



Comparing the effectiveness of positive couple therapy group training and integrated behavioral approach on empathy and intimacy of infertile couples

Mohammad. Vahidi Farashah¹
Abdollah. Shafieabadi^{3*}
Anahita. Khodabakhshi Koolae²

1. Ph.D. Student, Department of Psychology and Counseling, Faculty of Humanities, North Tehran Branch, Islamic Azad University, Tehran, Iran
2. *Corresponding author: Professor, Department of Counseling, Allameh Tabatabaee University, Tehran, Iran
3. Associate professor, Department of Psychology and Educational Sciences, Faculty of Humanities, Khatam University, Tehran, Iran

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Abstract

Aim: The aim of this study was to compare the effectiveness of positive couple therapy group training and integrated behavioral approach on empathy and intimacy of infertile couples.

Methods: The research method was quasi-experimental or pre-test, post-test and follow-up with a control group. The statistical population of the study includes all infertile couples who referred to counseling and treatment centers in Shiraz in 2019, among whom 45 were selected by purposive sampling method and based on the convenience sampling method from the referring couples. Were randomly assigned to three groups of 15 individuals. Christensen et al.'s (2010) behavioral-integrated couple therapy program was performed in 8 sessions of 90 minutes and the positive couple therapy program of Rashid and Seligman (2013) was performed in 8 sessions of 90 minutes weekly but the control group did not receive any intervention. All three groups answered the Juliet and Farrington (2006) empathy questionnaires and Walker and Thompson (1983) marital intimacy questionnaires in pre-test, post-test and follow-up. Data were analyzed using repeated measures analysis of variance using SPSS.22 software.

Results: The results showed that both therapies could improve empathy ($F= 107.92, P<0.001$), and marital intimacy ($F= 116.81, P<0.001$), but Positive group education had a greater effect on research variables ($P<0.01$).

Conclusion: It can be concluded that group training of positive couple therapy and integrated behavioral approach is effective on empathy and intimacy of infertile couples and can be effective in improving the problems of infertile couples.

Keywords: Positive couple, integrated behavioral approach, empathy, intimacy.

Introduction

The phenomenon of infertility, having the conditions of a crisis event, i.e. duration, complex conditions, unpredictability and uncontrollability of the conditions, creates an all-round crisis in the life of infertile couples and brings various problems and damages. (Gril et al., 2018). Studies show that psychological factors can play a role in causing infertility and that infertility has psychological consequences along with a decrease in intimacy, empathy and positive feelings towards the spouse (Pafoni et al., 2017). Intimacy is one of the needs of a husband and wife's life, and at the same time, it is a characteristic of a successful and happy couple. The depth of intimacy that people create in their relationship depends to a large extent on their ability to accurately, effectively and clearly communicate their thoughts, feelings, needs, desires and desires. Therefore, learning how to communicate effectively is the first step in the process of creating or increasing intimacy in any relationship (Lee et al., 2019).

One of the factors that play a significant role in the health and well-being of the family, as well as the compatibility of couples in married life, is the positive feelings of couples towards each other (Cooper et al., 2018). Husband and wife expect their life to be accompanied by happiness, prosperity, satisfaction and intimacy and to enjoy every moment of their life. Hence, more important than the marriage itself is the success of the marriage or intimacy and positive feelings between the couple (Pilar et al., 2016). In fact, it can be said that it is the individual's emotions that affect intimate relationships such as a couple's relationship and their emotional connection and satisfaction. In various studies, the relationship between negative affect and marital discord has been shown (Weber et al., 2016).

Nowadays, various approaches of couple therapy and family therapy have been created with the aim of reducing conflicts and communication confusion between couples. The goal of couples therapy is to help couples adapt more appropriately to current problems and learn more effective ways of communicating. One of the effective approaches of couple therapy in solving marital problems of couples is positive couple therapy (Peng et al., 2014). At the beginning of the current century, psychologists and psychological issues have focused more on positive human experience and what makes one moment better than another. Positive psychology has focused on three areas of human experiences to define the scope and orientation of positive psychology with their help. At the mental level, it emphasizes positive mental states such as hope and optimism and positive emotions such as happiness, satisfaction with life, peace and intimacy. At the individual level, it focuses on the traits and characteristics of people such as courage, loyalty, honesty, patience, and wisdom, and at the social level, it focuses on progress, creativity, maintaining a positive attitude, and civic virtues (McMaine et al., 2015). Positive psychology emphasizes the positive processes, virtues and abilities of people, it advises therapists to pay attention to the positive processes of their clients that rarely and rarely occur in their lives. This view encourages people to use their abilities and qualities in the main areas of their lives (work, parenting, love, etc.) and consider this as a duty. In fact, positive psychology works on a person's attitudes towards problems (Peng et al., 2014). It seems that trying to control intra-family conflicts and increasing family support through the

development of emotions, reducing negative emotions and organizing behavior, with the help of two models of positive couple therapy and integrated behavioral approach, can help improve the empathy and intimacy of couples. In this regard, the purpose of this research is to train positive couple therapy group and compare its effectiveness with integrated behavioral approach on empathy and intimacy of infertile couples. The current research sought to answer the following questions:

- 1- Was the group training of positive couple therapy and integrated behavioral approach effective on the empathy and intimacy of infertile couples in the post-examination phase?
- 2- Was group training of positive couple therapy and integrated behavioral approach on empathy and intimacy of infertile couples stable in the follow-up phase?

Method

The research method was quasi-experimental or pre-test, post-test and follow-up with a control group. The statistical population of the study includes all infertile couples who referred to counseling and treatment centers in Shiraz in 2019, among whom 45 were selected by purposive sampling method and based on the convenience sampling method from the referring couples. Were randomly assigned to three groups of 15 individuals. Christensen et al.'s (2010) behavioral-integrated couple therapy program was performed in 8 sessions of 90 minutes and the positive couple therapy program of Rashid and Seligman (2013) was performed in 8 sessions of 90 minutes weekly but the control group did not receive any intervention. All three groups answered the Juliet and Farrington (2006) empathy questionnaires and Walker and Thompson (1983) marital intimacy questionnaires in pre-test, post-test and follow-up. Data were analyzed using repeated measures analysis of variance using SPSS.22 software.

Results

It shows the frequency and percentage of demographic findings including age (20 to 40 years) and education (diploma, bachelor's and master's degree) of the sample people in the three target groups.

The results of the Shapiro-Wilks test showed that the significance levels of the normality statistics are greater than 0.05 ($P < 0.05$), so the distribution of scores has a normal distribution. Therefore, the data distribution is normal and the parametric test of multivariate covariance analysis can be used and its results are reliable. The results of the M. Box test show that because the obtained significance level is greater than 0.05, the research data did not question the assumption of equality of variance-covariance matrices; Therefore, this assumption has also been met. Since the homogeneity of the variance-covariance matrices is established, the parametric test of variance analysis with repeated measurements can be used. The results of Levene's test showed that since the assumption of the homogeneity of the variances error is established, the analysis of variance test with repeated measurements can be used.

The F ratio obtained in the groups factor is significant in the dimensions of empathy ($p < 0.01$) and marital intimacy ($p < 0.01$). This finding indicates that the group training of positive-oriented couple therapy and integrated behavioral approach improved the empathy and marital intimacy in couples. In this regard, an analysis of variance with repeated measurements was done for the experimental

group in three stages of therapeutic intervention, which was the F ratio observed in the improvement of empathy and marital intimacy.

It confirmed the effectiveness of two methods of positive attitude and integrated behavioral therapy in a group way in improving empathy and intimacy. In this way, both treatment methods can improve empathy and intimacy, but group-based positivity had a greater effect on research variables. Therefore, the assumption of the research that there is a difference between the effectiveness of positive attitude and integrated behavioral therapy in a group way on empathy and intimacy was confirmed.

Conclusion

The results showed that according to the obtained findings, it can be seen that the positive treatment method had a greater effect on empathy and intimacy compared to integrated behavioral therapy.

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