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INFLUENCE OF PREMARITAL COUNSELLING ON MARITAL
ADJUSTMENT AMONG MARRIED PEOPLE IN THE CHURCH OF
PENTECOST, CAPE COAST AREA, GHANA

BY

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Faculty of Educational Foundations, College of Education Studies,
University of Cape Coast, in partial fulfilment of the requirements for
award of Master of Philosophy Degree in Guidance and Counselling

APRIL 2022

DECLARATION

Candidate's Declaration

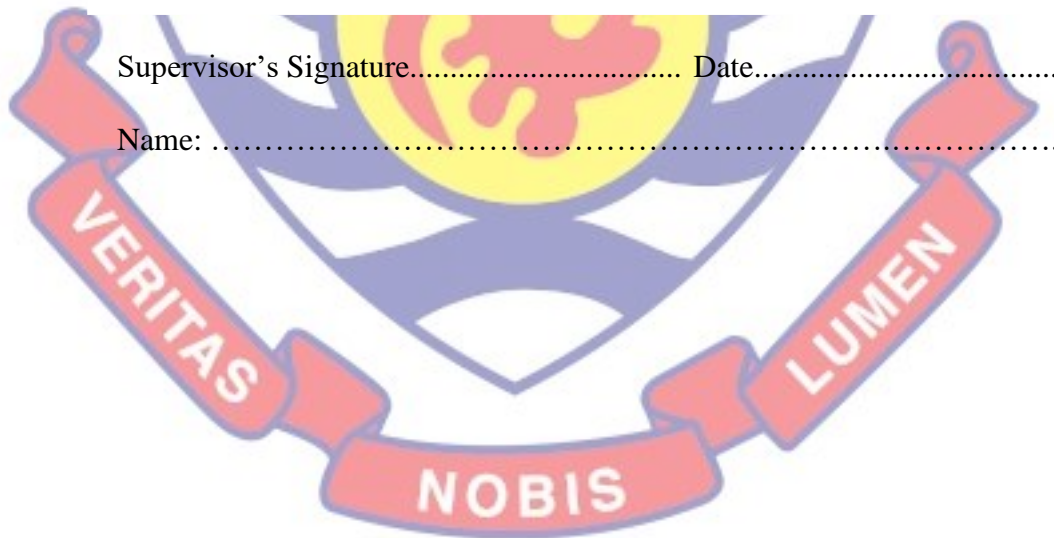
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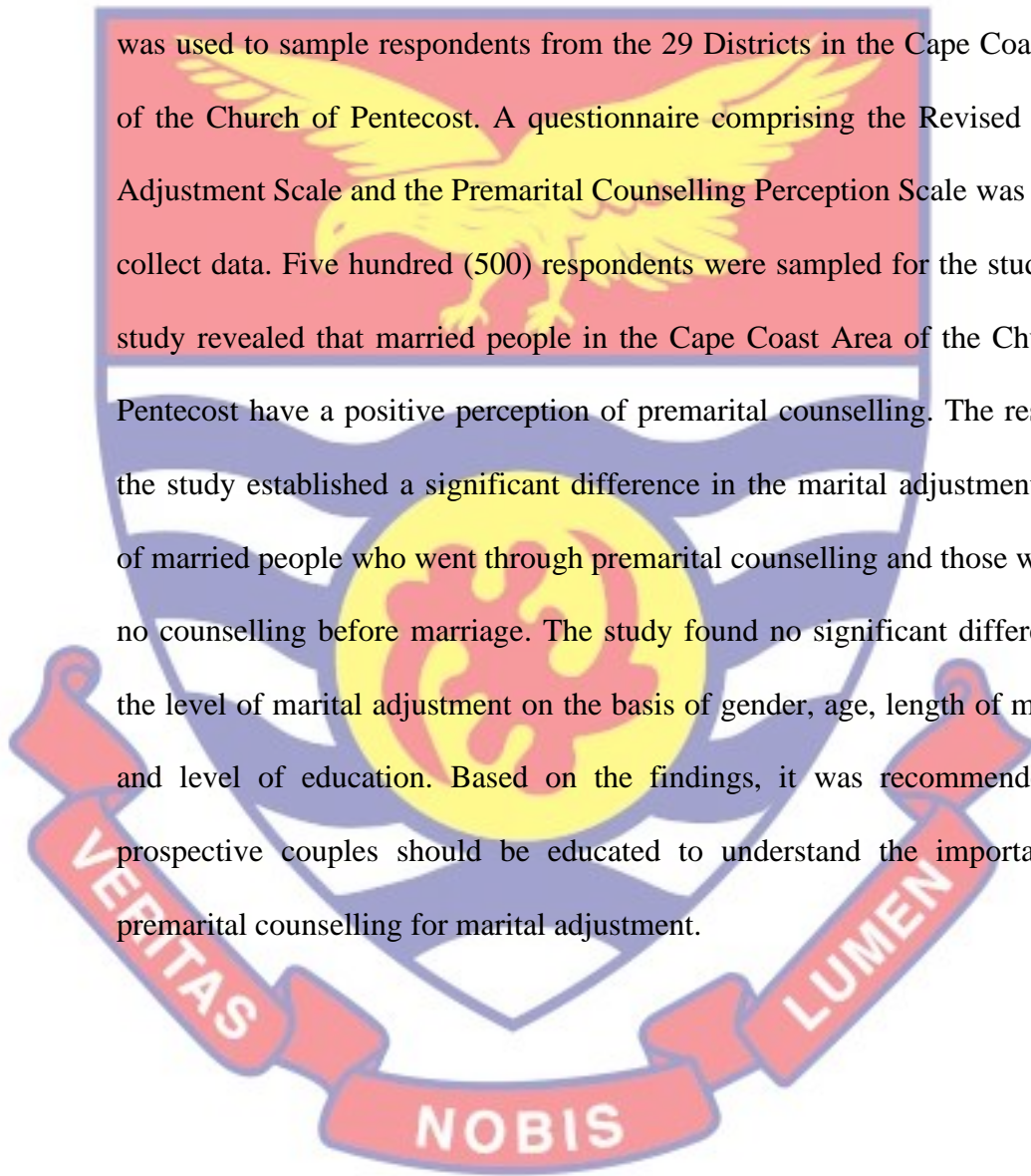
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ABSTRACT

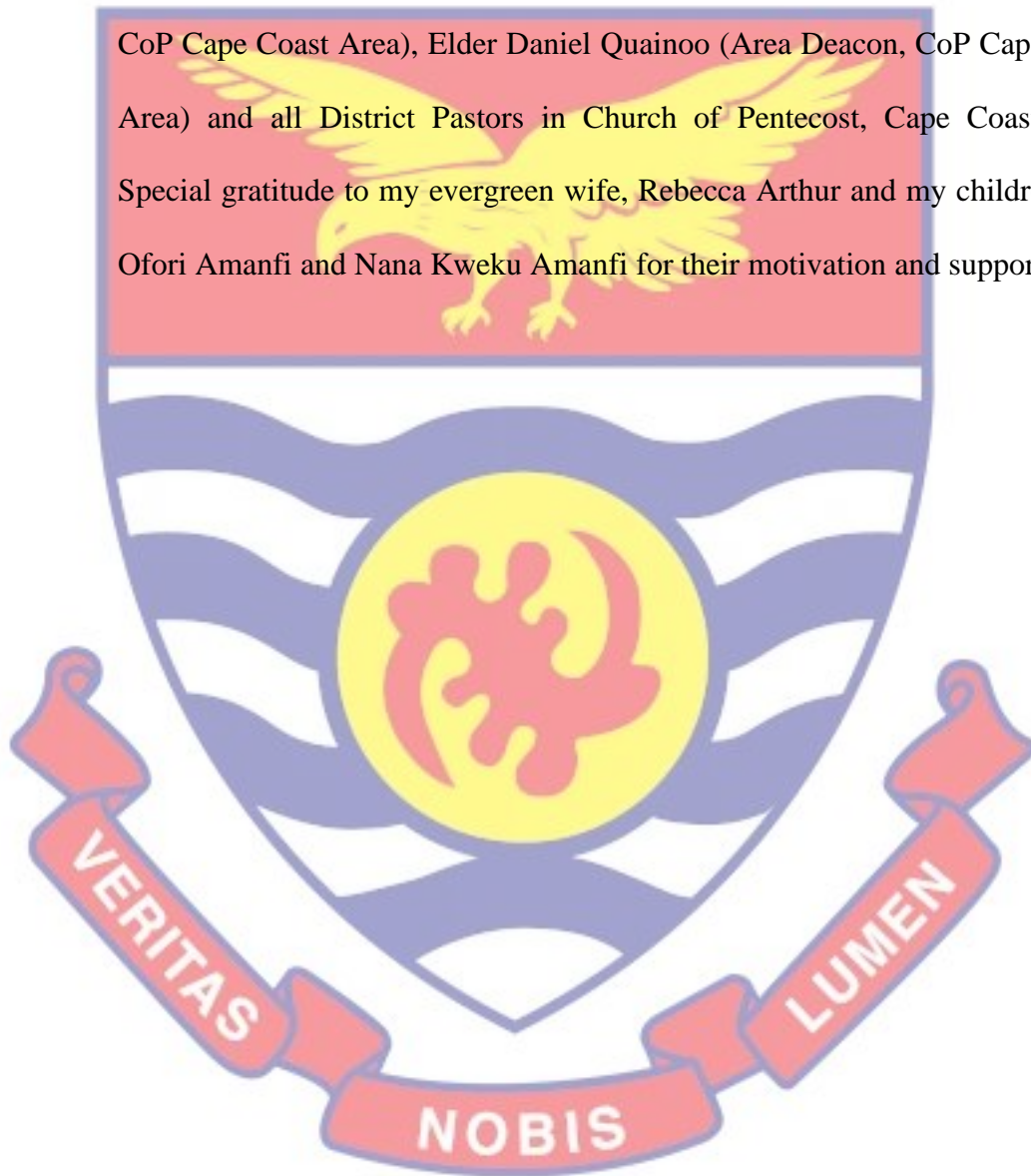
The purpose of this study was to find out the influence of premarital counselling on marital adjustment among married people in the Church of Pentecost, Cape Coast Area, Ghana. The descriptive survey design was employed in the conduct of the study. The convenience sampling technique was used to sample respondents from the 29 Districts in the Cape Coast Area of the Church of Pentecost. A questionnaire comprising the Revised Dyadic Adjustment Scale and the Premarital Counselling Perception Scale was used to collect data. Five hundred (500) respondents were sampled for the study. The study revealed that married people in the Cape Coast Area of the Church of Pentecost have a positive perception of premarital counselling. The results of the study established a significant difference in the marital adjustment levels of married people who went through premarital counselling and those who had no counselling before marriage. The study found no significant difference in the level of marital adjustment on the basis of gender, age, length of marriage and level of education. Based on the findings, it was recommended that prospective couples should be educated to understand the importance of premarital counselling for marital adjustment.



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I appreciate the support of Apostle Samuel Yaw Antwi (Area Head, CoP Cape Coast Area), Elder Daniel Quainoo (Area Deacon, CoP Cape Coast Area) and all District Pastors in Church of Pentecost, Cape Coast Area. Special gratitude to my evergreen wife, Rebecca Arthur and my children Sika Ofori Amanfi and Nana Kweku Amanfi for their motivation and support.



DEDICATION

To my sweet wife, Rebecca Arthur and my children, Sika Ofori Amanfi and Nana Kweku Amanfi.



TABLE OF CONTENTS

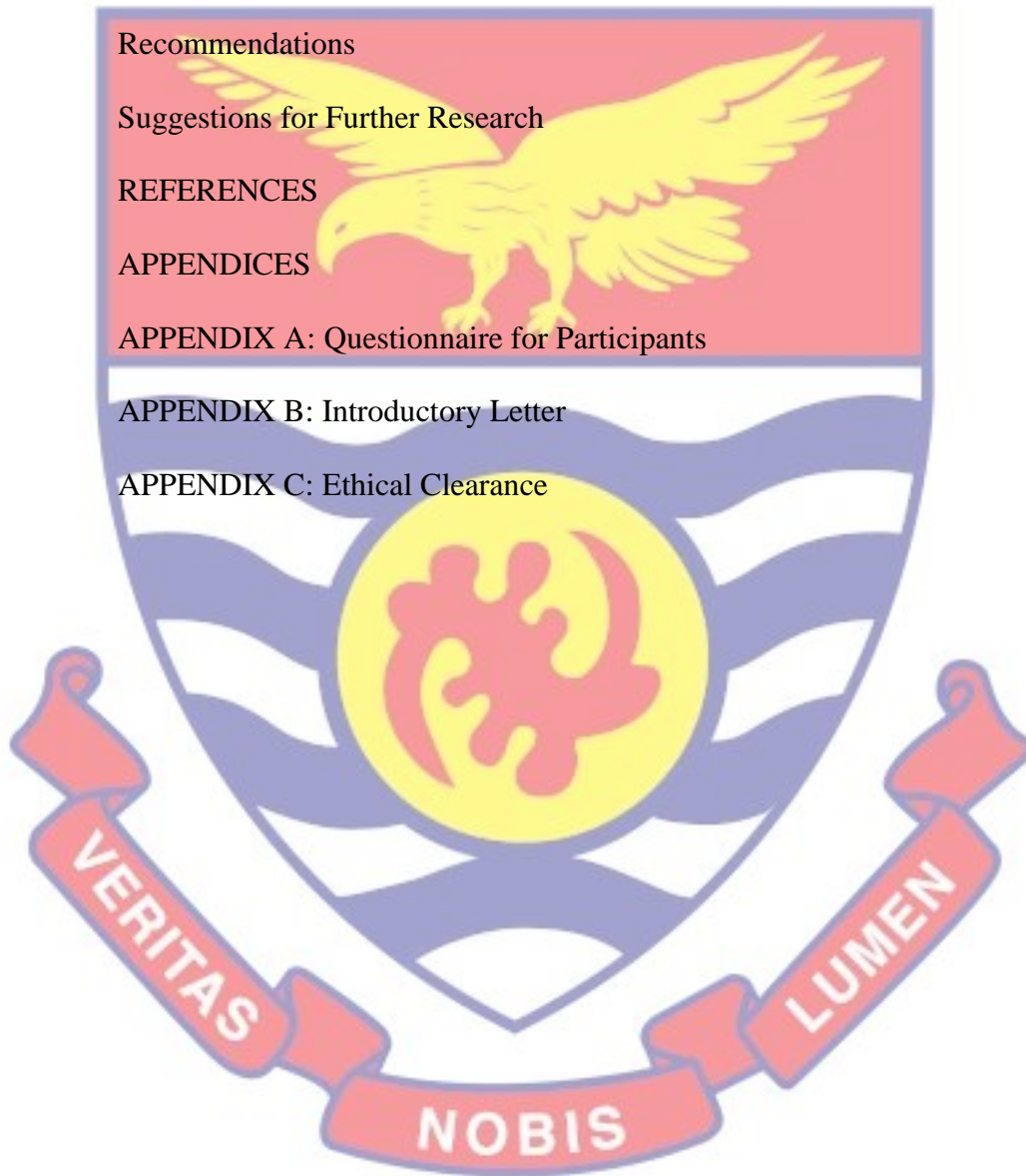
	Page
DECLARATION	ii
ABSTRACT	iii
ACKNOWLEDGEMENTS	iv
DEDICATION	v
TABLE OF CONTENTS	vi
LIST OF TABLES	xi
LIST OF FIGURES	xiii
CHAPTER ONE: INTRODUCTION	1
Background to the Study	1
Statement of the Problem	5
Purpose of the Study	8
Research Questions	9
Hypotheses	9
Significance of the Study	10
Delimitation	11
Limitation	11
Definition of Terms	11
Organisation of the Study	12
CHAPTER TWO: LITERATURE REVIEW	13
Theoretical Framework	13
Solution-Focused Therapy (SFT)	14
Solution-Focused Premarital Counselling	14
The Couple's Resource Map	16

Solution-oriented Questions	20
Providing Feedback	23
Cognitive Behavioural Couples Therapy (CBCT)	23
The Role of CBCT Counsellors	26
Possible mandates and motives for consultation in CBCT	27
Conflicts and violence	28
Infertility	28
Individual problems	29
Assessment in CBCT	30
Intervention techniques generally used in CBCT	31
Communication training	32
Problem-solving and conflict resolution	32
Identification and expression of emotions	33
Expression of affection and sexual problems	33
Acceptance and tolerance of differences	34
Individual Psychology	35
View of Personality	38
Social Information Processing (SIP) Theory	42
Conceptual Framework	45
Conceptual Review	46
The Concept of Marriage	46
Premarital Counselling	49
Factors responsible for instability in Christian marriage	50
Sex-Related Factors	50
Economic Factors	51

External Interference	52
Poor Communication	52
Psychological Factors	54
Hygienic Factors	54
Marital Adjustment	55
Premarital Counselling and Marital Adjustment	57
Empirical Review	60
Factors Influencing Marital Adjustment	60
The Role of Premarital Counselling in Marriage	62
Perception of premarital counselling	64
Summary of Literature Review	65
CHAPTER THREE: RESEARCH METHODS	67
Introduction	67
Research Design	67
Study Area	69
Population	70
Sampling Procedure	70
Data Collection Instrument	73
Pre-Testing of Instrument	74
Validity and Reliability	74
Data Collection Procedure	75
Data Processing and Analysis	75
Chapter Summary	76
CHAPTER FOUR: RESULTS AND DISCUSSION	77
Introduction	77

Analyses of Demographic Data of Respondents	77
Analysis of Main Data	80
Research Question One	80
Research Question Two	83
Hypotheses one	83
Hypotheses two	84
Hypotheses three	85
Hypotheses four	86
Hypotheses five	86
Discussions	87
Perception of married people in the Cape Coast Area of the church of Pentecost on premarital counselling.	87
Influence of premarital counselling on marital adjustment of married people in the Cape Coast Area of the church of Pentecost	89
Difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.	90
The difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.	90
Difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of the marriage.	91
Difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.	91
Marital adjustment levels of married people in the Cape Coast Area of the church of Pentecost who had premarital counselling and those who did not.	91

CHAPTER FIVE: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS	93
Summary	93
Key Findings	96
Conclusions	96
Recommendations	97
Suggestions for Further Research	97
REFERENCES	99
APPENDICES	121
APPENDIX A: Questionnaire for Participants	122
APPENDIX B: Introductory Letter	128
APPENDIX C: Ethical Clearance	129



LIST OF TABLES

Table	Page
1 Distribution of respondents in the 29 Districts	72
2 Gender of respondents	77
3 Age of respondents	78
4 Level of Education of respondent	78
5 Occupation of respondents	79
6 Counselling before marriage	79
7 length of marriage of respondents	80
8a Mean and Standard Deviation of Scores on Perceptions of married people who had premarital counselling on Premarital Counselling	81
8b Mean and Standard Deviation of Scores on Perceptions of married people who had no premarital counselling on Premarital Counselling	82
9 Mean and Standard Deviation of Revised Dyadic Adjustment Scale Scores	83
10 Independent sample t-test of the differences in the level of Marital on the basis of gender	84
11 ANOVA test of the difference in the level of marital adjustment on the basis of age.	84
12 ANOVA test of the difference in the level of marital adjustment on the basis of length of marriage.	85
13 ANOVA test of the difference in the level of marital adjustment on the basis of level of education.	86

- 14 Independent sample t- test of the difference in marital adjustment levels of married people who had premarital counselling and those who did not.

87



LIST OF FIGURES

Figure	Page
1 Couples Resource Map	17
2 Crick and Dodge's (1994) Social information processing model	43
3 Conceptual Model of the Study	45



CHAPTER ONE

INTRODUCTION

Marriage is a covenant between a mature male and a mature female who have agreed to live together by the marital rules of their religion and/or culture. According to Olayinka, (2001), marriage is a social institution for the union of a male and a female as body and soul. Individuals enter into marriage for certain reasons which include financial, legal, emotional, social, spiritual, libidinal, and religious purposes (Ansah-Hughes, Akyina, Oduro-Okyireh, 2015). Prospective couples need to prepare very well to be satisfied in the relationship. Couples can achieve satisfaction in their relationship if they prepare very well and can adjust to each other's way of life. The purpose of this study is to ascertain the influence of premarital counselling on marital adjustment among married people in the Church of Pentecost, Cape Coast Area, Ghana.

Background to the Study

Marriage is a legal and emotional compliment of two individuals to share physical and emotional intimacy, economic resources and various tasks (Olson and DeFrain, 2000). It is a legitimate sexual relationship between two individuals who recognize and agree to a kind of sacred or civil contract that upholds the expected permanence of the marriage and explains their shared duties toward each other and their future offspring. The marriage, as well as the contract, is recorded publicly typically a wedding and a banquet. Each member of the married couple shares a division of labour, which is sex-linked.

Marriage is a legitimate union between a biological male and a biological female as husband and wife (Arshad, Mohsin, & Mahmood, 2014). Marriage involves a life-long struggle and compassion, melancholy and felicitation, health and illness. It entails being young and becoming old, dealing with big and small glitches, managing external and internal privations and coercions. Couples live together for a long time. In this long phase, the couples dwell together in closeness, which exposes their strength and weaknesses. It becomes obvious that big things can matter a little while and small things can become dreadfully big.

A great disagreement may often arise over a trifling matter. Slipups and deficiencies are obvious in marriage. Through words expressions and actions, couples can hurt each other terribly (Thompson, 1990). Marriage consists of two elements. These are bodily elements (sexual desire etc.) and divine elements (respect, adoration, love, etc.). Getting to the end of life, these two elements come closer to each other and at a point in time the divine element (respect, love, etc.) manifest (Ramcharan, 2008 cited in Arshad, Mohsin, & Mahmood, 2014). Marriage is the highest and the most revered of all interactions of humans and must not be carelessly entered into.

There is a visible fact to prove that newly married couples most of the time encounter some adjustment problems in their marital life (Kelley, 1979; Silliman & Schumm, 1999). It is challenging to share life after courtship and during the young years of marriage; it includes tension and intricacy in all spheres of human existence. Several authors have indicated that would-be couples' inadequate knowledge of their partner and their impracticable anticipation of the marriage are significant factors, which result in future

unhappiness and marital instability in modern societies. Landis and Landis (1977) in their study, juxtaposed three groups, that is, married couples, couples going through counselling and divorced individuals, and discovered more of their differences before marriage. The results of the study revealed that individuals who are divorced, had the least cognizance of differences before marriage, those who are not happily married were the next and those who are happy in their marriage had the greatest awareness of the differences that were present. It is important for couples at the beginning of their marital life, to be aware of their differences and make the needed adjustments in the marriage (Kelly, 1979).

According to Kiuna and Kiuna (2012), couples, children and the community benefit immensely from marriage. Married couples, on average, are in good health than unmarried individuals (Finchnan, 2003). Marriages that are not healthy may expose couples to emotional, physical, financial, and mental risks (Lundbald & Hansson, 2005). This underscores the importance of ensuring that there is a healthy marital relationship.

Marital instability affects all persons irrespective of their age, cultural background and race and most of the time result in divorce. According to Kepler (2015), most people enter marriage with the hope of enjoying life and having their expectations met. Mobegi, Mokoro and Keari (2016) added that marriage that is successful is a cherished goal for the greater number of people all over the world and that marriage is an age-old institution that is recognized world-over albeit in different forms and statuses. Hence, ensuring stability in marriage is an imperative undertaking.

Premarital counselling refers to arranged meetings between prospective couples preparing for marriage and a third party purposely for assisting prospective couples to assess their relationship and familiarize themselves with the ways by which they might build a successful and happy marriage (Mobegi, Mokoro & Kears, 2016). Premarital counselling aims to prepare prospective couples to start a healthy and good relationship (Myrick, Green & Crenshaw; Stahmann & Hiebert, 1997, 2014 cited in Cobbinah & Osei-Tutu, 2019). According to Harway and Faulk (2005), premarital counselling is a form of training that equips couples with the needed skills to better their relationship. For relationships and family lives to be better, then institutions have to highlight and strengthen their counselling activities and interventions (Doria, Kennedy, Strathie, & Strathie, 2014). Even though premarital counselling is aimed at guaranteeing an enhanced relationship, it as well helps to avert glitches that may arise in the marriage, which could result in separation or divorce, then again improve the quality of the relationship (Stanley, Amato, Johnson, & Markman, 2006 cited in Cobbinah, & Osei-Tutu, 2019). It is argued, however, that further than just holding marriage ceremonies for prospective couples, some religious groups and organizations organize premarital counselling for persons who desire to enter into marriage. The benefits of premarital counselling manifest when a person cogitates the possibility of encountering significant challenges in the early life of the marriage, the ramifications of distress in marriage and the high divorce rate (Halford & Simons, 2005). Equipping couples with the necessary knowledge and skills to upsurge the prospect of healthy and satisfactory marriages and a reduction in distress in marriages is the aim of premarital counselling.

According to William (2007), premarital counselling should be made mandatory for all would-be couples because counselling would help in providing information to the couple planning to get married to make the necessary adjustments in their relationship after marriage. This shows the importance of premarital counselling as a remedy to saving marriages.

Despite the benefits people derive from marriage and the importance of premarital counselling in enhancing marital adjustment, which holds the marriage in balance, many marriages are full of problems, which sometimes result in separation or divorce. This might be due to the absence or inadequate premarital counselling or the inability of the couple to apply the knowledge acquired in the counselling process to adjust to the marital environment.

Statement of the Problem

There is no marriage without adjustment problems because couples come from different backgrounds with different perceptions and understanding of life. This may spark up a rift between the couples in their marital journey. The marriage may bow to divorce or separation if disagreements between couples are not resolved. Premarital counselling provides couples with the knowledge and skills to resolve differences that may arise in their marital life.

There has been a move towards premarital programmes to strengthen marital life. Marital training for prospective couples is a new method to elude and avert dissatisfaction in marriage and marriage breakdown, especially in the church. According to Stelzer (2010), couples are capable of learning how to build a stable and successful marriage. As a result, premarital counselling is therapeutic, preventive and educational (Doss, Rhoades, Stanley, Markman & Johnson, 2009).

Gottman (1999) indicated that 50% of people who get married in the US end up in divorce courts. The rate of divorce in Ghana is disturbing. Between 2015 and 2017, 2,276 customary marriages were contracted and 737 ended up in divorce in the Accra Metropolitan Assembly (Statistical Report, Judicial Service of Ghana, Accra, 2017). Marriages may end up in divorce if the couples are not able to adjust to each other's way of life and behaviour. Generally, premarital counselling is a process designed to improve and deepen premarital relationships, which will eventually lead to stable and satisfactory marriages aimed at preventing divorce (Stahmann, 2000).

Evidence is available to prove that premarital counselling brings about happier marriages even though there is no concrete proof that indicates that it decreases the rate of divorce (Waichler, 2011 cited in Ntim, 2014). A study conducted in India revealed that pre-marital counselling can decrease up to 30% the possibility of divorce (Siddiqi, 1996). A research carried out in the United States of America (USA) to determine the state of marriages indicated that, 50% of marriages end up in divorce and that premarital counselling reduces the divorce rate by 30% (Phegley, 2003). Similarly, Jayson (2006) also did a study on how premarital counselling could cut the divorce rate with 3,344 couples in the USA. The findings of the study showed that married people who went through premarital counselling had a 31% less chance of failure in marriage. Premarital counselling could greatly increase the chance of a couple to achieve marital success (Adzovie & Dabone, 2021). Premarital counselling is a systematic and structured process, which comprises an introduction to the purposes of marriage, awareness about the right criteria for marriage, male and female psychology, sex education and the essential

conditions for going into marriage (Sherman, & Fredman, 2013). Premarital counselling also serves as the foundation for the improvement of the relationship among couples. It comprises active listening, skills of communication, conflict management skills, satisfactory relationship, emotional control, increased awareness and problem-solving skills. It also includes the ability of couples to understand themselves, others and marriage, deepening the bond between them as well as strengthening the knowledge and understanding they have about the challenges that exist in marriage (Davazdahemami, Ghasemi, & Ehsanpour, 2004).

Despite the far-reaching benefits of premarital counselling on marital adjustment, few studies have been done in this area to highlight the important role premarital counselling plays in enhancing marital adjustment. Most of the researches on the impact of premarital counselling on marriage are centred on premarital counselling and marital satisfaction or premarital counselling and marital stability. Stability and satisfaction in marriage cannot be achieved if couples are not able to adjust to each other and their new environment. Few studies done on premarital counselling and marital adjustment are focused on other churches but not the church of Pentecost. For instance, Ntim (2014) did a study to ascertain the effect premarital counselling has on marital adjustment among Christian couples in the Cape Coast Metropolitan Assembly. The study did not include couples in the church of Pentecost. The study also did not establish a significant difference in the marital adjustment levels of Christian couples who had premarital counselling and those who had no premarital counselling which is contrary to the findings of Egbo (2011) in Enugu, Nigeria and Jayson (2006) in the USA. Therefore, this study seeks to ascertain the

influence of premarital counselling on marital adjustment among married people in the Church of Pentecost, Cape Coast Area, Ghana.

Purpose of the Study

The main purpose of the study was to find out the influence of premarital counselling on marital adjustment among married people in the

Cape Coast Area of the church of Pentecost. This study specifically sought to:

1. Find out the perception of married people in the Cape Coast Area of the church of Pentecost on premarital counselling.
2. Find out the influence of premarital counselling on marital adjustment of married people in the Cape Coast Area of the church of Pentecost
3. Find out the difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.
4. Ascertain the difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.
5. Ascertain the difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of the marriage.
6. Ascertain the difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.
7. Ascertain the difference in the marital adjustment levels of married people in the Cape Coast Area of the church of Pentecost who had premarital counselling and those who did not.

Research Questions

This study was guided by the following research questions:

1. What perceptions do married people in the Cape Coast Area of the church of Pentecost have on premarital counselling?
2. What is the influence of premarital counselling on the marital adjustment of married people in the Cape Coast Area of the church of Pentecost?

Hypotheses

The following hypotheses were formulated to guide and the study.

H_01 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.

H_{A1} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.

H_02 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.

H_{A2} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.

H_03 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of marriage.

H_{A3}: There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of marriage.

H₀₄: There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.

H_{A4}: There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.

H₀₅: There is no significant difference in the marital adjustment level of married people in the Cape Coast Area of the church of Pentecost who had premarital counselling and those who did not.

H_{A5}: There is a significant difference in the marital adjustment level of married people in the Cape Coast Area of the church of Pentecost who had premarital counselling and those who did not.

Significance of the Study

The findings from this study would bring to light the importance of premarital counselling to marital adjustment. This would cause premarital counsellors to put in place the necessary measures to improve the premarital counselling process to fall in tandem with changing trends relative to contemporary marriages. It would also bring the attention of would-be couples to the usefulness of premarital counselling relative to marital adjustment so that they will open up to the premarital counselling process. The findings of this study would add to the literature on premarital counselling and its effect

on marital adjustment. It will serve as a reference point for premarital counsellors.

Delimitation

The scope of the study was limited to married people in the Cape Coast Area of the Church of Pentecost. The finding of this study can only be generalised to married people in the Cape Coast Area of the Church of Pentecost.

Limitation

Generally, questionnaires are self report method of collecting data where people answer questions because they feel they are forced to respond and therefore might not report what they are really going through. Also, another area of limitation is the fact that not all respondents were highly literate and therefore might not respond to the questionnaire on their own without interpretation. However, measures were put in place to reduce the effects of these limitations on the validity and reliability of the study. The purpose of the study was well explained to the respondents and were encouraged to participate in the study. They were also made to voluntarily participate in the study and the liberty to withdraw from the study anytime they feel uncomfortable.

Definition of Terms

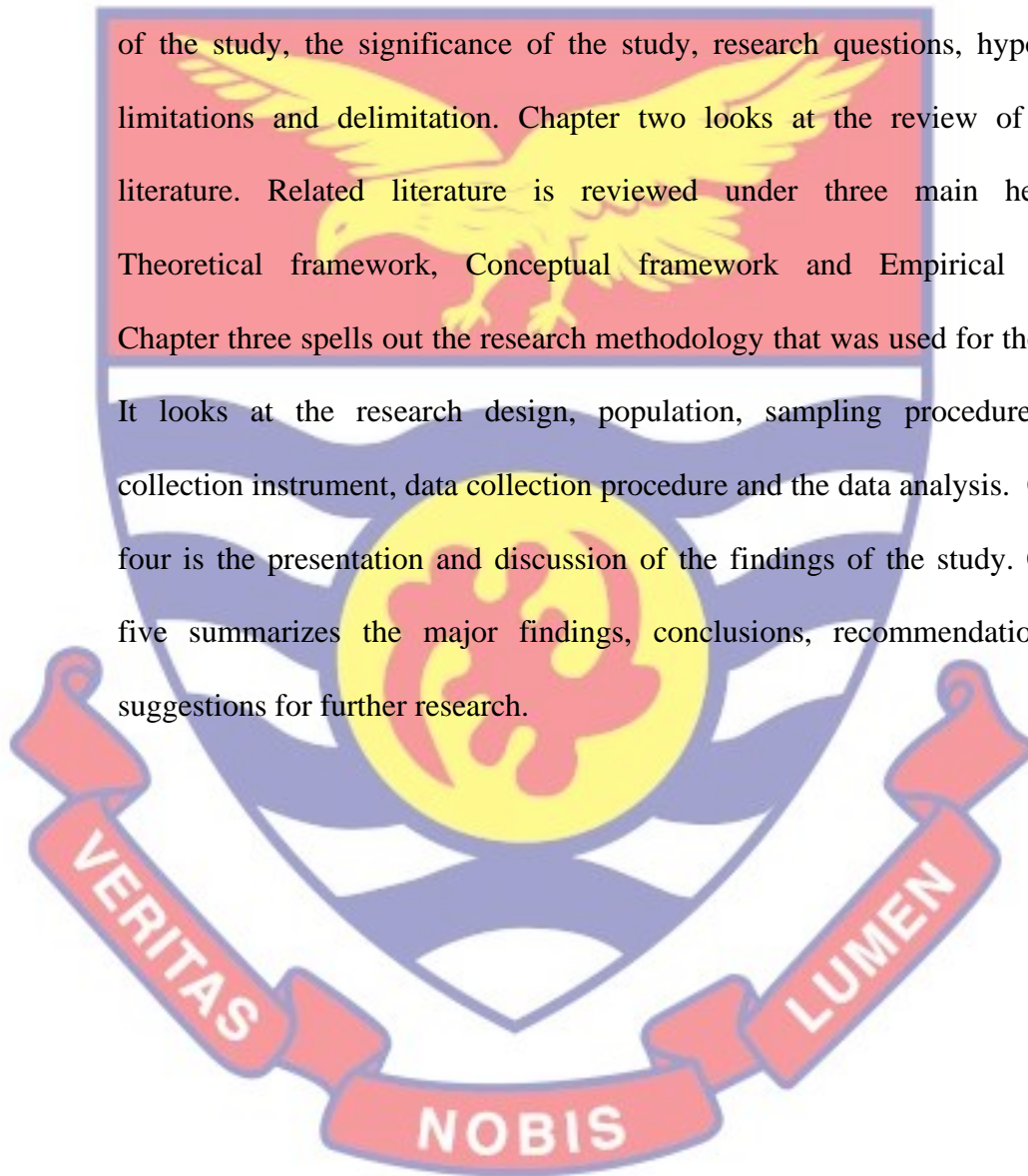
Counselling: It is a process of assisting an individual to solve his or her problem.

Premarital Counselling: it is the process of equipping would-be couples with the needed knowledge and skills to help them manage marital problems.

Marital Adjustment: The process whereby couples adapt to changes in their marital environment.

Organisation of the Study

The study comprises five chapters. Chapter one introduces the study. It includes the background to the study, statement of the problem, the purpose of the study, the significance of the study, research questions, hypotheses, limitations and delimitation. Chapter two looks at the review of related literature. Related literature is reviewed under three main headings; Theoretical framework, Conceptual framework and Empirical review. Chapter three spells out the research methodology that was used for the study. It looks at the research design, population, sampling procedures, data collection instrument, data collection procedure and the data analysis. Chapter four is the presentation and discussion of the findings of the study. Chapter five summarizes the major findings, conclusions, recommendations and suggestions for further research.



CHAPTER TWO

LITERATURE REVIEW

The purpose of the study was to find out the influence of premarital counselling on marital adjustment among married people in the Cape Coast Area of the church of Pentecost.

This chapter examines the literature related to the study. The literature is examined in three sections: theoretical framework, conceptual framework and empirical review.

The theoretical review covers Solution-Focused therapy, Cognitive Behavioural Couples Therapy, Individual Psychology and Social Information Processing (SIP) Theory. The conceptual framework captures the concept of marriage, premarital counselling, factors responsible for instability in Christian marriages, marital adjustment and premarital counselling and marital adjustment. The empirical review looks at factors influencing marital adjustment, the role of premarital counselling in marriage and the perception of premarital counselling.

Theoretical Framework

The theoretical framework will cover the following theories.

1. Solution-Focused Therapy
2. Cognitive Behavioural Couples Therapy (CBCT)
3. Individual Psychology
4. Social Information Processing (SIP) Theory

Solution-Focused Therapy (SFT)

Solution-focused therapy underscores the strengths of clients and their efforts to produce required solutions to their problems. In the early 1980s, Solution-focused therapy was birthed from Steve de Shazer's work (Friedman & Lipchik, 1999).

Using SFT, the therapist and client primarily focus not on the existing problem but the solutions (O'Connell, 1998). Solution-focused therapy does not draw attention to the past unless the present and future solutions are linked to the past (Friedman & Lipchik, 1999). Again, Walter and Peller, (1992) believe it approves the clients' ingenuity. According to Hoyt and Berg, (1998a), the basic rules of SFT are, "1. If it isn't broke, don't fix it; 2. Once you know what works, do more of it; and 3. If something doesn't work, don't do it again; do something different" (p. 204). Therefore, SFT emboldens simple, adaptive solutions. It is grounded on the supposition that "small changes produce larger changes" (Walter & Feller, 1992). Primarily, the solution-focused approach is centred on change, and change happens when the focus of clients gravitates towards competencies and solutions. Even though at any point in time change can happen, the solutions that bring about the change may have no direct or obvious relation to the problems (Walter & Peller, 1992; O'Connell, 1998). Quick (1996) believes that change comes about when the client "does something different" (p. 7).

Solution-Focused Premarital Counselling

Solution-Focused Therapy is expedient to use in premarital counselling for the reason that it is a brief, resource-based approach. It engages prospective couples to create a vision together for their marriage in future.

After creating this vision, the would-be couples outline strategies that would trigger changes, which will provide them with direction to their vision. The counsellor can employ a variety of approaches to help would-be couples to develop and progress to their vision for the marriage. Solution-Focused Therapy can be applied to many topics typically treated in premarital counselling, such as conflict resolution skills, communication, finances, extended family relationships and parenting (Parish, 1992; Stahmann & Salts, 1993; Bodenmann, 1997; Russell & Lyster, 1992; Williams & Riley, 1999). Hence, Solution-Focused Therapy does not dictate a permanent instruction for premarital counselling, but can be used to augment every premarital counselling programme.

SFT approach to premarital counselling must focus on helping would-be couples to actuate the resources and skills they already have (Hoyt & Berg, 1998b) to facilitate their gravitation towards their mutual vision (Friedman & Lipchik, 1999). Additionally, Hoyt and Berg (1998a) hold the view that the core function of the practitioner is to assist to create a link between the personal visions of each partner to develop a shared vision. Counsellors must show positive regard to each couple's kind and special resources and strengths in the course of the premarital counselling when using a solution-focused approach. According to Friedman (1993), the premarital counsellor must uphold a future orientation and have to pay attention to the objectives and goals of the would-be couples in their marital preparation. The counsellor may integrate skills training into "solution-focused" premarital counselling meetings when appropriate (Hoyt & Berg, 1998b). Therefore, solution-focused premarital counselling is compatible with current instructional methods in

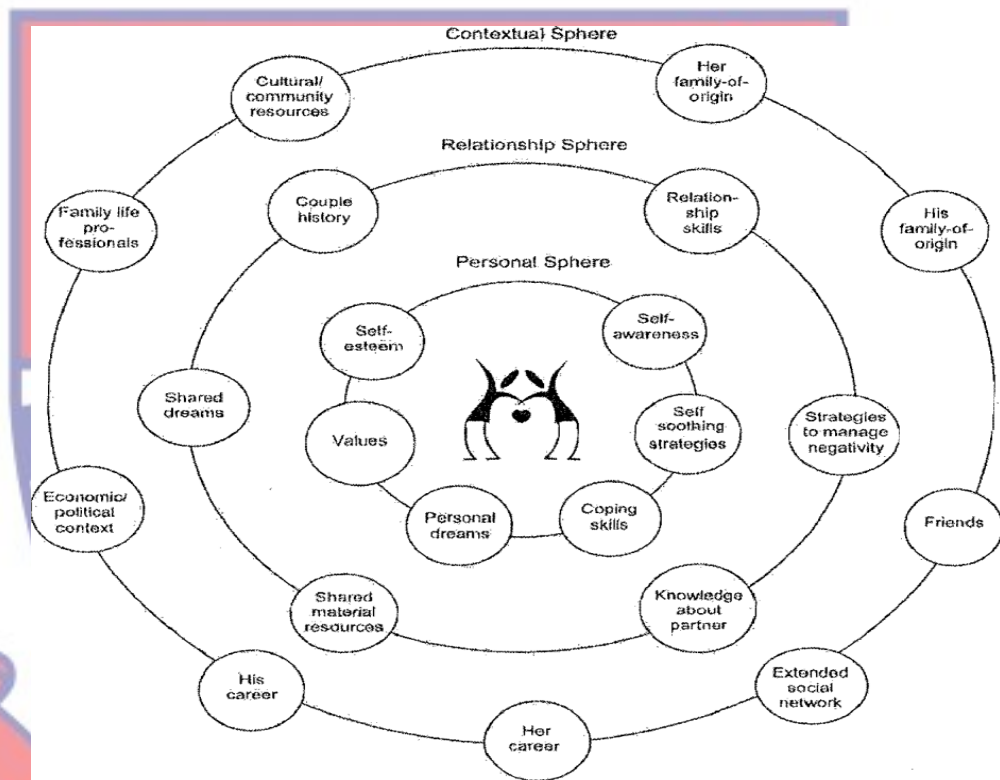
conflict-resolution skills and communication skills. In consort with the general orientation in the direction of solutions, counsellors may integrate particular interventions that are ingrained in SFT, including “(i) the Couple's Resource Map, (ii) solution-oriented questions, and (iii) providing feedback”. Below are a detailed description of these interventions and their application.

The Couple's Resource Map

According to DeJong and Berg (1998), the Couple's Resource Map is in tandem with the solution-oriented supposition that people are capable of employing obtainable resources to enable them to build solutions to deal with glitches. The purpose of the map is to aid couples to find rudimentary resources that will help them to develop solutions to the problems they face. Would-be couples cannot foresee every problem they will encounter in their marital life during premarital counselling. For that reason, counsellors help couples to identify relevant general support sources capable of helping them to handle a variety of marital problems they may face. The map is a tool that guides this process. Fundamentally, the map, which is a pictographic scale, measures perceived support of couples in three areas of life: “(a) Individual resources, (b) relationship resources, and (c) contextual resources”.

The map can be used by premarital counsellors as an assessment and an intervention tool in the counselling process. The map as an assessment tool gives room for the counsellor to evaluate the existing support level and available resources at the disposal of the couple. It provides the couple with feedback for when they compare and share their maps. Thus, the Couple's Resource Map is a tool for learning for each of the partners to obtain useful facts about himself or herself, the would-be spouse, and their vision for the

relationship. O'Connell (1998) holds the view that as an intervention and assessment tool, the map is used to fall in line with the assumption of the solution-focused theory that intervention and assessment are simultaneous and continual parts of treatment



Colour each circle according to how much you believe each area will provide resources for your marriage.

Red: A lot of support

Orange: Some support

Yellow: A little support

Green: No support

Blue: Takes support away

Figure 1: Couples Resource Map

In the presentation of the map to the prospective couples, the counsellor will explain the significance of identifying resources, which would help them to manage problems when they face them in future. Counsellors provide prospective couples with coloured pencils, markers, or crayons, which they will use to colour their map following given instructions. To begin with,

each partner will be required to complete his or her version of the map. After the completed individual maps are discussed, couples can jointly complete the map. The counsellor may give details about the resource areas each and give examples of specific resources in each category, whereas the prospective couple is made to complete the map. Information about each category on the map is described below.

Personal sphere. "Self-esteem", tells the way the individual perceives herself or himself. It comprises negative or positive self-feelings, "Values" define what each individual believes is essential. For instances security, happiness, or family togetherness. "Personal dreams" comprise the dreams and hopes each individual holds for the future (Gottman, 1999). Instances may include being a good parent or having a successful career. "Coping skills" consist of problem-solving skills as well as beliefs about the feeling that an individual has about how he or she can manage his or her problems. "Self-soothing strategies" describes strategies or abilities one can use to relax in a stressful and frustrating situation (Gottman, 1999), "Self-awareness" describes an individual's knowledge about himself or herself, as well as the individual's understanding about the way he or she thinks and acts.

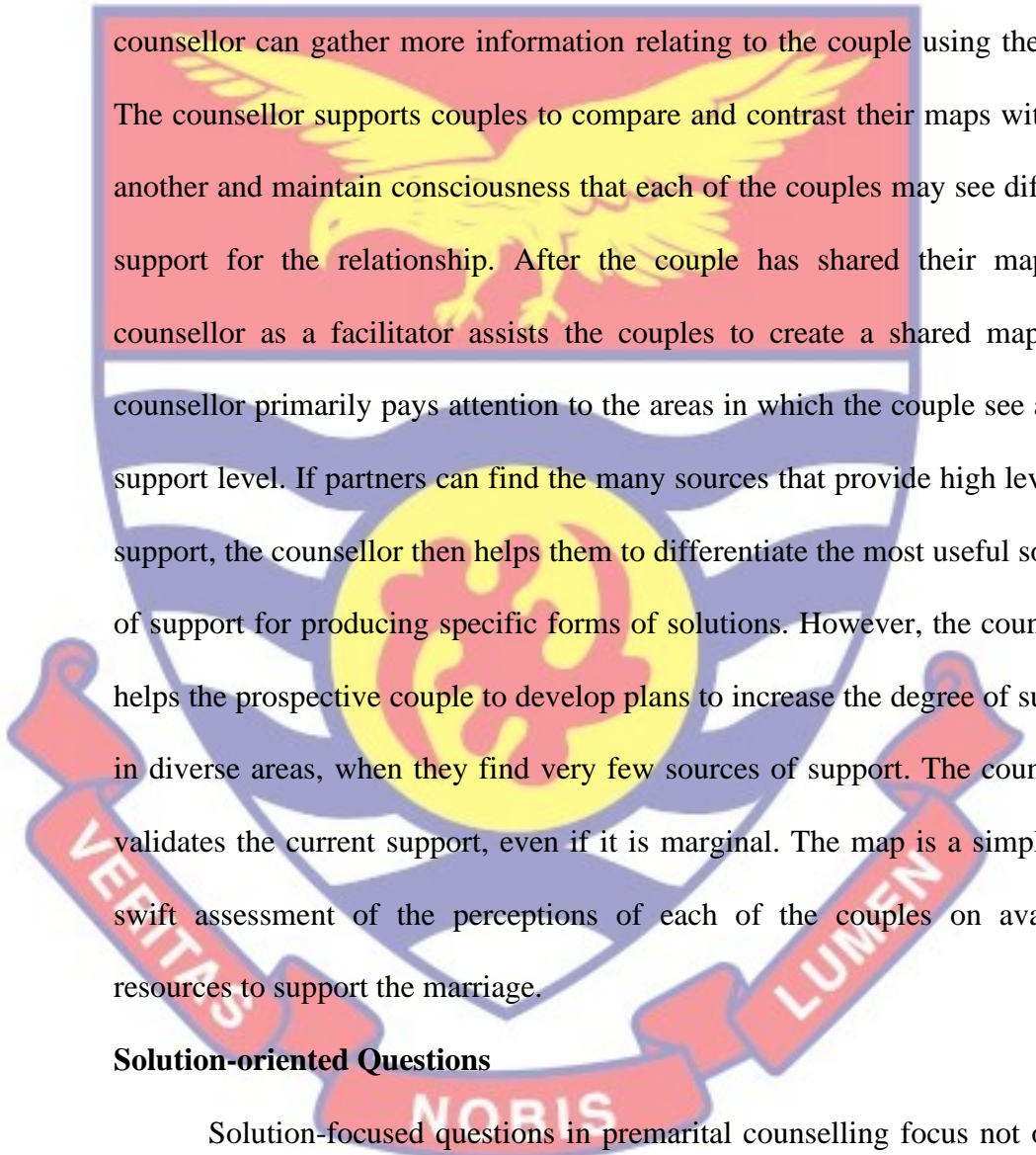
Relationship sphere. "Couple history" includes information relating to the couple's relationship development (Gottman, 1999). This includes how long the couple have been together and their shared experiences. "Shared dreams" highlights the hopes and dreams the couple share relative to their relationship (Gottman, 1999). A typical example is the desire to get to their "fiftieth anniversary" or to nurture prosperous offspring. "Shared material resources" comprise the resources available for couples to share after marriage, for

instance, cars, a house, investment accounts and incomes. "Knowledge about partner" is the knowledge an individual has acquired about his or her spouse, which includes being appreciative of the partner uniqueness of the actions or thinking (Gottman, 1999). "Strategies to manage negativity" comprises the abilities of the couple to cope and decrease harmful exchanges or feelings (Gottman, 1999). They include taking time to relax or compassionate listening skills (Gottman, 1994). "Relationship skills" are the useful skills that are needed in the improvement of the aspects that are positive in the relationship, which includes negotiation, compromise and communication skills.

Contextual sphere. "Cultural/community resources" comprise community and supports culture gives to the marriage. This includes campaigns that promote marriage, religious communities, or marriage supporting norms relative to culture. "Family life professionals" comprises educators of family life, family and marriage counsellors, and clergy among others. Married couples must be willing to patronise these professionals' services. "Economic/political context" refers to national policies and economic trends that affect marriage. This may comprise an economy that is resilient having low unemployment rates and government policies that are friendly. "His career and Her career" are the support sources that could be found in the career path of each partner. These include favourable working conditions, family vacations and flexible work schedules. "Extended social network" comprises social contacts that could offer direct or indirect support for the couple, such as neighbours, colleagues and friends. The "Friends" category describes each couple's close friends or other married couples who may be ready and willing to offer emotional, physical, or any other relevant assistance. "His family-of-

origin" and "Her family-of-origin" comprises close and distant relatives who may offer emotional, physical, or any other relevant support.

Processing the Couple's Resource Map. After the couple have individually completed the map, the counsellor guides an examination of the views of each couple on the resources at their disposal for their forthcoming marriage. The



counsellor can gather more information relating to the couple using the map. The counsellor supports couples to compare and contrast their maps with one another and maintain consciousness that each of the couples may see different support for the relationship. After the couple has shared their map, the counsellor as a facilitator assists the couples to create a shared map. The counsellor primarily pays attention to the areas in which the couple see a high support level. If partners can find the many sources that provide high levels of support, the counsellor then helps them to differentiate the most useful sources of support for producing specific forms of solutions. However, the counsellor helps the prospective couple to develop plans to increase the degree of support in diverse areas, when they find very few sources of support. The counsellor validates the current support, even if it is marginal. The map is a simple and swift assessment of the perceptions of each of the couples on available resources to support the marriage.

Solution-oriented Questions

Solution-focused questions in premarital counselling focus not on the problems but solutions. For instance, as an alternative to asking a couple, "What are the biggest problems in your relationship so far?" a "solution-oriented" counsellor might ask, "If problems didn't exist, what your relationship would look like?" (O'Connell, 1998). Counsellors have to pay

attention especially to the use of language when addressing partners in premarital counselling. According to Friedman (1993), the kind of language the counsellor and the would-be couples use tends to orient the therapeutic interaction to the problems or the solutions. Additionally, in solution-oriented questions, the counsellor can adopt three particular categories of questions:

“(1) The miracle question, (2) scaling questions, and (3) exception questions”.

The miracle question. During the counselling process, the "miracle question" asks couples to express their experiences if a miracle occurs to resolve their glitches (O'Connell, 1998). For example, “If a miracle was to happen, and your marriage was exactly how you want it to be, what would be the first thing you would notice?” This question seeks to help bring out information relating to the marital vision of each of the couples. The counsellor must follow the "miracle question" by thoroughly exploring the miracle, and be careful especially to the use of language by the couple (Quick, 1990). The "miracle question" can help prospective couples to develop a visible picture of their marital vision (O'Connell, 1998), especially when there is a full exploration of the miracle (Walter & Peller, 1992). According to DeJong and Berg (1998), when the "miracle question" is used well, it could stimulate the ideal vision each couple has relating to the marriage and limitless possibilities that could develop the marriage. It is also capable of helping in the provision of clues to couples who are engaged on how to draw closer to their vision of a fulfilling marriage.

Scaling questions. Throughout premarital counselling, "scaling questions" can be employed to guide couples to find their position, which is in line with their premarital counselling goals (O'Connell, 1998). A typical example of a

"scaling question" that is usually used in premarital counselling is, "On a scale from one to ten, how confident do you feel that your marriage will be satisfying?" Specifically, the application of "scaling questions" to communication skills is, "On a scale from one to ten, how comfortable do you feel in telling your partner your feelings?" If the answer of the couple was seven, it could be followed up with the question, "What would need to be different for you to answer with an eight?" "Scaling questions" can make available baseline information to the counsellor relating to the special needs of each couple (Quick, 1990). Using "Scaling questions" could help to elucidate ways the couple can cause small changes in their relationship, which can be visible over time when "scaling questions" are looked at again in successive meetings (O'Connell, 1998). Therefore, according to Hoyt and Berg (1998a) "scaling questions" help to highlight the movement of the couple towards their goals. Scaling questions are beneficial in premarital counselling for the reason that they are flexible and make available a lot of information to the couples and the counsellors,

Exception questions. Counsellors can ask questions that are capable of helping couples to identify instances when their problems are absent (DeJong & Berg, 1998). To assist the couple to become conscious of purposeful and/or spontaneous times when problems are not present, exceptions are highlighted (Clark-Stager, 1999). A typical example of an "exception question" that could be employed in premarital counselling is, "Can you tell me about a time when you did not feel nervous about getting married to your fiancé". For the reason that couples may experience exceptions deliberately or spontaneously. It is imperative for the counsellor to wholly explore the exceptions revealed

(DeJong & Berg, 1998; Walter, & Peller, 1992; Quick, 1990). Exception questions in premarital counselling can assist couples to find strategies to develop solutions in their relationship.

Providing Feedback

In Solution-Focused Therapy, the practitioners provide feedback to the couple toward the end of the session. Primarily, the feedback centres on the growth and strength of the client. Additionally, it includes a set of tasks the client must complete, which is designed to assist the couple to move to a positive change (Walter & Peller, 1992). Feedback in this form can be used in premarital counselling. Before giving the feedback, the counsellor should take a short break out of the consulting room so that he or she can facilitate the most worthwhile response (Hoyt & Berg, 1998a). Additionally, feedback must integrate three components: “(a) Validation of each person's perceptions and emotions, (b) a transitional statement, and (c) a suggestion that may help the couple move towards their goals”. Usually, the feedback given to the couple in premarital counselling helps them to bring together the information they have gathered about themselves and develop plans to continue moving to achieve their goals.

Cognitive Behavioural Couples Therapy (CBCT)

The origin of Cognitive Behavioural Couples Therapy stems primarily from the work of Stuart on couples' behavioural exchanges (Stuart, 1969). His analysis was based on interactions of the couple on principles of learning (Bandura, 1961) and "social exchange theory" (Thibaut & Kelley, 1959), assuming that a persons' evaluation of relationships would be dependent on the benefits to costs ratio, occasioning out of negative and positive relations

with others. Stuart (1969) consequently suggested a behavioural exchanges pattern where a dichotomy could be created between successful and dysfunctional relationships by the occurrence of negative and positive behavioural interactions. Positive behaviours comprise constructive problem solving as well as listening and expressing in an empathic manner to each other, but negative behaviours are the expression of hostility, criticism, withdrawal or contempt from interaction with each other.

Early behavioural couple therapies (Jacobson & Margolin, 1979; Wright & Sabourin, 1985) primarily focused on behaviour changes and the skills acquisition directed at increasing the occurrence of positive behaviours and minimizing behavioural exchanges that are aversive through the development of effective problem-solving and communication strategies (Wright, Sabourin, Lussier & Poitras-Wright, 2008). Behavioural couple therapy has expanded by the inclusion of interventions that address cognitions and emotions leading to dissatisfaction and conflicts. This achievement is a result of emphasising the significance of attributions, beliefs that are dysfunctional and distorted cognitions in the evaluation of the relationship of romantic couples (Baucom & Epstein, 1990). For example, by attending selectively to particular characteristics or behaviours in the couple or by drawing nigh to the partner with expectations relating to how he or she ought to act or be, persons will perceive differences in the way they appreciate their partner in the relationship. Cognitions likewise show the way information is processed by partners, which originate from the behaviours of others, which direct how they interpret events and expectations towards the other and the relationship (Baucom & Epstein, 1990).

Jacobson and Christensen (1996) in their work amplified strategies of acceptance as a means of assisting couples to admit the fact that they are not the same and therefore learn to react positively to incompatibilities or difficulties in the marital relationship. Epstein and Baucom (2002) also stressed the importance of bearing in mind the vulnerabilities of couples and the influence of their environment as part of the manifold factors that can modify the companions' behaviours, cognitions and emotional responses.

Cognitive Behavioural Couples Therapy's specificity rests on its dynamic understanding that intimate relationships can be influenced by cognitions through each couple's appraisals or interpretations of stressors and the behaviours of their companion (Epstein & Zheng, 2017). Furthermore, the interpretations couples give to the behaviours of the other will ascertain the negative and positive emotions experienced towards the other. These emotions are considered to impact future behaviours and cognitions (Wright, Sabourin, Lussier & Poitras-Wright, 2008). In Cognitive Behavioural Couples Therapy, emotions, thoughts and behaviours are seen as connected and likewise significant in the functioning of the relationship (Fischer, Baucom & Cohen, 2016).

In summary, the central objective of Cognitive Behavioural Couples Therapy is to assist couples to understand the challenges they have so that they can improve their interpersonal well-being by recognising and challenging the processes prevailing in the relations of the couple and considering the external factors that can affect them. For this to happen, Cognitive Behavioural Couples Therapy does not solely rely on behavioural interventions to treat couple difficulties but also underscores how important to work on various

environmental, cognitive and emotional factors that affect the functioning of the couple (Fischer, Baucom & Cohen, 2016). Interventions of CBCT as well focus on assisting couples to identify, express and regulate strong or adverse feelings when they are perceived in and out of the counselling process. Cognitive Behavioural Couples Therapy practitioners assist couples to build

their capacity to observe and adjust their instinctive thoughts, standards and assumptions and identify the effect their thinking, feeling, interpreting and behaving have on their relationship (Epstein & Zheng, 2017).

The Role of CBCT Counsellors

Cognitive Behavioural Couples Therapy counsellors have varying roles relative to the needs of clients and the stage of therapy (Baucom, Epstein, Kirby & LaTaillade, 2015). For example, in the first sessions of Cognitive Behavioural Couples Therapy, the counsellor usually uses “psychoeducation” to apprise couples on the approach and associated intervention and facilitate to create a safe and supportive environment where concerns or emotions may be freely expressed. However, CBCT counsellors can also use a more directive approach to address interactions that are dysfunctional or increase to build and keep an environment that is safe for therapy and assist couples to understand the present situation and learn new and appropriate means of handling disagreements between them (Sabourin, Lorange, Wright, Lefebvre, Poitras-Wright, 2008). During the counselling sessions, Cognitive Behavioural Couples Therapy counsellors can also assume a didactic role, for example, when teaching couples problem-solving and communication skills (Jacobson & Margolin, 1979). They can also serve as guides and assist couples to identify the reciprocal relations between their

behaviours, emotions and cognitions (Epstein, Baucom, 2002). In Cognitive Behavioural Couples Therapy, the counsellors assume the responsibility of creating and sustaining therapeutic cooperation with the couples (Baucom, Epstein, Kirby & LaTaillade, 2015). Preparing the grounds for healthy cooperation in the therapy, the counsellor must expeditiously arrange meetings where there is a fair allocation of time for each spouse to speak and express himself or herself (Sabourin, Lorange, Wright, Lefebvre & Poitras-Wright, 2008).

Possible mandates and motives for consultation in CBCT

At the initial step, what a CBCT counsellor embarks on is to interrogate the expectations and objectives of partners relative to the counselling process. There are three central therapeutic mandates in couple therapy namely, “the alleviation of distress, ambivalence resolution and separation intervention” (Poitras-Wright & St-Père, 2004). Reliably, therapeutic mandates can be categorised and reviewed in the counselling process to consider the couples’ specific needs, which may change over time (Tremblay, Fortier, Leblond, de Brumath & Julien, 2008). In Cognitive Behavioural Couples Therapy, mandates are conducted differently. The extra session is given to crisis intervention. These mandates are described below.

Alleviation of distress and relationship improvement

Cognitive Behavioural Couples Therapy has gathered strong empirical support over the years, for its efficacy to lessen distress in the relationship and improve couple functioning (Fischer, Baucom & Cohen, 2016). The therapeutic goals formulated by the couples concerning lessening of distress revolve around problems of communication, sexual problems, discontent with

the showing of affection and emotions, financial problems in addition to issues relating to decision making or problem-solving (Boisvert, Wright, Tremblay & McDuff, 2011; Miller, Yorgason, Sandberg & White, 2003). Owing to how frequent some of these concerns come, they are usually addressed using common CBCT interventions.

Conflicts and violence

Many married couples have difficulties in resolving conflicts that arise in their marriage. These difficulties affect greatly their functioning and satisfaction in the marital relationship (Stinson, *et al.*, 2017). Nevertheless, the fulfilment couples achieve in their marital relationship is dependent on the ability of couples to manage their disagreements (Grieger, 2015). Consequently, unsettled conflicts are among the most common motives of consultation for couples' therapy (Boisvert, Wright, Tremblay & McDuff, 2011). Techniques in CBCT are designed to enhance patterns of positive interaction in couples and enhance problem solving and skills of communication so that conflicts would be reduced in the marital relationship (Fruzetti, 2006). Prospective couples would be able to adjust to their marriage if they can manage the inevitable conflict that may arise in their marital life. Spousal conflicts can also spiral into violence (Marshall, Jones & Feinberg, 2011).

Infertility

According to Sullivan, Adams and Gauthier (2008), there is a growing number of couples who face fertility problems, averagely, 10% to 15% of married couples experience issues of fertility. Infertility is a major crunch for many couples and could be a “significant traumatic” event, which has hefty

ramifications on couples' relational and personal well-being (Hassani, 2010). Certainly, infertility and the many repercussions of its treatment, for instance, cost and time required as well as the condition of being uncertain of the results (Sullivan, Adams & Gauthier, 2008; Hassani, 2010), can bring about psychological repercussions, particularly high-stress levels (Benyamini, Gozlan & Kokia, 2005). It can also result in low self-esteem, depression, life and marital dissatisfaction (Ramezanzadeh *et al.*, 2004; Slade, Raval, Buck & Lieberman, 1992), denial and sadness (Hassani, 2010) and feelings of guilt (Hassani, 2010). Cognitive Behavioural Couples Therapy has developed techniques to treat and prevent this problem (Sullivan, Adams and Gauthier, 2008; Pasch & Sullivan, 2017) and focus on aiding communication and disclosure between couples, exploring the nature and meaning of grief (example, when couples realise that they are not capable of having children), augmenting the ability of the couple to support and appreciate each other and develop strategies that are useful for reducing stress and solving the problem related to childlessness.

Individual problems

Generally, studies have revealed the effectiveness of couple-based therapies in a variety of disorders and problems of an individual. It does not only address the "psychological functioning" of the individual but also the satisfaction of his or her companion in the relationship. Thus, Cognitive Behavioural Couples Therapy has been custom-made to deal with a myriad of problems the person's experiences (Baucom, Epstein, Kirby & LaTaillade, 2015). This approach maintains that if the partner is included in the treatment of the difficulties an individual, he or she will profit from the support his or

her partner provides which will eventually augment the functioning of the partners and relieve personal difficulties (Fischer, Baucom & Cohen, 2016; Godbout, Runtz, MacIntosh & Briere, 2013).

Mood disorders, especially depression, are perceived to have a bidirectional relationship with the functioning of couples (Bélanger, El Baalbaki, Leduc & Coyne, 2008), with lower quality of relationship leading to higher depressive symptoms causing the lower quality of relationship (Whisman, 2013). CBCT aims to improve positive exchanges between couples and lessen adverse exchanges in addition to improving problem-solving and communication skills (Whisman & Beach, 2015). CBCT interventions have also made known helpful outcomes for the simultaneous treatment of distress of couple and bipolar disorder (Fredman, Baucom, Boeding & Miklowitz, 2015). They also help in the treatment of emotion dysregulation (Kirby & Baucom, 2007), post-traumatic stress disorder (PTSD) (Macdonald, Pukay-Martin, Wagner, Fredman & Monson, 2016), obsessive-compulsive disorder (Abramowitz *et al.*, 2013). Anxiety disorders (Bélanger, Leduc, Fredman, El-Baalbaki & Baucom, 2008) in addition to anorexia nervosa (Bulik, Baucom, Kirby & Pisetsky, 2011) are also treated with Couple-Based interactions.

Assessment in CBCT

Before CBCT begins, the counsellor needs to find out the expectations of the couples about the therapy, assess the couples' functioning or distress levels and their inspiration for staying together and engaging in the therapy (Poitras-Wright & St-Père, 2004). By that, the counsellor can identify the kind of help that he or she can offer and design the most beneficial treatment for the couple (Snyder & Halford, 2012). Formulating the couple's case

conceptualization is the key objective of the assessment. This can be achieved by carefully defining the concerns of the couples for which they have sought help, identifying the environmental, individual and dyadic factors that contribute to the reported difficulties and by discerning the strengths, the couple has that could expedite the therapeutic process (Lafrenaye-Dugas, Bolduc, Godbout, Hébert & Goulet, 2016). It is also the aim of therapists to understand the respective goals of both partners in the therapy and views relative to the reported concerns so that their commitment level in the relationship and the therapy could be assessed. This will help the therapist to ascertain if CBCT is appropriate for the couple or otherwise. The therapist, for example, might recommend that one or both couples have to first follow an individual therapy (Epstein & Baucom, 2002; Baucom, Epstein, Kirby & LaTaillade, 2015). Assessment can be done throughout the sessions. As couples become acquainted with or comfortable with the counsellor, they may disclose a lot about themselves as individuals and as couples, which make room for the counsellor to gain adequate understanding specifically of the relational dynamics of the couple and, if appropriate, to refine the objectives of the therapy and the strategies to be used (Lafrenaye-Dugas, Bolduc, Godbout, Hébert & Goulet, 2016).

Intervention techniques generally used in CBCT

Intervention techniques that are commonly used in CBCT include communication development, conflict resolution and problem-solving skills, improving identification and emotional expressions, improving the expression of affection and sensuality between couples and improvement of sexual

functioning and developing tolerance and acceptance of incompatibilities and differences.

Communication training

The central feature of CBCT is Communication training. It aims at enhancing how couples learn to listen and express themselves, devoid of attack or criticism. Remarkably, this kind of intervention has shown short-term, visible changes, even in couples who are very distressed (Wright, Sabourin, Lussier & Poitras-Wright, 2008; Epstein & Baucom, 2002). Leading the training in communication in CBCT, counsellors need to recognize and identify dysfunctional behaviours that may arise in the marital life of the prospective couples and identify their emotions and beliefs to enable them to help couples to develop more appropriate and efficient dialogues (Christensen, 2010). During this exercise, the role of the therapist consists of enhancing the couples' efforts, providing them with helpful suggestions or comments and modelling certain listener or speaker behaviours to help couples to improve their listening and communication skills (Dattilio, 2010; Oliver & Margolin, 2009).

Problem-solving and conflict resolution

There are five generally used strategies to help couples to develop their skills in problem-solving in CBCT (Epstein & Baucom, 2002; Dattilio, 2010; Oliver & Margolin, 2009). Firstly, couples must identify and define a problem they want to work on. Secondly, the counsellor assists couples to understand the nature of the problem. Thirdly, the couples are made to suggest several solutions, through brainstorming, which is noted for increasing feelings of interest, consideration and being appreciative and useful in the relationship

particularly in case of conflict. Fourthly, the counsellor or therapist will ask partners to together, choose a solution that will satisfy the wishes of both partners, though there is the possibility that they may not be satisfied equally. The fifth and final stage, consist of a period of trial that will happen amid sessions. Feedback is then discussed held in the subsequent session. If couples are not happy with the selected solution, they together with the therapist may select a new solution.

Identification and expression of emotions

In Cognitive Behavioural Couples Therapy, emotions that are avoided, minimized, excessively expressed or suppressed by couples negatively impact the satisfaction and relational functioning of the couple (Christensen, 2010). Certainly, persons who express not their emotions are usually less involved and more distant in the relationship, which eventually results in less closeness and dissatisfaction between couples (Fruzetti, 2006). By itself, intervention techniques of CBCT are developed to identify, modify and develop the ability to tolerate emotions that are negative (Baucom, Epstein, Kirby & LaTaillade, 2015).

Expression of affection and sexual problems

Dissatisfaction and absence of emotional affection in the frequency or quality of sexual relations are often raised in couple therapy. The counsellor assists the prospective couples to identify their dissatisfaction, which includes sexual dysfunctions, for instance, orgasmic disorders, erectile disorders, arousal disorders and disorders of genito-pelvic (Bergeron, Benazon, Jodoin & Brousseau, 2008). Without a doubt, the satisfaction and functioning of the couple largely depend on sexuality (Randall & Bodenmann, 2009), and

therefore, it is vital to talk about sexuality in CBCT. CBCT techniques such as “psychoeducation” can help prospective couples acquire knowledge relating to sexuality in addition to correcting misconceptions, unrealistic thinking or myths that couples hold about sexuality based on the information the counsellor provides and by watching or reading endorsed “psychoeducational” material (Randall & Bodenmann, 2009). The therapist or counsellor can adopt cognitive interventions to contend with difficulties relating to sexuality by confronting and changing cognitive distortions that might be both irrational and automatic, replacing them with rational and functional cognitions and beliefs about sexuality (Epstein & Baucom, 2002). These cognitive distortions comprise beliefs about how sexual relations “must be” that is unrealistic (for example “In our sexual relations my partner always has to reach an orgasm”) or negative (example “I will never have a good sex life with my partner”). Certainly, cognitive interventions are capable of addressing anxiety-provoking or negative thoughts that hinder the ability to build a satisfying sexual relationship (Weeks & Gambescia, 2015).

Acceptance and tolerance of differences

Acceptance and tolerance are important in the integration of new behaviours developed in CBCT (Jacobson & Christensen, 1996). Undeniably, the failure of couples to accept basic individual differences between partners might at times bring about arguments or antipathy. Jacobson and Christensen developed Interventions, which aim at helping prospective couples to accept the potential basic incompatibilities or differences between them. This could be achieved through the development of an empathic understanding of the experiences of others as well as joining forces to deal with common hardships

(Fischer & Fink, 2014). To accomplish this, strategies aim at three objectives: “acceptance, tolerance and change” (Christensen, Dimidjian & Martell, 2015). Strategies to improve acceptance aim at helping couples to learn different ways of perceiving their problems by empathically joining and unifying detachment. The sense of vulnerability of each couple is exposed by empathic joining brings when they are made to express their view on a problem, while the therapist and the other partner listen. This aims at encouraging emotional expression, and not comments or accusations on behaviours. Unified detachment emboldens couples to put an end to blame or accusations by assisting them to come out with an impartial and less emotional reflection of their differences or problems and by seeing them as an “it” (for example a nickname, an animal, an object) but not as a deficiency in the other.

Cognitive Behavioural Couple’s Therapy is useful for this study because it helps to regulate various emotional factors, cognitive factors and factors relating to the environment that affect the functioning of the couple. It assists couples to grow their capacity to observe and change their thoughts, standards and assumptions and recognise the effect their thinking and behaviour have on their relationship. When would-be couples become aware of the ramification of their irrational thinking and behaviour on the health of their future marriage, they will make the needed adjustments, which will hold the balance of their marriage.

Individual Psychology

Alfred Adler named his conception of personality as Individual Psychology because he was interested in studying the distinctiveness of the person. He held the view that “the individual must be studied as a whole”.

Individual Psychology opines that understanding a person involves comprehension of his or her attitude relative to the world. Adler believed that we are inspired by social interest and our primary life problems are social (Neukrug, 2011).

In individual psychology, every individual is perceived as unique, with inherent capabilities and individual traits that intermingle with social factors and are affected by experiences in early childhood as well as the memories of those experiences (Adler, 1963). Since each individual is unique, the reactions from the interactions they have will be different.

Another concept underlying this theory is the feeling of inferiority. He argued that inferiority (feelings) is universal and inevitable such as when an infant or a young child struggles to overcome physical, natural, psychological and cognitive hurdles of life. This result in feelings that are positive and motivating and help to overcome adversity. According to Adler, we all want to overcome basic and natural feelings of lowliness and eventually learn with others to become better people to get to our unique subjective final goal or state of perfection. He argues that a person tries to do away with inferiority feelings or lowliness by striving to achieve superiority over others. Individuals according to the theory, rid themselves of feelings of inferiority through a process called compensation. Individuals develop behaviours that are healthy and socially accepted to overcome the inferiority or weakness they have. The unique behaviours, cognitions and values an individual develops as he or she strives toward perfection is what Alder called the style of life. Each person's lifestyle reflects how the person responds to early feelings of inferiority and compensatory behaviours that were developed. He

suggested that our style of life is reflected in our dreams and waking actions. It is also seen in what we do and gives us a clue about what we want to be.

Adler believed that social interest, which is also called community feeling or social concern is an inborn desire to relate to others. Social interest becomes the gauge for judging the worth of a person's actions. (Lester & Brannon, 2003). He argued that the potential for social interest is acquired during the early parent-child relationship. He suggested that by age 5 – 6, the experiences of children with social interest are higher or powerful which blurs the effects of heredity. The Adlerian sees the individual as a holistic entity making an effort to move towards the "completion of self" and perfection, which he termed Holism. He viewed the conscious and the unconscious as working hand in hand to achieve a single goal, although the goal was sometimes not healthy.

Contrary to some forms of psychodynamic therapy that view the individual as made up of internal forces or structures that may sometimes struggle with one another (example "id, ego, superego). Adler believed that when such movement, even leads toward problematic behaviour, it is the misguided attempt of the individual to strive for completion and perfection (Adler, 1929). Adler even noticed that the conscious and the unconscious interact together toward a particular goal, although the goal was sometimes not a healthy one. In fact, the name individual psychology is in fact a poor translation from Adler's actual title, "Individuum", "which in Latin means holistic."

Adler posited originally that we are born with an innate aggressive drive, but modified this later as striving for superiority, and lastly as striving

for perfection (Adler, 1963). Despite its name change, the emphasis stayed the same. Adler held that there was one inborn inspiring force that is positive, drives us in the direction of reaching our subjective final goal, and offers direction to our future as we strive for wholeness, fulfilment and completion.

Individuals who are affected by secondary feelings of inferiority will develop misguided private logic and associated dysfunctional behaviours that result in subjective final goals that cause personal or psychological harm to self and others (e.g., becoming anorexic, becoming greedy, power-hungry). Although still struggling to achieve perfection, these individuals hold an ill-conceived belief that if they achieve their subjective ultimate goals, they will attain fulfilment, become whole and complete. Unfortunately, their paths in life have been diverted by their responses to secondary feelings of inferiority.

View of Personality

Adler held the view that each child is born with inherent capabilities and is journeying into the future undefined by the past. He replaced deterministic explanations with teleological (purpose, goal-oriented) behaviours. Adler believes that if we can only act, think and feel relative to our goal, we can understand only by knowing the goals or purposes we are striving to. They also believe that most decisions stem from the persons' present situation, experiences and most importantly the direction of the person's movement. "fictional finalism" was used Adler to denote an illusory goal of life that directs an individual's behaviour. However, he stopped using this word for "goal of perfection" to represent striving towards perfection. Early in life, people begin to foresee (imagine) what they want to become if they are perfect or successful in any endeavour. This is demonstrated in ideas

such as ‘I can be secure only when I am perfect’. A person’s drive towards the final goal results in behaviours that are compensated for by our feelings of inferiority.

The movement from an inferior status to a superior status leads to a life goal development, which coalesces the personality and individuals core beliefs and assumptions. These core assumptions and beliefs guide the movement of each individual in life and establish his or her reality, which gives meaning to life events. Lifestyle is how we perceive self, others and the world. It comprises a person’s way of feeling, living, thinking, and striving to achieve long-term goals. Even though events in the environment impact personality development, they are not responsible for what people become, but our elucidation of these happenings that mould personality.

Adler argued that the acknowledgement of feelings of inferiority and the resulting “striving for perfection” are inborn (Ansbacher & Ansbacher, 1956). We mostly know that we have become helpless in various ways from childhood, which is evidenced by “feelings of inferiority”. Inferiority is not considered a destructive factor but rather pulls us toward mastery and enables us to overcome obstacles. Superiority is arriving at a perceived better position from a perceived lower position (status). Adlerian theory argued that individuals survive with helpless feelings by striving for mastery, perfection and competence. They can pursue to obtain strength out of weakness. The special means where individuals develop a way of striving for competence is lifestyle or individuality.

Social interest involves showing concern about others as about oneself. As we establish a connection with the present and move into a meaningful

future, we contribute to society as we develop our capacity. The process of socialization connected with social interest starts in childhood and comprises assisting children to conform to the norms of the society and gain a sense of belonging and the ability to make contributions. Adler likened “social interest” with a sense of identification and compassion for others. Those with “social interest” are inclined to direct the striving toward a life that is socially useful and healthy. Again, as “social interest” develops, inferiority feelings and isolation diminishes hence the person begins to have confidence in himself. People articulate social interest through mutual respect and shared activity. Community feelings is a feeling of having a connection to all humanity, past, present and future and to make the world a better place thus become responsible in society. Those who are deficient in this community feeling tend to be disheartened and drawn to the hopeless side of life. People look for a place in the family and in society to fulfil their security needs, worthiness and acceptance. If a sense of belonging is not achieved, it results in anxiety. Adler taught that successfully, we need to become a master of three universal life tasks: “building friendships (social task), establishing intimacy (love-marriage task) and contributing to society (occupational task)”. Every individual needs to accomplish these tasks, irrespective of gender, age, culture or race. Every one of the tasks demands psychological capacity development for belonging and friendship, cooperation and contribution and self-worth.

Individual psychology depends on certain procedures that motivate the client to be conscious of how early feelings of inferiority has been recompensed as revealed in the final subjective goal and lifestyle and how this style of life focuses on the natural movement of the client toward completion

and holism. Fundamentally, Adlerian therapy aims at the development of the client's sense of belonging as well as helping him or her to adopt behaviours and processes characterized by social interest and community feeling.

i. Building a trusting relationship

He talked about building an egalitarian relationship that could make prospective couples feel free to examine feelings of inferiority and resulting dysfunctional lifestyles. It can be achieved by the use of attending skills and empathic skills. Prospective couples should be taught to build their marital relationship by being respectful, optimistic and focusing on strength, becoming non-judgmental and showing unconditional positive regard to each other. This will help them adjust to the marital environment.

ii. Encouragement

Encouragement is one of the important skills a counsellor uses in therapy; it deals with the counsellor assisting clients to become conscious of their worth. To facilitate a client's sense of worth, Watt and Pietrzak (2000) suggest a broad range of skills of encouragement which include; showing concern for clients through empathy, active listening and confidence in clients. The counsellor helps prospective couples to generate alternatives for discouraging beliefs they have about marriage. It assists would-be couples to build their confidence and courage to enter into marriage.

iii. Task – Setting

Each couple comes to the marriage with a style of life that may stir up strife in the relationship. Tasks are used to assist the couples to

cultivate a new style of life that is compatible with the unique personality style of individuals than their maladaptive one. (Dinkmeyer & Sperry, 2000).

Adler's concept of social interest and cooperative healthy relationship will help would-be couples to make the necessary adjustments to create an enabling marital environment for their marriage to thrive.

Social Information Processing (SIP) Theory

Social Information Processing (SIP) theory (Crick & Dodge, 1994) was proposed to provide description of how decisions are made in relative to aggression. According to Anderson and Bushman (2002), aggression is a harmful behaviour, or has the tendency to harm another. Originally, the SIP model relates to the "moral principle of harm", and could be expanded to explain the processing involved in other behaviours and decisions in the domain of morality (i.e., fairness, care and justice).

There are six steps in the social information processing model (Crick & Dodge, 1994). Step one, "encoding of external and internal cues" is the process of obtaining information from the environment. Step two, "making attributions (or interpretations and mental representations of cues)" comprises determining the motivation behind other people's behaviour. Based on the information encoded by children from a certain circumstance, they could resolve that others acted with hostile, benign, or ambiguous intent. Step three, "selecting a goal" is deciding what the expected outcome is in a given situation. Step four, "generating responses" involves the process of thinking of probable behavioural actions. Step five, "evaluating responses" arises when children make assessment on a response to determine whether it is good to

use it in a given situation and whether that response will generate the expected outcomes. Step six, “enacting responses” is the way a in which a child potrays his or her actual behaves.

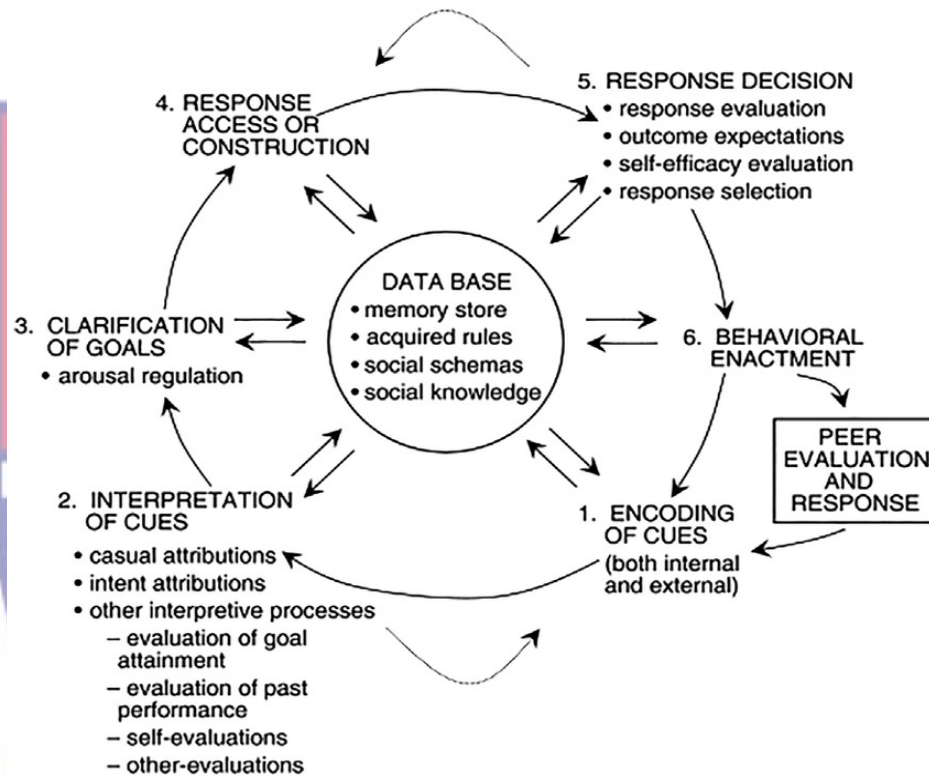


Figure 2: Crick and Dodge’s (1994) Social information processing model

Children bring to the social situation, a set of “biologically determined” abilities and memory database relating to experiences in the past, which has the tendency of affecting the processing of information (Crick & Dodge, 1994). The database stores memories of past events as acquired social knowledge, rules and social schemas. Social Information Processing theory abilities are theorised to advance with age due to a growth in experience with developmental shifts in attentional ability, social interactions, the organisation and interpretation of social information, and mental capacity or processing speed (Crick & Dodge, 1994).

Shortfalls at each of these steps is related to aggressive behavior. At the step one, aggressive children, encode a smaller number of social cues compared to nonaggressive children. They less frequently, search for further information in nebulous social situations and selectively attend to antagonistic and intimidating social cues. At step two, aggressive children are more likely to interpret nebulous social cues as intimidating than nonaggressive children. At step three, there is an association between selecting instrumental (e.g., “winning a game”) instead of interpersonal (e.g., “maintaining a friendship”) goals and putting up more aggressive behaviour. At step four, generating fewer behavioural responses overall and a greater proportion of aggressive responses to problems is associated with more aggressive behaviour. At step five, making a positive evaluation of the possible instrumental and interpersonal outcomes of aggression is connected to more aggressive behaviour. At step six, there is an association between skill in enacting aggressive responses and more aggressive behaviour.

The model explains, that the way a person moves through the steps in the model is determined by the “stimulus situation”, “the person’s information-processing capabilities”, and a so-called “database”. The database stores previous experiences in the form of associations, memories, and schemata used in each step of processing information. Development in social information processing would occur through increasing speed and effectiveness in processing information and through experiences that change the database (Crick & Dodge, 1994; Dodge, 1993).

The Social Information Processing model has also been used to authenticate differences between specific patterns of aggressive behaviour.

Evidence gathered suggests that it may be imperative to differentiate between “reactive” and “proactive” aggression. Dodge (1991) explained that reactive aggression is performed in anger, in reaction to a supposed threat, but proactive aggression is planned, instrumental and “cold-blooded” behaviour. Research shows that these different forms of aggression are linked to different precursors, correlates, and prognoses (Brendgen, Vitaro, Tremblay, & Lavoie, 2001; Dodge et al., 1997; Hendrickx, Crombez, Roeyers, & Orobio de Castro, 2003). Regarding Social Information Processing, it has been suggested that “reactive” and “proactive aggression” are specially related to different steps in the Social Information Processing model (Dodge, 1991).

When would-be couples become aware of the fact that memories of past events could influence how their partner will process social information, they will be patient and tolerant to certain spontaneous and unpleasant actions of their partners.

Conceptual Framework

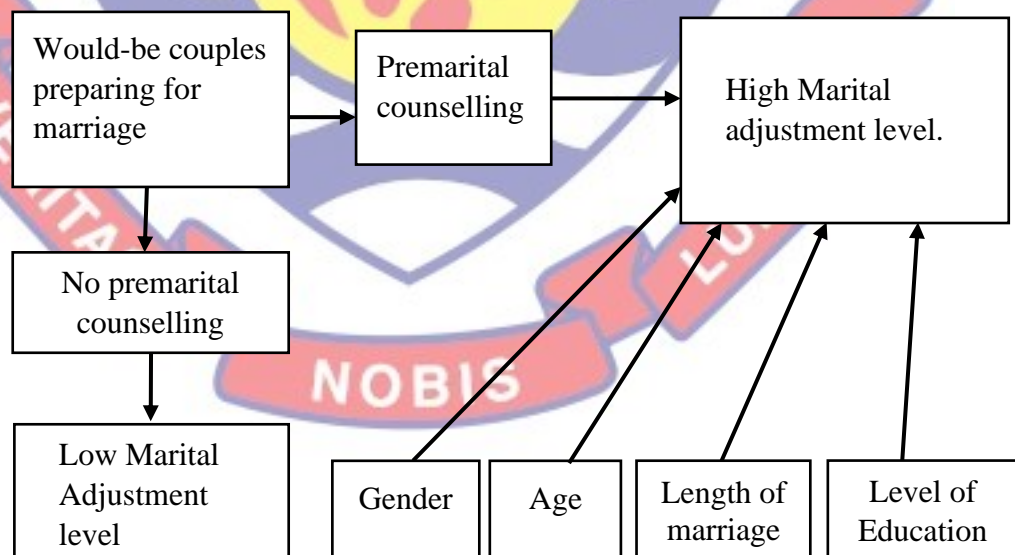


Figure 3: Conceptual Model of the Study

When would-be couples subject themselves to premarital counselling, they acquire the necessary skills to make the needed adjustment, which will enhance the health of the marital relationship. Levels of marital adjustment may differ based on gender, age, length of marriage and level of education. Prospective couples, who do not go through premarital counselling before marriage, may lack the ability to make the necessary adjustments in the marital environment, which may result in marital instability, separation or divorce.

Conceptual Review

1. The Concept of Marriage
2. Premarital Counselling
3. Factors Responsible for Instability in Christian Marriage
4. Marital Adjustment
5. Premarital Counselling and Marital Adjustment

The Concept of Marriage

The term 'marriage' can be explained as a legal union between only one male as a husband and one female as a wife (Arshad, Mohsin, & Mahmood, 2014). Uniyaundeye and Ugal (2006) add that marriage is a natural institution that embroils cohabitation of heterosexual adults who engage in a sexual relationship that is socially approved, having children, sharing a common home and engaging in economic co-operation. Marriage is a lifetime commitment by two individuals to each other and it is shown by a contract authorised by the state and for many people by God (Animashun & Fatile, 2011). It is a sacred bond for the individuals to be united together as one flesh devoid of any third-party interference.

The strong bond that exists between the couple is a mutual contract without any form of unjustified influence between the two parties. According to Obioha (2002), marriage is a social institution established for the regulation of sexual behaviour and procreation of offspring, which brings forth legitimate children into society. Uniyaundeye and Ugal (2006) also corroborate that marriage offers a framework for legitimizing sexual intercourse and provides children legitimacy in human society. This legitimacy manifests in the right of inheritance and descent structure, which is some of the indices for the infusion and perpetuity of communal living. It also indicates that marriage brings together the man and the woman in a manner, which is socially approved as husband and wife for procreation and continuity. It is evidenced by the above definitions that marriage is a socially accepted sexual union. Any sexual union that is not socially approved does not qualify to be called marriage. Marriage, usually, begins with a public announcement and a subsequent rite performed in public in a manner that is acceptable by society. This shows that marriage must involve the public to seek approval from society and for public witnesses.

Marriage is for mature adults and not meant for boys and girls. Marriage is a civilized union between independent and mature persons who have agreed mutually to stay together as couples. The purpose of marriage generally is for companionship and the nurturing of children in society. Okorodudu (2010) sees marriage as a divine contract, which is sacred and permanent, and presumed to have been affected when two mature adults, a man and a woman choose voluntarily to formally exchange their agreement, to live together, love and care for each other, and to share liabilities and assets

with the ultimate goal of stimulating their mutual growth and development as a married couple. This is because marriage is a legal union for male and female adults who mutually agreed to engage in a permanent relationship publicly to care for each other, both for better or for worst until death do separate them.

Marriage brings a major challenge to the newly wedded and even older couples. The nature of problems that are encountered in different families varies from one marriage to another. Akum (2002) stated that most families suffered divorce because of non-exposure to the skills and knowledge, which will help them to recognise and understand their respective roles as father and mother. Akum added that this is where premarital counselling comes in to equip couples with the needed knowledge and skills that will help them to make the necessary adjustments in their relationships.

Ofoegbu (2002) in his definition of marriage stated that marriage is a social structure, which results in the establishment of a relationship that is legal, religious or customary between one man and one woman for the propagation of the family root through procreation and the sharing in various degrees of other acceptable norms of relationship. From this definition, it could be deduced that marriage serves several purposes in the life of the individual and society. Marriage could be contracted to provide the basis for companionship and love, bringing forth children and fulfilment of couple expectations, social prestige or respect among others.

The fact that marriage is contracted between adult members of the society, does not grant it immunity from the numerous challenges that come with marriage. Couples face many marital challenges within the normal family

system, which may result in divorce and thereby leaving the children to suffer both emotional and social trauma.

Premarital Counselling

Premarital counselling is a therapeutic intervention prospective couples commit themselves to. It aims at equipping would-be couples with knowledge and skills on how to develop their relationship in their marital life (Vail, 2012). Premarital counselling is a fleeting intervention programme that takes on averagely about four hours of contact time per month. It comprises counselling and education. According to Sells and Yarhouse (2011), generally, the aim of premarital counselling includes the following:

1. to expose couples to information about marital life,
2. to improve the couples communication skills,
3. to encourage the development of couples' conflict resolution skills
4. to let the couple express themselves on certain delicate topics, such as money and sex.

More often than not, couples who come into the marriage with these skills exhibit positive emotional health and have no sombre issues in the relationship. In the first few years of marriage, there is a high risk of divorce therefore early intervention programmes are beneficial. Counsellors must take into consideration the special needs of each couple because clients enter premarital counselling with a different set of needs and penchants for the counselling experience.

Vail (2012) noted that premarital education also known as marriage preparation programmes has been with us for decades, since the 1930s. The first programme was developed in 1932 at the Merrill Palmer Institute. The

“Philadelphia marriage Council” developed standardized programmes in 1941 with the major aim of helping couples to have a clear understanding of camaraderie in marriage and all that it entails, to elude some of the common causes of conflicts in marriage. a premarital programme was developed by Wright in 1977 known as “before you say I do”, which is aimed at equipping and educating couples with skills that would be beneficial to their marriages. Concurring with Vail (2012), Duncan, Childs and Larson (2010) stated that in North America, stated that premarital preparations started in the 1930s. Initially, the interventions were administered through churches. Nevertheless, premarital counselling programmes have advanced and its taught in different formats including individual counselling, couples counselling, group therapy, online courses, the internet and books of counselling.

Factors responsible for instability in Christian marriage

Many factors contribute to marital instability among Christian and ultimately lead to divorce if rigorous efforts are not proactively made to manage them. These factors include Sex, Economic issues, External Interference, Poor communication, Psychological, and Hygienic.

Sex-Related Factors

There have been arguments that point to the direction that there are adverse effects of premarital sexual activities on marital stability. Ogunsola (2012) for example argues that the current trend of increasing premarital behavioural ways brings teenagers to the dangers of the world of sexual exploration and tolerance. This could have a negative influence on marital stability and quality in the future. Taylor (1994) believes that the present attitudinal change toward sex on TV, newspaper stories, radio programmes,

advertisements, and stress-free contraceptive methods, surges the probabilities for people to involve themselves in sexually related activities.

One thing that is fulfilling to Christian couples is to hold on to a platonic relationship before marriage because it builds trust between them and make their honeymoon an enjoyable one (Dollar & Dollar, 2010). Some individuals perceive “sex relations” as the pivot of the whole relationship. Others also consider sexual relations spiteful and unnecessary. They believe that it may be necessary to have sex if you want to have children, apart from this; it has no purpose, (Mack, 2013). Pornography is one of the problems of sexuality that causes instability in marriages. He states, “It changes the brain’s chemistry in an almost incontrovertible way” (Mack, 2013, p217). When people develop an addiction to pornography, their spouses may gradually become unattractive to them, thereby creating a communication gap and ultimately divorce.

Economic Factors

Young people’s economic independence presently has an impact on the stability of marriage (Taylor, 1994). As they secure jobs, it makes them less dependent on their families, bringing about the ‘nuclear’ family system, which robs them of the economic benefit they enjoy from the extended family system. These economic-related factors are seen as “Hostile pressures in the environment of the married couple” (Verryn, 2001, p210). These factors related to the environment comprise inadequate housing, extreme wealth or poverty, and poor conditions of work (Verryn, 2001).

Greed is a negative attitude that contributes to the crashing of some marriages, particularly when couples become unsatisfied with their economic

condition in society, resulting in unwholesome cravings for other people's possessions (Verryn, 2001).

The exorbitant bride price demanded before marriage which is ubiquitous in many cultures in Africa contributes to the problems arising before and after marriage because it drains the finance the couple needs for their upkeep. Church wedding brings upon the African man who want to marry in the church, a heavy financial pressure because he must pay for both the traditional bride price and the expensive white wedding (Verryn, 2001).

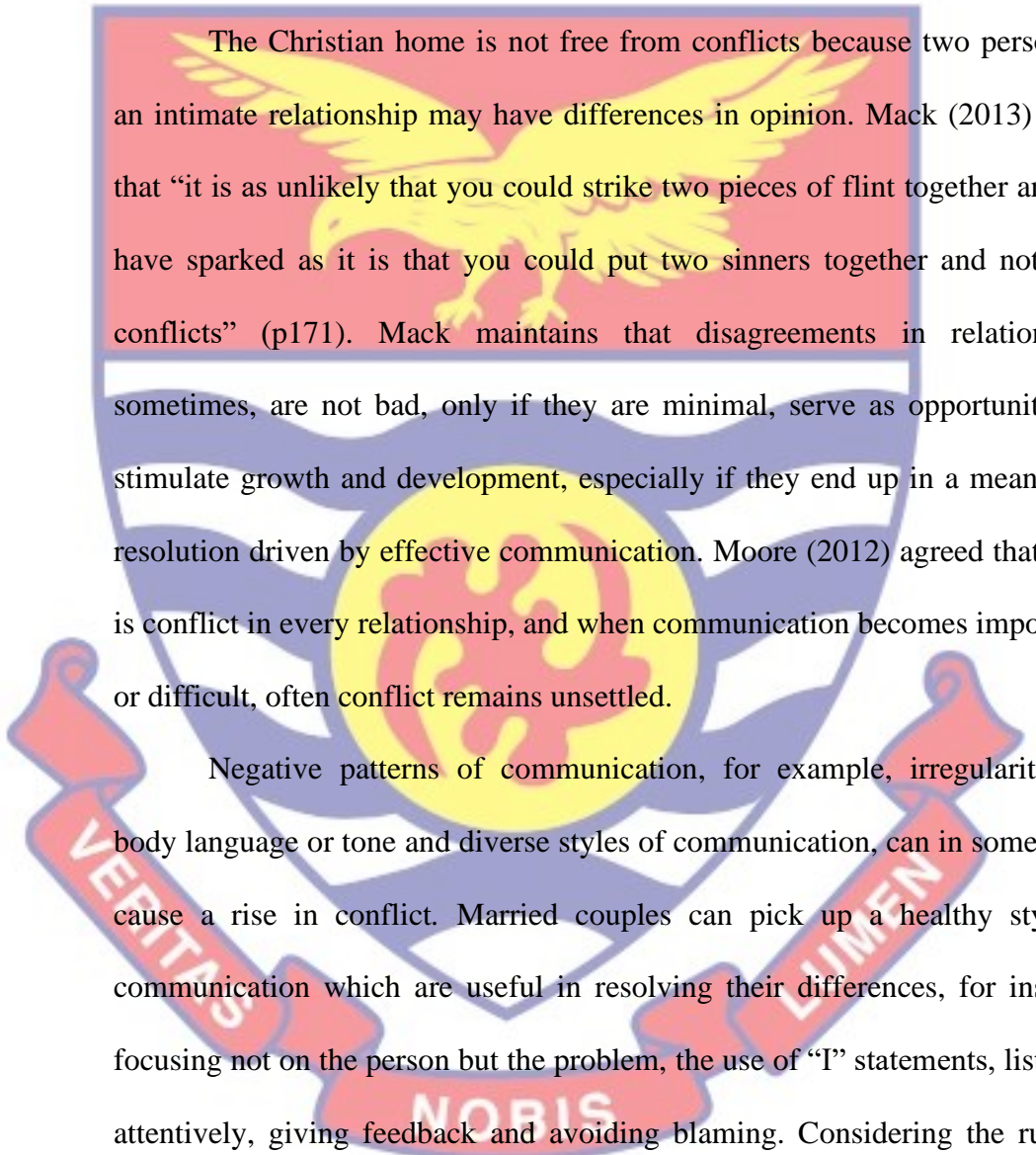
External Interference

Interferences from relatives, in-laws and friends have had adverse effects on marital stability. Bimpong (2013) is of the view that in-laws should be involved in premarital counselling because, some, especially mothers-in-law contributes to the instability of marriage. Bumping, further explains that some mothers-in-law's arrogance and excesses contribute to the breakdown of many marriages. Mothers-in-law must see the need to withdraw from the matrimonial home of their children to lessen their interference, which often results in divorce (Tau, 2001). In-laws and their married children's relationship have to be "something not so close that parents will get burned, or so far that parents will freeze" (Bimpong, 2013). If there is a distance between couples' home and that of their parents or contact with in-laws is regulated, external meddling in a marriage could be controlled.

Poor Communication

According to Mack (2013), poor marital communication can bring about ruinous results. In marriage, poor communication arises when couples are unable to clearly articulate their opinions on issues, which may result in

protracted disagreements and misunderstandings. When married couples in their communication, do not express their true feelings to each other, it hampers physical and emotional intimacy, which gradually may compel one or both of the couple to turn to another person other than his or her partner to satisfy their emotional need (Odukoya 2008).



The Christian home is not free from conflicts because two persons in an intimate relationship may have differences in opinion. Mack (2013) states that “it is as unlikely that you could strike two pieces of flint together and not have sparked as it is that you could put two sinners together and not have conflicts” (p171). Mack maintains that disagreements in relationships sometimes, are not bad, only if they are minimal, serve as opportunities to stimulate growth and development, especially if they end up in a meaningful resolution driven by effective communication. Moore (2012) agreed that there is conflict in every relationship, and when communication becomes impossible or difficult, often conflict remains unsettled.

Negative patterns of communication, for example, irregularities in body language or tone and diverse styles of communication, can in some cases cause a rise in conflict. Married couples can pick up a healthy style of communication which are useful in resolving their differences, for instance focusing not on the person but the problem, the use of “I” statements, listening attentively, giving feedback and avoiding blaming. Considering the ruinous impacts poor communication have on marriage, would-be couples must avail themselves of premarital counselling to acquire good communication skills.

Psychological Factors

Husband or wife insufficiency may cause marital problems. According to Verryn (2001) these married couples' inadequacies, is expressed especially when one or both of them lacks or cannot develop their relationship consciously, there is emotional "ill health"; or self-centredness where the man or woman uses as a tool in the marriage to exploit the other partner for personal gain. Immaturity is a psychological factor that can cause marital instability. It is identified as one of the main causes of separation or divorce. "Personal immaturity can lead to insensitivity" (Collins, Ellickson & Klein, 2007, p526). Immature people have a habit of exhibiting self-centeredness, by exploiting, competing or manipulating with their mates, just to satisfy their personal needs. Premarital counselling could be used to expose and discuss the tendencies of self-centredness that can be subject the marriage pressure. Would-be couples should be made to learn how to resolve disagreements and assist them to develop their skills of communication, willingness and sensitivity to accept and meet the needs of each other.

Hygienic Factors

Hygiene is "the practice of keeping yourself and your living and working areas clean to prevent illnesses and diseases" (Hornby 2010, p738). In the home, poor hygienic practices can put pressure on the income of the family by spending money on preventable diseases. It may also lead to quarrels, separation, anger and other unfriendly ramifications in the home. Lack of personal hygiene may cause the husband or the wife to elude intimate communication or sex.

Body odour may come about due to one or many of these factors: genetics; certain foods like curry, onions, garlic, and other strong spices; tobacco, soda, tea, chocolate, and coffee; dietary imbalance in zinc and magnesium; "low blood sugar"; liver or kidney disease; menopause; stress; other synthetic or "non-breathable" fabrics" (Columbia University, 2006).

Bad breath comes when bacteria grow on food particles and stick to the teeth. When these bacteria digest the food, their by-product produces odour. According to Chris (2015), food stacked in the teeth, rots and produces a bad odour. When couples are ignorant of these factors and their management, create marital problems. Spouses may sometimes avoid their partners sexually because there is no bodily attraction, poor personal hygiene, and change in body weight and not dressing in the way their spouses like (Glass, 2015). If this situation is left unchecked for a while, it may come about that one of the couples will look outside of the marriage to find an alternative intimate relationship (Glass 2015). Would-be couples must learn good hygienic practices to keep strong their relationship hence keeping a safe distance from other people.

Marital Adjustment

Marital adjustment is the state of adaptation, which is accomplished in different areas in the marriage where conflict may present (Adams & Laurikietis, 1980). According to Homans & Schneider (1955), Marital Adjustment is the ability to meet everyday changes, demands and marital duties with any degree of efficiency and emotional calmness needed at the time. Again, it comprises coping with and enjoying the company of the marital partner, taking part in the activities and interests of the family, taking up extra

duties as they arise, and altering one's lifestyle to fall in tandem with changes in the family life.

Marital adjustment is a process created in the lives of the couples because it is essential for a person's traits recognition, taste conformity, behavioural rules creation and relational models' formation. The importance of understanding each other personality characteristics is germane to marital bliss and adjustment. Personality is a unique behaviour, thought motivation and emotion in human beings. It makes an individual unique and strongly influences personal expectations, perceptions, values, attitudes and even marital adjustment (Tabinda, 2005). Ahmed (2011) explained that marital adjustment is the process of changing, altering or adopting personal and couple's patterns of behaviour and communication to accomplish satisfaction in the marriage. It enables spouses to achieve happiness and fulfil their expectations.

Marital adjustment is described as an acceptance between married couples such that there is a presence of companionship between them, agreement on the need for affection and intimacy and the accommodation they provide for each other (Lock & Wallace, 1959). Marital adjustment indicates several processes and alterations of relationships between married couples. These processes include accommodating changing situations, balancing expectations and needs of each other, and bending to the varying circumstances of marital life (Dyer, 1983). Marital adjustment is the quality of the marital relationship itself (Martin, 2007). Marital adjustment is a process, which the outcome is decided by the level of marital satisfaction, marital cohesion, marital consensus and affectional expressions.

Many dimensions of "happiness" or "satisfaction" have been used to study factors that affect marital adjustment. Because of this variety of measures, many factors have been put forward as affecting marital satisfaction for reviews (Hicks & Platt, 1970 and Lasswell, 1974). Several significant factors have occurred across instruments from these broad bases of evaluation.

The presence of children in the marriage, respondent's sex, age when married, birth order, years before the first child was born after marriage and length of marriage have been cited in the literature as having a significant relation to marital adjustment. The likeness of attitudes between couples is well discussed as a predictor of marital satisfaction in all the measures (Hicks & Platt, 1970; Tharp, 1963).

Marital adjustment is a multi-aspect term that clarifies various levels of marriage (Ghorbanalipour, 2008). This process is created during the lives of the couple, because it brings about tastes adaptation, personality traits recognition, and behavioural rules creation and communicative patterns formation. Therefore, marital adjustment is a process that is evolutionary between a woman and a man (Ghorbanalipour, 2008). Marital adjustment is a circumstance where the man and the woman have a feeling of satisfaction and fortune for each other. "Adjustment in marriage occurs through common interest, care for each other, acceptance and understanding the latter and meeting the needs and desires" (Sedaghat and Lotfollahi, 2010, p42).

Premarital Counselling and Marital Adjustment

Premarital counselling offers an opportunity to a couple to expose any possible dangers that have the potential of impeding their marriage from holding its balance. It enables couples to think through and talk about issues

that would enhance their success in marriage (Baker, 2015). Couples ordinarily come into the marriage with predetermined thoughts on the way conflict should be managed, how to manage issues of money, and how to address religious issues, the preferred size of family, and the expression of love to someone. Pre-marital counselling provides professional ideas on the management of these issues (Schumm et al., 2010). All societies in the world offer some sort of counselling services before and during a marriage relationship, therefore premarital counselling is as old as man himself (Futris, Barton, Aholou, & Seponski, 2011).

Premarital counselling is not a form of therapy but rather an education that equips the couples with skills needed to support couples to have a healthy, lasting, and happy marriage (Futris et al., 2011). It assists couples to find and communicating their beliefs, values, desires, needs, fears, dreams, and other issues, which would have been ordinarily avoided, and not to be discussed in the absence of premarital counselling (Marang'a, 2013). Couples who engage themselves in premarital counselling, tend to have a happier marriage compared to those who do not go through premarital counselling. Kepler (2015) revealed that marriages that are not built out of premarital counselling stand about a 40%-50% chance of divorce. He added that either faith-based or secular, premarital counselling is aimed at supporting marriage to withstand the challenges of life.

Farnam, Pakgohar and Mir-Mohammed (2011) conducted research in Ireland among 200 married couples and discovered that premarital counselling and education have an influence on marital adjustment, which enhances couples' satisfaction in the marriage. Kepler (2015) also holds the view that

premarital counselling and education affects marital adjustment. However, the educators must focus on the needs of the participants, problems and demands so that such classes would be effective. Farnam et al. (2011) emphasized aspects of premarital counselling as sexuality, personal health, family planning, and conflict resolution and communication skills.

Yoo, Bartle-Haring, Day and Gangamma (2014) researched couple communication, sexual intimacy, emotional and relationship satisfaction. The results suggest that equipping couples with effective communication skills increases sexual intimacy and boosts their emotional stability, which enhances their satisfaction in marriage. Carol and Doherty (2014) agree with Yoo, Bartle-Haring, Day and Gangamma (2014) on the score that premarital counselling is effective in augmenting good communication. It prepares couples with the needed skills to manage conflict and adjust to unfamiliar situations, which improves quality relationships.

The goal of premarital counselling takes its source from the purpose of marriage, which is mutual respect, fellowship, good communication and companionship as shown by Wilmoth and Smyser's (2010) in their research conducted in Mississippi State University in 2000 churches. Their findings are in tandem with the findings of Adler (1931) as quoted by Wilmoth and Smyser (2010) that "marriage is not merely an action taken by two people but also involves a connection of the past with the future". The principal goal of premarital counselling comprises a move from being single to becoming married, which require couples to adjust to each other's way of life to improve the companionship and intimacy between the couple. According to Kiuna and Kiuna (2012), premarital counselling aims to build a collaborative relationship

not beneficial only to the couple but to all those connected to the couple. According to Kepler (2015), the main highlight in Adlerian theory is bequeathing couples with skills to solve problems to enable them to foil marital problems.

The quality of premarital counselling is the strongest predictor of a successful premarital outcome in a religious setting (Schumm et al., 2010). They also added that the duration of premarital counselling is a variable. They emphasised that a session is not adequate so they suggested eight to nine sessions. Topics treated in premarital counselling sessions include commitments, communication, personality issues, egalitarian roles, conflict resolutions, finances and sexuality.

Empirical Review

This section reviews empirical studies related to the study. This is done under two headings. Factors influencing marital adjustment, the role of premarital counselling in marriage and perception of premarital counselling.

Factors Influencing Marital Adjustment

Marital adjustment denotes the number of processes and relationships of adjustments between married couples. These processes comprise adjusting to changing situations, balancing the expectations and needs of each other, and adjusting to the varying circumstances of family and marital life (Dyer, 1983). Various factors come to play relative to marital adjustment.

Skowron (2000) conducted a study on self-differentiation and the role it plays in marital adjustments using a descriptive survey design with 100 respondents. She employed the Differential of Self Inventory as the data collection instrument. The study discovered that discord between husband and

wife is because of the emotional cut-off of husbands. The study also found that emotional cut-off and emotional reactivity sparks up marital distress, which adversely affects marital adjustment.

Temperaments have been found to influence marital adjustment. Duman and Erkan (2014) did a study on the relationship between temperaments and qualities of character and marital adjustments. They used a sample size of 200 individuals, which is made up of 100 men and 100 women and collected data with the Temperament and Character inventory and the "Marital Adjustment Test (MAT)". The findings of the study show that an increase in harm avoidance (pessimism, doubtful, excessive worrying, shyness, fatigue and being fearful) decreases the degree of marital adjustment. The degree of marital adjustment increases with lower levels of harm avoidance. Individuals with lower levels of harm avoidance are calm, brave, sympathetic, self-confident and daring.

Siegal, Levin and Solomon (2019) did a longitudinal study on 156 couples using the Dyadic Adjustment scale as a data collection instrument. The study examined each partner's role of attachment on marital adjustment. It was discovered in the study that couples who have secured attachment have the highest level of marital adjustment. Where there were high levels of avoidance, there is a lower level of marital adjustment. Couples, who had a mixture of attachment, experienced different levels of marital adjustment. The findings of this study confirm a statement made by Finzi-Dottan *et al.* (2004) that "two individuals with a secure attachment would have the potential of a stable, close and intimate relationship, where they would respect both the autonomy and needs of the other".

Schramm, Marshall, Harris and Lee (2012) examined the connection between religiosity, denominational homogamy and marital adjustment using the descriptive survey design. They sampled 1995 respondents comprising 1002 wives and 993 husbands. The study revealed that religious spouses' first marriages have high marital adjustment levels compared to less religious spouses. There is higher marital adjustment among couples who are in the same religious denomination than those who do not. Couples who are both religious have high marital adjustment levels as compared to couples where both spouses are not religious or where only the wife is religious.

In a study conducted by Nasri and Babaee (2014) in Smandaj in Iran, on how social skills contributes to the improvement of marital adjustment among women, using the survey method as a design and sampled 365 respondents and the Locke-Wallace Marital Adjustment Questionnaire as an instrument, the study revealed that women's social skills influence marital adjustment. That is, as women's social skills increase, marital adjustment increases as well. They found that women, who can identify and exercise positive influence over their own emotions, are sensitive to the needs and feelings of their spouses. They respect others, see themselves as equal against others and have satisfaction with their marital life.

The Role of Premarital Counselling in Marriage

Egbo (2011) did a study to examine the effect of premarital counselling on social adjustment and marital stability using Ex-post Facto and correlation design. The author sampled 300 couples and used the social adjustment questionnaire as an instrument. The study revealed that married couples who went through premarital counselling had a better social

adjustment and had more stable relationships than couples who had no premarital counselling.

Ntim (2014) studied how premarital counselling influences marital adjustment among Christian couples using the descriptive survey as a design and the Locke-Wallace Marital Adjustment Test as an instrument with a sample size of 300 respondents. The study revealed that there exists a difference in the marital adjustment between couples who went through premarital counselling and those who had no premarital counselling. Thus, couples who had premarital counselling had better adjustment scores than those who had no premarital counselling though the difference is not statistically significant.

Kariuku (2017) conducted a study in Nairobi County, Kenya on the effect of premarital counselling programmes on marital stability. She used a quantitative descriptive research design and sampled 105 married individuals. The instrument she used to collect data was the "Revised Dyadic Adjustment Scale (RDSA)". The findings of the study revealed that premarital counselling had an impact on marital satisfaction. Premarital counselling according to Kariuku, should focus primarily on financial management, personality development and communication.

There exist a relationship between premarital counselling and marital stability. Thus, premarital counselling has an impact on marital stability as compared to post-marital counselling on marital discord. This was revealed in a study done by Munyiri (2018) in Nairobi County, Kenya on the influence of premarital counselling on marital stability with a sample size of 40

respondents using the descriptive case study as a design and a questionnaire as an instrument.

Perception of premarital counselling

Adzovie and Dabone (2021) did a study to ascertain the relationship between premarital counselling and marital success and the perceptions of married Christians in Ghana. They used ex post fact research design and a sample size of 300. They developed the premarital assessment inventory as a data collection instrument. The result of the study indicates that Christian married couples held a negative perception of the effectiveness of premarital counselling.

Ntim (2014) in her study to find out the impact of premarital counselling on marital adjustment among Christian couples in the Cape Coast Metropolitan Assembly, found that Christian couples held positive view about premarital counselling. She employed the descriptive research design and the Lock Wallace Marital Adjustment Scale as a data collection instrument. She used a sample size of 300.

Sullivan and Anderson (2002) did a study on recruitment of engaged couples for premarital counseling: An empirical examination of the importance of program characteristics and topics to potential participants with 86 couples. A self developed questionnaire was used to collect data. It was discovered in the findings that couples perceived some characteristics of premarital counselling programs as quite important but others not important at all. Couples were concerned about the leader and content of the program.

Borowski & Tambling. (2015) conducted a study on applying the health belief model to young individuals' beliefs and preferences about

premarital counselling. They found that couples see premarital counselling as useful but suggested that premarital programs should focus on diminishing the barriers and increasing the benefits for individuals. Programs should also acknowledge that certain populations might have different counseling preferences and modify the programs accordingly in order to increase participation.

According to Moeti, Koloi-Keaikitse & Mokgolodi (2017), traditional premarital counseling is very valuable and has a potential of keeping marriages firm. The was revealed in their study to find out Married Women's Lived Experiences on the Value of Traditional Premarital Counseling "Go Laya" on Marital Stability in Botswana. The study adopted a qualitative phenomenological research design and a sample size of 10 married women with varied durations in marriage provided the data through interviews

Summary of Literature Review

The literature review dealt with the theoretical framework, conceptual review, and empirical literature. It was shown from the review that premarital counselling is important for would-be couples. It equips them with the necessary knowledge and skills required to manage challenges that may arise in their marital life. Couples who go through premarital counselling have a lower risk of divorce.

Satisfactory relationships, communication skills, conflict management skills, active listening, control of emotions, problem-solving skills are some of the things that are taught to would-be couples in premarital counselling. Others include increased awareness and understanding of couples from own self, others and marriage, emotional relationships and strengthening ties

between them and their knowledge and understanding about the pathology and the crisis of marriage. These skills, if appropriately applied, will help couples make the needed adjustment to establish stability in the marriage, which will eventually bring about marital satisfaction.

The literature also threw light on some factors that affect the stability of marriages. These factors include sex-related issues, external interference, economic factors, psychological factors, issues of hygiene among others. Premarital counselling equips couples to deal with these factors so that their marriages do not lose balance.



CHAPTER THREE

RESEARCH METHODS

Introduction

The purpose of the study was to find out the influence of premarital counselling on marital adjustment among married people in the Cape Coast Area of the church of Pentecost.

This chapter outlines the research design, population, sampling procedure and data collection instrument. It also presents data collection procedures, data processing and analysis.

Research Design

The descriptive survey design was employed for this study. It was considered appropriate for this study because it deals with opinions, facts, attitudes or perceptions. Survey design is used when a systematic way of telling the reality of a situation is needed (Osuala, 2005). Koul (2000) believes that information gathered in descriptive studies is used to determine the present nature of the situation at the time of the study and to generally draw valid conclusions based on the facts found. It consists of a cross-sectional design relative to which data is collected mainly by questionnaire or by a structured interview on more than one case to collect a body of qualitative and quantitative data with two or more variables, which are then scrutinized to identify association patterns (Bryman 2004).

In a descriptive survey, variables and procedures are described as accurately and completely as possible. They present the most effective means of social description and can offer precise and detailed information about large heterogeneous populations (Anyetey, 2018). Descriptive survey design assists a researcher to collect data at a particular time purposely for describing the nature of prevailing conditions or identifying standards that can be compared to existing conditions (Cohen, Morrison & Manion 2004). Ary, Jacobs and Razavieh, (1990), believes that it helps also, to deal, fundamentally, with questions about what exists relative to variables or present circumstances in a situation. Descriptive survey design is appropriate for purposes of generalising a sample to a population purposely for making inferences about the opinions, characteristics, past experiences and attitudes of the population (Leedy & Omrod, 2010). It offers a meaningful and accurate image of a phenomenon or an event and seeks to explain the behaviour and perception of people based on the data gathered at a certain time (Frankel & Wallen, 1993).

The descriptive survey design is bedevilled with difficulties. It cannot establish a cause-effect relationship and is not comprehensive enough in itself, to give answers to questions (Osuala, 1991). Leedy (1985) states that “one of the most subtly and ineradicable shortcomings of the descriptive survey is the presence of bias” (p 132) particularly when questionnaires are used. These shortcomings include the inability to get honest and thoughtful answers from respondents to questions and receiving an adequate number of completed questionnaires to make meaningful analyses (Fraenkel & Wallen, 2000).

Despite the shortcomings of descriptive survey design, it was appropriate for this study for the reason that, it is useful to study a large

number of people through self-report measures supplied by questionnaires. It also helps to determine the existing opinions of a particular population.

Study Area

A British missionary, Rev. James Mckeown in the year 1962 in Asamankese, Ghana, founded the Church of Pentecost. The Church currently has 107 administrative Areas in 105 countries in the world. There are 67 Areas in Ghana alone. An Area constitutes more than one District and a District consists of more than one local assembly except for the Pentecost Worship Centres (PIWCs) which is usually a District by itself. An Area Head oversees the Areas. The Area Head may be an Apostle, a Prophet, an Evangelist or a senior Pastor. Districts are headed by Pastor's while local assemblies are manned by Elders or Deacons (where there is no Elder) or a mature member (where there is no elder or deacon). The Church of Pentecost has eleven tenets. The latest addition is "Marriage and Family Life". The church recognises that marriage builds families and the family is the foundation of the church. Therefore, there is a need to strengthen the family system.

The Cape Coast Area is one of the 67 Areas in the church's administrative operations. The Cape Coast Area has 29 districts and 334 local Assemblies. It has 30 pastors and one Apostle who is the head of the Area. The total population of the Area as of 31st December 2020 stands at 56,521 of which 18,769 are children below 13 years of age and members between the ages of 13 and 19 are 11,020. Young adults from 20 and 35 years are 12,040 and the adult membership (36 years and above) is 14,692. The administrative area of the Cape Coast Area of the Church lies in four Districts in the Central Region of Ghana. These Districts are Cape Coast Metropolitan Assembly,

Komeda Edina Eguafo Aberim District, Abura Asebu Kwamankese District and Hemang Lower Denkyira District.

Population

Mugenda and Mugenda (2003) hold the view that a research population is the total of all the objects, members or subjects that comply with certain specifications. The target population for the study included all married people in the Cape Coast Area of the Church of Pentecost, Ghana. The total population of married people in the Cape Coast Area is estimated at 18, 253. The accessible population consist of married people who have registered their marriage and reside close to their local assemblies.

Sampling Procedure

A sample is made up of a carefully selected unit that comprises the population (Sarantakos, 2005). A research sample is a group that is meticulously selected out of the population for a study. Sampling allows a researcher to study a relatively small number of units, which is representative of the target population. According to Amedahe, (2004), sampling is the process of representing the entire population by selecting a portion of the population. There are different ways used by researchers to determine the sample size based on a given confidence level of accuracy needed (Isreal, 1992). Researchers hold the view that there is a smaller sampling error if larger sample size is used.

The convenient sampling technique was used in the sampling procedure. The convenient sampling technique was employed to sample respondents for this study. Convenient sampling is a type of non-random or nonprobability sampling where members of the target population that conform

to given practical criteria, such as availability at a given time, easy accessibility, geographical proximity, or the willingness to take part in the study are included (Dörnyei, 2007). Married people who were willing to take part in the study were sampled. The study used a sample size of 500 comprising married men and women in the Cape Coast Area of the Church of Pentecost. A sample size of 500 was appropriate for a population of 18,253 based on Krejcie and Morgan (1970) table for sample size determination.

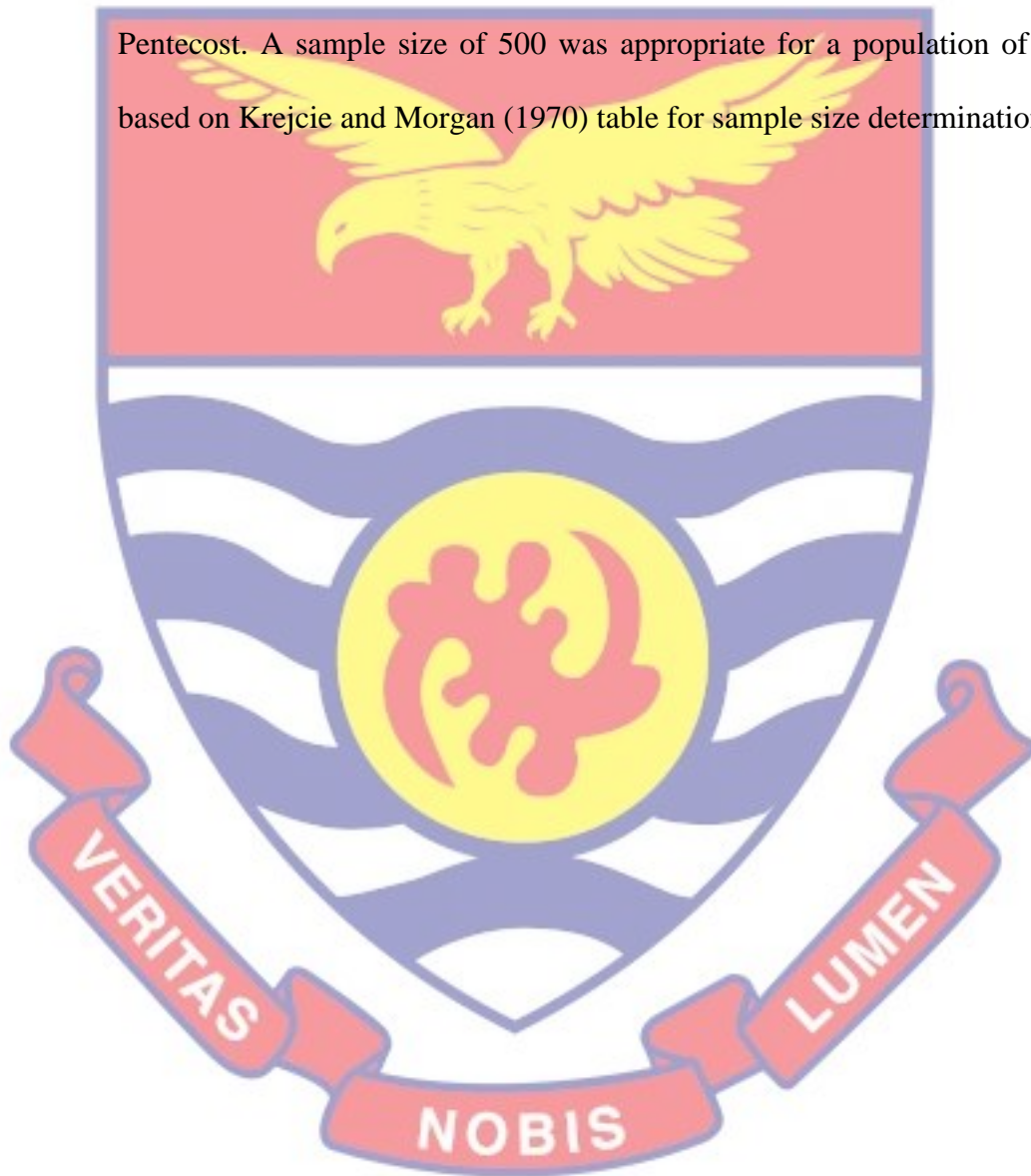


Table 1: *Distribution of respondents in the 29 Districts*

Districts	Number of Assemblies	Respondents		
		Male	Female	Total
Cape Coast	9	11	12	23
Abura Dunkwa	8	7	9	16
Oguaa Abura	4	10	11	21
Elmina	14	8	12	20
Moree	11	5	3	8
Jukwa	20	10	22	32
Komenda	7	1	4	5
Asebu	13	3	2	5
N. Ahenkro	16	4	1	5
Abrem Agona	13	2	6	8
W. Atobisae	16	8	11	19
Kissi	10	6	7	13
Piwc	1	2	2	4
Abakrampa	11	5	8	13
Ola	9	6	8	14
Essaman	14	1	7	8
Efutu	18	9	19	28
Jakai	17	5	3	8
Aboom	10	7	9	16
Abee	12	13	15	28
W. Domama	13	6	7	13
Asuansi	17	9	14	23
Ebukrom	14	9	10	19
Yamoransa	9	12	9	21
Dominase	12	10	12	22
Edumfa	13	13	14	27
Ekutuase	8	14	13	27
Ebubonko	7	9	10	19
Frami	8	17	18	35
	334	222	278	500

Data Collection Instrument

A questionnaire was used for the study because it offers the researcher the opportunity to sample the perceptions of a larger population. Gay (1987) believes that questionnaire is more efficient as compared to the interview procedure because, it is not expensive; it involves less time and allows the gathering of data from a much larger sample. Compared to other methods such as observation and interview, a questionnaire is less expensive (Gordor, Akar & Howard, 2006). Again, the use of questionnaires guarantees a wider coverage because participants could be easily approached, build a relationship with them, make known the purpose of the study and explain each item to them. The use of questionnaires enhances the precision of recording and makes the processing of data easier (Anyetey, 2018). She added that the use of questionnaires is particularly useful because it ensures anonymity, which offers freedom to the respondent to express their opinions in anonymity. Nevertheless, one weakness of questionnaires is the likelihood of a low rate of response. The low response of rate could be dealt with if the questionnaire is presented in person and allow respondents enough time to respond to the questionnaire.

The Revised Dyadic Adjustment Scale was adopted and the Premarital Counselling Perception Scale was adapted to measure the marital adjustment level of couples and the perception of couples on premarital counselling respectively. The questionnaire consists of three sections (A, B, and C). The items (1 to 6) in section A is on demographic characteristics of the married people (gender, age, year of marriage, educational level, occupation either went through premarital or did not etc.). The item (7 to 15) which is the

Premarital Counselling Perception Scale in section B seeks to gather information on the views of married people in the Cape Coast Area of the Church of Pentecost on premarital counselling. The item (16 to 29) in section C, which is the Revised Dyadic Adjustment Scale, seeks to gather information on the marital adjustment levels of married people.

Pre-Testing of Instrument

The instrument was pre-tested in the Bethel Methodist Church, Efutu Society at Efutu in the Cape Coast Metropolitan Assembly, Ghana. Sixty (60) married people were used to pre-test the instrument. It was done to refine the items on the questionnaire to avert any problem that may arise in answering the main questions. Everything relating to the questionnaire should be pre-tested, and none should be left out (Leedy, 1985). My supervisor examined and validated the content before pre-testing the instrument. The content of the pre-tested questionnaires was analysed with the help of Statistical Package for Service Solution (SPSS) version 20.0 to establish the internal consistency of the instrument. Cronbach's Alpha Co-efficient of the questionnaire was .79. According to Pallant (2001) Cronbach's Alpha Co-efficient of .75 or more are reliable.

Validity and Reliability

According to Burns and Grove (2005) external validity is concerned with the extent of generalization of the findings of the study beyond the sample used. The use of sufficient sample size assured that the result of this study can be generalized beyond the sample used. The reliability coefficients of items on the questionnaire was determined by Cronbach's alpha. The choice

of Cronbach's Alpha is because it measures the "internal consistency" of the items that are "non-dichotomous" (Cortina, 1993).

The Revised Dyadic Adjustment Scale had very good psychometric properties. The Revised Dyadic Adjustment Scale was adopted and the Premarital Counselling Perception Scale was adapted for this study and generated a Chronbach's Alpha of .79(N=60) in the pre-testing and for the main study, a Chronbach's Alpha of .84 was obtained. According to Pallant (2001) Cronbach's Alpha Co-efficient of .75 or more are reliable.

Data Collection Procedure

A letter of introduction was obtained from the Department of Guidance and Counselling, and ethical clearance from the Institutional Review Board (IRB) of the University of Cape Coast. These enabled me to gain permission to collect data from married people in the Cape Coast Area of the Church of Pentecost. Procedures for answering the questionnaire were explained to the respondents and allowed them enough time to respond to them. The respondents were assured of confidentiality that information would not be made known to any individual who is not involved directly in the study. The respondents were asked not to reveal their identity in any form on the questionnaires.

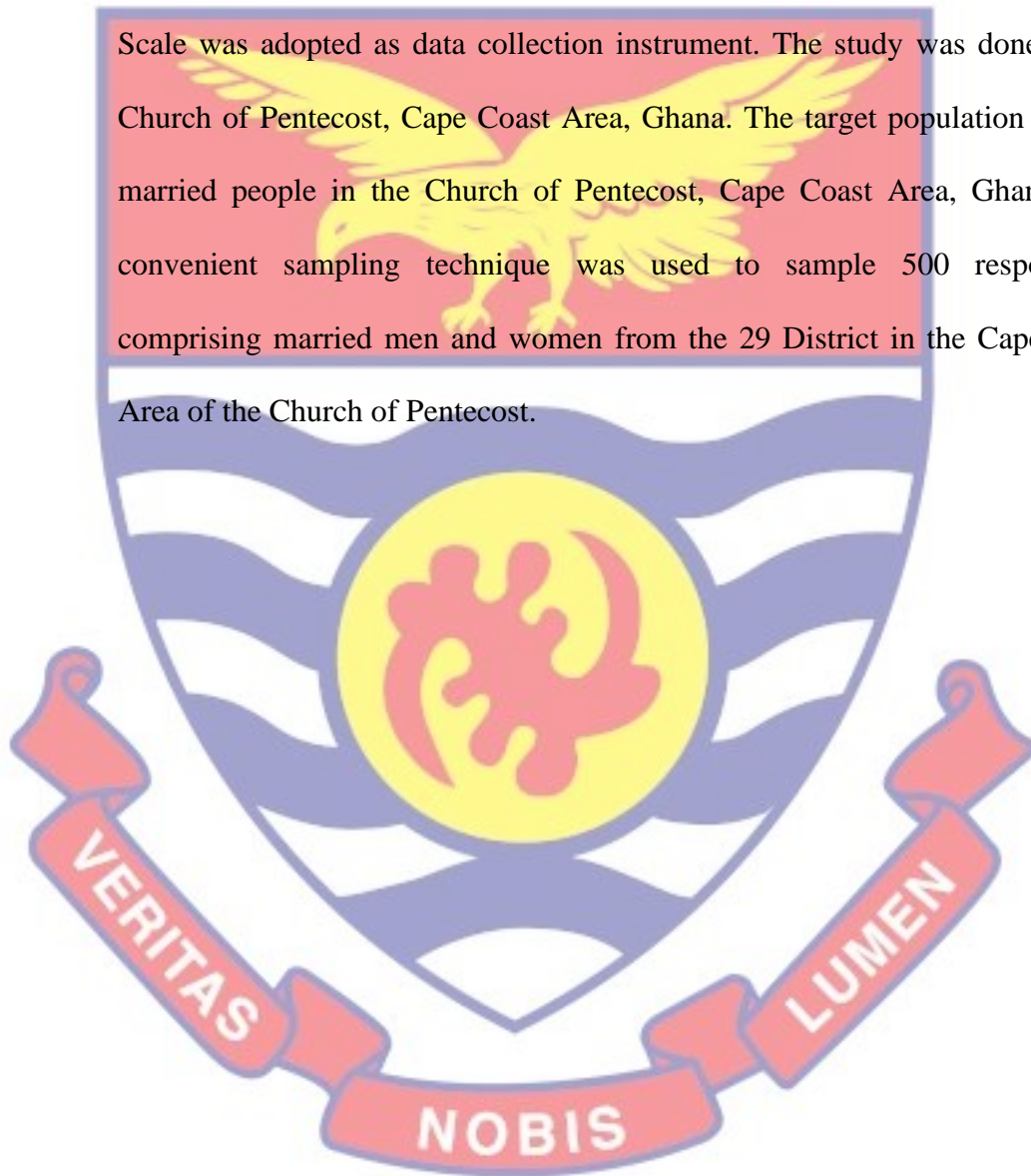
Data Processing and Analysis

Data collected becomes meaningful in research only when it is organized and summarized (Nordzro, 2017). Research question 1 and 2 was analysed with the help of means and standard deviation. The independent sample t-test was used to test hypotheses 1 and 5, while ANOVA was used to test hypotheses 2, 3 and 4. The statistical software that was used for analysing

the data from this study was the Statistical Product and Service Solutions (SPSS) Version 20.

Chapter Summary

This study used the descriptive survey design. The premarital counselling perception scale was adapted, and the Revised Dyadic Adjustment Scale was adopted as data collection instrument. The study was done in the Church of Pentecost, Cape Coast Area, Ghana. The target population was all married people in the Church of Pentecost, Cape Coast Area, Ghana. The convenient sampling technique was used to sample 500 respondents comprising married men and women from the 29 District in the Cape Coast Area of the Church of Pentecost.



CHAPTER FOUR

RESULTS AND DISCUSSION

Introduction

The purpose of this study was to find out the influence of premarital counselling on marital adjustment among married people in the Cape Coast Area of the Church of Pentecost in Ghana. This chapter presents the response rate and respondents' profiles. Details of background characteristics examined included gender, age, occupation, counselling before marriage, length of marriage and level of education of respondents. The chapter also examines respondents' perceptions of premarital counselling and their level of marital adjustment.

Analyses of Demographic Data of Respondents

Table 2- *Gender of respondents*

	Frequency	Percent	Valid Percent	Cumulative Percent
Male	222	44.4	44.4	44.4
Female	278	55.6	55.6	100.0
Total	500	100.0	100.0	

Source: Fieldwork, 2021 (n=500)

The study sampled 500 respondents. Out of which 222 representing 44.4 per cent were male whiles 278 of the respondents (55.6%) were female. The distribution of sex of respondents is conterminous with the male and female population of the church of Pentecost.

Table 3- *Age of respondents*

	Frequency	Percent	Valid Percent	Cumulative Percent
18-25	57	11.4	11.4	11.4
26-35	165	33.0	33.0	44.4
36-45	151	30.2	30.2	74.6
46-60	89	17.8	17.8	92.4
over 60	38	7.6	7.6	100.0
Total	500	100.0	100.0	

Source: Fieldwork, 2021 (n=500)

Table 3 presents the distribution of respondents' age in the study. Respondents who fall in the ages of 18 to 25 were 57(11.4), those within the ages of 26 to 35 were 165 representing 33.0%. 151 of the the respondents were within ages of 36 to 45 representing 30.2% and 89(17.8) from 46 to 60 years. Those over 60 years were 38(7.6).

Table 4- *Level of Education of respondent*

	Frequency	Percent	Valid Percent	Cumulative Percent
No formal education	80	16.0	16.0	16.0
Basic	52	10.4	10.4	26.4
Secondary	99	19.8	19.8	46.2
Tertiary	269	53.8	53.8	100.0
Total	500	100.0	100.0	

Source: Fieldwork, 2021 (n=500)

Table 4 presents the levels of education of respondents. Most of the respondents (53.8, n= 269) had tertiary education. Those who had secondary

education were 99 (19.8%). Respondents with no formal education were 80 (16.0%) and 52 (10.4%) of the respondents had Basic education.

Table 5- *Occupation of respondents*

	Frequency	Percent	Valid Percent	Cumulative Percent
Government employee	178	35.6	35.6	35.6
Private Employee	106	21.2	21.2	56.8
Unemployed	27	5.4	5.4	62.2
Retired	28	5.6	5.6	67.8
Self-Employed	161	32.2	32.2	100.0
Total	500	100.0	100.0	

Source: Fieldwork, 2021 (n=500)

Table 5 shows the occupational distribution of respondents. Government employees were 178 (35.6%) of the 500 respondents sampled for the study. Private employees were 106 (21.2%) and 161 (32.2%) of the respondents were self-employed. 27 of the respondents representing 5.4 percent had no employment. Retired respondents were 28 (5.6%).

Table 6- *Counselling before marriage*

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	364	72.8	72.8	72.8
No	136	27.2	27.2	100.0
Total	500	100.0	100.0	

Source: Fieldwork, 2021 (n=500)

Out of the 500 respondents, (72.8, n=364) had gone through premarital counselling and (27.2, n=136) had no premarital counselling. It is mandatory

in the Church of Pentecost for the would-be couple to go through premarital counselling if they want to involve the church in the marriage. Those who had no premarital counselling might have joined the church after marriage or did a traditional wedding without bringing it to the church or married a lady from a church where premarital counselling is not done.

Table 7- *length of marriage of respondents*

	Frequency	Percent	Valid Percent	Cumulative Percent
1-5 years	144	28.8	28.8	28.8
6 –10 years	161	32.2	32.2	61.0
11-15 years	124	24.8	24.8	85.8
16years and above	71	14.2	14.2	100.0
Total	500	100.0	100.0	

Source: Fieldwork, 2021 (n=500)

Length of marriage of respondents is presented in table 6. Respondents married from 1 to 2 years were 144 (28.8%) and those from 6 to 10 years were 161 (32.2%). 124 (24.8%) had been married from 11 to 15 years and 71 (14.2%) were married from 16 years and above.

Analysis of Main Data

The analysis of the main data is presented on the basis of the research questions and hypotheses set for the study.

Research Question One

What perceptions do married people in the Cape Coast Area of the church of Pentecost have on premarital counselling?

Table 8a- *Mean and Standard Deviation of Scores on Perceptions of married people who had premarital counselling on Premarital Counselling*

Statements	N	Mean	Std. Deviation
Premarital counselling is necessary and must be continued.	364	3.7500	.52025
Premarital counselling must be made compulsory in all churches.	364	3.4478	.53528
Premarital counselling helps the couple to know what goes into marriage and the differences they must deal with in each other.	364	3.5110	.51681
Apart from going through premarital counselling, the success or failure of the marriage can also depend on the extent of knowledge the couple have from books, magazines and films.	364	3.3764	.56392
The success or failure of the marriage can also depend on the pieces of advice from friends or other people who can be of help.	364	3.4176	.53146
The success or failure of the marriage can also depend on pieces of advice from parents.	364	3.4203	.51074
Premarital counselling brings out problems of the would-be couples that have not been previously noticed.	364	3.3791	.56938
Effective premarital counselling should deal with critical issues that could influence the success or failure of the marriage than mere pre-ceremonial meetings with counsellors.	364	3.5549	.49766
Premarital counselling provides an opportunity for a couple to talk about their responsibilities in the marriage.	364	3.4918	.51151

Source: Fieldwork, 2021

Table 8a shows that married people who received premarital counselling before marriage agreed to all the statements. This is because table 7a have means greater than 3.0 on the four point Likert scale.

Table 8b- *Mean and Standard Deviation of Scores on Perceptions of married people who had no premarital counselling on Premarital Counselling*

Statements	N	Mean	Std. Deviation
Premarital counselling is necessary and must be continued.	136	3.6103	.61068
Premarital counselling must be made compulsory in all churches.	136	3.2206	.56688
Premarital counselling helps the couple to know what goes into marriage and the differences they must deal with in each other.	136	3.0000	.82552
Apart from going through premarital counselling, the success or failure of the marriage can also depend on the extent of knowledge the couple have from books, magazines and films.	136	3.2426	.53743
The success or failure of the marriage can also depend on the pieces of advice from friends or other people who can be of help.	136	3.4044	.57579
The success or failure of the marriage can also depend on pieces of advice from parents.	136	3.3897	.51887
Premarital counselling brings out problems of the would-be couples that have not been previously noticed.	136	3.1691	.80328
Effective premarital counselling should deal with critical issues that could influence the success or failure of the marriage than mere pre-ceremonial meetings with counsellors.	136	3.5515	.65342
Premarital counselling provides an opportunity for a couple to talk about their responsibilities in the marriage.	136	3.3897	.56006

Source: Fieldwork, 2021

Table 8b, indicates that married people who did not receive counselling before marriage also had a positive perception of premarital

counselling. This is because table 7b has means greater than 3.0 on the four point Likert scale.

Research Question Two

What is the influence of premarital counselling on the marital adjustment of married people in the Cape Coast Area of the church of Pentecost?

Table 9- Mean and Standard Deviation of Revised Dyadic Adjustment Scale Scores

	N	Mean	Std. Deviation
Premarital Counselling	364	57.8791	8.54847
No Premarital Counselling	136	35.8750	12.71595

Source: Fieldwork, 2021

Table 9 shows how premarital counselling has influenced the marital adjustment of married people. Married people who had premarital counselling (M=57.8791, SD=8.54847) have a high marital adjustment level. A mean score of 48 or greater shows a high marital adjustment level. Married people who had no premarital counselling (M=35.8750, SD=12.71595) have low marital adjustment levels. A mean score of less than 48 shows a low marital adjustment level. Therefore, premarital counselling influences marital adjustment.

Hypotheses one

H_{01} : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.

H_{A1} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.

Table 10- *Independent sample t-test of the differences in the level of Marital on the basis of gender*

Gender	N	Mean	Std. Deviation	Std. Error Mean
Male	156	56.5833	9.35325	.74886
Female	208	58.8510	7.77348	.53899

Source: Fieldwork, 2021

There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender. The marital adjustment level of females (M=58.8510, SD=7.77348) is not higher the males (M=56.5832, SD=9.35325); $t(128.923) = -.295, p=.769$ (two-tailed).

Hypotheses two

*H*₀₂: There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.

*H*_{A2}: There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.

Table 11- *ANOVA test of the difference in the level of marital adjustment on the basis of age.*

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	425.178	4	106.294	1.462	.213
Within Groups	26101.504	359	72.706		
Total	26526.681	363			

Source: Fieldwork, 2021

From Table 11, the F-value of 1.462 was not significant because the significance value of .213 was larger than the .05 level of significance. Therefore, the null hypothesis “*There is no significant difference in the level of marital adjustment on the basis of age*” was not rejected.

Hypotheses three

H_03 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of the marriage.

H_{A3} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of marriage.

Table 12- ANOVA test of the difference in the level of marital adjustment on the basis of length of marriage.

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	312.482	3	104.161	1.430	.234
Within Groups	26214.199	360	72.817		
Total	26526.681	363			

Source: Fieldwork, 2021

Table 12, shows that the F-value of 1.430 was not significant because the significance value of .234 was larger than the .05 level of significance. Therefore, the null hypothesis “*There is no significant difference in the level of marital adjustment on the basis of length of marriage*” was not rejected.

Hypotheses four

H_04 : There is no significant difference level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.

H_A4 : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.

Table 13- ANOVA test of the difference in the level of marital adjustment on the basis of level of education.

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	498.500	3	166.167	2.298	.077
Within Groups	26028.182	360	72.301		
Total	26526.681	363			

Source: Fieldwork, 2021

From table 13, shows that the F-value of 2.298 was not significant because the significance value of 0.77 was larger than the .05 level of significance. Therefore, the null hypothesis “*There is no significant difference in the level of marital adjustment on the basis of level of education*” was not rejected.

Hypotheses five

H_05 : There is no significant difference in the level of marital adjustment of married people who went through premarital counselling and those who did not.

H_{A5} : There is a significant difference in the level of marital adjustment of married people who went through premarital counselling and those who did not.

Table 14- *Independent sample t- test of the difference in marital adjustment levels of married people who had premarital counselling and those who did not.*

	N	Mean	Std. Deviation	Std. Error Mean
Premarital counselling	364	57.8791	8.54847	.44806
No Premarital Counselling	136	35.8750	12.71595	1.09038

Source: Fieldwork, 2021

There is a significant difference in the marital adjustment level of married people who went through premarital counselling and those who did not as shown in table 14. The marital adjustment levels of married people who had premarital counselling (M=57.8791, SD=8.54847) is higher than the marital adjustment level of married people who had no premarital counselling (M=35.8750, SD=12.71595); $t(182.505) = 18.666, p = .000$, (two-tailed).

Discussions

Perception of married people in the Cape Coast Area of the church of Pentecost on premarital counselling.

Married people who went through premarital counselling and even those who did not receive premarital counselling had a positive perception of premarital counselling in the church of Pentecost. They agreed with the statement "premarital counselling is necessary and must be continued". They also agreed that "premarital counselling must be made compulsory in all churches". According to William (2007), premarital counselling should be made mandatory for all would-be couples. Again, they believe that "Premarital

counselling provides an opportunity for a couple to talk about their responsibilities in the marriage" and "Premarital counselling helps the couple to know what goes into marriage and the differences they must deal with in each other". They held the view that "Premarital counselling brings out problems of the would-be couples that have not been previously noticed".

The current study is in agreement with the findings of Ansah–Hughes, Akyina, and Oduro-Okyireh, (2015) in the Tachiman Municipality of Ghana. It was revealed in their study that married people in the Tachiman municipality, held a positive view about premarital counselling. On the contrary, Adzovie and Dabone (2021) found in their study that Christian couples had a negative perception of premarital counselling.

They also agreed that “Effective premarital counselling should deal with critical issues that could influence the success or failure of the marriage than mere pre-ceremonial meetings with counsellors”. They agreed, “Apart from going through premarital counselling, the success or failure of the marriage can also depend on the extent of knowledge the couple have from books, magazines and films”. They established by their agreement that “The success or failure of the marriage can also depend on the pieces of advice from friends or other people who can be of help” and “The success or failure of the marriage can also depend on pieces of advice from parents”.

Typically, during traditional marriage ceremonies in Ghana, parents, relatives and friends are allowed to advise the couple as they enter into marriage. Some of these pieces of advice they give are useful. However, some may stem from their personal experience with their spouses, which may not be useful or applicable in the marriage of the new couple. Knowledge needed to

build a healthy marriage could be acquired from various mediums such as books, films, parents, friends, church leaders and many more. These mediums could provide useful knowledge to the couples as well as knowledge that could break the foundation of the marriage.

Influence of premarital counselling on marital adjustment of married

people in the Cape Coast Area of the church of Pentecost

Married people who had premarital counselling had a high level of marital adjustment but those who had no premarital counselling before marriage had a low level of marital adjustment. This indicates that premarital counselling influences marital adjustment.

This is in agreement with Ntim (2014) who found in her study that premarital counselling is essential to marital success. Premarital counselling has a positive effect on marriage (Schumm, Silliman & Bell, 2000). It has also been established that Premarital counselling helps couples' improve their premarital relationships (Senediak, 1990; Stanley, 2000; Sullivan & Bradbury, 1997). During the premarital counselling process, couples are made to discuss many intimate and important topics relative to marriage, such as finances, communication, values and beliefs, marital role, sex and affection, parenting, decision-making, family relationships, dealing with anger and time spent together. This prepares prospective couples to adjust to each other and the marital environment. According to Adzovie and Dabone (2021), premarital counselling is capable of improving the quality of marriage if the counsellor employs the appropriate procedures and the prospective couple adhere to the various issues discussed therein.

Difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.

Although there is a difference in the mean scores, the difference is not statistically significant. It cannot be concluded therefore that females have high marital adjustment levels than their male counterparts. This is in line with the finding of Ntim (2014) that gender is not a predictor of marital adjustment. Ntim in her study to ascertain the effect of premarital counselling on marital adjustment, found no significant difference in the level of marital adjustment between males and females who had counselling before marriage.

The result of this study is contrary to the findings of Horany and Hassan (2011). Their study, which sought to find the levels of marital adjustment among postgraduate students at universities in Malaysia, found a significant difference in the marital adjustment levels between males and females. They found that females have high marital adjustment levels than males.

The difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.

This study found no significant difference in the level of marital adjustment of married people on the basis of age. This is in agreement with the finding of Durğut and Kisa (2018) and Quinn and Odell (1998). Durğut and Kisa (2018) found in their study conducted to find the predictors of marital adjustment, revealed that there is no connection between age and marital adjustment. Similarly, Quinn and Odell (1998) found in their study that the age of couples is unrelated to their marital adjustment.

Difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of the marriage.

There is no significant difference in the level of marital adjustment of married people on the basis of the length of the marriage. The result supports the findings of Ghoroghi, Hassan and Baba (2015). In their study to ascertain the relationship between the length of the marriage and marital adjustment, found no correlation between length of the marriage and marital adjustment.

Difference in marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.

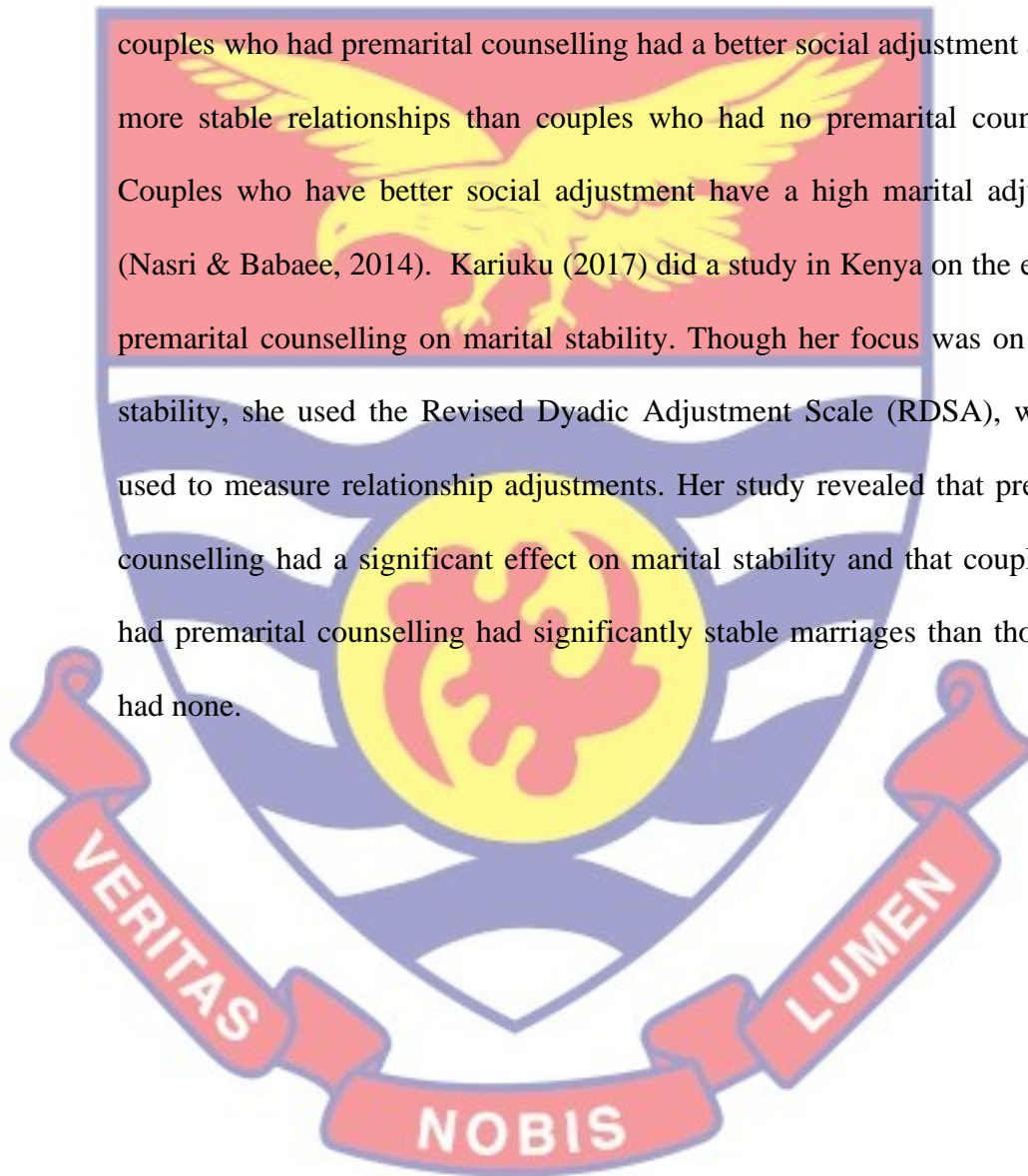
The findings of this study showed no significant difference in the level of marital adjustment of married people on the basis of length of the marriage. The result of this study agrees with the findings of Quinn and Odell (1998). They did a study to find the predictors of marital adjustment among couples. Quinn and Odell found that the level of education of couples is unrelated to their marital adjustment.

Marital adjustment levels of married people in the Cape Coast Area of the church of Pentecost who had premarital counselling and those who did not.

The study found a significant difference in the marital adjustment level of married people who received counselling before marriage and those who did not. Married people who had premarital counselling had high level of marital adjustment compared to those who had no premarital counselling.

This is not in agreement with the findings of Ntim (2014) who in her study found no statistically significant difference in the levels of marital

adjustment between married individuals who had premarital counselling and those who did not. The finding of this study is in tandem with the finding of other research, which assessed the impact of premarital counselling on marriage and other forms of adjustment that could influence marital adjustment. For instance, Egbo (2011) revealed in his study that married couples who had premarital counselling had a better social adjustment and had more stable relationships than couples who had no premarital counselling. Couples who have better social adjustment have a high marital adjustment (Nasri & Babae, 2014). Kariuku (2017) did a study in Kenya on the effect of premarital counselling on marital stability. Though her focus was on marital stability, she used the Revised Dyadic Adjustment Scale (RDAS), which is used to measure relationship adjustments. Her study revealed that premarital counselling had a significant effect on marital stability and that couples who had premarital counselling had significantly stable marriages than those who had none.



CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

The purpose of this study was to find out the influence of premarital counselling on marital adjustment among married people in the Church of Pentecost, Cape Coast Area, Ghana. This chapter presents the summary, conclusions, and recommendations drawn from the findings of the study. There are also suggested areas for further research.

Summary

The purpose of the study was to find out the influence of premarital counselling on marital adjustment among married people in the Cape Coast Area of the church of Pentecost. Specifically, the study examined the perception of married people in the Cape Coast Area of the Church of Pentecost about premarital counselling. The study also found the influence of premarital counselling on the marital adjustment of married people on the basis of gender, age, length of marriage and level of education. It again examined the difference in the marital adjustment levels among married people who had premarital counselling and those who did not.

The study was directed by research questions and hypotheses. The research questions were:

1. What perceptions do married people in the Cape Coast Area of the church of Pentecost have on premarital counselling?
2. What is the influence of premarital counselling on marital adjustment of married people in the Cape Coast Area of the church of Pentecost?

The following hypotheses were formulated to guide and the study.

H_01 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.

H_{A1} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of gender.

H_02 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.

H_{A2} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of age.

H_03 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of marriage.

H_{A3} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of length of marriage.

H_04 : There is no significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.

H_{A4} : There is a significant difference in the level of marital adjustment of married people in the Cape Coast Area of the church of Pentecost on the basis of level of education.

H_05 : There is no significant difference in the marital adjustment level of married people in the Cape Coast Area of the church of Pentecost who had premarital counselling and those who did not.

H_{A5} : There is a significant difference in the marital adjustment level of married people in the Cape Coast Area of the church of Pentecost who had premarital counselling and those who did not.

A descriptive survey design was used for this study. All married people in the Cape Coast Area of the Church of Pentecost were the target population. The total number of married people in the Cape Coast Area of the Church of Pentecost is estimated at 18, 253. Respondents were sampled from all the 29 Districts in the Cape Coast Area using the convenient sample technique. The total number of respondents used for this study was 500. The questionnaires used for the study consist of three sections (A, B, and C). The items (1 to 6) in section A is on demographic characteristics of the couples (gender, age, length of the marriage, level of education, occupation and either one went through premarital counselling or not etc.). Item (7 to 15) which is the Premarital Counselling Perception Scale in section B gathered information on the views of married people in the Cape Coast Area of the Church of Pentecost on premarital counselling. The items (16 to 29) in section C, which is the Revised Dyadic Adjustment Scale gathered information on the marital adjustment levels of the couples.

The independent sample t-test was used to test hypotheses 1 and 5 and ANOVA was used to test hypotheses 2, 3 and 4. Hypotheses were tested at a .05 level of significance. Research questions were analysed using means and standard deviation. The statistical software that was used for analysing the

data from this study is the Statistical Product and Service Solutions (SPSS) Version 20.

Key Findings

1. Married people in the Cape Coast Area of the Church of Pentecost had a positive perception of premarital counselling. They see premarital counselling as very necessary therefore must be continued in the church and must be made compulsory even in all churches.
2. The study revealed the premarital counselling influences marital adjustment. Those who had premarital counselling had high marital adjustment but those who had no premarital counselling had a low marital adjustment.
3. It was found that there is no significant difference in the level of marital adjustment on the basis of gender, age, length of marriage and level of education.
4. There was a significant difference in the level of marital adjustment of married people who had premarital counselling and those who had no premarital.

Conclusions

It can be concluded from the findings of the study that married people in the Cape Coast Area of the Church of Pentecost perceive premarital counselling as a useful and necessary tool for the success of marriage. Premarital counselling significantly influenced the level of marital adjustment of married people. The marital adjustment level of married people who had premarital counselling was significantly higher than those who had no

premarital counselling. Premarital counselling, therefore, helps couples to better adjust to each other in the marital environment.

Recommendations

Based on the findings and conclusions drawn from the study, the following recommendations are made.

1. The church of Pentecost should periodically organize a training workshop for pastors and marriage committee members.
2. There should be an opportunity for married people who had no premarital counselling to go through post-marital counselling because they may have low marital adjustment levels. Postmarital counselling could help them adjust well in their marriage.
3. Prospective couples must be educated on the importance of premarital counselling to the success of marriage so that they would fully avail themselves of the counselling process.
4. Premarital counsellors in the church should not make premarital counselling a ceremonial meeting but a forum to equip prospective couples with the requisite skills to help them to adjust positively in their marriage. It is established that effective premarital counselling helps the couple to better adjust to each other.

Suggestions for Further Research

1. The study ascertained the influence of premarital counselling on marital adjustment among married people in the Cape Coast Area of the Church of Pentecost. This could be replicated in other Areas of the church and in other churches.

2. This study was quantitative. A qualitative enquiry could be done to reveal some deep-seated conditions, which the quantitative study could not highlight.
3. This study could be done in other religions such as the Islamic Religion.



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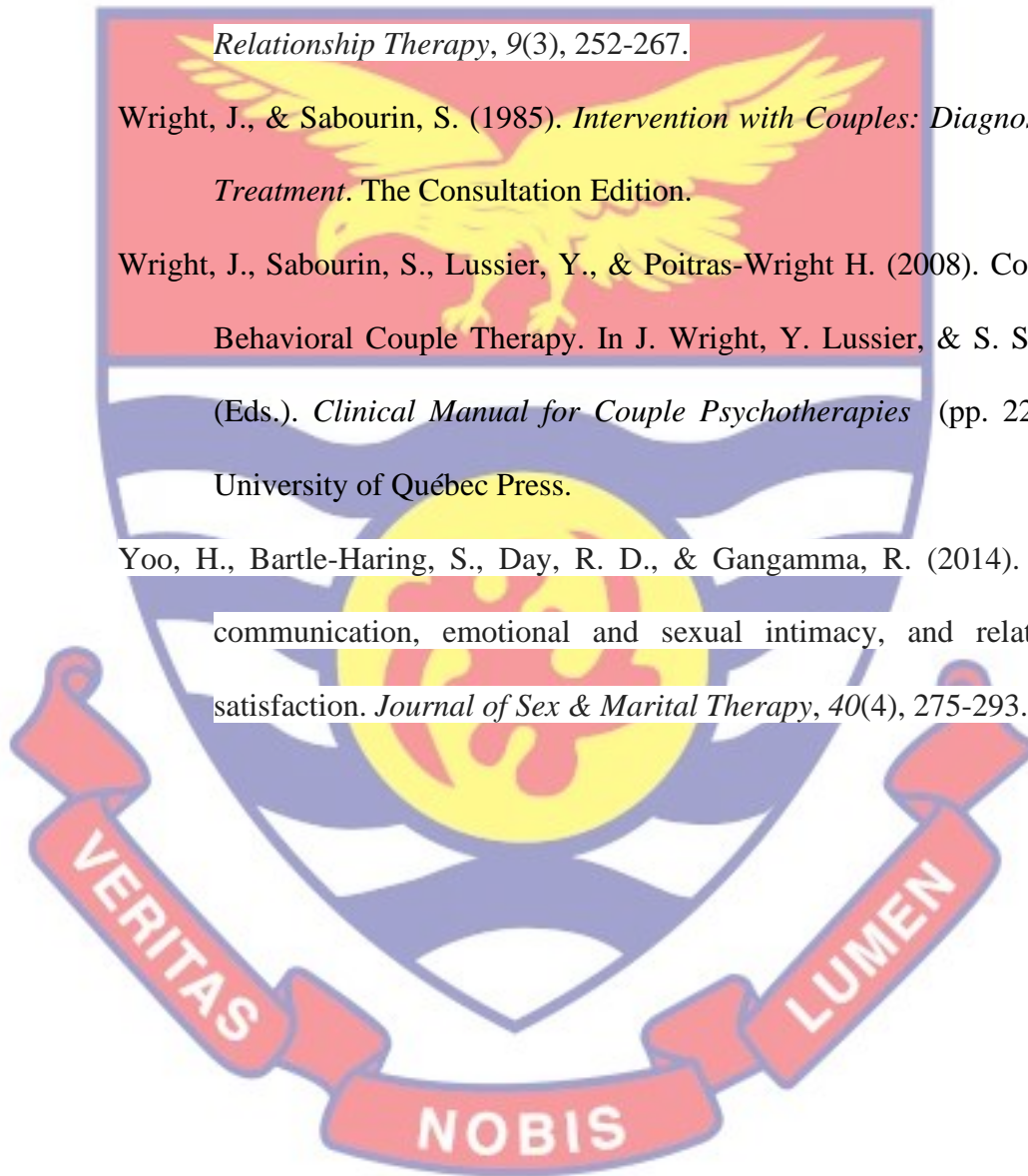
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APPENDIX A

UNIVERSITY OF CAPE COAST

FACULTY OF EDUCATIONAL FOUNDATIONS

DEPARTMENT OF GUIDANCE AND COUNSELLING

Questionnaire for Participants

This study seeks to ascertain the influence of premarital counselling on marital adjustment among married people. It is purely for academic purposes. I will be very grateful if you spend a few minutes of your precious time answering the questions below. Be assured that all information given would be treated very confidential. Therefore feel free and sincerely provide your answers. Thank you.

Do not write your name.

SECTION A: Demographic Characteristics

Instruction: Tick (✓) where applicable.

1. Sex: Male [] Female []
2. Age: 18-25 [] 26-35 [] 36-45 [] 46-60 [] over 60 []
3. Years of marriage: A. 1-5 years [] B. 6-10 years []
C. 11-15 years [] D. 16 years and above []
4. Educational level: A. No formal education [] B. Basic []
C. Secondary [] D. Tertiary []
5. Occupation: A. Government employee [] B. Private Employee []
C. Unemployed [] D. Retired [] E. Self Employed []
F. Others (specify).....
6. Did you go through counselling before marriage? Yes [] No []

SECTION B

Perception of Premarital Counselling Scale

Please tick (✓) where appropriate to answer this question.

	Strongly Agree (4)	Agree (3)	Disagree (2)	Strongly Disagree (1)
7. Premarital counselling is necessary and must be continued.				
8. Premarital counselling must be made compulsory in all churches.				
9. Premarital counselling helps the couple to know what goes into marriage and the differences they must deal with in each other.				
10. Apart from going through premarital counselling, the success or failure of the marriage can also depend on the extent of knowledge the couple have from books, magazines and films.				
11. The success or failure of the marriage can also depend on the pieces of advice from friends or				

<p>other people who can be of help.</p>				
<p>12. The success or failure of the marriage can also depend on pieces of advice from parents.</p>				
<p>13. Premarital counselling brings out problems of the would-be couples that have not been previously noticed.</p>				
<p>14. Effective premarital counselling should deal with critical issues that could influence the success or failure of the marriage than mere pre-ceremonial meetings with counsellors.</p>				
<p>15. Premarital counselling provides an opportunity for a couple to talk about their responsibilities in the marriage.</p>				



SECTION C

Reversed Dyadic Adjustment Scale (RDAS)

Most people have disagreements in their relationships. Please appropriately (mark√) the extent of agreement or disagreement between you and your partner for each item

Please tick (√) where applicable

	Always Agree(5)	Almost Agree(4)	Occasionally Agree(3)	Frequently Disagree(2)	Almost Always Disagree(1)	Always Disagree(0)
16. Religious matters						
17. Demonstrations of affection						
18. Making major decisions						
19. Sex relations						
20. Conventionality (Correct or Proper-behaviour)						
21. Career decisions						

	All the Time (0)	Most of the time (1)	More often than not (2)	Occasionally (3)	Rarely (4)
22. How often do you discuss or have you considered divorce, separation, or terminating your Relationship?					
23. How often do you and your partner quarrel?					
24. Do you ever regret that you married (or lived together)?					
25. How often do you and your mate get on each other's nerves?					
	Every day (4)	Almost every day	Occasionally (2)	Rarely (1)	Never (0)
26. Do you and your mate engage in outside interest together					

Appropriately mark (√).

How often would you say the following events occur between you and your spouse?

	Never (0)	Less than once in a month (1)	Once or twice a month (2)	Once or twice a week (3)	Once a day (4)	More often (5)
27. Have a stimulating exchange of ideas						
28. Work together on a project						
29. Calmly discuss something						



APPENDIX B

INTRODUCTORY LETTER

UNIVERSITY OF CAPE COAST
COLLEGE OF EDUCATION STUDIES
FACULTY OF EDUCATIONAL FOUNDATIONS
DEPARTMENT OF GUIDANCE AND COUNSELLING

Telephone: 0332091854
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UNIVERSITY POST OFFICE
CAPE COAST, GHANA



Our Ref: DGC/L.2/Vol.1/ 150

14th April, 2021

Your Ref:

TO WHOM IT MAY CONCERN

LETTER OF INTRODUCTION

We introduce to you, Kwame Amanfi a student pursuing an M.Phil programme in Guidance and Counselling at the Department of Guidance and Counselling of the University of Cape Coast. As a requirement, he is to submit a Thesis on the topic: *"Influence of Premarital Counselling on Marital Adjustment Among Married People in the Church of Pentecost, Cape Coast Area, Ghana"*. We are by this letter affirming that, the information he will obtain from your Institution will be solely used for academic purposes.

We would be most grateful if you could provide him the necessary assistance.

Thank you.

Dr. Stephen Doh Fia
HEAD OF DEPARTMENT

APPENDIX C

ETHICAL CLEARANCE

UNIVERSITY OF CAPE COAST
COLLEGE OF EDUCATION STUDIES
ETHICAL REVIEW BOARD

UNIVERSITY POST OFFICE
CAPE COAST, GHANA



Our Ref: CES-ERB/UCC.edu.gh/15/21-51
Your Ref:

Date: 24th May 2021

Dear Sir/Madam,

ETHICAL REQUIREMENTS CLEARANCE FOR RESEARCH STUDY

Chairman, CES-ERB
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Vice-Chairman, CES-ERB
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The bearer, Kwame Amanki, Reg. No. FF/GC/20/011 is an M.Phil. / ~~Ph.D.~~ student in the Department of Guidance and Counselling in the College of Education Studies, University of Cape Coast, Cape Coast, Ghana. He / ~~She~~ wishes to undertake a research study on the topic:

Influence of premarital counselling on marital adjustment among married people in the church of Pentecost, Cape Coast Area, Ghana.

The Ethical Review Board (ERB) of the College of Education Studies (CES) has assessed his/~~her~~ proposal and confirm that the proposal satisfies the College's ethical requirements for the conduct of the study.

In view of the above, the researcher has been cleared and given approval to commence his/~~her~~ study. The ERB would be grateful if you would give him/~~her~~ the necessary assistance to facilitate the conduct of the said research.

Thank you.

Yours faithfully,

Prof. Linda Dzama Forde
(Secretary, CES-ERB)