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# Relationship of Controlling Negative Thoughts and Parenting Stress with Marital Satisfaction in Parents of Children with Learning Disability: Mediated by Sexual Satisfaction

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## Abstract

**Introduction:** Lack of satisfying sexual relations weakens marital relationships. The present study aimed to investigate the relationship between controlling negative thoughts and parenting stress with the marital satisfaction of parents of children with learning disabilities as influenced by the mediating role of sexual satisfaction.

**Methods:** The statistical population of this descriptive correlational study covered all parents of children with learning disabilities in Tehran in 2020, 212 of whom were selected as the statistical sample using convenience sampling based on the inclusion and exclusion criteria. The research instruments included the Marital Satisfaction Scale, the Thought Control Questionnaire, the Parenting Stress Questionnaire, and the Sexual Satisfaction Questionnaire. Descriptive statistics including mean and standard deviation as well as Pearson's correlation coefficient were used for data analysis. The proposed model was evaluated using structural equation modeling (SEM) via SPSS-25 and AMOS-25 software.

**Results:** The results showed that the correlations between marital satisfaction and controlling negative thoughts (r = 0.33), parenting stress (r = -0.40), and sexual satisfaction (r = 0.049) were significant (P < 0.01). In addition, the correlations between sexual satisfaction and controlling negative thoughts (r = 0.60) and parenting stress (r = -0.39) were also significant (P < 0.01). The relationship between the indirect path of controlling negative thoughts with marital satisfaction via the mediating role of sexual satisfaction was significant ( $\beta$  = 0.32, P = 0.010). Moreover, sexual satisfaction had a mediating role in the relationships between parenting stress and marital satisfaction in the parents ( $\beta$  = -0.08, P = 0.044). The results indicated a good fit of the model (IFI = 0.98, CFI = 0.96, RMSEA = 0.071).

**Conclusions:** The results suggest that the proposed model had a good fit and could be considered an important step toward identifying the factors influencing the marital satisfaction of parents having children with learning disabilities.

# INTRODUCTION

Learning disability is a common childhood developmental disorder that causes children and adults to see, hear, and understand differently than others [1]. A learning disorder is a disorder in which the academic performance of students is lower than expected, according to their age and IQ, or based on standard tests of reading, writing, and calculation. Approximately 5-15% of children have a learning disorder, and this disorder is more common in boys than in girls [2]. It is difficult for parents to face the possibility that their child may have a learning disability [3].

Marital satisfaction is the result of a marital agreement that describes the proper relationship between husband and wife. Marital satisfaction is achieved through mutual interest, caring for one other, mutual acceptance and understanding, and meeting each other's needs [4]. Arguably, characteristics of children with learning disabilities, such as learning problems, failure to properly respond to environmental demands and adapt to the environment, and the exorbitant costs of raising and educating them, all negatively affect the marital satisfaction of their parents [5, 6]. Meanwhile, parents of children with learning disabilities may experience high levels of anger and shame, blame themselves or others, and feel depressed and tense [7]. All these factors together affect marital satisfaction and also the child's relationship with their parents [8]. Previous studies have shown that special needs children affect their

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parents' marital relationship [9-11]. Moreover, there are various factors affecting the marital satisfaction of mothers of children with learning disabilities, including controlling negative thoughts. These are actions related to how a person copes with stressful situations and/or unfortunate events [12]. Generally, the ability to create and maintain a satisfactory relationship requires identifying and expressing thoughts and emotions and understanding and accepting the partner's characteristics [13]. Due to their inherent importance to routine life, disruption and confusion in thoughts and their regulation will have pathological consequences [14, 15].

Meanwhile, failure to control negative thoughts in parents increases their parenting stress. Stress is defined as physical, cognitive, or emotional tension, and parenting stress is a type of stress experienced by parents and caused by the necessities of parenting [14, 16]. Research shows that although parenting is stressful for both parents, mothers experience more parental stress than fathers [17-19]. There are other conditions imposed on parents alongside raising children that add to their challenges. Therefore, the child's disability is a condition that adds to the problems of parents, and consequently to parenting stress [20, 21].

Sexual satisfaction is the level of satisfaction with sexual relations and the person's ability to create mutual pleasure. Lack of satisfying sexual relations weakens marital relationships. Sexual pleasure is among the most important pleasures that people enjoy throughout their lives, which makes the hardships and problems faced by couples bearable [22, 23]. Researchers believe that marital satisfaction always depends on sexual satisfaction. In addition, sexual satisfaction is the most important component of marital satisfaction and an effective factor in reducing stress and negative thoughts in parents of children with learning disabilities [24]. Parents of children with learning disability experience high levels of tension and stress and different negative emotions [25].

Thus, it can be acknowledged that parents of children with learning disabilities have described and reported extensive negative consequences of problems with their psychological well-being since the diagnosis of their child's disorder. Many have experienced recurring feelings of intense sadness and feelings of despair and hopelessness, which reduce their marital satisfaction. Given the assortment of problems faced by parents of children with learning disabilities, it is necessary to make plans in order to solve their problems and to conduct studies such as the present research. Accordingly, the present study aimed to investigate the relationship between controlling negative thoughts and parenting stress with the marital satisfaction of parents of children

with learning disabilities as influenced by the mediating role of sexual satisfaction.

#### **METHODS**

The statistical population of this descriptivecorrelational study that used structural equation modeling covered all parents of children with learning disabilities visiting learning disability clinics in Tehran in 2020. The main learning disorder in children was difficulty in reading, writing, and calculations. The consent of the authorities in learning disorder clinics was obtained followed by coordination with parents. Since SEM calculates the number of exogenous variables, the number of error variances, and the number of parameters based on the number of direct paths, according to Kline's suggestion (1998), at least 10 participants are required for testing the model for each calculated parameter. However, this study considers about 25 participants for each parameter to have a sufficiently large sample for testing the model; Thus, 230 parents (140 mothers and 90 fathers) were selected and provided with the questionnaires. The inclusion criteria were living with a spouse, having no history of diseases related to sexual disorder, having no history of drug use (antidepressants and hormones), having finished at least middle school, and having submitted a consent form for participation in the research; whereas the exclusion criteria were failure to answer all the questions and unwillingness to continue participation in the study. Then, the questionnaires were collected, incomplete questionnaires were discarded, and the data of 212 parents (132 mothers and 80 fathers) were analyzed. Finally, the participants and the officials of learning disability clinics were thanked for their cooperation.

## Research Instrument

Demographic questionnaires: A researcher-made questionnaire was used to collect the demographic data of the participants. The questions of this questionnaire were prepared to collect information related to age, education, number of children, and duration of marriage. Marital Satisfaction Scale: With 4 subscales of 35 items each, this questionnaire he used for measuring satisfaction. communication, and conflict resolution. The ENRICH Marital Satisfaction Scale is a general measure of marital relationships including ideal distortion, marital satisfaction, personality issues, communication, conflict resolution, financial management, recreational activities, sex, family and friends, egalitarian roles of men and women, religious orientation, marital cohesion, and marital changes. Each item in this questionnaire is scored based on five options ranging from "completely agree to completely disagree" with scores of 1-5. A score of 1 is given to the option "I completely agree"

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and a score of 5 to the option "I completely disagree" [26]. The reliability of the Persian version of the Marital Satisfaction Scale was obtained as 0.74 using Cronbach's alpha [27]. The Thought Control Questionnaire: This questionnaire by Wells and Davis [28] has 30 items in 5 subscales for measuring individual differences in controlling intrusive thoughts. Thought control strategies include distraction. anxiety, social strategies, punishment, and re-evaluation of thinking. Each component has 6 items with 4 options for the respondent to choose from (almost always, most of the time, sometimes, and never) from 4 to 1. The lower and upper score limits of this questionnaire are 30 and 120, respectively. The reliability of the Persian version of the Thought Control Ouestionnaire was obtained as 0.73 using Cronbach's [29]. Parenting alpha Stress Questionnaire: Abidin [30] designed questionnaire with 36 items and the following components: Compromise, the boundary of the child, temperament, attachment, receptivity, greed, reinforcement, negligence/exaggeration, relations with spouse, the boundary of parents, depression, sense of competence, role limitations, parental health, social isolation, and tension in life. The scoring is based on a Likert scale from 1 to 5 (completely agree to completely disagree). The reliability of the Persian version of the Parenting Stress Questionnaire was obtained as 0.80 using Cronbach's alpha [18].

Sexual Satisfaction Questionnaire: Developed by Hudson et al. [31], this questionnaire assesses the levels of satisfaction of spouses with 25 questions (for example, I feel that my sex life lacks quality or my partner cannot sexually satisfy me). The participant's response to each item is scored on a 5-point scale from 1 to 5 (1: always, 2: most of the time, 3: sometimes, 4: rarely, 5: never) with respective minimum and maximum scores of 25 and 125. Higher scores represent higher sexual satisfaction. The reliability of the Persian version of the Sexual Satisfaction Questionnaire was obtained as 0.93 using Cronbach's alpha [32].

## **Statistical Analysis**

Data were analyzed by descriptive and inferential statistics such as mean, standard deviation, and Pearson correlation coefficient. Structural equation modeling in SPSS-25 and AMOS-25 was used to evaluate the proposed model.

RESULTS

The participants in this research included 132 mothers and 80 fathers. The mean age of mothers and fathers was 38.45±6.21 and 42.39±5.81, respectively. Among the parents, 114 (53.77%) had a high school education and 98 (46.23%) had a university education. The average duration of marriage among the participants was 11.81±3.35 years. The mean and standard deviation (SD) of marital satisfaction, controlling negative thoughts, parenting stress, and sexual satisfaction in the participants were 73.78±33.26, 93.05±33.58, 106.71±34.66, and 68.70±27.44, respectively. Table 1 presents descriptive statistics, including the mean, SD, and correlation matrix of the variables. Based on the results, there was a significant positive correlation between the controlling negative thoughts and marital satisfaction (r= 0.33) and sexual satisfaction (r= 0.49). The correlation between parental stress and marital satisfaction (r=-(0.40) and sexual satisfaction (r= -0.39) was negative and significant. Also, the correlation between controlling negative thoughts and parental stress (r= -0.47) was negative and significant. The acceptable cut-off point was 0.30 to 0.70.

Figure 1 shows the model proposed to explain marital satisfaction based on controlling negative thoughts, parenting stress, and sexual satisfaction. According to the data in Table 2, the root mean square error of approximation showed that the proposed model had a good fit (RMSEA=0.071).

Table 3 lists the findings related to the estimation of path coefficients for examining the direct relationship. According to the results, there was a direct and significant relationship between controlling negative thoughts and marital satisfaction ( $\beta$ = 0.23, P= 0.003), and sexual satisfaction ( $\beta$ = 0.54, P< 0.001) in the parents of children with learning disabilities. There was a negative relationship between parenting stress and marital satisfaction ( $\beta$ = -0.15, P= 0.028), and sexual satisfaction ( $\beta$ = -0.18, P= 0.009) in the parents. Moreover, there was a positive relationship between sexual satisfaction and marital satisfaction ( $\beta$ = 0. 38, P< 0.001). Table 3 suggests that the indirect path of controlling negative thoughts to marital satisfaction was significant when mediated by sexual satisfaction ( $\beta$ = 0.32, P = 0.010). Likewise, the indirect path of parenting stress to marital satisfaction was significant when mediated by sexual satisfaction ( $\beta$ = -0.08, P= 0.044).

Table 1. Mean, Standard Deviation (SD), and Pearson Correlation Coefficients of the Variables

Table 1. Wear, Standard Deviation (3D), and reason Correlation Coefficients of the variables						
Variables	M	SD	1	2	3	4
1- Marital satisfaction	73.78	33.26	1			
2- Controlling negative thoughts	93.05	33.58	0.33**	1		
3- Parenting stress	106.71	34.66	-0.40**	-0.47**	1	
4- Sexual satisfaction	68.70	27.44	0.49**	0.60**	-0.39**	1

<sup>\*\*:</sup> P<0.01

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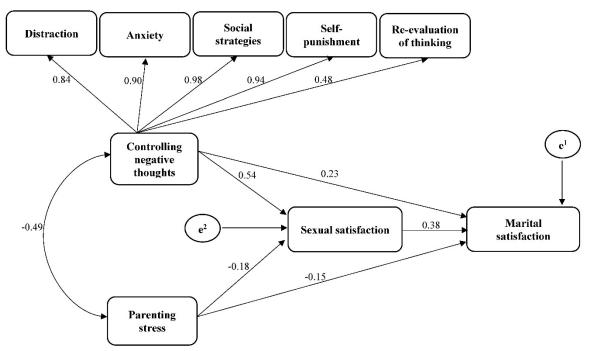


Figure 1. The model proposed to explain marital satisfaction based on controlling negative thoughts, parenting stress, and sexual satisfaction

Table 2. Initial and final models fit indicators

Fit Indicators	$\chi^2$	df	$(\chi^2/\mathrm{df})$	IFI	TLI	CFI	NFI	RMSEA
The proposed model	30.38	15	2.02	0.98	0.96	0.96	0.93	0.071

**Table 3.** Path coefficients of direct and indirect relationships between variables in the proposed model

Path	Path Type	β	P
Controlling negative thoughts → Marital satisfaction	Direct	0.23	0.003
Parenting stress → Marital satisfaction	Direct	-0.15	0.028
Controlling negative thoughts → Sexual satisfaction	Direct	0.54	0.001
Parenting stress → Sexual satisfaction	Direct	-0.18	0.009
Sexual satisfaction → Marital satisfaction	Direct	0.38	0.001
Controlling negative thoughts → Marital satisfaction (through the mediating role of sexual satisfaction)	Indirect	0.32	0.010
Parenting stress -> Marital satisfaction (through the mediating role of sexual satisfaction)	Indirect	-0.08	0.044

#### **DISCUSSION**

The present study aimed to investigate the relationship between controlling negative thoughts and parenting stress with the marital satisfaction of parents of children with learning disabilities as influenced by the mediating role of sexual satisfaction. The results suggest that the proposed model had a good fit. The first finding showed a direct correlation between controlling negative thoughts and marital satisfaction. Controlling negative thoughts affects not only one's own marital satisfaction but also that of the spouse. These results confirm the systematic and recurring nature of marital relationships and indicate a mutual emotional dependence between spouses. While researchers have previously considered the effects of the agent (oneself), the effects of the life partner have often been neglected. Although the effects of oneself (agent) have value because they for providing information about intra-personal processes, their analyses focus researchers only on the personal dimension. It is the effects of the life partner that specifically suggest the presence of interpersonal effects.

In other words, the presence of the effects of the life partner shows us that a relational phenomenon has occurred since a person's response depends on the characteristics of their spouse [33]. In this study, the presence of the effects of oneself (agent) indicates that an agent's ability to control negative thoughts affects their attitude towards their relationship, whereas the effects of the life partner indicate that these same abilities (or lack thereof) can significantly affect the marital satisfaction of the life partner.

Another finding showed that there was a significant negative correlation between parenting stress and marital satisfaction. This finding is consistent with the research results of previous studies [19]. Ben-Naim et al. [19] showed a significant direct correlation between marital satisfaction and parenting stress and between marital satisfaction and parental self-efficacy. To explain this finding, we can say that parenting stress affects interpersonal relationships when discomfort occurs or problems arise, and the use of transcendent awareness, production of personal meaning, critical thinking, and development and expansion of consciousness can

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influence satisfaction and psychological well-being [34]. In general, parenting stress reduces marital satisfaction by increasing negative feelings and emotions and decreasing positive feelings and emotions thus making it difficult to deal with difficult circumstances, which itself can also reduce marital satisfaction. Therefore, parenting stress causes the parents of children with learning disabilities to experience more negative emotions and a reduction in their marital satisfaction, which prevents them from coping with the stressful conditions caused by the presence of their child.

The results also showed a positive correlation between sexual satisfaction and marital satisfaction. This means that the marital satisfaction of parents is expected to improve with increases in their sexual satisfaction. This finding is consistent with the research results of previous studies (25). Cao et al. [24] showed that sexual satisfaction was an important factor in promoting the marital satisfaction of couples. To explain this finding, it can be said that relations having a satisfactory sexual relationship initially requires the establishment of an intimate relationship between spouses, after which the couple will be able to discuss their sexual relations more easily and without any fear or shame. Marital satisfaction is closely related to sexual satisfaction since sex is an important part of a person's life that should be considered thoroughly in social health pharmaceutical and medical care [22]. Hence, neglecting this issue can cause sexual dissatisfaction and even affect people's marital relationships.

Another finding showed that sexual satisfaction mediated the relationship of marital satisfaction with controlling negative thoughts and marital satisfaction with parenting stress. In the indirect path, it was shown that controlling negative thoughts through increasing sexual satisfaction in parents improved marital satisfaction. Likewise, it was demonstrated in the indirect path that parenting stress decreased the sexual satisfaction of parents thereby reducing marital satisfaction. The review of the literature found no study to be compared with the present research regarding this finding. The results suggest high levels of conflict and low levels of cohesion in families having children with learning disabilities. Moreover, the sense of inadequate parenting gradually spreads to other parts of private life and the marital relations of the parents. Therefore, it is reasonable to expect that families having children with learning disabilities will be influenced by the signs of this disability in their children and their problems will be augmented. This illustrates the importance of controlling negative thoughts, reducing parenting stress, and managing negative affections and emotions. Parents who acquire these skills can become aware of problems and stresses and find appropriate solutions thus reducing stress in their relationship with their child and improving their sexual satisfaction as well as marital satisfaction. Therefore, sexual satisfaction mediates the

relationship of marital satisfaction with controlling negative thoughts and the relationship of marital satisfaction with parenting stress.

#### **LIMITATIONS**

The statistical population covered the parents of children with learning disabilities in Tehran, which should inspire caution when generalizing the results to other cities with different cultures. Moreover, using a questionnaire for data collection may lead to biased answers. Therefore, further studies on other samples are recommended for generalizing the results. Not taking into account some variables such as the severity of the child's learning disorder and the socio-economic status of the family was another limitation of this study.

## **CONCLUSION**

In general, the results showed that all direct paths to marital satisfaction were significant while indirect paths to marital satisfaction were also significant through sexual satisfaction. The results suggest that the proposed model had a good fit and was an important step towards identifying the factors influencing marital satisfaction of parents having children with learning disabilities. It is recommended to hold workshops for strengthening control of negative thoughts and reducing parenting stress in order to improve sexual satisfaction and hence promote marital satisfaction of parents of children with learning disabilities.

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# **AUTHORS' CONTRIBUTION**

Zahra Mohebbi and Zahra Dasht Bozorgi: Study concept and design, acquisition of data, analysis and interpretation of data, and statistical analysis. Zahra Dasht Bozorgi and Reza Johari Fard: Administrative, technical, and material support, study supervision. Zahra Mohebbi and Zahra Dasht Bozorgi: Critical revision of the manuscript for important intellectual content.

# ETHICAL APPROVAL

The Ethics Review Board of Islamic Azad University Ahvaz Branch, approved the present study with the following number: IR.IAU.AHVAZ.REC.1400.024.

## **CONFLICTS OF INTEREST**

No conflicts of interest declared.

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