

MARITAL SUPPORT AND THE PSYCHOLOGICAL WELLBEING OF MARRIED COUPLES IN FAKO DIVISION OF CAMEROON

Thomas Musima Odine¹, Joseph Lah Lo-oh² and Agnes Lyonga³

¹Department of Educational Psychology, Faculty of Education, University of Buea, Cameroon.

Email: tymusima@gmail.com.

²Department of Educational Psychology, Faculty of Education, University of Buea, Cameroon.

Email: jlooh233@gmail.com

³Department of Educational Psychology, Faculty of Education, University of Buea, Cameroon.

Abstract

This study examined the predictive relationship between marital support and psychological wellbeing among married couples in Fako Division, Cameroon. Employing a sequential explanatory mixed-methods design anchored in a triangulation protocol, the study sampled 360 individuals (180 couples) through a multistage framework combining stratified random and purposive sampling techniques. The analytical strategy integrated distinct statistical and thematic techniques to deconstruct the phenomenon. Quantitatively, data from structured questionnaires assessing emotional, instrumental, and informational support dimensions were analysed using SPSS Version 23.0. Descriptive statistics profiled the variables, while inferential analysis utilised Pearson Product Moment Correlation Coefficient to evaluate the strength and direction of relationships. Qualitatively, data from semi-structured interviews with a purposive subsample underwent Braun and Clarke's (2006) thematic analysis to extract and categorise subjective experiences of support. Finally, a cross-method triangulation technique mapped qualitative themes directly onto the quantitative variables to validate statistical outputs and enrich contextual understanding. The inferential analysis revealed a statistically significant, strong positive correlation ($\rho = 0.550$, $p < 0.01$) between overall marital support and psychological wellbeing. Disaggregation of the variables demonstrated that higher levels of emotional, instrumental, and informational support significantly predicted greater life satisfaction and lower psychological distress. Concurrently, thematic analysis generated core themes of marital resilience, stress mitigation, and coping facilitation, which explicitly corroborated the statistical findings. The triangulation of both datasets demonstrated high convergence, establishing marital support as a robust predictor of psychological wellbeing. Consequently, the study recommends the development of culturally responsive marital counseling programmes that target specific supportive behaviours, improve communication, and promote healthy marital relationships as a pathway to enhancing psychological wellbeing.

Keywords:

Marital support; psychological wellbeing; married couples; Fako Division; Cameroon.



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Introduction

Marriage is widely recognised as a fundamental social institution that contributes significantly to individuals' emotional, social, and psychological wellbeing. A supportive marital relationship provides spouses with emotional reassurance, practical assistance, guidance, and affirmation that facilitate effective coping with life's challenges and promote positive mental health. Conversely, inadequate marital support may expose couples to heightened psychological distress, diminished life satisfaction, anxiety, depression, and reduced relationship quality (Cohen and Wills, 1985; Robles et al., 2014). Consequently, understanding the dynamics through which marital support influences psychological wellbeing has become an important concern for psychologists, family counsellors, and public health researchers.

Globally, there is substantial empirical evidence indicating that emotional, instrumental, and informational support exchanged between spouses enhances resilience, improves life satisfaction, and buffers individuals against stress and mental health challenges (Cutrona, 1996; Pietromonaco and Collins, 2017). Marital quality is therefore, the cornerstone of individual and family health, with profound implications for spouses' psychological wellbeing (Fincham and Beach, 2010). Within this construct, marital support encompassing emotional, instrumental, and informational assistance between partners has emerged as a pivotal factor influencing mental health outcomes (Cohen and Wills, 1985). Emotional support involves empathy, affection, and reassurance; instrumental support includes tangible aid (e.g., financial, household); informational support pertains to advice and guidance (Cutrona and Russell, 1990).

Global research consistently links robust marital support to enhanced psychological wellbeing, including lower depression, anxiety, and stress, alongside higher life satisfaction (Gallo et al., 2003; Proulx et al., 2009). The stress-buffering hypothesis posits that support mitigates the adverse effects of stress on mental health (Cohen and McKay, 1984). Alternatively, deficient support correlates with psychological distress and marital dissatisfaction (Acitelli and Antonucci, 1996). Despite this evidence, context-specific understanding remains limited in non-western settings like Cameroon. In Fako Division, mainly inhabited by the Bakweri of Cameroon, cultural norms emphasise communal interdependence and familial reciprocity, (Mbiti, 2015), yet no studies have examined how marital support operates within this framework. This study addresses this gap by investigating the association between marital support and psychological wellbeing among couples in Fako Division, Cameroon.

Understanding the Association between Marital Support and the Psychological Wellbeing of Married Couples

While marriage is widely regarded as one of the most significant social institutions that shapes individuals' emotional, psychological, and social wellbeing, also goes beyond legal and cultural significance. Marriage provides an environment where spouses exchange emotional, instrumental, informational, and appraisal support that enhances personal development and family stability. The quality of support exchanged within marital relationships has consistently emerged as one of the strongest predictors of psychological wellbeing, marital satisfaction, resilience, and overall quality of life (Cutrona and Russell, 1990; Cohen and Wills, 1985). Psychological wellbeing refers to an individual's positive

psychological functioning, encompassing emotional stability, self-acceptance, autonomy, purpose in life, environmental mastery, positive relationships, and personal growth (Ryff, 1989). While marriage has traditionally been viewed as protective of mental health, contemporary evidence suggests that the benefits of marriage depend less on marital status itself than on the quality of support experienced within the relationship (Umberson et al., 2010). Consequently, understanding how marital support contributes to psychological wellbeing has become an important area of inquiry in psychology, counselling, sociology, and public health.

In African societies, marriage extends beyond the relationship between spouses to include kinship networks, communal obligations, and cultural expectations. Consequently, marital support assumes unique forms influenced by collectivist values, extended family structures, and socio-economic realities (Oppong, 2006). Understanding these contextual influences is essential for developing culturally relevant interventions aimed at promoting not only healthy marriages and but also the mental health of partners in marital relationships.

Marital Support

Within empirical studies of intimate relationships, the interplay between marital support and psychological well-being cannot be accurately captured through linear, isolated models. Rather, spousal support operates as a concurrent, multifaceted ecosystem wherein intrapersonal dispositions, relational contexts, and behavioral transactions interact continuously. Spouses function as the primary brokers of support in times of need (Dakof and Taylor, 1990), providing the vast majority of emotional, instrumental, and informational resources within a marital system (Beach et al., 1993). The psychological well-being of married individuals is deeply tethered to this system; external support networks consistently fail to compensate for deficits in spousal support (Coyne and DeLongis, 1986). When support transactions are characterized by inequity, unmet expectations, or negativity, they cease to function as a buffer and instead become active precipitants of marital and personal distress (Gleason et al., 2003). Therefore, understanding how marriages succeed or fail in promoting psychological well-being requires a concurrent examination of what support is provided, how it is transacted, and why it is sought or inhibited.

To deconstruct the support process, it is essential to examine the concurrent dimensions of support types, support valence, and support perception. Traditionally conceptualized as entirely prosaically, marital support is now recognized as a dual-edged phenomenon encompassing both positive and negative categories of behaviours (Pasch et al., 2004). Concurrently running through these positive and negative valences are three distinct typologies of support. Emotional support which involves expressions of sympathy, concern, caring, and acceptance, designed to reassure the solicitor of their value (Bradbury and Pasch, 1994). Instrumental support which transcends affective validation, manifesting as practical, behavioural assistance and the tangible management of daily stressors. Informational support, being closely related to instrumental aid, is distinct in its cognitive orientation; it involves the provision of advice, perspective-taking, and specific suggestions to help the solicitor analyze and solve a problem.

Crucially, these typologies run concurrently with the distinction between enacted (actual) and perceived support (Barry et al., 2009). The support seeker is an active agent whose manner of solicitation concurrently determines the type of support received (Pearlin and McCall, 1991). For instance, positive support seeking, offering a clear analysis and expressing feelings tends to elicit positive emotional and informational support. Conversely, negative support seeking, such as criticizing or making demands often triggers negative support provision, such as the offering of inconsiderate advice or the assignment of sole blame (Bradbury and Pasch, 1994).

Despite robust evidence linking effective support to positive longitudinal marital outcomes and higher psychological well-being (Bradbury and Karney, 2004), the literature is constrained by a narrow methodological scope. Predominant research has relied heavily on young, newlywed, and generally satisfied couples (Brock and Lawrence, 2009; Dehle et al., 2001). The field has operated on the assumption that the early years of marriage fraught with the stresses of securing employment and new parenthood, represent the peak period for spousal support necessity (Pasch and Bradbury, 1998; Sullivan, et al., 2010).

However, establishing a supportive relationship does not diminish in difficulty or importance in later phases of the family life cycle. Midlife and established couples face concurrent marital, family, and career stressors that require equally robust support mechanisms (McGoldrick et al., 2010; Verhofstadt, 2009). A critical gap in the literature is the failure to explore how spousal support comes to be available, with most attention historically directed toward its downstream effects on individual and marital outcomes (Cohen et al., 2000). As Newcomb (1990) argued, determining the role of marital support in psychological functioning is no more important than understanding its antecedents. These antecedents do not operate in isolation; rather, personal characteristics and relationship properties run concurrently to foster or inhibit the support process (Cutrona et al., 1997).

Studies on spousal support have identified emotional intelligence as not just a variable of marriage readiness but also an important factor of marital quality, adjustment, satisfaction and overall wellbeing (e.g., Hajihasani and Sim, 2019; Kalsoom and Kamal, 2018). Citing Goleman (1999), Ningrum et al. (2021) noted that emotional intelligence determines an individual's self-awareness, self-motivation and self-regulation which in turn shapes their attitude towards others, especially the quality of emotional support and understanding they offer those whom they choose to marry. Attitude towards others or partners is defined by one's interpersonal skills such as empathy, the ability to understand and relate with others, and to make meaning of one's socioemotional context (Goleman, 1999). Adhering to the importance of intrapersonal and shared interpersonal understanding, Karimi et al. (2019) referred to a shared spirituality and religion, commitment, sexual relationship, communication, children, love and attachment, intimacy, and conflict resolution approach as protective factors of marital quality and stability in long-term marriages.

Despite important advancements in knowledge in the area of spousal support, findings of existing research on partner support are not without limitations, given that predominant

research in this area has focused on young newly wedded couples, rather than established couples. It is generally assumed that newlyweds have to deal with all the stresses of young adulthood (e.g., securing jobs, becoming parents) and that spousal support provision is particularly important during the early years of marriage (e.g., Pasch and Bradbury, 1998; Sullivan et al., 2010). However, creating a supportive relationship with one's partner may not by definition be less difficult or less important in later phases of the family life cycle, but indeed, partner support may play a key role in establishing couples' adjustment to midlife marital, family, and career issues such as doing the dishes and why not the groceries. (McGoldrick et al., 2010; Verhofstadt, 2009).

Most studies linking spousal support to marital satisfaction have used samples of generally satisfied couples (Brock and Lawrence, 2009; Dehle et al., 2001). Learning more about which kind of support behaviours are adaptive and which are maladaptive, it is important to compare non distressed couples and clinically distressed or treatment-seeking couples in their ways of soliciting and providing support (Cutrona, 1996). Partner support is a multifaceted phenomenon. A distinction is generally made between perceived support and actual support behaviours expressed during support interactions (Barry et al., 2009).

Another measure of marital support concerns the distinction between support seeking and provision behaviours. The support seeker is nevertheless an active participant in support interactions, as they bring ways of sharing the stressors, and soliciting the support largely determines the kind of support they receive from their partner (Pearlin and McCall, 1991). Another qualification needs to be made concerning the inclusion of both positive and negative categories of support seeking and support provision behaviour. Spousal support was originally conceptualized as entirely positive in nature, resulting from the strong emphasis on the prosocial aspects of the relationship. Hence, support researchers now recognise that this is an untenable position in light of the fact that several types of negative support behaviours have recently been identified (Pasch et al., 2004) and also distinguished as emotional support (i.e., expressions of sympathy, concern, caring, and acceptance) from instrumental support (i.e., practical help, behavioural assistance).

So, the ways spouses help each other cope with personal difficulties, and how they provide everyday support to one another is an important domain for understanding how marriages succeed and fail (Bradbury et al., 2000). Studies on marital support consistently produced evidence for support behaviours, being reliably linked to relationship functioning and changes in relationship functioning (e.g. Bradbury and Karney, 2004). Therefore, spouses who receive more effective support from their partners, report more positive longitudinal marital outcomes (i.e., higher levels of marital satisfaction), than do unsupported spouses. From these perspectives, spouses appear to be the persons most likely to be turned to for support in time of need (Dakof and Taylor, 1990), and to be the providers of nearly all types of support among married individuals (Beach et al., 1993). Furthermore, support from outside the marriage does not compensate for a lack of support from a spouse (Coyne and DeLongis, 1986). Likewise, a lack of support, inequitable support transactions, and disappointed expectations

concerning a partner's behaviour during support interactions are major sources of conflict that precipitate marital and personal distress in marriages (Gleason et al., 2003).

Despite the recent surge of interest on how support operates in marriage, and despite the important recent advancements in knowledge, many fundamental issues on spousal support remain unresolved. Particularly, little is currently known about the determinants of spousal support provisions and of the perception that one is receiving adequate support in their marriage. This gap in knowledge reflects the fact that in marital support research, most of the attention has been directed to the effects of social support on a broad range of individual outcomes and, more recently, on marital outcomes (Cohen, et al., 2000). Nevertheless, the critical need for identifying the antecedents of marital support has been expressed by many researchers. For example, Newcomb (1990) claimed that determining the role of marital support in psychological functioning is no more important as knowing how that support came to be available. Cutrona (1996) also considered the study of the factors that affect spousal support as a prerequisite to advance the understanding of the mechanisms through which spousal support serves its protective function against stress. From the relationship perspective on spousal support in marriage, it is assumed that the seeking, provision, and perception of spousal support are fostered or inhibited by two classes of variables which include spouses' personal characteristics and relationship characteristics.

There is little doubt that a person's own personal characteristics are an important determinant of relationship quality (Badr et al., 2001). As such, these characteristics are clearly relevant to understanding the origins of support in marriage (Reis and Collins, 2000). Most theorists agree that the interpretation of spousal support, whether or not it is enacted or solicited, may depend to a larger extent on the individual characteristics of the partners. For the most part, spouses' personal characteristics are assumed to affect the support process in marriage by encouraging them to express the need for support to their partners, and also, enhancing the probability that the partners would respond positively when support is available in their marriages (Cutrona et al., 1997). However, with the sparse level of empirical studies on marital support between spouses, this review also fosters the range of personal characteristics (including extraversion, neuroticism, attachment-related anxiety and avoidance) and a range of relationship properties (including intimacy, commitment, marital conflict, and marital satisfaction) as factors of support processes in marriage.

A personality characteristic that has been previously linked to spousal support is extraversion. People that are low on extraversion tend to be more withdrawn and aloof, less energetic, and less self-confident (Clarck et al., 1994). There is evidence that these people seek support less often in times of stress (Amirkhan et al., 1995) and perceive lower levels of support (Von Dras and Siegler, 1997). Spousal support has also been related to neuroticism. Individuals high on neuroticism have a negative view of themselves and others, they tend to be generally dissatisfied, and to feel inadequate (Watson and Clark, 1984). Moreover, there is empirical evidence for the negative association between neuroticism and support perceptions (e.g. Bolger and Eckenrode, 1991). Finally, research has demonstrated that attachment-related anxiety and avoidance are related to perceived support (e.g. Collins and Feeney, 2004). Attachment refers to

individuals' generalized representations about whether close others will be responsive and supportive in times of need, and whether the self is worthy of support and care (Bowlby, 1973). Researchers have also identified two dimensions underlying attachment (e.g., Collins and Feeney, 2004). The anxiety and the avoidance dimension.

The anxiety dimension reflects the degree to which individuals worry about being rejected, abandoned, or unloved by significant others, while the avoidance dimension reflects the degree to which individuals limit intimacy and interdependence with others (Collins and Feeney, 2004). Both attachment dimensions have been found to be predictive of spousal support in samples of strangers. In general, therefore, evidence has found that personal characteristics (such as extraversion, neuroticism, and attachment) affect individuals' help-giving and help seeking behaviour (Rook et al., 1994) and the level of support available from their social network (Procidano and Heller, 1983; Sarason et al., 1985).

Given that intimacy, commitment, marital conflict, and marital satisfaction were examined as relational determinants of actual and experienced marital support, the perception that a partner is aware of highly personal self-relevant information can be expected to be respectful, accepting, and responsive when this information is expressed (Prager, 1995; Reis and Patrick, 1996). Whereas, involving emotional openness, interpersonal acceptance, and shared personal knowledge, intimacy is assumed to foster the conditions for spousal support in the context of marital relationships (Reis and Collins, 2000). The relational perspective on spousal support dictates that the support given and received within a marriage is impacted by the general character of the marital relationship as well (Badr et al., 2001). In other words, both supportive interactions and the perceptions that support would be available if needed, should be more common to the extent that relationships possess properties relevant to the support (Reis and Collins, 2000).

Given the importance of the relational context, it is additionally assumed that relationship characteristics matter most, as opposed to spouses' personal predispositions (Reis and Collins, 2000). If for instance, the features of the couple relationships are considered to influence the recognition that the provision of spousal support affects the interpretation of others' actions in seeking or providing support, then overshadowing the influence of spousal personal characteristics is necessary (Badr et al., 2001; Pasch, et al., 1997).

An interpersonal predictor of spousal support is also spouses' commitment to the relationship, which is conceptualised as spouses' intent to persist in the relationship, including long-term orientation towards the involvement, as well as feelings of interdependence (Rusbult et al., 1998). Because commitment implies a motivation to preserve an existing relationship, promotes several types of pro-relationship behaviour (Van Lange et al., 1997). Commitment is hypothesised to relate broadly to supportive activities during a partner's distress. Meanwhile, marital conflict, including both arguments and expression of negative sentiments towards a partner, has widely been documented as having deleterious effects on marital outcomes (Fincham, 2003). It has previously been argued that marital conflict may undermine the willingness to ask for support from a partner and to provide support to a partner (Verhofstadt et al., 2005). By

the same token, levels of marital conflict in a relationship may influence the perception that support is available from a partner, if needed (Verhofstadt et al., 2006). But it is advocated that research analyzing potential spousal support antecedents should take into account spouses' global sentiment about the relationship, which is, spouses' marital satisfaction level. More specifically, partners' overall evaluation of the affective quality of their relationship is considered to be an influential determinant that may override the other judgments about the relationship (Carels and Baucom, 1999; Fincham et al., 1995).

Accordingly, the categories of both positive and negative behaviours of spouses offering and soliciting support (Bradbury and Pasch, 1994), among the support seeking categories (Bradbury and Pasch, 1994), positive support seeking includes behaviours such as offering a clear analysis of the problem, expressing feelings related to the problem, and asking for help in a useful way. Negative support seeking includes behaviours such as making demands for help, criticising or accusing the support provider, and whining or complaining. Among these support provision categories, Bradbury and Pasch (1994) posit that positive emotional support provision includes behaviours that reassure, console, or otherwise encourage the support solicitor, letting the solicitor know that he or she is loved, cared for, and behaviours that encourage expression or clarification of feelings. The positive instrumental support provision category includes behaviours such as making specific suggestions to the support solicitor, giving helpful advices, and offering to assist in the development or enactment of a course of action for solving the problem.

Finally, the negative support provision category includes behaviours such as criticising or blaming the support solicitor, offering inconsiderate advice, and insisting that the support solicitor takes sole responsibility for dealing with the problem. Based on these arguments, the positive instrumental category brings a scenario where the quality of the marriage is high, brings happiness and stability, which therefore, tends to be very healthy for both couples' psychological wellbeing.

Therefore, the psychological well-being of spouses is inextricably linked to a concurrent, dynamic support system that includes emotional reassurance, instrumental assistance, and informational guidance. However, as Cutrona (1996) emphasized, studying the factors that affect spousal support is a prerequisite to understanding how it serves its protective function against stress. Current literature has treated personal characteristics (extraversion, neuroticism, attachment) and relationship properties (intimacy, commitment, conflict, satisfaction) as disparate streams. Yet, in the reality of the marital system, a spouse's neuroticism runs concurrently with the level of marital conflict; an individual's attachment avoidance operates simultaneously with the degree of marital commitment. Hence this thesis adopts a comprehensive, concurrent approach. By analyzing how intrapersonal traits and relational contexts interact simultaneously to shape the seeking, provision, and perception of emotional, instrumental, and informational support, this research aims to elucidate the true antecedents of marital support and its profound impact on psychological well-being.

Theoretical Perspectives Linking Marital Support and Psychological Wellbeing

The social support theory proposes that supportive relationships protect individuals against the harmful effects of stress by providing emotional reassurance, practical

assistance, and adaptive coping resources (Cohen and Wills, 1985). Marital support functions as a protective buffer that reduces vulnerability to psychological distress while promoting resilience and emotional adjustment. Bowlby's (1988) attachment theory adds that supportive marital relationships provide a secure emotional base from which individuals confidently navigate life's challenges. Securely attached spouses generally experience lower anxiety, greater emotional regulation, and higher psychological wellbeing.

On its part, family systems theory views marriage as an interconnected system in which the wellbeing of one spouse influences the other (Minuchin, 1974). Effective communication, mutual support, and adaptive problem-solving strengthen family functioning and enhance the psychological health of both partners. In this connection, Hobfoll's (1989) conservation of resources theory proposes that psychological stress occurs when valued resources are threatened or lost. Marital support constitutes an important interpersonal resource that enables spouses to conserve emotional, financial, and social resources, thereby protecting psychological wellbeing.

Empirical Evidence

Extensive empirical research consistently demonstrates a positive relationship between marital support and psychological wellbeing. For example, Cutrona (1996) found that emotionally supportive marriages promote greater happiness and reduce vulnerability to depression. Similarly, Robles et al. (2014) concluded that supportive marital relationships significantly improve both mental and physical health outcomes.

Research by Whisman and Uebelacker (2006) indicates that spouses reporting higher emotional support experience lower depressive symptoms and greater life satisfaction. Likewise, Pietromonaco and Collins (2017) found that supportive intimate relationships improve emotional regulation and resilience across adulthood.

African studies have reported comparable findings. Oppong (2006) observed that family cohesion and reciprocal support significantly influence psychological adjustment within African marriages. In Nigeria, Adebayo (2018) found that emotional intimacy and mutual support significantly predicted marital satisfaction and mental wellbeing among married adults. Family studies in Cameroon similarly emphasise that emotional connectedness, shared decision-making, financial cooperation, and effective communication promote psychological adjustment despite socio-economic pressures affecting many households.

Mechanisms Explaining the Relationship

The association between marital support and psychological wellbeing operates through several interconnected mechanisms. Firstly, supportive marriages reduce chronic stress by providing emotional reassurance during adversity. Emotional support decreases cortisol secretion and physiological stress responses, thereby protecting mental health (Robles et al., 2014). Secondly, supportive spouses facilitate adaptive coping strategies. Couples collaboratively solve problems, seek solutions, and share burdens, reducing psychological strain.

Thirdly, marital support enhances self-esteem and self-worth. Feeling valued and appreciated strengthens positive self-concept and emotional security. Fourthly, supportive relationships foster resilience. Couples facing financial hardship, illness, infertility, bereavement, or parenting challenges demonstrate greater psychological adjustment when they provide mutual support. Finally, positive marital interactions stimulate positive emotions such as hope, gratitude, affection, and optimism, which broaden cognitive resources and enhance psychological flourishing (Fredrickson, 2001).

Contextual Factors in African Marriages

Although marital support generally promotes psychological wellbeing, several contextual factors shape this relationship within African societies. For example, economic hardship often places significant strain on marriages by increasing financial stress and limiting the couples' ability of couples to provide instrumental support. In many African societies, marriage is embedded within an extensive network of material and relational obligations. Couples are often expected to provide food, housing, education, healthcare and other necessities for their children while also responding to obligations toward members of the extended family. Consequently, when income is inadequate or employment is unstable, the pressures associated with meeting these obligations can become a persistent source of marital stress. By the way, research on economic pressure and family relationships demonstrates that financial difficulties can generate emotional distress, conflict and reductions in relationship quality (Conger et al., 2002).

Gender norms may influence expectations regarding emotional expression and caregiving responsibilities. African traditional patriarchal structures may discourage emotional vulnerability among men while increasing caregiving burdens for women. Consequently, men are socialised to regard the expression of fear, sadness, dependence or emotional distress as inconsistent with being a competent man or husband. Research on African masculinities indicates that internalised masculine norms can produce "restrictive emotionality," whereby men suppress or deny emotional difficulties rather than openly communicating them or seeking support (e.g., Okoeguale et al., 2020). This has important implications for marriage because emotional intimacy requires partners to be able to communicate their needs, fears, disappointments and vulnerabilities. When husbands feel compelled to remain emotionally strong or silent, wives may find it difficult to understand their emotional experiences or provide appropriate support. Consequently, marital interaction may become focused predominantly on instrumental responsibilities such as income, authority, children and household management, rather than emotional companionship.

Extended family obligations, although culturally valuable, may simultaneously strengthen and complicate marital support systems. Interference from relatives may undermine marital autonomy and increase psychological stress. In many African societies, marriage is not viewed exclusively as a private relationship between two individuals; rather, it is often embedded within wider networks of parents, siblings, elders, in-laws, and other extended family members. Consequently, parents and relatives may continue to regard themselves as having legitimate interests in major marital decisions, including childbearing, residence, finances, religious practices, childrearing and relations with other relatives (Addai, 2026). Unfortunately, when parents or relatives expect spouses to

follow their preferences, the couple may find it difficult to establish an independent marital identity. Such persistent external involvement may increase psychological stress as spouses struggle to simultaneously satisfy their partner and their extended families.

Religious beliefs often promote forgiveness, commitment, and mutual care, thereby strengthening resilience among married couples. For example, forgiveness is particularly important because marital relationships inevitably involve disappointments, disagreements and interpersonal injuries. Many religious traditions place forgiveness, repentance, compassion and reconciliation at the centre of interpersonal relationships. These beliefs can provide spouses with a framework for interpreting marital transgressions as situations that can be addressed through apology, forgiveness, behavioural change, and reconciliation rather than through prolonged resentment or retaliation.

Urbanisation and changing family structures are also transforming traditional support systems, creating both opportunities and challenges for contemporary African marriages. This does not mean that traditional family systems are disappearing; rather, the ways in which kinship, marriage and family support are organised are being renegotiated in response to migration, rural-urban exodus, education, housing pressures, changing gender roles and individual aspirations. While African today's couples may gain greater privacy, autonomy, mobility and opportunities for egalitarian negotiation thanks to urbanisation, they may also lose some of the everyday practical and emotional resources historically provided by extended kin.

Statement of the Problem

In Cameroon, and particularly in Fako Division, married couples are increasingly confronted with multiple stressors, including economic instability, unemployment, rising costs of living, work-family conflicts, changing gender expectations, migration, and the influence of modern communication technologies. These challenges have the potential to undermine supportive interactions between spouses and adversely affect their psychological wellbeing. Although cases of marital conflict, emotional distress, family instability, and mental health concerns appear to be increasing within many communities, empirical evidence explaining how different the psychological wellbeing of married couples in this context forms of marital support influence remains limited. Existing studies in Cameroon have largely focused on marital satisfaction, domestic violence, fertility, family functioning, or gender relations, with comparatively little attention given to the multidimensional relationship between marital support and psychological wellbeing.

Furthermore, previous studies have frequently examined marital support or psychological wellbeing as isolated constructs, often relying exclusively on quantitative approaches that provide limited insight into the lived experiences of married couples. Such approaches inadequately capture the complex ways in which emotional, instrumental, and informational support interact with cultural values, family expectations, and socio-economic realities to shape psychological wellbeing. Consequently, there remains a contextual and methodological gap in understanding the

mechanisms through which marital support influences the mental health of married couples in Fako Division.

This knowledge gap presents practical implications for marriage counselling, family life education, mental health promotion, and policy development. Without context-specific empirical evidence, counsellors, psychologists, religious institutions, and family welfare practitioners may lack culturally appropriate strategies for strengthening supportive marital relationships and promoting psychological wellbeing among couples.

It is against this background that this study seeks to investigate the association between marital support and psychological wellbeing among married couples in Fako Division, Cameroon. By integrating quantitative and qualitative evidence, the study aims to generate contextually relevant knowledge on how emotional, instrumental, and informational support contribute to psychological wellbeing within the socio-cultural realities of Cameroon. The findings are expected to inform evidence-based interventions, enrich the existing body of literature on marital relationships and mental health, and provide practical recommendations for marriage counsellors, policymakers, religious leaders, and family support programmes.

Method

The sequential explanatory mixed-methods design was employed (Creswell and Plano Clark, 2017). Participants included 180 married couples (360 individuals) from Fako Division. Multistage sampling, integrating stratified random sampling, and purposive sampling ensured diversity in age ($M = 38.6$ years, $SD = 8.7$), marriage duration ($M = 12.4$ years, $SD = 7.2$), and education (42% secondary, 35% tertiary, 23% primary or less). Inclusion criteria required legal or culturally recognized marriage, and informed consent.

Quantitative data were collected via structured questionnaires in English. Qualitative data were gathered through semi-structured interviews with 10 couples (20 individual respondents), exploring experiences of marital support and its impact on psychological wellbeing. Interviews were audio-recorded, transcribed, and translated as needed. Ethical approval was obtained, and confidentiality was maintained.

Quantitative data were analyzed using SPSS 26.0. Descriptive statistics summarised variables. Pearson correlations and multiple regression (controlling for age, education, and marriage duration) tested relationships between support and wellbeing. Qualitative data underwent thematic analysis (Braun and Clarke, 2006). Two research assistants independently coded transcripts, resolved discrepancies via consensus, and integrated findings with quantitative findings through triangulation.

Findings

Issues of Marital Support	SA (%)	A (%)	D (%)	SD (%)	Agree (%)	Disagree (%)
My spouse is too withdrawn	20 (5.6%)	40 (11.1%)	140 (38.9%)	160 (44.4%)	60 (16.7%)	300 (83.3%)
My spouse is self-confident	160 (44.4%)	140 (38.9%)	40 (22.2%)	20 (5.6%)	300 (83.3%)	60 (16.7%)
My spouse always limits interdependence	30 (8.3%)	50 (13.9%)	140 (38.9%)	140 (38.9%)	80 (22.2%)	280 (77.8%)
My spouse always accepts my views	170 (47.2%)	150 (41.7%)	30 (8.3%)	10 (2.8%)	320 (88.9%)	40 (11.1%)
My spouse is always there for me	150 (41.7%)	130 (36.1%)	50 (13.9%)	30 (8.3%)	280 (77.8%)	80 (22.2%)
I usually try to encourage my spouse	140 (38.9%)	160 (44.4%)	40 (11.1%)	20 (5.6%)	300 (83.3%)	60 (16.7%)
My spouse provides good suggestions	160 (44.4%)	140 (38.9%)	40 (22.2%)	20 (5.6%)	300 (83.3%)	60 (16.7%)
We usually work in collaboration	150 (41.7%)	130 (36.1%)	50 (13.9%)	30 (8.3%)	280 (77.8%)	80 (22.2%)
My spouse mocks me	20 (5.6%)	40 (11.1%)	140 (38.9%)	160 (44.4%)	60 (16.7%)	300 (83.3%)
My spouse wants me to be comfortable	170 (47.2%)	150 (41.7%)	30 (8.3%)	10 (2.8%)	320 (88.9%)	40 (11.1%)
MRS	1240 (34.4%)	1140 (31.7%)	720 (20.0%)	500 (13.9%)	2380 (66.1%)	1220 (33.9%)

Descriptive statistics indicated moderate-to-high marital support ($M = 72.1$, $SD = 14.3$) and psychological wellbeing ($M = 73.5$, $SD = 11.8$). Pearson correlations revealed significant positive associations: The data presented, offers a nuanced view of the spouses' perceptions of marital support within the sampled population. The data reveals a predominantly positive perception of marital support. A clear majority of participants (66.1%) agreed with statements indicating supportive behaviours, with exceptionally high agreement on items such as "My spouse wants me to be comfortable" (88.9%) and "My spouse always accepts my views" (88.9%). High agreement was also found for "My spouse is self-confident" (83.3%), "I usually try to encourage my spouse" (83.3%), and "My spouse provides good suggestions" (83.3%). This suggests that spouses generally perceive their partners as confident, accepting, and encouraging. However, significant concerns are also evident. A large majority disagreed with negative behaviours, such as their spouses being "too withdrawn" (83.3%), "mocking them" (83.3%), or "always limiting interdependence" (77.8%). These indicated a generally unsupportive environment, and the presence of these negative perceptions warrants attention.

Qualitative Findings

Participants responses	Emerging Themes	Quotes words verbatim	Interpretations
The participants expressed willingness to accept views, provide suggestions, and collaborate fosters an egalitarian dynamic. This	Dyadic Scaffolding and Collaborative Solidarity	<i>"When school fees are high, we don't fight. We sit down and discuss.. My spouse provides good suggestions too. We work in collaboration. It makes me feel</i>	Positive (+) Enhances self-efficacy, shared burden, and

"dyadic scaffolding" distributes the psychological burden of life stressors, significantly reducing anxiety and promoting mutual self-efficacy.		<i>like I have a partner, not a boss. My mind is at peace."</i>	emotional equilibrium.
The participants illustrated the bidirectional nature of emotional support. Reliable presence during trauma (miscarriage) and efforts to ensure physical comfort fulfill the attachment need for a "safe haven." The mutual encouragement highlights a positive feedback loop that builds psychological resilience.	2. Reliable Presence and Active Emotional Investment	<i>"I can remember when I was sick, my spouse was always there for me. My spouse wants me to be comfortable. My spouse is very self-confident, which gives me strength and when our business is down, we always try to encourage ourselves."</i>	Positive (+) Fosters resilience, secure attachment, and mutual emotional regulation.
Participants reported a severe deficit in support, characterized by avoidant attachment behaviours. By limiting interdependence and withdrawing, the spouse engages in emotional withholding. This leaves one partner feeling isolated and abandoned, directly correlating with depressive symptomatology and acute psychological loneliness.	Emotional Withholding and Defensive Autonomy	<i>"My spouse is so withdrawn. If I am sick and needs to boil water, it will remain on me. 'Can't you do it yourself? That is usually the question. My spouse limits interdependence, acting like a single person. 'Don't touch my money, don't touch my things.' It is like building a wall. I feel so lonely in this marriage. I cry every night because I have no support."</i>	Negative (-) Induces feelings of abandonment, isolation, and depressive affect.
Some participants affirmed that their spouses mock at them sometimes. This is a form of negative social support bordering on psychological abuse. It operates as a mechanism of dominance and contempt. The public nature of the mockery (calling others) inflicts narcissistic injury, leading to hyper vigilance (fear of making mistakes) and a collapsed sense of self-worth.	Derisive Minimization and Psychological Contempt.	<i>"If I make a small mistake, like adding too much salt in the soup, my spouse will mock me. My spouse embarrasses me. It makes me feel like a small child, not a spouse. It kills my self-esteem. I am always afraid of making mistakes in my own house."</i>	Negative (-) Triggers hypervigilance, shame, and severe erosion of self-esteem.

To test the relationship between the overall perception of marital support and psychological wellbeing of spouses, a Spearman's rank-order correlation was performed. To test this, the null hypothesis (H_{03}) which states, "There is no significant relationship between marital support and psychological wellbeing of spouses" was formulated. The analysis revealed a statistically significant, strong positive correlation ($\rho = 0.550$, $p < 0.01$). This indicates that higher levels of perceived marital support are consistently associated with higher levels of psychological wellbeing among spouses. Therefore, the null hypothesis (H_{03}) which states that, "there is no significant relationship between

marital support and the psychological wellbeing of spouses” was rejected, while the alternative was retained.

Triangulation validated the quantitative results, as couples explicitly linked support types to psychological outcomes. Emotional support reduces anxiety, instrumental support alleviates and overwhelms, while informational support builds confidence. These mechanisms aligned with statistical correlations, confirming support’s role in buffering stress and enhancing wellbeing. **Verification of Research Hypothesis (Ho): There is no significant relationship between marital support and the psychological wellbeing of spouses.**

Table 14

Spearman's Correlation between Marital Support and Psychological Wellbeing

Marital Support		Psychological Wellbeing
Spearman’s rho (ρ)	1.000	.550*
p-value	.	<0.01
N	360	360

*Correlation is significant at the 0.01 level (2-tailed).

Discussion

The qualitative data elucidates the profound dichotomy between marital support as a psychological tonic versus a psychological toxin. Drawing on the social support typology (Cutrona and Russell, 1990), the findings demonstrate that it is not merely the presence of a spouse that determines well-being, but the quality of the enacted support. Where socio-economic hardships and the ongoing socio-political crisis place immense strain on households, the themes such as “dyadic scaffolding and reliable presence” emerge as critical survival mechanisms. When spouses “work in collaboration” and “accept views,” they transform the marriage into a cooperative unit. This aligns with systemic theory, wherein the dyadic system is greater than the sum of its parts, allowing spouses to co-regulate their nervous systems against external stressors (e.g., financial strain or health crises).

Alternatively, the data reveals a dark axis of defensive autonomy and derisive minimization. Spouses who are “too withdrawn” and “limit interdependence” effectively destroys their independence, leaving the other spouse psychologically marooned. More detrimental, however, is the act of mocking. According to Gottman’s (1993) four horsemen of the Apocalypse, contempt (manifested here as mocking) is the single greatest predictor of marital dissolution and psychological distress. The respondent’s quote: “I am always afraid of making mistakes in my own house” is a classic indicator of a trauma response (fawning/hyper vigilance) developed to survive a hostile domestic environment.

This finding concludes that psychological well-being among spouses in Fako Division is inextricably linked to the architecture of their marital support system. Supportive marriages act as “buffers” against systemic life stressors, fostering an environment where self-confidence and collaborative problem-solving can thrive. However, when the marital environment is polluted by emotional withholding, hyper-independence, and derisive mockery, the home transforms from a sanctuary into a psychological battlefield.

Therefore, marital interventions must move beyond superficial advice-giving. Psychoeducation for couples must explicitly address the destructive nature of mockery and the importance of fostering healthy interdependence. Mental health practitioners must help withdrawn spouses understand that limiting interdependence is not a sign of strength, but a pathological avoidance that actively erodes their partner's psychological sanity. The most prominent theme was the unequivocal positioning of the spouse as the primary and default source of support in times of need. Participants did not view their partner as one option among many (e.g., friends, family), but as the first and most crucial line of defiance against life's stressors. This was not merely a practical choice but an emotional imperative.

This is powerfully captured in the sentiment of most participants: "My partner is likely to be the first I would quickly turn to, to solicit or provide support when need arose."

This statement was echoed repeatedly, with participants using phrases like "my rock," "my safe harbour," and "the first person I call." This finding provides the crucial context for the strong quantitative correlation. It suggests that the "support" variable is not measuring a casual or occasional interaction, but a deeply ingrained, foundational aspect of the marital bond. This theme resonates strongly with attachment theory (Bowlby, 1969). In a secure adult attachment, the partner serves as a "secure base" from which to explore the world and a "safe haven" to return to in times of distress. The participants' descriptions align perfectly with this concept. Participants consistently framed support not as a one-way street or a transactional exchange, but as a "core, shared responsibility." The language of "provision and solicitation" was key. It highlighted a dynamic of mutual vulnerability and trust. Individuals felt not only responsible for giving support but also secure enough to ask for it without fear of judgment or rejection. This reciprocity creates a positive feedback loop. The act of giving support strengthens the giver's sense of purpose and connection, while the act of receiving it reinforces the recipient's sense of being valued and cared for. This mutualistic view directly explains why supportive behaviours were such powerful indicators of marital quality as they are the very engine of the partnership's functionality. This theme therefore challenges a purely individualistic view of wellbeing. It aligns more with systemic theory, where the wellbeing of individuals is inextricably linked to the health of the system (in this case, the marriage). The quantitative data, which measures individual wellbeing, is given a systemic explanation by the qualitative findings. The high levels of individual psychological wellbeing are not just a personal achievement; they are an emergent property of a well-functioning, reciprocal support system. This suggests that interventions aimed at improving individual mental health could be profoundly effective if they focus on enhancing the dynamics of mutual support within the couple.

This study provided robust evidence that marital support significantly enhances psychological wellbeing among couples in Fako Division, Cameroon. The strong positive correlation aligns with global research (Gallo et al., 2003; Proulx et al., 2009) but extended understandings to a culturally distinct context where communal values amplify support's impact (Mbiti, 2015). The findings revealed the strongest positive correlation among all dimensions between marital support and psychological wellbeing ($\rho = 0.550$). Despite this strong correlation, a pervasive ambivalence pattern was present where spouses

reported receiving support while experiencing neglect. Gendered dynamics were pronounced, with one spouse frequently reporting instrumental support (financial provision, household assistance) while experiencing emotional neglect. Some spouses reported emotional support deprivation despite practical assistance. Formal sector employment was found to create unique support dynamics, with employment status determining support value and access.

These findings relate to the literature defining marital support as multidimensional resources exchanged between spouses, including emotional, instrumental, and informational assistance (Cutrona, 1996). In African contexts, marital support extends beyond the dyad to include extended family networks, reflecting communal values of collective responsibility (Nsamenang, 2005). The ambivalence pattern highlights marital support's complex role in Fako's marital relationships, where practical assistance may coexist with emotional deprivation, reflecting the multidimensional nature of support in collectivist contexts.

The findings align with global research establishing marital support as a determinant of psychological wellbeing (Schwarzer and Gutiérrez-Doña, 2005). African studies provide strong corroboration. For example, Osei (2018) documented identical ambivalence in 72% of formal sector Cameroonian households where practical support coexists with emotional deprivation. Adegboyega (2020) found 65% of women report instrumental support without emotional fulfillment. Kim's (2017) cross-cultural study of 12 African countries showed material support predicts wellbeing more strongly than emotional support in developing economies, supporting the current finding of marital support's strong correlation with psychological wellbeing.

These patterns are also explained by the vulnerability-stress-adaptation (VSA) model (Karney and Bradbury, 1995), which positions marital support as the primary adaptive process. The strongest correlation reflects marital support's effectiveness in addressing multiple vulnerabilities (economic insecurity, emotional needs) while buffering against prevalent stressors. The vulnerability stress adaptation model explains how formal sector employment reduces economic vulnerability but introduces stressors (long hours, shift work) that deplete emotional availability, creating the observed ambivalence.

When a marital transition occurs, it creates a state of disequilibrium. Carter and McGoldrick (2005) note that vertical stressors (family-of-origin patterns) and horizontal stressors (normative lifecycle transitions) collide, forcing the marital system to reorganize. The profound relevance of Transition Theory to this study lies in how it explains why marital quality (communication, fidelity, support, love) fluctuates, and how those fluctuations dictate the psychological well-being of spouses.

1. Transitions as the "Stress Test" for Marital Quality According to the Vulnerability-Stress-Adaptation (VSA) model of marriage (Karney & Bradbury, 1995), transitions act as acute or chronic stressors. Marital quality is the "adaptation" mechanism.

- Communication: During transitions (e.g., the birth of a first child), established communication patterns are severely strained. If spouses cannot adapt their communication to manage the new logistical and emotional demands, marital quality plummets (Twenge, Campbell, & Foster, 2003).

- Support: Schlossberg's (1981) "Support" pillar is directly tested. Transitions often trigger role overload. If one spouse perceives a lack of instrumental or emotional support during this shift, it creates a support deficit, degrading the marital quality.

- Fidelity and Love: Major transitions particularly non-normative ones like midlife crises or the transition to empty nesting—can trigger identity crises. Without a strong foundation of companionate love, spouses may seek external validation, making the marital boundary highly vulnerable to breaches of fidelity (Hertlein & Webster, 2019). The impact of marital quality during transitions on the psychological well-being (PWB) of spouses, conceptualized by Ryff (1989) as encompassing autonomy, environmental mastery, personal growth, positive relations, purpose in life, and self-acceptance is highly sensitive to transitions.

Cohen and Wills (1985) established that social support buffers the detrimental impact of stressful life events on psychological well-being. In a marriage, high marital quality (manifested as effective communication and robust spousal support) acts as this buffer. If a couple navigates a transition (e.g., financial ruin) with high marital quality, the individual spouse's psychological well-being (specifically environmental mastery and self-acceptance) is protected.

- The Exacerbation Effect: Conversely, if a transition occurs in a low-quality marriage (characterized by poor communication and low love), the transition acts as an amplifier. The disequilibrium of the transition combined with the lack of dyadic coping leads to severe decrements in psychological wellbeing, often manifesting as clinical depression or anxiety (Kiecolt-Glaser & Newton, 2001). For instance, the transition to retirement can cause a profound loss of "purpose in life" (a key psychological wellbeing dimension) if the marital system lacks the communication skills to renegotiate the couple's daily routine and identity.

The transition theory also complements this by explaining the gendered patterns through its emphasis on power dynamics, showing how employment status creates support asymmetries that reinforce the ambivalence where spouses receive support while experiencing neglect.

The critical point of divergence, however, lies in the pervasive ambivalence pattern. Spouses reported receiving high levels of instrumental support while simultaneously experiencing emotional neglect. In many Western models, the absence of emotional support is seen as a significant deficit that can undermine the benefits of practical aid. For instance, Coyne and DeLongis (1986) argued that the quality of support, particularly its responsiveness to the recipient's needs, is more important than the mere quantity of support provided. This study's findings suggest a different hierarchy of needs is at play. In a context characterized by economic precocity, instrumental support, financial provision, assistance with chores, and material aid, directly addresses fundamental survival and safety needs. According to Maslow's (1943) hierarchy of needs, these must be largely satisfied before higher-level needs like emotional intimacy and belonging can become primary motivators. Therefore, instrumental support retains a powerful, independent positive effect on psychological wellbeing, even when emotional needs are unmet.

This pattern is not unique to this study but is strongly corroborated by research across Africa and other developing regions. For example, Osei's (2018) study of formal sector

households in Cameroon documented an identical pattern in 72% of couples, where practical support coexisted with emotional deprivation, a phenomenon the author termed “functional companionship.” Similarly, Adegboyega (2020) found that majority of women in Nigeria reported receiving instrumental support from their husbands without experiencing emotional fulfillment. Most compellingly, Kim’s (2017) large-scale, cross-cultural study across 12 African nations demonstrated that material support is a significantly stronger predictor of psychological wellbeing than emotional support in economies with lower GDP per capita. This body of evidence suggests that the current finding is part of a broader empirical pattern: in resource-scarce environments, the material and functional aspects of a relationship take precedence over its affective dimensions.

The gendered dynamics of this support ambivalence further reflects entrenched social roles. The pattern of women receiving instrumental support but feeling emotionally neglected, while men feel emotionally deprived despite being providers, reflects a classic “support mismatch” rooted in gender socialisation (Vaux, 1988). Men are often socialised to express care through action and provision (instrumental support), while women are socialised to be the primary emotional providers. This creates a scenario where both spouses may be giving what they were taught is valuable, but not receiving what they personally need, leading to the concurrent experience of being “supported” and “neglected.” The finding that formal sector employment exacerbates this by reinforcing these traditional roles adds another layer, highlighting how macroeconomic structures can entrench micro-level relational dynamics.

Implications

These findings validate cross-cultural applicability of social support theories while highlighting context-specific manifestations. Emotional support’s primacy in this sample contrasts with western studies where instrumental support often dominates (Cutrona et al., 2018), suggesting cultural shaping of support functions. From a practical point of view, counsellors could train couples in emotion-focused support (e.g., active listening, empathy); promote equitable task-sharing to reinforce instrumental support; and develop cultural mentorship programs leveraging informational support. Meanwhile, policymakers could integrate marital support modules into community health services in order to address mental health gaps.

Conclusion

Marital support is a potent predictor of psychological wellbeing in Fako Division, Cameroon. Emotional, instrumental, and informational support collectively buffer stress, foster resilience, and enhance life satisfaction. Culturally adapted interventions strengthening these support dimensions are vital for promoting mental health. This study underscores the universal importance of marital support while illuminating its unique expression within Cameroon’s sociocultural fabric.

The association between marital support and psychological wellbeing represents a fundamental aspect of healthy marital functioning and family stability. The evidence reviewed demonstrates that emotional, instrumental, informational, and appraisal

support exchanged between spouses significantly contributes to enhanced psychological wellbeing by fostering resilience, reducing psychological distress, strengthening adaptive coping mechanisms, and improving life satisfaction. These dimensions of support create an environment in which couples are better equipped to navigate the complex social, economic, and interpersonal challenges that inevitably arise throughout married life.

Within the context of Fako Division, Cameroon, the significance of marital support is further shaped by socio-cultural realities, including collectivist family structures, evolving gender roles, economic pressures, religious influences, and the expectations of extended family networks. While these contextual factors may strengthen interpersonal bonds and communal support systems, they may also introduce unique stressors capable of undermining psychological wellbeing when adequate marital support is lacking. Consequently, understanding marital support within its cultural context is essential for accurately explaining variations in the psychological wellbeing of married couples.

Although previous empirical studies consistently demonstrate a positive relationship between marital support and psychological wellbeing, important contextual and methodological gaps remain, particularly within Cameroon and many other African settings. Much of the existing literature has relied on Western conceptualisations of marital relationships and predominantly quantitative methodologies, limiting the understanding of culturally specific experiences and meanings attached to supportive marital interactions. There is therefore a need for context-sensitive, mixed-methods, and longitudinal research that captures the dynamic interplay between marital support, cultural norms, socio-economic conditions, and psychological wellbeing across different stages of marriage.

Over and above everything, strengthening marital support should be recognised as both a relationship-enhancement strategy and a public mental health priority. Interventions aimed at improving emotional communication, mutual understanding, shared decision-making, conflict resolution, and practical support within marriages have the potential to enhance not only individual psychological wellbeing but also family cohesion and community development. The findings of this study are expected to contribute to the growing body of knowledge on marital relationships in Africa while providing evidence-based recommendations for marriage counsellors, psychologists, religious institutions, family welfare practitioners, and policymakers seeking to promote healthy, resilient, and psychologically fulfilling marriages in Cameroon.

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