



# The Relationship between Marital Satisfaction and Alexithymia

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## Abstract

**Background and Purpose:** Expressing feelings and emotions not only has an important effect on intimacy growth, but it is also an important factor in distinguishing satisfied couples from the dis-satisfied ones. Thus, the present study aims at investigating the relationship between marital satisfaction and feelings identification and expression among women.

**Methods:** The present study was a descriptive-correlational study with a single-subject design conducted cross-sectionally. In the present study, as many as 325 married women participated (from four health medical centers that had the highest number of referrals). In the present study, ENRICH Marital Satisfaction Scale as well as 20-item Toronto Alexithymia Scale (TAS-20) was used. For determining the significance of the relationship existing between background variables, marital satisfaction, and alexithymia, the researchers applied independent t-test, Analysis of Variance (ANOVA), and the Pearson correlation coefficient were respectively used. **Findings:** With respect to the marital satisfaction and women's alexithymia, the results of one-way analysis of variance indicated no significant statistical difference in women's mean marital satisfaction; ( $F = 1.381, P = 0.249$ ) and ( $F = 1.836, P = 0.140$ ) in terms of different ages, ( $F = 0.481, P = 0.696$ ) and ( $F = 2.309, P = 0.076$ ) in terms of different ages of their spouses, ( $F = 0.423, P = 0.655$ ) in terms of different durations of marital life, ( $F = 0.612, P = 0.608$ ) and ( $F = 1.94, P = 0.122$ ) in terms of different number of children, and ( $F = 0.61, P = 0.603$ ) and ( $F = 0.557, P = 0.644$ ) as for women who lived with either parents or relatives (either theirs or those of their husbands). Independent t-test indicated that there is no significant statistical difference between marital satisfaction ( $t = 0.185, df = 321, \text{ and } p = 0.853$ ) and alexithymia ( $t = 0.776, df = 321, \text{ and } p = 0.444$ ) at different age groups. The results of one-way analysis of variance indicated that there is a significant statistical difference in the mean of marital satisfaction in the groups with different educational levels ( $F = 5.8, P = 0.003$ ) and different economic statuses ( $F = 11.209, P = 0.003$ ). Scheffe's Test indicated that this statistical difference has to do with women who have a higher level of education than that of their husbands. Moreover, Scheffe's Test indicated that this difference has also to do with women enjoying a proper economic status. The results of one-way analysis of variance indicated a significant statistical difference in women's mean alexithymia in groups with different educational levels ( $F = 4.369, P = 0.013$ ) and different economic statuses ( $F = 4.369, P = 0.005$ ). Scheffe's Test indicated that this statistical difference has to do with women who have a higher level of education than that of their husbands. Moreover, Scheffe's Test indicated that this difference has also to do with women enjoying a proper economic status. **Discussion and Conclusion:** The findings of the present study indicate that if alexithymia is solved, one can expect improved marital satisfaction. Moreover, the different educational levels and economic statuses are likely to affect marital satisfaction and alexithymia.

**Keywords:** Alexithymia, Couples' Satisfaction, Marital Life

## 1. Introduction

Marital satisfaction is an important and complicated aspect of a relationship. In fact, one of the most important

aspects of marital system is the satisfaction the couples feel and experience in their relationship (Gorchoff *et al.*, 2008). The studies conducted indicate that variables

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such as communication, mutual trust, mutual interest and understanding, and exchange of thoughts and feelings are closely related to marital satisfaction (Kaslow & Robison, 1996). Expressing feelings and emotions not only has an important effect on intimacy growth, but it is also an important factor in distinguishing satisfied couples from the dissatisfied ones (Dindia & Timmerman, 2003). Expressing feelings and emotions develops the feeling of being supported in individuals (Yum, 2003). Human beings are basically willing to respond feelings and emotions. Some individuals are more skilled in controlling feelings such as anger, jealousy, loneliness, fear, and love. However, emotional skill such as the capability of identifying feelings, expressing emotions and sympathy, and managing emotional challenges are of significant importance to preserve and continue a healthy marital relationship; these skills play a fundamental role in maintaining and developing intimacy (Cordova *et al.*, 2005). In Iran, marital conflicts and divorce are included as the society's critical problems. The researchers have evaluated divorce as one of the severe mental stresses (ranked one in terms of its intensity). Having compared divorce and marriage statistics in Iran, social analysts have expressed serious concerns on the fast and growing increase of divorce. Thousands of cases are being investigated at family courts on marital conflicts and request for divorce (Iran Jot). It is likely that the main reason behind the increased marital conflicts and divorce rates is not reduced identification and expression of feelings and it has to do with the constant effect of social pressures (divorce shame or women's economic dependence on their husbands). However, if social pressures lose their power to main a marriage, the power of emotions existing between the husband and wife will be of significant importance to main a marital life (Tiregi, 2005). Proper relationship calls for cooperation by both parties; men and women are completely different from one another in all critical aspects of life including thoughts, feelings, commitment, image, and reactions. By promoting the individuals' awareness on these differences, the spouses will understand one another much better. Thus, learning new ways of communication is a fundamental issue. In general, men and women have different feelings toward one another, and for this reason, they do not know exactly how to support one another. Researchers have provided predictive evidences indicating that communication skills and capabilities do not affect marital life quality (Gray, 2002). Gottman, Katz, and Hooven have conducted a compre-

hensive study on the couples' emotions. Their study was the only study investigating the relationship between emotional skills and health marital life. The findings of their study indicated that, the individuals' awareness of their emotions is closely related to health indicators such as marital satisfaction (Gottman *et al.*, 1997).

Establishing emotional relationships is one of the main ways that bring the couples closer together resulting in establishing intimacy (Cordova *et al.*, 2005). Since establishing intimacy has a positive effect on the couples' satisfaction throughout their marital life, the investigation and identification of the ways to promote intimacy are of significant importance to secure marital satisfaction. There are two strong predictors for the satisfaction and stability of marital life: the capability of women and their husbands in expressing positive and mutual behaviors toward one another; and the capability of women and their husbands in preventing negative behaviors and avoiding to have negatives responses to the other party's undesirable behaviors (Klink, 2003).

Awareness of behaviors will result in a proper emotional interaction. The couples' emotional awareness needs to be at the same level, so that they will have no problem in establishing emotional relationships throughout their marital life. Otherwise, they will suffer from numerous problems in understanding the emotional relationships, and they will consequently deal with more problems in achieving marital satisfaction. The couples' low level of expressing feelings toward one another will result in reduced marital satisfaction (Yelsma & Marrow, 2003). One of the most important factors in marital satisfaction is alexithymia. Alexithymia is a Greek term meaning the lack of word for expressing one's feelings and moods. Alexithymia is defined by four characteristics including: difficulty describing feelings to other people; difficulty identifying feelings and distinguishing between feelings and the bodily sensations of emotional arousal; constricted image processes, as evidenced by a scarcity of fantasies; and a stimulus-bound, externally oriented cognitive style (De Vries *et al.*, 2012). The studies conducted in this regard all indicate the relationship between couples' satisfaction and Alexithymia (Cordova *et al.*, 2005; Besharat *et al.*, 2014; Frye-Cox & Hesse, 2013; Humphreys *et al.*, 2009; de Jong Gierveld *et al.*, 2009).

Karukivi *et al.*, (2014) conducted a study to investigate the relationship between alexithymia and marital satisfaction or attachment to the partner on 102 Finnish couples. The findings of their study indicated that alexithymia has

a close and significant relationship with marital satisfaction and close relations. Moreover, Khosravi *et al.*, (2015) conducted a study to investigate the relationship between marital dissatisfaction with attachment style and alexithymia. In their study, as many as 400 parents of female college students in Tehran participated. The findings of their study indicated that there is negative significant relationship between safe style and marital dissatisfaction. Moreover, there is a significant relationship between marital dissatisfaction with the variables of unsafe style, contradictory style, and difficulty in identifying external feelings and external thoughts. However, there was no significant relationship between marital dissatisfaction and difficulty in expressing feelings. Khajeh and Moghadam (2017) conducted a study to determine the relationship between alexithymia and interpersonal problems with marital satisfaction in married female nurses of the public hospitals in Kerman. As many as 234 married female nurses participated in their study. The studies indicated that there was a negative significant relationship between alexithymia and interpersonal problems with marital satisfaction. The findings of the simultaneous regression analysis indicated that alexithymia and interpersonal problems could explain 24% of the marital satisfaction's variance. Miri and Najafi (2017) attempted to investigate the role of intimacy, loneliness, and alexithymia in predicting marital satisfaction in 375 students of Qazvin Islamic Azad University. The findings of their study indicated that there was a significant relationship between intimacy and marital satisfaction. There was also a significant relationship between loneliness, loneliness with one's family, and emotional loneliness with marital satisfaction. Moreover, no significant relationship was found between alexithymia and its components with marital satisfaction. Hesse *et al.*, (2014) conducted a study to investigate the relationship between alexithymia and marital maintenance and marital quality in 143 Tel Avivian couples. The findings of their study indicated that marital maintenance could significantly reduce the negative effects of alexithymia in romantic relationships. Guvensel *et al.*, (2017) conducted a study to investigate the relationship between gender role conflicts, alexithymia, men's friendship disorders with other men, and psychological well-being in 216 American men. The findings of their study indicated that the high level of alexithymia is an important factor in predicting men's psychological health.

The researcher's emotional skills have the capability of enriching an adaptive marriage with desirable and

constant satisfaction. Thus, the emotional skills of the couples need to be promoted, and in this way, their likely cooperation is increased for achieving more satisfaction and solving their problems. Nowadays, the families are facing endless failures threatening their current structure and imposing pressure on their current resources. As the problems of the families get more complicated, the society merely pretends to put emphasis on the significance of the family. When the families are dealing with too much pressure and fail to effectively face the problems, the society merely attempts to facilitate divorce process and the couples' separation (Tiregi, 2005). The quality of relationship is closely related to marital satisfaction (Bernstein & Bernstein, 1998). Working on the couples' feelings resulted in improved quality of relationship as well as increased safety of their relationships with the others. A healthy relationship is referred to a relationship in which both parties are allowed to talk about their requests and demands (Yelsma & Marrow, 2003). Acquiring and maintaining behavioral skills are significantly related to the awareness of individuals' psychological aspects (M M. , 2001).

Thus, in the present study, the researcher attempted to investigate the relationship between marital satisfactions with alexithymia in a group of women.

## 2. Methods

The present study was a descriptive-correlational study with a single-subject design conducted cross-sectionally. In the present study, two variables i.e., marital satisfaction and alexithymia were studied in women referring to the health centers of western Tehran. The inclusion criteria of the present study are having the least literacy level (being able to read and write), being healthy (not suffering from a chronic physical disease or the history of suffering from mental disorders and taking the related drugs), not having addiction to drugs, having at least one child, and not getting married more than once. In terms of the exclusion criteria of the present study, if the family had experience a crisis over the last six months, the individual was excluded. As the study was a correlational one, the following formula was applied for determining the sample size:

$$d = \frac{1}{2} l_n \frac{1+r}{1-r} \quad n = \frac{(z_{1-\frac{\alpha}{2}} + z_{1-\beta})^2}{d^2} + 3$$

At the confidence level of 95% and the test power of 80% and supposing that relationship between marital satisfaction and alexithymia was at least  $\rho=0.3$ , the correlation hypothesis of these two variables are regarded to be significant. The samples size was estimated to be  $n=325$  through applying the abovementioned formula. The sampling of the present study was conducted by using a non-probability continuous sampling technique. Thus, four health centers were selected. These centers were the most frequently visited centers. The centers include Kan, Fazel, Tehransar, and Valiasr health centers. The sampling was lasted for 30 days.

In the present study, two tools were used: ENRICH Marital Satisfaction Scale and the *Twenty-item Toronto Alexithymia Scale (TAS-20)*. Moreover, the questions on the demographic characteristics were provided by the researcher.

### 2.1. ENRICH Scale:

*ENRICH Scale has been used as used as a valid research too for determining marital satisfaction in numerous studies (Fereshteh, 1996). ENRICH was first prepared by Olson et al in 1989 (McCubbin & McCubbin, 1989). ENRICH is a tool including 115 questions and 12 scales (Aliakbar, 1994). Moreover, the abridged form of the questionnaire has been prepared by the Iranian researchers including Mirkheshti (Yelsma & Marrow, 2003) and Soleimani (Aliakbar, 1994). The correlation of each of the questions has been evaluated in comparison to the entire questionnaire, and the findings indicate that these 47 questions enjoy a relatively high correlation. In the present study, the 47-question version was used for various reasons: the speed and facility of conducting the questionnaire, avoiding tiredness and resistance, creating the necessary motivation to cooperate, and acquiring psychometric results similar to those of the original version. In this 47-question version, the responses to the question included 5 choices (strongly agree, agree, have no idea, disagree, and strongly disagree). Thus, the highest score a subject could acquire was 235 (Summers et al., 1998).*

### 2.2. TAS-20 Scale:

Over the recent years, alexithymia has been accepted as a personality factor that plays a significant role in psychosomatic diseases. However, given the lack of a powerful

tool to conduct a precise measurement of this factor, the studies investigating alexithymia have commonly faced numerous problems (Taylor & Bagby, 2000). Taylor and Bagby (2000) have attempted to revise the original questionnaire. At the end, they have created *20-item Toronto Alexithymia Scale based on three factors by using factor analysis method*. The three factors of this scale include:

1. **Difficulty Identifying Feeling:** This part of the scale includes 7 items including 1, 3, 6, 7, 9, 13, 14. This part attempts to measure the subject's ability to identify his feeling and distinguishing these feelings from the bodily senses.
2. **Difficulty Describing Feelings:** This part of the scale includes 5 items including 2, 4, 11, 12, 17. This part of the scale attempts to measure the subject's ability to describe feelings, and whether he is able to describe his feeling through appropriate words or not.
3. **Externally-Oriented Thinking:** This part of the scale includes 8 items including 5, 8, 10, 15, 16, 18, 19, 20. This part of the scale attempts to measure the subject's introspection and his getting involved with his inner feelings and those of the others.

TAS-20 scale has been conducted in the studies conducted by Cordova et al., and Mohammad (Saied, 2001). Since the questionnaire was conducted for the first time in our country, the researcher (Mohammad) first attempted to translate the abovementioned scale under a supervision of his supervisor. Then, the test was conducted on a 10-participant group selected from among the university students to determine the understandability and accuracy of the translation as well as removing the shortcomings with the scale. The students were interviewed about the readability and validity of the scale, and the shortcomings were removed in this way.

Answering the questions were done by providing 5 choices (strongly agree, agree, have no idea, disagree, and strongly disagree). The subject's score ranged from 12 to 60; higher scores indicate a higher alexithymia (difficulty identifying and expressing feelings). In the study conducted by Mahdavian (Fatemeh, 1997), the reliability of ENRICH scale was measured to be 0.94. In the study conducted by Mirkheshti (Fereshteh, 1996) on a 60-participant group, the validity of this version was confirmed by a group of counselling experts, and its reliability was measured to be 0.92. In another study

conducted by Soleimanian (Aliakbar, 1994), the scale was translated and its content validity was confirmed by psychology experts. The scale was then conducted on a sample 11-participant group, and its reliability was measured to be (0.93).

TAS-20 scale enjoys an acceptable level of validity and reliability. Its internal consistency has been reported to be COM = 0.75, DIF = 0.78, 0.81 and EOT = 0.66 based on Cronbach's alpha, and its reliability has been reported to be 0.77 by using retest method (Brackett et al., 2006). Given the validity and reliability of both scales (ENRICH and TAS-20) have been previously confirmed, it was not necessary to reconfirm them in the present study. Moreover, Sadeghi (2001) and Tirgari (2005) have referred to the validity confirmation of ENRICH 47-item scale in their studies.

Having acquired a letter of introduction from the officials of the School of Nursing and Midwifery at Iran University of Medical Sciences, the researcher referred to the health centers. After making the coordination needed with the officials of the health centers, the interviewers were selected from the personnel of the health centers (the interviewers were Bachelors in midwifery and were willing to conduct the interview). The researcher provided the interviewers with the necessary information on the way of completing the questionnaires as well as selecting the samples. According to the predetermined schedule, the interviewers attended the research environment. Having accessed the samples, the interviewers introduced themselves and provided brief useful explanation on the aims of the research. After acquiring written letter of consent from the samples, the samples were provided with the questionnaire, a clipboard, and a pen to answer the questions. Completing every questionnaire lasted for 15 minutes. The completed questionnaires were collected on the same day. All the samples of the questionnaire were made sure that the data obtained would be kept confidential, and they will be merely used for statistical studies. The samples were not asked to write their names on the questionnaires. At the end, after 30 days, the necessary data were collected. Moreover, the officials of the health centers were acknowledged and they were made sure that they would be provided with the findings of the research if they were willing to receive them.

For analyzing the data collected, descriptive and inferential statistics were used. T-test and analysis of variance were used for determining the significance of the relationship existing between the background variables

with marital satisfaction and alexithymia. Moreover, for determining the significance of the relationship existing between marital satisfaction and alexithymia, Pearson correlation coefficient was applied.

### 3. Findings

The findings of table 1 indicate that the highest frequency was in the age group of less than 30 years old (69%). The mean age of the samples was 27.96 years. The highest frequency of the participants' husbands was in the age group of 30-39 years (49.22), and the mean age of the samples' husbands was 33.24. In terms of age, 89.16% of the women were younger than their husbands, 7.75% were the same age as their husbands, and 3.09% of them were older than their husbands. In terms of marital life duration, 69.96% of them had spent more than 10 years of their marital life, 18.89% had spent 10-15 years of their marital life, and 11.15 had lived with their husbands for more than 15 years. The mean marital life duration was 8.05 years.

**Table 1.** The age distribution of the women referring to the health centers of western Tehran

Age (year)	Number	Percentage
<30	222	69
30-39	78	24
40-49	13	4
>49	10	3
Total	323	100
Min=18 =27.96 Max=56 SD=6.91		

In terms of educational level, most of the samples had high school diploma. The most frequent educational level of the samples' husbands was junior high school diploma and high school diploma (38.8%). As for most of the samples (45.5%), the educational level of the spouses was the same. As many as 31.4% of the women had a lower educational level than that of their husbands, and as many as 22.5% of the women had a higher educational level than that of their husbands.

More than half of the samples studied had one child. More than two-thirds of the samples studied (70.58%) lived independently. As many as 20.43% of the participants lived with their husbands' parents or their relatives.

As many as 3.72% of the samples lived with their own parents or relatives, and 5.27% of the samples lived with their parents or relatives and their husbands' parents or relatives.

More than half of the samples studied (59.46%) had an average economic status. As many as 32.50% of the samples had a proper economic status, 4.02% had an excellent economic status, and 4.02% had a poor economic status.

As for marital satisfaction, the results of one-way analysis of variance indicated that women's mean marital satisfaction was not significantly different in terms of their own different ages ( $F = 1.381, P = 0.249$ ). The findings of one-way analysis of variance indicated that women's mean marital satisfaction was not significantly different in terms of different ages of their husbands ( $F = 0.481, P = 0.696$ ). Independent T-test findings indicated that women's mean marital satisfaction was not significantly different at different age groups ( $t = 0.185, df = 321, p = 0.853$ ).

The findings of one-way analysis of variance indicated that women's mean marital satisfaction was not significantly different in terms of different durations of marital life ( $F = 0.423, P = 0.655$ ).

The results of one-way analysis of variance indicated that women's mean marital satisfaction was not significantly

cantly different in terms of different number of children ( $F = 1.94, P = 0.122$ ).

The results of one-way analysis of variance indicated that women's mean marital satisfaction was not significantly different in women who lived with parents or relatives (their own parents and relatives, those of their husbands, or both) ( $F = 0.557, P = 0.644$ ).

The results of one-way analysis of variance in Table 2 indicated that the mean marital satisfaction was significantly different in different groups with different educational levels. The findings of Scheffe's test indicated that this statistical difference has to do with women that had a higher educational level than that of their husbands in comparison to women having the same educational level as their husbands.

The results of one-way analysis of variance in Table 3 indicated that the mean marital satisfaction was significantly different in different groups with different economic statuses. The findings of Scheffe's test indicated that this statistical difference has to do with women who enjoy a proper economic status, in comparison with those having an average or a proper economic status.

As for women's alexithymia, the results of one-way analysis of variance indicated that women's mean alexithymia was not significantly different at different ages ( $F = 1.836, P = 0.140$ ). The results of one-way analysis of

**Table 2.** The frequency distribution of marital life satisfaction in the women referring to the health centers of western Tehran in terms of different educational levels

Different educational level	Women's educational level was higher than that of their husbands		Women's educational level was the same as that of their husbands		Women's educational level was lower than that of their husbands		total	
	Frequency	percentage	frequency	percentage	frequency	percentage	frequency	percentage
Marital satisfaction								
Lack of satisfaction	9	12.34	26	17.56	24	23.52	59	18.28
Relative satisfaction	52	71.23	86	58.10	69	6.64	207	64.08
Great satisfaction	12	16.43	36	24.53	9	8.84	57	17.64
Total	73	100	148	100	102	100	323	100
±SD	167.42±21.53		171.81±25.67		161.31±23.01		167.50±24.32	
Results of xtest	P=0.003		F=5.800					

**Table 3.** The frequency distribution of marital life satisfaction in the women referring to the health centers of western Tehran in terms of economic status

Economic status	Excellent		Proper		Average		Poor		Total	
	Frequency	percentage	frequency	percentage	frequency	percentage	frequency	Percentage	frequency	percentage
Lack of satisfaction	1	7.69	9	8.57	41	21.35	8	61.54	59	18.28
Relative satisfaction	10	76.93	71	67.63	121	63.02	5	38.46	207	64.08
Great satisfaction	2	15.38	25	23.80	30	15.63	-	-	57	17.64
Total	13	100	105	100	192	100	13	100	323	100
±SD	167.69±23.16		175.97±20.25		164.5±24.41		141.07±27.92		167.50±24.32	
Results of xtest	P = 0.005		F = 11.209							

variance indicated that women's mean alexithymia was not significantly different in terms of husbands' different ages ( $F = 2.309$ ,  $P = 0.076$ ). After merging the two groups (the group in which women were older than men, and the group in which they were the same age), independent T-test was conducted. The findings indicated that women's alexithymia was not significantly different in different groups of women referring to the centers ( $t = 0.776$ ,  $df = 321$ , and  $p = 0.444$ ). The results of one-way analysis of

variance indicated that women's mean alexithymia was not significantly different in terms of different durations of marital life ( $F = 0.005$ ,  $P = 0.946$ ).

The results of one-way analysis of variance indicated that women's mean alexithymia was not significantly different in terms of different number of children ( $F = 0.612$ ,  $P = 0.608$ ). The results of one-way analysis of variance indicated that women's mean alexithymia was not significantly different in terms of living with parents or relatives

**Table 4.** The frequency distribution of alexithymia in women referred to the health centers of western Tehran in terms of education level

Educational level	Woman's educational level was higher than that of the man		Woman's educational level was the same as that of the man		Woman's educational level was lower than that of the man		Total	
	Frequency	percentage	frequency	Percentage	frequency	percentage	frequency	percentage
Low level of alexithymia	35	47.94	88	59.45	45	44.11	168	52.01
High level of alexithymia	38	52.06	60	40.55	57	55.89	155	47.99
Total	73	100	148	100	102	100	323	100
±SD	36.72±7.58		33.79±10.35		37.02±9.05		35.47±9.53	
Results of Test	P=0.013		F=4.369					

**Table 5.** The frequency distribution of alexithymia in the women referring to the health centers of western Tehran in terms of economic status

Economic status	Excellent		Proper		Average		Poor		Total	
	Frequency	Percentage	frequency	percentage	frequency	percentage	frequency	Percentage	frequency	percentage
Low level of alexithymia	5	38.46	66	52.85	93	48.43	4	30.76	168	52.01
High level of alexithymia	8	61.54	39	47.15	99	51.57	9	69.24	155	47.99
Total	13	100	105	100	192	100	13	100	323	100
±SD	39.07±11.94		32.99±9.71		36.32±9.10		39.53±7.66		35.47±9.53	
Results of X test	P=0.005		F=4.429							

**Table 6.** The frequency distribution of marital satisfaction in the women referring to the health centers of western Tehran in terms of alexithymia

Alexithymia level	Low level of alexithymia		High level of alexithymia		total	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Lack of satisfaction	15	8.92	45	28.66	60	18.46
Relative satisfaction	108	64.28	100	63.69	208	64
Great satisfaction	45	26.80	12	7.65	57	17.54
Total	168	100	157	100	325	100
P=0	r=-0.429					

(their own parent or relatives, those of their husbands, or both) (F = 0.61, P = 0.603).

The results of one-way analysis of variance in Table 4 indicated that the mean alexithymia was significantly different in different groups with different educational levels. The findings of Scheffe’s test indicated that this statistical difference has to do with women who enjoy a higher educational level than that of their husbands in comparison with those having the same educational level as their husbands.

The results of one-way analysis of variance in table 5 indicated that the mean alexithymia was significantly different in different groups with different economic statuses. The findings of Scheffe’s test indicated that this statistical difference has to do with women who enjoy a proper economic status those who had an average economic status.

In table four, Pearson correlation coefficient (r = -0.429) was measured by using the marital satisfaction and alexithymia scores, and it was statistically significant

(P = 0). Thus, there is a reverse correlation between marital satisfaction and alexithymia.

## 4. Discussion

The present study was conducted to investigate the relationship between marital satisfaction and alexithymia in women. The findings indicated that women’s marital satisfaction was not the same in different groups of women with different educational level. Thus, marital status had a significant statistical relationship with the couples’ educational levels (P = 0.003). The mean marital satisfaction was higher in cases where the woman and her husband were both at the same educational level. Angusamy *et al.*, (2017) concluded that the couples’ educational level has a significant effect on marital satisfaction, and they indicated that higher educational level brings about an increased level of marital satisfaction. Willis and Weiss (1997) found out that couples enjoying the same educational level are more likely to experience a higher level

of stability in their life, and they are less willing to get divorced. Thus, their findings confirm the findings of the present study. However, in his study, Johnson (1999) concluded that instability in life and lack of marital satisfaction will increase in cases where women had a higher level of education than that of their husbands. Moreover, the studies indicated that there is no significant difference between boys and girls in terms of this important factor (Shahhosseini *et al.*, 2014). Unlike boys, girls have reported more willingness to choose a spouse with a higher educational level (Foroudastan *et al.*, 2009).

The mean marital satisfaction was less in women with poor economic status than other groups, and there was a significant statistical difference ( $P = 0$ ). In cases where women had a poor economic status, marital satisfaction reduced to a significant level. Moreover, women with average economic status had a lower level of marital satisfaction than that of women with proper economic status. According to the theory of economic support, if men's age and educational level are higher than their spouses, marital satisfaction increases; as the educational level increases, a much more appropriate job and more income are both guaranteed. When financial security is guaranteed, a higher level of support is provided for the family members, and the marital satisfaction increases in this way (Morris & Carter, 1999; Tavassoli & Taheri, 2014).

There was a significant statistical relationship between women's alexithymia and educational level ( $P = 0.013$ ). In cases where the spouses had the same educational level, the least alexithymia was observed. However, in cases where women's educational level was lower than that of their spouses, a high level of alexithymia was observed. Although men and women's IQ is much more important than their educational levels in marital happiness, the studies indicate that educational degrees are of great importance in securing marital happiness as well. The experiences achieved by the individual in an academic environment can be used in living with the others; they can be used in both exchanging emotions and adapting one's marriage. One important variable in this relationship is that, when the educational levels are less similar, there will be a higher chance of achieving success. Different educational levels will result in a happy marriage. Thus, when there is a lack of similarity, the man's educational level had better be higher than that of his spouse (Angusamy & Kuppusamy, 2017; Jain, 2014; Hossein, 1379). However, in cases where the woman's educational level is higher than that of her husband, the couples' identification and

exchange of emotions will reduce, and this will result in the reduction of marital health (Heaton *et al.*, 2001).

There was a significant statistical relationship between alexithymia and economic status ( $P = 0.005$ ). Women with proper economic status had the lowest level of alexithymia. Despite these findings, in their study, Cordova *et al.* failed to find a significant relationship between the family's economic status and alexithymia (Cordova *et al.*, 2005). The researchers believe that women will be aware of their emotional needs when their physical needs are met. This process is natural, normal, and predictable. However, men find the answer to all problems in money, and they ignore that money cannot meet all of the emotional needs of women (Gray, 2002). Money has often been the main reason of arguments between men and women. If the woman has to work outside to provide the economic welfare of the family, they are likely to seek quite different goals. When both men and women work outside, the following consequences are unavoidable; they have less time to spend with one another, their preoccupations will increase, their lifestyles will lead to different ways, the family's stress will increase, the couples will become farther from one another, and their emotional distance will increase (Taban *et al.*, 2017; Joseph & Inbanathan, 2016).

According to the findings, there was a significant inverse relationship between marital status and alexithymia ( $P = 0$ , and  $r = -0.429$ ). Thus, by identifying and describing one's feelings, marital satisfaction will increase as well. The findings of numerous studies indicate that some individuals are more successful in adapting themselves to life. According to these studies, the main reason behind this high level of adaptation is as follows: they are able to understand and evaluate their emotions more properly; they are aware of when and how to express their feelings and they can manage to regulate their moods in some way (Salovey *et al.*, 2000; Hollist & Miller, 2005). In confirming the finding of the present study, in their study, Johnson *et al.*, (2005) conducted a study on 172 couples. They concluded that problem-solving skills and affective expressions would result in improved marital satisfaction. There was a close relationship between affective expressions and problem-solving skills. In cases where affective expression is at a low level, and there is no problem solving skill, satisfactory relationship will quickly vanish. Moreover, in cases where there is a high level of affective expression (and there is no problem-solving skill), satisfactory relationship will not vanish; in these cases affective expression will compensate the lack of problem-solving

skills. Yelsma and Marrow (2003) conducted a study on 66 couples that had difficulties with emotional expressiveness and their marital satisfaction. They concluded that, having difficulties with emotional expressiveness (in both men and women) would result in reduced marital satisfaction in the couples. Thus, if the husband has difficulties with expressing and describing different aspects of his emotions, and her spouse has difficulties with identifying her feelings, marital satisfaction will reduce. In fact, reduced emotional expressiveness toward one's spouse will bring about a negative effect on marital satisfaction. The findings of their study confirm those of the present study. Given the limitations of the present study and since it was conducted only on women, it is recommended to conduct a similar study on men and compare the findings obtained. Moreover, the present study was conducted over a specific time span, and it failed to investigate the possible changes over time. It is recommended to conduct a similar study longitudinally.

## 5. Conclusion

The findings of the present study indicate that both marital satisfaction and alexithymia are affected by two factors of economic status and educational level. Moreover, the present study indicated that marital satisfaction and alexithymia are not related to factors such as couples' age and their age difference, duration of marital life, number of children, and lifestyle. The findings of the present study can help both counsellors and clients promote their image of marriage and identify the related factors that are likely to affect the couples' marital satisfaction. Thus, the counsellors can apply the evaluation of different effects of mediating variables on marital satisfaction and alexithymia.

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