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Effect of forgiveness therapy on coping with marital conflicts and quality of life

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Abstract

Introduction: Conflicts, rejection, jealousy and couples resentment are factors that damage physical and mental health. The aim of this study is to investigate the effect of forgiveness therapy on conflicts and life quality of women who referred to the Aramesh counseling centers.

Materials and Methods: This experimental study was done in women referred to Aramesh counseling centers in 2015 and they had obtained the scores above 25 in the marital test. The sample size of 30 subjects (convenient method) selected and randomly divided into two experimental and control groups. The experimental group received 10 ninety minutes sessions of forgiveness therapy program. After intervention, the subjects' marital conflicts and quality of life were measured again. Analysis of data was performed by multivariate analysis test for differential scores and t-test.

Results: The results showed that forgiveness therapy had an impact on reducing women's marital conflicts and increasing life quality in general and this effect was significant ($P < 0.05$).

Conclusion: Based on the results, forgiveness therapy can impact positively on marital conflicts and quality of life among women.

Keywords: Forgiveness therapy, Marital conflict, Quality of life

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Introduction

Marriage is one of the most important decisions that every person will make in his life, which can have huge effects on the life of the individual, family, and even society. Although married life is a gift that people enjoy throughout their lives, intimate marital relationships are the most important source of happiness and the most

important predictors of overall satisfaction with life (1). This is when the communication conflicts between them destroy this happiness, cause resentment and anger of the spouses towards each other, and shake the foundation of marital life. Conflict, rejection, jealousy, and resentment of spouses are among the factors that harm their physical and mental health (2).

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The reaction to individual differences causes marital conflict, and when its intensity is such that feelings of anger, hostility, resentment, hatred and verbal and physical misbehavior dominate their relationships and become destructive, it is an unusual situation. 3). The ability to manage and resolve conflicts constructively can form a strong relationship in a couple's relationship and help couples to create an intimate and close relationship (4). Therefore, conflict resolution skills are a key indicator in successful romantic relationships, and people with strong conflict resolution skills increase the length of their relationship (5). The methods of conflict resolution in the marital relationship facilitate intimacy, while the destructive ways of dealing with the conflict may intensify the disorder and anxiety in the couple's relationship (6). There is a difference of opinion in the definition and conceptualization of forgiveness, and different definitions have been presented. Although the meaning and concept of forgiveness may differ in different cultures and religions, there is a basic consensus about it: freedom from the past. The most agreed-upon definition is a motivation that reduces withdrawal, anger, and revenge towards the wrongdoer, increases positive emotions and replaces negative ones (7). Having a good quality of life has always been a human dream. The World Health Organization defines the quality of life as a person's understanding of his life situation according to his goals, expectations, standards, and interests in the context of the culture and value system in which he lives, which includes the person's attitude to physical health, mental state, level of independence, social relations, It has defined personal dependencies and interaction with environmental conditions. Cardak (8) is the process of reducing resentment or hatred, freedom from past judgments and perceptions, freedom from learned responses, and efforts to heal past wounds, among the definitions of forgiveness. Forgiveness is one of the positive human abilities (9). Teaching forgiveness to couples has both preventive and therapeutic aspects (10). Preventive education has two main goals, one is to improve the quality of family life, and the other is to prevent divorce. Since the capacity for forgiveness is formed during childhood when the child tries to solve the two dimensions of the mother's image (love and hate)

within him as a whole, the first forgiveness is exchanged between him and the mother, and in the adult period, holding grudges leads to separation. A person's relationship leads. The person in his subconscious thinks about the relationship with stress and revenge to overcome it. Forgiveness helps to integrate these two contradictory images (11). In this approach, the scientific study of human strengths and perfections is done. Moreover, it seeks to reduce individual talents in facing challenges and identify empowering factors in daily experiences and factors that make life worth living (12). Forgiveness of the wrongdoer is a powerful tool to end a troubled and painful relationship that creates conditions for reconciliation with him (13). Forgiveness can be defined and evaluated as three characteristics: an attribute, a desire in a mutual relationship, and a response to a grudge (14). Forgiveness interventions reduce anger, hostile attitudes, and aggressive levels, improve psychological adjustment, and increase empathy in adolescents (15). Therapeutic forgiveness is effective in reducing anger, improving depression, and restoring general emotions and mental health (16). Research has shown that forgiveness is a psychological and therapeutic construct for communication problems and marital discord (17).

It has also been shown that the decision to forgive reduces negative feelings and consequently reduces stressful reactions (18). Based on this, the current research was conducted to enrich and increase married life quality and prevent marital conflicts and divorce.

Materials and Methods

Among the women referred to the counseling center in Tehran city in 2014 who scored high scores (above 25) on the marital conflict test, 30 people with an average age of 35 and a standard deviation of 2.9 years were selected as the available sample.

They were randomly replaced in two experimental and control groups. The sample size in each group was 15 people. The experimental group was exposed to therapeutic remission, while the control group followed its usual and previous schedule. After applying the test variable from both groups, a post-test was taken.

Research instruments

A) Marital Conflicts Questionnaire (MCQ): The questionnaire measuring marital conflicts and their dimensions was translated and organized by Torabi and Sanai (1375). This questionnaire measures seven dimensions of marital conflicts. These dimensions are reduction of cooperation between couples, reduction of sexual relations, reduction of adverse emotional reactions, support of children, increased personal relationships with relatives, reduction of family relationships with spouse's relatives and friends, and separation of financial affairs from each other.

The validity of the test using Cronbach's alpha method for the whole questionnaire on a group of 32 people is equal to 0.53 for its seven sub-scales as follows: reduction of cooperation 0.30; decrease in intercourse 0.50; increase in emotional reactions 0.73; Increasing the support of the child 0.60; increasing personal relationship with relatives 0.64; decrease in a family relationship with relatives, spouse and friends 0.64; separating financial affairs from each other 0.51; (Tarabi and Sanai, 2009). Dehghan reported the validity of the whole test as 0.52 and the subscales between 0.30 and 0.82. In the present study, the validity of the whole test was estimated to be 0.675 by Cronbach's alpha method and between 0.48 and 0.645 for the subscales.

B) Quality of Life Scale (SF-36): A short form of 36 questions widely used to evaluate the quality of life. This test was prepared within ten years using the findings and questionnaires of medical outcome studies. This test has 36 questions in two main areas, physical and mental, which measures eight indicators related to health (physical function, physical role, physical pain, general health, vitality, social function, role of excitement, and mental health). McHorney and Varazek (1993) have reported the validity of this test for octal scales of 0.70 and above.

This form has been standardized in Iran by Montazeri, Ghastasbi, and Vahadani Nia (2004), translated and standardized on 4163 people in the senior age group (average age 35.1 years), of which 52% were women. The researchers mentioned above have reported the validity of the test for the eight scales between 0.77 and 0.95, and only the validity of the vitality scale has been reported as 0.65. After selecting the sample and conducting the pre-test, a step-by-step treatment

program was implemented for the experimental group in ten 90-minute sessions.

The content of the meeting

Acquaintance with the subjects and introduction, establishing a good relationship and stating the rules, and conducting the first pre-test.

Confronting the subjects with the resentment they experienced, recalling the event that previously caused discomfort, expressing their feelings about it, and giving the second task.

Examining the assignment of the second session, discovering the defense mechanisms and encouraging them to search for their defense mechanism, feedback from the previous sessions, and giving the third assignment.

Examining the assignment of the previous session, confronting my side, examining the harms of suppressed anger and its unhealthy expression methods, teaching healthy anger expression methods, feedback from previous sessions, and giving the fourth assignment.

Examining the assignment of the previous session, forgiveness and paying attention to forgiveness as a choice to deal with past emotions and resentments and to give back to the fifth

Examining the assignment of the previous session, developing a new view of the wrongdoer, and developing sympathetic feelings towards the sixth wrongdoer.

Examining the assignment of the previous session, accepting suffering and finding meaning in the process of suffering and in the process of forgiving, facilitating their attitude towards injustice and their view of suffering, and presenting the assignment and feedback from the seventh previous session. Examining the previous assignment, reexamining the concept of forgiveness, not realizing that the person himself needed others' forgiveness in the past, feedback from the previous sessions, and giving the eighth assignment.

Examining the assignment of the previous session, finding support and a model in the process of forgiveness, examining their new feelings towards the guilty person, feedback from the previous sessions, and giving the ninth assignment.

Examining the assignment of the previous session, summarizing and drawing conclusions from the sessions, conducted the 10th exam

Results

Levene's test for equality of variances showed that $F=0.156$ is not significant at an alpha level less than 0.05.

Therefore, the assumption of the equality of variances was accepted, and with the assumption of the equality of variances. The results of the analysis are shown in Table 1.

Table 1. Summary of the test to compare the mean differential scores of marital conflicts of the experimental and control groups

Group	Pre-test		Post-test		Differential scores		T(28)
	M	SD	M	SD	M	SD	
Control	105.8	14.08	105.87	13.38	0.58	18.39	3.68
Experimental	96.60	18.08	78.15	18.04	23.35	12.38	**
P** <0.01							

Table 1 shows that forgiveness therapy has significantly reduced marital conflicts among women who refer to the Tehran Sermon Counseling Center. The effect size (0.57) shows that therapeutic forgiveness significantly affected women's marital conflicts.

Multivariate analysis of variance was used for differential scores to test the effect of therapeutic forgiveness on the seven subscales of marital conflicts. Dependent variables have a linear and meaningful relationship with each other, and

there is no multiple collinearity problem between the pair of variables; thus, the main assumptions of multivariate variance analysis. Based on the investigations, the other homogeneity conditions of the variance-covariance matrices are established with the Box test and the normality of the distribution with the Smirnov statistic. Table 2 summarizes the analysis of the statistical test of multivariate analysis of variance for differential scores.

Table 2. Summary of multivariate results for marital conflicts and their subscales

Test	df	F	P	η^2	Statistical power
Hotelling's trace	22.7	5.603	0.003	0.686	0.96
Pillai's trace	22.7	5.603	0.003	0.686	0.96

The results of Table 2 show that there is a significant difference between the levels of treatment (remission therapy vs. lack of treatment) in the dependent variables, i.e., marital conflicts and subscales of marital conflicts.

($P<0.003$, $h^2= 0.686$). Thus, it can be concluded that therapeutic forgiveness significantly affected marital conflicts and subscales of marital conflicts.

Table 3. Summary of variance analysis of one variable for subscales of marital conflicts

Scale	SS	DF	MS	F	P	η^2	Power
1	78.84	1	78.84	5.39	0.026	0.163	0.620
2	68.50	1	68.50	5.08	0.033	0.154	0.587
3	178.64	1	178.64	14.48	0.001	0.345	0.958
4	58.82	1	58.82	4.49	0.045	0.190	0.539
5	19.23	1	19.23	1.09	0.330	0.039	0.176
6	38.56	1	38.56	3.35	0.085	0.108	0.420
7	70.55	1	70.55	4.35	0.047	0.135	0.523
Total	3244.80	1	3244.80	13.27	0.001	0.329	0.940

Subscales of marital conflicts (1-decrease in cooperation between couples; 2-decrease in sexual relations; 3-increase in adverse emotional

reactions; 4-getting support from children; 5-increase in a personal relationship with one's relatives; 6-decrease in family relationship with

spouse's relatives and friends; 7-Separation of financial affairs from each other. Table 4 shows a significant difference in the mentioned subscales in the subjects of the control and experimental

groups. However, there was no significant difference between the other subscales in the subjects of the control and experimental groups.

Table 4. T-test to compare the average quality of life of the experimental and control groups

Group	Pre-test		Post-test		differential scores		T(28)
	M	SD	M	SD	M	SD	
Control	105.8	14.08	105.87	13.38	0.58	18.39	3.68
Experimental	96.60	18.08	78.15	18.04	23.35	12.38	**
P**<0.01							

Table 4 shows that therapeutic forgiveness has significantly affected the quality of life of women who refer to the relaxation counseling center. The effect size (0.54) shows that therapeutic remission has had a high effect on the quality of life of women. Multivariate analysis of variance

was used for differential scores to test the effect of therapeutic forgiveness on the eight subscales of quality of life. Table 5 summarizes the statistical test analysis of the multivariate analysis of the variance of the differential scores.

Table 5. Multivariate variance for quality of life and its subscales

Test	DF	F	P	η	Statistical power
Hotelling's trace	22.7	5.603	0.003	0.686	0.96
Pillai's trace	22.7	5.603	0.003	0.686	0.96

The results of Table 5 show that there is a significant difference between the levels of treatment (therapeutic forgiveness versus no treatment) in dependent variables, i.e., quality of

life and subscales of quality of life. Treatment has significantly affected the quality of life and some subscales of quality of life.

Table 6. Summary of variance analysis of one variable for quality of life subscales

Scale	SS	DF	MS	F	P	η	Power
1	45.32	1	45.32	9.799	0.005	0.260	0.858
2	7.52	1	7.520	6.205	0.019	0.183	0.675
3	0.209	1	0.209	2.219	0.145	0.075	0.303
4	0.678	1	0.678	0.970	0.355	0.035	0.159
5	9.635	1	9.635	5.039	0.035	0.157	0.585
6	0.835	1	0.835	2.735	0.109	0.089	0.359
7	2.74	1	2.740	4.540	0.045	0.139	0.537
Total	362.665	1	362.665	11.460	0.002	0.295	0.905

The subscales are in order (1-physical functioning, 2-emotional role, 3-physical pain, 4-general health, 5-vitality, 6-social functioning, 7-emotional role, 8-mental health). The results of

Table 6 show that the analysis of variables related to loneliness also showed a significant difference in the mentioned subscales in the subjects of the control group and the experimental group.

However, the effect of therapeutic forgiveness on other subscales was not significant. From the comparison of the correlation coefficient for marital conflicts, it can be seen that the effect of the independent variable (therapeutic forgiveness) on marital conflicts was more effective than that on the quality of life.

Discussion

Data analysis showed that therapeutic forgiveness greatly affected women's marital conflicts. These results are consistent with the findings of Aalgaard and colleagues (9), Weisskirch R, Delevi (5), Delidar et al. (6), Somohano (4), and Tousanit et al. and it is considered a treatment for communication problems and marital discord. Conflict resolution skills as a key indicator in romantic relationships, and the ability to manage and resolve conflicts constructively in marital relationships facilitate couples' intimacy. This finding is theoretically consistent with the findings of the researchers mentioned above. On the other hand, from a logical point of view, couples' conflicts that cause tension, if they are forgiven, lead to less friction between couples (22). How forgiveness works (19) has introduced three major ways to implement forgiveness: 1- Forgiveness works as a new framework. That is, it provides a different way to experience past painful events. Therefore, it is a process, that is, a direction towards a different logic level. 2-Forgiveness requires the ability to make mistakes again, based on a reframing of predictions. This action occurs spontaneously or as a result of therapeutic intervention and releases new positive energy within the family system. 3- Forgiveness acts as a temporary empowering factor and dramatically changes the balance of power in the relationship in mysterious ways. First, it changes the balance of power through the direct exchange from the previous wrongdoer with power to the powerless victim. This power dynamic can be experienced between the parties so that each party considers the actions of the other person during the process of forgiveness as a kind of game. The previous system is stopped, and the family system returns to its previous state. In the perspective of forgiveness family therapy, families are tissues suitable for forgiveness interventions. (23) made forgiveness a valid theory by using the ideas from

family therapy. He has emphasized the dimension of the principles of communication ethics, which focuses on the mental balancing of fairness, trust, and entitlement between family members. Data analysis showed that therapeutic forgiveness affected women's quality of life. This result is in line with Lawler-Row et al. (24) and Melon et al. (18). But how can forgiveness affect marital conflicts and quality of life? Since researchers (25) in the field of forgiveness believe that the process of forgiveness is similar to other adaptive processes. If we divide the adaptive method into problem-oriented and emotion-oriented categories, forgiveness is one of the emotion-oriented methods. Research shows that the problem-oriented method is more effective in situations with high control (3). Because a person can make changes in his environment, but in situations with low control, problem-oriented methods may cause failure. On the other hand, the emotion-oriented method will be more effective because while helping to empty and manage negative emotions caused by helplessness and despair. It helps to strengthen the social support and adaptability of the individual while having little control over the environment (26). In this way, the person who forgives goes through an emotional adaptation process, and a change in his attitude and quality of communication occurs.

The family contributes to the quality of individual life of the members, and each member also contributes to the quality of family life in a continuum, creating a dynamic cycle between the family and its members (11). The members of families who have a satisfactory individual quality of life experience a satisfactory quality of life (9). Of course, it may be the opposite as well (27). Melon and colleagues (18) showed that deciding to forgive reduces negative emotions and reduces stressful reactions. Laver and colleagues (24) have reported a significant relationship between forgiveness, attachment, and better living. However, it cannot be said that forgiveness is the only determinant of reducing marital conflicts and increasing the quality of life of women. The evidence shows that forgiveness reduces conflicts and increases women's quality of life (28). Many factors affect the quality of life and marital conflicts. From the psychoanalytic perspective, forgiveness solves the conflicts caused by attachment and prevents the

suppression of anger (29). In the present study, standardized tests with high reliability and validity were used, the experimental design was used, and many variables such as gender and individual differences of subjects were controlled. Therefore, the research findings are reliable, and it can be said that forgiveness therapy affects the quality of married life and women's conflicts. Therefore, based on the results of this research, it is suggested to use therapeutic forgiveness to resolve conflicts. On the other hand, the value of future and longitudinal follow-

ups on the effects of counseling based on forgiveness on the dimensions of life remains in its place because forgiveness can affect people's spiritual dimensions and health over time.

Conclusion

The results show that the intervention of forgiveness therapy has had a positive effect on marital conflicts and the subscales of marital conflicts as well as the peace of life and has led to the reduction of marital conflicts and the increase of peace of life.

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