

Mental Wellbeing of Drug Addicts' Wives: Roles of Economic Strain, Marital Conflict, and Social Support

Kesejahteraan Mental Isteri Penagih Dadah: Peranan Tekanan Ekonomi, Konflik Perkahwinan dan Sokongan Sosial

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ABSTRACT

Low-income wives of drug-addicted individuals face significant life challenges, including economic strain, marital conflict, and the responsibility of raising children alone. These stressors are linked to low mental wellbeing. This study aims to explore the relationships between economic strain, marital conflict, social support, and mental wellbeing in this population. A cross-sectional correlational study was conducted with 132 low-income wives of drug addicts in Malaysia. Participants completed one set of questionnaire contains the Economic Strain Scale (ESS), Braiker-Kelly Marital Conflict Scale (BKMCS), Multidimensional Scale of Perceived Social Support (MSPSS), and the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS). Data analysis was performed using partial least squares structural equation modeling (PLS-SEM) with SmartPLS version 4.0. The path analysis revealed direct relationships between economic strain and marital conflict, and between social support and mental wellbeing. However, there was no direct relationship between marital conflict and mental wellbeing or between marital conflict and social support. The findings suggest that economic strain contributes to marital conflict, while social support plays a key role in enhancing mental wellbeing. These results underline the importance of psychoeducational strategies for supporting wives of drug addicts, particularly in emphasizing the value of social support networks to improve their mental health. This study highlights the need for targeted support systems for spouses of individuals with substance abuse issues, aiming to improve their mental wellbeing through social connections and support.

Keywords: low-income, economic strain, marital conflict, social support, mental wellbeing

ABSTRAK

Isteri berpendapatan rendah kepada individu yang ketagih dadah menghadapi cabaran kehidupan yang besar, termasuk tekanan ekonomi, konflik perkahwinan dan tanggungjawab membesarkan anak-anak secara sendirian. Tekanan-tekanan ini dikaitkan dengan kesejahteraan mental yang rendah. Kajian ini bertujuan untuk meneroka hubungan antara tekanan ekonomi, konflik perkahwinan, sokongan sosial, dan kesejahteraan mental dalam kalangan populasi ini. Kajian korelasional dan berbentuk keratan rentas telah dijalankan terhadap 132 isteri berpendapatan rendah kepada penagih dadah di Malaysia. Peserta kajian melengkapkan satu set soal selidik yang mengandungi alat ujian Economic Strain Scale (ESS), Braiker-Kelly Marital Conflict Scale (BKMCS), Multidimensional Scale of Perceived Social Support (MSPSS), dan Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS). Analisis data dilakukan menggunakan Partial Least Square SEM (PLS-SEM) berbantuan perisian SmartPLS versi 4.0. Analisis laluan menunjukkan terdapat hubungan langsung antara tekanan ekonomi dan konflik perkahwinan, serta antara sokongan sosial dan kesejahteraan mental. Walau bagaimanapun, tidak terdapat hubungan langsung antara konflik perkahwinan dengan kesejahteraan mental serta antara konflik perkahwinan dengan sokongan sosial. Penemuan ini mencadangkan bahawa tekanan ekonomi menyumbang kepada konflik perkahwinan, sementara sokongan sosial memainkan peranan utama dalam meningkatkan kesejahteraan mental. Hasil kajian ini menekankan pentingnya strategi psikopendidikan untuk menyokong isteri penagih dadah, terutamanya dengan menekankan nilai rangkaian sokongan sosial bagi meningkatkan kesejahteraan mental mereka. Kajian ini juga menyoroti keperluan untuk sistem sokongan yang disasarkan kepada pasangan individu yang mempunyai masalah penyalahgunaan bahan, dengan tujuan untuk meningkatkan kesejahteraan mental mereka melalui hubungan sosial dan sokongan.

Kata kunci: pendapatan rendah, tekanan ekonomi, konflik perkahwinan, sokongan sosial, kesejahteraan mental

INTRODUCTION

Drug addiction is one of the prevalent social issues that affects numerous countries worldwide. In Malaysia, the number of drug addicts receiving treatment at treatment and rehabilitation centres under the supervision of the National Anti-Drug Agency (AADK) was 25,267 individuals in 2018. This number increased to 26,080 in 2019, but decreased to 20,643 in 2020, and further dropped to 18,205 in 2021 (Department of Statistics Malaysia, 2022). However, the decrease in the number of drug addicts in 2020 and 2021 is not primarily due to a decrease in the actual number of addicts. The COVID-19 pandemic, which affected Malaysia and the world during that period, is a significant factor contributing to the declining trend in drug addiction. When considering the gender aspect of drug addicts, the majority are male compared to female. This is evident from the fact that in 2021, there were 17,268 male drug addicts compared to 937 female drug addicts. Drug addiction has various negative impacts, especially on the family system. The involvement of a family member in drug addiction issues has detrimental effects on the family structure, particularly when the addict is a husband or the head of the family. Insights from previous studies have found that mental health issues are among the primary topics of research concerning the wives of drug addicts. Among the mental health-related concerns frequently faced by wives of drug addicts are high levels of stress (Carney et al., 2021; Ólafsdóttir, 2020; Sarkar et al., 2016); low quality of life (da Costa et al., 2017; Fathi et al., 2020; Fereidouni et al., 2015; Schultz & Alpaslan, 2020); mental health problems like depression and anxiety (Bortolon et al., 2016; Fereidouni et al., 2015; Noori et al., 2015; Ólafsdóttir et al., 2018; Ólafsdóttir, 2020; Ventura et al., 2017; Vilela et al., 2019); and disrupted life functioning (Bekircan & Tanriverdi 2019). According to a study by Muhamad Hilmi Abdul Rahman et al. (2024), women who become heads of households due to divorce are exposed to high economic burdens as they have to raise their children on their own. This situation is also relevant to wives of drug addicts, who are often forced to assume the role of sole caregivers and providers for their families, further exacerbating their psychological and emotional strain.

This study is grounded in the Family Ecology Theory, founded by Bubolz and Sontag (2009). According to the Family Ecology Theory (Bubolz & Sontag, 2009), the wellbeing or quality of life of an individual family member is influenced by the interconnections between their environment, social factors, and surrounding culture. In this study, the wellbeing of wives of drug addicts is measured based on the concept of mental wellbeing. Mental wellbeing can be defined as the presence of positive emotions and effective functioning in an individual's life (Sirgy, 2021). The concept of mental wellbeing, as outlined by Taggart et al. (2015), consists of two perspectives: the hedonic perspective and the eudemonic perspective. The hedonic perspective examines an individual's subjective experience of happiness (affect) and life satisfaction as indicators of mental wellbeing. Conversely, the eudemonic perspective regards mental wellbeing as an individual's capacity for sound psychological functioning, fulfilling interpersonal relationships, and self-actualization. Based on these two viewpoints, Taggart et al. (2015) characterize mental wellbeing as an outcome of psychological functioning, encompassing an individual's ability to establish and maintain healthy relationships, alongside experiencing a gratifying and content quality of life. From the scrutiny of previous studies, among the variables frequently employed to examine contributors to mental health—whether positive or negative mental health—are factors like economic strain (Bekircan & Tanriverdi, 2019; Fereidouni et al., 2015; Noori et al., 2015; Sarkar et al., 2016; Schultz & Alpaslan, 2020; Ventura et al., 2017); marital conflict (Bekircan & Tanriverdi, 2019; Carney et al., 2021; Fathi et al., 2020; Fereidouni et al., 2015; Isaacs et al., 2019; Ólafsdóttir, 2020; Sarkar et al., 2016; Subekti et al., 2021; Ventura et al., 2017; Wilson et

al., 2019); and issues related to social support (Carney et al., 2021; Fathi et al., 2020; Fereidouni et al., 2015; Soares et al., 2016; Ventura et al., 2017; Wilson et al., 2019). Thus, the interrelation between economic strain, marital conflict, social support, and mental wellbeing constitutes the focus of this study.

The wellbeing of drug addict spouses in attaining mental wellness holds significance, as a state of good mental wellbeing enables them to effectively manage the pressures they encounter. It allows them to cultivate positive relationships with others and make sound decisions in navigating daily life. Previous research has primarily concentrated on negative mental health concepts or mental distress when studying drug addict spouses. There has been a lack of emphasis on investigating positive mental health aspects, such as the concept of mental wellbeing. It is crucial to delve into the study of mental wellbeing since the concept differs from that of negative mental health or mental distress. While the latter focuses on treating or reducing dysfunction, the former centres around enhancing mental welfare or quality of life (Sirgy, 2020). Furthermore, studies involving drug addict spouses within the context of Malaysia, particularly among the low-income group (household income less than RM4,849), are severely lacking. This is predominantly since most prior studies have been conducted in Western countries. This is evident from Birkeland et al. (2018), which conducted a scoping review to identify studies on the quality of life of partners of individuals with substance abuse issues. The findings revealed that previous studies often lacked a focus on partners who have children. Moreover, all the findings were derived from studies conducted in European countries. Out of the nine studies that investigated quality of life, only three studies delved into issues related to mental health or mental wellbeing. Additionally, among these nine studies, only two studies concentrated on drug addiction issues, while the others centred around alcohol addiction. Thus, the current study aims to address these gaps in the literature. In line with this, the general objective of this study is to ascertain the interrelations among economic strain, marital conflict, social support, and mental wellbeing among low-income drug addict wives in Malaysia. Figure 1 illustrates the conceptual framework for this study. Four hypotheses have been formulated to achieve the research objective:

- H1: Economic strain is positively significant related to marital conflict.
- H2: Marital conflict is negatively significant related to social support.
- H3: Social support is positively significant related to mental wellbeing.
- H4: Marital conflict is negatively significant related to mental wellbeing.

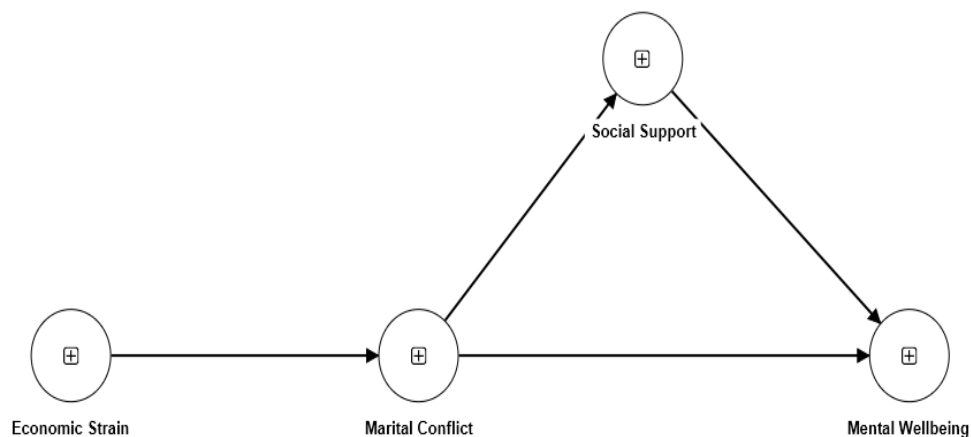


FIGURE 1. Conceptual framework of the study

LITERATURE REVIEW

Based on previous research highlights, it was found that studies focusing on the wives of drug addicts, especially among those with low income, are quite limited. In the context of research in Malaysia, a qualitative study focusing on the challenges faced by wives of drug addicts was conducted by Ezarina Zakaria et al. (2021). The findings of Ezarina Zakaria et al. (2021) study align with studies conducted in other countries, where wives of drug addicts tend to face challenges such as economic problems, high marital conflicts, lack of social support, and are more likely to experience mental health issues. However, research examining the interconnections between these challenges is hard to find, indirectly creating a gap in research and explaining why this study needs to be conducted.

Summarizing prior research, numerous studies indicate a positive correlation between economic strain and marital conflict (Barrington et al., 2022; Dew et al., 2021; French & Vigne, 2019; Gajos et al., 2022; Juhari et al., 2020; Laxman et al., 2019; Ngigi & Chepchieng, 2020; Park & Park, 2019; W. Park & Kim, 2018; Ross et al., 2019; Sawai et al., 2018; Turliuc & Candel, 2021; Wheeler et al., 2019; Zheng et al., 2021). Nevertheless, some studies suggest no direct link between economic strain and marital conflict (Crapo et al., 2021). Despite this, the research notably lacks investigations focusing on wives of drug addicts, especially within Malaysia. This gap echoes Sawai et al. (2018), call for more diligent exploration of economic strain and marital stability, especially in the Malaysian context and among diverse populations. Notably, previous studies have examined various populations, including low income couples (Barrington et al., 2022); general married couples (Afifi et al., 2018; Agboola & Oluwatosin, 2018; Dew et al., 2021; Gajos et al., 2022; Juhari et al., 2020; Ngigi & Chepchieng, 2020; W. Park & Kim, 2018; Ross et al., 2019; Turliuc & Candel, 2021; Wheeler et al., 2019; Zheng et al., 2021); remarried couples (Crapo et al., 2021; Laxman et al., 2019); couples living with in-laws (Park & Park, 2019); newly married couples (Sawai et al., 2018) and couples with children suffering from cancer (Lavi et al., 2018).

Turning to the relationship between marital conflict and social support, a review of past studies reveals a noticeable scarcity of investigations exploring this link, especially concerning low-income drug addict wives in Malaysia. Furthermore, the findings from these studies exhibit variability. Social support has been found to positively correlate with marital harmony and agreement (Abbas et al., 2019), associate positively with marital quality (Muslima & Herawati, 2018), and show an overall positive link with marital adjustment (Ahmad & Khan, 2018). However, some studies indicate no connection between social support and marital satisfaction (Abbas et al., 2019; Yazdani et al., 2016). Additionally, the reviewed studies reveal varying conceptualizations and measurements of social support and marital conflict across different contexts. Social support concepts include informal and formal support (Petra, 2019) and support from family and friends (Ahmad & Khan, 2018; Yazdani et al., 2016). Measured aspects of marital conflict encompass family pressure, violence, and husband's coercive control (Petra, 2019), marital adjustment (Abbas et al., 2019; Ahmad & Khan, 2018) and marital quality (Muslima & Herawati, 2018; Yazdani et al., 2016).

Similarly, research on the correlation between social support and mental wellbeing has shown limited investigations into the relationship between social support and the wellbeing of wives of drug addicts. A few studies have focused on wives of drug addicts (Petra, 2019; Soares et al., 2016), but these did not include wives of drug addicts in Malaysia. Consequently, expanding the literature review's scope to encompass diverse populations is necessary. Reviewing previous research, most findings suggest a connection between social support and mental wellbeing (Abbas

et al., 2019; Chang et al., 2018; Fauziah Ibrahim et al., 2017; Gan et al., 2019; Geldenhuys & Henn, 2017; Najwa Afifa Roshaizad et al., 2018; Petra, 2019; Qadir et al., 2015; Siti Marziah Zakaria et al., 2019; Soares et al., 2016; Sultan et al., 2018; Tu & Yang, 2016; Uddin et al., 2022; Wan Shahrazad Wan Sulaiman et al., 2021)

Another study aimed at investigating the link between marital conflict and positive mental health conducted by past researchers found that a high level of marital adjustment can enhance the quality of life among menopausal women in India (Sahu & Sharma, 2020). Similarly, a study in India by Bunga et al. (2022) revealed that increased domestic violence negatively correlates with marital satisfaction and wellbeing, while marital satisfaction positively correlates with wellbeing. These findings align with the results of Işık et al. (2020), which found a significant positive correlation between marital adjustment and life satisfaction among married couples in Turkey. Furthermore, Balaganeshan and Ragupathy (2019) conducted a study involving 30 wives of addicts in India to determine the relationship between marital conflict and psychological wellbeing, supporting previous findings that marital conflict negatively impacts psychological wellbeing.

In summary, the literature review underscores a prevalent positive correlation between economic strain and marital conflict, despite some exceptions. However, research concerning wives of drug addicts, especially within Malaysia, remains limited. Similarly, the relationship between marital conflict and social support presents mixed findings and a paucity of studies, particularly in the context of low-income drug addict wives in Malaysia. Moreover, the connection between social support and mental wellbeing is well-established, yet few investigations focus on wives of drug addicts, warranting broader research. Lastly, studies investigating marital conflict's impact on positive mental health highlight the significance of marital adjustment and satisfaction, while identifying marital conflict as a detrimental factor. In conclusion, these findings stress the necessity for comprehensive research in underexplored contexts to enrich our understanding of the intricate dynamics between economic strain, marital conflict, social support, and mental wellbeing.

METHODOLOGY

This study is quantitative study and employs a cross-sectional design along with questionnaire-based survey methodologies. This study is also a correlational study. A correlational study, according to Mat Roni et al. (2020), entails the gathering of data to ascertain whether there is a relationship between the measured variables and investigate the amount of the impact of various independent variables on the dependent variable. Since the primary objective of this research is to determine the relationship between economic strain, marital conflict, social support, and mental wellbeing, the decision to conduct a correlational study was an appropriate approach. Using a purposive sampling technique, 132 (N = 132) low-income drug addict wives of who are Malay, have at least one child under the age of 17, have a household income of less than RM4,360 per month, and whose husbands are receiving treatment at the Narcotic Addiction Rehabilitation Centre (PUSPEN) run by the National Anti-Drug Agency (AADK) in Malaysia were chosen as the study sample. The size of the study sample is chosen using statistical power calculations using the GPower software. The minimum sample size needed for this investigation is 119, which is at a confidence level of 95% ($=0.05$) and includes up to three independent constructs.

Permission to use the original author's questionnaire has been granted. All the measurement instruments used in the study were created in English. All the assessment tools were translated into Malay using the back-to-back translation approach by experienced translators from the Language Competence Development Centre (CALD), Universiti Putra Malaysia, as Malays were one of the selection criteria for the study participants. Before they were used in the study, the instruments were checked for content validity by two experts in developmental psychology and human development. The Economic Strain Scale (ESS) (Mills et al., 1992) is utilized to measure economic strain. ESS consists of 4 items and is assessed using a four-point Likert scale, ranging from "strongly disagree" to "strongly agree." The Cronbach's alpha values for ESS, used to determine reliability by previous researchers, are 0.86 (Muslihah Hasbullah@Abdullah, Najibah Mohd Zin & Saodah Wok, 2009) and 0.81 (Mills et al., 1992). In the current study, the internal consistency coefficient for ESS is 0.83 for the pilot study and 0.89 for the actual study. The measurement of marital conflict is conducted using the conflict subscale found within the Braiker-Kelly Marital Conflict Scale (BKMCS) (Braiker & Kelly, 1979). This measurement tool comprises 5 items and is assessed using a 5-point Likert scale, ranging from "not very much" to "very much" for items 1 to 3, and from "not very often" to "very often" for items 4 and 5. The Cronbach's alpha values for the Braiker-Kelly Marital Conflict Scale (BKMCS), used to assess reliability by previous researchers, range from 0.69 to 0.89 (Pressel, 2007; Johnson, 2006; Ki, 2017; Lam, 2016; Li et al., 2021; Lucas-Thompson, 2009; Ly, 2012; Melia, 2015; Seiter, 2019; Zahid & Tariq, 2020). In the current study, the internal consistency coefficient for BKMCS is 0.84 for the pilot study and 0.90 for the actual study. Social support is measured using the Multidimensional Scale of Perceived Social Support (MPSS) in this study, developed by Zimet et al. (1988). The MPSS comprises 12 items and is assessed using a 7-point Likert scale, ranging from 1 = strongly disagree to 7 = strongly agree. This measurement tool consists of three subscales: family support, friend support, and significant other support. According to Zimet et al. (1988), the overall reliability value of the MPSS is 0.88, while the reliability values for the subscales are 0.87 for the family subscale, 0.85 for the friend subscale, and 0.91 for the significant other subscale. In this study, the reliability of the MPSS questionnaire is 0.92 for the pilot study and 0.82 for the actual study. The Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS), developed by researchers from the Universities of Warwick and Edinburgh (Taggart et al., 2015), is utilized to measure mental wellbeing. SWEMWBS consists of 7 items and employs a 5-point Likert scale, ranging from "never" to "all the time." A study conducted by Tennant et al. (2007) found that SWEMWBS exhibited good reliability, with a value of 0.83. In the current study, the internal consistency coefficient for SWEMWBS is .68 for the pilot study and .83 for the actual study.

The Universiti Putra Malaysia Ethics Committee for Research Involving Human Subjects approved the study procedure. This study's data was collected through a series of questionnaires. Prior to the study, the Malaysian National Anti-Drug Agency (AADK) was granted permission to collect information about the wife from drug users (clients) at the involved Narcotics Addiction Rehabilitation Centre (PUSPEN). The drug addicts' wives were contacted by phone to request permission to participate in the study when their information was discovered. The questionnaire was subsequently disseminated via WhatsApp as a "Google form." Prior to the main study, a pilot study involving 30 wives of drug users seeking treatment at PUSPEN Batu Kurau and PUSPEN Perlop, Perak, was conducted. Statistical Package for the Social Sciences (SPSS) version 26 and Partial Least Squares-Structural Equation Modelling (PLS-SEM) with the use of Smart PLS 4.0 software were used to evaluate the acquired data once the actual investigation was finished.

RESULTS

COMMON METHOD VARIANCE

Before conducting other analytical tests, a Common Method Variance analysis was executed. Following Harman's Single Component approach, the initial factor accounted for the largest portion of the total variance, specifically 15.03% (which is less than 50%). The results from the factor analysis indicated the absence of any overarching factors, suggesting that there was no noteworthy presence of common technique bias within this dataset.

RESPONDENT'S PROFILE

The current study's demographic characteristics encompass age, education level, marriage duration, and the count of children under 17 years old. Results of the study showed that the majority of respondents fell within the age bracket of 31 to 40 years old, comprising 44.7% of the sample. Those aged 21 to 30 constituted 28.0% of respondents, while 24.2% were aged 41 to 50. Respondents aged over 51 constituted 2.3%, and only 0.8% were below 20 years old. In terms of education, the largest group of respondents (48.5%) had completed upper secondary school. Additionally, 26.5% completed junior secondary school, 9.8% held a diploma, 7.6% had a certificate, 4.5% had a bachelor's degree, 2.3% had completed primary school, and just 0.8% possessed a master's degree. Regarding marriage duration, the majority (27.3%) reported a marriage duration of 6 to 10 years. Around 22.7% had been married for less than five years or 11 to 15 years. For those married 16 to 20 years, the percentage was 12.9%. Furthermore, 7.6% reported a marriage duration of 21 to 25 years, 6.1% 26 to 30 years, and merely 0.8% indicated a marriage duration of over 31 years.

ASSESSMENT OF MEASUREMENT MODEL

Since social support is a multidimensional variable, the application of the hierarchical component model, also known as the higher order components (HOC), in the context of PLS-SEM has been utilized (Sarstedt et al., 2019). The application of the disjoint two-stage approach was chosen because the study's focus is to minimize parameter bias in the relationships of the structural model. Therefore, the assessment of the measurement model in this study involves two stages: assessment at the lower order component (LOC) level and assessment at the higher order component (HOC) level. Among the tests conducted at the LOC and HOC levels are assessments of indicator reliability, internal consistency, convergent validity, and discriminant validity (Hair et al., 2021). The measurement model for LOC is illustrated in Figure 2.

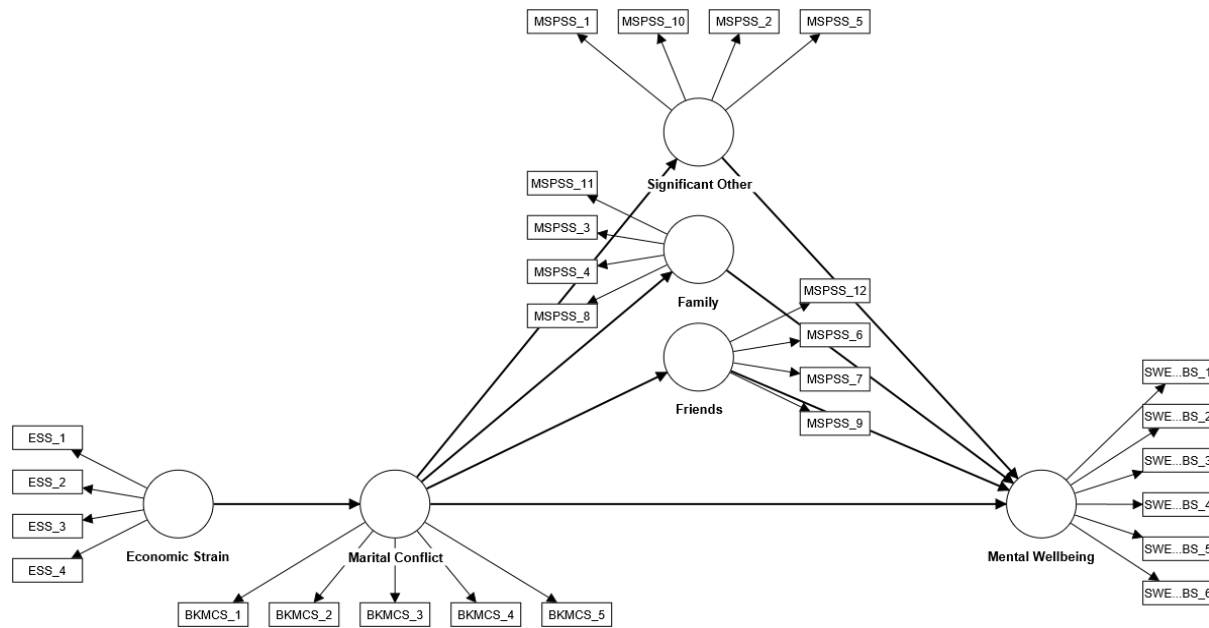


FIGURE 2. Measurement Model for Lower Order Component (LOC)

MEASUREMENT MODEL FOR LOWER ORDER COMPONENTS

The initial step in assessing the measurement model involves determining the extent to which the variance of each indicator is explained by the measured construct. Identification of the variance explained by this construct's indicators can be achieved through the method of indicator reliability. According to Hair et al. (2021), the recommended value for the loading of each indicator is at least 0.708. This value signifies that the construct explains 50 percent of the indicator's variance. However, indicator loadings between 0.40 and 0.708 are still acceptable if the reliability, internal consistency, and convergent validity values surpass the specified minimum thresholds. Nevertheless, if an indicator's loading is less than 0.40, it should be removed from the measurement model.

Based on Table 1, the loading values for all items within the first order constructs exceed the thresholds set by Hair et al. (2021). The second step involves assessing the internal consistency reliability through the evaluation of composite reliability (CR). According to Hair et al. (2021), internal consistency is considered satisfactory when the composite reliability value ranges from 0.60 to 0.70. A construct is deemed to have good internal consistency when the composite reliability value falls between 0.70 and 0.90. However, a composite reliability value exceeding 0.95 indicates potential issues with internal consistency due to the likelihood of overlap among the indicators within the construct. Based on Table 1, all constructs were found to have good internal consistency reliability as they possess values ranging from 0.877 to 0.928. The third step in assessing the measurement model involves evaluating convergent validity for each construct, which is measured based on the average variance extracted (AVE) value. The minimum acceptable AVE value to demonstrate convergent validity for a construct is 0.50 (Hair et al., 2021). Table 1 also reveals that all constructs in this study have good convergent validity as they possess AVE values > 0.50.

TABLE 1. Measurement model for the lower order component

Construct/associated items	Loading	Composite Reliability (CR)	Average Variance Extracted (AVE)
Economic strain		0.925	0.757
ESS_1	0.904		
ESS_2	0.912		
ESS_3	0.881		
ESS_4	0.776		
Marital conflict		0.922	0.703
BKMCS_1	0.735		
BKMCS_2	0.892		
BKMCS_3	0.809		
BKMCS_4	0.884		
BKMCS_5	0.863		
Significant other		0.928	0.763
MSPSS_1	0.910		
MSPSS_2	0.884		
MSPSS_5	0.848		
MSPSS_10	0.850		
Family		0.910	0.718
MSPSS_3	0.892		
MSPSS_4	0.854		
MSPSS_8	0.805		
MSPSS_11	0.836		
Friends		0.888	0.665
MSPSS_6	0.828		
MSPSS_7	0.825		
MSPSS_9	0.844		
MSPSS_12	0.761		
Mental wellbeing		0.877	0.506
SWEMWBS_1	0.621		
SWEMWBS_2	0.810		
SWEMWBS_3	0.744		
SWEMWBS_4	0.704		
SWEMWBS_5	0.742		
SWEMWBS_6	0.590		
SWEMWBS_7	0.745		

The fourth step in assessing the measurement model involves evaluating discriminant validity. Discriminant validity assessment is carried out to empirically observe the differentiation between one construct and other constructs within a structural model. Hair et al. (2021) recommends using the Heterotrait–Monotrait ratio (HTMT) for discriminant validity assessment. Discriminant validity issues arise when the HTMT value exceeds 0.90, indicating that a construct measures the same concept as another construct (Gold et al., 2001). Table 2 presents HTMT values for examining discriminant validity among constructs. Based on this table, it is found that all constructs exhibit good discriminant validity as their HTMT values are < 0.90.

TABLE 2. Discriminant validity for lower order component

	1	2	3	4	5	6
1. Economic strain	-					
2. Marital conflict	0.243	-				
3. Significant other	0.147	0.075	-			
4. Family	0.086	0.122	0.246	-		
5. Friends	0.057	0.122	0.234	0.175	-	
6. Mental wellbeing	0.089	0.135	0.181	0.286	0.277	-

Discriminant validity established when HTMT < .90 (Gold et al., 2001)

MEASUREMENT MODEL FOR HIGHER ORDER COMPONENT

After assessing the measurement model at the LOC level, the next step is the evaluation of the measurement model for the higher order component (HOC) (Figure 3). Based on Table 3, the reliability of indicators, as indicated by the loading values, surpasses all the established criteria, exceeding the threshold of 0.4. Similarly, the composite reliability for each construct meets the specified criteria, ranging from 0.712 to 0.925. However, concerning convergent validity, the social support construct does not meet the predefined condition, with an Average Variance Extracted (AVE) value less than 0.5. Consequently, one dimension, namely the significant other support dimension, has been removed from the social support construct to ensure convergent validity based on AVE values greater than 0.5, as shown in Table 4. Furthermore, Table 5 displays the discriminant validity for the higher order component, and it is found that all constructs exhibit satisfactory discriminant validity with values of Heterotrait-Monotrait (HTMT) less than 0.90 (Gold et al., 2001).

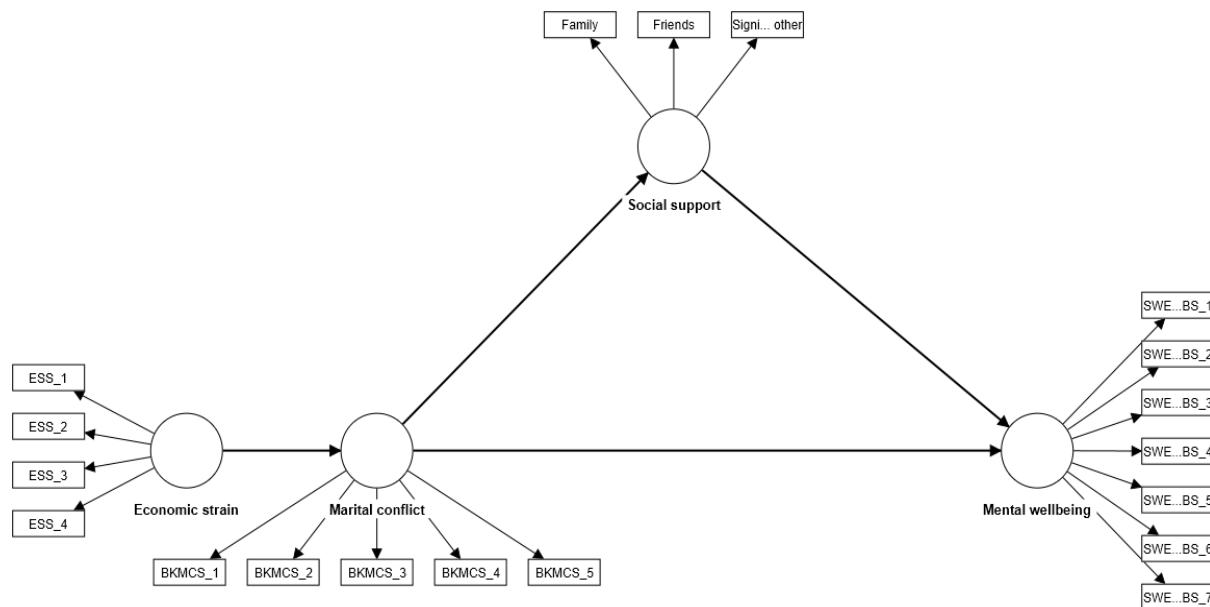


FIGURE 3. Measurement Model for Higher Order Component (HOC)

TABLE 3. Reliability and convergent validity for HOC

Construct/associated items	Loading	Composite Reliability (CR)	Average Variance Extracted (AVE)
Economic strain		0.925	0.757
ESS_1	0.904		
ESS_2	0.912		
ESS_3	0.882		
ESS_4	0.776		
Marital conflict		0.921	0.701
BKMCS_1	0.736		
BKMCS_2	0.900		
BKMCS_3	0.818		
BKMCS_4	0.871		
BKMCS_5	0.853		
Social support		0.712	0.453
Significant other	0.600		

Family	0.714		
Friends	0.698		
Mental wellbeing		0.876	0.505
SWEMWBS_1	0.609		
SWEMWBS_2	0.809		
SWEMWBS_3	0.751		
SWEMWBS_4	0.697		
SWEMWBS_5	0.740		
SWEMWBS_6	0.605		
SWEMWBS_7	0.740		

TABLE 4. Reliability and convergent validity for HOC after deletion of construct

Construct/associated items	Loading	Composite Reliability (CR)	Average Variance Extracted (AVE)
Economic strain		0.925	0.757
ESS_1	0.904		
ESS_2	0.912		
ESS_3	0.882		
ESS_4	0.776		
Marital conflict		0.921	0.702
BKMCS_1	0.726		
BKMCS_2	0.900		
BKMCS_3	0.820		
BKMCS_4	0.874		
BKMCS_5	0.857		
Social support		0.726	0.570
Family	0.781		
Friends	0.728		
Mental wellbeing		0.877	0.507
SWEMWBS_1	0.635		
SWEMWBS_2	0.811		
SWEMWBS_3	0.732		
SWEMWBS_4	0.716		
SWEMWBS_5	0.746		
SWEMWBS_6	0.565		
SWEMWBS_7	0.751		

TABLE 5. Discriminant validity for HOC

	1	2	3	4
Economic strain				
Marital conflict	0.243			
Social support	0.134	0.269		
Mental wellbeing	0.089	0.135	0.685	

Discriminant validity established when HTMT < .90 (Gold et al., 2001)

STRUCTURAL MODEL ASSESSMENT

Once the measurement model meets the specified criteria, an evaluation of the structural model is carried out to test the formulated hypotheses. However, prior to hypothesis testing, an assessment of multivariate normality and collinearity concerns needs to be conducted. Accordingly, an evaluation of multivariate normality was performed using Mardia's measures for multivariate skewness and multivariate kurtosis. The outcomes indicated that the data collected did not exhibit multivariate normality, as indicated by Mardia's multivariate skewness ($\beta = 4.978$, $p < 0.01$) and Mardia's multivariate kurtosis ($\beta = 42.457$, $p < 0.01$). Consequently, following the recommendations of Hair et al. (2021), the path coefficients, standard errors, t-values, and p-values

for the structural model were reported using a resampling bootstrapping technique with a sample size of 10,000 (Ramayah et al., 2018).

The assessment for multicollinearity issues was also conducted based on the Variance Inflation Factor (VIF) values. The Inner VIF was employed to address concerns related to collinearity. The VIF values were found to be significantly below the threshold of 3.33, as prescribed by Diamantopoulos and Siguaw (2006), as illustrated in Table 6. Hence, there are no significant multicollinearity problems present within this model.

TABLE 6. VIF values for collinearity issue

Relationship	VIF
Economic strain → Marital conflict	1.000
Marital conflict → Social support	1.000
Marital conflict → Mental wellbeing	1.000
Social support → Mental wellbeing	1.000

The path coefficient of the structural model was analysed to investigate the aim of this research using the bootstrap re-sampling method (with 10,000 re-samples). The value of R^2 was 0.117, indicating that approximately 11.7% of the variation in mental wellbeing could be accounted for by marital conflict and social support. To explore the relationships between variables, as presented in Table 7, economic strain exhibited a positive correlation ($\beta = 0.237$, $t = 3.214$, $p < 0.05$) with marital conflict. Similarly, social support demonstrated a positive correlation ($\beta = 0.337$, $t = 3.774$, $p < 0.05$) with mental wellbeing. As a result, H1 and H3 were supported. However, the results indicated that there was no significant relationship between marital conflict and mental wellbeing ($\beta = -0.058$, $t = 0.493$, $p > 0.05$). Furthermore, marital conflict was also found to have no significant relationship with social support ($\beta = -0.003$, $t = 0.018$, $p > 0.05$). Therefore, H2 and H4 were not supported.

TABLE 7. Hypothesis testing direct effects

Hypothesis	Relationship	Coefficient	T statistics	P values
H1	Economic strain → Marital conflict	0.237	3.214	0.001
H2	Marital conflict → Social support	-0.003	0.018	0.493
H3	Social support → Mental wellbeing	0.337	3.774	0.000
H4	Marital conflict → Mental wellbeing	-0.058	0.493	0.311

Additionally, following the guidance of Shmueli et al. (2019), a proposed method called PLSpredict was employed. This technique involves a holdout sample-based approach that generates predictions at the case level for individual items or constructs using PLSpredict, coupled with a 5-fold procedure to assess predictive relevance. According to Shmueli et al. (2019), if all differences between items (PLS-LM) are lower, it signifies robust predictive power. Conversely, if all differences are higher, predictive relevance is not confirmed. If most differences are lower, there is moderate predictive power, and if only a minority are lower, predictive power is weak. Based on the results in Table 8, all the errors of the PLS model were found to be lower than those of the LM model. Consequently, it can be inferred that the model exhibits strong predictive power.

TABLE 8. PLSpredict result

Item	PLS RMSE	LM RMSE	PLS-LM RMSE	Q ² predict
SWEMWBS_1	0.906	0.943	-0.037	0.043
SWEMWBS_2	0.879	0.918	-0.039	0.049
SWEMWBS_3	1.032	1.081	-0.049	-0.008
SWEMWBS_4	0.844	0.886	-0.042	0.002
SWEMWBS_5	0.838	0.872	-0.034	-0.071
SWEMWBS_6	1.207	1.292	-0.085	-0.007
SWEMWBS_7	0.814	0.858	-0.044	-0.013

DISCUSSION

H1: ECONOMIC STRAIN IS POSITIVELY SIGNIFICANT RELATED TO MARITAL CONFLICT

The study's results reveal a significant positive correlation between economic strain and marital conflict among low-income drug-addicted wives. In other words, this finding indicates that as economic strain increases among low-income drug-addicted wives, their marital conflicts also intensify. The economic strain faced by families generally leads to difficulties in obtaining necessities such as food, drink, and comfortable housing. Given that the respondents in this study belong to the lowest income group, it is assumed that they face exceedingly high economic strain, making it challenging to acquire essential needs. Insufficiency in necessities within these families can potentially trigger conflicts, arguments, and disputes between partners. This perspective is supported by Rosnah Ismail (2004) study on Malay couples in Malaysia, which found that the lack of basic necessities due to financial constraints tends to spark conflicts between spouses. In the context of husband involvement in drug addiction, the use of money by husbands to purchase drugs is also seen as a catalyst for marital conflicts. Drug-addicted wives might perceive their husband's prioritizing money for drugs over providing for the family's basic needs (Ezarina Zakaria et al., 2021). This situation signifies neglect of responsibilities by husbands, which is notable in the Malay family context where husbands are considered the primary breadwinners (Yaacob Harun, 1993). Although in the Malay and Islamic context, a wife should not defy her husband's commands, according to Yaacob Harun (1993), Malay women hold a significant voice in all major decisions made by their husbands, and their role in the family gives them the right to criticize any incorrect behaviour or decisions made by their husbands. Consequently, such criticism from wives regarding neglect of responsibilities is seen as a factor contributing to marital conflicts.

These findings align with several previous studies that found a positive relationship between economic strain and marital conflict (Afifi et al., 2018; Agboola & Oluwatosin, 2018; Barrington et al., 2022; Dew et al., 2021; Dillon et al., 2015; French & Vigne, 2019; Gajos et al., 2022; Juhari et al., 2020; Lavi et al., 2018; Laxman et al., 2019; Ngigi & Chepchieng, 2020; T.-Y. Park & Park, 2019; W. Park & Kim, 2018; Ross et al., 2019; Sawai et al., 2018; Turliuc & Candel, 2021; Wheeler et al., 2019; Zheng et al., 2021), but it contrasts with the findings of the Crapo et al. (2021).

H2: MARITAL CONFLICT IS NEGATIVELY SIGNIFICANT RELATED TO SOCIAL SUPPORT

The analysis results revealed the absence of a significant positive correlation between marital conflict and social support. Social support, as posited in the family ecological theory, is linked to the concept of human resources, involving roles in aiding families or their members in achieving

goals, expectations, and demands. It also encompasses the provision of knowledge, skills, and emotional attributes like affection, love, health, energy, and time (Rumaya Juhari & Rozumah Baharudin, 2019). Although Malay culture is associated with collectivist values, which promote mutual assistance within society (Melati Sumari et al., 2020), this perspective might not be applicable in the context of marital conflict. In Malay culture, marital conflicts are often considered internal family matters, necessitating concealment and confidentiality from outsiders (Mariam Abd Majid et al., 2020). Moreover, the influence of Islam in Malay marriages reinforces the dominant and authoritative role of husbands, requiring decisions to be made by the husband and prioritizing familial opinions over external influences (Yaacob Harun, 1993).

When examining the context of wives of drug addicts, the lack of correlation between marital conflict and social support might be attributed to the wives' tendency to withdraw from social interactions (Fathi et al., 2020) and the negative societal perceptions toward them (Sarkar et al., 2016). The withdrawal from social interactions and the negative societal perceptions indirectly limits the availability of social support. Concerning husband-related factors, the findings could stem from the controlling and coercive behaviour exhibited by husbands, which extend to dictating the wife's interactions, including her social connections. According to Petra (2019), drug addicts often exert high levels of control and coercion over their wives, making it difficult for the wives to access support from their social networks. These findings align with the outcomes of studies by Abbas et al. (2019) and Yazdani et al. (2016), which similarly reported no significant correlation between marital conflict and social support.

H3: SOCIAL SUPPORT IS POSITIVELY SIGNIFICANT RELATED TO MENTAL WELLBEING

The analysis results indicated a significant positive correlation between social support and mental wellbeing. These findings demonstrate that higher levels of social support received by low-income drug-addicted wives correspond to better mental wellbeing. Therefore, the support obtained from family and friends plays a pivotal role in enhancing their mental wellbeing. The earnestness of the support, emotional sharing, and collaborative decision-making within the family and friend networks contribute to drug-addicted wives feeling hopeful in life, valued, calm, capable of problem-solving, clear-minded, connected with others, and empowered in decision-making. Generally, family and friends represent the closest and most interconnected group to drug-addicted wives. They share the same identity, whether through blood relations or common thought patterns and behaviors. The influence of Malay culture, characterized by collectivism, in this study can also explain the relationship between these variables. As described by Orford et al. (2001), collectivist cultures emphasize individuals seeing themselves as part of a group, prioritizing relationships, striving to conform, valuing emotions and group members' needs, and acknowledging interdependence among individuals. The shared identity between drug-addicted wives and their family and friends renders the support they receive more meaningful and effective (Anisman, 2015). These study findings could also be attributed to the enhancement of self-esteem due to the support received by drug-addicted wives (Chang et al., 2018). In the context of Muslim family support, guidance and supervision from parents or in-laws are crucial not only during problematic times but also for maintaining the wellbeing of their children's marriages (Fadhullah Mohd Fadil, 2017). This aligns with the roles or functions of a family outlined by Rumaya Juhari and Rozumah Baharudin (2019), including providing protection, economic assistance, caregiving, mediating, educating, and adapting. Through the provision of social support from family members, they fulfill these functions for drug-addicted wives and indirectly contribute to improving their wellbeing. Meanwhile, support from friends or neighbors is also vital in assisting husband-wife pairs in both

physical and mental aspects (Fadhullah Mohd Fadil, 2017). Friends' caring attitudes toward the issues faced by drug-addicted wives not only offer emotional relief but might also provide input for resolving problems and thus improving their mental wellbeing. These study findings align with several previous studies that found a positive correlation between social support and wellbeing (Abbas et al., 2019; Petra, 2019; Soares et al., 2016; Sultan et al., 2018).

H4: MARITAL CONFLICT IS NEGATIVELY SIGNIFICANT RELATED TO MENTAL WELLBEING

The study findings revealed no significant negative correlation between marital conflict and mental wellbeing among low-income drug-addicted wives. Based on these findings, despite facing relationship conflicts such as arguments, fights, emotional outbursts, and engaging in negative communication with their partners, drug-addicted wives' mental wellbeing remains unaffected, and they might still be capable of functioning and maintaining a positive outlook on life. This situation can potentially be explained through the concept of hedonic adaptation, which posits that an individual's wellbeing tends to return to its baseline state, regardless of the positive or negative events they encounter in life. According to Kettlewell et al. (2020), individuals can adapt and returning to their original level of wellbeing even after experiencing negative life events, depending on a certain period of time. In the context of this study, the average duration of marriage for respondents was 11 years, and this period is assumed to allow drug-addicted wives to adapt to the marital conflicts they face, indirectly not affecting their mental wellbeing.

Moreover, the influence of Islamic beliefs in respondents' lives is also assumed to have an impact on the study's findings. Concepts such as acceptance (*redha*) and trust in Allah's decree led respondents to perceive the marital conflicts they experience as life tests. According to Fadhullah Mohd Fadil (2017), *redha* refers to sincere acceptance and is the final path after married couples have tried their best in any challenging situation. These study findings align with Alzyoud (2020) and Deepa (2017), which found that marital aspects such as adjustment and conflict were not correlated with psychological wellbeing. Additionally, Riaz et al. (2022) also found that marital conflict was not correlated with various dimensions of wellbeing, such as autonomy, self-acceptance, and positive relationships. However, it's important to note that all three of these studies were conducted in different contexts from the present study.

IMPLICATION FOR PSYCHOEDUCATION

The study highlights that economic strain significantly contributes to marital conflict among low-income drug-addicted wives and their husbands in Malaysia. Therefore, it is essential to enhance their economic status to reduce marital conflicts. Psychoeducational efforts should focus on improving self-skills, exploring career opportunities, and financial management, led by psychologists. These efforts can help drug-addicted wives develop the necessary skills to meet job market criteria, ultimately reducing their economic dependence on their husbands. Utilizing models like Holland's model can assist in identifying suitable career paths based on individual personalities and interests (Kidd, 2006). Furthermore, financial management skills are crucial for achieving economic stability and mitigating the impact of economic strain on marital conflict.

The study also underscores the importance of social support from family and friends in enhancing the mental wellbeing of drug-addicted wives. However, previous research suggests that these wives tend to avoid social engagement, which needs to be addressed. Social support has been shown to improve mental wellbeing, indicating the need to tackle this avoidance behavior.

Psychology practitioners and counselors can initiate awareness campaigns and outreach efforts within the community to reduce stigma and negative perceptions, thereby encouraging appropriate social support.

In the Malaysian context, the implementation of psychoeducational interventions should be culturally sensitive and relevant. Integrating local cultural practices and beliefs into the interventions can enhance their acceptance and effectiveness. Additionally, community-based mental health services should be utilized to address economic strain and marital conflict, ensuring accessibility for marginalized populations. Collaboration with local stakeholders, including community leaders and organizations, is essential for tailoring interventions to the population's needs and ensuring community support. By focusing on these areas, psychoeducational interventions can effectively address the economic, social, and mental health challenges faced by low-income drug-addicted wives in Malaysia, ultimately improving their overall wellbeing.

LIMITATIONS AND FUTURE RESEARCH DIRECTION

Several limitations related to the conducted study have been identified. Firstly, concerning the sample size and sampling method, this study utilized a relatively small sample size and purposive sampling. Consequently, generalization to low-income drug-addicted wives in Malaysia cannot be made. The second limitation pertains to the research methodology, specifically the cross-sectional design and quantitative approach. The cross-sectional design employed prevents the exploration of causal relationships and effects. Additionally, the quantitative study approach can only establish correlations between the variables examined, but it cannot elucidate how these relationships occur. While qualitative studies have explored the experiences of drug-addicted wives in Malaysia, as conducted by Ezarina Zakaria et al. (2021), qualitative research aimed at explaining the interrelationships between variables in this study, especially among low income drug-addicted wives in Malaysia, remains necessary.

Thirdly, mental wellbeing is associated with various factors, including individual, familial, and contextual factors. The selection of variables in this study focused on only a few factors, particularly those within the family ecological theory. The ability of other factors, as suggested by the family ecological theory, to influence mental wellbeing could not be ascertained. Based on the study findings, it was observed that the constructed model exhibited strong predictive power through the analysis conducted using PLSpredict. Therefore, future studies are recommended to use the constructed model in this study as a foundational reference for investigating the mental wellbeing of low-income drug-addicted wives in Malaysia. In terms of sample selection, future research is advised to involve drug-addicted wives from the M40 and T20 economic groups, as this study only focused on the low-income group which is B40. Involvement of these three economic groups would enable a comparative examination of the mental wellbeing of drug-addicted wives. Apart from quantitative studies, future research could also employ experimental designs to assess the effectiveness of interventions involving social support on the mental wellbeing of drug-addicted wives. This recommendation stems from the key finding of this study, which identified social support as a significant factor influencing mental wellbeing.

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ETHICS APPROVAL

Ethical approval for this study was obtained from the Universiti Putra Malaysia Human Research Ethics Committee (Universiti Putra Malaysia Human Research Ethics Committee) with Reference No: JKEUPM-2020-406.

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