



Phases of Marital Conflict among Married Kuwaiti Women from the Perspective of Clinical Social Work

Dr. Hend B. AL-Ma'seb*

Abstract:

Gottman proposed a model of marital conflict with three phases: Agenda-Building, Arguing, and Negotiation. Among a sample of 520 married Kuwaiti women, this study examined the relationship between these phases and the following demographic variables: Level of education, Family income, Health, Occupation, and Tribal affiliation. In addition, the study 1) investigated the marital conflict phases the participants reported having experienced or are currently experiencing and 2) identified the variables that predict one of these conflict phases. The results showed a significant relationship between the following: 1) the Agenda-Building phase and Health; 2) the Arguing phase and Family income, Occupation, and Tribal Affiliation; and 3) the Negotiation phase and Level of education. In addition, a linear regression shows a substantial correlation between the two predictor variables (Level of education and Health problems) and the Agenda Building and Negotiation phases and 5) another substantial correlation between Family income and Arguing.

Introduction

Marriage is one of the old institutions respected in most societies. *The Dictionary of Social Work* defines “marriage” as “a legally and socially sanctioned union between two people resulting in mutual obligations and rights” (Barker, 2003, p. 263). In Arab culture, marriage is most likely organized by Islamic religion, where it is considered one’s duty to guarantee the moral safety of the members of society and it implies a social obligation between the families of the couple (Alqashan, 2008; Al-Darmaki et al., 2014). In addition, people

* Associate Professor, College of Social Sciences, Department of Sociology and Social Work, Kuwait University.

who are in a marital relationship are most likely to be happier and healthier (Gottman, 1994; White, 1994).

Marriage, a legally and socially binding relationship between two individuals (usually a man and a woman), sometimes has some obstacles or conflict, which may affect the satisfaction of the couple. Cummings (1998) defines “marital conflict” as “any major or minor interpersonal interaction that involved a difference of opinion, whether it was mostly negative or even mostly positive” (p. 60). Hocker and Wilmot (1995) demonstrated that marital conflict is a situation in which partners can express their differences in order to fulfill their needs and interests and at the same time create obstacles that prevent the other from reaching his/her goal. In addition, Buehler et al. (1998) defines “marital conflict” as an experience of disagreement, high stress, and hostile interactions between couples, associated with lack of respect, and verbal abuse.

The literature review

The relationship between marital conflict and marital satisfaction has been examined by many researchers (Fincham, 2006; Flores, 2008; Gottman, 1994; Gottman et al., 1997; Gottman et al., 1996; Kerig, 1995). Kerig (1995) illustrated that lower marital satisfaction is associated with more marital conflict. Flores (2008) identified a significant relationship between marital satisfaction and marital conflict among 91 Latina mothers, which indicated that less marital satisfaction related to more marital conflict. Although a relationship was found between marital conflict and marital satisfaction, numerous satisfied couples have reported having experienced conflict during their marriage without necessarily leading to marital dissatisfaction (Flores, 2008). Some scholars have even indicated that a small degree of conflict in marriage might be needed to add some dynamic to married life (Ashford, LeCroy, & Lortie, 2006). The degree of positive versus negative interactions between partners would help to determine a couple's marital satisfaction (Gottman, 1994).

Marchand and Hock (2000) examined avoidance and attacking strategies in conflict-resolution and married couples' satisfaction

among 40 non-clinical couples - that is, couples who do not go to the clinic for counseling. The couples answered questions about depressive symptoms such as hostility, irritability, or withdrawal, conflict resolution strategies they used, and about their satisfaction with their marriage. The researchers found that negative conflict resolution strategies and lower levels of satisfaction resulted from depressive symptoms. Especially in the case of the husbands, if they reported depressive symptoms and dissatisfaction in their marriage, they consequently reported using avoidance as a conflict resolution strategy.

Many studies illustrated that marital conflict has two forms, constructive and destructive (Crockenberg & Langrock, 2001a; Goeke-Morey, Cummings, Harold, & Shelton, 2003; Grych & Fincham, 1993; Kurdek, 1995; McCoy et al. 2009). Kurdek (1995) demonstrated in his replicated study that marital satisfaction is positively related to how often the partners used constructive strategies during conflict, which include agreement, humor, and compromise. Moreover, Kurdek (1995) found a negative relationship between marital satisfaction and destructive strategies, which include conflict engagement, withdrawal, and defensiveness when confronted by marital conflict.

Schudlich et al. (2005) illustrated that partners used both negative and positive strategies during conflict. They explained that negative conflict strategy included nonverbal and verbal hostility, withdrawal, physical aggression, personal insult, defensiveness, physical distress, threat, and pursuit. Furthermore, positive conflict strategy included support, physical and verbal affection, calm discussion, and problem solving.

Schudlich et al. (2005) found in their study that the most common positive strategies used during marital conflict were problem solving, calm discussion, and support. In addition, the most common negative strategies that couples used during their marital conflict were defensiveness, as well as nonverbal and verbal hostility. However, during conflict women were found to be more likely to use conflict engagement/demanding strategies and men were found to be more likely to use withdrawal/avoidance strategies (Fincham, 2006; Gottman & Levenson, 1999; Kluwer et al., 1997; Kurdek, 1995). This

pattern of “wife demanding” and “husband withdrawing” was the strategy that couples used to resolve marital conflict where men were more likely to play instrumental roles in resolving the conflict and women were more likely to play expressive roles (Baucom et al., 1990). Christensen and Heavey (1990) found that when the wife raised an issue that could cause conflict, the demand-withdrawal pattern was more likely to appear.

Omolayo et al. (2013) studied the effect of job demand and employment on marital conflict and marital satisfaction among 400 married women who lived in Ekiti state, Nigeria. The age of married women in their study ranged between 25 and 60 years old. The results of Omolayo et al.'s (2013) study showed that there was not a significant effect of job demand and employment on marital conflict. In addition, there was no significant relationship between the number of years of marriage and marital conflict. Furthermore, their results showed that no significant relationship existed between marital conflict and marital satisfaction.

Tolorunleke (2014) tried to identify the causes of marital conflict between partners in Nigeria and the association between these causes and the partners' level of education and the length of the marriage. Tolorunleke (2014) found that marital conflict was related to physical, social, and economic factors. She found that there was no significant difference among the factors that cause marital conflict and their relationship to the partners' level of education and the length of the marriage.

Three Phases of Marital Conflict

There are three phases of marital conflict based on Gottman's (1979) model: Agenda-Building, Arguing, and Negotiation phases. Stewart (2012) illustrated that “the three phases are expressed differently based on the conflict approach of the couple” (p. 3). According to Gottman, (1993) couples in the Agenda-Building phase “tended to present their views and feelings on a problem” (p. 6). Wilson and Gottman (2002) explained that the satisfied couples in the Agenda-Building phase understood each other's feelings although they

may have disagreed with their partner's perspective. They listened to each other by using verbal or nonverbal communication and they supported each other's ideas and explanations. However, the dissatisfied partners in the Agenda-Building phase were more likely to react to a problem that they disagreed about by expressing their feelings (Wilson & Gottman, 2002). The second phase in Gottman's model, the Arguing phase, refers to partners attempting to convince each other of their own viewpoint. This phase is generally described as a highly emotional phase designed to repair communication between the partners (Wilson & Gottman, 2002). Moreover, in the arguing phase couples use two processes to repair the interaction, without asking each other directly about how they are feeling. The first process is "feeling probe," which refers to "a sequence of neutral affect mindreading, followed by agreement and elaboration by the partner" (Wilson & Gottman, 2002). The next process in the arguing phase is "metacommunication," which refers to making different communication between the partners and it is a communication about communication (Mann, 2003; Wilson & Gottman, 2002). The goal of the third phase, the negotiation phase, is to reach a compromise between the partners (Gottman, 1993). Wilson and Gottman (2002) explained that in the negotiation phase "satisfied couples are more likely to enter into negotiation sequences, whereas counterproposals are more characteristic of the interaction of dissatisfied couples" (p. 236).

The Significance of the Study

The clinical social work field in Kuwait lacks empirical research that studies marital conflict issues. The literature that examined the three phases of marital conflict based on Gottman's (1979) model in Western culture is very sparse and no studies have been conducted in the Arab world on this topic, to the best of the author's knowledge. There are no previous empirical studies in Kuwait that addressed these marital conflict phases and their relationship with socio-demographic variables among married Kuwaiti women. Therefore, the expected results of this study are important for clinical social workers who work with couples in Kuwait and the Gulf countries that share the same

Arab-Muslim culture. The results can help social workers in Kuwait understand the phases of conflict between married partners and to have the advantage of knowing how to intervene in a particular phase of the conflict to achieve the optimum outcome. This study will contribute to clinical social workers' knowledge of the three phases of marital conflict that married Kuwaiti women experience.

Objectives

The objectives of this study are 1) to investigate the phases of marital conflict the participants (married Kuwaiti women) reported having experienced or are currently experiencing; 2) to explore the variables that predict one of these marital conflict phases; and 3) to investigate the relationships between some demographic variables and the three marital conflict phases (Agenda Building, Arguing, & Negotiation).

Research Questions

Based on the above literature and theory, the current study asks the following questions: Are there significant differences between the following demographic variables: Level of education, Monthly income, Health, Occupation, and Tribal affiliation and the three marital conflict phases (Agenda Building, Arguing, and Negotiation)? What are the variables that predict the three marital conflict phases (Agenda Building, Arguing, and Negotiation) among married Kuwaiti women? Is there a correlation between the three marital conflict phases (Agenda Building, Arguing, and Negotiation)? Is there a correlation between the demographic variables (Level of education, Monthly income, Health, Occupation, & Tribal affiliation) and the three marital conflict phases (Agenda Building, Arguing, and Negotiation)? And what are the marital conflict phases the participants reported having experienced or are currently experiencing?

Methods

A descriptive approach was selected to address the research questions. It is used for descriptive and explanatory purposes. This study used the convenience-sampling method to recruit the study participants on a voluntary basis.

Participants

Five hundred and twenty married Kuwaiti women ranging in ages from 20 to 67 years old ($M = 37.8$, $SD = 11.16$) participated in this study. In terms of their places of residence, 26.9% of the sample reported that they live in Al-Jahra, 20.8% live in Farwaniya, 19.4% live in Al-Ahmadi, 15.2% in the Al-Asima, 8.8% in Mubarak Al-Kabeer, and 7.9% lives in Hawalli. Regarding their home life, 53.7% of the participants live with their husbands in private houses, 38.1% of the participants live with their husband and his family in his family's home, and 6.3% of the participants live with their husband and her own family in her family's home. With regard to having a work life, 49.8% of the participants are employed, 21.9% participants do not work outside the home, 14% of the participants are students, 11% of the participants are retired, 1.7% of the participants responded "other," and 0.8% are business women. Regarding tribal versus urban background, 66.9% of the sample are tribal and 32.5% are urban. Regarding Family income, 28.8% of the sample earn between 801 KD and 1,100 KD, 19.6% earn between 1,101 KD and 1,400 KD, 13.3% earn between 2,001 KD and above, 12.3% earn between 1,701 KD and 2,000 KD, 12.3% earn between 501 KD and 800 KD, 10% earn between 1,401 KD and 1,700 KD, and 2.5% 500 KD and less. In terms of educational level, 33.5% of the sample have a high school diploma or less, 63.4% of the sample have a bachelor's degree, 2.2% have a master's degree or higher. 46% of the participants have been married for 1 to 10 years, 36.7% of the participants have been married for 21 or more years, 14.8% of the participants have been married for 11 to 20 years.

The Instrument

The Kansas Marital Conflict Scale (KMCS; Eggeman et al., 1985) was used in this study to assess marital conflict among the population of married Kuwaiti women. The KMCS scale is a 27-item instrument that measures three phases of marital conflict: the first phase, Agenda Building, has 11 items. According to Campbell et al. (2008), the Agenda Building sub-scale assesses how partners communicate problems to

each other from their own individual point of view. The “higher average scores indicate that partners report they are able to listen to and understand each other’s perspectives” (Campbell et al., 2008, p. 5). The second phase, Arguing, has five items. According to Campbell et al. (2008), “higher scores on the Arguing subscale indicate that one is able to express his or her point of view to his or her spouse, as well as identify what the disagreement is about” (p. 6). The third phase, Negotiation, has 11 items. In this phase, a higher score means individuals arrive at a “better compromise and negotiation with their partners during a conflict” (Campbell et al., 2008, p. 6). Responses were made on a 5-point Likert scale, ranging from 1 = Never, 2 = Once in a while, 3 = Sometimes, 4 = Frequently, and 5 = Almost always. Egge-man et al. (1985) found the KMCS valid and reliable, where the alpha for all phases for women was in the range of 0.88 to 0.95.

The author of this study used the KMCS because it is the only scale that measures “the patterns in marital conflict over distinct stages” (Corcoran & Fischer, 2013, p. 119). The language of the questionnaire was English. A specialist in Arabic translated the questionnaire from English to Arabic. A specialist in English translated the text from Arabic back to English to make sure that the translation was accurate.

The researcher conducted a field test of the Arabic version of the questionnaire utilizing a panel of judges consisting of three professors from the Department of Sociology and Social Work at Kuwait University who are familiar with the study. This panel evaluated a draft of the questionnaire and members gave their opinions. The panel required some changes, such as remove one item from the KMCS. Based on that suggestion, the author removed one item from the Arguing sub-scale so the total items of the KMCS were 26-items. The internal consistency reliability of the three phases was found to be as follows: Agenda Building ($\alpha = 0.72$), Arguing ($\alpha = 0.67$), and Negotiation ($\alpha = 0.76$).

Data Analysis

Several statistical tests were used in order to answer the research question. The descriptive analyses were used to describe the sample of this study to find out the means, standard deviation, and the percentages. Correlations were used to test whether the three phases of marital conflict are strongly related to each other. The t-test and ANOVA were conducted to illustrate the differences between the three phases of marital conflict and the demographic characteristics. In addition, linear regression was used to identify the variables that predict the phase of marital conflict.

Results

Correlations were conducted among the three phases of marital conflict, Agenda Building, Arguing, and Negotiation, to test the relationships among these variables. The results show a positive correlation between Agenda Building and Arguing ($r = 0.33, p < 0.01$) and between Agenda Building and Negotiation ($r = 0.56, p < 0.01$). Furthermore, the results show a positive correlation between Arguing and Negotiation ($r = 0.36, p < 0.01$). (See Table 1.)

Table (1)
Correlation among The Kansas Marital Conflict Subscale (KMCS) -
The Three phases of marital conflict

CMOTS subscales		1	2	3
1	Agenda Building	1.00	0.33**	0.56**
2	Arguing	0.33**	1.00	0.36**
3	Negotiation	0.56**	0.36**	1.00

** Correlation is significant at the 0.01 level (2-tailed).

One the objectives of this study was to investigate whether or not the participants were experiencing conflict in their marriage, based on their own perspective. The participants reported the highest average scores in the Negotiation subscale ($M = 36.82; SD = 6.95$). The second highest scores were reported in the Agenda-Building subscale ($M = 34.29; SD = 6.70$). The Arguing subscale scores were considerably lower ($M = 12.59; SD = 3.02$). (See Table 2.)

Table (2)
Means and Standard Deviations for The Kansas Marital Conflict Subscale (KMCS) - The Three Phases of Marital Conflict

Sub-Scales	M	SD
Agenda Building	34.29	6.70
Arguing	12.59	3.02
Negotiation	36.82	6.95

T-test analysis was used to illustrate the differences between married Kuwaiti women who have health problems and married Kuwaiti women who do not have health problems in the three phases of marital conflict. The analysis indicated that there were no differences between the two groups of women in the Arguing and Negotiation phases, at $p < 0.05$.

However, the result of the t-test showed that there are differences between married Kuwaiti women who have health problems and married Kuwaiti women who do not have health problems in the Agenda-Building phase. The former had a mean of 32.63 and the latter, a mean of 34.78 ($p = 0.002$) (See Table 3).

Table (3)
T-test between Illness and the Three Phases of Marital Conflict

Scales	<u>Have health problems</u>		<u>Don't have health problems</u>		df	T
	M	SD	M	SD		
Agenda Building	32.63	7.21	34.78	6.4	514	-3.08**
Arguing	13.02	3.15	12.49	2.98	514	1.67
Negotiation	35.76	7.71	37.09	6.70	514	-1.83

*** $p < .001$, ** $p < .01$, * $p < .05$, (2-tailed)

The analysis of the t-test showed that there are differences between tribal and urban married Kuwaiti women in the Arguing phase. The former had a mean of 12.41 and the latter, 12.99 ($p = 0.04$).

In the Agenda Building and Negotiation phases, the mean did not differ significantly at $p < 0.05$, which means that there are no differences between married tribal Kuwaiti women and married urban Kuwaiti women (see Table 4).

Table (4)
T-test between Tribal Affiliation and the Three Phases of Marital Conflict

Scales	Have health problems		Don't have health problems		df	T
	M	SD	M	SD		
Agenda Building	34.20	6.5	34.50	7.0	515	-.47
Arguing	12.41	3.0	12.99	2.0	515	-2.03*
Negotiation	36.51	6.9	37.43	6.9	515	-1.39

***p < .001, **p < .01, *p < .05, (2-tailed)

One-way ANOVA was conducted to test differences between three marital conflict phases and the participants' income, where the participants' income was divided into seven parts: 0-500 KD, 501-800 KD, 801- 1100 KD, 1101- 1400 KD, 1401- 1700 KD, 1701- 2000 KD, 2001 KD and above. The results show that there are significant differences at $p < 0.05$ between the Participants' income and the Arguing phase. Participants who had a family income of 1,101- 1,400 KD scored significantly higher on the Arguing phase than did the other participants. Moreover, there are no significant differences between the Agenda-Building and Negotiation phases with regard to the Participants' income at $p < 0.05$ (see Table 5).

Table (5)
One-way ANOVA between the Three Phases of Marital Conflict and the Participants' Income

Scales	0-500 KD		501-800 KD		801- 1100 KD		1101- 1400 KD		1401- 1700 KD		1701- 2000 KD		2001 KD & above		df	F
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD		
Agenda Building	32.52	7.51	33.08	6.41	33.96	6.38	34.62	6.94	33.65	7.07	35.38	6.63	35.55	6.74	513	1.37
Arguing	12.69	2.52	12.08	3.12	11.99	2.94	13.13	3.10	12.58	2.77	13.11	2.76	13.04	3.26	513	2.45*
Negotiation	35.23	6.54	35.69	7.92	36.45	6.39	37.02	6.54	36.54	7.24	38.14	6.43	37.23	8.11	513	0.48

***p < 0.001, **p < 0.01, *p < 0.05 (2-tailed)

The results of one-way ANOVA showed significant differences at $p < 0.01$ in the relationship between the Educational level of the

participants in the Negotiation phase. Participants who have a master's degree or higher scored significantly higher on the Negotiation phase than did those who have a high school diploma or lower and those who have a bachelor's degree. However, there were no significant differences at $p < 0.01$ between Educational level and the Agenda Building phase or Educational level and the Arguing phase (see Table 6).

Table (6)
One-way ANOVA between Educational Level and the Three Phases of Marital Conflict

	High School Diploma or Lower		Bachelor's Degree		Master's Degree or Higher		df	F
	M	SD	M	SD	M	SD		
Agenda Building	33.22	6.33	12.27	4.02	34.47	9.11	518	1.07
Arguing	34.17	6.73	12.79	2.81	37.54	6.70	518	1.01
Negotiation	34.67	6.72	12.47	2.98	36.60	6.58	518	4.33**

***p < 0.001, **p < 0.01, *p < 0.05 (2-tailed)

The occupation variable refers to the type of work that participants do. This variable has six categories: employed, not working, students, retired, business women, and others. The results of one-way ANOVA showed significant differences at $p < 0.01$ in the relationship between Occupation and the Arguing phase. Participants who are retired scored significantly higher on the Arguing phase than did the other participants with different occupations. However, there were no significant differences at $p < 0.01$ in the relationship between Occupation and the Agenda Building phase or occupation and the Negotiation phase (see Table 7).

Table (7)
One-way ANOVA between the Three Phases of Marital Conflict and Occupation

Scales	student		employees		retired		business women		unemployed		others		df	F
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD		
Agenda Building	34.85	6.91	34.62	6.50	34.88	7.59	31.00	2.16	33.22	6.70	30.89	4.25	515	1.56

Cont/ Table (7)
One-way ANOVA between the Three Phases of Marital Conflict and Occupation

Scales	student		employees		retired		business women		unem- ployed		others		df	F
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD		
Arguing	12.12	2.93	12.84	3.06	13.53	2.64	11.00	2.70	11.90	3.09	12.67	2.12	515	3.26**
Negotiation	36.97	6.82	36.80	6.44	38.42	6.66	36.50	7.18	36.20	8.07	33.00	8.36	515	1.33

***p < 0.001, **p < 0.01, *p < 0.05 (2-tailed)

A linear regression was used to predict the three phases of marriage conflict (Agenda-Building, Arguing, and Negotiation) based on demographic variables such as age, area, family income, health problems, and level of education. Significant relationships were found between three phases of marriage conflict and the level of education, health problems, and family income of the participants.

The results of the linear regression indicated that the level of education significantly predicted the Agenda-Building phase. In addition, they indicated a linear relationship between Health problems and the Agenda-Building phase ($R^2 = 0.046$, $F(1,457) = 10.976$, $p = 0.000$).

The results of the linear regression indicated that family income significantly predicted the Arguing phase ($R^2 = 0.016$, $F(1,458) = 7.440$, $p < 0.000$). Furthermore, level of education significantly predicted the Negotiation phase. The results showed a linear relationship between health problems and the Negotiation phase ($R^2 = 0.038$, $F(1,455) = 9.027$, $p < 0.000$).

Table (8)
Summary of Linear Regression Analyses for Variables Predicting Marriage Conflict (N = 520)

Predicted variables	Agenda Building					Arguing					Negotiation				
	B	SE	β	R^2	F	β	SE	B	R^2	F	β	SE	B	R^2	F
Level of education	.66	.186	.166	.028	12.9***						.670	.182	.170	.029	13.5***
Family income						.225	.082	.126	.016	7.4***					

Cont/ Table (8)
Summary of Linear Regression Analyses for Variables Predicting
Marriage Conflict (N = 520)

Predicted variables	Agenda Building					Arguing					Negotiation				
	B	SE	β	R^2	F	β	SE	B	R^2	F	β	SE	B	R^2	F
health problems	2.22	.751	.137	.046	10.9***						.691	.183	.170	.038	9.03***

* p < .05. ** p < .01. ***p < .001

Discussion

The present study examined the three phases of marital conflict based on Gottman's model among married Kuwaiti women. The findings of this study showed a strong positive correlation between the three phases of marital conflict, which means when the Agenda Building phase increases, the Arguing phase increases as well, and the Negotiation phase tends to increase. The findings also showed the married Kuwaiti women who participated in this study reported high average scores on the three phases of marital conflict. They scored high on the Agenda-Building phase, which indicated that couples were able to listen to and understand each other's points of view. Furthermore, they scored high on the Arguing phase, which indicated that each individual's perspective was discussed during a conflict. In addition, they scored high on the Negotiation phase, which means they have better cooperation and negotiation during a conflict. These findings showed that married Kuwaiti women who participated in this study tend to have positive interactions with their partners. This positive interaction helps couples achieve marital satisfaction. According to Gottman (1994), marital conflict does not damage partners' marital satisfaction; what damages marital satisfaction is how partners deal with a conflict when it happens.

The results of the study indicated that married Kuwaiti women with good health had higher adaptation to the Agenda Building phase than did married Kuwaiti women with health problems. This means married Kuwaiti women with good health are more satisfied with their relationships because in this phase of conflict, satisfied couples can

understand their partners' feelings by listening and supporting each other's point of view and that helps to increase the positive interaction strategies during a conflict. In contrast, married Kuwaiti women with health problems are more likely to be dissatisfied with their marriage and they are more likely to use negative interaction strategies during a conflict. This result may be due to the fact that marital conflict affects couples' health (Burman and Margolin, 1992) and it is associated with poor health (South and Krueger, 2013). Diseases that are related to marital conflict are cancer, heart disease, and chronic pain (Schmaling & Sher, 1997).

Married urban Kuwaiti women showed less adaptation to the Arguing phase than did married tribal Kuwaiti women. This means that married tribal Kuwaiti women are more likely to find a way to fix the interaction during the conflicts, so they focus on the solutions instead of focusing on the problems; this helps couples reach meaningful relationships.

The findings of this study showed that married Kuwaiti women who have a family income between 1,101 and 1,400 KD show higher adaptation in the Arguing phase than participants with a lower family income, leading to more satisfaction with their relationships than couples with lower family income. In turn, satisfied partners in this phase try to convince each other of their point of view (Wilson & Gottman, 2002). The results of this study supported the finding of Dakin and Wampler (2008), who explained that couples with low income experienced less marital satisfaction which negatively impacted the problem-solving strategies they chose (Dakin & Wampler, 2008).

The results of this study do not confirm the findings of Omolayo et al. (2013) who reported that there was no significant effect of employment status on marital conflict. The findings of this study show that married Kuwaiti women who are retired show higher adaptation in the Arguing phase than do the other participants. In addition, the married Kuwaiti women who have a master's or a higher degree show higher adaptation in the Negotiation phase than do the married Kuwaiti women at a lower educational level. Our findings confirm those of Wilson and Gottman (2002) who argued that the level of

education plays a significant role in marital conflict in the Negotiation phase, where satisfied couples are capable of cooperation and negotiation during conflict in contrast to dissatisfied couples who are not capable of doing that. Our findings also support Guo and Huang's (2005) findings that the level of education is positively correlated with marital satisfaction.

This study asked, "What are the variables that predict the three marital conflict phases (Agenda Building, Arguing, Negotiation) among married Kuwaiti women?" When social workers work with Kuwaiti couples who have marital problems, it is important for them to identify the indicators of marital conflicts. The findings of this study show that the variables of Level of education and Health problems have a direct positive effect on the Agenda-Building and Negotiation phases among married Kuwaiti women. This means that couples who are more educated and are in good health are more likely to be open to discuss and understand each other's ideas when a problem arises in the Agenda-Building and Negotiation phases. In contrast, couples who have a lower level of education and who suffer from health problems are more likely to adopt negative interaction strategies such as hostility, physical aggression, personal insult, threat, and pursuit in the same marital conflict phases. Gottman et al. (1998) illustrated that positive interaction during a conflict can predict marital satisfaction.

Another finding of this study is that family income has direct positive effect on the Arguing phase among married Kuwaiti women. Moreover, couples who have higher family income are more likely to express their perspective to each other and be able to acknowledge their disagreement. Therefore, couples with higher family income are more likely to adopt positive strategies in their conflict, in contrast to couples with lower family income, who may use negative conflict-resolution strategies during a conflict.

Conclusion and Implications for Clinical Social Work

Marital conflict among couples in Kuwait is one of the major issues challenging the married life of Kuwaitis; therefore, it is important to understand marital conflict and explore the demographic variables

that predict it. In the current study, the findings showed that there are some variables associated with marital conflict such as health, tribal affiliation, income, level of education, and occupation. In addition, other variables can predict marital conflict among Kuwaiti married women such as health, income, and level of education. The findings of this study will add new knowledge to the social work filed in Kuwait.

One of the goals of the field of clinical social work is to develop better understanding of social issues and prepare social workers to intervene with marital conflict by training them at a high standard. Marital conflict is one of the issues that the field of clinical social work is trying to understand. Therefore, this study contributes to clinical social work in Kuwait to develop a vision for counseling couples who are experiencing marital conflict. In addition, based on the results of the current study, clinical social workers in Kuwait can recognize (in the first meeting with a couple) the three phases of marital conflict among married Kuwaiti women, which will help them select an effective clinical intervention with these couples. Furthermore, by understanding negative and positive interaction strategies during marital conflict and how each strategy can affect marital satisfaction, clinical social workers can assist couples in understanding the importance of positive interactions in their marriage and coach them in how to avoid negative strategies in trying to resolve conflict.

Indicators such as Level of education, Family income, and Health problems can help clinical social workers in Kuwait identify couples who are at risk of engaging in negative interactions during marital conflict. These indicators may help social workers in Kuwait distinguish between satisfied and dissatisfied couples early on, and they can help these clients develop appropriate therapeutic interventions.

Future Research and Recommendations

Different research studies can be conducted based on the results of the current study. A replication of the current study can be conducted using a different sample than Kuwaiti women. For example, married non-Kuwaiti males and females may have a different perspective and may report different experiences than did the current

sample. Another area for future research would be using an experimental design to investigate the effectiveness of solution-focused therapy among couples who adopt negative interaction strategies during marital conflict. Future research can also study the effect of marital conflict on the family, especially children in Kuwait, as well as investigate the relationship between positive and negative interactions and divorce.

The findings of the current study lead to the following recommendations for social work practice in Kuwait:

- Design social programs that teach couples to develop skills and strategies that can help them manage marital conflict when it occurs.
- Design workshops that can educate couples about marital conflict before they get married.
- Research institutions in Kuwait such as universities and the Kuwait Institute for Scientific Research (KISR) should support/fund research that investigates the causes and effects of marital conflict in Kuwaiti society.
- Social workers in Kuwait need to be knowledgeable about marital conflict phases and negative and positive interaction strategies so that they can intervene with couples who have marital conflict.

References

- Alqashan, H. (2008). Enrichment training program and successful marriage in Kuwait: A field study on Kuwaiti couples. *Digest of Middle East Studies*, 17(2), 1-16.
- Al-Darmaki, F. R., Hassane, S. H., Ahammed, S., Abdullah, A. S., Yaaqeib, S. I., & Dodeen, H. (2014). Marital satisfaction in the United Arab Emirates: Development and validation of a culturally relevant scale. *Journal of Family Issues*, 1-27. doi:10.1177/0192513X14547418
- Ashford, J. B., LeCroy, C.W., & Lortie, K. L. (2006). *Human behavior in the social environment: A multidimensional perspective* (3rd ed.). California: Thomson Brooks.
- Barker, R. L. (2003). *The social work dictionary* (5th ed.). Washington, DC: NASW Press.
- Baucom, D. H., Notarius, C. I., Burnett, C. K., & Haefner, P. (1990). Gender differences in sex-role identity in marriage. In F. D. Fincham & T. N. Bradbury (Ed.). *The psychology of marriage: Basic issues and applications* (pp. 150-171). New York: Guilford Press.
- Buckley, R. (2005). *The relationships between conflict, marital satisfaction and couples' time spent in joint activity*. Unpublished doctoral dissertation, Auburn University, Auburn, AL. Retrieved from
- Buehler, C., Krishnakumar, A., Stone, G., Anthony, C., Pember-ton, S., Gerard, J., & Barber, K. (1998). Interparental conflict styles and youth problem behavior: A two-sample replication study. *Journal of Marriage and the Family*, 60, 119-132.
- Burman, B., & Margolin, G. (1992). Analysis of the association between marital relationships and health problems: An interactional perspective. *Psychology Bulletin*, 112, 39-63.
- Campbell, L., Butzer, B., & Wong, J. (2008). The importance of the organization of partner knowledge in understanding perceptions of relationship quality and conflict resolution behavior in married

- couples. *Personality and Social Psychology Bulletin*, 34, 723-740. doi:10.1177/0146167208315355
- Christensen, A., & Heavey, C. L. (1990). Gender, power and marital conflict. *Journal of Personality and Social Psychology*, 59, 73-81.
 - Crockenberg, S. B., & Langrock, A. (2001a). The role of emotion and emotional regulation in children's responses to interparental conflict. In J. H. Grych & F. D. Fincham (Eds.), *Interparental conflict and child development: Theory, research, and applications* (pp. 129-156). New York: Cambridge University Press.
 - Cummings, E.M. (1998). Children exposed to marital conflict and violence: Conceptual and theoretical directions. In G. W. Holden, R. Geffner, & E. N. Jouriles (Eds.), *Children exposed to marital violence* (pp. 55-93). Washington, DC: APA.
 - Dakin, J., & Wampler, R. (2008). Money doesn't buy happiness, but it helps: Marital satisfaction, psychological distress, and the demographic differences between low- and middle-income clinical couples. *American Journal of Family Therapy*, 36, 300-311. doi:10.1080/01926180701647512
 - Eggeman, K., Moxley, V., & Schumm, W. R. (1985). Assessing spouses' perceptions of Temporal Form in marital conflict, *Psychological Report*, 57, 171-181.
 - Fincham, F.D. (2006). Marital conflict: Correlates, structure and context. *Journal of Marriage and Family*, 62, 964-980.
 - Fischer, J., & Corcoran, K. (2013). *Measures for clinical practice and research: A sourcebook I* (5th ed.). New York: Oxford University Press.
 - Flores, M. J. (2008). *Marital conflict and marital satisfaction among Latina mothers: A comparison of participants in an early intervention program and non-participants*. Unpublished master's thesis, University of North Texas, Texas. Retrieved from <http://digital.library.unt.edu/ark:/67531/metadc9104/>
 - Goeke-Morey, M.C., Cummings, E.M., Harold, G.T., & Shelton, K.H. (2003). Categories and continua of destructive and construc-

tive marital conflict tactics from the perspective of U.S. and Welsh children. *Journal of Family Psychology*, 17, 327-338.

- Gottman, J. M. (1979). Detecting cyclicity in social interaction. *Psychological Bulletin*, 86, 338-348.
- Gottman, J. M. (1993). The roles of conflict engagement, escalation, and avoidance in marital interaction: A longitudinal view of five types of couples. *Journal of Consulting and Clinical Psychology*, 61(1), 6-15.
- Gottman, J. M. (1994). *What predicts divorce? The relationship between marital processes and marital outcomes*. Hillsdale, NJ: Lawrence Erlbaum.
- Gottman, J. M., Coan, J., Carrere, S., & Swanson, C. (1998). Predicting marital happiness and stability from newlywed interactions. *Journal of Marriage and the Family*, 60(1), 5-22.
- Gottman, J., Coan, J., & McCoy, K. (1996). The specific affect coding system. Hillsdale, NJ: Erlbaum.
- Gottman, J. M., Katz, L. F., & Hooven, C. (1997). *Meta-emotion: How families communicate emotionally*. Hillsdale, NJ: Erlbaum.
- Gottman, J. M., & Levenson, R. W. (1999). Dysfunctional marital conflict: Women are being unfairly blamed. *Journal of Divorce and Remarriage*, 31, 1-17.
- Grych, J. H., & Fincham, F. D. (1993). Children's appraisals of marital conflict: Initial investigations of the cognitive-contextual framework. *Child Development*, 64, 215-230.
- Guo, B., & Huang, J. (2005). Marital and sexual satisfaction in Chinese families: Exploring the moderating effects. *Journal of Sex and Marital Therapy*, 31(1), 21-29.
- Hocker, J. L., & Wilmot, W. W. (1995). *Interpersonal conflict* (4th ed.). Dubuque, IA: W. C. Brown.
- Kerig, P. K. (1995). Triangles in the family circle: Effects of family structure on marriage, parenting, and child adjustment. *Journal of Family Psychology*, 9, 28-43.
- Kluwer, E.S., Heesink, J.A.M., Van de Vliert, E. (1997). The marital dynamics of conflict over the division of labor. *Journal of Marriage and Family*, 59, 635-53.

- Kurdek, L. A. (1995). Predicting change in marital satisfaction from husbands' and wives' conflict resolution styles. *Journal of Marriage and Family*, 57(1), 153-164.
- Mann, T. M. (2003). Relationship between metacommunication among romantic partners and their level of relationship satisfaction. *UW-L Journal of Undergraduate Research*, 6, 1-8.
- Marchand, J. F., & Hock, E. (2000). Avoidance and attacking conflict-resolution strategies among married couples: Relations to depressive symptoms and marital satisfaction. *Family Relations*, 49, 201-206.
- McCoy, K., Cummings, E. M., & Davies, P. T. (2009). Constructive and destructive marital conflict, emotional security and children's prosocial behavior. *Journal of Child Psychology and Psychiatry*, 50(3), 270-279.
- Omolayo, B. O., Falegan, T., & Ajila, C. K. (2013). Influence of job demand and employment status on marital conflict and marital satisfaction among women in Ekiti State, Nigeria. *Journal of Psychology and Behavioral Science*, 1(1), 8-18.
- Schmaling, K. B., & Sher, T. G. (1997). Physical health and relationships. In W. K. Halford & H. J. Markman (Eds.), *Clinical handbook of marriage and couples* (pp. 323-345). New York: Wiley.
- Schudlich, T. D., Papp, L. M., & Cummings, E. M. (2004). Relations of husbands' and wives' dysphoria to marital conflict resolution strategies. *Journal of Family Psychology*, 18, 171-183.
- South, S. C., & Krueger, R. F. (2013). Marital satisfaction and physical health evidence for an orchid effect. *Psychological Science*, 24(3), 373-378.
- Stewart, M. R. (2012). *The Impact of Length of Relationship on Conflict Communication and Relationship Satisfaction in Couples*. (Master thesis, Iowa State University, Iowa, USA)
- Tolorunleke, C. A. (2014). Causes of marital conflicts amongst couples in Nigeria: Implication for counseling psychologists. *Procedia Social and Behavioral Sciences*, 140, 21-26.

- White, L. K. (1994). Growing up with single parent and stepparents: Long-term effects on family solidarity. *Journal of Marriage and the Family*, 56, 935-948.
- Wilson, B. J., & Gottman, J. M. (2002). Marital conflict, repair, and parenting. In M. H. Bornstein (Ed.), *Handbook of parenting IV: Social conditions and applied parenting* (2nd ed., pp. 227-258). Mahwah, NJ: Erlbaum.

