

A Study on Marital Adjustment among Depressive Patients

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ABSTRACT

Marriage is a legalized sexual union between a man and a woman. In India the marriage is considered a sacrament but recently with the social changes. The "adjustment" is an adequacy of personal and interpersonal Processes that we use to adapt to our environment. There is no way to define a good or a poor adjustment without the use of certain basis that we and others have for what represents appropriate behaviours.. Sometimes Marital quality is often used in a sense that includes marital adjustment as well as happiness and satisfaction. The depression refers to a broad range of affective disorders. It may be mild or severe, episodic or chronic. Living with depression in marital relationship is traumatic sometimes. The Respondents were explained about the objectives of the study and the probable time taken for the interview. Purposive sampling method was used and 35 couples fulfilled the criteria, 5 couples refused to take part due to time constraints. 30 couples consented to participate in the study Marital Adjustment Questionnaire and Beck Depression Inventory scale were applied. The study could not reveal any statistically significant correlation between marital adjustment and depression due to its mild severity.

KEY WORDS:, Marital Adjustment and Depression

Date of Submission: 08-06-2021

Date of Acceptance: 21-06-2021

I. INTRODUCTION

Marriage provide a person an opportunity for a secure and protected satisfaction of his needs and for his companionship, affection and sexual expression. The success in marriage depends partly on finding a suitable match, but it is not the only condition. For successful marriage, the partners must learn how to live together, to share, compromise accommodate, adjust and plan together. One is required to develop a proper attitude, skill and temperament to be successful in marriage. It implies considerable change in the personalities of both the partners, which they bring them at the time of marriage. A successful marriage promotes happiness. Many studies have been conducted to explore the factors underlying successful marital adjustment. The percentage of happy married life is very low in deprived families. Consequently, there are frequent divorces among such families. Gottman (1994) have examined the physical and psychological health problem of maladjustment wives and reported higher level of anxiety, depression and somatic complaints among such wives. Family Planning Association of India (FPAI) found the expectations from marriage partner in the all India sample of over 3,800 young people. It was notice that *men* marry for companionship, sexual satisfaction, to have a life or their own to please parent and for security but in contrast to women marry for companionship, security, independent life, social pressures and sexual satisfaction.

II. REVIEW OF LITERATURE

Researchers have observed that, in couples in which one spouse is depressed, there are more negative communications (blaming, criticism, etc.) than in couples where there is no depression (Biglan *et al*, 1985; Lewinsohn & Shaffer, 1971; Schmaling & Jacobson, 1990); and Johnson SL, Jacob T, 2000). It is interesting that Biglan *et al* (1985) found that when wives communicated depressive behaviors, their husbands were less likely to respond with negative comments.

Marriage and family are not optional but they are necessary and these are the deepest need of the human society. Depression multidimensional clinical syndrome ranges from mild to severe, obvious or masked, episodic or chronic. It is common disorder, with a lifetime prevalence of about 15 percent; perhaps it is high up to 25 percent among the women. The incidence of major depressive disorder is 10 percent in primary care patients and 15 percent in medical inpatients (Freeman, Epstein, & Simon, 1986). The relationship in marriage appears to be related causes and treatment of the depression as it is found in the recent reviews (Whisman, 2001; Marchand & Hock, 2000; and Jacobson, & Dobson, 1991; Rounsaville, *et al*, 1979, p.483). Further, previous research found dysfunctional patterns of communication in couples with a depressed spouse. Specifically,

compared with their non-depressed counterparts, depressed couples have been found to exhibit more friction, lack of affection, lower levels of constructive problem solving, mutual self-disclosure, and reciprocal support (Bauwens, 1998; Kahn *et al*, 1985; Biglan, 1985).

III. MATERIAL AND METHODS

Socio-demographic schedule, Marital Adjustment Questionnaire (MAQ) and Beck’s Depression Inventory (BDI) Scale were used. Only married couples were included according to ICD-10 DCR. The purposive sampling method was used and total 30 couples were included in the study.

IV. RESULTS AND ANALYSIS

The results and the description of the socio-demographic variables, Marital Characteristics is given below (Table:1). In the patient group, the no of male patients with depression were 12(40%) and the female patients with depression were 18 (60%) while the spouse group shows the number of female spouse 18 (60%) and male spouse 12(40%). The mean age of the patient group with depression was 28.20 ± 3.37 and the mean age of the spouse group was 30.80 ± 3.52 . In the patient group, 21 (70 %) of them were upto middle school educated and 9(30%) were upto matric. In the spouse group, 16 (53.3%) were upto middle school educated, 14 (46.7%) were upto matric. In the patient group, 22 (73.3%) were Hindus followed by, 4(13.3%) Muslims & 4 (13.3%) Christians. The patient group, 18(60%) were homemaker, 7 (23.3) were laborers and 5 (16.7%) were farmers. In the spouse group, 12 (40.8%) belonging to homemaker, 10 (33.3.7%) belonging to laborers, 8 (26.7%) belonging to business. 26(80%) of the respondents were belonging to nuclear family and 4 (20%) were from extended family and 9 (30%) were belonging to rural residence and 21(70%) were belonging to semi-urban residence. 19 (63.3%) were having an income ranges from Rs.2000 – Rs.4000 and 11 (36.7%) were having an income ranges from 4000-6000. (Table-1)

Table 1: Distribution of Socio-demographic characteristics of patients group

Socio-demographic Characteristics		Patient Group Mean ± SD n (%)	Spouse Group Mean ± SD n (%)
Age (years)		28.20 ± 3.37	30.80 ± 3.52
Sex	Male	12 (40)	18 (60)
	Female	18 (60)	12 (40)
Education	upto Middle	21 (70)	16(53.3)
	upto Matric	9 (30)	14(46.7)
Occupation	Homemaker	18 (60.0)	12 (40.8)
	Laborer	7 (23.3)	10 (33.3)
	Farmer	5 (16.7)	8 (26.7)
Religion	Hindu	22 (73.3)	
	Muslim	4 (13.3)	
	Christian	4 (13.3)	
Residence	Rural	9 (30)	
	Semi-urban	21 (70)	
Family Type	Nuclear	26 (80)	
	Joint	4 (20)	
Family Income (monthly)	2000-4000	19 (63.3)	
	4000-6000	11(36.7)	
Duration of Marriage	0-2 years	7 (23.3)	
	2-4 years	18(60.0)	
	4-6years	5 (16.7)	
Number of Children	One	7 (23.3)	
	Two	23 (76.7)	
Duration of Illness	2 Months	9 (30)	
	4 Months	14 (46.7)	
	6 Months	7 (23.3)	

MAQ and BDI score :-

The following table shows the score on the beck depression inventory found the minimum score was 33 and maximum score was 37 with a mean score of 34.80. On the marital adjustment questionnaire the patient group had a minimum score of 18 and a maximum score of 22 with a mean score of 20.56. The Spouses group present study had a minimum of 61 and a maximum of 69 with a mean score of 64.86 on the codependency scale.

Table 2: Mean and SD values of MAQ and BDI

Group		N	Minimum	Maximum	Mean	SD
Respondents Depressive Patient	BDI	30	33.00	37.00	34.80	1.1567
	MAQ	30	18.00	22.00	20.5667	1.0063

Marital Adjustment

The table shows domain-wise distribution of score on marital adjustment of both male and female patients. The mean and SD are as 3.96±.182 in sexual adjustment, 6.90±.712 in social adjustment and 9.66±1.06 in emotional adjustment. The obtained significant Z values respectively are as .221 in sexual adjustment, .628 of social adjustment and .121 of emotional adjustment.

Table 3: Domain wise distribution of marital adjustment of patient group

Domain	N	Mean ±SD	Z Value	P value
Sexual Adjustment	30	3.96±.182	1.225	.221
Social Adjustment	30	6.90±.712	.485	.628
Emotional Adjustment	30	9.66±1.06	1.552	.121

Correlation marital adjustment in relation with depression

The above table shows that there is significant correlation between social and emotional adjustment in marital adjustment domain at the .01 level and there is no statistically significant correlation among rest of all. There is no significant correlation between marital adjustment and depression.

Table No: 04 Correlation marital adjustment in relation with depression

		MAQ Total	CD Total	BDI Total	Sexual	Social	Emotional
MAQ Total	r	1.000	.055	-.068	.147	.121	.727**
	p		(.727)	(.722)	(.439)	(.523)	(.000)
BDI Total	r			1.000	.278	.109	-.131
	p				(.137)	(.565)	(.489)
Sexual	r				1.000	.246	-.258
	p					(.191)	(.168)
Social	r					1.000	-.468**
	p						(.009)
Emotional	r						1.000
	p						

** Correlation is significant at the 0.01 levels (2- tailed)

* Correlation is significant at the 0.05 level (2- tailed)

V. DISCUSSION AND CONCLUSION

The majority of the participants belong to females respondents i.e. 18 (60%). This confers with the prevalence rates across sex, that women have higher frequency of depression. Women experience depression twice as often as men do. Over the course of a lifetime, depression occurs in approximately 20 percent of women compared with 10 percent of men (Weissman & Olfson, 1995). Although the exact reason for this difference is not known, the higher prevalence of depression in women is most likely due to a combination of gender-related differences in cognitive styles, certain biological factors and a higher incidence of psychosocial and economical stresses in women (Kornstein, 1997).

Majority in the present study belong to the age group of 25-30 i.e. 17(57.7%) in the patient group. This can be explained by the fact that it is an age of responsibility; economic constrains, starting of new families and roles. This psychosocial strain may prompt the individual to get more depressed than the other groups. An

increasing trend is observed in the prevalence of depression with age among both female ($p < 0.001$) and male subjects ($p < 0.001$).

Majority of the patients were Hindus i.e. 22 (73.3%) followed by Muslims, 4(13.3%) & Christian, 4 (13.3%). The Indian census has also established that Hinduism accounts for 80.5% of the population of India. The second largest religion is Islam, at about 13.4% of the population. The third largest religion is Christianity at 2.3%. The present study findings might be a reflection of a Hindu dominant area from where the study sample was drawn and also reflects the general population distribution.

Majority of them were married for 2-4 years, living in nuclear family and majority having two children. Nuclear families and a small family are now prevalent in India where single or two children is the norm. The industrial communities all over the world have long held the norm that a newly married couple moves out of their parents' homes and sets up their own household. The debate about the nuclear family and industrialization centered on the writings of one of the leading sociologists of the post-World War II era, and then it was argued nuclear fits the needs of industrial society. Independent of the kin network, the "isolated" nuclear family is free to move as the economy demands. Further, the intimate nuclear family can specialize in serving the emotional needs of adults and children in a competitive and impersonal world.

Depressive Score and Marital Adjustment Score :

The present study found that the minimum score 33 and maximum score was 37 with a mean score of 34.80 in the patient group on the beck depression inventory. It was the moderate level of depression in the patient group. Joiner & Metalsky (1995) found evidence that depression changes the relationship between reassurance seeking and negative feedback seeking. It depends upon the severity of depression. Over time, the two patterns are said to be entrained or paired. The result is that the depressed individual's frequent attempts to get reassurance and to get negative feedback may become confusing and aversive to others. The depressed individual's aversive interpersonal behaviors may lead others to respond emotionally, to counter- attack, to escape from or avoid the depressed individual, or to get involved in doing something else (Skinner, 1953).

The present study found the minimum score of 18 and a maximum score of 22 with a mean score of 20.56 on the marital adjustment questionnaire. It was the average level of marital adjustment with moderate level of depression.

Marital adjustment domain wise

The domain wise mean score found as average in the marital adjustment. The mean score in marital adjustment of patient group respectively were as 3.96 ± 1.82 in sexual adjustment, 6.90 ± 1.712 in social adjustment and 9.66 ± 1.06 in emotional adjustment. The obtained significant Z values respectively are as .221 in sexual adjustment, .628 of social adjustment and .121 of emotional adjustment. It was correlated with the different study by Ariel *et al* (1995) marital adjustment reported by the depressed group was average as the normal group. The present study found average marital adjustment score in each domain because selected sample were manageable and moderately depressed.

Relationship of Marital Adjustment and Depression

The present study had shown no significant correlation between depression and marital adjustment. This does not correlate with different studies which attribute a two-way relation between marital discord and depression; either marital distress leading to depression or depression leading to marital distress (Whisman, 2001; McCullough, 2003; Gotlib, 1986). But it correlated with studies by Dobson (1985) that did not find any significant correlation between marital distress and depression.

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Yatindra Mishra, et. al "A Study on Marital Adjustment among Depressive Patients." *IOSR Journal of Humanities and Social Science (IOSR-JHSS)*, 26(06), 2021, pp. 01-05.