



## Psychosocial factors and psychiatric morbidity in females reporting complaints in cases of marital disharmony

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### ABSTRACT

**Background-** The foundation of a happy family lies in cordial husband wife relationships. However marital discord leads to familial disorganization. Legal authorities in India offer protection and counselling to females who have complaints regarding marital disharmony and domestic violence. Various psychosocial factors are usually involved in marital disharmony cases.

**Aim-** To study psychosocial factors and psychiatric morbidity in females reporting complaints in cases of marital disharmony

**Material & methods-** 100 married females reporting complaints about marital disharmony and domestic violence were interviewed in Crime against women cell of Police department in a city in India.

**Results-** 57% couples had duration of marriage less than 5 years. The predominant complaints of the females were physical abuse, emotional abuse, interference in marital life by in-laws and communication problems with husband. 68% stayed in joint families and had significant complaints of interference by other family members. 2% females were found to have clinically mild mental retardation, 2% had anxiety disorder, 27% had depressive disorder, and 3% had psychosis.

**Conclusion-** Marital disharmony has multi-dimensional causative factors. Psychological factors need to be taken in consideration while dealing with cases of marital disharmony.

**KEYWORDS :** Marital disharmony, Complaints, Psychological morbidity

### INTRODUCTION-

Marriage is the first step towards formation of family. It signifies a socially, psychologically and legally defined bond that makes two individuals a single societal unit. The very foundation of happy family lies in cordial husband wife relationships. However marriage at times displays a welter of conflicting norms, values, attitudes and behaviours leading to disharmony and total breakdown. Marital conflict leads to familial disorganization and also has negative consequences on the upbringing of children.<sup>[1]</sup>

Marital disharmony is an antecedent or consequence of domestic violence. Women are litigants in majority of cases of marital disharmony and domestic violence. The Indian law provides protection to women who report victimization to the police. Police departments have women's cell to deal with cases of crimes against women including domestic violence.<sup>[2]</sup>

There are psychological underpinnings to multiple cases of marital disharmony. The conflicts in marriage may arise due to personality characteristics of the couple as well as the environment in which the marriage functions. There can be underlying psychopathology which may predispose to marital disharmony and subsequent litigations.<sup>[3]</sup> Agarwal (1971) reported a higher number of emotional problems in couples with marital disharmony.<sup>[4]</sup>

Marital complaints are culled from long-standing marital problems of the couple as a justification for the failure of the relationship. The complaints reflect unpleasant conditions in a disintegrating relationship; they may indeed have an impact on mental health.<sup>[5]</sup> The differentials in marital instability can give analytic overview of the factors associated with it and enable better equipment of resources to deal with marital discord cases.<sup>[6]</sup>

Officers dealing with cases related to marital disharmony should be well versed with the psychosocial factors involved while dealing with them.<sup>[2]</sup> The purpose of this study is to enhance the sensitivity regarding mental health problems amongst those dealing with the cases of marital disharmony. It will enable them to make appropriate referrals of cases for psychological intervention.

### MATERIAL & METHODS-

This was a longitudinal study conducted at 'Crime against women' cell of Police department in the city in India. It deals with cases of domestic violence, marital disputes and other grievances of

women. The cell has a committee consisting of lawyers, social workers and police personnel. They help in addressing marital problems and offer counselling to both parties. The recourse on legal action is decided after detailed investigations.

After institutional ethics committee approval, 100 women were interviewed. Their complaints were noted. Sociodemographic details and psychosocial factors were taken from the females and the informants accompanying them. The diagnosis was done based on clinical interview according to ICD 10 DCR guidelines.

### RESULTS-

3% females were below 20 years of age, 64% females were in the age group of 21-30 years, followed by 25% in the age group of 31-40 years and 8% were above 40 years. 2% females were uneducated, 49% had schooling but did not have an educational degree, 38% were graduates and 11% postgraduates.

61% females were housewives, 12% were casual workers, 11% were professionals, 14% in institutional service and 2% were pensioners. 61% females were housewives, 12% casual workers, 14% in service, 11% professionals and 2% pensioners.

80% of the couples had arranged marriages. 32% couples stayed in nuclear families and 68% in joint families. 57% were married for less than 5 years, 30% had duration of marriage from 6-15 years and 13% were married for more than 15 years. 29% couples were childless, 41% had one child, 21% had two children and 9% had three children.

A number of complaints about the spouse were elaborated by the couple, which were certain psychological, social and physical problems are elaborated. (Table 1)

The females in age group of 31-40 (25%) significantly complained of lack of communication and understanding with husband (12%) ( $p=0.05$ ). Females above 40 (8%) complained of infidelity of husband (6%) ( $p=0.03$ ) and personality problems of husband (4%) ( $p=0.05$ ).

Females doing small scale jobs (12%) had significant complaint of substance use by husband. (6%  $p=0.05$ ) Females in service (14%) significantly complained of restriction by their in-laws (6%) ( $p=0.05$ ) and had gender role conflict with the husband (6%) ( $p=0.05$ )

The females with duration of marriage less than 5 years (57%) significantly complained of sexual problems with husband (17%) ( $p=0.01$ ), restriction by in-laws (27%) ( $p=0.004$ ) and different backgrounds of two families (13%) ( $p=0.04$ ). The females with the duration of marriage 6-15 years (30%) complained of desertion by husband (6%) ( $p=0.012$ ) and females with duration of marriage more than 15 years (13%) complained of infidelity of their husband (10%) ( $p=0.001$ ).

TABLE-1

COMPLAINTS REPORTED BY FEMALE**	NUMBER OF FEMALES (n=100)
Emotional abuse	72
Physical abuse	71
Restriction by in-laws	34
Husband's infidelity	33
Neglect of household duties by husband	30
Lack of communication and understanding	29
Substance use by husband	29
Husband suspicious about her fidelity	24
Interference by in-laws in marital life	23
Sexual problems	22
Financial and employment problems of husband	22
Betrayal /deceived by husband	20
Personality problems of husband	19
Different backgrounds of two families	14
Conflicts over children	13
Sexual abuse	12
Materialistic demands by in-laws	11
Overcommitment to work by husband	11
Gender Role Conflict	10
Remarriage /desertion by husband	9
Physical problems in husband	5

#### \*\*All females reported more than one complaint

The females staying in nuclear families (32%) significantly complained of suspiciousness towards fidelity of husband (15%) ( $p=0.04$ ) and neglect of household duties by husband (16%) ( $p=0.002$ ). The females staying in joint families (68%) significantly complained of restriction imposed by in-laws (28%) ( $p=0.02$ ).

On psychiatric evaluation, 2 % females were found to have clinically mild mental retardation, 2% had anxiety disorder, 27% had depressive symptoms, and 3% had psychosis.

#### DISCUSSION-

64% females were in the age group 21-30. These finding are similar to the study done by Bumpass et al, 1972 which states that younger age in marriage is associated with marital instability. He reported that young females do not have the adult role perception needed for the stability of marriage.<sup>[6]</sup> It is noteworthy that 2% females above 60 also complained of disharmony.

In this study, 38% of women reporting harassment were graduates and 11% were post graduates. The sense of prestige, financial resources and the awareness regarding legal aspects increase with education.<sup>[6]</sup>

61% of the women reporting harassment were housewives. A similar finding of greater risk of abuse of housewives is reported in a previous study.<sup>[7]</sup>

It was observed that 66% with arranged marriage had an easy geographical access to support system from their parents. Only 25% with love marriages had an easy access to parent support system. Thus reporting to legal system was more where there was good family support which was obvious in arranged marriages.

68% of the couples lived in joint families. This reflects the Indian set up of a traditional family system. Also, it was observed that, in joint families, significant other members in the family also contribute to discord which might have led to more litigation in this group.

57% of the complainants had duration of marriage less than 5 years. This suggests that disharmony in marriage and complaints about the same occur in early years of marriage. Factors like sexual problems, different backgrounds of two families, lack of communication and understanding, interference by in-laws which are more difficult to adjust to, in early years of marriage, are also taken into consideration, thus presenting higher figures of discord. The findings are contradictory to the findings in the study by Ram Ahuja (1987) which states that marital disharmony can occur at any stage of marriage.<sup>[8]</sup>

29% couples were childless and 41% had single child. This indicates that the presence of children has a stabilizing effect on marriage or they tolerate the discomfort for the children's sake and hence, these females are less likely to complain of marital disharmony to the police or legal system. The findings are contradictory to those in the study by Ram Ahuja (1987) which concludes that presence of children had no correlation to marital disharmony.<sup>[8]</sup>

There were common themes in the psychological, social and physical problems reported by the females. Complaints reported by females predominantly included physical abuse (71%), emotional abuse (72%), suspicion about husband's fidelity (33%), restrictions by in-laws (34%), and sexual problems (22%). Kitson (1982) also noted similar type of complaints, in which, women are more likely to report physical, emotional, sexual abuse, sexual problems, non-support of family members, husband's infidelity and money management issues.<sup>[9]</sup>

Physical abuse was reported by 71% females which included acts such as hitting, pushing, kicking, choking or threatening to harm or hurt. 12% females reported sexual abuse in the form of forcing or pressurizing her into sexual act when she did not want it. Emotional abuse which included mental torture due to insults, ridicule and humiliation was reported by 72% females. It was evident that these females were subjected to domestic violence leading to significant marital instability. Similar findings were reported in a previous study.<sup>[10]</sup> The complaints were addressed as per the Domestic violence act of India.<sup>[11]</sup>

22% females complained of sexual problems with husband. Of these, 40% ( $n=9$ ) complained of lack of consummation of marriage, 40% ( $n=9$ ) complained of lack of sexual satisfaction and 20% ( $n=4$ ) complained that the husband is impotent. 3% of these females were diagnosed to have depression. A previous study reports similar findings that sexual problems are precursor to marital discord and also result in psychopathology of depression in couples.<sup>[12]</sup> None of the females or their husbands had sought any treatment for the sexual problems reported.

Females in the age group of 31-40 were worried about the lack of communication with husband ( $n=12$ ,  $p=0.05$ ). It indicates that, at this stage, the couples might be busy in the responsibilities of job, household matters, rearing children that they get less time to communicate, which seems to affect their marital relationship.

Working females significantly reported "gender role conflict" ( $n=6$ ,  $p=0.0001$ ). They elaborated that their husbands insisted that they should perform only the household duties, rather than other employment, led to disharmony. Similar findings are reported in previous studies.<sup>[9], [13]</sup> This indicates the changing trend of complaints in recent times in which conflicts concerning authority, values, personality are common.

Females in early years of marriage with duration of marriage less than 5 years significantly reported the theme of restriction by in-laws ( $n=27$ ,  $p=0.004$ ). They also reported distress regarding different

backgrounds of culture, socioeconomic status of their natal and in-law families ( $n=13$ ,  $p=0.01$ ). This suggests that the female has to adjust to the new environment in the in-law family; also there is change in her role in life. Less adaptability to these new circumstances leads to distress which might lead to conflicts. Females with duration of marriage more than 15 years significantly reported suspicion towards fidelity of husband ( $n=10$ ,  $p=0.001$ ). This indicates that a process of disillusionment takes place in marriage over time as indicated by a previous study.<sup>[14]</sup>

3% females were found to be suffering from psychosis. This was one of the contributory factors for discord. The mental illness was untreated in all the cases. There were 2% females diagnosed to have clinically mild mental retardation. Their parents reported that they were harassed by in-laws for not being able to perform household duties. 27% females were diagnosed to have clinical depression. This indicates that marital disharmony is an important antecedent to psychological morbidity in women. The finding is corroborated by previous studies.<sup>[15],[16],[17]</sup>

**Conclusion-** Marital disharmony and litigations by wife have multidimensional causative factors. Psychological factors can have a dual cause effect relationship in cases of marital disharmony.

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