## SOURCES OF CONFLICT IN THE LIFE OF MARRIED PHYSICIANS<sup>1</sup>

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Studies of "medical marriages" abroad have suggested that while many physicians and spouses report unhappy marriages, they tend to stay in their marriages rather than to divorce and look for new partners. The lack of leisure time and the time pressures of work presented the biggest source of stress cited in the literature. Too many patients to see in too short a time, too large a case load, and too much time on call were mentioned repeatedly. The physician's tendency to work long hours leaves little time for interaction with his or her spouse. However, despite the popularity of this explanation, studies have consistently failed to find any correlation between long hours of work and either unhappy marriage or divorce.

There have been no local studies on the lives of married physicians. It was decided to replicate a descriptive study done by Menninger *et al*, in the hope of helping colleagues in the medical profession who have been increasingly seeking marital counselling. There is a need to obtain a more thorough understanding of marital unhappiness in the medical marriage. This study further aims to determine the factors that contribute to discord in the physician's marriage.

#### **METHODS**

Fifty-two physicians and fifty-two physician's spouses belonging to the basic and clinical faculty of the University of the East-Ramon Magsaysay Memorial Medical Center (UERMMMC) were surveyed. The self-administered questionare formulated by Menninger et al. was utilized. In addition to a simple 5-point rating scale of marriage gratification, both the physician and the spouse questionnaires listed 15 potential sources of marital conflict. The respondent was

<sup>&</sup>lt;sup>1</sup> Paper prepared in fulfillment of a requirement on the residency program at the University of the East-Ramon Magsaysay Memorial Medical Center (UERMMMC) Department of Psychiatry.

<sup>&</sup>lt;sup>2</sup> A "medical marriage" is one in which one of the partners is a physician, male or female.

asked to rate these issues on a scale of 0 to 5 according to their importance as a source of conflict in his or her marriage (0="not applicable," 1="of limited importance," 2= "of mild importance," 3= "of moderate importance," 4= "of considerable importance," 5= "of paramount importance"). Both physician and spouse were also asked to rate 12 frequently heard complaints about one's spouse according to their importance using a similar 0-5 rating scale.

#### **FINDINGS**

The findings regarding marital gratification reflect the fact that despite the fact that some 68% of the physician sample and 65% of the spouse sample had sought marital counselling, a majority of the repondents found their marriages either extremely or moderately gratifying.

There seems to be considerable agreement among physicians and their spouses regarding the sources of conflict in the marital relationship. Time considerations ranked highest in both lists. The areas of disagreement include items on sexual activity and communication styles. The major concern of physicians was that the spouses were not interested in sexual activity, while the primary complaint of spouses was that the physicians would not talk to them enough. While the spouses would prefer some intimate talk, the physicians would rather make love to them.

### CONCLUSIONS AND RECOMMENDATION

Lack of time appears to be the chief source of conflict in the life of married physicians, at least in UERMMMC. In addition, the marital partners seemed to have differing perceptions of the problems in the marital relationship and in each other, differing communication styles and differing needs for intimacy.

The time pressures of work leave a physician little time for meaningful interaction with his or her spouse. On the brighter side, however, observations lend credence to the notion that the partners in a "medical marriage" tolerate a healthy discord without resorting to marital separation. Although acknowledging the presence of significant marital problems, they still refer to their marriages as gratifying because of lowered expectations regardingmarital bliss or because of a need to project a facade of marital harmony Through this paper, other studies are encouraged in order to formulate ways of further assisting married physicians.