

MENTAL HEALTH PROBLEMS OF WOMEN UNDERGOING DIVORCE PROCESS

MAKSUDA AKTER* AND ROQUIA BEGUM¹

Department of Clinical Psychology, University of Dhaka, Dhaka-1000, Bangladesh

Key words: Mental health problems, Women, Divorce process

Abstract

Purpose of the study was to explore the mental health problems in different functional areas of women who are undergoing divorce process. It was found that these women were suffering from various types of psychological problems. Symptoms found in different functional areas included - physiological function impairments (e.g. weakness and tired, low appetite, sleep disturbance, headache, chest pain, brain stroke, senseless, numbness etc.), emotional function impairments (e.g. helplessness all the time, severely depressed, frustrated, anxious, upset, hopelessness, suicidal ideation, low confidence, low self-esteem, etc.), cognitive impairments (e.g. distressful thought about real life crisis - "I have become valueless", "I have no way", "I do not want to live anymore" etc.), behavioral impairments (e.g. unable to perform household chores, lose temper for every silly thing, misbehave with family members and relatives etc.), occupational function impairments (e.g. declined level of interest, unable to take any responsibility, dependent on others, etc.), social function impairments (e.g. avoided any social program, felt embarrassed to meet other people, isolated etc.), sexual function impairments (e.g. no interest in this area, no demand etc.). These findings suggest that women in divorce process have strong need for mental health support for rebuilding their mental health status.

Introduction

Divorce is increasing day by day in Bangladesh. Dhaka city women are taking more control over their life when it comes to terminating troubled marriages. A survey conducted by the Dhaka City Corporation (DCC) reveals that in 70 per cent of the divorces in the last five years, women took the initiative. According to the survey, the annual increase in the number of divorce in the city is between 50 and 55 per cent⁽¹⁾.

Divorce is one of the most stressful life experiences to endure. It is associated with an increase in depression - people experience loss of partner, hopes and dreams and life style. Divorce sets in motion a series of transitions in family roles and relationships, residential arrangements and economic circumstances, all with strong impact for adjustment⁽²⁾.

*Author for Correspondence: <maksudacpsy@yahoo.com>.

¹Breathed her last on 11th February, 2012 in USA.

A legal divorce is an event, occurring when a judge signs a marital dissolution decree; an emotional divorce is best viewed as a process that occurs minimally over several years and maximally over the course of a life time. Typically, the divorce process begins several years before the actual date of separation, when one of the spouses begins to experience a predictable set of feelings, which may include disillusionment, dissatisfaction, anxiety and alienation. The divorce literature generally suggests that in 75 to 90 per cent of all contemporary divorces, one spouse wants out of the marriage while the other does not^(3, 4) with women more often initiating the divorce⁽⁵⁾.

For this study, women undergoing divorce process is defined as any women who are taking legal help in women welfare organizations for problem in their marital relationships. They mainly come to the lawyers for legal support on conjugal problems involving separation, refusal to financially support the family, divorce without paying den-mohor, polygamy, women's and child's property rights.

The effects of divorce on women can be devastating. The stressful effects of divorce can leave women feeling rejected, insecure and depressed. As a result of rejection, they lose their self-esteem. Divorce can be most devastating for women in traditional marriages who lose their identities as well as their financial security, with the loss of a husband⁽⁶⁾. According to a study⁽⁷⁾ women are more susceptible to the physical and psychological effects of divorce than their male counterparts.

Mental health is an integral component of health. The WHO⁽⁸⁾ constitution states- "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." An important aspect of this definition is that mental health is described as more than the absence of mental disorders or disabilities. Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.

In a society like Bangladesh women in general are constrained. It is obvious that the divorced and abandoned women are in worse condition. The exact nature of the mental health problems of the women in divorce process is unknown in the context of Bangladesh. So there is a need to conduct research on mental health of the women undergoing divorce process. Many government and non-government organizations provide legal, social, financial and other welfare services to the women undergoing divorce process. However, currently there are no or very few psychological services provided by these organizations to these women. Therefore, the study will help to strengthen the existing service and will also help to find out whether there is a need for generating different types of psychological services for these women. This knowledge can be used to pursue different organizations working in this field to include appropriate psychological services along with their other services.

In this regard, the present study was conducted to explore the mental health problems in different functional areas of women undergoing divorce process.

Materials and Methods

Participants of the present study were women who were going through divorce process and taking legal help for their marital conflicts. Eleven women were taken from Bangladesh National Women's Lawyers Association (BNWLA) at Agargaon, Dhaka. The age range of subjects of this study was 20 to 35 years and their average age was 27.73. All participants came from lower to upper class of social status. Among the participants, 5 had primary to secondary level education, 2 had higher secondary, 2 bachelors and 2 were illiterate. Of the total sample, 7 were employed women and 4 were housewives, 6 were living with their parents and other 5 were living independently.

The qualitative method was applied to explore the functional impairments of the participants. A topic guide was developed through literature review about the appropriateness of the content and experience sharing with trained and practicing clinical psychologists. The questions were judged by four faculty members of the Department of Clinical Psychology, University of Dhaka. Then the questions were applied to women undergoing divorce process and normal population for field testing. After getting feedback from both the groups these questions were finalized and administered to women who were in divorce process. Each interview session was recorded, transcribed to Bengali later and finally translated into English. Then for each client, problems were categorized and described into seven functional areas of mental health (within case analyses), for brevity these data are not mentioned here. Coding was done according to different problems in each functional area to reduce the huge amount of data to a manageable size. Afterwards, all coded data were written into matrix and summary was made of the assessment findings of the women in terms of different functional areas (Table 1).

Consent from the Head of the legal help center of BNWLA was taken. Lawyers of the association made clients' referral to the researcher. Consent was also taken from all the participants to participate in the research and assurance was given that the information shared by them would be kept confidential and would be used for research purpose only. Each interview was conducted in the legal help centre of BNWLA in a private and quiet room. At the beginning, a brief description about the purpose of the research was given and permission was taken for using tape recorder from each client. Then through establishing rapport a working relationship with each client was built up. For exploring the participant's mental health state thoroughly, in-depth interview was conducted with the help of the topic guide. During the in-depth interview open-ended questions were asked. Each client was asked to describe different aspects of their functional area (e.g. physical, emotional, behavioral, social, occupational and sexual), previous and current

mental health state, their early life and personal history of their marital relationship from the beginning to present time. During interview micro-skills like paraphrasing, summarizing, reflection of feeling, head nodding etc. were applied properly to continue each interview session successfully. The total assessment for each participant was completed in one session (60 to 90 minutes).

Results and Discussion

The findings which were obtained in this study are presented in Table 1. Eleven women in divorce process answered in response to the question about their functional impairments. Impairments of total seven functional areas reflected the psychological effects of divorce process on women's mental health. These findings are supported by existing literature⁽⁹⁻¹¹⁾. These women were not formally diagnosed, as diagnostic tools such as Anxiety Scale, Depression Scale were not applied, but the researcher tried to collect the possible symptoms which are responsible for their sufferings. Those symptoms indicated that they could possibly be diagnosed as a patient of anxiety disorder, sleep disorder, adjustment disorder, depression, stress reaction etc. supported by other papers^(12, 13).

The findings of the present research is consistent with the research findings that marital disruption was associated with higher prevalence rates of major depression in both men and women⁽¹⁴⁾. Batra and Gautam⁽¹⁵⁾ found a high prevalence of neurotic disorders among divorce seeking couples. The neurotic problems are encountered either as antecedents or consequences of marital disharmony.

In Bangladesh marriage is a single-time event for most women, which is associated with much social approval. Women in this society are economically and socially dependent on men. Almost all the women in divorce process live with their parents and stigmatized by society. They do not want to keep relation with others mainly to avoid criticism. In this study it was found that they felt uneasy, embarrassed and got no pleasure from social gathering. They suffer various physiological and psychological problems but they are not concerned about this. They have distressful thoughts about real life crisis and great tension to survive with their children. They have fewer options open to them for earning. Sometimes they worked against their will to overcome financial crisis. They are mostly concerned with their basic needs for food, shelter and expenses for their children. They ignore their sexual needs so they do not feel interest in this area.

The present study shows that women in divorce process have various types of psychological distress as well as psychological problems. Marital distress has severe negative impact on the mental health of the women in divorce process. As marital problem plays a negative effect on women's psycho-social health, without psychological treatment, it is not possible to restore their well-being properly.

Table 1. Summary of the assessment findings of the participants in terms of different functional areas.

Functional area	Findings
Physiological	Weakness and tiredness (11), headache (9), sleeping disturbance (7), low appetite (7), reduced physical energy and strength (5), chest pain (4), severe pressure in chest (3), difficulty in hearing (3), eye pain (2), digestive problem (2), lower abdomen pain (1), back pain (1), brain stroke (1), felt paralyzed (1), weight loss (1), suffocated (1), physical condition was very worse (1), numbness (1), neck pain (1), heart disease (1), low pressure (1), felt heavy (1), senseless (1), head becomes hot while thinking (1), fever (1) .
Emotional	Helplessness (8), depressed (7), suicidal thought (6), frustrated (5), feeling of no pleasure (4), hopelessness (4), feeling of no peace in mind (4), anxious (3), irritated towards her life (3), suppressed problem (3), feeling bad (3), upset (3), feeling of miserable life (3), low self-esteem (2), imbalanced (2), worthless (2), suicidal attempt (2), decreased level of confidence (2), shocked (1), feeling of shame (1), feeling of sorrow in her heart (1), worried (1), could not control tears (1), unhappy (1), all tears dried up (1).
Thoughts	they had distressful thoughts about real life crisis (11), what will happen to their children’s future (7), she had suffered great tension about her children (7), “it was better to die than to live” (5), she did not want to leave anymore (5), she had no one to help her (4), “i have no way” (3), she had to suffer if her child is spoiled (3), she considered herself a burden in family (2), “i became valueless” (2), regrets for her past life (2), my future is dark (1), she had become mental patient slowly (1), ALLAH did not give happiness in her life (1), her life has ended (1), she did not have anything to think on (1), the most important chapter of life is finished (1), her desire, motive everything has come to an end (1), this is the punishment from allah for her unknown sins (1).
Behavioral	Increased level of anger (10), unable to perform household chores (7), passed time alone (6), unusual crying (5), misbehaved with family members and relatives (5), restless (5), rebuked her children and beaten them (5), level of attention and concentration decreased (4), avoided everybody (4), passive own emotional feelings (4), unable to child care (4), worried about worst living arrangement (3), unable to self-care (2), self harm behavior (2), felt like going somewhere else (2), screamed out loudly (2), could not trust anybody (1), destroyed household things (1), slept all the time (1), cried falling on the floor (1), could not tolerate the situation when family members scolded them for not doing work perfectly (1), impulsive (1), shouted bad language (1).
Occupational	Low interest (8), unable to take responsibility (6), could not do anything (5), decreased previous level of energy strength and capacity (5), no support from any sources (3), felt pressure (3), dependent on others (2), lost skill (2), reduced the level of passion (2), no capacity to maintain the family (2), everything seemed to be problematic (1), no capacity to take decision (1).
Social	Avoid gossiping or social gathering(6), no pleasure from gossiping (4), did not share feeling with anybody (4), social functional level reduced (3), felt uneasy (2), felt embarrassed (2), isolated (2), could not tolerate other people’s happiness (2), lost their faith on people (1), did not want to keep relation with others (1).
Sexual	Reduced level of interest (9), no demand (4), lost interest day by day (2), unwillingness for sex (2).

**Number in parentheses indicates number of cases who were suffering from specific functional impairments.

References

1. Dhaka women turn bold in divorce. (March 30, 2009). *The Daily Star*, Retrieved from <http://www.divorcecorner.com>.
2. Bray J and EM Hetherington 1993. Families in transition: Introduction and Overview. *J. Clinical Psychology* 7: 3-8.
3. Kaslow FW and LL Schwartz 1987. *The Dynamics of Divorce: A Life Cycle Perspective*. New York: Brunner/Mazel.
4. Kressel K 1985. *The Process Divorce: How Professionals and Couples Negotiate Settlements*. New York: Basic Books.
5. Kelly JB 1982. Divorce the adult perspective. In: *Handbook of developmental psych*, Wolman BB and D Strieker (Eds.). Prentice Hall, Englewood Cliffs, New Jersey, pp. 734-775.
6. McGoldrick M, C Anderson and F Walsh (Eds). 1989). *Women in families: Framework for family therapy*, New York: Norton.
7. Hayward M and Z Zhang 2006. Divorced middle-aged women more prone to heart disease than those who remain married. *J. Marriage and Family* 68(3): 639-657.
8. WHO 2010. *Mental health: strengthening our response*, Geneva: World Health Organisation.
9. Hope S, C Power and B Rodgers 1999. Does financial hardship account for elevated psychological distress in lone mothers? *Social Science and Medicine* 49: 1637-1649.
10. Thabes V 1997. Survey analysis of women's long-term, post-divorce adjustment. *Journal of Divorce and Remarriage* 27(3-4), 163-175.
11. Weitoft GR, B Haglund, A Hjern and M Rosén 2002. Mortality, severe morbidity and injury among long-term lone mothers in Sweden. *Intl. J. Epidemiology* 31: 573-580.
12. Davies L, WR Avison and DD McAlpine 1997. Significant life experiences and depression among single and married mothers. *Journal of Marriage and Family* 59: 294-308.
13. Johnson DR and J Wu 2002. An empirical test of crisis, social selection, and role explanations of the relationship between marital disruption and psychological distress: A pooled time-series analysis of four-wave panel data. *Journal of Marriage and Family* 64: 211-224.
14. Bruce ML and KM Kim 1992. Differences in the effects of divorce on major depression in men and women. *Amer. J. Psychiatry* 149: 914-917.
15. Batra L and S Gautam 1995. Psychiatric morbidity and personality profile in divorce seeking couples. *Indian J. Psychiatry* 37: 179-185.

(Manuscript received on 11 April, 2012; revised on 10 June, 2012)