

Emotion-Focused Couple-Based Interventions on Wives Emotional Abuse and Marital Satisfaction

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Abstract

Background: Emotional abuse is a serious type of abuse and comprises a large part of many couples' lives. Marital relationship is in every society and is well-known as one of the most important resources in human relationships. Emotional Abuse Behaviors and marital satisfaction among married couples might be affected by an emotionally focused intervention. Emotionally focused intervention for couples gives a chance for wives and husbands to achieve adequate Foresight for their relationship of marriage and emotionally empower them to handle their problems **Aim:** The study aimed to evaluate the effect of emotion-focused couple-based interventions on the wives' emotional abuse and marital satisfaction **Design:** A quasi-experimental research design with a pretest-posttest was used to achieve the aim of the study. Setting: This study was conducted at the MCH center at El-Batanon, Shebin EL-Kom, Menoufia Governorate, Egypt. **Sample:** sample was 50 couples (100 participants). **Data collection:** Three tools were used; Structured interview questionnaire, Gottman emotional abuse scale, and marital satisfaction Scale. **Results:** Revealed that there is a highly statistically significant difference in all marital satisfaction dimensions as emotional satisfaction, sexual satisfaction, general satisfaction, economical, time spending satisfaction, and total marital satisfaction score pre and post the emotionally focused interventions at (p-value = 0.001). Also, there is a highly significant reduction in emotional abuse post the emotionally focused interventions at p = 0.001 **Conclusion:** according to the results of the study, it was determined that the Emotion-focused couple-based interventions help reduce the wives' emotional abuse and improving marital satisfaction. **Recommendations:** Based on the findings of the present study, implementation of the Emotion-focused couple-based interventions in the routine treatments of Community Centers help reduce the wives' emotional abuse and improving marital satisfaction

Keywords: Emotion-Focused Couple-Based Interventions, Emotional Abuse, Marital Satisfaction.

Introduction:

A close relationship with one's partner has intense effects on physical and psychological health. As a couple relationship functions well it could give the happiness of sharing life and

constitute a great source of support to manage life stressors. Once the relationship is conflicted and troubled, it can be a source of great anxiety, loneliness, and sorrow (Douglas, Snyder, and Kim Halford, 2012). Emotional abuse is a serious type of abuse in which

aims to control someone by stressing their emotions (Mathews, 2019). It can be invisible and dangerous or clear and manipulative. In both cases, it decreases the victim's self-esteem and they begin to distrust their perceptions. The primary aim of emotional abuse is to have power over the victim by degradation, isolation, and silence. Finally, the victim feels ensnared. They are frequently so injured to continue the relationship to any further extent. Also, they are too terrified to depart. So the cycle repeated until something happen (Gordon, 2019).

Emotional abuse can be hard to identify; it is important to consider patterns of behaviors that could be a sign of abuse which may include criticism, threats, and Control. Constant criticism of what the abuse victim says or does with a specific intent to exhibit power, disgrace, and blame. Occasionally emotional abuse manifests as constant blaming and shaming for everything and anything. Plus, this applies in two ways. Abusers may redirect blame or their responsibility for any hurtful actions, leaving the victim feeling like they are the wrong one. Threatening in emotionally abusive relationships frequently happens in two ways: threatening bodily harm and frightening the person to do something he/she does not desire to do. Emotional abuse perpetrators may control the victims' finances in an attempt to compel him/her to continue in the relationship. So that victims often refer to financial manipulation as the major rationale they stay with an abusive partner (Crisis Text Line, 2019).

Once emotional abuse is severe and enduring, the victim may lose their complete sense of self, sometimes without any mark or scratch. While, wounds are hidden to others, concealed in the worthlessness, self-doubt, and self-contempt the victims feel. Research

shows that the consequences of emotional abuse are more severe than those from physical abuse (Remschmidt, 2019). Male and female perpetrators of emotional abuse show elevated rates of personality problems, mostly narcissistic personality disorder, borderline personality disorder, and antisocial personality disorder (Dutton, Donald, Bodnarchu and Mark,2005).

Marital satisfaction is a key element of perceived happiness. Marital satisfaction refers to a global level of favorability that individual spouses report with their marital relationship. Marital satisfaction is often viewed as an individual's interpretation of the overall quality of the marriage (Black et al.,2011). Previous studies revealed that marital satisfaction is linked to the partner's emotional understanding, emotional support, conflict resolution, and solving problem(Johnson,2012) Couple therapy is effective for addressing the plight of the relationship and that modified forms of couple intervention can help in the management of personal psychological problems and help couples handle serious health problems (Lebow, Chambers, Christensen and Johnson,2012).

Emotion-focused intervention can help persons construct skills for healthy responses to hard emotions and learn ways for effective regulation of negative emotions. Our feelings and emotions are linked to our needs. Our emotions compel how we make objectives and maintain the power to achieve our goals. Emotions shape people's decision-making and play an essential role in communicating their feelings and intentions toward others. Based on the theory, emotions are extremely essential for individual experience, it seeks for helping persons recognize experience, build a sense of, and manage emotions to produce positive

change and live healthy (Franco, 2018). EFT therapists request from their clients to be psychologically defenseless with one another to build up affection bonds. Some of EFT's success with couples caused by how it changes the focus to major feelings for instance grief and fear as a substitute for inferior emotions like anger. Through managing the major emotions, therapists assist couples to impede their anger from growing, which, in turn, could help violent couples avoid reaching the end of using violence against each other (Oka, Jason, and Whiting, 2011).

The focus of emotional interventions designed for couples is on emotional intimacy. Lacking emotional intimacy between couples is the main cause of distress. Emotional focused psycho-educational intervention for couples gives a chance for wives and husbands to achieve adequate Foresight for their relationship of marriage and emotionally empower them to handle their problems (Hazrati, Hamid, Ibrahim, Hassan, Sharif and Bagher,2017). EFT interventions assist couples to concentrate on, develop, reformulate, and restructure main experiences. Interactional positions start to adjust due to expressing newly expanded emotional experiences, which after that allow partners to build up healthy and flexible patterns of interaction so improved security of the attachment relationship (Dalglish, Johnson, Moser, Tasca, Lafontaine, and Wiebe,2015). Identifying abuse is the first stair for prevention. It is very difficult for abuse victims to recognize their situation and to ask for help (Langhinrichsen-Rohling and Turner, 2012).

Nurses are often the first person who contacts in healthcare services, who frequently meet women suffering from

distress of partner violence (McGarry and Nairn, 2015). An exploration of the perceptions of emergency department nursing staff towards the role of a domestic abuse nurse specialist: Nurses tend to play an important role in the recognition of individuals who are violent victims, promote safety plan developments in addition to accelerating access to assistance, and support (Alshammari, McGarry and Awoko,2018). Nurses play numerous roles in caring for women who have experienced partner violence encompass identifying abuse, looking after sufferers' bodily health needs, attending to their safety, and making referrals via referring women to several places. Which include counseling services, the police, the judicial clinical Officer, or transient shelters? And, offering psychological, informational, instrumental, and economic assist. In addition to, advice to the woman regarding leaving the abuser, taking legal action, or going to the authorities (Allan and Keeney, 2012), so the study aimed to evaluate the effect of emotion-focused couple-based interventions on wives' emotional abuse and marital satisfaction

Aim of the Study:

The study aims to evaluate the effect of emotion-focused on couple-based interventions on the wives' emotional abuse and marital satisfaction

Materials and methods

Research Hypotheses

Application of emotion-focused couple-based interventions will reduce emotional abuse and improve marital satisfaction

Subjects and Methods

Research design:

A quasi-experimental design (one group pre-test post-test design) was used to achieve the aim of the study.

Research setting:

This study was conducted at the MCH center at El-Batanoon, Shebin EL-Kom, Menoufia Governorate, Egypt. The resulting selection is El-Batanoon. El-Batanoon contains two MCH centers. EL-mogmah was selected randomly from a container containing names of MCH centers which found at El-Batanoon

Sample Size

Based on the review of past literature Hazrati et al. 2017 “ The Effect of Emotional Focused Intervention on Spousal Emotional Abuse and Marital Satisfaction among Elderly Married Couples: A Randomized Controlled Trial ”, In the experimental group, the mean scores of the Wives’ Emotional Abuse Behavior (WEAB) significantly decreased from 51.03 ± 16.61 (Time1) to 17.24 ± 10.83 (Time2) and 10.10 ± 7.13 (Time3). The results revealed that the mean of WEAB was significantly different between the two groups ($P < 0.001$). Based on this result in sample size was calculated at power 80%, the margin of error 5%, and confidence interval 95%. The calculated sample was 50 couples (100 participants).

Subjects

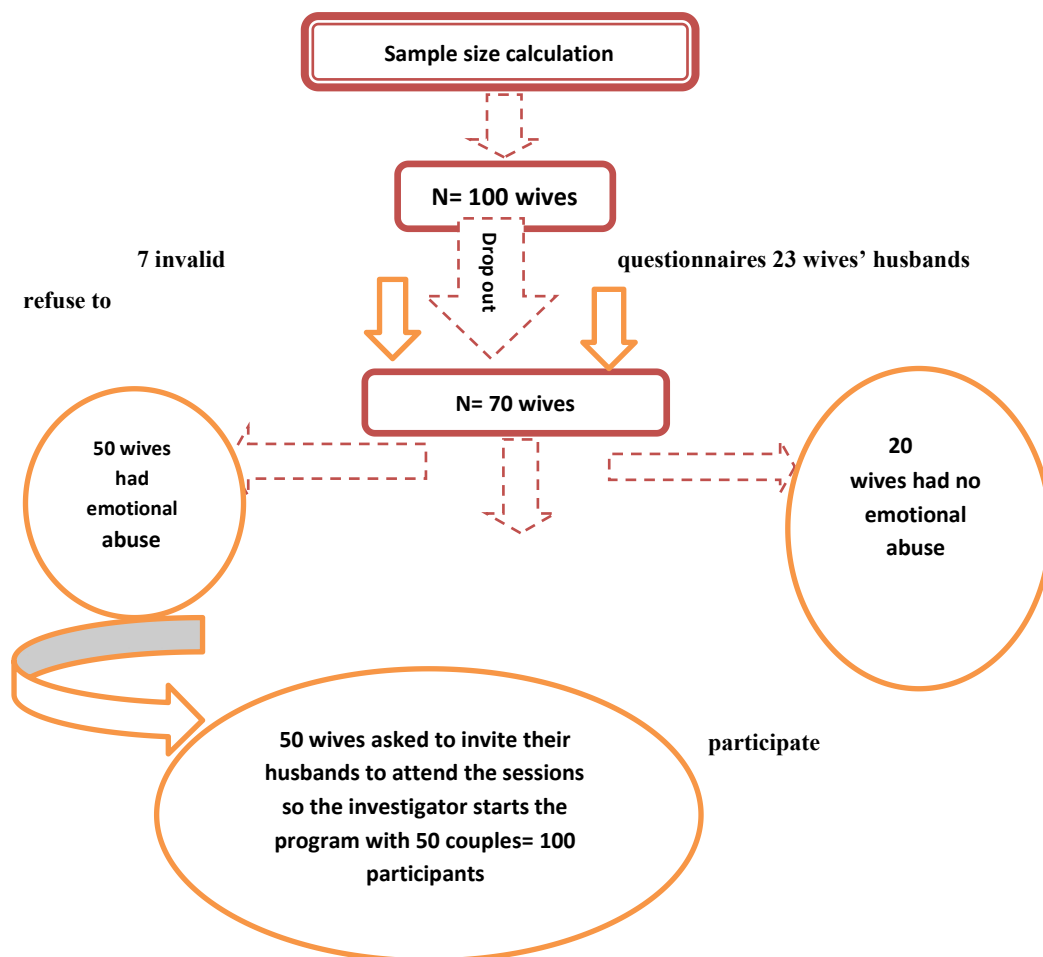
The subject was selected using a multi-stage random sample; Shebin EL-Kom district was selected randomly from a container contains all districts in Menoufia Governorate then, select one city randomly from a container contains all villages found in Shebin EL-Kom district. The resulting selection is El-Batanoon. El-Batanoon contains two MCH centers. EL-mogmah was selected randomly from a container containing names of MCH centers found at El-Batanoon.

- Official permission was taken from the director of EL-mogmah center who states that the day of (Monday) for pregnancy vaccination when females come and the day of (Sunday, Monday and Tuesday) for children vaccination when children come to the center with their mothers (wives)

- The investigator starts to come to EL-mogmah center three days/week (Sunday, Monday and Tuesday) to collect data from wives

- The investigator start study with 100 females (wives) and there were 7 invalid questionnaires, 23 wives who their husbands refuse to participate in the intervention program so, 70 wives were remaining.

- 50 wives from 70 had emotional abuse from their husbands, low level of marital satisfaction. the investigator asks these wives to invite their husbands to attend sessions of the emotionally focused therapy because the focus of this study was on couples due to the type and nature of treatment that has been chosen for couple therapy; therefore, the investigator starts sessions of the program with 50 couples=100 participants.



• Inclusion criteria

1- Wives who had emotional difficulties in their intimate relationship for more than 6 months.

2- Both partners must be able to participate in an interventional group, and they must sign a consent form

• Exclusion criteria

1.The wives who were currently enrolled in any other psychological treatment program

2.The wives who had difficulty with activity daily livings (ADLs) and was dependent upon her spouse for performing daily activities.

3.the wives who experienced abuse (physical, financial, and sexual) other than emotional abuse

4.Both partners (couple) who had a history of a major psychiatric disorder such as schizophrenia, dementia, or depression

5.Both partners (couple) who had a history of current drug or alcohol abuse

6. Both partners (couple) who had use of antidepressant, anti-anxiety, or narcotic drugs

Tools of Data Collection

Based on the review of the related literature four tools were utilized by the researcher to achieve the aim of the study: as the following:

Tool (1): Semi-structured interviewing questionnaire:

Which include socio-demographic characteristics, including age, sex, education.

Tool (2): Gottman emotional abuse scale

This scale was developed by (Jacobson, and Gottman, 1998). It consists of 28 statements. Score 1 point for every "never", 2 points for every "rarely", 3 points for every "occasionally", and 4 points for every "very often." Total these points for your score. If your score is between 73-94= you are being emotionally abused If your score is higher than 95= you are being more severely abused. The Scale was translated by the researcher into the Arabic language.

Tool (3): Marital satisfaction scale

The researcher used the Arabic version of the marital satisfaction scale by **Al-Mashaqbeh, Amani Radwan. (2012)**. The scale consists of 46 statements divided into six dimensions, emotional communication, which is represented in paragraphs (1-8), sexual satisfaction, represented in paragraphs from (9-16) general satisfaction with marriage, represented in paragraphs from (17-24) economic satisfaction, represented in paragraphs from (25-31) Satisfaction with

spending time is represented in paragraphs from (32-39) marital problems and is represented in paragraphs from (40-46). It consists of 46 statements, some of these statements are phrased positively such as paragraphs (1, 2, 8, 10) and other expressions are phrased as negative statements such as paragraphs (6, 7, 20, 22) these statements are rated on a 5-point scale, which are: (5) always, (4) often, (3) sometimes, (2) rare, (1) never. The researcher made modifications for the scoring system ranges, as the responses were rated on a 3-point Likert scale from 1 to 3, which are: (3) always, (2) sometimes, (1) never. According to these answers, scoring ranges from 46 to 138 and means the grades supreme on the scale is high satisfaction with marriage while indicating a low score for low satisfaction with marriage.

Content validity of tools:

Gottman's emotional abuse scale was translated by the researcher to the Arabic language and tested for its content validity by a group of five experts in psychiatric medicine and nursing. The required modification was carried out accordingly.

Reliability of tools

Reliability was applied by the researcher for testing the internal consistency of the tool, by the administration of the same tools to the same subjects under similar conditions on one or more occasions. Answers from repeated testing were compared (Test-retest reliability). The tools revealed reliable at 0.82 for the tool (1), 0.81 for the tool (2), and 0.83.

Pilot Study:

A pilot study was conducted on 10 % of the total sample to test feasibility,

clarity, and applicability of the tools then necessary modifications were done. Data obtained from the pilot study were not included in the current study.

Preparatory phase:

-This phase includes reviewing relevant literature and different studies related to the topic of research, using textbooks, article magazines, periodicals, and internet research to get a clear picture of all aspects related to the research topic.

-Before the beginning of the research, the psychiatric researchers were provided with 12 hours, four hours per day for three days of the training course on emotion-focused therapy that covered the theory and techniques of the approaches in the center of psychiatry Tanta University.

-Administrative and ethical considerations: An official approval was obtained from the Dean of Faculty of Nursing forwarded to the director of EL-mogmah MCH center which was found at El-Batanoon. The participant was asked to give an informed verbal consent to participate. It was emphasized that all collected data was strictly confidential and the data would be used for scientific purposes only.

Data collection phase:

-Data collection for the study was carried out in the period from January 2020 to (April) 2020

-The researcher introduced herself to the participant and a brief description of the purpose of the study and the type of questionnaire required to fill was given to each female participant (wives) only.

- The researcher collected data through interviews with every wives'

participant (wives) who agreed voluntary to participate in the study

So the researcher divided the couples into ten small groups (10 groups with 5 couples). One session of preparation, one session for evaluation, and a total of eight 60-minute sessions were held 3 days/ a week for 10 weeks.

Session one (session of preparation)

1- The researcher describes the goal of intervention

2- The researcher discusses the emotionally abusive behaviors

3- The researcher explains the ground rules, rights, and responsibilities of group members, issues of confidentiality

From two to nine sessions (Stages and Steps according to (Konstantin Lukin's (2017) fall into three main phases

1. **Phase One** – Assess and Deescalate Phase

2. **Phase Two** – Change Events Phase

3. **Phase Three** – Consolidation of Change Phase

Phase one is comprised of the first four steps:

1. Identify the conflict

The researcher helped the couple identify the issues that are occurring and assessed the effect the problem(s) is having on the relationship.

2. Identify the cycle where conflict is expressed

The researcher and the couple dig deep to find the root of the problem(s).

3. Access unacknowledged emotions

The researcher guided the couple through discussion of what each partner is feeling about the conflict cycle, with special attention paid to any emotions that had not previously been brought up between the partner.

4. Reframe

The researcher helps the couple from seeing the problem(s) from a different perspective. I.e. help the couple view the problem from their partner's point of view, which will help each partner to understand the other's emotions and needs.

Once the problem is identified and the couples are successfully seeing the problem from their partner's perspective.

Phase Two involves three steps:

5. Promote the identification of disowned needs

The researcher helped the couple to understand both their wants and needs and their partner's wants and needs. The researcher helped the couple acknowledges that to meet your partner's needs, you must first understand them, and for your partner to meet your needs, you must first share these needs with him or her.

6. Promote partner acceptance

The researcher encouraged each partner to accept the other's emotional

experience and acknowledged their changing experiences.

7. Facilitate expression of needs and wants

The researcher guided each partner in learning how to interact more positively in step seven by a bonding exercise to help the couple promote a healthy new connection.

8. New solutions

The researcher and the couple will come up with new solutions to the original problem. With the new, more positive foundation in place, solving this problem should be much easier than it seemed back in step one.

Phase Three – Consolidation of Change Phase

9. Consolidation

In consolidation, the couple will take what they have learned home to continue developing effective ways to interact and new, more adaptive behaviors.

Session ten (session of evaluation)

Evaluation Phase:

The evaluation phase was done using the same Gottman emotional abuse scale and marital satisfaction scale for wives only to make post-test

Statistical analysis

Data were collected, tabulated, statistically analyzed using an IBM personal computer with Statistical Package of Social Science (SPSS) version 22 (SPSS, Inc, Chicago, Illinois, USA). where the following statistics were applied:

Descriptive statistics: in which quantitative data were presented in the form of mean, standard deviation (SD), range, and qualitative data were presented in the form numbers and percentages.

Analytical statistics: used to find out the possible association between studied factors and the targeted disease. The used tests of significance included:

* Chi-square test (χ^2): was used to study the association between two qualitative variables.

* Fischer exact test for 2 x 2 tables when expected cell count of more than 25% of cases was less than

* Mann-Whitney test (nonparametric test): is a test of significance used for comparison between two groups not normally distributed having quantitative variables.

* Kruskal-Wallis test (nonparametric test): is a test of significance used for comparison between three or more groups not normally distributed having quantitative variables.

* Paired t-test: is a test of significance used for comparison between two related groups having quantitative variables.

* Wilcoxon signed-rank test (nonparametric test): is a test of significance used for comparison between two related groups not normally distributed having quantitative variables.

* McNemar's test assesses the significance of the difference between two correlated proportions.

A p-value of >0.05 was considered statistically non-significant.

A p-value of <0.05 was considered statistically significant.

A p-value of <0.001 was considered statistically highly significant.

Results

In the present study, **table (1)**: Reveals that the studied sample is in the age group (19-59) years, the same percentage 40 % have secondary and high education. 80 % have a home, the majority of the studied 84% have enough income, 80% are worked and 74% have two or more than two children.

Figure (1): shows that there is a highly significant reduction in emotional abuse post the emotionally focused interventions at $p = 0.001$.

As shown in **Figure (2)**: Represents that there is a highly statistically significant difference between the studied group post the emotionally focused interventions at p-value (0.001) and also clarifies that in the studied group the moderate and high level of marital satisfaction pre the emotionally focused interventions are increased from 0.00% for moderate and high level respectively to 28% for moderate and 4% for the high level of satisfaction post the emotionally focused intervention.

Table (2): Represents that there is a highly statistically significant difference in all marital satisfaction factors as emotional satisfaction, sexual satisfaction, general satisfaction, economical, time spending satisfaction, and total marital satisfaction score pre and post the emotionally focused interventions at (**p-value = 0.001**).

Figure (3): Represents that there was a statistically highly significant negative correlation between emotional

abuse and marital satisfaction among the studied group **Post** – the emotionally focused interventions with a high statistical difference at p-value = 0.001. This means that when the emotional abuse decreased, marital satisfaction increased.

Table (3): Reveals that there is no statistically significant difference between emotional abuse and all socio-demographic data except age, job, and income at (**P = 0.004, 0.002, 0.041**) respectively. Regarding age, the wives whose ages ranged from (19 – 59) have no emotional abuse while the wives her age ranged from (21 - 43) have mild emotional abuse. For job, 90% of the wives who work have no emotional abuse and 10% of the wives who did not work have no emotional abuse, while, 40% of the wives who work have mild emotional abuse, and 60% of the wives who did not work have mild emotional abuse.

Regarding Average income, 90% of the wives who have enough income have no emotional abuse and 10% the wives who have not enough income have no emotional abuse, while 40% of the wives who have enough income have mild emotional abuse and 60% form the wives who have enough income have mild emotional abuse.

Table (4): Reveals that there is no statistically significant difference between marital satisfaction and all socio-demographic data except the number of children at (**P = 0.011**). Regarding the number of children, 76.4% of the wives who have ≥ 2 children have low marital satisfaction and 11.8% of the wives who have < 2 children have low marital satisfaction, while 78.6% of the wives who have ≥ 2 children have moderate marital satisfaction and 7.10% of the wives who have < 2 children have moderate marital satisfaction

Table (1): Socio-demographic characters of the studied groups

| Socio-demographic characters | (N=50) | No. | % |
|------------------------------|-----------------------|-----------------|------|
| Age / years | Mean \pm SD | 39.6 \pm 11.5 | |
| | Range | 19 - 59 | |
| Educational level | Illiterate | 2 | 4.00 |
| | Preparatory education | 8 | 16.0 |
| | Secondary education | 20 | 40.0 |
| | High education | 20 | 40.0 |
| Type of home | Owner | 40 | 80.0 |
| | Rent | 10 | 20.0 |
| Working status | Work | 40 | 80.0 |
| | Not work | 10 | 20.0 |
| Average income | Not enough | 8 | 16.0 |
| | enough | 42 | 84.0 |
| Number of children | ≥ 2 | 37 | 74.0 |
| | <2 | 7 | 14.0 |
| | No | 6 | 12.0 |

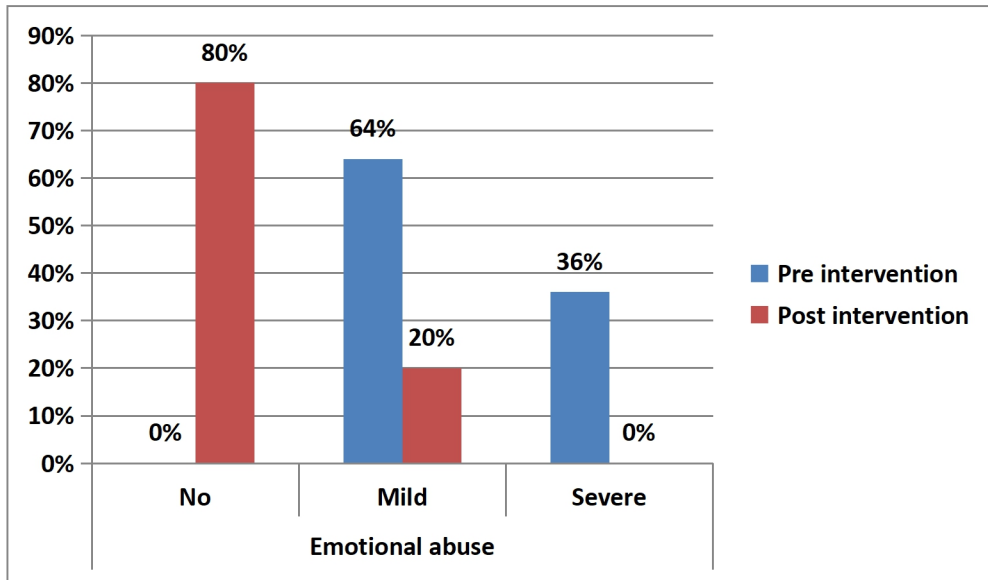


Figure (1): Pre and post-intervention emotional abuse among the studied groups

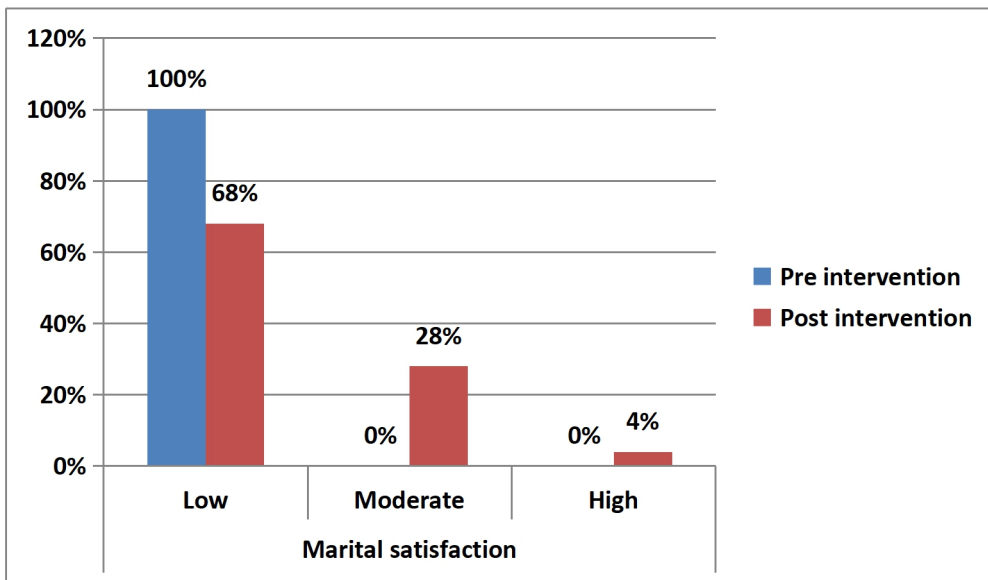


Figure (2): Pre and post-intervention total marital satisfaction among the studied groups

Table (2): Pre and post-intervention marital satisfaction dimensions among the studied groups

| Studied variables | Pre-intervention | Post-intervention | Paired t-test | P-value |
|----------------------------|------------------|-------------------|---------------|----------------|
| Emotional satisfaction | 9.56±3.28 | 14.3±3.04 | 6.22# | 0.001** |
| Sexual satisfaction | 8.56±2.40 | 12.1±2.36 | 31.5 | 0.001** |
| General satisfaction | 10.2±2.30 | 13.8±2.61 | 29.2 | 0.001** |
| Economical satisfaction | 9.00±2.52 | 12.6±2.21 | 23.7 | 0.001** |
| Time spending satisfaction | 9.52±1.98 | 13.2±2.37 | 22.9 | 0.001** |
| Total marital satisfaction | 56.2±12.4 | 78.6±12.5 | 20.4 | 0.001** |

Wilcoxon test **High significant

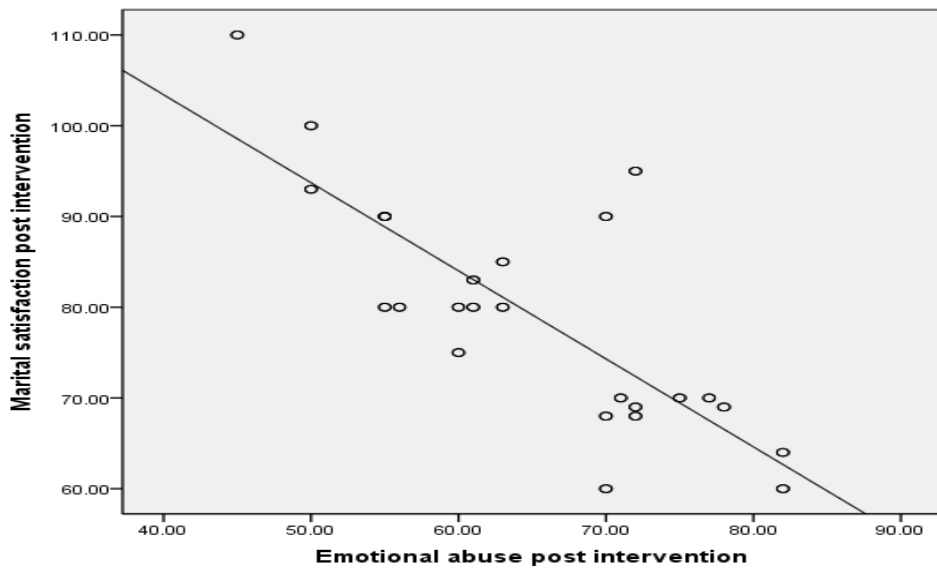


Figure (3): Correlation between total marital satisfaction and emotional abuse post-intervention among the studied groups

Table (3): Relation between emotional abuse and socio-demographic characters of the studied groups

| Socio-demographic characters | Emotional abuse | | | | Test of sig. | P-value |
|------------------------------|-----------------|------|-------------|------|--------------|----------------|
| | No (N=40) | | Mild (N=10) | | | |
| | No. | % | No. | % | | |
| Age / years | | | | | U | |
| Mean ±SD | 42.0±11.1 | | 30.2±7.87 | | 2.86 | 0.004** |
| Range | 19 - 59 | | 21 - 43 | | | |
| Educational level | | | | | | |
| Illiterate | 2 | 5.00 | 0 | 0.00 | | |
| Preparatory education | 4 | 10.0 | 4 | 40.0 | X2= | |
| Secondary education | 18 | 45.0 | 2 | 20.0 | 6.50 | 0.100 |
| High education | 16 | 40.0 | 4 | 40.0 | | |
| Type of home | | | | | FE= | |
| Owner | 32 | 80.0 | 8 | 80.0 | 0.00 | 1.00 |
| Rent | 8 | 20.0 | 2 | 20.0 | | |
| Working status | | | | | FE= | |
| Work | 36 | 90.0 | 4 | 40.0 | 12.5 | 0.002** |
| Not work | 4 | 10.0 | 6 | 60.0 | | |
| Average income | | | | | FE= | |
| Not enough | 4 | 10.0 | 4 | 40.0 | 5.35 | 0.041* |
| Enough | 36 | 90.0 | 6 | 60.0 | | |
| Number of children | | | | | | |
| ≥ 2 | 27 | 67.5 | 10 | 100 | X2= | |
| < 2 | 7 | 17.4 | 0 | 0.00 | 4.39 | 0.111 |
| No | 6 | 15.0 | 0 | 0.00 | | |

FE: Fisher exact test U: Mann Whitney test *Significant **High significant

Table (4): Relation between marital satisfaction and socio-demographic characters of the studied groups

| Socio-demographic characters | Marital satisfaction | | | | | | X2 | P-value |
|------------------------------|----------------------|------|-----------------|------|------------|------|------|---------------|
| | Low (N=34) | | Moderate (N=14) | | High (N=2) | | | |
| | No. | % | No. | % | No. | % | | |
| Age / years | | | | | | | K | |
| Mean ±SD | 39.8±11.4 | | 37.0±11.1 | | 55.0±0.00 | | 4.00 | 0.135 |
| Range | 19 - 59 | | 25 - 57 | | 55 | | | |
| Educational level | | | | | | | | |
| Illiterate | 2 | 5.90 | 0 | 0.00 | 0 | 0.00 | | |
| Preparatory education | 6 | 17.6 | 2 | 14.3 | 0 | 0.00 | 5.63 | 0.466 |
| Secondary education | 14 | 41.2 | 4 | 28.6 | 2 | 100 | | |
| High education | 12 | 35.3 | 8 | 57.1 | 0 | 0.00 | | |
| Type of home | | | | | | | | |
| Owner | 28 | 82.4 | 10 | 71.4 | 2 | 100 | 1.26 | 0.532 |
| Rent | 6 | 17.6 | 4 | 28.6 | 0 | 0.00 | | |
| Working status | | | | | | | | |
| Work | 24 | 70.6 | 14 | 100 | 2 | 100 | 5.88 | 0.053 |
| Not work | 10 | 29.4 | 0 | 0.00 | 0 | 0.00 | | |
| Average income | | | | | | | | |
| Not enough | 8 | 23.5 | 0 | 0.00 | 0 | 0.00 | 4.48 | 0.106 |
| enough | 26 | 76.5 | 14 | 100 | 2 | 100 | | |
| Number of children | | | | | | | | |
| ≥ 2 | 26 | 76.4 | 11 | 78.6 | 0 | 0.00 | | |
| < 2 | 4 | 11.8 | 1 | 7.10 | 2 | 100 | 13.0 | 0.011* |
| No | 4 | 11.8 | 2 | 14.3 | 0 | 0.00 | | |

K: Kruskal Wallis test *Significant **High significant

Discussion

Spouse abuse is a multi-layered global phenomenon. Spouse emotional abuse is the most widespread type of spouse abuse as about half of both male and female stated that they had experienced emotional violence during lifetime (**Black et al., 2011**). Emotional intervention for couples focuses on emotional intimacy. Couples who have a successful and happy marriage aren't cleverer or more intelligent, but they can reduce their negative feelings and stimulate their positive feelings (**Doss, Simpson, & Christensen, 2004**). Therefore, the present study aimed to evaluate the effect of emotion-focused couple-based interventions on wives' emotional abuse and marital satisfaction.

Regarding sociodemographic characteristics of studied subjects, the results of the current study showed that the mean age was 39.6 ± 11.5 of subjects whose age ranged from 19 to 59 years and that most of them had secondary and high education, most of the subjects were from rural areas also the highest percentage of them had work, had enough income and had 2 children or more. These results do not agree with (**Hazrati et al., 2017**) regarding age as the majority (80.70%) were between 60 and 70 years old. not agree with the current study regarding income and 73.68% were low-income. at the same time, the results of that study comes in agreement with the current study regarding the educational level of subjects as 66.7% of them completed their secondary education. This finding was also in the same line with **Hazrati, Hamid, Ibrahim, Hassan, Sharif, and Bagher (2017)** who illustrate that most of their study subjects were low income, the majority of them had secondary education. While that study didn't agree with the current study regarding the main age group as the

majority of their subjects ranged from 60 and 70 years old. These differences might be due to different age groups.

The findings of the current study offered extra support for the use of emotion-focused therapy in the improvement of emotional abuse after the nine-sessions intervention. As presented in figure (1) which showed a highly significant reduction in emotional abuse post the emotionally focused interventions at $p = 0.001$. where those who have no emotional abuse improved from 0% before intervention to 80% after the intervention and those who have severe emotional abuse improved from 36% before intervention to 0% after intervention. This could be due to the effect of the sessions of emotion-focused therapy which was within the participant's need and interest. This improvement observed in this study was in the same result evaluated by **Shahmoradi, Keshavarz, Goudarzy, and Gholam (2019)** who reported that subjects in the emotion-focused therapy group experienced significant decreases in marital violence after the intervention. In the same line with **Hazrati, Hamid, Ibrahim, Hassan, Sharif, and Bagher (2017)** concluded that couple-based emotion-focused interventions were successful in reducing spousal emotional abuse. Although, subjects of that study were older people and there is a negative belief which claims that old people are impossible to change the way they think and their behalf, they showed a significant decrease in emotional abuse. Which in role show the degree to which emotion-focused couple-based therapy was strongly effective.

Concerning the effectiveness of emotionally focused therapy on marital satisfaction, the findings of the current study offered primary support that emotion-focused therapy was effective as

it relates to marital satisfaction as presented in figure 2 and table 2. This clarifies the importance of emotion-focused therapy sessions on marital satisfaction in the same context, results of the current research were consistent with **Ziyaolhagh, Hassanabadi, Ghanbarihashemabadi and Modares Gharavi (2012)** who revealed that marital adjustment expressively improved by emotionally focused therapy. Additionally, this result was consistent with the previous study in Iran **Ahmadi, Zarei, and Fallahchai (2014)** who concluded that marital conflicts of couples who received 9 sessions of emotionally focused therapy considerably decreased compared with those in the control group.

Similarly, in an investigation, of couples' group psycho-educational intervention outcomes were appraised for 80 married troubled couples, **Babcock, Gottman, Ryan, and Gottman(2013)** reported that problems and conflicts considerably decreased, and marital satisfaction meaningfully increased at a one-year follow-up. In the same context, results of the current research were consistent with **Dalglish, Johnson, Burgess, Lafontaine, Wiebe, and Tasca (2015)** who found that marital satisfaction had significantly improved among the majority of couples' post-therapy. As well as this finding was also congruent with **Beasley and Ager (2019)** who concluded that emotion-focused couple therapy is an effective treatment not only in facilitating change during treatment but also in maintaining those improvements as it relates to marital satisfaction. Moreover, this finding of the current study was in accordance with empirical evidence of **Rostami, Taheri, Abdi, and Kermani (2014)** who reflected that emotion-focused intervention has been effective in increasing the pointers of couples' marital satisfaction.

Even with infertile couples, **Najafi, Soleimani, Ahmadi, Javidi, and Hoseini (2015)** found that emotionally focused therapy had a significantly positive effect not only on the enhancement of marital adjustment but also improved the infertile couples' physical, psychological and social relationships and enhanced their social environment and quality of life at all. As well as With gay male couples who represent an unstructured form of family Therapists, **Allan and Johnson (2017)** reported that emotionally focused therapy (EFT) is a primarily supported therapy that displays perfect structure and map for dealing with gay couples. These all similarities show the extent to which emotionally focused couple therapy could be used as an effective approach to resolve marital conflicts and in role improve marital satisfaction.

Regarding the Correlation between total marital satisfaction and emotional abuse post-intervention among the studied subjects showed in figure 3. The results of the current study revealed that there was a highly statistically significant negative correlation between emotional abuse and marital satisfaction among the studied subjects after the intervention. This means that when emotional abuse decreased, marital satisfaction increased. It seems that any decline in emotional abuse led to improving marital satisfaction. This result supported by **Hazrati, Hamid, Ibrahim, Hassan, Sharif, and Bagher (2017)** whose study results revealed a high improvement in marital satisfaction in response to a decrease in emotional abusive behaviors. This point of view was also congruent with **Johnson (2005)** who revealed that lower levels of marital satisfaction were associated with higher levels of sadness and anger. Also congruent with **Knabb and Vogt (2011)** who found that the partner's feeling strongly affects the

marital relationship and adjustment. These results confirm our findings that marital satisfaction statistically improved by decreasing emotional abuse.

Concerning the relation between emotional abuse and socio-demographic characters of studied women, the results of the current study (Table 3) revealed that there was no statistically significant difference between emotional abuse and most socio-demographic data. Which might be due to minimal socio-demographic differences among the participants. It also may be due to the intergeneration cultural transmission of perceptions related to accepting violence as a normal issue in the marriage relation. This comes in agreement with **Hamad (2016)** Who reported that there was no significant correlation between socio-demographic characteristics and being abused or not. On the other hand, **Kramer, Lorenzon, and Mueller (2004)** reported a high rate of abuse among less-educated women. As well as **Bahmani, Sayehmiri, Daliri, and Karimi (2018)** whose study findings showed that the chance of exposure to violence was higher among lower educated women than higher levels of education.

As for age, the results of the current study showed that there was a highly statistically significant relation between wife age and exposure to emotional abuse. This could be explained as the woman's experience and ability to cope with and solve conflicts improved with age. Or that the couple's ability to understand each other increased with time and gets a feel for each other's temperaments, likes, and dislikes. This result supported by **Karakurt and Silver (2013)** who concluded that emotional abuse was more common in younger participants. Also, **Rivara et al., (2009)** found that intimate partner violence was most common among women in their

mid-20s to early 30s and the risk decreased with age, with substantial drop-offs after age 50. Also, **Žukauskienė, Kaniušonytė, Bakaitytė, and Truskauskaitė – Kunevičienė (2019)** reported that higher possibilities for intimate partner violence were seen among younger than 30 years old women. Additionally, **Ranji and Sadrkhanlo (2012)** in their study reported that the possibility of exposure to abuse in women 26-34 years was 1.65 times more than women whose age younger than 25 years old. Moreover, this finding of the current study was in accordance with empirical evidence of **Dolatian, Gharache, Ahmadi, Shams, and AlaviMajd (2010)** who stated that 58% of women subjected to violence were 18 to 13 years old.

As for working status, the result of the current study showed that there was a highly statistically significant relation between working status and exposure to emotional abuse. 90% of women who have no emotional abuse were working women. This means that working women were less likely to be exposed to violence than non-working women. This could be explained as working women spend a lot of time away from husband and home and be occupied most of the time. So, she hasn't the time to think about conflicts and of being emotionally abused. Also, this could be caused by the husband appreciates the wife's fatigue at work and her financial contribution at home. This comes in agreement with **Hassan, Kashanian, Hassan, Roohi, and Yousefi (2014)** who reported that the possibility of exposure to violence between housewives was once and half times than working wives. And also agree with **Young and Li (2010)** who reported that Women's socioeconomic dependence on men makes women at specific risk of exposure to domestic violence. While **Macy, Martin, Kupper, Casanueva, and Guo (2007)** found that there was no

significant difference between the occupation of women and exposure to domestic violence.

On the other hand, the current result comes in disagreement with **Begum, Donta, Nair, and Prakasam (2015)** who reflected that a higher rate of domestic violence was detected among employed women. And that, Employed women, were 1.61 times at risk for experiencing violence than unemployed ones. Also, **Krishnan, Rocca, Hubbard, Subbiah, Edmeades, and Padian (2010)** reported that Working women were more likely to experience violence than women who were not working. As well as, **Bahmani, Sayehmiri, Daliri, and Karimi (2018)** showed that domestic violence against employed women was lower than housewife women.

Regarding income, the results of the current study showed that those who have enough income were less likely to experience emotional abuse than those who have not enough income. This can be explained by the fact that bad living conditions lead to severe psychological pressure on the man, which leads to a psychological imbalance that in turn causes the occurrence of abnormal practices and may engage in a more aggressive pattern of behaviors that may amount to committing crimes and assaults of various kinds, psychological and physical as well. This also corresponds to the results of the current study concerning the woman's working condition which in role leads to improvement of financial level and so associated with decreased exposure to emotional abuse. This is supported by **Kramer, Lorenzon, and Mueller (2004)** who reported an elevated rate of exposure to abuse among poor women. Also, **Žukauskienė, Kaniušonytė, Bakaitytė, and Truskauskaitė – Kunevičienė, (2019)** concluded that higher income was

associated with a lower risk of psychological abuse. And also **Abramsky, (2019)** found that higher income was associated with reduced IPV. As well as **Ahmadabadi, Najman, Williams, and Clavarino (2017)** found that low household income was associated with increased risk of violence and abuse among partners.

Regarding the relation between marital satisfaction and socio-demographic characters of the studied groups, the results of the current study revealed that there was no statistically significant relationship between marital satisfaction and all socio-demographic data except the number of children. These results were supported by **Taban, Dolatshahi, Eftekhar, and Pourshabaz (2017)** who revealed that the relationships between age, family size, income, and other demographic criteria and marital satisfaction were not significant. While, on the contrary **Islam, Shahrer, and Sultana (2015)** found that most socio-demographic factors had a significant effect on marital adjustment.

Regarding the number of children, the results of the current study showed that an increased number of children was associated with reduced marital satisfaction. This result associate with other results in the current study regarding family income. as with the increased number of children, stressors increased in the family including economic, social, emotional, and other types of stressors that lead to increase abuse, violence. Hence, it causes decrease satisfaction. Previous studies' results were supportive as **Begum, Donta, Nair, and Prakasam (2015)** who found that a higher prevalence of domestic violence was observed among women, having more than one child. Also, **Bahmani, Sayehmiri, Daliri, and Karimi (2018)** indicated that domestic violence against

women who had fewer children was lower than women with more children. As well as, **Ranji and Sadrkhanlo (2012)** reported that women who had more children, were exposed to violence 1.83 times more than others. And Hassan, Kashanian, Hassan, Roohi, and Yousefi (2014) found that women who have more than 3 children were exposed to violence 1.25 times more than women who have fewer children.

Conclusion:

According to the results of the study, it was determined that the Emotion-focused couple-based interventions help reduce the wives' emotional abuse and improving marital satisfaction.

Recommendations:

Based on the findings of the present study, implementation of the Emotion-focused couple-based interventions in the routine treatments of Community Centers help reduce the wives' emotional abuse and improving marital satisfaction

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Conflict of Interest:

There are no conflicts of interest between the authors

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Ethical Clearance:

An official approval was obtained from the Dean of Faculty of Nursing forwarded to the director of EL- mogmah MCH center which was found at El-Batanoon. The participant was asked to give an informed verbal consent to participate. It was emphasized that all collected data was strictly confidential and the data would be used for scientific purposes only.

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