



Relationship of Controlling Negative Thoughts and Parenting Stress with Marital Satisfaction in Parents of Children with Learning Disability: Mediated by Sexual Satisfaction

Zahra Mohebbi¹ , Zahra Dasht Bozorgi^{1*} , Reza Johari Fard¹

¹ Department of Psychology, Ahvaz Branch, Islamic Azad University, Ahvaz, Iran

*Corresponding author: Zahra Dasht Bozorgi, Department of Psychology, Ahvaz

Branch, Islamic Azad University, Ahvaz, Iran. E-mail: zdashbtzrgi@gmail.com

DOI: [10.22037/anm.v32i1.41459](https://doi.org/10.22037/anm.v32i1.41459)

Submitted: 27 Aug 2022

Accepted: 21 Nov 2022

Published: 15 Jan 2023

Keywords:

Sexual Satisfaction
Negative Thinking
Parenting
Stress

© 2023. Advances in Nursing and Midwifery

How to cite:

Mohebbi Z, Dasht Bozorgi Z, Johari Fard R. Relationship of Controlling Negative Thoughts and Parenting Stress with Marital Satisfaction in Parents of Children with Learning Disability: Mediated by Sexual Satisfaction. *Adv Nurs Midwifery*. 2023;32(1):1-6. doi: 10.22037/anm.v32i1.41459

Abstract

Introduction: Lack of satisfying sexual relations weakens marital relationships. The present study aimed to investigate the relationship between controlling negative thoughts and parenting stress with the marital satisfaction of parents of children with learning disabilities as influenced by the mediating role of sexual satisfaction.

Methods: The statistical population of this descriptive correlational study covered all parents of children with learning disabilities in Tehran in 2020, 212 of whom were selected as the statistical sample using convenience sampling based on the inclusion and exclusion criteria. The research instruments included the Marital Satisfaction Scale, the Thought Control Questionnaire, the Parenting Stress Questionnaire, and the Sexual Satisfaction Questionnaire. Descriptive statistics including mean and standard deviation as well as Pearson's correlation coefficient were used for data analysis. The proposed model was evaluated using structural equation modeling (SEM) via SPSS-25 and AMOS-25 software.

Results: The results showed that the correlations between marital satisfaction and controlling negative thoughts ($r = 0.33$), parenting stress ($r = -0.40$), and sexual satisfaction ($r = 0.049$) were significant ($P < 0.01$). In addition, the correlations between sexual satisfaction and controlling negative thoughts ($r = 0.60$) and parenting stress ($r = -0.39$) were also significant ($P < 0.01$). The relationship between the indirect path of controlling negative thoughts with marital satisfaction via the mediating role of sexual satisfaction was significant ($\beta = 0.32$, $P = 0.010$). Moreover, sexual satisfaction had a mediating role in the relationships between parenting stress and marital satisfaction in the parents ($\beta = -0.08$, $P = 0.044$). The results indicated a good fit of the model (IFI = 0.98, CFI = 0.96, RMSEA = 0.071).

Conclusions: The results suggest that the proposed model had a good fit and could be considered an important step toward identifying the factors influencing the marital satisfaction of parents having children with learning disabilities.

INTRODUCTION

Learning disability is a common childhood developmental disorder that causes children and adults to see, hear, and understand differently than others [1]. A learning disorder is a disorder in which the academic performance of students is lower than expected, according to their age and IQ, or based on standard tests of reading, writing, and calculation. Approximately 5-15% of children have a learning disorder, and this disorder is more common in boys than in girls [2]. It is difficult for parents to face the possibility that their child may have a learning disability [3].

Marital satisfaction is the result of a marital agreement that describes the proper relationship between husband and wife. Marital satisfaction is achieved through mutual

interest, caring for one other, mutual acceptance and understanding, and meeting each other's needs [4]. Arguably, characteristics of children with learning disabilities, such as learning problems, failure to properly respond to environmental demands and adapt to the environment, and the exorbitant costs of raising and educating them, all negatively affect the marital satisfaction of their parents [5, 6]. Meanwhile, parents of children with learning disabilities may experience high levels of anger and shame, blame themselves or others, and feel depressed and tense [7]. All these factors together affect marital satisfaction and also the child's relationship with their parents [8]. Previous studies have shown that special needs children affect their

parents' marital relationship [9-11]. Moreover, there are various factors affecting the marital satisfaction of mothers of children with learning disabilities, including controlling negative thoughts. These are actions related to how a person copes with stressful situations and/or unfortunate events [12]. Generally, the ability to create and maintain a satisfactory relationship requires identifying and expressing thoughts and emotions and understanding and accepting the partner's characteristics [13]. Due to their inherent importance to routine life, disruption and confusion in thoughts and their regulation will have pathological consequences [14, 15].

Meanwhile, failure to control negative thoughts in parents increases their parenting stress. Stress is defined as physical, cognitive, or emotional tension, and parenting stress is a type of stress experienced by parents and caused by the necessities of parenting [14, 16]. Research shows that although parenting is stressful for both parents, mothers experience more parental stress than fathers [17-19]. There are other conditions imposed on parents alongside raising children that add to their challenges. Therefore, the child's disability is a condition that adds to the problems of parents, and consequently to parenting stress [20, 21].

Sexual satisfaction is the level of satisfaction with sexual relations and the person's ability to create mutual pleasure. Lack of satisfying sexual relations weakens marital relationships. Sexual pleasure is among the most important pleasures that people enjoy throughout their lives, which makes the hardships and problems faced by couples bearable [22, 23]. Researchers believe that marital satisfaction always depends on sexual satisfaction. In addition, sexual satisfaction is the most important component of marital satisfaction and an effective factor in reducing stress and negative thoughts in parents of children with learning disabilities [24]. Parents of children with learning disability experience high levels of tension and stress and different negative emotions [25].

Thus, it can be acknowledged that parents of children with learning disabilities have described and reported extensive negative consequences of problems with their psychological well-being since the diagnosis of their child's disorder. Many have experienced recurring feelings of intense sadness and feelings of despair and hopelessness, which reduce their marital satisfaction. Given the assortment of problems faced by parents of children with learning disabilities, it is necessary to make plans in order to solve their problems and to conduct studies such as the present research. Accordingly, the present study aimed to investigate the relationship between controlling negative thoughts and parenting stress with the marital satisfaction of parents of children

with learning disabilities as influenced by the mediating role of sexual satisfaction.

METHODS

The statistical population of this descriptive-correlational study that used structural equation modeling covered all parents of children with learning disabilities visiting learning disability clinics in Tehran in 2020. The main learning disorder in children was difficulty in reading, writing, and calculations. The consent of the authorities in learning disorder clinics was obtained followed by coordination with parents. Since SEM calculates the number of exogenous variables, the number of error variances, and the number of parameters based on the number of direct paths, according to Kline's suggestion (1998), at least 10 participants are required for testing the model for each calculated parameter. However, this study considers about 25 participants for each parameter to have a sufficiently large sample for testing the model; Thus, 230 parents (140 mothers and 90 fathers) were selected and provided with the questionnaires. The inclusion criteria were living with a spouse, having no history of diseases related to sexual disorder, having no history of drug use (antidepressants and hormones), having finished at least middle school, and having submitted a consent form for participation in the research; whereas the exclusion criteria were failure to answer all the questions and unwillingness to continue participation in the study. Then, the questionnaires were collected, incomplete questionnaires were discarded, and the data of 212 parents (132 mothers and 80 fathers) were analyzed. Finally, the participants and the officials of learning disability clinics were thanked for their cooperation.

Research Instrument

Demographic questionnaires: A researcher-made questionnaire was used to collect the demographic data of the participants. The questions of this questionnaire were prepared to collect information related to age, education, number of children, and duration of marriage. **Marital Satisfaction Scale:** With 4 subscales of 35 items each, this questionnaire can be used for measuring satisfaction, communication, and conflict resolution. The ENRICH Marital Satisfaction Scale is a general measure of marital relationships including ideal distortion, marital satisfaction, personality issues, communication, conflict resolution, financial management, recreational activities, sex, family and friends, egalitarian roles of men and women, religious orientation, marital cohesion, and marital changes. Each item in this questionnaire is scored based on five options ranging from "completely agree to completely disagree" with scores of 1-5. A score of 1 is given to the option "I completely agree"

and a score of 5 to the option “I completely disagree” [26]. The reliability of the Persian version of the Marital Satisfaction Scale was obtained as 0.74 using Cronbach’s alpha [27]. The Thought Control Questionnaire: This questionnaire by Wells and Davis [28] has 30 items in 5 subscales for measuring individual differences in controlling intrusive thoughts. Thought control strategies include distraction, anxiety, social strategies, self-punishment, and re-evaluation of thinking. Each component has 6 items with 4 options for the respondent to choose from (almost always, most of the time, sometimes, and never) from 4 to 1. The lower and upper score limits of this questionnaire are 30 and 120, respectively. The reliability of the Persian version of the Thought Control Questionnaire was obtained as 0.73 using Cronbach’s alpha [29]. Parenting Stress Questionnaire: Abidin [30] designed this questionnaire with 36 items and the following components: Compromise, the boundary of the child, temperament, attachment, receptivity, greed, reinforcement, negligence/exaggeration, relations with spouse, the boundary of parents, depression, sense of competence, role limitations, parental health, social isolation, and tension in life. The scoring is based on a Likert scale from 1 to 5 (completely agree to completely disagree). The reliability of the Persian version of the Parenting Stress Questionnaire was obtained as 0.80 using Cronbach’s alpha [18].

Sexual Satisfaction Questionnaire: Developed by Hudson et al. [31], this questionnaire assesses the levels of satisfaction of spouses with 25 questions (for example, I feel that my sex life lacks quality or my partner cannot sexually satisfy me). The participant’s response to each item is scored on a 5-point scale from 1 to 5 (1: always, 2: most of the time, 3: sometimes, 4: rarely, 5: never) with respective minimum and maximum scores of 25 and 125. Higher scores represent higher sexual satisfaction. The reliability of the Persian version of the Sexual Satisfaction Questionnaire was obtained as 0.93 using Cronbach’s alpha [32].

Statistical Analysis

Data were analyzed by descriptive and inferential statistics such as mean, standard deviation, and Pearson correlation coefficient. Structural equation modeling in SPSS-25 and AMOS-25 was used to evaluate the proposed model.

Table 1. Mean, Standard Deviation (SD), and Pearson Correlation Coefficients of the Variables

Variables	M	SD	1	2	3	4
1- Marital satisfaction	73.78	33.26	1			
2- Controlling negative thoughts	93.05	33.58	0.33**	1		
3- Parenting stress	106.71	34.66	-0.40**	-0.47**	1	
4- Sexual satisfaction	68.70	27.44	0.49**	0.60**	-0.39**	1

** : $P < 0.01$

RESULTS

The participants in this research included 132 mothers and 80 fathers. The mean age of mothers and fathers was 38.45 ± 6.21 and 42.39 ± 5.81 , respectively. Among the parents, 114 (53.77%) had a high school education and 98 (46.23%) had a university education. The average duration of marriage among the participants was 11.81 ± 3.35 years. The mean and standard deviation (SD) of marital satisfaction, controlling negative thoughts, parenting stress, and sexual satisfaction in the participants were 73.78 ± 33.26 , 93.05 ± 33.58 , 106.71 ± 34.66 , and 68.70 ± 27.44 , respectively. Table 1 presents descriptive statistics, including the mean, SD, and correlation matrix of the variables. Based on the results, there was a significant positive correlation between the controlling negative thoughts and marital satisfaction ($r = 0.33$) and sexual satisfaction ($r = 0.49$). The correlation between parental stress and marital satisfaction ($r = -0.40$) and sexual satisfaction ($r = -0.39$) was negative and significant. Also, the correlation between controlling negative thoughts and parental stress ($r = -0.47$) was negative and significant. The acceptable cut-off point was 0.30 to 0.70.

Figure 1 shows the model proposed to explain marital satisfaction based on controlling negative thoughts, parenting stress, and sexual satisfaction. According to the data in Table 2, the root mean square error of approximation showed that the proposed model had a good fit (RMSEA=0.071).

Table 3 lists the findings related to the estimation of path coefficients for examining the direct relationship. According to the results, there was a direct and significant relationship between controlling negative thoughts and marital satisfaction ($\beta = 0.23$, $P = 0.003$), and sexual satisfaction ($\beta = 0.54$, $P < 0.001$) in the parents of children with learning disabilities. There was a negative relationship between parenting stress and marital satisfaction ($\beta = -0.15$, $P = 0.028$), and sexual satisfaction ($\beta = -0.18$, $P = 0.009$) in the parents. Moreover, there was a positive relationship between sexual satisfaction and marital satisfaction ($\beta = 0.38$, $P < 0.001$). Table 3 suggests that the indirect path of controlling negative thoughts to marital satisfaction was significant when mediated by sexual satisfaction ($\beta = 0.32$, $P = 0.010$). Likewise, the indirect path of parenting stress to marital satisfaction was significant when mediated by sexual satisfaction ($\beta = -0.08$, $P = 0.044$).

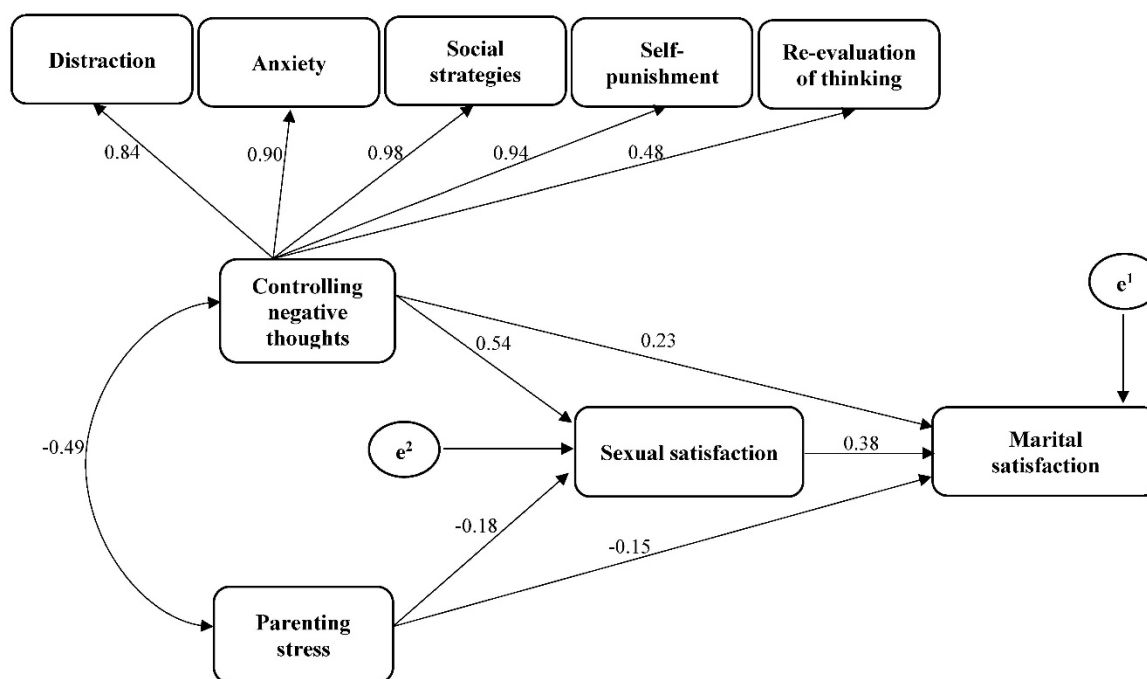


Figure 1. The model proposed to explain marital satisfaction based on controlling negative thoughts, parenting stress, and sexual satisfaction

Table 2. Initial and final models fit indicators

Fit Indicators	χ^2	df	(χ^2/df)	IFI	TLI	CFI	NFI	RMSEA
The proposed model	30.38	15	2.02	0.98	0.96	0.96	0.93	0.071

Table 3. Path coefficients of direct and indirect relationships between variables in the proposed model

Path	Path Type	β	P
Controlling negative thoughts $\rightarrow$ Marital satisfaction	Direct	0.23	0.003
Parenting stress $\rightarrow$ Marital satisfaction	Direct	-0.15	0.028
Controlling negative thoughts $\rightarrow$ Sexual satisfaction	Direct	0.54	0.001
Parenting stress $\rightarrow$ Sexual satisfaction	Direct	-0.18	0.009
Sexual satisfaction $\rightarrow$ Marital satisfaction	Direct	0.38	0.001
Controlling negative thoughts $\rightarrow$ Marital satisfaction (through the mediating role of sexual satisfaction)	Indirect	0.32	0.010
Parenting stress $\rightarrow$ Marital satisfaction (through the mediating role of sexual satisfaction)	Indirect	-0.08	0.044

DISCUSSION

The present study aimed to investigate the relationship between controlling negative thoughts and parenting stress with the marital satisfaction of parents of children with learning disabilities as influenced by the mediating role of sexual satisfaction. The results suggest that the proposed model had a good fit. The first finding showed a direct correlation between controlling negative thoughts and marital satisfaction. Controlling negative thoughts affects not only one's own marital satisfaction but also that of the spouse. These results confirm the systematic and recurring nature of marital relationships and indicate a mutual emotional dependence between spouses. While researchers have previously considered the effects of the agent (oneself), the effects of the life partner have often been neglected. Although the effects of oneself (agent) have value because they for providing information about intra-personal processes, their analyses focus researchers only on the personal dimension. It is the effects of the life partner that specifically suggest the presence of interpersonal effects.

In other words, the presence of the effects of the life partner shows us that a relational phenomenon has occurred since a person's response depends on the characteristics of their spouse [33]. In this study, the presence of the effects of oneself (agent) indicates that an agent's ability to control negative thoughts affects their attitude towards their relationship, whereas the effects of the life partner indicate that these same abilities (or lack thereof) can significantly affect the marital satisfaction of the life partner.

Another finding showed that there was a significant negative correlation between parenting stress and marital satisfaction. This finding is consistent with the research results of previous studies [19]. Ben-Naim et al. [19] showed a significant direct correlation between marital satisfaction and parenting stress and between marital satisfaction and parental self-efficacy. To explain this finding, we can say that parenting stress affects interpersonal relationships when discomfort occurs or problems arise, and the use of transcendent awareness, production of personal meaning, critical thinking, and development and expansion of consciousness can

influence satisfaction and psychological well-being [34]. In general, parenting stress reduces marital satisfaction by increasing negative feelings and emotions and decreasing positive feelings and emotions thus making it difficult to deal with difficult circumstances, which itself can also reduce marital satisfaction. Therefore, parenting stress causes the parents of children with learning disabilities to experience more negative emotions and a reduction in their marital satisfaction, which prevents them from coping with the stressful conditions caused by the presence of their child.

The results also showed a positive correlation between sexual satisfaction and marital satisfaction. This means that the marital satisfaction of parents is expected to improve with increases in their sexual satisfaction. This finding is consistent with the research results of previous studies (25). Cao et al. [24] showed that sexual satisfaction was an important factor in promoting the marital satisfaction of couples. To explain this finding, it can be said that relations having a satisfactory sexual relationship initially requires the establishment of an intimate relationship between spouses, after which the couple will be able to discuss their sexual relations more easily and without any fear or shame. Marital satisfaction is closely related to sexual satisfaction since sex is an important part of a person's life that should be considered thoroughly in social health and pharmaceutical and medical care [22]. Hence, neglecting this issue can cause sexual dissatisfaction and even affect people's marital relationships.

Another finding showed that sexual satisfaction mediated the relationship of marital satisfaction with controlling negative thoughts and marital satisfaction with parenting stress. In the indirect path, it was shown that controlling negative thoughts through increasing sexual satisfaction in parents improved marital satisfaction. Likewise, it was demonstrated in the indirect path that parenting stress decreased the sexual satisfaction of parents thereby reducing marital satisfaction. The review of the literature found no study to be compared with the present research regarding this finding. The results suggest high levels of conflict and low levels of cohesion in families having children with learning disabilities. Moreover, the sense of inadequate parenting gradually spreads to other parts of private life and the marital relations of the parents. Therefore, it is reasonable to expect that families having children with learning disabilities will be influenced by the signs of this disability in their children and their problems will be augmented. This illustrates the importance of controlling negative thoughts, reducing parenting stress, and managing negative affections and emotions. Parents who acquire these skills can become aware of problems and stresses and find appropriate solutions thus reducing stress in their relationship with their child and improving their sexual satisfaction as well as marital satisfaction. Therefore, sexual satisfaction mediates the

relationship of marital satisfaction with controlling negative thoughts and the relationship of marital satisfaction with parenting stress.

LIMITATIONS

The statistical population covered the parents of children with learning disabilities in Tehran, which should inspire caution when generalizing the results to other cities with different cultures. Moreover, using a questionnaire for data collection may lead to biased answers. Therefore, further studies on other samples are recommended for generalizing the results. Not taking into account some variables such as the severity of the child's learning disorder and the socio-economic status of the family was another limitation of this study.

CONCLUSION

In general, the results showed that all direct paths to marital satisfaction were significant while indirect paths to marital satisfaction were also significant through sexual satisfaction. The results suggest that the proposed model had a good fit and was an important step towards identifying the factors influencing marital satisfaction of parents having children with learning disabilities. It is recommended to hold workshops for strengthening control of negative thoughts and reducing parenting stress in order to improve sexual satisfaction and hence promote marital satisfaction of parents of children with learning disabilities.

ACKNOWLEDGMENTS

The authors would like to express their appreciation to the study participants.

FUNDING

This research has not received any financial support from funding organizations in the public, commercial or non-profit sectors.

AUTHORS' CONTRIBUTION

Zahra Mohebbi and Zahra Dasht Bozorgi: Study concept and design, acquisition of data, analysis and interpretation of data, and statistical analysis. Zahra Dasht Bozorgi and Reza Johari Fard: Administrative, technical, and material support, study supervision. Zahra Mohebbi and Zahra Dasht Bozorgi: Critical revision of the manuscript for important intellectual content.

ETHICAL APPROVAL

The Ethics Review Board of Islamic Azad University Ahvaz Branch, approved the present study with the following number: IR.IAU.AHVAZ.REC.1400.024.

CONFLICTS OF INTEREST

No conflicts of interest declared.

REFERENCES

1. Chiarenza GA. Quantitative EEG in Childhood Attention Deficit Hyperactivity Disorder and Learning Disabilities. Clin

- EEG Neurosci. 2021;52(2):144-55. [doi: 10.1177/1550059420962343](#) [pmid: 33012168](#)
2. Mohammadchenari B, Marashian F, Talebzadeh Shoushtari M. The Mediating Role of Social Health in Relationship of Parenting Stress and Child-Parent Interaction with Health-Related Quality of Life in Parents of Children with Specific Learning Disorder. *Razavi Int J Med*. 2023;11(1):1-7. [doi: 10.30483/rijm.2023.254345.1170](#)
3. Taderera C, Hall H. Challenges faced by parents of children with learning disabilities in Opuwo, Namibia. *Afr J Disabil*. 2017;6:283. [doi: 10.4102/ajod.v6i0.283](#) [pmid: 28951851](#)
4. Darooneh T, Hajizadeh Bandeghara F, Saei Ghare Naz M, Kholosi F, Nasiri M, Ozgoli G. The Role of Children in Women's Marital Satisfaction in Tehran, 2016. *Adv Nurs Midwife*. 2019;28(4):3-7.
5. He B, Wongpakaran T, Wongpakaran N, Wedding D. Marital Satisfaction and Perceived Family Support in Families of Children with Autistic Spectrum Disorder: Dyadic Analysis. *Healthcare (Basel)*. 2022;10(7). [doi: 10.3390/healthcare10071227](#) [pmid: 35885754](#)
6. DeLongis A, Zwickler A. Marital satisfaction and divorce in couples in stepfamilies. *Curr Opin Psychol*. 2017;13:158-61. [doi: 10.1016/j.copsyc.2016.11.003](#) [pmid: 28813287](#)
7. Ahmadi Doulabi M, Sajedi F, Vameghi R, Mazaheri MA, Akbarzadeh Baghban A, Afraz F. Marital Satisfaction and Depression in Mothers of 3-4 Year Old Children with Developmental Delay in Comparison with Mothers of Normal Children. *Iran J Child Neurol*. 2019;13(4):91-108.
8. Tavakol Z, Nasrabadi AN, Moghadam ZB, Salehiniya H. The presence of the child, the opportunity or a threat to marital satisfaction: A qualitative study. *J Educ Health Promot*. 2019;8:67.
9. Babaei N, Afrooz GA, Arjmandnia AA. Developing a life quality promoting program and investigation of its effectiveness on mental health and marital satisfaction of mothers with down syndrome daughters. *J Famil Psychol*. 2021;4(1):75-86.
10. Mas JM, Dunst CJ, Balcells-Balcells A, Garcia-Ventura S, Gine C, Canadas M. Family-centered practices and the parental well-being of young children with disabilities and developmental delay. *Res Dev Disabil*. 2019;94:103495. [doi: 10.1016/j.ridd.2019.103495](#) [pmid: 31499380](#)
11. Lu MH, Wang GH, Lei H, Shi ML, Zhu R, Jiang F. Social Support as Mediator and Moderator of the Relationship Between Parenting Stress and Life Satisfaction Among the Chinese Parents of Children with ASD. *J Autism Dev Disord*. 2018;48(4):1181-8. [doi: 10.1007/s10803-017-3448-y](#) [pmid: 29318434](#)
12. Halvorsen M, Hoifodt RS, Myrbakk IN, Wang CE, Sundet K, Eisemann M, et al. Cognitive function in unipolar major depression: a comparison of currently depressed, previously depressed, and never depressed individuals. *J Clin Exp Neuropsychol*. 2012;34(7):782-90. [doi: 10.1080/13803395.2012.683853](#) [pmid: 22568668](#)
13. Tucker RP, Smith CE, Hollingsworth DW, Cole AB, Wingate LRR. Do thought control strategies applied to thoughts of suicide influence suicide ideation and suicide risk? *Personal Individ Differ*. 2017;112:37-41. [doi: 10.1016/j.paid.2017.01.019](#)
14. Szczepanowski R, Cichon E, Niemiec T, Andrzejewska BE, Wojta-Kempa M. Measurement of Unwanted Thought Suppression Strategies with the Thought Control Questionnaire in the General Polish Population: A Confirmatory Factor Analysis and Validation. *Psychol Res Behav Manag*. 2021;14:137-48. [doi: 10.2147/PRBM.S286245](#) [pmid: 33603514](#)
15. Smith S, Tallon M, Clark C, Jones L, Morelius E. "You Never Exhale Fully Because You're Not Sure What's NEXT": Parents' Experiences of Stress Caring for Children With Chronic Conditions. *Front Pediatr*. 2022;10:902655. [doi: 10.3389/fped.2022.902655](#) [pmid: 35832577](#)
16. Qian G, Mei J, Tian L, Dou G. Assessing Mothers' Parenting Stress: Differences Between One- and Two-Child Families in China. *Front Psychol*. 2020;11:609715. [doi: 10.3389/fpsyg.2020.609715](#) [pmid: 33519622](#)
17. Fuentes-Balderrama J, Del Castillo CC, Garcia AO, Loving RD, Plaza BT, Cardona JRP. The Effects of Parenting Styles on Internalizing and Externalizing Behaviors: A Mexican Preadolescents Study. *Int J Psychol Res (Medellin)*. 2020;13(1):9-18. [doi: 10.21500/20112084.4478](#) [pmid: 32952959](#)
18. Mohammadipour S, Dasht Bozorgi Z, Hooman F. The Role of Mental Health of Mothers of Children with Learning Disabilities in the Relationship Between Parental Stress, Mother-child Interaction, and Children's Behavioral Disorders. *J Client Center Nurs Care*. 2021;7(2):149-58. [doi: 10.32598/JCCNC.7.2.362.1](#)
19. Ben-Naim S, Gill N, Laslo-Roth R, Einav M. Parental Stress and Parental Self-Efficacy as Mediators of the Association Between Children's ADHD and Marital Satisfaction. *J Atten Disord*. 2019;23(5):506-16. [doi: 10.1177/1087054718784659](#) [pmid: 29985090](#)
20. Stewart M, Schnabel A, Hallford DJ, McGillivray JA, Forbes D, Foster M. Challenging child behaviours positively predict symptoms of posttraumatic stress disorder in parents of children with autism spectrum disorder and rare diseases. *Res Autism Spectrum Disorder*. 2020;69:101467. [doi: 10.1016/j.rasd.2019.101467](#)
21. Hsiao YJ. Parental Stress in Families of Children with Disabilities. *Intervent School Clinic*. 2017;53(4):201-5. [doi: 10.1177/1053451217712956](#)
22. Pascoal PM, Byers ES, Alvarez MJ, Santos-Iglesias P, Nobre PJ, Pereira CR, et al. A Dyadic Approach to Understanding the Link Between Sexual Functioning and Sexual Satisfaction in Heterosexual Couples. *J Sex Res*. 2018;55(9):1155-66. [doi: 10.1080/00224499.2017.1373267](#) [pmid: 29028439](#)
23. Traeen B, Stulhofer A, Janssen E, Carvalheira AA, Hald GM, Lange T, et al. Sexual Activity and Sexual Satisfaction Among Older Adults in Four European Countries. *Arch Sex Behav*. 2019;48(3):815-29. [doi: 10.1007/s10508-018-1256-x](#) [pmid: 29987546](#)
24. Cao H, Zhou N, Fine MA, Li X, Fang X. Sexual Satisfaction and Marital Satisfaction During the Early Years of Chinese Marriage: A Three-Wave, Cross-Lagged, Actor-Partner Interdependence Model. *J Sex Res*. 2019;56(3):391-407. [doi: 10.1080/00224499.2018.1463503](#) [pmid: 29746180](#)
25. Panabad S, Gholamzadeh Jofreh M, Asgari P, Kazemian Moghaddam K. Effectiveness of Emotionally-Focused Couples Therapy on Marital Violence, Marital Adjustment, and Sexual Intimacy of Couples Visiting Counseling Centers of Ahvaz. *Adv Nurs Midwife*. 2022;31(1):1-7.
26. Olson DH, Fournier DG, Druckman JM. Counselor's manual for Prepare//Enrich (Rev. ed). Minneapolis.1987.
27. Arab Alidousti A, Nakhaee N, Khanjani N. Reliability and Validity of the Persian versions of the ENRICH Marital Satisfaction (Brief version) and Kansas Marital Satisfaction Scales. *Health Develop J*. 2015;4(2):158-67.
28. Wells A, Davies MI. The Thought Control Questionnaire: a measure of individual differences in the control of unwanted thoughts. *Behav Res Ther*. 1994;32(8):871-8. [doi: 10.1016/0005-7967\(94\)90168-6](#) [pmid: 7993332](#)
29. Darvish Molla M, Shirazi M, Nikmanesh Z. The Role of Difficulties in Emotion Regulation and Thought Control Strategies on Pornography Use. *Pract Clinic Psychol*. 2018;6(2):119-28. [doi: 10.29252/nirp.jpcp.6.2.119](#)
30. Abidin RR. The determinants of parenting behavior. *J Clinic Child Psychol*. 1992;21:407-12. [doi: 10.1207/s15374424jccp2104_12](#)
31. Hudson WW, Harrison DF, Crosscup PC. A short-form scale to measure sexual discord in dyadic relationships. *J Sex Res*. 1981;17:157-74. [doi: 10.1080/00224498109551110](#)

32. Tabarzan S, Hooman F, Bakhtiarpour S. Investigating the Relationship among the Quality of Married Life, Internet Addiction, and Mindfulness in Women with Breast Cancer: The Mediating Role of Sexual Satisfaction. *Women Health Bull.* 2022;9(4):2-9.
33. Kelly JDt. Your Best Life: Managing Negative Thoughts-The Choice is Yours. *Clin Orthop Relat Res.* 2019;477(6):1291-3. [doi: 10.1097/CORR.0000000000000791](https://doi.org/10.1097/CORR.0000000000000791) [pmid: 31094837](https://pubmed.ncbi.nlm.nih.gov/31094837/)
34. Michaelson V, Trothen T, Ascough H, Pickett W. Canadian Children and Spiritual Health: Foundations for Spiritual Care. *J Pastoral Care Counsel.* 2016;70(4):244-56. [doi: 10.1177/1542305016680630](https://doi.org/10.1177/1542305016680630)