The Effect of Fear of COVID-19 Experienced by Married Individuals Living in Türkiye on Marital Adjustment

Yasemin Cekic¹, Fatma Uslu Sahan², Asli Er Korucu³

ABSTRACT

Aim: We aimed to investigate the effect of fear of COVID-19 experienced by married individuals living in Türkiye on marital adjustment.

Methods: A cross-sectional study design was used. Research data were collected between April 10 and 24, 2021, using the nonprobability snowball sampling technique. An online questionnaire that consisted of a participant information form, the Fear of COVID-19 Scale, and the Marital Adjustment Scale was applied to the participants via social media.

Results: A total of 503 married individuals participated in the study. We found that the majority of the participants had negative changes in their feelings, thoughts, social lives, plans, and friend and work relationships during the pandemic process. According to the results of the regression analysis, the fear of COVID-19 explained 32.6% of the marital adjustment score of the participants.

Conclusion: In stressful life events such as pandemics, it is necessary to plan appropriate interventions to protect married individuals' mental health and marital adjustment.

Keywords: COVID-19, fear, marital status, adjustments

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¹Department of Psychiatric Nursing, Ankara University Faculty of Nursing, Ankara, Türkiye. ORCID iD: 0000-0002-9237-440X. <u>ycekic@ankara.edu.tr</u> (Corresponding Author)

²Department of Obstetric and Gynecology, Hacettepe University Faculty of Nursing, Ankara, Türkiye. ORCID iD: 0000-0001-6451-296X

³Department of Midwifery, Ankara University Faculty of Nursing, Ankara, Türkiye. ORCID iD: 0000-0003-0274-4823

Introduction

Marriage, which is a principal part of human life, is an important union that requires individuals to adapt. Marital adjustment, on the other hand, is defined as the achievement of a balance between the compulsory and voluntary characteristics of marriage (1). When this balance is disturbed, individuals experience mental problems, and these mental problems significantly reduce the quality of their marital relationship (2-5). Marital distress or incompatibility can adversely affect a person's health, well-being, and quality of life, and hinder productivity at both individual and spousal levels (6). In addition, other family members and children of the couple are also seriously affected by all kinds of marital problems or incompatibility, and this effect continues for years (6-8). Improvement in marital adjustment increases the psychological resilience of the family (9,10) and plays an important role in the strength of the family institution by positively affecting the general health of couples (11).

One of the important factors that negatively affect marital adjustment is the stressful life events that couples are exposed to. Stressful life events may exacerbate pre-existing problems in marriages, create new difficulties, interrupt external support, and negatively affect both the capacity to demand and supply spousal support (12,13). It has been reported that individuals who are exposed to the stress of nonrelationship origin are more likely to interact with their spouses in ways that will damage the quality of their relationship over time, such as being overly critical or unresponsive, blaming, or misbehaving (14,15). In stress can impair the quality addition, communication in relationships, increase withdrawal behaviors, vulnerabilities, negative attitudes, and emotions, such as anxiety, hostility, dominance, and stubbornness, and it strains the capacity of individuals to make efforts to establish a constructive relationship with their partners (16-18).

Studies in the literature have shown that the deterioration in marital adjustment during the pandemic is related to the stressors caused by the Coronavirus Disease 2019 (COVID-19) (19-22). It has

been emphasized that the pandemic process, which has led individuals to experience intense stress, has caused a decrease in couples' patience levels, the growth of minor problems, and the deterioration of marital adjustment and that the stressors related to COVID-19 have reduced the commitment between spouses by leading to feelings of dissatisfaction with marriage and frequent conflicts between spouses (5,22). The dynamics of families and couples have changed due to fear, anxiety, social isolation, quarantine, increased parental burden, working from home, the partner's diagnosis of COVID-19, job loss, and economic problems caused by COVID-19, and marriage life which is one of the most important areas of life, is also affected by this process (21,23-25). In addition, the increase in spousal violence rates during the pandemic, and marital conflicts that have occurred as a result of the negative effects of social distance rules and quarantine conditions on romantic relationships and sexual life suggest that the pandemic has negatively affected marital adjustment (20,22,26-29).

Many studies in the literature have shown that marital adjustment, which has important effects on individual, family, and community welfare, is negatively affected by the intense stress and stressors that individuals are exposed to during the pandemic period, and it is recommended to examine other factors affecting marital adjustment. In this context, according to a meta-analysis study by Şimşir et al. (30), it is very important to examine the effect of fear of COVID-19, which is one of the important factors that increase the stress levels of individuals during the pandemic period, on marital adjustment. Determining the effect of fear of COVID-19 on marital adjustment is important in terms of providing data for interventional studies to be conducted on the mental health and marital adjustment of married individuals in stressful life events such as pandemics. In line with the findings in the literature, this study was conducted to evaluate the effect of fear of COVID-19 on marital adjustment. The following questions were addressed in the research:

1. What is the level of fear of COVID-19 experienced by married individuals?

- 2. What is the marital adjustment level of married individuals?
- 3. Does married individuals' fear of COVID-19 affect their marital adjustment?

Methods

The data of this cross-sectional study were collected between April 10 and 24, 2021, one year after the first lockdown had been ordered in Türkiye on April 10, 2020. The non-probability snowball sampling technique was used as the sampling method. Participants were recruited via social media (31,32). The data collection process was carried out online. Data collection forms were created on Google forms and the link to the forms was distributed via social media. Participants filled out the online data collection forms in 3 stages. First, they were directed to the informed consent form, then to the participant information form, and finally to the scales. It took approximately 7-10 minutes for participants to fill out the data collection forms. Individuals who volunteered to participate in the study; were aged ≥18 years, were married for at least one year, and lived in the same house with their spouses were included in the study. A participant information form that was created by the researchers, the Fear of COVID-19 Scale, and the Marital Adjustment Scale were used as data collection tools in the study.

The participant information form: This form was created by the researchers. It consists of 14 questions about participants' demographic characteristics (gender, family type, educational status, etc.) and the changes they experienced during the COVID-19 pandemic (changes in the body, emotions, thoughts, etc.).

The Fear of COVID-19 Scale: This scale was developed by Ahorsu et al. (33), and its Turkish validity and reliability study was conducted by Satici et al. (34). The scale consists of seven items and a 5-point Likert-type evaluation structure. The total score of the scale is calculated by summing item scores. High scores on the scale indicate that the fear of COVID-19 is high. Cronbach's alpha coefficient of the scale is 0.85 (34). In this study, the alpha value of the

scale was calculated as 0.91.

The Marital Adjustment Scale: This scale was developed by Locke and Wallace (35) and its Turkish validity and reliability study was performed by Tutarel Kışlak (1). The scale consists of 15 items. Scores on the scale range from 0 to 58. The cut-off point, which distinguishes married individuals with adjustment and with no adjustment, is 43.5. When the scale is used for research purposes, the cut-off point should be used instead of the group mean score if participants are grouped; otherwise, the total score should be taken into account. High scores on the scale show a high level of adjustment, while low scores indicate a low level of adjustment. Cronbach's alpha coefficient of the scale is 0.84 (1). In this study, the alpha value of the scale was calculated as 0.92.

Study data were analyzed on Statistical Package for the Social Sciences (SPSS) v.26 software package. The findings of the research were presented using descriptive statistics (frequencies, percentages, and mean scores). The Kolmogorov-Smirnov test was employed to check the normality of the data. We found that data showed a normal distribution. We used Student's t-test to compare variables belonging to two independent groups with scale scores and One-Way Analysis of Variance (ANOVA) for the comparison of more than two groups. We employed the Tukey test to find out the group causing the difference and the simple linear regression analysis to predict the relationship between the scales. We calculated Cronbach's alpha values for the reliability of the scales. In the study, the level of statistical significance was accepted as p<0.05.

At the outset, the approval of the Ankara University Ethics Committee where the research was carried out (date: 07.12.2020; no: 56786525-050.04.04/82740) and the application permission of the Ministry of Health of the Republic of Türkiye (no: 2020-08-28T11_32_14) was obtained. The data collection phase was carried out following the Principles of the Declaration of Helsinki, and participants' consent was obtained online. Permission to use the scales used in the study was obtained from the authors of the scales.

Results

We found that participants' mean age was 38.01±8.19 years, 75.3% were female (n=379), 67.4% had an undergraduate degree (n=339), and 94.6% had a nuclear family (n=476). We also determined that the majority of the participants had negative changes in their feelings (66.8%, n=336), thoughts (61.2%, n=308), social life (68.8%, n=346), plans (48.1%, n=242), friend (48.5%, n=244) and work (46.9%, n=236) relationships during the pandemic (Table 1).

Table 1. Demographic characteristics of the participants and changes during the pandemic process

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Characteristics		Frequency	Percentage	
<u> </u>		(n)	(%)	
Gender	Female	379	75.3	
	Male	124	24.7	
Educational	Primary school	23	4.6	
status	High school	50	9.9	
	Undergraduate	339	67.4	
	Graduate	91	18.1	
Family type	Nuclear	476	94.6	
	Extended	27	5.4	
Presence of	Yes	125	24.9	
someone with	No	378	75.1	
a chronic				
illness at home				
Changes in my	No change	260	51.7	
body	Positive changes	31	6.2	
	Negative changes	212	42.1	
Changes in my	No change	111	22.1	
emotions	Positive changes	56	11.1	
	Negative changes	336	66.8	
Changes in my		99	19.7	
thoughts	Positive changes	96	19.1	
C	Negative changes	308	61.2	
Changes in my		227	45.1	
spiritual life	Positive changes	135	26.8	
•	Negative changes	141	28.0	
Changes in my		87	17.3	
social life	Positive changes	70	13.9	
	Negative changes	346	68.8	
Changes in my		201	40.0	
family	Positive changes	115	22.9	
relationships	Negative changes	187	37.2	
Changes in my	No change	187	37.2	
relationships	Positive changes	72	14.3	
with friends	Negative changes	244	48.5	
Changes in my		183	36.4	
work	Positive changes	84	16.7	
relationships	Negative changes	236	46.9	
Changes in my		151	30.0	
plans	Positive changes	110	21.9	
r	Negative changes	242	48.1	
	110gative changes	272	70.1	

We determined that participants' mean scores on the fear of COVID-19 scale showed a significant difference by gender (p<0.001) and the presence of someone with a chronic disease at home (p<0.05), and their mean scores on the marital adjustment scale indicated a significant difference by the level of education (p<0.05). We also found that participants' mean scores on the fear of COVID-19 and marital adjustment scales differed significantly according to changes that occurred in their bodies, emotions, thoughts, spiritual lives, social lives, family, friendships, and work relationships, and plans during the COVID-19 pandemic (Table 2).

According to the results of the regression analysis performed to predict the relationship, participants' fear of COVID-19 had a significant effect on marital adjustment (F=242.37; p=0.001). The R² value, which is expressed as the explanatory power of the model, was calculated as 0.326, and it was determined that the fear of COVID-19 explained 32.6% of participants' marital adjustment score. The beta coefficient of the independent variable included in the regression model was determined as -0.571, and the increase in the fear of COVID-19 score decreased the total score of marital adjustment (p<0.05) (Table 3).

Discussion

In this study, we examined the changes experienced by married individuals living in Türkiye during the pandemic process and the effect of fear of COVID-19 on marital adjustment and found that the majority of the participants had experienced negative changes in their emotions, thoughts, social lives, plans, friendships, and work relationships during this process. Some studies in the literature indicated that stressors arising from the pandemic negatively affected married individuals and their life dynamics (21,23,24). The findings of the study revealed that the pandemic negatively affected the lives of married individuals in many respects, as well as all individuals.

Table 2. Comparison of participants' mean scores on the fear of COVID-19 and marital adjustment scales by their descriptive characteristics and the changes they experienced during the COVID-19 process

naracteristics and the changes they experienced during the		n	Fear of COVID-19	Marital Adjustment		
Characteristics			Mean \pm SD	Mean \pm SD		
Gender	Female	379	19.29±6.94	37.30±11.73		
	Male	124	16.11±6.73	39.41±11.30		
			t=4.457, p<0.001	t=-1.752, $p=0.080$		
Education status	Primary school	23	17.86±7.40	37.04±13.54		
	High school	50	17.08±5.91	42.94±8.77a		
	Undergraduate degree	339	18.97±6.98	37.52±11.73 ^b		
	Graduate degree	91	17.69±7.50	36.30±11.69b		
	C		F=1.679, p=0.171	F=3.898, p<0.05		
Family type	Nuclear	476	18.44±6.99	37.82±11.55		
3 31	Extended	27	19.66±7.49	37.70±13.54		
			t=0.055, p=0.956	t=0.882, p=0.378		
Presence of someone with a	Yes	125	19.95±7.55	36.60±11.82		
chronic illness at home	No	378	18.02±6.77	38.22±11.58		
			t=2.671, p<0.05	t=-1.354, p=0.176		
Changes in my body	No change	260	17.35±6.72a	39.96±10.89a		
- a gas y a say	Positive changes	31	17.74±7.69	37.51±12.95		
	Negative changes	212	20.03±7.00b	35.24±11.88 ^b		
	riegani e enanges		F=9.037, p<0.001	F=9.911, p<0.001		
Changes in my emotions	No change	111	14.85±6.23 ^a	41.74±10.95a		
g,	Positive changes	56	17.67±6.89 ^b	39.17±12.79		
	Negative changes	336	19.85±6.85 ^b	36.30±11.38 ^b		
	riegari e changes	230	F=23.499, p<0.001	F=9.875, p<0.001		
Changes in my thoughts	No change	99	14.93±6.53 ^a	41.41±11.26 ^a		
Changes in my anoughts	Positive changes	96	17.59±6.74 ^b	37.80±11.72		
	Negative changes	308	19.93±6.81°	36.67±11.55 ^b		
	regative changes	300	F=21.647, p<0.001	F=6.323, p<0.05		
Changes in my spiritual life	No change	227	16.47±6.41 ^a	40.88±11.01 ^a		
Changes in my spiritaar me	Positive changes	135	19.20±7.38 ^b	36.20±11.61 ^b		
	Negative changes	141	21.12±6.62°	34.44 ± 11.53^{b}		
	riegative changes	111	F=21.617, p<0.001	F=15.956, p<0.001		
Changes in my social life	No change	87	$\frac{1-21.017, p < 0.001}{15.82 \pm 6.48^{a}}$	41.81±9.98 ^a		
Changes in my social me	Positive changes	70	18.07±6.97	39.77±11.89		
	Negative changes	346	19.26±7.00 ^b	36.42±11.73 ^b		
	regative changes	340	F=8.774, p<0.001	F=8.840, p<0.001		
Changes in my family	No change	201	17.51±6.76 ^b	39.76±10.90 ^b		
relationships	Positive changes	115	$17.86 \pm 7.23^{\mathbf{b}}$	39.82±11.78b		
101au onompo	Negative changes	187	19.96±6.94 ^a	34.50±11.66 ^a		
	riegative changes	107	F=6.690, p<0.05	F=12.639, p<0.001		
Changes in my relationships	No change	187	16.86±6.78 ^a	40.64±10.78 ^b		
with friends	Positive changes	72	18.06±6.96	39.84±11.87 ^b		
with friends	Negative changes	244	19.89±6.95 ^b	35.06±11.63 ^a		
	regative changes	244	F=10.381, p<0.001	F=14.124, p<0.001		
Changes in my work	No change	183	17.40±6.97 ^b	39.86±10.35 ^a		
relationships	Positive changes	84	17.07±7.06 ^b	38.32±12.49		
	Negative changes	236	19.87±6.81 ^a	36.05±12.06 ^b		
	regative changes	230	F=8.744, p<0.001	F=5.702, p<0.05		
Changes in my plans	No change	151	16.39±6.70°	40.20±10.64°		
Changes in my plans	Positive changes	110	18.72±7.18 ^b	38.34±12.39		
	Negative changes	242	19.72±6.85 ^b	36.09±11.67 ^b		
	regative changes	∠ 4 ∠				
	rs for each variable in the same c		F=10.921, p<0.001	F=6.029, p<0.05		

a,b,c: Groups with different letters for each variable in the same column are significant, Tukey test. t: Student's t-test, F: One-Way Analysis of Variance (ANOVA)

Table 3. Regression analysis for the prediction of marital adjustment by the fear of COVID-19

Independent variable	Dependent variable	В	Std. Error	(B)	t	P	R	\mathbb{R}^2	F	p
Fear of COVID-19	Marital adjustment	55.370	1.205	-0.571	45.93	0.00	571	0.326	242.37	0.001

We found that women in the study had a significantly higher mean score on the fear of COVID-19 scale than men. Similarly, in the meta-analysis study by Luo et al. (36), in which they evaluated studies on fear of COVID-19, it was emphasized that women experienced more fear than men during the pandemic period. According to the results of a study by Kolakowsky-Hayneret al. (37) with participants from 59 different countries, women were affected more psychosocially than men during the pandemic process. In this context, it is possible to say that the findings of the present study are similar to those in the literature and that women were more negatively affected by the pandemic process. In addition, research findings indicated that married women needed more psychosocial support during the pandemic process.

Stressful life events such as pandemics, which show up suddenly, lead to uncertainty, and are uncontrollable, can disrupt individuals' psychosocial balance and affect all areas of their lives. According to the findings of our research, we found that the mean scores of participants who were affected negatively by the pandemic on the Fear of COVID-19 Scale were statistically and significantly higher and that their mean scores on the marital adjustment scale were statistically and significantly lower. From this point of view, we can say that the mental health and marital life of participants who were adversely affected by the pandemic process deteriorated. These findings obtained as a result of the research are compatible with the results of other studies showing that the pandemic has a negative impact on the mental health of married individuals and marital life (3-5,20-24,29). We considered that higher fear of COVID-19 and lower marital adjustment scores of participants who experienced negative changes were likely consequences of the pandemic.

According to the results of the regression analysis conducted in the study, we found that participants' fear

of COVID-19 had a significant effect on their marital adjustment and that the increase in fear of COVID-19 reduced marital adjustment. Similarly, Prime et al. (21) emphasized that fear of COVID-19 would have a pervasive effect on marital functioning, particularly by changing satisfaction with positive experiences in partner interactions. Contrary to our research findings, Erdoğan et al. (38) found no relationship between fear of COVID-19 and marital adjustment, while other studies indicated that increased fear of COVID-19 negatively affected marital satisfaction and the happiness levels of married couples (39,40). Fear of COVID-19 is one of the important factors that negatively affected individuals' stress levels and mental health during the pandemic (30). Some studies in the literature have shown that mental problems due to COVID-19 significantly reduce the quality of marital relationships and that the deterioration in marital adjustment during the pandemic period is related to the stressors caused by COVID-19 (3-5,19-22). In this context, we thought that the negative effect of the fear of COVID-19 on the marital adjustment of individuals participating in the study may have come from the increased stress levels and mental problems arising due to the fear of COVID-19.

This research has several limitations. The use of the nonprobability snowball sampling method, data collection from social media groups, and the fact that the study sample group (higher education level, higher number of female participants) does not reflect the general population, are among the main limitations of the study. Another limitation is that the study was conducted only with married Turkish participants.

Conclusion

This research revealed that married individuals living in Türkiye experienced many negative changes during the pandemic process and that the fear of COVID-19 negatively affected marital adjustment.

Marital adjustment, which shows the quality of interpersonal relationships at home, is an important factor that affects not only the couples but also the adjustment of all family members. Disruptions in marital adjustment affect the health of the family, which is the smallest unit of society, and pose a threat to the welfare of society. In stressful life events such as pandemics, we think that planning appropriate interventions to reduce the fear of COVID-19 and protect and increase married individuals' marital

adjustment will protect the mental health of the individual, family, and society. In line with the results of the research, it can be recommended to plan interventional studies to protect the mental health and marital adjustment of married individuals, teach effective coping methods to couples to cope with the stress caused by the pandemic, plan qualitative and longitudinal studies to better understand the deterioration in marital adjustment.

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