

## The impact of COVID-19 Marital and Family Experiences on Post Pandemic Marital Quality among Married Christians

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### Abstract

*Low marital satisfaction is associated with negative impact on the individual, dyad and family. External stressors, such as the Covid-19 global pandemic, have the potential to disrupt marital satisfaction, yet the evidence from low- and middle-income settings remains limited. The purpose of this study was to examine the impact of COVID-19 related experiences on marital quality among the target population of married persons in selected churches within Nairobi County, Kenya. The study used a cross sectional research design. The study sites and participants were purposively selected and a sample of 204 married individuals who met the criteria participated in the study. The study collected data using the Locke–Wallace Marital Adjustment Test to measure marital satisfaction and a structured sociodemographic questionnaire to capture COVID-19–related experiences. Data analysis involved descriptive and inferential analyses performed using Statistical Package for Social Sciences Version 27 (SPSS). The Chi-square test was used to assess associations between marital satisfaction and experiences during the pandemic. The results showed that increased conflicts with the spouse, feeling socially isolated, unequal sharing of chores with the partner, and unequal sharing of child care were significantly associated with marital distress. These findings suggest that the negative effects of COVID-19 on marital quality endured post pandemic. The study highlights the need for targeted marital and family support interventions during and after large-scale societal crises and recommends the integration of continuous couples' and family psychosocial support within church and community settings.*

**Keywords:** Marital distress, COVID-19, marital satisfaction, external stressors

## INTRODUCTION

The marital relationship occurs within a broader social and environmental context (Paprocki & Baucom, 2017). This context is important to consider when examining factors influencing marital satisfaction because factors in the environment directly impact the quality of the marital relationship. Falconier and Kuhn (2019) describe external stressors as stressful circumstances that originate outside the couple's relationship. External stressors have the potential to affect the atmosphere at home producing either tension or adaptability (Paprocki & Baucom, 2017; Salama et al., 2025). Thus, external stressors affect the family and marital relationship by changing the interpersonal relations within the family (Prime et al., 2020). Negative marital interactions can arise due to external stressors such as challenges in parenting (Karney & Bradbury, 2020), stress at work (Fellows et al., 2015) and cultural stressors (Oladipo et al., 2013). In addition to these typical stressors, couples lived through the novel coronavirus (COVID-19) which is one of the global external stressors on marital and family life (Balzarini et al., 2023; Lebow, 2020; Kaslow & Graves, 2021). There is evidence to show that when couples deal poorly with these stressors, there is a potential for creating marital distress (Paprocki & Baucom, 2017). Thus, how couples cope in the face of typical external stressors including global challenges such as COVID-19 affect whether they will experience marital distress or marital satisfaction in their relationship.

COVID-19 was declared a global pandemic on 11<sup>th</sup> March, 2020 (Cucinotta & Vanelli, 2020). The World Health Organization (WHO) data as of 13<sup>th</sup> October, 2024 indicated that globally, there were a total of 776, 618, 091 confirmed cases of COVID-19 with 7,071,324 persons having succumbed to the virus. The confirmed cases had increased to 778, 974, 005 by 30<sup>th</sup> November, 2025. In Africa, there were 9, 583, 768 reported cases of COVID-19 and in Kenya, there were 344, 109 confirmed cases and 5689 deaths (WHO, 2024; WHO 2025). The global threat posed by COVID-19 on all spheres of life, including physical health, economic, social, education and others has been controlled. However, the global pandemic left a wake of long-term impacts on the economy, healthcare and family life that people are still grappling with in this post-pandemic era (Lee et al, 2023).

According to Pietromonaco and Overall (2021), COVID-19 consequences included experiencing threat and concern to one's health and the health of loved ones including family. Fiorillo and Gorwood (2020) found that the experience of COVID-19 and the resultant containment measures of quarantine, social distancing and self-isolation were risk factors for mental health problems. According to van Gelder et al. (2020), the psychological effects of COVID-19 included stress, frustration, anger, depression and post-traumatic stress disorder. The prolonged stress caused by COVID-19 was associated with conflict at home, activated psychological defences such as denial and humor, triggered unresolved childhood issues, and an increase in demand for psychotherapy services (Blackman, 2020). Research shows that mental health problems that arise in the context of significant life stressors can lead to marital distress (Prime et al., 2020; Salama et al., 2025). Additionally, Prime and colleagues highlighted that previous studies found evidence for an increase in mental health problems and in substance abuse following periods of intense stress, for instance, in the aftermath of natural or manmade disasters. They concluded that declining mental health following a large-scale crisis can contribute to marital problems.

A further stressor associated with COVID-19 was social isolation. According to Balzarini et al. (2023), stay at home and social distancing policies implemented globally limited the opportunities that people had to maintain social networks and activities which were critical for wellbeing. Rituals of connection such as church or support groups which are often important for resilience were interrupted (Lebow, 2020). Feelings of loneliness arising from social disconnection can strain the marital relationship. Studies show that during COVID-19 the social support obtained from outside home was lowered. Although some relationships transitioned to virtual means of connecting, many did not (Prime et al., 2020). In addition to concerns over health and social isolation stress, COVID-19 also caused financial strain to marital partners and families which affected marital quality. Families reported experiencing financial vulnerability due to the pandemic (Lebow, 2020). Couples were further faced with the uncertainty and financial strain caused by COVID 19 (Balzarini et al., 2023; Pouradeli et al., 2024; Vanterpool et al., 2025). There were concerns about losing livelihoods as the pandemic continued (Fisher et al., 2020) and piling economic pressures on families after the pandemic (Pouradeli et al., 2024).

In the height of the pandemic, there were significant changes in family (Turliuc & Candel, 2021). COVID-19 exposed families to strain as families struggled to keep a work family balance (Chung et al., 2023) with less support and an increased caregiving burden (Prime et al., 2020). This was further aggravated because schools and day care facilities were closed and parents were tasked with balancing work with childcare, house chores and at times facilitating technology assisted learning for their children (Chung et al., 2023; Fisher et al., 2020). Three critical concerns on how COVID-19 affected families at its onset were highlighted by Fisher et al. (2020). Firstly, there were concerns for essential health workers who were living separately from their families in order to lower the risk of exposing family members to the virus. Secondly, there were apprehensions that stay at home measures instituted by many governments increased gender inequalities with women shouldering the heavier burden of domestic work. Lastly, there was concern over the safety of women at home due to the heightened risk for intimate partner violence. Campbell (2020) echoed the concerns over rising cases of domestic violence in the wake of COVID-19. The concern was valid as Epifani et al. (2021) found that the increased marital dissatisfaction coupled with enhanced proximity heightened vulnerability for domestic violence for couples experiencing marital conflict.

COVID-19 initially impacted married life in both positive and negative ways (Balzarini et al., 2022). Government orders that restricted movement and gatherings brought family units in close and continual physical and emotional contact. Both family closeness and feelings of resilience were present as were stress and conflict. There was also loss of family members, and different feelings including anxiety about the potential of experiencing loss (Lebow, 2020).

In their review of literature of previous crises that have posed a threat on large scale levels including natural disasters, economic recessions and terrorist attacks, Prime et al. (2020) illustrated how COVID-19 had the potential to impact family wellbeing and marital quality in the short and long term. They noted that external contextual stress affects the marital dyad and the effects cascade to the children and the family as a unit. Prime and colleagues continued to argue that the pandemic stood to increase the individual psychological distress experienced by

marital partners, affect the marital quality, impact the relationship between parents and children and also between siblings. They warned that when families and marital dyads have prior vulnerabilities, their risk for adverse relational outcomes due to COVID-19 related stressors were high and that functional and healthy family and marital relations stood to buffer everyone in the family from such stressors. Moreover, confinement at home and social distancing measures disrupted daily routines and rituals practiced in families. Parents had to set new limits of how to share the same space and enforce restrictions about going outside and play, a task that was different prior to the pandemic. Therefore, family flexibility and adaptability were on the test (Balzarini et al., 2023; Sentieiro et al., 2025).

COVID-19 changed life in significant ways by disrupting family rituals and routines and affecting life cycle transitions including birth, marriage, illness care, death and loss and grief (Pouradeli et al., 2024). Research indicates that family routines and rituals are critical in promoting resilience when experiencing stress (Harrist et al., 2019). COVID-19 disruption of major family rituals and routines was identified as a threat to family and marital ability to cope with related stressors (Prime et al., 2020). This is because rituals are used to enhance connection, build a sense of belonging and create shared meaning which has been found to promote marital satisfaction (Gottman & Silver, 2015).

Prime et al. (2020) argued that couples and families who sought professional help to enhance closeness were likely to experience greater resilience and functional coping in the face of the COVID-19 pandemic and its aftermath. They made a case for intervening with families and pointed out that the use of teletherapy could increase access to help. The authors emphasized that therapy was necessary to mitigate the adverse effects of the pandemic on family and marital life during and after pandemic.

Therefore, the current study sought to examine the impact of COVID-19 marital and family experiences on post pandemic marital quality among married Christians in Nairobi, Kenya.

## METHODOLOGY

The study used a cross sectional research design to establish the relationship between COVID-19-related experiences and marital satisfaction among married persons. This design enabled the collection of data at a single point in time and facilitated the assessment of associations between marital satisfaction and contextual stressors that the participants experienced during the pandemic. A target population is defined as a group of people with a common defining characteristic that the researcher can identify and study (Ayiro, 2024). The target population for this study was married persons in selected churches within Nairobi County who were experiencing marital distress. The study employed purposive sampling to select both the research sites and participants. The churches were purposively selected based on reports from church leadership indicating that marital distress was a concern in their congregation. These churches selected had populations with comparable demographic characteristics, including socioeconomic status, age distribution, multicultural diversity, and access to technology, and were located within the Nairobi Metropolitan region. The goal of sampling was to obtain participants who represented the target population and could address the objectives of the study

(Creswell, 2013). Purposive sampling was utilized as it allows for the deliberate selection of participants and sites that best answer the research questions and is commonly used when participants are selected based on accessibility, availability, and relevance to the study (Elfil & Negida, 2017). A total of 204 married participants were recruited after being informed about the purpose of the study and providing informed consent.

Data was collected using the self-administered Locke Wallace Marital Adjustment Test (MAT) to assess marital satisfaction and sociodemographic questionnaire to assess factors associated with marital distress. The study utilized descriptive and inferential data analyses using the Statistical Package for Social Sciences Version 27 (SPSS). The participant characteristics and levels of marital distress were summarized using descriptive statistics, including means, standard deviations, and ranges. Thereafter, the study performed bivariate analysis using the Chi-square test to examine associations between marital distress and factors related to the participants COVID-19 experiences. Marital distress was modelled as the dependent variable, while sociodemographic and contextual factors were the independent predictors. The study observed ethics through voluntary participation, informed consent, confidentiality, anonymity and securing requisite approvals.

## RESULTS

### Demographic Characteristics of the Respondents

The study was carried out with 204 married participants with a mean age of 41.3 years, indicating a predominantly middle-aged sample. The largest proportion of participants were aged 31–40 years (40.9%), followed closely by those aged 41–50 years (39.9%), suggesting that the majority of respondents were in mid-life stages. Participants aged over 51 years constituted 10.3% of the sample, while those aged 20–30 years represented the smallest age group at 8.9%. Concerning marital duration, nearly half the participants reported being married for 0–10 years (44.3%) and a substantive proportion reported they had been married for 11–20 years (36.4%). Participants with 21–30 years of marital duration accounted for 16.3%, while only a few (3.0%) reported being married for 31 years and above.

### *Impact of COVID-19 on marital and family experiences*

The participants reported the various ways COVID-19 affected their marital relationships. The participants indicated that there were positive marital and family experiences during the pandemic.

*Table 1: The Impact of COVID-19 on Marital Relationships and Family Experiences*

COVID-19 Experience	Response	N	%
Confined at home	No	46	22.5%
	Yes	158	77.5%
Worked remotely	No	85	41.7%
	Yes	119	58.3%
Income reduced	No	79	38.7%
	Yes	125	61.3%
Increased quality time with spouse	No	57	27.9%
	Yes	144	70.6%
	No response	3	1.5%
Increased conflict with spouse	No	107	52.5%
	Yes	95	46.6%
	No response	2	1.0%
Increased quality time with children	No	23	11.3%
	Yes	169	82.8%
	No response	12	5.9%
Increased conflict with children	No	156	76.5%
	Yes	35	17.2%
	No response	13	6.4%
Felt socially isolated	No	106	52.0%
	Yes	95	46.6%
	No response	3	1.5%
Financial strain	No	75	36.8%
	Yes	128	62.7%
	No response	1	0.5%
Struggles to balance work and family	No	79	38.7%
	Yes	123	60.3%
	No response	2	1.0%
Unequal sharing of chores with partner	No	93	45.6%
	Yes	109	53.4%
	No response	2	1.0%
Unequal sharing of child care	No	112	54.9%
	Yes	80	39.2%
	No response	12	5.9%

Table 1 shows the participants' views on how COVID-19 affected their marital relationships. The majority felt that due to COVID-19 lockdowns, they had increased quality time with children (82.8%), were confined at home (77.5%) and had increased quality time with spouse (70.6%). The negative aspects were feeling socially isolated (46.6%), experiencing financial strain (62.7%), reduced income (61.3%), struggles to balance work and family (60.3%), and unequal sharing of child care responsibilities (39.2%) and chores (53.4%) with partner. These findings imply that the participants experienced both negative and positive impact of the pandemic on family life.

### Association between Covid-19 Experiences and Marital Distress Post Pandemic

The study sought to examine the association between COVID-19–related experiences and marital distress in the post-pandemic period. In this regard, respondents were analyzed based on selected dimensions of their COVID-19 experiences and corresponding indicators of marital distress. Table 2 presents the distribution of respondents according to the association between COVID-19 experiences and marital distress after the pandemic.

Table 2:

Marital distress Severity	No		Yes		Total		p
	N	%	N	%	N	%	
<b>Unequal sharing of chores with partner</b>							
Extreme M.D(0-85)	27	29.0%	56	51.4%	83	41.1%	$\chi^2=12.73$ df=3 p=.005
Moderate M.D(86-100)	15	16.1%	17	15.6%	32	15.8%	
M.S(101-129)	36	38.7%	29	26.6%	65	32.2%	
High M.S(130-158)	15	16.1%	7	6.4%	22	10.9%	
Total	93	100.0%	109	100.0%	202	100.0%	
<b>Unequal sharing of child care</b>							
Extreme M.D(0-85)	31	27.7%	48	60.0%	79	41.1%	$\chi^2=20.38$ df=3 p=.001
Moderate M.D(86-100)	22	19.6%	10	12.5%	32	16.7%	
M.S(101-129)	45	40.2%	16	20.0%	61	31.8%	
High M.S(130-158)	14	12.5%	6	7.5%	20	10.4%	
Total	112	100%	80	100%	192	100%	
<b>Struggles to balance work and family</b>							
Extreme M.D(0-85)	24	30.4%	59	48.0%	83	41.1%	$\chi^2=72.08$ df=3 p=.066
Moderate M.D(86-100)	13	16.5%	19	15.4%	32	15.8%	
M.S(101-129)	30	38.0%	35	28.5%	65	32.2%	
High M.S(130-158)	12	15.2%	10	8.1%	22	10.9%	
Total	79	100%	123	100%	202	100%	
<b>Financial strain</b>							
Extreme M.D(0-85)	26	34.7%	56	43.8%	82	40.4%	$\chi^2=3.45$ df=3 p=.327
Moderate M.D(86-100)	13	17.3%	19	14.8%	32	15.8%	
M.S(101-129)	24	32.0%	42	32.8%	66	32.5%	
High M.S(130-158)	12	16.0%	11	8.6%	23	11.3%	
Total	75	100%	128	100%	203	100%	
<b>Felt socially isolated</b>							
Extreme M.D(0-85)	24	22.6%	57	60.0%	81	40.3%	$\chi^2=31.49$ df=3 p=.001
Moderate M.D(86-100)	25	23.6%	7	7.4%	32	15.9%	
M.S(101-129)	41	38.7%	25	26.3%	66	32.8%	

Marital distress Severity	No		Yes		Total		p
	N	%	N	%	N	%	
High M.S(130-158)	16	15.1%	6	6.3%	22	10.9%	
Total	106	100%	95	100%	201	100%	
Increased conflict with children							
Extreme M.D(0-85)	64	41.0%	15	42.9%	79	41.4%	$\chi^2=4.56$
Moderate M.D(86-100)	23	14.7%	9	25.7%	32	16.8%	df=3
M.S(101-129)	50	32.1%	10	28.6%	60	31.4%	p=.207
High M.S(130-158)	19	12.2%	1	2.9%	20	10.5%	
Total	156	100%	35	100%	191	100%	
Confined							
Extreme M.D(0-85)	14	30.4%	69	43.7%			$\chi^2=3.12$
Moderate M.D(86-100)	8	17.4%	24	15.2%	32	15.7%	df=3
M.S(101-129)	19	41.3%	47	29.7%	66	32.4%	p=.373
High M.S(130-158)	5	10.9%	18	11.4%	23	11.3%	
Total	46	100.0%	158	100.0%	204	100.0%	
Work remotely							
Extreme M.D(0-85)	30	35.3%	53	44.5%	83	40.7%	$\chi^2=.350$
Moderate M.D(86-100)	15	17.6%	17	14.3%	32	15.7%	df=3
M.S(101-129)	27	31.8%	39	32.8%	66	32.4%	p=.320
High M.S(130-158)	13	15.3%	10	8.4%	23	11.3%	
Total	85	100%	119	100%	204	100%	
Income reduced							
Extreme M.D(0-85)	33	41.8%	50	40.0%	83	40.7%	$\chi^2=.797$
Moderate M.D(86-100)	14	17.7%	18	14.4%	32	15.7%	df=3
M.S(101-129)	23	29.1%	43	34.4%	66	32.4%	p=.850
High M.S(130-158)	9	11.4%	14	11.2%	23	11.3%	
Total	79	100%	125	100%	204	100%	
Increased quality time with spouse							
Extreme M.D(0-85)	30	52.6%	52	36.1%	82	40.8%	$\chi^2=5.311$
Moderate M.D(86-100)	9	15.8%	23	16.0%	32	15.9%	df=3
M.S(101-129)	13	22.8%	52	36.1%	65	32.3%	p=.150
High M.S(130-158)	5	8.8%	17	11.8%	22	10.9%	
Total	57	100%	144	100%	201	100%	
Increased conflict with spouse							
Extreme M.D(0-85)	20	18.7%	63	66.3%	83	41.1%	$\chi^2=56.80$
Moderate M.D(86-100)	16	15.0%	16	16.8%	32	15.8%	df=3
M.S(101-129)	52	48.6%	13	13.7%	65	32.2%	p=.001

Marital distress Severity	No		Yes		Total		p
	N	%	N	%	N	%	
High M.S(130-158)	19	17.8%	3	3.2%	22	10.9%	
Total	107	100%	95	100%	202	100%	

  

Increased quality time with children							
Extreme M.D(0-85)	5	21.7%	74	43.8%	79	41.1%	$\chi^2=6.94$
Moderate M.D(86-100)	3	13.0%	29	17.2%	32	16.7%	df=3
M.S(101-129)	10	43.5%	51	30.2%	61	31.8%	p=.074
High M.S(130-158)	5	21.7%	15	8.9%	20	10.4%	
Total	23	100%	169	100%	192	100%	

Table 2 presents the association between COVID-19 experiences and marital quality (marital distress – MD and marital satisfaction – MS) . The study assessed the association between COVID-19 experiences and marital distress levels. The Chi-square statistic indicated that COVID-19 related factors that were related to marital distress were having increased conflicts with the spouse  $\chi^2(202,3)=56.80, p=.001$ , feeling socially isolated  $\chi^2(201,3)=31.49, p=.001$ , unequal sharing of child care  $\chi^2(192,3)=20.38; p=.001$ , and unequal sharing of chores with one's partner  $\chi^2(202,3)=12.73; p=.005$ . This suggests that experiencing increased conflicts with their partner during COVID-19, was related to marital distress among respondents. In addition, these findings imply that marital distress was associated with lacking partners support in child care and household chores during the pandemic among the respondents.

## DISCUSSION

After intense and dedicated global efforts, the COVID-19 pandemic ceased to be a public health emergency on 5<sup>th</sup> of May, 2023 (WHO, 2024). Still the effects of the pandemic linger with research emerging on the impact on various aspects of life. Unprecedented experience of global lockdown and social distancing measures meant that families and couples spent more time together during the pandemic and also tackled novel challenges. This study sought to assess the pandemic marital experiences and their relationship to post pandemic marital quality. The Chi-square test showed that the COVID-19 related factors that were related to marital distress were having increased conflicts with the spouse ( $p=.001$ ), feeling socially isolated ( $p=.001$ ), unequal sharing of child care ( $p=.001$ ), unequal sharing of chores with the partner ( $p=.005$ ). The findings of this study suggest that post pandemic marital distress, was associated with experiences that couples had in their relationships during the pandemic and lockdown. This suggests that there were residual effects of the pandemic on marital quality among the participants.

This study's findings are supported by previous literature that has documented the impact of the pandemic on the individual, marital relationships and family life. There were serious changes in routines and way of life during the pandemic (Balzarini et al., 2023; Prime et al., 2020). Parenting exhaustion was found to have affected relationship quality and increased

marital conflicts (Carvalho & Matias, 2024; Wisyaningrum et al., 2021). The increased caregiving burden and childcare demands rose with children studying from home (Turliuc & Candel, 2021; Vavdich & Cheung, 2023) which further strained the partner caring for the children. Increased isolation affected personal wellbeing and increased likelihood of anxiety and depression (Fiorillo & Gorwood, 2020). Disrupted social networks were associated with increased feelings of isolation and loneliness (Balzarini et al., 2023) and important social and spiritual gatherings that support resilience were interrupted (Lebow, 2020). Increased marital conflict (Fisher et al., 2020) was associated with rising cases of domestic violence in the wake of COVID-19 (Campbell, 2020). This was confirmed by Epifani et al. (2021) found that the increased marital dissatisfaction coupled with enhanced proximity heightened vulnerability for domestic violence for couples experiencing marital conflict. Still some marriages thrived in the enhanced closeness (Lebow, 2022; Salama et al., 2025).

The impact of the pandemic on family life is of concern (Fisher et al., 2020; Lebow, 2020; Pouradeli et al., 2024). Resultantly, there has been growing concern on the potential long-term impact of the global pandemic. Balzarini et al. (2023) examined the impact of COVID-19 related stressors such as social isolation, strained finances and stress on the quality of the marital relationship and marital conflict. The study also investigated the extent to which perception of partners' responsiveness to their needs for care, understanding and validation cushioned partners against decreased relationship quality in the face of COVID -19 stressors. The study that drew a sample from 57 countries and was conducted soon after COVID-19 was declared a pandemic, found that COVID-19 related stressors including social isolation, financial strain, and feelings of general stress, are linked to lower relationship satisfaction and increased relationship conflict. In addition, the study established that an individual's perception of their partner as responsive, that is, as caring, interested, understanding and validating, was a protective factor from the negative impact of COVID-19 related stressors on their relationship quality. Another study found that partners who perceived their spouse as less responsive and less supportive during the pandemic reported higher marital distress and dissatisfaction (Epifani et al., 2021). Lack support for mothers and unequal childcare and domestic support were found to increase marital distress during the pandemic while sharing domestic chores and childcare was linked to greater marital satisfaction (Sentieiro et al., 2025).

In another study, Chung et al., (2023) examined the impact of COVID 19 on marital quality and parenting. The study found that in the wake of the pandemic, higher parenting stress was associated with poor work family balance. In addition, poor family work balance, associated with working remotely, lack of support and increased childcare work, was correlated with increased marital conflict. Epifani et al. (2021) found that working from home increased marital conflict as it increased the time couples spent together which aligns to Vanterpool et al. (2025) findings that increased time together led to more conflicts for some couples. Other studies state that marital satisfaction was negatively impacted by the pandemic (Liu & Hsieh, 2024). Similar to the findings of this study, studies show that effects of the stressors experienced during the pandemic persist post pandemic (Pouradeli et al., 2024).

Similar to this study findings, other studies have found both positive and negative impacts of COVID-19 on marital quality. Vanterpool et al. (2025) found that couples reported that increased time together enhanced the quality of the relationship and couples explored new

activities together that helped them bond. The study also reported some couples experienced better communication and increased appreciation for each other. This is supported by the findings of Salama et al. (2025) who found that there were mixed impacts of COVID-19 on marital quality. Systematic reviews suggest that the varying impact was moderated by coping strategies, adaptation and moderate to high income during the pandemic (Sentieiro et al., 2025). In addition, flexible work schedules during and after the pandemic enabled a better work family balance resulting in positive family relationships (Dai et al., 2025).

## CONCLUSION

This study suggests that the impact of COVID-19 on marital quality endured beyond the pandemic. Marital and family experiences during the pandemic persisted to post-pandemic life with significant association between feelings of isolation, marital conflict, unequal sharing of household chores and childcare during the pandemic affecting post-pandemic marital satisfaction levels. These findings demonstrate how large-scale disruptions in the society can leave behind enduring effects on marital relationships even after the crisis has passed and normalcy resumed. Although the pandemic is behind us, this study demonstrates that the relational consequences it had remain embedded within marital systems. This study contributes to the growing body of evidence that shows that marital quality is not only influenced by individual and relational factors but also by external stressors. The findings of the study underscore the need to have response frameworks that combine support during crisis and long-term relationship support approaches. The church and marriage therapists have the opportunity to support couples affected by pandemic related stressors especially with interventions that help address unresolved conflicts, social disconnection, inequitable childcare and domestic labor in difficult moments which can help couples enhance marital satisfaction and build resilience to buffer them in future crises. Future research should explore longitudinal trajectories of marital quality after crisis and evaluate the effectiveness of post-crisis marital interventions.

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