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Marital Adjustment of Women with Disabilities

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Abstract

Marriage is the most sacred bond between two people. Transitioning to marital life requires adjustment to several personal and social domains especially for a woman. Marital adjustment is strongly associated with well-being, life satisfaction, quality of life and better physical and mental health of women. Disability may hamper marital adjustment by creating multiple barriers to adjustment process. On account of intersectional marginalisation, women with disabilities face unique physical, emotional, and psychosocial challenges which affects their marital life. The present study aimed to assess the marital adjustment of disabled married women by comparing it with non-disabled women. A cross-sectional design was employed and 90 married women around the age of 20 to 35 years, comprising 30 disabled women and 60 non-disabled were selected through purposive and random sampling respectively. Marital adjustment was examined using Marital Adjustment Questionnaire (MAQ) by Kumar & Rohatgi (1999). Descriptive statistics and independent t-test were used to analyse the data. Results indicated that marital adjustment of the married women fell within moderate level. No significant difference was found between disabled and non-disabled women in overall marital adjustment score ($t = .991$, $p > .05$) or in Sexual ($t = .347$, $p > .05$), social ($t = .902$, $p > .05$), emotional ($t = 1.039$, $p > .05$) dimensions of marital adjustment suggesting comparable level of marital adjustment by both the groups. Findings do not align with the popular belief that marital life of disabled women is necessarily poor. Presence of disability may not play a major role in shaping marital adjustment of women instead marital experiences are likely to be shaped by complex interaction of wider interpersonal and psychosocial factors.

Keywords: Marital Adjustment, Disabled Women, Women with disabilities

Introduction

Marriage is considered as one of the most sacred institutions in India, characterized by a long term, positive and meaningful relationship between two individuals. A healthy marital life entails a promise of presence through thick and thin along with fulfilling each other's physical, emotional and social needs. The quality of marital life often depends upon the degree of agreement, contentment, intimacy and harmony experienced by spouses in their relationship. For a sustainable marriage spouses have to consistently adjust to each other's needs and expectations while effectively resolving episodes of conflict and distress. Spanier (1976) has conceptualised Marital Adjustment as the extent of consensus on significant issues, emotional cohesion, satisfaction, and manifestation of affection by both the partners. It will determine how the couples will negotiate their roles, handle conflicts and at the same time uphold the intimacy within the relationship. Locke

and Wallace (1959) defined it as "accommodation of a husband and wife to each other at given time" (p.251). On the contrary Burgress and Cottrell (1939) described marital adjustment as "the integration of the couple in the union in which the two personalities are not merely merged or submerged, but interact to complement each other for mutual satisfaction and the achievement of common objective" (p.10). Marital adjustment is measured through the manifestation of global marital happiness, extent to which spouses agree in matters such as finances, recreation, romance, friends, and philosophy. Additionally, methods of conflict resolution, choices of shared activities and expectations about marriage would shape the marital adjustment exhibited by the spouses. (Locke & Wallace, 1959). Higher levels of marital adjustment are linked to improved wellbeing, better physical health, and more positive family functioning, whereas low adjustment is associated with distress, marital discord and unstable relationship. (Freeston & Plechaty, 1997). Women's scoring high on marital adjustment reported high psychological well-being (Kumcağız, 2020), are highly satisfied with their life (Sethi, 2024), have better quality of life (Busharpoor & Sheykholeslami, 2015) with strong physical and psychological health (Dhote, 2018). Whereas, women scoring low on marital adjustment demonstrated higher rates of stress, depression, and anxiety (MK & Kaur, 2020; Maneesha & Thomas, 2022; Kim, 2012).

Unlike men, transitioning to marital life is much more complex for women. Factors such as moving into a new family environment, fulfilling new roles and household responsibilities, adapting to new cultural norms and familial expectations, and low autonomy on financial decisions can take a heavy toll on the level of marital adjustment experienced by them. These post marital challenges become even more pronounced in the presence of disability, creating additional physical, psychological and social constraints for them. According to RPWD Act 2016, person with disability means "a person with long term physical, mental, intellectual or sensory impairment which, in interaction with barriers, hinders his full and effective participation in society equally with others." (Bhardwaj & Kumar, 2025). Disability is an evolving, dynamic and complex phenomenon which limits the individual's functional efficiency and affects the life globally. (Math et al., 2019).

In India, women with disabilities had to endure 'double discrimination' due to prevalence of traditional gender roles and expectations. They are often perceived as unfit for the role of wife and mother and are labelled as dependent, fragile, or incomplete. Such women are generally married to male partners who are older, already married or have some behavioural problems which further enhances their likelihood of getting divorced or abandoned. (Thomas & Thomas, 2002). Disabled women have been found to experience 'intersectional marginalisation' through their gender and disability, creating multiple disadvantages. They are perceived as asexual or unfit for marriage, their ability to bear children is questioned, and they had to deal with rejection and neglect from family and social life. (Sree & Singh, 2026). Addlakha and Nayar (2017) have reported in their study that women with disability have a very limited say with respect to their sexual and reproductive choices. Instances of forced contraception, abortion and involuntary sterilisations on their body are quite prevalent in traditional societies. According to Dawn (2014) gender and disability-based barriers converge specifically in the areas of marriage, intimacy, and family life.

In India women with disabilities are subjected to "triple handicap" of gender, disability, and socio-economic marginalisation, which jeopardises their expectations of marriage, their treatment within marital families, and the availability of psychosocial support from family and community. In a large cross-sectional survey of over 5000 women aged around 18 to 49 years in urban informal settlements in Mumbai, Riley et al. (2022) reported that in comparison to non-disabled women, women with functional disability had higher chances of experiencing physical, sexual, and emotional violence from their intimate partner. They have a distorted self-image and often consider themselves as sexually unattractive which makes them more vulnerable to entering and enduring an abusive relationship. This study further revealed that these women had significantly higher risk of moderate or severe anxiety, depression, and suicidal ideation.

Marriages involving disability especially between disabled and non-disabled partners need long lasting empathy, tolerance, and devotion. The literature consistently shows the disabled women in particular have to navigate heightened vulnerability in marriage needing real, long term emotional and physical support form partners and family. This vulnerability is further exacerbated by patriarchal expectations that often-put unbearable burden on them while depriving the anticipated agency and respect (Thakur, 2025). Prevalence of multifaceted vulnerabilities in marital lives of women with disabilities underscores the need for comparative research examining marital adjustment among disabled and non-disabled women

Review of literature

Peterson (1979) stressed that physical disability brings additional stress in marital life by bringing changes to roles related to finances, caregiving burden, and sexual functioning. Partner's flexibility with respect to their roles determines the marital adjustment demonstrated by them. A study conducted by Nayak (2013) on women with disabilities residing in different districts of Odisha revealed that majority of them were married to an older and unemployed person and were subjected to violence, neglect, and betrayal on account of extramarital affair by their husbands depicting the picture of marital adjustment in their life. Abed, Nezhad and Hatami (2015) did not find any significant difference in compatibility and marital satisfaction between handicapped and healthy couples and argued that marital compatibility depends on the acceptance of each other's functional limitation.

Öztürk and Dayapoğlu (2019) examined the marital adjustment of women with multiple sclerosis (MS) and found that majority of them had moderate level of marital adjustment. Women with secondary progressive MS had lower score on marital adjustment which further decreased as the time span of MS, hospitalization and frequency of attacks increased. Adhikari (2019) conducted a cross-sectional survey on person with disabilities (PWDs) in NCR including three types of disabilities namely locomotor, visual and hearing. Findings confirmed that majority of the PWDs were satisfied with their spouse. Only13.8% and 6.9% of the participants were partially satisfied and totally dissatisfied respectively. Insensitivity and sexual incompatibility were the most widely reported reasons. Among the dissatisfied participants most prevalent reasons were financial uncertainty, misunderstanding, extramarital affair, mistrust, and careless behaviour. Half of the women were totally unaware of the sexual aspect of the marriage leading to pain and anxiety

during sexual intercourse. This study highlighted that unlike popular belief that person with disabilities cannot have healthy and fulfilling marital life, they are capable of effectively managing it. A phenomenological study in Saudi Arabia by Alsamiri et al. (2025) explored the marital experience and challenges of women with disabilities and found that though some women had positive marriage experiences yet they had to deal with negative societal attitude regarding their right to marry. Along with legal and financial challenges they had negligible support from their family and partner leaving them helpless in the face of prejudice, stigma, and gender-based discriminations.

Although marital adjustment has been extensively investigated among women, studies involving women with disabilities remains scant across the globe specifically in Indian context where researchers have mostly focused on descriptive accounts of their marital experiences emphasizing discrimination, stigma, violence, and patriarchal expectations. It's important to find out how these adversities reflect into scores on standardised measure of marital adjustment. Moreover, studies directly comparing the marital adjustment of disabled and normal married women still have not found their way into scientific literature. Present study addresses this gap by exploring how disability status is linked to women's marital experiences in Indian socio-cultural context.

Objectives

1. To examine the marital adjustment of married women.
2. To compare the marital adjustment of disabled and non-disabled married women.

Hypothesis

There would be significant difference in marital adjustment of disabled and non-disabled women.

Methodology

Research Design

The present study employed descriptive survey and cross-sectional design to assess and compare the level of marital adjustment experienced by the disabled and non-disabled married women.

Sample

This study included 90 married women in the age group of 20 to 35 years with minimum education qualification of 8^{th} standard; among them 30 disabled women were selected through purposive sampling method. Among disabled women, 17 orthopaedically handicapped, 8 visually impaired and 5 hearing impaired were included. Along with them 60 non-disabled women were selected through random sampling method. Participants included in this study belonged to Sitapur town in the Chitrakoot district of Uttar Pradesh, India.

Tool/ Instrument

Present study employed Marital Adjustment Questionnaire (MAQ) constructed and developed by Kumar & Rohatgi (1999). It consists of 25 items rated on dichotomous choices Yes and No. Among them four items were for sexual adjustment, nine items for social adjustment and twelve items for emotional adjustment. Items were scored as 1 for Yes and 0 for No and item

number 9, 10, and 19 were reverse scored. Higher score indicated higher adjustment. The questionnaire was found to have good psychometric properties with split half reliability of .70 and Test-retest reliability of .84. Correlation coefficient of .71 between the scores on MAQ and marital adjustment inventory by Singh (1972) established the validity of the questionnaire.

Procedure

Each participant was contacted individually by the researcher and was informed briefly about the nature of the study. They were assured that the data would be used solely for the research purpose and confidentiality and anonymity of their identity would be maintained. After taking the informed consent from the participants, questionnaire was administered to them using prescribed guidelines form the manual. t-test was conducted to compare the scores of disabled and non-disabled women using IBM SPSS Software.

Results

Table1: *Showing comparison of demographic characteristics of the groups*

	Comparison Group	N	Mean	Std. deviation	t-value	Significant level (df = 88)
Husband age	Non-disabled Women	60	28.6167	4.14194	0.985	Not Significant
	Disabled Women	30	29.5333	4.20782		
Wife age	Non-disabled Women	30	26.4667	4.10236	0.230	Not Significant
	Disabled Women	60	26.2667	3.43344		
Marital age of Husband	Non-disabled Women	60	22.1333	2.61331	3.412	0.01
	Disabled Women	30	24.3667	3.47884		
Marital age of wife	Non-disabled Women	60	20.0500	2.14259	1.928	0.05
	Disabled Women	30	21.0333	2.53912		
Husband monthly Income	Non-disabled Women	60	11866.666	9927.64786	2.020	0.05
	Disabled Women	30	17566.6667	16812.72780		
Wife monthly Income	Non-disabled Women	60	983.3333	3461.61355	1.552	0.05
	Disabled Women	30	.0000	.00000		

Table 1 presents the comparison of demographic characteristics of disabled and non-disabled women. Independent-sample t tests revealed no significant difference between the groups in husband's age ($t = 0.985$, $p > .05$) or wife's age ($t = 0.230$, $p > .05$). However, a significant difference was observed in the marital age of husbands ($t = 3.412$, $p < 0.01$), with husbands of

disabled women (M = 24. 37, SD = 2.61) marrying at a higher age than husbands of non-disabled women (M = 22.13, SD = 2.61). Marginal but significant difference was found in marital age of wives' ($t = 1.928$, $p < 0.05$) where disabled women reported slightly higher mean (M = 21.03, SD = 2.54) than non-disabled women (M = 20.05, SD = 2.14). Husbands of disabled women had significantly higher income (M = 17,566.67, SD = 16,812.73) than husbands of non-disabled women (M = 11,866.67, SD = 9,927.65, $t = 2.020$, $p < .05$). Furthermore, significant difference ($t = 1.552$, $p < 0.05$) existed between both the groups with respect to their monthly income.

Table 2

Showing Mean and SD of marital adjustment score of all participants

	N	Min.	Max.	Mean	Std. Deviation
Marital adjustment score	90	6.00	25.00	19.7111	4.21139
Sexual score	90	.00	4.00	3.1333	1.28255
Social score	90	3.00	9.00	7.1667	1.23843
Emotional score	90	2.00	12.00	9.4111	2.512242

Table 2 presents the descriptive statistics for marital adjustment scores of 90 participants included in the study mentioning mean, standard deviation, and the range of scores (minimum and maximum). Overall score on marital adjustment ranged from 6 to 25, with a mean of 19.71 (SD = 4.21) which falls within average category. This suggest that participants experienced moderate level of marital adjustment. Further, the table also demonstrates participant's mean score on three areas of marital adjustment. Mean scores for sexual, social and emotional areas were 3.13 (SD = 1.28), 7.17 (SD = 1.24), and 9.41 (SD = 2.51) respectively.

Table 3

Showing comparison between Normal and Disabled women on Marital Adjustment

	Comparison Group	N	Mean	Std. deviation	t-value	Significant Level
Marital Adjustment score	Non-disabled Women	60	19.4000	4.09299	0.991	Not Significant
	Disabled Women	30	20.3333	4.44377		
Sexual score	Non-disabled Women	60	3.1000	1.24465	0.347	Not Significant
	Disabled Women	30	3.2000	1.37465		
Social score	Non-disabled Women	60	7.0833	1.12433	0.902	Not Significant
	Disabled Women	30	7.3333	1.44636		
Emotional score	Non-disabled Women	60	9.2167	2.58478	1.039	Not Significant
	Disabled Women	30	9.8000	2.35475		

Table 3 represents the mean score of both the groups on Marital Adjustment and its areas. To compare the group means independent sample t-test was conducted. It is evident from the table there was no statistically significant difference between Non-disabled and Disabled Women (t =

0.991, p > 0.05). Similarly, no significant differences were found in the Sexual dimension (t = 0.347, p > 0.05), Social dimension (t = 0.902, p > 0.05), and Emotional dimension (t = 1.039, p > 0.05).

Figure 1: *Mean scores of Normal and Disabled women on Marital Adjustment*

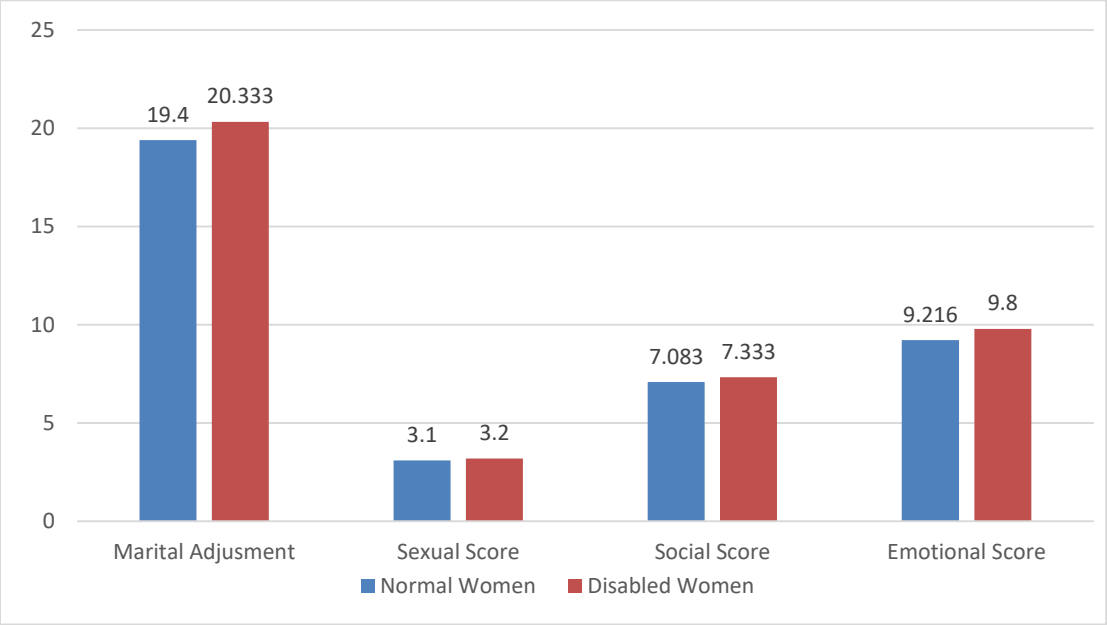


Figure 1 illustrates the comparative mean scores of both the groups on overall marital adjustment and its dimensions. Figure clearly shows that women with disabilities have slightly higher score across all four variables. However, these differences were not large enough to be significant.

Discussion

The present study aimed to examine the marital adjustment of Disabled and Non-disabled women and explore if there is any significant difference between them. Findings of the study disclosed that on average women in the age group of 20 to 35 years experienced moderate or higher level of marital adjustment, in addition to that their mean scores on Sexual, Social, and Emotional dimension were also on the higher side reflecting similar adjustment across all the areas of marital adjustment. Moreover, mean of scores of both non-disabled (M= 19.40) and disabled women (M = 20.33) fell within the average range of marital adjustment. This suggests that participants in both the groups generally experienced moderate level of marital adjustment. Though mean score of disabled women on marital adjustment was marginally higher than the non-disabled, findings revealed that there was no significant difference (t = 0.991, p > .05) between them suggesting similar level of marital adjustment demonstrated by both the groups. In light of this, the research hypothesis is rejected i.e. there is no significant difference in marital adjustment of disabled and normal married women. These results are consistent with and support the findings reported in (Abed et al.,2013; Adhikari, 2019; Öztürk and Dayapoğlu, 2019) and contradictory to those that assumed disability as a deficit that brings multiple barriers, potentially deteriorating marital adjustment of women with disabilities (Thomas & Thomas, 2002; Sree & Singh, 2026; Dawn, 2014; Addlakha & Nayar, 2017; Riley et al., 2022; Nayak, 2013). Similarly, no significant

difference existed between disabled and non-disabled women on sexual ($t = .347$, $p > .05$), social ($t = .902$, $p > .05$), and emotional ($t = 1.039$, $p > .05$) dimensions of marital adjustment, again pointing towards equivalent standing by both the groups across sexual, social, and emotional domains of marital adjustment. Taken together these findings clearly indicate that disability status is not significantly associated with marital adjustment exhibited by the women. Absence of significant difference suggests that disability alone is not a major factor that determines marital experiences of women. Women with disabilities are capable of navigating their marital life by effectively overcoming their functional limitations and managing roles, expectations, intimacy, and new social life on par with women without disabilities. These findings can be best understood in light of previous research indicating that instead of disability, marital adjustment among women is shaped by complex interaction of several interpersonal and psychosocial factors, including personality traits (Ara, Shirin & Zaman, 2026), self-esteem (Goyal & Nakra, 2023), distress tolerance (Taheri & Mahvi, 2019), communication pattern, coping strategies, and social support (Brandao et al., 2017), romantic attachment (Muraru & Turliuc, 2013), resilience (Khalaf & Hayder, 2023), emotional intelligence (Jalil & Muazzam, 2013), and attachment style (Hoseini Hoseinabad et al., 2018). Interventions targeting marital adjustment should focus more on reducing stigma, improving coping strategies, promoting acceptance, interpersonal communication and role flexibility. Results of the present study should be interpreted while addressing its limitations. Significant variations in marital age and monthly income of the participants and their husbands could have influenced the results of the study. In addition, relatively smaller number of women with disabilities may have reduced the statistical power of the study to pick fine group differences. Since data was collected using self-report questionnaire participant's response may have been influenced by social desirability bias. Further, this study did not consider variables such as type, severity or duration of disability which could have affected marital experiences of the disabled women. Future research should consider larger and more diverse sample of women with disabilities. Along with cross-sectional surveys use of longitudinal designs and qualitative methods may provide much clearer picture of their marital experiences.

Conclusion

Findings of the study revealed that there was no significant difference in marital adjustment of women with and without disabilities. Further, both the groups were found to have moderate level of marital adjustment along with similar score across sexual, social, emotional dimensions. These findings suggest that disability status single handily may not determine the level of marital adjustment experienced by disabled women. Instead, it appears to be shaped by various interpersonal and psychosocial factors such as personality, coping and communication pattern, role flexibility, attachment style, social support, resilience, and emotional intelligence. The study contributes to existing literature by highlighting that women with disabilities are capable of successfully navigating the demands of adaptability form their marital life and achieving marital adjustment comparable to women without disabilities, thereby challenging the popular beliefs and assumptions especially in traditional Indian context that disability necessarily leads to poor marital functioning.

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