Healthy Marriage Initiatives

On the Need for Empiricism in Policy Implementation

Matthew D. Johnson
Binghamton University

The association between marriage and well-being has led to policies that promote marital interventions and discourage divorce. These include federal initiatives specifically targeting poor couples and couples of color. While there are many prospective studies on marriage that have informed some couple interventions, the studies that are included in this literature sampled predominantly White and middle-class couples. By comparison, far less is known about the longitudinal predictors of relationship satisfaction and status for poor couples and couples of color. Therefore, it is unsurprising that preliminary data on applying current interventions to the couples targeted by these federal initiatives have been disappointing. In this article, I detail three concerns with these initiatives, propose a course of psychological research to address deficits in what is known about poor couples and couples of color, and make specific recommendations to enhance the effectiveness of these initiatives.

Keywords: marriage, couples, relationship education, social policy, public health

Preliminary research shows that marriage education workshops can make a real difference in helping married couples stay together and in encouraging unmarried couples who are living together to form a more lasting bond. Expanding access to such services to low income couples . . . should be something everybody can agree on.

—Barack Obama, The Audacity of Hope

In the last decade, politicians and governmental officials from across the political spectrum took note of the fact that being poor or being a person of color was correlated with being unmarried or divorced, which is an association that is plainly evident in the data. The response of state and federal governments was to increase access to marital counseling and education. The attention and funding that resulted from these policies led to a proliferation of couple-based interventions. Yet, it is unclear whether these interventions will reach their targeted populations, whether they will work if they do reach them, and how couples and clinicians might select from the hundreds of available interventions. Psychologists have an opportunity to generate and disseminate empirical knowledge that will significantly enhance the efficacy of these well-intentioned initiatives. My goal in this article is to suggest a path forward for researchers to contribute to these initiatives. To do this, I briefly review the data linking marital status, poverty, and ethnicity; I propose a model for future psychological research that addresses gaps in our knowledge about the couples targeted by these interventions; and I make recommendations for improving current policy.

Marital Status as a Correlate of Poverty and Ethnicity

The National Survey of Family Growth (http://www.cdc.gov/nchs/nsfg.htm) examined relationship status by race and ethnicity (see Table 1). These data demonstrate that non-Hispanic Black women are far more likely to be single and to be single parents than are women of other races. Although these data become more complicated when considered at the level of racial subgroups—for example, there is great variability among Latino subgroups—the relationship status statistics for Blacks are striking. Relationship status and parental status disparities are also evident when one examines the data by economic status. Of families at or near the poverty level, 51.8% of fathers were not married to the mother of their first child when she or he was born, and an additional 20.3% of fathers were neither living with nor married to the mother when the father’s first child was born (as opposed to 33.8% and 15.6%, respectively, for the total population; Martinez, Chandra, Abma, Jones, & Mosher, 2006). Beyond relationship status, there is evidence of racial disparities in terms of relationship quality as well. For example, among married couples, Blacks report lower marital quality, more extramarital affairs, more partner violence, and less likelihood of feeling loved by their partners compared with White couples (Broman, 2005; Corra, Carter, Carter, & Knox, 2009). Therefore, being poor or one of several ethnicities increases one’s chances of being unmarried (or unhappily married), having children outside of marriage, and dissolving cohabiting and marital relationships (see also Lichter, Qian, & Mellott, 2006).

In samples that are predominantly middle class and White, marriage and marital quality are associated with many beneficial outcomes, including better health outcomes (Kiecolt-Glaser & Newton, 2001), lower absenteeism (e.g., Markussen, Roed, Røgeberg, & Gaure, 2011),...
and decreased mortality (e.g., N. J. Johnson, Backlund, Sorlie, & Loveless, 2000). These associations are beginning to be examined among couples of color and poor couples. For example, a recent study described the association between marital quality and health as similar across ethnicities (McShall & Johnson, 2012). The moderating effects of marital variables are also being studied. For example, among African Americans, greater marital quality lowered the health risks of highly hostile individuals (Gyll, Cutrona, Burzette, & Russell, 2010). The correlates of marital status and quality that have received the most attention are child well-being and parenting. The association of partnership instability and maladjustment in children (e.g., behavioral problems) has been demonstrated broadly (Fomby & Cherlin, 2007) and within the Fragile Families data set, which sampled poor couples from urban areas having their first child and oversampled unmarried couples (Osborne & McLanahan, 2007). In addition to child well-being, it is well documented that the relationship quality of the parents is associated with the quality of parenting (Erel & Burman, 1995). More recently, this association has been described among poor families as well (Carlson, Pilkaukas, McLanahan, & Brooks-Gunn, 2011).

One extension of the association of relationship quality and parenting that has received a great deal of attention recently is the role of African American fathers. While there has been much theorizing on the subject, descriptive studies of parenting among poor couples and couples of color are creating a robust empirical literature about relationship quality and parenting in these populations. For example, Garrett-Peters, Mills-Koonce, Zerwas, Cox, and Vernon-Feagans (2011) parsed complex ethnic and familial variables to demonstrate that African American fathers differ from other fathers in their use of verbal affect with their infants. Yet, despite the numerous studies describing the association of marital status and satisfaction with all manner of positive outcomes, it is not at all clear that there is a causal benefit to marriage.

Two models have been proposed to explain the association between marriage and positive outcomes. In the selection model, people with more positive attributes, such as higher socioeconomic status and better health, are posited to be more likely to get married. In the protection model, quality marriages are thought to promote more positive outcomes. There are prospective data that support both positions and that may be population specific. For

### Table 1
Probabilities of Relationship Status by Race

<table>
<thead>
<tr>
<th>Status</th>
<th>Asian⁺</th>
<th>Black⁺</th>
<th>Hispanic</th>
<th>White⁺</th>
</tr>
</thead>
<tbody>
<tr>
<td>First marriage by age 30</td>
<td>.77</td>
<td>.52</td>
<td>.77</td>
<td>.81</td>
</tr>
<tr>
<td>First cohabitation transitions to marriage after 1 year</td>
<td>.30⁺</td>
<td>.20</td>
<td>.28</td>
<td>.32</td>
</tr>
<tr>
<td>First cohabitation transitions to marriage after 5 years</td>
<td>.70⁺</td>
<td>.48</td>
<td>.61</td>
<td>.75</td>
</tr>
<tr>
<td>First cohabitation transitions to marriage after 15 years</td>
<td>.89⁺</td>
<td>.69</td>
<td>.84</td>
<td>.96</td>
</tr>
<tr>
<td>First cohabitation dissolves⁺ after 1 year</td>
<td>.21</td>
<td>.19</td>
<td>.17</td>
<td>.22</td>
</tr>
<tr>
<td>First cohabitation dissolves⁺ after 5 years</td>
<td>.49</td>
<td>.56</td>
<td>.43</td>
<td>.49</td>
</tr>
<tr>
<td>First cohabitation dissolves⁺ after 15 years</td>
<td>.69</td>
<td>.79</td>
<td>.65</td>
<td>.68</td>
</tr>
<tr>
<td>First marriage dissolves after 1 year</td>
<td>.01</td>
<td>.05</td>
<td>.03</td>
<td>.03</td>
</tr>
<tr>
<td>First marriage dissolves after 5 years</td>
<td>.10</td>
<td>.28</td>
<td>.17</td>
<td>.20</td>
</tr>
<tr>
<td>First marriage dissolves after 15 years</td>
<td>.23</td>
<td>.55</td>
<td>.42</td>
<td>.42</td>
</tr>
<tr>
<td>Married to biological parent of first child at birth</td>
<td>.66⁺</td>
<td>.37</td>
<td>.52</td>
<td>.77</td>
</tr>
<tr>
<td>Cohabiting with biological parent of first child at birth</td>
<td>.18⁺</td>
<td>.24</td>
<td>.32</td>
<td>.12</td>
</tr>
</tbody>
</table>

Note. All data are from the National Survey of Family Growth; however, data in the first 10 rows are for women only (Bramlett & Mosher, 2002), and data in the last two rows are for men only (Martinez et al., 2006). 
⁺Non-Hispanic.  
⁻Figure given is actually the total for all races because Asian was not separated out for this variable.  
⁻⁻Includes couples who transitioned to marriage and then dissolved their relationship.
example, in one study that included only women, the data supported the selection model except for unemployed women (Waldron, Hughes, & & Preston, 1996). Yet, other studies have demonstrated specific prospective protective effects (e.g., Heinz, Wu, Wiktewitz, Epstein, & Preston, 2009). While it seems clear that there are no protective effects for spouses in discordant marriages (e.g., Kiecolt- Glaser, Bane, Glaser, & Malarkey, 2003; Whisman, 2007), there appears to be evidence of both selection and protection effects (Murray, 2000). In any case, as the correlational data on marriage, race, poverty, and child outcomes became more widely known to the public, especially starting in the late 1990s, marriage became an inviting target for politicians of all stripes.

**Government Responses to Marital Variables Being Correlates of Poverty and Ethnicity**

**State-Level Responses**

The findings on the benefits of two-parent households have led policymakers at the state level to try to lower divorce rates by changing divorce laws and encouraging premarital counseling. Eleven states do not allow for a divorce due to “incompatibility, irreconcilable differences, or similar ground” (although all states and territories offer a form of no-fault divorce; “Family Law in the Fifty States,” 2010, p. 976), and a few states have laws that encourage premarital or marital counseling through financial incentives (e.g., Florida; State of Florida, 2000). Louisiana was the first state to combine these policies by allowing couples to register for an alternative marriage license, known as a “covenant” license, that requires premarital counseling and a longer waiting period prior to divorce (State of Louisiana, 1997). In addition, a few states have taken steps to make marriage and relationship education more widely available. For example, the Oklahoma Marriage Initiative (http://www.okmarriage.org/) is a partnership between the state and private organizations with the goal of “helping couples gain access to services and supports to improve their marriage and relationship” using the Prevention and Relationship Enhancement Program (PREP; Markman, Renick, Floyd, Stanly, & Clements, 1993), which is a communication skills-based intervention designed to improve marital quality and prevent dissolution, as the base for the interventions. While some states have amended their laws and others have added services, all of the states have made at least some effort (e.g., convening conferences) toward enhancing marriages.

As interesting and creative as some of the state policies are, I focus on the federal level for three reasons. First, psychologists who are researching marriage and the interventions that target intimate relationships are working on a national level. In other words, as a community of scientists, we do not tend to think in terms of state-centered interventions; rather, we assume (perhaps erroneously) that what works in Oklahoma is also likely to work in Massachusetts. Second, my intention is to “follow the money,” and the federal government has substantially more resources to allocate. Third, it is at the federal level that an opportunity was lost during the initial wave of federal money directed toward improving marriages, which I describe later. As such, some efforts to change policy might be better targeted to the state level (e.g., efforts to alter same-sex marriage laws have mostly been state-level debates); however, the federal effort should be the primary concern of psychologists.

**Federal-Level Responses**

During the Clinton administration, the federal government began to take notice of the association between marital status and poverty. William A. Galston, a senior domestic policy advisor to President Clinton from 1993 to 1995, has been widely quoted on the Internet (e.g., by J. Q. Wilson, 2002, para. 3) as follows: “You need only do three things in this country to avoid poverty—finish high school, marry before having a child, and marry after the age of 20. Only 8 percent of the families who do this are poor; 79 percent of those who fail to do this are poor.” This statement is indicative of the rationale behind the Clinton administration’s advocacy for the 1996 welfare reform bill that was intended to remove disincentives to marriage and to promote two-parent families (for a discussion of the effects of this legislation, see Graefe & Lichter, 2008).

Under the presidency of George W. Bush, the Administration for Children and Families (ACF) developed policy and funding initiatives to promote healthy marriages. The Bush administration emphasized the presence of an involved father as a key benefit of marriage. President Bush noted this emphasis in 2001 when he stated the following: If we are serious about renewing fatherhood, we must be serious about renewing marriage. . . . Healthy marriages are not always possible, but we must remember they are incredibly important for children. Our hearts know this and our nation must recognize this. . . . None of us is perfect, and so no marriage and no family is perfect. After all, all we are human. Yet, we need fathers and families precisely because we are human. (Bush, 2001, para. 25–27)

The specific policies that grew out of this renewed emphasis on marriage were the Healthy Marriage Initiative and, later, the Healthy Marriage Initiatives that were adapted to target specific races and ethnicities. The mission statement of the Healthy Marriage Initiative is “to help couples, who have chosen marriage for themselves, gain greater access to marriage education services, on a voluntary basis, where they can acquire the skills and knowledge necessary to form and sustain a healthy marriage” (U.S. Department of Health and Human Services, Administration for Children and Families, 2005, “Mission Statement”). Because these initiatives were housed in the ACF, the procedures for developing requests for proposals and evaluating funding and grant requests were developed outside of agencies that typically handle scientific grants, such as the National Science Foundation and the National Institutes of Health. This has caused a shift in the type and scope of marital research and interventions that were funded through the federal government. The emphasis on preventing and
treats marital problems led to the establishment of databases and conferences that catalogue the myriad couples interventions currently available to couples and clinicians. However, most of the emphasis has been on applying these interventions to couples deemed most at risk of discord and dissolution. By and large, these programs have been continued by the Obama administration.

Since the initial rollout of the healthy marriage initiatives, a steady stream of federal resources has been devoted to implementing and evaluating demonstration programs in the form of “healthy marriage grants to include marriage education, marriage skills, and relationship skills programs” (U.S. Department of Health and Human Services, 2011, p. 311). Around $100 million has been appropriated to these programs every year since 2007. In Fiscal Year 2010, approximately 79% of this money went to discretionary service grants, 2% went to “research/evaluation,” 10% went to “demonstration/development,” 6% went to “training/technical assistance,” and 3% went to “program support.” However, in Fiscal Year 2011 (the fiscal year as I wrote this), the “research/evaluation” line was zeroed out and there was no request for “research/evaluation” in the 2012 budget (U.S. Department of Health and Human Services, 2011). Past and current projects funded with these allocations may be found at the Administration for Children and Families website (http://www.acf.hhs.gov/programs/opre/project/strengthFamilyProjects.jsp).

The interventions associated with the healthy marriage initiatives tend to have three core components that are common to many empirically supported primary interventions for couples. First, couples are encouraged to be more mindful of their relationship and to better understand the positive associations of marriages that function well. Second, couples are taught relationship problem-solving skills, usually by improving their ability to communicate. Third, the interventions promote more positive connections between the partners, which might include anything from prescriptions for date nights, to working on sexual intimacy, to shared religious experiences. However, in addition to these three core elements, several of the programs have included interventions designed especially to appeal to and affect poor couples or couples of color. For example, the Supporting Healthy Marriage project encouraged the strengthening of supportive relationships beyond the couple, addressed ways of coping with contextual challenges to the relationship, and taught parenting skills (Knox & Fein, 2008). Programs have also included assistance with instrumental support services, such as access to social workers who could help with housing, employment, or child care (Wood, McConnell, Moore, Clarkwest, & Hsueh, 2010). In addition to these points of intervention, most of the organizations worked at altering their programs to make them more appealing to their targeted participants. In fact, the federally funded National Healthy Marriage Resource Center provides detailed instructions on marketing and managing the logistics of an intervention program to make it more appealing to specific populations (National Healthy Marriage Resource Center, n.d.). Therefore, significant efforts have been made to alter existing relationship interventions to make them efficacious with poor couples and couples of color.

Preliminary Outcome Data on Targeted Marriage Initiatives

The results of the first five years of demonstration projects have begun to trickle in. The first of these large projects to report their findings is the Building Strong Families project (BSF: one of the Healthy Marriage Initiatives), which is an outcome study of interventions to improve the relationships of “interested low-income, unwed couples, beginning during pregnancy or around the time of their child’s birth” (Mathematica Policy Research, 2010, para. 2). Despite an emphasis among many of the demonstration projects on using interventions with an empirical basis and samples sizes that eclipsed those of previous outcome studies (N = 5,102 couples total for the eight sites), the results of the evaluation of the BSF project have been disappointing. In six out of eight sites where the BSF program was implemented and evaluated, the outcomes for the treatment groups were no different than those for the control groups. One site (n = 1,010 couples) demonstrated stronger relationship quality in the treatment group compared with the control group, with effect sizes (d) ranging from 0.14 to 0.21 (considered “small” effects by J. Cohen, 1988). Another site (n = 602 couples) demonstrated more negative results in the treatment group relative to the control group, with those in the treatment group being more likely to have dissolved the relationship (d = 0.29), less likely to have shown support or affection (d = 0.19), and more likely for the woman to have reported intimate partner violence (marginally significant at p = .07, d = 0.31). Post hoc explanations of the results from the most efficacious site included that it used a different (and shorter) curriculum from the rest of the programs, that this site mixed married and unmarried couples (no other site served couples who were married before their child was conceived), and that the site had more financial incentives for participant attendance than the other sites (Wood et al., 2010). In addition, there were inconsistent findings on the impact of increased attendance at the successful site; however, attending at least half the sessions increased the likelihood of the couples in the intervention group living together (whether married or not) by 7 to 10 percentage points compared with the control group (Wood et al., 2011).

There were also inconsistencies when the impact of the BSF programs was examined by racial group. There appear to be some benefits for couples in which both partners are African American (slightly over half the sample). For these couples, the intervention group demonstrated moderate improvements in the avoidance of destructive conflict behaviors, the use of constructive conflict behaviors, fidelity, and men’s reports of intimate partner violence. These effects were not present for couples in which only one member was African American; in fact, the intervention increased the likelihood that such couples would dissolve the relationship. There were no other consistent findings across other racial and ethnic groups (Wood

May–June 2012 • American Psychologist 299
et al., 2010). That couples with two African American partners showed greater improvement on some measures compared with the rest of the sample may justify further efforts to tailor interventions to this population, although there were no significant effects on relationship satisfaction or status and all of the significant findings were small effects.

Despite the preliminary nature of the BSF data (the data have not been peer reviewed), they are important because of the size and scope of the project and the under-sized impact of the interventions. In addition, the BSF results are similar to meta-analytic findings from marriage and relationship education programs that demonstrate small treatment effects (\( d = 0.25 \)) and nonsignificant dosage effects (Hawkins & Fackrell, 2010). For example, there were also mixed results in another recent study of low-income parents receiving a “father engagement intervention,” with small effects indicating improvement in parental participation by fathers and less steep declines in relationship satisfaction following an intervention (Cowan, Cowan, Pruett, Pruett, & Wong, 2009). The results of another large (\( N = 5,395 \) couples) multisite outcome study of the benefits of primary couple interventions were released as this article went to press (the Supporting Healthy Marriage Evaluation; see http://www.acf.hhs.gov/programs/opre/strengthen/support_hlthymarr/reports/early_impacts_low.pdf). Among other 12-month findings, couples in the intervention group (compared with the control group) had slightly higher relationship satisfaction (\( d = 0.13 \)), improved communication (\( d_s \) ranged from 0.08 to 0.12), and reduced psychological distress (\( d_s \) ranged from 0.06 to 0.09). These small effects came at a mean cost of $9,100 per couple. There were null effects for marital status and cooperative co-parenting. Thus, although these results have yet to be peer-reviewed, the initial findings—like those from the BSF project—demonstrate the difficulty of applying primary interventions to poor couples and couples of color in an effective and efficient manner.

Three Problems With the Healthy Marriage Initiatives

While cataloging and disseminating the currently available couple interventions and offering service grants to implement them are steps forward, there are three problems that are not addressed in the healthy marriage initiatives. First, the catalog of interventions contains relatively few empirically supported programs, and those that have an empirical basis are not necessarily promoted over others. Second, there is substantial research indicating that those couples most in need of intervention are the least likely to take advantage of couple interventions. Third, the few empirically based interventions that are available are predicated on research that overwhelmingly sampled White, middle-class, and married couples; therefore, it is unclear whether these interventions would apply to those couples most at risk of relationship discord and dissolution even if they availed themselves of the treatments. A discussion of each of these issues follows.

The effort to catalog and disseminate primary, secondary, and tertiary couple interventions has been one of the primary goals of the marriage-focused policies of the last 10 years. Organizations such as Smart Marriages, which endeavors to serve as a clearinghouse of marital interventions for those seeking to help couples (Coalition for Marriage, Family, and Couples Education, 2005), epitomize this effort. Yet, this is usually done in a way that fails to carefully consider the science and efficacy of the interventions that are presented and disseminated. By opening the marketplace to all comers without describing the efficacy or the empirical basis for the interventions, organizations such as Smart Marriages are doing a disservice to the very couples they seek to help by introducing noise into the array of options rather than filtering and clarifying the options. Those researchers and clinicians who have developed and tested effective interventions must face the choice of either entering the fray of such organizations and conferences in the hope that their voices rise above the din or bypassing them while attempting to disseminate their interventions through alternative means. In addition, the dissemination of interventions without critique may give the impression to couples and granting agencies that we know more than we do, thus cutting off interest in and funding toward research that could lead to improving marriages and stabilizing families.

What has also become clear is that the couples who visit the market for primary interventions tend to be the couples who least need the extra help (Sullivan & Bradbury, 1997). The initial goal of decreasing the rates of relationship dissolution was viewed by many as a way of decreasing poverty and improving child outcomes, yet the validity of the premise that marriage is relevant to poor women and men remains in doubt. Marriage has clearly been a goal for most adults, but for poor women there are more immediate concerns. Paying the rent, keeping children safe, and pushing the schools to do better are all urgent matters that make marriage seem less important, if not irrelevant (Loeterman, Kotlowitz, & Loeterman, 2002). Thus, for many who are the targets of these interventions, the idea of focusing on marriage seems self-indulgent when they are doing yeoman’s work to raise their children. In their ethnographic study, Edin and Kefalas (2005) described poor women as having a desire to be married but only after they have completed their schooling and become financially stable. Therefore, interventions directed at poor people that seek to highlight the advantages of being in a satisfying marriage are essentially reinforcing what is already widely accepted—that marriage may be beneficial to them (Edin & Reed, 2005). In the end, it seems that broad-based programs meant to improve intimate relationships are likely to miss their targeted audiences.

Finally, it is not clear whether couple interventions would be effective with the couples who are the primary targets of these initiatives even if they did reach them. Empirically based programs designed to prevent discord and divorce (e.g., Markman et al., 1993) were built on research that sampled mostly White, middle-class couples...
who were either already married or were already planning on being married. Therefore, it is unknown whether applying these interventions to non-White, poor, or less committed couples will be effective. Certainly, there have been some attempts to attend to these issues (e.g., Acitelli, Douvan, & Veroff, 1997; Halford, Markman, Kline, & Stanley, 2003). Yet, most prospective studies of primary interventions have not included enough couples of color to determine their effectiveness with these groups (Hawkins, Blanchard, Baldwin, & Fawcett, 2008). In addition, the relative paucity of basic prospective psychological research on the determinants of relationship satisfaction and stability among poor couples and couples of color leaves the efficacy of even the best interventions in doubt with these couples. Therefore, it is perhaps not surprising that the aforementioned modification of existing interventions to be attractive to and effective with poor couples and couples of color has so far had modest effects.

I am certainly not the first to point out these problems. In fact, a three-way debate has transpired among (a) those noting that the data do not support large-scale interventions like those being promoted by the ACF (Bradbur & Karney, 2004; Karney & Bradbury, 2005), (b) those advocating for large-scale interventions despite the need for more research (Dion, 2005; Halford, Markman, & Stanley, 2008), and (c) those arguing that the government should not be in the business of marriage promotion (Catlett & Artis, 2004; van Acker, 2003), although the last argument has become less relevant as overt marriage promotion has been removed from most of the initiatives in favor of focusing on relationship maintenance and improvement. The primary argument against these policies is that the emphasis on dyadic behavior is not supported by the basic literature on marriage and that, even if it was, the context of intimate relationships among poor people and people of color will further diminish the effects of behavioral interventions. Those arguing for the policy concede these points but argue that primary marital interventions have demonstrated efficacy (Hawkins et al., 2008) and that the best way to test their effectiveness is to implement the policy. I believe more research is needed about the relationships of those who are being targeted by these policies, and I suggest a path forward in the following section.

A Proposed Model for the Study of Poor Couples and Couples of Color

As a science, psychology has fallen behind our colleagues in sociology and other social sciences in addressing questions of how marital satisfaction and status among poor people and people of color affect the well-being of adults, children, communities, and economies. For example, social scientists have documented that poor women value the concept of marriage (Edin, 2000) but that there are many factors that prevent them from getting married (Edin & Reed, 2005; Gibson-Davis, Edin, & McLanahan, 2005; Grae & Lichter, 2008; Harknett & McLanahan, 2004). Popular books have also addressed the contextual factors of family life among poor people that make marriage and marital education seem like a conceit for many poor couples (e.g., Banks, 2011; LeBlanc, 2003). Psychologists have recently begun describing relationship expectations (e.g., Oberlander, Agostini, Houston, & Black, 2010), satisfaction (e.g., Lincoln, Taylor, & Jackson, 2008), and status (e.g., Chaney & Marsh, 2008) across races and ethnicities. In addition, there is some work on contextual variables that mediate these factors (Burton & Tucker, 2009), including religiosity (e.g., Brown, Orbuch, & Bauemeier, 2008) and military service (e.g., Lundquist, 2004; Teachman & Tedrow, 2008). As important and informative as these and many other studies have been, there is a substantial gap between what is known about the predictors of marital distress and dissolution from the marital literature (Karney & Bradbury, 1995) and what is known about the degree to which these predictors hold for unmarried and married couples who are either poor or people of color. Therefore, I briefly review the best supported model of marriage and how it should be tested in the couples who are being targeted by current marital policies.

The development of discord in marriages has been the subject of much theorizing and research that has led to many models of marriage, and these in turn formed the basis of the empirically based interventions. The models from the 1930s (e.g., Terman, 1938; Waller, 1938), 1970s (e.g., Jacobson & Margolin, 1979; Paolino & McCrady, 1978), and 1990s (e.g., Huston, 2000; Karney & Bradbury, 1995) all have at least two key components in common: contextual stress and dyadic behavior. Other aspects of the relationship, such as attachment style (e.g., Hazan & Shaver, 1987), are emphasized in some models, but no model excludes the roles of stress and dyadic behavior. As described in Figure 1, which borrows heavily from past models (e.g., Huston, 2000; Karney & Bradbury, 1995), the predictive nature of stress on relationship quality is moderated by the partners’ behavior toward each other. However, as briefly reviewed in the following sections, these variables have not been studied in couples of color or poor couples well enough to develop effective primary interventions.

Contextual Stress as a Predictor of Marital Discord and Dissolution

The idea that stressful events lead to relationship problems is well established. Hill (1949) developed a model to explain how adverse events affect families. Hill’s model encompassed the following components: (a) the stressful event, (b) the family’s tangible resources, and (c) the family’s definition of the event. Later, others added a temporal component to the model, indicating that a family’s definition of the event and resources may change as the stressful event continues, which may influence later events (McCubbin & Patterson, 1982). Although this model was originally designed to predict family adjustment to stressful events, it has been used to predict marital outcomes on the basis of the assumption that all couples will encounter stressful events (for further discussion of Hill’s model, see Karney & Bradbury, 1995). Such causal models have been supported by retrospective (e.g., Cohan,
Cole, & Davila, 2005) and prospective (e.g., Cohan & Bradbury, 1997; Cohan & Cole, 2002) research. There are a large number of potential stressors that may affect relationship satisfaction and status, many of which have been the subject of a great deal of empirical research; however, the premise of the ACF initiatives is that strong marriages help spouses manage the stress of poverty and child rearing, especially among couples of color. Therefore, the following review focuses on stress associated with ethnicity, financial hardship, and parenting.

**Effects of ethnicity.** A review by McLoyd, Cauce, Takeuchi, and Wilson (2000) summarized demographic differences as follows: The marriage rate for all ethnicities has been declining since the middle of the last century; for over two decades the drop for African Americans has been steeper than for the rest of the population; the marriage rate for Latinos varies by subgroup; during the 1990s, Latina and African American women were less likely than other women to get married after having a child. Facts, such as these, about the rates of marriage by ethnicity provide a wide-angle view of marriage. However, the complexity of the associations between ethnicity and family requires more data for one to reach meaningful conclusions (e.g., see discussions of Black fatherhood in Coles & Green, 2010). Recent work has begun to examine intervening variables to explain the association of ethnicity, stress, and rates of marriage and divorce (e.g., Behnke et al., 2008). For example, Negy and Snyder (2000) found that differences in acculturation of wives moderated the differences in marital satisfaction between Mexican American couples, non-Hispanic White couples, and couples in which one spouse is Mexican American and one spouse is White. In addition, racial discrimination experienced by African Americans moderates the associations of stress, psychological distress, and parenting behavior (Brondolo, Rieppi, Kelly, & Gerin, 2003; Guyll et al., 2010; Murry, Brown, Brody, Cutrona, & Simons, 2001). Therefore, it seems likely that ethnicity, acculturation, and perception of discrimination partially moderate ethnic differences in relationship satisfaction and status. As noted previously, there are some modest treatment effects that are greater for African American couples than for other ethnicities (Wood et al., 2010). Therefore, it may be possible to address some of the relationship discrepancies that are associated with ethnicity.

**Effects of financial hardship.** The effect of financial hardship on marital satisfaction and dissolution is complex. In the latter part of the 1980s, poverty received a great deal of attention as an explanatory factor for the changes in African American family structure. W. J. Wilson (1987; for an update of his argument, see W. J. Wilson, 2009) noted an association between rising rates of unemployment and declining rates of marriage among African American men. Following Wilson’s observations, several studies reported observing this association (e.g., Fossett & Kiecolt, 1993; Lichter, McLaughlin, & Ribar, 1997), other studies did not find this association (e.g., South & Lloyd, 1992; Testa, Astone, Krogh, & Neckerman, 1993), and still others found that the marriage rate was declining mostly for employed African American men (Ellwood & Crane, 1990; Jencks, 1992). Further analysis of these data revealed that unemployment and poverty certainly play a role in the structure of families of color; however, it is but one of several important variables (for a review, see McLoyd et al., 2000). The role of underemployment and poverty has also been examined independent of ethnicity (e.g., Howe, Levy, & Caplan, 2004). Karney and Bradbury (1995) reviewed the effects of income on marital stability and satisfaction. Like the association between economic factors and family structure, the effects of income on marital satisfaction and stability are complex. Husbands’ income is positively correlated with marital stability, but wives’ income is inversely associated with stability (e.g., Chung, Tucker, & Takeuchi, 2008). It is unclear if wives’ financial independence is lowering their level of relationship satisfaction or simply providing the means to dissolve an already unhappy marriage. Clearly, poverty and underemployment stressors seem to have an impact on marriage and family structure, but the effects need clarification (for reviews, see Schneider, 2011; Seccombe, 2000).

**Effects of parenting stress.** As with financial hardship, the effect of parenting stress on marriage is also complex. Perhaps most emblematic of this complexity is the literature on the effects of the transition to parenthood. While parenting stress can occur at any point, the most abrupt onset of stress associated with children is during the
transition to parenthood. Reviews of this literature have found consistently that married couples tend to experience significant levels of stress following the birth of their first child but that many marriages recover after about a year (Belsky & Rovine, 1990; Cox, Paley, Burchinal, & Payne, 1999) and that similar patterns of marital satisfaction are found in the early years of childless couples as well (Mintz- Heyman, & Smith Slep, 2009). In addition, greater frequency of conflict during pregnancy predicted lower relationship satisfaction across the transition to parenthood for both married and unmarried couples (Kluwer & Johnson, 2007). Therefore, it seems that parenting stress affects relationship satisfaction; however, the reverse may also be true, that greater relationship satisfaction reduces parental stress. Research based on the Fragile Families and Child Well-being Study ($N = 2,098$) has supported the hypotheses that, among poor families, parental relationship quality and parenting quality are correlated (Carlson et al., 2011); the parenting of nonbiological (i.e., social) fathers is better when married to the mother (Berger, Carlson, Bzostek, & Osborne, 2008); and married parents experience less stress across the transition to parenthood than unmarried parents (Carlson, 2007). Understanding the association between parenting stress and relationship satisfaction is especially important in light of research indicating that the best time to intervene with poor couples is while they are pregnant (Ooms & Wilson, 2004).

### Dyadic Behavior as a Predictor of Marital Discord and Dissolution

Every model of marriage includes the exchange of behaviors between partners as a component in how stress affects relationship satisfaction and stability. For example, Huston’s (2000) social ecology of marriage model describes dyadic behavior and the macroenvironment as constantly influencing each other, and in the vulnerability-stress-adaptation model of marriage (Karney & Bradbury, 1995), dyadic behavior mediates the relationship of stressors and changes in marital satisfaction. Just as dyadic behavior is part of every model of marriage, it is also a key part of every treatment for relationship distress (e.g., Christensen et al., 2004) and every program to prevent marital dysfunction (e.g., Markman et al., 1993). Behavior is important in all couple interventions because it is simply more accessible than many other aspects of the relationship (e.g., personality) and because it is often overlooked as a skill to be developed. Most people do not select a mate based on his or her ability to work through many of the inevitable problems of life. Accordingly, when a stressful event occurs, partners must use their dyadic skills to address it. As such, most interventions do not focus on the event that causes distress but on how the members of the couple engage each other about the event.

Despite the importance of behavior in marital interventions, there is a paucity of prospective research on ethnic or economic differences in the effects of dyadic behavior. Yet, there is good reason to believe that there are ethnic differences. Few aspects of human behavior are as culturally bound as marriage, so there is little reason to think that the behaviors displayed by spouses toward each other would not be culturally bound as well. The few quantitative studies that have examined these questions have found racial differences in the longitudinal effects of dyadic behavior on marital satisfaction (e.g., Acitelli et al., 1997). To better understand these potential differences, the study of dyadic behavior may be categorized on the basis of the type of event leading to the interaction as follows: (a) problem-solving behaviors, which stem from problems within the relationship; (b) social support behaviors, which stem from problems outside or indirectly associated with the relationship; and (c) capitalizing behaviors, which stem from positive events. Examining each of these types of behavior will lead to better models of and interventions for marriage. I briefly review the current research on each form of dyadic interaction in turn.

#### Problem-solving behavior.

Research on the effects of problem-solving behavior on marital satisfaction has produced discrepant results. Most of the early studies of problem solving in marriage were cross-sectional, which enabled researchers to distinguish dissatisfied and satisfied couples with indices such as rate of negativity, reciprocity of negative behaviors, and avoidance in intuitive directions (for review, see Weiss & Heyman, 1990). Subsequent longitudinal studies examining the association of behavior with change in marital satisfaction have presented a more complicated picture. Generally, it has been found that negativity and reciprocation of negativity predict lower satisfaction longitudinally (e.g., M. D. Johnson et al., 2005). However, the meta-effects of behavior tend to vary “substantially in direction and magnitude” across studies (Karney & Bradbury, 1995, p. 22). The variation implies that the role of problem-solving behavior in marriage is more complicated than first believed and may change as a function of contextual stressors (McNulty & Russell, 2010), including ethnicity and socioeconomic status.

#### Social support behavior.

The effect of social support on relationship quality is also complex. Generally, greater social support is associated with increased relationship satisfaction (e.g., Sullivan, Pasch, Johnson, & Bradbury, 2010) and constructs that tend to covary with relationship satisfaction (Gardner & Cutrona, 2004). However, Bolger, Zuckerman, and Kessler (2000) found that the benefits of partner support were greatest when the recipient of the support did not indicate awareness of it. Indeed, awareness of the support actually resulted in negative effects of the support. This counterintuitive finding has been replicated in subsequent studies and has led to a great deal of interest in finding ways to explain and ameliorate the negative effects of “visible” support. For example, the negative effects of receiving support diminished as amount of support between spouses approached equity (Gleason, Iida, Bolger, & Shrout, 2003); was given in response to the need for support (Maisel & Gable, 2009); and, for unmarried couples only, was seen as promoting relationship goals rather than preventing relationship problems (Molden, Lucas, Finkel, Kumashiro, & Rusbult, 2009). Thus, there is a need to examine the degree of and satisfaction with social support from the participant’s partner as well as from

**Capitalization behavior.** While problemsolving and social support behaviors are responses to intrapersonal and extrarelationship stressors, social psychologists have begun to consider the benefits of capitalizing on positive events through dyadic interactions. The two experimental effects that have been replicated across samples are (a) people who discuss personal positive events with a partner experience greater personal psychological benefits (e.g., more positive affective states), and (b) partners who respond enthusiastically further enhance the personal benefits for the discloser and enhance the quality of the relationship (Gable, Reis, Impett, & Asher, 2004). Based on these findings, dyadic capitalization should be examined as a predictor of relationship satisfaction and status among couples of color and poor couples.

**Interaction of Stress and Behavior in Predicting Marital Discord and Dissolution**

As noted before, dyadic behavior plays a key role in linking stress and marital outcomes (e.g., Karney & Bradbury, 1995), and as such it is the most frequently studied link between stressful events and marital satisfaction and stability (Cohan & Cole, 2002). For example, job-related stress is associated with more withdrawal and negativity in marital (e.g., Repetti & Wood, 1997) and familial (e.g., McLoyd, Toyokawa, & Kaplan, 2008) interactions. In addition, data from multiple studies suggest that stressful events interfere with the solicitation and presentation of social support between spouses (e.g., Bolger, Foster, Vinokur, & Ng, 1996). However, the relation of stress and dyadic behavior in predicting changes in marital satisfaction may be one of mediation or moderation. In the mediated model of stress and behavior, the association of stressful events and changes in marital satisfaction and stability relies on dyadic behavior as the mechanism through which the effect operates. As such, the mediated model would appear as follows; stressful life events $\rightarrow$ dyadic behavior $\rightarrow$ relationship adjustment. Thus, the mediated model predicts that stressors would lead to maladaptive problem solving that would lead to decreases in relationship satisfaction (for a detailed description of this model, see Christensen & Pasch, 1993).

This model has received inconsistent support. In a cross-sectional study, economic strain was associated with more hostility and less warmth displayed by husbands in marital problem-solving tasks, which was associated with lower marital satisfaction for wives (Conger, Rueter, & Elder, 1999). However, Cohan and Bradbury (1997) prospectively tested a mediating model with newlyweds, with null results.

In the moderated model, problem-solving and social support skills alter the negative effects of stressful life events. There are two types of moderator models: the stress buffering model (S. Cohen & Wills, 1985) and the personal growth model. Specifically, they found that wives who discussed personal positive events with a partner experienced greater personal psychological benefits (e.g., more positive affective states), and (b) partners who responded enthusiastically further enhance the personal benefits for the discloser and enhance the quality of the relationship (Gable, Reis, Impett, & Asher, 2004). Based on these findings, dyadic capitalization should be examined as a predictor of relationship satisfaction and status among couples of color and poor couples.

**Summary of the Proposed Model for a Psychological Response**

Although the empirical marital literature briefly reviewed here has formed the basis of both prevention-oriented interventions (e.g., Markman et al., 1993) and treatment-focused interventions (e.g., Christensen et al., 2004), there is little sense of whether these interventions can be successfully applied to married and unmarried couples who are underrepresented in the marital literature. The current emphasis on targeting these couples to receive interventions based on this literature makes understanding whether the extant research is applicable to poor couples and ethnic minority couples all the more urgent and important.

**Conclusion and Recommendations**

While there is still more to be known about the associations of relationship status and functioning as well as even more to be known about the causes of intimate relationship discord and dissolution, we should acknowledge the large body of empirical literature based on prospective studies that currently exists. As a recent National Science Foundation white paper written by Aron, Clark, and Reis (2010) makes clear, the field “has made tremendous progress in identifying the underlying mechanisms behind [the effects of intimate relationships] and in formulating theoretical models about their operation” (p. 1). However, as noted before, the vast majority of this research was conducted on middle-class White couples. This should be acknowledged as potentially part of the reason why we have failed to intervene successfully with poor couples and couples of color.

I have attempted to lay out a framework for how research psychologists might begin to address the deficit of
empirical work on improving intimate relationships among those in poverty and across ethnicities. The recommendations for improving treatment outcomes by having clinical psychology, as a field, impose the use of empirically supported psychotherapies (Baker, McFall, & Shoham, 2008) apply to couple interventions as well. The outcomes of the Healthy Marriage Initiatives would be improved by requiring a scientific basis for the psychological interventions they endorse and fund. Currently, the catalog of resources devoted to providing options to the clinicians who are directly intervening gives no indication of the efficacy or effectiveness of the listed interventions. A $2 million grant was given to Public Strategies, Inc., to catalog the couple interventions that are currently available via the National Healthy Marriage Resource Center (http://www.healthy-marriageinfo.org/). A visitor to this website will find the interventions listed alphabetically by title of the program. The only information listed is the name of the intervention, the contact information, the year developed, the length of the program, a one-sentence description, and the languages in which it is offered. There is no indication of which interventions are based on research, which have been tested empirically, or which are faith-based (or of the particular faith upon which the intervention is based). The popularity of PREP suggests that there is a strong desire among clinicians and policymakers to use empirically derived interventions (for one of several articles describing and evaluating PREP, see Markman et al., 1993) that are flexible in the way they are delivered (e.g., Laurenceau, Stanley, Olmos-Gallo, Baoum, & Markman, 2004), but the marketplace is crowded with interventions, and even those who are being compensated to evaluate and catalog these interventions (see also Smart Marriages) do little to elevate the well-tested programs.

In the last 10 years, there has been much discussion, and some debate, about marriage being associated with positive outcomes for spouses, children, and society. This discussion has led to the creation of new bureaucracies and new organizations with the noble intentions of improving the intimate relationships of couples in families that are the most at risk of dissolving their unions. In turn, these organizations have caught the interest of many people. Yet, for all of the energy invested in this issue, the outcomes thus far are unacceptable. There are clearly many new initiatives and interventions that are being implemented, but too few of them are built on solid science or are quantitatively tracking their success. And, none of them can point to solid data suggesting that they will be or have been effective with the couples who are the primary targets of the Healthy Marriage Initiatives. Thus, I recommend the following changes: (a) The Healthy Marriage Initiatives should sponsor basic research on the applicability of current models of marriage, as outlined in this article, on poor couples and couples of color; (b) given the reality and pressures that preclude the cessation of these programs until the applicability of current models of marriage to poor couples and couples of color can be determined, I suggest that each service-based program funded by these initiatives include a requirement to collect standardized quantitative data (e.g., collecting couple satisfaction data with the best measure available; Funk & Rogge, 2007) that addresses questions of efficacy compared with other programs; and (c) I suggest that the cataloging of couple interventions include effectiveness data, separated by demographic variables (e.g., ethnicity and economic status) and that those interventions that have not demonstrated effectiveness be excluded from the list. These recommendations might be more readily applied if the funding decisions for this research were brought back to the National Institutes of Health, which has a longer history of using scientific rigor as a basis for their decisions. The implementation of these recommendations will improve outcomes and allow frontline clinicians to more easily implement interventions that are consistent with the aspirations of the American Psychological Association and those seeking to improve the intimate relationships of people of color or in poverty.

REFERENCES


May–June 2012 • American Psychologist 305

This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.