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Influence of Self-Esteem Counselling on Marital Stability Among Married Couples in Selected Catholic Parishes in Kapseret Sub County Kenya

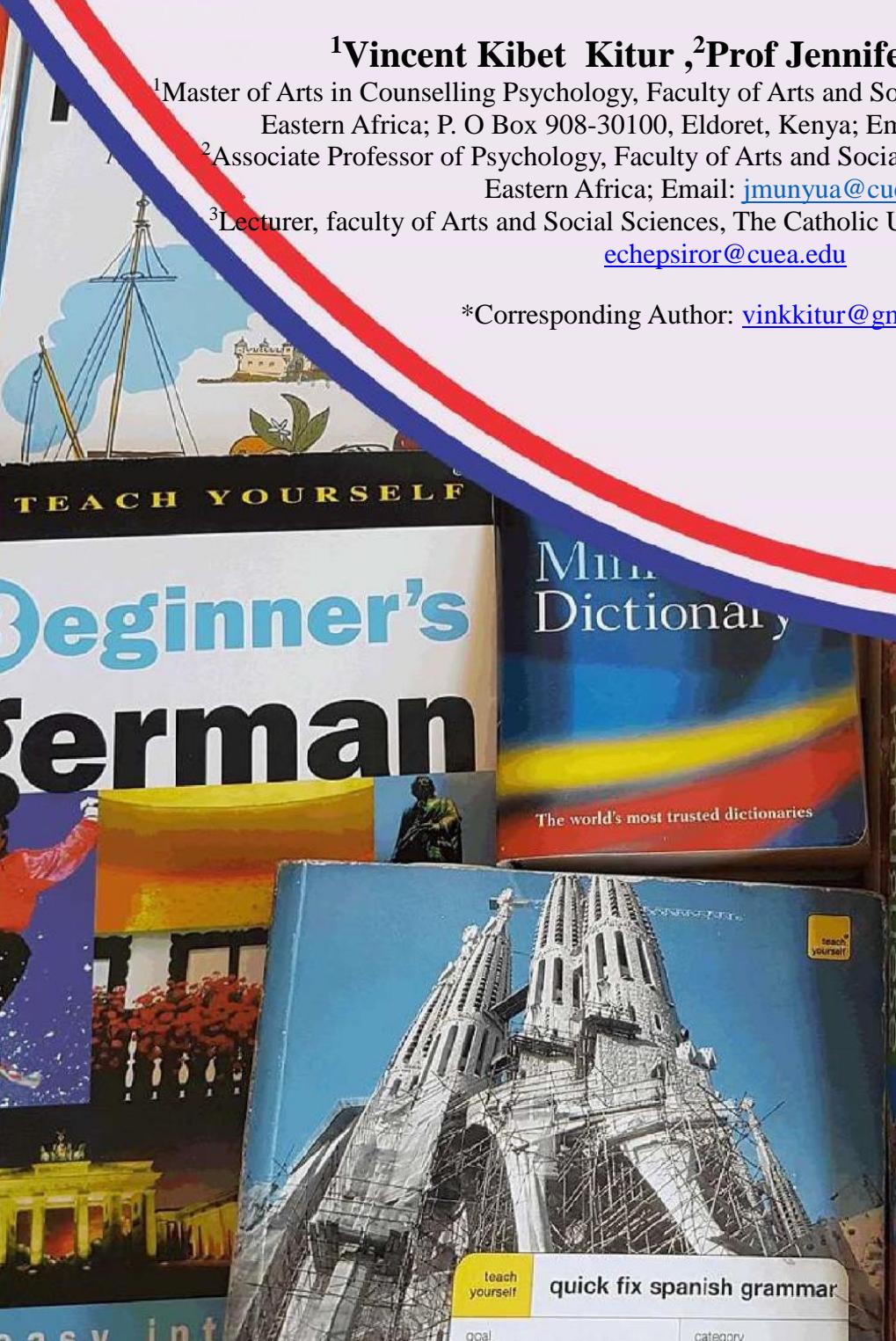
¹Vincent Kibet Kitur ,²Prof Jennifer K. Munyua,

¹Master of Arts in Counselling Psychology, Faculty of Arts and Social Science, The Catholic University of Eastern Africa; P. O Box 908-30100, Eldoret, Kenya; Email: vinkitur@gmail.com

²Associate Professor of Psychology, Faculty of Arts and Social Sciences, The Catholic University of Eastern Africa; Email: jmunyua@cuea.edu

³Lecturer, faculty of Arts and Social Sciences, The Catholic University of Eastern Africa; Email: echepsiror@cuea.edu

*Corresponding Author: vinkkitur@gmail.com



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ABSTRACT

The study examined the influence of self-esteem counselling on marital stability among married Catholic couples in Kapseret Sub County, Kenya, against a backdrop of rising marital problems, including intimate partner violence and femicide. Guided by Bowen's Family Systems Theory, which conceptualizes the family as an emotional unit with interconnected relationships, the research employed a correlational design. The study targeted 131 couples who had sought self-esteem counselling services in selected parishes, with a sample of 99 respondents selected through simple random sampling. Data was collected using questionnaires, with validity ensured through a pilot study and reliability tested using the test-retest method. Descriptive statistics and inferential statistics were used. Analysis of Variance (ANOVA) tested the hypothesis. Findings revealed that self-esteem counselling had a statistically significant positive influence on marital stability ($F = 13.794, p < 0.001$). The study concluded that self-esteem counselling enhances emotional well-being, communication, and conflict resolution, leading to greater marital stability. It recommended integrating self-esteem counselling models into church-based marriage programs and fostering collaboration between faith-based institutions and mental health professionals to strengthen marital health and promote family stability within Catholic communities.

Key Words: *Self-Esteem Counselling, Marital Stability, Married Couples, Catholic parishes*

1.1. Introduction

Marriage counseling is widely recognized as a crucial intervention for strengthening marital relationships and preventing breakdowns. According to Ganesan and Amuta (2020) marriage counselling is geared towards improving relationship quality and resolving conflicts while helping couples fostering mutual respect (Jiao & Grzywacz, 2024). Marital stability on the other hand denotes to the degree to which a marriage remains without divorce, separation, or estrangement (Blain, 2024). According to Setiawan (2024) marital stability denotes well-adjusted family system which contribute immensely to marital satisfaction marital satisfaction (Karney & Bradbury, 2020). In this study, marital stability referred to marital adjustment, quality, satisfaction, and success of marriage in Uasin Gishu County, Kenya. In Uasin Gishu County, marriage instability is a pressing concern, with growing cases of alcoholism, neglect, and family breakdown (Ndanyi, 2024). Uasin Gishu County has also experienced cases of child sexual abuse, indicating a breakdown of family protection structures (Ominde, 2023). These challenges demonstrate that marital instability is not a private matter but a public concern with implications for child welfare and social order. Yet, few studies have examined the role of marital counseling in addressing such issues in this specific context, justifying the present investigation.

Self-esteem counseling, a key component of marriage counseling, focuses on developing positive self-concept, confidence, and emotional resilience critical factors in maintaining healthy relationships. Goyal and Nakra (2023) explain that self-esteem counseling helps clients identify and challenge self-defeating beliefs, correct cognitive distortions, enhance coping skills, and foster assertiveness. Techniques include cognitive-behavioral therapy (CBT) for reframing negative thoughts, mindfulness and self-compassion for emotional regulation, affirmations for

confidence building, journaling for self-awareness, and role-playing for communication practice. When integrated into marital counseling, self-esteem interventions enable partners to bring self-worth and emotional regulation into the marriage, reducing conflict and promoting marital stability. Marriage instability is not unique to Kenya but a global issue with serious social implications. Ferrer and Pan (2020) classify it as a pressing social problem requiring immediate interventions. Despite initiatives such as the U.S. marriage covenant act mandating premarital counseling (Freeze, 2021), divorce rates remain high globally. Religious and governmental bodies recognize the centrality of marriage for social harmony and continuity (Reamen, Aminu & Akobi, 2022). Marriage breakdown contributes to moral decay, crime, and disintegration of community structures.

Globally, marriage and divorce patterns are shifting. Dutra-Thome et al. (2019) report that in Brazil, 63% of individuals were separated or divorced, while 32% were legally divorced. In the United States, marriage rates are 51.5% for men and 47.7% for women, with separation rates of 1.8% and 0.1%, respectively (Brown & Wright, 2019). In the Asia-Pacific region, divorce rates have risen by 25% since 2005, with China's rate doubling (Cao & Torres, 2018). However, some OECD countries such as Japan, Korea, and New Zealand have reported declining divorce rates. Additionally, the average age of first marriage across Asia has risen, reflecting evolving societal attitudes (De Coninck, Van Doren & Matthijs, 2021). In Sub-Saharan Africa, roughly 25% of marriages dissolve within 20 years (Clark, 2021), with South Africa reporting one divorce for every thirteen marriages and Ethiopia recording a 45% dissolution rate of first marriages within three decades (Bogale, 2018). These figures may be underestimated due to the prevalence of informal unions (Clark, 2022). Njeri (2022) observes that nearly half of families in the region face conflict-related challenges that strain relationships.

In Kenya, marital instability is rising, with the Kenya Demographic and Health Survey (2018–2019) reporting a 25% divorce rate—up from 15% in 2016. The 2019 census indicated that 12.6% of individuals were married but highlighted increasing disputes, separations, and domestic violence. Divorce rates are rising at an annual rate of 1.4% (Reamen, Aminu & Akobi, 2022). Work–life pressures, especially for career-oriented individuals, exacerbate the problem (Kinoti, Mutisya & Egunjobi, 2024). Marital distress has also been linked to mental and physical health problems (Olungah, 2023). These trends highlight the urgent need for interventions that strengthen relationships and prevent family breakdowns. The present study therefore sought to investigate how marriage counseling, particularly self-esteem building, communication training, problem-solving, and skill-building interventions, can enhance marital stability among couples in selected Catholic parishes in Kapseret Sub-County, Kenya. This focus is timely given the growing rates of divorce, separation, and domestic conflict in the region and the limited research specifically linking marriage counseling to marital stability in this context.

1.2 Statement of the Problem

The rates of divorce and separation in Kenya have been rising, with reports indicating that 5 out of 10 women have experienced marital conflicts, a figure projected to rise to 7 out of 10 by 2020 (Njeru, Ireri, & Menecha, 2021). This reflects a worrying trend of increasing marital instability. National statistics further reveal that approximately 48% of Kenyan women experience violence in their marriages, with domestic violence being a major consequence of

marital conflicts (Obure, Ireri, & Menecha, 2021). Marital challenges in Kenya are multifaceted, including domestic violence, polygyny, and property rights violations, which are largely rooted in cultural practices, gender inequalities, and socio-economic factors (Kamomoe et al., 2021). The situation has worsened with a sharp rise in gender-based violence, where at least 97 women were killed between August and October 2024, mostly by intimate partners (Media Council of Kenya, 2024). This prompted the Kenyan government to declare gender-based violence the country's most pressing security threat, leading to the establishment of a special police unit to combat femicides and a presidential working group to recommend solutions (Rao, 2025).

In Uasin Gishu County, marital instability manifesting as conflicts, separations, and divorces continues to threaten family cohesion and societal well-being. Contributing factors include poor communication, financial disagreements, and unmet expectations between spouses (Kagicha, 2025). Marital counseling has been proposed as a possible intervention to strengthen marital stability, but its effectiveness in this region remains largely underexplored. Most available studies have been conducted elsewhere, such as Odhiambo, Mumiukha, and Makori's (2021) study on marital counseling in Siaya County, Mutai's (2019) research in Kericho County, and Mudinyu, Mrio, and Njoroge's (2024) work on Catholic couples in Bungoma Diocese. This gap in empirical evidence necessitates further investigation, hence the present study, which aims to determine the influence of marital counseling on marriage stability among Catholic couples in selected parishes in Kapseret Sub County, Kenya.

1.3 Main Objective

To assess how self-esteem counseling influence marriage stability among Catholic couples in selected parishes in Kapseret Sub County, Kenya.

1.4 Research Questions

1. In what ways does self-esteem counseling influence marriage stability among Catholic couples in selected parishes in Kapseret Sub County, Kenya?

1.5 Research Hypotheses

H_01 There is no relationship between self-esteem counseling on marriage stability among Catholic couples in selected parishes in Kapseret Sub County, Kenya.

1.6 Theoretical Framework

The study was anchored on three key theories. The first was Family Systems Theory by Bowen (1913–1990), which conceptualizes the family as an interdependent emotional unit where stress or change in one member affects the whole system (McLean et al., 2021). The theory highlights concepts such as multigenerational transmission, emotional triangles, homeostasis, and nuclear family processes (Cohen, 2024). Its major strength lies in shifting focus from individual pathology to family dynamics, encouraging personal growth and resolution of relational conflicts (Rezaee & Forozandeh, 2016). Family system theory is instrumental in informing this study as it helps to create a space there is identification of maladaptive patterns and foster healthier emotional interactions to enhance marital stability.

The other reviewed theory was Rational Emotive Behavior Therapy (REBT) by Albert Ellis (1913–2007). The theory argues that behavioural of a person are attribute to restructuring irrational beliefs (Harahap et al., 2022). REBT's focuses on addressing emotional and behavioral issues among couples such as anxiety, anger, and interpersonal conflict by targeting thought processes for long-term change (Ghezelieflo et al., 2023; Ellis & Dryden, 2017; Knaus, 2019). In marriage counseling, REBT equips couples with knowledge on how to challenge irrational expectations, regulate emotions, and manage conflict constructively which is likely to promote marital stability.

2.0 LITERATURE REVIEW

Majedi and Majidi (2025) shepherded an enquiry to reconnoiter how self-concept and self-efficacy envisage marital alteration and eminence of life. The enquiry was shepherded among 106 women aged 20–50 seeking cosmetic surgery in Tehran. Using purposive sample and standardized instruments, the study analyzed data with Pearson correlation and stepwise regression in SPSS v26. Results showed significant positive correlations between self-concept, self-efficacy, marital adjustment, and quality of life, with self-concept explaining 23.7% of the variance in marital adjustment and self-efficacy raising the explained variance to 27.6%. The authors concluded that higher self-concept and self-efficacy are linked to better marital adjustment and quality of life, recommending educational and counseling interventions to strengthen these traits. However, the study's generalizability is limited by its focus on women seeking cosmetic surgery, lack of consideration of cultural and partner-related factors, and its cross-sectional design, suggesting a need for longitudinal research.

Asadi (2025) conducted a narrative review investigating the role of self-esteem in marital satisfaction, communication, emotional intimacy, and conflict resolution, drawing from Persian and English academic sources. The review found that higher self-esteem is associated with stronger communication, emotional bonds, reduced conflict, and improved sexual satisfaction, with some cultural similarities and differences noted. However, the study lacked original empirical data, did not establish causal relationships, and offered limited exploration of cultural, gender, socioeconomic, and educational factors, as well as interactions with other psychological constructs like skill-based, communication, and problem-solving counselling highlighting the need for further empirical research. Similarly, Dafei et al. (2021) conducted a semi-experimental study in Farsan City, Iran, involving 30 women in their first month of marriage to examine the effects of group cognitive-behavioral counseling on optimism and self-esteem. Using purposive sampling, participants were divided into experimental and control groups, with the experimental group receiving eight two-hour counseling sessions. Results indicated significant improvements in optimism and self-esteem post-intervention and after one month, suggesting CBT's effectiveness in enhancing communication and conflict resolution skills, leading to better marital interactions. Nonetheless, the study's generalizability is limited due to its small, all-female sample, short follow-up period, and narrow focus that excluded direct measures of marital stability such as satisfaction, conflict resolution, and relationship longevity.

Goyal and Nakra (2023) shepherded a correlational enquiry scrutinizing the affiliation between self-esteem and marital adjustment. The study was conducted among 130 married couples aged 20–60. A sample of 130 married couples were selected conveniently. Data was

analyzed using Pearson Product Moment Correlation. The study established that there is a statistically significant relationship ($r = 0.291$, $p < 0.01$) and self-esteem. The study concluded that self esteem building is associated with marital adjustment and overall marital harmony. The study employed convenience sampling which limited generalizability of the enquiry findings thus the current study employed stratified and simple random sampling techniques. Dastyar, Sarasyabi, Ashakiba, and Navidian (2019) conducted an enquiry in Southeastern Iran. The study sought to examine the effect of group assertiveness-based sexual training on the quality of marital relationships. A sample of 80 married female university students were selected conveniently and divided into intervention ($n = 40$) and control ($n = 40$) groups, with the intervention group receiving four 90–120-minute counseling sessions. Data were collected using the Perceived Relationship Quality Components Inventory, and analysis was performed using independent t-tests and ANCOVA in SPSS v21. Results revealed a significant improvement ($p = 0.0001$) in the mean scores of marital relationship quality dimensions in the intervention group compared to the control group, indicating that assertiveness-based sexual counseling effectively enhances marital relationship quality. The authors recommended integrating assertiveness-focused sexual training into routine counseling programs to improve marital outcomes. However, the study's findings are culturally specific to Iran and may not be directly generalizable to other populations, such as those in Kenya.

Khazaeian, Rahimi-Nezhad, and Fathnezhad-Kazemi (2023) conducted a qualitative study with 130 postmenopausal women, randomly assigning them to intervention and control groups. The study sought to investigate the effects of mindfulness-based education on sexual self-esteem and marital intimacy with an intervention and control groups. The study established that mindfulness interventions promoted sexual self esteem and intimacy through enhancement of emotional and relational well-being of women. The enquiry was conversely conducted in Iran which has different socio-cultural, plummeting generalizability. The study was also delimited to postmenopausal women and focused on sexual self-esteem and intimacy while the present marital stability and focusing on married couples. Sayyadi et al. (2020) conducted a quasi experimental study among 60 married women in Iran. The study sought to evaluate the effectiveness of sexual assertiveness training on women's sexual health. The study established there is a statistically significant improvement in sexual health among participants who received the training ($t_{58} = -4.077$, $p < 0.001$). The geographical and contextual differences between justifies the need for the current study in Uasin Gishu County focusing on self-esteem counselling and marital stability among married Catholic Christians in Kapseret Sub County, Kenya.

Ebeh (2017) found that mental wellbeing and self-esteem significantly predicted marital satisfaction among Catholic women in Nigeria, recommending counseling and seminars to sustain marital satisfaction, though the findings may not generalize to Kenyan contexts. Abomah (2016) in Ghana revealed a positive correlation between self-esteem and marital satisfaction but a negative correlation between sexual and marital satisfaction, highlighting the need for further investigation and noting limitations such as reliance on self-reported data and a cross-sectional design. Uwaoma et al. (2016) reported that self-esteem significantly influenced marital satisfaction among Igbo couples in Nigeria, while gender had no significant effect, but the study did not explore structured counseling interventions or communication skills. Anyamene, Nwokolo, and Muojeke (2021) found a very weak, non-significant relationship between self-esteem and marital adjustment among married teachers in Nigeria, suggesting other psychosocial factors may be more influential and calling for more diverse and longitudinal research.

In Kenya, Waruiru, Ikenye, and Mukadi (2019) demonstrated that family financial management significantly affects marital stability, recommending premarital counseling on financial management, though their study focused narrowly on financial factors rather than marital counseling interventions. Collectively, these studies highlight that self-esteem, mental wellbeing, sexual satisfaction, and financial management all play roles in marital outcomes. But also expose gaps such as limited geographic generalizability, lack of causal evidence, under exploration of counseling interventions, and exclusion of other mediating factors like communication and conflict resolution justifying further context-specific research, such as examining the role of self-esteem counseling in enhancing marital stability among Catholic couples in Kapseret Sub-County, Kenya.

3.0 MATERIALS AND METHODS

The study was carried out in Uasin Gishu County, an area experiencing increasing levels of marital stress. Reports from health facilities, courts, police records, and the Department of Social

Services indicate rising cases of gender-based violence, divorce, separation, and marital conflict, with communication breakdowns and alcohol-related disputes being common. These statistics highlight the urgent need for effective counselling and legal interventions. Against this background, the study examined how marriage counselling influences marital stability among couples in selected Catholic parishes in Kapseret Sub County.

A correlational research design was adopted since the study focused on assessing the relationship between marital counselling and marital stability. This design was appropriate because it enabled the researcher to collect data using questionnaires and statistically analyze the relationship between counselling frequency, marital satisfaction, and stability. The study targeted 131 couples who had sought counselling services from selected Catholic parishes in Kapseret Sub County. Catholic couples were chosen because churches promote self-esteem counselling, making them an appropriate population for investigating the relationship between counselling and stability. The sample size was determined using Yamane's (1967) formula, resulting in a sample of 99 couples. Simple random sampling was employed to select two parishes from among all Catholic parishes in the sub-county, after which couples were randomly selected from the chosen parishes. This ensured that the sample was representative of the population and accessible for data collection.

Data were collected using a structured questionnaire consisting. Questionnaires were preferred because they are suitable for large samples and collect data on opinions and perceptions efficiently. Validity of the instrument was ensured through literature review, expert consultation, and pretesting with fellow students to assess content and face validity. Construct validity was further assessed using Pearson correlation analysis. Reliability was determined using the test-retest method in a pilot study conducted in neighboring Soy Sub County. The pilot study involved administering the questionnaire twice at an interval of two weeks and correlating the results using Pearson's correlation coefficient, with a coefficient of 0.7 and above considered reliable.

Prior to data collection, the researcher obtained an introduction letter from The Catholic University of Eastern Africa and a research permit from the National Commission for Science, Technology, and Innovation (NACOSTI). Permission was also sought from the County Director of Education, County Commissioner, and parish authorities. Once permission was granted, appointments were scheduled with the couples to administer the questionnaires at a convenient time. Participation was voluntary, and informed consent was obtained from each respondent. After data collection, responses were edited, coded, and entered into SPSS version 21 for analysis. Descriptive statistics such as frequencies, percentages, means, and standard deviations were used to summarize the data. Inferential statistics, particularly Analysis of Variance (ANOVA), was used to test the hypothesis. The study adhered to strict ethical considerations. Participants were informed about the purpose of the study and their right to withdraw at any time. Confidentiality and anonymity were ensured by using identification codes rather than names. Data were securely stored and accessed only by the researcher and data analyst. The researcher also acknowledged all sources used to avoid plagiarism and maintained respectful and professional engagement with participants and stakeholders.

4.0 RESULTS AND DISCUSSION

4.1 Descriptive statistics on the Effect of Self-Esteem Counselling and Marital Stability among married Couples

The study sought to investigate the effect of self-esteem counselling on marital stability among catholic married couples. Thirteen items were developed to test self-esteem counselling and were rated on a five Likert scale in which SD- means Strongly disapprove, D- Disapprove, N-neutral, A-Approve and SA- Strongly Approve. The findings were analyzed and presented in table 1.

Table 1: Frequencies, Percentages and Descriptive Statistics on Self-Esteem Counselling

| Statement | SD | D | N | A | SA | Mean | Std. Dev. |
|---|------------|----------|------------|------------|------------|------|-----------|
| I feel confident expressing my thoughts and emotions to my spouse. | 0 (0.0%) | 0 (0.0%) | 4 (4.3%) | 23 (24.5%) | 67 (71.3%) | 4.67 | 0.56 |
| I have a positive self-image and believe in my self-worth. | 0 (0.0%) | 0 (0.0%) | 14 (14.9%) | 32 (34.0%) | 48 (51.1%) | 4.36 | 0.73 |
| I do not feel inferior or inadequate in my marriage. | 0 (0.0%) | 0 (0.0%) | 0 (0.0%) | 45 (47.9%) | 49 (52.1%) | 4.52 | 0.50 |
| I recognize my strengths and abilities in my relationship. | 0 (0.0%) | 0 (0.0%) | 0 (0.0%) | 16 (17.0%) | 78 (83.0%) | 4.83 | 0.38 |
| I feel emotionally secure and accepted in my marriage. | 0 (0.0%) | 0 (0.0%) | 0 (0.0%) | 17 (18.1%) | 77 (81.9%) | 4.82 | 0.39 |
| I can set personal boundaries without feeling guilty or afraid. | 0 (0.0%) | 0 (0.0%) | 0 (0.0%) | 37 (39.4%) | 57 (60.6%) | 4.61 | 0.49 |
| I can handle criticism from my spouse without feeling deeply hurt or losing self-worth. | 0 (0.0%) | 0 (0.0%) | 8 (8.5%) | 28 (29.8%) | 58 (61.7%) | 4.53 | 0.65 |
| I feel comfortable making decisions in my marriage without excessive self-doubt. | 14 (14.9%) | 0 (0.0%) | 10 (10.6%) | 44 (46.8%) | 26 (27.7%) | 3.72 | 1.29 |
| Since undergoing counseling, I feel more valued and accepted by my spouse. | 0 (0.0%) | 0 (0.0%) | 18 (19.1%) | 22 (23.4%) | 54 (57.4%) | 4.38 | 0.79 |
| I no longer seek constant | 0 | 4 | 0 | 41 | 49 | 4.44 | 0.71 |

| | | | | | | | |
|---|----------|----------|------------|------------|------------|------|------|
| validation from my spouse to feel good about myself. | (0.0%) | (4.3%) | (0.0%) | (43.6%) | (52.1%) | | |
| I feel empowered to express my needs and desires in the marriage. | 0 (0.0%) | 0 (0.0%) | 19 (20.2%) | 22 (23.4%) | 53 (56.4%) | 4.36 | 0.80 |
| Overall, self-esteem counseling has positively impacted my relationship and well-being. | 0 (0.0%) | 5 (5.3%) | 4 (4.3%) | 31 (33.0%) | 54 (57.4%) | 4.43 | 0.81 |

Source: Data, 2025

The study revealed a statistically significant effect of self-esteem counselling on marital stability among readmitted married couples in Catholic marriages, as confirmed by ANOVA results ($F = 13.794, p < 0.001$). The high between-group variance underscored the influence of marriage counselling on marital outcomes. Participants who received self-esteem counselling reported notable psychosocial improvements in enhanced emotional expression ($M = 4.67$), positive self-image ($M = 4.36$), and reduced feelings of inferiority ($M = 4.52$). They also recognized personal strengths ($M = 4.83$), experienced emotional security ($M = 4.82$), and demonstrated improved assertiveness through boundary setting ($M = 4.61$) and need expression ($M = 4.36$). Although decision-making confidence was moderate ($M = 3.72$), respondents felt more valued ($M = 4.38$) and showed decreased dependence on spousal validation ($M = 4.44$). The overall impact score was high ($M = 4.43$), confirming the counselling's effectiveness in enhancing both personal development and marital stability. These outcomes mirror the intervention's success in fostering emotional resilience, strengthening identity, and promoting relational harmony in line with Catholic marital values. In summary, self-esteem counseling contributed meaningfully to the restoration of emotional and relational health among married Catholic couples. The findings reflect growth in areas consistent with Catholic marital doctrine: communication, mutual respect, self-worth, emotional security, and decision-making. While some aspects like decision autonomy require continued attention, the counseling effectively aligned psychosocial healing with spiritual values, offering a model for holistic ministry to young married women in the Church. These findings highlight that self-esteem counseling interventions effectively promoted emotional expression, enhanced self-worth, improved relationship dynamics, and fostered personal growth among married catholic couples. While the overall outcomes were overwhelmingly positive, targeted reinforcement may be necessary in areas such as decision-making and emotional independence for a few participants who still exhibit lingering insecurities.

Ebeh (2017) found that mental wellbeing and self-esteem significantly predicted marital satisfaction among Catholic women in Nigeria, recommending counseling and seminars to sustain marital satisfaction, though the findings may not generalize to Kenyan contexts. Abomah (2016) in Ghana revealed a positive correlation between self-esteem and marital satisfaction but a negative correlation between sexual and marital satisfaction, highlighting the need for further investigation and noting limitations such as reliance on self-reported data and a cross-sectional design. Uwaoma et al. (2016) reported that self-esteem significantly influenced marital satisfaction among Igbo couples in Nigeria, while gender had no significant effect, but the study

did not explore structured counseling interventions or communication skills. Anyamene, Nwokolo, and Muojeke (2021) found a very weak, non-significant relationship between self-esteem and marital adjustment among married teachers in Nigeria, suggesting other psychosocial factors may be more influential and calling for more diverse and longitudinal research.

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4.2 Marital Stability among Catholic Married Couples

The study was to investigate marital stability among married couples in Kapseret Sub County, Kenya. A set of seventeen items were formulated and were anchored on a five point rating scale ranging from 5 – strongly agree, 4-agree, 3 neutral, 2-disagree and 1strongly disagree. Descriptive measures included frequencies, percentages, means and standard deviation were analyzed and presented in table 2.

Table 14: Marital Stability of Married couples

| Statement | 1 | 2 | 3 | 4 | 5 | Mean | (SD) |
|--|-------------|-------------|-------------|---------------|---------------|------|------|
| After undergoing counseling I feel satisfied with my marriage | 0 0.0 | 0 0.0 | 5 (5.3%) | 27 (28.7%) | 62 (66.0%) | 4.60 | 0.59 |
| My spouse and I share common goals and values in life | 0 0.0 | 5 (5.3%) | 4 (4.3%) | 26 (27.7%) | 59 (62.8%) | 4.48 | 0.82 |
| I feel emotionally connected to my spouse | 0 0.0 | 9 (9.6%) | 0 0.0 | 27 (28.7%) | 58 (61.7%) | 4.52 | 0.77 |
| I am happy with the level of love and affection in my marriage | 0 0.0 | 5 (5.3%) | 5 (5.3%) | 21 (22.3%) | 63 (67.0%) | 4.51 | 0.81 |
| We listen to each other without interrupting or dismissing opinions | 0 0.0 | 0 0.0 | 0 0.0 | 32 (34.0%) | 62 (66.0%) | 4.66 | 0.48 |
| My spouse and I communicate openly and honestly | 0 0.0 | 0 0.0 | 5 (5.3%) | 30 (31.9%) | 59 (62.8%) | 4.57 | 0.64 |
| I feel comfortable expressing my needs and concerns to my spouse | 0 0.0 | 0 0.0 | 9 (9.6%) | 41 (43.6%) | 44 (46.8%) | 4.37 | 0.73 |
| My spouse and I resolve disagreements calmly and respectfully | 5 (5.3%) | 5 (5.3%) | 0 0.0 | 14 (14.9%) | 70 (74.5%) | 4.58 | 0.88 |
| We are able to compromise without resentment | 0 0.0 | 0 0.0 | 5 (5.3%) | 27 (28.7%) | 62 (66.0%) | 4.60 | 0.59 |
| Conflicts in our marriage do not lead to prolonged tension or withdrawal | 0 0.0 | 5 (5.3%) | 4 (4.3%) | 26 (27.7%) | 59 (62.8%) | 4.48 | 0.82 |
| My spouse and I spend quality time together regularly | 0 0.0 | 9 (9.6%) | 0 0.0 | 27 (28.7%) | 58 (61.7%) | 4.52 | 0.77 |
| I feel emotionally supported by my spouse | 0 0.0 | 5 (5.3%) | 5 (5.3%) | 21 (22.3%) | 63 (67.0%) | 4.51 | 0.81 |
| Physical affection is a regular part of our marriage | 0 0.0 | 0 0.0 | 0 0.0 | 32 (34.0%) | 62 (66.0%) | 4.66 | 0.48 |

| | | | | | | | |
|---|-------------|-------------|-------------|---------------|---------------|------|------|
| I trust my spouse completely | 0 0.0 | 0 0.0 | 5 (5.3%) | 30 (31.9%) | 59 (62.8%) | 4.57 | 0.64 |
| Divorce or separation has not been seriously considered | 0 0.0 | 0 0.0 | 9 (9.6%) | 41 (43.6%) | 44 (46.8%) | 4.37 | 0.73 |
| We support each other in personal and professional growth | 5 (5.3%) | 5 (5.3%) | 0 0.0 | 14 (14.9%) | 70 (74.5%) | 4.58 | 0.88 |
| I believe our marriage will remain strong in the future | 0 0.0 | 0 0.0 | 5 (5.3%) | 27 (28.7%) | 62 (66.0%) | 4.60 | 0.59 |

Source: Survey Data, 2025

The study findings revealed that Catholic couples who underwent marriage counseling reported significant improvements across multiple dimensions of their marital relationship, with consistently high mean scores. Marital satisfaction was strongly endorsed ($M = 4.49$), indicating fulfillment of emotional, spiritual, and companionship needs. Conflict resolution improved notably, with couples agreeing they resolved disagreements calmly and respectfully ($M = 4.58$) and avoided prolonged tension ($M = 4.48$). Communication was enhanced, as reflected by open and honest dialogue ($M = 4.57$) and active listening without interruption ($M = 4.66$). Emotional intimacy was strengthened, with respondents feeling emotionally connected ($M = 4.52$) and sharing quality time ($M = 4.50$). Couples also reported the ability to compromise without resentment ($M = 4.60$), strong physical affection ($M = 4.66$), and complete trust in their spouses ($M = 4.57$). Mutual support in personal and professional growth scored highly ($M = 4.58$), alongside alignment in goals and values ($M = 4.48$). Expression of needs and concerns was generally positive ($M = 4.37$), while sexual intimacy was rated as fulfilling ($M = 4.43$), reflecting nurturing of physical closeness. Gratitude and appreciation were regularly expressed ($M = 4.53$), promoting positivity and emotional resilience. Overall, these findings suggest that marriage counseling significantly enhanced communication, trust, intimacy, and conflict resolution, aligning with Catholic teachings on unity, fidelity, and forgiveness. Although most indicators reflected high satisfaction, areas such as personal expression and decision-making still require ongoing pastoral and psychological support to ensure sustained marital harmony.

4.3 Inferential Statistics on the Effect of Self-Esteem Counselling on marital stability

The first hypothesis stated that “*There is no statistical significant relationship between self-esteem counselling and marital stability among married Catholic couples in Kapseret Sub County, Kenya.*” An Analysis of Variance (ANOVA) was conducted to ascertain whether self-esteem counselling significantly predict marital stability. The results of this analysis were presented in Table 3. ANOVA test was used to test the significance of this relationship at 0.05, significance level.

Table 3: ANOVA on Self-Esteem Counselling and Marital Stability

| Source of Variation | Sum of Squares | df | Mean Square | F | Sig. |
|---------------------|-----------------|-----------|-------------|--------|------|
| Between Groups | 3515.852 | 11 | 319.623 | 13.794 | .000 |
| Within Groups | 1900.074 | 82 | 23.172 | | |
| Total | 5415.926 | 93 | | | |

Source; Survey Data, 2025

The findings presented in Table 3 indicate a statistically significant relationship between self-esteem counseling and marital stability. The p-value was less than the conventional 0.05 significance threshold ($F = 13.794$, $p < .001$), leading to rejection of the null hypothesis and confirming that marital stability varied significantly across groups exposed to different levels or forms of self-esteem counseling. The Sum of Squares between groups (3515.852) and its distribution across 11 degrees of freedom yielded a Mean Square of 319.623, suggesting that the observed variation in marital stability was attributable to counseling interventions rather than random chance. The within-group Sum of Squares was 1900.074 with 82 degrees of freedom, producing a Mean Square of 23.172. The large F-ratio of 13.794 confirms that between-group differences were much greater than within-group differences, indicating that the intervention exerted a strong influence on marital stability. These results underscore that self-esteem counseling is an effective tool for enhancing marital quality among Catholic couples, aligning with psychological theories that posit self-worth, personal confidence, and emotional regulation as key determinants of healthy interpersonal relationships.

The findings are consistent with Majedi and Majidi (2025), who established that self-concept and self-efficacy—core dimensions of self-esteem—significantly influenced marital adjustment and life satisfaction. Similarly, Asadi's (2025) narrative review emphasized that higher self-esteem strengthens emotional bonds, improves communication, and sustains marital satisfaction, corroborating the counseling framework adopted in the current study. Dafei et al. (2021) demonstrated in a semi-experimental design that cognitive-behavioral counseling significantly enhanced self-esteem and optimism among newlyweds, reinforcing the importance of psychological interventions in fostering marital harmony. Goyal and Nakra (2023) further validated that individuals with high self-esteem reported better marital adjustment, confirming the psychological underpinnings of stable unions. Khazaean et al. (2023) added that mindfulness-based interventions enhanced sexual self-esteem and intimacy in postmenopausal women, demonstrating that self-esteem continues to play a vital role in marital cohesion across the life span.

Moreover, Sayyadi et al. (2020) revealed that sexual assertiveness training improved women's sexual health, a domain closely tied to self-esteem and emotional confidence, both crucial for marital satisfaction. Ebeh (2017) similarly showed that self-esteem and mental well-being predicted marital satisfaction among Catholic women, lending cultural validity to the present study's findings. Additional support comes from Abomah (2016) and Uwaoma et al. (2016), who reported a significant positive relationship between self-esteem and marital satisfaction, suggesting that interventions targeting self-esteem benefit both partners in a marriage. However, the findings contradict those of Anyamene et al. (2021), who found a weak and statistically insignificant association between self-esteem and marital adjustment among teachers, implying that occupational stress or contextual dynamics may moderate the relationship. Overall, the current study contributes evidence that self-esteem counseling is a powerful predictor of marital stability, reinforcing its relevance in faith-based and culturally sensitive marital interventions.

5.0 Conclusion of the Study

The study concludes that self-esteem counseling is highly effective in enhancing emotional well-being, communication, and interpersonal dynamics among married couples, aligning with psychosocial theory and Catholic teachings on mutual respect and dignity in marriage. Improved communication and assertiveness were key outcomes, empowering couples to fulfill marital roles with confidence, develop autonomy, reduce emotional dependency, and set healthy boundaries. Counseling reinforced the Catholic view of marriage as a sacramental partnership grounded in compassion and self-giving love.

6.0 Recommendations

These findings support integrating self-esteem enhancement strategies into marriage counseling programs, particularly in faith-based contexts, to promote emotional resilience, satisfaction, and harmony in marital relationships.

The study also recommended that marriage counselling programs should incorporate structured self-esteem enhancement sessions, particularly for couples undergoing relationship distress. Tailored interventions that address individual self-worth and promote emotional regulation may mirror positive relational outcomes and enhance marital harmony.

To the Catholic Church, the study recommended that the counselors and clergy involved in marital support should receive regular professional development on delivering structured, outcome-focused interventions that align with both psychological principles and theological values.

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