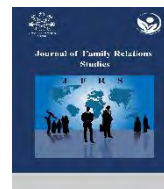




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Research Paper

The Effectiveness of Forgiveness Therapy on The Mental Health and Marital Intimacy of Couples Seeking Divorce



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ABSTRACT

Objective: This study aimed to investigate the effectiveness of forgiveness therapy on the mental health and marital intimacy of couples seeking divorce in Tehran.

Methods: The quasi experimental design was pretest-posttest with a control group. The study's statistical population included all divorce applicants in districts 2 and 5 of Tehran who had been referred to counseling centers for counseling services. By convenience sampling, thirty people were selected from the above population and randomly assigned into two experimental (n=15) and control (n=15) groups. The research instruments were Goldberg Mental Health Questionnaire (GHQ) and Thompson & Walker Marital Intimacy Questionnaire. Data were analyzed using the covariance test.

Results: Based on the results of the research on the effectiveness of forgiveness therapy on the mental health, the difference between the experimental and control groups in terms of the amount of mental health in the post-test was confirmed. The research on the effectiveness of forgiveness therapy on marital intimacy was investigated, and the difference between experimental and control groups was confirmed in terms of marital intimacy in the post-test.

Conclusion: According to the results of this study, it can be said that forgiveness therapy increased mental health and marital intimacy in people under education. Therefore, family counselors and those involved in marital counseling should use the therapeutic forgiveness training protocol to promote mental health and marital intimacy for couples seeking divorce.

1. Introduction

Divorce is associated with a range of negative psychological consequences, including increased symptoms of anxiety, depression, and somatization (Hald, 2020). Many families experience the dissolution of a marriage or relationship, and divorce rates in industrialized countries are generally high, from 35 to 50 percent (Center for Disease Control and

Prevention, 2016; European Commission, 2015). Because of the destructive nature of divorce, it is increasingly considered a public health concern (Bracke, Colman, Symoens & Van Praag, 2010; Monden, Metsä-Simola, Saarioja & Martikainen, 2015; Salem, Sandler & Wolchik, 2013; Vezzetti, 2016). Divorce affects many families yearly.

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A recent review of researches have confirmed and expanded the close association between divorce and adverse health outcomes among adults. Divorced people report more symptoms of depression, stress, anxiety, social isolation, and poorer physical and mental health than their married counterparts (Amato, 2010; Hewitt & Turrell, 2011). A review of research evidence related to the discussion of divorce and psychological problems indicates that one of the negative consequences of divorce is its effect on the couple's mental health.

One of the things that can play a role in a couple's divorce status is the couple's mental health. Mental health is one of the crucial dimensions of health, and according to the definition of the [World Health Organization](#): Mental health is a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions and build relationships (WHO, 2013). Nowadays, the number of people getting divorced and having to take responsibility for life alone has increased. These people, with the loss of a partner and a lifestyle change, confront negative consequences in terms of mental health, such as a decrease in positive emotions and an increase in negative emotions, including anger, stress, anxiety, and depression (Sharma, 2011). Research conducted on the consequences of divorce demonstrates a significant relationship between divorce and adverse health outcomes among adults. Related statistics in this area also illustrate that divorced people report more symptoms of depression, stress, anxiety, social isolation, and poorer physical and mental health than their married counterparts (Amato, 2010; Hewitt & Turell, 2011; Hewitt et al., 2012). In addition, divorce is associated with lower levels of psychological well-being, high stress, and anxiety (Afifi et al., 2018). Research has shown that divorce is a risk factor for depression, post-traumatic stress disorder (PTSD), and high blood pressure and is associated with other disorders such as seasonal affective disorder, social phobia, and bipolar disorder (Lee et al., 2011; Gibb, Fergusson & Horwood, 2011; Breslau, 2011).

Another critical psychological variable that is probably disturbed due to divorce in couples is marital intimacy. On the other hand, today, the reasons for marriage and the expectations of spouses from each other have changed dramatically. The main reasons for today's marriage are the need for love and intimacy, to create a close relationship with the spouse, and to meet emotional-psychological needs (Etemadi, 2008).

Marital intimacy is vital in a marital relationship (Avanti & Setiawan, 2022). Intimacy in married life acts as a stress-buster against stress and plays an essential role in marital performance, commitment, stability and physical and psychological well-being (Langdridge et al., 2018). When the need for marital intimacy is unmet, it leads to stress and conflict with the spouse. Conflicts could be the main reason for divorce (Pasha et al., 2017). Intimacy is essential in determining the longevity of a marriage (Avanti, 2022). According to Kardan-Souraki (2016), Marital intimacy is one of the necessities of married life, and at the same time, it is a characteristic of a successful and happy couple (farhadi et al., 2020). Researches represent that intimacy between couples is one of the critical factors in creating stable marriages (Crawford & Unger, 2004). On the other hand, avoiding intimate relationships is one factor that makes family life fail (Blume, 2006).

The review of the findings indicates that forgiveness therapy is one of the common psychological treatments that can be effective on the mental health and marital intimacy. Forgiveness is considered a powerful therapeutic intervention and a rational exercise in which a person forgives. Forgiveness is one of the three keys to various aspects of mental health. Forgiveness is usually considered a moral virtue (such as justice, patience, and kindness) and involves the willingness to set aside the right to resent, condemnation, and revenge, and instead express compassion, generosity, and love toward the offender, even when does not deserve (Enright & Fitzgibbons, 2015). Forgiveness is the process of letting go of others' mistakes, which is done either because of the motivation to achieve inner peace, improve relations with the offender spouse, or perform a valuable behavior. Forgiveness has the consequences of getting rid of negative feelings towards the offender spouse, overcoming the resentment resulting from the mistake, and avoiding anger, separation, distance, and revenge toward the offender spouse (McCullough et al., 2001). Forgiveness therapy has been scientifically proven to improve emotional well-being (self-esteem, hope, and life satisfaction) and alleviate mental health problems (depression, anxiety, and stress) in women who were abused as children (Lee & Enright, 2014). Research demonstrates that therapeutic forgiveness causes psychological adaptation, reduces anger, hostile attitude, aggressiveness, and committing a crime, and increases empathy significantly (Park, Enright & Klatt, 2013). In the research of Avanti and Setiawan (2022), they studied the role of trust and forgiveness on the marital intimacy of a group of couples, and the results showed that trust and forgiveness played a significant

role in predicting marital intimacy in couples. In another study, [Agu & Nwankwo \(2019\)](#) investigated the relationship between forgiveness in marital relationships and satisfaction among 189 couples, and the results indicated that forgiveness in marital relationships has a significant correlation with marital satisfaction in subjects. In the research of [Bagheri Zadeh Moghadam et al. \(2021\)](#), the effectiveness of forgiveness-based schema therapy was investigated in a group of women with marital conflicts referred to counseling clinics, and the results showed that forgiveness-based schema therapy increased commitment and intimacy in women. In the research of [Zarei et al. \(2016\)](#), the effectiveness of training based on forgiveness on the dimensions of women's adjustment after the divorce was investigated, and the study showed that the training based on forgiveness is effective in the adjustment of divorced women after divorce.

A review of research illustrates that the mental health of divorced people and divorcing couples is at risk. Therefore, it is considerable to identify psychological variables related to divorce. On the other hand, the research on mental health in these people showed that one of the underlying factors of divorce is the lack of marital intimacy in couples seeking divorce. In this regard, it appears necessary to identify psychological education to improve couples' mental health and intimacy. Many psychological educations have been developed for couples seeking divorce to decrease their psychological problems, including therapeutic forgiveness. Considering the importance of dealing with the negative consequences of divorce and immunizing people against this phenomenon by using psychological protocols, as well as the lack of related research in this field and the fact that no direct research has been performed on this issue so far, conducting this research seems necessary. Hence, this research aims to answer whether forgiveness therapy is effective on the mental health and marital intimacy of couples seeking divorce.

2. Materials and Methods

The current research method was an quasi experimental pre-test and post-test design with a control group. The statistical population of this research comprised all the couples seeking divorce who were referred to counseling centers in the 2nd district of Tehran in the second half of 2018. Thirty couples were randomly selected from the statistical population and couples seeking divorce who were referred to counseling centers in the 2nd district of Tehran and were randomly assigned to two experimental (n: 15) and control (n: 15) groups. The method of conducting the research was that after the necessary coordination with the justice centers and

getting permission from 30 people who were referred to counseling centers at 2nd district of Tehran were selected by the available sampling method and randomly divided into two experimental groups and control (15 couples in each group). After replacing the subjects, the participants answered the questionnaires of mental health and marital intimacy. Then, forgiveness-based intervention therapy sessions were held weekly for the experimental group participants in 9 sessions; each session was 1.5 hours. However, the control group participants did not receive any intervention at the end of the study. After finishing the treatment sessions, the two groups were again evaluated by research questionnaires. This research was trying to keep the information on the subjects completely confidential, and data collection will be done with the informed consent of the participants. In order to comply with the ethical issues in the study, mindfulness-based cognitive-behavioral therapy sessions were also provided for the control group.

Instrument:

1. Mental health questionnaire (GHQ-28): The mental health questionnaire was presented by [Goldberg and Hiller \(1979\)](#). In addition to questions on personal and social features, this questionnaire covers four areas: somatic symptoms, anxiety symptoms, social dysfunction, and depression. The scale of the questionnaire is 4 points: not at all (with a score of zero), no more than usual (score 1), rather more than usual (score 2), and much more than usual (score 3). The range of scores for each area is 0-21, and the total score range of the questionnaire is 0-84. For this test, the cut-point was 25% (based on previous studies). The higher the person's score, the less mental health; the lower the score, the more mental health. The validity and reliability of the questionnaire and its normalization have been confirmed in previous studies ([Taghavi, 2001](#)). [Taghavi \(2001\)](#) investigated the validity of the mentioned questionnaire with three methods test-retest, split-half, and Cronbach's alpha, which resulted in reliability coefficients of 0.70, 0.93, and 0.90, respectively. In another study, the reliability of the whole scale, somatic symptoms, anxiety, social dysfunction, and depression, was reported as 0.76, 0.59, 0.64, 0.70, and 0.74, respectively ([Dale, Söderhamn & Söderhamn, 2012](#)).

2. Marital intimacy scale: The marital Intimacy Scale (MIS) developed by Walker and Thompson consists of 17 items to assess intimacy between couples. The scoring method for marital intimacy is a 7-point Likert scale ranging from 1 (never) to 7 (always).

A higher score is a sign of greater intimacy. This scale has been translated and normalized by Sanai (2000). The reliability coefficient of this tool was obtained at 0.96 by Cronbach's alpha method on 100 subjects. In another study, In order to determine content validity, questionnaire was given to 15 counseling professors and 15 couples and finally it's content validity was confirmed. Also the overall reliability coefficient of

the questionnaire by Cronbach's alpha method was obtained 0.96 (Etemadi, Navabinejad, Ahmadi, & Farzad (2018). In the present study, the reliability of this tool obtained using Cronbach's alpha method was equal to 0.85. The protocol of therapy sessions was also derived from Case (2005) forgiveness-therapy model; the summary of the sessions is presented in Table 1.

Table 1. Summary of forgiveness-therapy training sessions

sessions	contents
1	Conducting the pre-test, familiarizing the therapist and the group members with each other, discussing the meeting's purpose and overall structure, and checking the expectations from the treatment plan.
2	Disclosure, recognition, and acknowledgment of injustice (in this meeting, the group members were guided to recognize and acknowledge how they suffered from their spouse's offenerity. Each group member narrated the story of their spouse's infidelity).
3	Determining the individual's psychological defenses against this event (in this meeting, the group members were helped to confront their anger and deep sadness against this situation. This goal was achieved by asking questions such as: Is there an emotional relationship between the spouse and the third person? Where and how did the infidelity take place? What was the condition when the spouse was away? In this meeting, the group members received much empathy and understanding from each other.)
4	Coping with feelings of hurt and anger (in this session, the group members were encouraged to emotional catharsis in non-destructive ways (such as writing an unedited letter to their spouse and then tearing it up) and to moderate strong emotions. Writing letters resulted in escaping the psychological state of crisis and dealing with their feelings in this regard).
5	Acknowledging the inefficiency of old solutions: What should be done now? (In this meeting, the old strategies of the group members were reviewed, and the members faced the fact that they needed help to deal with this situation effectively through their old methods. Finally, the members were directed to find new solutions.)
6	Setting the stage for forgiveness: Recognizing one's role in the enlarged picture of destructive behaviors in a relationship. (They were asked to review their role in this crisis. In this case, they thought about how much they blamed themselves for the occurrence of their spouse's infidelity and whether they could empathize with them.)
7	Gaining new insight into offenders and the problem of infidelity (The problem was reframed, and the offender's problem was considered in the context of marriage. Finally, there was a change in the attitude and behavior of the group members toward the offender.)
8	Select forgiveness as a new option (We talked about forgiveness and its need in everyday life with group members. The group members considered forgiveness as a new solution. The group members realized they could reduce their negative emotions and thus experience more positive emotions. By forgetting and getting rid of strong feelings about the previous events, the group members release the forces that were once spent on resentment and suffering and take care of unhealed emotional wounds; They were able to create new goals for their lives and partly return the lost peace.)
9	Summarizing, concluding, and answering the members' questions, evaluating the whole meeting, appreciating the members for participating, and conducting the post-examination.

3. Results

30 men and women applying for divorce participated in this research. The average age of the investigated subjects was 36.97 with a minimum age of 19 years and a maximum of 49 years. In terms of job status, 10 (33.3%) were housewives, 15 (50%) were students, and 5 (16.7%) were employees. Also, the average

duration of marriage of the studied subjects was 6.62 years, and the subjects with a history of marriage of at least 1 year and a maximum period of marriage of 18 years participated in the research. In the following, the descriptive indices of the research variables are presented in Table 2.

Table 2. Descriptive indicators of mental health and marital intimacy in the two study groups

groups	variables	Pre-test		Post-test	
		mean	Standard deviation	mean	Standard deviation
experimental	Mental health	20/32	7/22	11/37	5/21
	marital intimacy	30/36	3/18	36/37	5/43
control	Mental health	22/65	11/99	21/75	11/53
	marital intimacy	30/70	14/22	32/22	32/22

In the following, multi-variable covariance analysis was used to investigate the effectiveness of forgiveness-therapy training on the mental health of divorce-seeking couples. In order to use this test, its assumptions must be fulfilled. One of the assumptions of using this parametric test is the normality of data distribution. Shapiro-Wilk test was used to check this assumption, and the result of this test indicated the normality of data distribution ($W=0.32$; $P<0.05$).

Another assumption of using this test is the homogeneity of the variance of the groups in the dependent variables as well as the homogeneity of the

variance-covariance matrix of the dependent variables in the studied groups. To check these two assumptions, Ajmon Lun and Mbox test were used. The result of the Lone test showed that the variance of the mental health components and the total score of mental health were homogeneous in the studied groups ($P<0.05$) and the result of the Mbox test also indicates that this assumption was established ($F=5.86$; $P<0.05$). According to the assumptions of the multivariate covariance analysis test, it is safe to use this test. Therefore, the result of this test is presented in Table 3.

Table 3. The results of the multivariate covariance analysis of the difference between the two control and experimental groups in the components of mental health

source	value	F	degree of freedom assumed	degree of freedom of the error	Sig.	eta square	
group	Wilks Lambda	0/117	5/86	3	13	0/0001	0/498

The findings in Table 3 show that the components of mental health in the control and experimental groups have significant differences ($P<0.0001$). In the

following, to examine the components of mental health in the studied groups, the results of univariate covariance analysis are presented in Table 4.

Table 4. The results of univariate covariance analysis of mental health components in the studied groups after pre-test control

source of variable changes	Variable	sum of squares	df	mean of squares	F	Sig.	eta square
group	somatic symptoms	81/32	1	81/32	4/52	0/179	0/078
	Anxiety	51/39	1	51/39	3/22	0/014	0/211
	social dysfunction	49/58	1	49/58	5/51	0/005	0/281
	Depression	91/67	1	91/67	1/28	0/004	0/171

The result of univariate analysis of Mankova test shows that forgiveness therapy has improved all components of mental health in the experimental group compared to the control group. This treatment had the greatest impact on social dysfunctioning with an Eta coefficient of 0.28 and the least impact on somatic symptoms with an Eta coefficient of 0.078.

In the present study, the effect of forgiveness therapy on the marital intimacy of couples applying for divorce was also studied. To test the effect of this treatment on marital intimacy, univariate covariance analysis was used. In order to use this test, the assumptions of using the parametric test must be established. The normality of data distribution is one

of the assumptions of using this test, and the result of the Shapiro-Wilk test indicates that the distribution of marital intimacy data in the two stages of pre-test and post-test of the studied groups is normal. ($W=0.52$; $P<0.05$). Also, the homogeneity of the variance of the groups in the dependent variable in the two studied groups was checked by Lone's test, and the result of the Lone's test ($F=2.31$; $P<0.05$) indicated that the assumption of homogeneity was established. In this way, the conditions for using the single-variable covariance analysis test to evaluate the effect of forgiveness therapy on marital intimacy were established. In Table 4, the results of the covariance analysis of one variable are presented.

Table 5. Univariate covariance analysis of the difference between the two control and experimental groups in the marital intimacy variable

source of variable changes	sum of squares	df	mean of squares	F	significance level	eta square
Pre-test	1057/805	1	1057/805	8/69	0/001	0/222
group	3422/702	1	3422/702	12/74	0/001	0/492
error	1356/815	15	90/454			

The findings in Table 4 show that forgiveness therapy significantly improved the marital intimacy of couples seeking divorce in the experimental group compared to the control group ($F=8.69$; $P<0.01$).

4. Discussion and Conclusion

This research was conducted to determine the effectiveness of forgiveness therapy on the mental health and marital intimacy of couples seeking divorce in Tehran. Regarding the effectiveness of forgiveness therapy on the mental health, the results indicated a significant difference between the experimental and control groups in the mental health variable, and forgiveness therapy had increased the mental health of couples seeking divorce. The present research is aligned with the findings of Mullen et al. (2023), Toussaint et al. (2023), Akhtar et al. (2018), and Griffin et al (2015). In the explanation of the present findings, it can be stated that forgiveness is one of the psychological and communication processes to increase mental health and heal resentment, which is necessary for the communication, emotional, spiritual and physical development of human beings. Forgiveness influences most mental health indicators, which increases life satisfaction and interpersonal relationships. The reason for the positive effects of forgiveness on the mental health may be that it deals with the impressions of stress and negative emotions, expands people's cognitive and behavioral framework, and creates new adaptive techniques. In the research of Mullen et al. (2023), the impact of forgiveness on health and well-being was investigated, and the results demonstrated that forgiving people experienced lower levels of depression, anxiety, and aggression and had a better quality of life. As well as the psychological advantages, their stress, blood pressure, and heart rate were decreased. Researchers believe that forgiveness focuses on positive emotions such as hope, appreciation, gratitude, and happiness, which have a positive and significant relationship with increasing mental health.

Forgiveness releases people from anger and guilt resulting from unconscious anger. In a meta-analysis research that examined the effectiveness of forgiveness therapy on psychological health, the results showed that it reduces depression, anger, hostility, stress, and psychological distress significantly and promotes positive emotions (Akhtar & Barlow, 2018). People who ignore the mistakes of others and forgive them are people who have a positive mood about others and try to look at things in life with positive thinking; this can make them happy. In forgiveness, a deliberate effort is made to overcome

hurtful feelings and thoughts to guarantee one's mental health.

The results showed a significant difference between the experimental and control groups in the variable of marital intimacy; also, forgiveness therapy has increased the mental health of couples seeking divorce. The result of the current research is aligned with the findings of Avanti and Setiawan (2022), Bagherizadeh Moghadam et al. (2021), Agu et al. (2019), Pouryahya et al. (2019), based on the effectiveness of forgiveness therapy in increasing marital intimacy and reducing interpersonal conflicts of couples. The core of the forgiveness model is dealing with emotional wounds caused by interpersonal conflicts. Through this process, annoyed people overcome their anger, disgust, and advocacy of justice and develop a positive attitude toward the offender. Supposing the victim can find meaning in resentment and understand the offender; in that case, this experience helps to reduce hostile attributional biases, establishes empathy with the offender and reduces impulsive reactions to resentment. In this way, it causes marital intimacy in couples. As the research of Besharat Garamaleki et al. (2022) indicated, forgiveness therapy significantly affected marital compatibility and intimacy. It increased the amount of these two variables in the subjects. Also, in the research of Pouryahya et al. (2019), the effect of group forgiveness-based intervention on the marital intimacy of women affected by infidelity was investigated. Findings indicated a significant difference in scores of marital intimacy between the experiment and control groups. Group forgiveness-based intervention improved marital intimacy among the subjects of the intervention group compared to the control group. In other words, group forgiveness-based intervention creates the ground for improvement in marital intimacy through reducing negative emotions, increasing positive emotions, and creating change in the attitude and behavior of the spouse affected by infidelity towards the offender spouse. In the process of forgiveness, awareness plays a vital role. In teaching forgiveness, the attitudes of kindness, compassion, and care are consciously involved, which helps to increase a person's control over emotional reactions, physical arousal caused by worry, and automatic behaviors. In this situation, a person can look at the damage done in troubled relationships with more acceptance and less judgment and avoid abnormal and unconscious patterns of anxious thoughts such as dissatisfaction and resentment. These can lead to increased respect for the spouse and mental health in couples and provide the necessary context for

marital intimacy.

In general, the results of the present study showed that forgiveness therapy effectively increases the subjects' mental health and marital intimacy. The results indicate that if the variables of mental health and marital intimacy are considered through psychotherapy protocols such as forgiveness therapy, it is possible to increase the level of mental health and marital intimacy. Considering that the present research was conducted in Tehran and some of its limited areas, one should be careful in generalizing its results to other statistical population. Therefore, in future research, other areas of Tehran or different cities should be selected as statistical population to increase the generalizability of the results. Also, considering the effectiveness of forgiveness therapy on increasing mental health and marital intimacy, family counselors and people involved in marital counseling are suggested to use the educational protocol of forgiveness therapy to improve the mental health and marital intimacy of couples seeking divorce.

5. Ethical Considerations

Compliance with ethical guidelines

Compliance with ethical guidelines all ethical principles were considered in this article. The participants were informed about the purpose of the research and its implementation stages. They were also assured about the confidentiality of their information and were free to leave the study whenever they wished, and if desired, the research results would be available to them.

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Authors' contributions

All authors have participated in the design, implementation, and writing of all sections of the present study.

Conflicts of interest

No potential conflict of interest was reported by the authors.

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