# The Effectiveness of Self-Encouragement Skills Training on Genital Self-Image in Women with Physical-Motor Handicap (in southeast of Iran)

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# **Abstract**

The present study aims to determine the effect of training self-encouragement skills on Genital Self-Image in women with a physical-motor handicap. This research is a quasi-experimental study with pre and post-test design by the control group. The statistical population consisted of all married women with a physical-motor handicap in Chaharmahal and Bakhtiari Province in 2016. Then, 50 people were selected using multistage cluster sampling method and divided into two experimental (25 subjects) and control (25 subjects) groups. Data were collected by Female Genital Self-Image Scale (FGSIS). Covariance analysis and repeated measures ANOVA were used to analyze the data collected. The findings indicated that self-encouragement training was effective on the total score of Genital Self-Image by 61% (P <0.05). Therefore, learning the selfencouragement skills can increase self-esteem in people; this leads to a positive body self-image. The higher the self-esteem, the higher will be the individual's satisfaction with life, sex, and ultimately, the closeness between couples.

Key words: Genital Self-Image, Self-Encouragement, Physical-Motor Handicap.

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### Introduction

Women's health is often accompanied by many challenges whereby any disturbance in their health condition, negatively affects society (1). Sexual affects all people at all ages and all stages of life and is necessary for responsible parenthood and reproductive health (2). Women with disabilities have also proven that they have a basic need for a close relationship and meeting their sexual needs as much as normal people (3). Nonetheless, there is a separation for people with disabilities in the popular culture, which makes them unable to join the community freely (4). The healthy sexual function and proper marital relationship are the cornerstones of a stable and intimate relationship and considered among the important factors in the physical and psychological health of couples so that the sustainability of the family depends on these relationships (5-7). Several factors can affect the sex life of women with a physical-motor handicap. One of the factors influencing the sex life of women with a physical-motor handicap is having a negative body image and genital self-image. The term body image has two perceptual and attitudinal dimensions. The perceptual component of body image is how to see the size, shape, weight, face, movement, and actions, while the attitudinal component is related to how we feel about these features and how these feelings drive our behavior (8). In fact, a positive body image creates a sense of value in the person, and the mental body image that has undergone any change leads to a change in the sense of value (9). The positive and negative effects of genital self-image can be important in order to preventive health measure (10). The negative genital self-image can lead to negative feelings about the body, which is recognized as a risk factor in psychopathology (11). Since women with a physical-motor handicap are among the vulnerable people, including sexual vulnerability, it is critical to address their problems.

Hence, several approaches have been proposed in order to enrich marital relations and improve the sexual function of women with a handicap. One of these approaches is self-encouragement training. Self-encouragement helps a person feel satisfied with their dedication to the wellbeing of the community (12). Self-encouragement covers both personal and social goals. The important thing is having positive attitudes towards the surrounding issues. It is while some people are not like this and live with a sense of inadequacy and humiliation. They believe they are not useful. This desperation and discouragement should be treated by increasing self-encouragement, satisfaction and mental health and also meeting the needs of life (13). Self-encouragement strengthens and improves self-confidence and self-awareness, and this is the key to individual development. With self-encouragement, the person feels more helpful to the community. It often has social goals and is more than just being positive; and it's not just denying and suppressing the negative aspects of life. Selfencouragement is paying simultaneous attention to the positive and negative aspects of life (14). There are many unsolved problems regarding the sexual health of disabled women in low and middle income countries (15), which requires appropriate interventions. In addition, some studies showed that psychological interventions have had positive outcomes in the treatment of certain diseases (16-21).

Based on the above, it seems that providing couples with necessary and efficient educational opportunities can help them to resolve the inevitable conflicts of marital life and increase their marital affinity by accepting their strengths and weaknesses as well as positive feelings about themselves and their spouses. Therefore, the present study aims to answer the question of whether self-encouragement skills training will affect the Genital Self-Image of women with a physical-motor handicap?

#### Methodology

This is a quasi-experimental study with pre-test and posttest design. The research was conducted using cluster sampling and random sampling methods in the experimental and control groups. Initially, scientific texts related to marriage, physical-motor handicap, self-encouragement and genital self-image were studied. Then, the subjects were selected through multistage cluster sampling based on informed consent and inclusion-exclusion criteria. After that, they were randomly assigned to the experimental and control groups. After both groups completed the questionnaires, the subjects in the experimental group received Schwanke's self-encouragement in 10 sessions of 90 minutes. During this period, the control group did not receive any training. After completing the training course, the questionnaires were again filled in by the two groups. Also, three months after the last intervention session, the experimental and control groups were evaluated using questionnaires. Finally, the data were analyzed by SPSS software to examine the most important descriptive and inferential statistical indices.

The FGSIS questionnaire was used in this study: Herbnick, et al (22) designed this questionnaire for measuring the genital self-image in women aged 18 to 60 years. The questionnaire has 2 scales of 4 questions and 7 questions, which are graded using the Likert scale (completely agreed, agreed, disagreed, completely disagreed). The scores on the 7-item scale ranged from 7 to 28, and the scores on the 4-item scale ranged from 4 to 16. The higher the score, the more positive is the genital self-image. Based on the factor analysis, the factor loadings of the subjects were 0.62 to 0.88. According to the results, the 4-item scale was better than the 7-item scale for assessing female genital self-image. The results showed all evidence for validity, accuracy, and reliability in a sample of US women. Cronbach's alpha was estimated to be 0.86 for the 4-item scale. However, both versions of this questionnaire can be appropriate for measuring female genital self-image (22). Cronbach's Alpha for the present study was 0.87, which indicates its acceptable reliability.

### Results

At first, demographic information of the sample population was examined, with the results presented following:

The most frequent age in the experimental and control group was related to women with physical-motor handicap aged 30-40 years (40%) and 50-60 years (48%), respectively. In terms of education, the most frequent education level in the experimental group was high school diploma (48%) and the least frequent was an associate degree (12%). Also, the most frequent education level in the control group was related to women with high school diploma (36%), and the least frequent was an associate degree (12%). Regarding the economic status, the most frequent groups of the experimental group were women with moderate economic status (64%), and the least frequent was related to women with weak economic status (4%). In addition, the most frequent groups of the control group were women with moderate economic status (60%), and the least frequent was related to women with weak economic status (4%).

ANCOVA test was used to examine the effect of self-encouragement skills training on the total score of genital selfimage. The results are presented in Table 1 (next page):

The results of group membership in Table 1 show that the F ratios of ANCOVA in the total score of Genital Self-Image (F = 74.73, F = 0.000) are significant (P <0.05). The findings of this table show that self-encouragement training was effective on the total score of Genital Self-Image by 75%.

The repeated measures ANOVA were used to examine the effect of self-encouragement skills training on Genital Self-Image Score. The results are presented in Table 2.

Table 1: Univariate ANCOVA results on the total score of genital self-image

Reference	Dependent variable	100000000000000000000000000000000000000	Degrees of freedom	Mean of squares	F	Significance level	Impact factor
Group	Genital Self-Image	149.17	1	149.17	74.73	0.001	0.61

Table 2: The repeated measures ANOVA on genital self-image score

	Value	F	Degrees of freedom	Error of degrees of freedom	Significance level	Impact factor
Pillal's Trace	0.37	14.35	2	47	0.001	0.37
Wilk's Lambda	0.62	14.35	2	47	0.001	0.37
Hotelling's Trace	0.61	14.35	2	47	0.001	0.37
Roy's largest root	0.61	14.35	2	47	0.001	0.37

Table 3: Pairwise comparisons for the GSI score in the experimental group

Stage	Mean difference	Standard deviation	Significance
Pretest and posttest	1	0.24	0.001
Pretest and follow-up	0.22	0.34	0.53
Posttest and follow-up	0.78	0.23	0.002

Based on the amount of Wilk's Lambda coefficient and the significant effect of group interaction and genital self-image (P <0.05), Table 2 shows that the training of self-encouragement skills has caused the scores of the subject's genital self-image in the pre-test, post-test and follow-up stages to be significantly different. In this table, the impact size (37%) indicates that self-encouragement skills had an impact of 37% on the genital self-image of the experimental group.

According to the table above, the mean genital self-image score in pre-test is significantly different from that of post-test (P <0.05). There is also a significant difference between the mean genital self-image score at the posttest and follow-up stages (P <0.05). However, the mean difference between the pre-test and follow-up stages is not significant.

#### Discussion and Conclusion

The findings indicated that self-encouragement training was effective on the total score of Genital Self-Image by 61%. Considering that there is little research on negative genital self-image and the training needed to change this attitude, the results of the following research may not directly relate to the subject of this research. However, these studies are generally in line with the records. The findings of Fisch et al. (23) and Nezu et al. (24) are consistent with the present research. Other studies showed that motivation is an effective approach to weight maintenance and can be used as a new therapeutic approach instead of traditional

skill-based programs (25). Also Improvement autonomous (self-determined) motivation is one of the approaches that seem useful for weight loss (26, 27).

In explaining the results of the second main hypothesis, it can be said that body image is an essential element of the personality and self-image of people that affects their psychological life and attitudes. This image can positively or negatively affect the psychological well-being of the individual and serves as a source of positive or negative emotions. If the person's body image is very inconsistent, his/her social and marital relationships, daily functions, interpersonal relationships and family relationships, which are among the most important areas for the quality of life, will be affected. Failure to have a proper genital self-image in some societies may cause the person to not respond fully to the sexual demands of his/her spouse, and this will lead to disagreement or dissatisfaction of both sides. Thus, the individual will prefer to reduce the frequency of sexual activity due to such conflicts or dissatisfaction that cause reluctance or lack of sexual desire. Therefore. self-esteem is one of the most important areas of physical self-confidence. Hence, people with higher self-esteem are more successful in their academic, occupational, family and personal life. It is while low self-esteem leads to dissatisfaction with the body image and causes a lot of pressure on the person to become attractive. Self-confidence seems to be a very important factor in physical dissatisfaction. Women with a negative genital self-image are not happy with their sex organs, they do not have a good mental image of their sex organs, and they often feel embarrassed, ashamed and discontent,

and perhaps, that is why they avoid having sex or do not enjoy enough. The reason for this feeling is that they may think of dissatisfaction with their sex organs during sex. Therefore, women participated in the research sessions, after learning the expression of their emotions and talking skills with husbands, were able to present themselves more favorably and express their needs to their partners and husbands more effectively, and eventually experience a high level of self-esteem. The more sympathetic = the couple are = the higher will be their satisfaction with life, self-esteem, and positive self-image. On the contrary, the further they are from each other, their self-confidence and positive self-image also reduces. The women participated in the present research sessions raised their intimacy in relationships by expressing their deepest feelings, dreams, desires, anxieties, and joys to their husbands. More importantly, intimacy involves self-awareness and addressing the inner matters. The women, with their knowledge of themselves and their needs as well as their husband, were able to experience a higher level of selfconfidence and a positive body image in their marital life. Training Self-Encouragement Skills can improve Genital Self-Image in Women with Physical-Motor Handicap.

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#### References

- 1. Davidson PM, McGrath SJ, Meleis AI, Stern P, DiGiacomo M, Dharmendra T, et al. The Health of Women and Girls Determines the Health and Well-Being of Our Modern World: A White Paper From the International Council on Women's Health Issues. Health care for women international. 2011;32(10):870-86.
- 2. Lee K, Devine A, Marco MJ, Zayas J, Gill-Atkinson L, Vaughan C. Sexual and reproductive health services for women with disability: a qualitative study with service providers in the Philippines. BMC Women's Health. 2015;15:87.
- 3. Greenwood NW, Wilkinson J. Sexual and Reproductive Health Care for Women with Intellectual Disabilities: A Primary Care Perspective. International Journal of Family Medicine. 2013;2013:642472.
- 4. May LA, Warren S. Measuring quality of life of persons with spinal cord injury: external and structural validity. Spinal cord. 2002;40(7):341-50.
- 5. Fahami F, Mohamadirizi S, Savabi M. The relationship between sexual dysfunction and quality of marital relationship in genital and breast cancers women. Journal of Education and Health Promotion. 2017;6:56.
- 6. Assari S, Moghani Lankarani M, Ahmadi K, Kazemi Saleh D. Association between Sexual Function and Marital Relationship in Patients with Ischemic Heart Disease. The Journal of Tehran University Heart Center. 2014;9(3):124-31.
- 7. Ziaee T, Jannati Y, Mobasheri E, Taghavi T, Abdollahi H, Modanloo M, et al. The Relationship between Marital and Sexual Satisfaction among Married Women Employees

- at Golestan University of Medical Sciences, Iran. Iranian Journal of Psychiatry and Behavioral Sciences. 2014;8(2):44-51.
- 8. Gleeson K, Frith H. (De) constructing body image. Journal of health psychology. 2006;11(1):79-90.
- 9. Akhondi MM, Dadkhah A, Bagherpour A, Ardakani ZB, Kamali K, Binaafar S, et al. Study of Body Image in Fertile and Infertile Men. Journal of Reproduction & Infertility. 2011;12(4):295-8.
- 10. DeMaria AL, Hollub AV, Herbenick D. Using genital self-image, body image, and sexual behaviors to predict gynecological exam behaviors of college women. The journal of sexual medicine. 2011;8(9):2484-92.
- 11. Edman JL, Yates A, Aruguete MS, DeBord KA. Negative emotion and disordered eating among obese college students. Eating behaviors. 2005;6(4):308-17.
- 12. Karkhaneh M, Movallali G, Mohammadi MA, Salehy Z. Effectiveness of encouragement training in alleviating depression among mothers of children with hearing impairment. Asian Journal of Social Sciences and Management Studies. 2015;2(2):53-7.
- 13. Bahlmann R, Dinter L. Encouraging Self-Encouragement: An Effect Study of the Encouraging-Training Schoenaker-Concept®. Journal of Individual Psychology. 2001;57(3):273-88.
- 14. Watts RE. Adlerian therapy as a relational constructivist approach. The Family Journal. 2003;11(2):139-47.
- 15. Carew MT, Braathen SH, Swartz L, Hunt X, Rohleder P. The sexual lives of people with disabilities within low- and middle-income countries: a scoping study of studies published in English. Global Health Action. 2017;10(1):1337342.
- 16. Solati K. The Efficacy of Mindfulness-Based Cognitive Therapy on Resilience among the Wives of Patients with Schizophrenia. Journal of clinical and diagnostic research: JCDR. 2017;11(4):VC01.
- 17. Dehkordi AH, Solati K. The effects of cognitive behavioral therapy and drug therapy on quality of life and symptoms of patients with irritable bowel syndrome. Journal of advanced pharmaceutical technology & research. 2017;8(2):67.
- 18. Solati K. Effectiveness of cognitive-behavior group therapy, psycho-education family, and drug therapy in reducing and preventing recurrence of symptoms in patients with major depressive disorder. Group. 2016;2(40.84):3.55.
- 19. Solati K, Mousavi M. The efficacy of mindfulness-based cognitive therapy on general health in patients with systemic lupus erythematosus: A randomized controlled trial. Journal of Kerman University of Medical Sciences. 2015;22(5):499-509.
- 20. Nikfarjam M, SolatiDehkordi K, Aghaei A, Rahimian G. Efficacy of hypnotherapy in conjunction with pharmacotherapy and pharmacotherapy alone on the quality of life in patients with irritable bowel syndrome. Govaresh. 2013;18(3):149-56.
- 21. Dehkordi KS, Nikfarjam M, Sanaei S. Effectiveness of mindfulness-based stress reduction training and drug therapy on quality of life in patients with irritable bowel syndrome in Shahrekord. Life Sci J. 2014;11(9).
- 22. Herbenick D, Schick V, Reece M, Sanders S, Dodge B, Fortenberry JD. The Female Genital Self-Image

Scale (FGSIS): Results from a nationally representative probability sample of women in the United States. The journal of sexual medicine. 2011;8(1):158-66.

23. Fish LS, Fish RC, Sprenkle DH. Treating inhibited sexual desire: A marital therapy approach. American Journal of Family Therapy. 1984;12(3):3-12.

- 24. Nezu AM, Nezu CM, Lombardo ER. Cognitivebehavioral case formulation and treatment design: A problem-solving approach: Springer publishing company; 2004.
- 25. West DS, Gorin AA, Subak LL, Foster G, Bragg C, Hecht J, et al. A Motivation-Focused Weight Loss Maintenance Program is an Effective Alternative to a Skill-Based Approach. International journal of obesity (2005). 2011;35(2):259-69.
- 26. Gillison FB, Standage M, Skevington SM. Motivation and Body-Related Factors as Discriminators of Change in Adolescents' Exercise Behavior Profiles. Journal of Adolescent Health. 2011;48(1):44-51.
- 27. Teixeira PJ, Silva MN, Mata J, Palmeira AL, Markland D. Motivation, self-determination, and long-term weight control. International Journal of Behavioral Nutrition and Physical Activity. 2012;9(1):22.