THE IMPACT OF COMMUNICATION ENRICHMENT EDUCATION PROGRAM ON SEXUAL SELF-ESTEEM AND MARITAL STRESS IN INFERTILE WOMEN

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Abstract

Infertility as a crisis biological could threaten psychological, social and mental health and marriage of infertile couples. Therefore the aim of present study was to evaluate the effect of relationship enhancement program on sexual self-esteem and matrimony stress of infertile women. the study procedure was semi experimental and was pre-test and post-test type by control group. Statistical community was whole infertile couples referring to the offices of Obstetricians and Gynaecologists in Pars Abad, Ardebil, Iran. Among them 24 infertile women, were selected as available sampling method. In order to data collection, women’s sexual self-esteem and marital stress questionnaires utilized and data analysed through single variable covariance analysis (ANCOVA). Results of the study showed that the relationship enhancement program was effective on increasing sexual self-esteem and marital stress reduction of infertile women (P<0.05). Relationship enhancement program was effective in a manner associated with behavior-relation on sexual self-esteem and marital stress. Therefore relationship enhancement based sessions to prevent and solve problems of married couples in counseling centers for infertile couples is suggested.

Keywords: relationship enhancement program, sexual self-esteem, marital stress, infertility

Introduction: An infertile women experiences not just childless, but possibly loose relations with her family, wife and friends and feels loneliness and isolation, blames from herself and others, and loses her identity as a woman. Loss of
interest in his wife and tensions resulted from some of treatments leads to stress, feelings of helplessness, conflict, depression, severe loss of self-esteem and low self-esteem (1). Among individual problems in infertile women which have an impact on matrimonial matters, can be noted as infertile women's sexual self-esteem. Sexual self-esteem is the emotional response of patients to assess their thoughts and feelings and sexual behaviour (2). Or in other words the sexual self-esteem is ability to enjoy sexual partner, belief in the attractiveness, ability to manage sexual behaviour and its compatibility with other personal goals and how to assess their sexual behaviour and feelings (3). Studies indicate that infertility associates with wide range of psychological damages including decreasing life quality, self-esteem, sexual, emotional and social satisfaction, increasing tension level, anxiety, depression, anger, low self-feeling, feeling of inadequacy, sexual dysfunction and marital problems and totally decreasing Psychological well-being (4). Elsenbruch, Hann, Kowalsky and Offiner compared psychological well-being in infertile and normal women and found that these women showed low scores of positive relation with others and self-acceptance. Accordingly, infertility has relatively constant and stressful nature, and could results to decreasing self-esteem by creating tensions. Some of infertile women and also psychological problems from the infertility, In addition to the negative impact of interpersonal factors that aggravate and perpetuate infertility, affects interpersonal relations especially their marital relations (5-6).

Marital stress defined as a conditions in which couples experience relation and solving the problem, while pursuit a solution to live with each other and so accept each other’s difference (7). In fact, marital stress is an interpersonal event which affects both of couples in various ways. BudmanModel recognize internal stress (negative relations patterns and challenges, power challenge) and external stress (work, financial and mail family stresses) in couple’s relationships (8). Various studies show that infertile couples had less marital satisfaction, presenting the interest to the couple, marital compatibility and lower sexual satisfaction (5) and have continuous infertility and personal and interpersonal stress affecting marital problems (9). Having regard to this point that continuous infertility could be affected through psychological factors and also results in numerous psychological consequences, a multi-dimensional program was considered for the present study. Enhancement of relations is an educational strategy for improving the mate’s relationships and its aim is to help to couples for awareness of themselves and their mates, exploring their mate’s feelings, extending the kindness and intimacy and growing efficient relation and problem solving skills (10). Enhancement could be conducted via various ways and each method has different effectiveness rate. Totally, enhancement program in marital
life acts in fields of educating the relations to couples, solving the problems and challenges, sexual satisfaction, couples activities in free times, real expectations of each mate from each other, sexual expectations of satisfaction and the role of sex and how the making sex relation between couples (11). In the present study it was attempted that having regard to sexual problems in infertile couples (6), emphasize was put on enhancement of sexual relation. Studies showed that couple treatment according to educating relation skills were effective on increasing intimacy of couples (12). A study in Iran on incompatible couples showed that couple treatment of behavior-relation is effective on sexual intimacy (13). Yoo et al. showed that education and modifying the couple’s relations is effective in controlling negative ignitions, improving relation patterns, satisfaction from relationship and sexual intimacy of couples (14). Totally, understanding the effective factor in improving marital relations, and application of them is a considerable methods for decreasing sexual and marital problems and consequently reaching to satisfaction from marital life in infertile women. Therefore the aim of present study was to determination of the rate of effectiveness of relation enhancement program on sexual self-esteem and marital stress in infertile women.

Material and Methods

Present study was experimental type and the considered model was pre-test and post-test with control group. Statistical community was total women who referred to women and Gynaecology and Infertility centers of Pars Abad, Moghan, Iran in order to receiving treatment services. Statistical samples include 24 infertile women (12 experimental group and 12 control group) which were selected after initial interview and volunteering of persons through available sampling method and randomly put on control and experiment group. A total of 12 persons in the experimental group received the educational intervention. Sample selection criteria were: 1- having a doctor diagnosis about infertility and 2- having guidance and higher education.

• Instruments

This questionnaire designed by Zeanah and Schwarz in 1996(15) and includes 81 questions and 5 subscales which are skill and experience, attractiveness, control, moral judgment and adaptiveness The questionnaire assessed subjective emotional reactions of women to their thoughts and feelings about sexual behavior. Cronbach’s Alpha Coefficient of questionnaire is reported 0.85 to 0.94 by creator of the inventory. The correlation of this inventory with Rosenberg self-esteem questionnaire has been calculated and the value of attractiveness 0.56, control 0.45, adaptiveness 0.45, moral
judgment 0.38 and skill & experience 0.44 reported. In this research Cronbach’s alpha calculated and gained between 0.75 to 0.95 for subscales(15).

- **Tehran Stockholm Marital Stress Scale Questionnaire for assessing the marital stress from translation**

Stockholm Marital Stress Scale (SMSS) was utilized which constructed with Orth-Gomer et al. (16) and translated by Besharat, Shamsi pour and Barati (34) in Iran. Main scale consisted of 18 questions which scored as 0 and a score. Minimum score is 0 and the maximum is 17. As the person’s score in higher in the scale, stress in relation with him/her mate would be higher. Orth-Gomer et al. (16) reported the α-Cornbach score for this test as 0.77.

According to results of the study, mean age of experimental group was 30.12 with 5.31 standard deviation and mean age of control group was 31.54 with 5.67 standard deviation. Also, based on results, 45 percent of infertile women had guidance education, 30 percent had diploma and 25 percent were graduate.

### Table-1: The average and standard deviation of pre-test and post-test for sexual self-esteem in two groups.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>Average</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test of sexual self-esteem</td>
<td>Experimental</td>
<td>109.65</td>
<td>4.81</td>
</tr>
<tr>
<td></td>
<td>Control</td>
<td>105.22</td>
<td>4.13</td>
</tr>
<tr>
<td>Post-test of sexual self-esteem</td>
<td>Experimental</td>
<td>186.76</td>
<td>6.84</td>
</tr>
<tr>
<td></td>
<td>Control</td>
<td>104.45</td>
<td>4.52</td>
</tr>
</tbody>
</table>

### Table-2: The average and standard deviation of pre-test and post-test for Marital stress in two groups.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>Average</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test of Marital stress</td>
<td>Experimental</td>
<td>15.12</td>
<td>2.37</td>
</tr>
<tr>
<td></td>
<td>Control</td>
<td>14.36</td>
<td>2.65</td>
</tr>
<tr>
<td>Post-test of Marital stress</td>
<td>Experimental</td>
<td>09.15</td>
<td>1.14</td>
</tr>
<tr>
<td></td>
<td>Control</td>
<td>13.77</td>
<td>2.23</td>
</tr>
</tbody>
</table>

### Table-3: The results of covariance analysis of sexual self-esteem experimental and control groups.

<table>
<thead>
<tr>
<th>Source</th>
<th>Dependent variable</th>
<th>SS</th>
<th>Df</th>
<th>MS</th>
<th>F</th>
<th>Sig</th>
<th>Eta</th>
</tr>
</thead>
<tbody>
<tr>
<td>Groups</td>
<td>sexual self-esteem</td>
<td>4125.88</td>
<td>1</td>
<td>4125.73</td>
<td>71.81</td>
<td>0.001</td>
<td>0.69</td>
</tr>
</tbody>
</table>

As can be observed in Table 2, difference between mean scores of sexual self-esteem at post-test step after scores control of pre-test at both control and experiment groups was significant (P<0.05). This means that Communication enrichment
education program was effective in increasing sexual self-esteem of infertile women. Also, results of univariate covariance analysis indicates the impact amount by 69 percent.

**Table-4: The results of covariance analysis of Marital stress experimental and control groups.**

<table>
<thead>
<tr>
<th>Source</th>
<th>Dependent variable</th>
<th>SS</th>
<th>Df</th>
<th>MS</th>
<th>F</th>
<th>Sig</th>
<th>Eta</th>
</tr>
</thead>
<tbody>
<tr>
<td>Groups</td>
<td>Marital stress</td>
<td>3825.23</td>
<td>1</td>
<td>3825.23</td>
<td>66.31</td>
<td>0.001</td>
<td>0.65</td>
</tr>
</tbody>
</table>

As can be observed in Table 2, difference between mean scores of Marital stress at post-test step after scores control of pre-test at both control and experiment groups was significant (P<0.05). This means that Communication enrichment education program was effective in reduction Marital stress of infertile women. Also, results of univariate covariance analysis indicates the impact amount by 82 percent.

**Discussion**

Results showed that relation enhancement between infertile couple caused to increasing sexual self-esteem and decreasing marital stress. In other word, test group after three months interventions of sexual relations enhancement and required educations in regard to haw to make the sexual relation and satisfied sexual action compared to their counterparts had higher sexual self-esteem and lower marital stress. The findings of the present study are in consistent with 12-14 findings. Emphasize put on behavioral aspects and couples relations. In behavioral-relation treatment, application of treatment principles like behavior exchange, improving the positive behaviors and punishment the unrighteous of couples causes to improving mates relations by improving the behavior and inhibition from formation of improper interactions and emergence of challenges. Creating the question-respond and clarifying the behaviors and statements among couples and concentrating on efficient and unambiguous behaviors could make the mates closer to each other, in fact, lives of most couples changed to a stationary and lack of intimacy due to lack of awareness of relation skills and unhealthy relation styles (17). In this program, by concentration on establishment the satisfied sexual relation against to enjoyed sexual relation, the own ability of infertile women in keeping the relation was emphasized. How to making the sexual relation and increasing the sexual relation skills are very effective in meeting the sexual and emotional demands in increasing self-validity and sexual self-esteem. Understanding the potential abilities and converting them to efficient behaviors in establishment and achieving satisfaction in their own mate is very favorable.
In addition, studies represent that by concentrating sexual self-statement and facilitating expressing the feelings could be affective in intimacy, dependency, expressing the sexual and psychological demands of infertile couples and could facilitate discussion and negotiation skills in regard to various problems (18). Marital stress could affect infertile women lives through horizontal and vertical stressors. Horizontal stress include stressors that emerge during shared life like infertility and could cause marital problems. Interventions based on relation could have great contribution in controlling such stressors. Since both mates could easily manage the situation and education the repelling skills increases the couple’s ability to solving such problems. While, in vertical stressors which transferred from past time and main family to us, an infertile women could provide many problems and challenges with relation pattern and belief transferred from past in couple relation. Negative patterns or negative deduction from mate behaviors which could perceived as understanding parasites and negligence of positive behaviors in creating and growing the differences and marital stress are effective in internal marital relations. In relation enhancement program, considering the efficiency of a relation for a satisfied relation is very important. So that statement and clarifying the persons beliefs for each other, especially infertile couples, and educating them in emergence and removing such stressors in internal marital resulted from relation patterns and beliefs have great contribution in infertile women marital satisfaction.

**Conclusion**

In fact, this program in addition to decreasing psychological and personal problems of infertile women like sexual self-esteem which is effective in marital satisfaction, increases intimacy and emotional involvement of infertile women for efficient solving the problems. Therefore, use of relation enhancement program for solving the problems of such couples, especially infertile couples, is recommended.

**References:**


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