

Assess the Correlation between the Level of Co-dependency and Quality of Marital Life among Wives of Clients with Alcohol Dependence in Selected De-Addiction Centre, Bengaluru

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ABSTRACT

Aim: Present study attempts to assess the correlation between co-dependency and quality of marital life among wives of alcohol dependence clients.

Materials and Methods: Descriptive correlational design with a non-probability purposive sampling method was used. The sample of this study comprised of 50 wives of clients with alcohol dependence admitted to the Deaddiction center. Data was collected using the Socio-demographic proforma, co-dependency scale, and marital quality scale to assess the correlation between the level of co-dependency and quality of marital life.

Results: In this study, the result shows that the sample's co-dependency scale indicates that 8% of respondents were moderately co-dependent and 92% were highly co-dependent, and none of them were completely independent. The quality of marital life scale shows that 78% were moderately affected, 20% have severely affected, and the remaining 2% were mildly affected by marital quality. The computed value of Karl Pearson's correlation coefficient was + 0.627. So this shows there exists a positive correlation between co-dependency and the Quality of Marital life. Analysis of socio-demographic variables with co-dependency level shows no significance, and quality of marital life showed a significant association between husbands' educations, duration of husband's alcoholism, duration of stay in the de-addiction center, number of children. Thus the study result revealed a positive correlation between the level of Co-dependency and quality of marital life.

Conclusion: The study's findings revealed a positive correlation between the level of co-dependency and quality of marital life among wives of clients with alcohol dependence.

Keywords: Co-dependency, Quality of marital life, Alcohol dependence.

INTRODUCTION

Alcoholism is a chronic disease characterized by uncontrolled drinking and preoccupation with alcohol. It is the inability to control drinking due to both a physical and emotional dependence on alcohol. This can lead to a wide range of issues and impact professional goals, personal matters, relationships, and overall health. Over time, the severe side effects of consistent alcohol abuse can worsen and produce damaging complications.¹

'Alcoholic' is a term used to describe someone who suffers from alcoholism - they often have a physical or psychological desire to consume alcohol beyond their capacity to control it, regardless of how it affects their life.²

According to the National Institute of Health (NIH), in 2015, 15.1 million American adults (6.2 percent of the population) had an alcohol use problem. According to the World Health Organization (WHO), globally, 3.3 million

deaths every year result from the harmful use of alcohol. Alcoholism is a term for long-term addiction to alcohol. An alcoholic is a person, while alcoholism is an illness. Alcoholism is a long-term (chronic) disease.³

Alcohol Use Disorder (AUD) is a chronic relapsing brain disease characterized by an impaired ability to stop or control alcohol use despite adverse social, occupational, or health consequences.⁴

The impact of alcoholism in a marriage is profound. All chronic health issues impact marriage and family relationships, but none in quite the same destructive manner or the same depth as alcoholism. To preserve their sanity and sometimes safety, the non-alcoholic partner may be forced to put a great deal of emotional and physical distance between them and their alcoholic spouse. On the other hand, sometimes the non-alcoholic partner in the marriage becomes severely co-dependent and gives the alcoholic too much of the wrong kind of support and compassion.⁵

Of married couples who get into physical altercations, some 60-70 percent abuse alcohol. In time, family members may even develop symptoms of co-dependency, inadvertently keeping the addiction alive, even though it harms them. The family members of alcoholics often report various negative emotional states ranging from guilt, shame, anger, fear, grief, and isolation. The National Institute on Alcohol Abuse and Alcoholism lists some of the most common problems that arise between spouses when one partner abuses alcohol: Marital conflict, Infidelity, Domestic violence, unplanned pregnancy, and financial instability, Stress, Jealousy, and Divorce⁶

The wives of alcoholics undergo intense trauma and stress in their domestic environment, which brings about major psychological problems in them. Domestic violence, emotional violence, and financial violence are some of the frequently

occurring and well-recognized problems faced by wives of alcoholics. Moreover, the alcoholic is so obsessed with drinking that he ignores the needs and situations of other family members and is unable to take up his expected roles and responsibilities. In such a scenario, the functions which husbands normally carry often fall on the wives that further add to their burden and suffering.⁶

Coping strategies used by the wives of alcoholics are the concerted efforts both behavioural and psychological employed by them to master, tolerate, reduce, or minimize the stress associated with their husband's drinking. Traditionally, such coping is thought to involve two major focuses: emotion-focused and problem-focused. Problem-focused coping involves some active action to alleviate stressful circumstances, and emotion-focused coping consists of regulating the emotional consequences of stressful events.⁶

OBJECTIVES OF THE STUDY

- To assess the level of co-dependency among wives of clients with alcohol dependence in selected de-addiction centres, Bengaluru.
- To assess the quality of marital life among wives of clients with alcohol dependence in selected de-addiction centres, Bengaluru.
- To assess the correlation between co-dependency and quality of marital life among wives of clients with alcohol dependence in selected de-addiction centres, Bengaluru.
- To determine the association of co-dependency and quality of marital life among wives of clients with alcohol dependence with selected socio-demographic variables in selected de-addiction centres, Bengaluru.

HYPOTHESIS

- H₁: There will be a significant association between the levels of co-dependency with selected demographic variables

- H₂: There will be a significant association between the qualities of marital life with selected demographic variables.
- H₃: There will be a significant co-relationship between the level of co-dependency and quality of marital life among wives of clients with alcohol dependence.

OPERATIONAL DEFINITIONS:

Assess: It refers to evaluate or estimate the nature, ability, or quality. This study assesses the spouses of Alcohol dependent clients in terms of co-dependence and the quality of marital life.

Correlation: Correlation is defined as a relationship between two variables. In this study, Correlation refers to the level of co-dependency and quality of marital life.

Co-dependency: Excessive emotional or psychological reliance of wives on alcoholic husband, typically one with an illness or addiction who requires support.

Quality of marital life: The subjective evaluation of a married couple's relationship on a number of dimensions and evaluations.

Wives of Alcoholics: It refers to women living with their alcoholic husband for more than 2 years and age between 25-50years.

Alcohol dependence is a cluster of behavioral, cognitive, and physiological phenomena that develop after repeated alcohol use. These typically include a strong desire to take alcohol and difficulties in controlling its use.

RESEARCH APPROACH

A non-experimental research approach was considered to accomplish the objectives.

RESEARCH DESIGN

A descriptive correlational design is chosen for the present study.

SETTING OF THE STUDY

The study was conducted in Selected De-addiction Centres at Bengaluru.

POPULATION

The study was conducted among Wives of Alcohol Dependence clients in selected De-addiction centre, Bengaluru.

SAMPLE AND SAMPLING TECHNIQUE

The sampling technique used for the present study was Purposive sampling

SAMPLE SIZE

The sample of this study comprised of 50 wives of alcohol-dependent clients. The non-probability purposive sampling method was used to draw the sample.

INCLUSION CRITERIA AND EXCLUSION CRITERIA

Inclusion criteria:

- Wives who are living with their alcoholic husbands.
- Alcoholic clients wives who are available at the time of data collection

Exclusion criteria

- Alcoholic client's wives who are not willing to participate in the study.

TOOLS AND TECHNIQUE

Individuals who fulfilled the inclusion criteria were involved in the study with their consent. The tool used for the analysis comprised a Socio-demographic performa, Modified Self-Administered scale to assess the level of co-dependency and Quality of Marital life.

DESCRIPTION OF THE TOOL

In the present study following tool was used; it consists of three parts.

SECTION 1: Socio-demographic data

SECTION 2: The modified scale to assess the co-dependency level (Spann-Fischer co-dependency scale)

SECTION 3: The standardized scale for the Indian population is called the marital quality scale developed by Shah (1995).

Section 1: Sociodemographic Data

Investigator constructed this tool. It contained 11 items for obtaining information regarding age, religion, type of family, type of marriage, duration of married life, number of children, education, occupation, etc.

Section 2: Modified Co-dependency Scale

The investigator modified this tool based on the study's objectives to assess the Co-dependency level of wives of alcoholics.

The tool is a rating scale with 16 questions, and Individual items are rated on a 3-point Likert Scale and then summed with two reversed items to describe co-dependency on a scale from a high of 48 to a low of 16. The resulting score will be interpreted as follows.

Independent score: 0-16 score

Moderate Co-dependency score: 17-32 score

High Co-dependency score: 33-48 score

Section 3: Quality of Marital life Scale

This is a standardized scale, and it is selected after many reviews. It has 50 questions; the scoring for Quality of Marital life consists of 4 scores where a score of 1 is given for USUALLY, a Score of 2 for SOMETIMES, a Score of 3 for RARELY, and a score of 4 for NEVER.

Good : 40 to 70 score

Mildly affected : 71 to 90 score

Moderate Affected : 91 to 110 score

Severe Affected : Above 110 score

PILOT STUDY

A pilot study was conducted among 5 samples that were admitted in the Deaddiction ward based on the sampling criteria was selected. The pilot study results show that 80% of the samples were highly

codependent, whereas 82% of the samples had severely affected marital quality.

DATA COLLECTION PROCEDURE

Formal administrative permission was obtained from the Administrator of Spandana Hospitals Pvt. Ltd, to conduct the main study. The subjects were selected according to inclusion criteria. The sample consisted of 50 members of wives of clients with Alcohol Dependence based on the inclusion criteria. Informed consent was taken from the wives. The data was collected using socio-demographic performa, Co-dependency assessment scale, and marital life assessment scale quality.

RESULTS

The analysis and interpretation of data of this study are based on data collected through a Self-administered scale from wives of Alcohol Dependence clients in a selected Deaddiction centre, Bengaluru (N=50). The results were compared using descriptive and inferential statistics based on the following objectives. The level of significance was set at 0.05%.

SECTION I: SOCIODEMOGRAPHIC DATA OF WIVES OF CLIENTS WITH ALCOHOL DEPENDENCE.

The results showed that most 40% of the respondents belong to the age group between 30-35years, with 60% of respondents belonging to the Hindu religion. Concerning education, 56% of husband's educational status is PUC, and 46% of their wives had high school education. The majority, 50% of respondents husbands, were Private employees, whereas 82% of their wives were homemakers. Most (60%) of respondents had an annual income between 2lakhs-3lakhs. 70% of respondents belong to the nuclear family, and 62% of respondents were from rural areas. Among them, 48% of respondents had 11-20years of marriage life. The majority, 70%, of respondents had ≤ 10 years of alcohol consumption, with 52% of them staying once in a De-addiction centre.

Table 1: Frequency and percentage distribution of Sociodemographic variables, N=50

Demographic Variables	Frequency	Percentage (%)
Age in years		
25-30years	06	12
30-35years	20	40
35-40years	20	40
40-45years	02	4
45-50years	02	4
Religion		
Hindu	30	60
Christian	14	28
Muslim	06	12
Educational Status of husband		
No formal education	04	08
Primary	04	04
High school	04	08
PUC	28	56
Degree	12	24
Educational Status of wife		
No formal education	01	02
Primary	01	02
High school	23	46
PUC	14	28
Degree	11	22
Occupation of husband		
Government	02	04
Private	25	50
Self/Business	21	42
Others	02	04
Occupation of Wife		
Homemaker	41	82
Private	04	08
Self	05	10
The annual income of Family		
1lakhs to 2lakhs	16	32
2lakhs to 3lakhs	30	60
3lakhs to 4lakhs	04	08
Type of family		
Nuclear	35	70
Joint	11	22
Extended	04	08
Residence		
Rural	31	62
Urban	18	36
Semi-urban	01	02
Married life in years		
≤10years	22	44
11-20years	24	48
≥21years	04	08
Duration of consumption of Alcohol		
≤10years	35	70
11-20years	15	30
Number of admissions in De-addiction centre		
1	26	52
2	22	44
3	02	04

SECTION II: CLASSIFICATION OF CO-DEPENDENCY LEVEL AMONG WIVES OF CLIENTS WITH ALCOHOL DEPENDENCE.

The level of Co-dependency is categorized into three levels; Independent

(0-6), moderate score (17-32), and High co-dependency (33-48) scores. The result shows that most 92% of respondents have a high level of co-dependency, and the remaining 8% of respondents have a moderate level of co-dependency.

Nandhini. A. Assess the correlation between the level of co-dependency and quality of marital life among wives of clients with alcohol dependence in selected de-addiction centre, Bengaluru.

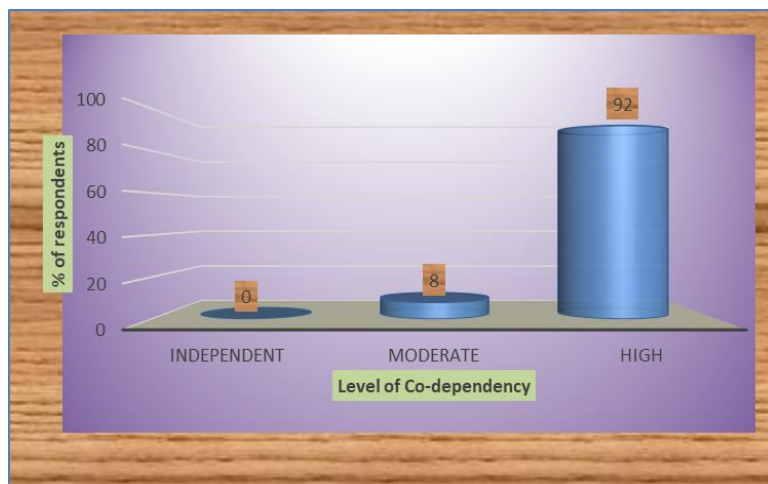


Figure 1: Distribution of respondents by the level of Co-dependency

TABLE 2: MEAN RESPONSE ON CO-DEPENDENCY SCORES AMONG WIVES OF CLIENTS WITH ALCOHOL DEPENDENCE

Aspects	Statements	Max. Score	Range Score	Co-dependency		
				Mean	SD	Mean (%)
Co-dependency	16	48	30-46	40.02	3.733	83.75

The below table shows that the mean level of Co-dependency is 40.02 and the Standard deviation is 3.733

SECTION III: QUALITY OF MARITAL LIFE AMONG WIVES OF CLIENTS WITH ALCOHOL DEPENDENCE

The result shows that the majority 78% have moderately affected marital quality, 20% have severely affected marital life quality, and the remaining 2% have mildly affected marital quality.

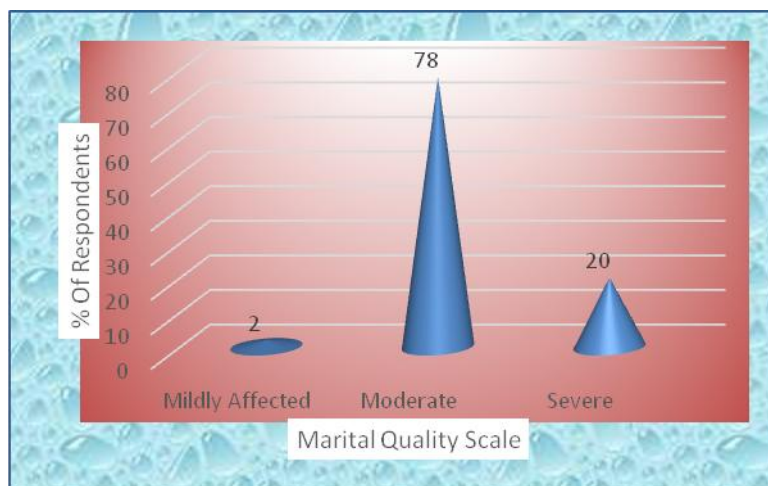


Figure 2: Distribution of respondents by Quality of Marital Life.

TABLE 3: MEAN RESPONSE ON QUALITY OF MARITAL LIFE AMONG WIVES OF CLIENTS WITH ALCOHOL DEPENDENCE. N=50

Aspects	Statements	Max. Score	Range Score	Quality of marital life		
				Mean	SD	Mean (%)
Quality of Marital life	40	160	90-118	103.24	7.61	64.52

The result shows 40 statements in the Quality of Marital life, and the mean percentage is 64.52 with a mean and SD of 103.24±7.61.

TABLE 4: RELATIONSHIP BETWEEN THE LEVEL OF CO-DEPENDENCY AND QUALITY OF MARITAL LIFE AMONG WIVES OF CLIENTS WITH ALCOHOL DEPENDENCE. N=50

Aspects	Max. Score	Response			Correlation Coefficient (r)
		Mean	SD	Mean (%)	
Co-dependency	48	40.02	3.733	83.37	+0.67*
Quality of Marital life	160	103.24	7.61	64.52	

The result shows that the mean percentage of co-dependency was 83.37 with a mean and SD 40.02 ± 3.733 , and with regard to Quality of Marital mean percentage was 64.52 with a mean and SD 103.24 ± 7.61 . The computed value of Karl Pearson's correlation coefficient was + 0.627. So this shows there exists a positive correlation between co-dependency and the Quality of Marital life.

Hence, there is a significant correlation between co-dependency and quality of marital life among wives of clients with alcohol dependence.

ASSOCIATION BETWEEN CO-DEPENDENCY WITH SELECTED DEMOGRAPHIC VARIABLES.

There was no significant relation between co-dependency and demographic variables like age, education of husband, education of wife, occupation of husband, occupation of wife, annual income of the family, and married life in years, husband's alcoholism, and the number of admissions in the de-addiction centre. Hence the research hypothesis H1 rejected that there is no significant association between the level of co-dependency and selected demographical variables.

ASSOCIATION OF QUALITY OF MARITAL LIFE WITH SELECTED DEMOGRAPHIC VARIABLES.

There was a significant relationship between quality of marital life and demographic variables like education of husband (p value=0.001), duration of husband's alcoholism (p value=0.008), number of admissions in the de-addiction centre (p value=0.047). However, there was no significant relationship between quality of marital life and demographic variables like age, education of wife, occupation of husband, occupation of wife, annual income

of the family, married life in years. Hence the research hypothesis H₂ is accepted.

DISCUSSION

The study revealed that the mean percentage of co-dependency was 83.37 with a mean and SD 40.02 ± 3.733 , and with regard to Quality of Marital mean percentage was 64.52 with a mean and SD 103.24 ± 7.61 . Furthermore, the computed value of Karl Pearson's correlation coefficient was + 0.627. This shows there exists a positive correlation between co-dependency and the Quality of Marital life. Therefore, there is a significant correlation between co-dependency and quality of marital life among wives of clients with alcohol dependence.

The recent study supports the present study, where a correlational study to assess the co-dependency and relationship satisfaction among spouses of alcohol abusers was used. The sample consisted of female spouses of alcohol abuse (N=70). The sample was taken from different treatment centres of Lahore city through a purposive sampling technique. Data was collected by using a co-dependent scale and relationship satisfaction survey. The present study shows a significant relationship between co-dependency and interpersonal satisfaction among spouses of an alcohol abuser.⁷

CONCLUSION

It is indicated that health professionals should concentrate efforts in educating the wives and alcohol-dependent clients regarding the effect of alcohol on their marital life based on which wives are dependent psychologically. It is concluded that the findings of the study revealed that there is a positive correlation between the level of co-dependency and quality of marital life among wives of clients with

alcohol dependence. Furthermore, there was a significant association between quality of marital life with selected socio-demographic variables, whereas no significance with the level of co-dependency.

In this scenario, alcoholism has become one of the significant problems. It affects not only the client but also the family members, especially the wives of alcoholics. This kind of study enables to solve the problems faced by wives in their marital status. Educational campaigns involving student nurses can be conducted to develop awareness about alcoholism among the general public. This can improve the student's ability to provide health education. An adequate opportunity has to be provided to student nurses to work in various community areas to gain efficient skills in preventing alcoholism.

The sample size for the study was limited to 50 samples of wives of clients with alcohol dependence. Hence the result of the study cannot be generalized. Moreover, the study is limited only to those who are admitted to the De-addiction centre. The wives of clients with Alcohol dependence who were not living with their husbands are not involved in the study.

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