To study the relationship between religious coping spiritual well being, and marital adjustment, among the wives of males with Alcohol Dependence Syndrome.

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Abstract

Introduction: The impact of alcoholism on marital – family functioning and the influence of marital – family relationship on the development and the maintenance of the alcoholism are challenging problems to both the clinicians and researchers. The aim was to study the relationship between religious coping spiritual well being, and marital adjustment, among the wives of males with Alcohol Dependence Syndrome.

Material And Method: Wives of alcohol dependent male patients admitted in the Department of Psychiatry, Armed Police force Hospital were included in the study after informed consent. a) Semi-Structured Proforma b) The Spiritual Well-Being Scale, C) R-COPE Scale, (D) Dyadic Adjustment Scale. were used to collect the data.

Results: The results of the study show that majorities were from a rural background, low socio economic status, nuclear family and were homemakers. Spiritual well being and religious well being correlated positively with positive religious coping and inversely correlated with negative religious coping. The total score on religious coping correlated inversely with the dyadic adjustment showing that in times of stress and low marital adjustment the sample turned more to religious coping. The years of drinking inversely correlated with spiritual well being and the subscale of existential well being, indicating that the more number of years the patient consumed alcohol the wife had lower spiritual well being and in particular existential well being.

Conclusion: Spiritual well being enhances the positive religious coping strategies of the wives of men with alcoholism in this study. When the spiritual well being is low more negative methods of religious coping are used.

Keywords: Religious coping, Spiritual well being, Marital adjustment

INTRODUCTION

Marital and family problems may precede the alcoholism, may occur solely as a result of the alcohol consumption and the consequent behaviour changes, or may be part of a complex interaction between pre-existing weaknesses of the family or of the individuals in the family and the drinking of the family member. Alcohol families are characterized by a general atmosphere of moodiness, tension, and irritability, communication problems with the spouse¹, incongruent perceptions between alcoholics and their wives², low cohesion, expressiveness and recreational orientation ³ family violence⁴, and increased psychological distress in the children⁵.

Appropriate or inappropriate coping strategies adopted by the wives to deal with the stress depend partly on the social adjustment of individual with drug or alcohol dependence and severity of addiction. The coping strategies used by them include pleading, threatening, arguing, avoiding, withdrawing sexually, being indulgent, taking greater control on responsibilities seeking outside help and taking steps towards separation.⁶

Religion is a form of coping that helps individuals to deal with a wide variety of difficult life situations, particularly with long term stressors.

MATERIAL AND METHOD

Forty alcohol dependent male patients, who are admitted in the Department of Psychiatry, Armed Police force Hospital ,married for at least two years and above and living with the patient, fluent in either of the following languages – English, and who gave a written informed consent. a.

Spouses of patients who have co-morbid Axis I psychiatric diagnosis, Not living in the same house due to separation or divorce and who themselves are alcohol dependent were excluded. Data was collected from the wives, whose partners were admitted to both the centers for a period of 4 months, after informed consent all the individuals were rated on a) Semi-Structured Proforma b) The Spiritual Well-Being Scale⁷, C) R- COPE Scale⁸, (D) Dyadic Adjustment Scale.⁹

RESULT

Shows the distribution of the wives with respect to their sociodemographic variables. Majority of the spouses i.e., 21 (52.5%) were in the age group of 31-40 years. Fourteen (35.0%) had studied upto the middle level. Majority(57.5%) were Homemakers. Detail of the Socio-demographic detail is presented in Table1.

Table 2 presents the distribution of the wives with regard to the number of years of marriage. Distribution of the patients across the number of years of drinking is described in table 3.

The religious well being subscale had a mean of 39.90 (SD 8.09) and a range of 20-53. The existential well being subscale had a mean of 37.12 (SD 6.76) and a range of 20-53. (Table 4) The RCOPE total had a mean of 102.27 (SD 23.57) with a range of 38.164. (Table 5)

Table 1: Socio-demographic Characteristics Of

the Subjects							
Variables	Frequency	Percentage					
Age							
21-30	9	22.5%					
31-40	21	52.5%					
41-50	10	25%					
Educational Status							
Illiterate	3	7.5%					
Primary	5	12.5%					
Middle	14	35.0%					
High school	11	27.5%					
PUC	4	10.0%					
Degree / Diploma	3	7.5%					
Occupation Status	-						
Daily wage earner	14	35.0%					
Clerical	3	7.5%					
Homemaker	23	57.5%					
Religion							
Hindu	32	80%					
Christian	6	15%					
Muslim	1	2.5%					
Others	1	2.5%					
Background	1	2.370					
Rural	35	87.5%					
Semi-urban	3	7.5%					
Urban	2	5%					
Income (per month)	2	5 /0					
< 1000	10	25%					
1000 - 2000	10	25 % 37.5%					
2001 - 3000	15	2.5%					
3001 - 4000	8	2.3 % 20%					
> 4000	6	15%					
Family Type Nuclear	27	67 50/					
	27	67.5%					
Joint Extended	8 5	20%					
Extended Number of children	3	12.5%					
	2	E 0/					
None	2	5%					
One	7	17.5%					
Two	17	42.5%					
Three	13	32.5%					
Four	1	2.5%					
Head of the family	01						
Patient	31	77.5%					
Spouse	1	2.5%					
Others	8	20%					
Main bread winner							
Patient	33	82.5%					
Spouse	2	5%					
Others	5	12.5%					

Variable	Frequency	Percentage
< 5 years	4	10%
5 - 10	9	22.5%
10 – 15	8	20%
15 – 20	8	20%
20-25	11	27.5%

Table 2: Distribution According to the Years of Marriage

Table 3: Distribution of Patients According tothe Years of Drinking

Variable	Frequency	Percentage
< 5 years	2	5%
5 - 10	8	20%
10 – 15	3	7.5%
15 – 20	19	47.5%
20 - 25	4	10%
25 - 30	4	10%

Table 4: Distribution of SWB, and thesubscales RWBS and SWBS

	Minimum	Maximum	Mean	Std.					
				Deviation					
SWB -	52	104	76.72	12.76					
Total									
RWBS	20	53	39.90	8.09					
EWBS	20	53	37.12	6.76					

SWB = Total- Spiritual Well Being (scores range from - 20 to 120), RWBS = Religious Well Being (scores range from -10 to 60), EWBS = Existential Well Being (scores range from - 10 to 60)

Table 5: Distribution of RCOPE Total Score, RCOPE Positive And RCOPE Negative Scores

	Minimum	Maximum	Mean	Std.
				Deviation
RCOPE	38	164	102.27	23.57
Total				
RCOPE	21	105	72.62	17.00
Positive				
RCOPE	11	59	29.65	12.94
Negative				

The Dydadic Adjustment (DAS) – total score had a mean of 94.67 (SD 18.96) with a range of 49-130. The dyadic satisfaction subscale had a mean of 43.92 (SD 11.53) and a range of 14-65. Detail of the score is described in Table 6.

Table 5: Distribution of DAS Total Scores and Subscale scores of subjects.

Subscale scoles of subjects.								
	Minimum	Maximum	Mean	Std. Deviation				
DAS total	49	130	94.67	18.96				
score								
Dyadic	14	65	43.92	11.53				
satisfaction								
Dyadic	15	44	29.95	6.55				
cohesion								
Dyadic	1	23	13.72	5.11				
consensus								
Affectional	0	12	7.07	2.87				
expression								

Table 7: Pearson's Correlation CoeffecientMatrix Of the Spiritual Well Being and It'sSubscales, Religious Coping and It's Domainsand Dydadic Adjustment

	SWB	RWBS	EWBS	RCOPE	RCOPE	RCOPE	DAS -
	total			total	positive	negative	total
SWB		.843(**)	.835(**)	.065	.374(*)	373(*)	.264
RWBS			.521(**)	.016	.313(*)	382(*)	.261
EWBS				.067	.272	236	.212
RCOPE-					.845(**)	.712(**)	314(*)
Total							
RCOPE-						.225	024
Positive							
RCOPE							-
-							.540(**)
Negative							
DAS							
Total							

SWB = Spiritual well being, RWBS = Religious well being, EWBS = Existential well being, RCOPE Total = Religious cope total score, RCOPE Positive = Positive religious cope, RCOPE Negative = Negative religious cope, DAS Total = Dyadic adjustment score, Values of parenthesis are Pearson's correlation coefficient (r) 2 tailed significance, ** p < 0.01, * p < 0.05

TABLE 8: Pearson's Correlation Coefficient Of SWB, RWBS, EWBS, RCOPE, RCOPE Positive, RCOPE Negative and Das total

	SWB	RWBS	EWBS	RCOPE	RCOPE	RCOPE	DAS -
					Positive	Negative	Total
Years of marriage	232	246	240	072	090	013	115
Years of	357(*)	222	394(*)	060	313	.302	266
drinking							

SWB = *Spiritual well being, RWBS* = *Religious well being, EWBS* = *Existential well being, DAS Total* = *Dyadic adjustment score total*

Table 9: Mean Scores On SWB, RCOPE and DAS Of The Different Age Groups

Variables	Mean scores of the age groups			ANOVA	р
	1	2	3	F-statistic	
SWB	80.56	76.00	74.80	.539	.588
RCOPE	95.33	104.67	103.50	.498	.611
DAS	102.67	94.42	88.00	1.454	.247

1 = 21-30 years age, 2 = 31-40 years age, 3 = 41 - 50 years age, SWB = Spiritual well being total score, RCOPE = Religious coping total score, DAS = Dyadic adjustment scale total score, * = Significant

Table 10: Mean Scores on SWB, RCOPE and DAS of Education

Variable	Mean s	Mean scores – Education						
vallable	1	2	3	4	5	6	statistic	р
SWB	82.0	86.60	74.78	74.27	76.25	73.67	.867	.513
RCOPE	130.33	97.40	109.57	99.91	85.00	80.00	2.584	0.044*
DAS	75.00	110.80	95.71	93.73	100.75	78.00	2.234	.073

1 = Illiterat, 2 = Primary, 3 = Middle, 4 = High school, 5 = Pre-University, 6 = Diploma / Degree,

SWB = *Spiritual well being total score, RCOPE* = *Religious coping total score, DAS* = *Dyadic adjustment scale total score* * = *Significant*

Table 11: Mean Scores on SWB, RCOPE and DAS Of Occupation

Variables	Mean scores -	Occupation	ANOVA			
vallables	1	2	3	F-statistic	р	
SWB	79.36	67.00	76.39	1.187	0317	
RCOPE	111.86	104.67	96.13	2.059	.142	
DAS	93.79	87.67	96.13	.277	.759	

1 = Daily wage earner, 2 = Clerical, 3 = Homemaker,

SWB = *Spiritual well being total score, RCOPE* = *Religious coping total score, DAS* = *Dyadic adjustment scale total score* * = *Significant*

Table 12: Mean Scores on SWB, RCOPE and DAS of Income

Variables	Mean scores -	Income	ANOVA		
vallables	1	2	3	F-statistic	P
SWB	79.10	75.87	76.00	.222	.802
RCOPE	114.80	100.00	96.20	2.089	.138
DAS	95.60	95.00	93.73	.031	.970

1 = < 1000, 2 = 1001-2000, 3 = > 2000

SWB = *Spiritual well being total score, RCOPE* = *Religious coping total score, DAS* = *Dyadic adjustment scale total score* * = *Significant*

Correlations between the spiritual well being (SWB) score, the religious well being subscales (SWBS), the existential well being subscales (EWBS), the RCOPE total score, the scores on the RCOPE positive domain and RCOPE negative domain and the Dyadic Adjustment Scale (DAS) total scores is shown in Table 7.

Detail of the correlation between the number of years of marriage and the number of years of drinking with spiritual well being (SWB), religious coping positive (RCOPE positive) and negative (RCOPE negative) and dyadic adjustment (DAS) is illustrated in Table 8.

Table 9. shows the mean scores on spiritual well being (SWB), RCOPE and dyadic adjustment (DAS) over the different age groups

The mean scores on spiritual well being (SWB), RCOPE and dyadic adjustment (DAS) over the levels of education of the wives is shown in Table 10.

The mean scores on spiritual well being (SWB), RCOPE and dyadic adjustment (DAS) over the different occupations is tabulated in Table 11.

Table 12. shows the mean scores on spiritual well being (SWB), RCOPE and dyadic adjustment (DAS) over the income levels.

DISCUSSION:

Spiritual well being enhances the positive religious coping strategies of the wives of men with alcoholism in this study. When the spiritual well being is low more negative methods of religious coping are used. Low marital adjustment of the wives lead to an increased need to use religious methods of coping and more often negative religious coping is used. More years of alcohol consumption of the patient lead to low spiritual and existential well being in the wife. Wives who had lower education had used religious coping more than those who were higher educated.

ACKNOWLEDGEMENT: None

CONFLICT OF INTEREST: None

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