



Original Article

The mediating role of the couples' mental health in mental health and marital satisfaction of each one

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Abstract

Introduction: Marital satisfaction is one of the most important aspects of compatibility in an adult's life, which is influenced by several factors. This study has been done with purpose of examination of the mediating role of the couples' mental health in mental health and marital satisfaction each one.

Materials and Methods: In this descriptive-analytical study, 228 men and women (57 rural couples and 57 urban couples) were selected among parents of educated students of Payam-e-Noor University, Bonab branch, in academic year of 2010-11 through random sampling. Then, Enrich marital satisfaction questionnaire and check list of mental health were implemented for them. The data were analyzed by statistical tests such as independent t-test, Pearson correlation and hierarchical multiple regression.

Results: The results showed that there was no significant difference between marital satisfaction of males and females, but in this study females had poorer mental health than other one ($P < 0.05$). Partner's mental health was partly mediated in the relationship between person's mental health and marital satisfaction (both women and men). In addition, person's mental health was also independently relevant to marital satisfaction ($P < 0.001$).

Conclusion: It seems that improvement of couple's mental health can influence another partner's mental health and couple' marital satisfaction positively.

Keywords: Couple, Marital satisfaction, Mental health

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Introduction

Marriage has been described as the most important and most fundamental human being relationship. Because it provides the basic structure for establishing family relationships and also training the next generation. Moreover, it is regarded as a transition event in the life cycle and also being married is one of the most complex and the most difficult transitions of life cycle (1). One of the most important determinants of healthy family function is marital satisfaction (2). Ellis defines marital satisfaction as real feeling of the couples' pleasure, satisfaction and enjoyment from all their own relations. Quality and status of marriage have implications on the role of parents, physical and

mental health and job satisfaction as well. Ability to understand and accept thoughts, feelings and emotions of each one creates a sense of high satisfaction in marital life. By view of Spanier and Lewis, marital satisfaction is a state of satisfaction in marriage which is defined by intrapersonal perception (reaction experienced internally) or interpersonal perception (compromise between the one's expectations and other's behavior (3). Several factors affect marital satisfaction including satisfaction of partner's mood (4), trust, loyalty, love (5), and income and employment (6, 7). Age and education of the individual and his partner (8), normal sexual function (9), and emotional stability of the couples (10), are other components of marital satisfaction. Of course, these factors may be different for men and women. Marital satisfaction can be directly or indirectly affected by mental health of family members. Mental health is a kind of science

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and art that helps people be psychologically and emotionally adapted to their own environment in terms of developing appropriate ways as well as choosing more favorable solutions for solving problems (11). Psychological structure involves subunits such as life satisfaction, marital satisfaction, job satisfaction, happiness and so on (12).

Some mental disorders disrupt marital relationships more than other ones. Whisman (13) has considered the relation between marital distress and psychiatric disorders of the first kind of DSM in a survey of married population of the United States. Marital distress was related to anxiety disorders, mood, and substance abuse disorders. Bipolar disorder, alcohol abuse disorder and generalized anxiety disorder were most relevant to marital distress. The relationship between major depression and marital distress became stronger with increasing age. In the first months and years of life, mental health status of partner may not have a great impact on marital quality. However, gradually the couples live together and marital interaction occurs between them, so the physical and mental health of each one can affect the health and satisfaction of another one. Therefore, this study was done on the couples with more than 20 years of marital life, by the aim of the hypothesized model test of Figure 1 which shows the effect of individual's mental health and his/her partner on marital satisfaction.

The objectives of this study were to determine the relationship between mental health and marital satisfaction of each partner and assess the mediated role of partner's mental health. Simply put, this research was to understand among the long-married couples, how has been the relationship between mental health and marital satisfaction of each partner? And whether the present relationship is due to the relationship of two variables (marital satisfaction and mental health) with partner's mental health or mental health of the individual can be by itself an independent and effective factor for marital satisfaction?

Materials and Methods

This study is a descriptive cross-sectional research of correlation. For this purpose, 228 males and females (114 couples) married more than 20 years, were randomly and equally selected among parents of students studied in Payam-e-Noor University, Bonab branch, in 2010-2011 in terms of location (57 rural couples and 57 urban couples). Then they filled in Enrich marital satisfaction questionnaire (Soleimani, 1994) and Mental Health Checklist.

This research involves fathers and mothers 38-63 years old who were still living together. Regarding the purposes of this study, people who were divorced or had lost his/ her partner, were excluded.

Research instruments

- *Enrich Marital Satisfaction Scale*: This questionnaire with 115 questions and 12 scales designed by David Olson, Drakman and Fournier includes contractual response, marital satisfaction, personal issues, marital relationships, conflict resolution, financial supervision, leisure time activities, sexual relations, marriage and children, relatives and friends, egalitarian roles, and ideological orientation. It has been scored from one to five based on Likert 5-degree scale. This questionnaire of 47 questions containing 5 options strongly agree, agree, neutral, disagree, strongly disagree was prepared by Soleimani in 1373. This scale is known as a valid research tool and is relevant to changes which occur during the human life and also are sensitive to changes in family. In addition, it is used in marriage counseling and its improvement (14). Its reliability was done by Soleimani through α coefficient 0.95. Rasouli (15) obtained 0.92 for reliability coefficient of the questionnaire per a week by retest method. In the present study, it was 0.93 for Cronbach's alpha coefficient in this scale.

- *Mental Health Checklist (MHC)*: This questionnaire consists of two parts: demographic and Checklist. It measures agitation, restlessness, loneliness, hopelessness and anger. Validity and reliability of this questionnaire were evaluated by Karami. The reliability of this test has been 0.70 and 0.65 for bisection method (correlation of entire questions) and retest method (retest at intervals of two weeks) respectively. Test is reliable in both internal consistency and scores stability (11). A higher score indicates individual's lower mental health.

Results

In this study, there were 228 people (114 women and 114 men) including 57 rural couples and 57 urban couples. According to the Table 1, in this study, the average and standard deviation of mental health were for women 18 and 39.3 respectively. These items for men were considered 17 and 2.48 respectively. 67.98 and 14.18 were rate of mean and standard deviation of marital satisfaction in women and, on the other hand, 102 and 18.17 in men. For all people, the average of mental health and standard deviation were counted 5.17 and 3 respectively. These criteria for marital satisfaction equated to

3.100 and 7.17 respectively.

Table 1. The mean and standard deviation of variables on sex and for the entire studied population

Variable	Average	Standard deviation
Wives' mental health	10.0	3.40
Husbands' mental health	17.0	2.48
Wives' marital satisfaction	98.7	18.14
Husbands' marital satisfaction	102	17.18
Mental health of all people	17.5	3.00
Marital satisfaction of all people	100.3	17.70

Independent t-test was used for consideration of significant meaning difference of mental health and marital satisfaction in women and men (Table 2).

Table 2. Results of Levene's test for equal variance and independent t-test for the same scores among the couples

Index	Levene's test		independent t-test			
	F	Sig.	t	df	Sig.	Differences of averages
Marital satisfaction	0.07	0.3	-1.4	225.325	0.16	-3.3
Mental health	13.60	0.0001	2.52	226	0.013	0.99

The results of Levene's test showed that marital satisfaction variance is similar among groups (women and men) ($P>0.05$). But about the variance of mental health scores in men and women, the assumption of homogeneity of variances of two groups has been violated, then the results of the second row were reported based on independent t-test. The results of t-test showed that men and women are not different from each other in terms of marital satisfaction ($P>0.05$), but women's mental health scores average is significantly higher than men's ($P<0.05$); in other words, the women's mental health in this study was lower than men's. To investigate the correlation among variables, Pearson correlation test was used (Table 3).

Table 3. Correlation between mental health and marital satisfaction in the couples

	Wives' mental health	Husbands' mental health	Wives' marital satisfaction	Husbands' marital satisfaction
Wives' mental health	-			
Husbands' mental health	0.60**	-		
Wives' marital satisfaction	-0.66**	-0.77**	-	
Husbands' marital satisfaction	-0.67**	-0.79**	0.88**	-

** $P<0.001$

According to Table 3, the remarkable correlation can be seen between mental health and marital satisfaction in both women and men ($P<0.001$). Also, there was a direct correlation among the couples' marital satisfaction ($P<0.001$). To determine the mediating role of a variable, there should be four conditions for determining mediating variable:

1. There should be a significant relationship between independent variables and intermediate variables.

2. There should be a relationship between the mediator and the dependent variables.

3. There should be a significant relationship between the dependent and independent variables.

4. The relationship between the dependent and independent variables significantly reduces due to the presence of mediator variable in regression equation. If the relationship between the dependent and independent variables is reduced to zero, thus the variable became completely interface and if the relationship between these two variables is decreased; but becomes still significant, the variable is partially a mediator. This study has separately considered this model for each partner. Thus, according to the table (3), there are two first conditions for determining a mediator variable. For men, there is a meaning relationship between man's mental health and marital satisfaction ($r= -0.79$) as well as between women's mental health and men's marital satisfaction ($r= -0.67$). On the other hand, it can be seen a meaning relationship between women's mental health and marital satisfaction ($r= -0.66$) as well as between man's mental health and his wife's marital satisfaction ($r= -0.77$) ($P<0.001$). To determine the third and fourth conditions, hierarchical multiple regression was used. Accordingly, hierarchical regression analysis was done for variable of individual's mental health and variable of partner's by introducing the individual's mental health in the first step and partner's in the second one. The results of this analysis allows the relationship between the individual's mental health and his marital satisfaction to be determined independent of the mental health (the third condition). Also, it can be assessed that if standardized regression coefficient of mental health reduces after introducing the variable of partner's mental health (Fourth condition). Tables 4 and 5 indicate the results of hierarchical regression analysis for men and women respectively. It is reminded that high score of mental health shows that there is a problem in an individual.

Table 4. Summary of hierarchical regression analysis of predictive variables of marital satisfaction in men

	Predictor	A β	B β	Variable R ²
First step	Wife's mental health	*0.67		*0.45
Second step	Wife's mental health		*-0.3	*0.23
	Husband's mental health		*-0.6	

* $P < 0.001$ β A: standardized regression coefficient (beta) without regarding husband's mental health to regression analysis β B: standardized regression coefficient (beta) with regarding husband's mental health to regression analysis

In the first step of regression analysis, man's mental health regression was done in comparison with marital satisfaction showing there is a significant negative correlation between man's mental health and marital satisfaction ($P < 0.001$, $\beta = -0.67$). In the second step, the woman's mental health variable was considered. After evaluating that, the beta coefficient was significantly declined from -0.67 to -0.30. In fact, this decline shows that woman's mental health has been partially a mediator in the relationship between man's mental health and his marital satisfaction (fourth condition).

Table 5. Summary of hierarchical regression analysis of variables predicting women's marital satisfaction

	Predictor	A β	B β	Variable R ²
First step	Husband's mental health	*0.77		*0.6
Second step	Husband's mental health		*-0.59	*0.06
	Wife's mental health		*-0.59	

* $P < 0.001$ β A: standardized regression coefficient (beta) without regarding the women's mental health to the regression analysis β B: standardized regression coefficient (beta) with regarding the women's mental health to the regression analysis

For women in the first step, the regression of women's mental health was conducted on marital satisfaction in women and showed that there is a significant negative correlation between women's mental health and her marital satisfaction ($P < 0.001$, $\beta = -0.77$). In the second step, the man's mental health variable was analyzed and consequently beta coefficient was significantly decreased (from -0.77 to -0.59). This reduction showed that man's mental health has partially been a mediator in relationship between woman's mental health and her marital satisfaction (fourth condition). Men's mental health stated 23% of the total variance of men's marital satisfaction after controlling effect of mental health of his wives ($R^2 = 0.23$). It was 6% of the total variance of marital satisfaction after controlling the effect of partners' mental health ($R^2 = 0.06$).

Discussion

The goal of this research is to consider the relationship between individual's mental health and his/ her marital satisfaction as well as the role of partner's mental health as a mediating variable. The results show that partner's mental health becomes a mediator in the relationship between mental health and marital satisfaction of the couples. Individual's mental health alone has an independent meaning relation with marital satisfaction.

This research along with some studies found a significant relationship between mental health and marital satisfaction (5,9,17-19).

In this regard, Salimi and Tayebi (20) have also observed that most dialysis patients experience more marital conflict. Studies done by Hartley et al. (6) and Tara Buck et al. (21) on parents having children affected Autism indicated that marital satisfaction of this group of parents is lower than others. In addition, parents who have unhealthy children with chronic diseases are more dissatisfied than others (22). In other words, it seems that stressful factors such as one's or other family members' illness can affect mental health and subsequently marital satisfaction. Larson and Holman take account effective three special factors in marital satisfaction including contextual factors (social and cultural); personal characteristics and behavior of the couples; and their interactive process. They found that factors related to those mentioned above, predict marital satisfaction well. Some studies show that the spousal support (1), and the similarities and religious heterogeneity between spouses (23) which are related to the mentioned factors, are affecting the marital satisfaction. Three factors mentioned in the study done Larson and Holman can be created spontaneously in the couples having marital life for long time. Griffin (24) has considered marital satisfaction among those have been married for more than 40 to 50 as well as 60 to 70 years. Their results showed a more positive attitude in those who had a long-term marriage and also the relationship between marital satisfaction and mental health in women was stronger than men's. Contrary to Griffin's findings (24), in this study there is a stronger relationship between marital satisfaction and mental health in men. But women's marital satisfaction was more affected by their husband's mental health. In research of Bakhshayesh and Mortazavi (25), the relationship of duration of marriage was not significant with marital satisfaction and general health, but had a reverse and significant relationship with sexual satisfaction (as one of the factors influencing marital satisfaction),

so that people married recently had higher sexual satisfaction. This issue should be noted that the differences between the couples may have their different responses to the issues (24). Marriage quality, in turn, can affect a person's health. Lee and Gramotney (18) studied some changes related to quality of life such as optimism, depression, stress, and life satisfaction in 7619 Australian woman during their early adulthood in a longitudinal study (changes in 3 years). Women who had married in these three years and started their common life together, faced with an increase in mental health, whereas those divorced had a reduction of mental health. The couples who are lacking a good relationship with each other and other family members, have special behavioral symptoms including desperation and helplessness, conflict between the couple, having a variety of problems in different aspects of life such as financial, sexual, behavioral, less support, lack of marital satisfaction, complaints and criticism of each other. These factors can ultimately threaten the mental health of families (26). The goal of studies done on marital satisfaction was to identify factors influencing marital satisfaction and also ways to enhance it. As

mental health of the couples predicts marital satisfaction, it, in turn, can also affect a person's mental health. Collins et al (27) investigated the impact of life satisfaction and depression on mortality of adults and the elderly over 10 years. They carried it out by a survey of 5131 adults being from 51 to 59 years in Taiwan. During 10 years, it was reported 1815 deaths. After controlling age, gender, education, marital status and health status, life satisfaction and depression were a strong predictor for lower and more mortality respectively. Therefore, it is recommended for subsequent research to consider factors affecting mental health as predictors of marital satisfaction, precise identification of factors associated with marital satisfaction and strategies for its improvement especially for the vulnerable couples like parents of exceptional children, couples with specific and chronic diseases.

Conclusion

It seems that enhancement of couples' mental health can increase mental health and marital satisfaction of each couple.

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