

The comparison between motherhood depression, couples' intimacy and satisfaction in both working and non-working (housewife) mothers

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Abstract: Present study has been conducted to consider and compare the motherhood depression, marital intimacy and satisfaction in both working and non-working (housewife) mothers in Ahvaz. For this purpose, 220 people (110 working and 110 non-working mothers) among the women who referred to 4 urban medical centers located in Ahvaz were chosen and classified in form of multi-process random sampling. The Radloff's motherhood depression (CES-D) questionnaires, Intimacy Scale and Enrich's marital were applied too. To analyze the data, the descriptive statistic approaches, multivariable variance (MANOVA), Pearson correlation coefficient and multi-variable regression methods were all utilized. The significance level was determined to be $P < 0/05$. The research results showed that a significant difference exists between working and non-working (house wife) mothers at least in the terms of one of dependent variables (motherhood depression, intimacy and marital satisfaction). It was also found that and working mothers suffer from higher motherhood depression than the non-working housewives, but they had approximately the same intimacy and marital satisfaction.

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1. Introduction

Marriage and raising families whether small or big is an important change for both sexes and subject them to new behaviors. But pregnancy is only unique to women. It is an experience which seems sweet at first but women will face several complications such as psychological breakdowns afterwards. One of these widespread consequences is motherhood depression. Motherhood depression is a behavioral disorder which occurs before or after the birth. This disorder affects a mother's ability to taking care of her child. Many mothers go through this during the pregnancy or shortly after the child birth. It is a consequence of several big changes in everyone's life.

Childbirth is one of the most important changes happening in a woman's life. As the physicians say two out of each ten women are suffering from such disorder during the pregnancy period and at least one after the child bearing. A Mother's depression and her inability to recognize the child's basic needs would be a detriment to a child's well being over a long period of time. Besides it can disrupt the conjugal satisfaction between the couples. Such consequences are not limited to mother's depression. They have a negative effect on conjugal affairs as well (Touth and Plats, 2009).

Depression is one of the disorders occurring after the childbirth. 19% of women experience it somehow. Motherhood depression is very disruptive for the mother. Besides untreated motherhood depression is relevant to couples' behavioral consequences and can have dire effects on social and emotional developments in a child (Goiun and Mirey, 2007). About 10-25% of women go through this during their lifetime (Mamoun, Clavino, Nejman, Williams, Ouklajan, and Bour, 2009).

About 1 out of each 10 women suffers from depression after a year following her childbirth. The consequences can be very destructive: inability to do the routines or establishing a good sympathy with child or the father. Previous studies show that any record of depression can be a factor for the occurrence of after birth depression. Almost 50 percent of women suffer from this after their childbearing. They suffer from this through their pregnancy as well (ietz, Williams, Calajan, Nejman, Wuitlouck, and Hournbourk, 2007). After birth depression disrupts the emotional touch between a mother and a child (Talbot, 2001).

There are several risky factors contributing to this; type of child bearing operation, tensions at home, any record of depression in a person or the family, unwanted pregnancy, child's sex, first pregnancy, systematic diseases like bleeding after the childbirth,

domestic feuds, refusing to milk the baby, being celibate, infections, hospitalizing the newly born child or the mother are among them (Sharifi, Saki, Akbari, and Sharifi, 2008).

Intimacy is defined as an ability to stay in touch with the other while protecting one's self image. Such definitions are based on the individuality and manifest the fact that a person has reached such an extent of personal development that allows a friendly correspondence with him others. Intimacy can be defined as the ability to know one in the presence of the others for which self awareness and identity are very necessary. The current conceptualization of intimacy includes the degree of closeness to one's mate, sharing the values and thoughts, common chores, sexual life, knowing each other and other sorts of affections like caressing. A person enjoying a high degree of intimacy can present himself much better and can express his needs much effectively to the spouse. Conjugal satisfaction is much higher in couples who are so close to each other. They can face the problems and changes more effectively and experience a very high connubial bliss (Patrick, Sells, Giordano, and Tollerud, 2007).

Nowadays intimacy is under the focus of psychologist and marriage counselors (Bagarozzi, 2001). A study was conducted on 1160 clinic workers who were asked to classify the most important sources of feuds among the couples. They enumerated them as communications, unrealistic expectations, lack of intimacy and boredom respectively (Mazlomi, 2007).

On the other hand, conjugal bliss refers to happiness and enjoying the affairs among the couples. It means feeling ok about the marriage. Kaplan and Maddux (2002) say that a conjugal satisfaction is an individual experience which can be evaluated only by the person himself. They believe that it depends on their expectations.

Conjugal satisfaction is a general evaluation of the whole life or one's love. It can be a reflection of a person's happiness or a combination of happiness as a result of several unique factors. It can be regarded as a psychological condition which does not exist on its own. It necessitates couples' efforts. In the first years after the marriage, it is so unstable and the relationships between the couples are so risky.

It seems that there is not much done in the realm of motherhood depression, conjugal satisfaction in both working and non working wives. Studies in the realm of working and non working wives have yielded much contradictory results in a way that in some cases working mothers enjoy a very high degree of satisfaction due to their intelligence (Asiai, 2006). In some other cases due to the existence of gaps between ideal and actual roles a lower degree of satisfaction is obtained (Sharon, 1993). Working mothers also are more prone to depression due to the heavy loads of

outside jobs as well as domestic duties. They have to work in these two atmospheres; outside and inside the house. These two differ very much. Stress manifests itself in very serious disorders like anxiety, depression and instability (Hashemi, Khourshid, and Hasan, 2007).

In a study titled as the level of conjugal satisfaction and intimacy in both working and non working wives in Ardabil, it was found that there is no meaningful difference between the conjugal satisfaction and intimacy, therefore, being a working woman has no influence on the level of satisfaction and intimacy in the pregnant wives (Motevali, Azgoli, Bakhtiari, and Alavimajid, 2009).

In another study done by Navabinejad, Ferasat, and Senai (2009) to compare the source of control and conjugal satisfaction in working mothers and housewives results showed that there is a meaningful difference regarding the control source. It can be said that housewives impose more control compared to working mothers. There exists another significant difference regarding the conjugal bliss in both working mothers and housewives and housewives show a greater satisfaction. There was not much gained in other areas like age, number of children, how long they have been married and the amount of the family income. There is also another study under the tile of comparing the satisfaction level in working mothers and housewives in shahr kord by Hasanvand (2006). It showed that women's jobs had no negative effect on conjugal bliss even in traditional communities. in reverse it has increased the family welfare and satisfaction in turn.

In a research done by Aleem, Danish, Islamia, and Delhi (2008) the relation between conjugal bliss and anxiety in working mothers was examined. For this purpose, 60 women with one or more jobs in the age range of 25 – 45 were chosen based on post incidental sampling they answered to some already prepared questionnaires. Results show that stress and pressure from the job has some effects on conjugal life. Job related stress is also the main source of anxiety in women too. Their satisfaction was marred by their multiple roles. It seems that their low level of satisfaction is mostly due to their high level of anxiety. Due to the importance of variables like motherhood depression, intimacy, and conjugal satisfaction, this research tries to see if there is a meaningful difference between such variables in working mothers and housewives as well. For this purpose, several assumptions have been formed and stated here:

I. Hypothesis 1: there is a meaningful difference between working mothers and housewives regarding motherhood depression, intimacy, and conjugal bliss.

- II. Hypothesis 2: there is a difference between working mothers and housewives regarding depression.**
- III. Hypothesis 3: intimacy exists among working mothers and housewives but it may vary.**
- IV. Hypothesis 4: there is a difference among working mothers and housewives regarding the conjugal bliss.**

2. Methodology

2.1. Subjects and Sampling

The subjects in the present study include all the working mothers and housewives in Ahvaz. The population consists of 220 mothers 110 of whom are working and the rest are housewives. To choose these people a random sampling procedure was applied in several phases. 2 regions out of the existing 5 regions in Ahvaz (east and west) were randomly chosen and in the next stage 4 urban sanitary centers in these two regions (two in west and two in east out of 6 in west and 2 in the east) were randomly selected. Questionnaires were given to the mothers. 110 working mothers and 110 housewives answered these questionnaires.

2.2. Measurement Instruments

2.2.1. Depression based Questionnaire (CES – D)

The motherhood depression questionnaire is a 20 point report devised by Radloff in 1977 to measure the depression indicators in a general community. The subjects rate the level of depression they go through on a 4 point scale. They show the frequency of the expressions like " I just want to cry " and " I have difficulty concentrating on the thing I just want to do " on a scale with a range beginning from zero (rarely) and ends with three (most of the time). The four items which are positively stated are rated in reverse. To calculate the sum of the scores, the answers are added up. In one instance the total was 20 which were inverted by another 4 items and then it was stated as being positive. The possible range is from zero to sixty. Higher scores manifest higher depression. 16 or more clinically indicates a meaningful level of depression (Radloff, 1977).

2.2.2. Motherhood Depression Questionnaire

Among other scales which measure the whole depression signs, it is very famous since it has an individual factor in a very high level. Findings from different studies have shown vividly that this scale has sufficient proof and validity. Psychometric studies have yielded concurrent and predictive validity

applying this scale. This scale is also an effective factor among different cultural groups (Pretorius, 1991). The internal correlation for this questionnaire in the previous studies has a range of 0.84 – 0.90 (Radloff, 1977). The terminal recursive coefficient after 6 months was determined to be 0.54 (Radloff, 1977). Alpha coefficient from this questionnaire for the whole sample and the parts indicated a nice ending which was respectively 0.93, 0.93, and 0.91. This questionnaire has been translated in Iran by Zaranejad (2008) and validated by Kouchaki (2009). Its final coefficient was calculated by Kerounbach to be 0.91 which indicated a proper ending. For a construct validity of it, its score was compared using Beck Depression Scale as a pre established questionnaire. It was determined that a meaningful relation exists $(P=0/90)$ and r . In this study, the final coefficients of depression questionnaire were calculated using Karounbach Alpha Model to be 0.91 and 0.91 respectively which indicated a proper final coefficient.

2.3. Intimacy Scale

This scale has 17 questions and can be used to calculate the affection and intimacy by Walker and Thompson (1983). This scale is only a part of another bigger instrument which includes several aspects of affection but it can be used on its own to calculate the intimacy between the couples. The ratings is based on Lickert in a range of 1 (never) to 7 (always). Higher scores show more intimacy. Walker and Thompson (1983, as narrated by Senai Zaker, 2000), determined the final coefficient of this questionnaire to be somewhere between 0.91 – 0.97. Face and content validity waer also have been used to check its value. For this purpose, some psychology and counseling professors examined this questionnaire and expressed that it can calculate the intimacy among the couples (Senai, 2000). Etemadi (2005) calculated the final coefficient of this scale using Karonbach Alpha Model to be 0.96. in the present study, Karonbach Alpha Model was also used to determine the final coefficient of this scale. It was determined to be 0.96.

2.4. Enrich's Questionnaire of Conjugal Satisfaction

It's a 125 point instrument devised by Olson, Fournier, and Druckman (1992, as narrated by Senai, 2000). This questionnaire is used to evaluate the potential problematic areas through identifying the weaknesses found in conjugal affairs. It consists of 14 minor scales. It has both general scores and it can also give independent scores in its lower levels. The rating is done from 0 (totally disagree), 1(disagree), 2 (no idea), 3 (agree), and 4 (totally agree). There is also a short form consisting of 47 questions. Using

Karounbach's Alpha Model, the final coefficient is calculated to be 0.96.

3. Research Findings

In this part, the descriptive results including average score, standard deviation, the mode found in the variables are all brought. Table 1 shows the average, standard deviation, the highest and the lowest gained scores in the motherhood depression, intimacy, and conjugal bliss variables in both working mothers and housewives.

As it is shown in table 1, the mean and the standard deviation scores related to motherhood depression variable are 29.48 and 15.13 for working mothers and 24.51 and 10.59 for the housewives. In the intimacy variable for the working mothers it is 84.87 and 24.51, and for housewives it happened to be 86.10 and 21.48. Regarding the conjugal bliss the amounts are 141.30 and 26.29 for working mothers and for housewives it is 143.05, and 19.32.

To check the hypothesis no 1, a multiple variable – regression (or MANOVA) was used. The findings are in table no 2.

It is shown in table no 2, the p levels show that there is a meaningful difference regarding working mothers and housewives in at least one of the dependent variables (motherhood depression, intimacy, and conjugal bliss).the amounts are $F = 3.50$ and $P = 0.016$. So the first hypothesis can be sustained. To know the difference, MANOVA is done as seen in table 3.

In table no 3. There is a meaningful difference between working mothers and housewives regarding the motherhood depression. The amounts are $F = 7.97$ and $P = 0.005$. So the second assumption can be safely sustained. In other words, working mothers are more depressed than the housewives as the high average scores are manifesting to us. There is no meaningful difference regarding the intimacy variable in both working mothers and housewives ($f = 0.271$, $P = 0.05$). As a result the assumption no 3 is totally rejected. In other words, the both groups enjoy a same level of intimacy as the average scores are indicating. There is no meaningful difference regarding the conjugal bliss either ($f = 0.318$ and $p = 0.05$). The hypothesis no 4 is rejected. Regarding the mean scores, both groups enjoy a same level of conjugal satisfaction.

4. Conclusion and Discussion

As it is obvious in table no 2, the meaningful levels indicate that there is a meaningful variation between the two groups regarding the dependent variables (motherhood depression, intimacy, conjugal bliss). Hypothesis 1 is sustained ($F = 3.50$, $P = 0.016$).

As it is shown in table no 3, the meaningful levels indicate that there is a meaningful variation

between the two groups regarding the motherhood depression variable ($F = 3.50$, $P = 0.016$). Assumption no 2 can be sustained. These findings are in line with those of Motevali, et al (2009) and also Ferasat and etyal (2009). But they contradict those of Delhi and Alem Danish (2008).

Pregnancy results in several changes in sexual and emotional affairs between the couples. Nowadays due to the development of social activities, women's jobs, higher education, reliance on income to meet the family needs, most of the pregnant women have to continue their jobs. Since they have to go on with their own conjugal life and concurrently the behavioral changes and needs at job are somehow fixed, some problems like depression, stress and anxiety are caused.

Regarding table no 3. There exists no meaningful difference between the working mothers and housewives in terms of intimacy ($F = 0.271$, $P = 0.05$). Hypothesis no 3 is rejected. In other words, the mean scores show that the both groups enjoy a same level of intimacy. The findings are in line with those of Motevali, et al (2009) but at the same time are contradicting those of Hashemi, and etal (2007).

The general conceptualization of intimacy refers to closeness, sharing the values, ideas, common activities, sexual life, knowing each other and other types of emotional behaviors like touching and caressing. In fact an individual should reach the phase to establish contacts with the others. Intimacy is the ability to express you in the presence of the others. Self awareness, identity and a person's capability are really necessary for that. So an important factor in a common life is to have intimacy and a proper emotional atmosphere.

Since the subjects included in this study are those working mothers and housewives who are in their pregnancy period or have one child, it can be concluded that the conditions play a really significant role regarding the level of intimacy found in their lives. Having a child is another important incident in everyone's life too. It is nice to be a mother and a father but it is really burdensome. Most people think that having a child influence the conjugal affairs and faded them away since they can not concentrate on each other and they have to share their thoughts and emotions. It is wrong. Pregnancy and the period after that can be very significant since it makes life more interesting by establishing more contacts and intimacy. Intimacy keeps them refreshed. Following the changes as the result of pregnancy, there are of course some changes in their expectations too. Since the roles are changed, the traditional and one way roles are put aside and they yearn for a more compromise and intimacy. The women's understanding of intimacy is really under the influence of their awareness of the equality concept. Women are more concerned about the equality

compared to the men. Most men prefer to have more intimate affairs and they are more sensitive about the way of conjugal life. Women are more prone to the stress and the pressures of life if compared to men.

When a husband and a wife have a child, they can maintain the intimacy and even increase that using the communication skills, whether a mother is working or not. It can be concluded that job can not predict the intimacy safe enough. Intimacy necessitates a two way understanding, communication skills, similarities, the ability to solve the feuds and also the ability to know one's mate.

There is no meaningful difference between these two groups regarding the conjugal satisfaction ($p = 0.05$, $f = 0.318$). So the hypothesis can be sustained. In other words, they both enjoy a close level of intimacy regarding the mean scores. These findings are in agreement with those of Motevali, etal (2009). But they are not in line with those of Ferasat, etal (2009), hasanvand (2006) and Alem Danish, and Delhi (2008).

It can be said that being a housewife or a working mother can have no effect on the level of conjugal bliss. Job can be effective in promoting the women's abilities to express them, but it sure can not be significant in conjugal bliss. There is no one way

relation in the family system. The mutual relation between the members, roles, responsibilities, and expectations are very significant. Working mothers are just like their spouses at work but after returning home, they are expected to fulfill their motherly duties which in turn are very demanding. Having an active role in the society and communicating with the people are the factors that help them overcome their loneliness and solitude, but concurrently make them express themselves, make decisions, and fulfill a variety of roles in specific occasions. Besides, the variety of familial and social activities causes tensions. This study only regards the mothers in Ahvaz and it follows a multiple level random sampling. Generalizing its findings to other communities should be done very cautiously. The stress caused by the spying into the families' lives was one of the major limitations that made the researchers be very conservative. There is also room for other possible factors which might have some influences on the quality of a conjugal life. It is also recommended that researchers investigate the depression in wanted and gratuitous pregnancies. Conducting a study on mothers with different numbers of children is also suggested.

Table 1. Average, Standard Deviation, the Maximum and Minimum Scores in the motherhood depression, intimacy, and conjugal bliss variables in both working mothers and housewives

<i>Number</i>	<i>Max</i>	<i>Min</i>	<i>SD</i>	<i>Mean</i>	<i>Statistical Indexes</i>	<i>Variables</i>
					<i>Questionnaires</i>	
110	51	0	15.13	29.48	<i>Working Mothers</i>	Motherhood depression
110	56	3	10.59	24.51	<i>Housewives</i>	
110	118	24	24.73	84.47	<i>Working Mothers</i>	Intimacy
110	119	37	21.48	86.10	<i>Housewives</i>	
110	201	81	26.29	141.30	<i>Working Mothers</i>	Conjugal Bliss
110	198	111	19.32	143.05	<i>Housewives</i>	

Table 2. To check the hypothesis no 1, a multiple variable – regression (or MANOVA) was used. The findings are in table no 2. Questionnaire

<i>Meaningful (p) level</i>	<i>F</i>	<i>df /</i>	<i>df</i>	<i>Amount</i>	
0.016	3.50	216	3	0.044	test
0.016	3.50	216	3	0.954	Wikels test
0.016	3.50	216	3	0.049	Hetling Test
0.016	3.50	216	3	0.049	Roy greatest root score

Table 3. The results from Single variable MANOVA done on the motherhood depression, intimacy, and conjugal satisfaction variables in both working mothers and housewives

<i>p</i>	<i>F</i>	<i>Average of the square roots</i>	<i>df</i>	<i>Sum of the squared roots</i>	<i>Variables</i>
0.005	0.97	1360.04	1	1360.04	motherhood depression
0.603	0.271	145.64	1	145.64	intimacy
0.573	0.318	169.31	1	169.31	Conjugal bliss

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