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Effectiveness of Schema Therapy in Intimacy, Marital Conflict and Early Maladaptive Schemas of Women Suing for Divorce

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ABSTRACT

Objective: Malfunction in the intimacy, marital conflict and early maladaptive schemas have always been considered as one of the principal reasons of couples' divorce. Employment of effective therapies may help in the improvement of couples' problems and decrease of divorce. **Methods:** The present research employed a single-subject research design and selected 3 women suing for divorce from among all the couples referred to family court centers. The research tools included Young schema Questionnaire Long form, Marital Conflict Questionnaire, Intimacy in Marriage Questionnaire and Marital Conflict Questionnaire. **Results:** 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.

1.INTRODUCTION

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 exceptional rare opportunity; however, there can always be improvements and even the divorce-related grounds can be controlled and decreased (McKay, 2015).

The phenomenon of divorce has always been in the lime light 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 and 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 and 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. However, such conflicts can be managed employing negotiations and practical policies that will

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lead to positive results. The existence or lack of conflict doesn't determine the quality of marriage but it is managing conflicting situations that determine the quality of marital relations (Comstock and Sterzizweick, 1990; cited in Fincham and Beach, 2010).

Intimacy is a complex and heterogeneous concept which has attracted many definitions, theories and philosophical attitudes. The term of intimacy is defined differently by different people. Intimacy has been derived from the word *intima* that means the innermost layer of the arteries' walls. When two people share the most internal parts of their mentality and spirituality, they enter one another's mysterious world of closeness and intimacy (Heitlier, 1997; translated by Karami). Erikson considered intimacy as one of the most principal and basic phase of growth and the main factor in the improvement of health (Christensen & Pasch, 1993). Erikson (1963) contends that the main assignment of adult is to attain intimacy (Reis, 2001; translated by Foroughan, 1998)

Marriage is one of the most important and wanted forms of intimate relationship which promises a dynamic life. Intimate relationship can have great role in the welfare of couples by satisfying their main needs including independence, altruism, kindness, etc. (Heavey et al, 1993). Healthy marriage seeks for intimacy in its verbal, emotional and physical aspects which passes through love, resolving disputes, compromise, negotiating the differences, agreement, honesty, love, affection and commitment. Bowlby contends that, intimate relationships in childhood leads to the establishment of schemas and these schemas act as active cognitive models (Synder, 2006; Wimberly, 1998).

Early maladaptive schemas are broad, self-destructive and pervasive patterns that start in childhood and are repeated throughout life. Young et al (2003) introduce early maladaptive schemas as deep and pervasive patterns or themes that include memories, cognitions, physical feelings and emotions that are developed during childhood or adolescence. Moreover, these highly dysfunctional schemas are elaborated throughout life and are also related to self and relationship with others. Attachment-related issues are related to emotion-regulation issues and working in this area calls the need for investigating intimate attachments and its related emotions. Such issues take their roots from family. Dissatisfaction of five basic emotional needs including secure attachment to others (including the need for security, stability, love and acceptance); autonomy, competence and sense of identity; Freedom to express valid needs and emotions; spontaneity and play; realistic limits and self-control gives rise to the creation of early maladaptive schemas (Young et al, 2003).

Yousefi (2010); Zolfaghari, Fatehi Zadeh and Abedi (2008) reported the relationship between early maladaptive schemas and different aspects of intimacy which faced pathology. Therefore, with regard to existing clinical evidence, the attachment theory can be related to

early maladaptive cognitive schemas (Sevier et al, 2008). Andouz and Hamid Pour (2005) indicated that, the more maladjusted the schemas are, the lower the marital satisfaction is. They also reported that, secure attachment style is significantly correlated with early maladaptive schemas. Zolfaghari, Fatehi Zadeh and Abedi (2008) indicated that, there is significant relationship between early maladaptive schemas and different aspects of marital conflict. The research findings by McLeod (2005) and Linehan (1991) reveal that, early maladaptive schemas can explain the relationship between avoidant and anxious attachment styles and psychological problems. Evidence shows that, mistrust-misbehavior, unrelenting standards and emotional inhibition can have the highest predictive role in the prediction of divorce among individuals with early maladaptive schemas.

With regard to what was mentioned and the need to shed more light on different reasons leading to divorce, the present research aims to assess the effectiveness of Schema therapy in intimacy, marital conflict and early maladaptive schemas of women on the verge of divorce.

2. MATERIALS AND METHOD

The present research can be considered among comparative and process studies. The present research employed a single-subject research design and selected 3 women suing for divorce from among all the couples referred to family court centers. The research tools included Young schema Questionnaire Long form, Marital Conflict Questionnaire, Intimacy in Marriage Questionnaire and Marital Conflict Questionnaire. The inclusive criteria were suing for divorce, being in the age range of 18-40 and having at least diploma degree. The exclusive criteria were having chronic physical illness, receiving psychotherapy in the last year, having drug abuse and having severe personality and psychotic disorders.

Young schema Questionnaire Long form was first designed and developed by Young and Brown in 1990 to measure early maladaptive schemas and revised later in 1994. This questionnaire has been normalized on a population of 513 students with Cronbach alpha of between .79 and .93 in eighteen scales (Feti and Dobson, 2011). The result of test-retest reliability was reported to be between .67 and .84. This questionnaire has been proved to have acceptable face validity (Schmidt, Joiner, Young and Telch, 1995; Gouveia, 2005; Cecero, Nelson and Gillie, 2004; Walker, Meyer and Ohanian, 2001; Lee, Tailure and Dunn, 1999).

Marital conflict questionnaire is a 42-item questionnaire that was developed by Barati and Sanaei (2000). This questionnaire measures seven aspects of marital conflict including lack of coordination, decrease of sexual relationship, increase of emotional reactions, increase of deriving children's support, increase of personal relationship with one's relatives, lack of family

relationship with spouse's family and friends, and separating financial affairs. Each item is scored on 5-point Likert scale. The minimum and maximum score are 42 and 210, respectively. Higher score indicates higher conflict and lower score indicates better relationship. Cronbach alpha of the questionnaire is .71 for the total questionnaire and between .60 (decrease of sexual relationship) and .81 (decrease of relationship with spouse's family) for the seven scales (Sanayi, 2000). Intimacy in marriage questionnaire: this questionnaire was performed on 240 couples in 4 social clubs and 2 sport clubs. Wndunbruke and Berkman (1995) have estimated the Cronbach alpha for the components of intimacy, agreement, honesty, love and affection and commitment to be equal to .86, .86, .83 and .82, respectively. The Cronbach alpha in the present research is equal to .91.

The summary of sessions

Assessing the validation of clients' schemas

Redefinition of supportive evidence

Evaluating the advantages and disadvantages of couples' coping styles

Establishing a dialogue between the healthy or inconsistent aspects of schemas
 Developing educational cards for registering and recalling maladaptive schemas
 Completing registration form for maladaptive schemas;
 Performing the technique of assessing early childhood experiences of couples
 Performing the technique of establishing the dialogue between incompatible and healthy aspect of schemas
 Performing the technique of assessing, improving the orientation toward the problem and the problem-solving training for couples' behavioral enrichment

3.RESULTS

The first hypothesis proposed that, schema therapy is effective in the increase of intimacy among women who have sued for divorce.

Table 1.

The scores of marital intimacy among women

	pretest	The scores of middle sessions	posttest	Follow up	Percent of improvement
1	5	9	11	11	54
2	6	8	10	12	50
3	4	7	10	8	50
Total improvement					51 %

As shown in table 1, the rate of intimacy in clients was below the base line of health in the sessions of 4, 5 and 6. This shows that, intimacy among women suing for divorce is in need of clinical attention and employment of therapeutic intervention for controlling and improving this problem. The rate of marital intimacy subsequent to the sessions of 9, 10 and 11 was above the base line of disorder. This indicates that, the level of intimacy has reached the level of improvement. The total percent of clinical improvement in the increase of clients' marital intimacy was equal to 51% which shows the clinical improvement in these three clients.

The second hypothesis proposed that, schema therapy is effective in the increase of marital conflict among women who have sued for divorce.

Table 2.

The scores of marital conflict among women

	pretest	The scores of middle sessions	posttest	Follow up	Percent of improvement
1	214	119	85	81	62
2	201	103	65	62	69
3	186	128	75	83	56
Total improvement					62 %

As shown in table 1, the rate of marital conflict in clients was below the base line of health in the sessions of 4, 5 and 6. This shows that, marital conflict among women suing for divorce is in need of clinical attention and employment of therapeutic intervention for controlling and improving this problem. The rate of marital conflict

subsequent to the sessions of 9, 10 and 11 was above the base line of disorder. This indicates that, the level of marital conflict has reached the level of improvement. The total percent of clinical improvement in the increase of clients' marital conflict was equal to 63% which shows the clinical improvement in these three clients. The third hypothesis proposed that, schema therapy is effective in the increase of early maladaptive schemas among women who have sued for divorce.

Table 3.

The scores of early maladaptive schemas among women

	pretest	The scores of middle sessions	posttest	Follow up	Percent of improvement
1	611	445	362	350	43
2	745	409	381	384	49
3	670	468	342	349	48
Total improvement					47%

As shown in table 1, the rate of early maladaptive schemas in clients was below the base line of health in the sessions of 4, 5 and 6. This shows that, early maladaptive schemas among women suing for divorce is in need of clinical attention and employment of therapeutic intervention for controlling and improving this problem. The rate of marital early maladaptive schemas subsequent to the

sessions of 9, 10 and 11 was above the base line of disorder. This indicates that, the level of early maladaptive schemas has reached the level of improvement. The total percent of clinical improvement in the increase of clients' marital early maladaptive schemas was equal to 47% which shows the clinical improvement in these three clients.

4. DISCUSSION

The results of the research indicated that, the increase of intimacy has been statically significant among the research subjects. Therefore, the first hypothesis of the research was confirmed and schema therapy increased marital intimacy among women suing for divorce. This finding is in line with the results of the research by Tolstedt & Stokes (1983), Ade-Ridder (1990), Cranston-Cuebas and Barlo (1990), Cranston- Cuebas, Barlo, Mitchell and Athanasiou (1993), Freund, Langevin and Barlow (1974), Jones and Barlow (1990), Prager (1995), Reis & Shaver (1988), cited in Mohsen Zadeh (2010), Davies, Katz & Jackson (1999), Sprecher (2002), Altman & Taylor (1973), Sprecher & Hendrick (2004), and Mirzaei (2004).

The results of the research indicated that, the decrease of marital conflict has been statically significant among the research subjects. Therefore, the first hypothesis of the research was confirmed and schema therapy decreased marital conflict among women suing for divorce. This finding is in line with the results of the research by Young and Brown (2001), Greefe& Malherbe (2001), Conor and Davidson (2003); Young and Gluhoski (1996); DuMont, Widomb and Czaja (2007); Burns & Anstey (2010).

The results of the research indicated that, the decrease of early maladaptive schemas has been statically significant among the research subjects. Therefore, the first hypothesis of the research was confirmed and schema therapy decreased early maladaptive schemas among women suing for divorce. This finding is in line with the results of the research by Segal (1988), Young and Wattenmaker (1996) and Mirzaei (2014).

The present research has some limitations including small number of participants, intervention of other uncontrolled variables, the necessity of repeated evaluation which might be the main reason of scores' decrease; possible biases which might affect the generalizability and short term (2-weeks) follow up.

CONCLUSION

With regard to the results of the present research, it is recommended that the more studies are carried out on the effectiveness of schema therapy among women suing for divorce measuring different aspects and dimensions. It is also recommended that, longer follow-up periods are considered in future studies and independent evaluation is carried out on clients' quality of life.

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