ORIGINAL ARTICLE

Journal of Emergency Health Care. 2026;15(1): 7
https://doi.org/10.22034/jehc.15.1.7

Structural Explanation of the Effect of Family Health and Stability on Satisfaction with Life of Young Couples with Emphasis on the Role of Social Trust

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Article history:

Received: 23 Mar 2026
Accepted: 18 May 2026
Available online: 28 Jun 2026

Keywords:

Family health
Family stability
Satisfaction with life
Social trust
Young couples in Andimeshk city

Abstract

Purpose: The present study aims to investigate the causal relationship between family health and family stability with satisfaction with life through social trust in young couples in Andimeshk city.
Method: This is an applied research and was conducted using a descriptive-correlational method. The statistical population of this study included young couples in Andimeshk city in 1402, and Cochran's unlimited population formula was used to determine its size. Accordingly, the sample size of the present study was 384 people. Data collection was done using the Diner Satisfaction with life Questionnaire (SWLS), the Saffarinia and Sharif Social Trust Measurement Standard Questionnaire, the Marital Instability Inventory (MII), and the Family Health Questionnaire. After collecting, coding, and extracting the data, it was transferred to Excel and SMART PLS 4.0.0 and analyzed by calculating frequencies, descriptive statistics, and structural equations, and thus the research hypotheses were tested.
Findings: The results of structural modeling have shown that there is a direct effect between family health, family stability, and social trust with satisfaction with life. Also, the relationship between family health and family stability with satisfaction with life is positively mediated by social trust.
Conclusion: People who are highly satisfied with their spouses have a better quality of life. Social trust is also an important aspect of human relationships and a basis for cooperation between members of society.

Cite this article as: AzimNavahsi A, Mirzavandi J. Structural Explanation of the Effect of Family Health and Stability on Satisfaction with Life of Young Couples with Emphasis on the Role of Social Trust. J Emerg Health Care. 2026;15(1):7. https://doi.org/10.22034/jehc.15.1.7.

Introduction

A family can be broadly defined as a group of people with a past history, present reality, and future expectations of mutually influential relationships (1). Many theorists and researchers who have studied the family have observed that the values, social norms, and behaviors that influence family structure have changed over the past decades. It seems that families in the 21st century are facing new challenges that threaten the quality of family functioning and family structure (2, 3). In this regard, one of the factors that underpins psychological well-being and family foundation is satisfaction with life. For this reason, identifying satisfaction with life and the factors related to and influencing it is of great importance. Satisfaction with life is one of the things that most individuals and families

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would like to be satisfied with in their lives. For this reason, identifying satisfaction with life and the factors related to and influencing it is of great importance. Satisfaction with life is one of the things that most individuals and families would like to be satisfied with in their lives.

Satisfaction with life can be influenced by a variety of factors, including cognition, physiology, interaction patterns, spouse characteristics, marital characteristics, life events, and spiritual commitment. Satisfaction with life can have significant consequences for the well-being and health of married individuals, as well as their children and families. Satisfaction with life can also change over time, depending on the stage and duration of marriage (4). A society cannot claim to be healthy if it does not have healthy and balanced families. Families in which husband and wife understand each other and feel satisfied with life function better and fulfill their roles better (5). Satisfaction with life is one of the factors for progress and achieving life goals. The relationship between husband and wife, as the core of the family, affects many aspects of human life. The quality of married life can affect a person's satisfaction or dissatisfaction with life, job satisfaction or dissatisfaction, how to raise children, and the level of success in various aspects of life. Husband and wife expect their lives to be filled with happiness, prosperity, and satisfaction, and to enjoy every moment of their lives. Therefore, success in marriage or satisfaction between the couple is more important than marriage itself (6).

Satisfaction with family life is the most important pillar of mental health of family members. Therefore, satisfaction with life is one of the most important factors affecting family functioning. All couples seek to enjoy their married life and feel satisfied. Satisfaction with life is the objective feelings of contentment, satisfaction, and enjoyment experienced by a couple when considering all aspects of their marriage; in other words, marital satisfaction is a state in which a couple feels happy and satisfied with their marriage and being together. Satisfaction with life is an indicator of the strength and effectiveness of the family system (7). A healthy family and society are formed from conscious bonds and healthy and developing communication between couples. If the foundation of the family is not strong enough, it will have negative consequences not only for the family but also for the entire society. Satisfaction with life is a quality that is affected by several factors, including: Psychological-personality, socio-economic and cultural factors. Among these factors, the most important ones include a sense of mutual trust and empathy (1).

Social trust is a person's willingness to take risks in a social situation, based on a sense of confidence that others will act as expected and adopt a supportive manner. "Trust is an expectation that manifests itself in an orderly, honest, and cooperative society" (8). Researchers argue that the majority of people prefer to live in a society that has a high level of trust (9) because its institutions can reduce uncertainties, prevent violence, encourage citizens' participation in political processes, and strengthen their rights, which can affect their satisfaction with life (10).

Therefore, the family is not only the cradle of human beings' birth and upbringing, but also a place for their residence, security, and peace, which is achieved in the shadow of love, affection, and mercy, as stated in our heavenly book, "And among God's signs is this: He created for you from yourselves mates that you may find repose and tranquility in them, and He put between you love and affection." From this perspective, the whole world is seen as a family, or, in the wise words of the prominent Iranian poet, Saadi, as a body. This body is undergoing change today, and such global occasions make the collective conscience of human societies aware of the changes and developments in its life context, and it exerts all its efforts in an attempt to control and put brakes on this transformation (11).

There is a large and growing body of literature that examines the important role of differences in patterns of marital and family relationships. In general, family roles and family decision-making structures are influenced by a variety of factors, including social trust (12). Therefore, according to various studies such as Zhang (2020), Glenville & Storey (2018), identifying the causal relationships between intra-family communication, cognitive flexibility, family health, and family stability with satisfaction with life through social trust can be one of the factors related to satisfaction with life (12, 13). Therefore, this study was designed to investigate the structural influence of family health and family stability on satisfaction with life through social trust in young couples in Andimeshk city.

Shahroui et al. (2023) conducted a study to investigate the relationship between marital intimacy and satisfaction with life through the mediation of love, marital adjustment, and satisfaction with life in employees. The results indicated a positive and significant effect of marital intimacy on love, marital adjustment, satisfaction with life, and satisfaction with life; also, there was a positive and significant effect of love on satisfaction with life, marital adjustment on satisfaction with life, and satisfaction with life on satisfaction with life. In addition, the results of indirect paths also showed that marital intimacy has a positive effect on satisfaction with life through love, marital adjustment, and satisfaction with life ($p<0.001$) (14).

Kabiri and Khakpour (2020) studied the family's functional space and marital satisfaction in a study. The

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results show that the structure of the family's functional space has a significant effect on women's marital satisfaction, and that changing the family's functional space from happiness and conformity to harmony and empathy increases marital satisfaction (15).

Mesi (2021) studied trust and satisfaction with life among 1063 people in Albania. The main objective of his study was to assess the extent to which different types of trust (social trust and institutional trust) are associated with individual satisfaction with life in Albania after controlling for gender, age, and education level. His results showed that trust had a significant effect on satisfaction with life (3).

Bedzik and Golab (2020) examined satisfaction with life and social trust as components of social capital among students in a study. The results confirmed a positive relationship between satisfaction with life and trust, although its strength was determined by the trust dimension, which was positively correlated with the belief that municipal authorities support social initiatives and the possibilities of influencing the performance of the municipality (8).

Method

The method of the present research is applied based on the purpose and in terms of data collection, this is a descriptive-correlational study. The statistical population of this research included young couples in Andimeshk city in 2023 and Cochran's unlimited population formula was used to determine its size. Accordingly, the sample size of the present study was 384 people. In this study, the inclusion criteria were: having a marriage history of at least one year and a maximum of 5 years, not taking antidepressants, and not having a divorce history. The exclusion criteria also included psychological problems, chronic physical and mental illnesses as stated by the mother at the time of the study. In the present study, statistics and information were collected in two ways. The first part was information related to the subject literature and research background, which was used through the library method and using domestic and foreign articles, books, and theses. The second stage included the data necessary to achieve the research objectives, which was collected using a questionnaire. In this regard, the questionnaires used are as follows:

Diener Satisfaction With Life Scale (SWLS): This scale was developed by Diener, Emmons, Larsen and Griffin in 1985. It consists of five items that measure the cognitive component of subjective well-being. Subjects state, for example, how satisfied they are with their life or how close their life is to their ideal life. This scale consisted of 48 questions that reflected the level of satisfaction with life and well-being, and factor analysis showed that it consisted of three factors. 10 of its questions were related to satisfaction with life, which after numerous reviews was finally reduced to 5 questions and used as a separate scale. This questionnaire now has 5 items, each item being rated on a Likert scale from 1 to 7. Given the ease of administration of this questionnaire and its appropriate psychometric properties, its use is very high, especially in research related to satisfaction with life. In the study of Diener et al. (1988), the Cronbach's alpha coefficient of this questionnaire was obtained to be about 0.87. Bayani et al. (2007) found the reliability of the Satisfaction with Life Scale (SWLS) to be 0.83 using Cronbach's alpha method and 0.69 using the test-retest method. In the present study, the Cronbach's alpha coefficient for this questionnaire was 0.76.

Saffarinia and Sharif's Standard Social Trust Questionnaire: This questionnaire is taken from an approved master's thesis. The questionnaire has 25 questions with the following subscales: Components: Questions: Trust-based behavior 1 to 5: Cooperative tendencies 6 to 10: Openness 11 to 15: Honesty 16 to 20: Confidence 21 to 25: Likert-type scale (strongly agree, agree, no opinion, disagree, strongly disagree) Social Trust Questionnaire: The Social Trust Questionnaire was prepared and compiled by Saffarinia and Sharif in collaboration with relevant experts in 2010. This questionnaire consists of 25 questions, with 5 questions for each component. This questionnaire has been validated by Akhlaqi (2015) and its Cronbach's alpha coefficient was 0.79. Mohammadzadeh et al. (2019) found the Cronbach's alpha coefficient for this study to be 0.85 in their study. Tajik Esmaili (2023) found the Cronbach's alpha coefficient for this study to be 0.76 in his study. In the present study, the Cronbach's alpha coefficient for this questionnaire was 0.79.

Marital Instability Inventory (MII): This index is a 14-item instrument developed to measure marital instability. The test was first administered in 1989 to 2,034 married men and women under the age of 55, and again to 1,578 married men and women in 1983. The first 14 questions are scored on a four-point Likert scale including very, often, sometimes, and never. A score between 14 and 28 indicates that the individual has low marital instability. A score between 28 and 42 indicates that the individual has moderate marital instability. A score between 42 and 56 indicates that the level of marital instability in the individual is high. The reliability of this scale has also been reported as 93% using Cronbach's alpha. Yaripour (1990) used the split-half correlation method to assess the validity of the test and reported a reliability coefficient of 70%. In the present study, the Cronbach's alpha coefficient for this questionnaire was 0.75.

Family Health Questionnaire: Alan J. Homestead, William T. Anderson, Fred P. Piercy, Samuel W. Cochran,

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and Marshall Fine believe that every family is unique and has its own way of doing things; therefore, there is no right or wrong answer or choice on this scale. It is important that you answer as honestly as possible. This questionnaire is a 40-question instrument developed by Homestead, Anderson, Piercy, Cochran, and Fine in 1985 to measure a person's perception and inference of the "health" of their family of origin. The “Original Family Scale” focuses on independence and intimacy as two key concepts in healthy family life, and each of these has 5 subscales. The components of the questionnaire are: 1. Clarity of statements; 2. Responsibility; 3. Respect for others; 4. Openness to others; 5. Acceptance of separation and failure; 6. Encouraging people to express a range of feelings; 7. Creating a warm environment in the family, referred to as the mood; 8. Resolving conflicts without additional stress; 9. Encouraging compassion or sympathy; 10. Building trust in humans on the basis that humans are basically good. The scoring of this questionnaire is such that the healthiest answer to each question (the aforementioned positive questions) receives a score of 5 and the unhealthiest answers (the aforementioned negative questions) receive a score of 1. The total score of the questions is at least 40 and at most 200. The reliability of the scale was calculated as 0.89 in the preliminary stage and 0.92 in the final stage, and the test-retest coefficient after two weeks was 0.89. Content validity was based on the evaluation of 30 experts. The reliability of this questionnaire will be calculated and reported in the present study. In the present study, the Cronbach's alpha coefficient for this questionnaire was 0.80.

After collecting, coding, and extracting the data, they will be transferred to Excel and SMART PLS 4.0.0 and analyzed through frequency calculation, descriptive statistics, and structural equations, thereby testing the research hypotheses.

Findings

Table 1 shows the mean and standard deviation of each of the research items. The purpose of presenting these statistics was simply to provide information about the mean and type of responses to the questions.

Table 1. Descriptive statistics of research variables

Variable	Question	Mean	Standard deviation
satisfaction with life	1	2.71	1.12
Family health	4	1.75	0.084
Family stability	5	2.43	1.09
Social trust	6	2.41	1.29

Before conducting inferential data analysis, it is necessary to determine the normality status of the research variables. In this regard, if the variables of a study follow a normal distribution, parametric statistics should be used for inferential analysis of the data; however, if the research variables do not have a normal distribution, nonparametric statistics should be used; therefore, the normality test of research variables has the following two assumptions:

H0: The variable has a normal distribution.

H1: The variable does not have a normal distribution.

If the results of this test indicate acceptance of the null hypothesis, then the research variables have a normal distribution. In this regard, Table 2 shows the findings related to the significance status of the research variables. As can be seen, the significance levels of all variables are greater than 0.05; therefore, the null hypothesis is accepted and the variables used in the present study have a normal distribution.

Table 2: Significance level of the Kolmogorov-Smirnov test

Variable	Statistics	Significance	Result
satisfaction with life	0.35	1.06	Normal
Intrafamily communication	0.30	1.33	Normal
Cognitive flexibility	0.30	1.25	Normal
Family health	0.37	1.46	Normal
Family stability	0.25	1.52	Normal
Social trust	0.29	1.23	Normal

The following is a test of the research hypotheses: There is a direct effect between family health, family stability, and social trust with satisfaction with life. Also, the relationship between family health and family stability with satisfaction with life is positively mediated by social trust.

Accordingly, Table (3) shows the T-Value and significance level of the research variables.

The R-squared value for the research variables indicates that about 60.6% of the behavior of the family health variable is due to the behavior of the model, and the remaining values are related to variables outside the model. About 51.4 percent of the behavior of the satisfaction with life variable is due to the behavior of the model, and the remaining values are related to variables outside the model. About 66.9 percent of the behavior of the family stability variable is due to the behavior of the model, and the remaining values are related to variables outside the model. About 69.7 percent of the behavior of the social trust variable is due to the behavior of the model, and the remaining values are related to variables outside the model.

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Table 3. T-Value and significance level of research hypotheses

Relationship between variables	Direct effect	Indirect effect	T-Value
Family health has a direct effect on satisfaction with life.	0.58	-	4.12
Family stability has a direct effect on satisfaction with life.	0.62	-	3.57
Social trust has a direct effect on satisfaction with life.	0.51	-	2.72
Family health has an indirect effect on satisfaction with life through social trust.	-	0.57	2.96
Family stability has an indirect effect on satisfaction with life through social trust.	-	0.65	3.16

Table 4. R-squared value

Variable	R-squared
Family health	0.606
satisfaction with life	0.514
Family stability	0.669
Social trust	0.697

Discussion

This study investigated the causal relationship between family health and family stability with satisfaction with life through social trust in young couples in Andimeshk city. The research findings are presented as follows:

The results of structural modeling have shown that there is a direct effect between family health, family stability, and social trust with satisfaction with life. Also, the relationship between family health and family stability with satisfaction with life is positively mediated by social trust. Accordingly:

- Family health has a direct effect on satisfaction with life.
- Family stability has a direct effect on satisfaction with life.
- Social trust has a direct effect on satisfaction with life.
- Family health has an indirect effect on satisfaction with life through social trust.
- Family stability has an indirect effect on satisfaction with life through social trust.

In this process, trust gradually moves beyond direct, face-to-face relationships and becomes oriented toward more abstract and inclusive social categories. Instead of being limited to trust in specific individuals known through kinship or proximity, trust is extended to wider social structures, institutions, and shared norms. As a result, the basis of trust shifts from personal familiarity to collective expectations and commonly accepted rules that regulate social behavior at a broader level [14,15,16].

Consequently, the boundaries of trust expand beyond the traditional frameworks of family, neighborhood, and clan. Individuals begin to interact with others whom they may not personally know, yet with whom they share membership in broader social groups such as organizations, professional communities, or civic institutions. This expansion of trust enables cooperation and coordination in more complex social settings, where reliance on personal relationships alone is no longer sufficient [17,18].

At this stage, the sphere of interaction and communication is elevated from intragroup relations to intergroup relations. Social trust facilitates constructive engagement between different groups, reduces uncertainty in social exchanges, and promotes social cohesion. By enabling interactions across group boundaries, social trust plays a crucial role in strengthening social integration and supporting the functioning of modern, pluralistic societies [19,20].

Conclusion

Relationship satisfaction between husband and wife is a determining factor in the satisfaction and quality of married life. Relationship harmony has been introduced as one of the basic criteria in choosing a spouse. If the behaviors and criteria for relationship satisfaction are very different between men and women, it can cause many problems, but if the couple's relationship satisfaction satisfies the needs of both parties, a feeling of happiness arises in family life relationships. In this case, the couple's love for each other becomes real and lasting. Inadequate relationship quality and relationship dissatisfaction are effective in creating marital conflicts and family disintegration, and people who are highly satisfied with their relationships with their spouses have a better quality of life than those who are dissatisfied with their relationships. In fact, dissatisfaction with relationships with one's spouse can lead to deep problems in couples' relationships and hatred of one's spouse, and satisfaction with relationships with one's spouse leads to satisfaction with couples' relationships and happiness (21).

In addition, regarding the role and impact of social trust, it can be said that social trust is very important for people's mental health, so that optimistic people use more active coping methods when dealing with problems, including coping focused on solving problems, gaining social support, and stability. Therefore, they enjoy greater success, physical health,

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and higher satisfaction with life. And overall, they have better mental health and a better quality of life (3). A decrease in social trust in the studied society will have undesirable consequences and will lead to increased disorder, job dissatisfaction, identity crisis, underemployment, and increased social disorder, etc. Therefore, social trust is an important aspect of human relations and a basis for cooperation between members of society. Trust increases individuals' willingness to interact and cooperate with groups and forms a network of voluntary relationships between groups in different dimensions of social life. Therefore, trust is something that can play an effective role in the development and progress of a country. According to Barber, the prerequisite for social development is social cooperation and participation, which is provided by creating social trust.

The results of this study are limited to a specific geographical area (Andimeshk city) and their validity is related to this period under study; which may not be generalizable to other places. It is suggested that similar research be conducted in other regions to increase external validity. It is also suggested that this study be conducted in other samples with different age groups and their results be compared.

Acknowledgment

None

Funding

None

Authors Contributions

The author contributed to the data analysis. Drafting, revising and approving the article, responsible for all aspects of this work.

Ethical Consideration

The research data and literature have not been copied from any worksauthor upon reasonable request.

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