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The Effectiveness of Solution-Focused Therapy on Couples' Marital Adjustment in Conflicted Couples

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Abstract: Solution-Focused Therapy is a type of psychotherapy that focuses on solutions rather than on gaining insight into challenges and concerns. This approach used a variety of principles to generate solutions for those who need them through a therapeutic process. The current study aimed to examine the effectiveness of solution-oriented approach on marital adjustment in conflicted couples in Kermanshah (Iran). This experimental study was conducted with an experimental pre-test-post-test with a control group design. The statistical population included all the conflicted couples in Kermanshah city in 2020 that referred to Kermanshah counseling centers due to marital conflicts and received a diagnosis of marital conflict by a psychologist. Participants were 30 couples were selected by random sampling and randomly assigned in experimental and control groups (15 couples in each group). Pre-test and posttest was administered in the control and experimental groups before and after intervention. Dyadic Adjustment Scale (DAS) and Rahim Organizational Conflict Inventory were used to collecting data. For analyzing the data Covariance analysis was used. The results indicated that the solution-oriented approach is effective on marital adjustment in conflicting couples. Overall, results support the use of SFT in increasing the marital adjustment and provide an effective approach that is more strength based and fewer problems focused.

Keywords: Solution-oriented approach, marital adjustment, conflicted couples

Introduction

Marital conflict is caused by inconsistency between married couples in the type of needs and the method of satisfying them, self-centeredness, differences in desires, behavioral schemas and irresponsible behavior towards marital relationship and marriage. Systemic therapists see conflict as a result of any kind of conflict over possession of the power base and sources of power between couples. There are two types of conflict in marital relations: constructive conflict and harmful conflict. In constructive conflict, the focus is on solving the problem, and in harmful conflict, couples attack each other instead of the problem (Bakhshipour et al., 2012). If the conflict is poorly managed, it destroys the married life and leaves harmful effects on the physical and emotional health of the couple (Mahoney, 2006). Also, marital conflicts are associated with important consequences in the family such as poor adjustment, ineffective parenting, poor marital adjustment, marital boredom and increased probability of parent-child conflicts (Falahzade & Hashemi Gashnigani, 2016). Conflict is an inevitable part of human existence. Whether in personal life or in collective life, whenever and wherever people are in a group, there is a possibility

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of conflict. Also, conflict can lead to both the growth of positive relationships and the growth of conflict. Conflict resolution is one of the most important aspects of everyday life.

Some researchers have also argued that conflict resolution skills are critical to maintaining interpersonal skills. In fact, having logical conflict resolution strategies is an effective barrier against family-dissolving conflicts and can even help to better solve problems faced by couples (Thayer et al., 2008). When conflict occurs, relationships become weaker or stronger; Therefore, conflict is a critical point in the path of establishing relationships that may improve relationships or destroy them. If the conflict is used in a useful way, it can become a fruitful factor towards a deeper understanding of relationships and mutuality. Therefore, whether a relationship is healthy or unhealthy does not depend on the amount of conflict between the people involved, but rather on how the conflict is distributed and resolved; Therefore, this point should be taken into consideration in solving marital conflicts (Karamiboldaji et al., 2014). In recent decades, researchers have extensively studied marital compatibility with various aspects of human life. The concept of marital compatibility has a prominent place in the study of family and marital relationships. Marital adjustment can be defined as a process that comes with several consequences such as difficulty in understanding gender differences, personal and interpersonal anxiety, marital satisfaction, etc. (Ravshan et al., 2012). Hall (cited by (Khatibi, 2016) defined marital compatibility as follows: complex factors such as the amount of conflict and participation in activities that are associated with the happiness and success of married life, or he defines it as the capacity to adapt, the ability to solve problems .

Marital compatibility is a process that occurs during the life of a couple; Because it requires the adaptation of tastes, the recognition of personality traits, the creation of behavioral rules and the formation of communication patterns. According to Saggino et al. (2016), compatible couples are husbands and wives who have a lot of agreement with each other; They are satisfied with the type and level of their relationships; They are satisfied with the type and quality of their free time and they apply good management in terms of their time and financial issues. Many factors are involved in the continuity of married life and the basic condition in this matter is marital compatibility. Nowadays, couples experience severe and comprehensive problems in order to communicate and maintain a sincere relationship, and in fact, the problem of marital incompatibility causes confusion between couples more than any other category. So that the epidemiological study of research shows that marital incompatibility is an important risk factor for marital dissatisfaction and divorce (Zarei et al., 2017). Psychologists and counselors have used various approaches and treatments to increase marital compatibility and improve conflict resolution strategies, for example, group training of couples based on communication therapy approach (Khanji Vashki et al., 2014); Group therapy based on quality of life (Dehghani, 2016); Integrated couple therapy based on self-regulation-attachment (Etemadi & Arianfar, 2017) to increase marital compatibility and treatments such as training program to enrich interpersonal relationship skills

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(Shokri & Pourshahriar, 2019) and emotion-oriented couple therapy and Couple therapy using the Gutman method (Havassi et al., 2017) has been used to improve conflict resolution strategies.

According to the research evidence, it seems that solution-oriented treatment is effective in increasing the marital compatibility of conflicted couples. Many therapeutic interventions have been used to reduce conflicts between couples and improve people's quality of life, among which solution-oriented therapy can be mentioned. Solution-focused therapy is based on the assumption that people are healthy and competent and have the ability to create solutions that can improve their lives, they just need to be helped to get rid of their preoccupation with their failures and focus on their abilities (Murray & Murray Jr, 2004). Since solution-oriented therapy is designed to be short-term, the therapist with his active role tries to change the focus from problems to solutions as quickly as possible. The therapist gently but persistently guides the client to search for abilities and find solutions, so the basic strategy is to stimulate the initiative of the client so that he can recognize his abilities (Goldenberg & Goldenberg, 1984).

Solution-focused therapy takes a non-pathological view of clients and helps them find solutions to their current problems. Therefore, solution-oriented therapy is not based on problem solving and does not deal with existing issues and their causes in the past, but is based on creating solutions and is guided by discovering the current strengths of the clients and hoping for the future. Instead of emphasizing people's flaws and inabilities, this approach focuses on highlighting their capabilities and successes and creating supportive relationships during the treatment process. This treatment method believes that clients have the skills and creativity necessary for change. Based on the solution-oriented perspective, change and transformation are inevitable and all kinds of changes, especially constructive changes, are possible, so this type of treatment focuses on issues that are likely to change, instead of hard and unchangeable areas, and it has become known as hopeful counseling (Murray & Murray Jr, 2004).

According to the characteristics that were listed for the solution-oriented approach, this approach is theoretically considered as one of the appropriate treatment methods in increasing the marital compatibility of conflicting couples, but according to the researcher's investigations, there is no attempt to show the effectiveness of this approach on the variables mentioned earlier. Therefore, ignoring the solution-oriented approach in increasing the marital compatibility of conflicted couples can be considered a serious gap in the research literature, which the purpose of the present study is to fill a part of it; therefore, in this regard, the present study aimed to study the effectiveness of the solution-oriented approach on marital compatibility and conflict resolution strategies in conflicting couples; and looking for an answer to this question, is the solution-oriented approach effective on marital compatibility and conflict resolution strategies in conflicting couples?

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Material and Methods

This research was an experimental pre-test-post-test design, with a control group. Before the intervention, a pre-test was administered to the control and experimental groups, and after the intervention, a post-test was administered and the effect of intervention was measured. The statistical population of this research included all the conflicted couples in Kermanshah city (Iran) in 2020 who referred to Kermanshah counseling centers due to marital conflicts and received a diagnosis of marital conflict by a psychologist. The sampling method was done in a simple random way. The sample consisted of two groups of 15 people (experimental group: solution-oriented treatment and control group), which were selected by simple random sampling and randomly assigned to groups. The data collection tools were the following questionnaires:

Dyadic adjustment scale (DAS): This 32-item scale was developed by (Spanier, 1989) to evaluate the quality of the marital relationship from the husband and wife's point of view and includes four subscales. The subscale of couples' satisfaction means the level of satisfaction with different aspects of the relationship; The subscale of couples' solidarity means the amount of participation in joint activities; The sub-scale of couples' agreement means the degree of agreement between the parties in issues related to the marital relationship, such as finances, etc., and the sub-scale of expressing affection, which is evaluated on the Likert scale. The maximum score in this questionnaire is 151 and the minimum score is zero. A score lower than 100 indicates lower marital adjustment and a score higher than 100 indicates better marital adjustment (Spanier, 1989). The reliability of the questionnaire through Cronbach's alpha was reported from 0.80 to 0.90 in the research of Hollist and Miller (2005). In Iran, Molazadeh, Mansour, Ajei and Kiamanesh (2018) found its reliability to be 0.86 with the retest method and 0.89 with Cronbach's alpha method, and its concurrent validity with Locke Wallace's Marital Compatibility Questionnaire (1959) was 0.90.

Conflict Resolution Questionnaire: Conflict Resolution Styles Questionnaire was created by Rahim (1983)to measure conflict resolution styles. This questionnaire contains 28 items and five subscales of integrity (7 items), committed (6 items), dominant (5 items), avoidance (6 items) and compromise (4 items), which the subject answers each item on a five-point Likert (Strongly Disagree-1 to Strongly Agree-5) answers. In this questionnaire, from the combination of 5 conflict resolution strategies, two main positive and negative conflict resolution strategies are obtained. In other words, the positive conflict resolution strategy consists of the sum of the three strategies of integration, compromise, and commitment, and the negative conflict resolution strategy consists of the sum of the two avoidance and dominant conflict resolution strategies. Obtaining the highest score in each subscale indicates the use of the same method of conflict resolution by the individual. Haghighi et al. (2012) standardized this questionnaire and calculated the factor loading between 0.55 and 0.96 using exploratory factor analysis for different terms. The reliability of the questionnaire was obtained using Cronbach's alpha for the subscales of the questionnaire in the range of 0.70 to 0.75. Also, the reliability of the tool was 0.68 using

the split half method. The results of exploratory factor analysis also showed that this questionnaire consists of the five mentioned factors, which in total explain 70.81% of the total variance.

Solution-oriented treatment: the number of treatment sessions for the solution-oriented approach was 7 sessions and each session was held for 90 minutes. The summary of intervention sessions is provided in table 1.

Table 1. The Summary of intervention sessions of solution-oriented approach

Session	Content	Homework
1	Conducting the pre-test, familiarizing the group with each other and with the group therapist, stating the group rules and determining the frameworks, and stating the general principles of solution-oriented short-term couple's therapy.	The participants were required to write down their desired goals from participating in the meetings and bring them to the group for the next meeting. These goals are focused on the changes that will be made in the group.
2	Helping the participants to formulate their goals in a positive, specific, concrete and measurable way.	The participants were asked to write down the expectations and other goals they have for their spouses and their lives in a positive, precise, tangible and measurable way for the next meeting and bring them to the next meeting.
3	Helping the participants to find out that there are different interpretations of the same event in the family and to be able to change their perception of the problems in a more useful way, to understand the change of the problems in a more useful way and to be able to admire each other.	The group members were asked not to blame their spouses in any way during this week and instead praise and praise every positive activity they see from their spouses, helping them to appreciate their abilities and resources. and bring its report to the meeting.
4	Reframing the problem through attention to negative cycles, substructural emotions, and attachment needs.	Intensification of emotional experience, increasing tendency to conflict and emotional confrontation, increasing responsiveness to the other party, so that the problem is again formed in terms of hidden feelings and attachment needs.
5	Disrupting the disordered behavior patterns designed by the participants, using the miraculous question.	The participants were asked to think about the question asked at home and bring the answers to the next session.
6	Helping members to find other ways of thinking, feeling and behaving instead of what they are doing now and experiencing new feelings by using the important word instead.	The participants were asked to throw a coin in the air every day at a certain time, and the winner would complain about his wife for 10 minutes, and when the 10 minutes were up, the other person would complain for 10 minutes, and then bring the result to the next meeting.
7	Summarizing and concluding and determining whether the members have achieved their goals? Post-test implementation	

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Results

Multivariate Analysis of Covariance (MANCOVA) test was used to investigate the effectiveness of solution-oriented therapy on marital adjustment in conflicting couples in Kermanshah. The results related to the implementation of this test and the examination of its assumptions are presented below.

Table 2. The result of homogeneity of covariance matrix (Box's M test)

Box's M	F	df1	df2	p
20.63	1.76	10	4032.78	0.062

As can be seen in Table 1, the significance level of the Box's M test is equal to 0.062. Since this value is greater than the significance level (0.05) required to reject the null hypothesis, the null hypothesis based on the homogeneity of the covariance matrix is confirmed.

Table 3. The result of Levene Test for Equality of Variances

Variable	F	Df1	Df2	p
The satisfaction of couples	0.024	1	30	0.87
Cohesion of couples	0.08	1	30	0.92
The agreement of couples	0.019	1	30	0.89
Expression of love	1.293	1	30	0.26

As shown in Table 3, the results of Levin's test are not significant in case of any of the variables. Therefore, the null hypothesis for the homogeneity of the variance of the variables is confirmed.

Table 4 Results of multivariate covariance analysis to compare marital adjustment in solution-oriented and control treatment groups

Effect	Test	Value	F	Effect DF	Error DF	p
Group	Pillai's trace	0.772	19.515	4	23	0.001
	Wilks' lambda	0.228	19.515	4	23	0.001
	Hotelling's trace	3.394	19.515	4	23	0.001
	Roy's largest root	3.394	19.515	4	23	0.001

As can be seen in table 4, the significance level of all four relevant multivariate statistics, namely Wilks' lambda, Pillai's trace, Hotelling's trace, and Roy's largest root test statistics, is less than 0.01 ($p<0.01$). In this way, the statistical null hypothesis is rejected and it is determined that there is a significant difference between the marital compatibility of the two solution-oriented treatment groups and the control group in the post-test. Based on this, it can be concluded that solution-oriented therapy has influenced the marital compatibility of couples. In order to investigate the difference between the two solution-oriented and control treatment groups in each of the components of marital adjustment, the between-subjects effects test was used, and the results are presented in table 5.

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Table5. Test of between-subject effects to compare the marital adjustment components of the solution-oriented treatment group and the control group in the post-test

Variable	Source	SS	DF	MS	**F**	p	Eta
The satisfaction of couples	Between group	113.992	1	113.992	47.077	0.001	0.644
	Error	62.956	26	2.421			
Cohesion of couples	Between group	61.670	1	61.670	47.545	0.001	0.646
	Error	33.724	26	1.297			
The agreement of couples	Between group	82.021	1	82.021	38.015	0.001	0.594
	Error	56.098	26	2.158			
Expression of love	Between group	90.114	1	90.114	22.626	0.001	0.465
	Error	103.551	26	3.983			

Table 5 shows the results of the between-subjects effects test to compare the components of marital adjustment in the solution-oriented and control treatment groups at the post-test stage. According to the results presented in Table 4, the F value obtained for all components is significant at the alpha level of 0.01 ($p<0.01$). Therefore, the null hypothesis is rejected and the research hypothesis is confirmed. Considering the higher average scores of the solution-oriented treatment group in the post-test stage compared to the control group, it is concluded that the solution-oriented treatment is effective and has increased marital compatibility in conflicting couples.

Discussion

The results exhibited that there is a significant difference between the marital adjustment of the solution-oriented and control treatment groups in the post-test. According to the higher average scores of the solution-oriented treatment group in the post-test stage compared to the control group, it is concluded that the solution-oriented treatment is effective and has increased marital compatibility in conflicted couples. The result obtained are in line with the results of previous studies in this field (Davoodi et al., 2011; Shokri & Pourshahriar, 2019; Surani, 2010). For instance, Najarpourian et al. (2021) compared the effectiveness of positive couple therapy and solution-focused therapy on improving marital adjustment and psychological well-being among family in shiraz. The results showed that both therapeutic approaches had an effect on psychological well-being and improving marital adjustment in families. But no significant difference was observed between the effectiveness of the two intervention methods.

In explaining the obtained result, it can be said that in solution-oriented treatment, the slow discovery of exceptions in the client's life can inspire hope to the client to see the approach of a better future. In therapy sessions, when clients were able to recall times when, through the exception questioning technique, they did not have marital problems with their spouse, or if they did, the intensity of these problems was very low, eliciting these moments without difficulty allowed clients to find out.

Spouses often respond to each other without thinking and persist in their behavior without achieving desired results. Solution-focused therapists help spouses stop blaming each other, emphasize recognition of themselves and their partners, change unhelpful patterns, and achieve better balance (Pichot & Dolan, 2014). In addition to exceptions and scale questions, another intervention question of solution-oriented

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therapists is the miracle question. The miracle question helps to find information about the client's vision of the future with a solution to the problem. The solution-oriented therapist asks clients if a miracle happened today and your problem was solved, what would you do differently? How do you know when your problem is solved? Using such questions helps clients to find a different way of looking at their issues and can be an important step in the process of change, which techniques have been shown to affect marital adjustment. In other words, it can be said that in solution-oriented therapy, because the main emphasis is on bigger changes, and the focus of therapy is on issues that have the possibility of change, when one of the couples takes the first small step towards change successfully, and the result of this change in her/him make change in the marital relationship (Shokri & Pourshahriar, 2019). These changes help couples to hope for the future of their relationship and married life, replace positive feelings towards their spouse with hostile and negative feelings, and feel closer to each other. As a result, following this intimacy formed in the spouses, annoyance, sadness and futility in the relationship with the spouse will gradually decrease. Therefore, marital compatibility increases.

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