



## Mental Health Challenges Faced by the Wives of Alcohol-Dependent Individuals in Chennai City

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### Abstract

This study examines the psychological problems experienced by the wives of alcoholics in Chennai City, focusing on depression, anxiety, and stress. Using the DASS-42 scale, a widely recognized tool for assessing these psychological dimensions, the research aims to provide a comprehensive understanding of the mental health challenges faced by this demographic. Data was collected from 11 De-addiction centers across Chennai, utilizing a multi-stage probability sampling technique to ensure a representative sample of the affected population. The study highlights the significant psychological burden borne by the wives of alcoholics, as evidenced by elevated scores on the Depression, Anxiety, and Stress Scale. The findings indicate that these women experience high levels of depression, anxiety, and stress, which are compounded by the challenging circumstances associated with their spouses' alcohol dependence. The use of the DASS-42 scale allowed for a nuanced assessment of these psychological issues, revealing the profound impact of alcoholism on the mental health of their wives. The multi-stage probability sampling technique employed ensured that the sample was both diverse and representative of the broader population of wives affected by alcoholism in Chennai City. This methodological approach provided a robust dataset, enabling a thorough analysis of the psychological impact of living with an alcoholic spouse. The results underscore the need for targeted psychological support and intervention for this vulnerable group, highlighting the importance of addressing their mental health needs within the broader context of addiction treatment and support services. Overall, this study contributes valuable insights into the psychological challenges faced by the wives of alcoholics and underscores the necessity for specialized support mechanisms to address their mental health needs effectively.

**Keywords:** Depression, Anxiety, Stress, Alcoholism and De-addiction.

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### Introduction

Mental health is a pivotal aspect of overall well-being, profoundly influencing individuals' physical health, social functioning, and quality of life (World Health Organization [WHO], 2021). Alcohol dependency, a prevalent global health issue, has significant implications not only for the individuals afflicted but also for their families, particularly spouses. The ripple effect of alcohol dependency often manifests in the form of psychological distress, social isolation, and economic instability among family members (Rehm *et al.*, 2017). Wives of alcohol-dependent individuals are disproportionately burdened, grappling with multifaceted challenges that necessitate an in-depth exploration. Globally, alcohol consumption contributes to over 3 million deaths annually, accounting for 5.3% of all mortalities (WHO, 2021). The adverse impacts of alcohol extend beyond the individual to their families, particularly spouses, who often bear the brunt of emotional and social challenges. Studies highlight that the psychological repercussions for the partners of alcohol-dependent individuals include anxiety, depression, and post-traumatic stress disorder (PTSD) (O'Farrell & Clements, 2012). Moreover, the stigma attached to alcoholism aggravates their plight, compelling them to endure societal ostracism and financial hardships (Room *et*

*al.*, 2010). While there is a growing body of research addressing the global ramifications of alcohol dependency, region-specific studies are critical to understanding the nuanced challenges faced by women in diverse sociocultural contexts. In India, alcohol dependency presents a severe public health challenge. According to the National Family Health Survey-5 (2021), approximately 18.8% of men aged 15-49 in India consume alcohol, with a significant proportion engaging in hazardous drinking. This pervasive issue exerts a substantial burden on Indian families, particularly wives, who often become silent sufferers. Research indicates that the stigma surrounding alcohol dependency in Indian society exacerbates women's vulnerability, leading to mental health issues such as chronic stress, depression, and suicidal ideation (Benegal, 2005). The patriarchal structure of Indian households further compounds their challenges, leaving women with limited avenues for support and redress (Gupta *et al.*, 2020). Tamil Nadu, a southern state in India, has one of the highest rates of alcohol consumption in the country, driven by the widespread availability of alcohol through state-run outlets and cultural permissiveness toward male drinking (Pradeep *et al.*, 2021). Tamil Nadu's TASMAC (Tamil Nadu State Marketing Corporation) outlets, which

control the sale of alcohol, contribute significantly to the state's revenue, inadvertently perpetuating alcohol accessibility (Sundaram *et al.*, 2018). The normalization of alcohol consumption in Tamil Nadu has dire consequences for families, particularly for wives who must navigate the mental health repercussions of their spouses' dependency. Studies in Tamil Nadu highlight the prevalence of domestic violence, economic deprivation, and social stigma as significant factors affecting these women (John & Jacob, 2019). Chennai, the capital city of Tamil Nadu, mirrors the state's alarming trends in alcohol consumption. With a diverse population and rapid urbanization, Chennai's socio-economic landscape adds layers of complexity to the lives of women married to alcohol-dependent individuals. Studies reveal that these women often experience emotional neglect, social isolation, and abuse, contributing to a heightened risk of anxiety and depression (Rajendran & Deepa, 2020). Despite the availability of mental health resources in Chennai, the stigma attached to seeking psychological help acts as a barrier for many women (Manoharan *et al.*, 2022). The unique sociocultural dynamics of Chennai necessitate an exploration of the mental health challenges faced by the wives of alcohol-dependent individuals. Understanding their struggles can inform the development of tailored interventions aimed at mitigating psychological distress and enhancing their quality of life. This study seeks to bridge the existing research gaps by providing a comprehensive analysis of the mental health challenges encountered by these women, emphasizing the importance of culturally sensitive solutions.

#### Review of Literature

Singh, and Ghosh, (2022) "Impact of Spousal Alcoholism on Psychological Well-being: A Study in Chennai." *Journal of Clinical Psychology*, This study explores the psychological effects on spouses of alcoholics in Chennai, focusing on anxiety, depression, and stress. Using a sample of 100 women, the research highlights the significant correlation between spousal alcoholism and the deterioration of mental health. The study employs quantitative methods to measure levels of psychological distress and finds that spouses often experience heightened emotional instability and lower life satisfaction. The implications suggest a need for targeted mental health interventions and support systems for these individuals. This article examines the interplay between marital stress and psychological distress in women married to alcohol dependents in Chennai. The study utilizes both qualitative interviews and quantitative surveys to analyze the psychological impacts. Results indicate that marital stressors, including financial strain and interpersonal conflict, significantly contribute to psychological issues such as depression and anxiety. The findings underscore the need for comprehensive marital counseling and psychological support tailored to the unique challenges faced by these women. Rajendran and Nair investigate how alcoholism affects family dynamics and the psychological health of spouses, with a specific focus on Chennai. The study employs a mixed-method approach, revealing that women often take on increased caregiving roles and experience substantial emotional and psychological strain. Key findings include elevated levels of anxiety, depression, and social isolation. The authors advocate for enhanced family support systems and community resources to address these issues effectively. This empirical research assesses the psychological impact of alcoholism on women in Chennai, focusing on mental health outcomes such as depression and anxiety.

Through structured interviews and psychological assessments, the study identifies a clear pattern of psychological distress among wives of alcoholics. The results suggest that the emotional and psychological burdens are compounded by social stigma and limited access to mental health services. The study calls for targeted interventions to improve mental health support for affected women. This longitudinal study explores the long-term psychological challenges faced by wives of alcoholics in Chennai. By following a cohort of women over three years, the research highlights persistent issues such as chronic anxiety, depression, and emotional trauma. The study emphasizes the cyclical nature of psychological distress and the impact of ongoing substance abuse within the family. Recommendations include long-term therapeutic interventions and support groups tailored to the unique needs of these women.

#### Need for the Study

The prevalence of alcoholism has a profound impact on the families of alcoholics, particularly their spouses. In Chennai City, the psychological distress experienced by the wives of alcoholics is often exacerbated by societal stigma and lack of support systems. This study aims to address a crucial gap in the research on the specific psychological challenges faced by these women. Understanding the nature and extent of these problems is essential for developing targeted interventions and support mechanisms that can mitigate the adverse effects of alcoholism on family dynamics.

#### Significance of the Study

This study is significant for several reasons. First, it highlights the psychological burden carried by the wives of alcoholics, contributing to the broader understanding of how alcoholism affects family members beyond the individual directly consuming alcohol. Second, the findings can inform policymakers and practitioners about the need for specialized support services for this vulnerable population. By shedding light on the specific mental health issues faced by these women, the study can drive the development of tailored therapeutic programs and community support initiatives. Lastly, the study contributes to the academic discourse on family dynamics in the context of alcoholism, providing a foundation for further research in this area.

#### Scope of the Study

The scope of this study encompasses the psychological problems experienced by the wives of alcoholics residing in Chennai City. It focuses on various dimensions of psychological distress, including anxiety, depression, and stress, as well as the impact on their overall quality of life. The study will examine the prevalence and intensity of these issues and explore contributing factors such as socioeconomic status, duration of the spouse's alcoholism, and access to support services. It aims to provide a comprehensive overview of the psychological impact of living with an alcoholic partner and suggest strategies for improving mental health outcomes for these women.

#### Questions

1. What is the level of depression, anxiety, and stress in the wives of alcoholics?
2. What kinds of coping strategies do wives of alcoholics use to deal with psychological problems?

#### Objectives of the Study

1. To study the socio-demographic characteristics of the spouses of Alcoholics.

2. To find out the level of depression, anxiety, and stress among the Wives of Alcoholics.
3. To analyze the coping strategies followed by the wives of Alcoholics,

**Method of Data Collection**

The study employs a descriptive research design to explore psychosocial issues among wives of alcoholics in Chennai City, Tamil Nadu, focusing on depression, anxiety, stress, social support, domestic violence, and coping strategies. The research utilized a multi-stage probability sampling technique, beginning with a two-stage sampling approach. Initially, 11 out of 51 De-addiction Centers in Chennai were selected through simple random sampling with the assistance of the Social Doctors Foundation, Chennai. The study's

inclusion criteria required participants to be wives of alcoholics aged 20 to 60 years. From a universe of 1003 potential respondents, 402 were ultimately chosen for the study. This approach ensures a representative sample for examining the specified psychosocial factors.

Primary data was collected through structured interviews and two standardized questionnaires assessing depression, anxiety, and stress among wives of alcoholics in Chennai City. The interview schedule included self-administered scales on coping strategies. Respondents were provided with a detailed explanation of the instruments, and any queries were addressed. Secondary data was sourced from articles, journals, books, and online databases.

**Research Result and Discussion**

**Table: 1 Distribution of the respondents according to their Age**

S. No.	Age	Res(n=40)	Percentage
1.	20 -30 years	57	14.2
2.	30-40 years	60	14.9
3.	40-50 years	194	48.3
4.	Above 50 years	91	22.6

The table 4.1 shows that 48.3 per cent of the respondents are between the age group of 40-50 years. 22.6 per cent are

above 50 years old. 14.9 per cent are 30-40 years and 14.2 per cent are between 20-30 years.

**Table: 2 Distribution of the respondents according to their Educational Qualification**

S. No.	Educational Qualification	No. of Respondents (n= 402)	Percentage
1.	Illiterate	30	7.5
2.	Primary level	61	15.2
3.	Middle Class	115	28.6
4.	Secondary level	78	19.4
5.	Higher Secondary level	49	12.2
6.	UG Graduate	30	7.5
7.	PG Graduate	17	4.2
8.	Technical	22	5.4

According to the table 2, more than 28.6 per cent of the respondents have completed middle class, 19.4 per cent have completed secondary level, 15.2 per cent have completed primary level, 12.2 per cent completed their higher

secondary, 7.5 per cent completed under graduate 5.4 per cent completed technical education, 4.2 per cent had a post graduate degree and the remaining 7.5 per cent are illiterate.

**Table: 3 Distribution of the respondents according to their Occupation**

S.No.	Occupation	No. of Respondents (n = 402)	Percentage
1.	House Wife	191	47.5
2.	Government Employee	23	5.7
3.	Private Employee	56	13.9
4.	Daily Wages	90	22.5
5.	Business	42	10.4

The Table 3 shows that 22.5 per cent of the respondents are working on a daily basis, 13.9 per cent are private employee, 10.4 per cent are doing own business, 5.7 per cent are

government employee and remaining 47.5 per cent are housewives.

**Table: 4 Distribution of the respondents according to their Husband Occupation**

S. No.	Husband Occupation	No. of Respondents (n = 402)	Percentage
1.	Currently Unemployed	68	16.9

2.	Government Employee	54	13.4
3.	Private Employee	138	34.3
4.	Daily Wages	65	16.2
5.	Business	77	19.2

The Table 4 shows that 34.3 per cent of the respondents' husband work as private employees, 19.2 per cent of the respondents' husbands doing own business, 16.9 per cent of the respondents' husbands are currently unemployed, 16.2 per cent of the husbands 'are working for daily wages and 13.4 per cent of the husbands are government employee.

**Table: 5 Distribution of the respondents according to their Place of Birth**

S. No.	Place of Birth	No. of Respondents (n = 402)	Percentage
1.	Rural	133	33.1
2.	Semi-urban	100	24.8
3.	Urban	100	24.9
4.	Metropolitan	69	17.2

According to the table 5 that 33.1 per cent of the respondents are from rural areas, 24.9 per cent are from urban areas, 24.8 per cent are from semi-urban areas and the remaining 17.2 per cent are from metropolitan areas.

**Table No: 6 Distribution of the respondents according to their perception towards Psychological Problems.**

S.No.	Particulars	No. of Respondents (n = 402)					
		Normal	%	Moderated	%	Svere	%
1	Depression	74	18.4	83	20.6	245	60.9
2	Anxiety	70	17.4	82	20.4	250	62.2
3	Stress	101	25.1	69	17.2	232	57.7
4	Overall level of psychological problems	70	17.4	87	21.6	245	60.9

Table 6 shows that two-thirds of wives of alcoholics experienced severe psychological issues: depression (60.9%), anxiety (62.2%), and stress (57.7%). About one-fifth had moderate psychological problems: depression (20.6%), anxiety (20.4%), and stress (17.2%). The remaining less than one-fifth had no significant psychological complications and led normal lives. Overall, 60.9% had severe issues, 21.6% had moderate issues, and 17.4% were normal

**Table: 7 Multivariate Analysis among the Husbands' Occupation and Family Monthly Income and overall level of psychological problems and Domestic Violence**

Tests Between-Subjects Effects						
Source	Dependent Variable	Type III Sum of Squares	Df	Mean Square	F	Sig.
Corrected Model	Overall levels of psychological Problems	364901.875 <sup>a</sup>	9	40544.653	1093.490	.000
	Overall level of Domestic Violence	91247.483 <sup>b</sup>	9	10138.609	1021.032	.000
Intercept	Overall levels of psychological Problems	566492.792	1	566492.792	15278.327	.000
	Overall level of Domestic Violence	299873.507	1	299873.507	30199.439	.000
Husbands' Occupation	Overall levels of psychological Problems	5440.562	4	1360.140	36.683	.000

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	Overall level of Domestic Violence	829.361	4	207.340	20.881	.000
Family Monthly Income	Overall levels of psychological problems	22743.814	4	5685.954	153.350	.000
	Overall level of Domestic Violence	11387.493	4	2846.873	286.701	.000
Husbands' Occupation * Family Monthly Income	Overall levels of psychological problems	7128.678	1	7128.678	192.261	.000
	Overall level of Domestic Violence	973.665	1	973.665	98.055	.000
Error	Overall levels of psychological problems	14534.653	392	37.078		
	Overall level of Domestic Violence	3892.470	392	9.930		
Total	Overall levels of psychological problems	2168504.000	402			
	Overall level of Domestic Violence	1037643.000	402			
Corrected Total	Overall levels of psychological problems	379436.527	401			
	Overall level of Domestic Violence	95139.953	401			

a. R Squared = .153 (Adjusted R Squared = .132)

b. R Squared = .226 (Adjusted R Squared = .206)

Table 7 demonstrates significant variance in respondents' perceptions of psychological problems and domestic violence based on their husbands' occupation and family monthly income. The analysis shows a highly significant effect of husbands' occupation on both psychological problems ( $F=36.683$ ,  $p<0.01$ ) and domestic violence ( $F=20.881$ ,  $p<0.01$ ). Similarly, family monthly income has a highly significant impact on these variables, with F-values of 153.350 ( $p<0.01$ ) and 286.701 ( $p<0.01$ ), respectively. Furthermore, the interaction between husbands' occupation and family monthly income also shows a highly significant effect on psychological problems ( $F=192.261$ ,  $p<0.01$ ) and domestic violence ( $F=98.055$ ,  $p<0.01$ ). This interaction suggests that the combined influence of these factors significantly affects respondents' perceptions of psychological problems and domestic violence.

**Major Findings: Age Distribution:** 48.3% of respondents are aged 40-50 years, 22.6% are over 50 years, 14.9% are 30-40 years, and 14.2% are 20-30 years.

**Educational Background:** 28.6% of respondents have completed middle school, 19.4% have secondary education, 15.2% have primary education, 12.2% have higher secondary education, and 7.5% have undergraduate education. Additionally, 5.4% have technical education, 4.2% have a postgraduate degree, and 7.5% are illiterate.

**Employment Status:** 22.5% of respondents work daily, 13.9% are private employees, 10.4% run their own business, 5.7% are government employees, and 47.5% are housewives.

**Husbands' Occupation:** 34.3% of respondents' husbands are private employees, 19.2% do their own business, 16.9% are unemployed, 16.2% work for daily wages, and 13.4% are government employees.

**Residential Area:** 33.1% of respondents are from rural areas, 24.9% are from urban areas, 24.8% are from semi-urban areas, and 17.2% are from metropolitan areas.

**Psychological Issues in Wives of Alcoholics:** Two-thirds of these wives experience severe psychological issues: depression (60.9%), anxiety (62.2%), and stress (57.7%).

**Moderate Psychological Problems:** About 20% of respondents experience moderate psychological problems: depression (20.6%), anxiety (20.4%), and stress (17.2%).

**Normal Psychological State:** Less than 20% of respondents report no significant psychological issues and lead normal lives.

**Overall Psychological Impact:** 60.9% of respondents have severe psychological issues, 21.6% have moderate issues, and 17.4% are normal.

**Significant Variance in Perceptions:** There is a highly significant variance in respondents' perceptions of psychological problems and domestic violence based on husbands' occupation and family monthly income. The interaction of these factors also shows a highly significant effect.

### Conclusion

Alcoholism is a major global health issue, and its impact in India is particularly severe due to the large population. The abuse of alcohol affects not only individuals but also significantly disrupts family dynamics, leading to neglect, rage, and emotional distress. This disruption often causes marital dissatisfaction, with women married to alcoholics experiencing heightened anxiety, depression, and stress. The study on wives of alcoholics in Chennai reveals that these women face significant emotional, health-related, and physical challenges, frequently relying on withdrawal coping strategies. The findings underscore the urgent need for targeted interventions to address their psychological difficulties. By improving coping strategies and providing appropriate support, it may be possible to mitigate some of their distress and enhance their overall well-being. Addressing these issues is crucial for improving the quality of life for the affected women.

**Suggestions for Wives of Alcoholics and Recommendations-** According to the study, a significant percentage of wives of alcoholics face severe difficulties,

with 60.9% reporting severe problems and 21.6% moderate issues. To address these challenges, the following suggestions are proposed:

1. Acknowledge the reality of alcoholism and understand that the husband needs help, rather than assigning blame.
2. Medication-assisted therapy is essential but should be combined with psychosocial support through counseling or support groups. These resources provide inspiration, coping skills, and a network of others in similar situations.
3. Recognize that alcoholism is a chronic illness and avoid self-blame. Like other chronic conditions, it has multiple causes and requires professional treatment.
4. Instead of trying to control the partner's drinking or engaging in negative behaviors, focus on accepting the situation and managing one's own responses.

### Recommendations for De-Addiction Centers

1. Establish separate treatment facilities for alcoholic spouses.
2. Provide education to families about alcohol's impact.
3. Develop income-generating strategies and savings awareness for alcoholics and their families.
4. Enhance follow-up plans to prevent relapse and promote effective after-care programs like Alcoholics Anonymous.

### Recommendations for Social Workers and Government

1. Social workers should lead counseling efforts, provide crisis intervention, and support families.
2. Governments should implement comprehensive national strategies, strengthen health services, and regulate alcohol availability to reduce harmful use.

### Future Research

Further studies could explore emotional and behavioral issues in middle-aged women, environmental and personality factors, the impact on children's development, and the role of social organizations in support and intervention.

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