

Effect of Parents' Marital Satisfaction, Marital Life Period and Type of Family on their Children Mental Health Status

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ABSTRACT This study was conducted on 360 school going (8th, 9th and 10th classes) children and their parents to find out the effect of parents' marital satisfaction, marital life period and type of family on mental health status of their children. The objectives of the study was to find out the effect of type of family and marital life period of parents on their children's mental health status and examine the impact of level of marital life period and level of marital satisfaction of parents on their children's mental health status. Marital satisfaction of the parents was assessed by using Marital Satisfaction scale and mental health status of the children was assessed by using Mental Health Status inventory. Results revealed that marital satisfaction of parents significantly affects mental health status of their children. Parents belonging to joint and nuclear families with high marital satisfaction were compared with parents with low marital satisfaction. Children hailing from high marital satisfaction parent groups of both joint and nuclear families have better mental health than children of parents with low marital satisfaction.

INTRODUCTION

Satisfaction is the state of a person whose tendencies have reached their goal; or affective condition of a person who gained his/her desires. Marital satisfaction is an individual's subjective impression of specific components within his/her marital relationship. It includes roles, interpersonal relationships and reciprocities, prosperities, motivations, inter marital contention factors, privacy preferences, perception of the partner's humour and attribution. It is the product of interaction between husband and wife and the amount of agreement between one's expectations of the marriage and the rewards that marriage provides. A good marriage is the most rewarding experience life can offer. It makes a person feel adequate, desired, approved and complete to a degree which is not possible in any other form of human relationships (Coleman and Miller 1975). Everybody is aware of the relationship between marriage and marital satisfaction. The gift of sexuality is mysterious and enticing a celebratory expression we share with another special person. Sex is natural and normal; where there is no sex there is no marriage. It makes marriage different from

other enduring human relationships. Both are inextricably tied to each other. The thread of sexuality is woven densely into the fabric of human existence. It is a very sensitive barometer for assessing marital relationship. Sex in no way is the entity of marriage; any disturbance in this aspect can be a threat to marriage. Marital satisfaction plays a major role to promote good patterns of personality. It is generally assumed that the longer the duration of marriage, the greater the frequency of marital satisfaction. The satisfaction and dissatisfaction that lead to marital happiness and unhappiness also depends upon the sexual behaviour of the husband and wife.

Becoming a parent involves many changes in behaviour, that is, there are new roles and responsibilities, social approval behaviour, rationality and quality in life. Marital adjustment is associated with individuals' emotional expression, moral judgment, cultural background, personality characteristics, inter-personal skills, social participation and education etc., According to Pervin (1980), from babyhood to early adulthood parents' influence their children's behaviour in all possible ways. (a) They through their own behaviour present situations that elicit certain behavior in children; (b) they serve as role models for identification; and (c) they selectively reward behaviours. The home environment is to be provide satisfaction to a child's need for love, acceptance, belonging, independence etc., which promotes good mental health. Parents are unable to concentrate on psychologi-

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cal requirements of their children due to rapid changes in technology and social system. Industrialization, urbanization, changes in culture, dual career system, and hectic schedule and rush life influence traditional family system. Due to that, the traditional family system, that is, joint family system is gradually disappearing in urban and semi-urban localities and nuclear families are increasing. In joint families children grow under the benign guidance of grandparents and the other elders, interact with different age groups and opposite sex to have mutual understanding and hence, the adjustment problems are less. The way the parents treat their children has a profound impact not only on family relations, but also on their adjustment, attitude, values and intra-psychic behaviour.

Over the past few decades a number of studies have shown that marital satisfaction of parents and type of family has got considerable influence on adjustment and personality development of children (Braun et al. 1979; Su and Hwang 1979; Harriman 1986; White and Shirley 1987; Mody and Vinoda Murty 1988; Huston and Anitha 1991; Conrad 1998; Almquist and Broberg 1999; Antognoni and Lucia 2000; Stephen and Gretchen 2002; Nair 2005; Befler 2005; Munirajamma 2005; McDonald Culp et al. 2006; Sushma Suri and Shabina Tauqir 2007; Aruna and Kiran Rao 2007; Munirajamma et al. 2009). A child's personality continues to develop during school years, the child still has a chance to learn how to love and to be loved, how to tolerate frustration, how to integrate point of view, how to face reality realistically, without feeling from it to channel impulses into socially approved activities. By helping the child to acquire knowledge and tools of learning, the school increases his capacity to make desirable adjustments and provides security and satisfaction. It is expected that these conditions will have some effect on mental health status of children. Keeping the above in view, an attempt is made to find out the influence of parents marital satisfaction and type of family on mental health status of children.

Objectives

The following objectives are framed for the present investigation.

1. To find out the effect of type of family and marital life period of parents on their children mental health status.

2. To examine the impact of level of marital life period and level of marital satisfaction of parents on their children mental health status.

METHODOLOGY

Sample

The sample for the present study comprised 360 school-going children drawn randomly from public and private schools in and around Tirupati town of Andhra Pradesh. Parents of the children were divided into two groups that is, parents with low marital satisfaction and high marital satisfaction (below 20 years and above 20 years of marital life period) from joint and nuclear families.

Mental health analysis questionnaire developed by Munirajamma (2005) was used to assess mental health status of the subjects. The scale consists of 120 items and the items were classified into two broad categories. 1. Assets and 2. Liabilities. Each of these categories was sub-divided into three components having twenty items in each. Assets are positive statements (Close personal relations, Interpersonal skills and Social participation) and liabilities are negative statements (Behavioural Immaturity, Emotional Instability and Feelings of Inadequacy). Marital satisfaction of the parents was assessed by using marital satisfaction scale developed by Prathyusha (1987). The scale consists of thirty-five statements.

Procedure

The tests were administered in two spells. In the first spell, subjects (children) were met in small groups of 5-10 in each and they were selected randomly from a class and assembled in a room. Instructions were given on the questionnaire to mark either 'yes' or 'no' to each statement. In the second spell the researcher met the parents at their respective residences. Short introduction was given to both wife and husband, to mark either 'agree' or 'disagree' for each statement. The collected data was subjected to appropriate statistical treatment. 't' test was applied to compare the mental health status of children of joint family parents with below 20 years of marital life period and above 20 years of marital life period with high and low marital

Table 1: Significance of the difference between the means of the subjects on mental health status based on type of family, level of marital satisfaction and marital life period of parents (N=90)

Component	Joint family with high marital satisfaction (Below 20 years)		Joint family with low marital satisfaction (Below 20 years)		t'value	Level of significance
	Mean	SD	Mean	SD		
Assets						
Close personal relations (A)	14.78	3.25	13.36	2.28	2.40	0.05
Interpersonal skills (B)	15.13	1.54	13.64	2.29	3.62	0.01
Social participation (C)	10.79	2.84	8.78	2.47	3.90	0.01
Total (A+B+C)	43.58	6.39	40.20	6.22	2.54	0.05
Liabilities						
Behavioral immaturity (L)	8.98	1.78	7.53	2.54	3.13	0.01
Emotional instability (M)	10.73	2.28	8.42	2.65	4.44	0.01
Feelings of inadequacy (N)	8.11	2.84	9.96	3.12	2.93	0.01
Total (L+M+N)	28.68	4.72	25.56	5.21	2.95	0.01

satisfaction. The same comparison was done with children hailing from nuclear family with below 20 years and above 20 years of marital life period with high and low marital satisfaction and the results were presented in the following tables.

RESULTS AND DISCUSSION

Table 1 shows that there is significant difference between the two groups among six components of mental health. Children of parents from joint family (below 20 years of marital life period with high marital satisfaction) are compared with children of parents from joint family (below 20 years of marital life period with low marital satisfaction). Children of parents with high marital satisfaction from joint family possess better mental health than the children parents with below 20 of years marital life period with low marital satisfaction. Studies by Munirathanamma (2005), and Munirathnamma

et al. (2009) support the present study. Now a-days parents are concentrating to fulfill the physical needs of the children and fail to concentrate on psychological development of their children. Hectic schedule, dual career system, urbanization and social change are some of the factors that promote maladjustment among children. In the same way parents were sub-divided into two groups based on the type of family, that is, joint family, nuclear family, marital life period and level of marital satisfaction that is, above 20 years of marital life with high marital satisfaction and low marital satisfaction groups. 't' test was applied to compare the children of high and low marital satisfaction parents groups and the results are presented in Table 2.

Table 2 shows that there is significant difference between the two groups. Children hailing from joint family of parents with high marital satisfaction are mentally healthier than children from the other category, that is, parents with low marital satisfaction. The sub-scores of the

Table 2: Significance of the difference between the means of the subjects on mental health status based on type of family, level of marital satisfaction and level of marital life period of parents (N=90)

Component	Joint family with high marital satisfaction (Above 20 years)		Joint family with low marital satisfaction (Above 20 years)		t' value	Level of significance
	Mean	SD	Mean	SD		
<i>Assets</i>						
Close personal relations (A)	15.33	2.52	13.73	2.55	2.99	0.01
Interpersonal skills (B)	15.64	2.19	14.11	2.02	3.45	0.01
Social participation (C)	10.56	3.18	9.31	2.56	2.04	0.05
Total (A+B+C)	41.22	5.59	45.04	6.32	3.04	0.01
<i>Liabilities</i>						
Behavioral immaturity (L)	8.97	1.77	7.49	2.34	3.49	0.01
Emotional instability (M)	10.73	2.84	8.42	2.65	4.40	0.01
Feelings of inadequacy (N)	9.96	3.12	8.49	2.22		0.05
Total (L+M+N)	29.40	5.69	24.56	5.71	4.03	0.01

Table 3: Significance of the difference between the means of the subjects on mental health status based on type of family, level of marital satisfaction and level of marital life period of parents (N=90)

Component	Nuclear family with high marital satisfaction (Below 20 years)		Nuclear family with low marital satisfaction (Below 20 years)		‘t’ value	Level of significance
	Mean	SD	Mean	SD		
<i>Assets</i>						
Close personal relations (A)	15.30	2.52	13.67	3.30	2.69	0.01
Interpersonal skills (B)	15.69	2.19	13.27	3.17	4.14	0.01
Social participation (C)	11.22	2.81	8.42	2.65	4.87	0.01
Total (A+B+C)	45.04	6.32	40.20	6.22	3.67	0.01
<i>Liabilities</i>						
Behavioral immaturity (L)	10.74	2.85	8.49	2.95	4.69	0.01
Emotional instability (M)	10.22	3.66	8.42	2.65	2.67	0.01
Feelings of inadequacy (N)	9.96	2.94	8.44	2.79	4.45	0.01
Total (L+M+N)	29.40	5.69	24.56	5.71	4.03	0.01

sub-components that is, Assets (positive) and Liabilities (negative) shows that children of parents with high marital satisfaction family group are mentally healthier than children with low marital satisfaction parents group. It is fact that due to industrialization and urbanization, joint family system is disappearing and nuclear families are increasing. In joint families children grow under the benign guidance of grandparents and other elders and hence, the adjustment problems are less. Findings of Su and Hwang (1979), Mody and Vinoda Murthy (1988), Antognoi and Lucia (2000), Munirajamma (2005), Munirajamma et al. (2009) corroborate with the present study. Again, the parents were sub- divided based on their type of family (nuclear family), marital life period and level of marital satisfaction that is, parents with high and low marital satisfaction and below 20 years of marital life period. 't' test was employed to compare the two groups children and the results are presented in Table 3.

Results presented in Table 3 show that there is significant difference between the children of high and low marital satisfaction parental groups. The scores obtained by the children from nuclear family with high marital satisfaction parents group in all sub- components were mentally healthier than the children hailing from nuclear family with low marital satisfaction parents group. The sub- scores of the sub-components that is, Assets (positive) and Liabilities (negative) show that children of parents with high marital satisfaction are mentally healthier than children with low marital satisfaction parents group. Marital satisfaction is the product of interaction between husband and wife and it is an amount of agreement between one's ex-

pectations of the marriage and the rewards the marriage provides. It involves many changes in behavior, new roles and more responsibilities and shows some impact on rearing practices, family relations attitudes, values and intra-psychic behavior. Again the parents were sub- divided based on the type of family (nuclear family), marital life period and level of marital satisfaction that is, parents with high and low marital satisfaction groups with above 20 years of marital life period. 't' test was employed to compare the two groups children and the results are presented in Table 4.

Table 4 shows that there is significant difference between the two groups of children, that is, children of parents from nuclear family with high marital satisfaction and parents with low marital satisfaction, on six sub- components of mental health. The scores of the sub-components that is, Assets (positive) and Liabilities (negative) show that children belong to nuclear family parents with high marital satisfaction are mentally healthier than the children belong to parents with low marital satisfaction.

CONCLUSION

The present study reveals that:

- There is significant impact of type of family on the mental health status of the children. Children of parents with high marital satisfaction from joint family possess better mental healthier than the children parents with below 20 of years marital life period with low marital satisfaction.
- Marital life period and marital satisfaction of the parents have shown significant impact on mental health status of their child-

Table 4: Significance of the difference between the means of the subjects on mental health status based on type of family, level of marital satisfaction and level of marital life period of parents (N=90)

Component	Nuclear family with high marital satisfaction (Above 20 years)		Nuclear family with low marital satisfaction (Above 20 years)		*t\value	Level of significance
	Mean	SD	Mean	SD		
Assets						
Close personal relations (A)	13.93	2.92	11.34	2.47	2.28	0.05
Interpersonal skills (B)	14.73	3.25	12.27	3.27	2.48	0.05
Social participation (C)	14.99	3.19	12.74	3.42	2.56	0.05
Total (A+B+C)	43.77	5.72	37.62	5.32	2.72	0.05
Liabilities						
Behavioral immaturity (L)	13.42	2.78	12.82	3.26	2.75	0.01
Emotional instability (M)	15.13	2.27	13.47	2.34	2.93	0.01
Feelings of inadequacy (N)	13.42	2.77	12.96	3.01	2.17	0.05
Total (L+M+N)	44.61	6.23	39.47	2.59	5.92	0.01

ren. Children of parents with high marital satisfaction and high marital life period are mentally healthier than children with low marital satisfaction parents and below of 20 years of marital life period.

- Children from joint family and parents with high marital satisfaction and the children belonging to nuclear family of parents with high marital satisfaction have better mental health than the other groups.

RECOMMENDATIONS

At present India is rapidly changing through urbanization, industrialization and civilization. Dual career system and hectic schedules in the present scenario minimize the human interpersonal relations. Parents are sparing less time to identify or attend to the problems of their own children. India is a developing country and more than eighty percent of the population living in villages. There is a dearth of mental health personnel in the country. Due to the scarcity of funds the Indian government is not paying much importance to mental health programmes at school level. It is difficult to appoint mental health personnel at school level. At least a visiting team consisting of a school counselor, a psychologist, a social worker and a physician to visit each school one in a month is advised. Securing mental health in case of pupils may involve counseling parents, educate teachers, in addition to counseling the pupils themselves.

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REFERENCES

- Almquist K, Broberg AG 1999. Mental health and social adjustment in young refugee children 31years after their arrival in Sweden. *Journal of American Academy of Child and Adolescent Psychiatry*, 38: 723-730.
- Antognoi T, Lucia P 2000 *Child Relationship – Family Structure and Loneliness among Adolescents*. Ph.D. Thesis. Texas Women's University, USA.
- Aruna RMK, Kiran Rao 2007. Attachment style in relation to family functioning and distress in college students. *Journal of Indian Academy of Applied Psychology*, 2: 135- 142.
- Befler ML 2005. Child and adolescent mental health around the world: Challenges for progress. *Journal of Indian Association for Child and Adolescent Mental Health*, 1: 3.
- Braun GM, Powodzenie MA, Postawa 1979. Success of marriage and religious attitudes of spouses. *Psychologia*, 27(4): 71-84.
- Coleman RE, Miller AG 1976. The relationship between depression and marital maladjustment in an ethnic population: A malotrait-multimethod study. *Journal of Consulting and Clinical Psychology*, 43: 647-651.
- Conrad BS 1998. Maternal depressive symptoms and homeless children's mental health: Risk and parenthood, family relations. *Journal of Applied Family and Child Studies*, 35: 233-239.
- Harriman LC 1986. Marital adjustment as related to personal and marital changes accompanying parenthood: Family relations. *Journal of Personality and Social Psychology*, 61: 721-733.
- Huston TL, Anita LA 1991. Socio- emotional behavior and satisfaction in marital relationships: A longitudinal study. *Journal of Personality and Social Psychology*, 61: 721-733.
- McDonald Culp A, Culp RE, Noland D, Anderson JW 2006. Stress, marital satisfaction and child care provision by mothers of adolescent mothers. *Children and Youth Services Review*, 673-681.

- Mody SN, Vinoda Murthy N 1988. The study of mental health of children of working mothers. *Journal of Personality and Clinical Studies*, 4: 161-164.
- Munirajamma N 2005. *Impact of Parents' Marital Satisfaction on Their Children Personality, Mental Health and Scholastic Achievement*. Ph.D. Thesis, Unpublished. Sri Venkateswara University, Tirupati.
- Munirajamma N, Viswanatha Reddy S, Babu Rao G 2009. Impact of parents' marital satisfaction on their children mental health status. *Indian Psychological Review*, 72 (4): 199-202.
- Nair MKC 2005. Family life and life skills education of adolescents: Trivandrum experience. *Journal of Indian Association for Child and Adolescent Mental Health*, 1: 3.
- Pervin LA 1980. *Personality: Theory, Assessment and Research*. New York: John-Wiley and Sons.
- Prathyusha K 1987. *Marital Satisfaction of Mothers and Mental Health Status of Their Children*. M Phil Dissertation, Unpublished. Sri Venkateswara University, Tirupati.
- Su CW, Hwang 1979. Parent-child relations and personality development of Chinese school children. *Bulletin of Educational Psychology*, 12: 195-212.
- Sushma Suri, Shabina Tauqir 2007. Mental health and adjustment of undergraduates. *Journal of Indian Academy of Applied Psychology*, 2: 107- 109.
- White W, Shirley B 1987. Successful and discipline-problems students. A comparative analysis. *High School Journal*, 70: 111-114.