

# Relationships between attachment to God and marital satisfaction, and mental health in parents of children with special needs

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## Abstract

**Introduction:** This study was conducted in order to determine the relationship between attachment to God with marital satisfaction and mental health in parents of children with special needs.

**Method:** A total of 372 parents (186 fathers, 186 mothers) of blind, deaf and educable children with mental retardation were selected through stratified random sampling using the method of proportional allocation. The assigned group was evaluated according to the Morgan table. This survey used three types of questionnaires for data collection to make evaluations of attachment to God, marital satisfaction, and Symptoms Checklist-Revised (SCI-90).

**Results:** The results showed a significant positive implication for the relationship between a secure attachment to God and marital satisfaction, and there was a significant negative implication for the relationship between anxious-avoidance in attachment to God and marital satisfaction. Further findings generally indicated a significant positive relationship between mental health and marital satisfaction. Assigning independent variables of marital satisfaction and mental health as a criterion variable and secure, avoidance and anxious attachment to God as a predictor variable for step-by-step regression model, in the first step a secure attachment to God was entered into the equation. This variable determined around 51% marital satisfaction and 47% mental health. Other variables (avoidance and anxiety in attachment to God) were excluded from the equation.

**Conclusion:** Having a secure attachment to God had an impact on a meaningful and positive relationship with mental health and marital satisfaction, while an avoidant-anxious attachment to God had implications for a negative meaningful relationship with mental health and marital satisfaction. Therefore, it was possible to improve marital satisfaction and mental health among people, particularly parents of children with special needs by changing the nature of their attachment to God.

**Keywords:** Religion, God Attachment, Marital Satisfaction, Mental Health, Exceptional Children

## Introduction

Marital satisfaction was rated according to desire and satisfaction among marriage [1]. This concept was determined according to people's ideals and couples' interactions in various aspects of their lives that serve to a parent's mental health and to control stress and facilitate a properly functional family. Although dissatisfaction among couples' relations leads to stress, anxiety and even family disruption, several studies have supported the hypothesis that a satisfactory relationship can improve a couples' mental and physical health [2-5]. Nowadays, couples can have problems maintaining friendly and intimate relations and marital satisfaction [6-10].

In families of children with special needs, there may be less satisfaction in a couple's relationship and less marital satisfaction. Nowadays, children have a significant role in their parent's marital relationship. This is one of the biggest challenges for families of

children with special needs. Several families who are coping with the impact of children with special needs might accompany different problems for family members.

The birth of exceptional children impacts a family and has a qualitative impact ways and quantity of marriage relations and can be dissimilar relation of family members and induces stress in parents and can damage proper family functioning that reduces satisfaction [11, 12].

The birth of handicapped children is often accompanied with feelings similar to those of bereavement. Exceptional children spend most of their time at home with their mothers and this situation can have a bad effect on family functioning and causes parental dissatisfaction, especially in mothers [11].

Different pressures due to handicapped children, as an intervention variable, have a harmful impact on decision making for the socio-mental life of family members and changes the quality of the lives of parents which have special need children and eventually decreases satisfaction [13]. Marital conflict, divorce, depression, hopelessness, anxiety and suicide attempts are among the negative outcomes of having children with special needs and these can impair mental health and affect marital relations in families. Parents of children with special needs experience physical, social and economic problems [12, 14]. There is a hypothesis that claims that the problems of training children with special needs in a home affects the mental life of a parent, particularly in mothers [15].

Two fundamental steps must be taken in order to minimize physical and mental problems and handicap incidence in societies. The first step is to try to prevent handicap and thus to avoid mental defects. The second step is to study, probe, recognize and develop strategies to solve problems associated with children with special needs [16]. Previous studies have shown that some factors such as attachment to God have an impact on mental health [3, 4, 17-20] and marital satisfaction [21]. Moreover, studies have shown that religious practice has a positive relation with marital satisfaction [22].

Some studies have reported that attachment to God is beneficial to mental health and marital satisfaction. Such studies have reported various results. The relationship between attachment to God and mental health and marital satisfaction in Iranian students with special needs has not yet been studied. The aim of this study was to assess the relationship between attachment to God and marital satisfaction and mental health.

## Method

This study was conducted as a descriptive correlation study and was performed on parents of blind, deaf or educable mentally retarded children in schools for children with special needs. The target population was all parents with at least one child with special needs in the

family. In total, there were 612 children with special needs in six special schools.

The study population was selected from among students of all special needs schools according to the number of students. The sample population was made according stratified sampling and Morgan table. 372 parents (62 parents of blind, 70 parents of deaf and 240 parents of mentally retarded children) among a total of 1224 were selected. The researchers went to children's homes to complete the questionnaires. The mean age of the parents included in the study was  $39.21 \pm 7.16$  years.

**Attachment to God Questionnaire:** The questionnaire was developed by *Mayner* and his colleges. There were 52 questions and three subscales including secure, preoccupied and fearful type attachments. The study population answered questions according to the Likert scale from one (completely disagree) to seven (completely agree). In the study of *Ghobari and Mayner* on the Australian Muslims in 2008, this questionnaire had a Chronbach alpha evaluation of 0/95. In the present study the Chronbach alpha evaluation was 0.97. The three subscales showed evaluations of 0.81, 0.87 and 0.73 for secure, preoccupied and fearful types of attachment respectively.

**ENRICH Marital Satisfaction Questionnaire:** The questionnaire was developed by Elson and his colleagues for assessing the weak and strong points of marital relations. The questionnaire had two forms of 115 and 125 questions. Each question had five answers ranging from very high to very low. In this study the 115 question form was used. The form had 12 subscales. The first subscale (Idealistic Distortion) had five questions and other subscales with the following headings: Marital Satisfaction, Personality Issues, Communication, Conflict Resolution, Financial Management, Leisure Activities, Sexual Relationship; Children and Parenting; Family and Friends; Equalitarian Roles; Religious Orientation; Marital Cohesion and Marital Change.

The ENRICH questionnaire had a high validity and reliability. Several evaluations on the Chronbach alpha (between 0.92 and 0.95) were reported in *Naderi's* study [23]. The correlation coefficient of this questionnaire was determined in the range of 0.41 to 0.60. All the subscales had sufficient power for the distinction between satisfied and unsatisfied couples [24].

**The Symptom Checklist-90-R:** The first form of the questionnaire was developed by *Dragoitis, lipman and Koi* [23] in order to evaluate the psychological aspects of physical and mental disorders. *Dragoitis et al.*, revised the first version and prepared the final form. The comparable validity and reliability of that in *Rezapour's* study was in the range of 0.62 and 0.91 and the Chronbach alpha evaluations were between 0.61 and 0.88. In current study GSI index used as mental health criteria.

The study data were analyzed by SPSS Version 15.0 and by the Pearson correlation and regression statistical methods.

## Results

According to the descriptive data shown in Table 1, the highest and the lowest frequencies of the study population were determined among parents of mentally retarded and blind students (64.5% and 16.7%). The highest and lowest frequencies of parents were determined among students of primary and special high schools (83.3% and 7%). Uneducated, lower and higher diploma levels of education consisted of 9.1%, 54% and 36.9% of parents respectively.

**Table 1.** Descriptive and demographic variables among study samples

Variables	Levels	Frequency	Percentage
Handicap type	Deaf	70	18.8
	Blind	62	16.7
	Mental retard	240	64.5
Education of parents	Non educated	34	9.1
	Primary school	102	27.4
	Diploma	99	26.6
	Higher than diploma	65	17.5
	Bachelor and higher	72	19.4

There was a significant positive association between secure attachment to God and marital satisfaction ( $r=0.73$ ,  $P<0.001$ ). Preoccupied and fearful subscales of attachment to God had a significant negative relation with marital satisfaction ( $r=-0.63$ ,  $-0.68$ ).

In regression analysis with marital satisfaction and

attachment to God as constant and predicted variables with stepwise method, secure subscale of attachment to God predicted rate of marital satisfaction at 67%.

Attachment to God and mental health had a significant positive association ( $r=0.51$ ,  $P<0.001$ ). Preoccupied and fearful subscales of attachment to God had a negative and significant relation with marital satisfaction ( $r=-0.63$ ,  $-0.68$ ;  $P<0.001$ ). Mental health had a significant positive association with marital satisfaction. Preoccupied and fearful subscales of attachment to God had a negative and significant relation with marital satisfaction ( $r=0.76$ ,  $0.63$   $P<0.001$ ).

**Table 2.** Association of scale of attachment to God with marital satisfaction and mental health

Variable	Marital satisfaction	Mental health
Mental health	0.74(0.001)	-
Secure	0.73 (0.001)	-0.66 (0.001)
Preoccupied	-0.63 (0.001)	0.63 (0.001)
Fearful	-0.68 (0.001)	0.66 (0.001)

The multiple regression analysis with mental health as dependent and attachment to God as the predicted factor showed that attachment to God was responsible for 47% of the changes in the mental health of the studied parents.

Secure attachment to God, marital satisfaction and mental health was significantly higher among fathers compared to mothers ( $P<0.001$ ).

**Table 3.** Stepwise regression analysis between attachment to God and mental health and marital satisfaction

Source of changes	Total squares	Degree of freedom	Mean of squares	Coefficient determination	F	P-value
Mental health	Regression	1390122.7	1	1390122.71	0.54	389.54
	Residual value	1320390.2	370	3568.62		
	Total	270512.9	371			
Marital satisfaction	Regression	1328238.6	1	1328338.64	0.67	326.61
	Residual value	1506555.6	370	4071.77		
	Total					

**Table 4.** Association of a secure attachment to God with marital satisfaction and mental health among study samples

Variables	Correlation coefficient	Coefficient determination	Adjusted coefficient determination
Marital satisfaction	0.74	0.51	0.51
Mental health	-0.63	0.47	0.47

**Table 5.** Comparison of attachment to God, mental health and marital satisfaction among parents according to gender

Source of changes	Total squares	Degree of freedom	Mean of squares	F	P-value
God attachment	Group	338717.05	2	169358.52	50.77
	Gender	265925.64	1	265925.64	79.71
	Group-gender	302040.38	2	151020.19	45.27
Mental health	Group	151592.63	2	75796.32	12.92
	Gender	370678.40	1	370687.41	63.16
	Group-gender	239395.56	2	119697.78	20.40
Marital satisfaction	Group	804240.02	2	40212.01	7.21
	Gender	371722.07	1	371722.07	66.62
	Group-gender	346716.82	2	173358.41	31.07

## Discussion

The findings of the present study show that a secure attachment to God had a positive and significant relation

and preoccupied and fearful subscales of attachment to God had a negative and significant relation with marital satisfaction. The results showed that attachment to God was only responsible for a 51% change in marital satisfaction. These results were similar to those of Atari [6, 19, 25] which reported that a person with a secure attachment to God had a positive relation with emotional adjustment. Such people were more satisfied about their lives and also had more psychological adjustment than those without a secure attachment to God [26, 27]. Having a secure attachment to God determined a more meaningful attitude towards the world. People who lacked faith in God did not have solidarity and relaxation in the difficult situations of life. This lack caused several problems in marital lives. Belief in God and religious practice can help people consider God as a source of attachment and support in their lives. God provides a means of support which people can turn to during difficulties in their lives. Although God has never had a physical presence, human beings can feel the presence of God in their daily lives. Those who have faith, find that God is the base of a secure life. A person's strong attachment to God helps him/her to overcome problems they may encounter throughout their life. They have special self-esteem and are often known as supporters of others and developers of strategies to solve other people's problems. This specification can increase a wife's satisfaction with her life [28].

A secure attachment to God has a positive and significant relation and preoccupied and fearful subscales of attachment to God have negative and significant relations with mental health. Overall, mental health and marital satisfaction determined positive and significant relations. Results also revealed that a secure attachment to God was responsible for a mere 47% change in mental health. The results of other studies [19] also determined an association between adjustment and a secure attachment to God [29], in association between anxiety over attachment and mental and physical disorders [13], in associations between style of secure attachment with mental health [30]. Attachment and belief in God caused a meaningful attitude towards life. Preoccupied and fearful attachment to God caused a lack of solidarity between people which led to difficulties in personal and family life.

A secure attachment to God induced tolerance when people encountered problems and increased their mental health and improved their psychiatric health. Although the parents of children with special needs (such as mentally retarded children) encountered chronic stress and difficulties, problems with tolerance, however, the adverse impacts of such problems were decreased and mental health was maintained. Attachment to God was considered as one of the main factors in decreasing risks of problems and improving mental health [31]. As a result, the marital satisfaction in stressful and problematic situations with handicapped children increased.

The findings of this study showed that fathers scored significantly higher for attachment to God and had

better mental health and marital satisfaction compared to mothers. Mothers, in families with children with special needs suffered more stress and most of these children's time was spent at home with their mothers. It was noted that such circumstances had a negative impact on the mental health and marital satisfaction among mothers [32]. Although women in some cases had lower tolerance in facing life's problems than men, environmental and social divergence might have been responsible for higher marital satisfaction in men [33, 34].

These days although we are facing scientific and industrial improvement in several fields, especially in medicine and psychology, but human beings are not capable to solve mental problems such as anxiety, depression, psychological pressure and disorder, feelings of nihilism, hopelessness and tendency to loneliness and marital dissatisfaction. Nowadays people are struggling to maintain a sense of identity and research has demonstrated that attachment to God is one of the main pathways towards strong mental health. It has been mentioned that being attached to God has preventive and therapeutic impacts. According to the Holy Quran, human welfare is straightly related to God.

In the present study, positive and significant associations were determined between attachment to God and mental health and marital satisfaction in parents of children with special needs. Attachment to God can cause a valid and stable frame for human mental health. Mental health is better in people that have internalized God and religion in emotional and cognitive ways and transformed their beliefs into religious trust. According to the results of this study and other similar studies, attachment to God was one of the main factors in decreasing risks and improving mental health among humans. This situation can induce marital satisfaction in stressful and problematic situations.

The researcher recommends that all parents, especially those of children with special needs attempt to improve their attachment to God and develop their religious belief in order to increase their mental health. Health care workers can apply religion as a strategy in mental health programing in societies. Psychiatrists can help people form their beliefs and induce their trust.

The present study had some limitations; firstly, the questionnaire was long and it had many questions. This means its accuracy may have been compromised by the fatigue of the participants. Secondly, the study was only performed between the parents of children with special needs. This is why extending the results of this study to the entire population is incorrect. Thirdly, the mental health in the study population was only assessed by a questionnaire. Using other methods such as interviews or observations might have produced different results.

## Conclusion

Attachment to God, mental health and marital satisfaction were correlated in parents of children with special needs and this relation, in a secure subscale was positive and in preoccupied and fearful subscales was

negatively significant. Parents of children with special needs can improve their mental health and marital satisfaction by improving the quality of their attachment to God.

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