PATTERNS AND DETERMINANTS OF COPING BEHAVIOUR OF WIVES OF ALCOHOLICS

R. CHANDRASEKARAN & V. CHITRALEKA

ABSTRACT

One hundred wives of alcoholics with a confirmed diagnosis of alcohol dependence syndrome according to DCR 10 were studied with a "coping with drinking questionnaire". "Avoidance" was the most commonly endorsed coping behaviour. There was a significant correlation between all the coping components and alcohol related problems. No correlation was observed between neuroticism scores and coping behaviour. It is evident from the study that both personality and situational variables play a role in determining the coping behaviour of the wives of alcoholics.

Key Words: Coping, determinants, wives of alcoholics

Coping refers to both cognitive and behavioural strategies that can be used to deal with a stressful event. Coping has been studied in relation to how women learn to live with alcoholic husbands. The stress model proposed by Jackson (1954) described the behaviour of the wives of alcoholics as a reaction to stress caused by the alcoholic husband. She also brought out that a progressively worsening family situation offered no clear guidelines for coping behaviour. According to James & Goldman (1971) wives tend to report progressive increase in all types of coping behaviour depending on the intensity and frequency of alcoholismic episodes. Orford et al. (1976) opined that personality may play a strong role in determining coping behaviour. Subsequently they reported high frequency of coping behaviour was associated with poor outcome in alcoholics.

While studying the determinants of coping behaviour one has to consider both intrinsic and extrinsic factors. Studies by Orford et al. (1976) showed a strong correlation between various coping behaviours and alcoholic symptoms, hardship, job status, wife's age and neuroticism score. In India Sathyarayana Rao & Kuruvilla (1991) and Suman & Nagalakshmi (1993) have addressed certain issues like personality traits and neuroticism among the wives of alcoholics. One Indian study (Sathyarayana Rao & Kuruvilla, 1992) based on a self report by the wives of alcoholics found that discord, avoidance, indulgence and fearful withdrawal were the common coping behaviours and marital breakdown, taking special action, assertion and sexual withdrawal were the less used coping behaviours. The sample size studied was small and further the study has not focussed on the various determinants of coping behaviour. This area needs to be researched, as majority of Indian marriages are traditionally arranged by elders of the family and the Indian women in general are described as submissive, timid, trustful, conservative, dependent and poised (Sathyarayana Rao & Kuruvilla, 1991). This study, using a larger sample size, reports on coping behaviour reported by the wives of alcoholics and its association with personality, severity of alcohol dependence, educational status of the spouse and alcohol related...
MATERIAL AND METHOD

A total of 100 alcoholics and their wives who attended the Deaddiction centre attached to Jawaharlal Institute of Postgraduate Medical Education and Research (JIPMER), Pondicherry, were included in the study. All alcoholics fulfilled the criteria for alcohol dependence syndrome according to DCR-10.

Informed consent was taken from both the alcoholics and their wives. Each alcoholic in the presence of the spouse was administered the following: (i) a semistructured proforma to collect information on age, socio-economic status, age of onset of drinking, duration of daily drinking, education of the spouse, family history of alcohol dependence and suicide; (ii) Severity of Alcohol Dependence Data Questionnaire (Abraham & Chandrasekaran, 1997); (iii) Alcohol Problem Questionnaire (Drummond, 1990).

During a separate interview each wife was administered the following: (i) Coping with Drinking Questionnaire (Orford et al., 1976); (ii) Eysenck's Personality Questionnaire (Eysenck & Eysenck, 1975).

Description of research tools: "Coping with drinking questionnaire" by Orford et al. (1976) was based on responses given by the wives of alcoholics to a multiple choice questionnaire containing a list of 79 items selected on the basis that each of these items represented an aspect of coping behaviour. Subsequently this list of 79 items was shortened to 56 items with loadings of minimum of ±0.30 on at least one of the five components identified through the inter-item correlation matrix. The five components were labelled "attack", "withdrawal", "protection", "acting out" and "safeguarding family interests". The present study used this shortened version of "coping with drinking questionnaire". The items are scored as 1 (No), 2, 3, 4 (Yes often) and 10 components scores are computed.

The modified version of Severity of Alcohol Dependence Data Questionnaire (Abraham & Chandrasekaran, 1997) validated for the local population, consists of 12 questions and is rated on a 4 point scale to measure physiological and behavioural measures of dependence. Alcohol Problems Questionnaire (Drummond, 1990) has 44 items divided into common, marital, children and work areas and it measures alcohol related problems. Eysenck's Personality Questionnaire (1975) measures the neuroticism component of the personality.

RESULTS

The mean age of wives was 31.62 years (±5.66). The mean number of years spent in schools by the wives was 11.2 (±5.32). The mean age of alcoholics was 38.2 years (±6.42). The mean age of onset of drinking was found to be 22.8 years (±5.4). The mean duration of daily drinking was found to be 9.2 years (±2.6). All of them belonged to low and lower middle economic status. Only three of the wives were independent earners. The common coping behaviours used by the subjects are given in table 1. The scores on Orford Guthrie's scale

| Item No. | Coping component       | No. | %  |
|----------|------------------------|-----|----|
| 1        | Avoidance              | 81  | 81 |
| 2        | Assertion              | 61  | 61 |
| 3        | Sexual withdrawal      | 60  | 60 |
| 4        | Discord                | 56  | 56 |
| 5        | Taking special action  | 50  | 50 |
| 6        | Fear                   | 40  | 40 |
| 7        | Anti drink             | 32  | 32 |
| 8        | Indulgence             | 12  | 12 |
| 9        | Competition            | 1   | 1  |
| 10       | Marital breakdown      | 4   | 4  |
TABLE 2
SPEARMAN RANK-ORDER CORRELATION OF 10 VARIETIES OF COPING BEHAVIOUR USED BY WIVES OF ALCOHOLICS

| Coping component        | APQ | SADD | Wife's age | Neuroticism | Duration of daily drinking | Education of the spouse |
|-------------------------|-----|------|------------|-------------|----------------------------|------------------------|
| Discord                 | .30**| -.09 | .12        | -.14        | .03                        | -.16                   |
| Avoidance               | .33**| .009 | -.03       | -.20        | -.02                       | -.16                   |
| Indulgence              | .29* | .16  | .04        | -.04        | -.10                       | -.003                  |
| Competition             | .32**| -.08 | .41        | .10         | .004                       | .17                    |
| Anti drink              | .29**| -.05 | 14         | .13         | .10                        | .08                    |
| Assertion               | .33**| .18  | -.05       | .13         | .18                        | -.16                   |
| Sexual withdrawal       | .26**| .18  | -.019      | .05         | .04                        | -.07                   |
| Fearful withdrawal      | .29* | .17  | -.04       | .05         | .23                        | -.09                   |
| Special action          | .32**| .27* | -.02       | .17         | .17                        | -.04                   |
| Marital breakdown       | .27* | .03  | -.03       | 8           | 17                         | -.07                   |

*p < .01  
**p < .001

were converted to percentage frequency to assess the frequency of coping behaviours. As can be observed from the Table 1, 80% of the subjects used 'avoidance' as a coping measure more than 75% of the time. The other coping measures like assertion, sexual withdrawal, discord and taking special action ranged between 50-60%. 'Marital breakdown' and 'competition' as coping behaviour was resorted to by less than 5% of the study sample. The Spearman rank-order correlation of 10 varieties of coping behaviour against various variables are given in Table 2. Positive correlation among the various coping components and alcohol related problem questionnaire were observed. The severity of alcohol dependence correlated with "taking special action" as a coping measure.

DISCUSSION

The study has focussed on identifying various styles of coping behaviour and their association with various factors. Avoidance as a coping behaviour was found to occur in a relatively higher frequency as endorsed by the wives. Considering the personality of Indian wives who are basically passive and timid as compared to their western counterparts, this is not a surprising finding. Sexual withdrawal is possibly due to their inability to enjoy a satisfying relationship because of aversion to the smell of alcohol. So this may be more of an 'avoidance' mechanism. A significant percentage of women had endorsed assertive coping behaviours. When responses to individual items were analysed under this category, many women had agreed that they tried to pay back the pecuniary debts of their husbands with help from their parents. 'Discord' which was found to be the most frequently used coping behaviour in another Indian study (Sathyarayana Rao & Kuruvilla, 1992) was used only by 56% of the wives in this study. 'Fearful withdrawal' was used by 40% of spouses. One expects fearful withdrawal to occur more if the husbands become violent or abusive under the influence of alcohol. But in
this study no attempt was made to assess the behaviour of alcoholics under the influence of alcohol. Further one also finds few women endorsed 'marital breakdown' as a coping measure. This is due to the motivation to keep the marriage going and this view was expressed during the interviews. They strongly felt that they should not desert their husbands as nobody else would care for them.

All the ten components of coping behaviour correlated with alcohol related problems elicited by APQ. Alcohol related problems result from a complex interplay of the drug, the organism and the environment. The problems elicited by the APQ are limited to a period of six months prior to the study. An alcoholic fails to fulfil certain family roles and responsibilities such as those of a parent, lover or provider. This results in more number of problems and the wives have to use more number of coping strategies. However the chosen method of coping may vary from one person to another depending on the effect of problem drinking and the degree of hardship. Orford et al. (1976) showed a negative correlation between husband's job status and coping behaviour. The coping behaviour seems to have a strong correlation with the hardship experienced while living with alcoholic husbands. The findings of this study to some extent endorses the view of James & Goldman (1971) that the wives cope in response to situation. Excepting for one variety of coping behaviour “taking special action” all others correlated poorly with severity of alcohol dependence. The item referring to ‘hospital consultation’ was omitted as the study was done on a hospital based population. Many spouses are forced to take monetary help from their parents or seek low wage jobs to keep the family going.

The reason for the poor correlation could be that the questionnaire has no item which elicits the coping response of the wives with reference to physical problems arising out of dependence. It is also likely that the problems are considered physical in nature and “taking special action” seems to be an appropriate measure.

A finding which has come out in contrast to the previous research (Orford et al., 1976) is that neuroticism scores did not find any correlation with coping behaviour. This does not reflect on a reactive mode of coping behaviour and may indicate the role of personality in determining the individual style of coping behaviour. This finding is to be interpreted with caution as other dimensions of personality were not measured. Other Indian studies which investigated the level of neuroticism in the wives of alcoholics reported both normal and high scores compared to the general population (Sathyarayana Rao & Kuruvilla, 1991 & Suman & Nagalakshmi, 1993). Age, education of the spouse and duration of daily drinking considered as potential variables to influence the coping behaviour did not do so.

It is evident from this study that the modes of coping are found to be related to personality of the wives and other situational variables. Given the correlational nature of the data, one cannot attribute any reference to causality. This is because wife’s coping behaviour and husband’s drinking behaviour can influence each other significantly. Hence, it is important to study the coping behaviour periodically before and after treatment in relation to husband’s drinking behaviour. While studying this aspect due consideration may be given to family dynamics to include the modifying effect of other family members.

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*R. CHANDRASEKARAN & V. CHITRALEKA*

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*R. CHANDRASEKARAN, M.D. Professor and Head. V. CHITRALEKA, M.A., Psychiatric Social Worker, Department of Psychiatry, JIPMER, Pondicherry-605 006.*