, Married women, Aligodarz

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### Introduction

As modern society has become complicated and rapidly been changing, the family was exposed to various issues while experiencing continuous dynamics between the society and family members(1). The emotional and psychological health of society depends on the family's health which in turn depends on the continuity and health of the relationship between husband and wife(2). One of the factors affecting the health of families in marital satisfaction is weakness in marital satisfaction, or lack of success in marriage affecting the mental well-being of couples and can also endanger the survival of the family(3).

Marital status is defined as the interest of couples in each other and their positive attitude toward marital life, which can depend on personal factors, communication, conflict resolution, financial management, leisure activities, sexual relations, childcare, equity, or religious roles orientation (4).

Marital satisfaction is the primary goal of any marriage, and couples wish to have the highest satisfaction in their marital lives(5). Accordingly, conformity between one's expectations and one's experiences in life was defined as marital satisfaction. According to this definition, marital satisfaction exists when one's situation in marital life is similar to the expected conditions. Marital satisfaction is a situation in which couples have high levels of happiness and satisfaction from their marriage and each other (6). Furthermore, marital satisfaction is one of the concepts that can influence the presence or absence of marital problems. In other words, marital satisfaction is directly related to conflict and incompatibility in marriage. It means that incompatibility increases with an increase in conflict between couples, resulting in higher levels of dissatisfaction (7). Dissatisfaction after the marriage has adverse effects on psychosocial interactions between couples and the development of children and adolescents in that family. For example, studies show that 39% of criminal adolescents held in "Iran's Correction and Rehabilitation Center" belong to damaged families (8). Some researchers

believe that the history of marital conflict and dissatisfaction in parents can affect the marital satisfaction of their children (9).

Bowen's family therapy model is one of the first and most important models that evaluate people in their families' context. Bowen's theories, as one of the most important figures in this field, make up the basis of many of current trends in family therapy. Bowen is the founder of family systems theory which considers family as a single emotional unit and a web of relations that can be better understood in history or several generations. Bowen's therapy is a bridge between psychotherapy approaches and system theory-based]. Bowen's theory plays an important role in developing theoretical and clinical studies in the field of family therapy(10). This theory consists of eight intertwined concepts: self-differentiation, differentiation, Nuclear family emotional systems, family projection processes, emotional separation, multigenerational transfer process, siblings' role, and social retreat (11).

Furthermore, Bowen's theory is a comprehensive explanation of the family as an emotional system. The core of this theory are concepts such as triangulation, family projection process, emotional separation, and multigenerational transfer process. These concepts explain some of the methods used in families to show fusion or differentiation responses (12). Bowen believes that acute anxiety exists during one's entire life and that this anxiety has both physical and psychological aspects. Low levels of anxiety indicate that there are no significant problems between people or families. In these cases, the emotional system of the family is stable (13). Bowen's family therapy approach is one of the approaches used to decrease family problems. In this therapy, it is assumed that the past can affect the present and is, in fact, still "alive." Past is the emotional response of the present which can be inherited from one generation to the next. Therefore, Bowen's approach in family therapy is also known as intergenerational therapy, and it is believed that his theory of family dynamics is the most comprehensive model of family systems (14). This

approach is effective in reducing the symptoms caused by anxiety(15), reducing exam anxiety and increasing self-efficiency(16), increased adaptation after divorce(17), improving initially incompatible schema(18), women's self-differentiation(19), and creation of other positive effects in behavior, moods, and lives of various individuals. In addition, many studies have been done in the field of marital satisfaction and its relationship with other variables such as self-efficacy (20, 21), quality of life (22, 23), perceived stress(22), and sexual satisfaction(24). However, no research has been done on the role of Bowen's therapeutic approach on the marital satisfaction of married women(25).

Given the above and the importance of marital satisfaction in families' health and consequently in society's health, and due to the many problems that frequently occur between couples in today's complex world, the need to use appropriate therapeutic approaches is felt. Due to the high effectiveness of Bowen's approach in reducing crises in couples and given the fact that this method has rarely been used in Iran(19), the current study aims to investigate the effect of Bowen's family therapy on marital satisfaction. In conclusion, according to the theoretical foundations and literature of the research, the research hypothesis is that "Bowen's family therapy approach has a significant effect on marital satisfaction of married women."

## Method

The research method was quasi experimental with pre-test, post-test, and control group design. The study population included all married women in Aligodarz city convenience sampling was used to select the research sample.

Based on our pilot study (n=5) The mean (standard deviation) score of Marital Satisfaction in the intervention and control groups were 145 (22) and 123(20), respectively. By considering the equal population ratio in the two groups (k=1), the significance level 5% and the effect size equal to 1.04. Initial sample size was obtained 13 people. Taking into account the non-response rate

equal to 15% of the final sample volume was equal to 15 people in each group.

$$n_0 \geq \frac{(1+k)}{k} \frac{(z_{1-\frac{\alpha}{2}} + z_{1-\beta})^2}{d^2} + \frac{z_{1-\frac{\alpha}{2}}^2}{2(1+k)};$$

$$k = 1, \alpha = 0.05, d = 1.046 \Rightarrow n_0 \geq 13$$

$$n \geq \frac{n_0}{1-0.15} \rightarrow n \geq 15$$

After selecting 30 individuals with inclusion criteria, they were randomly divided into two groups (15 individuals in the experiment group and 15 in the control group) using a simple randomization method.

It should be noted that random substitution of subjects in each group was done by the simple randomization method. In the first stage, both groups were asked to answer the questionnaire in a pre-test. After recording the subjects' scores in the pre-test stage, the experimental group was exposed to the independent variable, but no operations were performed on the control group. Inclusion criteria in this study included: Married women living in Aligodarz city, with a minimum of high school education, lack of participation in simultaneous therapy sessions, and having at least two years of married life. Exclusion criteria included absence for more than three sessions, lack of finishing assignments, and desire for continued participation in the study. A demographic information questionnaire was used to gather the demographic information of the participants. This questionnaire investigated specifications such as age, length of the marriage, number of children, and participants' education level.

The marital satisfaction questionnaire was first introduced by Olson in 1989. This measure is a 115-item scale used to measure potential problematic contexts or identify strong and productive areas of marital relations. Furthermore, this measure is a valid tool for various studies regarding marital satisfaction. Enrich Marital Satisfaction Scale consists of 12 subscales. The

first scale contains five items, while the other scales have ten items each. The subscales in this questionnaire include idealistic distortions (items 1 to 5), marital satisfaction (items 6 to 15), personality factors (items 16 to 25), relation (items 26 to 35), conflict resolution (items 36 to 45), financial management (items 46 to 55), leisure activities (items 56 to 65), sexual relationship (items 66 to 75), children and childcare (items 76 to 85), family and friends (items 86 to 95), equity of roles (items 96 to 105) and religious orientation (items 106 to 115). The first subscale of "idealistic distortion" measures the desire of the participants to provide unconventional answers. A five-point Likert scale is used to score the 115-item Enrich questionnaire used in Iran. These choices include "very high", "high", "medium", "low" and "very low", except for questions 96 to 105 which use "always", "sometime", "unsure", "rarely" and "never". For reliability, Cronbach's alpha coefficient for Enrich questionnaire was calculated

in the report by Olson, Furnier, and Drachmann (1989) for subscales of idealized distortion, marital satisfaction, personality problems, communication, conflict resolution, financial management, leisure activities, sexual relations, children and childcare, family and friends, and equity of roles and was equal to 0.9, 0.81, 0.73, 0.68, 0.75, 0.74, 0.48, 0.77, 0.72 and 0.71, respectively. For validity, the correlation coefficient for Enrich scale was between 0.61 to 0.73 with family satisfaction scales and 0.62 to 0.76 with live satisfaction scales, indicating suitable structural validity(26).

**Educational intervention**

Session guidelines and techniques thought in eight therapy sessions were determined based on Bowen's family therapy approach. According to Table 1, session curriculums for Bowen's family therapy approach were extracted based on the study by Saba Asadi (2014) and are as follows (18).

**Table 1.** Summarizes the content of the session shed by Bowen’s Family Therapy Approach

Session	Main goal	Content	Assignments
First	Familiarity and communication	Communication, commitment for participation, individuality, pre-test	Determination of negative emotions
Second	Separation from others	Self-differentiation, the relation between self-differentiation and life problems	Personal view regarding individuality
Third	Familiarity with destructive relations	Trigonometry and triangulation, the effects of triangulation, confronting triangulation	Determination of individuality level in graphs and its effects
Fourth	Revealing emotional relationship system	Family's emotional system, the effect of emotional system on individuality	Type, length, effect, and solution of trigonometry
Fifth	Familiarity with intergenerational transfers	Family's emotional system, the effect of emotional system on individuality	Evaluation of emotional system
Sixth	Determining the disconnection of emotional relations according to others	Emotional disconnection, the effect of emotional disconnection in marital relations	The role of siblings
Seventh	Notification regarding intergenerational transfers	The intergenerational transfer process, generational determination method, method of transfer for individuality	List of emotional disconnection behaviors
Eight	Final session	Summary, review, conclusion, post-test	Practicing various skills

Descriptive statistics were calculated based on mean, standard deviation, frequency and percentage. To check homogeneity of two groups based on demographic variables chi-square test were used To controlling pretest effect multivariate analysis of covariance (MANCOVA) were used. So that the independent variable was the type of

treatment (Bowen’s Family Therapy). Also, pre-test scores were considered as covariate variable. All statistical analyses were done in SPSS 24, and significant level was considered as 0.05.

**Results**

**Table 2.** Comparing two groups based on baseline characteristics

Variables	Levels	Intervention		Control		P
		N	%	N	%	
Age	25-30	3	20	2	13.33	0.75
	30-35	5	33.33	4	26.66	
	35-40	7	46.67	9	60	
Marriage history	1-4	2	13.33	3	20	0.71
	4-8	3	20	4	26.66	
	8-12	10	66.67	8	53.34	
Number of children	<2	6	40	5	33.30	0.69
	2-4	9	60	10	66.67	
Educational level	Less than diploma	4	26.66	3	20	0.78
	Diploma	10	66.67	11	73.34	
	Bachelor/MSc/PhD	1	6.67	2	13.33	

**Table 3.** Descriptive findings regarding marital satisfaction for experiment and control groups

Scale And Subscale	Step	Intervention Mean (SD)	Control Mean (SD)	
MARITALSATISFACTION	Overall Marital Satisfaction	Pretest 131.6(26.89)	132.66(24.09)	
		Post test 142.8(25.24)	132.26(21.92)*	
	Religious orientation	Pretest	11.80(4.03)	12.86(4.53)
		Post test	14.26(3.89)	12.53(4.20)
	Role equity	Pretest	6.06(2.90)	6.2(1.74)
		Post test	7.86(2.59)	6.4(1.88)
	Family and friends	Pretest	12.21(3.83)	13.2(1.85)
		Post test	12.86(2.23)	12.46(2.55)
	Children and childcare	Pretest	9.53(2.58)	10.01(3.58)
		Post test	11.4(2.44)	9.93(3.28)
	Sexual relations	Pretest	13.4(3.13)	13.13(3.02)
		Post test	15.01(2.95)	12.6(3.04)*
	Leisure activities	Pretest	12.4(3.20)	12.61(3.22)
		Post test	13.6(2.41)	13.01(3.31)
	Financial management	Pretest	9.66(2.46)	9.73(2.57)
		Post test	11.33(2.25)	10.1(3.04)
	Conflict resolution	Pretest	12.66(3.19)	12.46(3.11)
		Post test	15.01(3.31)	12.06(3.71)*
	Marital communication	Pretest	7.61(2.77)	6.66(2.64)
		Post test	9.13(2.87)	7.21(2.45)*
Personality problems	Pretest	7.41(3.31)	7.66(2.99)	
	Post test	7.81(3.36)	7.82(2.59)	
Marital satisfaction	Pretest	20.26(4.58)	19.66(5.57)	
	Post test	22.61(4.54)	19.41(4.99)*	
Contractual response	Pretest	8.21(2.91)	8.66(1.79)	
	Post test	9.82(3.02)	8.86(2.44)	

\*significant at level 0.05

A total of 30 people participated in the study, of which 53.33% (16 people) in the age group of 35 to 40 years, 60% (18 people) in the history of marriage between 8-12 years, 50% (15 people), the number of children between 2 to 4 and the level Education 73.33% (22 people) had a diploma. The results of Chi-square test showed that the two groups were homogeneous in terms of demographic variables (table 2) ( $p > 0.05$ ).

Table 3 shows the raw scores before and after the intervention in two groups. Results of

multivariate analysis of covariance (MANCOVA) were presented in table 4.

According to the study of khammar et al.2020 (27), the MANCOVA model assumptions including the normality of the distribution of the response variable were confirmed ( $p = 0.388$ ). The previous measurement (pre intervention) was entered into the model as a covariate. There was a significant linear relationship between the dependent variable and the covariate ( $r = 0.78$ ,  $p = 0.01$ ). Variances in two groups were homogeneous ( $p = 0.61$ ). Independent variables had no relation with covariate ( $p > 0.05$ ).

**Table 4.** Covariance analysis results for the effect of Bowen's family therapy on different dimensions of marital satisfaction

VARIABLE	SOURCE	D F	MS	F	P	ETA	POWER																																																																																																																															
Religious Orientation	Group	1	19/03	27/28	0/01	0/63	0/99																																																																																																																															
	Error	16	1/06					Role Equity	Group	1	9/87	10/92	0/01	0/40	0/87	Error	16	0/89	Family And Friends	Group	1	4/55	1/86	0/19	0/10	0/25	Error	16	2/44	Children And Childcare	Group	1	28/13	10/37	0/01	0/39	0/86	Error	16	2/71	Sexual Relations	Group	1	18/91	13/38	0/01	0/45	0/92	Error	16	1/41	Leisure Activities	Group	1	5/40	1/97	0/17	0/11	0/26	Error	16	2/73	Financial Management	Group	1	16/89	11/47	0/01	0/41	0/88	Error	16	1/47	Conflict Resolution	Group	1	23/18	15/80	0/01	0/49	0/96	Error	16	1/46	Marital Communication	Group	1	3/56	2/06	0/17	0/11	0/27	Error	16	1/72	Personality Problems	Group	1	0/17	0/07	0/78	0/01	0/06	Error	16	2/30	Marital Satisfaction	Group	1	27/36	7/32	0/02	0/31	0/72	Error	16	3/37	Contractual Response	Group	1	7/96	2/55	0/13	0/13	0/32	Error	16	3/12	Overall Marital Satisfaction	Group	1	1052/68	16/01	0/01
Role Equity	Group	1	9/87	10/92	0/01	0/40	0/87																																																																																																																															
	Error	16	0/89					Family And Friends	Group	1	4/55	1/86	0/19	0/10	0/25	Error	16	2/44	Children And Childcare	Group	1	28/13	10/37	0/01	0/39	0/86	Error	16	2/71	Sexual Relations	Group	1	18/91	13/38	0/01	0/45	0/92	Error	16	1/41	Leisure Activities	Group	1	5/40	1/97	0/17	0/11	0/26	Error	16	2/73	Financial Management	Group	1	16/89	11/47	0/01	0/41	0/88	Error	16	1/47	Conflict Resolution	Group	1	23/18	15/80	0/01	0/49	0/96	Error	16	1/46	Marital Communication	Group	1	3/56	2/06	0/17	0/11	0/27	Error	16	1/72	Personality Problems	Group	1	0/17	0/07	0/78	0/01	0/06	Error	16	2/30	Marital Satisfaction	Group	1	27/36	7/32	0/02	0/31	0/72	Error	16	3/37	Contractual Response	Group	1	7/96	2/55	0/13	0/13	0/32	Error	16	3/12	Overall Marital Satisfaction	Group	1	1052/68	16/01	0/01	0/01	0/38	Error	16	65/01						
Family And Friends	Group	1	4/55	1/86	0/19	0/10	0/25																																																																																																																															
	Error	16	2/44					Children And Childcare	Group	1	28/13	10/37	0/01	0/39	0/86	Error	16	2/71	Sexual Relations	Group	1	18/91	13/38	0/01	0/45	0/92	Error	16	1/41	Leisure Activities	Group	1	5/40	1/97	0/17	0/11	0/26	Error	16	2/73	Financial Management	Group	1	16/89	11/47	0/01	0/41	0/88	Error	16	1/47	Conflict Resolution	Group	1	23/18	15/80	0/01	0/49	0/96	Error	16	1/46	Marital Communication	Group	1	3/56	2/06	0/17	0/11	0/27	Error	16	1/72	Personality Problems	Group	1	0/17	0/07	0/78	0/01	0/06	Error	16	2/30	Marital Satisfaction	Group	1	27/36	7/32	0/02	0/31	0/72	Error	16	3/37	Contractual Response	Group	1	7/96	2/55	0/13	0/13	0/32	Error	16	3/12	Overall Marital Satisfaction	Group	1	1052/68	16/01	0/01	0/01	0/38	Error	16	65/01																	
Children And Childcare	Group	1	28/13	10/37	0/01	0/39	0/86																																																																																																																															
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Sexual Relations	Group	1	18/91	13/38	0/01	0/45	0/92																																																																																																																															
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Leisure Activities	Group	1	5/40	1/97	0/17	0/11	0/26																																																																																																																															
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Marital Satisfaction	Group	1	27/36	7/32	0/02	0/31	0/72																																																																																																																															
	Error	16	3/37					Contractual Response	Group	1	7/96	2/55	0/13	0/13	0/32	Error	16	3/12	Overall Marital Satisfaction	Group	1	1052/68	16/01	0/01	0/01	0/38	Error	16	65/01																																																																																																									
Contractual Response	Group	1	7/96	2/55	0/13	0/13	0/32																																																																																																																															
	Error	16	3/12					Overall Marital Satisfaction	Group	1	1052/68	16/01	0/01	0/01	0/38	Error	16	65/01																																																																																																																				
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\*  $p < 0.05$  was used as the significant level (MANCOVA test)



Table 5. Adjusted mean after intervention

MARITALSATISFACTION	Marital Satisfaction	Post test	145.2(18.33)	133.17(19.17)*
	Religious orientation	Post test	13.12(2.88)	11.89(3.89)
	Role equity	Post test	8.14(2.11)	6.78(1.33)
	Family and friends	Post test	11.39(3.14)	11.05(2.52)
	Children and childcare	Post test	12.33(1.89)	10.35(3.14)
	Sexual relations	Post test	16.11(2.14)	12.61(3.04)*
	Leisure activities	Post test	13.6(2.41)	13.01(3.31)
	Financial management	Post test	11.41(2.25)	10.1(3.04)
	Conflict resolution	Post test	15.01(3.31)	11.03(3.71)*
	Marital communication	Post test	10.29(2.87)	7.35(2.14)*
	Personality problems	Post test	7.33(3.44)	7.88(2.51)
Marital satisfaction	Post test	23.14(4.54)	19.65(3.75)*	
Contractual response	Post test	9.88(3.02)	8.08(1.13)	

Results of MANCOVA were presented in table 4. According to table 4 MANCOVA results showed that Intervention was significant in all Dimensions except. Family and Friends, Leisure Activities, Marital Communication, Personality Problems, Marital Satisfaction, and Contractual Response. The adjusted mean after removing the covariate effect are presented in Table 5.

## Discussion

The results indicate that Bowen's family therapy has been effective in improving marital satisfaction. It means that the use of Bowen's family therapy has improved marital satisfaction, which is similar to the results in the study by Mohammadi (19), which showed that self-differentiation approach training could significantly increase self-differentiation marital satisfaction. In the therapeutic self-differentiation approach, people rely on their abilities by interacting appropriately with the environment. As a result, it can be said that people who learn to communicate well and effectively with others can increase their ability to manage their emotions, solve social problems, and marital satisfaction. Eftekhari (28), in another study, showed that there is a significant and positive correlation between individuality level and marital satisfaction. Furthermore, Mantizadeh (29) also showed a positive and significant correlation between individuality level and marital satisfaction, with couples with higher levels of individuality showing higher marital satisfaction.

Another reason for Bowen's family therapy approach's effectiveness on marital satisfaction is that this theory is based on self-differentiation. Self-differentiation is a mental and emotional capacity that results in flexibility and rational actions when faced with anxiety. People with low self-differentiation, whose actions are more influenced by emotions, are easier to get excited and might have hasty reactions to other people. These people are likely to involve a third party in their conflicts with their spouse creating what is known as a triangle by Bowen(11). Therefore, the current study results can negatively affect anxiety and stress on physical health.

Regarding the results of the current hypothesis in the case of religious orientation, it can be said that one of the most important factors in selecting a spouse is their beliefs. Furthermore, the results provided by Shakibaei (17) indicated that Bowen's family therapy results in improved children and childcare. On the other hand, emotional involvement results in projection in families where parents transfer their low individuality levels to their most talented children, the center of attention. Taherian (30) investigations showed that increased individuality and sexual activity could increase marital satisfaction levels. Furthermore, Jamali Motlagh's (31) results explicated a positive and significant relationship between sexual performance and dimensions of individuality with marital satisfaction. Regarding Bowen's family therapy's effect on decreasing sexual problems, it can be

said that sexual relations are often focused on the existence of sexual relations, satisfaction time, and the quality of sexual relations.

The results of the current study in the financial management dimension can be said that by increasing awareness regarding roles and abilities of each other, couples can achieve reasonable, logical, and realistic expectations regarding their financial situation, which results in marital satisfaction. The study conducted by Namjouyan Shirazi (32) showed a significant relationship between dimensions of self-differentiation and marital conflicts. In contrast, the study by ShiekhZadeh (33) indicated that training in Bowen's self-differentiation results in decreased marital conflict and increased individuality in the experiment group compared to the control group. The results of Yesliani (34) revealed that Bowen's self-differentiation effectively decreases marital conflicts among women in Najafabad. The current study results show that Bowen's family therapy is effective in reducing marital conflicts in the experiment group, which is similar to the results of previous studies. According to Bowen's model, it can be said that dependence occurs due to a lack of separation between emotions and cognition between couples and means that family members or couples will have an increased desire for concentrating on the outside and taking care of others. In therapy sessions, people learn to achieve a level of emotional impudence where it is possible to make logical decisions without being drowned in their emotions. Hence, relations with family and friends of the spouse if a family matter, not a personal and individual one, and decisions for increased and improved relations require agreement and cooperation of the other party. Since only women participated in therapy sessions in this study, the intervention failed to affect this factor.

Another factor in marital satisfaction is leisure activities. According to the study by Sanderson and Counter (35), people learn that spending their leisure time with their spouse and participating in recreational activities and planning for their leisure time can increase their satisfaction. In other words,

when to individuals marry each other, despite being from different families; they must follow new and shared rules for their leisure activities. Regarding the current results about marital communication, it can be said that communication skills help people understand their level of emotional reactivity and change their behavior by creating an equilibrium between thoughts and emotions. Furthermore, healthier families have a larger tendency toward communication and discussion, resulting in mutual understanding among their members. It, in turn, improves their various psychological aspects and their psychological well-being. Various studies have shown that families with better communication show less dissatisfaction(36). Since communication is a two-sided issue and only women were involved in the current study, the intervention failed to affect this factor.

On the other hand, non-detached individuals tend to melt in their relationship with their parents or remove themselves from these emotional attachments. It means that non-detached individuals are emotionally dependent on others and find it difficult to have independent thoughts, emotions, and actions. On the other hand, interviews with women have shown that most women have negative factors such as severe emotional attachments to parents in their personalities, which result in low self-esteem.

The majority of these personality traits are internalized during childhood and remain intact during adulthood. Suppose we accept that the basis of problems in couples is their personalities which are formed before their marriage. In that case, the emphasis must be on the identification of personality traits of each couple and their relations before marriage, especially with their original families. It can help people better understand their behaviors and prevent them from unconscious actions in their relationship with their spouse. If this process occurs automatically and couples learn not to use their old damaging internalized traits in their relationship with their spouse, then the level of dissatisfaction will decrease. However, sometimes these internalized traits are



unconscious, and people fail to predict and understand their own internalized traits due to defensive mechanisms and resistances. Therefore, education cannot affect these factors.

Regarding contractual response, it appears that this area is too general and requires further study. Furthermore, the items in Enrich questionnaire related to this area are fewer than other areas, and this small data size might result in wrong deductions in this area. Furthermore, since people focus more on themselves instead of other aspects of their marital lives during the use of techniques, Bowen's family therapy might fail to affect this dimension related to mutual understanding among couples. The main limitation of this study was the lack of follow-up investigation, which should be considered during the long-term generalization of these results. Also the impossibility of random sampling was one of the important limitations of this study due to the lack of cooperation of all members of the research community (divorced women). It is suggested that future studies use follow-up investigations and compare the results with the current study results. It is also suggested that the relationship between research variables and their findings be examined and validated separately based on demographic variables.

### Conclusion

The consultation method used in this study (Bowen's family therapy approach) is one of the most common consultation methods, and the results indicated the effectiveness of this approach. These results can support Bowen's family therapy approach to improve marital satisfaction and help prevent damage to families and its consequences through suitable consultation and timely interventions. Bowen, in this theory, emphasizes the role of the family's emotional system in health and quality of relations between people. He believes that the main source of chronic anxiety, psychological problems, and family conflicts resulting in a lack of marital satisfaction among couples is the family's emotional system. When women are placed in stressful situations, they often have a hard time separating their emotional and

cognitive systems from others and show more emotional reactions toward their environment, resulting in lower satisfaction. This emotional reactivity results from an unsuitable family emotional system and is the core reason for all psychological and psychical problems. In Bowen's intervention, various therapy approaches such as triangulation, increased awareness about existing Trigonometry in families, improved the relations between family members, increased responsibility, reduced emotional distance (self-differentiation), and improved family environment. These factors can improve people's ability to accept hardships and deal with challenges, resulting in higher marital satisfaction. In general, in case of conflicts, Bowen's family therapy approach can be considered a suitable consultation method because this therapy aims to increase marital satisfaction, adapt to life changes, and reduce anxiety. Bowen's family therapy approach is based on the separation between emotions and logic and enables women to have the ability to solve problems and handle their illogical demands, which improves their marital satisfaction.

On the other hand, due to the increase in the number of conflicts referred to family consultation centers, such interventions should not be limited to critical situations; and instead, it is possible to use these approaches for prevention interventions. The current study results can inform relevant authorities regarding effective family therapy approaches applicable in consolation centers, crisis intervention centers, family courts, and social welfare organizations. Furthermore, the current study results show a significant difference between the marital satisfaction of women undergoing Bowen's family therapy and those who have not received this intervention.

### Conflicts of interest

The authors state that they had no conflicts of interest in this study.

### Author's contribution

All authors contributed to this project and article equally. All authors read and approved the final manuscript.

### Ethical approval

This article results from a master's degree dissertation in psychology with the code of ethics committee approved and the 18820706971007 registration code.

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