The Role of Emotion Failures and Social Well-being in Predicting Violence Against Women

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Abstract

Objective: Social well-being, like other aspects of well-being, is one of the variables studied in health psychology, so one of the key issues that threatens the health of women is violence. The aim of this research was to study the role of emotion failures and social well-being in predicting violence against women.

Methods: This research was descriptive and correlational. The population under study was all women applicants for divorce in Ardabil city in 2016 among whom 106 were selected through available sampling method. Tools of data collection were the scale of violence against women and questionnaires of alexithymia and social well-being. Data analysis was done through Pearson correlation and Multiple Linear regression formula.

Results: The results indicated that there is a significant positive correlation between alexithymia and violence against women (P<0.05). Moreover, there was a significant negative relationship between social well-being and violence against women (P<0.05). The results of regression analysis showed that 64 percent of the variance of violence against women is significantly explained by emotion failures and social well-being variables.

Conclusions: According to the findings, it can be concluded that the recognition of emotions at the individual level as well as the identification and description of emotions and awareness of emotions can be effective in improving couples' relationships and reducing family violence. Besides, contributing in family and society and accepting the community and its members with their weaknesses and strengths as well as having effective relations with close and supporting people can lead to reduction in violence against women.

Keywords: emotion failures, social well-being, violence, women, health psychology.

Introduction

According to the findings of the World Health Organization (WHO) (2005), women who experienced physical and sexual violence compared to women who did not have such experience, were poor in terms of health. The highest frequency of violence in the general population was related to mental violence, and the least was correlated to sexual violence (Vameghi, Khodaei Ardakani & Sajadi, 2014).

Family, the smallest social unit, is one of the most important supportive unit. The need to maintain peace and comfort among family members necessitates a relation based on logic and affection in a way that members enjoy senses of security, confidence, wellbeing, protection and satisfaction. The role of women in creating ethical and emotional relations among family members is undeniable; this goal is attained through establishing a tranquil and secure place and a place without violence for all members of the family. Nowadays, large amount of evidence indicates the conflict in family relations

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and its resulting violence.

Violence is negative behavior to damage others, which ranges from humiliation, invasion, insult and battery to destruction of property and murder. The most widespread kind of violence is family violence which is used in a private environment; since it provokes among the people who are intimately connected together both by marriage and blood. It is a kind of gender-related crime against women, which generally originates from the behavior of dominant gender (i.e. men) in the society (Sedigh Sarvestani, 2007). Domestic violence, with the highest probability of frequency and the lowest report to the police, but with the most effective social, psychological and financial aftermath, is the most widespread form of violence (Saroukhani & doodman, 2010). Its prevalence is not the same in different parts of the world. According to the estimations, it exists in 50% of the families or above. One out of four women is susceptible to violence; and almost one-third of women in the world have at least experienced violence once (Navak, Byrne, Martin & Abraham, 2003). In this regard, Iranian women are different (because divorce is a disgrace) and never complain unless their lives are in real danger. It is probably related to Iranian custom or culture as well as religious instructions in the society. On the other hand, the one-sided patriarchal believes may lead men to consider their right to be violent and as a result they may justify their violence. Indeed, in a society with traditional and intertwined cultures such as Iran, reporting mental disorders or problems immediately attracts inappropriate social labels. This has a significant role in denying and concealing mental disorders (Sadeghieh Ahari, Nikpou, Molavi, Abdi, Amani et al., 2014).

Emotion failures

One of the variables that can be effective in violence is emotion failure or alexithymia. The word alexithymia is taken from Greek words "alexi" and "thymia" to describe a situation in which one can find no words to express their feelings and emotions; conceptually, it is defined as difficulty in identifying emotions, describing feeling, and externally oriented thinking style (Bagby, Parker & Taylor, 1994). The term was originally used by Sifneos (2000) to refer to a cluster of cognitive and affective traits among patients suffering from classic psychosomatic disorder. It is a multidimensional construct containing three traits: 1. difficulties in recognizing emotions, 2. difficulties in verbalizing emotions, and 3. externally oriented thinking style (Bankier, Aigner & Bach, 2001). People with alexithymia do not perceive questions related to affective concepts of emotion; they focus on bodily sensations of emotional arousal and experience emotions as reinforced sensations. Since, people with alexithymia have difficulty understanding and reacting to others' emotions, they also develop interpersonal disorder and may find it difficult to express empathy. Also they may experience a kind of deep cognitive disorder. Review of literature indicates the importance of alexithymia in many disorders. In a research, Dubey, Pandey and Mishra (2010) found that compared to their normal peers, people with high levels of alexithymia report more patterns of unhealthy behavior such as eating disorder, drug abuse, alcohol dependency and gambling. Furthermore, there is relationship between alexithymia and some other disorders such as anxiety, major depression, aggression, violence, pain disorders and sexual disorder (Dubey et al., 2010). The results indicate that the susceptibility of people with alexithymia to physical illness increases. Moreover, alexithymia is proven to be effective in disorders such as depression, generalized anxiety disorder, obsession, posttraumatic stress and pain disorders (Honkalampi et al., 2010). Previous research on clinical and nonclinical population reports a strong relationship between alexithymia and immature defensive style of ego (Besharat & Shahidi, 2011). In a research, Loxton, Schofield,

Hussain and Mishra (2006) showed that there was an explicit relationship between domestic violence and many health problems such as allergy, breathing problems, pain, fatigue, digestive disorder, vaginal discharge, vision and hearing impairments, iron shortage, asthma, bronchitis, emphysema, and cervical cancer; the said disorders were more prevalent among the victims of domestic violence. In their study, Casique and Furegato (2007) argued that increase in financial resources of women meaningfully decreases physical violence against them. On the other hand, the expansion in socioeconomic position of women can be used as a suitable strategy to decrease physical violence against them. Moreover, when we increase the resources of managing emotions in a way that one is able to control their negative emotions, we decrease violence. Akbarzade and Mafi (2005) in their study on this issue showed that there is a significant and positive correlation between subsets of MMPI tests (hypochondria, depression, hysteria, psychopathy, paranoia schizophrenia and hypomania) and domestic violence. Moreover, Ghahari, Âtefvahid, and Yousefi (2006) believe that all kinds of domestic violence have destructive effects on women's health and the victims of domestic violence suffer more from general health. Findings of this research indicated that there was a meaningful relationship between domestic violence and variables of types of family, types of marriage, socio-economic status, job status, education levels, age and religious believes. In their research, Emam Hadi, Jalilvand and Hadian (2009) found that compared to their normal counterparts, average scores of women suffering from domestic violence in emotional intelligence test as well as in all components of interpersonal intelligence, compatibility, stress tolerance and general temperament are lower. The difference was also shown in subscales of emotional intelligence. The results of this research indicated that improving the abilities related to emotional intelligence, which is among the most essential

social and affective skills, plays an eminent role in preventing domestic violence. Therefore, emotion regulation has an important role in the adaptation or stressing realities of life and their biological and psychological consequences (Javanmard & Goli, 2017).

Social well-being

Among other variables that can be disturbed as a result of conflicts between married couples is social well-being. Nowadays, along with physical, mental and spiritual well-being, social well-being is also very important as a dimension of wellbeing. As being healthy does not only mean to be free from physical and mental illnesses, but how one acts in social relations and the way one thinks about society it is also considered as criteria to evaluate individual as a whole social well-being. Social well-being is considered as one's adaptation to the environment. Keyes (2004) defines social well-being as an individual's report on the quality of their relations with other people and social groups and believes that the social well-being scale evaluates a part of individual health and includes internal responses (feeling, thought and behavior) of a person that indicate their satisfaction or dissatisfaction with life and social environment. Many researchers put the same value on social well-being as affective well-being, which includes getting pleasure and satisfaction from life and making balance among positive and negative effects. The results of research done by Taillieu and Brownridge (2010) indicated that the more women participate in social affairs and learn assertiveness skills, the more they can use problem solving skills when they face problems. Furthermore, having an active role in housework and family affaires makes their behavior and positions more acceptable to their husbands. In their research, Kumar, Nizamie, and Srivastava (2013) concluded that psychosocial support received from friends affects well-being; moreover, there is meaningful relationship between mental health and dimensions of violence and the more women participate in social affairs, the more they will enjoy from social support; therefore, during an outbreak of violence, social support will quell the violence. The findings of research done by Oram, Khalifeh and Howard (2017) indicated that women who identify their emotions during critical time and manage it and describe it successfully they can regulate their negative emotions and relieve tension and prevent violence. In another research titled "an Explanation of the Causes and Grounds of Domestic Violence", Salarifar (2009) put the reasons of violence in three groups of intrapersonal, interpersonal and social violence. In their research, Khaleghkh, Zare, Ghamari Giv, and Valizadeh (2015) showed a significant difference between female victims of violence and their normal counterparts in emotional intelligence but there was no significant difference among the said groups in social intelligence. This research showed that not only high levels of emotional and social intelligence prevents violence but also paves the way for suitable behavior during the outbreak of violence. They believe that teaching correct behavioral doctrines and promoting social and emotional intelligence can play a preventive role in the outbreak of violence against women.

Also, some research have shown the role of alexithymia in intimate partner violence (Berke, Macdonald, Poole, Portnoy, McSheffrey & et al., 2017), anger among offenders (Velotti, Garofalo, Callea, Bucks, Roberton & et al., 2017; Strickland, Parry, Allan & Allan, 2017), posttraumatic stress (Chung & Wan, 2016), violent recidivism (Leshem, van Lieshout, Ben-David & Ben-David, 2019) and depression, suicidality and aggression (Hemming, Haddock, Shaw & Pratt, 2019).

Overall, understanding the impact of emotion failures and social well-being in reducing many interpersonal problems between families and conflicts between husband and wife can be effective. So that, at individual level and by knowing the emotions and disruptive factors of emotion, as well as understanding interpersonal factors and social well-being, effective steps can be taken to provide appropriate solutions to reduce violence against women. Therefore, we tried to answer whether emotion failures and social wellbeing predict violence against women or not.

Method

This research was descriptive and correlational. In this research violence against women is dependence variable and emotion failures and social well-being are predictor variables.

Participants and Procedure

The population under study was all women applicants for divorce who were referred to counseling centers by the judicatory in Ardebil city during 6 months (from December 22, 2016 to May 22, 2017). Sample included 106 women referring to the aforementioned centers who were selected through available sampling method. Among them those who were literate (5th primary school degree and higher to be able to read and understand the questionnaire) and those who were married for at least one year (because the questionnaire of domestic violence is more affective for one year after marriage) were selected as participants. Since the minimum sample size should 30 subjects in correlational research (Delavar, 2010), and with regard to multivariate statistical technique and observing the required conditions of statistical sufficiency as well as for increasing external validity of research, we selected 130 subjects as our sample, but due to subject loss only 106 subjects completed the questionnaires. The included criteria were living in Ardebil city, having normal intelligence, being literate (5th primary school degree and higher) to complete the questionnaire, and being married for at least one year. The Exclusion criteria included the subjects lack of tendency to participate in the research, suffering from any type of illnesses

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and drug abuse during the study. Also protecting respondents' confidentiality and their complete freedom to participate were among the ethical issues observed in this research.

Measures

Social well-being questionnaire: This questionnaire has been developed by Keyes (1998) based on his theoretical model of social well-being construct. It consists of 33 questions and 5 subscales of social integration, social coherence, social contribution, social actualization, and social acceptance. Through factor analysis, Keyes conducted two studies with 373 and 2883 subjects to prove the 5-dimensionsal model in his questionnaire. In this questionnaire, 6 questions are related to social contribution, 7 questions to social integration, 7 questions are about social acceptance, 7 questions about social actualization, and 6 questions are about social coherence. It is based on 5-point Likert's scale which means: 5 = strongly agree, 4 = agree, 3 =don't have any idea, 2 = disagree, and 1 = stronglydisagree; therefore, the lowest and highest scores will be 33 and 165, respectively. It is noteworthy that some of the questions related to subscales are reversal keyed. The obtained reliability through Cronbach's alpha by Saffarinia and Tabrizi (2012) was 0.85, which is acceptable. Moreover, internal consistency of the questionnaire through calculating Cronbach's alpha was 0.72 in Heydari and Ghanaei (2008; quoted by Saffarinia, 2012) and the obtained correlation coefficient through test-retesting the scale as a whole was 0.66 and were between 0.57 and 0.73 for subscales, which were all significant at the level of P< 0.01. Furthermore, construct validity of the test through factor analysis indicated that the test is saturated with 5 factors called social integration, social coherence, social contribution, social actualization, and social acceptance in which the first factor holds the highest share. Moreover, the results of research to define content validity were accepted by the experts in the related area; and the results related to exploratory factor analysis of principal components (PC) through Varimax rotation indicated the existence of 5 factors with the eigenvalues bigger than one namely social integration, social coherence, social contribution, social actualization, and social acceptance (Aghayosofi, Fathi Ashtiyani, Aliakbari & Imanifar, 2016).

Violence against women questionnaire: This questionnaire is developed by Mohseni Tabrizi, Kaldi and Javadianzadeh (2013). In this questionnaire a demographic form is the tool of data collection which contains 10 demographic questions. It also contains questions to evaluate different types of violence against women, patriarchal believes, traditions, family upbringing, and learning violence. This part includes 60 questions. Generally, the questionnaire includes 71 questions. It evaluates different types of violence including psychological violence, physical violence, sexual violence, and economic violence. With regard to our aim, we used the first 36 questions of the questionnaire. Questions 1 to 10 include demographic information, and questions 11 to 21, 22 to 26, 27 to 32, and 33 to 36 include psychological violence, economic violence, physical violence, and sexual violence, respectively. The questions were graded based on Likert's 5-point scale in which 4= strongly agree; 3=agree; 2= don't have any idea; 1= disagree; 0= strongly disagree. Trying to evaluate face reliability of the scale, Tabrizi and his colleagues (2013) used questions from previous research that were used by experts in related study, then their questions were confirmed by the experts in the field of social sciences. In their research, the total Cronbach's alpha coefficient was 0.83, which indicated acceptable reliability of the questions. In this research, total coefficient of Cronbach's alpha was 0.79 with regard to violence against women.

Toronto alexithymia (emotion failures) scale: The Persian version of the Toronto alexithymia scale (Bagby et al., 1994) is a 20-item instrument.

It has three subscales: difficulties in recognizing emotions (7 items), difficulties in verbalizing emotions (5 items), and externally oriented thinking style (8 items) that are evaluated through Likert's 5-point scale from 1= strongly disagree to 5= strongly agree (Besharat, 2009). In this scale, questions 4, 5, 10, 18 and 19 are reversal keyed. Items (2, 4, 7, 12, and 17) evaluate difficulties in verbalizing emotions; items (1, 3, 6, 9, 11, 13, and 14) evaluate difficulties in recognizing emotions; and items (5, 8, 10, 15, 16, 18, 19 and 20) are used to measure the tendency of individuals to focus their attention externally. The coefficient of Cronbach's alpha is 0.75 in this scale. In the Persian version of alexithymia scale, the coefficients of Cronbach's alpha for total alexithymia, and the three subscales of difficulties in recognizing emotions, difficulties in verbalizing emotions, and externally oriented thinking style were 0.85, 0.82, 0.75 and 0.72, respectively. Test-retest reliability of alexithymia scale in a sample of 67 subjects in two different periods and four weekly intervals was measured for total alexithymia and different subscales, which ranged from (r=0.80) to (r=0.87). The Enter validity of Toronto alexithymia scale

was measured and tested based on the correlation between the subscales of this test and scales of emotional intelligence, psychological well-being, and psychological distress (Besharat et al., 2014).

After primary studies, we prepared research questionnaire. Then we got the permission from the judicatory in Ardebil city to select our sample from the population under study. After arranging a time with the judicatory to refer to the counseling centers in Ardebil city for data collection, we then attended in the said centers and explained the aim of our study to the women applicants for divorce; then we asked them to complete the questionnaires. Finally, the collected data were analyzed through SPSS₂₂ and Multiple Linear regression analyses (*Enter method*).

Results

Among the women who participated in this study, 7% (7 people) were 16 years old, 14% (15 people) were 18 years old, 11% (12 people) were 19 years old, 32% (34 people) were 20 years old, and 36% (38 people) were 22 years old and more. Also, Among them, 7% (7 people) had elementary education, 26% (28 people) had guidance school

 Table 1. Mean and standard deviation of domestic violence, emotion failures and social well-being of women under study

Variable	Component	$M \pm SD$	
Domestic violence	Psychological violence	33.74±10.25	
	Physical violence	17.24±4.41	
	Sexual violence	7.31±3.32	
	Economic violence	15.52±3.43	
	Total	48.11±14.56	
Emotion failures	Difficulty describing feeling	16.87±2.81	
	Difficulties in recognizing emotions	24.56±4.69	
	Externally oriented thinking style	22.39±4.46	
	Total	62.67±9.68	
Social well-being	Social integration	15.75±2.54	
	Social coherence	19.77±2.38	
	Social acceptance	23.20±1.54	
	Social actualization	20.45±2.26	
	Social contribution	18.54±2.24	
	Total	69.25±12.40	

	Components of violence against women				
Components of emotion failures	Psychological violence	Physical violence	Sexual violence	Economic violence	
Difficulties in verbalizing emotions	0.34	0.40	0.33	0.39	
Difficulties in recognizing emotions	0.48	0.38	0.41	0.41	
Externally oriented thinking style	0.50	0.41	0.39	0.45	

Table 2. Correlation Matrix to study the relationship between components of emotion failures with components of violence against women

educations, 37% (39 people) had high school education, 21% (23 people) had diplomas, 5% (5 people) had associate degree, 2% (2 people) had Bachelor's degree, and 2% (2 people) had master's degree and more. In addition, among the women of the study, 20% (21 people) had 1 to 3 years, 27% (29 people) 3 to 6 years, 33% (35 people) 6 to 10 years and 20% (21 people) 10 years and more age difference with their spouse.

As indicated in Table 1, the mean (and standard deviation) related to total score of domestic violence are 48.11 (and 14.56). Moreover, the mean (and standard deviation) related to total score of emotion failures are 62.67 (and 9.68) and those of social well-being are 69.25 (and 12.4).

As indicated in Table 2, there is a positive and significant relationship (P0.05 <) between components of emotion failures and those of violence against women. In other words, with the increase in the value of emotion failures among women we can observe an increase in the value of violence against women and vice versa. The results also show that there is a positive and significant relationship (P0.05<) between components of emotion failures and violence against women.

As shown in Table 3, there is a negative

and significant relationship (P<0.05) between components of social well-being and violence against women. In other words, with the increase in the value of social well-being among women we can observe a decrease in the value of violence against women and vice versa.

For defining the impact of variables of emotion failures and social well-being as predictor variables and violence against women as dependent variable we used Multiple Linear regression analyses (*Enter method*). As it is shown in Table 4., 64 percent of the variance of violence against women are defined by emotion failures and social well-being. According to beta values, social well-being (beta=0.671), and emotion failures (beta=0.511) were respectively the strongest variables for the prediction of violence against women.

Discussion and conclusion

The aim of this research was to study the role of emotion failures and social well-being to predict violence against women in Ardebil city. The obtained results indicated that emotion failures (difficulties in recognizing emotions, difficulties in verbalizing emotions, and externally oriented thinking style) predicted the violence against women positively

 Table 3. Correlation Matrix to study the relationship between components of social well-being with components of violence against women

Components of social well-being	Components of violence against women				
	Psychological violence	Physical violence	Sexual violence	Economic violence	
Social acceptance	-0.45	-0.39	-0.44	-0.45	
Social contribution	-0.42	-0.40	-0.41	-0.43	
Social integration	-0.49	-0.48	-0.31	-0.48	
Social coherence	-0.46	-0.44	-0.39	-0.38	
Social actualization	-0.45	-0.42	-0.35	-0.46	

				Non-standard coefficients		Standard coefficients	_	
Predictor variables	R	R2	R modified	В	SE	Beta	t	Р
Constant				138.516	5.814	-	21.383	0.001
Emotion failures	0.805	0.648	0.644	2.177	0.415	0.511	5.252	0.001
Social well-being				-3.672	0.459	-0.671	-7.678	0.001

Table 4. The results of multiple regression analysis to predict violence against women based on emotion failures and social well-being

and meaningfully. This finding is in line with Dubey et al. (2010), Honkalampi et al. (2010), Loxton et al. (2006), Casique et al. (2007), Akbarzade et al. (2005), Ghahhari et al. (2005), and Emam Hadi et al. (2009) and indicates that emotions and their recognition can be effective in predicting many problems. In supporting the finding, the results of some research indicate that interpersonal problems can intensify the relationship between alexithymia and marital satisfaction. Correct identification of emotions is considered as an essential factor in marital and interpersonal relations and people with alexithymia have difficulty in identifying emotions of other people, which is essential in having a relationship (Bagby et al., 1994). Alexithymia is the cause of many problems in interpersonal and marital relations. When emotional information cannot be understood and evaluated in the process of cognitive processing, the individual will experience a state of confusion and distress and this disability disturbs the organization of their emotions and cognition (Besharat, 2009) and this makes the individual unable to control their anger and this uncontrolled anger arising from emotions leads to aggression and violence. The need for interpersonal relations is a natural tendency and those who cannot perceive and care for their relations physically and psychologically will have difficulty and if one does not have enough interpersonal support, he/she cannot manage the crisis during stressful situations and crisis (Dewan, Steenbarger & Greenberg, 2012); therefore, it seems that if one has interpersonal problems and also suffers from alexithymia will have low levels

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of marital satisfaction and when it becomes clear that one suffers from alexithymia, this stressful relations will lead to domestic violence. Moreover, the results of present research are in line with Sprecher, Metts, Burleson, Hatfield and Thompson (2007) and Vangelisti, Reis and Fitzpatrick's (2002) studies. In these studies, it is shown that expressing emotions and interpersonal relations play an important role in marital satisfaction. In another piece of research, Besharat and Ganji (2013) showed that alexithymia lowers marital satisfaction and there is a relationship between alexithymia and interpersonal problems, the existence of which will lead low levels of marital satisfaction and even can lead to domestic violence. In defining this results, we can argue that alexithymia is a cognitive-affective trait and the person suffering from alexithymia has difficulty in organizing and understanding their emotions. These people are usually unable to identify or describe their emotions due to disability in cognitive processing of their emotions and have limited ability in adapting to the distressing conditions. One of the ways of controlling tension, especially with regard to emotions, is to avoid discharging them. When one cannot express their negative emotions verbally, the psychological component of the systems related to expressing emotions and psychological distress such as depression and anxiety will decrease. People who are able to identify their emotions and express their emotional states effectively can face with problems better and are more successful in adaptation to the environment and deal with others and as a result they are mentally healthier (Motan & Gencoz, 2007) and can prevent domestic violence during th critical time of their life.

Moreover, the obtained results indicated that there was a negative and meaningful relationship between social well-being and violence against women, and social well-being is suitable predictor of violence. On the other hand, with the increase in social well-being among women, the violence against them will decrease. This finding is in line with those of Taillieu et al. (2010), Kumar et al. (2013), Oram et al. (2017), Salarifar (2009), and Khaleqkhah et al. (2015), which indicates the importance of interpersonal relations and highlights that involving individuals in social relations is effective in decreasing violence against women. The importance of effective social and environmental factors has been identified for a long time. Neglecting psychological, behavioral, and social dimensions of individuals will lead to an increased psychological susceptibility, suicide, run away from home, domestic violence, and other social problems (Keyes, 1998). According to what we have discussed and since social well-being (as a psychosocial factor) can play an important role in mental health and consequently can be effective in the psychological factors of violence against women, the existence of negative and meaningful relationship between social well-being and violence against women is reasonable. This finding is in line with those of other pieces of research done in this area which shows that motivation of people is affected by participation and social constructs. During the discussion about violence, especially violence against women, it is necessary to consider its social aspects. Everyone tries to play their role effectively in their family or society. According to the findings of this research, there is a reverse and meaningful relationship between social well-being and men's violence against their wives. Therefore, the more women enjoy from close social relations with their friends and families the less they will suffer from their husbands' violence. One of the consequences of modernization is the family's independence, which will lead to a decrease in social relations. Hence, independence will make families isolated and will destroy their previous supportive networks. The decrease in close relations can lead to the problems like domestic violence in the family; because when people are deprived of such supportive networks, they lose their safe places where they refer at the time of crisis and hardship, thus lacking a supportive system will directly put the pressure on the family. In such cases one may be unable to react suitably against domestic violence and is victimized. Hence, supportive resources and social integration are safe places that insure women against their abusive husband. Lack of supportive resources through reducing control on individuals can lead to violence against women because at the absence of such a social control, male partners can use violence against their female partners.

To explain the above mentioned, we can argue that young couples who are satisfied with their marital life and live without violence, have positive interpersonal relations, there is a lot of unity between them, support each other in different parts of life, reach an understanding in family and recreational activities, can manage themselves during crisis, have positive mutual relationship with their paternal family and have an understanding of them in different aspects of life such as economic issues. Therefore, considering their spouses as supportive compassionate sources who are available every time, these women feel more secure and confident and report more psychological and social wellbeing (Dush, Taylor & Kroeger, 2008).

Generally speaking, the findings of this research indicated the importance of alexithymia and social well-being in predicting two important dimensions: the quality of marital life and violence against women. Through identifying their emotions and describing them and through their ability in describing feelings of their spouses, women can play an eminent role in decreasing marital

conflicts. Playing the roles suitably refers to social well-being that means through increasing the quality of their relations with their spouses and their family, sharing themselves in their family and society, and considering themselves as individuals that can realize their potentials, women can prevent domestic violence. This research had some limitations that include: it is limited to Ardebil city in Iran and cannot be generalized to other cities. Moreover, this research is of correlational kind. Hence, we cannot study the causal relationship between different variables. It is suggested to conduct similar research in a larger area with larger sample size to guarantee its generalizability. Using causal-comparative methods is suggested to discover the possible causal relationship between variables.

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