

A STUDY OF ASSERTIVENESS AS A PSYCHOLOGICAL FACTOR INFLUENCING
MARITAL DISTRESS IN GHANA

Michael T. Anim

(Department of Psychological Medicine and Mental Health, School of Medical Sciences,
University of Cape Coast, Ghana)

E- mail address: animmt@yahoo.com

Phone: 0277705172

Abstract

The reason for this study was to find out how much distress men and women experience in their marital relationships and whether assertiveness is associated with marital distress. This was done by using the Marital Happiness Scale and an Assertiveness Inventory, as measuring instruments. Four research questions were formulated and four hypotheses were tested. They covered the differences that exist in the marital distress experiences of husbands and wives and their assertiveness. A total of eighty (80) married men and women comprising 40 husbands and 40 wives were randomly selected to take part in the study. Pearson's Product Moment Correlation Coefficient (r) and t- Tests were used to analyse the data to bring out differences and to determine associations among variables. The findings showed that many persons who report distress in their marital relationships also test distressed on a scale of marital distress; that among this population, wives test more distressed than husbands in marriages. Findings also showed that assertiveness correlated positively with their marital distress. These findings have implications for clinical psychology in practice. That is, to work on the assertiveness skills of married persons if distress is to be minimised. It also has implications for married but distressed couples and couples contemplating marriage, that assertiveness skills should be adequate. Some recommendations were made to improve distressed marriages.

Introduction

Stack and Eshleman (1998), provided evidence that some married persons report higher levels of personal well-being than persons of any unmarried status. It can be said that personal wellbeing is the aim of every couple involved in marriage.

However, happiness in marriage seems to elude some couples. Distressed marriages are common nowadays in many countries including Ghana. Divorce is often reported to be on the ascendancy. According to Sabini (1992), it is not true that all unhappy marriages end in divorce. Some stay together for the sake of the children, or for religious or other reasons. Kondor (1997), had the conviction that many marriages in Ghana could best be described as distressed, unhappy, and in discord, but these had not yet ended in divorce. Amuzu (1997) observed that women sustain injuries as a result of marital violence which includes cuts, broken bones, concussions, miscarriages, as well as permanent injuries such as damage to joints, partial loss of hearing or vision, scars from burns, knife wounds and even death. In Ghana, although the incidence of physical abuse of women is thought to be commonplace and pervasive, only few women report or even admit being victims of domestic violence. In several instances, it is only reported when grievous harm has been caused. In addition, many victims face pressure from society to keep the family together at all costs and many women who are severely battered by their husbands love them and continue to cling to the relationship hoping that something would eventually happen that would change the bad situation.

In Safo's (1997) opinion, women also commit violence against men almost as often as men do against women. However, some of this violence is often routine reaction to anger, feelings of low self-esteem and frustration. The abuse is mostly psychological taking the form of name-calling, criticism, etc, thus eroding a partner's self-esteem.

Despite much effort being made by relatives, pastors, chiefs and clan elders, the district law courts and tribunals, amateur and trained counsellors, and clinical psychologists, marital problems and conflicts are still on the ascendancy. The distress is so prevalent that one finds it to assign a particular reason or factor to the phenomenon. Some authors blame it on factors including differences in the sexes, differences in personality or temperaments, differences in upbringing, communication difficulties, Western education and emancipation of women, intrusion of third parties and failure to adjust (Adei, 1991). Mcvey (1990) highlighted financial problems, immaturity before marriage, in-laws, accommodation problems and sexual incompatibilities as resulting in marital distress. Holtsworth-Munroe & Jacobson (1985) also identified expectations and negative attributions as important.

In addition to the aforementioned factors, assertiveness is suspected to also affect marital distress. Assertiveness, according to Alberti and Emmons (1990), has no general agreement on the definition of the term, but they offered a brief definition as “Assertiveness promotes equality in human relationships, enabling us to act in our own best interests, to stand up for ourselves without undue anxiety, to express feelings honestly and comfortably, to exercise personal rights without denying the rights of others.” Some assertiveness skills include the ability to make your own decisions about career, relationships, lifestyle and time schedule, taking initiative in starting conversation, trusting your own judgment, setting goals and achieving them, asking help from others, saying ‘no’, setting limits on time and energy, expressing opinions and defending them, ability to disagree, express agreement or support, show affection and friendship, to respond to violations of one’s rights, and expressing the above without fear of unfair criticism from others, without hurtful behaviour toward others, without name-calling and intimidation, without manipulation and controlling others. With assertiveness skills not properly developed in people,

they enter in marital relationships only to find out that they are not really mature enough to handle physical, social, emotional, mental and spiritual conflicts that erupt in marital relationships.

In addition, in most countries including Ghana, the husband's general position vis-à-vis his wife is that of a legal head. He is entitled to respect and obedience from his wife, and she is expected to obtain her husband's consent in any major transaction she intends to embark upon. All these could result in feeling of inadequacy in wives.

Finally, 'power' in marital relationships needs consideration. Western education and its consequent 'emancipation' of women may have also compounded the problem of marital distress in a society where, male dominance is taken for granted. An educated wife may seek to exert 'equal-status' authority in the marriage, and may challenge her husband's final decisions pertaining to the home. Some highly educated couples find it difficult agreeing who controls affairs in the marriage: the husband, wife, or both? Many educated women answer that it is both, for in marriage both should share the same authority or exercise equal-status rights and power. These ideas may make some wives behave in traditionally unacceptable ways in their relationships, and this may spark a lot of friction, communication problems, marital dissatisfaction and distress (Sabini, 1992).

Rather than face marital problems when they arise, many married couples get around it, seeking the route of least resistance. McDowell (1985) pointed out such ineffective substitutes for dealing with conflicts as failing to acknowledge the problem, withdrawal (the silent treat), trying to ignore the conflict's significance, spiritualising the problem with religious jargon, keeping scores, attacking the person instead of the problem, blaming someone else, desiring to

win no matter the cost, giving up just to avoid conflict, and buying a special gift for the other person.

All these ineffective solutions have one thing in common: they try to avoid dealing with the problem. In the end, the accumulation of unresolved conflicts take their toll with painful physical, psychological, emotional, mental, and spiritual consequences, which can be termed distress in marriage.

Despite the above discussions, one still wonders what the actual culprits of marital distress are in Ghana, whether they are personal, socio-cultural, educational, spiritual, or psychological factors, and which one is a primary determinant of distress. While men blame marital distress on women, women blame it on men. Religious people blame it on evil spiritual forces and politicians may blame it on unjust government economic policies, etc. There is a need for a study to determine the psychological factors that are responsible for marital distress in Ghana.

In this study, therefore, assertiveness is singled out for investigation because it is a psychological factor, which also determines the climate of any marriage relationship but whose associations and dynamics in marriage are seldom investigated in Ghana. Yoder (1980) and Tarlow (1989) believe that self-esteem and assertiveness should be psychological factors whose negative manifestations underlie marital unhappiness and thus distress. In spite of this general belief, little scientific research had been conducted to determine the influence of these on marital happiness and stability. These have been some of the burning issues that have urged the undertaking of this study to find out whether or not nonassertiveness is really associated with marital distress and whether skills in this area could be suggested as sureties for marital happiness.

Study Aims and Objectives:

One objective of this study was to find out the intensity of marital distress among married men and women on the measuring questionnaires.

Second, to find out whether or not assertiveness is associated with marital distress. That is whether non-assertiveness relates to marital distress.

Third, to find out whether or not husbands differ from wives in the psychological variable, assertiveness, and in the degree to which they experience distress as a result.

Hypotheses:

- i. H1: Married men and women will show high marital distress score on the Marital Happiness Scale.
- ii. H1: There is significant difference in the level of distress between wives and husbands.
- iii. H1: There will be negative correlation between assertiveness and marital distress of husbands and wives.
- iv. H1: There is significant difference between husbands and wives in their assertiveness: wives would report lower assertiveness than husbands.

Methodology

Research Design

This was partly a correlational study and partly a comparative study.

Sample and Sampling Procedure

Distressed couples who have been married two years or more with a minimum of Middle/Junior Secondary school education were used. Accra is a very heterogeneous town due to the rural-urban migration that occurs, and is representative of a large number of ethnic groups in addition to the indigenous Ga-Adangbe people. Ethnicity was not controlled in the study because changes occur fast in Accra and Somanya.

The participants were from the University of Ghana, Legon, some churches, some general hospitals, Department of Social Welfare, a district grade two court, some schools, and civil service institutions. In all, eighty (80) married men and women who reported marital distress were selected. Subjects, whose marital distress was associated with known psychiatric conditions, particularly substance related disorder, schizophrenia, major depressive illness, and other psychotic disorders, were not included in the study.

Sampling for equal numbers of husbands and wives was done in order to include presumably typical groups in the sample. The researcher contacted married men and women in the said areas and purposefully selected forty (40) distressed husbands whose ages ranged from twenty eight (28) years to sixty four (64) years. The mean age for the group was 40.4 (SD= 7.3796). The wives were also forty (40) and aged from twenty five (25) to fifty- six (56) years.

The mean age for the wives was 38.6 years (SD= 7.7849). Refer to Table 1. Twenty five of the husbands representing 62.5 % were highly educated and fifteen (15) had low education, this number representing 37.5%. Twelve (12) wives were highly educated (30%) while twenty eight (28) wives representing 70% had low education as shown in Table 1 (NB: Up to GCE O-level was considered as low education, and from A-level was considered as high education). Husbands in the sample had been married an average of 8.05 years with a range of 3- 28 years

(mean = 8.05; SD= 6.63). Also wives in the sample had been married for an average of 13.9 years with a range of 2- 29 years (mean= 13.9; SD= 7.9). Refer to Table 1.

Research Instruments

Instruments used were a questionnaire and a screening interview. The screening interview had structured questions of the closed-ended type to which subjects responded either 'yes' or 'no'. The questions covered alcoholism, substance-related disorders, schizophrenia, psychosis, and depression, and they were meant to eliminate subjects who suffer from these conditions.

The main data collection instrument was a comprehensive questionnaire made up of socio-demographic data such as age, sex, religion, occupation, number of children, etc. Then section I had a 33- item 4- point Marital Happiness Scale (being the combination of the marital happiness and the Dyadic Adjustment Scales, which were modified by the researcher for Ghanaian respondents). Section II was a 30-item assertiveness inventory. This inventory measured the degree of discomfort in specific situations requiring assertion, and in what situation a person is likely to act more assertively. (It is a modification of the assertiveness inventory of Gambril and Rickey (1975). The questionnaires had items of the closed-ended type that needed circling or ticking of responses.

Pilot Study

The entire questionnaire was much improved by pre-testing. Every part of the questionnaire such as the items, the format, the introduction, etc. were tried out first with friends, classmates, instructors and persons similar to the investigator's intended subjects.

Thus in a pilot study, which lasted for about a month and a half, I conducted informal pretesting with a preliminary sample of twenty distressed married couples (made up of 12

husbands and eight wives. The researcher explained that he needed advice, and he questioned his informants about each answer choice and their understanding of each item on the questionnaires. The results showed that the respondents' understanding of some questions and answers were different from the researcher's. After allowing days in doing this exercise, some items were modified by rewording and simplifying them. Thus the Marital Happiness Scale which had nine different subsections of differing numbers of items and directions of responses had 33 items in the final questionnaire. It also had the same format, such as a 4-point scale from 1-4 running through all 33 items in the final form.

The 30 -item assertiveness inventory also saw some changes in sentence structures. It is also a 4-point scale in its final form. To further validate the instrument, face validity was used. Three mental health professionals (two clinical psychologists and a counsellor), inspected and vetted the instrument. At this stage, it was ready for administration.

Data Collection Procedure

Before the interview, verbal consent was obtained, and then the questionnaire was given out. The researcher supervised the completion of the questionnaire which took about thirty minutes on the average for almost all respondents whose level of education was low. In all, 90 questionnaires were given out. Four were not returned. Three were discarded because of incompleteness, and three were not used in the final analyses because the respondents were not distressed. They exaggerated their responses.

The completed questionnaires were collected same day. So the return rate was excellent. Only about four respondents failed to return their questionnaires. But these plus refusers (5) were replaced by other volunteers.

Method of Scoring Questionnaires:

Section I: Marital Happiness Scale: This questionnaire was scored to differentiate high scorers and low scorers.

The highest score obtainable = 132

The lowest score obtainable = 33

Range: 132 – 33 = 99

Midpoint: = 49

Therefore, from 33 – 82 = low distress

From 83 – 132 = high distress.

Section II: Assertiveness Inventory: This was also scored to differentiate between high and low scorers.

Highest score obtainable = 120

Lowest score obtainable = 30

Range: 120 – 30 = 90

Midpoint = 45

Therefore, from 30 to 75 = high assertiveness

From 76 to 120 = low assertiveness

Data Analyses Procedure

The appropriate tests employed were Pearson's product moment correlation coefficient (r) to test hypotheses 3; while t-Tests were used to test hypotheses 2 & 4. Descriptive statistics (frequencies and percentages), were also used to deal with hypothesis one. All analyses in this study were done using SPSS 1998.

RESULTS

Table 1.: Demographic characteristics of Sample

Variables	Husbands (No.)	%	Wives (No.)	%
1. Educational Level				
Low (Up to O-level)	15	37.5	28	70
High (A-Level upwards)	25	62.5	12	30
2. Marriage Type:				
Monogamy	39	97.5	32	80
Polygamy	1	2.5	8	20
3. Occupation Type:				
Civil/Public Service	13	32.5	5	12.5
Teaching	16	40	14	32
Farming	8	20	3	7.5
Trading	3	7.5	18	45
4. Religious Type:				
Catholic	4	10	3	7.5
Protestant	28	70	24	60
Pentecostal/Spiritual	7	17.5	9	22.5
Islam	1	2.5	0	0
Religion not indicated			4	10
5. Age:	Minimum	Maxim	Mean	St. Dev.
Husbands	28	64	40.5	7.38
Wives	25	56	38.6	7.78
6. Years of Marriage:				
Husbands	2	28	8.0	6.62
Wives	2	29	13.9	7.9
7. Number of Children:				
Husbands	00	6	2.6	1.7
Wives	00	6	2.5	1.6

Demographic characteristics of sample are presented in Table 1 above.

Level of Education

About 38% of husbands had low education as compared to 70% of wives of low education, whilst 63% of husbands had high education compared to 30% of wives who also had high education.

Marriage Type

A high percentage (97.5) of husbands were monogamous and only 2.5% of them were polygamous. Compared to husbands, 80% of wives were also monogamous and only 20% were polygamous.

Occupation Type

On the issue of occupation type, 32.5% of husbands were civil/public servants and 12.5% of wives were of similar job status. 40% of husbands were in the teaching field and about the same percentage of wives were also in the teaching field (35%). For farming, 20% of husbands and 7.5% of wives engaged in it. Finally, a small percentage of husbands (7.5%) were traders and a large percentage of wives traded (45%).

Age

Husbands' ages ranged from 28 to 64 years, whilst wives' ages ranged from 25 to 56 years.

Years of Marriage

Husbands' years of marriage ranged from 2 - 28 years whilst wives' years of marriage ranged from 2- 29 years.

Number of Children

Both husbands and wives had number of children ranging from no child to six (6).

Religious Type

Ten percent (10%) of husbands and 7.5% of wives were Catholics. 70% of husbands and 60% of wives were Protestants. 17.5% of husbands and 22.5% of wives were Pentecostal/Spiritual. 2.5% of husbands and no wives were of the Islamic faith. And 10% of wives did not indicate their religious backgrounds.

4.8 Hypotheses

Hypothesis One

This hypothesis predicted that married men and women will show high marital distress score on the Marital Happiness Scale. Table 2 below shows data on the levels of marital distress from both husbands and wives.

Table 2: Marital Distress Levels for Husbands and Wives.

	Husbands			wives		Total	Percentage
	Score	Number	Percentage	Number	Percentage		
Distress Level	33-82	20	50	11	27.5	31	38.75
	83-132	20	50	29	72.5	49	61.25
	Total	40	100	40	100	80	100

Table 2 above shows that out of a sample size of 40 distressed husbands, 20 representing 50% fell in the low distress level, and 20 (50%) fell in the high distress level. Unlike the husbands, 11 wives (27.5%) have low distress while 29 (72.5%) have high distress. In aggregate however, 49 husbands and wives who represent 61.5% have high distress and 31 representing 38.75% have low distress levels. The hypothesis is supported in the case of the wives but not for the husbands.

Hypothesis Two

It was hypothesized that wives would report high marital distress than husbands. It states, “There is significant difference in the level of distress between wives and husbands.” This hypothesis was tested using an independent t-Test. Results are summarized in Table 3.

Table 3: T-Test showing mean comparison of husbands and wives on Marital Distress

Marital Distress		
Variable	Husbands (n = 40)	Wives (n = 40)
Mean	82.6	92.6
SD	19.2	19.4
Mean Difference	-9.8	
One-tail significance	P = 0.013 < 0.05	Significant

Table 3 above shows that husbands and wives differed significantly on marital distress ($P = 0.013 < 0.05$). Wives were more distressed ($m = 92.4$; $sd = 19.4$) than husbands ($m = 82.6$; $sd = 19.2$). This way, the hypothesis that wives would experience greater distress than husbands was supported.

Table 4: Pearson’s correlation between Marital Distress and Assertiveness.

Variables	Marital Distress: Husbands	Assertiveness: Husbands	Marital Distress: Wives
Assertiveness:Husbands	$r = 0.385$		
Marital Distress: Wives	$r = -0.150$	0.040	
Assertiveness: Wives	-0.150	-0.160	0.324

Hypothesis three

Hypothesis 3 predicted that there would be negative correlation between assertiveness and marital distress of husbands and wives. Pearson's correlation was employed to test for this hypothesis and the results are summarized in Table 4. The result indicates that the correlation between assertiveness and marital distress of husbands is positive ($r= 0.385$); that the correlation between marital distress and assertiveness of wives is also positive ($r= 0.324$). This finding is contrary to the researcher's prediction that there would be a negative correlation. It is also observed that the correlation between husbands' assertiveness and wives' marital distress is positive ($r= 0.040$).

Hypothesis four

There is significant difference between husbands and wives in their assertiveness: wives would report lower assertiveness than husbands. Independent t-Test was used to test this hypothesis. The result is presented in Table 5.

Table 5: T-Test showing mean comparison of husbands and wives on Assertiveness

	Assertiveness	
Variables	Husbands (n = 40)	Wives (n = 40)
Mean	62.0	64.4
SD	16.2	15.6
Mean Difference	2.4	
One-Tail Significance	$p(0.74) > 0.05$	Not Significant

The prediction that husbands' assertiveness would be significantly higher than wives' was not upheld by the results. Results indicate in Table 5 above that wives do not differ from

husbands in assertiveness ($p=0.7 > 0.05$), although wives appear to be slightly more assertive ($m = 64.4$; $sd = 15.6$) than husbands ($m = 62$; $sd = 16.2$).

Discussion of Result

This study set out to answer the following research questions: what are the levels of marital distress on the measuring instrument? Is there any difference in the assertiveness of husbands and wives? Finally, who are highly distressed: husbands or wives? This discussion considers the degree to which the results of the study answer the above questions.

Marital Distress Level of Husbands and Wives.

The first hypothesis stated that there is significant difference in score of persons who report marital distress using the marital happiness scale. The results did not support the case for husbands. But it did for wives. Equal numbers of husbands reported low and high distress. Unlike the husbands, a few number of wives (11) (27.5%) had low distress while the majority (29) (72.5%) had high distress. This could mean that either the instrument used did not measure what it was supposed to measure in husbands or the husbands did not report their distressed conditions accurately. Or, it could be that husbands were not as distressed as they said. But for wives, the discrimination was very clearly in favour of the hypothesis. It is possible that the wives did understand the items and reported their conditions accurately. This result suggests that wives in this population are highly distressed in their marriages. And this is to say that there are relatively more wives testing distressed on the marital happiness scale than husbands in the population studied. In aggregate however, 61.3% representing relatively more married men and 38.8% of women who report distress test distress on the research instrument than those who test low distress. Hypothesis two states that wives would report higher marital distress than

husbands. This was confirmed. Wives were significantly more distressed than husbands. This could be accounted for by the fact that even in a distressed relationship with a husband, a wife in Ghana will strive to keep the home from disintegrating or stay for the sake of the children, or for religious reasons (Sabini, 1992), or stay because of pressures from family members or society; or still stay hoping that something would eventually happen which would change the bad situation (Safo, 1997). All or most of these and other reasons keep wives in distressed relationships where they suffer more than their husbands who although distressed too, might have other outlets for their distress. Some of these outlets may be having girlfriends, staying away from home for long period sheer pretence as if they are alright. Some may resort to drinking and use of other drugs to alleviate their distress.

Another possible reason for this finding is that in our society, women are noted for reporting their emotions more frankly than men. And this has appeared here in reporting their distress more than the husbands. This is in consonance with Adei's (1991) statement that 'men are not expected to display emotions and vulnerability. These are feminine characteristics'.

Marital Distress and Assertiveness

Hypothesis three predicted that there would be a negative correlation between assertiveness and marital distress of husbands and wives. Findings rather indicate that the relationship is positive. For both husbands and wives, as levels of assertiveness increase, there is a corresponding increase in their marital distress level.

It is difficult to explain why this trend exists in the relationship between assertiveness and marital distress; it is however possible that as Ghanaians, especially women, become increasingly aware of their rights and responsibilities as a result of women's movement

activities, and informal and non-formal educational programmes that seek to emancipate women, most of them are rubbing shoulders with their husbands. This way, they become more assertive, stand up for their rights and are able to provide for themselves, their husbands and children. They buy estates, hold business enterprises and command money. As their level of assertiveness is raised this way, they no longer 'submit' to their husbands. This is threatening to the husbands who find all means to make the wife to 'submit'. This disturbs the equilibrium once enjoyed in traditional marriage where only the husband was seen as the head and breadwinner. According to Atkinson and Huston (1984), 'we are now changing from an agrarian society to a primarily urban society. The place of the woman in society is changing. Most married women now work outside the home, which provides women with a source of income independent of their husbands'. Thus both husbands and wives become distressed in the home as a result of trying to prove who has economic (money), political (decision-making), social (deciding relationship networks) and spiritual power or leadership. According to Alsdurf & Alsdurf (1990), male abusers are often suspicious and jealous, suffer from low self-esteem and need to assert themselves.

The researcher's informal interactions and therapy sessions with some of the distressed husbands and wives confirm the above. Most distressed husbands claim that their wives go out or travel without information and do not return in time to cook or wash clothing as they used to do. Most wives in group therapy claimed these reactions were in response to their husbands' unfaithfulness and lack of care for them and their children; these make the reactions from both husbands and wives cyclical, thus engendering strife and distress. These probably explain why as assertiveness increases in the husbands and wives, their distress levels also increase. It was suggested that assertiveness is a multidimensional concept and it seems appropriate to assess

precisely which aspects of assertiveness cause difficulty and distress in relationship between husbands and wives (Furnham & Henderson, 1981). It is likely some assertive behaviour can cause distress in relationships. This is why Alberti & Emmons (1978), cautioned that even though assertive training for one spouse can strengthen the marital relationships, nevertheless the significant behaviour change in the partner can cause undesirable consequences and these need to be considered in therapy.

Comparing Husbands and Wives on Assertiveness

The objective of this study was to analyse the extent to which husbands and wives differed on assertiveness. To this end, it was hypothesised that there would exist significant differences between husbands and wives in their assertiveness. Wives assertiveness would be lower than husbands' (hypothesis 4). Results indicated that no significant differences exist in the assertiveness of husbands and wives. The mean differences, however, revealed that contrary to expectation, wives appear to be slightly more assertive than husbands. This could account for why both husbands and wives experience high distress. It can be recalled that assertiveness correlated positively with marital distress (Hypothesis 3). It can also be recalled that wives' distress was greater than husbands' (Hypothesis 2). Finally, Table 3 indicates that the correlation between husbands' assertiveness and wives' marital distress is positive ($r= 0.040$), suggesting that as husbands' assert themselves increasingly, wives' distress increases.

There are possible explanations to these findings. Women in Ghana are generally becoming aware of their roles and rights in society as a result of women's emancipation movements. These movements try to reach even rural women with the message of emancipation. Thus irrespective of their educational status, most women are gaining economic, social and political powers that make them assert themselves. The wives' assertiveness could be heightened

more than the husbands due to sudden awareness of their worth. Alberti & Emmons, (1978) proposed that developing the ability to stand up for yourself and to do things on your own initiative can reduce appreciable anxiety or tenseness in key situations and increase one's sense of worth as a person.

It is also possible as Pitcher and Meikle (1980) suggested that sex-role stereotypes accounted for their findings that women were more assertive in situations requiring expression of positive feelings and men in situations requiring expression of negative feelings, as men feel somewhat less comfortable expressing positive feelings. Even though this study did not aim at this, it is possible that wives in Ghana are assertive in areas where men are not and vice versa. Hollandsworth & Wall (1977) concluded from their own research that women have uniquely different assertiveness problems from men, with women being more assertive than men in some situations requiring assertiveness and vice versa.

Summary, Conclusions, Clinical Implications and Suggestions for Future Research

The primary purpose of this study was to find out the marital distress level of married men and women who report distress and what psychological factors may account for distress in the Ghanaian population. This study was conceived against the background of increased marital distress. So the research focused on marital distress and assertiveness.

80 married Ghanaians who reported marital distress men (40) and women (40) aged between 28-64 years (husbands) and 2-56 years (wives) responded to a questionnaire.

The researcher used correlation and t-tests to analyze the data. The main results of the study may be summarized as follows:

1. In the aggregate, more married persons in the sample experience high distress than the number that reported low distress. Thus, making the instrument used valid.
2. Wives were more distressed than husbands, and the difference is significant.
3. There is no significant positive correlation between assertiveness and marital distress of both husbands and wives, even though the correlation is positive.
4. Husbands do not differ from wives in assertiveness. But wives appear to be slightly assertive than husbands

Conclusion

To conclude, the study has shown that in terms of who experience the greatest distress in marriage relationships in Ghana, it is the wives. Some studies (Adu- Gyamfi, 1986) found (as in this present one) that women are more likely to report problems in the emotional and social domains more readily, but that sex differences may lie in differences in ability to admit and to report certain kinds of marital problems. As assertiveness skills increase in husbands and wives, their distress levels also rise. Wives' high assertiveness may be due to exposure to economic, social and political power through informal and non-formal education other than through formal schooling.

Clinical Implications of Findings and Suggestions

The findings of this research have a number of clinical implications. Unlike adults seeking psychological services in the USA for the most common presenting problem of marital dissatisfaction (Behrens, Brett, & Sanders, 1994), most Ghanaian distressed women (and men) do not look for psychological services. It is therefore suggested that psychologists be trained in

couples'/marriage/family therapy and to publicize the availability of such services for the benefit of distressed couples who seek assistance from unqualified sources and thus worsening their distressed conditions.

Another implication is that, psychological/emotional abuse rather than physical abuse/violence should be the focus of therapeutic attention now when dealing with distressed marriages. The reason is that what happens to a partner physically is as a result of what happens in the mind (thinking, attitude, feeling, etc.). When mental attitudes are changed, behaviours that lead to distress can also change.

It is suggested that clinicians help distressed married persons to learn to express positive feelings as affection, approval and giving compliments. Also, to express negative assertions involving disagreements, dissatisfaction, displeasure, anger or criticism in an appropriate manner and be helped to accept each other's assertiveness.

It is suggested that clinicians should organize periodic lecturers, symposia and seminars in schools churches, civil and public service institutions to educate married persons on marital issues to reduce the spate of distress and its consequences – divorce. When marriages are distressed, it not only disturbs the home. It interferes with work productivity and consequently affects an entire society's development. It increases the number of depression, anxiety and substance-related and psychotic disorders that result from distressed marital relationships.

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