

Effect of acceptance and commitment based training on psychological well being and marital satisfaction in divorce applicants couples

Moslem Abbasi¹, Shahriar Dargahi², Zahra Bakhtiari³, Gita Alipour⁴

Journal of Research & Health

Social Development & Health Promotion Research Center Vol. 7, No. 6, Nov & Dec 2017 Pages: 1146- 1153 DOI: 10.18869/acadpub.jrh.7.6.1146 Original Article

1. Correspondence to: Department of Psychology, Faculty of Literature and Human Sciences, Salman Farsi University of Kazerun, Kazerun, Iran

Email: Abbasi@kazeronsfu.ac.ir

- 2. Department of Counseling, Faculty of Psychology and Educational Sciences, University of Mohaghegh Ardabili, Ardabil, Iran
- 3. Department of Counseling, Faculty of Psychology and Educational Sciences, Kharazmi University, Tehran, Iran
- 4. Department of Psychology, Faculty of Human Sciences, Rasht Branch, Islamic Azad University, Rasht, Iran

Received: 1 Jun 2014 Accepted: 12 Oct 2014

How to cite this article: Abbasi M, Dargahi Sh, Bakhtiari Z, Alipour Chushaly G. Effect of acceptance and commitment based training on psychological well being and marital satisfaction in divorce applicants couples. *J Research & Health2017*; 7(6): 1146-1153.

Abstract

Divorce is a fact that family institution has been experiencing it in today's world. In Iran society due to the importance of family, any damage to this institution is unfortunate. The aim of current study was the surveying of effect of acceptance and commitment based training on psychological well being and marital satisfaction in divorce applicants couples. The design of the study is as experimental research with pretest and post test with control group. Statistical population was all clients who exposed to divorce and confer to the courts in Arak city. Samples were selected at first by available sampling method and after completing psychological well being questionnaire and marital satisfaction questionnaire, and obtaining score for enter to research, were placement using random sampling method in two experimental and control groups (10 couples in each group). Experimental group were trained during 10 one hour sessions. The results showed that acceptance and commitment based training could significantly affect psychological well-being and marital satisfaction of Divorce Applicants Couples. According to these results, the acceptance and commitment training is affective on improving of psychological well being and marital satisfaction of divorce applicants couples.

Keywords: Acceptance, Commitment, Divorce, Psychological, Satisfaction

Introduction

In today's world, divorce is one of the facts that the families widely experience it. Of course, this does not mean that the family has not been confronted with this phenomenon in the past, but like all other phenomena in the today's world, the nature of divorce has changed, and more or less is an optional selection. Due to the importance of the family in the society of Iran, any damage to this institution is horrible [1].

Marital satisfaction is one of the important variables that in numerous studies have a significant predictive potentiality about the tendency towards divorce in individuals. In fact, married couples, who have reported less marital satisfaction, have an increasing possibility of divorce, and suffer from higher instability in marriage [2-4]. The family is always a manifestation of love and life,

and divorce is a crisis that would break the association [5]. Family is the place for the satisfaction of the physical, intellectual, and emotional needs. The satisfaction of a person's marriage is equal to the family satisfaction, and family satisfaction in a sense results in the life satisfaction, and it is effective for the growth and improvement of family [6]. Marital satisfaction is an overall assessment of the status of marriage or romantic relationship of a person, which may be a reflection of the joy of the marriage, or a combination of pleasure with many unique factors of the marital relationship. The marital satisfaction could be considered as a psychological phenomenon that does not come to existence by its own, but by the efforts of both couples [7].

In addition to the marital satisfaction, the psychological variables can have a major contribution in the tendency towards divorce as well. Among the important psychological issues, which can play an important role in marriage is the psychological well-being of couples. Psychological well-being is the attempt to perfection in order to achieve one's true potential [8]. In fact, the psychological well-being of individuals is to evaluate and understand the quality of life [9], and individuals with a high sense of well-being experience emotions that are more positive. They have a positive assessment of the past and the future of themselves, others, and the events around them, and the describe them pleasant. On the other hand, those with a low sense of wellbeing assess the above criteria unfavorable, and experience negative emotions such as anxiety and depression [10]. Psychological well-being is an important principle that can be detected through the influence on emotions and all aspects of human behaviors and development including the physical and mental health, skill and training development, social competence, and positive social relationships [11]. The results of various studies indicate that there is a significant relationship between psychological well-being and some elements of marriage such as the quality of marriage, marital satisfaction, marital conflict, and the tendency towards

divorce [12-14]. The psychological well-being of individuals can play an important role in marital life and can contribute to the stability or instability of marriage.

One of the treatments that can affect the psychological well-being and marital satisfaction, and has been of interest to researchers is the treatment based on Acceptance and Commitment Therapy (ACT). During the last 10-15 years, the number of new treatments or expanded forms of Cognitive Behavioral Therapy (CBT) has been widespread in the field of mental therapy [15]. The third wave of behavior therapy began in the early 1990s with the development of innovative therapies, which used the principles of mindfulness and emphasized on the awareness of the present moment and its acceptance [16]. The third wave therapy can be divided into two groups: 1) interventions that are based on mindfulness training such as mindfulness-based stress reduction and mindfulness-based cognitive therapy, 2) interventions that use mindfulness as a key component to their work such as acceptance and commitment-based therapy dialectical behavior therapy [17]. Acceptance-based therapy started based on the hypothesis that the trauma is associated with the attempt to control or avoid negative thoughts and emotions [18]. These treatments emphasize on the change of relationship with the inner experience and stress avoidance [19]. In behavior therapy based on acceptance, the clinical problems are conceptualized based on behavior. Three main problems form the basis of psychological disorders including problems related to awareness, avoidance of internal experiences and the valuable life activities. These problems are considered as intervention objectives [20]. Empirical evidence about the impact of this treatment on neurotic disorders such as depression [21], social phobia [22], and high-risk behaviors such as alcohol and drug use [18,23] is specified. The treatment based on acceptance and commitment is effective in psychological well-being of individuals [24-26]. In connection with the treatment based on acceptance and commitment in improving the marriage, researches show that the couples, who had received training based on acceptance and commitment, had more positive emotions and social competence than their counterparts had in the control group [27]. Moreover, in comparison with their counterparts in the control group, the couples showed higher marital satisfaction and mental health [28].

In Iran, in connection with the impact of cognitive-behavioral interventions on the increase of the quality of the marital relationship, valuable investigations have been carried out. However, in connection with the treatment based on acceptance and commitment, given the novelty of the treatment, its direct effect on improving the marital relationships has not been studied in any research. However, due to the effect of this treatment in reducing the social and psychological problems, and taking into account the fact that couples facing divorce also has the problems, it is expected that this treatment could be effective in reducing the problems. This study will seek to answer this question whether acceptance and commitment training is effective on the psychological wellbeing and marital satisfaction of the divorcing couples.

Method

This study was a quasi -experimental research and pretest-posttest design with control group was used. In this study the treatment method with two level is considered as independent variable (acceptance and commitment training and no intervention), and psychological wellbeing and marital satisfaction are considered as dependent variable.

The study population consisted of all couples, who referred to one of the branches of Arak courts in 2013 and requested for divorce. In this study, 20 couples (40 participants), who has referred to divorce court in Arak, and got a low score in marital satisfaction and psychological well-being questionnaires, were selected based on accessible method, were chosen as study sample, were divided randomly into the experimental and control groups (each group of

10 couples). The criteria for participating in the research included having severe conflicts, literacy, and interest to participate in counseling sessions. In this study, the data were collected using the following instruments:

**Ryyf's psychological wellbeing scale: this scale was made by ryyf. This scale has 54 items and is a self- assessment on a six point scale; from strongly agree to strongly disagree. The scale measures six factors of autonomy, environmental mastery, personal growth, positive relations with others, being purposeful in the life and self-acceptance. Besides, the sum of these factors produces the total score of psychological wellbeing. In a survey the Cronbach's alpha was reported 0.73 in an Iranian population [29].

Enrich's marital satisfaction scale: This scale is made by Olson in 1989, and consists of 35 self-reporting items. Each option consists of a 5-point scale that ranges from 1 to 5. The higher the score, the greater will be his or her marital satisfaction. Asoodeh in 2011 reported the retest reliability of subscales of this questionnaire respectively, 0.86, 0.81, 0.90, and 0.92 that signifies the reliability and validity of the questionnaire for Iranian culture [30].

After coordination and permission from the court in Arak, by observing moral considerations, expressing the research purposes, and notifying couples, the couples consent to participate in this study. The couples completed questionnaires research according to their characteristics, and due to their received scores in the psychological wellbeing and marital satisfaction questionnaires. the couples who received lower scores were randomly assigned to experimental and control groups. By justifying and explaining the objectives of the study, the subjects were asked to participate in the training course. Before starting training course, both groups had a pretest, and they were asked to complete the intended questionnaires. The experimental group was trained ACT. The training course was 10 sessions of 1 hour and was conducted in groups once a week. During these meetings, after a week, both groups were tested. Training protocols based on acceptance and commitment: acceptance and commitment Training [31] was taught in 10 sessions of 1 hour as follows.

First session: Introductory remarks, problem Conceptualization, The preparation of clients and implementation of the pretest and also Preparation A list of enjoyable activities and its inclusion in the Weekly Schedule.

Second and third sessions: Understanding the implications of ACT treatment (psychological flexibility, psychological acceptance, mental cognitive separation, awareness, visualize, personal stories, clarify values and act responsibly) in six states; 1) At first, in this treatment it is tried that the psychological awareness of individual about subjective experiences (thoughts, feelings and...) be increased and In contrast, the ineffective control action be reduced. The man learned that any action to prevent or control this unwanted mental experiences is ineffective or they have reverse effect and they would be exacerbated and these experiences should be completely accepted without any internal or external reaction to eliminate them. 2) the mental awareness in the present moment is added, this means that individual becomes aware of all mental states, thoughts and his or her behavior in the present moment. 3) the individual is taught to separate himself of herself from the subjective experiences (Cognitive separation) so they can act independently of theses experience. 4) Efforts to reduce the excessive focus on Self-Visualize and Personal stories that Person has made in mind. 5) Help the person to recognize their personal value and clearly identify them and make them into specific behavioral goals (clarification of values). 6) Create incentives to act responsibly namely the activity is focused on the goals and specified values with the acceptance of subjective experience.

Fourth and fifth sessions: mindfulness training (emotional and intellectual awareness), Training the clients about what skills are observed and described, How skills are not judged, are focused, how they works. Also The

use of timeout technic by each of the spouses during Conflicts and anger that led to the dispute.

Sixth and seventh sessions: initially the focus is on increasing mental awareness and then the way of responding and suitable dealing with their subjective experiences and create purpose and style of social life and Practical commitment to them is taught. Also enumerate the pros and cons of couples by each other without judgment and emotional reaction.

Eighth Session: distress tolerance Training, Review of previous sessions and giving feedbacks of couples to each other.

Ninth Session: emotion regulation training (Knowing why emotions are important, emotion recognition, Reducing vulnerability and emotional suffering, Increasing positive emotion), Practical practice of lessons, giving feedback by group and therapist

Tenth session: Enhancing interpersonal effect (Develop and maintain of the healthy family relations and etc.), Important interpersonal skills training (Describing and expressing, assertiveness, Explicit trust, negotiation and self-esteem), Conclusion and implementation of the posttest.

The gathered data were analyzed by multivariate analysis of covariance (MANCOVA) using software the version of SPSS-18.

Results

To regard with the assumptions of covariance test, levene's test was used. The error variance of these variables among the participants (experimental group and control group) did not differ, and variances were equal to each other. Furthermore, in order to study the covariance homogeneity, Box test was used. The results showed that Box is not meaningful, thus the default difference between the covariance was existed. In order to investigate the effect of acceptance and commitment training on psychological wellbeing and marital satisfaction, the multivariate analysis of covariance was used and the results are shown in Table 2.

Table 1 The average and standard deviation of pretest and posttest for psychological wellbeing and marital satisfaction in two groups

| Variable | Group Mean | | Standard Deviation | |
|--|--------------|-------|--------------------|--|
| Destruct of a such all single such like in s | Experimental | 27.45 | 3.23 | |
| Pretest of psychological wellbeing | Control | 28.26 | 4.87 | |
| Protection of the control of the con | Experimental | 43.89 | 8.84 | |
| Posttest of psychological wellbeing | Control | 26.33 | 3.99 | |
| Post of City Paris Paragram | Experimental | 41.13 | 6.11 | |
| Pretest of idealistic distortion | Control | 41.19 | 5.12 | |
| Program Cidadia di Arabia | Experimental | 25.17 | 3.81 | |
| Posttest of idealistic distortion | Control | 39.12 | 3.18 | |
| B 6 | Experimental | 27.23 | 3.97 | |
| Pretest of communication | Control | 26.13 | 3.34 | |
| P | Experimental | 39.10 | 6.25 | |
| Posttest of communication | Control | 26.70 | 3.31 | |
| Pretest of conflict | Experimental | 25.11 | 3.55 | |
| Pretest of conflict | Control | 24.35 | 3.06 | |
| D | Experimental | 17.18 | 2.45 | |
| Posttest of conflict | Control | 23.70 | 2.79 | |
| B 6 | Experimental | 23.89 | 3.55 | |
| Pretest of marital satisfaction | Control | 24.06 | 3.06 | |
| Deathart of monital actions ation | Experimental | 31.18 | 4.78 | |
| Posttest of marital satisfaction | Control | 23.70 | 2.79 | |

Table 2 The results of covariance analysis of psychological well-being and marital satisfaction in experimental and control groups

| Sourse | Dependent variable | SS | Df | MS | F | Sig | Eta |
|--------|-------------------------|---------|----|---------|--------|------|------|
| | Psychological wellbeing | 3060.69 | 1 | 3060.69 | 65.35 | 0.00 | 0.63 |
| | Idealistic Distortion | 1811.22 | 1 | 1811.22 | 69.22 | 0.00 | 0.66 |
| Groups | Communication | 1532.39 | 1 | 1532.39 | 61.33 | 0.00 | 0.65 |
| | Conflict resulution | 2214.55 | 1 | 2214.55 | 78.36 | 0.00 | 0.69 |
| | Marital satisfaction | 1977.81 | 1 | 1977.81 | 125.59 | 0.00 | 0.61 |

As it can be seen in Table 2, by assuming the control of pretest, the acceptance and commitment training affects the psychological well-being of couples who apply for divorce at the level of p \leq 0.01. Also it is seen that by assuming the control of pretest, the acceptance and commitment training affects the marital satisfaction of couples who apply for divorce at the level of p \leq 0.01. it means that acceptance and commitment training significantly increase the psychological wellbeing and marital satisfaction of divorce applicants couples

Discussion

Based on the results of the present study,

training based acceptance on commitment is effective on the improving the psychological well-being of couples at risk of divorce, which is consistent with the results of other studies [17,24-27,32], and suggests that training based on acceptance and commitment is effective on the improving of the psychological well-being of the couples facing divorce. It can be said that in the second and third sessions, which mental flexibility, mental acceptance, emotional awareness, and cognitive separation are taught, one is learned that any action to prevent or control the unwanted mental experiences due to marital problems is ineffective, or has the opposite

response to eliminate them completely. The cognitive separation causes divorcing couples to see their problems from an outside perspective, to be comfortable to talk about their problems, and it helps to know and to clearly identify his original personal values, and convert them into specific behavioral objectives. In the sixth and seventh sessions that focus on increasing mental awareness, the divorcing couples re-evaluate their positive and negative points and try to make proper judgments about their problems. Acceptance and commitment therapy, rather than focusing on elimination and removal harmful agents, helps clients to accept their controlled emotions and cognitions, to get rid of self-regulated speeches that cause problems, and to allow them to abandon the struggle with them. Acceptance and commitment therapy is mainly a process, and openly stresses on the promoted acceptance of psychological experience and commitment with the consistently increase of flexible meaningful activities, and regardless of the content of the psychological experiences. The goal of treatment methods used in the acceptance and commitment therapy is not to increase the realistic, effective, and reasonable thinking or not to encourage feelings, but the aim of the therapeutic methods is to reduce the psychological experiences, and to increase awareness of them, especially by focusing on the present moment without adopting any conflict and non-evaluative based method. The results indicate that training based on acceptance and commitment is effective on the improving of marital satisfaction of divorcing couples, which are consistent with other studies [33-36], and they suggest that training based on acceptance and commitment in influential on the improving of marital satisfaction of the divorcing couples. In the case of couples at risk of divorce, what is certain is that they are not satisfied with their lives and quality of life, therefore, treatment based on acceptance and commitment tries to increase the satisfaction of the individuals. In fact, couples become aware of all mental states, thoughts, and behavior in the moment and they try to separate themselves from

effect, and exacerbates it, and the experiences

must be accepted without any internal or external

their mental experiences (cognitive separation). The couples recognize their core personal values (illumination of the values). Finally, they are motivated to solve their problems. At the fifth session, mindfulness training (emotional intelligence and rational knowledge) makes that couples to see their skills and to find motivation to improve their relations. At the sixth session, couples find a new purpose for living together, and judge the pros and cons of themselves and their partners.

One of the limitations of this study is the lack of follow-up stage and as the result, the lack of information on the continuity and stability of the results of the present study. The research was done on couples facing divorce in the city of Arak. Therefore, it is suggested that similar research should be applied in other regions for several months with follow-up sessions to assess the effect of the treatment.

Conclusion

The findings of this study proved the impact of training based on the acceptance and commitment in increasing of the psychological well-being and the marital satisfaction of the divorcing couples. Since acceptance and commitment are the sense of awareness without judgment and imbalance, which help to the clarity of the view and accept of the physical emotions and phenomena as they occur, therefore, training to couples facing divorce causes them to accept their psychological feelings and symptoms, and the acceptance of these feelings and thoughts reduce excessive sensitivity to marital problems so their well-being and consistency would be improved.

Acknowledgments

The authors express their most sincere thanks to the authorities of the courts in Arak city and all participating couples whose participate and contribution made conducting this research possible.

Contribution

Study design: MA, SHD, ZB, GA

Data collection and analysis: MA, SHD, ZB, GA

Manuscript preparation: MA, SHD, ZB, GA

Conflict of Interest

"The authors declare that they have no competing interests."

Funding

The author (s) received no financial support for the research, authorship and/or publication of this article.

Refrences

- 1- Jafari A, Sanai Zaker B, Pasha Sharifi H, Akrami A. Comparison the effectiveness of sattir and vitaker communication approaches to reduce the likelihood of divorce in conflicting couples on the brink of divorce. *Counseling News and Researches* 2011; 9(34): 425-47.
- 2- Hirschberger G, Srivastava S, Marsh P, Cown C, Cown P. Attachment, marital satisfaction, and divorce during the first fifteen years of years of parenthood. *Pers Relatch*2011; 16(3): 401-20.
- 3- Yeh HC, Lorenz FO, Wickrama KA, Conger RD, Elder GH Jr. Relationships among sexual satisfaction, marital quality, and marital instability at midlife. *J Fam Psychol*2006; 20(2): 339-43.
- 4- Shakerian A, Nazari A, Masoomi M. Inspecting the relation between sexual satisfaction and marital problems of divorce seeking women in sanandaj city family centers. *Procedia Social and Behavioral Science*2014; 114: 327-33.
- 5- Kaplan H, Sadocks B. Synopsis of psychiatry. 9th eds. Philadelphia: Lippincott williams and wilkins 2007.
- 6- Edalati A, Redzuan M. Perception of women towards family value s and their marital satisfaction. *Journal of American Science*2010; 6(4): 132-7.
- 7- Ahmadi K, Nabipoor SM, Kimiaee SA, Afzali MH. Effect of family problem solving on marital satisfaction. *J Applied Sci*2010; 10(8): 682-7.
- 8- Ryff CD, Keyes CL. The structure of psychological well-being revisited. *J Pers Soc Psychol*1995; 69(4): 719–27.
- 9- Mirzaei P. Build mental well-being and to compare the effectiveness of this program with the program in reducing depression, happiness Fordyce high school students in Isfahan [dissertation]. Tehran: Alzahra University 2007.
- 10- Golestanibakht T. Model of subjective well and joy in the population of Tehran [dissertation]. Tehran: Alzahra University 2007.
- 11- Bridges LJ, Margie NG, Zaff JF. Background for

- community level work on emotional well-being in Adolescence: Reviewing the literature on contributing factors. Washington, DC: Child Trends; 2001.
- 12- Proulx CH, Helms H, Buehler C. Marital quality and personal wellbeing: a meta- analysis. *Journal Marriage Family*2007; 69: 576- 593.
- 13- Kamp Dush CM, Taylor MG, Kroeger RA. Marital happiness and psychological wellbeing across the life course. *Fam Relat*2008; 57(2): 211-26.
- 14- Kurdek L. The relation between reported wellbeing and divorce history availability of a proximate adult, and gender. *Journal Marriage Family*1991; 53(1): 71-8.
- 15- Ost LG. Efficacy of the third wave of behavioral therapies: a systematic review and meta-analysis. *Behav Res Ther*2008; 46(3): 296-321.
- 16- Cardaciotto LA. Assessing mindfulness: the development of a bi-dimensional measure of awareness and acceptance [dissertation]. Philadelphia, PA: Drexel University 2005.
- 17- Hayes SC. Acceptance and commitment therapy, relational frame theory, and the third wave of behavioral and cognitive therapies. *Behavior Therapy* 2016; 47(6): 869-85.
- 18- Hayes SC, Bissett RT, Korn Z, et al. The impact of acceptance versus control rationales on pain tolerance. *Psychol Rec*1999; 49(1): 33-47.
- 19- Roemer L, Orsillo SM. An acceptance- based behavior therapy for generalized anxiety disorder. In: Orsillo SM, Roemer L, Eds. Acceptance- and mindfulness-based approaches to anxiety: conceptualization and treatment. New York, NY: Springer; 2005.
- 20- Zargar F, Mohammadi A, Omidi A, Bagherian R. The third wave of behavioral therapy with emphasis on behavior al therapy based on acceptance. *Journal of Behavioral Science Researches* 2013; 10(5): 383-90.
- 21- Kanter JW, Baruch DE, Gaynor ST. Acceptance and commitment therapy and behavioral activation for the treatment of depression: description and comparison. *Behav Anal*2006; 29(2): 161–85.
- 22- Ossman WA, Wilson KG, Storaasli RD, McNeill JW. A preliminary investigation of the use of acceptance and commitment therapy in group treatment for social phobia [Investigación preliminar del uso de la terapia de aceptación y compromiso en el tratamiento grupal de la fobia social]. *Rev Int Psicol Ter Psico*2006; 6(3): 397-416.
- 23- Gifford EV, Kohlenberg BS, Hayes SC, Antonuccio DO, Piasecki MM, Rasmussen-Hall ML. Acceptance-based treatment for smoking cessation. *Behav Ther* 2004; 35: 689-705.
- 24- Fincham FD, Hall J, Beach SR. Forgiveness in marriage: current status and future directions. *Family Relations Journal* 2006; 55(4): 415–27.

- 25- Linehan MM, Dimeff LA, Reynolds SK, et al. Dialectical behavior therapy versus comprehensive validation therapy plus 12-step for the treatment of opioid dependent women meeting criteria for borderline personality disorder. *Drug Alcohol Depend*2002; 67(1): 13-26.
- 26- Baggerly J, Parker M. Child-centered group play therapy with African American boys of the elementary school level. J. Couns. Dev2005; 83: 387-96.
- 27- Lee V, Robin Cohen S, Edgar L, Laizner AM, Gagnon AJ. Meaning-making intervention during breast or colorectal cancer treatment improves self-esteem, optimism, and self-efficacy. *Soc Sci Med*2006; 62(12): 3133–45.
- 28- Christensen A, Atkins DC, Berns S, Wheeler J, Baucom DH, Simpson LE. Traditional versus integrative behavioral couple therapy for significantly and chronically distressed married couples. *J Consult Clin Psychol* 2004; 72(2): 176-91.
- 29- Maddah Z, Elahi T, Fathi-Ashtiani A. Explanation of psychological well-being in students based on spirituality. *Journal of Behavioral Sciences* 2014; 7(4): 355-61.
- 30-Asoodeh M. Factors of successful marriage: accounts

- from self-described happy couples [dissertation]. Tehran: University of Tehran 2011.
- 31- Forman EM, Herbert JD. New directions in cognitive behavior therapy: acceptance based therapies, chapter to appear. in O'donohue W, Fisher JE, eds. Cognitive behavior therapy: Applying empirically supported treatments in your practice, 2nd ed. Hoboken, NJ: Wiley; 2008. pp:263-5.
- 32- Carlson C, Clemmer F, Jennings T, Thompson C, Page LJ. Organizational development 101: lessons from Star wars. *J Individ Psychol*2007; 63(3): 425-39. 33- Moradi M, Jafari SE, Abedi MR. Happiness and personality. *J Cogn Sci*2005; 7(2): 60-71.
- 34- Bagherian Nejad Esphehani Z. Comparison of dissatisfaction marital dimensions in men and women divorce applicant in Esfahan city [dissertation]. Tehran: Tarbiat Moallem university 2002.
- 35- Shachelford TK, Besser A, Goetz AT. Personality, marital satisfaction, and marital infidelity. *Individ Differ Res* 2007; 6(1): 13-25.
- 36- Backus LN. Perception of women towards family value s and their marital satisfaction. *J Am Sci*2009; 6(4), 132-7.

Copyright© 2016 ASP Ins. This open-access article is published under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License which permits Share (copy and redistribute the material in any medium or format) and Adapt (remix, transform, and build upon the material) under the Attribution-NonCommercial terms.