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Relationship between Childhood Trauma and Marital Satisfaction among Married Individuals in Ngando Location, Nairobi County, Kenya

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ABSTRACT

The family setting plays a vital role in individual well-being and the stability of families and communities, with trust, effective communication, emotional support, and shared commitment serving as foundational pillars in this context. However, the presence of childhood trauma such as experiences of physical abuse, emotional maltreatment, sexual abuse, household dysfunction, and neglect, may undermine an individual's ability to form and maintain healthy marital relationships. This study examined the relationship between childhood trauma and marital satisfaction among married individuals in Ngando Location, Nairobi County, Kenya. The study was guided by the Attachment Theory and Structural Family Theory, and employed a correlational survey design with a sample size of 167 participants. The data was collected using the Childhood Trauma Questionnaire measuring childhood trauma and the ENRICH Marital Satisfaction (EMS), assessing marital satisfaction. Pearson's correlation analysis revealed no statistically significant relationship between childhood trauma and marital satisfaction (r = .066, p = .438). This study contributes to the existing literature by contextualizing the intersection between childhood trauma and marital satisfaction.

Key Words: Childhood trauma, marital satisfaction, married individuals, Ngando location, Nairobi, Kenya

INTRODUCTION

Childhood trauma has emerged as a critical area of study within the field of psychology, particularly concerning its long-term effects on adult relationships. Defined as adverse experiences during formative years, such trauma can include physical, emotional, or sexual abuse, neglect, and exposure to domestic violence (Godbout et al., 2019). Studies indicate early experiences significantly shape an individual's emotional and psychological development, influencing their interpersonal relationships in adulthood (Basso et al., 2024; Brennan et al., 2021). Marital satisfaction, on the other hand, is a crucial aspect of adult life that affects overall well-being and quality of life. It encompasses various dimensions, including emotional intimacy, communication, and conflict resolution. High levels of marital satisfaction are associated with better mental health, increased life satisfaction, and improved social functioning (Brown et al., 2021). According to Brown (2019), marital satisfaction is a multidimensional construct that reflects an individual's subjective evaluation of the quality, stability, and emotional fulfillment experienced within a marital relationship. It encompasses key relational aspects including emotional closeness, communication quality, sexual intimacy, conflict resolution, and the alignment of expectations between partners. High levels of marital satisfaction have been linked to enhanced psychological well-being, improved physical health, and stronger interpersonal relationships. Conversely, diminished marital satisfaction may result in emotional distress, relationship instability, and increased likelihood of separation or divorce (Green & Miller, 2021).

The relationship between childhood trauma and marital satisfaction is a critical area of study, as early adverse experiences can significantly shape an individual's emotional well-being and interpersonal dynamics. Understanding how childhood trauma impacts adult relationships can provide valuable insights into the challenges couples face and highlight the importance of addressing past experiences in the pursuit of healthier, more fulfilling marriages. In the United States, Carter and Nguyen (2023) conducted research on exploring the impact of childhood trauma on marital satisfaction among American couples. The study used a sample population of 400 married individuals from diverse backgrounds across the US. The study utilized a quantitative survey methodology and assessed the correlation between various types of childhood trauma and current levels of marital satisfaction. The findings of the study indicated that individuals with a history of emotional and physical abuse during childhood reported significantly lower marital satisfaction compared to those without such experiences. However, the study only focused on American couples, while the current study was conducted with a sample of 400 participants in Ngando location.

Patel and Jones (2023) explored the relationship between childhood trauma and marital satisfaction marriages in the West Midlands, United Kingdom. The sample included 350 married couples from different regions in the West Midlands. The study used a mixed-methods approach and combined quantitative surveys with qualitative interviews to examine how childhood experiences influenced marital dynamics. The findings revealed that adverse

childhood experiences were linked to poorer communication and increased conflict in marriages. The study noted a gap in understanding how socio-economic status and cultural diversity within the UK context might mediate the effects of childhood trauma on marital satisfaction.

In China, Zhang and Li (2023) investigated the effects of childhood trauma on marital satisfaction among rural couples in China. The sample population comprised 500 married individuals from rural Gansu Couples. Using a quantitative survey methodology, the researchers assessed the relationship between childhood trauma and marital quality. The findings indicated that higher levels of childhood trauma were associated with lower marital satisfaction and increased relational conflict. However, the study highlighted a gap in examining the influence of traditional family values and collectivist culture on the experiences of individuals with childhood trauma in marital contexts. Wang et al. (2023) the study examined how parental marital status and childhood maltreatment affect anxiety levels in adolescents. The study found that those from divorced (48.8%), stepparent (49%), and single-parent (48%) families reported significantly higher anxiety compared to their peers from intact families (35.1%). Additionally, emotional abuse, sexual abuse, and physical neglect were identified as significant risk factors, with childhood maltreatment mediating the relationship between family structure and anxiety.

In Canada, Thompson and Lee (2023) conducted research on childhood trauma and marital satisfaction: insights from Canadian Couples. The research used a sample population of 300 married individuals from various provinces in Canada. The study utilized a qualitative methodology and conducted indepth interviews to explore how childhood trauma influenced marital satisfaction. The findings revealed that participants often faced challenges related to trust and emotional intimacy stemming from their childhood experiences, negatively impacting their marital relationships. Vaillancourt-Morel et al. (2021) studied the effects of child maltreatment (CM) on the sexual well-being of mixed-sex couples over one year. The study revealed that women's emotional neglect predicted lower initial sexual satisfaction and greater decline over time, with partner effects indicating that women's CM history negatively influenced their partners' sexual satisfaction and function. However, high relationship satisfaction was found to buffer some of these adverse outcomes. The study identified a gap in quantitative research that could provide broader statistical evidence of the prevalence and impact of childhood trauma on marital satisfaction across different demographics in Canada.

In India, Kumar and Singh (2023) examined the relationship between childhood trauma and marital satisfaction in India. The sample population consisted of 350 married individuals from both urban and rural settings. The study used a mixed-methods approach and assessed quantitative data through surveys and qualitative insights through interviews. The findings indicated that childhood trauma significantly affected emotional intimacy and communication in marriages, leading to lower satisfaction levels. However, the study noted a gap in exploring how socio-cultural factors and economic conditions in India might influence the relationship between childhood trauma and marital satisfaction. Mutum and Bhambri (2024) explored the effect of childhood trauma on adult emotional attachment and romantic satisfaction among 206 participants aged 20-48. The study findings revealed significant associations between trauma and attachment anxiety, emotional distance, dependency issues, and heightened conflict, emphasizing the long-term relational implications of trauma.

Tekin and Karakuş (2019) explored the impact of childhood trauma on emotion regulation and marital satisfaction among 350 pregnant adolescents at Konya Dr. Faruk Sükan Hospital in Turkey. The study used the Childhood Trauma Scale (CTQ-28), the Difficulties in Emotion Regulation Scale (DERS), and the Marriage Life Scale. The study found that childhood trauma significantly influenced emotion regulation difficulties, which in turn contributed to marital dissatisfaction, with trauma accounting for 44% of emotion regulation issues and 53% of marital dissatisfaction, emphasizing the need for targeted interventions for this vulnerable group.

In Nigeria, Adeyemi and Okafor (2023) conducted a study on the impact of childhood trauma on marital satisfaction amongcouples in North-West, Niger State in Nigeria. The study used a sample population of 400 married individuals and a quantitative survey methodology, The researchers assessed the correlation between childhood trauma experiences and current marital satisfaction levels. The findings revealed that individuals with a history of childhood trauma reported significantly lower levels of marital satisfaction compared to those without such experiences. Similarly, Eze and Okeke (2023) revealed that individuals with a history of childhood trauma reported significantly lower levels of marital satisfaction compared to those without such experiences. However, the study failed to identify factors that influence the relationship between childhood trauma and marital satisfaction in different Nigerian ethnic groups.

Mensah and Owusu (2023) explored the effects of childhood adversity on marital satisfaction in Ghana. The sample included 400 married couples in Oti Region, employed a mixed-methods approach, and combined quantitative surveys with qualitative interviews to examine how childhood experiences influenced marital dynamics. The findings revealed that adverse childhood experiences were linked to lower levels of marital satisfaction, particularly in communication and emotional intimacy. The study noted a gap in understanding how socio-economic factors and cultural beliefs in Ghana might mediate the effects of childhood trauma on marital satisfaction. In Botswana, Khama and Motsumi (2023) conducted research on childhood trauma and marital satisfaction among couples in Botswana. The sample population consisted of 350 married individuals from the Kgalagadi District. The study used a quantitative survey methodology that assessed the impact of childhood trauma on marital satisfaction. The study found that individuals who experienced physical abuse, emotional abuse and household dysfunction had significantly lower marital satisfaction, particularly in areas related to conflict resolution and emotional support. However, the study was conducted in Botswana, which has its own cultural, social, and economic contexts that may affect the findings. In contrast, the current study took place in Ngando, Kenya, a location with unique characteristics. This difference in setting enables a deeper understanding of how childhood trauma and marital satisfaction may differ between the two areas.

Abebe and Tesfaye (2023) investigated the influence of childhood trauma on marital satisfaction among couples in Amhara, Ethiopia. The sample population comprised 400 married individuals from both urban and rural settings. Using a mixed-methods approach, the researchers assessed both quantitative data through surveys and qualitative insights through interviews. The findings indicated that childhood trauma significantly affected

emotional intimacy and communication in marriages, leading to lower satisfaction levels. However, the study identified a gap in exploring how cultural practices and community support systems in Ethiopia might influence the relationship between childhood trauma and marital satisfaction.

In Zambia, Chanda and Mwansa (2023) examined the relationship between childhood trauma and marital satisfaction in Luapula Province. The sample population consisted of 300 married individuals from various regions. The study used a quantitative survey methodology and assessed the correlation between childhood trauma experiences and marital satisfaction levels. The findings revealed that individuals with a history of childhood trauma reported significantly lower levels of marital satisfaction, particularly in emotional support and conflict resolution. However, the study noted a gap in understanding how socio-economic factors and cultural expectations in Zambia might influence the relationship between childhood trauma and marital satisfaction.

In Kenya, studies revealed that the relationship between childhood trauma and marital satisfaction is an important area of study in Kenya, influenced by diverse cultural and social factors. Childhood trauma significantly affects emotional well-being and interpersonal relationships, impacting how individuals manage their marriages. As couples face the repercussions of adverse childhood experiences, understanding this relationship is vital for creating effective interventions. This research seeks to explore how childhood trauma specifically influences marital satisfaction in Kenya, offering insights to enhance marital stability and foster healthier relationships (Muriuki & Mwangi, 2022).

Mwangi and Otieno (2023) conducted a study on childhood trauma and marital satisfaction among couples, North Eastern Province, Wajir County. The sample population consisted of 350 married individuals and a mixed-methods approach was used, combining quantitative surveys with qualitative interviews to explore how childhood trauma influenced marital satisfaction. The findings indicated that childhood trauma can negatively influence lower levels of marital satisfaction, particularly in areas related to emotional intimacy and conflict resolution. Achieng and Karanja (2023) explored the impact of childhood of childhood adversity on marital quality in Kisumu. The findings revealed that higher levels of childhood trauma were associated with increased marital dissatisfaction, particularly due to issues related to trust and communication.

Chibale and Mwenda (2023) researchedchildhood trauma and marital satisfaction in Mombasa. The sample population consisted of 560 married individuals from diverse socio-economic backgrounds in Mombasa County. The study used a qualitative methodology with in-depth interviews to explore personal narratives regarding childhood trauma and its impact on marital relationships. The findings indicated that many participants experienced difficulties in emotional expression and conflict resolution due to unresolved childhood trauma, leading to lower marital satisfaction. However, the study used qualitative data, and the current study used a quantitative approach to examine the relationship between childhood trauma and marital satisfaction Ngando location.

Juma and Wambua (2023) research on childhood experiences and marital satisfaction among couples in Nakuru. The sample population comprised 450 married individuals from both urban and rural settings in Nakuru County. Using a quantitative survey methodology, the study assessed the impact of various prevalence of childhood trauma on marital satisfaction. The findings indicated that emotional and physical abuse during childhood were significant predictors of lower marital satisfaction. However, the study highlighted a gap in exploring how community support systems in Nakuru might influence the relationship between childhood trauma and marital satisfaction. Stanley and Davis (2024) revealed a strong positive correlation (r = 0.819, p = 0.000) between stress and physical violence and a significant relationship using the Pearson Chi-Square test (\times 2(16, n = 52) = 30.672, p = 0.011 < 0.05), leading to recommendations for stress management and multi-stakeholder collaboration to address gender-based violence. However, existing studies on the relationship between childhood trauma and marital satisfaction lack an investigation into the effectiveness of different coping strategies and communication styles used by couples. Therefore, in this context, the current study focuses on examining how individuals with childhood trauma navigate their marital relationships and the impact of their communication patterns on marital satisfaction. By exploring these dynamics, the research aims to provide insights into how effective communication can mitigate the effects of childhood trauma and enhance relationship stability.

METHODOLOGY

A correlational survey design was adopted to identify potential relationships between childhood trauma and marital satisfaction. The study was conducted in Ngando, a residential area within Dagoreti Sub-County in Nairobi County, Kenya. According to the 2019 Kenya Population and Housing Census, Ngando has an estimated population of approximately 118,000 people (Kenya National Bureau of Statistics, 2019). This vibrant and diverse urban area is primarily composed of individuals working in the informal sector, small-scale businesses, and service industries. The area was selected for this study due to its socio-economic diversity, providing an ideal context for exploring the relationship between childhood trauma and marital satisfaction among married individuals.

This study focused on married individuals within the Ngando Location, Nairobi County, Kenya. These married individuals, representing diverse social, economic, cultural, professional, informal, and formal settlements and experiences, provided valuable insights into the relationship between childhood trauma and marital satisfaction. The target population was 167 married individuals drawn from 5 small Churches in Ngando Location, Nairobi County. The inclusion of Catholic outstations and PCEA churches was guided by their strong presence in the area and their organized pastoral structures, which facilitate access to married congregants for research purposes.

In this study, the census method approach was utilized, with the aim of gathering data from the entire intended population instead of using probability sampling to select a subset. This approach ensured that most members of the population participated in the study, offering a comprehensive understanding of the research phenomenon. The study collected data in three sections. The first section collected data on demographic of the participants who included age, gender, education level, marital status and work status. The second section collected data on childhood trauma using Childhood Trauma Questionnaire (CTQ), which was developed by **John** and **Carl** in **1998. It has 28-items,** measuring an individual's experiences of child abuse, sexual abuse, and

physical neglect. This questionnaire is a shortened version of the 70-item Childhood Trauma Questionnaire (Bernstein et.al, 1997). It is important to note that although there are 28 questions, only 25 are scorable. The remaining 3 questions are usually used to assess the under reporting of trauma cases. The 25 scorable items are separated into five subscales with five items each: emotional, physical, and sexual abuse, and emotional and physical neglect. The ratings are measured on a five-point Likert scale and are assigned scores using five numerical values. The ratings are: 1 = Never True, 2 = Rarely True, 3 = Sometimes True, 4 = Often True, and 5 = Very Often True.

The third section utilized the ENRICH Marital Satisfaction (EMS) Scale, developed by Olson and Fowers in 1989. EMS Scale comprises two sub-scales: Marital Satisfaction and Idealistic Distortion scale. In this study, marital satisfaction will be measured using the ENRICH (communication quality, sexual satisfaction, emotional support, conflict resolution and general relationship satisfaction) Marital Satisfaction Scale (EMS). The EMS test is a 15-item scale comprising the Marital Satisfaction scales (10 items) and Idealistic Distortion (5 items). There are also ten items in the scale that survey marital quality while the other five items conventionalize the scale for corrections that endorse positive marriage descriptions that are unrealistic. The items represents areas such as sexual relationships and communication that are aspects of a marital relationship. The data was analyzed using descriptive statistics and Pearson correlation analysis with Statistical Packages for Social Sciences version 26.

RESULTS AND DISCUSSION

The aim of this study was to examine the relationship between childhood trauma and marital satisfaction among married individuals in Ngando Location, Nairobi County, Kenya. This section provides the results and discussion of the findings. The section starts by providing the demographic of the participants followed by the findings of the study.

Demographic Details of the Participants

The demographic of the participants were age, gender, marital status, level of education, and employment status. These details are presented in Table 1:

Table 1: Demographic Characteristics

	Frequency	Percentage
Age		
18 - 25 years	12	8.6
26 - 35 years	39	27.9
36 – and above	89	63.6
Gender		
Male	54	38.6
Female	86	61.4
I prefer not to disclose		
Marital Status		
Married	86	61.4
Separate	54	38.6
Duration of Marriage		
1-5 years	32	22.9
6 – 10 years	44	31.4
11 – 15 years	26	18.6
16 – 20 years	25	17.9
20 years and above	14	9.3
Social Support		
Partner	53	37.9
Extended Family	25	17.9
Co-workers	23	16.4

Friends 39 27.9

Table 1 presents the demographic characteristics of this study's participants. Concerning the age of participants, 89 participants (63.6%) which formed majority were between the ages of 36 years and above, this was followed by 39 participants (27%) who fell within the 26 to 35 years of age, and only 12 participants (8.6%) were between the ages of 18 and 25 years. The study had 86 female participants (61.4%) making them more than their male counterparts who were only 54 (38.6%). With regards to marital status 86 participants (61.4%) were married making them more than 54 participants (38.6%) who were separated. With regards to the duration of marriage, 44 participants (31.4%) were married for 6 – 10 years, this followed by 32 participants (22.9%) who fell into the 1 – 5 years category. This was followed by smaller groups with 26 participants (18.6%) falling within the 11 – 15 years category, 25 participants (17.9%) falling within the 16 – 20 years category, and 14 participants (9.3%) falling within the last category of 20 years and above. With regards to source of social support, 53 participants (37.9%) reported getting support from their partners, this was followed by 39 participants (27.9%) who got support from friends, 25 participants (17.9%) received support from extended family, and 23 participants (16.4%) received support from colleagues.

The relationship between childhood trauma and marital satisfaction among married individuals in Ngando Location, Nairobi County, Kenya

The aim of this study was to examine the relationship between childhood trauma and marital satisfaction among married individuals in Ngando Location, Nairobi County, Kenya. Before running Pearson correlation analysis, a scatter plot was conducted to offer a clear depiction of how the scores from both variables are distributed. The finding of the scatter plot was provided in figure 1.

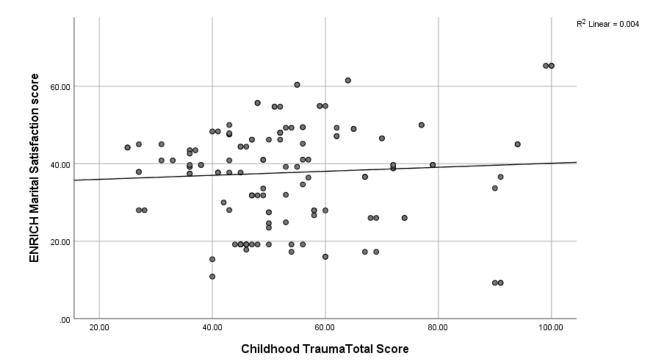


Figure 1: Scatter Plot of Relationship between Childhood Trauma and Marital Satisfaction

The scatter plot as presented in Figure 1 illustrates the relationship between childhood trauma and marital satisfaction among the study's participants. Each dot on the scatter plot represents the scores from each participant according to the two scales used. The fitted line as illustrated indicates a slightly upward slope, suggesting the presence of a positive relationship between both variables which is very weak. The strength of the relationship is very minimal as demonstrated by the R^2 value of 0.004, this means that less than 1% of the variance in marital satisfaction could be explained by childhood trauma. Also, the dots are widely scattered around the regression line suggesting the lack of a strong or consistent pattern between both variables of the study. The findings as presented in the scatter plot supports the earlier correlation analysis results (r = .066, p = .438), confirming the weak positive and non-significant relationship between both variables.

To tackle this objective, the study used Pearson's Correlation Coefficient (r) to assess the strength and direction of the linear relationship between the two study's variables. The analysis aimed at determining if higher levels of burnout were linked to lower levels of job satisfaction among the participants. The findings from this correlation analysis are shown in Table 2.

Table 2: Correlation between Childhood Trauma and Marital Satisfaction

		CTQ Total	EMS Total score
CTQ Total	Pearson Correlation	1	.066
	Sig. (2-tailed)		.438
	N	140	140
EMS Total score	Pearson Correlation	.066	1
	Sig. (2-tailed)	.438	
	N	140	140

Table 2 presents the results of the Pearson's correlation analysis that was carried out to determine the relationship between childhood trauma and marital satisfaction among the study's participants. The results as presented in the table shows a weak positive correlation (r = .066) between childhood trauma and marital satisfaction. However, this weak positive correlation was found to be non-significant (p = .438, p > .05). The following findings suggest that among the participants of this study, childhood trauma experiences did not have a meaningful relationship with marital satisfaction. This means that participants who reported high prevalence of childhood trauma did not report lower or higher levels of marital satisfaction.

The findings for Ngando Location diverge from most of the findings from international studies which highlight a consistent negative relationship between childhood trauma and marital satisfaction. For instance, studies by Zhang and Li (2023) in China, Carter and Nguyen (2023) in the United States, and Patel and Jones (2023) in the United Kingdom, all report that people who have gone through emotional, physical and other forms of childhood trauma all tend to have lower levels of marital satisfaction. One major emphasis paced by all three studies was that unresolved adverse childhood experiences often manifest through high levels of conflict, poor communication, reduced intimacy among married couples.

Similar outcomes have been reported in some Sub-Saharan African countries. For instance, studies by Mensah and Owusu (2023) in Ghana, Khama and Motsumi (2023) in Botswana, Adeyemi and Okafor (2023) in Nigeria, all reported that childhood trauma experiences among married individuals could alter marital dynamics especially in areas like conflict resolution, trust, and emotional support. Also, another study in Ethiopia by Abebe and Tesfaye (2023) revealed that adverse childhood experiences among married individuals interfere with communication and emotional intimacy. Hence all studies on the international scene and within African countries all report that experiences of childhood trauma led to lower marital satisfaction which is in contrast to the study in Ngando where there was a weak positive relationship between both variables.

Studies that have been carried out in Kenya including those by Mwangi and Otieno (2023) in Wajir, Juma and Wambua (2023) in Nakuru, and Achieng and Karanja (2023) in Kisumu all report that couples with childhood adverse experiences and trauma were more likely to report marital dissatisfaction especially in areas like emotional intimacy, trust, and communication. Similarly, another study in Mombasa by Chibale and Mwenda (2023) reported how unresolved childhood trauma had a negative impact on emotional expression, conflict resolution, and hence leading to low marital satisfaction. The findings from Ngando which reported a weak positive relationship between childhood trauma and marital satisfaction stands as a contrast to all other studies presented in this section. This discrepancy could be attributed to moderating factors which are unique to the context of Ngando Location. Possible justification for the differences could include adaptive communication styles, community support systems, or cultural coping mechanism within marriages which may act as buffers against the impact of childhood trauma. Based on the unique findings of this study, it is necessary for other studies to be carried out to better understand how factors like social, cultural, and economic could influence and shape marital outcomes even with the presence of childhood trauma among couples.

Attachment theory could also be used to understand the non-significant relationship between childhood trauma and marital satisfaction in Ngando despite the differences with the findings from other studies. Although AT states that those with childhood trauma find it difficult to form secure attachment, build trust, and express intimacy, the weak positive correlation in Ngando suggests the presence of contextual cultural factors which may have acted as buffers against the impact of childhood trauma. For example, participants of the study might have experienced communal support systems, adaptive coping mechanisms, or cultural resilience which might have mitigated against negative impact in their marriages. The findings from Ngando location suggests that although insecure attachments might link adverse childhood experiences to marital satisfaction, such connections are not deterministic and factors such as protective social and relational environments could moderate the effects of trauma.

CONCLUSION

The study concluded there was a weak positive correlation between childhood trauma and marital satisfaction. However, this weak positive correlation was found to be non-significant. The following findings suggest that among the participants of this study, childhood trauma experiences did not have a meaningful relationship with marital satisfaction. This study confirmed a non-significant relationship between childhood trauma and marital satisfaction. Hence, it is highly recommended that policy makers in the public and private domains should integrate and enhance access to psychosocial support mechanisms in community structures like health, church programs, and community support structures in order to mitigate against the impact of trauma.

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