

Marital Satisfaction As A Predictor Of Mental Health In Pakistani Working And Non- Working Women

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Abstract

This research attempts to find out the role of marital satisfaction as a predictor of mental health in Pakistani working and non-working women. The sample of the present research consisted of 100 married females (50 females working and 50 non- working), selected from different organizations of Karachi following the purposive sampling technique. The age of the participants was from 22 years to 40 years (Mean age=33.2; SD= 4.83) with the minimum of 2 years and maximum of 20 years of marriage. Kansas Marital Satisfaction Scale (KMS), and The Depression Anxiety Stress Scale (DASS) were administered as scales. Marital satisfaction was found to be significant predictor of mental health in married women. No significant difference found between working and non-working women on marital satisfaction. Further findings indicated that working women score higher on the variable of stress ($p < .05$). It is concluded that marital satisfaction plays a role in mental health of Pakistani married women.

Keywords - Marital Satisfaction, Mental Health, Married Adult, Working Women

INTRODUCTION

Marriages are the fundamental part of almost all societies and cultures; whereby two people share their lives in the most passionate and respectable way along with keeping to bear each other's responsibilities with love and mutual understanding. However, it also tends to be a very fragile relationship, the most demanding and yielding lots of sacrifices at the very same time, making the people involved desire a marital bliss or in other words marital satisfaction (Nadam & Sylaja, 2015). Marital satisfaction has also been largely found to influence mental capacities which in turn results in devastating consequences in various aspects of an individual's life (kalthor & Olyaie, 2017).

Mental health simply means the absence of any debilitating or disabling illnesses which affect mind in a sense to decrease overall functionality and damages the personality as well. Such illnesses mostly comprise of depression, anxiety and stress which are encountered by all people around the globe on almost daily basis (Aleem & Danish, 2018). These can be caused by marital discord and maladjustment (Aleem & Danish, 2018). Studies confirmed significant relationship between marital satisfaction and mental health especially depression and anxiety and overall quality life in women.

This is the fact that women suffer twice from mental illnesses as compared to men. In the present era, financial constraints owing to the raised bar of standard of living, have caused many

women all over the world to reach out in search of jobs to earn a living. Some studies suggest better marital satisfaction among working women due to better self-esteem and earning potential while other researchers report the opposite saying working women goes through more marital conflicts leading to mental health issues (Gharibi, Sanagouymoharer & Yaghoubinia, 2016). Although non-working women have more social support and less work load even then study indicated that working women mental health was better than non-working women (Nadam & Sylaja, 2015). Similar study conducted by international labor organization (2009) to analyze psychological health of working women in terms of feeling of security-insecurity, physiological health and social anxiety; results confirms that financial relief in addition to status in society are all factors contributing to women more secure as compared to non-working women. The study conducted by Fatima (2007), further highlighted the life of working women in terms of having high education and income along with social contacts as compared to non-working women who has less opportunity to access education and health care facilities which make them vulnerable to manage unpredictable life challenges.

Also, due to increase of literacy rate in Pakistan women are also getting professional education and doing jobs which improve their self-esteem and give them recognition in society but at the same time they faced certain problems in family life because in eastern culture this is considered to be primarily responsibility of women to take care of children, family members and household chores. The non-working women has less freedom, less opportunity to avail facilities and have better life opportunities whereas people belong to urban areas of Pakistan value their females as an earner therefore their status in society has been improved. It makes woman to have protection from feeling of rejection, failure and psychological disorders. Such women are

having high self-esteem in terms of feeling confident and valued (Aslam, 2007).

Depression is estimated the second highest prevalence disease by 2020, and everyone in every three women worldwide will be affected by depression and anxiety. In Pakistan prevalence rate of depression and anxiety is 34% and specifically in women is 29-66% and 10-33% in men. Studies reported that common reasons of high rate of these disorders in women are lack of social support, abuse by in-law's, financial problems and marital dissatisfaction (Garima& Kiran, 2014). However, multifaceted stress of married working/non-working women with responsibilities at different areas may cause mental health issues as well as marital maladjustment. Consequently, the present study aims to find out if marital satisfaction affects women's mental health and if they being working or non-working women has a role in it.

Research Objective

Objectives of the study are as follows:

1. To find out if marital satisfaction predict mental health (stress, anxiety and depression) in Pakistani married women.
2. To find out if there would be a difference in mental health scores in working and non-working women.

LITERATURE REVIEW

Marital Satisfaction

Marital satisfaction denotes a special case of intimate relationship based on an individual's internal feeling of happiness and a sense of completeness (Qadir, Khalid, Haqqani, Huma et al, 2013). Many areas of marital adjustment have been identified by many psychologists including, but not limited to, items like sexual intimacy, finances, social interactions, religious

background, harmony with in laws etc. (Sahu & Singh, 2014).

Marital Satisfaction and Mental Health

Mental health caters to the disorders that an individual can have which leads to impairment in functioning and distress in daily life like anxiety, depression, obsessive - compulsive disorder and more. Mental health is the prime part of the overall health system of any person which renders him/her to make sound decisions regarding a wide variety of social and emotional situations arising around the environment (Garima & Kiran, 2014). Depression is characterized by a low mood along with loss of interest in the pleasures and activities of daily life and it has been found that marital distress and relationship conflict might cause depression (Hashmi, Khurshid & Hassan, 2007). On the other hand, Anxiety is an exaggerated response to a fearful or accidental situation which hampers the quality of life and brings about various physiological changes along with psychological which can be caused by marital dissatisfaction as well. Marital satisfaction in couple is predictive factor for their psychological and emotional health. As better mental health and successful marriage can help people to balance between work pressure and family responsibilities it is important to study the role of marital satisfaction on individual's mental health (Gharibi, Sanagoumoharar & Yaghoubinia, 2016).

Marital Satisfaction in Working and Non-Working Women

Nowadays, with increasing inflation and pressure to maintain a certain level of living standard has caused women to work after marriage along with the fact that women are attaining higher education and wants to fulfil their ambitions. Being a working woman after being married might pose many issues as she has to juggle between the professional as well as personal

fronts or family commitments which affect her mental health which can lead to marital dissatisfaction. However, There are contradictory findings from the literature present. WHO's findings (2006) highlighted the factor that working mothers stays out of the home which help them to cope with stress effectively. In a study of international journal of Information and Education Technology (2013) on marital adjustment, stress and depression; it has been found that employment has positive impact on women both financially and professionally. It has also been shown that the sense of security helps them to face their problems. On the other hand, studies has shown that non-working women has better mental health status as they have more leisure time without professional responsibilities and fulfil their duties more efficiently of a married woman. Marriage is an important part of a person's life in every society, but Pakistani society places great emphasis on marriage and women are considered to be more responsible to maintain long term marital relation due to these women feel more burden on their shoulders which is a risk factor of high prevalence of stress, anxiety and depression as they may lack satisfaction from their married life.

RESEARCH METHODOLOGY

A sample of 100 married women (50 working and 50 non-working) was recruited for the study from Karachi. All the participants who were at least 22 years of age, with minimum educational level of graduation were included in the study. Working women were bankers, teachers and doctors. Purposive sampling technique was used for this study. Demographic information sheet was constructed by researcher to collect information regarding participant's age, occupation, and duration of marriage, family type and educational level. The Kansas Marital Satisfaction (KMS) scale self-reported 3-item scale to measure marital satisfaction. Participants rate items on a 7-point scale ranging from 1 (extremely

dissatisfied) to 7 (extremely satisfied). It is a valid and reliable scale with internal consistency Cronbach's alpha $>.95$. The depression, anxiety stress scale (DASS) was used to measure mental health. It has 21-items, which are divided in to three areas (anxiety, depression and stress) each consisted 7 items with four point scale where 0 (does not apply) to 3 (always/almost applies) to indicate their level of agreement with item they picked up in the past week. Internal consistency of (DASS-21) versions: Depression (range=. 91 in. 97); Anxiety (range=. 81 in. 92); and Stress (range=. 88 in.95). The study was conducted after seeking approval from Board of Advance studies and research (BASR), University of Karachi. The depression Anxiety, stress scale (DASS) and The Kansas Marital Satisfaction Scale (KMS) along with Demographic Information sheet was administered on study participants after taking informed consent. The purpose, procedure of the study was explained, confidentiality and right to withdraw from study was ensured. The sample

method was purposive and snow ball data of working women was collected from different organizations in Karachi and for data of non-working researcher visited at their place for the administration of the questionnaires. Data were analyzed on SPSS version 20. Descriptive statistics and linear regression were calculated.

TESTING OF HYPOTHESIS

All married women meeting the eligibility criteria were recruited in study. Mean \pm SD age was 33.28 \pm 4.83 years and weight was 63.17 \pm 12.41kg, duration of marriage was 9.40 \pm 6.01 and marital satisfaction was 14.27 \pm 4.04. Mean \pm SD of depression was 7.18 \pm 4.47, anxiety 5.61 \pm 3.64 and stress 7.49 \pm 3.82 as shown in Table 1. Marital satisfaction and mental health were included in a linear regression analysis to assess the contribution of marital satisfaction in the prediction of mental health (depression, anxiety and stress) among married women. The results show in Table 2 and Table 3.

TABLE

1

Mean age, height, weight and duration of marriage

Variables	Mean	\pm SD
Age (years)	33.28	4.83
Weight	63.137	12.41
Duration of marriage (years)	9.40	6.01
Marital satisfaction	14.27	4.04
The Depression Anxiety Stress sub-scales		
Depression	7.18	4.47
Anxiety	5.61	3.64
Stress	7.49	3.82

TABLE

2

Model Summary of Linear Regression Analysis

Predictor	R	R Square	Adjusted Square	R	F change	p
Marital satisfaction		Variables				
	(1) .763 a	.582	.578		136.64	.000
	(2).606 a	.367	.361		56.85	.000
	(3).668 a	.446	.440		78.92	.000

P <.01
 Marital satisfaction (constant)
 (1)Depression, (2) anxiety,(3) stress (Dependent variables)

TABLE 3
 Coefficients

Model	Unstandardized Coefficients		Standardized Coefficients	t	p
	B	Std. Error	Beta		
Constant	19.24	1.072		17.948	.000
Marital satisfaction	-.845	.072	-.763	-11.689	.000
	13.413	1.075	-.606	12.476	.000
	-.547	.073		-7.540	.000
	16.510	1.055	-.668	15.652	.000
	-.632	.071		-8.884	.000

P<0.01**

Indicates that 1 Unite change in marital satisfaction brings -.845 ratio change in Depression, -.547 in anxiety and -.632 in stress.

DISCUSSION

The primary purpose of the study was to find the impact of marital satisfaction on mental health of Pakistani married women while at the same time co-relating this with the employment factor that

is to see whether married and working women lead a more blissful married (marital satisfaction is more) life as compared to non-working ones. Based on the results it is clearly evident that in Pakistani society marital satisfaction played a great role in determining the mental health in

terms of the Depression, Anxiety, Stress Scale scores, which means that the women who scored high on the marital satisfaction scale or in other words, women who were satisfied more being married enjoyed lesser frequency of mental health disorders like depression, stress and anxiety. The results are in perfect harmony with the kind of societal influences we face being a Pakistani nation as in our culture huge pressure lies on being married on the very first hand and then on continuing being happily married. In Pakistan it is of utmost importance to continue the marital relationship especially for the women no matter how abusive or unhappy the marital life is so in such mind sets when a woman lives contented, happy life with her husband this definitely improves her mental health in part by relieving the societal pressures and making her look impressive in eyes of her peers and other members of society. Marital satisfaction is also supposed to increase with the social support a woman has, and this was proved by a study conducted on Pakistani working and non-working women where levels of depression, stress and anxiety were markedly reduced when married women enjoyed social support. (Abbasi & Aqeel, 2018). Pakistani society has been always a biased society when gender differences are taken into account, although there has been almost no or fewer data available as far as differences between men and women were considered based on employment factor in our country, but one western study clearly demonstrated that women who are married and also employed had difficulty in maintaining healthy marital life as compared to their male counterparts thereby leading towards deteriorated mental health. (Gove & Geerken, 1977). The similar study also compared mental health parameters of married working and non-working women, they hypothesized that in western society married working women enjoyed a better health mentally because they had the freedom to engage with other people, be independent financially and

distract their minds off the household misery when they are on job. (Gove & Geerken, 1977). However, our results based on Pakistani women differ from the western society results. We found out that mental health was not influenced being employed or unemployed in married women of Pakistan. This can be due to a variety of factors: in our culture women are not given even a slightest margin if they are earning along with being a house wife, this also accounts for the working environment prevalent here which instead of favoring women to a light extent, tries to over burden them including the threats of being harassed or bullied. The household environment also doesn't bestow a helping hand or providing minor relief to working women, expecting them to continue providing for the whole extended family in every possible way after returning from the work. Moreover, in our society, the earnings of a woman are usually, righteously, taken by the husband or the in laws which destroys the financial independence. Our results are also in keeping with a study done on marital adjustment in working and non-working married women in Pakistan. They also concluded that married non-working women better adjusted with their marital life in Pakistan as compared to their working counterparts, reasons being the afore mentioned factors (Hashmi & Khurshid, 2007).

Conclusion

Marital satisfaction was highlighted well in the domain of social sciences for many years. Various researches have been conducted; but the purpose of present study was to find out specifically the predictive relationship of marital satisfaction with mental health. Also, there was a strong need to study this area with reference to Pakistani culture as in Pakistani culture there is an important place of marriage in someone's life and well-being. Hence, this study not only contributed to the literature but is also helpful in understanding the connections of marital satisfaction with psychological health i.e., stress,

anxiety and depression. The findings suggests that marital satisfaction has a substantial effect on mental health however if the woman is working or not does not play as much a significant role.

Recommendations

Further studies in this manner are highly recommended for better generalizability and including other variables like social support, education level, socioeconomic status and nature of the job. These factors would definitely influence the overall results giving a better picture of the Islamic republic of Pakistan.

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