

Original research

Examining the Effectiveness of a Marital Satisfaction Intervention Protocol on Marital Intimacy (Case Study: Married Female Master's Students of Islamic Azad University, Central Tehran Branch, Tehran city)

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Abstract:

Introduction: This research aimed to investigate the effectiveness of marital satisfaction intervention protocol (constructed by the researcher) on marital intimacy.

Research Method: The research method was a clinical trial study and a pre-test and post-test design with a control group was used. The statistical population of the research consisted of married female students of Islamic Azad University, Central Tehran Branch, who had been married for at least 5 years. The research sample was selected based on Cohen's sample size estimation table and simple random sampling method (15 people in each group). The research tool was the Marital Intimacy Questionnaire of Vandon Brouck and Bertommen. The method of statistical analysis of the data was the univariate covariance test and the t-test of two independent samples.

Findings: The findings indicated that the moderated average of "Intimacy" and "Interest" indices in the post-test was (19.480) and (13.443) in the test group and respectively (14.454) and (7.157) in the control group. Therefore, it can be said that the average index of "intimacy" and "interest" of the post-test in the test group was significantly higher than the average in the control group, and the effectiveness of the intervention protocol was confirmed on these indicators. Regarding the indices of "Couple Agreement", "Honestness" and "Adherence to Commitments", the assumption of homogeneity of the regression slope was not established, so the pre-test scores were subtracted from the post-test scores and the average difference was calculated in the groups using the t-test of two independent samples was compared. between the differences in the indexes of "couple agreement", "honesty" and "adherence to obligations" and the total score of "marital intimacy" of the couples in the test group respectively (4.600), (6.267), (4.733) , (30.267) and the control group (0.133), (0.200), (0.133), (0.400) there was a significant difference and the average difference of agreement between couples in the test group was significantly greater than the average it was in the control group, so the effectiveness of the intervention protocol on these indicators and the total score of marital intimacy was confirmed.

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Conclusion: The results of this research can be used in national family policies and family welfare programs in student counseling centers.

Keywords: intervention protocol, indigenous, the researcher – constructed, marital satisfaction, marital intimacy

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Introduction:

From the beginning of history to the present, the family has been the most basic social institution among all human societies, the foundation of societies and the source of cultures, civilizations and human history. The family is the most effective agent of cultural transmission and the fundamental pillar of society, which is in constant interaction with culture and social factors under different conditions. The family is defined as a microculture that, based on a shared history, internalized assumptions and perceptions of the world, and common goals among its members, has a deep and multi-layered relationship. Individuals in such a system are bound together by powerful, enduring and reciprocal emotional loyalties (1).

The rising divorce rate in Iran, from 1.4% of the total population in 2006 to 3.4% in 2016 (Statistical Center of Iran, 2022), raises concerns about its transformation into a social issue (2). Social problems, as defined by Horton and Wells, are "issues that are considered undesirable by a significant portion of society, that require action to address, and that individuals, organizations, or groups are responsible for resolving" (3). This necessitates comprehensive research to understand the factors contributing to divorce and the elements of successful marriages.

Marital satisfaction, a widely studied concept in the psychology of relationships, represents one of the most frequently analyzed dependent variables in the family domain. Despite its extensive research history, statistics indicate that achieving and maintaining marital satisfaction remains challenging, highlighting the need for specialized expertise and identification of the determinants of successful marriages (4).

Research on global predictors of marital satisfaction suggests that over 90% of the variance lies at the individual level, with various factors (age, religiosity, socioeconomic status, education, collectivism, and gender) correlating with marital satisfaction in a global sample (5).

A review of the research literature on marital satisfaction identifies love, patience, reciprocity, communication, understanding, personal identity, religious orientation, commitment, intimacy, flexible boundaries, shared responsibility, resilience, hopefulness, and homogeneity (congruence) as the most crucial elements of marital success. Additional factors include parental value hierarchies, division of household labor, and number of children (4).

Marital intimacy, a cornerstone of exemplary and ideal living, serves as a hallmark of profound marital satisfaction between spouses. It strengthens the institution of family, establishing a tangible standard across various life dimensions. Marital intimacy plays an indispensable role in fulfilling the needs of partners and

safeguarding their overall well-being. It represents the quality of interaction between individuals, where those involved in the relationship engage in reciprocal behaviors to maintain levels of comfort and closeness (6).

Intimacy stands as a fundamental human need for maintaining mental health and psychological adaptation. Conversely, a lack of intimacy is associated with a range of detrimental outcomes, including depression, low self-esteem, anxiety, and diminished relationship satisfaction (Paige, Mahon, Pargament, & DeMaris¹, 2019). It encompasses the attention and importance family members ascribe to one another, incorporating emotional closeness in the form of love, selflessness, contentment, and satisfaction. Intimacy fosters a sense that the relationship is significant, open, respectful, cohesive, and characterized by mutual commitment (7).

The pervasive transformations shaping families worldwide are also evident in Iranian households. These include urbanization, nuclear families, single-child families, a growing trend of living without marriage, single-parent families, increased female participation in society, a waning patriarchal structure, and an evolving role for children. While these changes can be interpreted as signs of modernity in Iranian families, experts argue that these families often adopt the superficial trappings of modernity while concealing a deeply traditional core. The intricate familial ties that form an extended, non-geographical family, along with the excessive support provided by families to their children, underscore the enduring influence of tradition in Iranian families (8).

The current situation of the Iranian family indicates that many damages have occurred and it has become critical. In the analysis of the causes of anomalies in the family, the following can be identified: changing the criteria of marriage, changing the philosophy of marriage and decreasing the fertility rate, increasing the age of marriage, decreasing the rate of marriage, increasing the rate of celibacy among young people, increasing divorce, decreasing the cultural attractiveness of marriage, decreasing the functions of the family and Kinship in marriage, change and disruption in the educational functions of the family, reduction of parental authority, erosion of trust, solidarity and social capital of the family, weakening of value attitudes towards the sanctity of the family institution. Analyzing the factors of these changes, it can be said that factors such as family planning policies, divorce, and women's employment, increasing the age of marriage, being influenced by feminism, social and cultural beliefs, lifestyle changes and mass communication media play a role in this field (9).

Also, the epidemic of divorce as a social variable has had a positive effect on emotional divorce, and also, the uniformity of life and the effort to have equal rights have had a positive and negative effect on emotional divorce, respectively. In recent years, due to the epidemic of divorce among young people, there has been an epidemic of family separation and weakening of bonds, which has caused emotional and emotional separation between couples (10).

Therefore, intervention in increasing marital satisfaction and marital intimacy, considering its importance in the health and well-being of couples, is more than ever raised as an issue worthy of research and investigation.

Thus, this research seeks to answer the question of whether the marital satisfaction intervention protocol developed by the researcher is effective on the marital intimacy of married female students.

¹ . Padgett, E., Mahoney, A., Pargament, K. I., & DeMaris, A.

Abreu Afonso and colleagues¹ (11) in their study titled "How do couples' relationships endure over time? A model for marital satisfaction" note that divorce appears to be related to low levels of marital satisfaction. However, there is still a lack of a model that can help understand the flexibility and fragility of couples' relationships over the life cycle. This research examines the role of communication patterns, the motivation of oneself and one's partner for marriage, cohesion and flexibility in a couple, and several sociodemographic characteristics (e.g., stage of the family life cycle) that can explain marital satisfaction. The measures of marital satisfaction included communication and conflict management skills, cohesion and flexibility, and motivation. The results of the study showed that the five significant predictors of marital satisfaction were: intrinsic motivation, communication, families with young children, families with teenagers, and professional/educational status.

Dobrowolska and colleagues² (5) in their 2020 study titled "Global Perspectives on Marital Satisfaction," assert that one of the strongest predictors of whether partners remain in their relationship is their reported satisfaction. Marital satisfaction is typically a key predictor of both individual and relational well-being. Despite its importance in predicting relationship longevity, there are relatively few empirical research studies examining predictors of marital satisfaction outside of a Western cultural context. To address this gap in the literature and complete the existing knowledge about global predictors of marital satisfaction, the researchers utilized an open-access database of self-reported assessments of marital satisfaction with data from 7178 participants representing 33 different countries. The results indicated that gender, age, religiosity, economic status, education, and cultural values were related to marital satisfaction across cultures to varying extents. However, marriage duration, number of children, and gross domestic product (GDP) were not found to be predictors of marital satisfaction for the countries represented in this sample. While 96% of the variance in marital satisfaction was attributed to individual factors, only 4% was associated with countries. Thus, individual differences have a larger influence on marital satisfaction compared to country of origin. The findings were discussed in terms of the advantages of conducting studies on large cross-cultural samples.

Weissfeld³ and colleagues (12)'s research, as outlined in their work "Psychology of Marriage," delves into the inputs and outputs of marriage from diverse cultural perspectives, spanning from Russia to Brazil. Their findings underscore the significant influence of cultural factors on both marital practices and spousal satisfaction.

Al-Darmaki⁴ and colleagues (13) in their work highlight explored marital satisfaction as a cultural construct influenced by traditional family values and processes. The researchers developed and validated the Emirati Marital Satisfaction Scale (EMSS) using a sample of married Emirati men and women. The scale (comprising one factor and 30 items) demonstrated high construct validity and internal consistency reliability estimates. Scale validity was supported by positive correlations with marital satisfaction, life satisfaction, and self-esteem. Men reported higher levels of marital satisfaction compared to women. Demographic variables such as religious commitment and place of residence were found to influence marital satisfaction.

Pourmarzi, and colleagues (14) investigated the impact of sex education on marital satisfaction and found that it contributes to a happier and more stable marital life.

¹ . Abreu-Afonso, J.

² . Dobrowolska, M.

³ . Weisfeld, C.C.

⁴ . Al-Darmaki, F.R.

Rastgoo and colleagues (15) conducted a study titled "The Effectiveness of Increasing Sexual Knowledge on Marital Satisfaction of Married Women" and concluded that increased sexual knowledge leads to enhanced marital satisfaction among women. However, this increase was not sustained until the follow-up session.

Pourheidari and colleagues (16) conducted a study titled "The Effect of Life Skills Training on Sexual and Marital Satisfaction in Young Couples" which indicated that life skills training has a significant positive impact on sexual and marital satisfaction.

According to available statistics, out of Iran's 85 million population, 73 million live in "families" (i.e., families formed through marriage). However, divorce has led to an increase in households (groups that live together but do not form a family). Based on calculations, the number of married individuals reached 16.5 million in 2006, 19 million in 2011, and 21 million in 2016. Therefore, the number of married individuals is increasing, and the demographic base of Iran revolves around families (17). Additionally, there is a growing trend of divorce and marital dissatisfaction in Iranian society 177,000 cases in 2019 and approximately 183,000 cases in 2020, representing one divorce for every three marriages, Statistical Center of Iran, 2021 (18).

The Seventh Five-Year Development Plan (19) highlights the urgency and necessity of addressing family issues and their associated elements, namely marital satisfaction and intimacy. This is evident in Clauses 15 (Strengthening the Family Institution and Removing Obstacles to Women's Growth and Flourishing) and 18 (Promoting Social Health and Preventing and Reducing Social Harms, Especially Addiction, Marginalization, Divorce, and Corruption, Based on Valid Indicators and Maximizing Public Participation with Appropriate Timelines).

Despite the existence of some intervention protocols for marital life, such as the Enriching Marital Life Protocol, Cognitive Behavioral Couples Therapy Protocol, and Group Cognitive Behavioral Couples Therapy Protocol by Baucom and Epstein¹ (2002), the effectiveness of a culturally-tailored intervention protocol for Iranian families remains unexplored. This research gap underscores the significance and urgency of developing such a protocol.

Thus, this study seeks to answer the question: Is the researcher-made marital satisfaction intervention protocol effective on marital intimacy among married female students?

Research Method:

To investigate the effectiveness of a marital satisfaction intervention protocol on marital intimacy among married female students at the Islamic Azad University, Central Tehran Branch, a quantitative method was employed. The study utilized a quasi-experimental design (clinical trial) with a pre-test and post-test design and a control group (Table 1).

Table 1: Pretest-Posttest Design with Control Group

Random Selection	Test Group	Pre-test	Independent variable	Post-test
R	Experimental Group	T1	X1	T2
R	Control Group	T2		T1

¹ . Baucom, D. H & Epstein, N.

The population for this study consisted of all married female master's students at the Islamic Azad University, Central Tehran Branch, Tehran, during the academic year 2023-2024, who have been married for at least five years.

To determine the sample size, Cohen's sample size estimation table was used with an alpha level of 0.05, a power of 0.95, and the largest expected effect size. Additionally, a simple random sampling method was employed. All eligible participants were first listed, and then individuals were randomly selected in proportion to the sample size and assigned to either the experimental or control group (each 15 participants).

Data analysis was conducted using SPSS software and two types of analyses:

1. **Descriptive Analysis:** In this stage, the demographic characteristics of the students along with the marital intimacy variable in the pre-test and post-test stages were analyzed and described for the experimental and control groups using univariate analysis based on measures of central tendency, dispersion, and frequency tables.
2. **Inferential Analysis:** In this stage, to compare the marital intimacy variable in the pre-test and post-test stages in the experimental and control groups, one-way ANCOVA and independent-samples t-tests were employed.

The current study employed the 56-item standardized Marital Intimacy Scale developed by Stephan Vandon Brouck & Hanss Bertommen in 1995. This scale comprises five subscales measured on a 5-point Likert scale (ranging from 0 to 4):

1. **Intimacy Subscale:** 14 items (Items: 9-14- 17-18- 23- 30- 37- 39- 41- 46- 49-51- 53)
2. **Agreement Subscale:** 12 items (Items: 2- 6- 12- 19- 21- 27- 31- 32- 35- 36- 42)
3. **Honesty Subscale:** 12 items (Items: 3- 8- 13- 22, 28- 29- 33- 38- 43- 48- 50- 52)
4. **Love and Affection Subscale:** 8 items (Items: 1- 5- 7- 16- 26- 45- 55- 56)
5. **Commitment Subscale:** 10 items (Items: 4- 10- 11- 15- 24- 25- 34- 44- 47- 54)

The validity and reliability of the Marital Intimacy Questionnaire have been established through extensive research. Vandon Brouck & Bertommen (1995), Akbari (2008), and Amiri (2005) employed construct validity, internal consistency of items, and Cronbach's alpha to demonstrate the questionnaire's robust psychometric properties, with alpha values exceeding 0.7.

The Marital Intimacy Questionnaire was administered as a pre-test to both the experimental and control groups. Subsequently, the experimental group received the intervention protocol derived from the researcher's previous qualitative research (Grounded Theory). Following the intervention, the Marital Intimacy Questionnaire was re-administered as a post-test to both groups. The collected data were analyzed using descriptive and inferential statistics. In the inferential analysis, the mean marital satisfaction scores of the experimental and control groups in the pre- and post-test phases were compared using one-way ANOVA and univariate covariance analysis. (The aim was to determine whether there was a significant and larger mean marital intimacy score in the experimental group in the post-test phase, thereby evaluating the effectiveness of the intervention protocol in enhancing marital intimacy).

To answer the research question of whether the developed intervention protocol is effective in enhancing the marital intimacy of married female students at Azad University, Tehran Center Branch, the effectiveness of the intervention protocol on each of the intimacy indicators (including intimacy, spousal agreement, honesty, affection, and commitment) and the overall marital intimacy score was examined using covariance analysis. To employ this method, the underlying assumptions of this statistical method,

including the normality of the variables' scores, equality of regression slopes, linearity of the relationship between the covariate (pre-test) and dependent variables (post-test), and homogeneity of variances, were first examined. The Kolmogorov-Smirnov test values for all research variables (in both the control and experimental groups) were greater than 0.05. Therefore, the normality of these variables is accepted. All underlying assumptions for using covariance analysis were examined for the indicators and the overall marital intimacy score. Finally, the results were obtained for each indicator and the overall marital intimacy score.

Based on the findings of the researcher's previous study, the marital satisfaction intervention protocol consisted of a series of structured sessions (60-90 minutes each) as outlined in Table 2:

Table 2: Marital Satisfaction Intervention Protocol

Session 1	<ul style="list-style-type: none"> • Introduction to the protocol • Introduction of the intervention leader and group members
Module 1: Cognitive-Behavioral Strategies	
Session 2	<ul style="list-style-type: none"> • Marriage literacy • Understanding the purpose of marriage • Life goals and partner selection • Realistic expectations
Session 3	<ul style="list-style-type: none"> • Comprehensive life review • Identifying needs • Recognizing sensitivities and red flags • Understanding strengths and weaknesses of the partner
Module 2: Emotion-Focused Strategies	
Session 4	<ul style="list-style-type: none"> • Enhancing resilience
Session 5	<ul style="list-style-type: none"> • Learning mutual forgiveness
Module 3: Mindfulness Strategies	
Session 6	<ul style="list-style-type: none"> • Increasing psychological flexibility
Session 7	<ul style="list-style-type: none"> • Avoiding mind reading
Module 4: Communication Intervention Strategies	
Session 8	<ul style="list-style-type: none"> • Respect and responsibility • Transparency in relationships and assertive communication without sarcasm or contempt • Managing expectations • Conflict management • Parenting coordination

Session 9	<ul style="list-style-type: none"> • Setting boundaries with parental families • Sex education • Avoiding parenting each other • Effective financial management • Leisure and recreation
Evaluation of Modules	
Session 10	<ul style="list-style-type: none"> • Summary of life skills • Review of feedback from intervention group members

Research Findings:

Participants in both the experimental and control groups were graduate students at the Islamic Azad University, Central Tehran Branch, during the first semester of the academic year 2023-2024. The age characteristics of the two groups are presented in Tables 3.

Table 3: Frequency Distribution of the Variable "Age" in the Experimental the Control Group

Experimental Group		
Age	Frequency	Percentage
25 to 30	8	53.3
31 to 35	4	26.7
35 to 40	3	20
Total	15	100
Control Group		
Age	Frequency	Percentage
25-30	7	46.7
31-35	5	33.3
36-40	3	20
Total	15	100

Based on the provided table, the majority of participants (8 individuals) fall within the "25-30 years" age range, accounting for 53%. This is followed by 4 participants (26%) in the "31-35 years" age range and 3 participants (20%) in the "35-40 years" age range.

As evident in the table above, the majority of the control group participants (7 individuals, representing 46.7%) fall within the age range of 25-30 years. This is followed by 5 participants (33.3%) in the 31-35 age group and 3 participants (20%) in the 35-40 age group.

Prior to conducting the analyses, descriptive statistics for the research variables (including means and standard deviations) are presented in Table 4, disaggregated by the study groups.

Table 4: Descriptive Statistics of Research Variables

Variable		Control Group			Experimental Group		
		Number	Mean	(SD)	Number	Mean	(SD)
Intimacy Index	Post-test	15	15/467	4/764	15	13/067	5/700
	Pre-test	15	15/267	4/978	15	18/667	5/740
Couple Agreement	Post-test	15	11/000	4/629	15	13/200	3/649
	Pre-test	15	11/133	4/549	15	17/800	3/364
Honesty	Post-test	15	11/000	3/964	15	11/733	4/832
	Pre-test	15	11/200	3/895	15	18/000	4/520
Love and Affection	Post-test	15	5/867	2/295	15	10/333	4/981
	Pre-test	15	6/200	2/597	15	14/400	4/763
Commitment	Post-test	15	10/800	3/590	15	13/333	5/728
	Pre-test	15	10/933	4/026	15	18/067	4/605
Total Score of Couple Intimacy	Post-test	15	53/933	16/72 2	15	56/600	18/384
	Pre-test	15	54/333	17/41 4	15	86/867	18/083

Effectiveness of the Intervention Protocol on Intimacy Index

The results of the covariance analysis for this index are presented in Table 5.

Table 5: Results of Covariance Analysis Examining the Effect of Group and Pretest Intimacy Index on the Posttest Dependent Variable

Dependent Variable	Sum of Squares	Degrees of Freedom	Mean Square	F Statistic	Significance Level	Eta Squared	Observed Power
constant	179/638	1	179/638	10/692	0/003	0/284	0/883
Group	179/420	1	179/420	10/679	0/003	0/283	0/883
Pre-test Intimacy Index	354/639	1	354/639	21/108	0.001<	0/439	0/993
Error	453/628	27	16/801	-	-	-	-

As observed in Table 5, the significance value for the group is 0.003, which is smaller than 0.05. Therefore, it can be concluded that the effect of the group on the post-test intimacy index is significant, confirming the effectiveness of the intervention protocol on the intimacy index. Additionally, a further examination of Table 5 reveals that the adjusted mean of the post-test intimacy index in the control group is 14.454, while in the experimental group it is 19.480. This suggests that the mean of the post-test intimacy index in the experimental group is significantly larger than the mean in the control group.

Effectiveness of the Intervention Protocol on Couple Agreement, Honesty and Commitment

For this index, the assumption of homogeneity of regression slopes was not met, and therefore the pre-test scores were subtracted from the post-test scores and the mean of the resulting difference was compared between the groups. This comparison was conducted using a two-sample independent t-test, and the results are presented in Table 6.

Table 6: Two Independent -Sample t-test Results for the Difference in Couple Agreement between Pre-test and Post-test

Variable	Group	Mean	Standard Deviation	t-statistic	p-value
Difference in Couple Agreement between Pre-test and Post-test	Control	0.133	0.915	-3.593	0.004
	Experimental	4.600	0.068		
Difference in Honesty Scores (Pre-test and Post-test)	Control	0.200	0.941	-4.263	0.001<
	Experimental	6.267	5.431		
Difference in Commitment Scores between Pre-test and Post-test	Control	0.133	1.302	-2.933	0.010
	Experimental	4.733	5.934		

As shown in the table above, the p-value for the agreement index is 0.004, which is less than 0.05. Therefore, there is a significant difference between the agreement levels of the control and experimental groups, confirming the effectiveness of the intervention protocol on marital agreement. Furthermore, upon closer examination of Table 6, the mean score of the experimental group is 4.600, which is higher than the mean score of the control group at 0.133. Thus, it can be concluded that the mean difference in agreement is significantly greater in the experimental group compared to the control group.

Similarly, the table reveals a p-value of less than 0.001 for the honesty index, which is also less than 0.05. Consequently, there is a significant difference between the honesty levels of the two groups, supporting the intervention protocol's efficacy in enhancing honesty. Additionally, Table 6 indicates that the mean score of the experimental group is 6.267, exceeding the control group's mean score of 0.200. This suggests that the mean difference in honesty is significantly larger in the experimental group.

The table further demonstrates a p-value of 0.010 for the commitment index, which is smaller than 0.05. Hence, there is a significant difference between the commitment levels of the control and experimental groups, validating the intervention protocol's impact on commitment. Moreover, a closer look at Table 6 shows that the mean score of the experimental group is 4.733, surpassing the control group's mean score of 0.133. Therefore, it can be inferred that the mean difference in commitment is significantly greater in the experimental group.

Effectiveness of the Intervention Protocol on Love and Affection

The results of the covariance analysis for this indicator are presented in Table 7.

Table 7: Results of Covariance Analysis Examining the Effect of Group and Pre-test Love and Affection on the Post-test Dependent Variable

Dependent variable	Sum of Squares	Degrees of Freedom	Mean Squares	F-Statistic	Significance Value	Eta Squared	Observed Power
Constant	246.598	1	246.598	19.892	<0.001	0.424	0/990
Group	218.674	1	218.674	17.64	<0.001	0.395	0/982
Pre-test Love and Affection	77.29	1	77.29	6.235	0.019	0.188	0/673
Error	334.71	27	12.397	-	-	-	-

As shown in above table, the significance value for the group effect (0.001) is less than 0.025 (since the assumption of homogeneity of variance was not met, the error level is considered 0.025). Therefore, it can be concluded that the effect of the group on love and affection in the post-test is significant, and the effectiveness of the designed intervention protocol on love is confirmed. Furthermore, a closer examination of Table 7 reveals that the adjusted mean of post-test love in the control group is 7.157 and in the experimental group is 13.443. Therefore, it can be stated that the mean of post-test love in the experimental group is significantly larger than the mean in the control group

The Effectiveness of the Intervention Protocol on Total Marital Intimacy Score

Due to a violation of the homogeneity of regression slopes assumption for the total marital intimacy scale, a difference score was computed by subtracting pre-test scores from post-test scores. Subsequent group comparisons were conducted on these difference scores. This comparison was conducted using a two Independent Sample t-test, and the results are presented in Table 8.

Table 8: Two Independent Sample t-test Results for the Difference in Pre-test and Post-test Total Intimacy Score

Variable	Group	Mean	Standard Deviation	T-statistic	Significance Value
Difference in Pre-test and Post-test Total Intimacy Score	Control	0.400	4.459	-5.283	0.001<
	Experimental	30.267	21.41		

As shown in above table, the significance value (0.010) is less than 0.05. Therefore, there is a statistically significant difference in commitment between the control and experimental groups, confirming the effectiveness of the intervention protocol on marital intimacy. Furthermore, a closer examination of Table 8 reveals that the mean for the experimental group (30.267) is higher than the mean for the control group (0.400). This suggests that the mean difference in intimacy for the experimental group is significantly larger than the mean difference for the control group.

Discussion and Conclusion:

The findings of this study confirmed the effectiveness of the intervention protocol on the indicators of intimacy, couple agreement, honesty, love and affection, and commitment to obligations. Additionally, the

effectiveness of the intervention protocol on the total score of marital intimacy was also confirmed. These findings are consistent with the results of the research by Abreu-Afonso and colleagues (11), who proposed a model for marital satisfaction and the sustainability of couples' relationships over time. They are also in line with the research by Dobrowolska and colleagues (5), which focused on the "landscape of marital satisfaction" and discussed marital satisfaction based on a large cross-cultural sample. Furthermore, the findings align with the work of Weisfeld and colleagues (12), who in their book "The Psychology of Marriage" examined the inputs and outputs related to marriage from various cultural perspectives (from Russia to Brazil) and demonstrated the impact of culture on marriage and marital satisfaction. Finally, the findings are consistent with the research by Al-Darmaki and colleagues (13), who showed that marriage is a cultural structure that is influenced by many traditional family values and processes.

The selection of a sample of female master's students at the Islamic Azad University, Central Tehran Branch, who have been married for at least 5 years, imposed limitations on the results of the research in the quantitative section in terms of gender, education, and duration of marriage.

The private nature of marital intimacy may have led to inaccurate or dishonest responses from participants, potentially introducing limitations beyond the researcher's control in the quantitative analysis.

Recommendations for Application and Future Research

- **Application in Counseling Centers:** The findings of this study could be utilized in university counseling centers, including those at Islamic Azad University, as part of a skill-building program aimed at enhancing marital satisfaction and premarital counseling.
- **Diversifying Sample Population:** Future research should consider a more diverse sample population in terms of gender, age, and marital duration to broaden the scope of investigation.
- **Exploring Alternative Intervention Strategies:** Future studies could explore alternative or complementary approaches to each of the intervention protocol's action strategies. Potential options include: Cognitive Behavioral Therapy (CBT), Cognitive-Analytic Therapy (CAT), Acceptance and Commitment Therapy (ACT), Behavioral Therapy, Dialectical Behavior Therapy (DBT), Mindfulness-Based Cognitive Therapy (MBCT), Schema Therapy, Compassion-Focused Therapy (CFT), Interpersonal Therapy (IPT), Existential Psychotherapy, Emotion-Focused Therapy (EFT), Client-Centered Therapy, Reality Therapy, Solution-Focused Therapy

Ethical Considerations: In this research, ethical principles were strictly adhered to, including informed consent, privacy protection, and confidentiality. Considering the circumstances and timing of questionnaire completion, participants were emphasized to complete all questions but were free to withdraw from the study at any time. Following the completion of the study, the control group also received the intervention.

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Conflict of Interest: According to the authors' statements, this article has no financial support or conflict of interest.

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