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# A Comparison of the Effectiveness of Communication Skills Training for Marital Conflicts and Quality of Life in Female Students of Islamic Azad University, Science and Research Branch

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Abstract: The purpose of the present research was to determine the effectiveness of communication skills training on marital conflicts and quality of life in married female students of the Islamic Azad University, Science and Research Branch, Tehran. The subjects of the research were married female students who responded to the researcher's call for learning communication skills. The sample consisted of 32 married female students who were selected from the population of interest using random sampling method and were divided into an experimental group and a control group. The materials used in the research were: Marital Conflict Scale andWorld Health Organization Quality of Life ScaleBrief Version (WHOQOL-BREF). The research has a pretest-posttest design with a control group. First, the pretest was administered for the two groups; then the experimental intervention (Teaching Communication Skills) was provided for the experimental group and at the cessation of the teaching program, the posttest was administered for both groups. Results were analyzed using analysis of covariance at "#0.01 significance level indicating that teaching communication skills reduces marital conflicts and has a positive effect on the quality of life.

Key words: Communication skills % Marital conflicts % Quality of life

# INTRODUCTION

Following the research regarding communication in the family and developing a systematic approach to couple relationships, many marriage experts aimed to identify the difference between constructive anddestructive communication so as to find a favorable, ideal model for improving couple relationships.

Permanence of marriage requires love and positive feelings of couple toward one another. Desirable, effective communication between couples can be influential in reinforcing these feelings. Communicationskills are specialized abilities that can help people act efficiently in the symbolic messages they exchange and to create positive and pleasing feelings in the partner [1, 2]. Negative interactions are associated with a decrease in the positive aspects of marriage such as satisfaction, commitment, liking and trust in relationship and such interactions will increase the possibility of divorce.

Couples who can manage the conflicts in their relationship by means of positive methods and with less recourse to negative interactions will create an atmosphere where there are more opportunities for self-disclosure and agreement regarding family problems [3].

The term quality of life is used to describe the satisfaction of mind and happiness in social, affective, physical, career and financial aspects of the life of an individual [4]. The quality of life of an individual is closely related to the quality of life of those who are a part of their living environmentand it can be measured by the individual's satisfaction with their personal experiences throughout life and the feeling of belonging to the society as well as the feeling of competence, creativity, power and independence [4].

Much evidence indicates that couples with marital conflicts and discords have deficits in communication skills. Skaldeman (2006), in a research on seventy

divorced and married men and women, came to the conclusion that at least one of the spouses expressed less love and affection toward their former spouses, that they had communication problems and divorced couples were significantly different from married couples in active listening skills [6]. David and Jack (2007) showed in a research that 52% of divorced families have hostile interactions and intense marital conflicts [5]. Kettrey and Emery (2006)showed that couples with illogical, aggressive communication patterns have more marital conflicts and are more prone to separation [7]. Parlina (2006) showed that the quality of interactions between couples is a predictor of distress in the marital relationship and divorce [8]. Faulkner et al. (2005) showed that the communicative performance of couples and interpersonal relationships between spouses are the strongest predictors of marital satisfaction and that disturbed communication is the strongest predictor of marital conflicts among couples [9].

A review of the literature suggests the effectiveness of communication skills training (CST) for increasing marital satisfaction and improving quality of life. Yalchin (2007) trained communication skills to 14 couples who had registered through a newspaper summon for CST and at the end of the period, the experimental group reported a higher level of marital adjustment and the results revealed that communication skills training leads to increased satisfaction, improved communication with the spouse and improved problem solving skills [10].

Kline and Stafford (2004;cited byKhojastemehret al. [2]),studied the relationship between communication skills and psycho- emotional atmosphere of families in 296 married students. The results showed that there is a relationship between communication skills and couples' happiness and that couples with communication skills expressed a greater sense of liking and satisfaction [11].

Ronan *et al.* (2004) trained problem-solving skills and strategies for dealing with high-conflict situations to 12 couples recruited from a violence reduction program for couples. The results showed that couples experience fewer conflicts when they use effective communication skills and that otherwise they experience a higher level of violent conflicts [12].

Gottman (2004) showed that spouses who participated in communication skills programs had a higher sense of satisfaction with their marital lives, that these programs increased their level of empathy and satisfaction with their relationships and that they affected their communication style and marital quality and had

positive effects on couples' perceptions in self-evaluation of their marital lives [11].

Markman *et al.* (2003), in a report on evaluating themarital distress prevention program and conflict and communication control training, showed that trained spouses achieved higher levels of positive communication skills and lower levels of negative communication skills and violence [13].

Khojastemehr *et al.* (2008) studied the effect of communication skills training on communication patterns and positive feelings toward spouses in the couples of Ahwaz City (Iran). The results revealed that CST leads to increased positive feelings toward the spouse, improved constructive mutual communication pattern and decreased expectation-detachment and avoidance patterns [3].

Hosseinian (2005) studied the effect of conflict resolution skills training on marital conflicts and showed that the mean scores of the experimental and the control group significantly differed. Further, the obtained qualitative data indicated the effectiveness of conflict resolution skills training for reducing marital conflicts in women [14].

Sakiko Fukui *et al.* (2010) studied the effect of communication skills training of nurses on the quality of life and satisfaction with health care professionals among newly diagnosed cancer patients. The results showed that the effect of trainings was tangible and it was revealed that patients were highly satisfied with the doctors, nurses and family members [15].

Research (e.g. Nicolucci et al., 2009) showed that health-related quality of life is related to health and satisfaction with treatment and both these factors are affected by the reciprocal effects of clinical, social and familial factors [16]. Kakleas et al. (2009) considered the lack of psychosocialproblems and family conflicts as the most important indices of quality of life and report warm and supportive family environment, good family relationships, adoption of reinforcing strategies by specialists and proper social support as the main factors promoting quality of life [17]. Using path analysis, Misra and Lager (2008) studied the relationship between psychosocial factors (social support and acceptance of the disease), self-care behaviors and quality of life in 180 adults with diabetes. The results showed that diabetes affects the professional and social life, family relationships and engaging in pastime activities and all these variables are related to the quality of life of individuals [18].

The skill training program of the present research is based on the cognitive behavior therapy principles and methods with emphasis on conflict reduction skills and promotion of quality of life. The main hypothesis of this approach is that couples need methods and skills for resolving conflicts, controlling their negative effects and promoting quality of life.

The purpose of the present research was prevention of marital distress, reduction of conflicts, helping couples to apply proper communication techniques and finding reasonable solutions for overcoming conflicts in predicaments and improve their quality of life.

The Main Hypotheses in the Present Research Were: (1) communication skills training reduces marital conflicts; (2) communication skills training affects the quality of life of married women.

### MATERIAL AND METHODS

The research design waspretest-posttest with a control group. First, the pretest was administered for both groups. Then, the training intervention was presented to the experimental group and finally the posttest was administered for both groups at the cessation of the training program.

**Population:** The population of the research included all the married female students who were studying at BSc and MSC levels in the period 2009-2010 in Islamic Azad University, Science and Research Branch, Tehran.

Sampling: First, one faculty was randomly selected from the studied population and the married female students of the facultyenrolled for participating in the CST program. On the whole, 39 students responded to the researcher's called for participation in the training course of which 7 students lacked the qualifications for participating in the course and thus 32 students were randomly assigned to an experimental and a control group. Considering the limitations of the research in terms of time, money, place and administration, random selection of the sample from the population was impossible and the sampling was done voluntarily.

**Research Procedures:** The training sessions and its scientific exercises were scheduled for seven 2-hour sessions where half of the time of each training session was appropriated to teaching the mentioned skills and

techniques for establishing proper communication and the second half of the session was appropriated to the exercises related to the subject of training and at the end of each session, some assignments were presented to be done at home. The CST sessions were as follows: the first session involved establishing communication, introduction of the group members with one another, introduction to the purposes of the training and the procedures of training sessions and examining their expectations of the training program. The second session aimed to familiarize the participants with the common problems in families, examining the obstacles on the way of their communication, voicing of the problems by the participants and teaching self-awareness and self-regard skillsso as to be used at the time of interpersonal conflicts. The third session involved familiarizing the participants with message sender and receiver skills, identifying the different forms of message sender/receiver andidentifying the interfering factors in understanding the message and practicing it in the classroom. The fourth session aimed to teach effective listening and talking skills, identifying the driving factors in active listening, expressing emotions and practicing the way of rational-purposive interaction. The fifth session aimed to identify conflicts and their driving factors, introducing the participants to effective conflict management, identifying the common interests and respecting personal interest, identifying unsuccessful conflict resolution models, discussing the role of unrealistic expectations in creating conflicts and effective management of conflicts. The sixth session was an introduction to techniques for improving quality of life, introduction to the dimensions of quality of life, identifying the effective and deteriorating factors in quality of life and identifying the existing support sources for better health. Finally, the seventh session involved a summary of the discussionsas well as a conclusion, answering the questions and taking the posttest.

## **Measurement Material**

Marital Conflicts Questionnaire: The Marital Conflicts Questionnaire is a 42-question instrument developed to measure seven dimension of marital conflict: reduced cooperation, reduced sexual intercourse, increased emotional reactions, increased child support, increased personal relationships with relatives, reduced family relationship with the spouse's relatives and separating finances [19]. To assess the content validity of the questionnaire, the correlation of each question with the total score of the test was estimated for each scale and in

the final stage of analyzing the test items, 42 questions out of the 55 preliminary questions which were significantly correlated to the total score remained. Cronbach's alpha was calculated to be 0.53 for the whole questionnaire and its value for the individual subscales was calculated as follows.

Cooperation, 0.30; Sexual Intercourse, 0.50; Emotional Reactions, 0.73; Child Support, 0.60; Personal Relationships with Relatives, 0.64; Family Relationships with Spouse's Relatives, 0.64; Separating Finances, 0.51.

World Health Organization Quality of Life Scale Brief Version (Whoqol-bref): World Health Organization Quality of Life Scale Brief Version (WHOQOL-BREF) was used in the present research which includes 25 questions. This scale examines 4 dimensions of quality of life including: (1) Physical Health, (2) Mental Health, (3) Living Environment and (4) Social Relationships. This questionnaire was scored based on a five-point Likert scale. In negative questions (3, 4 and 25), the reversed score is given. The total score of the individual is obtained from the sum of all the questions. This scale was translated to Persian Language by Nasiri and two of the professor of the Department of Psychology of Shiraz University [20].

Validity and Reliability of the Instrument: Regarding the validity of the scale, Cronbach's alpha was reported by the developers of the scale at 15 international centers of this organization to be from 730 to 890 for the four subscales and the whole scale. The validity of the entire test was 0.88 in the present research and the reliability of the subscales was calculated as follows: Physical Health, 0.70; Mental Health, 0.77; Social Relationships, 0.65; and Living Environment, 0.77.

### RESULTS

The findings of the present research were analyzed using analysis of covariance. The research hypotheses are:

**Hypothesis 1:** Communication skills training reduces marital conflicts.

As can be seen in table 1, the observed F-ratio (F=14.04) is significant at "#0.01 level. Thus, it can be concluded that marital conflicts have decreased in the experimental group as a result of the training sessions and the research hypothesis is accepted.

As shown in table 3, the observed F-ratio in the mean scores of Cooperation (F=6.37), Emotional Reactions (F=23.24), Separating Finances (F=7.26) and Family Relationships with Spouse's Relatives (F=5.03) is significant at "#0.01 significance level, while the observed F-ratio in the mean scores of Child Support (F=0.177), Sexual Intercourse (F=1.03) and Personal Relationships with Relatives (F=0.623) is not significant at "#0.05 significance level.

**Hypothesis 2:** Communication skills training (CST) affects the quality of life of women

As can be seen in table 1, the observed F-ratio (F=17.85) is significant at "#0.01 significance level. Thus, it can be concluded that the quality of life of married women have significantlyincreased in the experimental group as a result the training sessions and the research hypothesis is accepted.

The mean raw scores of the variable of quality of life are presented in table 4 for both experimental and control groups. As can be seen, the mean scores of the two groups do not differ considerably, but the mean raw score of quality of life has changed in the posttest.

Table 1: Analysis of covariance of the mean marital conflict scores in the experimental and control groups

Statistical Index Sources of Variance	Sum of Squares	DF	Sum of Squares	F-Ratio	Sig
Experimental and Control Groups	2627.05	1	2627.05	14.04	0.001

Table 2: Analysis of covariance of the mean scores of conflict subscales in the experimental and control groups

Statistical Indices Conflict Dimensions	Sum of Squares	DF	Sum of Squares	F-Ratio	Sig
Cooperation	31.60	1	31.60	6.37	0.017
Emotional Reactions	278.48	1	278.48	23.24	0.001
Sexual Intercourse	6.11	1	6.11	1.03	0.319
Child Support	2.1	1	2.1	0.177	0.677
Personal Relationships with Relatives	2.25	1	2.25	0.623	0.436
Family Relationships with Spouse's Relatives	17.11	1	17.11	5.03	0.033
Separating Finances	75.9	1	75.9	7.26	0.012

Table 3: Analysis of covariance of the mean marital conflict scores in the experimental and control groups

Statistical Index Sources of Variance	Sum of Squares	DF	Sum of Squares	F-Ratio	Sig
Experimental and Control Groups	272.37	1	272.37	17.85	0.001

Table 4: The mean raw score of the variable of quality of life in the pretest and the posttest

	Experimental		Control	Control		
Groups						
Test Index	Pretest	Posttest	Pretest	Posttest		
Quality of Life	89.25	96.94	91.81	93.19		

# **DISCUSSION AND CONCLUSION**

The results of the research showed that teaching communication skills has led to reduced marital conflicts. In line with the present research, numerous studies show that teaching communication skills affects the attitude of individuals and ads to their efficiency. Markman *et al.* (2003) showed the positive effect of communication skill training on marital distress, the communication styles of the couple, controlling conflict, satisfaction, empathy and marital adjustment. Moreover, the results of the present research are consistent with the results of Faulkner *et al.* [9], Greeff *et al.* [24], Halford [23], Hosseinian [14] and Qamari [25]. It can thus be claimed that teaching communication skills affects divorce prevention, conflict resolution and improving relationships.

In explaining this result, it can be said that women who are entangled with life conflicts have no specific reasonable strategy for resolving these conflicts. Communication training helps them take compensatory measures for coping with conflicts. Based on the cognitive-behavioral approach, there are many negative attributions, expectations and beliefs that hinder the establishment of effective communication. Communication skills help couples identify the underlying reasons for their destructive conflicts and use more constructive methods for coping with them. In fact, communication skills help couples convey their messages more accurately and effectively. The systematic practicing of these skills makes individuals incorporate this behavior into their behavior repository and use it in conflicting situations. Learning communication skills leads to the exchange of positive, pleasing behaviors and reduces negative behaviors; increased exchange of positive behaviors satisfies the emotional needs of the couple, leads to positive feelings toward one another and leads to a change in attitude regarding negative behaviors.

Considering the purpose of the research for determining the effectiveness of teaching communication skills for different dimensions of marital conflicts, the findings of the research indicate the effect of CST onincreasing cooperation with the spouse in problem solving and reducing daily emotional reactions. One of the ways for resolving marital problems is to pay heed to flexibility. If marital rules which originate in beliefs and values are difficult, the couple cannot act as two equal partners; that is, instead of trying to inhibit conflicts and reduce them through various methods such as conversation, listening to each other and expressing hurt feelings, they tend to show their discontent of one another indirectly and this finding is consistent with the results of Qamari (2007) and Hosseinian (2005). However, the effect of CST on improving sexual intercourse and child support is not accepted. Communication trainings have not been successful in couples with sexual disturbances and it can be inferred that due to cultural limitations, lack of awareness, self-censorship and disregard of sexual issues, these trainings does not affect couples. The reason for the ineffectiveness of CST for child support is that the female participants in the present research were already supported by their children and had no problem communicating with them [25].

The effect of communication skills training on convergence regarding financial issues was accepted in the present research. The findings of Nwoyeshowed thatdivergence regarding spending is one of the reasons for marital conflicts. On the other hand, marital conflicts lead to insecurity in the couple and each of the spouses tries to reduce this insecurity by maintaining their financial power and personal saving. Teaching communication and problem solving skills can help them converge on financial issues [13].

The effect of CST on decreasing personal relationships of spouses with their relatives was not confirmed in the present research. The traditional air of the population can be mentioned as one of the reasons for the lack of a significant difference between the mean score of the participants in the experimental and the control group in this dimension. When a problem arises in a family, the family of the man or the woman tries to excessively support their child so as to respond to their affective needs and resolve the problem resulting in a

greater distance between the couple and makes them get closer to their family members. Further, the effect of communication skills teaching on increasing relationships with the relatives of the spouse is confirmed. A proper insight into the affinity to and break from the family of origin along with conversation skills on the frequency of visit to the family and reaching an agreementon that will be effective in this regard.

The present research studied the effect of communication skills training on the quality of life of married women. The results showed that there is a significant difference between the women trained in communication skills and those untrained; that is, teaching communication skills has improved their quality of life. In line with this result, Sakiko Fukui et al. (2010) studied the effect of CST on quality of life and satisfaction of patients withhealth care professionals and the result showed that the effect of trainings on the quality of life and satisfaction of the patients and that the patients were highly satisfied with the doctors, nurses and their family members [14]. Kakleas et al. [17] considered the lack of psychosocial problems and familial conflicts as the most important index of quality of life and report warm and supportive family environment, good family relationships, adoption of reinforcing strategies by specialists and proper social support as the main factors promoting quality of life.Jones [22] studied the effectiveness of conflict prevention and resolution programs in couples and those who participated in the program reported higher levels of satisfaction and improved quality of life [16]. Further, the research ofNicolucci et al. [16] andMisra and Lager [18], emphasized the role of social support, the sense of dominance and self-efficiency, marital relationships, psychological health and training in quality of life. In most of these studies, the effect of teaching communication skills on interpersonal relationships including cooperation and contribution has been underlined and the result of the present research is consistent with the above studies [16, 18].

Considering the results of this research and the importance of communication in the efficiency of the family as the first social institution for enhancing health and welfare, paying attention to communication skills is a social necessity; paying attention to body language (tone, gesture and other ways of communication), being an active listener, talking systematically, assertiveness, problem-solving ability, confronting family conflicts, paying attention to others, proper attention and direct, explicit verbal exchange and empathy between family

members are signs of a healthy relationship and satisfaction with life. Thus, it is imperative for psychologists, counselors and family therapists to be equipped with strategies and techniques which are effective and can answer the needs of families.

Considering the limitation of the research samples, generalization of the results to all married female students must be done with caution. Considering the effectiveness of the communication skills training program in the present research, it is recommended that psychologists and family counselors use communication training for improving the problems related to communication. Further, it is recommended that communication skills training be underlined and administered in the prenuptial training sessions, family education and training workshops.

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