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Ebeveynliğe Geçiş Dönemindeki Evli Bireylerin Evlilik İlişkilerini Geliştirme Programının Evlilik Doyumuna Etkisi

The Impact of "Marital Relationships Enrichment Program for Couples in the Period of Transition to Parenthood" on Marital Satisfaction

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The Impact of "Marital Relationships Enrichment Program for Couples in the Period of Transition to Parenthood" on Marital Satisfaction

Abstract

This study was implemented for the purpose of examining the impact of "Marital Relationships Enrichment Program for Couples in the Period of Transition to Parenthood" on marital satisfaction levels of couples expecting their first child. In the study using a "Pretest-Posttest Control Group Design", an experimental and a control group were formed. The study was carried out with a total of 12 couples (n=24), 6 in the experimental group and 6 in the control group. In the study, "Marital Satisfaction Scale" was applied to the participants in order to measure their marital satisfaction levels. The Marital Relationships Enrichment Program for Couples in the Period of Transition to Parenthood consists of 8 group sessions and 2 follow-up sessions. According to the findings acquired; it was determined that post-test and follow-up test scores of the experimental and control group differed significantly and the couples in the experimental group had significantly higher marital satisfaction levels than those in the control group. The results showed that the marital relationships enrichment program is effective on increasing marital satisfaction before birth and protecting it after birth.

Keywords: Marital Relationship, Marital Satisfaction, Transition to Parenthood, Psycho-Education Program, Marriage.

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Öz

Bu araştırma, Ebeveynliğe Geçiş Dönemindeki Evli Bireylerin Evlilik İlişkilerini Geliştirme Programının ilk bebeklerini bekleyen çiftlerin evlilik doyumu düzeylerine etkisini sınamak amacıyla yapılmıştır. "Ön Test-Son Test Kontrol Grup Deseni" kullanılan çalışmada, bir deney ve bir kontrol grubu oluşturulmuştur. Çalışma deney grubunda 6 çift ve kontrol grubunda 6 çift olmak üzere toplam 12 çift ile (n=24) gerçekleştirilmiştir. Araştırmada, evlilik doyumu düzeylerini belirlemek amacıyla "Evlilik Doyumu Ölçeği" kullanılmıştır. Ebeveynliğe Geçiş Dönemindeki Evli Bireylerin Evlilik İlişkilerini Geliştirme Programı, 8 grup oturumu ve 2 izleme oturumu içermektedir. Elde edilen bulgulara göre; deney ve kontrol gruplarının son test ve izleme testi puanlarının anlamlı ölçüde farklılık gösterdiği, deney grubundaki çiftlerin evlilik doyumlarının anlamlı ölçüde daha yüksek olduğu belirlenmiştir. Sonuçlar, evlilik ilişkisini geliştirme programının evlilik doyumunu doğum öncesinde artırmada, doğum sonrasında ise korumada etkili olduğunu göstermiştir.

Anahtar Kelimeler: Evlilik İlişkisi, Evlilik Doyumu, Ebeveynliğe Geçiş, Psiko-Eğitim Programı. Evlilik.

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Introduction

Transition to parenthood is the process for couples to adapt to changes they would experience from the beginning of pregnancy to the period in which the child is two years old (Gottlieb & Pancer, 1988). An important process that changes the marriage experience of couples, and brings various positive and negative changes in their lives (Petch & Halford, 2008) is transition to parenthood when people transition from being couples to parents (Buzzard-Speights, 2012).

Many couples describe the birth of their first child by emotions of joy and satisfaction (Gottman & Notarius, 2000). However, after the child's birth, the tasks and responsibilities at home are highly increased (Cowan & Cowan, 1995; Goldberg, Michaels, & Lamb, 1985; McHale & Huston, 1985); the most fundamental task of baby care may be the most significant transition problem for new parents. While marital satisfaction levels of couples decrease in transition to parenthood, five main changes take place in their marriage. Gender roles become traditional (Cowan & Cowan, 2000), time for the couple decreases and leisure time activities change (Belsky, Spanier, & Rovine, 1983), couple communication is reduced and conflicts are increased (Belsky, 1985; Belsky, Lang, & Huston, 1986; Belsky, Lang, & Rovine, 1985; Gottman & Notarius, 2000), emotional and sexual intimacy decreases (Cowan & Cowan, 1995), relationships with family of origin and friends change (Lower, 2005).

It is known that, work load and responsibilities increase after the birth of the baby, and the tasks are usually shared in a traditional way (Cowan & Cowan 2000). It was reported that women whose expectations are not met in terms of sharing parenthood tasks and daily household errands become unhappy in their relationships (Ruble, Fleming, Hackel, & Stangor, 1988) and disagreements and conflicts arise in partner relationships (Belsky 1985; Belsky et al., 1986; Cowan & Cowan 1995), and on the other hand, sharing of household tasks by partners increases marital satisfaction (Orbuch & Eyster, 1997; Pina & Bengtson, 1993).

Secondly, there is a reduction of quality and frequency of the times partners spend together in transition to parenthood (Belsky et al., 1983). It is seen that activities in transition to parenthood are mostly related to household tasks, entertainment activities become rather centered on the child, and the amount of couple activity decreases (MacDermid, Huston, & McHale, 1990). Additionally, it may be argued that the content of leisure time activities depends on the increase in expenditures after the birth of the child and that sometimes the woman leaves the work.

Thirdly, it is seen that the communication of couples is disrupted and conflicts arise after the birth of the child (Gottman & Notarius, 2000). In connection to the changing roles and increased responsibilities of new parents, they have less time and energy in comparison to other couples for sharing a conversation without being distracted. Therefore, the frequency of



arguments and conflicts between partners increases after the child's birth (Belsky et al., 1986; Belsky et al., 1985; Cowan & Cowan 1995). The most noticeable subjects in transition to parenthood are generally the amount and purpose of the time spent as a couple or individually, sexuality, finances, family of the partner, parenthood practices and division of labor (Ahlborg, Dahlöf, & Hallberg, 2005; Cowan & Cowan 1995).

Fourthly, the emotional intimacy and frequency of sexual intercourse decreases in transition to parenthood. It is seen that sexual activities of couples are minimized or sopped due to bodily changes in women during the prenatal period (Cowan & Cowan, 1995); and in the postnatal period, sexual drive diminishes due to the exhaustion and hormonal changes caused by responsibilities of baby care (von Sydow, 1999).

Finally, changes take place in transition to parenthood in the social support sources of couples and the types of support they receive from these sources (Lower, 2005). In these period, social activities decrease and more social isolation is experienced (Cowan & Cowan, 1995). The social isolation experienced by partners may lead to tension in their relationship, and their expectations of the support they demand from each other may increase. It is seen that the social isolation by fathers is relatively lower as they continue to work, and mothers experience more intense loneliness (Belsky & Kelly, 1994). Thus, the social support received from the partner, family of origin, and friends is important.

In short, the birth of the child leads to significant changes in the relationship of the couple. Perhaps the most critical period of relationships in life is the first years of parenthood. Hence, having a baby found as sixth most stressful life event among 102 events (Dohrenwend, Askenasy, Krasnoff, & Dohrenwend, 1978). In recent years, the transition to parenthood has been considered as a period of disequilibrium for new parents due to new roles, needs, and conditions (Levy-Shiff, 1999). In the process of transition, most couples state that, as a spouse and a parent, they get lost in errands and experience tension (Feeney, Hohaus, Noller, & Alexander, 2001). It is reported that the effects of parenthood are more noticeable on women as they meet the fundamental biological needs of the child (Cowan & Cowan, 2000). Hormonal, physical and psychological changes may lead mothers to experience depression (postpartum depression) in the following two weeks after the birth (Halbreich, 2005; Hoffbrand, Howard, & Crawley, 2001). Existence of supportive systems increases the well-being and positive feelings of partners, and leads them to experience the changes that take place in transition to parenthood with less stress.

Several studies demonstrated that couples who are preparing for marriage tended to have low relationship satisfaction (Demo & Cox, 2000). In transition to parenthood which is the next phase of family cycle, the most important factor that increases marital satisfaction is the partner interaction that includes communication and conflict-resolution skills. The ability of partners to share their behaviors, thoughts and real expectations with each



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other makes adaptation to parenthood easier and sustains relationship satisfaction (Bradbury & Karney, 2004). It is important that couples need to have awareness of potential problems in their relationship during the transition to marriage and parenthood. Having sufficient information about what is going on, talking about a problem and dealing with this transition period reduces the tension on the relationship (Belsky & Pensky, 1988). This awareness may be provided to couples by prenatal training courses, postnatal support groups, and parenting programs. Learning conflict-management and avoidance of some behavior models that lead to conflict have great importance in reducing the relationship dissatisfaction by couples.

It is emphasized that couples will experience the transition period easier and adapt to parenthood better if they are provided with psychological support and psychoeducation during this period. Because these programs that are designed to help partners enrich their relationships, prevent problems, and increase the quality of marriage (Kalkan, 2002). However, while there are many studies abroad on determining the effects of the birth of the first child on couples, there are very few intervention programs. Considering the international studies on improvement of couples' marital satisfaction, it is understood that programs are effective on improvement of the relationship between partners and sustainability of it in a healthy way (Bryan, 1995; Cowan & Cowan, 1995, 2000; Gottman & Gottman, 2007; Hawkins, Fawcett, Carroll, & Gilliland, 2006; Jordan, Stanley, & Markman, 1999; Lovejoy, 2004; Midmer, Wilson, & Cummings, 1995; Petch, 2006; Petch & Halford, 2008; Schulz, Cowan, & Cowan, 2006; Shapiro & Gottman, 2005). These studies that aimed to improve the marriage relationships of couples in transition to parenthood make it easier for partners to cope with the difficulties they experience in transition to parenthood via trainings focusing on the emotions, values and behaviors of couples and teaching of communication and conflict-resolution skills. In Turkey, there are no psycho-education programs to improve marriage relationships among couples in transition to parenthood. In addition, 38.7% of divorces occurred in the first five years of marriage in Turkey (TÜİK, 2017). It can be said that this may be related to failing to achieve marital adjustment, not having realistic expectations from marriage and partner and increasing the conflicts in marriage after the birth of the child. Based on these considerations, it is important to develop protective psychological support programs in the period of transition to parenthood. Therefore, it is expected that this study will satisfy this need in the field and has great importance as a first example in this subject.

This study examined the effects of the "Marriage Enrichment Program for Couples' Transition to Parenthood" developed by the researchers on marital satisfaction levels of couples who are expecting their first babies. Based on this aim, answers to the following questions were sought:



- 1. Is there a difference between marital satisfaction of couples who participated and not participated in the Marriage Enrichment Program for Couples' Transition to Parenthood?
- 2. Is the Marriage Enrichment Program effective in increasing the marriage satisfaction of couples in transition to parenthood?
- 3. Is the Marriage Enrichment Program effective in protecting the marriage satisfaction of couples in the postpartum period?

The research hypotheses created in line with the purpose of the research are as follows:

- H1. There is a significant difference between pretest and posttest marital satisfaction scores of married individuals in the experiment group.
- H2. There isn't a significant difference between posttest and follow-up test marital satisfaction scores of married individuals in the experiment group.
- H3. There is a significant difference between pretest and follow-up test marital satisfaction scores of married individuals in the experiment group.
- H4. There isn't a significant difference between pretest and posttest marital satisfaction scores of married individuals in the control group.
- H5. There isn't a significant difference between posttest and follow-up test marital satisfaction scores of married individuals in the control group.
- H6. There isn't a significant difference between pretest and follow-up test marital satisfaction scores of married individuals in the control group.
- H7. There is a significant difference between the posttest scores of the experiment and control groups in terms of marital satisfaction.
- H8. There is a significant difference between the follow-up scores of the experiment and control groups in terms of marital satisfaction.

Method

Participants

Firstly, the necessary permissions were asked for and given by the relevant institutions and the scales were administered to a sample composed of first pregnant women who were applied to the Family Health Centers and Gynecology and Obstetrics Clinics of hospitals in Samsun and their husbands. All the participants participated voluntarily in the current study. In addition, in various public and private institutions, it was announced that the marriage relationship development program for married individuals who are in the transition period to parenthood will be applied. 298 couples were reached during the data collection process, but 113 couples with their



first pregnancy were included in the scale study. Couples who previously had abortus (miscarriage) and those who received treatment to have children were not included in the study as they may have had different dynamics in their marriage. The couples who complied with the limitations of this study, did not have abortus before, did not receive treatment for having children, did not have psychiatric diagnosis and were in the 2nd trimester of their pregnancy. In order to determine the groups of this study with one control and one experiment group, the scores the couples obtained from the scale and other demographic characteristics were considered, and two groups were formed as 12 individuals (6 couples) in the control group and 12 individuals (6 couples) in the experiment group by the method of one-to-one matching. The total of 24 individuals assigned to the control and experiment groups constituted the study group of the research.

The mean age of the individuals in the experiment group was 29.4 (Sd=3.5) while the mean age of the control group was 27.17 (Sd=4.78). The duration of marriage for the individuals in both groups was in the range of 1-5 years. The individuals in both groups were distributed as high school, associate's degree and bachelor's degree in equal amounts in terms of educational level. It was understood as a result of the Mann Whitney-U test that there was no significant difference between the pre-test scores of the groups, and the groups were equivalent in terms of their pre-test scores.

Design of the Study

In this peri-experimental study which investigated the effects of the marriage enrichment program on marital satisfaction levels of couples, "pre-test post-test with control group design was used." The design of the study is given in Table 1.

Table 1. Design of the Study

Groups	Pre-Test	Process	Post-Test	Process	Follow-up	
					Test	
Experiment	MSS*	Marriage	MSS	Follow-up	MSS	
group	E	Inrichment Program	ı	sessions		
		for Couples'				
Control	MSS		MSS		MSS	
Group						

^{*}MSS: Marital Satisfaction Scale

In conformity with pre-test post-test model with control group, firstly, the Marital Satisfaction Scale (MSS) was applied to the couples in experiment and control group. Then, "Marriage Enrichment Program for Couples' Transition to Parenthood" was implemented by the researchers to couples in experiment group. At the end of the experimental process, the scale was applied to the couples in experiment and control group again. Follow-up sessions were carried out with couples in experiment group one and two months after birth. Lastly the same scale was applied to the couples in



experiment and control group again three months after birth. The independent variable of the study was the "Marriage Enrichment Program for Couples' Transition to Parenthood" and the dependent variable was levels of marital satisfaction.

Data Collection Tools

Personal Information Form: The form prepared by the researchers includes questions on the couple's age, occupation, education level, economic status, length of marriage, number of marriages, number of pregnancies, length of pregnancy, whether they received treatment to have children or not, whether they have a psychiatric diagnosis or not, and whether they received couple counseling.

The Marital Satisfaction Scale (MSS): The scale developed by Canel (2007) within the Turkish culture. The scale with two options as true and false has 101 items. There are items that must be reversed while scoring. High scores in the scale indicate low satisfaction, while low scores indicate high satisfaction. As a result of factor analyses, it was determined that the scale has five factors. The first sub-dimension of the scale "marital harmony" consists of three sub-scales of "relationship happiness", "conflict" and "closeness". The other sub-dimensions are "anger", "communication with the spouse's family", "economic understanding" and "understanding of parenting". The techniques of Cronbach's alpha, Spearman Brown and Guttman Split-Half achieved reliability coefficients between r=.93 and .97. In this study, Cronbach's alpha reliability coefficient was found to be .91.

Training Procedure

The Marriage Enrichment Program for Couples' Transition to Parenthood consisted of 8 group sessions and 2 follow-up sessions (Vural-Batik, 2017; Vural-Batik & Kalkan, 2018). *The topics of the group sessions:*

1st Session: Parenthood expectations

2nd Session: Communication skills

3rd Session: Conflict-resolution skills

4th Session: Reconciliation and coping with unsolvable problems

5th Session: Spousal support and emotional intimacy

6th Session: Sexuality in pregnancy and after birth

7th Session: Common goals and values

8th Session: Future planning

In the first session, there were exercises related to needs in marriage, myths about parenting and the impact of their families in the formation of parenting expectations. In the second session, exercises related to non-verbal listening skills, body language, communication styles that disrupt communication, "you" language and "I" language, effective listening and



giving feedback were practiced. In the third session, there were exercises related to non-functional conflict resolution methods, the methods used to recognize conflict at the time of conflict, constructive discussion and conflict resolution stages, and break during the conflict and self-calming. In the fourth session, reconciliation process, repair after conflict, solvable and structural problems, and the ability to accept structural problems were carried out. In the fifth session, there were exercises and shares related to the support topics that the spouses expected from each other, the participation of the father, the distribution of duties, the development of emotional closeness, appreciation and the display of the behaviors of interest. In the sixth session, there were exercises related to sexual life in the pregnancy and postpartum period, myths related to sexuality, coping with the difficulties encountered in sexual life and improving sexual life. In the seventh session, creating emotion of "we", creating rituals of daily events, sharing common goals and values, and balancing individual, parenting and dual activities were carried out. The eighth session included to make plans for changes in the lives of couples, and to evaluate the outcomes of the program.

Follow-up sessions: The topics of the follow-up sessions are reviewing the self-change plans, assessing of expectations from parenthood and partners, promoting of usage of communication skills, application of the conflict-resolution process, improving spousal support, emotional and sexual intimacy, balancing of individual, parenthood and couple activities.

The Process

The current study was conducted with the ethical permission of the Ethics Committee of Clinical Sciences in University of Ondokuz Mayis. The "Marriage Enrichment Program for Couples' Transition to Parenthood" was developed by the researchers in this study. Several sources were utilized in the structuring of the marriage enrichment program and planning of session activities (Bryan, 1995; Cowan & Cowan, 2000; Duran, 2010; Gottman & De Claire, 2001; Gottman & Gottman, 2007; Gottman & Silver, 2002; Halford, 2011; Jordan et al., 1999; Kalkan, 2002; Kalkan, Yalçın, & Hamamcı, 2012; Lovejoy, 2004, Petch, 2006; Yalçın, 2010; Yılmaz, 2009).

Participants were selected from pregnant women who were applied to the Family Health Centers and Gynecology and Obstetrics Clinics of hospitals in Samsun and their husbands. The group sessions were implemented at the end of the 2nd trimester and in the 3rd trimester of pregnancy (6, 7 and 8th months). The group sessions which lasted 2-2.5 hours lasted 8 weeks. All of the participants attended all sessions. Each session contained a warm-up activity related to the topic of the session, assessment of homework related to the previous session, discussion of the new topic, implementation of new activities and handing out the new homework. The follow-up sessions were carried out after 1 month and 2 months following the birth in the homes of couples. Each follow-up session lasted one hour. The group sessions and the follow-up sessions were implemented by the first author who is a



psychological counselor.

Data Analysis

In order to determine the tests to be used in the analysis of the data obtained in the study, the MSS scores were examined for normal distribution. With this purpose, the homogeneity, kurtosis and skewness values of the pre-test scores of the scale obtained by the experiment and control groups. Test of homogeneity of variances results showed that there was no significant difference between the experimental and control groups in terms of MSS pre-test scores, and groups were similar (p=.93). It was calculated that kurtosis value of the pre-test scores of the MSS was 3.555, and skewness value was 1.810. Kurtosis and skewness values between -1 and +1, indicate normal distribution (Büyüköztürk, 2009). According to these results, it was determined that the data were not normally distributed. So that non-parametric tests were used in the study. The data obtained in the study were analyzed using the SPSS 21.00 package software. The significance of the statistics was tested on the level of .05.

Findings

Table 2 shows the results of the Mann Whitney-U test that was conducted to examine whether the pre-test, post-test or follow-up test results of the participants in the experiment and control group differed in the MSS.

Table 2. Mann Whitney-U Test Results Regarding the Pre-test, Post-test and Follow-up Test Results of the Experiment and Control Groups in the MSS.

	Group	n	M	Sd	Mean Rank	Total Rank	U	p
Pre-test	Experiment group	12	13.42	12.02	12.29	147.50	(0.50	.887
	Control group	12	13.83	11.06	12.71	152.50	69.50	
Post-test	Experiment group	12	6.08	5.43	9.63	115.50	25 50	.045*
	Control group	12	15.42	13.60	15.38	184.50	37.50	
Follow-up test	Experiment group	12	14.17	15.87	9.08	109.00	- 21.00	.017*
	Control group	12	31.50	23.36	15.92	191.00	31.00	

Low scores in the MSS show high satisfaction in marriage.

According to Table 2, the difference between the pre-test scores of the experiment and control groups in terms of marital satisfaction was not significant (p>.05); there was a significant difference between the post-test scores of the groups (U=37.50, p<.05). It was found that the mean post-test



^{*}p<.05

score of the experiment group in the scale was significantly lower than that of the control group. In other words, the participants in the experiment group who took part in the program had higher levels of marital satisfaction. According to this result, the H7 hypothesis (*There is a significant difference between the posttest scores of the experiment and control groups in terms of marital satisfaction*) was accepted. Additionally, it was seen that follow-up measurements taken three months after birth also differed significantly between the groups, and marital satisfaction levels of the experiment group were significantly higher than those in the control group (U=31.00, p<.05). According to this result, the H8 hypothesis (*There is a significant difference between the follow-up scores of the experiment and control groups in terms of marital satisfaction*) was accepted.

Table 3 shows the results of the Wilcoxon Signed-Rank Test conducted with the aim of determining whether there is a significant difference among the pre-test, post-test and follow-up test results of the experiment group.

Table 3. Results of the Wilcoxon Signed-Rank Test Regarding Comparison of the Pre-test, Post-test and Follow-up Test Results of the Experiment Group in the MSS.

		n	Mean Rank	Total Rank	Z	p
Post-test Pre-test	Negative Values	12	6.50	78.00		
	Positive Values	0	.00	.00	3.077	.002**
	Equal	0				
Follow-up Post-test	Negative Values	2	4.25	8.50		
	Positive Values	9	6.39	57.50	2.184	.029*
	Equal	1				
Follow-up Pre-test	Negative Values	8	4.63	37.00		
	Positive Values	3	9.67	29.00	.356	.722
	Equal	1				

Low scores in the MSS show high satisfaction in marriage.

As seen in Table 3, there was a significant difference between marital satisfaction pre-test and post-test scores of the experiment group (z=3.077, p<.01), and marital satisfaction of the experiment group increases significantly after the implemented program. According to this result, the H1 hypothesis (*There is a significant difference between pretest and posttest marital satisfaction scores of married individuals in the experiment group*) was accepted. It was also found that marital satisfaction levels of the experiment group dropped significantly between the post-test and follow-up measurements (z=2.184, p<.05). According to this result, the H2 hypothesis (*There isn't a significant difference between posttest and follow-up test marital satisfaction scores of married individuals in the experiment group*) was not accepted. Additionally, it was observed that the pre-test and follow-up test



^{*}p<.05

results of the experiment group did not significantly differ (p>.05); and mean scores of marital satisfaction of the experiment group were similar before the program and after three months following birth. According to this result, the H3 hypothesis (*There is a significant difference between pretest and follow-up test marital satisfaction scores of married individuals in the experiment group*) was not accepted.

Table 4 shows the results of the Wilcoxon Signed-Rank Test conducted with the aim of comparing the pre-test, post-test and follow-up test results of the control group in the MSS.

Table 4. Results of the Wilcoxon Signed-Rank Test Regarding Comparison of the Pre-test, Post-test and Follow-up Test Results of the Control Group in the MSS.

	-	n	Mean	Total	Z	p
			Rank	Rank		
Post-test Pre-test	Negative Values	6	6.00	36.00		_
	Positive Values	6	7.00	42.00	.236	.813
	Equal	0				
Follow-up Post-test	Negative Values	0	.00	.00	_	
	Positive Values	12	6.50	78.00	3.061	.002*
	Equal	0				
Follow-up Pre-test	Negative Values	0	.00	.00		_
	Positive Values	12	6.50	78.00	3.065	.002*
	Equal	0	·			

Low scores in the MSS show high satisfaction in marriage.

As seen in Table 4, there was no significant difference between the marital satisfaction pre-test and post-test results of the control group (p>.05); however, the difference between the follow-up test and post-test results was significant (z=3.061, p<.01). Additionally, there was a significant difference between the pre-test and follow-up test results of the control group (z=3.065, p<.01), that is, the mean scores in the scale increased significantly. In other words, the marital satisfaction levels of the control group decreased significantly after three months following birth, and their follow-up test marital satisfaction levels were also lower than the pre-test measurement. According to these result, the H4 hypothesis (There isn't a significant difference between pretest and posttest marital satisfaction scores of married individuals in the control group) was accepted. The H5 and the H6 hypotheses were not accepted. (H5: There isn't a significant difference between posttest and follow-up test marital satisfaction scores of married individuals in the control group. H6: There isn't a significant difference between pretest and follow-up test marital satisfaction scores of married individuals in the control group.)

Discussion

While the marital satisfaction levels of the couples increased after the "Marriage Enrichment Program for Couples' Transition to Parenthood", the scores of the couples in the control group did not change. The significantly



^{*}p<.01

higher scores in the post-test for the experiment group in comparison to the control group shows that the implemented program has a positive effect on the marital satisfaction levels of couples in transition to parenthood.

Considering studies on the effects of psycho-education programs implemented with couples in transition to parenthood, it is seen that the focus is rather on investigation of the effects of the psycho-education programs on relationship adjustment, relationship quality and depression, and postnatal effects of the programs are mostly studies. There a limited number of studies where the effects of prenatal psycho-education programs are studied in the prenatal period (Bryan, 1995; Gottman & Gottman, 2007; Hawkins et al., 2006; Jordan et al., 1999). In similarity to this finding of the study, in the study by Gottman and Gottman (2007), it was found that a twoday psycho-education for couples in transition to parenthood provided positive effects on marital quality. Additionally, it is noteworthy that this psycho-education included activities that are related to improvement of spousal support such as knowing each other, expressing appreciation, showing caring, determining caring behaviors that are needed and showing these to each other, sharing of common goals and values. In another study, it was found that the psycho-education program for couples in the prenatal period containing subjects of communication skills, parenthood and child development had a positive effect on strengthening couple relationships (Jordan et al., 1999). In addition to this, there are also studies reporting that psycho-education programs applied on couples in their transition to parenthood period did not have an influence on relationship satisfaction (Bryan, 1995; Hawkins et al., 2006). In the study by Bryan (1995), it was reported that relationship satisfaction did not differ between the control and experiment groups as a result of a psycho-education program for pregnant women and their partners that contained roles, support systems, sexuality, baby care, communication and conflict-resolution skills. In another study (Hawkins et al., 2006), it was observed that a short training provided to couples in the prenatal period did not have an effect on relationship satisfaction.

These different results in the literature show that the issues discussed are important in psycho-education programs implemented with couples in transition to parenthood. It is seen that the duration and content of these programs given to couples in transition to parenthood were different, and some programs did not include group sharing or feedback to homework. It is expected that different outcomes in the effectiveness of programs may have been caused by these factors. It may be stated that marital satisfaction levels of the participants who received program in this study increased because the marriage enrichment program was comprehensive, it handled many issues that affect marriage relationships such as communication, conflict-resolution, spousal support and sexuality and it had a rich content, the duration of the program was sufficient and group sharing activities in the sessions were on an adequate level.



It is also important that the effects of the marriage enrichment program for couples in transition to parenthood continue in the postnatal period. Considering the follow-up values collected three months after birth in this study, it was seen that the marital satisfaction levels of the participants who took part in the study decreased significantly and were finally on similar levels to their pre-test results. It was found that the marital satisfaction follow-up test scores of the control group were significantly lower than their pre-test scores. In other words, the marital satisfaction levels of the couples in the experiment group stayed on a similar level, and showed a lower degree of decrease in the postnatal period in comparison to the control group. According to these findings, it can be said that the marriage enrichment program has an important influence on maintaining the marital satisfaction levels in transition to parenthood.

Likewise, in many studies that investigated the effects of psycho-education programs for couples during the transition to parenthood (Brugha et al., 2000; Buist, Westley, & Hill, 1999; Chabrol et al., 2002; Cowan & Cowan, 1995; Elliott et al., 2000; Gorman, 1997; Gottman & Gottman, 2007; Lovejoy, 2004; Midmer et al., 1995; Petch, 2006; Shapiro & Gottman, 2005; Shultz et al., 2006; Zlotnick, Johnson, Miller, Pearlstein, & Howard, 2001), it was shown that the marital satisfaction, relationship quality and partner harmony levels of couples in transition to parenthood decreased in the postnatal period. In a study by Gottman and Gottman (2007), the effects of a psycho-education program on marriage quality were monitored in the postnatal period, and it was demonstrated that the marriage quality levels of the couples in the control group decreased, while those in the experiment group stayed constant. Other studies similarly studied the issues of parenthood expectations and couple communication in programs that were designed for adaptation to the postnatal period, and it was found that the relationship satisfaction levels in the experiment group decreased in a lower degree in comparison to those in the control group (Cowan & Cowan, 1995; Midmer et al., 1995; Shultz et al., 2006). Shapiro and Gottman (2005), who studied the effects of communication-based psycho-education given to couples in transition to parenthood, demonstrated that the marital satisfaction levels of the couples in the experiment group before and after the psycho-education were not significantly different.

It is important that psycho-educations provided to couples in transition to parenthood include issues that are reported to be closely related to marital satisfaction such as conflict- resolution, communication, sharing and support. Nevertheless, it is seen that studies that reported influence of psycho-education programs on marital satisfaction discussed these issues. Similarly, this study discussed these issues that aim to improve partner interactions, may have led to the differences between the control and experiment groups in terms of marital satisfaction. In transition to parenthood, marital satisfaction is negatively affected by factors such as differentiation of couple experiences (Feldman, 1987), increases in partner conflict, decreases in sharing between partners (Cowan & Cowan, 1987),



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disruption of the coping sources of the couple due to new responsibilities (McCubbin & McCubbin, 1988), negative changes in sexual life, reduction of social support and negative changes in relationships with family of origin (Cowan & Cowan, 1987). Moreover, in this period where divorce rates are high, it is noteworthy that the divorce rates among couples who attend psycho-education programs that contain issues such as parenthood expectations, couple communication and conflict-resolution are lower (Cowan & Cowan, 1995; Midmer et al., 1995; Shultz et al., 2006). Therefore, it is believed that inclusion of these subjects in the provided psycho-education programs is important in terms of maintaining the marital satisfaction of couples in transition to parenthood.

In this study it may be argued that the marital satisfaction levels of the partners were maintained in the transition process because the training was carried out both before birth in a group-oriented way and after birth with house visits, partners participated in the sessions together, and the training included subjects that may affect marital satisfaction such as parenthood expectations, communication, conflict-resolution, spousal support and sexuality.

Conclusion and Recommendations

According to the conclusions reached based on the findings of the study, while the Marriage Enrichment Program for Couples' Transition to Parenthood increased the marital satisfaction in the prenatal period, it decreased the level of reduction expected in the postnatal period. The similar marital satisfaction levels in the postnatal period among the couples who participated in the psycho-education program showed that the program is protective. Additionally, the slower decrease in the marital satisfaction levels of the experiment group in comparison to the control group suggests that the program is preventive. Considering that the divorce rates in Turkey are high in the period of transition to parenthood, the positive influence of this program on the marriage relationships of couples is significant.

In the light of the conclusions reached in this study, some recommendations may be provided for researchers and practitioners for achievement of stronger contributions on marriage relationships in transition to parenthood. The "Marriage Enrichment Program for Couples' Transition to Parenthood" may be implemented with different samples in further studies and its effectiveness may be tested. Additionally, the effects of the program on other variables such as communication in marriage, coping with problems and conflict-resolution skills may be investigated. The effects of factors that may affect marriage relationships in the prenatal period (readiness for parenthood, whether the pregnancy was planned, etc.) and in the postnatal period (healthiness of the child, living with family of origin, moving to a new house, change of jobs, etc.) may be studied. It is important that implementations towards improvement of marriage relationships are made



in the prenatal period as they are protective and preventive. For this, collaborations to be made with the Ministry of Health and the Ministry of Family and Social Policies, and couples in transition to parenthood who visit medical institutions may lead to the utilization of psycho-education programs towards improvement of marriage relationships in the prenatal period. It is expected to be suitable for family and marriage counselors to utilize the content of this program and use it in couples' counseling practices. Moreover, it is recommended that practitioners receive training for the program to be implemented effectively.

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