

UNIVERSITY OF GHANA

DEPARTMENT OF PSYCHOLOGY

**SPIRITUALITY AND PSYCHOSOCIAL FACTORS ASSOCIATED WITH
MARITAL DISTRESS AMONG WOMEN IN RURAL AND URBAN
SETTINGS IN GHANA**

BY

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DEDICATION

This thesis is dedicated to my Parents, Prof & Mrs. Ofosu-Budu and Mr. A. Steiner.



DECLARATION

I, Dorcas Ofofu- Budu, the author of this thesis do hereby declare that except for references to other people’s work, which I have duly acknowledged, the study herein presented is the first of its kind to be carried out in the Department of Psychology, University of Ghana, Legon, during the 2013/2014 academic year under objective supervision of Professor S. A. Danquah and Professor C. Akotia. This work has never been submitted in any form, whole, or part for a degree in this University or elsewhere.

Signed

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Date

This work has been submitted for examination with our approval as supervisors.

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(Co-Supervisor)

Date

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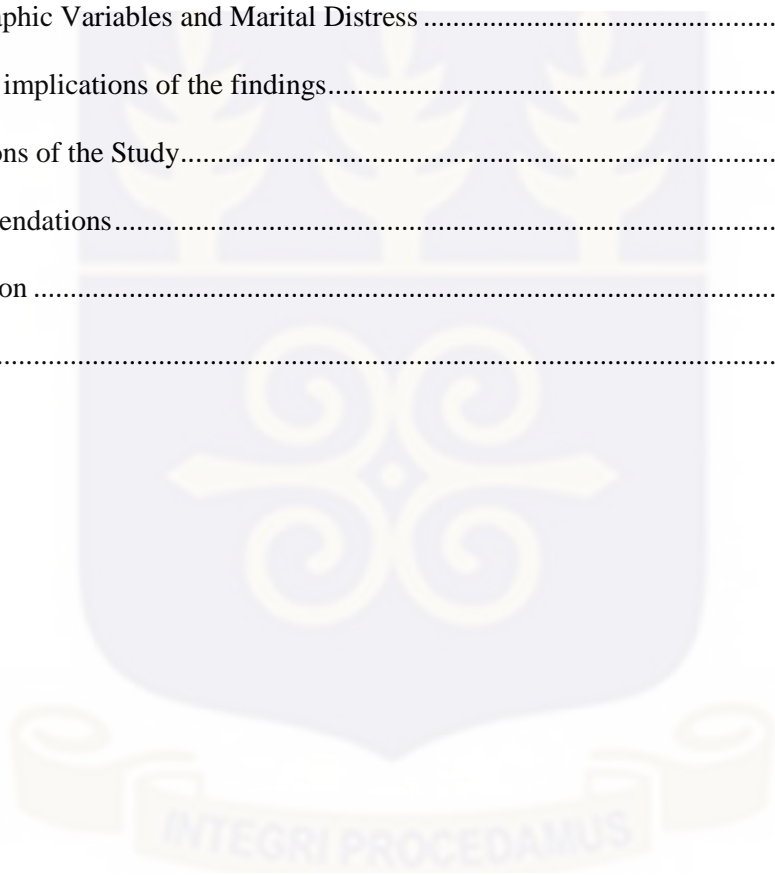
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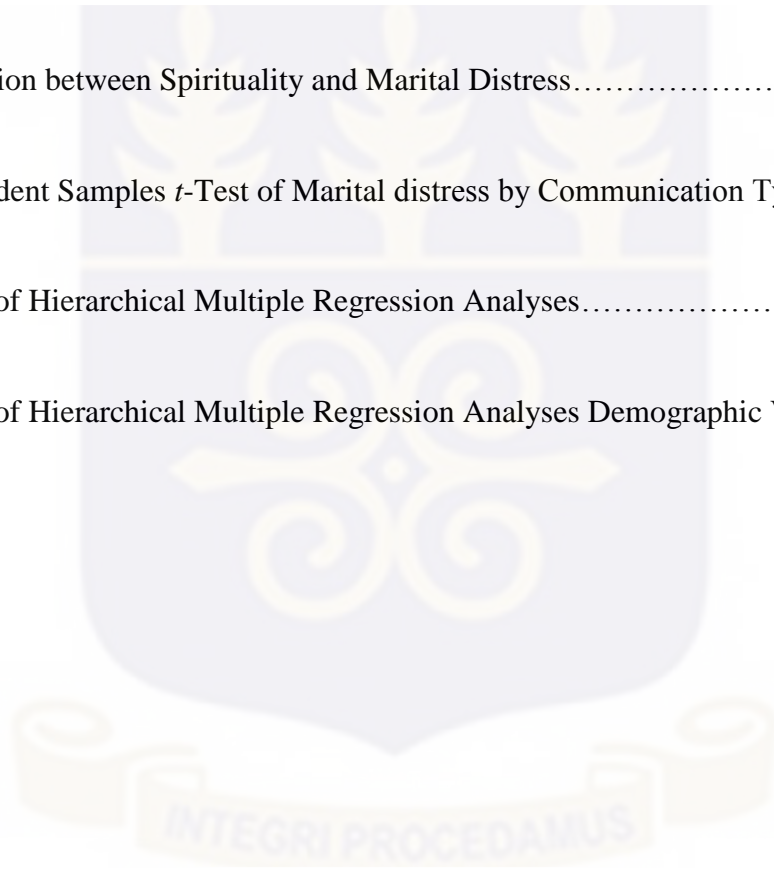
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ABSTRACT

This research was conducted to investigate the extent to which spirituality and psychosocial factors are associated with marital distress. A sample of 171 married women who have been married for at least one year and stayed in their premises for at least six months was drawn from rural and urban settings (Akyem Sekyere and Dansoman) in the Atiwa East district in the Eastern Region of Ghana and Ablekuma South Municipality in the Greater Accra region of Ghana respectively. Purposive sampling technique was used, participants were administered with the Depression, Anxiety and Stress Scales, the Marital Happiness Scale, Daily Spiritual Experience Scale and communication Danger Signs scale. Results showed that spirituality was negatively related to marital distress. Communication also proved to be a core predictor of marital distress as compared to other factors such as depression, anxiety and stress. Stress and anxiety were also found not to predict marital distress. It was observed that education predicted the highest percentage of variance (47%) in marital distress as compared to number of children and age. Urban married women also proved to be more distressed as compared to rural married women. Findings are discussed in terms of theories and other research findings.

CHAPTER ONE

INTRODUCTION

1.0 Background of the Study

Most premarital couples, when they agree to marry, are happy with their relationship and expect to be happy together until death. Most couples say they decide to marry each other based on positive connections such as fun, friendship, and passion (Sternberg, 1998). People who attend weddings often wonder about the future of the couple being married. They may wonder whether the “seemingly blissful newlyweds, the center of attention, the recipients of gifts, congratulations, and best wishes sustain their feelings for each other and a desire to remain legally bound together” (Huston, 2009, p.302). Research by Glenn (1998) concludes that the wishes and desires of marriages are often not satisfied as expected.

Marriage is a universal institution. It, however, differs according to different cultures. It is primarily viewed as an institution in which interpersonal relationships, usually intimate and sexual, are acknowledged. It can be said to be a socially or ritually recognized union or contract between two people that establishes rights and obligations between them, their children and in-laws (Haviland, Prins, McBride, Bunny, Walrath & Dana, 2011). Thus, in a general sense, marriage may be seen as the process by which two people who love each other make their relationship public, official and permanent.

The role of marriage serves as the main channel for procreation in societies across the world and this has made the marriage institution one of the most popular in the world today. Marriage is

also purported to offer protection through processes that include economic well-being, healthier lifestyles, lower stress, and social support (Coyne, Rohrbaugh, Shoham, Cranford, Nicklas & Sonnega, 2001).

Scholars from diverse disciplines have over the years found significant positive relationships between marriage and other determinants of health and well-being including self-esteem (Yadalijamaloye, Naseri, Shoshtari, Khaledian, & Ahrami, 2013), life satisfaction (Lucas, Clark, Georgellis & Diener, 2003) and psychological wellbeing (William, 2003) among others. For instance, earlier research suggests that married adults have lower rates of morbidity and mortality compared to unmarried adults (Johnson, Backlund, Sorlie & Loveless, 2000). Again, the relationship between marital functioning and a wide range of outcomes has led to the acknowledgment that marriage has important public health consequences (Halford, Markman, & Stanley, 2008).

For example, studies have revealed that married couples report greater happiness, life satisfaction and fewer emotional problems as compared to their unmarried colleagues (Waite & Gallagher, 2000), have greater levels of emotional and psychological well-being than those who are single, divorced, or cohabiting (Brown, 2003), practice better prenatal care, and constantly avoid dangerous substances than unmarried women (Kimbrow, 2008). Married men and women are also known to have higher endurance rates after being diagnosed with cancer (Kimbrow, 2008). Most importantly, rate of suicide has also been shown to be less among married people (Masocco et al, 2008); lower death rates (Lillard & Waite, 1995); lower risk of death from accidents, sicknesses, and self-inflicted injuries (Coombs,1991).

Despite the seeming positive implications of marriage for the health and wellbeing of individuals, it has also been found that every marriage faces some kind of challenges. When the couple experience prolonged unresolved marital challenges, it sometimes becomes devastating, resulting in significant discomfort (Fincham, 2003). When this discomfort prolongs for a long period of time and causes a change in the normal functioning of the couple, marital distress is said to have occurred.

According to Jacobson and Christensen (1996), marital distress can be defined as a situation in which partners experience communication and problem-solving difficulties, find it difficult to work together, and have difficulty accepting each other's differences. Mead (2002) observes that “distressed couples exchange fewer rewarding behaviors and more aversive behaviors than do non-distressed couples” (p.1). Considering that distress can affect couples' treatment of each other, it could also negatively affect their treatment of their children and significant others. Thus the negative effects of distress in marriage have implications not only for the couple, but for their families and society as a whole.

Some authors (e.g., Markman, Rhoades, Stanley, Ragan & Whitton, 2010) have reported that thousands of people go through marital distress which eventually leads to divorce annually. They further suggest that marital distress and family breakdown are associated with other wide range of problems affecting adults and children, including problems with mental health, individual adjustment, child behaviour, physical health, economic success and stability (Booth & Amato, 2001; Halford & Bouma, 1997).

Evidence in the literature reveals certain factors that are more likely to affect marital satisfaction and result in distress. For example, Bagwell (2006) reveals that a person's demographic information, mood, attachment styles, or temperament are more likely to affect satisfaction.

Others have also established that economic hardships place stress on couples, increasing conflict and finally leading to distress and divorce (Ono, 1998; White & Rogers, 2000).

Thus, the literature adequately establishes that when intimate relationships become distressed, the negative effects on partners' emotional and physical wellbeing can be far-reaching especially on health (Synder, Whisman & Beach, 2009).

Specifically researchers have linked marital distress and conflict to the onset of depressive symptoms, eating disorders, male alcoholism, episodic drinking, binge drinking, and out-of-home drinking (Fincham, 2003). Other consequences documented in the literature also include specific illnesses such as cancer, cardiac disease, and chronic pain. Fincham (2003) attributes the reasons for these links to perhaps hostile behaviours during conflict which are related to changes in immunological, endocrine, and cardiovascular functioning.

More seriously, studies indicate that marriage is the highest common interpersonal context for murder, and more women are murdered by their partners than by anyone else (Fincham, 2003).

The heavy amount of research on the benefits and consequences of marriage however have provided little evidence on the factors that could precipitate distress. Majority of the research have tended to focus on the consequences of marital distress. However, there are certain psychosocial factors that have been proven by psychologists to have direct influences on the thinking, feeling and action of individuals. These may include such factors as spirituality and

religiosity, stress and mood (Sullivan, 2001; Mead, 2002). Research on mood disorders including anxiety and depression has proven that the social relationships of individuals with these disorders may be negatively affected. In this sense, if such problems occur in people who are married, distress may also occur in the marriage. However, research evidences to this effect are both inadequate and inconsistent especially regarding contextual differences and how demographics play into this.

For example, most researchers have argued that spirituality helps people to cope better with life stressors. However, assessing spirituality among married populations and how it impacts this aspect of life has tended to be quite confusing. While some researchers (eg. Marks, 2004) suggest that there is a positive relationship between spirituality and marital happiness; others found a negative relationship (Sullivan, 2001). The Sullivan study, in particular, reported contradictory findings suggesting on the one hand that religion and spirituality can increase marital problems of partners who are neurotic or distressed, and on the other hand that religiosity and spirituality affected couples' attitudes and that higher levels were associated with more conservative divorce attitudes, increased levels of marital commitment and more willingness to seek help for marital difficulties. Interestingly, Heaton and Albrecht (1991) also found that persons who were considered as not spiritual or atheistic also had a high marital stability.

Again, research indicates that variances in spiritual levels in one or both marriage spouses, can contribute difficulties with spiritual compatibility. Research by Olson and Olson (2000) report that 53% of the spouses who were under study said they had unsolved differences in their spiritual beliefs. Also, 36% of the section of spouses reported that spiritual variances caused

tension in their relationships. Studies conducted by Mahoney, Pargament, Jewell, Swank, Scott, and others (1999) investigating the extent to which couples shared religious or spiritual practices and experiences on one hand, and the extent to which they perceived God to be active or reflected in the marital relationship on the other hand, contradicted the Olson et al. findings by revealing that these factors were related to greater marital adjustment, less marital conflict and more verbal collaboration.

In general therefore, researchers do agree that, the spirituality levels of an individual may benefit or negatively affect his or her marital life. This implies that while in some cultures or contexts spirituality may cause distress in marriages, in others, it may be beneficial. Some evidence exists to demonstrate these effects in other cultures, but little exists to demonstrate the case in Ghana. With Ghanaians generally known to be very religious and spiritual, it is imperative that investigations are carried out to see the extent and direction of effects that spirituality may be having on marriages. With research (e.g., Mattis, 2000; Wilcox, 2004) establishing that women tend to be more spiritual than men, it would be right for such studies to focus more on populations of married women.

Researchers such as Anim (2011) and Locoh and Thiriat (1995) suggest that, apart from psychosocial factors such as spirituality, demographic factors like formal education and age may contribute to marital distress especially in communities where males are in authority. Locating his investigations in Ghana, Anim (2011) explains that distress may occur when women try to compete for power or face up to their husbands in decision making pertaining to their homes. It was found that such actions normally occurred among women with some higher form of formal

education who understand social equality and their rights. The study found out that, very learned married women in Ghana were not content with their husbands controlling the affairs in the marriage.

With the Ghanaian society known to be largely male dominated, such actions by women may result in domestic tensions, stress and often, depression which may create distress in marriages. Such distress may largely be found in wives who are bound by cultural norms to be “submissive and obedient” to their husbands. For example, the Anim study suggested that, the thoughts of equal power sharing may perhaps make women act in customarily undesirable ways which may ignite problems leading to marital distress.

The specific role of age in marital stability is a matter of contention among researchers. Some authors (eg. Locoh & Thiriat, 1995; Reiner, 2003) argue that a positive relationship exists between age and marital stability even across western and African populations. This supports an earlier view of Oppenheimer (1988) that young people have less resources and undecided about their wishes and desires. According to the researchers, these factors give them wrong impression about their partner’s uniqueness and may lead to marital problems while older people better understand situations and cope better leading to marital stability. Again, Anim (2013) confirms that younger married women are more likely to experience marital distress than their older counterparts. Despite these revelations, Isiugo-Abanihe (1998) found no effect of age on marriage and Adegoke (2010) obtained findings that led to conclusions that it is better to marry at a middle age than old age.

Obviously, the contradictions and inconsistencies in the findings may be a result of cultural or contextual differences. With marriage and marital relations proven to be hugely culture-specific (Oladipupo-Okorie & Viatonu, 2014), it is undisputable that observations that may be made in one cultural context concerning the predictors and consequences of issues like marital distress may differ significantly from that which may be made in another context. The implication of this is that, more culture and context-specific studies need to be carried out and intervention design must have culturally relevant empirical backing.

In cultures like Ghana where power inequalities and social norms make issues like communication styles, age, gender and spirituality very important variables in social relationships including marriage, it is highly possible that these factors may precipitate influences on the successes of marriages that differ from what may be observed in other cultures. With women often being considered inferior in the Ghanaian social world, it is possible that the effects of these variables may manifest in them more than men. In this sense investigations into marital distress may best be located among female married populations.

In order to help provide enough scientific bases for the design and implementation of measures to battle the possible causes of marital distress, this study concentrated on investigating the spirituality and some psychosocial factors associated with marital distress in both rural and urban settings in Ghana.

1.1 Statement of the Problem

Many researchers have found a positive relationship between marriage and health (Waite & Gallagher, 2000). Studies have found life satisfaction and fewer emotional problems among married people (Brown, 2003; Waite & Gallagher, 2000), and others still have found lower death rates (Lillard & Waite, 1995) and lower rates of suicidal behaviours (Masocco et al, 2008). In these situations, marriage is seen as a positive institution that could help foster development in a nation.

However, it is also well known that, when problems start creeping in a marriage, mental health problems as well as other problems in living may ensue. As evidenced by Fincham (2003), marital distress or problems are linked with depressive symptoms, cancers, cardiac diseases, and chronic pain. Mental health professionals also concur that, disorders such as depression and anxiety are strongly linked to marital distress (Bradbury, Fincham & Beach, 2000). For example, a study by Fincham and Beach (1999) obtained a bidirectional relationship between depression and marital distress in which marital distress increases depressive symptoms and depression increases marital distress. The consequences of such problems may spiral out control and negatively affect children in these marriages, if any, and possibly create conflicts between entire families and communities.

On a large scale, distress in marriages may lead to divorce and bring on contingent problems including delinquent behaviours and streetism among children (Arthur, 2013), and lowered self-esteem among, especially, women in parts of the world like Ghana where gender inequalities are most present (Anim, 2011).

The majority of research focus especially in Ghana, has however tended to be on the consequences of marital distress for the couple, their immediate families and society as a whole. Studies that have focused on the predictors of marital distress are normally western in nature, as they are conducted in western, more individualistic societies. With researchers establishing significant differences in psychosocial factors that exist between western societies and societies such as those of Africa and Asia, wholesale application of the findings of western studies to African contexts could be problematic.

The lack of context-specific evidence however leaves policy makers and intervention designers no choice as they are forced to rely mostly on the western findings in their jobs. The problem with such a situation is that, such interventions and policies may not comprehensively address the problem of marital distress and its contingent consequences.

In this regard, it was considered imperative that research regarding the particular psycho-social factors that lead to the development of marital distress within the Ghanaian social context be conducted in order to give Ghanaian policy makers firm empirical grounding to design and implement policies that are locally relevant.

Such was the focus of the present study. Because factors including spirituality and communication are known to be key determinants of behaviour and decision making in cultures such as Africa, it was deemed important to factor in these variables and determine their relative contributions towards predicting marital distress.

1.2 Aims and objectives

The main aim of the study was to investigate spirituality and psychosocial factors associated with marital distress among married women in urban and rural settings in Ghana.

1.3 Specific Objectives

- To determine the differences in marital distress among women residing in rural and urban settings
- To assess the relationship between spirituality and marital distress among women residing in urban and rural settings
- To assess the extent to which psychosocial factors such as depression, anxiety, stress and communication predict marital distress.
- To determine if demographic factors like age and education predict marital distress differently.

1.4 Relevance of the Study

This study highlights how spirituality and such psychosocial factors as depression, anxiety, stress and communication relate to marital distress among women in rural and urban settings in Ghana.

The identification of these relationships informs marriage counselors and clinicians about the important areas to focus on when counseling yet -to-be couples and dealing with couple who might be experiencing distress in their relationship.

For example, the evidence presented in this study shows policy makers, intervention designers and general society how factors including education, age, communication and spirituality relate to distress in marriages. This will help create awareness among both the target population and other stakeholders and may help prevent the incidence of marital distress. According to the

Cognitive theory of psychology (Beck, 2008), an important step in helping to redirect or restructure the cognition and behavior of individuals, is helping them become aware of personal and environmental variables that lead to distorted thinking and precipitate problems. The creation of awareness regarding the factors that predict distress in marriages as has been done in this study is therefore valuable as the Ghanaian society fights to stabilize marriages and reduce social problems.



CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

The aim of this study is to investigate the influence of spirituality and psychosocial factors associated with marital distress among married women in urban and rural settings. Relevant theories and review of related studies are discussed. The rationale for the study, hypotheses, proposed conceptual model and operational definition of terms are also reviewed in this chapter.

2.1 Theoretical Framework

2.1.0 Introduction

Marital distress is a complex phenomenon, and its complexities cannot be explained by a single theory, especially in view of the fact that there is still no consensus in defining marital satisfaction or even describing the quality of marriage (Fincham, Beach & Kemp-Fincham, 1997). It has become important to understand the predictors of marital quality in marriage research (Fincham, Stanley & Beach, 2007). Since the present study seeks to study psychological as well as social determinants of marital distress, there is a need to use suitable theories that encompass these aspects. Given that marital distress results from a decline in marital satisfaction, there is the need to understand the factors that account for the sustenance or decline of marital satisfaction. The study therefore employed the Gottman's Cascade theory of marital dissolution to explain possible determinants of marital satisfaction. The vulnerability-stress-adaptation model by Karney and Bradbury (1995) was also used to explain relationship between individual, psychosocial factors and marital distress.

2.1.1 Cascade Theory of Marital Dissolution (Gottman, 1999; 1993)

This theory was developed and scientifically validated based on twenty-five (25) years of longitudinal work (Gottman, 1999) and explains how marital quality and stability can deteriorate over time. The theory incorporates the Social Exchange Theory and Behavioural Theory (Parker, 2002). According to this theory, positive interaction or the ability of couples to resolve conflicts and friendship is the recipe for marital satisfaction and the prediction of marital stability over time. This depends on the balance between positive and negative behaviours. He further argues that couples would need to engage in a ratio of 5:1 positive to negative interaction in order to achieve marital stability. Couples whose positive interactions outnumber their negative interactions are known as “regulated”. Those marriages where negativity prevails are labeled “non-regulated” and are more likely than regulated ones to be unhappy marriages in which separation and/or divorce are or have been considered (Gottman 1993).

Not all negative behaviours however lead directly to marital distress and dissolution, but four behaviours in particular, known as the “Four Horsemen of the Apocalypse”, have been identified (Gottman, 1993) as critical in the process by which a marriage can move towards dissatisfaction and dissolution. *Criticism* tends to lead to *contempt*, which in turn leads to *defensiveness* and finally *stonewalling* (withdrawal). Gottman’s (1993) research has also found evidence for a process of change over time in spouses’ perceptions of their relationship that results in a “distance and isolation” cascade. At some point their spouse’s negativity becomes devastating, unexpected, and/or extreme to the extent that the spouse reaches a level of desperation such that he or she will do anything to stop the behaviour. When this point is reached a perceptual shift occurs in which the feelings of love, respect and safety are replaced by feelings of hurt, sadness, being threatened, fear and anger. Once this perceptual shift has occurred, it can be very difficult

to perceive the marriage in any other light and the likelihood of maladaptive attributions that confirm a negative view of the reasons underlying other behaviours is increased.

The theory also acknowledges the role of emotional state of couples (positive affect). The most important finding of the theory as stated by Gottman was that more positive affect was the only variable that predicted both marital stability and happiness (Gottman, 1993).

2.1.2 The Vulnerability-Stress-Adaptation Model (Karney & Bradbury, 1995)

This theory was developed based on a review of 100 longitudinal studies and combines the utility of four different theories; the social exchange theory, attachment theory, crisis theory and behavioural theory. According to these theorists, three main variables combine to explain the change in marital satisfaction and stability over time. These variables include: enduring vulnerabilities, adaptive processes and stressful events. They argue that the individual strengths and weaknesses each spouse brings into the relationship, which are often stable represent the enduring vulnerabilities. Enduring vulnerabilities may include personality, beliefs and attitude about marriage, their family of origin and social background.

Stressful events include incidents, transitions or circumstances encountered by the couple that can impinge on the relationship and result in tension or stress. Adaptive processes on the other hand are the ways in which a couple addresses conflict, how they communicate, how they support each other and the ways in which they perceive the marriage, their spouse and their spouse's behaviour.

According to this model, the key contributors to the couple's perception of marital quality of their marriage are the ways in which the couples deal with stressful events they encounter. The

couple's adaptive processes are a product of the interaction between the individual spouses's enduring vulnerabilities and the type and severity of the stressful events they encounter. Consequently satisfaction and stability may be relatively high for a couple who have few enduring vulnerabilities and poor adaptive processes if those qualities are rarely tested. On the other hand, repeated or chronic exposure to stressful events may test even those marriages where the spouses are normally well equipped in terms of their individual capacities to cope and their particular patterns of interaction. Consistent with the above arguments, Halford (2000) points out that stressful life event can have both negative and positive effects on a relationship depending on the strength of the couple's adaptive processes.

2.2 Review of Related Studies

This section has been divided into five main sub-headings, namely; spirituality and marital distress, psychological factors and marital distress, demographic factors and marital distress and rural-urban and marital distress.

2.2.1 Spirituality and Marital Distress

The influence of spirituality/religiosity on marital satisfaction has gained attention among researchers in recent times (Stafford, David & McPherson, 2014). Several studies have found positive relationship between spirituality and marital satisfaction (Ellison, Burdette, & Wilcox, 2010; Fincham & Beach, 2010; Mahoney, 2010). Religious people especially Judeo-Christians are likely to view marriage as a sacred manifestation of God and so such individuals will go the great lengths just to protect what they consider sacred (Pargament & Mahoney, 2005). This has been found to be a protective factor against marital distress (DeMaris, Mahoney & Pargament, 2010).

Stafford, David and McPherson (2014) studied the relationship between sanctity (thus viewing marriage as a manifestation of God) and marital quality on members of 342 marital dyads (heterosexual couples), using partner independence model and multilevel path modeling. Results show that sanctity was positively related to marital satisfaction and negatively related to marital dissatisfaction. Sanctity was found to be a strong predictor of marital quality even after controlling for forgiveness, unforgiveness and sacrifice. Religious homogamy was also found to have positive relationship with marital satisfaction. The relationship between sanctity and marital quality was mediated by sacrifice, thus sanctity of marriage is likely to motivate sacrifice and contribute positively towards preserving marriage. However, one interesting finding is that sacrifice was related to negative marital quality. The fact that the study considered various religious denominations (although Christians were in the majority) such as atheists and agnostics is very remarkable which means findings could be generalized to all these denominations. However, majority of the participants were whites (82.7%), which leave one wondering whether results are applicable to other racial populations such as Africans.

Ford (2010) also studied the relationship between spirituality and marital satisfaction in Christian heterosexual marriages and found that there was a statistically significant positive relationship between spirituality and marital satisfaction in the Christian heterosexual married couples. The researchers also reported a statistically significant positive relationship between the women's and men's Religious Well-Being (RWB) and Existential Well-Being (EWB) as separate groups; but there were no statistically significant gender differences in the men's and women's RWB and EWB subscale scores. This study falls short because it focused only on the Christian married couples and their level of spirituality without considering their settings. The study was however

not done in Ghana and other variables such as age, communication and level of education were not considered.

The important role spirituality plays as far as marital satisfaction or distress in marriage is concerned cannot be overemphasized. Research has shown that variation in spiritual levels in one or both spouses, can contribute difficulties with spiritual compatibility in the marriage. This was demonstrated by Olson and Olson's (2000) research in which they reported that 53% of the spouses who were studied reported that they had unsolved differences in their spiritual beliefs. Also, 36% of the section of spouses reported that spiritual variances caused tension in their relationships. This finding therefore goes to confirm that variances in spiritual levels cause tension and similarity in spirituality leads to marital satisfaction. Beach, Fincham, Hurt, McNair, and Stanley (2008) also argued that certain spiritual behaviors when employed in the situation of conflict could provide a specific mechanism that allows supportive goals to reclaim their dominance, replacing revenge-oriented or competition-oriented. The distress is so prevalent that one finds it difficult to assign a particular reason or factor to the phenomenon (Anim, 2013).

In addition to the above, in investigating the relationship between spirituality and marital satisfaction, Fard, Shahabi and Zardkhaneh (2013) randomly sampled 156 married students of the University of Tehran. Students were assessed on spirituality and marital satisfaction. The researchers found a significant positive relationship between spirituality and marital satisfaction. The dimension of spirituality which predicted marital satisfaction most was spiritual emotions, followed by spiritual cognition. Spiritual duty was the least predictor of marital satisfaction among the sample. No gender difference was found. These results suggest that couple with similar religious emotions and religious beliefs (cognitions) are more likely to perceive marital satisfaction (Fard et al, 2013). This could be because religiosity provides an effective framework

for conflict resolution in the marriage. The study was however done on a sample (Iranian students) whose religious backgrounds were relatively universal (Islam). It is therefore difficult to make conclusions with regards to what might happen in a religiously heterogeneous sample. The marital situation among Iranians might also be a little more different compared to Ghana since a lot of people might find themselves in polygamous marriages in Iran as compared to Ghana.

In the same vein, using a relational model of religion and spirituality in marriage, the role of individual relationship with God, couple's joint religious communication, and forgiveness were examined as determinants of marital satisfaction by David and Stafford (2013). Data from 342 heterosexual married couples were analyzed using an actor partner interdependence model and path analyses. Results signify that one's personal relationship with God is essential for marital quality; this relationship however seems to manifest itself in religious communication between partners, which in turn is directly linked to marital quality. In addition, one's own forgiveness and forgiveness of the spouse were both found to be positively linked to marital quality, whereas one's tendency not to forgive and one's spouse's tendency not to forgive are both detrimental to marital quality. Finally, joint religious communication was found to be more strongly associated with marital satisfaction among mixed-faith couples than same-faith couples. Also mixed-faith couples were found to report less marital satisfaction compared to same faith couples. The above findings indicate that there is a significant relationship between religiosity and marital quality but this relationship is mediated by religious communication and forgiveness.

Finally, in Fincham, Ajayi and Beach's (2011) study, they examined the relationship between spiritual experiences and marital quality among an African American sample. Four hundred and eighty seven couples were assessed on marital quality, daily spiritual experiences and religiosity

index. Results reveal that spouse's level of spirituality was significantly related to their own marital satisfaction and that of their partners; and no gender difference was found. An interesting finding from this study was that while spirituality was related to both self and partner's satisfaction for both husbands and wives, religiosity was related to both self and partner's satisfaction only for husbands and not for wives. This signifies that spirituality is not a mere substitute for religiosity but separate constructs and spirituality may be a more important predictor of marital satisfaction for women than religiosity.

2.2.2 Psychological Factors and Marital Distress

Stress, Anxiety and Marital distress

Stressful life experiences are found to be related to marital quality over time, thus stress negatively influences the nature of spouses' marital perceptions and the way they interpret and process those perceptions (Neff & Karney, 2004). Following the above postulation, individuals undergoing high levels of stress will report low marital satisfaction compared to those undergoing low levels of stress. But is the relationship that simple and direct?

To test a theoretical model predicting stress and marital satisfaction among stepmothers using a stress and coping framework, Johnson, Wright, Craig, Gilchrist, Lane and Haigh (2008) recruited 177 women from an online support group for stepmothers. Perceived stress, marital satisfaction, social support, among, other variables were measured. Results show that perceived stress predicted marital satisfaction. Perceived stress was also influenced by social network, household chores clarity, support network satisfaction, stepchild care disparity, and stepmother role clarity. This signifies that stress might not just have a direct relationship with marital satisfaction but maybe mediating the relationship between other variables and marital satisfaction.

Lincoln and Chae (2010) also examined relationships among financial strain, unfair treatment, and marital satisfaction among African Americans using data from the National Survey of American Life. Results revealed that both social stressors that occur inside of the home and those that occur outside the home have negative consequences for marital quality and psychological distress. Moreover, the combination of experiencing stressors both within the home and outside has particularly negative mental health consequences for married African Americans. Findings also highlight the protective effect of marital satisfaction on psychological distress. The sample of study which was African Americans are similar to the sample in the present study (Ghanaian women) since both are of African descent. Therefore, similar results may be found, however marital satisfaction was measured using a single item which may not have captured the complexities of the construct.

Also, in Fuenfhausen and Cashwell's (2013) study in which they sought to find out how perceived stress, adult attachment and dyadic coping strategies influence marital satisfaction, they sampled 191 married graduate counseling students in a survey. Findings indicated that perceived stress was negatively related to marital satisfaction. Attachment anxiety, attachment avoidance and dyadic coping accounted for about 67% of variance in marital satisfaction. Results however showed that coping was a more potent predictor of marital satisfaction compared to perceived stress. This indicates that it is not necessarily high levels of perceived stress that may predict marital distress but the inability to cope with it. In fact, some researchers have found that stressful situations do not always negatively affect marital satisfaction and may, in fact, provide opportunities for couples to strengthen their relationships (Story & Bradbury, 2004). It is however worthy of note that the study sample was mostly Caucasian and also come from a

homogeneous educational background-postgraduate. These are also counseling students who might have better coping strategies than majority of people in the population; therefore the findings might be somehow different when dealing with other samples, especially those with lower or diverse educational background. The measure of stress used was also perceived and not the actual stress, thus stress maybe present but once it is not perceived by the individual, it is less likely to have an effect on the person. This calls for further study among diverse samples to ascertain the actual influence of stress on marital satisfaction.

Studies show that economic hardship may place stress on couples, increasing conflict and finally leading to divorce (Ono, 1998; White & Rogers, 2000). Individuals might compete over inadequate resources and struggle with displeasure when financial means are insufficient. Thus, economic circumstances may weaken relationship quality by increasing conflict and decreasing affection. Considering how and under what conditions, economic factors affecting relationship quality will contribute significantly to the understanding of the sources of stability and stress for young couples.

Ellison, Henderson, Glenn and Harkrider (2011) in their investigation on the role of sanctification and stress on marital quality using data from the Texas Healthy Marriage Initiative Baseline Survey Project (THMBS), they found out that both financial stress and general stress had a significant negative relationship on marital quality. The relationship between general stress and marital quality was stronger than that of financial stress alone ($r = -.35$; $r = -.23$ respectively). Sanctification was found to buffer the effects of stress on marital quality. This signifies that the experience of general stress has deleterious effects on marital quality compared to certain specific stressors that may be directly linked to the marriage. Studies have however been

oblivious to this fact and have focused mainly on specific marital stressors such as financial strain.

One other variable which is capable of influencing marital quality but has been neglected in the literature is anxiety. If attachment anxiety is a strong predictor of marital satisfaction (Fuenfhausen & Cashwell, 2013), and further found out that attachment avoidance, attachment anxiety, and dyadic coping contributed 67% of the inconsistencies in marital satisfaction, it would not be erroneous to imply that general anxiety could predict marital satisfaction or distress.

Renshaw, Rodebaugh and Rodrigues (2010) studied 465 spouses of veterans from the National Vietnam Veterans Readjustment study in order to ascertain how spouses' perception of the severity of their partner's PTSD symptoms influenced both marital and psychological distress. Results revealed that spouses' perceptions of veterans' symptom severity were positively associated with spouses' psychological and marital distress; moreover, spouses' perceptions fully mediated the effects of veterans' self-reported PTSD severity on spouses' distress. Additionally, for spouses who provided complete data with regard to their perceptions of veterans' PTSD, distress was highest when they perceived high levels of symptoms but veterans reported low levels. These findings suggest that anxiety disorder in a spouse may result in marital distress in his/her partner. This means that the influence of anxiety on marital distress on the spouse actually experiencing the anxiety symptoms may even be greater. Research has however not paid much attention to anxiety in the marriage literature. It is therefore a plus for the current research which intends to investigate the influence of anxiety on marital distress.

2.2.3 Depression and Marital Distress

Both marital distress and depression seem to result in very distressing thoughts, emotions and behaviors which impart negatively on the individual's marital, family, occupational, health and other aspects of his or her life (Mead, 2002). The co-morbid nature of depression and marital distress has long been documented (Fincham, Beach, Harold & Osborne, 1997).

There are indications that initial higher scores on depressed mood were related with greater deterioration in marital quality (Benazon & Coyne, 2000), moreover, depression among adolescents was found to predict future marital dissatisfaction (Gotlib, Lewinsohn & Seeley, 1998). Depression in marriage has also been found to precipitate marital problems (Whisman, 2001) and a history of depression in one or both couples increases the probability of divorce (Kessler, Walters, & Forthofer, 1998).

In Kronmuller, Backenstrass, Victor, Postelnicu, Sheckenbach et al.'s (2010) 10 year longitudinal study of the relationship between depression and marital quality, they followed 50 in-patients with major depression one, two and ten years after discharge from hospital and compared them to a nondepressed control group matched by age and sex on the quality and stability of their marriage. Results reveal that in the follow-up period of ten years, 26 patients (56.5%) had a relapse. Eight couples were separated, 11 were unhappy and 26 couples were happy with their spousal relationship. The quality of marital relationship decreased over the follow-up period. In comparison to the nondepressed control group, patients showed a significantly worse quality of marital relationship at follow-up. Besides age and course of depression, the spousal EE status was a prognostic factor for the quality of the relationship after 10 years. This finding reiterates the assertion that depression can predict marital dissatisfaction in the long term.

As explained by Marshall and Harper-Jaques (2008), depression in the family context is often characterized by emotional distance, negative thinking and irritability on one hand and confirmation seeking about worthiness and lovability which is likely to wear family members out and may result in family members distancing themselves from the depressed individual. This could in turn escalate the feeling of social isolation and reinforce the depressed person's negative attributions (Whiffen, 2005). As a result of this cycle, with time, reciprocal interaction could occur whereby negative behaviours associated with depression could facilitate relationship distress while relationship distress in turn deepens symptomatic behaviour (Marshall & Harper-Jaques, 2008). This scenario could apply to married couples as well whereby the depressive symptoms of one or both spouse(s) foster marital distress and marital distress in turn intensifies the depressive symptoms.

To examine affectivity in marital interaction, Papp, Kouros and Cummings (2010) sampled 267 couples who took part in laboratory-based marital conflicts and afterward rated their own and their spouses' emotions of positivity, anger, sadness, and fear during the conflict. Results revealed that there was a significant correlation between partners' ratings of self and partner emotions. Also, depression, marital satisfaction, and observed marital interaction were interrelated in the expected directions. It was found that depressive symptoms moderated spouses' ratings of their partners' negative emotions such that assumed similarity was higher and empathic accuracy was lower in the context of high depressive symptoms. The researchers concluded that depression may influence spouses' judgments of how closely linked partner emotions are (assumed similarity) and spouses' abilities to accurately perceive their partners' negative emotions (empathic accuracy), which may contribute to the established marital dysfunction–psychological distress cycle. This research finding suggests that depressed

individuals have a hard time perceiving their partner's emotions accurately but are more likely to judge it from their own emotional feelings. This may make conflict resolution more difficult among these couples contributing to greater marital distress. Generalisability is however limited as the sample consisted of mainly European-American couples who were in relatively well-adjusted relationships which was well noted by the researchers. The study also did not consider the predictive ability of depressive symptoms of marital distress. Conclusions are therefore based on tentative inferences which need to be tested.

The relationship between depression and relationship distress is not only restricted to the context of marriage or family but cuts across all kinds of relationships including intimate relationships among non-married people.

To better understand the relationship between depression and relationship distress, Shnaider, Belus, Vorstenbosch, Monson and Langhinrichsen-Rohling (2014) investigated the mediating role of attributions in the association between intimate relationship distress and depressive symptoms in a dating sample of undergraduate students. Two hundred and four (204) Psychology undergraduate students, 19 years and above who were in an intimate relationship for at least 1 month were sampled for the research. Participants were measured on depression, relationship adjustment/functioning, general attribution style and relationship attribution style. Results reveal that depression had a negative association with relationship functioning, and both depressogenic attributions and relationship distress attributions mediated the relationship depression and relationship distress for women but not for men. Distress-maintaining blame attributions however had a significant indirect effect in the relation between depression and relationship distress for both men and women. This implies that the mechanisms by which these

variables are associated may be different for males and females. It is however difficult to generalize findings because the sample comprised of undergraduate students who were mostly Caucasian and relatively young. Also, as the researchers pointed out, the participants reported relatively low levels of depression and relationship distress and the duration of their relationships were relatively short. One can therefore not speculate what results would look like in a sample that report higher levels of depression and relationship distress and have been married for more than a year.

Though studies have suggested that a relationship exists between depression and marital distress, the relationship is still not clear. As postulated by Koerner, Prince and Jacobson (1994), the relationship between marital distress and depression could be explained in one of 3 ways, thus marital distress can cause depression, depression can cause marital distress or probably a third variable may be causing both depression and marital distress. One of such third variables is communication patterns in the marriage.

To examine Koerner et al.'s (1994) assertion, Uebelacker, Courtnage and Whisman (2003) studied the association among depression, marital dissatisfaction and perception of communication among 127 married individuals who have been married for more than 1 year and aged less than 65 years. It was found out that depression symptoms were linked with self-silencing and wife demand and husband-withdraw communication in both men and women; also, for women, self-silencing mediated the association between marital dissatisfaction and depressive symptoms. As anticipated, depressive symptoms were more highly associated with being in the demanding role for women than for men. Results hint that perceptions of interactions with one's spouse, as well as gender-related expectations of how both husband and

wife should interact, may be important phenomena to pay attention to when studying depression and marital dissatisfaction. Another interesting finding is that marital dissatisfaction had a negative correlation with depressive symptoms for women but not for men. This study's findings, just as Shnaider et al.'s (2014) point to the fact that the mechanisms underlying the relationship between depression and marital distress may be slightly different for men and women.

Generally, research points to the fact that compared to the marital interactions of nondepressed couples, the marital interactions of couples with a depressed partner are characterized by a higher frequency of negative communication behaviors (e.g., blame, withdrawal, verbal aggression) and a lower frequency of positive communication behaviors (e.g., self-disclosure, problem-solving behaviors, smiling, eye contact). The low frequency of positive behaviors and high frequency of negative behaviors that characterize the marital interactions of depressed individuals are consistent despite substantial methodological variations across studies (Rehman, Gollan & Mortimer, 2008). Despite these findings it is also acknowledged that the communication patterns found in depressed couples may be as result of marital distress itself and not depression since depression and marital distress often co-occur (Rehman, Gollan & Mortimer, 2008).

2.2.4 Communication and Marital Distress

Problem in communication or interaction between couples has been found as a core indicator of marital distress (Jacobson & Christensen, 1996). For instance Whiffen, Foot and Thompson (2007) investigated the mediating role of negative communication; specifically self-silencing on the relationship between depression and marital conflict using a community sample of 115

couples. Results showed that both men and women who viewed their marriages as conflicted tended to hide their anger while pretending to go along with their partner's opinions or wishes, which coupled with a tendency to judge him/her by external standards, also mediated the relationship between marital conflict and depressive symptoms. The effect was found to be stronger in women than in men. This study's finding emphasizes the importance of effective communication in resolving marital conflict as well as protecting couples from mood disturbances resulting from conflict and negative communication or self-silencing may have more deleterious effects on women's mood than men.

Alayi, AhmadiGatab and Khamen (2011) also studied the relationship between communication skills and marital adjustment. One hundred and thirty two married students were randomly sampled and Snyder's Revised Marital Satisfaction Inventory (MSI-R) and Navran's Communication Skills Inventory were administered to them. Results indicated that spousal satisfaction of those couples with strong communication skills in various aspects of spousal relationship was significantly higher than those with weaker communication skills. Results also showed that couples had similar communication skills since their communication skills were highly correlated. This study further confirms the importance of communication as far as marital satisfaction or distress is concerned.

Amiri, Farhoodi, Abdolvand and Bidakhavidi (2011) in their study to investigate the influence of the Big-five personality trait and communication styles on marital satisfaction among 100 couples who were students of the University of Tehran, it was found that the Expectation-withdrawal and Mutual Avoidance communication styles had a significant negative relationship with marital satisfaction, while for mutual constructive communication style the relationship was

positive and significant. Results from stepwise regression analysis revealed that constructive communication style was the best predictor of marital satisfaction, followed by Expectation-withdrawal and mutual-withdrawal communication styles. This suggests that communication has different effects on marital quality depending on the style, thus negative communication styles may result in marital distress while positive communication styles may result in marital satisfaction. This conclusion however can only be reached after several studies are done on different samples of different backgrounds since the present sample are students whose demographic backgrounds are similar.

Despite the weight of evidence for the importance of communication in determining marital satisfaction or distress, there is still a paucity of study in this area. The few studies which looked at communication often study it as a third variable mediating or moderating an existing relationship between two other variables (Uebelacker, Courtnage & Whisman, 2003, Whiffen, Foot & Thompson, 2007). There is therefore the need to look at the direct effects of communication on marital distress in addition to other interacting effects in order to fully understand the mechanisms involved in the relationship between marital quality and communication.

2.2.5 Demographic Variables and Marital Distress

One important demographic factor that has been found to predict marital satisfaction is gender. Studies suggest that women are less satisfied than their male counterparts (Stevenson & Wolfers, 2009). A meta-analysis of 226 independent samples from 173 reports, Jackson, Miller, Oka and Henry (2014) found that a statistically significant difference exists between husbands and wives

as far as marital satisfaction was concerned. Wives in marital therapy were 51% less likely to be satisfied compared to their husbands. There was however no significant gender differences for nonclinical samples. This indicates that the gender differences only become pronounced when couples have started experiences some level of distress.

Also in Anim's (2013) study where he sampled 80 couples in a descriptive cross-sectional survey in an attempt to investigate psychosocial determinants of marital distress, results suggest that wives reported more distress than their husbands. Age of participants was also found to have a significant negative relationship with marital distress, thus the younger the couples the greater distress they report (Anim, 2013).

In Allendorf and Ghimire's (2013) investigation of determinants of marital quality in an arranged marriage society, they found that the influential demographic correlates of marital quality among the 527 randomly selected participants in a survey were gender, education, spouse choice and duration of marriage. Again, women reported less marital quality compared to men. This finding rebuffs Jackson et al.'s (2014) suggestion that gender differences exists only among those undergoing marital therapy. The present finding suggests that gender differences exist even among nonclinical samples. It was also found that education had a strong positive relationship with marital quality with higher education increasing the report of better marital quality. However, Anim (2011) found that high levels of education rather led to marital distress. The study further explained that, when women try to compete for power with their husbands in decision making pertaining to their homes, it may result in marital problems leading to marital distress.

Madanian and Mansor (2013) also studied marital satisfaction and demographic traits among an emigrant sample. Twenty nine (29) females and 18 males from the Iranian students in Malaysia were assessed on marital satisfaction and some demographic variables. It was found that majority of the participants had a satisfied level of marriage. Age was found to be significantly related to marital satisfaction but in an opposite direction as that reported by Anim (2013). Younger people (29-32 years) reported higher levels of marital satisfaction than older people (33-42 years). Despite this finding, it is also worthy to note that the age range of participants was not very wide since it did not include older adults. Participants ranged from 29-42 years old.

The study also found that people without children reported higher level of marital satisfaction than those with more than one child. Just like Allendorf and Ghimire's (2013) finding, this finding also found that those with high educational level reported high level of marital satisfaction and those with low level of education also reported low level of marital satisfaction.

Onyishi, Sorowskowsi, Sorowskowska and Pipitone's (2012) research assessed the level of marital satisfaction and number of children among 374 married people from the Igbo ethnic group in Nigeria. Participants had between 0 to 9 children. Contrary to findings from western countries, it was revealed that number of children had a positive relationship with marital satisfaction, thus the more children a person from this tribe has the more satisfied he or she is in their marriage. Moreover, number of children was a stronger predictor of marital satisfaction than wealth and age. This signifies that the findings regarding number of children and marital satisfaction is not consistent culturally. Educational level did not predict marital satisfaction significantly, neither did gender.

2.2.6 Rural- Urban Settings and Marital Distress

Research by Kovess-Masféty, Alonso, De Graaf and Demyttenaere (2005) found out that while mental problems resulting from marriage were higher among those living in urban areas across all countries involved in the study; such problems were rather higher in rural areas in some countries, while other countries showed no difference regarding rural-urban distributions. For example, Kovess-Masféty, Alonso, De Graaf and Demyttenaere (2005) reported that whereas in Belgium, mental problems resulting from marriage were highly associated with those in the urban settings, the opposite happened in Germany and France. That is, mental problems resulting from marriage were predominantly high among those in rural areas as compared to those in the urban areas. Italy, Netherlands, and Spain however showed no differences in occurrence in their rural and urban settings.

Probst et al. (2005) indicated that, women who live in rural areas experienced more depression and anxiety disorders resulting from marriage as compared to their urban counterparts. The inconsistencies demonstrated by these studies show that differences in mood disorders or mental disorders may not be specific to rural or urban settings. According Marsella (1992), due to stress associated with urban life such as job and house stress, child upbringing, unfriendly behavior and insufficient means to cope in urban settings, mental problems may abound. Harpham (1994) also notes that greater levels of scarcity in the urban areas may lead to higher level of marital distress.

However rational this may seem, evidence from other studies, as shown above, indicate that this is not always the case. For example, Kovess-Masféty, Alonso, De Graaf and Demyttenaere (2005) studied Rural–Urban Differences in mental health and noticed that mental disorders among those living in urban areas died out after modifying their marital conditions. This shows that, perhaps, the extent of mental stability whether in rural or urban settings may depend on

certain social factors including marriage relations. Since divorce and separation fluctuate transversely among countries, using findings obtained in one setting to draw conclusions in another may be a step in the wrong direction. What need to be done is more investigations into the specific psychosocial factors in rural and urban areas that lead to the development of problems like marital distress which in turn affect the mental health of rural and urban dwellers.

The Kovess-Masféty et al. (2005) study further indicated that differences in age among the people may also account for the variance in the rural –urban distributions in terms of mental health problems. Their assertion was based on the population of the European Study of Epidemiology of Mental Disorders in which the younger people were found to have high mental health problems than the older people. From the point of view of researchers, older people may have a lot of experience and better know how to cope with situations or probably have enough resources in combating their challenges.

The situation in Ghana may not be so different. For one, it is known that lots of younger people throng into urban areas centers in search for jobs, education and better living conditions. Most of these people find life partners and settle. The urban young population therefore keeps increasing. In this sense, it is rational to expect that psychological distress including marital distress will be higher among the urban population than the rural populations (Twumasi-Ankrah, 1995).

It is also common knowledge that women in the rural areas are more likely to have more children as compared to those in the urban areas. For example, research by Twumasi- Ankrah (1995) confirms that a difference exist between rural and urban folks in terms of fertility. He again concludes that urban living conditions reduce fertility rates leading to lowered reproductive potential as compared to rural dwellers.

A study by Shapiro and Tambashe (2000) indicated that large numbers of children is a source of benefit to parents in the rural settings as compared to the urban areas. This, they further explained, is because children are seen as a source of manpower to their parents on the farm even at the early stages of their lives. This implies that women in the rural areas are more likely to get more hands on their farms and as a result motivate them in bringing forth more children. Interestingly, child birth is a form of prestige to women in the rural areas in Ghana (Twumasi-Ankrah, 1995). As a result of the communal living; they get people to help them in raising their children which serve as a motivating factor to them. Those in the urban settings will have to engage house helps to cater for their children whiles they go to work or send their children to day care centres to be taken care of. This is common especially with women who work in offices. All these decisions by parents in catering for their children in the urban settings involve spending lots of money and it causes lots of pressure and worry. Although most studies have concluded that number of children lead to marital dissatisfaction (Dillon & Beechler, 2010; Twenge et al., 2003), Onyishi, Sorokowski, Sorokowska and Pipitone (2012) found the opposite. They found that number of children rather led to marital satisfaction. The finding of the latter researchers indicates that women in the rural areas are less likely to suffer marital distress because they have the tendency to produce more children.

Evidence by Twumasi-Ankrah (1995) reveals that urban areas are fitted with social amenities and job opportunities that draw people with high education to them. Generally, when people obtain education in the urban centers, they tend to live and work there. Gradually, the urban centers become densely populated which culminates in traffic jams and other stressful events that end up affecting the marriage relationships at home. The line of argument then is that the more educated a woman is, the more the likelihood of her living in the city and the more the likelihood

of her experiencing the urban stress which end up affecting marriage relationships. In this sense, all things being equal, the extent of marital distress a woman experiences may depend, in part, on her educational level.

On the contrary, other Studies by Liu and Sun (2008) found that farmers in China had more mental distress than their urban counterparts. In the view of the researchers, farmers were more mentally distressed as a result of their low socioeconomic status and their less ability to access public health insurance as compared to urban dwellers. In this case, the researchers outline a clear difference between the rural and urban divisions of China regarding the possibility of experiencing mental illness or distress.

Despite observations that childbirth and social support factors makes rural women more able to avoid distress as compared to urban dwellers in Ghana, the case of China may not be so different from the case in Ghana. As observed by social and economic researchers in Ghana, the gap between rural areas and urban areas with regard to access to social and economic support services that mitigate psychological distress is quite wide.

For example, information released by the Ghana health Service indicates a wide gap between rural and urban settings regarding access to health centers and the distributions of health facilities. According to Kruk et al. (2009) around 69% of Ghanaian physicians practice either in the Greater Accra region or in the Komfo Anokye teaching hospital in Kumasi, Ghana's second largest city. Therefore, rural populations often rely on traditional African medicine, and travel long distances for care only when cases are deemed as "hospital sickness".

Studies have established that, socio-economic status of marriage couples produce psychological distress in them (Friedman & Thomas, 2007). The suggestion here is therefore that, rural

dwellers (including married women) may have higher distress than urban women (Twumasi-Ankrah, 1995).

The on-going discussion points to one thing: confusion regarding the influence that environmental circumstances have on the development of distress and other psychological problems. The contradictions in the literature, call for further, more context-specific investigations to clarify these differences and this present study is a response to the call. The interest was to investigate the Ghanaian situation regarding differences in the experiences of marital distress between rural and urban women.

Identifying spirituality and psychosocial factors such as communication, depression, stress and anxiety as some of the psychosocial factors affecting the lives of people, this study focused on exploring how these factors relate to the development of marital distress.

To sum it all up, it has been found that marital distress itself is a complex phenomenon and as such cannot be explained by a single theory. Comprehensive explanations of the phenomenon needs, therefore, to integrate different theoretical positions. This study therefore adopted two theories that look at the phenomenon from different perspectives.

Research has shown that there is a positive relationship between spirituality and marital satisfaction (Ellison, Burdette, & Wilcox, 2010; Fincham & Beach, 2010; Mahoney, 2010) and that spirituality is a protector against marital distress (DeMaris, Mahoney & Pargament, 2010). However, researcher has also indicated that variations in spiritual levels in one or both spouses, can contribute to difficulties with spiritual compatibility in marriage. This is demonstrated in Olson and Olson's (2000). They found 53% of the spouses who underwent a study reported they

had unresolved differences in their spiritual beliefs and 36% reported spiritual variances which caused tension in their relationships.

Research by Stafford, David and McPherson (2014) also studied the relationship between sanctity and marital quality on 342 heterosexual couples using partner independence model and multilevel path modeling. They found that sanctity was a strong predictor of marital quality even forgiveness, unforgiveness and sacrifice were controlled for.

Spirituality was related to both husbands and wives' satisfaction but religiosity was related to both self and partner's satisfaction only for husbands and not for wives. This therefore suggests that spirituality predicts marital satisfaction for women than religiosity.

Studies have revealed that stressful life experiences are related to marital quality over time. That is to say that stress negatively influence the nature of spouses' marital perceptions and the way they interpret and process those perceptions (Neff & Karney, 2004). However, Johnson et al (2008) have concluded that perceived stress predicts marital satisfaction. In their study, they recruited 177 women from an online support groups for stepmothers. They realized that perceived stress were influenced by social network, household chores clarity, support network satisfaction, stepchild care disparity and stepmother role clarity. From the above studies, it can be said that stress may not directly lead marital satisfaction but may be mediating the relationship between other variables and marital satisfaction. Anxiety is one variable that has been neglected in the study of marital quality though it is capable of influencing marital quality. Attachment anxiety has been shown to be a strong predictor of marital satisfaction (Fuenfhausen & Cashwell, 2013). They further suggest that, attachment avoidance, attachment anxiety, and dyadic coping contribute to 67% discrepancies in marital satisfaction. It will therefore be

erroneous to conclude that general stress will predict marital distress or satisfaction. For the avoidance of doubt and in order to delve deeper and unravel the broad spectrum of variables that may work together with general stress to create distress, this research explored a set of psychosocial variables and how they relate to marital distress.

Studies have again found depression to be precipitate marital issues. For example, history of depression has been shown to increase the likelihood of divorce (Kessler, Walters & Forthofer, 1998). According to Koerner, Prince and Jacobson (1994) relationship between marital distress and depression are in three ways. Thus, marital distress causing depression, depression causing marital distress and a third variable causing both depression and distress. The study suggested communication as one of those variables. Again, it has been found that both depression and marital distress resulting in distressing thoughts, and emotions that negatively affect an individual's marriage, work and health (Mead, 2000). This suggests that depression affect marriage negatively as suggested by Beazon and Coyne (2000). According to Whisman, (2001), depression in marriage precipitate marital problems.

Communication has also been shown to be an indicator to marital distress. Alayi, AhmadiGatab and Khamen (2011) studied the relationship between communication skills and marital adjustment. The study revealed that spousal satisfaction was stronger among couples who had strong communication skills as compared to those with weaker communication. This implies that strong communication skills or good communication leads directly to marital satisfaction. Again, Amiri, Farhoodi, Abdolvand and Bidakhavidi (2011) found that communication had different effects on marital quality depending on the style. The study found Expectation-withdrawal and Mutual Avoidance communication styles had significant negative relationships with marital satisfaction while mutual constructive communication style also had a significant positive

relationship with marital satisfaction. From the above studies, one can pinpoint communication style and type as very vital in marriage which can either lead to distress or satisfaction. Some demographic characteristics such as age, education and number of children have also been found to affect marital quality (Allendorf & Ghimire, 2013; Anim, 2011, 2013). Anim (2011) suggests that the higher a woman's educational level, the more likely she is to experience marital distress while Allendorf and Ghimire (2013) argue that education predicted better marital quality. Another research by Anim (2013) found a negative relationship between age and marital distress, suggesting that the younger a couple is, the more distress they report. A study by Allendorf and Ghimire (2013) argues that women report less marital satisfaction as compared to men, Onyishi et al. (2012) reveal that number of children lead to marital satisfaction while on the other hand, Twenge et al. (2003) suggest that number of children rather lead to marital dissatisfaction.

In summary, studies on the influence of spirituality and psychological factors on marital distress have not been consistent. Whilst some of the studies suggest an impact of spirituality and psychological factors on marital distress (Allendorf & Ghimire, 2013; Anim, 2011, 2013), others found no significant impact of spirituality and psychological factors on marital distress (Kessler, Walters & Forthofer, 1998; Neff & Karney, 2004). On the basis of this, there is the need to conduct further research as means of clarifying the results.

2.3 Rationale of the Study

Research (eg. Bagwell, 2006; Ono, 1998; White & Rogers, 2000) has established that marital distress may be caused by a host of factors including poor communication, anxiety, stress and depression. The consequences of marital distress for the health and wellbeing of the couple and society at large have also been well documented (see Booth & Amato, 2001; Halford & Bouma, 1997; Markman et al, 2010; Mead, 2002).

However, the evidence that exists in the literature especially regarding the specific predictors of marital distress seems to be both inadequate and inconsistent. Researchers working in different contexts have obtained varying results regarding how factors such as spirituality, communication, age and level of education predict distress in marriages. While some have found significant positive relationships, others have found the opposite and others still have found no relationships.

Researchers have also shown that rural and urban folks show significant differences in their cognition, affect and behavior (Harpham,1994; Kovess-Masfétyet al., 2005; Marsella, 1992; Probst et al., 2005) but the different implications that these geographical differences may have on social relationships such as marriages have not been so keenly researched.

This situation makes the scope of the existing literature quite limited and inadequate in assisting the development of policies that will help address problems of marital distress across cultures. In other words, relying on research results from one context to develop interventions for another context may be problematic especially regarding a culturally specific issue like marriage.

The reason behind this study was therefore to provide evidence from Ghana regarding how spirituality and certain psychosocial and demographic factors such as communication, depression, stress, anxiety, age and education predict marital distress. The study was also conducted to fill the gap in the literature regarding how geographical contexts (rural and urban) weigh in the prediction of marital distress among women. Since researchers such as Whiffen, Foot & Thompson (2007) and Wishman, Weinstock & Tolejko (2006) have shown that women are more likely to be more affected by marital distress as compared to men, the study was focused on the female population of married women.

2.4 Statement of Hypotheses

From the theories and related studies reviewed, the following hypotheses were stated:

1. Urban women will more likely report higher marital distress than rural women.
2. There will be a significant negative relationship between spirituality and marital distress
3. Women who demonstrate negative communication will report higher marital distress as compared to those who demonstrate positive communication
4. Communication will significantly account for, and be negatively related to marital distress as compared to stress, anxiety and depression
5. Educational level will significantly predict marital distress as compared to number of children and age

2.5 Operational Definition of Terms

Negative Communication: Lower scores on the Communication Danger Signs Scale

Positive communication: Higher scores on the Communication Danger Signs Scale.

Spirituality: The individual's personal experience and closeness with the Supreme Being as measured by Daily Spiritual Experience Scale

Marital Distress: Low scores on the Marital Happiness Scale

CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter presents how the study was conducted in ensuring valid findings regarding how spirituality and some psychosocial factors such as communication, depression, anxiety and stress relate to marital distress among women in rural and urban settings in Ghana. The chapter covers description of the target population of the study, the sample size and sampling technique employed, the measures used in soliciting for data, the research design and a description of the data collection procedures used in the study as well as some ethical considerations that were adhered to.

3.1 Research Setting

The study was carried out in two locations: Akyem Sekyere in the Eastern region and Dansoman in the Greater Accra region of Ghana.

Dansoman is a suburban town in the Greater Accra Region of Ghana, located near Accra in the Ablekuma south municipality. Several educational institutions are located in Dansoman, including the Dansoman Secondary School, the Methodist University College of Ghana and a range of both public and private basic schools. According to the Ghana Statistical service (2012), a population of 5000 or more is considered an urban area and since the population of Dansoman is more than 5000, it is qualified as an urban setting, deemed fit for the study.

Akyem Sekyere, on the other hand, is located in the Eastern region of Ghana. It is one of the villages within the Atiwa East district. It is a small area with a predominantly middle/low-income people. The people are predominantly small scale farmers. According to the Ghana

statistical service (2012), a population less than 5000 is considered a rural area and since the total population of Akyem Sekyere is also less than 5000, it is deemed fit to be used for the study as a rural setting. The people practice the traditional extended family system specifically the matrilineal family system. The members in the family stay in the same house and share common facilities. Dansoman and Akyem Sekyere were therefore two locations that provided the study with the opportunity to test rural and urban samples on the dependent variable: marital distress.

3.2 Population

According to Welman and Kruger (2001), the target population is the population to which researchers ideally want to generalize their results. Melville and Goddard (1996) stated that a population is any group which is the subject of research interest. Since the study was interested in comparing rural and urban women on marital distress, the population of married women in Dansoman and Akyem Sekyere was used. Only women who had been married for at least a year or more were selected for the study. This was to ensure that respondents had been in marriage long enough to give reliable information about their marital experiences. Conscious efforts were also made to ensure that all participants both in the rural and urban areas had stayed within those locations for not less than six months. This way it would be adequate to assume that the location has had some form of influence on them.

3.3 Sampling Technique and Sample Size

When the population for a research study is too large for the researcher to attempt to survey all of its members, a small, but carefully chosen sample can be used to represent the population (Opoku, 2002). The sample reflects the characteristics of the population from which it is drawn.

Frank and Min (2007) emphasized that the power of generalization of a quantitative survey depends on the extent to which the sample selected is representative of the target population. To obtain the representative sample for adequate generalization, sampling technique and the size of the respondents must be taking into consideration.

The specific sampling technique used for the study was the purposive non-probability sampling technique. This is because, participants were chosen based on their years of marriage and the length of time stayed in their respective locations. The main disadvantage of the purposive sampling technique is that results obtained are subject to some degree of bias, due to the frame and population not being identical. However, conscious efforts were made to ensure that the sample drawn had characteristics that made them quite representative of the entire populations.

According to Tabachnick and Fidell (1996), the minimum sample size for testing a model is $50+8M$ and $104+M$ for testing individual predictors (where M is the number of predictors). In this study there were four (4) predictors. Therefore, the minimum sample size required to meet the requirement for this project was 82 and testing individual predictors is 108.

However, Opoku (2002) notes that increasing the sample size increases the reliability of the research findings. Based on this, two hundred (200) participants were targeted for the study. This consisted of one hundred (100) married women from Akyem Sekyere representing the married women from rural area and one hundred (100) women from Dansoman representing the married women from urban area.

3.4 Measures

Data collection was made using questionnaires. The questionnaire used was classified into three parts, with each section capturing specific data. The first part concentrated on the participants'

demographic responses including location, educational background, age and number of children. The second concentrated on the independent variables that is spirituality and psychosocial factors. The last section measured the dependent variable (marital distress).

Predictive Measures

Spirituality- this was measured using the Daily Spiritual Experience Scale (Underwood & Teresi, 2002). The scale is a 15-item self-report measure of spiritual experience. It specifically measures ordinary, or daily, spiritual experiences – not mystical experiences (e.g., hearing voices) – and how they are an everyday part of the individual's life. Sample items on the scale include “I feel God/ Allah's presence” and “I find strength in my religion or spirituality”. The first 15 items of the questionnaire are measured on a 6-point Likert-type response format: many times a day, every day, most days, some days, once in a while, and never or almost never. High scores on the scale reflect less level of spirituality and low scores also reflect high level of spirituality. The reliability of the scale as reported by Underwood and Teresi (2002) is 0.85. When the instrument was piloted, a Cronbach's alpha of .84 was obtained. Reliability of .82 was also found in the present study.

Psychosocial factors- The Depression, Anxiety and Stress Scale (Lovibond & Lovibond, 1995) was used to measure the psychosocial factors of Depression, anxiety and stress. It is a 42-item self-report measure. The items fall into three subscales: Depression (D), Anxiety (A) and Stress (S) with 14 items per subscale. Each item is scored from 0 (“did not apply to me at all”) to 3 (“applied to me very much, or most of the time”) in terms of how much the item applied within the past week. Lower scores on the overall scale reflect high psychological wellbeing and higher

scores represent low psychological wellbeing. Reliability coefficients obtained for the three subscales in this study were 0.71 for depression, 0.79 for anxiety and 0.81 for stress. The depression subscale contained sample items like “I cannot seem to experience any positive feeling at all” while the anxiety subscale contains items like “I feel scared without any good reason”. The Stress subscale contains items like “I am in a state of nervous tension”.

Communication- the communication danger signs Scale (Markman, Stanley & Blumberg, 2010) was used to measure communication styles and trends in marriages. This measure includes 7 items rated on a 3-point scale ranging from 1 (almost never) to 3 (frequently). An example of an item is ‘My partner criticizes or belittles my opinions, feelings or desires’. Piloting of this instrument in this study produced a Cronbach’s alpha of 0.73. With the current study, the items on the scale were inversely scored with lower scores on the scale reflecting negative communication and higher scores reflecting positive communication

Dependent Measure

Marital Distress- Marital distress was measured by the Marital Happiness scale designed by Azrin, Naster and Jones (1973). This measure assesses the extent of happiness people feel in their marriages on a scale of 1 (completely unhappy) to 10 (completely happy). It measures the level of marital happiness in nine different aspects of marital relationships including sex and communication. There are also items that measure global marital happiness on the scale. The scale was used because while higher scores indicate happiness, lower score indicate distress. An internal consistency coefficient of 0.87 was obtained when the instrument was piloted.

3.5 Research Design

According to Adams and Sevaneveldt (1985) “research design refers to a plan, blueprint or guide for data collection and interpretation- a set of rules that enable the investigator to conceptualize and observe the problem under study” (p.103). The study adopted the cross-sectional survey research design. This is a type of observational study that involves data collection from a population, or a representative subset, at one specific point in time. The aim to provide data on the entire population of married women under study made the use of this design appropriate for this study. The design allowed for the collection of data from a large sample of married women with a wide range of socio-demographic characteristics which improved the representativeness of the sample to the population.

3.6 Procedure

Ethical clearance was sought from the Ethics Committee for Humanities, University of Ghana. A pilot study was conducted prior to the actual data collection to ascertain the appropriateness and the suitability of the tests and the questionnaires on Ghanaian samples. Twenty women who have been married for at least a year were conveniently selected and use in the pilot study. The piloting gave allowed the researcher to ascertain whether participants would have any difficulty responding to the measures. It was observed that all the scales had acceptable reliability for statistical analysis as suggested by Nunnally (1978). The reliability values for the scales adopted for the study were:

- The Depression, Anxiety and Stress Scale (0.94)
- Communication danger signs scale (0.84)
- Marital happiness scale (0.88)

- Daily Spiritual Experience Scale (0.84)

A letter of introduction was then obtained from the Department of Psychology, University of Ghana, Legon introducing the researcher to the Chief of Akyem Sekyere to seek permission to conduct the study. After permission was granted, a date and time of convenience was then agreed upon to inform and interact with the married women. The researcher visited the houses of the women for the administration of the questionnaires with the help of two members from the chief's palace. Consent was sought from participants before commencing with the administering of the questionnaire. The items in the questionnaire were translated in Twi for the participants who could not read and write. This was effectively done by researcher is a native of the Twi language. After the completion of the data collection, the respondents were thanked for their time and efforts.

From Akyem Sekyere, data collection was also done at Dansoman. At Dansoman, the researcher, with two research assistants, collected data from offices, homes and within the vicinities where married women could be found. The same procedures as used at Akyem Sekyere were followed. After data collection, the responses were collated and statistically analyzed.

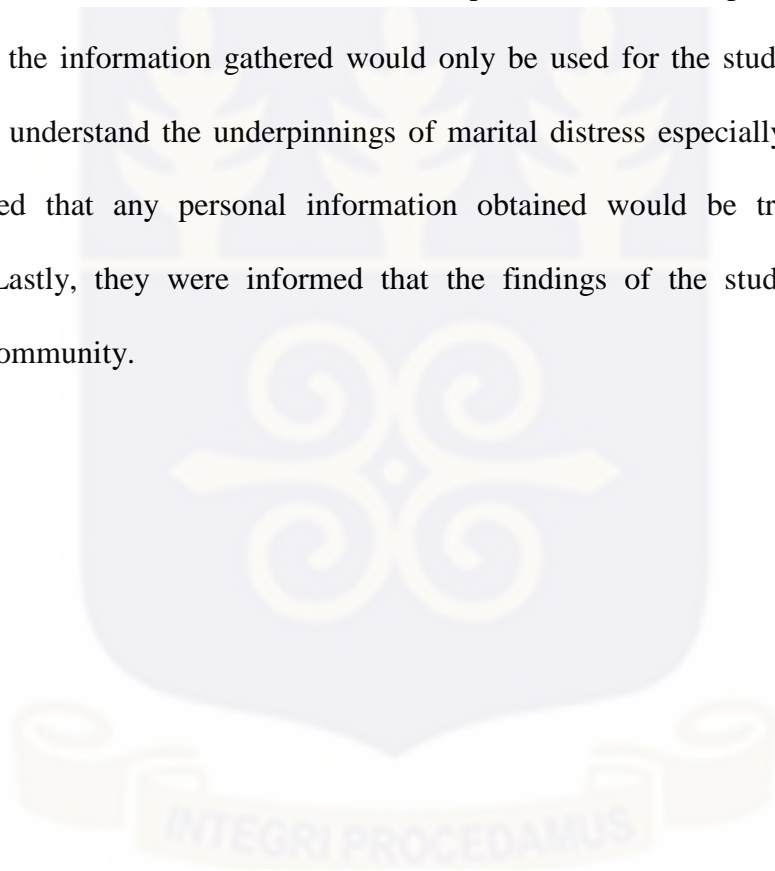
3.7 Ethical Considerations

All the American Psychological Association (APA, 2002) ethical principles strictly guided the study. The following ethical concerns were met to ensure absolute adherence to ethical guidelines and procedures.

First, informed consent was obtained by asking for respondents' voluntary participation in the study and each respondent signed a consent form to indicate voluntary agreement to participate. In Akyem Sekyere, permission was sought first from the chief to conduct the study and two

members from the palace were asked to introduce the researcher to the various homes of the women.

The questionnaires were handed over to the participants with introductory letter that detailed out the purpose of the study, expected duration and their right to decline to participate or to withdraw from the research once participation had begun. This was meant to ensure that participants fully understood the research and what information was required of them. The participants were again made aware that the information gathered would only be used for the study for which it was collected to help understand the underpinnings of marital distress especially in the area. They were also assured that any personal information obtained would be treated with utmost confidentiality. Lastly, they were informed that the findings of the study would be made available to the community.



CHAPTER FOUR RESULTS

4.0 Introduction

This chapter presents the results from the analyses of the data by summarizing the key findings in appropriate tables. This study sought to examine the Spirituality and Psychosocial factors associated with marital distress among women in rural and urban settings in Ghana. In all, 171 participants from both urban and rural settings were involved in the study. The Statistical Package for Social Sciences (SPSS) 20.00 was used in analyzing the data and series of statistical tests were used including descriptive statistics to summarize the data. The main inferential statistical tests that were used to analyze each hypothesis are discussed.

4.1 Participants and Demographic Data

Two hundred questionnaires were distributed to the respondents. Out of the 200 questionnaires distributed, a total of 171 questionnaires were completed and returned resulting in a response rate of 85.5% which was very good for analysis (Babbie & Mouton, 2001). The ages of the respondents ranged from below 20 to 59 and above with their educational level ranging from no formal education to tertiary education. Table 1 below presents a summary of respondents' demographic characteristics.

Table 1: Demographic characteristics of the Sample

Demographic Variable	Frequency (F)	Percentage (%)
Settings		
Rural	87	50.9
Urban	84	49.1
Age		
Below 20 years	6	3.5
25 – 29 years	42	24.6
30 – 39 years	71	41.5
40 -49 years	31	18.1
50- 59 years	15	8.8
59 years and above	6	3.5
Educational Level		
No formal education	27	15.8
Basic education	63	36.8
Senior education	24	14.1
Tertiary	57	33.3
Number of Children		
None	18	10.5
1-2	62	36.3
3-5	70	40.9
6 and above	21	12.3

Source: Researcher's Field Data, 2014

4.2 Preliminary Analysis

The normality of the data obtained for the study was verified to meet the basic requirement for the use of parametric statistical tests. Regarding the issues of normality, all variables were normally distributed (see Table 2). Normality was accepted when skewness and kurtosis were between -1 and +1 (Tabachnick & Fidell, 2001). All the variables were accordingly used in the parametric statistical tests.

As part of the preliminary analysis, coefficient of the internal consistency (cronbach's α) was computed to establish the reliability of each questionnaire. Measures had satisfactory reliabilities, with alpha ranging from 0.72 to 0.88 (table 2). Nunnally (1978) has indicated that coefficient alpha should be equal or higher than .70 if a set of items can constitute a reliable scale.

Table 2: Descriptive Statistics

Variables	Mean	SD	Skewness	Kurtosis	Alpha
Depression	8.51	4.416	.675	.162	.72
Anxiety	8.13	4.692	.630	.143	.79
Stress	8.50	5.304	.683	.019	.81
Spirituality	64.82	7.792	-.896	.182	.84
Communication	12.58	3.365	.597	.124	.84
Marital distress	3.15	14.117	.581	.188	.88

Source: Researcher's Field Data, 2014

Normality of a variable is established when the variable yields skewness and kurtosis that falls between -1 and +1 (Tabachnick & Fidell, 2001). Test of normality in this study, showed all the variables to be normally distributed because the variables were all within the accepted value range required for normality. Normality tests are to determine the normal distribution of a data set. The normal distribution is the basis for most parametric statistical analysis. Finally, Pearson correlation analysis was performed to find out the relationship between the demographic variables, predictive measures and dependent measures.

Table 3: Correlations Matrix Between Independent Variables

Variables	1	2	3	4	5	6	7	8	9
1 Age	-								
2 Edu. Level	-.156*	-							
3 No. children	.305**	-.461**	-						
4 Marital distress	-0.004	.132*	-0.055	-					
5 Depression	0.029	-.161*	.152*	-0.113	-				
6 Anxiety	0.083	-.205**	.220**	-.184**	.807**	-			
7 Stress	0.056	-0.038	0.047	0.000	.734**	.721**	-		
8 Spirituality	0.022	0.011	0.038	-.133*	-0.033	-0.051	-0.117	-	
9 Communication	0.089	-.222**	.138*	-.296**	.308**	.364**	.254**	-0.007	-

* $p < 0.05$ level, ** $p < 0.01$, $N = 171$

Table 3 shows that anxiety ($r = -.184$, $p < .01$), spirituality ($r = -.133$, $p < .05$), communication ($r = -.296$, $p < .01$) had significant negative relationship with the dependent measure. On the other hand, depression ($r = -.113$, $p > .05$), number of children ($r = -.055$, $p > .05$), age ($r = -.044$, $p > .05$) and stress ($r = .000$, $p > .05$) did not have any significant relationship with the dependent measure.

4.3 Hypotheses Testing

Due to the fact that the study was generally interested in determining the strength and direction of the relationships between the independent variables and the dependent variable, the Pearson Product Moment Correlation Coefficient was one key test used. Again there was the interest in comparing two independent samples (rural and urban women) on one dependent measure (marital distress). For this reason, the Independent Samples t -test was also used in the study. The

aim of finding out the power of each of the demographic and psychosocial variables in predicting the dependent measure which necessitated the use of Hierarchical Multiple Regression analyses.

Data on the dependent measure was continuous and was on at least an interval scale

4.3.1 Hypothesis 1

This hypothesis projected that, urban women will more likely report higher marital distress than rural women. The aim of this hypothesis was to determine the difference between the two independent groups and so the Independent t test was used to test the hypothesis.

Table 4: Independent Samples t -Test of Marital Distress in Rural and Urban Women

Settings	N	Mean	Std. Deviation	Std. Error Mean	df	t	P
Rural	87	14.03	3.325	0.356	169	1.813	0.036
Urban	84	11.11	3.362	0.367			

* $p < 0.05$

The results obtained from Independent Samples t -Test with equal variances between the two groups assumed as summarized in Table 6, revealed a significant difference between rural and urban women at the .05 alpha level, [$t_{(169)} = 1.813, \rho < .05$]. Thus, women in rural settings experience less marital distress than their urban counterparts. This supports hypothesis 1 that urban women will more likely report higher marital distress than rural women.

4.3.2 Hypothesis 2

This hypothesis stated that, there would be a significant negative relationship between spirituality and marital distress. The Pearson Product Moment Correlation test was used to test this hypothesis because the purpose was to examine the strength and direction of the relationship

between the two variables. In the Table 5, results of the test are presented followed with interpretations of the findings obtained:

Table 5: Correlation between Spirituality and Marital Distress

VAR	N	Mean	SD	R	P
Spirituality	171	64.82	11.488	-0.133*	0.042
Marital distress	171	68.28	14.117		

* $p < .05$

The results presented in Table 5 demonstrates that there was a significant negative relationship between spirituality ($M = 64.82$, $SD = 11.488$) and marital distress ($M = 68.28$, $SD = 14.117$) ($r = -0.133$, $p < .05$). This showed that, a woman's involvement in spiritual activities has significant implications for her marital distress.

The negative relationship observed means that, the higher a woman's spirituality, the lower her marital distress. For this reason, it can be concluded that hypothesis two was confirmed because its prediction that there would be significant negative relationship between spirituality and marital distress as made in hypothesis two was proven correct.

4.3.3 Hypothesis 3

This hypothesis predicted that women who show negative communication would show higher levels of marital distress as compared to women who show positive communication. The goal of this hypothesis was to determine the difference between the two independent groups and so the independent t test was used to test the hypothesis.

Table 6: Independent Samples *t*-Test of Marital distress by Communication Types

Type of Communications	N	Mean	Std. Deviation	Std. Error Mean	df	<i>t</i>	P
Positive communication	50	73.32	15.423	2.181	169	3.074	0.002
Negative communication	121	66.2	13.048	1.186			

* $p < 0.05$

The results displayed in Table 8 above were obtained from the Independent *t*-test with equal variances between the two groups. It shows that, a significant difference existed in both positive and negative communication types at the .05 alpha level, [$t_{(169)} = 3.074, \rho < .05$]. Thus women who negatively communicated with their husbands, experienced more marital distress as compared to those who communicated positively with their spouse. This supports the hypothesis that negative communication will predict higher marital distress as compared to positive communication.

4.3.4 Hypothesis 4

This hypothesis anticipated that, communication will significantly account for, and be negatively related to marital distress as compared to stress, anxiety and depression. The purpose of this hypothesis was to explore the linear relationships between the psychosocial factors associated with marital distress and the order in which they predict marital distress. In this sense, the Hierarchical Multiple Regression test was used.

Table 7: Results of Hierarchical Multiple Regression Analyses

Model		B	Std. Error	β
1	(Constant)	83.924	4.012	
	Communication	-1.244	0.308	-0.297*
2	(Constant)	83.185	4.071	
	Communication	-1.329	0.318	-0.317*
	Stress	0.213	0.202	0.08
3	(Constant)	81.212	4.073	
	Communication	-1.099	0.325	-0.262*
	Stress	0.718	0.277	0.270*
	Anxiety	-0.85	0.325	-0.282*
4	(Constant)	81.231	4.095	
	Communication	-1.098	0.326	-0.262*
	Stress	0.726	0.300	0.273*
	Anxiety	-0.834	0.398	-0.277*
	Depression	-0.029	0.423	-0.009

$R^2 = 0.088, 0.094, 0.129$ and 0.129 for steps 1, 2, 3 and 4 respectively. $\Delta R^2 = 0.088, 0.006$ and 0.036 for steps 2, 3 and 4 respectively. * $p < .05$

From the Hierarchical Regression results shown in Table 4, it is demonstrated that the model was significant ($F_{(1, 169)} = 16.288, p < .05$). In other words, the model significantly accounted for marital distress which was the dependent variable. The results also showed that, communication ($\beta = -.297, p < .05$) significantly predicted marital distress and so did anxiety ($\beta = 0.282, p < .05$). However, depression ($\beta = 0.009, p > .05$) and stress ($\beta = 0.08, p < .05$) did not make any significant contribution towards predicting marital distress.

Communication accounted for 8.8% of the total variance in marital distress, which was higher than Anxiety which contributed 3.6%. Stress made the least significant contribution, accounting for 0.6% of the total variance. This shows that, among the psychosocial variables tested, communication had the highest power in predicting marital distress. Depression made no contribution at all. In this regard, hypothesis one was supported because although communication significantly predicted more variance in marital distress, it was negatively related to marital distress compared to anxiety and stress.

4.3.5 Hypothesis 5

This hypothesis stated that, educational level would significantly predict higher marital distress as compared to number of children and age. The purpose of this hypothesis was to explore the linear relationships between the three demographics variables associated with marital distress and the order in which they predict marital distress. For this reason, the Hierarchical Multiple Regression test was used.

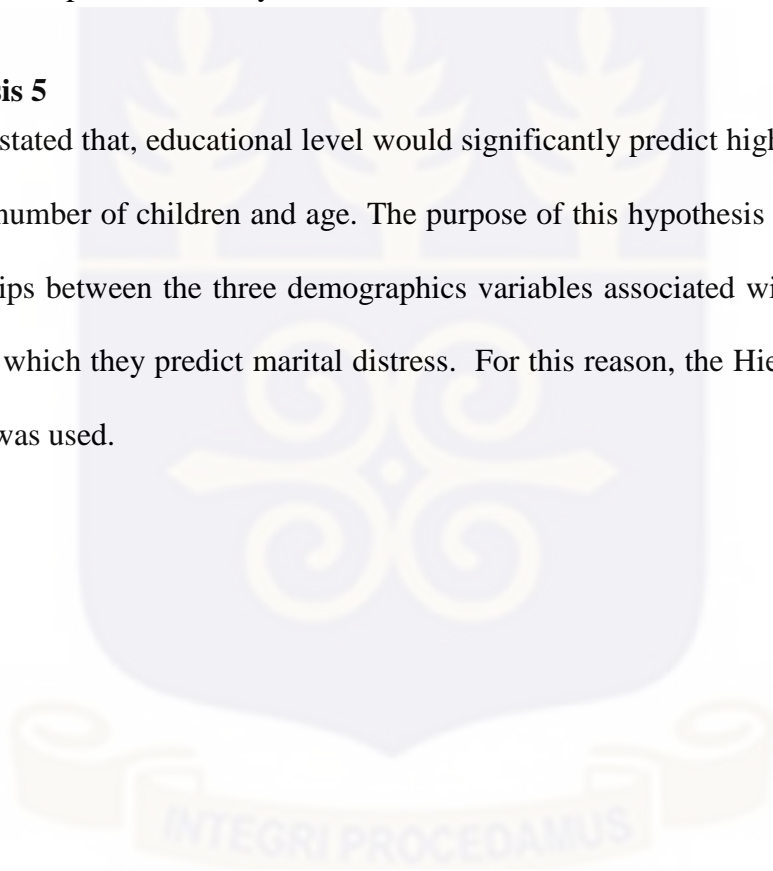


Table 8: Results of Hierarchical Multiple Regression Analyses Demographic Variables

Model		B	Std. Error	β
1	(Constant)	0.922	0.088	
	Educational Level	0.215	0.031	0.473*
2	(Constant)	1.039	0.128	
	Educational Level	0.195	0.035	0.428*
	Number of children	-0.022	0.017	-0.097
3	(Constant)	1.16	0.155	
	Educational Level	0.194	0.035	0.426*
	Number of children	-0.015	0.018	-0.068
	Age	-0.044	0.032	-0.096

$R^2 = 0.473, 0.481$ and 0.489 for steps 1, 2 and 3 respectively. $\Delta R^2 = 0.224, 0.007$ and 0.008 for steps 2 and 3 respectively. * $p < .05$

As shown in table 7, the Hierarchical Regression showed a significant model ($F_{(1, 169)} = 48.682, p < .05$) implying that the demographic variables significantly predicted marital distress. It is shown here that, Educational level ($\beta = .473, p < .05$) significantly predicted marital distress, but number of children ($\beta = -0.068, p < .05$) and age ($\beta = 0.096, p < .05$) did not significantly predict marital distress as well.

The percentage variance accounted for by educational level was 47%. Number of children and age made no contribution. In respect of this, it can be concluded that hypothesis four was

supported because it correctly predicted that educational level will significantly account for more variance in marital distress as compared to number of children and age.

4.4 Summary of Findings

At the end of the data analyses, it was found that:

1. Urban women experienced more marital distress than rural women.
2. A significant negative relationship existed between spirituality levels and marital distress. That is, the more a woman's spirituality, the less her marital distress
3. Negative communication predicted higher marital distress as compared to positive communication.
4. Lack of communication predicted marital distress more than stress and the other psychosocial variables. Stress was found not to predict marital distress on its own. However, when it was combined with anxiety and depression, it significantly predicted marital distress than anxiety and depression. This shows that stress does not predict marital distress alone, but when anxiety and depression come to play, stress leads to more marital distress than anxiety and depression.
5. Educational level was more predictive of marital distress among women than number of children and the age brackets of the woman

In a nutshell, the data analyses confirmed all the research hypotheses. The next chapter therefore discusses the findings and their implications for future research, policy making and therapeutic interventions. This would help in the proper applications of the findings, to yield desired results.

CHAPTER FIVE

DISCUSSION

5.0 Introduction

Marriage is an institution that exists in almost all societies. Marriage over the years has revealed both negative and positive effects on the lives of individuals who get into it. Often, the negative consequences are found to occur when the relationship between couples turns sour. The heavy research attention has however not been able to provide context-specific evidence on the factors that precipitate distress in marriages. The specific roles of personal factors such as spirituality, communication styles and demographic variables such as age and education in predicting marital distress have also not been so keenly researched.

Underpinned by theories such as the Cascade theory of marital dissolution and the Vulnerability-Stress-Adaptation Models which explain the factors and conditions under which marital quality and stability could deteriorate over time, this present study set out to investigate the psychosocial factors associated with marital distress among married women in rural and urban settings in Ghana. The main objective of the study was to determine the differences in marital distress among women residing in rural and urban settings and expand the existing literature with evidence from Ghana.

Other objectives included assessing the relationship between spirituality and marital distress (largely because Ghanaians are known to be spiritual or religious), and assessing the extent to

which psychosocial factors such as depression, anxiety, stress and communication predict marital distress among rural and urban women.

Review of related studies led to the formulation of five main hypotheses which predicted possible relationships between the predictor variables and the criterion. Application of statistical analyses to the data collected led to the confirmation of all predictions made. In this chapter, the implications of the findings obtained for the existing literature, future research, policy and intervention are discussed.

5.1 Differences between rural and urban women in terms of marital distress

The first hypothesis stated that urban women will more likely report higher marital distress than rural women. Data analyses supported this prediction as an independent t-test comparison of rural and urban women on marital distress yielded a significant difference with urban women showing higher levels of distress. This finding means that women in urban settings experience more marital distress than their rural counterparts. Support systems in the rural areas could be accounting for this difference among rural and urban women.

The finding is consistent with the study by Twumasi-Ankrah (1995) who found higher level of marital distress among urban women than among rural women. As noted by Twumasi-Ankrah (1995), rural folks in Ghana often live more traditional and collectivistic lives than urban folks. Thus the tendency for the rural dweller to obtain social support in cases of distress is likely to be higher than that for the urban dweller leading to higher level of marital distress among urban women than among rural women.

This finding is in line with the study by Kovess-Masféty et al (2005) that emphasized that people living in urban areas experience more marital distress compared to those in the rural areas. This may have arisen because of the pressures from migration, overcrowding and hostile behaviours exhibited by the urban folks. The overcrowding and hostile behaviours exhibited by the urban folks add up to the high level. As a result of the individualistic living that is gradually creeping into Ghana's urban areas due to modernization, social support may be difficult to access and urban women may tend to bottle up their feelings, marital anxieties and challenges which could lead to the development of marital distress.

The rural environment makes it conducive for rural folks to share their problems with one another which serve as a source of support for them to be better able to cope with their problems and challenges. Stressful life situations in the urban centres, including traffic jams, noise, high cost of living and costly child care are rare in rural areas in Ghana, and this may also account for the differences that have been observed.

Another reason for the low level of marital distress among rural women compared to urban women is that spirituality levels are higher among rural women than urban women. For example Cheach, Trinder, Gokavi (2010), suggests that rural dwellers are more religious than urban dwellers. In other words, the tendency for a rural dweller to believe in a spirit or deity and engage in rituals that express belief in superstition is higher than that of a city or urban dweller. Researchers such as Brome et al (2000) have noted that spiritual activities offer women in recovery an avenue to express problems, seek guidance from others or from a higher power, and move from disharmony to harmony with self and others without fear of repercussion, shame, or

punitive actions. Thus the tendency for rural women to be more spiritual than urban women could also mean higher tendencies for urban women to experience more distress in areas of life such as marriage and this has been demonstrated by the finding obtained here.

5.2 Relationship between spirituality and marital distress

The second prediction was that there will be a significant negative relationship between spirituality and marital distress. This prediction was supported. This means spirituality helps in reducing the level of marital distress among married women. This result suggests that people are better able placed to cope in their marriages when they are spiritual or closer to a supreme being.

This finding is consistent with previous studies on the relationship between spirituality and marital distress, For example, studies by Ellison, Burdette and Wilcox, (2010), Fincham and Beach, (2010) and Mahoney, (2010) all found positive relationships between spirituality and marital satisfaction, indicating that the more spiritual or religious a person is the higher their levels of satisfaction in a marriage. Researchers such as Pargament and Mahoney (2005) have noted that religious people, especially Judeo-Christians, are likely to view marriage as a sacred manifestation of God and so such individuals will go to great lengths just to protect what they consider sacred. However, the evidence in the literature seemed to have all come from cultural and geographical contexts that have social and cultural characteristics that differ from Ghana. Assuming that these findings would apply to Ghana would therefore have been erratic. There was the need to therefore test the situation as it applied in the Ghanaian context and a negative relationship was predicted on the basis of the overwhelming evidence that spirituality prevents distress.

Consistent with the prediction made in the study, a significant negative relationship was observed. That is, women who reported higher levels of spirituality also reported lower levels of marital distress. The finding therefore proved the suggestions of researchers such as Ellison, Burdette and Wilcox, (2010), Fincham and Beach (2010), and Mahoney (2010) true. These researchers all found from their independent studies that spirituality has a positive relationship with marital satisfaction. According to DeMaris, Mahoney and Pargament (2010) spirituality is a protective factor against marital distress and it is in harmony with the present study which found spirituality to have a negative relationship with marital distress.

Again, Stafford, David and McPherson (2014) stipulated that sanctity or holiness is positively related with marital satisfaction and negatively related to marital dissatisfaction. The current finding is therefore consistent with the finding of the Staff study as well. Perhaps, the belief that through their trusting and believing in their God (Supreme Being), their problems would be resolved is a main reason why their distress levels go down. Again, others also think that whatever they are going through may be the will of their supreme being and as such they can only be relieved of their challenges if only they trust in the spirit that holds the power to do all things.

One other possible explanation for this finding is that, spirituality may bring social support which is known to buffer the effects of stress. This is because, the books seen as sacred by most spiritual people, such as the Bible of Christians (who formed the majority of the sample in this study), often provide assuring texts that assures believers of the willingness and the capability of their supreme being to help in all situations. Given this assurance, some positive thought

patterns, which is proven by the cognitive theory of psychology to be very potent in helping deal with depression, anxiety and general distress (Beck, 2008), could set in and help people cope with distressing situations better. In this sense, spirituality could truly reduce or even prevent the onset of distress.

Also, highly spiritual people normally belong to religious groups that have clearly stated guidelines of how married couples should relate to each other. Christians and Muslims largely believe that the man is the head of the house and the woman should be submissive and obey. African traditional custom religion and custom (which is normally practiced in the rural areas in Ghana) also shares in this same view. In this regard, role confusions and power conflicts which often precipitate distress in marriages (Anim, 2013), are likely to be reduced in marriages involving women who are highly involved in these religious groups. Thus spirituality could truly reduce marital distress.

5.3 Communication and Marital Distress

The third hypothesis predicted that women who demonstrate negative communication would report higher levels of marital distress as compared to those who report positive communication. As expected, the hypothesis was confirmed suggesting that the style or nature of communication is very vital in determining the incidence of distress. The finding therefore confirms those reported by Jacobson and Christensen (1996) and Amiri et al (2011) and proves that in marriages where communication is negative, distress may be experienced. Nukunya (2003) has revealed that in the Ghanaian context, a wife is not expected to address her husband by her personal name but as her master. This goes to suggest that women are required to treat their husbands with respect and therefore anything contrary to that, will result in problems hence those who communicate negatively result in marital distress.

The result is also in line with the study by Jacobson and Christensen (1996) which found that communication is vital in marriage and ensures lower level of marital distress. This was confirmed by Amiri, Farhoodi, Abdolvand and Bidakhavidi (2011) who also reported that differences in communication styles affect marital quality. They revealed that expectation-withdrawal and mutual avoidance communication styles were negatively related to marital satisfaction, whereas Mutual constructive communication was positively related to marital satisfaction.

The similarities in the findings suggest that perhaps, one of the cultural universals regarding the factors that could precipitate distress in marriages is communication. This goes to indicate that couples would have to be cautious of their style of communication as this could prove a decisive factor in the quality of the marriage.

5.4 The relationship between marital distress, communication, stress, anxiety and depression

The first prediction made in this study was that, communication would significantly account for, and be negatively related to marital distress as compared to stress, anxiety and depression.

This prediction was made because findings of previous studies presented in the literature seemed to suggest that though these psychosocial variables have collective effect on the level of distress or comfort in marriages, communication is key in determining how successful a marriage is. For example, Jacobson and Christensen (1996) found from their study that, negative or poor communication, more than any other social or psychological variable, predicted marital distress among their sample.

Results from a hierarchical multiple regression that compared the predictive powers of these psychosocial variables on marital distress in the present study revealed that, communication accounted for the most variance in marital distress than stress, anxiety and depression. A significant negative relationship was also observed between communication and marital distress. With the Danger Sign Communication Scale interpreting lower scores as indicative of negative communication, the implication of this finding is that negative communication associated with higher marital distress.

The finding is in line with those obtained by the Jacobson and Christensen (1996) study which stated that problems in communication or interaction between couples were core indicators of marital distress.

The finding again showed that anxiety significantly contributed to marital distress, accounting for 3.6% of the variance observed. This supports findings obtained by Renshaw, Rodebaugh and Rodrigues (2010) and presented in the marital distress literature which suggest that anxiety disorder in a spouse may result in marital distress in his/her partner. What the present study adds is that, women who report higher levels of anxiety also experience significant levels of marital distress in themselves. Perhaps, poor communication between spouses creates anxiety among them which in turn manifests in distress in the marriage.

Considering that anxiety is known to often precipitate paranoid behavior in people and that paranoid behavior could lead people to become violent or aggressive (Carroll, 2009), the present findings could have implications for domestic violence which is on the rise in Ghana.

Despite the seeming rationality that anxiety in a partner would associate with marital distress in a marriage, the present finding is inconsistent with one of the observations made by Fuenfhausen

and Cashwell (2013) that attachment anxiety is a strong predictor of marital satisfaction. Again, the differences in findings obtained between these studies could be a matter of cultural or contextual orientation. Ghanaians are found to be collective in nature and in collective culture, stress and depression in one spouse could lead to trouble not only between the partners, but also between the families of both partners. In this sense, one partner's cognitive evaluation of a situation could create considerable distress in the marriage and this has been supported by the findings of this study.

Stress and depression however did not show any significant contribution to marital distress, at least not when they were measured alone against marital distress. This goes to say that, stress alone does not lead to marital distress but may work together with other factors to produce it. This is because the overall regression model of stress, anxiety and depression was significant. This was confirmed in a study by Johnson, Wright, Craig, et al (2008) which found that stress might not have a direct relationship with marital satisfaction but maybe mediating the relationship between other variables and marital satisfaction.

According to Story and Bradbury (2004) some stressful situations may positively affect marital quality or satisfaction by providing opportunities for couples to strengthen their relationships. This way, moderate amounts of stress could even prove beneficial.

The finding that stress does not directly lead to marital distress is also in line with the Vulnerability-Stress-Adaptation Model by Karney and Bradbury (1995). According to the model, the key contributors to the couple's perception of marital quality are the ways in which they deal with stressful events. This explains that when couples perceive situations as very stressful and cannot cope with them, it can then affect their marriage negatively and vice versa. This therefore

suggests that stress in itself does not lead to marital distress but a couple's resources to cope, or their appraisal styles may either strengthen the relationship or weaken it. This assertion is in line with studies by Halford (2000) which points out that stressful life event can have both negative and positive effects on a relationship depending on the strength of the couple's adaptive processes. The implication is that counselors and clinician who may handle couples with marital problems will have to focus on building positive stress coping skills so that the couple's appraisal of stressful events does not contribute to distress in the marriage.

The finding that stress may however combine with other factors such as communication and anxiety to predict marital distress still sounds a note of caution and married women may have to guard against these other factors in order to protect their marriages against distress.

The findings also revealed that, just like stress, depression does not directly predict marital distress. This is also consistent with findings by Koerner, Prince and Jacobson (1994). They suggest that the relationship between depression and marital distress are in three different ways: marital distress can cause depression, depression can cause marital distress or a third variable causes both depression and marital distress. The finding here seems consistent with the third assertion which states that a third variable can cause both depression and marital distress. The fact that together with other variables depression predicted marital distress proves this to be true.

The researchers further explained that one of such third variables is communication. To the extent that communication has been found in this study to be predictive of marital distress, confirmation has been attained for the evidence presented by these researchers.

This finding has shown that communication is very vital in marriage and therefore appropriate language, gestures and respect should be taken into consideration when communicating to ones

partner to bring peace and stability in marriages. This suggests that, it would be more beneficial for couples to begin to consider their tone, and mode of communication, as any negativity could cause distress and its consequent problems in the marriage.

5.5 Demographic Variables and Marital Distress

The last hypothesis predicted that educational level will significantly predict marital distress as compared to number of children and age. Standard multiple regression analyses supported this prediction when it was observed that education predicted the highest percentage of variance (47%) in marital distress as compared number of children and age. This prediction was also supported indicating that educational level is important demographic factor in predicting marital distress compared to number of children and age.

Contrary to this finding is the study by Onyishi et al (2012) which found out that no demographic characteristics contribute to marital distress among marriage couples. The inconsistency can be due to the fact that Onyishi et al (2012) used couples (both males and females) and the present study used only females.

The finding is however in line with the study by Malek and Tie (2012) which suggested that an individual's demographic characteristics such as age, level of education, number of children, socio-economic status and a host of others play significant roles in the person's experiences and behaviours but that of educational background contributes significantly compared to the other variables. The finding also agrees with the study by Stevenson and Wolfers (2009) which

suggested that women are less satisfied in marriage than their male counterparts, indicating that gender plays an important role in determining marital satisfaction and conversely, distress but that of educational background contribute significantly in marital distress than gender.

This finding supports those of Anim (2011) who found that high levels of education led to marital distress. According to the researcher, educated women try to compete for power with their husbands in decision making pertaining to their homes and this may result in marital problems leading to marital distress. Moreover, a study by Jackson et al (2014) and Madanian and Mansor (2013) both reported strong positive relationships between education and marital quality with higher education increasing the report of better marital quality.

Perhaps in those societies, the educational gap between men and women is not that wide and so the power distance between the two groups may not be that wide as well. In that case, education would not so much place one group over the other and it may rather play the role of aiding understanding between partners on rights and obligations and thereby enhance the marital quality.

One other finding made about the relationship between demographic variables and marital distress was that, age and number of children did not make any significant contribution in predicting marital distress. This finding contradicts the findings made by Anim (2013) and Allendorf and Ghimire's (2013) who reported that age of participants has a significant negative relationship with marital distress and that the younger the couple the greater distress they report. The inconsistency in the findings between two Ghanaian studies regarding how age predicts marital distress only implies that more research has to be carried out to verify the situation.

Perhaps an expansion of sample sizes could provide more concrete information on how exactly age predicts marital distress.

Regarding how number of children a woman has predicts her level of marital satisfaction, findings made by other researchers such as Onyishi et al (2012) are challenged by the present study as it has been revealed that number of children did not significantly contribute to predicting marital distress. This may have resulted because within the Ghanaian context, stakeholders have arisen to challenge the use of children in farms and other related activities. Therefore, their presence may not really be serving economic purposes as was espoused by previous studies. The activities of the Ministry of Children, Gender and Social Protection in curbing the use of children for economic gains and the changing trend in which the value placed on the number of children have reduced due to economic hardships could account for the non-significant association between number of children and marital distress. This has implications again for limiting researching finding to the contexts where they are obtained instead of cross-cultural generalizations. What the findings mean is that, perhaps, higher numbers of children may provide assistance in economic activities for parents as has been suggested by researchers such as Shapiro and Tamashe (2000), but is not a buffer against marital distress, at least not in the Ghanaian context.

5.6 Practical implications of the findings

The findings of the study have practical implications for counselors, therapists, married couples and yet -to-be couples. Considering the positive effect spirituality has on marriage, it is a necessity for counselors to educate, encourage yet –to- be couples to hold on to it for a fruitful and happy marriage. Nevertheless, yet-to –be couples should also be encouraged to support each other to be compatible with themselves spiritually as studies by Olson and Olson (2000) have revealed the danger associated with the variances in spirituality. According to the Researchers, variances in spirituality have detrimental effects on marital quality. Periodic seminars and training sessions should also be held for married couples to encourage them to have similar religious affiliation to enhance marital happiness. Studies again revealed that women who were more spiritual were less likely to be distressed in their marriages. There is the need to therefore encourage women to be more or highly spiritual to increase the rate of marital satisfaction.

Communication has also been found to have a significant influence on marital quality. The current study has revealed that negative communication leads to marital distress and vice versa. This study has therefore proven that the nature or style of communication is very vital in marriage and as such proper care should be taken when couples are communicating in order to strengthen and sustain marital happiness. Perhaps, it is time for therapists and marriage counselors to design communication coaching sessions that will help educate and encourage couples to use good gestures and languages in communicating to each other. As suggested by Amiri (2011), the more couples communicate mutually and constructively, the better the chances of improving happiness and preventing distress.

Women in the urban centres have been found to have more marital distress as compared to their rural folks. Perhaps, the suggestion made by Twumasi-Ankrah (1995) that rural folks likely

receive more social support than urban folks could be the reason behind the observation made here. This implies that, more support services may need to be designed to support couples that live in the urban areas in order to reduce distress in marriages. Therapists and counselors may need to encourage urban married women to find more avenues of sharing their problems or obtaining social support in order to reduce the possibilities of undergoing distress in the marriage. Some of the reasons that were found to contribute to their distress among urban women, as outlined by Marsella (1992), were that, they were more stressed, less likely to communicate their worries because of the unfriendly behaviour of the people and the insufficient means to cope with the fast-paced life in the city. Counselors should therefore consider the settings of the couples when counseling to include the possible effects of their settings and how best they can manage their stress. It is therefore important for clinical psychologist to be part of marriage counseling to teach couples and help them understand how to manage their stress and how best they can reduce distress.

5.7 Limitations of the Study

Despite the important revelations made by this study, there are certain limitations regarding it that needs to be mentioned.

Translation on the spot of items in the questionnaire may have influenced the responses of the participants. This is because the translation of the items in the questionnaire were done by the researcher who is not a professional in translation and may have affected the original meaning of the items in the questionnaire which may have influenced the findings.

The study is limited with regards the extent to which the findings may be generalized. With a sample of 171 respondents, the study findings cannot be generalized across the entire population of married women in urban and rural areas in Ghana. It would have been better if this could be done so that policy and intervention could benefit the larger population of women in Ghana who may be going through distress in their marriages. The limited sample was however due to time and resource limitations, as well as the unwillingness of some of the respondents in the target population to participate in the study.

The study is also limited in the extent of evidence it provides regarding how spirituality and psychosocial factors such as stress, anxiety and depression precipitate marital distress. This is because the design adopted was descriptive in nature. The Cross sectional survey design is a correlation method that only establishes the strength and direction of the relationship between variables. In this regard, the information provided here is only descriptive and does not claim to explain the reasons behind the existence of the relationships found. Users of the evidence here should therefore be aware of this and use the information for descriptive purposes only.

One other limitation of this study is that it does not provide evidence of any differences that could exist between rural and urban women in their experience of marital distress as a function of factors like spirituality, education etc. For example, it would have been good to know how rural women who are high on spirituality compare to urban women who are high on spirituality in their experience of marital distress. These comparisons could however not be done in this study for statistical reasons. For example, the difference in the sample sizes of educated women in the rural areas and in the urban areas was too wide. This would have flawed the basis for

comparison. There were 20 women in the rural category who had obtained higher education while the number in the urban area was 65. Comparing the mean scores between these two groups would have been unfair on the basis of unequal number of respondents.

Aside these acknowledged limitations, the information provided in this present study, accurately describes the situation in Ghana regarding how spirituality and certain psychosocial and demographic variables collectively and individually predict marital distress in urban and rural women.

5.8 Recommendations

Future researchers could improve on their studies by employing a professional to translate and certify items in questionnaires into languages participants understand to get their actual opinions about the issues of interest. Future researchers could improve on their studies by reviewing the limitations observed in this study. First, it is recommended that future researchers allow enough time for preparations, so as to be able to generate larger sample sizes in order to improve the external validity of their studies. Acquiring sufficient funding and resource assistance could help achieve this.

Also future researchers could take steps to ensure some level of equity in the numbers of groups of respondents in order to have a good basis for comparison and present evidence regarding how different groups of people compare on factors such as marital distress. For example, in an extension of the present study, future researcher could ensure equity in rural and urban sample so

comparisons regarding, for instance, how rural highly educated women and urban highly educated women compare on marital distress could be made.

Alternative perspectives regarding, for instance, marital distress among men could also be adopted by future researchers to provide evidence from the other side of the gender divide. This would be complementary to the present study and help provide a more comprehensive picture of the phenomenon of marital distress. This could prove beneficial to stakeholders such as married couple, therapists, counselors, clinical psychologists and all parties that have interest in ensuring that marriages progress happily and problems of distress are prevented.

Again, alternative research methods that provide more detailed explanations of the relationships that exist between the variables studied in this present work could prove complementary and help the scientific community understand more about these variables. Qualitative research designs such as interviews and focus group discussions could achieve this purpose. With the present describing the extent of marital distress among rural and urban populations and some of the factors that influence the phenomenon, studies that could provide explanations to the relationships observed could be very beneficial.

5.9 Conclusion

This study sought to examine how effective communication and other psychosocial factors (stress, depression and anxiety) and respondents' demographic characteristics predict the level of marital distress among married women in rural and urban Ghana. Results from the study showed

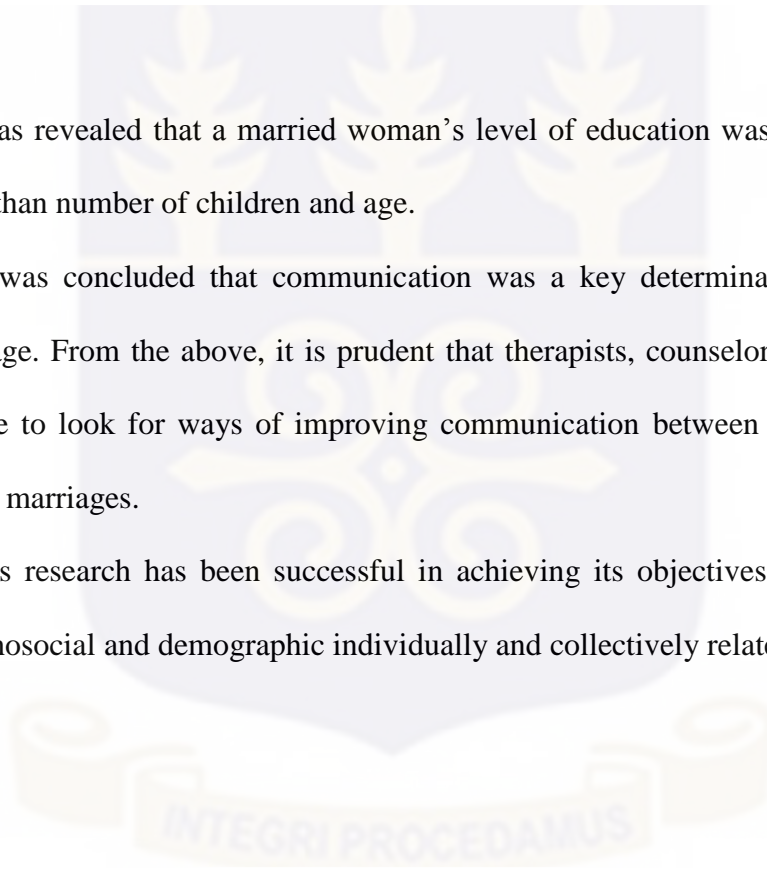
that communication predicted marital distress more than stress and other psychosocial variables (anxiety and depression).

Again, spirituality also had a negative relationship with marital distress. More so, married women who lived in rural areas were less distressed as compared to their urban counterparts. This was found to be a result of high cost of living and low social support as suggested by Marsella (1992).

In addition, it was revealed that a married woman's level of education was more predictive of possible distress than number of children and age.

Furthermore, it was concluded that communication was a key determinant of the extent of distress in marriage. From the above, it is prudent that therapists, counselors, clinicians and all stakeholders have to look for ways of improving communication between couples in order to reduce distress in marriages.

In a nutshell, this research has been successful in achieving its objectives of examining how spirituality, psychosocial and demographic individually and collectively relate to marital distress.



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