DISTURBANCES IN COMMUNICATION AND MARITAL DISHARMONY IN NEUROTICS

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SUMMARY

The present study examines marital disharmony in terms of disturbed communication in neurotics and their spouses, as compared with normal couples. It is hypothesised that there would be significant differences between neurotics and normals, and between spouses of neurotics and spouses of normals, with regard to communication. The Marital Communication Inventory and the Personal Report of Spouse Communication Apprehension are used. The results show that the marriages of neurotics are characterised by poor communication and marital disharmony when compared with the normal marriages.

In recent years, there has been a proliferation of research dealing with marital disharmony in terms of disturbed communication between spouses. This is of particular relevance in the marriages of neurotics. Friedman (1972) emphasised the role of inconsistent and ambiguous communication in disturbed family interactions with the result that each spouse's behaviour becomes unpredictable to the other, a condition that eventuates in mistrust. Knox (1971) cited the lack of honest and direct communication among distressed couples. Eisler and Hesen (1973) have emphasised the inability of distressed couples to express both positive and negative feelings. Billings (1979) found that distressed couples made significantly more negative and fewer positive cognitive and problem solving acts, and evinced more reciprocity of negative communication as compared with non-distressed couples. Noller (1980) found that couples with high marital adjustment were able to communicate more effectively than those in the low marital adjustment group. Disturbed communication may thus be considered as a crucial component of marital disharmony.

The objective of the present study was to examine marital disharmony in terms of disturbed communication in a group of normal couples. Two hypotheses were examined: (1) There would be significant differences between neurotics and normals, and between spouses of neurotics and spouses of normals, with regard to communication as measured by the Marital Communication Inventory (Bienvenu 1970). (2) There would be significant differences between neurotics and normals, and between spouses of neurotics and spouses of normals, with regard to spouse communication apprehension as measured by the Personal Report of Spouse Communication Apprehension (Powers and Hutchinson 1979).

Material and Methods

Two groups of subjects were considered for study - an experimental group and a control group. The experimental group consisted of 30 neurotic patients (15 males and 15 females, diagnosed in accordance with ICD-9) and their spouses, from the National Institute of Mental Health and Neurosciences, Bangalore; and from the Department of Psychiatry, Victoria Hospital, Bangalore. The control group consisted of 30 normal subjects (15 males and 15 females) and their spouses, who had been screened for neuroticism by using the Abraham et al's (1977) version of the Eysenck Personality Inventory. Care was taken to
see that the two group were matched or relevant variables by using the group matching procedure. The description of the study groups is given in tables 1 and 2.

As shown in the tables 1 and 2, the experimental and the control groups were comparable with regard to age, occupation, number of years of marriage, number of members in the family, number of dyadic relationships in the family, type of family, number of children and family life cycle. The spouses of neurotics and the spouses of normals were comparable on the variable of education.

All couples in the two groups were briefed about the nature and purpose of the Communication Apprehension (PRSCA) individually.

The MCI is a 46 item inventory, with separate forms for males and females. The subjects were instructed to answer according to the way they feel at the moment, without consulting their spouses. The responses range from "usually" to "never" on a 4-point rating scale. They are scored from 0 to 3, with a favourable response (the one indicative of good communication) given the higher score.
The PRSCA is a 15 item inventory, with items specifically relating to spouse-spouse interaction and reflecting potential communication apprehension situations in the marital environment. The subjects are asked to indicate the extent of their agreement or disagreement with each on a 5-point scale with responses ranging from "strongly agree" to "strongly disagree". Higher scores reflect greater communication apprehension.

Results

Responses on MCI and PRSCA were scored for the groups, and means and standard deviations were computed. 't' tests were carried out between the scores of a) neurotics and normals and b) spouses of neurotics and spouses of normals.

The results on the MCI are given in table 3. There were significant differences between neurotics and normals, and between spouses of neurotics and spouses of normals, with regard to communication as measured by the MCI.

| Neurotics | Normals | 't' | Spouses of neurotics | Spouses of normals | 't' |
|----------|---------|-----|---------------------|-------------------|-----|
| M        | S.D.    | M   | S.D.                | M                 | S.D.|
| 82.26    | 23.6    | 108.63 | 21.2               | 83.5              | 29.3 | 102.06 | 19.78 | 2.66 |

*** Significant at 0.001 level ** Significant at 0.01 level

Discussion

Communication is an important and integral part of marital adjustment, as is agreed upon by most clinicians and researchers. In the present study, the neurotics and their spouses reported significantly poor communication in their marriages when compared with normal couples. This finding supports the first hypothesis of the study. With respect to spouse communication apprehension, there were no significant differences between the groups. The second hypothesis thus did not find support, though the neurotics showed relatively higher score than the normals. It is possible that the communication apprehension of the neurotics may in part have contributed to the disturbed communication in their marriages. Thorman (1971) has discussed probable reasons for inadequate communication between individuals in a family, i.e. fear of

closeness, and fear of being hurt. Any of these fears could lead to communication apprehension and thereby to disturbed communication in the marriages of neurotics. Communication apprehension has

| Neurotics | Normals | 't' | Spouses of neurotics | Spouses of normals | 't' |
|----------|---------|-----|---------------------|-------------------|-----|
| M        | S.D.    | M   | S.D.                | M                 | S.D.|
| 35.1     | 8.84    | 32.2 | 6.01               | 32.9              | 77.41 | 32.5 | 5.48 | 0.18 |

NS Not Significant

The results on the PRSCA are given in table 4. There were no significant differences between neurotics and normals, and between spouses of neurotics and spouses of normals, with regard to the spouse communication apprehension, though the trend of the scores was in the expected direction for neurotics and normals.
been found to have a variety of effects upon individual communication behaviour including reduced self disclosure (Hamilton 1972), reduced trust in others' communication (Giffin and Heider 1967), and reduced amounts of communication (Freimuth 1976). These factors could have contributed to the communication problems between neurotics and their partners.

Item analysis was carried out for the 46 items of the MCI to see how the groups differed. It showed that 17 items significantly differentiated between neurotics and normals, while 15 items significantly differentiated between spouses of neurotics and spouses of normals. Seven items were common to all 4 groups. The content of the common items indicated that neurotics and their spouses felt that they did not understand each other, there were a lot of arguments over money, they were unable to discuss problems together in a calm manner, felt that they were not offered cooperation, encouragement, and emotional support in their respective duties as husband or wife, confided in others rather than in each other and were unable to tell what kind of day the other had had without asking. The content of the other items analysed indicated that poor communication may have resulted in the thwarting of important interpersonal needs in the marriages of neurotics (e.g., the neurotics felt that their spouses did not discuss their work and interests with them, did not engage in outside interests and activities with their spouses, felt that their spouses did not listen to what they said, failed to express disagreement for fear of angering their spouses, did not discuss personal problems or intimate matters with their spouses and hesitated to voice certain things for fear of angering their spouses and having their feelings hurt; the spouses of neurotics felt that their neurotic partners kept after them for their faults, monopolized their conversations, did not pay them compliments or express respect and admiration for them and had never just sat down and talked things over with them). Included in these are the needs for recognition, inclusion and belonging, self respect and self esteem.

The findings of the present study, indicating that disturbed communication is associated with marital disharmony, are in line with those of earlier researchers (Bey and Lange 1974, Murphy and Mendelson 1973, Navran 1967, Noller 1980, Satir 1964).

Treatment of marital discord has frequently been designed to foster clear communication between spouses, with the expectation that such behavioural changes would be associated with increased marital satisfaction. Raush et al. (1974) noted that conflict is inevitable when partners in a close relationship seek to satisfy their varied needs and that clear communication is a prerequisite for conflict resolution. They also pointed out that poor communication and marital disharmony may mutually reinforce each other. Therapy designed to increase clarity and assertiveness of communication has been shown to bring about appreciable changes in couples' verbal behaviour and perception of marital communication (Epstein and Jackson 1978). Cognizance must be taken of this in considering it as an area of priority in planning suitable intervention strategies for distressed couples.

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