Adaptation and Validation of the Revised Dyadic Adjustment Scale in Bangla (R-DAS Bangla)

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Abstract

Background: The quality of marital relationships has been demonstrated to be an important indicator of adult, couple, and child well-being. There is considerable evidence that low marital quality is a significant risk factor for developing psychiatric disorders. The gold standard Revised Dyadic Adjustment Scale (RDAS) is widely used to assess couple relationships and quality of marriage.

Aim: The purpose of the study was to develop a culturally adapted and validated Bangla version of RDAS for Bangladeshi couples.

Methods: The descriptive type of cross-sectional study was conducted in the Department of Psychiatry, Bangabandhu Sheikh Mujib Medical University, Dhaka, during the period from July 2017 to June 2018. Total of 100 samples were taken. After taking informed consent, couple of both sex, aged > 18 were asked to complete the socio-demographic questionnaire and bangle version of RDAS. RDAS Bangla was applied by 2 raters for inter-rater reliability. Validity was assessed by content validity and factor analysis. Reliability was assessed by internal consistency and inter-rater reliability.

Results: Content validity was perfect as item-level content validity indexes (I-CVIs) were one except for two items and scale-level content validity index (S-CVI) was 0.90. In two factor model, no item had salient loading on more than one factor and there were no items that failed to load on either factor. Communalities were ranged from 0.39 to 0.87. Cronbach's alpha value for R-DAS Bangla total, consensus, satisfaction and cohesion subscales were 0.85,

0.78, 0.80 and 0.62 respectively. Intra-class correlation coefficients (ICCs) for inter-rater reliability were ranged from 0.68 to 0.97 and Cohen's kappa was 0.89. All values represented that the R-DAS Bangla was valid and reliable scale.

Conclusion: RDAS Bangla is a valid, reliable and useful scale for a assessing couple relationship and quality of marriage Bangladesh context.

Keywords: RDAS Bangla version; Factor analysis; Validity; Reliability; Translation

1. Introduction

Marriage is the union of a man and a woman who make a permanent commitment to one another of the sort that is normally (intrinsically) satisfied by bearing and rearing children together. Marriage is significant in itself, yet its innate direction to the bearing and raising of children adds to its particular structure, including standards of monogamy and loyalty [1]. The development and maintenance of relationships between couples have always served as a fascinating topic and close relationship requires engaging in a variety of relationship maintenance behaviors such as forgiving, accommodating, providing support, self-disclosing, and expressing gratitude [2-5].

Nowadays, the number of marriages end up has been increasing dramatically a due to lack of the marital satisfaction. Marital satisfaction is a process of adapting marital relationship between partners in such a way as to avoid or resolve conflicts so that they can feel satisfied with the marriage and each other. Researchers have consistently found that marital satisfaction tends to decrease over time [6]. From different studies, it was found that many aspects of marital satisfaction changed as results of having a child [7, 8]. Marital satisfaction can be changed by couple-level characteristics such as the duration of a relationship, religious frequency, economic stability and a significant negative relationship was also found between parental status and marital satisfaction [9, 10]. Few factors such in-laws relationship, communication, understanding, education of partner, compromise, sexual satisfaction and dual earning were also responsible for marital satisfaction [11]. Personality type, emotional stability, psychological factors i.e, depression, affection, time spent together, single and dual-career, extramarital affairs may be the potential factors affecting marital satisfaction and those factors may varies from the view of husband and wife.

Various marital Satisfaction Scale (MSS) has been used to examine how marital satisfaction affects couples well-being. Among them, the Revised Dyadic Adjustment Scale (RDAS) is regarded as a gold standard, which is the revised version of the Dyadic Adjustment Scale (DAS). DAS has been developed by Spanier (1976) for marital adjustment and accepted by researchers and clinicians [12, 13]. Thirty two-item instruments and four subscales: dyadic satisfaction, dyadic cohesion, dyadic consensus and affectional expression have been used to score marital quality. Although the overall scale has adequate strengthen of the accuracy of its outcomes, most of the 32 items were unnecessary and that factor analysis failed to reproduce the four subscales for DAS [14]. The RDAS is a shortened and revised version of the DAS. The 14-items form RDAS have been used for assessing marital

adjustment as well as therapeutic and intervention consequences with three remaining subscales, consensus, cohesion and satisfaction [15].

Many studies reported that there was a drastic increase in the divorce rates in Bangladesh. According to research conducted by Nari Nirjatan Protirodh Cell (Women's Repression Prevention Cell) under the women and children's affairs ministry of Bangladesh, and data compiled by the directorate of women's affairs, from March 1995 to March 2013 in the six divisions of the country, the total number of divorce applications was 1,730. Of these applications, 1,371 were in Dhaka division, 137 in Chittagong, 101 in Barisal, 72 in Khulna, 48 in Sylhet and 1 in Rajshahi [16]. According to the findings of the Bangladesh Bureau of Statistics (BBS), the divorce rate has increased by 34% in the last seven years. At least 50,000 divorce applications were filed in the capital city of Dhaka in the last six years [17]. To facilitating marital research in Bangladesh, the Revised Dyadic Adjustment Scale Bangla version (RDAS-B) can play a significant impact on mental health providers and medical professionals. RDAS-B can be used as a tool by mental health providers to track changes in couple relationships and inform clinical decisions related to treatment approaches and termination or transferal [18, 19]. Utilizing the RDAS-B as an assessment-based intervention would strengthen not only the accuracy of the outcomes but also gives clinicians a specific direction that they can focus on treatment and interventions [20]. For example, providers may use the specific items and subscales to address areas of strengths and weaknesses for the couple. RDAS-B may be used by clinicians as a triage instrument to assess couples who seek medical care where relational treatment may aid their mental or physical health treatment and to assess pre- and post-treatment changes during treatment. Marital quality may be used to inform prenatal care planning, comprehensive family plans, chronic illness treatment plans, treatment of patients [21-24]. Thus, this translated and validated instruments may be used by mental health professionals in evaluation and triage as well as providing a credible informant for clinical decisions. The main aim of this study was to develop a culturally adapted and validated Bangla of RDAS to assess the quality of marriage in Bangladesh.

2. Materials and Method

2.1 Participants

The sample for this study consisted of 100 patients attending inpatient and outpatient department of Psychiatry of Bangabandhu Sheikh Mujib Medical University (BSMMU) from July 2017 to June 2018. A cross-sectional study design was used to collect data for this analysis. All participants provided the following sociodemographic data: age, sex, family status, economic condition, resident, religion, occupation and level of education. Adult married couples maintaining heterosexual relationship were considered as an inclusion criteria for this study and the following were established as exclusion criteria: (a) age less than 18 years old, (b) have no relationship currently, (c) Being in a same-sex relationship, (d) Those patients who did not give consent for the participation in this study, (e) Severely debilitated and unconscious patients.

2.2 Instruments

2.2.1 Sociodemographic questionnaire: Various items were included to assess sociodemographic and personal variables of the participants such as age, sex, family status, economic condition, resident, religion, occupation and level of education.

2.2.2 Bangla version of the revised dyadic adjustment scale: The Revised Dyadic Adjustment Scale (RDAS) was scale was developed by Busby et al [15] and it was translated into Bangla. This is a self-report questionnaire that assesses seven components of couple relationships within three categories such as consensus in decision making, satisfaction in the relationship and cohesion as seen through activities and discussion. The RDAS includes only 14 items and scores run from 0 to 69. The cut-off score for the RDAS is 48 with the end goal that scores of 48 or more show non-distress and scores of 47 and underneath demonstrate conjugal/relationship distress. The RDAS is a direct evaluation that can be finished effectively in a short measure of time and can effectively differentiate between distressed and non-distressed relationships.

2.3 Translation

RDAS was translated into Bangla by two persons having competency in both Bangla and English. The first one was a psychiatrist and the second one was a non-medical person. These two translations were synthesized into one translation. Any discrepancies in the report of translation were resolved. Then, it was translated back to the original English version by the previous translators. An expert committee (4 psychiatrists, 2 translators and a language professional) reviewed all the reports and produced a pre-final version. The final version was produced after pre-testing and approved by the expert committee.

2.4 Ethical considerations

Ethical issues were carefully duly for this study. Before starting this study, the research protocol was approved by the IRB (institutional review board) of BSMMU, Dhaka. In this study, precaution was taken to protect the confidentiality of the participants. Verbal and informed written consent was obtained from the participants by maintaining strict privacy.

2.5 Statistical analysis

Data analysis was performed by statistical package for social science (SPSS), version-20. Statistical analysis was done using frequencies and percentages. Principal factor analysis was conducted to empirically verify whether the scores from the Bangla version of the protocol yielded the theoretically expected factors. Pearson's correlation test, Spearman's rank correlation test were used to find the correlation between two raters [25]. Cronbach's alphas were calculated to find internal consistencies and the intra-class correlation coefficient was used to calculate inter-rater reliability [26]. Cohen's kappa coefficient was used to measure inter-rater agreement [25]. All tests were two-tailed and $p<0.05$ considered statistically significant. All data collected by interviews were assembled. Pattern and categories of data related to key issues were examined and divided into categories. The categories of data were described as required. Descriptive approaches were adopted to describe the findings of the study.

3. Results

3.1 Socio-demographic characteristics of the study population

Table 1 shows the socio-demographic characteristics of the study population. A total of 100 nonclinical subjects were enrolled in the study.

Characteristics	Number of respondents	Percentage (%)
Age (Years)		
21-30	16	16
31-40	33	33
41-50	27	27
≥50	24	24
Range	(21-62) years	Mean: 41 years
Sex		
Male	49	49
Female	51	51
Male : Female ratio	1:1.04	
Family status		
Nuclear	83	83
Joint	17	17
Socioeconomic condition		
Upper	19	19
Middle	79	79
Lower	2	2
Residence		
Urban	89	89
Rural	11	11
Religion		
Muslim	81	81
Hindu	9	9
Level of education		
Illiterate	3	3
Primary	6	6
Secondary	10	10
Higher secondary	12	12
Graduate and above	69	69
Occupation		
Unemployed	2	2
Retired	5	5
Housewife	33	33
Others	7	7
Businessman	17	17
Service	36	36

Table 1: Socio-demographic characteristics of the study population (n=100).

Age ranged from 21 to 62 years. The majority of the subjects were in the 31-40 age group, constitute 33% of the study population; followed by 27% in the 41-50 age group. The minimum respondents (16%) were in the 21-30 age group. Out of 100 persons, there were 49 (49%) male and 51 (51%) female. The male to female ratio was 1:1.04.

Most of the respondents i.e. 83% came from nuclear family and 17% came from a joint family. Most of the respondents had middle socio-economic conditions 79 (79%), followed by higher economic conditions 19 (19%) and lower 2 (2%). It was found that 89 (89%) respondents came from urban backgrounds and 11 (11%) from rural backgrounds. There were 81 (81%) Muslim persons and 9 (9%) Hindu. This table also shows the educational status and occupations of the respondents. Educational status of 6 (6%) respondents was at the primary level, 10 (10%) at the secondary level, 12 (12%) at the higher secondary level and 69 (69%) at graduate and above level. Only 3 (3%) persons were illiterate. Among the 100 respondents, there were 2 (2%) persons unemployed, 5 (5%) retired, 33 (33%) housewives, 17 (17%) businessmen. However, 36 (25%) respondents were service holder.

3.2 Factor analysis

Table 2 shows that 14 items of R-DAS Bangla were explained by the two-factor model. The first factor consisted of 10 items with salient loadings (>0.40) and assessed all items except item 1, 12, 13 and 14. The second factor consisted of 4 items and assessed items number 1, 12, 13 and 14. The first factor was termed as "relationship" and the second factor was termed as "cohesion". Each factor consisted of an adequate number of items (i.e. 4 or more) with loading above 0.40 [27].

Item	Factor 1	Factor 2	Communalities (h^2)
Item 1	0.189	0.775[*]	0.711
Item 2	0.779[*]	0.015	0.784
Item 3	0.788[*]	0.085	0.686
Item 4	0.535[*]	-0.056	0.390
Item 5	0.722[*]	0.337	0.805
Item 6	0.654[*]	0.302	0.801
Item 7	0.568[*]	-0.035	0.729
Item 8	0.621[*]	-0.092	0.508
Item 9	0.784[*]	0.332	0.744
Item 10	0.862[*]	0.226	0.874
Item 11	0.802[*]	0.029	0.854
Item 12	0.549	0.688[*]	0.780
Item 13	0.387	0.695[*]	0.827
Item 14	-0.471	0.553[*]	0.548

Based on first ratings of rater one (Principle Researcher herself)

Note: Factor loading ≥0.40 are listed in *.

Table 2: Factor analysis of the R-DAS Bangla.

No item had salient loading on more than one factor and there were no items that failed to load on either factor. The term "communality" for a given variable can be interpreted as the proportion of variation in that variable explained by the two factors. For example, communality = 0.71 implies that 71% of the variation in religious matters is explained by the factor model. The communality of items 4, 8 and 14 was slightly below the expected level.

3.3 Reliability and validity

3.3.1 Internal reliability: Cronbach's alphas were calculated from various permutations of the R-DAS Bangla and presented in the table 3. Internal consistency for the R-DAS Bangla total score was 0.85. Cronbach's alpha of the consensus subscale was 0.78, the satisfaction subscale was 0.80 and the cohesion subscale was 0.62. All consensus items were moderately correlated with consensus subscale except items-1 which was weekly correlated. All satisfaction items were moderately correlated with the satisfaction subscale. Among the items of cohesion subscale, only item-11 was weekly correlated (r=0.21) and the rest of the items were strongly correlated. Again, when the association between 14 items and total R-DAS Bangla were examined, it was observed that all items were weakly correlated as the scores of subscales reversed order from each other.

Item	Reliability			Validity
	Internal consistency		**Inter-rater reliability**	**Item content validity index (I-CVI)**
	Item-reminder correlation (n= 100) (Subscale)	**Item-reminder correlation (n= 100) (R-DAS Bangla)**	**Intra-class correlation coefficient**	
Consensus subscale alpha 0.78			0.83	-
Item 1	0.34	0.078	0.91	1
Item 2	0.47	0.27	0.86	1
Item 3	0.56	0.30	0.77	1
Item 4	0.46	0.25	0.92	1
Item 5	0.50	0.26	0.86	1
Item 6	0.53	0.25	0.94	1
Satisfaction subscale alpha 0.80			0.88	-
Item 7	0.56	0.23	0.93	1
Item 8	0.44	0.20	0.92	1
Item 9	0.73	0.40	0.91	1
Item 10	0.67	0.36	0.93	1
Cohesion subscale alpha 0.62			0.84	-
Item 11	0.21	0.015	0.93	1
Item 12	0.71	0.26	0.71	0.33
Item 13	0.75	0.26	0.68	0.33
Item 14	0.70	0.27	0.79	1
R-DAS Bangla Total alpha 0.85			0.97	0.90

Was <0.001. Cohen's kappa coefficient was 0.89 which reflected that inter-rater agreement was almost perfect. This agreement was statistically significant as p value was <0.001.

Table 3: Reliability validity of R-DAS Bangla.

3.3.2 Inter-rater reliability: Evidence of inter-rater reliability was examined by using the intra-class correlation coefficients (ICCs) and the results were presented in Table 3. The range of intra-class correlation coefficient was between 0.68 to 0.97 which represented a very strong positive correlation except for item-13.

3.3.3 Validity: Table 3 shows that the average value of content validity which was assessed by three psychiatrists. The result shows that all items had excellent content validity except item numbers 12 and 13. Scale level content validity index (S–CVI) was measured by averaging the I–CVIs of all items and the value was 0.90.

3.3.4 Correlation of inter-rater reliability: Table 4 shows the correlation of inter-rater reliability. Spearman's rho and Pearson's r were used to find the correlation coefficient of the rater 1 and 2 and the values were 0.92 and 0.86 respectively which reflected a very strong positive correlation between the two raters. Moreover, inter-rater correlation was statistically significant as p-value.

Item	value	P-value
Spearman's rho	0.93	< 0.001
Pearson's r	0.86	< 0.001
Cohen's kappa	0.89	< 0.001

Table 4: Correlation of inter-rater reliability.

4. Discussion

The nature of conjugal connections is a significant pointer of a grown-up, couple, and child well-being. There is considerable evidence that low marital quality is a significant risk factor for developing psychiatric disorders. The gold standard RDAS is widely used to assess couple relationships and quality of marriage. The purpose of the study was to adapt and evaluate the psychometric properties of RDAS Bangla. The results showed that these scores are satisfactory and the result of the analysis is similar to other studies [28, 29].

In this study, factor analysis was done by two factor model. The first factor consisted of 10 items with salient loadings (>0.40) and second factor model was consist of 4 items. Each factor consisted of an adequate number of items (i.e. 4 or more) [27] with loading above 0.40. The highest communality was found for item 10 and was slightly below the expected level for items 4, 8 and 14. These findings were similar to the previous findings about factor structure of the RDAS [15, 30, 31].

The reliability of the overall scale and the consensus, satisfaction and cohesion of the subscales were high and similar to those obtained from other studies [28, 29]. Satisfaction scale with low internal consistency perhaps results from many items being loaded on more than one factor with the highest loads for some items and cohesion and

consensus factors were loaded for many items [12]. So, it can be determined that low internal consistency is observed due to the number of items included in the factors and homogeneity of the samples [25, 32].

The present study showed internal consistency for the R-DAS Bangla total score was 0.85. cronbach's alpha of consensus subscale was 0.78, satisfaction subscale was 0.80 and cohesion subscale was 0.62. All consensus items were moderately correlated with consensus subscale and satisfaction items were moderately correlated with satisfaction subscale. Again, when the association between 14 items and total R-DAS Bangla were examined, it was observed that all items were weakly correlated as the scores of subscales were reverse order from each other. The present study also found excellent inter-rater reliability which was calculated by intra-class correlation coefficients (ICCs). Reliability was excellent between rater-1 and rater-2 for R-DAS Bangla total and the rate was 0.92 which reflected a very strong positive correlation between two raters, which is statistically significant as p-value was <0.001. Cohen's kappa coefficient was 0.89 which reflected that inter-rater agreement was statistically almost perfect with p-value was <0.001.

Validity is used to describe the degree to which a test measures what it is supposed to measure [25]. Content validity is one of the basic forms of validity and it is used to evaluate the relationship between a test's content and the construct it is intended to measure [33]. In this study, content validity was assessed according to Polit and Beck (2006) method and showed that all items had excellent content validity [34]. The average content validity scale was measured as 0.90 in this study. Content validity was found as satisfactory for Bangla version RDAS. As a result, the Bangla version RDAS scale promises as a measure of marital adjustment in the Bangladeshi population. Remarkably, RDAS is specific for a couple of interpersonal relationship and its utilization for different purposes ought to be finished with additional mindful. This is fundamental because of contrasts between the idea of relational issues in a marriage and other extramarital connections.

5. Limitations

Several limitations were considered for our study. Firstly, the sample was nonclinical and the data consists of couples with problematic relationships who need therapeutic help. Secondly, convergent and divergent validity was not assessed here. Thirdly, only two raters rated the respondents in inter-rater reliability, which should be three or more. Fourthly, test-retest reliability was not assessed.

6. Conclusions

This was the first study in Bangladesh to explore the psychometric properties of the "gold standard" the Revised Dyadic Adjustment Scale (RDAS Bangla). The findings of this study revealed that the validity and reliability of the Bangla version of the RDAS were high and very acceptable. It is useful for use in future studies. However, the validity and reliability of items 12 and 13 were below than expected. They need modification and clarification for further. We can conclude that this Bangla RDAS is a valid, reliable and useful scale for assessing a couple relationship and quality of marriage in the Bangladesh context.

Author's Contribution

Nahar JS, Islam M and Syed SE formulated the research questions, developed the study concepts. Islam M and Islam MM analyzed the data and drafted the manuscript. Finally, all authors have read and approved the final version of the manuscript.

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Conflict of Interest

Authors have no conflict of interest.

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