The Impact of Logotherapy on Marital Satisfaction

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Abstract

This study was aimed to investigate the impact of Logotherapy on Marital satisfaction. Out of the sample of 78 (married women) who were randomly selected from the participants in life skills classes in Tehran 39 were assigned to experimental group and the other 39 to control group. Data was collected by (ENRICH) questionnaire. The questionnaire consisted of 47 questions. All participants completed the (ENRICH) questionnaire at baseline and again after 14 weeks logotherapy. To analyze the data, the paired sample t-test and the analysis of covariance was applied. sig.0/000. The t-test and analysis of covariance demonstrated there is a significant (p <0/05) support of the effectiveness of Logotherapy on Marital satisfaction.

Keywords: Logotherapy, Marital satisfaction

Introduction

Logotherapy, is a type of psychotherapy that was first developed by Viktor Frankl in 1938. The therapy asks therapists to be aware of their client's spiritual self, as well as the baser instincts first identified by Freud and reinterpreted by Adler. Logotherapy also holds onto existentialism as one of its core tenets, yet at the same time also embraces religion (Logotherapy). Logotherapy is usually called the "third school of Viennese psychotherapy." To get a better understanding of logotherapy it would be beneficial to compare it against the first school. The first school was Freud's psychoanalysis, which relied on the identification of inherited (usually sexual) mechanisms that had been socially altered. Freud's theory held that all neuroses could be linked back to the warring parts of the self he called the id, ego, and superego. Frankl felt that man's search for meaning was a primary response, not a rationalization as Freud and others would claim. To Frankl the search for meaning held a deep significance. If meaning was just a reaction he felt it would be terrible: "I would not be willing to live merely for the sake of my 'defense mechanisms,' nor would I be willing to die merely for the sake of my 'reaction formations' (Man's Search 104)." What is Logotherapy? The "logo" in logotherapy means "meaning" in Greek. Frankl chose logo because it was his feeling that man's search for meaning in his life was his sole purpose (Man's Search 104). Logotherapy is a person-centered therapy that focuses on the future, and is truly a modern therapeutic model for a modern audience (Man's Search 104). Today many people do not need to worry about the basics of life such as food or shelter. In fact more people are successful at their chosen vocation than ever before, yet there is still a hidden despair (Cry for Meaning 21). How can this happen? It seems that it is all centered on identity. Modern individuals do not need to rely on their base instincts very often. In the wake of this new reality man does not know how to supplement this inherited motivation that he is now suppressing. One supplement that man found was the family. Rigid social constructs provided a comfortable place for man to exist. However as time has gone by the family has not remained as rigid or permanent as it was in past. This double blow to self-identity has left man in what Frankl calls an "existential vacuum" (Psycho&Ex 19). Frankl felt that his patients were not really depressed or anxiety prone because of a feeling of worthlessness, but rather, because they felt life had let them down. As Frankl himself put it:
In this context, the problem has more to do with life in general than a specific feeling that a patient had. Existential Choice: One of the key ideas behind Logotherapy is the idea of existential choice. This idea states that no matter what the situation is, fundamentally, everyone has control over themselves, and has a choice to make. Some people may have better choices (cosmetically) than others; however, the choice is there just the same. The most important part of logotherapy, once a patient understands existential choice, is the understanding of how each of us has an existential burden. Frankl writes that while previously psychoanalysis dealt mainly with showing patients the depth of themselves psychically, logotherapy adds a dimension of "height" that covers spiritual matters. In a logotherapeutic session, the client is directed in their search for deeper meaning. While it is the responsibility of the therapist not to over-burden the client, it is still the client's job to process these feelings and find meaning in them where they can (Psych & ex 21). Viktor Frankl, cautions that existential choice and reflection is not a panacea for humanity. In fact he claims that there is a tension that is needed. A healthy person has both stress and relaxation. The ideal state is somewhere in between the two states. When a patient goes too far over to one side, Frankl wrote, the noodynamic falls apart. One of the key ideas in Frankl's therapy is that the world is always changing and every individual has the opportunity to change with it, or remain the same. Frankl argues that though out our lives we are always on our journey of meaning and each of the different developmental stages a different kind of meaning is needed. It is this great search for meaning through out life that logotherapy is primarily concerned with. If a person can successfully find meaning in each of ood tool for a therapist to utilize in treatment. these stages than they are functioning well. Those who stall at a point would be good candidates for logotherapeutic therapy. Logotherapy struggles to understand the complete person, spiritually as well as psychologically. This allowed therapists to treat spiritual issues rather than just to treat them as another layer of the person to be broken down and analyzed.

Marital satisfaction

Marital satisfaction is a special case of relationship satisfaction, and is the degree to which partners in marriages assess their approval of different aspects of their marital relations. According to the literature, Marital satisfaction is the subjective evaluation of one’s experience in their marriage. By subjective evaluation, we mean that marital satisfaction can only be rated by each person in response to the question, “How satisfied are you?” The level of your satisfaction cannot be determined by anyone else. Marital satisfaction is not a property of a relationship; it is a subjective experience and opinion. Uniquely, marital satisfaction is a relatively stable attitude and attribute which reflects the individual’s overall evaluation of the relationship. Marital satisfaction depends upon the individual’s needs, expectations, and desires for the relationship. Another term, Marital quality is really a generic term which serves as an umbrella term and incorporates three concepts: (1) marital satisfaction, (2) marital happiness, and (3) marital adjustment. These three concepts are related but distinct. Many of the early studies of marital satisfaction relied on cross-sectional designs (e.g., Blood & Wolfe, 1960; Dentler & Pineo, 1960) and therefore provided limited information about how marriage unfolds over time. In the past decade, there has been a significant increase in the number of published longitudinal studies of marriage (see Berscheid, 1994 and Gottman & Notarius, 2002 for reviews). In spite of the growing longitudinal literature in this field, many studies suffer from methodological problems, such as failing to distinguish between childless couples and parents, and failing to analyze husbands’ and wives’ data separately (see Karney & Bradbury, 1995 for a review). Moreover, according to Karney and Bradbury (1995), over 60% of studies follow marriages for 5 years or less. Consequently, many studies of the processes that promote or impede relationship satisfaction and stability over time fail to cover a substantial part of the duration of a marriage. Other longitudinal studies of marriage that have covered longer time periods either do not measure marital satisfaction at all (e.g., Orbuch, Veroff, Hassan, & Horrocks, 2002), measure marital satisfaction at the end of the study and not throughout (Kelly & Conley, 1987), or measure marital satisfaction at infrequent intervals that do not enable a high-resolution analysis of the early years of marriage (e.g., Vaillant & Vaillant, 1993). One of the earliest findings in the marital satisfaction literature is that partners’ satisfaction tends to be high around the time of the wedding, after which it begins a slow but steady decline (Burgess & Wallin, 1953; see Gottman & Notarius, 2002 and Karney & Bradbury, 1995 for reviews of subsequent research). The birth of the first child is not the only factor responsible for the decline in marital satisfaction. It is possible that some of the decline in marital satisfaction is a function of time and erosion in the relationship that may characterize childless couples as well (MacDermid, Huston, & McHale, 1990). Nevertheless, the period following childbirth is a time that merits special attention because the
transition seems to introduce additional stress and strife into the couple relationship, which may accelerate the
decline in marital satisfaction (e.g., Belsky & Kelly, 1994). Indeed, a recent meta-analysis reveals that although
childless couples experience a decline in marital satisfaction over time, parents are significantly less satisfied than
non-parents are, and number of children is reliably related to marital dissatisfaction (Twenge et al., 2003). Since the
pioneering study of LeMasters (1957), research has consistently shown that the transition to parenthood poses a
serious challenge if not a crisis for marriage (Belsky & Pensky, 1988; Cowan & Cowan, 1995; Cowan & Cowan,
1988; Twenge et al., 2003). Given the high rates of divorce in contemporary marriages (Schoen & Canudas-Romo,
2006), it seems imperative that we understand the key risks and buffers to marital stability

Findings and Result

In this study to analyze the data, the paired sample t-test and the analysis of covariance was applied. sig. 0.000. The
t-test and analysis of covariance demonstrated there is a significant (p < 0.05) support of the effectiveness of
Logotherapy on Marital satisfaction

<table>
<thead>
<tr>
<th>Z</th>
<th>Table1: Paired Samples Statistics</th>
<th>Mean</th>
<th>N</th>
<th>Std. Deviation</th>
<th>Std. Error Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair1</td>
<td>pretest</td>
<td>157.5641</td>
<td>39</td>
<td>4.05745</td>
<td>.64971</td>
</tr>
<tr>
<td>posttest</td>
<td>123.1026</td>
<td>39</td>
<td>6.40639</td>
<td>1.02584</td>
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</tr>
</tbody>
</table>

As it is understood from Table1, the Mean and Standard Deviation for pretest are (Mean: 157.5641 and Std.
Deviation, 4.05745). The Mean and Standard Deviation for posttest are (Mean, 123.1026) and Std. Deviation, 6.40639.
As a result of Paird samples statistics there is a significant difference between the pretest and post test scores.

<table>
<thead>
<tr>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error Mean</th>
<th>t</th>
<th>df</th>
<th>Sig. (2tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair1</td>
<td>pretest - posttest</td>
<td>34.461</td>
<td>7.11132</td>
<td>1.13872</td>
<td>30.263</td>
</tr>
</tbody>
</table>

It is understood from Table2, the Mean and Standard Deviation for pretest - posttest are (Mean 34.461, Std.
Deviation, 7.11132). As a result of Paird samples statistics (t: 30.263 and Sig. (2tailed) .000) there is a significant
difference between the pretest and posttest scores.

<table>
<thead>
<tr>
<th>Dependent Variable: posttest</th>
<th>Source</th>
<th>Type III Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corrected Model</td>
<td>23855.979*</td>
<td>3</td>
<td>7951.993</td>
<td>369.516</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>Intercept</td>
<td>133.715</td>
<td>1</td>
<td>133.715</td>
<td>6.213</td>
<td>.015</td>
<td></td>
</tr>
<tr>
<td>group</td>
<td>74.928</td>
<td>1</td>
<td>74.928</td>
<td>3.482</td>
<td>.066</td>
<td></td>
</tr>
<tr>
<td>pretest</td>
<td>400.761</td>
<td>1</td>
<td>400.761</td>
<td>18.623</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>group * pretest</td>
<td>157.775</td>
<td>1</td>
<td>157.775</td>
<td>7.332</td>
<td>.008</td>
<td></td>
</tr>
<tr>
<td>Error</td>
<td>1592.483</td>
<td>74</td>
<td>21.520</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1562660.000</td>
<td>78</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Corrected Total</td>
<td>25448.462</td>
<td>77</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. R Squared = .937 (Adjusted R Squared = .935). The result of Table 3 shows (pretest = Sig.000) is
meaningful.

Eftekhar Hamidi et al. / Procedia - Social and Behavioral Sciences 84 (2013) 1815 – 1819


The Result of Figure 1 shows there is a meaningful significant between pretest and posttest.

Conclusion

This study was aimed to investigate the impact of Logotherapy on Marital satisfaction. Out of the sample of 78 (married women) who were randomly selected from the participants in life skills classes in Tehran 39 were assigned to experimental group and the other 39 to control group. Data was collected by (ENRICH) questionnaire. The questionnaire consisted of 47 questions. All participants completed the (ENRICH) questionnaire at baseline and again after 14 weeks logotherapy. To analyze the data, the paired sample t-test and the analysis of covariance was applied. sig. 0.000. The t-test and analysis of covariance demonstrated there is a significant (p <0.05) support of the effectiveness of Logotherapy on Marital satisfaction.

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References


