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# Using Transactional Analysis to Improve the Marital Satisfaction Levels of Christian Couples in Accra Metropolis, Ghana

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# Abstract:

Using the experimental research design, this study sought to investigate the effect of transactional analysis on improving the satisfaction levels of Christian couples in the Accra Metropolis, Ghana. The sample comprised 10 couples. The intervention took place over a period of eight weeks. The results showed that the transactional analysis techniques used were effective at improving the marital satisfaction levels of participants.

Keywords: Transactional analysis, marital satisfaction, Christian couples

# 1. Introduction

Marriage is an institution ordained by God. Heward-Mills (2005) stated that it is the only institution that was established before sin came into the world. Marriage is said to be the basis of all communities, societies and the nation at large. If marriages do not succeed, there is bound to be problems in society. Studies addressing marital relationships have been conducted since the 20<sup>th</sup> century and have, in the last decade, indicated profound transformations in relationships {Araújo, 2005; Garcia & Tassara, 2003; Perlin & Diniz, 2005; Villa, 2005 (all cited in Villa & Del Prette, 2013)}. Marriage directly impacts other spheres of spouses' lives, such as relationships with children and the extended family of partners, professional performance, spirituality, and physical and emotional health (Villa & Del Prette, as cited in Kamalju, Narimni, Atadokht & Abolghasami, 2017). These factors have roles to play in the level of satisfaction a couple will experience in marriage.

The satisfaction that spouses experience in a marriage is among very important aspects of a marital system (Taniguchi, Freeman, Taylor & Malcarne, 2006). Nevertheless, marital satisfaction is not easily achieved (Rosen-Grandon, Myers & Hattie, 2005). Marital relations may be the origin of happiness or the great source of pain and grief. Love starts from hope; hope to a day when a partner's feelings are appreciated or accepted and a pleasant relation is created (Nejadnaderi, Darehkordia & Divsalar, 2013).

Marital satisfaction can be defined as the attitude an individual has toward his or her own marital relationship (King, 2016). Many factors determine the level of marital satisfaction. These include: a spouse's personality, his or her likelihood of indulging in infidelity, the desirability of each partner, and the presence of children. If one partner perceives that the other is inflicting costs (or being troublesome) in these domains, he or she may move to address them through discussions with the partner, or by seeking a new or additional partner who may better suit the person (Bradbury, Fincham & Beach, 2000) or through divorce.

Presently, marriages suffer as shown by an increase in divorce and separation cases. For example, available statistics from Oklahoma State of the United States of America suggests that the divorce rate increased from 4.9% in 2004 to 5.2% in 2011 while their marriage rate moved from 7.3% in 2005 to 6.9% in 2011. Also, in West Virginia, the marriage rate moved from 7.5% in 1999 to 7.2% in 2011 while the divorce rate from 1999 to 2011, was 4.9% to 5.2% respectively (American National Vital Statistics System, 2012a, 2012b). According to a McGill University study, 15% ofmarital unions in Kenya end in divorce (Kubania, 2016).

In Ghana, the Ghana Statistical Service (cited in Adjassah, 2015) reported that the divorce rate had increased from 5.4% in 2006 to 6.6% in 2013. This is a matter of concern to the health of the Ghanaian society. In view of this, there is the need to consider creative and helpful ways of dealing with divorce which usually results from marital dissatisfaction. One of these ways is the use of group counselling for couples experiencing dissatisfaction in marriage.

Group counselling involves individuals who have difficulties they wish to resolve that are of a personal, educational, social, or vocational nature (Corey & Corey, 1992). Group counselling is an important aspect of counselling activities. When individuals who have similar problems are put together for a counselling intervention, they identify with

others and realise that they are not alone; there are other people who share similar problems. There is an opportunity for interaction in groups which allows members express their concerns and difficulties and believe they can be genuinely heard. This study used the Transactional Analysis theory in group counselling sessions.

Transactional analysis (TA) is a comprehensive theory of human behaviour developed by Eric Berne in 1961. TA is a theory of personality and an organised system of interactional therapy. It is grounded on the assumption that people make current decisions based on past premises, that is premises that were at one time appropriate to their survival needs but which may no longer be valid (Corey, 2009). TA is designed to help clients gain both emotional and cognitive insight, but with the focus clearly on rational aspects. The role of the therapist is largely to pay attention to didactic and cognitive issues. The counsellor assists clients in discovering the disadvantageous conditions of the past under which they made certain early decisions, adopted life plans, and developed strategies in dealing with people that they might now wish to reconsider (Corey, 2013).

Transactional Analysis stresses the importance of equality in the client-therapist relationship. This is manifested through contractual agreements between therapist and client that make them mutual allies in the therapeutic process. Hence, therapists bring their knowledge to bear in the context of a clear, specific contract the client initiates. Regardless of what school of TA a practitioner belongs to, the focus is on the establishment, maintenance, and end of the therapeutic relationship (Tudor & Hobbes, 2002). The therapeutic goals of transactional marriage therapy emerge naturally from the initial structure of the marriage contract. The objective is to preserve the marriage contract if possible while at the same time allowing each party to obtain as much satisfaction as possible under compromise of the relationship and script contracts. The therapeutic goal with regard to the relationship contract, is to stabilise the Adult in each spouse, both in the group counselling and during the marriage (Berne, 1961).

The practise of TA is ideally suited to groups. Berne believes group therapy yields information about one's personal plan for life that would take much more time to obtain through individual therapy. In a group, people are able to observe others changing, giving them models and increasing their own options. They come to understand the structure and functioning of their individual personality and learn how they transact with others (Berne, 1961). According to Jacobs, Masson and Harvill (2006), TA can be taught by the group leader in mini-lecture format but preferably by using a member's situation. For example if Ama, a client complains of not receiving enough attention from her spouse among other concerns of other group members, the leader may introduce some TA tools that can help group members understand better. The leader may with the help of a whiteboard marker, draw three circles representing each of the ego states – Child, Parent and Adult and use this to explain and discuss with group the various ego states Ama could be operating from at any given time with regard to her problem. Once the leader teaches TA, she can use the Parent, Child, Adult concepts in numerous ways when working with one member or with the entire group.

Transactional Analysis is said to be a good theory for understanding and explaining transactions between couples. Studies show that, this approach can lead to improved self-esteem (Wissink, 1994), quality of life (Gayol, 1997) and other positive psychological operations (Novy, 2002). Transactional analysis has been used in different fields such as training for administrators and teachers, improving students' performance (Yoosefi & Karimi, 2002), and managing couple conflicts (Shafi-Abadi, 1997). In view of the stated effectiveness of the transactional analysis theory in resolving marital issues, this study is considered very important. If the health of society must be preserved, certainly marital satisfaction is key.

Researchers have been done on issues related to marital satisfaction, nationally and internationally. In Ghana, researchers like Arthur-Norman (2015); Akpadago (2014); Dabone (2012) and Ackumey (2011) have conducted investigations into the issues related to marital satisfaction in the Central, Brong-Ahafo and Northern Regions of Ghana. All of these studies found that several married couples in Ghana were dissatisfied in their marriages. With this in mind, I believe it is time for marriage counsellors to direct attention towards providing 'professional help' to as many married people as possible who experience marital dissatisfaction. One way counsellors could provide this help is through the effective use of counselling theories such as transactional analysis.

Some studies have been done on the use of transactional analysis in couples' therapy internationally which proved the efficacy of the theory in resolving marital issues. For example an investigation of the effectiveness of transactional analysis on teaching communication skills to reduce marital conflict of patients suffering from cardiovascular disease was conducted by Mahdavi et al. (2015). Honari (2014) also conducted a study on the effect of TA group training on marital satisfaction of men and women in Isfahan. In both studies, the results revealed that after the TA group training, there was a significant difference (p<0.01) in the marital satisfaction of respondents in the experimental group.

According to Amankwah (2013), divorce cases in Ghana are very high. Amankwah further stated that data available at the Accra Metropolitan Assembly (AMA) indicated that a total of 618 marriages were dissolved in 2007 out of 1,511 marriages that were registered in that year. Also, statistics from the Greater Accra Head Office of Legal Aid Ghana indicated that at least 40% of marriages registered annually in the region break up within a spate of 14 months (College Press, 2011). The divorce situation is proof that several people experience dissatisfaction in marriage. In relation to this, Farahbakhsh (cited in Mostafavi, Ghojavand & Mosavi, 2014) noted that the incidence of marital dissatisfaction may be preliminary to separation and divorce. In view of the report on the high levels of divorce in Accra Metropolis, I considered it necessary to conduct this study. This study sought to provide intervention using transactional analysis techniques to couples who are dissatisfied in marriage. The Greater-Accra region was chosen because according to Ankrah (2013), it has the highest number of divorce cases in the country.

Although research has proven the efficacy of transactional analysis in improving marital relationship issues internationally, it appears little or nothing has been done in Ghana. The alarming rate of divorce cases in Ghana calls for

research into effective ways of dealing with marital satisfaction issues which may in turn reduce the rate of divorce in the country. This has necessitated an investigation of effectiveness of the theory in improving marital satisfaction in Ghana.

#### 1.1. Research Hypotheses

The following hypotheses were formulated to guide the study. They were tested at an alpha level of 0.05.

- H<sub>1</sub>: There would be significant differences in the pre and post test scores of couples who receive
- Transactional analysis treatment.
- H<sub>2</sub>: Couples given treatment using transactional analysis will experience better marital
- Satisfaction than those not given treatment.
- H<sub>3</sub>: Husbands will experience significantly higher marital satisfaction levels than wives after
- Intervention.
- H<sub>4</sub>: Couples between the ages of 36-50 will experience significantly higher marital satisfaction
- Levels than those between the ages of 20-35 after intervention.

#### 2. Research Methods

The research approach for this study was quantitative, specifically, the non-randomised control group pretestposttest quasi experimental research design. In this study, participants were purposively selected into an experimental and a control group. They were not randomly assigned; the pre-test was used to confirm the similarities in the two groups with regard to the dependent variable. The dependent variable was marital satisfaction (with seven components) and the independent variables were the transactional analysis theory, gender, and age.

#### 2.1. Sample and Sampling Procedure

The sample comprised10 Christian couples (making a total of 20 respondents) in the Accra Metropolis. The participants were recruited from various churches in two selected sub-metros in Accra Metropolis. All Christian couples who were available at the time of data collection, were given the Marital Satisfaction Inventory (MSI) to fill. Subsequently, an analysis of their responses indicated those who were satisfied and those dissatisfied. Ten 'dissatisfied couples' were selected and placed into control and experimental groups. The selection of the 10 couples was based on their scores on the Marital Satisfaction Inventory (MSI) and respondents' willingness to take part in the experiments. Both husband and wife's scores should show dissatisfaction to qualify them for the experiments. Both the experimental and control groups were made up of 10 participants (comprising five couples) each. In support of using fivecouples in each group, Jacobs et al. (2006) suggested that for couple therapy groups, no more than five couples is best to allow enough time for each person to share his or her thoughts and feelings.

The sampling techniques used were the simple random, multi-stage and purposive sampling methods. Simple random sampling, specifically the lottery method was used to select two out of the 11 sub-metros in Accra Metropolis. These sub-metros were: Ablekuma Central and Osu Klottey. The multi-stage sampling method was used to select respondents from various churches in the two sub-metros in Accra Metropolis. I considered it necessary to select two sub-metros out of 11 because there were two groups(one for the intervention and the other for the control). Therefore, selecting two sub-metros made it easier to decide on a convenient meeting place for the participants.

The purposive sampling technique was chosen because only Christian couples were used as respondents. The members of the experimental and control groups were also purposively selected based on their scores from the research instrument. I selected married couples who were available and willing to take part in the study during the data collection. In the event that one spouse was uninterested or unavailable to participate in the study, the available spouse was not allowed to fill the Inventory and therefore did not qualify for an intervention.

The placement of couples in the treatment and control groups were based on their results on the MSI. Couples whose scores reflected dissatisfaction (scores between 46 and 75) based on the MSI scoring manual were contacted and the essence of their being placed in a group with others for counselling was discussed. After we received their consent to be part of the groups for the study, five couples each were placed in the control and treatment groups.

# 2.2. Research Instrument

The research instrument used was the Marital Satisfaction Inventory (MSI); a standardized inventory developed by Essuman (2010). The MSI is designed for married people to assist them find out the extent to which they are satisfied in their marriage. The MSI measures very important aspects of marital life. The MSI has 30 items for both men and women on a four-point Likert scale which ranges from 'Very True' to 'Not At All True'. It has seven scales; each scale helps to find out how satisfied a married person is in his or her marriage. The seven scales are based on Relationship; Affection, Love and Appreciation; Character; Temperament; In-law Issues; Marital Roles; and General Evaluation of the marriage. This MSI was chosen purposefully because it has been validated among married couples in Ghana. It is a useful instrument for determining a person's level of marital satisfaction; as such it was considered appropriate for this study.

Reliability studies have been conducted on the instrument which proved high reliability co-efficients. For instance Ahene (2009) found a co-efficient of 0.91 while Dabone (2012) found a coefficient of 0.86 for the 30 items. Again Dabone (2015) carried out an exploratory factor analysis on the seven scales of the MSI and concluded that the instrument was highly reliable. The MSI has also undergone face and contentvalidity. According to Essuman (2010), the items were scrutinised and reviewed to improve the content and make the language clear and simple to understand.

#### 2.3. Data Collection Procedures

As part of the data collection procedures, announcements were made in various churches to meet as many married couples as possible. On meeting them, wehad a general discussion with them regarding the purpose of the study and the essence of their contributions. Couples were entreated to sit together. This was done to allow easy identification of couples for the intervention. The inventories were then administered to the respondents who were willing to take part in the study. Couples were encouraged to indicate their phone numbers on the form to help us contact them after when needed. For those who could not read or write, the items on the instrument were interpreted to them.

The data collection period lasted for 8 weeks. The survey data was collected within two-weeks. A week after the survey data had been collected, we went around to meet the 'dissatisfied couples' to seek their consent for the intervention and also to agree on a meeting time and place. The intervention was done over three weeks. Two weeks after the intervention was completed, post-test was conducted for the couples.

#### 2.3.1. Pre-test

After exchanging pleasantries with the couples, the essence of the research was explained to them. They were also taken through the instructions for answering the MSI. Opportunity was given for respondents to ask for clarifications with regard to the instructions. Notably, the respondents were made to understand that the exercise was purely for academic purpose and if necessary, counselling. Informed consent was obtained from the participants based on the guidelines of the Institutional Review Board of the University of Cape Coast.

# 2.3.2. Intervention Procedures

With the consent of the dissatisfied couples, the treatment time was scheduled on a suitable day and time for participants. This was to allow all members to be fully committed to the meetings with regard to being punctual and regular. There were eight counselling sessions for the treatment group; a session lasted for two hours. In support of using an eight-session intervention plan, Nayeri, Lotfi and Noorani (2014) stated that eight TA sessions or intervention are adequate for resolving couple relationship issues. Issues dealt with during the treatment were based on the scales in the MSI. Throughout the sessions, participants were assured of confidentiality. Because the participants were all Christians, each session started and ended with prayers. The breakdown for the sessions is as follows:

- Goal: To improve marital satisfaction using Transactional Analysis techniques/
- Measurable Outcome: Increase in MSI scores after intervention to prove efficacy of treatment in improving marital satisfaction.

Session	Major Objectives	Key Tasks	Strategies (Counsellor)
One	To establish	Getting to know each other and	Unconditional positive regard and
	rapport and set	setting ground rules.	listening
	goals	Explaining concepts and	
		techniques to be used	
Two	To discuss	Finding out causes and looking	TA concepts such as ego states and
	relationship issues	towards solutions for	transactions facilitated the discussion.
		relationship issues.	
Three	To improve	Finding out causes and looking	Use of strokes, injunctions, counter-
	affection, love and	towards improvements in	injunctions and re-decisions to facilitate
	appreciation	expressing affection, love and	discussion.
	among couples	appreciation.	
Four	Discussion on	Finding out causes and looking	Use of strokes and life positions to
	character issues	towards improvement in	facilitate group interaction.
		character-related issues.	
Five	To discuss	Finding out causes and looking	Use of injunctions, counter-injunctions
	temperament	towards improving issues with	and life positions to facilitate group
	issues.	personality differences.	interaction.
Six	To discuss In-law	Finding out causes and looking	Use of strokes, transactions and life
	issues.	towards improvement in In-	positions to facilitate group interaction.
		law relationships.	
Seven	Discussion on	Looking towards improvement	Use of strokes, transactions and games
	marital roles.	in carrying out marital roles.	to facilitate group interaction.
Eight	Closing the group	Main lessons highlighted.	Asking participants to share group
		Members evaluate their	lessons with other members.
		marriage.	

Table 1: Transactional Analysis Intervention Plan

#### 2.3.3. Post-Test

Two weeks after the sessions were over, a post-test was conducted. This was done to determine the effect of the intervention on the marital satisfaction levels of recipients of the intervention. The two weeks was considered adequate to

allow the participants apply the lessons they learnt during the intervention. In support of using the two weeks, Mitchel and Gordon (2014) have indicated that it is ideal to conduct post-test two weeks after treatment.

### 2.4. Data Processing and Analysis

The scores from the MSI were computed according to its manual and then organised in worksheets in the Statistical Product for Service Solutions (SPSS) version 21.0. Serial and code numbers were given to each item on the inventory for easy identification before scoring them. According to the MSI manual, the total score for all the 30 items is a maximum of 120 and a minimum of 30. The greater the score the more satisfied a spouse is in marriage. Couples with scores from 46 to 75 were not satisfied (Essuman, 2010). Thus respondents who scored between 46 and 75 were selected for the treatment and control groups. Couples scoring between 46-75 were used in this study because, the study aimed at improving marital satisfaction as such we considered it better to work with those who were 'not satisfied'. Based on the four-point Likert type scale, the mean scores were categorised as follows:

- Not At All Satisfied is an interval of 1.0-1.5
- Not Satisfied is an interval of 1.6-2.5
- Satisfied is an interval of 2.6-3.5
- Very Satisfied is an interval of 3.6-4.0

# 3. Results and Discussion

#### 3.1. Hypothesis One

H<sub>1</sub>: Marital satisfaction levels of couples who receive Transactional Analysis treatment will improve after intervention.

Hypothesis one sought to test the differences in the marital satisfaction levels of participants who received Transactional Analysis before and after intervention. There were 10 participants made up of five couples. The Wilcoxon Signed Ranks Test which is the non-parametric alternative of the paired sample t-test was used to analyse the responses. This is due to the smallness of the sample size. In relation to this, Frost (2015) opined that when the sample size is small (less than 30), the non-parametric alternative is more appropriate. The result of the pre-test is shown in the column titled 'Before Intervention'. Post test was conducted two weeks after the intervention had ended. The post-test result is displayed under the column labelled 'After Intervention'. Table 2 displays the results.

Marital Satisfaction	After Intervention	Before Intervention	Z	Sig.
	Median	Median		
Relationship	3.25	2.00	-2.809	.005
Affection, Love & Appreciation	3.40	2.00	-2.812	.005
Character	3.25	2.08	-2.814	.005
Temperament	3.33	2.17	-2.836	.005
In-Law	3.33	2.00	-2.829	.005
Marital Roles	3.67	2.00	-2.821	.005
General Evaluation	3.25	2.00	-2.829	.005
Overall	3.30	2.05	-2.803	.005

Table 2: Wilcox on Signed Ranks Test on Marital Satisfaction Levels before & after Intervention \*P<.05

Table 2 reveals that there were significant differences in the pre and post test scores of couples who received intervention using transactional analysis techniques. On all the seven scales, there were statistically significant differences after the intervention.

The results in Table 2signal the effectiveness of transactional analysis in improving marital satisfaction. In relation to the significant differences recorded before and after intervention, several researchers have reported on the strength of transactional analysis in improving marital relations. For example, Salamat, Zamani and Alahyari (2007) studied the effect of transactional analysis on the reduction of marital conflicts. The analysis of their results revealed that after treatment, couples experienced improved conversation method, criticism method, conclusions from discussion, and reduced marital conflicts. Also a research conducted by Torkan, Kalantari and Molavi (2006) on the effect of group therapy by transactional analysis on couple's marital satisfaction showed the TA group therapy increased marital satisfaction of men and women in the test group compared to those in the control group. Mostafavi, et al.(2014) conducted a study on the effect of group counselling with transactional analysis method on self-acceptance of couples with family dispute in counselling centres in Esfahan City. Their results showed that the training techniques on transactional analysis group counselling provided a significant change in self-acceptance and dealing with family dispute.

In conclusion, couples who received Transactional Analysis intervention experienced significantly higher marital satisfaction levels. On all the seven scales of the MSI, marital satisfaction levels improved. Due to the results obtained,  $H_0$  is rejected and  $H_1$  is retained.

#### 3.2. Hypothesis Two

H<sub>1</sub>: Couples given treatment using Transactional Analysis will experience better marital satisfaction than those not given treatment.

The hypothesis tested the differences in the marital satisfaction levels of participants who received treatment and those who did not receive treatment (the control group). Participants in the treatment group were taken through eightsessions of intervention. The control group did not receive any treatment before the post-test. Each group comprised five couples (10 respondents). Table 3 presents the post-test scores of participants in the treatment and control groups based on a Mann-Whitney U test analysis.

Marital Satisfaction	Treatment Group Median	Control Group Median	Mann-Whitney U	Z	Sig
Relationship	3.25	2.00	.000	-3.820	.000
Affection, Love & Appreciation	3.40	2.00	.000	-3. 822	.000
Character	3.25	1.92	.000	-3. 800	.000
Temperament	3.33	2.00	.000	-3. 914	.002
In-Law	3.33	2.17	.000	-3. 845	.000
Marital Roles	3.67	2.00	.000	-3. 868	.000
General Evaluation	3.25	2.00	.000	-3. 868	.000
Overall	3.30	2.03	.000	-3.784	.000

Table 3: Mann-Whitney U Test on Marital Satisfaction Levels of Treatment & Control Group

\*P<.05

From Table 3, it is clear that there were significant differences in the marital satisfaction levels of respondents in the treatment and control groups on all the scales of the Marital Satisfaction Inventory. On all of the scales, participants in the treatment group had scores that reflected satisfaction in marriage while those in the control group reported dissatisfaction. This implies that the transactional analysis intervention given was effective in improving the marital satisfaction levels of respondents. Based on the results for hypotheses one and two, it is evident that it is better for couples to avail themselves for counselling when the need arises than not doing anything about marital relationship issues.

In support of the finding about the effectiveness of the intervention, Andromico (2009) studied the effect of transactional analysis therapy in family therapy and group therapy and found a significant increase in marital satisfaction relative to the control group. Salamat, et al. (2007) also studied the effect of training transactional analysis skills on the reduction of marital conflicts. In their research, 12 couples in the test group and 12 couples in the control group were studied. The analysis of results revealed that the training increased agreement on leisure time, satisfaction, intimacy, improves conversation method, criticism method, conclusions from discussion, and reduced marital conflicts. Other researchers such as Torkan, et al., (2006); Danesh (2006); Afrooz (2010); and Nasir (as cited in Mostafavi, et al., 2014) have concluded that comparing transactional analysis treatment to a control group, the post-test stage reflected that the method increased marital compatibility of the test group compared to the time before therapy and compared to the control group.

In conclusion, there were statistically significant differences in the marital satisfaction levels of couples who received treatment using transactional analysis and those who did not. Those who received treatment reported satisfaction in marriage while those in the control group reported dissatisfaction. Due to the result obtained, H<sub>o</sub> is rejected and H<sub>1</sub> is retained.

# 3.3. Hypothesis Three

H<sub>1</sub>: Husbands will experience significantly higher marital satisfaction levels than wives after intervention.

The hypothesis tested the gender differences of recipients after the intervention. Table 4shows the results based on a Mann-Whitney U test.

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Marital Satisfaction	Gender	Median	Mann-Whitney	Z	Sig
Relationship	Male	3.33	9.00	747	.455
	Female	3.17			
Affection, Love & Appreciation	Male	3.40	12.50	.000	1.00
	Female	3.40			
Character	Male	3.33	10.00	.539	.590
	Female	3.17			
Temperament	Male	3.33	12.50	.000	1.00
	Female	3.33			
In-Law	Male	3.33	10.50	454	.650
	Female	3.33			
Marital Roles	Male	3.67	12.50	.000	1.00
	Female	3.67			
General Evaluation	Male	3.25	12.00	120	.905
	Female	3.25			
Overall	Male	3.33	12.50	.000	1.00
	Female	3.27			

 Table 4: Mann-Whitney U on Gender Differences in Marital Satisfaction after Intervention

 \* P<.05</td>

Table 4 reveals that there were no significant gender differences in the effects of the interventions on the marital satisfaction levels of the participants of the experimental group. Both males and females reported satisfaction after the intervention. Generally, husbands reported relatively higher satisfaction than their wives.

In relation to finding no significant gender differences, researchers like Hendrick and Adler (1998); Karney and Bradbury (1995) have suggested that while men and women may behave differently in relationships, their underlying needs, wants and perspectives may not be so different; especially for those couples in committed relationships. In a longitudinal study of couples, Kurdek (2005) found few marked differences over time in men and women's ratings of marital satisfaction, social support and spousal interactions.

Kurdek (2005);Kenny, Kashy and Cook (2006) and Parker (2007) highlighted that the reason for finding few gender differences with regard to marital satisfaction, was that much relationship research had failed to analyse the responses of couples (i.e., the couple as the unit of analysis). Rather, the majority of studies had compared the responses of men and women from different relationships (i.e., the individual as the unit of analysis). Thus, it was unclear if those gender differences were due to actual differences between men and women, or the result of comparing men and women from different relationships. Notably, the respondents in this study were couples and yet there were no statistically significant differences after the intervention with regard to gender. As such based on this present study, it can be concluded that even among couples, there may be no significant gender differences in marital satisfaction after intervention.

In relation to the finding that in general, although there were no significant gender differences, the husbands reported slightly higher marital satisfaction than their wives, Amato Booth, Johnson and Rogers (2007)found that women's overall experiences of marriage were more negative than men's. The possible reason for husbands reporting higher satisfaction than their wives according to Twenge, Campbell and Foster (2003) was that the transition to parenthood affects wives' satisfaction more than that of husbands. A study by Ackummey (2011) on marital satisfaction among couples at Duakor-Ghana, also confirmed that men were slightly satisfied in their marriages than women.

Based on the results in Table 3, it can be concluded that there were no significant gender differences after the interventions. Due to the result obtained,  $H_0$  is retained and  $H_1$  is rejected.

# 3.4. Hypothesis Four

• H<sub>1</sub>: Couples between the ages of 36-50 will experience significantly higher marital Satisfaction levels than those between the ages of 20-35 after intervention.

Hypothesis four sought to test differences among recipients of the intervention with regard to their ages. In terms of ages, there were three main groupings in this study, 20-35, 36-50, and 'over 50', however the respondents who qualified for the interventions were from only two groups (20-35years and 36-50years). There werefour participants aged 20-35 and six in the range of 36-50. Table 5 reveals the results based on a Mann-Whitney U analysis.

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Marital Satisfaction	Age	Ν	Median	Mann-Whitney	Z	Sig
Relationship	20-35	4	3.17	7.50	980	.327
	36-50	6	3.50			
Affection, Love and Appreciation	20-35	4	3.20	4.00	-1.732	.083
	36-50	6	3.70			
Character	20-35	4	3.17	10.50	330	.741
	36-50	6	3.33			
Temperament	20-35	4	3.33	9.00	750	.453
·	36-50	6	3.17			
In-Law	20-35	4	3.33	10.50	347	.728
	36-50	6	3.33			
Marital Roles	20-35	4	3.00	6.00	-1.369	.171
	36-50	6	3.83			
General Evaluation	20-35	4	3.25	4.50	-1.830	.067
	36-50	6	3.13			
Overall	20-35	4	3.20	6.00	-1.283	.199
	36-50	6	3.45			

 Table 5: Mann-Whitney U on Marital Satisfaction Levels with Regard to Age Differences

\*P<.05

Table 5 shows there were no significant differences among participants after treatment with regard to age differences. However generally, participants aged between 36-50 years reported a relatively higher marital satisfaction than those aged 20-35 years.

It can be observed that, on the 'Temperament' and 'General Evaluation' scales couples aged 20-35 years reported higher medians than those in the 36-50 age range. Items on Temperament and General Evaluation on the MSI included 'my partner is too cold for my liking. I do not enjoy his company', 'my partner gets angry too frequently and beats me', 'my partner is the best I can ever have and 'I will feel much happier if I move out of my present marriage'. It is probably not strange that with regard to 'General Evaluation', respondents aged between 20-35 years scored higher because they would have been married for a relatively shorter period than those aged 36-50 years; they probably would be much more excited about remaining married and being happy. In addition, majority of respondents in this age range may be married with young children and may be stressed about having to play a dual parent role. With regard to temperament, some of them may not have been married long enough to experience violence in their marriage. As such generally, they may feel more positive about the future of their marriage than those aged between 36-50.

In relation to the finding that those aged 36-50 generally reported slightly higher marital satisfaction than those aged 20-35, a study by Dabone (2014) on the effect of age on marital satisfaction in Sunyani municipality (Ghana) proved that older people were more satisfied on five out of the seven scales of the Marital Satisfaction Inventory used in this study. The five scales were; relationship, affection, love and appreciation, character, temperament and marital roles. He further noted that, out of the five scales, four were statistically significant. Probably participants aged between 36-50 years reported more satisfaction because they are older than those aged 20-35; as such may be more mature and have more experiences to bring about more positive changes in their lives. Supporting this finding, Nema and Bansal (2015) noted that it is likely that middle-aged partners' identification of successful problem-solving strategies contribute to the sense that they have control over their relationship.

In conclusion, based on the results in Table 5, it can be said that there were age differences on the various scales of the MSI used in this study. However the differences in their marital satisfaction levels were not statistically significant for both interventions. Due to the result obtained,  $H_0$  is accepted and  $H_1$  is rejected.

# 4. Conclusions

Based on the findings of this study, it can be concluded that the transactional analysis theory is effective in improving marital satisfaction levels of couples. Also, some factors may improve or reduce satisfaction in marriage. These factors include a partner's view on his/her spouse's contributions to the marriage,expression of affection, love and appreciation. Character displayed, temperament differences, and the execution of marital roles may also improve or reduce satisfaction in marriage. The scores of the recipients of the intervention as well as the comments they made at the end of each session proved the relevance of this study. This study has possibly prevented a situation of divorce or separation among the couples.

# 5. Recommendations

Based on the findings and conclusions that were drawn from the study, the following recommendations were made:

The study revealed positive changes in the couples' marital satisfaction after treatment. Counselling practitioners should learn more about the transactional analysis theory and apply its techniques in helping their clients out of their relationship concerns.

In addition, churches should work on getting professional counsellors to provide marriage counselling not only to to-be couples but also for married people to access anytime there is the need. Professional counsellors are well trained to apply variety of counselling theories and principles to help people become more adjusted than 'church counsellors' who probably only have training in preparing people for marriage.

In general, females in this study reported relatively lesser satisfaction in marriage than the males on most of the scales of the MSI (Essuman, 2010). Based on this, women are entreated to initiate counselling when they find the need to enhance their satisfaction. They should also initiate discussions with their husbands when they are uncomfortable with certain situations in their marriage to prevent escalation of problems and hence enhance their marital satisfaction.

The Marital Satisfaction Inventory (MSI) used in this study is a useful tool for assessing marital satisfaction issues. It is helpful for initiating discussions around solutions for marital problems. We recommend that the MSI be used widely by marriage counsellors to aid appropriate diagnosis and interventions during counselling.

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