



Effect of brief self-regulation couple therapy in conflict resolution and couple burnout

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Abstract

Unconstructive conflict resolution and couple burnout have a negative impact on quality of marital life. Brief self-regulation couple therapy is one of the effective approaches in transmission teachings and marital skills to couples. The aim of the current research was to investigate the effect of brief self-regulation couple therapy in conflict resolution and couple burnout among troubled couples. This was a quasi-experimental research that employed a pre and posttest design with a control group. The statistical population comprised the couples who referred to the health houses of Tehran city. The couples were selected according to convenience sampling method. Thus, upon an announcement, a sample of 30 couples who were eligible for the study and received lower scores in communicational conflict resolution scale and couple burnout inventory was selected as participants. They were assigned into two groups of experimental and control (n=15 in each group). The experimental group participated in 8 sessions of brief self-regulation couple therapy and the control group received no treatment. The results showed that there were significant differences in the posttest scores between the experimental and control groups, indicating that brief self-regulation couple therapy could significantly improve conflict resolution and reduce couple burnout among couples. Thus, interventions based on brief self-regulation couple therapy could be useful in improving conflict resolution and reducing couple burnout of couples.

Keywords: Burnout, Conflict Resolution, Couple Therapy, Self-Regulation

Introduction

Family is known as one of the most important institutions of any society. When a man and a woman decide to marry together and form a new family, the role of each in a high quality marital life is very important [1]. The problem solving styles of the spouses are one of the factors affecting the quality of life [2-5]. Problem, discord, and disharmony in the marriage are normal, and no marriage can be taken into account where couples are always consistent and coordinated. What is important is problem

management in a way that spouses can correctly and efficiently encounter with the problems and continue with the marital life [6]. In constructive problem solving, in order to reach an acceptable solution, spouses exchange information. In this way, they try to raise their views, and at the same time, listen to the opinions and views of the opposite side, and not to hold only a one-dimensional look at the issue and not to be selfish. As a result, the conflicts are reduced. Incompatible

problem solving style is a method in which the spouse only considers his/her own needs and expectations; thus, low accountability and lack of realism are among the characteristics of individuals that use this style of problem-solving [7]. Research results also indicate that there is a positive significant relationship between constructive problem solving styles and marital satisfaction, while spouses, who use the incompatible problem solving styles in their relationship, report a higher rate of severe marital problems [8-9]. The advent of problem in communication relates to psychological distress and dissatisfaction, which in turn can lead to marital burnout [10-11].

When a couple, due to the distress in the relationship, concludes that their actions and behaviors are not important, they will experience marital burnout [12]. Burnout is defined as a sign of physical, emotional, and psychological exhaustion, which occurs due to the significant distance between the individual expectations of what it should be and the current unpleasant situation [13]. Marital burnout occurs according to a set of irrational expectations and thoughts [14]. Results of several studies have indicated that the existence of serious problems and conflicts between the spouses and their inability to deal effectively with the problems can lead to marital burnout [15-16]. Also, there is an inverse relationship between marital quality and marital burnout. Thus, those couples who feel burnout report mental health disorders and lower marital satisfaction [16-17].

One of the approaches that can be taught to couples to decrease conflicts and burnout is self-regulation couple therapy, which in other studies has been confirmed to improve the psychological state [18-19]. The emphasis of self-regulation couple therapy is on the distressed couples to gain more competency to change the problematic behavioral, cognitive, and emotional patterns, and therefore, to strengthen their relationship. It involves a combination of cognitive-behavioral couple therapy, emotional couple therapy, and insight-oriented couple therapy in order to help couples achieve a shift in their relationships. The main

goal of the self-regulation couple therapy is to change the assessment style of the couples and their relationship so that positive behaviors are considered by the couples. In fact, increasing the sense of being in an effective relationship or the possibility of having an improved relationship due to behavior change from partners is one of the important elements of couple therapy [18].

Previous studies have shown that self-regulation couple therapy is effective in improving psychological and marital components. For example, one study showed that brief self-regulation couple therapy reduces marital stress of couples [20]. The results of another study showed that brief self-regulation couple therapy is effective in increasing marital intimacy and communication skills of infertile couples [21]. The results also showed that self-regulation couple therapy is effective in increasing public health and psychological well-being components such as autonomy and self-acceptance in the couples afflicted by marital incompatibility [22]. Other studies also indicated that self-regulation couple therapy has significant positive effects on increasing marital satisfaction and intimacy of the couples who refer to family consulting centers because of communicative and marital problems [23-24].

Today, various approaches to couple therapy aimed at reducing communicative and marital problems among couples. One of the approaches that can have a constructive role in this regard and can reduce the conflicts and increase the quality of marital life is self-regulation couple therapy. Self-regulation couple therapy is the application of the self-control theory of behavior in communicative problems. The model is a development of cognitive-behavioral couple therapy as an attempt to provide an integrated eclectic framework to exploit other couple therapies [20]. According to what was stated on the significance of self-regulation couple therapy in improving psychological and marital components of marital life, this study seeks to answer the question of whether self-

regulation couple therapy can improve the skills of problem solving and reduce the marital burnout among the couples?

Method

This research was a quasi-experimental study by using a pretest-posttest design with a control group. The statistical population in this study comprised all the couples referring to the health centers located at municipality district 13 of Tehran, Iran in 2015. For selecting the sample, the researchers announced publically the establishment of a course on couple therapy, and registered the volunteered couples. Next, the eligible volunteers (willing to participate in the study, having the ability to read and write, being in the age range of 25 to 50, undiagnosed with acute psychological disorders, not participated in other therapy sessions at the same time of the study, and not petitioning for divorce), who received lower scores in pretest, were selected and randomly divided into the control and experimental groups.

In this study, the following tools were used for data collection.

Rahim Organizational Conflict Inventory-II (ROCI II): Rahim Organizational Conflict Inventory-II is a self-reporting tool that is used to measure the amount of communicational conflicts. It consists of 28 items in 3 general subscales including constructive problem solving, non-constructive problem solving and compromising problem solving styles. Each item is scored from 0 to 4. If a person earns the highest score in a subscale, it indicates that the person uses mainly that style for problem solving. The results of a study in Iran, which was conducted to verify the validity and reliability of the scale, showed that the reliability of the components of this scale using Cronbach's alpha coefficients were 0.70 to 0.75. The validity of the questionnaire using convergent and divergent validity methods was also confirmed [7].

Pines Couple Burnout Measurement: In the present study, Pines Couple Burnout Measurement designed in 1996 was used to investigate the marital burnout. This tool consists of three subscales including physical, mental,

and emotional exhaustion. The total score is obtained by summing up the scores gained in the three marital burnout subscales. All items are scored on a 7-point Likert scale from one to seven. The top score is 147 and the lowest score is 21; the higher score indicates more intensive marital burnout. A survey conducted in Iran indicated that the reliability of the instrument using Cronbach's alpha coefficient is 0.86 [25]. In the execution phase, a list of health centers located at district 13 of Tehran city, where counseling services were offered, was prepared. For selecting the sample, the researchers announced publically the establishment of a course on couple therapy. The most of the clients were women. Upon their declared readiness, the questionnaires were administered to the volunteered women. Those who had the lowest scores on both tests were selected for participating in the study. The selected sample was randomly placed in two experimental and control groups. The therapy sessions were held for the experimental group while the control group received no therapy session. After administering the intervention on the couples of the experimental group, the posttest was conducted on two groups of couples.

In this study, for the couples of experimental group, eight 90-minute sessions (twice a week) relating to self-regulation couple therapy were held at health centers in District 13 in Tehran. The content of brief self-regulation couple therapy included brief self-change (commitment, evaluation, feedback and conversation about goals, evaluating the possibility of brief self-change, and supporting self-change), psychological-educational aspects (commitment, evaluation, feedback and conversation about goals, evaluating the possibility of brief self-change, psychological educational aspect of communication, re-evaluating the possibility of brief self-change, and supporting self-change), and changes made with the guidance of therapist (commitment to evaluation, feedback and conversation about goals, behavior exchange, cognitive changes, intimacy, support, conflict resolution, supporting self-change).

The collected data were analyzed using covariance analysis in the statistical software SPSS-18 at the significance level of 0.01.

Results

The mean and standard deviation of age variable

were 36.33 ± 3.73 and 36.07 ± 3.08 years in the experimental group and control group, respectively. The majority of participants had high school diploma (40 percent) and the rest had either under high school education (36.7 percent) or academic degrees (23.3 percent).

Table 1 Mean and standard deviation of research variables

Variable	Experimental				Control			
	Pretest		Posttest		Pretest		Posttest	
	M	SD	M	SD	M	SD	M	SD
Constructive	28.73	2.57	61.00	6.17	28.00	3.46	43.33	5.76
Non-constructive	50.00	4.12	40.60	1.59	51.93	8.22	50.93	1.94
Compromising	8.47	1.24	16.93	1.75	8.87	2.20	10.73	2.86
Marital burnout	143.27	11.79	126.87	6.70	138.80	10.89	143.00	7.06

Table 1 presents a description (mean and standard deviation) on the variables in both experimental and control groups in pre-test and post-test stages. To observe the assumptions of ANCOVA test, the Levene’s test was used. With regard to the observed f values, problem solving styles and marital burnout were not significant at the level of 0.05 ($p > 0.05$). Thus, the variances of problem solving styles and marital burnout among the participants in the experimental group and control group were not different (the variances were equal). In addition, to check the normal distribution of scores, Kolmogorov-Smirnov test was used. The results showed that the assumption of normal distribution of data is established in both

groups ($p > 0.05$) and hence, the parametric tests can be used. In addition, in order to check the significance of differences between the experimental and control groups in the pre-test stage, the independent t-test was used. The results showed that there was no significance difference in the pretest scores of constructive problem solving style ($p > 0.05$, $t = 0.65$), non-constructive style ($p > 0.05$, $t = -0.81$), compromising style ($p > 0.05$, $t = -0.61$), and marital burnout ($p > 0.05$, $t = 1.07$) between the control and experimental groups. Furthermore, according to the results, the Wilks’s Lambda distribution at $p < 0.01$ was meaningful ($F = 94.82$). The analysis of covariance is reported as following.

Table 2 The results of multivariate analysis of covariance on the examination of variable Differences between groups

Dependent variable	Sum of squares	Df	Mean squares	F	p-value
Constructive	2089.53	1	2089.53	53.63	0.001
Non constructive	763.78	1	763.78	218.02	0.001
Compromising	291.07	1	291.07	64.31	0.001

The results showed that there is a significant difference between the groups in terms of problem solving styles. This means that brief self-regulation couple therapy increased constructive problem solving style ($p = 0.001$, $f = 53.63$), enhanced compromising problem solving style ($p = 0.001$, $f = 64.31$), and decreased non-constructive problem solving style ($p\text{-value} = 0.001$, $f = 218.02$) in the experimental

group compared to the control group. As can be seen in Table 3, the difference between the control and experimental groups in the mean scores of marital burnout in post-test, after controlling the pretest scores, is significant. This means that brief self-regulation couple therapy was effective in reducing marital burnout ($p = 0.001$, $f = 181.63$).

Table 3 *Univariate analysis of covariance for couple burnout*

Source of changes	Sum of squares	Df	Mean squares	F	p-value
Pretest	963.69	1	963.69	71.48	0.001
Group	2448.97	1	2448.97	181.63	0.001
Error	364.04	27	13.48		
All	549490	30			

Discussion

The results of the present study indicated that brief self-regulation couple therapy is effective in improving constructive and compromising problem solving styles and decreasing non-constructive problem solving style among the couples. In fact, the results indicated that brief self-regulation couple therapy can help the couples, in dealing with arising problems and conflicts in marital life, to act in a constructive and compromising way. The findings of similar studies also indicate that brief self-regulation couple therapy, through reducing communicative problems, has a positive influence in increasing communication skills and marital intimacy of couples, which are consistent with the findings of the present study [21,23].

For explanation of the results, it can be said that in the brief self-change step, which was carried out in the early sessions of intervention, new dimensions of problem understanding and main conflicts recognizing were revealed. Because of the supportive environment and change-oriented atmosphere that is provided by the couple therapy, couples are motivated to find new solutions for the problems. Therefore, the therapist, by providing a supportive environment, encourages the couples to accept the risk of confronting with the problems and conflicts. As the therapy turns to the psycho-educational step, the problems are identified to some extent and the communicative problems are raised in a therapeutic space. The participants find pleasant the risk of confronting with the problems rather than the secure atmosphere they had previously made. At this point, the therapist also insists on their autonomy to change themselves. At this stage, the previous non-constructive problem solving approaches are reviewed and discussed. Since brief self-regulation couple therapy is based on

changing patterns of cognition, behavior, and emotion, and also much of the communication problems between couples are caused by lack of knowledge, therefore it can be stated that self-regulation couple therapy may have a relative effect in the communication problems [21].

One of the important things that are discussed in self-regulation couple therapy is the emphasis on the cognitive errors, which can cause problems in relationship. During therapy sessions, after recognizing inconsistent behaviors, the cognitive alternatives are presented. This, in turn, can create many solutions in the mind and hence is a useful way to resolve the conflicts. Through this, non-constructive problem solving approaches, which are often intimidating, are directed to a constructive way. The path of studying the cognitive schema in the treatment protocol reminds the matter to the individuals with non-constructive problem solving style that at the time of conflict, they face with cognitive errors, and by taking the responsibility to others or by escaping from the situation of problem, they miss the constructive path. These individuals are encouraged in the therapy sessions to change and involved in a lot of activities relating to constructive problem solving styles. Hence, they accept more responsibility towards their problems and are required to attempt to solve them. Due to the strong emphasis on the assessment and encouragement of individuals, after a few sessions, the strengths and weaknesses of both problem solving styles (constructive and non-constructive) are specified, and an interactive relationship based on cooperation and information exchange are formed and an acceptable solution will be found. Furthermore,

as a result of self-regulation couple therapy, couples also show greater flexibility, and therefore can show less egoistic tendencies in the case of trouble and show greater sacrifices. As a result, the use of compromising problem solving style increases [18].

The results showed that self-regulation couple therapy can significantly reduce marital burnout and its dimensions, i.e. physical, mental, and emotional exhaustion, which is in line with the findings of other studies on the role of self-regulation couple therapy in enhancing the quality of marital life and decreasing marital burnout [20-23]. Other studies also have shown the effect of brief self-regulation couple therapy on the reduction of marital stress [20], increase of intimacy and marital satisfaction [21,23], and increase of general health and psychological well-being [22] among the couples that all are consistent with the findings of this study.

Self-regulation couple therapy focuses on the mental and emotional dimensions of problems and conflicts. The treatment protocol of the therapy focuses on this issue as a cognitive-behavioral therapy. One of the most important issues in the treatment protocol of brief self-regulation couple therapy is emphasizing on cognitive errors and reforming false beliefs. The origin of burnout can be considered as the mismatch between reality and expectations, which is formed because of cognitive thoughts and wrong expectations. Thus, the treatment protocol in its last stage focuses on this important issue through the exchange of ideas and discussion on irrational behaviors. Then, by proposing alternatives to cognitive thoughts, the treatment deals with cognitive restructuring that can subsequently, in a cycle, lead to the reduction of marital burnout. By increasing constructive problem solving styles and alleviating couples' communicational problems, it leads the couples to a peaceful discussion about the issues. By experiencing an enhanced brainstorming and searching for new solutions to the problems of marital life and challenging each other, the spouses find themselves in a changing atmosphere, which can lead to the reduced burnout and

erosion in the marital life. Therefore, it can be concluded that by increasing the cooperation in discussing current solutions, the dynamism is introduced into the family and subsequently, marital burnout is reduced [18].

The present study was conducted on couples who referred to health centers in Tehran, and caution must be taken into account in generalizing the results to other statistical societies. Regarding the effect of brief self-regulation couple therapy in increasing constructive problem solving styles and reducing marital burnout among the couples, it is suggested that the group courses based on brief self-regulation couple therapy be held for the couples, who refer to the counseling and psychological centers.

Conclusion

The study results demonstrated the effect of brief self-regulation couple therapy in improving the skills of problem solving and reducing couple burnout. Brief self-regulation couple therapy involves self-change, psycho-educational aspects (such as commitment, assessment, feedback and discussion of the objectives, evaluation and support of self-change), as well as behavior exchange, cognitive change, and increased intimacy and encourages the couples towards constructive thoughts, beliefs, values, and behaviors and it is associated with positive psychological and marital outcomes.

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Contribution

Study design: LS, FD

Data collection and analysis: LS, FD

Manuscript preparation: LS, FD

Conflict of Interest

"The authors declare that they have no competing interests"

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