

Research Article

# Effectiveness of Behavioral Couple Therapy to Enrich Marital Adjustment in Wives of Alcohol Dependent Spouse

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## Abstract

In the category of Public health problems on global level alcohol dependence is counted as major one. It disturbs the life of user and family. Alcohol misuse deteriorates marital relationship most. Behaviour couple therapy (BCT) is a non pharmacological way of treatment which is ray of hope for both husband and wives if one of partner used to be alcohol dependent. Several investigations in this area reported that with progress of behavior couple therapy alcohol intake reduces; relationship satisfaction enhances, violence and abuse in relationship also reduces. The aim of study is to examine the effectiveness of behavior couple therapy to enrich marital adjustment in wives of alcohol dependent spouse. Sample of total 40 were recruited through purposive sampling method and equally distributed randomly 20 couples in Experiment group (Behaviour couple therapy+ Treatment as usual) and 20 couples in control group (Treatment as usual) respectively. Audit questionnaire is used for screening for excessive drinking, GHQ-12 scale is used for screening psychiatric distress among wives Kuppuswamy scale for measuring socio economic status, Marital adjustment questionnaire is administrated at pre evaluation level and at post evaluation level after giving 10 session of behavior couple therapy to couple. Behaviour couple therapy seems to be important technique in enhancing marital adjustment among couples. Mean value of marital adjustment of experiment group  $16.65 \pm 2.58$  at baseline and mean value of marital adjustment after intervention  $21.45 \pm 2.11$ .

**Keywords:** Alcoholism, Behaviour Couple therapy, marital adjustment, understanding, problem solving

## Introduction

The problem of alcohol abuse and dependence has been with us since the start of human civilization. Alcoholism is a devastating public health problem not only for the affected individuals but also for their families and the society.

According to World health Organization estimation currently alcohol user population is about 2.3 billion in world. In 2016 from total worldwide deaths of 11 million which resulted from, maternal, communicable, nutritional and prenatal conditions approximately 0.4 million deaths caused due to alcohol which was about 3.5% of these deaths <sup>22</sup>.

Alcohol dependence has adverse effect on marital life. Alcohol misuse negatively impact couples' relationships in the form of increased conflict, communication problems, poor sexual relations and domestic violence. Behavioral couple therapy is one of non pharmacological way of treatment that is considered to improve the relationship and assists in developing behavior of abstinence from alcohol with the support from spouse. Behavioral marital therapy reduces

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alcohol use significantly with improvement in marital relationship<sup>13, 15, 17, 18</sup>. Result of various research related to behavior couples therapy shows that with intervention frequency of alcohol intake reduces, lessens alcohol related problem, shares better relationship, lower risk of separation and divorce who receives BCT than compared to the patients who receive individual based treatment<sup>1,4,10,14</sup>. Behaviour couple therapy basically focuses on three areas to improve communication skill, Problem solving skill and caring exchange.

**Aim:** To examine the effectiveness of behavior couples therapy to enrich marital adjustment in wives of alcohol dependent spouse.

#### Material & Method

**Research Design:** Pre and post test with control group design were used.

**Sample Design:** Total 40 alcohol dependent person (husband) satisfying ICD-10 criteria along with their wife as couples were recruited through purposive sampling method from Outpatient door and indoor service of Psychiatry department IMS BHU. They were divided randomly into two groups, 20 couples in experiment group (Behavior couple therapy+ Treatment as usual) and 20 couples in control group (Treatment as usual) Intervention program of behavior couple therapy was carried out in pair form and the couples of control group were put into waiting list. At the end, after imparting intervention on the experiment group, wives from both group completed questionnaire for post test in the variables of marital adjustment. Total 10 weekly Sessions of behavior couple therapy were given. The study period lasted from July 2017 to December 2018.

#### Inclusion Criteria for Patient

- All patients coming to OPD & IPD in Psychiatry department of IMS BHU for treatment of ADS & desirable for abstinence diagnosed according to ICD-10.
- Patient in the age range of 21-55 years.
- Primary education & above with ability to read and write.
- Those who has given written consent.

#### Exclusion Criteria for Patient

- Patients with any co-morbid psychiatric, neurological disorder and physical problem.

- Patients using multiple substances

#### Inclusion Criteria for wife

- Married for at least 1 year.
- Primary education & above with ability to read and write.
- Having no physical and psychiatric illness.
- Given written consent.
- 18 years and above

#### Tools

- Socio demographic data sheet
- Modified Kuppuswamy Socioeconomic Status Scale<sup>9</sup>
- Marital Adjustment Questionnaire (Dr. Kanchana Rohtagi & Dr. Pramod Kumar, 1976)<sup>12</sup>
- Alcohol use disorder identification test (AUDIT), Babor et.al (2001)<sup>2</sup>
- General Health Questionnaire -12 Gautam et. al (1987)<sup>8</sup>

**Analysis and data interpretation:** For the tabulation and analysis of the data, Microsoft Excel 2013 and SPSS IBM version 20.0 programs were used. Chi square test was used to see comparisons of socio demographic profile of experiment and control group and Mann Whitney U test was used to see difference of marital adjustment before and after intervention.

#### Procedure

The participant in the study were assessed on the following variables to get the baseline measures: Kuppuswamy Socioeconomic status scale, Marital adjustment questionnaire, Audit, GHQ-12. Audit questionnaire is used for screening for excessive drinking, GHQ-12 scale is used for screening psychiatric distress among wives. Initially there were 70 participants 27 of them do not fulfilled screening and exclusion criteria, after starting therapy session there were 43 in mid three were dropout case. Total 40 alcohol dependent person (husband) satisfying ICD-10 criteria along with their wife as couples were recruited through purposive sampling method from Outpatient door of Psychiatry department IMS BHU, they were divided randomly into two groups, 20 couples in experiment group (Behavior couple therapy + Treatment as usual) and 20 couples in control group (Treatment as usual). Intervention

program of behavior couple therapy was carried out in pair form and the couples of control group were kept into waiting list. Total 10 weekly Sessions of behavior couple therapy were given with the focus on Rapport building, improving communication in form of good listening, blaming free communication, understanding high risk situations, assertive communication, anger management, effective refusal, problem solving abilities, caring exchange shared rewarding activities based on module of ,O'Farrell & Fals-stewart ( 2006)<sup>19</sup>

**Results**

**Table 1. Shows that mean value of marital adjustment in experiment group (BCT + TAU) was 16.65± 2.58 and mean value of marital adjustment in control group (TAU) was 16.85± 2.47 respectively.** Mann-Whitney U test was performed to compare difference between experiment group (BCT+TAU) and control group (TAU) on, marital adjustment. Result revealed that there were no significant difference between two group on marital adjustment at baseline (Z=1.79, p> 0.05).

**Table 1. Comparison of marital adjustment between experiment group (BCT+TAU) and Control group (TAU) at baseline (Before intervention).**

Variable	Group (Mean ±SD)		Mean Rank		Mann-Whitney U	Z
	Experiment (BCT+TAU) N=20	Control (TAU) N=20	Experiment (BCT+TAU) N=20	Control (TAU) N=20		
Marital adjustment	16.65± 2.58	16.85± 2.47	20.18	20.83	193.50	-0.179(NS)

NS=Non significant

Table 2. Shows the result of pre assessment and post assessment score within experiment group (BCT+TAU) and result revealed that there were significant difference (Z=3.94, p< 0.001)

**Table 2. Comparison between pre and post scores on marital adjustment within experiment group (BCT+TAU).**

Variable	Group (Mean ± SD)		Mean Rank		Z
	Pre	Post	Positive	Negative	
Marital adjustment	16.6500±2.58	21.4500±2.11	10.50	.00.00	-3.94***

\*\*\*: p < 0.001

Table 3. Shows the result of pre assessment and post assessment score within control group (TAU) and result revealed that there were significant difference (Z= 4.23, p < 0.001) Comparison between pre and post scores on marital adjustment within control group (TAU).

**Table3. Comparison between pre and post scores on marital adjustment within Control group (TAU).**

Variable	Group (Mean ± SD)		Mean Rank		Z
	Pre	Post	Positive	Negative	
<b>Marital adjustment</b>	16.8500± 2.47	18.000± 2.533	10.50	00.00	-4.23***

\*\*\*:  $p < 0.001$

**Table 4.** Shows that mean value of marital adjustment in experiment group (BCT ± TAU) was  $21.45 \pm 2.11$  and mean value of marital adjustment in control group (TAU) was  $18.00 \pm 2.53$  respectively which indicates there were significant difference between two groups on marital adjustment ( $Z=-4.14, p < 0.001$ ).

**Table 4. Comparison of Marital adjustment between experiment group (BCT+TAU) and control group (TAU) after intervention.**

Variable	Group (Mean± SD)		Mean Rank		Mann- Whitney U	Z
	Experiment (BCT+TAU) N=20	Control (TAU) N=20	Experiment (BCT+TAU) N=20	Control (TAU) N=20		
<b>Marital adjustment</b>	<b>21.45± 2.11</b>	<b>18.00±2.53</b>	<b>28.10</b>	<b>12.90</b>	<b>48.00</b>	<b>-4.14***</b>
***: $P < 0.001$						

## Discussion

This study was carried out to examine the effectiveness of Behavioral couple therapy to enrich marital adjustment in wives of alcohol dependent spouse. In present study the mean of the post test on the score of marital adjustment in experiment group is 21.45 and control group is 18.00 which indicates that marital adjustment in experiment group has increased, which were significant ( $Z=4.14, p < 0.001$ ) which is consistent with finding of Fals-Stewart et. al(2006)<sup>7</sup> conducted a study on 138 female alcoholic married patients and their male partners who do not take substance was kept into three treatment conditions like behavioral couple therapy+ individual based treatment (BCT:  $n=46$ ), Individual -based treatment only (IBT:  $n=46$ ), Psycho educational attention control treatment ( $n=46$ ). The participant who goes through BCT condition shows higher dyadic adjustment, decreases violence of partner during 12 months follow up period. Dehgani et.al

(2016)<sup>6</sup> conducted a study in Ahvaz city of Iran to see the effectiveness of Behavioral couple therapy and obtained result shows significant difference in marital adjustment between two groups which is consistent with our finding. Kelley et.al (2016)<sup>11</sup> observed similar kind of finding in their study on 61 couples with behavioral couple therapy sessions, and found relationship satisfaction were noticed more which reduces their daily conflicts. On analyzing these findings, it can be said that behavioral couple therapy, enhances communication through modifying faulty communication pattern of ignoring, critical comment, nagging shown by wives towards their alcohol dependent spouse. Behavior couple therapy convince wives to acknowledge their counterproductive behavior like all time policing of husband activities which needed to be reduced, positive feedback at every sign of reaching to stage of abstinence, and to support alcohol dependent spouse autonomy and independence ,Walitzer & Dermen ( 2004)<sup>20</sup>. In couple- focused alcohol treatment couple shows their joint effort in

handling problems as compared to individual -focused alcohol treatment condition ,Walitzer et al.(2013)<sup>21</sup>. Problem solving skill acquaints couples how to manage issues among themselves, going to root of problem, fragmenting a difficult problem into smaller easy one and making hierarchy of them ,begins with easily option, develop ability to counter problem before their expansion and worsening, and learn to manage negative situations in future. This skill which couples learn improves their relationship respectively. Support among couple enhances with behavior couple therapy, Berger & Hannah (1999)<sup>3</sup>. Behavior couples therapy makes couple understand the importance of participation, leisure and recreational activities in treatment as most of family stops due to strained relationship and embarrassment that family members have gone through. Involvement of family and couple in leisure activities and going for holiday vacations is better treatment of substance abuse, Moos et.al (1990)<sup>16</sup>.

Assertiveness is one of the skill through which couples are acquainted during behavior couples therapy. Assertive training equipped couple how to directly express their feelings, thoughts and wish while being respectful of the rights and feelings of each other. Along with how to make requests and refusals and deal with criticism without becoming hostile which enhances social support, self esteem and as a result increase in consistency, adaption and resilience of life conditions is seen in couples. Higher level of assertiveness lessens mental difficulties, Donohue B & Allen DN (2011)<sup>5</sup>.

### Limitations

- The Sample size was small.
- It was a hospital based study.
- Purposive sampling method was used.

### Conclusion

Alcohol dependence is considered as major health issue. This is because with the intake of alcohol number of associated problems are arising, which may be seen at individual, family, community or society level. Behavioral couple therapy is the non pharmacological way of treatment which works with the support of spouse helps in abstinence from alcohol. Treatment helps in improving strain relationship with better relationship, communication, problem solving ability becomes better.

**Ethical Clearance:** The present study was approved by the Ethical Committee of Institute of Medical Sciences, Banaras Hindu University, Varanasi, Uttar Pradesh, India.

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**Conflict of Interest:** Nil

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