

Perception of Marital Conflict Effects on Emotional Maladjustment Behavior In Children

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Abstract: Marital conflicts usually occurs , if not constructively resolved they may affecting not only couple's satisfaction but also children's security. **Aim:** to determine the perception of marital conflict effects on emotional maladjustment behavior in children. **Methods:** a descriptive cross-sectional design was used on a sample composed of 216 children aged 9-14 years old ,data collected using two tools, children's perception of interparental conflict scale and emotional maladjustment behavior questionnaire. **Results:** More than half of studied children (54.2%) were females, 49.1% of them were aged between 9 to less than 11 years old, 41.8% of the studied children had true perception of the presence of marital conflict among their parents . Also finding reveals that 26% of the studied children were reported some times to had emotional maladjustment symptoms. finally, there are statistical significant relation between children perception of marital conflict and all symptoms of emotional maladjustment behavior. **Conclusion:** it can be concluded that, children had different perceptions of marital conflict. Also there were statistical significant relations between children perception of marital conflict and symptoms of emotional maladjustment behavior. **Recommendation:** children should be screened on the emotional states and be given the appropriate counseling if their scores on the instruments are high, and they should have rational emotional therapy.

Keywords: Conflict, Child behavior

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I. Introduction

Family is one of the most vital indicator for child development. The notion that the parents' relationship is pivotal to children's psychosocial well-being (**Zemp et al , 2016**). In family life marital conflicts exists and occurs normally, but intense, frequent , not well-managed and unresolved martial conflicts are often very stressful for children (**Basista , 2016**). Marital conflict is perceived as a disagreeable event that sets in motion a sequence of processes whereby children's short-run distress responses to ulterior family conflicts ultimately increase their psychological health issues by increasing to have an effect on their functioning in settings outside the context of the family(**Davies et al , 2017**).

Marital conflict is divided into two types: constructive and destructive. Constructive marital conflict includes successful conflict resolution, explanations of resolved and unresolved conflict . Exposure to constructive conflict produce positive emotional reactions, as happiness, safety, and security (**Hosokawa& Katsur , 2017**) ,also helps children to develop problem solving, coping, and effective communication skills (**McCoy et al , 2013**) .

In contrast, destructive marital conflict includes behaviors, as violence, nonverbal or verbal aggression, withdrawal throughout conflict, aggression against objects, and threats to family bonding. Exposure to destructive marital conflict triggers children's anger, anxiety, and unhappiness (**McCoy et al , 2013**). Destructive conflict might increase the chance for developing adjustment issues as internalizing and externalizing behaviors, as a result of an absence of coping skills to deal, or the utilization of learned negative behavior for resolution issues (**Buehler et al , 2007**).In accordance with this, the traditional belief of marital conflict as a major predictor of children's maladjustment is exceeded by a more recent, complex understanding; interparental conflict may be more significant to children's well-being than the actual parental split-up (**Zemp et al., 2016**).

Despite the differential effects of marital conflict on children's development, studies examining the various kinds of conflict and their biological process implications area unit lacking (**Hosokawa& Katsura ,**

2017). Moreover, there has been a lot of interest in understanding the mechanisms by which marital conflict may be linked to poor child adjustment, with appreciation for children as active processors (Cummings et al ,2013).

Significant of the study:

The public health significance of the impact of marital conflict on children is underscored by estimates indicating that children from homes characterized by prevalence of marital conflict are five to seven times more likely to expertise vital psychological issues relative to children within the general population. Therefore, the analysis of the implications of marital conflicts on the child is basic importance(Sajjad et al ,2017).

II. Material and methods

Aim of the study to:

Determine perception of marital conflict effects on emotional maladjustment behavior in children .

Research Question:

What is the perception of marital conflict effects on emotional maladjustment behavior in children?

Subjects and Methods

Research design:

A descriptive cross-sectional research design was used within the current study.

Subject:

The sample size was determined by victimization the subsequent equation (Dobson, 1984):

$$\text{Sample size (n)} = \frac{Z^2}{\Delta^2} P(100 - P)$$

Z : The prevalence of school children who have emotional problems = 13.8% (Ginige et al , 2014).
 Δ : a percentile of ordinary distribution determined by 95% confidence level = 1.96
 Δ : The width of the confidence interval = 5.

$$\text{Sample size (n)} = \frac{1.962^2}{5^2} 13.8 \times (100 - 13.8) = 196 \text{ Children}$$

The calculated sample size was 196 children. Due to the expected non-participating rate (10%), the final sample size was 216 children.

Setting:

The present study was carried out at 6 elementary schools representing the six districts of Port-Said governorate, From each district, 1elementary school was chosen randomly. The schools were affiliated to the Ministry of Education and namely El-Manakh, kasem Ameen, El-Yaremok, Om El-Moemenen, El-Zohor and Senia.

Tools of data collection:

Two tools were used for data collection:

Tool I:

1- Children's Perception of Interparental Conflict Scale(CPIC) was developed by Grych and Fincham (1992) and was translated by researcher and divided into two parts:

Part I

-It includes socio demographic information such as (Child's age, sex, mother's education, father's education , marital status , housing ,etc...).

Part II

CPLIC was consists of 51 items representing the marital conflict, overall analysis of conflict, harmony, and marital relationship. The CPIC organized into 9 subscales: Frequency (6 items), Intensity(7 items), Resolution(6items), Threat (6items), Coping Efficacy(6items),Content(5items), Self-Blame(5items), Triangulation(5 items), and Stability(5 items).

Depending on the frequency of the items, children perception could be rated as follow: true(2), sort of true(1), false(0). Each subscale has a score. The scores of the statements of each subscale were summed-up, converted into percent score and the total divided by the number of the items, giving a mean score for each

subscale of marital conflict. The subscales related to each area were considered great conflict if the percent score was 60% or more and low if less than 60%. The total score is obtained by summation of the scores of each statement, so it ranged between zero to 102.

Tool II: Emotional maladjustment behavior questionnaire

Abdel-Ghani , 2009 was developed the emotional maladjustment questionnaire in Arabic. It is composed of 4 sub items and 62 questions in total. organized as the following :depression(16 questions), anxiety(15 questions), fear(16 questions) and shyness(15 questions). The reliability of the total items was Cronbach's $\alpha = .92$.

Scoring is depending on the frequency of the problem, children behavior could be rated as follow: (0)never, (1)rare...(2)sometimes... (3) much... (4)always..... The scores of the statements of each subscale were summed-up, converted into percent score and the total divided by the number of the items, giving a mean score for each subscale of behavior problems. The subscales related to each area was considered common if the percent score was 60% or more and un common if less than 60%. The total score is obtained by summation of the scores of each statement ranged from 0-248

Content Validity for Tool (I):

It was ascertained by a Jury consisting of five consultants within the the field of psychiatric pediatric nursing, to create certain that the measuring instrument looks as though it is measuring what purports to measure and check its translation. Changes were done according to the consultants opinions.

Reliability of Tool (I):

Cronbach alpha coefficient was accustomed assess the reliability of tool (I) through their internal consistency. This phase was carried out in a period of one month. It was held on 15 children not included in the study subjects. The reliability of the total items was Cronbach's $\alpha = .86$.

Pilot study:

A pilot study was carried out on 10% of the whole sample (15children) to check the feasibility of the study, applicability of tools, content validity. The modifications were done accordingly. Subjects who shared within the pilot study not included.

Data collection procedure:

Interventions

The purpose of the study were explained to the directors of the schools and children , then children oral consent was taken, they were informed about their right to refuse participation in the study and that their answers will not be taken against them, it will be used just for the purpose of the study. The study was conducted using the interview technique that was conducted on an individual basis. The researcher started to collect data for four days per week. A number of 1-5 child were interviewed per day. Each interview lasted for 25-35minutes, depending on the response of the interviewee, the process of data collection took a period of three months from end of January 2018 to end of march 2018.

Statistical analysis

The obtained data were analyzed performing multivariate analysis, independent samples t-test, Pearson correlation coefficient using SPSS version 16.0. Data were presented as mean \pm standard deviation and n% for the continuous and categorical variables, respectively. P-values less than 0.05 were considered statistically significant.

Ethical consideration:

The purpose of the study was explained to all children and their parents. Data confidentiality of children privacy and their anonymity was assured.

III. Results

Table (1) demonstrate the socio-demographic characteristics of children in the study. More than half of studied children (54.2%) were females, 49.1% of them were aged between 9 to less than 11 years old, and 59.9% of them have 3-4 sibling number.

In relation to birth order, more than two third of studied children (69.9%) were in first and second birth order. While regarding to housing place, majority of studied children (92.1%) were lives with both parents.

Personal characteristics of studied children' parents' is shown in **table (2)**. The table reveals that , 62% and 72.2 % of the studied children' father' and mothers level of education is highly educated respectively and 89.4 of them were married. Regarding working status, 97.2% of studied children fathers are working while 60.2% of studied children fathers are not working.

Perception of marital conflict as perceived by studied children is shown in **table (3)**. The table reveals that, 41.8% of the studied children had true perception of the presence of marital conflict among their parents. As for specific perception, less than two third of the studied children (56.9%) had perceived threat from marital conflict among their parent , also 45.8% and 45.4% of studied children reported that their parent had coping efficacy and resolution abilities respectively during and after marital conflict. In addition, 40.7% of studied children, reported that their parents had triangulation , followed by 37.9% of studied children reported frequent marital conflict among their parents . While , 37 % of studied children sometimes had tendency to feel blamed regarding conflict between parents. On the other hand, nearly half of the children was reported marital conflict to had no perception of stability , content and intensity as perceived by the children (45.4% , 42.6% and 37.5%respectively).

Prevalence of child emotional maladjustment behavior among studied children is shown in **table (4)**. The table reveals that, 26% of the studied children were reported some times to had emotional maladjustment symptoms. As for specific symptoms, about more than one third of the study subjects(32.9%) had tendency sometimes to express depression symptoms , meanwhile anxiety symptoms was always reported by 23.1% of studied children . On the other hand ,shyness and fears symptoms were reported to be never felt by the studied children as 29.2%and 28.2%respectively.

Table (5): Shows the relation between perception of marital conflict and emotional maladjustment behavior of the studied children. It reveals that, there are statistical significant relation between perception of marital conflict and all symptoms of emotional maladjustment behavior (Depression, Anxiety, Fears and shyness).

Table (1): Distribution of studied children as regard their socio-demographic characteristics (no=216)

Variables	NO	%
Gender		
Male	99	45.8
Female	117	54.2
Age		
9-less than 11	106	49.1
11-less than 13	71	32.8
More than 13	39	18.1
Sibling Number		
none	21	9.7
1-2	72	33.3
3-4	110	50.9
More than 4	13	6.1
Rank		
First and second	151	69.9
Third and fourth	55	25.5
More than fourth	10	4.6
Housing		
Parents	199	92.1
Mother only	13	6.0
Others	4	1.9

Table (2): Personal characteristics of studied children' parents' sample (no=216)

Variables	NO	%
Fathers level of education		
Higher education	134	62.0
Secondary	55	25.5
Primary	24	11.1
Illiterate	3	1.4
Mothers' level of education		
Higher education	156	72.2
Secondary	35	6.2
Primary	22	10.2
Illiterate	3	1.4
Marital Status		
With each others	193	89.4
Divorce	13	6.0
One Dead	10	4.6

Father Work	work	210	97.2
	Not	6	2.8
Mother Work	work	86	39.8
	not	130	60.2

Table (3): Frequency & percent of perception of marital conflict as perceived by studied children (no=216)

Marital conflict items	No		Sort of true		True	
	No	%	No	%	No	%
Frequency	58	26.9	76	35.2	82	37.9
Intensity	81	37.5	66	30.6	69	31.9
Resolution	49	22.7	69	31.9	98	45.4
Content	92	42.6	71	32.9	53	24.5
Perceived threat	43	20	50	23.1	123	56.9
Coping efficacy	47	21.8	70	32.4	99	45.8
Self-blame	70	32.4	80	37	66	30.6
Triangulation	67	31.1	61	28.2	88	40.7
Stability	98	45.4	62	28.7	56	25.9
Total	63	29.1	63	29.1	90	41.8

Table (4): Frequency & percent of child emotional maladjustment Behavior among studied children(no=216)

Child emotional maladjustment items	Never		Rare		Sometimes		Much		Always	
	No	%	No	%	No	%	No	%	No	%
Depression	35	16.2	41	18.9	71	32.9	22	10.2	47	21.8
Anxiety	50	23.1	38	17.6	47	21.8	32	14.8	49	22.7
Fears	61	28.2	45	20.8	49	22.7	19	8.8	42	19.5
Shyness	63	29.2	47	21.8	48	22.2	15	6.9	43	19.9
Total	53	24.5	43	17.4	54	26	22	10.1	45	22

Table (5): Relation between the perception of marital conflict and child emotional maladjustment of children.

Variables	Perception of Marital conflict		Pearson correlation	
	Mean	SD	r	p-value
Depression	30.63	10.85	0.17	0.001*
Anxiety	27.86	15.09	0.28	0.000*
Fears	27.39	13.68	0.23	0.001*
Shyness	25.13	12.61	0.25	0.000*

r: Pearson correlation coefficient

*significant at P≤0.05

IV. Discussion

Depending on the conflict characteristics both constructive and destructive effects of the marital couple, children and the whole family can be found (**Cummings et al, 2013**). Therefore, the present study aimed to determine the perception of marital conflict effects on emotional maladjustment behavior in children.

According to the present study, The finding reveals that 41.8% of the studied children had true perception of presence of marital conflict among their parents . This finding was in agreement with **Moon , 2011** who found that 40% of children had true perception of presence of marital conflict. While, **Schermerhorn et al (2015)** reported lower level of marital conflict perceptions of children with mean scores of 18.70 (SD = 5.01).

Four factors can influence the way children understand and reply to marital conflict, specifically gender variations, , temperament, family characteristics, and also the family's emotional climate (**Fosco & Grych, 2007**). As for gender variations, **Basista , 2016**, mentioned that girls are more sensitive to marital conflicts than boys. In the line with that explanation, More than half of studied children were females in the present study, and thus may be a cause of high perception in the current study.

As for specific perception, less than two third of the studied children (56.9%) had perceived threat from marital conflict among their parent, this may be due to this might ensue to it the expectations concerning their parents' threat behavior were due to their parents conflict levels (**Blossom et al, 2013**). In addition ,there are various reasons a child may feel threatened by marital conflict, such as fear that they will be drawn into the

conflict, that the conflict may end with separation or divorce, and that a disagreement could escalate into aggression between their parents (**Portnoy, 2017**).

On the positive site , less than half of the studied children reported that their parent had coping efficacy and resolution abilities during and after marital conflict. This may be related to that majority of studied children fathers and mothers level of education were high university and this may chief cause to develop their human relation coping abilities to deal with any conflict.

In addition, 40.7% of studied children, reported that their parents had triangulation. This finding was in the same line with the study of **Wang et al 2017**, whom study the triangulation processes experienced by children in contemporary China , and found that about less than half of studied children experienced triangulation from marital conflicts. This may be related to that 37.9% of studied children in the current study also reported frequent marital conflict among their parents and thus put the child in stress of any parental side the child will take place.

In the light of the present study , finding showed that more than one third of studied children sometimes had tendency to feel blamed regarding conflict between parents. This finding was in the same line with, study of **Fosco & Grych (2009)** whom found that ,children in families of high levels marital conflict showed higher self-blame for this conflict. Also, the study of **Mari et al (2014)** which pointed out that children had a tendency to feel blamed for their parents' conflict.

On the other hand, nearly half of the children was reported marital conflict to had no perception of stability , content and intensity as perceived by the children thus may be due to that about half of studied children in the current study were aged between 9 to less than 11 years old, and these children may young enough to concentrate on stability , content and intensity of the conflict between their parents.

Chronic and acute stress could place children and parents at exaggerated risk of experiencing relational and psychological issues(**Masarik & Conger, 2017**). In the light of this , Prevalence of child emotional maladjustment is shown the current study, finding reveals that 26% of the studied children were reported some times to had emotional maladjustment symptoms. **Masarik and Conger, (2017)** mentioned that marital conflict are lead to adjustment problems in children . Also , the result of present study in step with the emotional security hypothesis that there are variations within the emotions and within the intervening behavior, looking on how destructive or constructive the marital conflict behavior is, because constructive conflict behaviors raise the emotional security of children (**Davies et al., 2013**).

As for specific symptoms finding of present study showed that, about more than one quadrant of the study subjects had tendency to had anxiety and depression. There square measure many models that conceive to justify that factors that will cause and/or maintain child anxiety. As an example, **Carr (2016)** projected a model regarding factors in anxiety issues in childhood. in step with this model, factors regarding anxiety are often parent-child interactions, married conflict , and life stresses in childhood (**Carr, 2016**). **Colonnese et al. (2011) ;Drake & Ginsburg,(2012)**, found a moderate relation marital conflict and child anxiety and depression and thus is strongly supported the finding of the current study that there are statistical significant relation between perception of marital conflict and depression and anxiety.

Meanwhile, On the other hand ,shyness and fears symptoms were reported to be never felt by the studied children as 29.2%and 28.2%respectively. This may be due to finding of the current study that less than half of the studied children reported that their parent had coping efficacy and resolution abilities during and after marital conflict and this may be cause children to feel no fear to behave. This also supported by **Davies et al.,(2013)**, Whom mentioned that constructive conflict behaviors increase the emotional security of children.

Finally , there were statistical significant relations between children perception of marital conflict and all symptoms of emotional maladjustment behavior. This was in the same side with the study that have shown that escalating exposure to marital conflict over time predicts concurrent increases in children's negative emotional reactivity to conflict (**Goeke-Morey et al , 2013**). Additionally, the study of ,**Fosco and Feinberg (2014)** which found that perceptions of threat undermined children's self-efficacy, which consequently increased emotional maladjustment. Lastly, the study of **Cummings & Miller-Graff,(2015)** found associations between marital conflict and a wide array of maladjustment issues characterized by school, internalizing, and externalizing problems .

V. Conclusion

Based on the results of this study, it can be concluded that. It was proved that children had different perceptions of marital conflict. Also the present study reveals that there were statistical significant relations between perception of marital conflict and all symptoms of emotional maladjustment behavior.

VI. Recommendations

- All children should be screened on the emotional states and be given the appropriate counseling if their scores on the instruments are high, and they should have rational emotional therapy.
- Intervening early, with young adults, newly-weds or those embarking on a long-run relationship as well as couples going through the transition to parenthood, provides a chance to assist couples before issues with conflict arise.
- The school nurse pay more attention regarding any emotional maladjustment behavior to children stress and maintain children well being.

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