

## Predicting the Quality of Married Life Based on the Concepts of the Acceptance and Commitment Theory

### Abstract

The purpose of this study was to predict marital quality of life based on the concepts of acceptance and commitment theory including mindfulness, cognitive failure, acceptance and action, and values in married couples in Shushtar. The research method is descriptive-correlational. The statistical population of the study included all married men and women 200 married men were selected by convenience sampling method. The tools used in the study are: Norton Marital Quality of Life Questionnaire (1983) Herzberg et al. (2012) bn Mindfulness Questionnaire of Guilandrzhokaran (2014) and McKenzie Vukowski Acceptance and Practice Questionnaire (2010). Descriptive methods (mean and standard deviation) and inferential methods (Pearson correlation coefficient and stepwise regression analysis) were used. It is concluded from the findings of this study that some of the concepts of Nawaz A commitment based on the reception quality of life of marital predict and may be of preventive and treatment interventions used in the life of a couple.

**Keywords:** *Quality of Marital Life, Acceptance and Commitment. Mindfulness Cognitive fault, Acceptance and practice , values*

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### Introduction

The family is the center for starting feelings and emotions and the most intimate relationships between people. It is also the main center of a community's health, where couple relationships are considered a major factor for the family's health (Pour Mohammad Rezaei Tajrishi, Pahlavan Neshani, and Najafi Fard, 2014). One of the areas of quality of life is married life. The emotional and mental health of the people in the family health group depends on the health and quality of the couples. Psychologists and all people doing research in the field of the family consider the quality of married life<sup>1</sup> as the main factor in the growth and development of family members and thus they have paid special attention to all the factors affecting the quality of life (Esmailpour, Khajeh, and Mehdevi, 2015). The concepts such as adjustment, satisfaction, happiness, integrity, and commitment are used to describe the quality of married life. Psychologists have described the quality of married life as the success and performance of a marriage. Currently, this dimension is considered the basic predictor of marital stability. Majority of the researchers doing research in the family area consider the quality of married life similar to satisfaction and use the terms marital satisfaction and quality synonymously, but they are different terms (Shah Siah, 2013).

Based on the World Health Organization, quality of life is a person's assessment of his or her position in life, the cultural context, and the value system in which he or she lives

concerning his or her goals, expectations, standards, and interests (Power<sup>2</sup>, 2017). The quality of married life is a dynamic concept since the importance and quality of relationships between people change over time (Larsson and Holman<sup>3</sup>, 1994). According to Sonro<sup>4</sup> (2007), quality of life is like a big umbrella that covers various factors. These factors have an impact on a person's life and the creation of interpersonal relationships, including individual factors (spouses' personality (Champlouska, 2012), gender, health and socio-economic nature (communication factors (Champlouska, 2012), duration of the marriage, couple interactions, premarital relationships, children, division of duties, external factors (characteristics of parents, friends, stressful events) and women's employment (Champlouska,<sup>5</sup> 2012).

Several theories have examined the prediction of the quality of married life. The present study examines the concepts of the acceptance and commitment theory in predicting the quality of married life. The acceptance and commitment theory was presented by Steven Hayes<sup>6</sup> (1897) at the University of Nevada. It is a cognitive and behavioral therapy that is based on functional contextualism and its basis in the new theory about language is cognition. It is called the framework theory of mental relationships. The acceptance and commitment theory is based on the assumption that many people find their inner feelings, emotions, or thoughts freely and attempt to change these inner experiences or get rid of them. These attempts to control are useless and intensify the feelings,

Quality of married life<sup>1</sup>

Power<sup>2</sup>

Larsson&Holman<sup>3</sup>

Sonro<sup>4</sup>

Champlouska<sup>5</sup>

Steven Hayes<sup>6</sup>

emotions, and thoughts that the person initially tries to avoid. The fundamental processes of acceptance and commitment therapy are acceptance, mindfulness, self as context, cognitive fault, values, and committed action. All of them lead to the flexibility that teaches people how to get rid of disturbing thoughts and how to tolerate unpleasant emotions (Hays Wallis<sup>7</sup>, 2012).

Acceptance means being aware of inner experiences and accepting them without unnecessary efforts to change their form or frequency (Tohi et al., 2006). The cognitive fault is a gradual weakness of behavioral regulation functions and verbal effects on internal events (Hayes, 2004). Mindfulness in the framework theory of mental relationships argues that a transcendent sense of self causes a sense of here and now versus there and then. When there is a transcendent sense of self, it does not important where and when a person is. This idea always exists in the here-and-now form (Zettel and Rinrohies<sup>8</sup>, 2009). Mindfulness in acceptance and commitment theory encourages observing and describing experiences at the present without judging the experiences (Hayes et al., 2006). Values are verbal expressions making certain behaviors desirable and other behaviors undesirable. It increases the frequency of certain behaviors that compete with undesirable behaviors such as avoidance (Hayes et al., 2005). Committed action based on the mental framework theory is a pattern that generates behavior regulated by the values of a verbal antecedent and continues with its outcomes consistent with the values (Hayes et al., 2010).

The acceptance and commitment theory is used in unique couple therapy. When the partner feels that his or her feelings have been damaged, he or she tries to maintain his or her emotional distance from his or her spouse, since this emotional distance supports him or her and reduces the possibility of emotional distress in the future. The acceptance and commitment theory teaches couples to pay attention to thoughts and feelings that are related to emotional distance (like thinking that I can't talk about my true feelings with my spouse). They learn not to eliminate these thoughts, practice with conscious acceptance of these thoughts and act while maintaining marital intimacy and relationship. Acceptance and commitment theory aims at modifying the marital relationship using these behavioral changes to encourage each partner to consciously accept their internal reactions to each other's behavior and learn that their evaluation of the other's behavior is a thought and it is not necessary for them to do something based on their thoughts. Using these skills and guidelines, they find an opportunity to behave in a way that increases their adjustment and satisfaction (Peterson et al. <sup>9</sup>, 2009).

Mindfulness is one of the ways to increase a person's understanding of a marital relationship.

Mindfulness means paying attention to the present purposefully, and non-judgmentally (Kabat, Zain<sup>10</sup>, 2009). Complementary processes of acceptance and fault help couples respond to their thoughts and feelings more healthily in terms of psychology. Acceptance means that the person accepts thoughts and feelings without trying to control them. Fault means that the person believes the thoughts as the truth and experiences them instead of avoiding them. Acceptance and fault can prevent the weakening of the couple's relationship (Khanjani et al., 2016) In other words, the acceptance and commitment theory aims to help couples to become aware of their cognitive process and emotional reaction, either individually or jointly, to clarify the values that keep them in the relationship, and commit themselves in ways that are consistent with the goals even in the presence of unwanted thoughts and feelings (Amanollahi et al. 2014). By accepting their thoughts and feelings instead of avoiding them in acceptance and commitment theory, couples select an action that is more appropriate and close to their values in life among various options, rather than the action that leads to avoiding disturbing thoughts and feelings, memories or desires (Lashni, 2013, Fathollahzadeh, Rostami, Darbani, and Karzah, 2018).

This study aims to investigate the effectiveness of acceptance and commitment treatment in the quality of life and marital satisfaction of housewife mothers. The results of the study revealed that acceptance and commitment treatment increases the quality of life and marital satisfaction of housewife mothers. Nazari, Falahzadeh, and Nazarband (2017) investigated the effectiveness of group-based acceptance and commitment treatment in reducing marital frustration and increasing the married quality of women. The results revealed that acceptance and commitment treatment increased married quality and reduced marital frustration. Madani and Hojjati (2015) investigated the effect of mindfulness-based cognitive therapy on marital satisfaction and the couples' quality of life. The study results revealed that mindfulness can increase marital satisfaction and the couples' quality of life. Krafft, Haeger, and Levin (2017) examined the effect of mindfulness and acceptance on the level of couples' satisfaction with life together. The results of the study showed that mindfulness and acceptance and their performance in couples' relationships are stronger and more appropriate. The regression analysis method results showed that by increasing acceptance and keeping awareness at a moderate level, the level of people's satisfaction with common life increased.

Brenan and Peterson (2014) showed that acceptance and commitment treatment increases marital adjustment and

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Hays Wallis <sup>7</sup>  
Zettel&Rinrohies <sup>8</sup>

Peterson et al <sup>9</sup>  
Kabat&Zain <sup>10</sup>

satisfaction and reduces personal and psychological distress in couples. Folke et al. (2012) showed that using acceptance and commitment treatment is a strong predictor of increasing patients' quality of life and their marital satisfaction over time. The main issue of this study is predicting the quality of married life based on the concepts of the acceptance and commitment theory, including mindfulness, acceptance, fault, values, and committed action. Also, it aims to reveal which of the concepts of acceptance and commitment is a stronger predictor for the quality of married life.

## **Methods**

### **Statistical population and sampling**

Given the aim of the present study, a descriptive correlational research design was used. The statistical population of the study included all married men and women in Shushtar city in 2019. Since the present study is a descriptive-correlational type, random sampling was used in the first stage of the study. Accordingly, the city of Shushtar was divided into 5 districts, and one district was randomly selected, and the samples were selected from this district using a convenience sampling method. Then, the researcher referred to the health centers, banks, and laboratories, and selected the married respondents. The statistical sample of the study was 200 married men. The inclusion criteria of the study were: 1- being married, 2- passing at least two years from marriage, and 3- having an age between 21 and 65 years. The exclusion criterion of the study included non-cooperation in filling out the questionnaires

### **Research tools**

#### **Quality of married life questionnaire (Norton, 1983)**

This questionnaire was used to assess the quality of married life. It is a six-item tool that assesses the quality of married life using general items such as "We have a good marriage." The subject expresses his or her agreement in the five questions of the questionnaire in a range from 1 "strongly disagree" to 7 "strongly agree". Fincham, Paliri Vergalia (2002) reported its reliability at 96% using Cronbach's alpha method on both women and men. Khojasteh Mehr, Karaei, and Amini (2010) used the Enrich Marital Satisfaction Questionnaire to examine the construct validity of this questionnaire. They reported its construct validity coefficient at 77%, which is significant at the  $p < 0.001$  level.

#### **Cognitive fusion (Cognitive fault) questionnaire**

This questionnaire was developed by Gillanders et al. (2014). It includes 7 questions and is scored on a Likert scale from it is not true at all (1) to it is completely true (7). The higher scores reflect better cognitive fusion. In a study conducted on over 1800 people, Gillanders et al. (2014) showed good evidence of the factor structure of reliability, time stability, discriminant validity, and time sensitivity. Its test-retest reliability was reported at 81%. In their study on students, Akbari et al. (2015) reported the Cronbach's alpha coefficient

of this questionnaire at 91%. They also reported its test-retest reliability coefficient with a 5-week interval at 86%.

#### **Mindfulness Questionnaire**

This questionnaire was created by Herzberg et al. (2012) to assess the thoughts and feelings of people with anxiety disorders. It includes 16 questions assessing a person's tendency for fusing with anxious thoughts and feelings, instead of assessing the presence, intensity, or degree of the symptom of each person's belief. Its questions are scored on a Likert scale from 1 (I don't believe at all) to 7 (I completely believe). Herzberg et al. (2012) reported that the validity and reliability of this questionnaire were appropriate in non-clinical and anxious people. The factor structure of this questionnaire showed three factors, including physical worry, emotional regulation, and negative evaluation. The internal consistency of this questionnaire for healthy people and anxious people was 90% and 91%, respectively. This questionnaire and its subscales showed a high level of construct validity (77%) with other process and outcome scales in both healthy and anxious people (Herzberg et al., 2012). Soltani Bahrnian, Sajdi Arani, Farhoodian, and Ghachkar (2015) showed a positive correlation between this questionnaire and the cognitive fusion, acceptance and action, and anxiety in social interactions questionnaires and a negative correlation between acceptance and social anxiety of valued living, and quality of life questionnaires. Its Cronbach's alpha coefficient and test-retest reliability were obtained at 82% and 81%, respectively.

#### **Social Anxiety-Acceptance and Action Questionnaire**

This questionnaire was developed by MacKenzie and Kocovski (2010) to assess acceptance and action or people's level of awareness of their thoughts and feelings about social anxiety without trying to change it. Also, the reliability of this questionnaire in Iran using test- test method and Cronbach's alpha was obtained at 84% and 84%, respectively. Its correlation with acceptance and action and anxiety in social interactions questionnaires was obtained at 58% and 49%, respectively. Also, the results of factor analysis showed the three components of acceptance, experience without judgment, and action (Soltani, Bahrnian, Masjedi Arani, Faramohani, 2016).

#### **Valued living questionnaire**

This questionnaire is a two-section tool designed by Wilson et al. (2010) to assess valued living. In the first section, the participants rank the importance of 10 areas of life on a Likert scale. These areas of life include family, marital relationships, marriage, intimate or romantic relationships, parenting, friendships, career, education, recreation or entertainment, spirituality, citizenship, and physical self-caring. The second section of this questionnaire asks people to express how consistently they have lived based on this valuable behavior pattern in each area in the last week on a Likert scale. This

section of the questionnaire, as a self-assessment scale, assesses the fit between the real activities of the clients and their valued behavioral models (Wilson et al., 2010). Cronbach's alpha of the valued living questionnaire in two studies was reported at 79% and 83% for the importance section, 58% and 60% for the stability section, and 65% and 74% for the combined section. Test-retest reliability for the importance, stability and combined section was reported at 90%, 58%, 89%, and 84%, respectively (Soltani, Masjidi Arand, Bahrnian, 2016). After implementing the questionnaire, the data were scored. Descriptive statistics (mean and standard deviation) and inferential statistics (Pearson's correlation

coefficient, stepwise multivariate regression), and SPSS-21 software were used to analyze the data.

**Results**

**Description of samples**

The mean age of the participants is 37.23 years with a standard deviation of 9.57.

The mean duration of marriage is 13.41 years with a standard deviation of 9.81 years.

Main hypothesis: The components of mindfulness, cognitive fault, acceptance and action, and values can predict the quality of married life.

Multiple correlation	Squared correlation	Estimated error	standard	Sig
0.393	0.155	6		0.001**

The correlation between the quality of married life component of couples the components of cognitive fault, the importance of values, and the behavior-value fit was at R=0.39.

This correlation is called Multiple Correlation and indicates the correlation between several independent variables and one dependent variable. If the squared value of this coefficient is 0.15, it will show that 15.5% of the variance or individual differences in the couples' married life quality scale are related

to individual differences in different components of emotion regulation, cognitive fault, the importance of values, and behavior-value fit. This correlation is statistically significant (P = 0.001), so the fifth assumption was confirmed at the level of 0.01%.

First hypothesis: There is a relationship between mindfulness and the couples' quality of married life.

Table 1-2 Pearson's correlation coefficient between mindfulness and couples' quality of married life

Research variables	statistic	Physical worry	Emotion regulation	Negative evaluation	Mindfulness
quality of married life	R	170.0	18.*0	104.0	052.0
	R2	-	34.3	-	-
	*P= 0.05				
	**P= 0.01				

Hypothesis 1-1- There is a relationship between physical worry and the couples' quality of married life.

As shown in Table 1-2, the correlation coefficient between physical worry and the couples' quality of married life is 0.170, which is not statistically significant (P<0.05). Therefore, hypothesis 1-1 is rejected at the 0.05 level and there is no significant relationship between physical worry and the couples' quality of married life.

Hypothesis 1-2- There is a relationship between the emotion regulation component and couples' quality of married life.

As shown in Table, the correlation coefficient between emotion regulation and the couples' quality of married life is 0.183, which is not statistically significant (P<0.01). Therefore, hypothesis 1-2 is not confirmed at the 0.01 level and there is no significant relationship between emotion regulation and the couples' quality of married life.

Hypothesis 1-3- There is a relationship between the negative evaluation and the couples' quality of married life.

As shown in Table 7-4, the correlation coefficient between negative evaluation and the couples' quality of married life is 0.104, which is not statistically significant (P<0.05). Therefore, hypothesis 1-3 is rejected at the 0.05 level and there is no significant relationship between negative evaluation and the couples' quality of married life.

Hypothesis 1-4- There is a relationship between mindfulness and couples' quality of married life.

As shown in Table 7-4, the correlation coefficient between mindfulness and the couples' quality of married life is 0.052, which is not statistically significant (P<0.05). Therefore, hypothesis 1-4 is rejected at the 0.05 level and there is no significant relationship between mindfulness and couples' quality of married life.

Second hypothesis: There is a relationship between cognitive fusion and couples' quality of married life.

Table 1-3: Correlation coefficient between cognitive fusion and the couples' quality of married life

Research variables	N	Correlation coefficient	sig	Coefficient of determination
cognitive fusion and the couples' quality of married life	175	241.-0	002.**0	80.5

As shown in Table 1-3, the correlation coefficient between cognitive fusion and couples' quality of married life is -0.24, which is statistically significant ( $p < 0.01$ ), so hypothesis 1-2 is confirmed at the 0.01 level. Thus, there is a significant relationship between cognitive fusion and couples' quality of married life. The above relationship shows that with 99%

confidence, it can be stated that 5.8% of the variance in couples' quality of married life is due to the cognitive fusion factor. Due to the negative correlation, it can be stated that an increase in fusion decreases the couples' quality of married life. Third hypothesis: There is a relationship between acceptance and action and couples' quality of married life.

Table 1-4: The correlation coefficient between acceptance and action and couples' quality of married life

Research variables	N	Correlation coefficient	sig	Coefficient of determination
acceptance and action and couples' quality of married life	175	048.0	540.0	-

As shown in Table 1-4, the correlation coefficient between acceptance and action and the couples' quality of married life is 0.048, which is not statistically significant ( $P < 0.05$ ). Therefore, hypothesis 8-4 is rejected at the 0.05 level. Thus,

there is no significant relationship between acceptance and action and the couples' quality of married life. Fourth hypothesis: There is a relationship between the importance of value and the couples' quality of married life.

Table 1-5: Correlation coefficient between the importance of value importance and the couples' quality of married life

Research variables	N	Correlation coefficient	sig	Coefficient of determination
value importance and the couples' quality of married life	175	304.0	001.**0	24.9

As shown in Table 1-5, the correlation coefficient between the importance of value and the couples' quality of married life is 0.30, which is statistically significant ( $P > 0.01$ ). Therefore, the fourth hypothesis is confirmed at the 0.01 level and there is a significant relationship between the importance of value and the couples' quality of married life. This relationship shows that with 99% confidence that 24.9% of the variance in

couples' quality of married life is due to the importance of value. Due to the positive correlation, it can be stated that an increase in the importance of value increases couples' quality of married life.

Hypothesis 1-4: There is a relationship between the behavior-value fit and couples' quality of married life.

Table 1-6: Correlation coefficient between the behavior-value fit and couples' quality of married life

Research variables	N	Correlation coefficient	sig	Coefficient of determination
Behavior-value fit and couples' quality of married life	175	299.0	001.**0	94.8

As shown in Table 1-6, the correlation coefficient between the behavior-value fit and couples' quality of married life is statistically significant ( $p < 0.01$ ). Thus, the fifth hypothesis is confirmed at the 0.01 level and there is a significant

relationship between the behavior-value fit and couples' quality of married life. Based on this relationship, with 99% confidence, it can be stated that 8.94% of couples' quality of married life variance is due to the behavior-value fit. Due to

the positive correlation, it can be stated that an increase in the behavior-value fit increases couples' quality of married.

Table 1-7: Results of multiple regression variance analysis for predicting couples' quality of married life

Source of variations	Sum of squares	DF	Mean of squares	F	Sig
Regression	821.1047	4	955.261	272.7	001.**0
Residual	788.5727	159	024.36	-	-
Total	610.6775	163	-	-	-

As shown in Table 1-7, the results of the variance analysis confirmed the validity of the regression analysis performed to

predict the value of importance through the research variables (F=7.272, P<0.001).

Table 1-8: Multiple stepwise regression analysis

Model	multiple correlation	Squared correlation	Sig
Value of importance	297.0	088.0	001.**0
Cognitive fault	352.0	124.0	001.**0

These results show that among all types of research components, the value of importance in the first stage and cognitive fault in the second stage entered the equation. The regression coefficient significance shows that the value of importance in the equation significantly predicts the couples' quality of married life. As seen, when the value of importance

enters the equation, its squared correlation is 0.088. It means that 8.8 percent of the variance is due to the value of importance and the couples' quality of married life. After adding the cognitive fault component, the predictive power increased to 12.4%. Other components were removed due to overlap with each other.

Table 1-9: Raw and standard coefficients in multiple regression analysis

Model	Non-standard coefficients		standard coefficients	t	Sig
	B	Standard of deviation error	Beta		
Constant	42.34	23.3	-	64.10	001.**0
Value of importance	11.0	03.0	25.0	43.3	001.**0
Cognitive fault	13.-0	05.0	19.-0	56.-2	011.**0

Based on the information in Table 1-9 and the standardized beta coefficients, it can be seen that the value of importance with the value of B=0.259 and the cognitive fault factor with the value of B=-0.19 have the most significant effect in explaining the variations and predicting the couples' quality of married life.

**Discussion and Conclusion**

Main hypothesis: The components of mindfulness, cognitive fault, acceptance, and values can predict the quality of married life. The results of the study confirmed that there is a significant relationship between cognitive fault and the importance of value and the behavior-value fit and quality of married life. In explaining this result, it can be stated that cognitive fault helps people to recognize their thoughts and separate themselves from them. In this process, a person

observes his or her thinking process and then distances himself from them (Hayes et al., 1999). The cognitive fault helps them not to get caught up in their thoughts. It also causes fewer thoughts to act as a barrier. The cognitive fault creates a useful separation between the person and his or her mental content, and it allows couples to see the thoughts as they are. It requires couples to separate themselves from the thoughts and the content of such thoughts. They should break their thoughts and take steps in the path of values regardless of what is expressed in their minds. Values are the life areas that are important for a person. They are general directions for behavior. In other words, they are general and abstract concepts that are important directions for a person in life value (Hayes et al. 2011). If the person's choices and behaviors are closer to his or her values, his or her life will be effective. The results of the study indicate that the cognitive fault and the importance of

value and the behavior-value fit are stronger predictors in couples' quality of married life.

First hypothesis: There is a relationship between mindfulness and the quality of married life

Based on the results of the study, this hypothesis was not confirmed and its three subscales (emotional regulation, physical worry, and negative evaluation) were rejected. Therefore, there is no significant relationship between mindfulness and the quality of married life in this study. This hypothesis is inconsistent with those of studies conducted by Sadaghat Khah and Behzadipour (2016), Madani and Hojjati (2015), Beighi et al. (2014), Amberi (2015), Jones et al. (2015), Leslie (2005). The concept of mindfulness has been affected by Buddhist thought in recent years. It has attracted the attention of psychologists, psychotherapists, and researchers. Mindfulness is an awareness of what is happening in the present time (Broon and Rian, 2003). It makes us aware that negative emotions may occur, but they are nothing but a personality constant. It allows the person to respond to events with thinking instead of responding to events involuntarily and without thinking (Emanuel et al., 2010). It makes a person curious about his or her internal and external experiences. Mindfulness is the cultivation of the ability to observe thoughts, feelings, sensations, actions, and desires, which helps people to be less affected by their spouse's behavior. It teaches couples to be present with each other and get rid of past and future stories. It also allows spouses to select the answers that are the same as the values (Mito McKay, 2016). A possible reason for rejecting this hypothesis is that it was not comprehensible at the general education level and its questions were not clear for the respondents, so it is necessary to develop and standardize a completely native questionnaire in this field.

Hypothesis 1-1- There is a relationship between physical worry and the quality of married life

Based on the results of this study, this hypothesis was rejected. Thus, there is no relationship between physical worry and the quality of married life. This hypothesis is inconsistent with those of studies conducted by Soroush et al. (2012), Kalkhuran (2011), and Peyvandi et al. (2009) Anxiety is the feeling of worry or stress, evoked in response to threatening or stressful conditions. It affects the social and individual life of a person and acts as a driving force for life activities in all conditions. It can be both useful in all life situations and the most common psychological symptoms in a person and can affect human life negatively (Kalkhuran, 2011). A possible reason for rejecting this hypothesis is that most of the respondents did not comprehend the questionnaire items, although there is theoretical and research background confirming the relationship between physical worry and quality of married life. Thus, it is necessary to develop a native and cultural

mindfulness questionnaire or to use other questionnaires that are comprehensible for the Iranian population.

Hypothesis 1-2- There is a relationship between emotional regulation and the quality of married life

Based on the results of the study, this hypothesis was rejected since no significant relationship was found between emotional regulation and the quality of married life. This hypothesis is inconsistent with those of the studies conducted by Azizi et al. (2015), Goldman and Greenberg (2013), Yoo et al. (2011), Rajabi et al. (2011), and Jafar Yazdi and Golzari (2005). In explaining the result of this hypothesis, it can be stated that the goal of emotional regulation is to support and create self-esteem, efficiency, and individuality in a person to increase positive emotions and avoid negative emotions to create happiness in the person (Heidari and Eghbal, 2014). Emotional regulation causes satisfaction in couples' relationships with each other. People who can regulate their emotions can understand their own and others' emotions. They will also have a better understanding of different situations. They enjoy interpersonal skills and have higher quality and longer stability in relationships. In contrast, people who have low emotional regulation skills cannot maintain their emotional state. They feel that their emotions are out of control and endanger their relationships in the marriage. Regulating emotions helps couples to avoid facing negative situations and self-monitoring actions and to learn skills that benefit both (Makvandi and Banai, 2015). Although there are theoretical and research backgrounds confirming the relationship between emotion regulation and the quality of married life, rejecting this relationship in the present study is related to the mindfulness questionnaire. During conducting the study, most of the respondents did not understand the questionnaire's items. Thus, it is necessary to prepare a local and cultural awareness questionnaire or to use other questionnaires that are comprehensible for Iranian respondents in future studies.

Hypothesis 1-3- There is a relationship between the negative evaluation and the quality of married life.

Based on the results of the study, the hypothesis is rejected since no significant relationship was found between the negative evaluation and the quality of married life. This hypothesis is inconsistent with those of the studies conducted by Takhti (2011), Pour Rahimi and Marani (2000), Pour Mohammad Rezai and Tajrishi et al. (2014), Pascal and Jane (2008), and Adis and Bernard (2002). Human beliefs determine the type and intensity of emotions and behavior shaped by our beliefs and these beliefs are the way of thinking of a person towards self, the world, and others (Shafiabadi and Naseri, 2013). Hence, beliefs in couples are a determining factor in interpreting the events and regulating the quality of behavior and emotions (Ellis 1995). Therefore, the ways of understanding and interpreting couples' evaluation of each

other and the events occurring in their relationships have a great impact on the quality of their relationships (Carney and Guer, 2010). A possible reason for rejecting this hypothesis is that the awareness questionnaire was not comprehensible and its questions were not clear for the respondents, so it is necessary to develop a local and cultural awareness questionnaire or to use other questionnaires that are comprehensible for Iranian respondents in future studies.

The second hypothesis: There is a relationship between cognitive fault and couples' quality of married life

This hypothesis was confirmed based on the results of this study since a significant relationship was found between cognitive fault and the quality of married life. The cognitive fault was considered a strong predictor of the quality of married life. No study was found consistent with this hypothesis. Cognitive fault with a value of 0.19 had the most significant effect in predicting the quality of married life. The cognitive fault goal is to help couples see the continuous process of thinking and connect consider the thoughts as experiences and not imagine them as real. Cognitive fault helps couples not to get caught in thoughts and makes thoughts act less as a barrier. Cognitive fault creates a useful separation between the person and his or her mind content. It allows spouses to see thoughts as they are and create a space in which thoughts are less considered seriously. Cognitive fault helps couples to separate themselves from thoughts and take steps in the path of values, regardless of what the mind expresses. It helps couples not to think of thoughts as reality, but to see them as hypotheses that can be checked and tested. When the couple does not stick to their thoughts rigidly, they can check their behavior at the present moment, leading to increased quality of married life (Mathew and McKay, 2016).

The third hypothesis: There is a relationship between acceptance and action and the quality of married life

This hypothesis is rejected based on the results of the study since no significant positive relationship was found between acceptance and action and the quality of married life. This hypothesis result is inconsistent with the results of the studies conducted by Eskandari Sedgh (2019), Asadipour and Veisi (2018), Moradzadeh and Pir Khanefi (2017), Nazari, Falahzadeh, and Nazarband (20167), Peterson et al. (2015), Brown and Yetigham (2015), Brennan and Peterson (2014), and Folke et al. (2012). Acceptance is a process in which we leave our attempts to control our experiences. Acceptance helps couples develop a state of being receptive to themselves and their spouses just as they are and stop trying to change themselves or their spouses. The acceptance process goal is to reduce the need to inhibit thinking. Committed actions are similar to the values that replace coping behaviors. They are voluntary behaviors that serve a person's values. Based on the theory of the mental relationship, the committed action is a

constructive pattern of behavior regulated by the values as a verbal antecedent and continues with the results of constructive behavior that is consistent with the values (Baten, 2011).

Committed action involves defining goals in specific areas that are valuable for the person and then acting according to these goals while identifying and accepting psychological barriers. Committed action is a step-by-step process to create an integrated life with the deepest desires and belongings. Despite the theoretical and research background confirming the relationship between acceptance and action and the quality of married life, this relationship was rejected in this study. A reason for rejecting this hypothesis is related to the acceptance and action questionnaire. Most of the respondents to this questionnaire did not comprehend its questions. The use of ACT questionnaires is not suitable for all populations in Iran, since its concepts are abstract and many respondents do not understand the meaning of the questions. Thus, it is necessary to develop completely native and culturally simple questionnaires in this field.

The fourth hypothesis: There is a relationship between the importance of value and couples' quality of married life.

This hypothesis was confirmed based on the results of this study since a significant relationship was found between the importance of value and the quality of married life. It can be stated that 24.9% of the quality of married life variance is due to the importance of value. Considering the positive correlation, it can be stated that an increase in the importance of value increases the couples' quality of married life. This hypothesis is consistent with the results of the studies conducted by Seifi Fazloo et al. (2015), Bahmani, Falah Chai, and Zarei (2011), Love and Klanen (2005), and Lenz and Gurdon (2005). Values are life areas that are important for a person. They are general directions for one's behavior. They are abstract concepts that show the important direction of a person in his or her life (Hayes et al., 2011). Values provide a guide for couples to know the behaviors they want to perform in the relationship. They motivate couples to new behaviors. The significant relationship between the importance of values and the quality of married life highlights the importance of values in marital life.

Hypothesis 1-4- There is a relationship between the behavior-value fit and couples' quality of married life.

This hypothesis is confirmed based on the results of the study since a significant relationship was found between the behavior-value fit and couples' quality of married life. Considering the positive correlation, it can be stated an increase in the behavior-value fit increases the couples' quality of married life. This hypothesis result is consistent with the results of the studies conducted by Seifi Fazloo et al. (2015), Bahmani, Falah Chai, and Zarei (2011), and Love and Klanen (2005). Values are a person's life areas that a person pays

attention to them. Certain behaviors are considered appropriate and others are considered inappropriate, and this increases the frequency of certain behaviors that compete with inappropriate behaviors such as avoidance (Hayes et al., 2005). Values are relatively stable directions selected purposefully by the person. They are not determined by emotions that change constantly. When a person acts based on his or her values, he or she may experience many emotions, but the emotions determine whether the selected values are still valuable or not (Baten, 2011). ACT considers value like feeling a distinguished action. The feeling of love may increase or decrease at different times and situations in the relationship between couples. Friendly (respect, love, honesty) behavior has a very good effect on marital relationships. The significant relationship between the behavior-value fit and the quality of married life highlights the importance of values in married life.

### **Conclusion**

The results of the study suggest that the concepts of acceptance and commitment theory in Iran are associated with difficulties and complications. The concepts of this theory are abstract and it is very difficult for common people with a moderate level of education to understand its concepts. Thus, before conducting any study in the field of ACT concepts in Iran, it is necessary to develop appropriate questionnaires in this field.

The present study was limited to the men and women of a specific city, so we should treat with caution in generalizing the results to men and women of other cities.

It is recommended to develop a native and cultural questionnaire on the ACT theory dimensions.

It is recommended to conduct an interventional study to teach cognitive fault and values to enhance the couples' quality of married life.

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