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Marital Adjustment Prediction Based on Childhood Violence of Married Women

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ABSTRACT

Background: A satisfied and successful marriage requires the stability and compatibility of couples. Marital adjustment has different dimensions, which are influenced by various factors. One of the factors is the violent experiences in childhood. In recent decades, violence, as the most serious social problem beyond cultural, social and regional remembered. That can affect on physical and mental health persons. Violence is an instance of aggressive behavior with a host of physical, psychological, economic, and sexual aspects.
Methods: In this descriptive study, 206 married female selected sampling from married women and completed measures of conflict tactics (1979) and dyadic adjustment (1976) scales.
Results: Analysis of data indicated that there is a significant relationship between the violent experiences in childhood with marital adjustment and violent experiences in childhood can predict marital adjustment.
Conclusion: According to the findings, we can say that the processing factors in a family have an important role in marital adjustment. The results of the current study can help the therapists to diagnose the effective factors in marital adjustment. It is suggested to propose citizenship education plans to prevent the spread of injuries from childhood to other relationships and lifetimes, and the role of self-awareness in prominent relationships.

Keywords: Marital Adjustment, Early Violence, Women

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Introduction

Marriage is one of the most important and lasting interpersonal relationships. Marriage and family formation, in addition to satisfying emotional, psychological and sexual needs, if tense, will lead to a pause and decline in the growth of members.[1] Marital relations are the most fundamental and important interpersonal relations that provide the foundation for establishing family relationships and the education of children.[2]

Marital adjustment is a concept that can be considered as a permanent process. This process is defined as events, conditions and interactions of life that propagate a couple during adjustment. High marital quality is associated with favorable adaptation, proper relationship, high levels of happiness of couples, integration and a high level of satisfaction with relationships.[3] According to Griff and Bruno, adjusted couples are married couples who have a great deal of agreement and are well placed to manage their time and financial issues. On the other hand, marital incompatibility means dissatisfaction, lack of sense of happiness, and disagreement in decision making. In fact, the problem of marital incompatibility is more likely to lead to referrals for health and mental health services.[4]

Childhood stage is one of the most vulnerable periods of human being life, in which his personality traits are stabilized. It seems that, despite the progressive advances in science and technology, this trend still continues. The consequences of child abuse are not solely about the child and his family, and it covers the entire community, because today's harassed children will be abusive tomorrow, and this sequence will continue.[5]

Studies have shown that violent people have been victims or witnesses of violence during childhood. In this way, domestic violence does not end in one person, and the victim uses the same behavior he or she uses to solve homogeneous tensions in adulthood and after family formation.[6]

The harassment and mistreatment to children are defined in various legal, medical and social perspectives, including any physical, sexual and emotional abuse and neglect of a child (under 18 years old) by an older person (over 18 years old). The physical child abuse means intentional damage to child's body by an adult,[7] sexual abuse involves any kind of sexual activity with a child before the age that can have legal satisfaction, and neglect i.e. not meeting the basic needs of the child, including the food, clothing, maintenance, support and educational facilities.[8] Emotional harassment means any ill-treatment with a child that is psychologically harmful based on social criteria and experts' views, and also any behavior that affects the child's behavioral, cognitive, physical and emotional functioning such as constant contempt and insults and abuse of the child.[9]

Violence against women means any form of gender-based violence that can lead to physical, sexual or psychological harm in women (or the likelihood is high), which is painful to women or leads to compulsory deprivation of individual or social freedom. The most common type of violence against women is the violence committed by the partner, which is referred to as "domestic violence or violence by a close partner".[10] Although women can also use violence against men, the results of various studies show that women are eight times more likely than men to be exposed to violence. In surveys conducted in different parts of the world, 10 to more than 50 percent of women have been mistreated by their spouses, and in nearly one-third to half of cases, physical abuse has been accompanied by psychological violence.[7] Various factors such as poverty, psychiatric disorders, alcoholism, and drug addiction have been identified as affecting domestic violence.[11] Since domestic violence against women is the cause of many physical harm, mental illness and adverse consequences, not only domestic violence is a major health problem for women, but also a continuing not visible epidemic.[6]

The existence and extent of satisfaction and marital adjustment and its reduction in the family indicate the existence of problems within the

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family system. Consequently, marital satisfaction and marital adjustment are always considered as an important aspect of marital life by counselors and psychologists and they try to conceptualize and reduce the issues within the family system by presenting approaches, frameworks and theoretical model and using them. An inappropriate relationship will result in a moratorium and a pause and decline the health and members' growth in that family. The study by Mustafa et al. (2012) on patients showed that marital adjustment was better associated with less activity. The perceived relationship between marital adjustment and illness reveals the importance of patients' presence with their husbands in medical interventions for professionals. Marital adjustment can fully influence the quality of marital life, and research has confirmed its impact on outcome types of clinical spheres such as mental health, physical health, job satisfaction, and even life span.[12]

One of the issues that can affect marital adjustment is childhood violence. The physical and mental abuse of children by their parents is an event that may have a developmental effect on the capacity of an individual's close and intimate relationships in adulthood. In a research, it was found that the most persistent factor affecting violence in the intimate relationship of couples is the experience of violence or witnessed childhood violence.[13] Longitudinal studies have also shown that there is a correlation between childhood violence and violence in paired intimate relationships, and it has been determined that the second risk factor for harming intimate relationships between couples is childhood injury.[14] Research evidence has shown that exposure to child abuse results in poor marital life.[15] Some of risk factors for a range of interpersonal disorders among female victims are including sincere marital problems, disrupted sexual function, and parental problems. Whisman (2006) also concluded that the probability of separation or divorce for people who experienced severe childbearing violence almost twice is as many as those with no experience of violence in their childhood.[16]

Therefore, since marital adjustment affects physical and mental health of individuals and childhood violence can affect marital adjustment mechanisms, the researcher seeks to investigate the relationship between these variables. Considering the importance of studying the factors leading to marital adjustment, this study attempts to investigate the role of childhood violence prediction in relation to marital adjustment.

Methods

A descriptive study was conducted with the purpose of predicting the marital adjustment and attempt to determine the nature of the relationship between the predictive variable (childhood violence) and the criterion variable (marital adjustment). The statistical population is 18 - 60 years old women in Yazd, who are 172,256 people according to official statistics of the Population and Housing Census in 2011. Twenty-two people were selected through an available sampling method which was reduced to 206 by elimination of incomplete questionnaires. Entry requirement is living with spouse at least starting from 1 year ago and living together at the moment. After selecting the sample, the subjects responded to the CTS and dyadic adjustment scales (DASS).

Data were analyzed by descriptive and inferential statistics. At the descriptive level, indicators such as mean, standard deviation, etc. were used and at the inferential level, Pearson correlation coefficient and regression were used. Data were analyzed using $SPSS_{21}$ software.

Dyadic Adjustment Scales (DASS): This measure was used to measure marital adjustment. This scale was prepared by Spanir with 32 articles in 1976 for measuring compliance and marital adjustment. This scale is used to assess the quality of the marital relationship in terms of the husband or wife or any two people who live together. Four dimensions of satisfaction, solidarity, agreement, and affection are measured. This scale is of prime importance with Cronbach's alpha of 0.96.

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Alpha-scale in Iran was reported by Cronbach's method of 0.81. The criterion validity of the Spinor marital adjustment scale was confirmed by its ability to distinguish between married people with divorced, homosexual, heterosexual, and unmarried couples.[17]

CTS Exposure Scale: This checklist contains 18 items that measure verbal and psychological violence and physical violence. This scale was prepared by Straus in 1979. Straus evaluates the validity and scale on 2143 couples of America, and Cronbach's alpha coefficient obtains the credibility of at least 0.78 for the scale of violence.[18] Validity and this test have been satisfactory in most countries of the world. Haj Yahia (1999) used this scale to assess the effect of violence between parents on adolescents' psychosocial health in Arabic, and has gained its credibility with a Cronbach alpha coefficient ranging from 0.76 to 0.92.[19] The Cronbach's alpha in this research was 0.766.

Results

The descriptive findings of this study include statistical indicators such as frequency, average, and standard deviation (Tables 1 and 2). Descriptive statistics indices have been used to examine the demographic characteristics of respondents. The frequency of respondents is based on age, education, and related graphs have been drawn.

65 respondents are less than 30 years old and account for more than 31.55% of the sample size. There are 72 respondents aged 30 to 40 years old. Forty three people are 40 to 50 years old, representing 20.87% of the sample size. Twenty six people are over 50 and account for just over 12% of the sample size.

Thirty six people have diplomas and lower degrees. Forty five respondents also have an apprenticeship which is less than 22% of the sample. Individuals with a Bachelor's degree are 78 people. People with a Master's degree or higher are 47.

In this study, the Kolmogorov-Smirnov test was used to test the normality of data. If the distribution of data is normal, inferential statistical tests can be used. The results of the normal test (Table 2).

Based on Kolmogorov-Smirnov test results, in all cases, the magnitude of the error was greater than the error (0.05). Therefore, there is no reason to reject the zero assumption and the distribution of the data is normal.

The power of the relationship between the childhood violence rate and marital adjustment was -0.39. The test report was also -1.65, which is greater than the critical value t at the 5% error level, i.e., 1.96, indicating that the correlation of observation is negative and meaningful. Therefore, with 95% confidence, childhood violence has a direct relationship with marital adjustment.

It can be said that there is a significant negative relationship between the variables of research with marital adjustment (P-value < 0.05) (Table 3).

The result of the predictive power of the childhood violence variable at the alpha level of 0.05 for the degree of violence-based marital adjustment. The observed F level (84.62) is significant (P-value < 0.05) and 25% of the variance related to marital adjustment is explained by the childhood violence variable. Regression coefficients (R^2 0.25) of predictive variables indicate that childhood violence can significantly explain the variance of marital adjustment (Table 4).

The results of multiple regression analysis by simultaneous entry method with regard to marital adjustment as criterion variables and childhood violence as a control variable show that the variance of violence can predict 25% of variance of marital adjustment variable.

Given the coefficients of the effect of violence and the t-rank, it can be said that this variable can be predicted with 95% confidence in the changes related to the marital adjustment variable (Table 5).

This study, like other research studies, had some limitations. First, the results are extracted from the questionnaire, in which individuals responded to queries based on their memories, which may lead to errors in the reminder. The second sample of the

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study was from a group that did not necessarily have marital problems and therefore, examples of volunteering women or women referring to counseling centers could be considered in future research studies.

Table 1. The frequency of respondents based on age

Age group	Frequency	Percent	Consumption Frequency
Less than 30	65	31.55	31.55
30-40	72	34.95	66.50
40-50	43	20.87	87.38
More than 50	26	12.62	100.00
Total			

Table 2. Normality test of the research variables

	Childhood violence	Marital adjustment
N	206	206
Mean	3.410	3.440
SD	0.860	0.830
Ks	1.648	1.199
Meaningfulness	0.152	0.084

Table 3. Correlation coefficients between childhood violence and marital adjustment

Variables	Childhood violence
Marital Adjustment	-0.39
Meaningfulness Level	0.05
Number	206

Table 4. Parameters of regression test to predict marital adjustment based on childhood violence

Model	Sum of squares	Degrees of freedom	Average squares	F	Meaningfulness level	R	R^2	Error deviation
Regression	69.211	2	34605.6					
Remaining	63796	204	408.95	84.62	0.05	0.721	0.25	20.22
Total	133007	203						

Table 5. Impact of childhood violence on the regression equation

		B	Error deviation	Coefficient β	t	Meaningfulness level
Marital adjustment	Violence	89.21	0.43	0.69	11.53	0.05

Discussion

In this study, predicting the marital adjustment based on the experience of childhood violence was sought. The results showed that marital adjustment is predictable through childhood violence. The results of research, such as the research done by Godbout et al. (2009) on 644 adults, found that the experience of childhood violence affects violence in intimate relationship of marriage and, consequently, marital adjustment through separation anxiety and avoidance of intimacy.[20]

Very few studies have investigated the direct

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and indirect relationship between experienced childhood violence and marital adjustment. However, researchers have come to the conclusion that violence committed by parents to children increases violence in intimate marital relationships.[20] This means that the experience of childhood violence leads to the formation of patterns of behavior that anticipates the use of violence in marital relationships, and the findings suggest a direct relationship between childhood violence and the violence of intimate marital relations. In explaining this finding, the theory of learning can be mentioned, which states that individuals re-emerge behaviors similar to those experienced or observed. In accordance with social learning and social control theories, parents affect social behaviors and the emotions of their children through direct (through modeling and social reinforcement) and indirect (by shaping perceptions and attitudes) forms. Misogyny and disunity between family members, strict discipline, and paradoxical and authoritarian parenting are more likely to be related to bullying behavior. The poor perception of boys about self-esteem, warmth, and support in the family environment may lead to their bullying behavior, while this kind of perception among girls has the potential for bullying and their victimization. In other words, violence is the behavior and social action that is generated, produced, reproduced and learnt through social processes. This behavior is created through models and the reinforcement of behavior by rewards and punishment. A person may learn violent or aggressive behaviors through three sources: family, cultural subcultures (for example, poor social class), and culture (study, television, cinema, etc.). The domestic violence that a child has witnessed as a primary observer in the early childhood or has been the victim of such violence has its own adverse consequences on his future, and the person who transmits violence from one generation to the next by learning violent behavior, and believes this theory that the root of violence is in the modeling and strengthening of family standards.[21]

The type of mother-child relationship in the early years of life and the extent of access to the mother, the level of maternal support when feeling risk, the degree of maternal sensitivity and the maternal immunity for the child to determine the attachment style of the individual. Based on attachment theory, attachment style shows how a person treats his close people. Safe people interact with others to meet their needs and other people's needs. When faced with conflicts, they also have constructive behavior. As a result, the durability and firmness of their intimate relationships are longer. All of these factors work together to increase the marital satisfaction and reduce the use of violence in them. Insecure people on the other hand are feeling insecure when interacting with others. For this reason, they are engage in unstable, emotional and jealous relationships with others. Due to lack of trust in the spouse, as well as pessimists and jealousy, they are more likely to act with violence in intimate relationships. Therefore, being secure or not attaching is related to the individual's ability to interact with others and to cope with mood problems and tense situations.[22] Therefore, the experience of violence leads to the formation of insecure attachment, which is a risk factor for violence in marital relations. In fact, a person behaves in a marital relationship with violence or is afraid of intimacy because of the experience of violence and formation of insecure attachment to his parents. Therefore, the repetition of this state affects the marital adjustment.[20]

Another justification of the relationship between childhood violence and marital affairs is that it is alleged that most people who are being brutally abused in childhood due to the injuries and psychological injuries resulting from this abusive behavior, inefficient mental schemas are formed which affects their future marital relationship.[23] Mason et al. (2005) show in a research that the incompatible "failure" schema has a negative relationship with the sense of trust in the spouse and the predictability of the behavior of the partner in life.[24] This schema is directly related to mistreatment and distrust to the spouse. Mason

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et al. (2005) have suggested that the presence of early maladaptive schemas, such as "emotional deprivation" or "defect", is directly and negatively related to marital adjustment.

Yang and Mulvey (2012) have stated that those who have a "harsh criteria" schema have unrealistic expectations from their spouse, and when these expectations are not satisfied, they will be cold and angry.[25] Furthermore; their negativity makes them selfish in relation to their spouse instead of expressing their intimacy.

The researcher believes that parents, as the main people in the child's life, form the child's safe and sustainable world. The child recognizes and shapes all his excitement alongside the developed world with parents. Anger, as one of its evolutionary excitement, recognizes its pattern for controlling and managing in relations with parents. If the child-parent communication model is full of excitement and emotional fears coupled with hesitation and desire for revenge or compensation while disability, it can affect adulthood relationships with others and to counteract feelings of insecurity and threats in close relationships. And as this relationship has been destroyed by the experience of living with parents, it can occur in a relationship with a spouse who needs intimacy, security and acceptance. In fact, partner issues and conflicts in solving problems are one of the most commonly used mechanisms in which these patterns are represented. If an individual acquires self-education during stages of development, he is aware of the distressed emotions and feelings in relation to his parents and their effects on himself, and he can, by acquiring his skills, control his self-injury before continuation.

Conclusion

Incompatibility in marriage and marital relationship is one of the most important factors of stress, coldness of relationships, rupture, cohesion, family unity and thus the creation of a focal area that not only cannot meet the emotional and psychological needs of couples, but also leads to psychological distress and discomfort and put people mental health at risk.[26] Therefore, by increasing marital adjustment, it can prevent to some degree from physical and psychological disturbances. Therefore, the underlying factors must identify the inconsistency.

According to the findings of this study, it can be concluded that the proposed pattern of childhood violence has the potential for predicting marital adjustment. Therefore, according to the results of the study, physicians, psychologists, counselors and other specialists in the field of family health are advised to be aware of the impact of family-related variables on the physical and mental health of individuals when working with families and put in place training and promotion of these factors. Therefore, it is possible to predict relationships and marital adjustment in pre-marital interviews by examining the psychological status of individuals and the question of the childhood violence experience and its effects (attachment styles or mental schemas).

Conflicts of Interest

In this study, did not report any potential conflicts of interest with the authors.

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Authors' Contribution

Conceptualization, S.F.H.H., B.G.B. and M.M.; Methodology, N.F. and S.S.; Formal Analysis, N.F. and S.S.; Investigation, S.F.H.H.; Data Curation, S.F.H.H. and M.M; Writing – Original Draft, S.F.H.H., M.M. and B.G.B.; Writing – Review & Editing, M.M., B.G.B., N.F. and S.S.; Resources, S.F.H.H.

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[DOR: 20.1001.1.27832104.2018.2.1.7.0]

References

1. Trudel G, Goldfarb MR. Marital a sexual functioning and dysfunctioning, depression and anxiety. Sexologies. 2010;19(3):137-142.
2. Berger KA, Lynch J, Prows CA, Siegel RM, Myers MF. Mothers' perceptions of family health history and an online, parent-generated family health history tool. Clinical Pediatrics. 2013;52(1):74-81.
3. Ashmore JA, Emery CF, Hauck ER, MacIntyre NR. Marital adjustment among patients with chronic obstructive pulmonary disease who are participating in pulmonary rehabilitation. Heart & Lung: The Journal of Critical Care. 2005;34(4):270-278.
4. Greeff AP, De Bruyne T. Conflict management style and marital satisfaction. Journal of Sex and Marital Therapy. 2000;26(4):321-334.
5. McCrae RR, Terracciano A, Costa P, Brant L. Hierarchical linear modeling analyses of the NEO-PI-R scales in the Baltimore longitudinal study of aging. Psychology and Aging. 2005;20(3):493-506.
6. Alesina A, Brioschi B, Ferrara EL. Violence against women: A Cross-cultural analysis for Africa. National Bureau of Economic Research. 2016.
7. Tinglöf S, Högberg U, Lundell IW, Svanberg AS. Exposure to violence among women with unwanted pregnancies and the association with post-traumatic stress disorder, symptoms of anxiety and depression. Sexual & Reproductive Healthcare. 2015;6(2):50-53.
8. Devries KM, Mak JY, García Moreno C, et al. The global prevalence of intimate partner violence against women. Science. 2013; 340(6140):1527-1528.
9. Shedler J, Westen D. Dimensions of personality pathology: An alternative to the Five-Factor Model. American Journal of Psychiatry. 2004;161(10):1743-1754.
10. Ali TS, Mogren I, Krantz G. Intimate partner violence and mental health effects: A population-based study among married women in Karachi, Pakistan. International Journal of Behavioral Medicine. 2013;20(1):131-139.
11. Anderson J, Campbell J, Glass N. Effects of Partner Violence on Mental Health and HIV Disease Progression in Women in Baltimore. Available at: URL: http://www.nursinglibrary.org/ vhl/bitstream/10755/616255/1/ Anderson_J_s22407_1_.pdf. Accessed April 8, 2018.
12. Mustafa SS, Looper KJ, Purden M, Zelkowitz P, Baron M. Better marital adjustment is associated with lower disease activity in early inflammatory arthritis. Turkish Journal of Medical Sciences. 2012;42(1):1180-1185.
13. Hotaling GT, Sugarman DB. Prevention of wife assault. In: Ammerman RT, Hersen H, editors. Treatment of Family Violence. New York, NY: Plenum Press; 1990. P:3-14.
14. Ehrensaft MK, Cohen P, Brown J, Smailes E, Chen H, Johnson JG. Intergenerational transmission of partner violence: A 20-year prospective study. Journal of Consulting and Clinical Psychology. 2003;71(4):741.
15. Dilillo D. Interpersonal functioning among women reporting a history of childhood sexual abuse: Empirical findings and methodological issues. Clinical Psychology Review. 2001; 21(4):553-576.
16. Whisman MA. Childhood trauma and marital outcomes in adulthood. Personal Relationships. 2006;13(4):375-386.
17. Falahzade H, Sanai Zaker B. Effectiveness of emotionally focused couple therapy and integrated systemic couple therapy. Womens Studies. 2013;10(4):87-110. [Persian]
18. Rodenburg FA, Fantuzzo JW. The measure of wife abuse: Steps toward the development of a comprehensive assessment technique. Journal of Family Violence. 1993;8(3):203-228.
19. Haj Yahia MM. Wife abuse and its psychological consequences as revealed by the first Palestinian national survey on violence against women. Journal of Family Psychology. 1999;13(4):642.
20. Godbout N, Dutton DG, Lussier Y, Sabourin S. Early exposure to violence, domestic violence,

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[DOR: 20.1001.1.27832104.2018.2.1.7.0]

attachment representations, and marital adjustment. Personal Relationships. 2009; 16(3):365-84.
21. Bayrami M, Alaei P. Bullying in female middle schools: The role of parenting styles and perception of family's emotional environment. Journal Of School Psychology. 2013;2(3):38-56. [Persian]
22. Dutton DG, White KR. Attachment insecurity and intimate partner violence. Aggression and Violent Behavior. 2012;17(5):475-481.
23. Frisch M. Quality or life therapy New Jersey. United States: John Wiley & sons; 2006.
24. Mason O, Platts H, Tyson M. Early maladaptive schemas and adult attachment in a UK clinical population. Psychology and Psychotherapy: Theory, Research and Practice. 2005;78(4):549-564.
25. Yang S, Mulvey EP. Violence risk: Re-defining variables from the first-person perspective. Aggression and Violent Behavior. 2012;17(3):198-207.
26. Nazari A, Tahererad M, Asadi M. Effect relationship enrichment program on marital adjustment couples. Journal of Counseling and Psychotherapy. 2014;3(4):527-540.

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