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## The Effect of Cognitive-Behavioral Marriage Enrichment on Marital Adjustment Among Church Couples

Charles W. Combs

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The Effect of Cognitive-Behavioral  
Marriage Enrichment on Marital Adjustment Among Church  
Couples

by  
Charles W. Combs

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George Fox College  
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of the requirements for the degree of  
Doctor of Psychology  
in Clinical Psychology

Newberg, Oregon  
March 30, 1994

Approval

The Effect of Cognitive-Behavioral Marriage  
Enrichment on Marital Adjustment Among  
Church Couples

by

Charles W. Combs

Signatures:

Clara Campbell, Ph.D.

Committee Chair

Dick E. Banom

Vice President For  
Academic Affairs

Members:

Roger Ruff, Ph.D.

Date: Apr 17, 1994

Jerry Lee Foster

Date: April 4, 1994

The Effect of Cognitive-Behavioral Marriage  
Enrichment on Marital Adjustment Among  
Church Couples

Charles W. Combs  
George Fox College  
Newberg, Oregon

Abstract

This study evaluated the short- and long-term effect of a cognitive-behavioral marriage enrichment program on perceived marital adjustment. The study examined the Traits of the Happy Couple marriage enrichment workshop (Halter, 1988). The workshop consisted of five 2-hour training sessions held in five consecutive weeks for a total of 10 hours of training. It seeks to increase the marital adjustment of participants through a combination of didactic and experiential methods. No prior controlled study of the effectiveness of this workshop has been done.

Participants included 34 married couples who were predominately from conservative, evangelical churches in

the Portland, Oregon, area. The study utilized a pretest-posttest control-group design with random assignment of participant couples to a treatment group and a wait-list control group. The treatment group participated in the workshop while the control group did not receive any treatment. Marital adjustment was measured by the global score on the Dyadic Adjustment Scale (DAS).

Data was collected immediately prior to the marriage enrichment program, at the end of the workshop, and six months after the marriage enrichment experience. A two-way ANCOVA was used to evaluate the first three hypotheses which stated that couples, men, and women, respectively, who participated in the workshop would report a significant increase in their level of marital adjustment at the posttest. A repeated measures ANOVA was utilized to assess the last three hypotheses that the reported level of marital adjustment of couples, men, and women, respectively, from the treatment group would also be significantly higher at the six month follow-up test than at the pretest.

The marriage enrichment workshop had a significant positive effect on marital adjustment. Couples, men, and women participating in the workshop had

significantly higher levels of reported marital adjustment at its conclusion than those who did not. In addition, couples and men taking part in the workshop reported significantly higher marital adjustment at the six month follow-up test as compared to the pretest. While the women in the treatment group reported gains in their marital adjustment at the follow-up test compared to the pretest, these changes were not significant. No significant gender differences in marital adjustment were found for the combined groups at the pretest or posttest. The large treatment effect size both at the posttest and the follow-up suggest that the intervention is a powerful enrichment program.

The observed changes appear consistent with the general objectives of marriage enrichment in enhancing marital adjustment. These results suggest the potential usefulness of this workshop in enriching the marital relationships of conservative, evangelical couples. The findings of Noval, Combs, Wiinamaki, and Bufford (1993) suggest a variety of church and community groups are likely to experience similar benefits from this enrichment program.

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## CHAPTER 1

## INTRODUCTION

The institution of marriage has evolved in the past century from an economic-survival arrangement to one of partnership or companionship. In historical times the salient forces uniting the family were external, formal, and authoritative (Burgess & Locke, 1945). The focus of marriage was on procreating children, training them in the cultural values, and perpetuating family tradition and property (Mace & Mace, 1986). A subsequent shift toward the companionship marriage occurred as individuals experienced more freedom, equality, and self-determination (Hof & Miller, 1983). Marriage is not so much today for economic security as it is for interpersonal fulfillment.

The transition to companionship marriage altered societal expectations about the goals of marriage. In its predecessor, the institutional marriage, marital success or happiness was related primarily to adherence to traditional role specifications, customs, and mores (Hicks & Platt, 1970). In the companionship marriage,

however, the interpersonal relationship, including personal growth and the satisfaction of one's needs, has assumed primary importance (Wilson, 1980). This model of marriage is characterized by intimacy, equity, and flexible interpersonal interaction (Mace & Mace, 1975). Marital happiness is expected to be a function of the expressive aspects of the relationship, such as communication, esteem (affection) for one's spouse, sexual enjoyment, and companionship (Strickland, 1982).

This gradual change in the institution of marriage has created confusion and frustration concerning marital roles. It has left married couples generally unprepared to assume the new roles necessitated by a companionship marriage (Mace & Mace, 1984). As early as the 1950s, Foote and Cottrell (1955) contended that success in the companionship marriage required interpersonal competence for growth and success. According to Mace and Mace (1984), the new companionship model for marriage "requires entirely new skills, which most couples do not at present possess" (p. 20). Mace and Mace (1986) described this new model of marriage as "an ongoing task achieved by a mutual process of joint personality growth and behavior change, in which differences are as important as similarities, and possession of the

appropriate skills to interact creatively is the decisive factor" (p. 13).

Mace and Mace (1986) likened the task of building a companionship marriage to that of constructing a house or cultivating a garden. They identified three factors as essential for success in marriage: an effective communication system within the marital dyad, creative conflict management between the spouses, and the couple's commitment to make the necessary behavioral changes. Cross-sectional and longitudinal studies have clearly shown that communication deficits are associated with the development and persistence of marital distress (Markman, 1981; Markman & Floyd, 1980). Both Dinkmeyer and Carlson (1984) and Diskin (1986) have also emphasized good marital communication and effective interpersonal problem-solving as two skills which are foundational for the welfare of today's intimate relationships.

The alarming rise in the divorce rate in the past twenty years may reflect in part the inability of many couples to adjust to the new expectations for marriage as a deeply satisfying interpersonal relationship (Mace & Mace, 1986). The breakdown of marital life can also be attributed to the failure of couples to develop the

appropriate skills essential for a fulfilling relationship (Ball & Ball, 1979; Mace, 1979). In response to the new skills required of couples by the companionship model of marriage, the marriage enrichment movement emerged in the 1960s (L'Abate & McHenry, 1983).

Marriage enrichment represented a major shift away from marital therapy in which the emphasis was upon the diagnosis and remediation of diagnosed dysfunctions within the marital system (Nichols, 1988). As distinguished from marital therapy, marriage enrichment called for the enhancement of marital functioning through preventive, psychoeducational interventions. Marriage enrichment makes companionship marriages more viable by helping couples to develop interpersonal competence (Mace, 1975). Enrichment programs empower couples with attitudes, skills, and growth experiences that foster supportive, harmonious, and loving interaction between partners (Guerney, Brock & Coufal, 1986; Mace, 1979; Powell & Wampler, 1982).

Marriage enrichment programs have proliferated in the United States during the past two decades. These programs have differed in their theoretical orientations, expressed objectives, leadership styles, and methods of presentation (Pritz, 1986). Among

organizations providing enrichment experiences for couples, churches have become increasingly proactive in this area (Dinkmeyer & Carlson, 1986). This commitment to marriage enrichment is in keeping with the prominent role accorded marriage and family life in Scripture. Moreover, given the significance of healthy, vibrant Christian marital life to the church's witness in today's world, Christian denominations have a vital stake in building solid marriages among their members.

The diversity of marriage enrichment programs, however, has left churches with the difficult task of determining which programs are effective and best meet the marital needs of their members. In the wake of such programs, the question remains for any particular church whether a specific program in a given religious setting actually enhances the marital adjustment of its members. In calling for accountability among marriage enrichment programs offered in church communities, Miller and Jackson (1985) stated:

Marriage enrichment has been a favorite primary prevention target in faith communities recently. A wide variety of programs exist which intend to strengthen marriages and decrease the rate of relationship disintegration. We have attended as

well as conducted such experiences, which often occur in retreat settings. . . . Still we must point out that the actual effects of such retreats are unknown. No adequate scientific evaluations have yet been conducted on the outcome of such marriage enrichment experiences. . . . But in the absence of proper evaluation it is just as possible that these experiences foster more casualties than successes . . . one cannot assume that because an intervention is called "prevention" or "enrichment" that it in fact prevents or enriches anything. (p. 401)

Among the various enrichment programs conducted in churches, Larry L. Halter (1988) developed the Traits of a Happy Couple marriage enrichment workshop based upon cognitive-behavioral principles. It teaches skills in communication, cognitive reframing, problem-solving/conflict resolution, positive behavior change, building self-esteem, and relationship enhancement.

Noval, Combs, Wiinamaki, and Bufford (1993) evaluated the effect of this marriage enrichment intervention on the marital adjustment of diverse church and non-church couples, as measured by the Dyadic Adjustment Scale. Their sample consisted of 290 couples

living in the greater Portland, Oregon, area from United Methodist, Presbyterian, Catholic, Lutheran, and non-denominational church groups as well as from large non-church, community groups. Their findings suggest that this enrichment workshop boosted the marital adjustment of these church and non-church couples, regardless of religious affiliation. Their study was limited by the absence of a control group; thus firm causal conclusions were precluded. It also lacked demographic information for the participants.

At the present, no published research exists on the effectiveness of this particular model of marital enrichment in increasing the perceived marital adjustment of couples in a conservative, evangelical church population. A study which provided empirical evidence of the efficacy of this enrichment approach in such a population would most likely prove desirable. Conservative, evangelical churches would find this information useful in determining whether to utilize this model of marital enrichment within their congregations.

## Statement of the Problem

Many Christian couples experience marital problems and divorce. Building strong marriage relationships is an important priority for family-life professionals and church workers. Consequently, many Christian denominations are increasingly turning to marriage enrichment as a way of enhancing marital relationships.

Marriage enrichment research, however, reflects a limited number of verifiable outcome results among married couples, including those in identified Christian populations (Meadors, 1989; Zimpfer, 1988). Therefore, initiating research designs from which valid outcome results can be obtained in specific Christian populations is important. Moreover, many marriage enrichment studies suffer from methodological weaknesses such as lack of control groups and inadequate follow-up (Meadors, 1989). This study utilized a pretest-posttest control-group design and a six month follow-up in the endeavor to remedy such flaws. Further, a need exists to test a relatively new cognitive-behavioral marriage enrichment program in order to provide objective validation of its efficacy. Since conservative



evangelical churches are using this model, they definitely need to know if it is effective with this particular population of married couples.

The purpose of this study was to determine the short- and long-term effectiveness of Halter's cognitive-behavioral model of marriage enrichment in increasing marital adjustment of Christian couples. This study is unique in examining the effect of this program upon married couples attending conservative, evangelical Christian churches in the Portland, Oregon, area.

#### Review of the Literature

The purpose of this section is to present a broad overview of the literature related to the fields of marriage enrichment and marital adjustment. The first part of this review will consist of surveying the historical background, theoretical foundations, goals, target population, and models of marriage enrichment. The second part will review literature related to marital adjustment. The third portion of this survey will discuss the research on marital enrichment programs in relation to marital adjustment. Finally, this survey

will examine the research on gender issues related to marital adjustment in the area of marital enrichment.

### Marriage Enrichment

Marriage enrichment ("ME") represents a systematic effort to augment marital functioning through educational and preventive means (Zimpfer, 1988). The focus of marital enrichment has shifted from the remedial "problems" orientation of marital therapy to a preventive "growth" perspective (Davis, Hovestadt, Piercy, & Cochran, 1982). It is based on a dynamic view of marriage, which stresses change and growth enhancement (Schaefer & Olson, 1981). Its aim is to improve good marriages and to prevent future marital problems and crises (Beck, 1975; Otto, 1975).

### Historical Background

Marriage enrichment grew out of two different sources: the human-potential movement and religious groups (Garland, 1983). It drew its inspiration in part from the human-potential movement in the 1960s and early 1970s with the latter's emphasis upon humanistic, growth-oriented beliefs and its resistance to the medical model of "illness" in human relations (Hof & Miller, 1981). Consistent with this orientation, ME

programs focused upon strengths and assets rather than limitations and weaknesses (Otto, 1975). The ME movement was guided also by the related belief that the prevention of marital problems is more humane, less costly, and more effective than their treatment after they have arisen (Zimpfer, 1988). In addition, this movement was influenced by its ties to religious groups which expressed a strong interest in strengthening the family through enhancing the marital relationship (Pritz, 1986).

Three major models of enrichment surfaced during the early years of the movement (Mace & Mace, 1984). The movement had its historical beginning in a weekend marriage enrichment retreat in January, 1962, led by Father Gabriel Calbo in Barcelona, Spain (Dinkmeyer & Carlson, 1986). The world-wide network of Marriage Encounter sponsored by the Catholic Church resulted from this meeting. It represented the first of the three models pioneered in this movement. The Catholic Marriage Encounter came to the United States in 1967. This program has now divided into two groups: (a) National Marriage Encounter, a loosely-knit ecumenical organization which is patterned after Father Calbo's original manual; and (b) Worldwide Marriage Encounter,

which is more tightly structured and retains strong links with the Roman Catholic Church (Doherty, McCabe, & Ryder, 1978).

The second model stemmed from a week-long meeting of Methodist pastors and their wives in February, 1966 (Mace & Mace, 1984). Its purpose was to equip these pastoral workers to minister to married couples in their churches. Out of this meeting, the United Methodist Church organized a nationwide program of Marriage Communication Labs, which were directed by Antoinette and Leon Smith. The third model originated within the Quaker Church with roots dating to October, 1962. It was an outgrowth of the weekend enrichment sessions for married couples conducted by David and Vera Mace at Kirkridge, a religious retreat center in the mountains of northeastern Pennsylvania (Mace & Mace, 1976).

Two organizations have emerged to coordinate the marriage enrichment movement. In 1973, David and Vera Mace founded the Association of Couples for Marriage Enrichment (ACME) in an attempt to provide unity and coordination for the ME movement (Mace & Mace, 1976). ACME has orchestrated the establishment of standards for marriage enrichment events and for certification of enrichment leaders. In 1975, an international Council

of Affiliated Marriage Enrichment Organizations (CAMEO) was formed. These organizations have sought to teach couples the skills to establish loving, intimate relationships (Dinkmeyer & Carlson, 1986).

#### Theoretical Foundations

The underlying theoretical foundation for marriage enrichment is prevention rather than remediation. Most enrichment programs operate from the theoretical perspective of primary prevention (Mace & Mace, 1983). Within the context of marriage enrichment, primary prevention involves the use of positive intervention to promote health, to provide specific protection, and to build specific skills in couples so they may avoid damaging marital problems (Hof & Miller, 1981). These programs presume that all relationships have the potential for growth (Pritz, 1986). Thus even troubled marriages can benefit from enrichment programs.

ME programs may typically be placed in one of two different theoretical camps: the humanistic-existential movement and the learning theory movements (Pritz, 1986). A variety of theories, however, have had an impact on the development of models for the delivery of ME services. Garland (1983) identified the most influential theoretical positions as general systems

theory, behavioral and learning theories, and Rogerian theory.

General systems theory emphasizes the teaching of skills such as self-awareness, communication, other awareness, negotiation, and problem solving in enrichment programs. Its intent is to promote a couple's awareness of their interactional patterns and the adaptive modification of such patterns (Garland, 1983). Many programs integrate principles from behavioral and social learning theory. They employ techniques such as modeling, behavior rehearsal, prompting, and reinforcement (Hof & Miller, 1981). Rogerian principles of empathetic understanding, unconditional positive regard, and genuineness are also evident in most enrichment workshops, especially those encouraging couples to freely share their feelings (Garland, 1983).

#### Goals of ME

Marriage enrichment is usually carried out in informal settings with an emphasis upon experiential learning (Smith, Shoffner, & Scott, 1979; Zimpfer, 1988). The principal goals of ME include: (a) increasing self-awareness and awareness of partners, especially in respect to positive aspects, strengths,

and growth potential of the individuals and the marriage; (b) fostering exploration and self-disclosure of spouses' thoughts and feelings; (c) promoting mutual intimacy and empathy; (d) enhancing communication, problem-solving, and conflict resolution skills; and (e) increasing overall adjustment, optimism, and satisfaction within the marriage (Hof & Miller, 1981; Zimpfer, 1988). ME experiences are intended to provide couples with the opportunity to obtain continuous education in the skills needed to develop satisfying marital relationships (Mace & Mace, 1986).

#### Target Population

The primary targets of marriage enrichment are "normal and healthy" couples who view their marriages as reasonably well-functioning but who seek further marital satisfaction (Ball & Ball, 1979). Such couples are ideally committed to their marriage and are not experiencing marital crisis (Garland, 1983). Hammonds and Worthington (1985), however, observed that ME participants also include couples who fall between those who are happily married and those who seek marriage counseling. In a meta-analysis of research literature in the area, Giblin (1986) reported that a mean of 34% of couples in twenty-five studies were "distressed" and

that the effect size for ME treatment was significantly higher for this group than for the less distressed group. Thus the target population should be arguably expanded to include moderately distressed couples although further research is needed in this area.

#### Models of ME and Their Effectiveness

A diversity of ME programs has arisen since its early beginnings in response to the demand by couples for skills training and models for enriched relationships. Hof and Miller (1981) reported the existence of at least 50 different programs, each involving a range from as few as ten couples to thousands of couples. These programs are usually based upon an educational model and share at their core "an opportunity for couples to experiment with new ways of relating" (Diskin, 1986, p. 114). Some are highly structured while others vary in accordance with the leader's experience or orientation or group composition. Enrichment experiences may be presented in the format of weekend retreats, weekly programs, semester classes, or short courses. The best known of these programs are described below.

Couples Communication Program (CCP). CCP, formerly known as the Minnesota Couples Communication Program, is



a highly structured ME program (L'Abate, 1981; Nunnally, Miller, & Wackman, 1975; Wampler, 1982). It was begun in 1968 at the University of Minnesota Family Study Center (Nunnally et al., 1975). This program targets skills involving couples' communication rather than issues. It teaches awareness skills enabling partners to understand their rules and interaction patterns. Participants learn communication skills allowing them to alter their rules and interaction patterns (Garland, 1983). CCP employs didactic presentations, directed practice, and skill practice exercises at home to inculcate the essential skills (Wampler & Sprenkle, 1980). The format consists of groups of 5-7 couples who meet with a certified CCP instructor in a 3-hour weekly session for four weeks for a total of 12 hours.

In evaluating the efficacy of the program, Joanning (1982) observed that couples improved significantly in their communication awareness and skills following training, as measured by the Marital Communication Inventory and Communication Rapid Assessment Scale. Couples also elevated their scores on Locke & Wallace's Short Marital Adjustment Test (MAT) although their scores on this inventory decreased within five months after the formal training ended. Wampler & Sprenkle

(1980) reported short-term gains in open-style communication between couples as a result of this skills training. They, however, noted a significant drop in the use of such communication skills within four to six months after the end of training. In reviewing nineteen research studies on CCP, Wampler (1982) documented the short-term effectiveness of the program in improving communication behavior and relationship satisfaction. Doubt remains about its long-term benefits.

Marriage Encounter. Marriage Encounter represents a church-sponsored marriage enrichment program which professes to have enrolled more than one million couples since 1967 (Doherty, Lester, & Leigh, 1986). It grew out of the Catholic Christian Family Movement and is strongly supported by Catholics, Protestants, and Jewish groups of couples (Mattson, 1988). Its format is usually a weekend retreat. A team of married couples and a priest give a series of twelve team presentations on various marriage topics. The encounter occurs privately between husband and wife. Couples are taught a communication technique called "dialogue", which is designed to encourage spouses individually to write down and then share their most honest feelings with each other on these topics (Doherty, McCabe, & Ryder, 1978).

The primary objective of this experience is to open an honest and deep communication between spouses.

Researchers have generally found that couples experience enhanced marital closeness and satisfaction from involvement in this program. Milholland and Avery (1982) examined two weekend Marriage Encounter groups comprised of 40 couples. The couples in the experimental group reported significantly higher trust and marital satisfaction as compared to the control group on these variables. The gains on these variables were maintained at follow-up testing five weeks later.

In a retrospective study of 200 randomly sampled couples, Lester and Doherty (1983) endeavored to assess how couples felt about their Marriage Encounter experiences four years later. They found that 84% of the husbands and 75% of the wives affirmed the weekend's positive global effect on their relationship. Yet nearly 10% of the couples in their sample were negatively affected by the program, as evidenced by three or more reported problems related to participation in these groups.

Doherty, McCabe, and Ryder (1978) suggested that participation in Marriage Encounter may have potentially harmful effects. These effects include the temporary

and illusory nature of perceived benefits, a denial of differences or of separateness in married couples arising out of an overemphasis of "coupleness", and potential ritual dependence upon the dialogue technique. Accordingly, while this program appears to positively affect many couples, modifications may be needed to alleviate these negative effects.

Association of Couples for Marriage Enrichment (ACME). David and Vera Mace founded ACME, a national organization of married couples whose common purpose is the development and maintenance of effective support systems for marriage enrichment (L'Abate, 1981). The Maces began weekend retreats for Quakers in 1962 which have served as the model for this program. These retreats consist of small participatory groups led by a couple serving as participating facilitators. The retreat has no structured agenda and couples are free to express their needs and desires on subjects of concern to them. Such topics are usually determined by group consensus. The program emphasizes dyadic communication. The principal teaching method is the leadership's modeling of desired interaction. These retreats mark only a starting point for improvement in marriage relationships. Various other programs and services

offered by local chapters of ACME promote continued growth in marriage. The research in support of this program is limited primarily to favorable anecdotal evidence (Garland, 1983).

Conjugal Relationship Enhancement (RE). Bernard Guerney, Jr., developed a comprehensive skills training program known as Conjugal Relationship Enhancement (RE) which integrated marital therapy and enrichment (Guerney, 1977, 1984; Guerney, Brock, & Coufal, 1986). RE is a short-term and highly structured model which is designed to strengthen communication and to improve marital relationships. The program teaches humanistic psychology principles and specific skills in a Rogerian, client-centered climate by means of didactic and experiential modeling methods. RE is conducted in a variety of different formats, such as weekend marathon sessions or one hour weekly meetings (Diskin, 1986). Skills are practiced in each session and in homework assignments (Hof & Miller, 1981).

Participants learn four types of skills:

1. Speaker skills involving the open and honest communication of emotions, thoughts, or desires to one's partner without provoking unnecessary hostility and defensiveness.

2. Listener skills relating to accurately understanding, accepting, and empathizing with the other spouse's perceptions, thoughts, and feelings through the use of "reflective listening."

3. Mode switching concerning the identification of the proper time and technique to shift from speaker skills to listener skills.

4. Facilitator skills aiding partners in helping each other to learn speaker, listener, and mode switching skills (Garland, 1983; Guerney, 1984).

The efficacy of RE has considerable empirical support. In one study comparing the Gestalt Relationship Facilitation (GRF) program with the RE intervention for distressed and nondistressed couples, Jesse and Guerney (1981) found that the participants in both groups showed significant gains on all variables studied: marital adjustment, communication, trust and harmony, rate of positive change in the relationship, relationship satisfaction, and ability to handle problems. RE participants, however, achieved significantly greater gains than GRF participants in communication, satisfaction, and ability to handle problems.

Brock and Joanning (1983) compared RE with the Minnesota Couple Communication Program (MCCP). RE participants scored significantly higher than MCCP participants on the Dyadic Adjustment Scale, the Marital Communication Inventory, and on several facets of the behavioral measurement of communication skills (Communication Rapid Assessment Scale). RE's comparative effectiveness was particularly strong for the more distressed couples. These differences were enduring at three month follow up.

Ross, Baker, and Guerney (1985) demonstrated the superior effectiveness of the RE intervention to a therapist's preferred eclectic therapy approaches in another study. One-half of the couples were randomly assigned to marital therapists trained for three days in RE methods while the remaining couples received the therapist's own preferred non-RE therapy. Those couples receiving RE therapy showed significantly greater gains in marital adjustment, quality of interpersonal relationships, and quality of marital communication than the other group.

Finally, Giblin (1986) conducted a meta-analysis of the marriage enrichment literature. Among ME programs researched, RE was the only one with effect size

averages in the large range ( $ES = .96$ ). Giblin's findings suggest that RE is a powerful enrichment program.

Choice Awareness Workshops (CAW). Nelson and Friest (1980) designed this marriage enrichment program which utilizes a structured group process to assist couples in making more constructive cognitive, affective, and behavioral choices. Choices relate to caring, ruling, enjoying, sorrowing, thinking, and working. Leaders help couples to become aware of their choice patterns, to modify these patterns, and to process feedback incident to their practice of new choice patterns. One research study indicated that couples making better interactive choices have reported "fewer and less severe marriage problems, more congruence between their real and ideal marriage relationships, more friendship with their spouses, and more love for themselves" (p. 406).

Pairing Enrichment Program (PEP). Travis and Travis (1975) developed PEP as a couple-oriented program in a psychiatric background. It is predicated on principles of self-actualization and interpersonal growth. The program seeks to establish significant social communication patterns and positive movement



toward effective sexual communication. The format may be either a weekend retreat or six semi-weekly three-hour sessions. This action-oriented program combines the use of communication principles, couple and group discussions, fantasy experiences, films, sensory awareness, and role playing. Each couple receives a printed three-week follow-up manual at the end of the initial program that includes both homework and additional sessions. A study of its effectiveness revealed significant movement towards self-actualization, as measured by the Personal Orientation Inventory.

Sager's Contractual Model. Sager's model assumes that each spouse operates in the marriage relationship on the basis of an individual unwritten contract (Adam & Gingras, 1982; Gingras, Adam, & Chagnon, 1983). Although neither party has negotiated or agreed upon this contract, they act as if they had. The contract embodies "a set of implicit and often unconscious needs, expectations, and promises" (Gingras et al., 1983, p. 122). The couple is conceptualized as a system with its own tasks and objectives. The partners also share an interactional contract which is often implicit and unconscious. This separate contract determines how the

partners will interact in their attempt to meet the terms of the two individual contracts and to reach the couple's objectives. This approach to marriage enrichment strives to promote spousal awareness of their own contracts, to foster two-way communication on the terms of these contracts, and to negotiate the interactional contract so that it is fulfilling to both parties.

Adam and Gingras (1982) evaluated the short- and long-term effects of this model of enrichment on couple functioning. They found that couples achieved significant positive gains in marital communication, problem-solving skills, and global couple satisfaction. The positive results on the Dyadic Adjustment Scale and the Marital Communication Inventory persisted for an entire year after the program. A later study assessed the contribution of sixteen process variables to the program's effectiveness (Gingras et al., 1983). The results supported the importance of a positive awareness of one's expectations and of the marital relationship to couple functioning.

Training in Marriage Enrichment (TIME). Dinkmeyer and Carlson (1985, 1986) created TIME for the purpose of enabling couples to develop and to recover love and

support for each other. Their program represents an Adlerian approach to human relationships which assumes that human perceptions determine behavior. Moreover, they believe that such perceptions are changeable through educational and enriching experiences. Enriching the marriage relationship requires a commitment to change, a time commitment, the learning of specific behavioral skills, and behavioral changes inciting the return of feelings of love and caring.

The authors recommended the use of TIME in a group of 5-6 couples over a ten-week period. Couples receive instruction in identifying and pursuing the positive goals of marital behaviors, such as being responsible, contributing, cooperating, and encouraging. They are also taught to identify negative relationship goals including the excuse of shortcomings, attention seeking, power acquisition, and vengeance. Couples are trained to use encouragement and communication skills. They also learn to become open and honest, to understand the relationship, and to make choices and resolve conflicts.

In a research study involving thirty-eight Roman Catholic couples, Mattson, Christensen, and England (1990) reported that TIME had a positive effect on the treatment group's perceptions about changes in their

marriages. The treatment group displayed positive change at a significant level on the Marital Self-Evaluation Scale, the Consensus Scale of the Dyadic Adjustment Scale, and the Marital Communication Inventory. The non-treatment group's pretest and posttest scores on these measures showed no significant differences.

Creative Marriage Enrichment Program. Larry and Millie Hof designed the Creative Marriage Enrichment Program (Hof & Miller, 1981). This is a multi-approach strategy which is centered around the core issues of inclusion, control, and affection. The program has a Rogerian emphasis in its intervention with couples through a group process that incorporates behavioral techniques. No published research was found on its efficacy.

Marital Adjustment

Conceptualization of the term "marital adjustment" has proved to be difficult. Researchers have used a variety of concepts almost interchangeably with marital adjustment in such a manner as to create vagueness and ambiguity concerning the meaning of this term. Marital life literature has numerous references to the terms "marital success," "marital happiness," marital satisfaction," "marital adjustment," "marital quality," and "marital stability" (Carlson, 1981; Lewis & Spanier, 1979). Little agreement exists over the common meaning and use of these concepts as each of them has a specific meaning implying something slightly different to each author (Lewis & Spanier, 1979; Von Fache, 1985). Operationalizing concepts and the measurement of concepts related to marital adjustment has consequently remained a persistent problem in marital adjustment research (Bentley, 1986; Spanier, 1976).

In a factor analytic study, Locke and Williamson (1958) determined that marital adjustment involves an adaptation encompassing such variables as companionship, agreement on basic values, affectional intimacy, accommodation, and euphoria. Spanier and Cole (1976)

formulated the most widely used definition of marital adjustment. They defined it "as a process, the outcome of which is determined by the degree of (1) troublesome marital differences; (2) interspousal tensions and personal anxiety; (3) marital satisfaction; (4) dyadic cohesion; and (5) consensus on matters of importance to marital functioning" (p. 127-128).

In the attempt to operationalize the construct of marital adjustment and satisfaction, researchers have debated whether to use a single criterion or multiple criteria in assessing it. Early studies tended to utilize a single criterion, emphasizing a broad range of sociodemographic and psychological correlates of marital satisfaction (Bernard, 1933; Burgess, 1944; Burgess & Cottrell, 1939; Ferguson, 1938; Hamilton, 1929; Kelly, 1941; Locke, 1947, 1951; Terman, 1938). Couples were typically scored on the basis of dichotomous categories such as satisfied-dissatisfied or success-failure. Quinn (1984) pointed out that these early studies contributed to the global measurement of marital satisfaction but were quite limited in their capacity to measure the various dimensions within the marital relationship.

Subsequent research on marital satisfaction has focused almost entirely upon its multi-dimensional aspects. Researchers have studied specific dimensions as they pertain to overall marital satisfaction. In conducting a literature review, Quinn (1984) observed that studies have examined a diverse range of dimensions of marital satisfaction including: communication, sex-role orientations and perceptions, daily behavioral exchanges, patterns of leisure activity, effects of number and spacing of children, family life cycle, personality and attitudinal predispositions, patterns of marital decision-making, families of origin, and self-disclosure.

Researchers have developed myriad scales in their endeavor to assess marital functioning and its relationship to other variables. Hamilton (1929) devised the first instrument, a 13-item Marital Adjustment Test, to evaluate married persons' feelings about their marriages. Since then, Spanier (1979) found that "during the 50-year history of the quality of marriage, there have been hundreds of studies using dozens of different measures" (p. 292). In reviewing the extensive literature on marital adjustment and satisfaction, Burnett (1987) identified five widely

utilized instruments having adequate reliability and validity: Locke and Wallace's (1959) Marital Adjustment Test (LWMAT), Spanier's (1976) Dyadic Adjustment Scale (DAS), Snyder's (1979) Marital Satisfaction Inventory (MSI), Roach, Frazier, and Bowden's (1981) Marital Satisfaction Scale (MSS), and Schumm, Milliken, Poresky, Bollman, and Jurich's (1983) Kansas Marital Satisfaction Scale (KMSS).

#### LWMAT

Locke and Wallace constructed the LWMAT out of a concern that existing measurement devices were too long (Burnett, 1987). The original test, developed by Harvey Locke (1951), contained 51 items. The scale currently used is a 15-item test shortened by Locke and Wallace that covers three major areas relating to marital adjustment, including consensus or agreement, satisfaction, and companionship (Locke & Wallace, 1959). The LWMAT is regarded as the most widely used measure of marital satisfaction and adjustment (Bagarozzi, 1985; Harrison & Westhuis, 1989). This scale views marital adjustment as a husband and wife accommodating each other at any given time. It was designed primarily for research use and is a test of individual perception of marriage (Harrison & Westhuis, 1989).



DAS

Spanier (1976) criticized the LWMAT and earlier scales for measuring only a static point on a continuum from well-adjusted to maladjusted. He defined dyadic adjustment as a dynamic process subject to flux over a period of time. He stated that marital adjustment is "a process of movement along a continuum which can be evaluated in terms of proximity to good or poor adjustment" (p. 17). In response to observed limitations in these previous scales, Spanier developed the DAS, a 32-item instrument with established reliability, together with content, criterion, and construct related evidence of validity.

According to Bagarozzi (1985), the DAS removed the sexist underpinnings of the LWMAT, chose items for relevancy in the 1970s, and adapted the scale for use by unmarried and married couples. Sabourin, Lussier, Laplante, and Wright (1990) examined the factor structure of the scale and found empirical evidence supporting the existence of distinct Consensus, Cohesion, Satisfaction, and Affectional Expression factors underlying dyadic adjustment. They found the DAS to be an adequate measure of marital quality. Others, however, have noted that it has problems with

the direction of wording, a halo effect, inappropriate weighting of items, and disproportion in the use of such items in the sub-scales as mutual agreement, frequency of doing things or of events occurring, and mutual affection (Burnett, 1987).

### MSI

Snyder (1979) expressed concern about the need for a comprehensive, multidimensional instrument in marital research that would simultaneously measure a multiplicity of areas in relation to global marital satisfaction. He developed the 280-item MSI, drawing from the same item pool as the LWMAT and the DAS. He divided the items into 11 nonoverlapping scales to measure the following variables: (a) conventionalization, (b) global distress, (c) affective communication, (d) problem-solving communication, (e) time together, (f) disagreement about finances, (g) sexual dissatisfaction, (h), role orientation, (i) family history of distress, (j) dissatisfaction with children, and (k) conflict over child-rearing. The scale possesses a moderate to high degree of internal consistency, test-retest reliability of .89, and discriminant and convergent validity across external criteria of marital functioning (Burnett, 1987).

MSS

In an effort to increase measurement clarity, Roach, Frazier, and Bowden (1981) developed a 24 item instrument, the MSS. The instrument was designed to measure the single factor of marital satisfaction rather than adjustment or success. They conceptualized marital satisfaction as an attitude which was subject to change over time and thus defined it as "the perception of one's marriage along a continuum of greater or lesser favorability at a given point in time" (p. 539). Items were chosen on the basis of their ability to measure attitude, affect, and opinion rather than cognition or a state of marriage, behavior, or recall of past events. Roach et al. maintained that global marital satisfaction was best measured as an attitude as supported by results from prior studies using other instruments of marital assessment. The MSS has high internal consistency and test-retest reliability and its internal and external validity appear to be substantiated.

KMSS

Schumm et al. (1983) developed the KMSS. They assessed marital satisfaction in terms of three dimensions: the level of satisfaction with one's spouse, with the relationship with one's spouse, and

with the participant's marriage. The KMSS employed a seven point response continuum, ranging from extremely satisfied to extremely dissatisfied.

Crane, Allgood, Larson, and Griffin (1990) compared the three most commonly used measures of marital adjustment: the DAS, The LWMAT (Locke & Wallace, 1959), and the Revised Marital Adjustment Test (Kimmel & Van der Veen, 1974). Their study revealed that these tests can produce significantly different results, especially for clinical couples. Consequently, they concluded that scores on these measures were not equivalent for such a population. Scores on these measures for nonclinical couples, however, tended to be interchangeable and thus directly comparable. They determined that an equivalency formula allowed the comparison of the scores on the three separate measures in distinguishing distressed from nondistressed couples.

In reviewing the research on marital quality in the 1980s, Glenn (1990) noted the following trends: (a) a modest shift in emphasis toward the measurement of individual (particularly global) evaluations of marriages, (b) an increase in the use of large and representative samples of respondents, (c) an increase in longitudinal research, (d) a focus on cross-sectional

research on married persons to estimate effects on marital quality, (e) a shift from studies of marital quality at one point in time to research in which both marital quality and stability are considered, and (f) a lack of systematic studies of change in the overall level of marital quality or in duration-specific rates of marital success in the United States.

In summary, the literature on marital quality continues to reflect considerable conceptual confusion and disagreement about the nature of marital adjustment or satisfaction. The proliferation of divergent instruments measuring this construct is apparent evidence of this lack of consensus. The debate centers around those who conceive of the construct as unidimensional (Roach et al., 1981) and those who favor a multidimensional scale for the adequate measurement of what is perceived to be a complex phenomena (Snyder, 1979; Spanier, 1976). Further research is needed to delineate the structure of the marital adjustment and satisfaction construct.

#### Marriage Enrichment and Marital Adjustment

Numerous studies have examined the effect of marriage enrichment on a couple's relationship. Many of

the researchers have sought to evaluate a couple's development of a specific skill, such as communication. Other studies have attempted to assess the effect of marriage enrichment programs on the overall marriage relationship in terms of such dependent variables as marital adjustment, marital satisfaction, or marital happiness. Meta-analytic investigations of this marriage enrichment research have been conducted over the past fifteen years (Giblin, Sprenkle, & Sheehan, 1985; Guerney & Maxson, 1990; Gurman & Kniskern, 1977; Hof & Miller, 1981; Zimpfer, 1988). This section will first review important measurement issues and then the findings associated with the outcome research in this area.

#### Outcome Measurement

Marital enrichment research is significantly impacted by measurement issues about which are the most important factors related to outcome (Giblin, 1986). These issues include both the type of instrument used to assess the effect of marital enrichment and the outcome areas being evaluated.

Instruments utilized in marital enrichment research may be broadly classified as either participant self-report or behavioral measures, such as audiotaping or

videotaping (Giblin, 1986). In conducting meta-analytic investigations of the enrichment literature, Giblin et al. (1985) found that behavioral measures yielded effect sizes for enrichment interventions significantly higher than that shown by self-report instruments. They concluded that observers appear to observe more post-treatment change in participants than the latter individuals report.

In evaluating the effect of marriage enrichment, studies have scrutinized four outcome areas. Measurement instruments have assessed (a) satisfaction or adjustment, (b) relationship skills including communication and problem-solving skills, (c) personality variables, and (d) other (Giblin et al., 1985; Gurman & Kniskern, 1977). In their meta-analytic review of 85 enrichment studies from 1970-1982, Giblin et al. (1985) reported that relationship skills measures displayed significantly greater change than measures of relationship satisfaction/adjustment or personality/perception. Based upon these findings, Giblin (1986) observed that marital enrichment will likely produce larger change in the areas of communication skills and constructive problem-solving

than in the domains of marital satisfaction and happiness, relationship quality, and intimacy.

A systematic review of the marriage enrichment literature from 1980-1993 revealed 11 published journal studies evaluating the effect of specific enrichment interventions on the relationship satisfaction or adjustment of married couples. *Psychological Abstracts* and bibliographies from marital enrichment reviews (Giblin, 1986; Giblin et al., 1985; Guerney & Maxson, 1990; Zimpfer, 1988) were examined. Dissertation studies were excluded from this review. This investigation identified the type of program, the author, the nature of the control group, if any, utilized, the outcome measure employed, and the results at posttest and follow-up, if any, in each study.

Ten of the studies used control groups. Control groups consisted primarily of alternate treatment groups or no treatment control groups. In five of the studies participants were randomly assigned to all experimental and control conditions. In two other studies participants were randomly assigned to the two treatment groups, but not to the no treatment group. Three of the studies utilizing control groups did not randomly assign participants. Posttest results were significant for



fourteen of the seventeen enrichment interventions examined in these eleven studies. Follow-up results were significant for ten of the fifteen enrichment interventions which presented such findings. The results are contained in Table 1.

Table 1

Results of Marriage Enrichment Programs Assessing  
Relationship Satisfaction or Adjustment

Author	Control Group <sup>a</sup>	Outcome Measure <sup>b</sup>	Results PT <sup>c</sup>	FU <sup>d</sup>
<b>A. <u>Mixed Experiences/</u></b>				
<b><u>Exercises</u></b>				
Adam & Gingras (1982)	N <sup>f</sup>	DAS	+	+
Cooper & Stoltenberg (1987)*	A <sup>f</sup> , N <sup>f</sup>	DAS	±	+
Davis, Hovestadt, Piercy, & Cochran (1982)	A <sup>f</sup>	DAS	+	+
Hammonds & Worthington (1985)				
(ACME)	N	DAS	+	+
Jessee & Guerney (1981)				
(GRF)*	A <sup>f</sup>	MAS	+	N
Milholland & Avery (1982)				
(ME)	N	IRS	+	+
Worthington, Buston, & Hammonds (1989)*	A, N	DAS	+	+

(table continues)

Table 1--Continued

Author	Control Group <sup>a</sup>	Outcome Measure <sup>b</sup>	Results PT <sup>c</sup>	FU <sup>d</sup>
<b>B. <u>Communication Training</u></b>				
<b>1. M CCP (CCP)</b>				
Brock & Joanning (1983)*	A <sup>f</sup> , N	DAS	-	-
Cooper & Stoltenberg (1987)*	A <sup>f</sup> , N <sup>f</sup>	DAS	+	+
Joanning (1982)	NCG	MAT	+	-
Wampler & Sprenkle (1980)	P <sup>f</sup> , N	RI	+	+
Witkin, Edleson, Rose & Hall (1983)*	A <sup>f</sup> , N <sup>f</sup>	MAS <sup>1</sup>	+	-
<b>2. RE</b>				
Brock & Joanning (1983)*	A <sup>f</sup> , N	DAS	+	+
Jessee & Guerney (1981)*	A <sup>f</sup>	MAS <sup>2</sup>	+	N
<b>3. CSW</b>				
Witkin, Edleson, Rose, & Hall (1983)*	A <sup>f</sup> , N <sup>f</sup>	MAS <sup>1</sup>	-	-

(table continues)

Table 1--Continued

Author	Control Group <sup>a</sup>	Outcome Measure <sup>b</sup>	Results PT <sup>c</sup>	Results FU <sup>d</sup>
C. <u>Other</u> Worthington, Buston, & Hammonds (1989) <sup>e</sup>	A, N	DAS	±	±

<sup>a</sup>Control Groups included the following: A = alternate treatment group(s), N = no treatment control group, P = pseudo or non-specific factors control group, and NCG = no control group.

<sup>b</sup>Outcome measures consisted of the following self-report inventories: DAS = Dyadic Adjustment Scale, IRS = The Interpersonal Relationship Scale-Marital Satisfaction, MAS<sup>1</sup> = Locke and Wallace (1959) Marital Adjustment Scale (23 items), MAS<sup>2</sup> = Locke and Williamson (1958) Marital Adjustment Scale, MAT = Locke and Wallace (1959) Short Marital Adjustment Test (35 items), RI = The Relationship Inventory.

(table continues)

Table 1--Continued

Author	Control	Outcome	Results
	Group <sup>a</sup>	Measure <sup>b</sup>	PT <sup>c</sup> FU <sup>d</sup>

<sup>c</sup>PT = Posttest results: + = statistically significant pre-post change; ± = mixed results; - = no significant results.

<sup>d</sup>FU = Follow-up results: N = no follow-up; + = statistically significant pre-follow-up change; ± = mixed results; - = no significant results.

\*Five studies, Brock & Joanning (1983), Cooper & Stoltenberg (1987), Jesse & Guerney (1981), Witkin et al. (1983), and Worthington et al. (1989), are listed twice since they compared two or more different types of marital enrichment.

<sup>f</sup>Participants were randomly assigned.

#### Outcome Research Findings

Gurman and Kniskern (1977) reviewed the outcomes of ME programs in twenty-nine studies. Approximately 86% percent of the studies involved non-church-related programs, of which about 75% had volunteers recruited from university communities. The vast majority (93%) of

the programs were conducted in a group setting, with 76% of the programs meeting weekly for an average total duration of seven weeks and an average total meeting time of 14 hours. The authors found positive changes in approximately 60% of the criterion tests in each outcome area of marital satisfaction or adjustment, relationship skills, and individual personality variables. While noting some methodological shortcomings, they cautiously ventured the conclusion that marriage enrichment has a positive effect on the marriage relationship.

Hof and Miller (1981) undertook an extensive review of the outcome literature on ME programs. They reviewed forty different studies which differed markedly in their definition of marital enrichment, format, goals, and scope. The authors identified three general types of enrichment programs: those which provide diverse contents and experiences, those primarily emphasizing communication experience, and those chiefly based on behavioral exchange principles. They found that "some optimism about the effectiveness of the marital enrichment programs is warranted" (p. 63). They, however, cautioned that more well-designed research was needed before any firm conclusion could be drawn that

"marriage enrichment produces stable, positive change in couples" (p. 63).

Doherty and Walker (1982) studied thirteen case reports from seven marital therapists who reported having seen seventy-six Marriage Encounter couples. Nineteen of the seventy-six couples purportedly had a negative experience with a Marriage Encounter experience. Couples complained primarily about the intensity of the experience, which resulted in an emotional high and exaggerated expectations. The authors conceded that Marriage Encounter may benefit most couples. However, they acknowledged the study's strongly suggestive evidence that "Marriage Encounter weekends can cause marital deterioration in some couples" (p. 23).

In the same vein, Lester and Doherty (1983) undertook a retrospective study which recognized the potentially negative effects of Marriage Encounter. Their sample consisted of 129 couples who had attended a Marriage Encounter weekend within a ten year period (1970-1980). The study suggested that twelve couples or 9.3% of the sample sustained potentially serious negative effects from the Marriage Encounter experience. Nonetheless, the majority of couples appeared to benefit

from the experience. Thus 84% of the husbands and 75% of the wives reported that Marriage Encounter had a positive global effect on their relationship. Consequently, the authors urged enrichment leaders to be on their guard for couples who may be negatively affected by an enrichment event.

Mace and Mace (1984) contended that adherence to ACME standards minimizes the risk of marriage enrichment "casualties" (p. 215). David Mace admitted that separation or divorce may be the inevitable outcome for some couples in spite of the most vigorous efforts to help them. For such couples he felt that participation in a ME program was a last resort. He believed that the positive results of ME clearly surpassed the negative results although some couples may suffer harm on account of the experience. Others may experience problems after participating in ME, although the ME experience itself may not play a causal role.

Giblin et al. (1985) completed the most thorough analysis of the enrichment literature from 1970-1982. They analyzed eighty-five studies of premarital, marital, and family enrichment involving 3,886 couples or families from a diversity of ages, income levels, geographic areas, educational levels, and program types.



Seventy-six percent of the effect sizes in these studies were calculated from self-report measures and the balance were from behavioral measures. Giblin, et al. (1985) reported an average effect size of .44 for all enrichment programs studied. They concluded from this finding that the average person who experiences enrichment is better off than 67% of those who do not.

They found no significant relationship between outcome and gender, years of marriage, life stage, income, religion, or prior enrichment experience. Educational level and diagnosis were found to be significantly related to outcome. The level of participants' education was negatively related to outcome. More distressed participants appeared to benefit more from marriage enrichment than those who were less distressed. Programs emphasizing skills and behavioral practice produced superior outcomes in comparison to those which did not. Highly structured programs were significantly better than less structured ones. Longer programs in excess of 12 hours had results which surpassed those of shorter ones. As indicated earlier, such outcome results may be confounded by the type of measurement instrument (self-report vs.

behavioral measure) used and the outcome area being evaluated.

The researchers noted that the average person who attends enrichment programs reports and shows behaviors indicating positive changes. Moreover, follow-up testing revealed that gains since pre-testing held up well for many months. Giblin (1986), however, stressed the need for further research to evaluate the durability of effects in respect to specific outcome areas, such as for skill areas versus marital satisfaction measures across time.

Zimpfer (1988) updated the review of the outcome literature on marriage enrichment programs undertaken by Hof and Miller (1981). This review covered thirteen different outcome studies of relationship enrichment published since 1978. A majority of the outcome studies reported positive change on at least some measures of overall marriage adjustment, perception/personality variables, or relationship skills. Significant changes, however, were not limited to any specific type of intervention or class of dependent variables. Eight of the thirteen studies completed some form of follow-up investigation finding generally more positive than negative results on maintenance of gains on marital

adjustment. The author urged caution in interpreting the enrichment results, given the relatively few studies representing a wide range of treatments, participants, leaders, and settings.

Guerney and Maxson (1990) reviewed the outcome literature on marriage and family enrichment for the decade of the 1980s. They reached the conclusion that "enrichment programs work and the field is an entirely legitimate one" (p. 1133). They suggested that areas for future research should include the determination of which programs are most effective for different populations, the variables that make these programs effective, and how these programs can be made more efficient, less costly, and better marketed.

#### Marriage Enrichment and Gender

Few references appear in enrichment literature on the subject of gender issues relating to marital adjustment within the context of marriage enrichment. Beaver (1978) reported that participation in a marriage enrichment program is more likely to produce change in men than women. Strickland (1982), however, found no correlation between gender and outcome in his study of the effect of several marriage enrichment retreats on

marital satisfaction. In their meta-analysis of enrichment outcome literature, Giblin et al. (1985) reported that men had significantly higher scores than women on marital satisfaction measures.

#### Definition of Terms

For the purpose of this study the following terms were operationally defined. Beyond the context of this study, definitions of these terms will vary greatly. These terms and definitions are:

Marriage. The legal union between a male person and a female person recognized by the courts of the country in which the individuals are lawful citizens.

Marriage enrichment. Any technique (i.e., class, lecture, workbook, text, group interaction), learning, or personal growth experience that generally enhances a couple's communication, emotional life, or sexual relationship, fosters marital strengths and personal growth, and/or promotes the potential of the marriage. The primary emphasis is upon enhancing the relationship of the couple (Otto, 1976).

Marital adjustment. Marital adjustment represents "an ever-changing process with a qualitative dimension

which can be evaluated at any point in time on a dimension from well-adjusted to maladjusted" (Spanier, 1976, p. 17). A participant's perceived level of marital adjustment will be measured by his or her global score on Spanier's Dyadic Adjustment Scale.

### Research Questions

The purpose of the study led naturally to the formulation of a number of research questions:

1. Do couples show general improvement in marital adjustment, as measured by their global scores on the Dyadic Adjustment Scale (DAS) (Spanier, 1976), after participation in the Traits of a Happy Couple marriage enrichment (THC-ME) workshop?

2. Do marriage enrichment participants significantly differ from non-participants in their perception of marital adjustment, as measured by their global scores on the DAS, following participation in the THC-ME workshop? This research question may be divided into two sub-questions: (a) Does the THC-ME workshop have any positive effect on men's adjustment in the marriage relationship? and (b) Does the THC-ME workshop

have any positive effect on women's adjustment in the marriage relationship?

3. Does the effect of marriage enrichment remain constant for couples, men, and women over a six month time period after participation in the THC-ME workshop?

### Hypotheses

To answer the research questions, the following hypotheses were tested in this study:

1. Couples participating in the THC-ME workshop, as compared to non-participating couples, will report a significant increase in their level of marital adjustment, as measured by their global scores on the DAS at the posttest.

2. Men participating in the THC-ME workshop, as compared to non-participating men, will report a significant increase in their level of marital adjustment, as measured by their global scores on the DAS at the posttest.

3. Women participating in the THC-ME workshop, as compared to non-participating women, will report a significant increase in their level of marital

adjustment, as measured by their global scores on the DAS at the posttest.

4. Six months after participation in the THC-ME workshop, couples' marital adjustment, as measured by a follow-up test on the DAS, will continue to be significantly higher than their level of marital adjustment at the pretest.

5. Six months after participation in the THC-ME workshop, men's marital adjustment, as measured by a follow-up test on the DAS, will continue to be significantly higher than their level of marital adjustment at the pretest.

6. Six months after participation in the THC-ME workshop, women's marital adjustment, as measured by a follow-up test on the DAS, will continue to be significantly higher than their level of marital adjustment at the pretest.

The data was further analyzed to determine if any differences existed between the pretest DAS scores of male and female participants. In addition, the overall treatment effect size for this marriage enrichment intervention was calculated.

## CHAPTER 2

## METHODS

This study was designed to evaluate the short- and long-term effects of the Traits of a Happy Couple marriage enrichment workshop on the perceived marital adjustment of participant couples, the great majority of whom were attending New Hope Community Church and Mt. Scott Church of God in Portland, Oregon. Changes in reported marital adjustment, as measured by the global score on the Dyadic Adjustment Scale at pretest, posttest, and follow-up, served as the dependent variable. This chapter describes the methods employed to implement this study in six sections: (a) Design, (b) Participants, (c) Instruments, (d) Data Collection, (e) Treatment, and (f) Statistical Analysis.

## Design

This study utilized a pretest-posttest control group design (Campbell & Stanley, 1963) with a six month follow-up to assess the enduring effect of the THC-ME



workshop. A review of marriage enrichment research designs over the past twenty years revealed that many studies were methodologically flawed due to lack of adequate control groups and inadequate follow-up. A recent study (Meadors, 1989) was found that used a true experimental-control group design based on randomization in an attempt to address these problems found in earlier studies.

Meadors (1989) employed such a design to determine the effect of a marriage enrichment program upon marital communication and marital adjustment. Fifty couples out of a group of 100 couples who were preregistered for a marriage enrichment workshop were randomly selected for inclusion in the experimental group. From a group of 90 couples scheduled for marriage enrichment at a later date, thirty couples were randomly selected and assigned to a control group. Control group members did not receive the three-day marriage enrichment treatment that was given to the experimental group. Pretest, posttest, and six week follow-up measurements were gathered from both groups. This design strengthened the internal validity of the study and led to the finding that the marriage enrichment program had a significant positive effect on marital communication and marital adjustment.

In the present study, participant couples were randomly assigned to a treatment group and a control group on the basis of stratified random sampling procedures. For the purpose of this procedure, couples were placed into one of three groups: those attending New Hope Community Church (13 couples), those attending Mt. Scott Church of God (13 couples), and the remainder of the couples, the great majority of whom were attending other churches (eight couples). Couples' pretest scores on the Dyadic Adjustment Scale ("DAS") were used to rank couples in each of the three groups in the order of their scores from highest to lowest. After pairing couples from the top to the bottom of this ranking in each of the three groups, a random number was drawn for the first couple pair of the couples in each group in accordance with a random numbers table. If an even number was drawn, the first couple in that couple pair was assigned to the treatment group and the second couple was assigned to the wait-list control group. Assignment of couples in each pair was reversed for odd numbers.

Campbell and Stanley (1963) observed that this design controls for the eight factors that potentially threaten internal validity. This design was intended to

insure that the following threats to internal validity did not affect the change ascribed to treatment: history, testing, instrumentation, statistical regression, selection bias, maturation, selection maturation interaction, and experimental mortality. Containment of these threats provided a basis for determining the extent to which changes in the dependent variable are solely attributable to the enrichment intervention. However, the results may not generalize to the larger population of conservative, evangelical church couples given the fact that the participants were self-selected volunteers.

A schematic representation of the design is presented in Table 2.

Table 2

Schematic Representation of the Research Design

Group	Pretest	Assignment	Treatment	Posttest	Follow-up
TG	O <sub>1</sub>	R	X	O <sub>2</sub>	O <sub>3</sub>
CG	O <sub>1</sub>	R	-	O <sub>2</sub>	

Note. TG = Treatment group. CG = Wait-list control group. R = Randomized. X = Treatment (Participation in the Traits of the Happy Couple marriage enrichment workshop). - = No Treatment. O<sub>1</sub> for TG = Pretest on the Dyadic Adjustment Scale (DAS). O<sub>2</sub> for TG = Posttest on the DAS. O<sub>3</sub> for TG = Follow-up test on the DAS. O<sub>1</sub> for the CG = Pretest on the DAS. O<sub>2</sub> for the CG = Posttest on the DAS.

### Participants

The participants in this study were volunteers largely drawn from a population of married church couples, the vast majority of whom were attending New Hope Community Church and Mt. Scott Church of God in the greater Portland, Oregon, area during the spring of 1993. New Hope Community Church, a non-denominational community church, is one of the largest and fastest growing conservative, evangelical churches in the Portland, Oregon, area. Similarly, Mt. Scott Church of God is a conservative, evangelical church which is affiliated with the denomination of the Church of God, Anderson, Indiana.

These church populations were selected for the study for several reasons: (a) a large and diverse population of married, Christian couples was available; and (b) the pastoral staffs were agreeable to their churches taking part in this investigation. Otto (1976) also recommended a church environment for such enrichment as the church is "in the best position to help couples take advantage of their opportunity to 'make a good marriage even better'" (p. 21).

Permission was secured from New Hope Community Church and Mt. Scott Church of God to conduct this study. Church members were notified in January, 1993, of the upcoming enrichment workshop through both an announcement in the worship service and information handouts distributed at booths at each church. Thirty-four couples preregistered for the marriage enrichment program. They were requested to attend a group orientation meeting approximately two weeks before the workshop so the program would be adequately explained.

An orientation meeting was held at New Hope Community Church on March 16, 1993, for couples who registered through that church. Seventeen couples showed up for this meeting. Thirteen of these couples were attending New Hope Community Church at the time of this meeting. Of the other four couples, one couple was attending a Presbyterian church in the Portland area while three couples were not attending any church. A second orientation meeting was held at Mt. Scott Church of God on March 18, 1993, for couples who signed up for the workshop through this church. Seventeen couples were present at this meeting. Thirteen of the couples were then attending Mt. Scott Church of God while the remaining four couples attended other Protestant

churches in the Portland area (i.e., a Presbyterian, Conservative Baptist, Bible, and Non-denominational community church).

The couples at both meetings were informed about the nature and purpose of the intended study. The criteria for participation in the experiment were explained. Specifically, these criteria consisted of each participant couple: (a) paying the workshop fee of \$35.00 subject to a \$10.00 refund to them upon timely completion of the workshop and required instruments, and (b) attending at least four out of the five weekly sessions of the workshop to which they were randomly assigned.

Eligible couples willing to participate in the study were asked to read and to sign an Informed Consent Form (Appendix A). They were also asked to complete a Background Information Questionnaire (BIQ) and the Dyadic Adjustment Scale (DAS). Any couple who did not want to participate was allowed to leave. No couple from either orientation meeting withdrew at this time. The final sample consisted of thirty-four eligible couples.

Participant couples were then randomly assigned to either the treatment group or the wait-list control

group as explained in the preceding section. The seventeen couples assigned to the treatment group were scheduled to begin the workshop on April 1, 1993. Seventeen couples were assigned to the wait-list control group, which was to participate in the workshop after their pretest and posttest during the treatment period. Participant couples in both groups were then notified by telephone and by letter of the respective groups to which they were assigned (Appendixes B & C). They were thanked for their commitment to participate in the study. Confidentiality was assured in protecting their identity.

The final sample included a total of thirty-one couples. Two couples voluntarily withdrew from the treatment group and one couple chose not to participate in the wait-list control group. Thus fifteen couples comprised the treatment group and sixteen couples were in the control group. The treatment group had the following breakdown in terms of church affiliation: (a) six couples from New Hope Community Church of God, (b) five couples from Mt. Scott Church of God, (c) three couples from a Presbyterian church, Conservative Baptist church, and a non-denominational community church in the Portland area, and (d) one couple without any church



affiliation. The composition of the wait-list control group was similar: (a) six couples from New Hope Community Church of God, (b) seven couples from Mt. Scott Church of God, (c) two couples from a Presbyterian church and a Bible church in the Portland area, and (d) one couple without any church affiliation.

The participants from the treatment group had a mean age of 42.8 years. The results showed that 50% were first married, 30% were remarried, and an equal distribution were separated or divorced, single, and engaged to be married (6.7% each). The average educational level was 13-14 years for each participant. The average level of income was in the \$30,000 - \$39,999 bracket for each couple. All were Caucasian with the exception of one participant who identified himself as Arabic. The participants had been married to their present spouses an average of 12.0 years. Each participant couple had an average of one child living at home four or more days a week. None of the couples had any children living at home three or fewer days a week. All of the participants resided in the greater Portland area.

The average age of participants in the wait-list control group was 42.7 years. On marital status, 37.5%

were first married, 56.3% were remarried, and 6.3% were separated or divorced. The average educational level was 13-14 years for each participant. The average level of income was in the \$30,000 - \$39,999 bracket. Thirty of the participants classified themselves as Caucasian; one participant identified herself as Hispanic and another classified herself as Native American. The average years of marriage to one's present spouse was 13.1 years. Each participant couple had an average of .43 children living at home three or fewer days a week and 1.5 children living at home four or more days per week. All of the participants resided in the greater Portland area.

### Variables

#### Dependent Variable

The primary dependent variable was perceived marital adjustment, which was determined from the global scores of the Dyadic Adjustment Scale (DAS) developed by Spanier (1976).

### Independent Variables

Treatment was the main independent variable. The Traits of a Happy Couple workshop, a cognitive-behavioral model of marriage enrichment developed by Larry L. Halter, Ph.D., (1988) constituted the treatment. No previous controlled study has been done on this treatment program. Appendix D contains an outline of the curriculum covered during each of the five sessions of the workshop. Data from the treatment group was compared to data secured from the wait-list control group, whose members received no treatment but completed the instruments for the study.

The second variable was the gender (male and female) of the participants. This information was taken from the Background Information Questionnaire. As observed earlier, research specifically focused on the effect of gender on marital adjustment is notably absent in the field of marriage enrichment.

### Instruments

The instruments utilized in this study were a Background Information Questionnaire (BIQ) and the Dyadic Adjustment Scale (DAS).

### Background Information Questionnaire

Participants were requested to respond to a Background Information Questionnaire (Appendix E). The questionnaire was developed to obtain the following demographic data: age, gender, marital status, educational level, gross family income level, racial or ethnic background, number of years married to one's present spouse, number of children at home four or more days a week, number of children at home three or fewer days a week, Christian profession, frequency of church attendance, and importance of religious beliefs and practices. These demographic items were chosen because they are similar to demographic items used in other studies on marital adjustment or satisfaction, thus contributing to the data for comparative analysis. Validity and reliability were not central issues in evaluating this questionnaire since the items were designed to collect only demographic information.

### Dyadic Adjustment Scale

Graham Spanier developed the Dyadic Adjustment Scale (DAS) in 1976 to assess the quality of marriage. It is designed to be used with married couples as well as couples living together in a primary and committed

relationship. Spanier (1976) felt that the procedures followed in constructing the scale were "among the most comprehensive used to date in the development of a measure of adjustment for dyadic relationship" (p. 16). Recognizing the inherent methodological weaknesses in the use of paper and pencil measures, Spanier believed that he had significantly reduced these limitations in the development of the DAS.

The DAS is a 32-item scale with a possible score range of 0 to 153. It is comprised of four subscales of adjustment: dyadic satisfaction (10 items), dyadic consensus (13 items), dyadic cohesion (5 items), and affectional expression (4 items). The DAS also yields an overall score for dyadic adjustment. Higher scores represent better adjustment.

#### Reliability

Spanier (1976) confirmed the reliability of the total scale and its four component scales through the use of Cronbach's Coefficient Alpha measure of internal consistency. Total scale reliability was .96. The Dyadic Consensus Subscale had an alpha coefficient of .90. The Dyadic Satisfaction Subscale had an alpha coefficient of .94. The Dyadic Cohesion Subscale items yielded a .86 alpha coefficient. The Affectional

Expression Subscale had a .73 alpha coefficient. Test-retest reliability data was not reported. However, a comparison of the pretest and posttest DAS scores gathered from the wait-list control group in this study produced a test-retest reliability coefficient of .71 for the total scale for a seven week interval. Little evidence was found for "testing" effects on the posttest DAS for the wait-list control group.

### Validity

Spanier (1976) reported three types of validity for the DAS: content validity, criterion-related validity, and construct validity.

Content validity. Three judges reviewed all items for content validity (Spanier, 1976). They selected those items for the scale that were deemed: (a) relevant measures of dyadic adjustment for contemporary relationships, (b) consistent with Spanier and Cole's (1974) proposed nominal definitions for adjustment and its components (satisfaction, cohesion, and consensus), and (c) carefully expressed with suitable fixed choice responses.

Criterion-related validity. Spanier (1976) established criterion-related validity by administering the scale to a married sample of 218 persons and a

divorced sample of 94 persons. Each of the 32 items in the scale correlated significantly with the external criterion of marital status. In assessing differences between the married and divorced samples through a t-test, the mean difference between the two groups was significant at the .001 level for each item.

Furthermore, the mean total scale scores of 114.8 and 70.7 for the married and divorced samples, respectively, were significantly different at the .001 level.

Construct validity. In the area of construct validation, the DAS was correlated with the Locke-Wallace Marital Adjustment Scale (Locke & Wallace, 1959). The correlation between these scales was .86 among married respondents and .88 among divorced respondents. Factor analysis of the 32 items in the scale yielded groupings of these items into four significant components including dyadic satisfaction, dyadic cohesion, dyadic consensus, and affectional expression. Spanier (1976) regarded these components as being conceptually and empirically related to dyadic adjustment.

Bagarozzi (1985) compared the DAS with the LWMAT as a measure of the construct of marital adjustment. He concluded that they both measure an individual's

subjective assessment of the level of marital adjustment in the relationship. As between these two measures, he opined that the "DAS may be one of the better choices for measuring marital adjustment" (p. 70). He highlighted its strengths: its broad research foundation, its updated item selection, and its application to a wider population.

In addition, Harrison and Westhuis (1989) affirmed that the four subscales of the DAS can be used alone without loss of reliability or validity. In evaluating the conceptual structure of the DAS, Sabourin et al. (1989) concluded that the DAS is "an adequate measure of perceived marital quality" (p. 336). They found that the four underlying subscales of the DAS are reliable and separate indicators of a general dyadic adjustment concept.

In summary, the DAS was chosen over other measures of marital adjustment because of its brevity, its updated item selection and application to a wider population, and its content, criterion-related, and construct validity and strong reliability.



## Data Collection

The marriage enrichment workshop for the treatment group was held over five consecutive weeks from April 1st through April 29th, 1993. Each of the five sessions ran for two hours on Thursday evening except for the second session which was held on Wednesday evening. The workshop curriculum is described in a later section. All sessions were held at Mt. Scott Church of God. Persons in the wait-list control group did not receive any enrichment instruction during this period. Subsequently, however, they participated in the marriage enrichment workshop at Mt. Scott Church of God during the period from May 6th through June 3rd, 1993.

Pretest data was obtained from all participant couples at the initial orientation meetings for the workshop on March 16th and 18th. Each participant filled out the Background Information Questionnaire (BIQ) and the Dyadic Adjustment Scale (DAS) at the orientation session. These instruments were collected immediately after they were completed.

All couples in the treatment group were notified by both telephone and letter of the scheduled date and time for each session of the marriage enrichment program

(Appendix B). The researcher contacted couples who missed a session and encouraged attendance at the next meeting of the group. At the fifth and final meeting of the marriage enrichment workshop for this group, each participant was asked to complete the DAS as a posttest. Thirteen couples were present at that session and completed this instrument.

DAS's were mailed on April 30, 1993, to the two couples who were absent at this posttest meeting. Each participant was requested to fill out this instrument according to standard written instructions (Appendix F). Each couple was instructed to return the completed DAS's to the researcher by mail in a stamped, return envelope within the allowable time of five days from its receipt (Appendix G). These two couples returned their completed instruments within the allowed time. In all, fifteen couples in the treatment group completed the posttest.

The wait-list control group members were given the posttest on May 6, 1993, at the first session of their marriage enrichment workshop, which was one week after the final session for the treatment group. All couples in this group were informed by telephone and letter of the date, time, and place of this meeting (Appendix C).

Fifteen couples were present and took the DAS as a posttest at this first session of their workshop.

DAS's were mailed on May 7, 1993, to the two couples absent at this meeting of the wait-list control group. Each of these participants was asked to fill out the DAS in accordance with standard written instructions (Appendix F). Of these two couples, one couple withdrew from the study. The other couple complied with the written directive (Exhibit H) to return the completed DAS's to the researcher in a stamped, return envelope within the allowable time of five days after their receipt.

On October 26, 1993, approximately six months following the posttest for the treatment group, DAS's were mailed to each of the fifteen couples in that group along with a letter (Appendix I) and written instructions (Appendix F) on how to complete the instrument. For the purpose of maximizing the number of follow-up DAS's which were completed and returned, the researcher accepted DAS's that were returned within three weeks from the time they were mailed to participants. Thirteen couples in this group completed the DAS's and returned these forms in stamped, self-addressed envelopes to the researcher.

This study endeavored to protect the privacy, welfare, and rights of the participants. To this end, the researcher petitioned for and secured the approval of the project by the George Fox College Committee for Research Involving Human Participants. All data were handled confidentially. The anonymity of the couples was maintained in reporting results. A coding system was used on both the BIQ and the DAS to protect the confidentiality of participants. No data were released or published which identified any individual or couple by name.

There were discrepancies and omissions in the data collected from the participants in both groups. One participant failed to give her age and thus no data on her age was available for statistical analysis. In several instances, a husband and wife reported different levels of gross family income. In each case, the researcher resolved this difference by using the higher income level reported by that couple. Several spouses reported discrepant data on their length of marriage to each other. In these cases, the researcher chose the data given by the wife on the length of the couple's marriage.

### Treatment

The purpose of this section is to provide an overview of the Traits of a Happy Couple marriage enrichment workshop which served as the basis for this study. As the originator of this program, Larry L. Halter served as the presenter and group facilitator in planned group and couple activities. He has a doctoral degree in Education from Loyola University of Chicago, has completed retraining in clinical psychology at Pacific University, and has extensive experience in conducting marriage enrichment workshops.

The format for the marriage enrichment experience involved five two-hour training sessions held over five consecutive weeks for a total of ten hours of training. The program was structured with a combination of didactic and experiential methods. The text used by the couples was Traits of a Happy Couple (Halter, 1988). The workshop followed the organizational outline presented in Appendix D for each of the five sessions.

The workshop had two general goals. First, it sought to sensitize couples to the chief differences between good and bad marriages. Couples were taught the attitudes, insights, and skills that contribute to

marital happiness. Secondly, the workshop endeavored to assist couples in instilling these attitudes and skills in their relationship. Couples were encouraged to practice these essential attributes in their daily dyadic interaction.

Other specific workshop goals included teaching couples about the following: (a) the five hallmarks of marital happiness, (b) the five signs of marital distress, (c) a stress model for coping with marital conflict, (d) the attraction forces which bond couples in premarriage, (e) the polarization forces which separate couples, (f) the conditions which facilitate renewal and reconciliation in marriage, (g) how to reestablish positive exchanges, (h) how to communicate negative feedback positively, (i) effective problem-solving styles, (j) conflict resolution skills, (k) how to nurture self-esteem in oneself and one's mate, (l) how to enhance sexual functioning and compatibility, and (m) the compatibility between science and scripture.

In the first session, the primary focus was on the essential goals and concepts underlying the workshop. The presenter gave a brief overview of the findings from marital research studies in this country from 1975-1985. Couples learned about the five key behaviors which

distinguish good from bad marriages: (a) Happy couples exchange many pleasing behaviors and few displeasing behaviors; (b) happy couples seek to change their spouse's behavior by using positive change strategies, such as praise, reinforcement, approval, and rewards, rather than negative ones; (c) happy couples rely on numerous positive problem-solving behaviors, such as listening, approving, agreeing, offering solutions, and using a gentle voice; (d) happy couples manifest high self-esteem; and (e) happy couples spend much time together.

The ABCX stress model and its contribution to marital conflict and unhappiness were examined. In this regard, consideration was given to the thirteen predictable marital stressors ("A" factors), the resources or skills and behaviors ("B" factors) needed to work through these stressors, and the thinking errors ("C" factors) underlying marital crises. The presence of "A" factors alone does not cause marital crisis; marital discord results from a couple being low in "B" factors and high in "C" factors or thinking errors. Avoiding or resolving the "X" factor or marital crisis involves changing the "B" and "C" factors.

In particular, emphasis was given to the five key resources or skills which produce happiness in marriage. These resources encompassed: (a) increasing the P:N ratio (ratio of pleasing to displeasing behaviors) in the marriage relationship, (b) substituting positive behavioral change strategies for negative behavioral change methods, (c) building skill in interpersonal problem-solving, (d) developing a high level of self-esteem, and (e) spending a lot of time together.

The participants also worked through handouts on key elements governing attraction between spouses, polarization, and renewal and reconciliation in a marital relationship. Opportunity was provided each couple to reach agreement on some aspect of the ABCX stress model or other idea considered in the session. The concept of group brainstorming was discussed and practiced by the group. Homework for the next meeting entailed reading the first two chapters from the assigned text. During the following week couples were asked to follow the "No-Fight Rule" and to identify any three agreements on any topic of conversation.

The second session began with an emphasis upon the importance of marital agreement to happiness in marriage. Each couple was asked to work together as a



team to take a Team Test covering concepts from the previous session. Couples correctly answering 4 out of the 5 items on this test were invited to exchange a nonsexual behavior, such as a hug or non-erotic kiss, with their mates as a demonstration of one of two types of affectionate expression happy couples frequently enjoy. A brief presentation followed on the other type of affectionate expression shared by happy couples: a high rate of sexual behaviors.

The concept of dyadic brainstorming was presented to the group. Couples learned to generate at least ten possible solutions to a problem under the "Rule of 10." This was called a "Win-Win" approach to problem solving and offered as a constructive alternative to reliance upon negative behavioral change strategies for dealing with marital stress.

The presenter then introduced the BEST CHECKLIST ("BEST") and the rules applicable to its use by participants during the remainder of the workshop. The BEST, an acronym for "Behavior Exchange Skills Technique," is a checklist of 304 events and behaviors which may take place in marriage. These events and behaviors are subdivided into three categories of positive, negative, and wanted. They may occur in 13

different areas: care, communication, empathy, sex, parenting, friendship, independence, self-esteem, household tasks, money, personal habits, job/school, and problem-solving.

Couples received instruction and practice on how to use the BEST to monitor their marital behaviors/events and to compute "P:N" ratios (ratios of pleasing-to-displeasing behaviors). Use of the BEST was explained as essential to boosting marital happiness. While happy couples average a P:N ratio of 17:1, unhappy couples average only a 3:1 ratio. Participants were encouraged to praise their spouses through sharing with them some of their partners' positive behaviors in the categories covered by the BEST.

This session also presented the need to reframe one's view on the cause of marital conflict as illustrated by a handout on the "Old Lady/Young Lady" perspective. Instead of the usual external attributions offered to explain this phenomena, the workshop suggested that a lack of skills/insight is the principal deficit accounting for marital difficulties. Assigned homework involved participants reading chapters 3 and 4 of the assigned text and using the BEST to track their mate's behavior for two different twenty-four hour

periods over the next seven days. Couples were again asked to keep the No-Fight Rule during the week.

The chief purpose of session three was to review the use of the BEST and to explicate the XYZ/PSR Rule for problem-solving. At the outset, each couple shared with another couple some of the positive facets of the BEST which they had experienced. Each couple also took a Team Test covering material from the past session. Participants exchanged a nonsexual behavior with their partners if they responded correctly to at least 4 of the 5 items on the test. The need to reframe marital conflict as resulting from a deficit in marital insight and marital skills was again stressed.

The presenter had a couple share the results of their BEST practice from the previous week and then reviewed with the group how the BEST ratios are computed. The relationship between the P:N ratio on the BEST and marital happiness was re-examined. The presenter explained the concept of positive reinforcement as the rationale underlying the use of the BEST.

After reviewing the five traits of happy couples, the presenter noted that the earlier sessions had focused on the first trait or increasing the "love

levels" of the couples. He indicated the rest of this session would be spent on the second trait or learning to talk about negatives. The "XYZ/PSR Rule" for problem-solving ("Action Request") was introduced as a way of equipping couples to talk positively to each other about their negative behaviors. This model was described as a two-step process in which spouses learn first to identify the problem and then to state their goal to their partners.

The "XYZ" part of this model identifies the problem through a partner describing the negative feeling ("X"), the annoying behavior of the other ("Y"), and the setting in which that behavior occurs ("Z"). After expressing the "XYZ", the partner immediately uses the "PSR Rule" to be positive ("P") by asking for an increase in a behavior which is specifically described ("S"). The partner requests the change in a gentle, warm voice tone ("R"). Pointing out several alternate positive behaviors which are desired from one's mate is important. Providing alternatives for new behaviors increases the likelihood of that person changing the negative behavior in question.

Each couple then had 15 minutes to use the XYZ/PSR Rule to work through a minor problem identified by them.

Couples were given an opportunity to share the results of this exercise with the group. The presenter explained that this particular model of problem solving will be effective about 50% to 75% of the time in resolving minor problems faced by couples. Expressing one's negative feelings first and giving a spouse options for behavior change were deemed crucial to the success of this method.

Couples were informed that the last two sessions would cover the "Win-Win" model for resolving enduring conflicts. Homework consisted of continued monitoring of spouses' daily behavior per the BEST for any two day period and reading chapters 8 and 9 of the assigned textbook.

The fourth session primarily reviewed the use of the BEST, discussed social support/comforting skills, and demonstrated the "Win-Win" problem-solving model. As a warm-up exercise, each couple was asked to reach agreement on a significant conclusion about their experience with the BEST and then to share that information with another couple. In introducing the session, the presenter showed how the XYZ/PSR Rule for problem solving is compatible with Scripture, most notably Christ's commandment to love one another (Jn.

15:17) and Paul's admonition to dwell on whatever is good, true, and positive (Phil. 4:8). As a brief follow-up to the use of the Action Request ("XYX/PSR Rule"), the presenter discussed the concepts of closing the feedback loop and the law of positive feedback. Giving positive feedback to a spouse displaying positive behavior closes the feedback loop and encourages the spouse to maintain this new behavior.

The presenter then had a couple share their results from one BEST tracking session during the prior week. Participants had the opportunity to question this sharing couple about their computation of these ratios. A high P:N ratio was observed to be the product of a planful effort to give more pleasing behaviors than displeasing ones. The presenter explained how an Action Request can be used to secure behavioral change in respect to desired or displeasing behaviors reported by spouses on the BEST.

Participants next worked through a handout on "Social Support" enumerating eleven social support behaviors linked with good marriages. These support behaviors included: (a) Confiding-responding, (b) Validation and empathy, (c) Self-esteem, (d) Consensus and agreement, (e) Problem-solving/tangible help, (f)

Joint role/responsibility, (g) Nonsexual/sexual, (h) Warm voice tone, (i) Adaptability, (j) Approval, and (k) Companionship. Participants also learned about the physical, mental, and interpersonal benefits of perceived high social support and the negative results of perceived low social support. They were then asked to share with their mates one of these social support buffers which they would most like from them when they are highly stressed.

In addition, a comprehensive exposition was given of the "Win-Win" problem solving model for handling persistent marital conflicts which still remain after resort to the XYZ/PSR Rule. The presenter reviewed the Action Request (XYZ/PSR Rule) as the first step of defining the problem in this model. As the second step, participants learned ways of validating their partners who have shared a particular problem with them. In the third step, couples learned to negotiate or to plan a "Win-Win" solution that was mutually beneficial. This involved the fourth step of spouses brainstorming together about solutions to the problem.

Couples then received instruction on using a Decision Chart to evaluate the pros and cons of each proposed solution in terms of specific criteria. Each

partner is asked to evaluate separately whether the proposed solution meets his or her needs. Other criteria include whether the idea in question is good for the relationship, is easy and practical, involves equal change by both partners, is good in the short-term (next six months), and is good in the long-term. In this process of evaluation each partner assigns a number to each of these criteria on a scale of 1 to 5 ranging from "no" to "yes;" differences in scores on a specific criteria are averaged, with fractions rounded up to the nearest whole number. In this way, each proposed solution can be quantified on the basis of the cumulative scores for the applicable criteria.

After learning how to quantify the possible solutions to a problem, couples advanced to the sixth step of agreeing on a solution. This process does not necessarily require a couple to agree on the highest numbered solution, although this numbering system is intended as a guide to facilitate agreement. Ideally, an acceptable solution will also reflect both partners strongly indicating that their individual needs will be met by this proposed resolution of the problem. The seventh and eighth steps entail implementing the solution and evaluating it.



Couples were given twenty minutes to practice the "Win-Win" problem solving model in resolving a minor impasse in their relationship. Following this trial, a couple was invited to share how they had resolved an issue. Participants had the opportunity to ask questions about the model. Feedback was solicited concerning how participants felt about this process. Finally, the participants were asked to bring some examples to the next session of some of the support skills employed by their mates. They were further directed to finish reading the assigned book.

The last session introduced the bean game as a way of increasing positive marital behavior, examined sexual functioning dynamics between men and women, and discussed self-esteem as it affects the marital relationship. At the outset, the presenter requested participants to reach agreement with their partners on a relational principle from the workshop to put into practice in their relationships. Each couple then shared their agreement with another couple.

The presenter presented the bean game as a practical, fun way of increasing positive exchanges between partners. Each individual was given three white beans and one red bean. Participants were instructed

to think of something positive observed in their mates in the preceding twenty-four hours. They were to verbalize this thought to their respective partners and then to give their mates a white bean. They were asked to repeat this process two additional times. The presenter then noted how each partner still had three white beans in spite of giving three away. Participants were also to share with their mates any harmful or obnoxious behavior observed in their partners, to give them a red bean, and to use an Action Request to seek a change in this behavior. The purpose of this game was to illustrate the law of reciprocity in marriage in which happy spouses are both giving and receiving positive behaviors and thus have high P:N ratios.

Couples were encouraged to use the bean game at home to practice the law of reciprocity and to maintain a high P:N ratio in their relationships. This exercise requires a couple to keep two jars at home in an easy-to-see place. Both white and red beans are placed in one of the jars. For each pleasing or negative behavior by a partner, a white or red bean, respectively, is taken out by the other spouse and delivered to that person via its deposit in the empty second jar. An Action Request is to accompany the delivery of a red

bean. When the ratio of white to red beans in the second jar reaches 17:1 or some other agreed upon level, the couple rewards each other by doing something fun.

Couples also considered the sexual intercourse differences between happy and unhappy couples. While a good sex life is a physiological/emotional healer in marriage, exclusive emphasis on this dimension of the relationship often generates additional stress for a couple. A high P:N ratio was related to a higher level of sexual functioning in a couple. The presenter described physiological and emotional dynamics and differences underlying how men and women respond sexually. Participants were encouraged to communicate their sexual needs to their mates.

The relationship between high or low self-esteem and marital happiness or difficulties was then discussed. The presenter briefly explained the developmental dynamics underlying the growth of both positive and negative self-esteem in a child. He also described the negative relational results that occur when low self-esteem adults marry: (a) such couples are unable to exchange high rates of positive behaviors and (b) they become locked in power struggles. For low self-esteem couples, five solutions to their predicament

were suggested: (a) gain insight into family of origin dynamics that may be affecting the relationship; (b) remember that self-esteem development is a two person process; (c) focus on one another's mastery experiences; (d) understand that self-esteem is fragile and changeable; and (e) behave in a nurturing, positive way toward one's mate even if one has low self-esteem.

Finally, couples had another opportunity to practice the "Win-Win" model of problem solving for approximately twenty minutes. They were asked to select an impasse in their relationship that was somewhere between minor and major. Their attempted resolution of the problem required their brainstorming together five potential solutions, identifying three relevant criteria, evaluating the solutions, and agreeing on a solution. The group was then able to question the presenter on any facet of this method for resolving marital conflict. Lastly, time was reserved for completion of the DAS as a posttest.

#### Statistical Analysis

Statistical analysis of the data was performed through the use of appropriate programs from the

Statistical Package for the Social Sciences/Personal Computer-Plus (SPSS.PC+) (Norusis, 1986). The statistical technique of Analysis of Covariance (ANCOVA) with the main effects of group (treatment, control) and gender (male and female) was utilized to analyze the differences between the treatment and the wait-list control groups in respect to the dependent variable, the global scores on the DAS. A repeated measures ANOVA design was used to test for significant change in the global DAS score means for couples, men, and women in the treatment group during the treatment interval between pre-, post-, and follow-up test assessment. Finally, an ANOVA was employed to assess for possible gender differences between participants in the treatment group and the wait-list control group in respect to their pretest DAS scores.

The participants' pretest DAS scores and the demographic variable on which the two groups were found to be significantly different were used as the covariates in order to control for between-group differences on these variables. The ANCOVA procedure statistically adjusts for differences between groups on these variables (Huck, Cormier, & Bounds, 1974). The effect of the treatment was measured to determine its

influence on variance beyond the effect of the covariates. The standard for interpretation of the F statistics with the ANCOVA, repeated measures ANOVA, and ANOVA was established a priori at the .05 level.

## CHAPTER 3

### RESULTS

#### Introduction

This chapter presents the results of the study. First, the descriptive demographic information for the treatment group and the wait-list control group will be provided. Second, the Dyadic Adjustment Scale (DAS) pretest and posttest results for the two groups will be presented. In addition, the six month follow-up DAS results for the treatment group will be described. Third, the results of testing the hypotheses set forth in chapter one will be reported. Fourth, other statistical results relating to the question of pretest gender differences and the effect size of the treatment will be provided.

#### Demographic Data

The composition of the participants in this research study was verbally described in chapter two.

This section will provide the descriptive statistics of the sample which consisted of two groups of mostly church couples. Thirty participants comprised the treatment group and thirty-two participants were in the wait-list control group. Tables 3 to 14 contain a summary of the demographic information for both the treatment group and the control group.

#### Gender of Participants

Table 3 shows the breakdown on gender for the participants in the two groups. In both groups, 50% were males and 50% were females.

Table 3

#### Gender Percentages of Treatment Group (TG) and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
Male	50	50
Female	50	50

$a_n = 30.$   $b_n = 32$



Age of Participants

The statistics on the ages of the participants in the two groups are summarized in Table 4. The ages of participants in the treatment group ranged from 29 to 65 years with a mean age of 42.8 years. The ages of participants in the wait-list control group ranged from 25 to 68 with a mean age of 42.7 years.

Table 4

Mean Age of Participants in Treatment Group (TG) and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
Minimum	29.0	25.0
Maximum	65.0	68.0
Mean	42.8	42.7
Standard Deviation	8.7	10.0

$a_n = 30.$   $b_n = 32$

Marital Status

Table 5 shows the marital status for the participants in each group. In the treatment group,

80.0% of the participants were either in their first marriages or remarried, as compared with 93.8% of those with this status in the wait-list control group. Unlike the wait-list control group, the treatment group had two couples (13.4%) who were not married.

Table 5

Marital Status Percentages of Treatment Group (TG) and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
Single	6.7	0.0
First Marriage	50.0	37.5
Separated or Divorced	6.7	6.3
Remarried	30.0	56.3
Living Together	0.0	0.0
Other (Engaged)	6.7	0.0

$a_n = 30$ .  $b_n = 32$

Years Married

Couples in the two groups were similar with respect to their mean years married, as shown in Table 6. In

the treatment group the mean years married for couples was 12.0 years as compared with 13.1 years for couples in the wait-list control group.

Table 6

Mean Years Married of Couples in Treatment Group (TG)  
and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
Minimum	3.0	1.0
Maximum	28.0	27.0
Mean	12.0	13.1
Standard Deviation	8.7	8.9

$a_n = 30.$     $b_n = 32$

Education Level

The educational percentages of the two groups are found in Table 7. In the treatment group 46.6% of the participants had 10-14 years of education, while 71.9% of the wait-list control group members fell within this educational range. The treatment group had 43.3% of its participants report 15-16 years of education as compared

to 6.3% of the wait-list control group members. The wait-list control group (21.9%) had a higher percentage of members indicating 17 or more years of education than did the treatment group (10.0%).

Table 7

Years of Education Percentages of Treatment Group (TG)  
and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
10-12 years	23.3	31.3
13-14 years	23.3	40.6
15-16 years	43.3	6.3
17-18 years	3.3	18.8
More than 18 years	6.7	3.1

$a_n = 30.$     $b_n = 32$

Gross Family Income

Table 8 displays the percentage breakdown of gross family income for the two groups. Roughly comparable percentages of participants in both groups were in the more than \$50,000 range (33.3% for the treatment group

and 31.3% for the control group). The treatment group had 40% of its members in the \$30,000 to \$39,999 and \$40,000 to \$49,999 categories while 50.1% of the wait-list control group participants were clustered within the \$20,000 to \$29,999 and \$30,000 to \$39,999 divisions.

Table 8

Income Level Percentages of Treatment Group (TG) and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
Less than \$10,000	0.0	6.3
\$10,000 - \$19,999	13.3	0.0
\$20,000 - \$29,999	13.3	31.3
\$30,000 - \$39,999	20.0	18.8
\$40,000 - \$49,999	20.0	12.5
More than \$50,000	33.3	31.3

$a_n = 30$ .  $b_n = 32$

Race or Ethnic Background

Both groups were predominantly Caucasian, as revealed in Table 9.

Table 9

Race or Ethnic Background Percentages of Treatment Group (TG) and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
Black	0.0	0.0
Hispanic	0.0	3.1
Native American	0.0	3.1
Asian	0.0	0.0
Other White (Caucasian)	96.7	93.8
Other	3.3	0.0

$n_a = 30$ .  $n_b = 32$

Number of Children at Home Three or Fewer Days a Week

Table 10 contains the information on the percentages of couples with a child or children at home three or fewer days a week. In the treatment group none of the participants had any children at home three or fewer days a week. In the wait-list control group 31.3% of the participants reported having either one or two children at home for this time interval.

Table 10

Number of Children at Home Three or Fewer Days a Week:  
Percentages of Treatment Group (TG) and Control Group  
(CG)

	TG <sup>a</sup>	CG <sup>b</sup>
0 children	100.0	68.8
1 child	0.0	12.5
2 children	0.0	18.8

$a_n = 30.$   $b_n = 32$

Number of Children at Home Four or More Days a Week

Table 11 shows that the two groups were somewhat dissimilar as to the percentages of members having a child or children at home four or more days a week. In the treatment group 40% of the participants had no children at home in this category, as compared with 25% of the wait-list control group members. In addition, 60% of the treatment group members versus 75.1% of the wait-list control group reported one or more children at home for this length of time.

Table 11

Number of Children at Home Four or More Days a Week:  
Percentages of Treatment Group (TG) and Control Group  
(CG)

	TG <sup>a</sup>	CG <sup>b</sup>
0 children	40.0	25.0
1 child	26.7	12.5
2 children	20.0	56.3
3 children	13.3	6.3

$a_n = 30.$      $b_n = 32$

#### Profession of Faith

The two groups were comparable in their composition regarding profession of faith as shown in Table 12. The treatment group had 70.0% of its participants versus 84.4% of the wait-list control group members who confessed to having received Jesus Christ as Lord and Savior and sought to follow his moral teachings. The treatment group and the wait-list control group had 20% and 12.5% of their members, respectively, who reported following the moral and ethical teachings of Christ.



Table 12

Profession of Faith Percentages of Treatment Group (TG)  
and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
None	6.7	0.0
Moral	20.0	12.5
Personal	3.3	3.1
Personal/Moral	70.0	84.4

Note: Moral = Follow the moral and ethical teachings of Christ; Personal = Have received Jesus Christ into my life as my personal Savior and Lord; Personal/Moral = Have received Jesus Christ as my personal Savior and Lord and seek to follow the moral and ethical teachings of Christ.

$n_a = 30$ .  $n_b = 32$

Frequency of Church Attendance

The data on frequency of church attendance for the two groups is found in Table 13. The two groups were similar as 66.6% of the treatment group and 71.9% of the control group attended church weekly or more than once a

week. The remainder of the participants in each group were mainly spread out among those attending church 1-4 times a month, 3-12 times a year, and 1-2 times a year.

Table 13

Church Attendance Percentages of Treatment Group (TG)  
and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
Less than once per year	3.3	0.0
1-2 times a year	6.7	9.4
3-12 times a year	6.7	12.5
1-4 times a month	16.7	6.3
Weekly	43.3	34.4
More than once a week	23.3	37.5

$n_a = 30.$   $n_b = 32$

Importance of Religious Beliefs/Practices

Table 14 contains information showing the percentages of participants in terms of how they rated the importance of their religious beliefs and practices. Participants were asked to rate their religious beliefs and practices on a scale of 1 to 7 ranging from having no importance to being extremely important. The two groups were much alike in their distributions on this variable. The treatment group and the wait-list control group had 80.1% and 87.5% of their members, respectively, who rated their religious beliefs and practices as a "5" or higher.

Table 14

Religious Beliefs/Practices Percentages of Treatment  
Group (TG) and Control Group (CG)

	TG <sup>a</sup>	CG <sup>b</sup>
(No Importance)		
1	3.3	3.1
2	0.0	0.0
3	3.3	3.1
4	13.3	6.3
5	16.7	15.6
6	26.7	18.8
7	36.7	53.1
(Extremely Important)		

<sup>a</sup> $n$  = 30.    <sup>b</sup> $n$  = 32

Statistical analyses were undertaken on the Background Information Questionnaire (BIQ) items to ascertain if any significant differences existed between the two groups on these demographic items. One-way ANOVA analyses determined that the groups were

significantly different on only one demographic item: the number of children at home three or fewer days a week ( $\chi^2(1, 60) = 9.9481; p = .003$ ). No significant difference was found between the two groups on other demographic items (gender, age, years married, educational level, income, race or ethnic background, number of children at home four or more days a week, and importance of religious beliefs and practices).

Several of the BIQ items underwent Cramer's V or Chi-square analyses for the purpose of assessing for any significant difference between the two groups. These items included marital status and profession of faith. The data for marital status is as follows:  $V = .343$  (4),  $p = .12$ . The data for profession of faith is:  $V = .223$  (3),  $p = .38$ . The data for church attendance was analyzed via a Kruskal-Wallis One-Way ANOVA, indicating the following Chi-square (corrected for ties):  $\chi^2(1, N = 62) = .274, p = .60$ . These results do not indicate evidence of a significant difference between the groups on the demographics of marital status, profession of faith, and church attendance.

## DAS Results

Table 15 displays the DAS pretest, posttest, and follow-up test means and standard deviations (SD) for the treatment group. The DAS pretest and posttest means and standard deviations (SD) for the wait-list control group are featured in Table 16.

Table 15

Dyadic Adjustment Scale (DAS): Pretest, Posttest, and  
Follow-up Test Means and Standard Deviations for  
Treatment Group (TG)

	Pretest		Posttest		Follow-up Test	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
<u>Couples</u> ( <u>n</u> = 30)	92.67	17.01	111.00	10.43	107.65	20.01
<u>Men</u> ( <u>n</u> = 15)	92.40	18.60	109.53	11.12	108.69	17.15
<u>Women</u> ( <u>n</u> = 15)	92.93	15.92	112.47	9.86	106.62	23.20

Note. Couples = Combined men and women in the treatment group.

Table 16

Dyadic Adjustment Scale (DAS): Pretest and Posttest Means and Standard Deviations for Control Group (CG)

	Pretest		Posttest	
	M	SD	M	SD
<u>Couples</u> (n = 32)	93.75	23.03	93.91	24.83
<u>Men</u> (n = 16)	99.31	19.44	96.69	21.67
<u>Women</u> (n = 16)	88.19	25.54	91.13	28.06

Note. Couples = Combined men and women in the wait-list control group.

An examination of the means and standard deviations of the two groups reveals greater changes in these values from the pretest to the posttest for participants in the treatment group as compared to those in the wait-list control group. These differences in means together with the follow-up test means for the treatment group



provide the basis for examining the hypotheses set forth in chapter one. The hypotheses addressed the changes in marital adjustment for couples, men, and women assessed by the DAS as a result of their participation in the marriage enrichment program.

### Tests of the Hypotheses

Several steps of analysis were performed to test the six hypotheses described in chapter one. The hypotheses stated that the marriage enrichment intervention would result in an increase in marital adjustment for couples, men, and women, as measured by the DAS, and that these increases would be maintained at the six month follow-up.

Each of the first three hypotheses was examined by means of a 2 x 2 analysis of covariance (ANCOVA) for the main effects of group (treatment group and control group) and gender (male and female) on posttest DAS score means. Pretest DAS score means and the demographic variable of children at home three or fewer days a week were entered as covariates in order to control for differences between the groups on these variables.

Each of the last three hypotheses was tested by a repeated measures analysis of variance design (ANOVA). This design was employed to determine if significant change occurred in the DAS score means for couples, men, and women in the treatment group at the six month follow-up as compared to their respective pretest score means.

#### Effects of Treatment on Marital Adjustment

The DAS was used to measure effects of treatment on marital adjustment. Changes in DAS scores for participants in the treatment group were significant from pre- to posttest assessment ( $F(1, 55) = 9.240$ ;  $p = .000$ ). The main effect for group was significant ( $F(1, 55) = 18.478$ ;  $p = .000$ ). No main effect for gender was noted ( $F(1, 55) = .016$ ;  $p = .901$ ). The two-way interaction of group and gender was not significant ( $F(1, 55) = .409$ ;  $p = .525$ ).

The DAS pretest covariate accounted for a statistically significant amount of the variance. The amount of variance that could be attributed to the demographic variable of children at home three or fewer days a week was not found to be significant. Table 17 summarizes the results of this ANCOVA analysis.

Table 17

Results of Two Factor ANCOVA for Participants Using  
Marital Adjustment by Group and Gender

Source of Variation	Sum of Squares	DF	Mean Square	F	Sig. of F
Covariates	11538.5	2	5769.3	27.99	.00
DAS Pretest	11160.7	1	11160.7	54.15	.00
Children	282.6	1	282.6	1.37	.25
Main Effects	3809.1	2	1904.5	9.24	.00
Group	3808.5	1	3808.5	18.48	.00
Gender	3.2	1	3.2	.02	.90
2-way					
Interaction					
Group x Gender	84.4	1	84.4	.41	.53
Explained	15431.9	5	3086.4	14.97	.00
Residual	11336.3	55	206.1		
Total	26768.2	60	446.1		

Note: N = 62. Children = children at home three or fewer days per week. Analysis with DAS pretest scores and demographic of children held constant as covariates.

Treatment Effects for Couples

The first hypothesis in chapter one stated that couples participating in the THC-ME workshop would have a significant increase in their level of marital adjustment, as measured by their global scores on the DAS at the posttest. The couples in the treatment group showed a significant mean score gain in marital adjustment of 18.33 between pre- and posttest measurements. The combined DAS pretest mean for men and women in the treatment group was 92.67 ( $SD = 17.01$ ) and the posttest mean for this group was 111.00 ( $SD = 10.43$ ). This contrasted with a minimal mean score gain of .16 from pre- to posttest for the combined control group. The combined pretest DAS mean score for men and women in the wait-list control group was 93.75 ( $SD = 23.03$ ) and the posttest mean was 93.91 ( $SD = 24.83$ ). This difference between the two groups was significant at the  $p = .05$  level of significance. This provided strong statistical support for the hypothesis that couples' marital adjustment would improve through participating in marriage enrichment treatment.

### Treatment Effects for Men

The second hypothesis stated that men participating in the THC-ME workshop would have a significant increase in their level of marital adjustment as measured by their global scores on the DAS at the posttest. The men in the treatment group demonstrated a 17.13 mean score increase in marital adjustment from pre- to posttest. The pretest DAS mean score for the men went from 92.40 ( $SD = 18.60$ ) to a posttest mean of 109.53 ( $SD = 11.12$ ). The men in the wait-list control group showed a negative mean score decrease of -2.62 from pre- to posttest assessment. The pretest DAS mean score for the men was 99.31 ( $SD = 19.44$ ) while their posttest mean was slightly less at 96.69 ( $SD = 21.67$ ). This difference in the treatment group and the wait-list control group with respect to increase in the mean change score from pre- to posttest for men was significant at the  $p = .05$  level. Consequently, the results from this analysis supported this hypothesis.

### Treatment Effects for Women

The third hypothesis stated that women participating in the THC-ME workshop would have a significant increase in their level of marital

adjustment as measured by their global scores on the DAS at the posttest. The treatment group women showed a marked marital adjustment gain of 19.54 in their mean DAS score between the pre- and posttest measurements. The women's pretest mean score was 92.93 ( $SD = 15.92$ ) while their posttest mean score increased to 112.47 ( $SD = 9.86$ ). The women in the wait-list control group had a negligible mean score increase of 2.94 from pre- to posttest assessment. The pretest DAS mean score for this group was 88.19 ( $SD = 25.54$ ) and the posttest group mean was 91.13 ( $SD = 28.06$ ). This significant comparison between the two groups substantiated the effect of the treatment on the women's marital adjustment. This finding provided evidence supporting this hypothesis.

#### Follow-up Assessment of Marital Adjustment

Participants in the treatment group completed an identical form of the DAS instrument at the six month follow-up to assess the enduring effect of the marriage enrichment treatment on their level of marital adjustment. A 1 x 3 (pre, post, and follow-up) repeated measures analysis of variance analyzed the DAS score means for couples (combined men/women group), men, and

women. Positive change was observed in the DAS scores and statistical significance at the .05 level was achieved for each of these groups during the treatment interval (Couples:  $F(2, 83) = 10.886, p = .000$ ; Men:  $F(2, 40) = 5.431, p = .008$ ; Women:  $F(2, 40) = 5.280, p = .009$ ). The summary of the results of this ANOVA is set forth in Table 18 and is further discussed in the sections below on the follow-up effects for couples, men, and women.

Table 18

Repeated Measures ANOVA Comparing Treatment Group  
Pretest, Posttest, and Follow-up DAS Scores for Couples,  
Men, and Women

Source of Variation	Sum of Squares	DF	Mean Squares	F Ratio	F Prob.
Couples (Combined Men/Women Group) ( $n = 86$ )					
Between Occasions	5656.2	2	2828.1	10.89	.00
Within Groups	21562.6	83	259.8		
Total	27218.8	85			
Men ( $n = 43$ )					
Between Occasions	2742.0	2	1371.5	5.43	.01
Within Groups	10102.1	40	252.6		
Total	12845.1	42			

(table continues)



Table 17--Continued

Source of Variation	Sum of Squares	DF	Mean Squares	F Ratio	F Prob.
Women ( $n = 43$ )					
Between Occasions	3000.7	2	1500.3	5.28	.01
Within Groups	11365.7	40	284.1		
Total	14366.4	42			

#### Follow-up Effects for Couples

The fourth hypothesis stated that six months after participation in the THC-ME workshop, couples in the treatment group will continue to have significantly higher marital adjustment, as measured by a follow-up test of the DAS, than at the pretest. Utilizing a repeated measures ANOVA, a significant difference was found in the mean DAS scores for combined men and women within the treatment group at the posttest and the follow-up test ( $F(2, 83) = 10.89; p = .00$ ).

To determine the significance of the between groups difference, a multiple range test (Tukey-HSD) was used. Both the posttest and the follow-up test were found to

be significantly different from the pretest at the .05 level. Posttest and follow-up scores did not differ. Group comparisons using the Tukey-HSD procedure are presented in Table 19.

Six months after participation in the marriage enrichment program, the combined men and women in the treatment group showed a 14.98 mean score increase in marital adjustment from the pretest to the follow-up test. From the post- to the follow-up test, however, a 3.35 mean score decrease was reported in marital adjustment for this group. Their posttest mean score was 111.00 ( $SD = 10.43$ ) and their follow-up test mean score was 107.65 ( $SD = 20.01$ ). These scores were compared with their mean score of 92.67 on the pretest DAS ( $SD = 17.01$ ), and showed positive change in the predicted direction at both the posttest and the follow-up test. Accordingly, this hypothesis was supported.

Table 19

Multiple Range Test (Tukey HSD Procedure) of Mean Differences Between Combined Men/Women Mean DAS Scores at the Pretest, Posttest, and the Follow-up Test

---

	Test	1	2	3
Mean				
92.67	Group 1			
107.65	Group 3	*		
111.00	Group 2	*		

---

Note. (\*) Denotes pairs of groups significantly different at the  $p < .05$  level. Group 1 = Combined men's and women's DAS mean score at the pretest; Group 2 = Combined men's and women's DAS mean score at the posttest; Group 3 = Combined men's and women's DAS mean score at the follow-up test.

Follow-up Effects for Men

The fifth hypothesis stated that six months after participation in the THC-ME workshop, men in the treatment group will continue to report significantly higher marital adjustment, as measured by a follow-up

test of the DAS, than at the pretest. Using a repeated measures ANOVA, a significant difference was detected in the mean DAS scores for men within the treatment group at the posttest and the follow-up test ( $F(2, 40) = 5.43$ ;  $p = .01$ ).

A multiple range test (Tukey-HSD) was used to ascertain where the significant difference was in the between-groups analysis. Both the posttest group and the follow-up test group were determined to be significantly different from the pretest group at the .05 level. Posttest and follow-up scores did not differ. Table 20 sets forth the group comparisons using the Tukey-HSD procedure.

The men displayed a 16.29 mean score rise in marital adjustment from the pretest to the follow-up test. Marital adjustment decreased a mean score of .84 from the posttest to the follow-up test. The men had a posttest means score of 109.53 ( $SD = 11.12$ ) and their follow-up test mean score was 108.69 ( $SD = 17.15$ ). Given their pretest mean score of 92.40 ( $SD = 18.60$ ), positive change was present in the predicted direction at both the posttest and the follow-up test. Therefore, the data supported this hypothesis.

Table 20

Multiple Range Test (Tukey HSD Procedure) of Mean Differences Between Men's Mean DAS Scores at the Pretest, Posttest, and the Follow-up Test

---

	Test	1	2	3
Mean				
92.40	Group 1			
108.69	Group 3	*		
109.53	Group 2	*		

---

Note. (\*) Denotes pairs of groups significantly different at the  $p < .05$  level. Group 1 = Men's DAS mean score at the pretest; Group 2 = Men's DAS mean score at the posttest; Group 3 = Men's DAS mean score at the follow-up test.

Follow-up Effects for Women

The sixth hypothesis stated that six months after participation in the THC-ME workshop, treatment group women will continue to report significantly higher marital adjustment, as measured by a follow-up test of the DAS, than at the pretest. A repeated measures ANOVA produced evidence of a significant difference in the

mean DAS scores for women within the treatment group at the posttest and follow-up test ( $F(2, 40) = 5.28; p = .01$ ).

A multiple range test (Tukey-HSD) was employed in evaluating the effects of marital adjustment on posttest and follow-up DAS scores. The only significant difference at the .05 level was between the posttest group and the pretest group. Neither pretest nor posttest scores differed significantly from follow-up scores. Group comparisons on the basis of the Tukey-HSD procedure are found in Table 21.

At the six month follow-up, women demonstrated a 13.69 mean score elevation in marital adjustment from the pretest. However, they exhibited a 5.85 mean score decrease in marital adjustment from the posttest to the follow-up test. Their posttest means score was 112.47 ( $SD = 9.86$ ) compared to their follow-up test mean score of 106.62 ( $SD = 23.20$ ). An examination of individual pretest, posttest, and follow-up scores for women revealed that a single woman's change score adversely influenced the overall results. She reported a 28 point increase on her DAS posttest and then dramatically dropped to a follow-up DAS score that was 40 and 68 points, respectively, below her pretest and posttest

scores. Three other women out of the thirteen completing the follow-up DAS showed a decline in their follow-up DAS scores to pretest levels. Nine of the thirteen women reported nearly the same or a higher level of marital adjustment at the follow-up test in comparison to their posttest scores.

These findings reflected positive change from the pre-treatment mean score of 92.93 (SD = 15.92) at both the posttest and the follow-up test. However, the statistical results did not support the sixth hypothesis as the follow-up test scores were not significantly elevated from the pretest. Nevertheless, if the unduly adverse follow-up score noted above were excluded, the data would have confirmed this hypothesis.

Table 21

Multiple Range Test (Tukey HSD Procedure) of Mean Differences Between Women's Mean DAS Scores at the Pretest, Posttest, and the Follow-up Test

---

	Test	1	2	3
Mean				
92.93	Group 1			
106.62	Group 3			
112.47	Group 2	*		

---

Note. (\*) Denotes pairs of groups significantly different at the  $p < .05$  level. Group 1 = Women's DAS mean score at the pretest; Group 2 = Women's DAS mean score at the posttest; Group 3 = Women's DAS mean score at the follow-up test.

#### Other Statistical Results

##### Gender Effects

The data were further analyzed to determine whether gender differences in the DAS scores were observed at the pretest for the combined treatment and wait-list control groups. An analysis of variance was used to



examine the participants' pretest DAS scores for gender differences. The results showed no significant gender differences at the pretest on the DAS ( $F(1, 60) = 1.15$ ,  $p = .29$ ). Table 22 displays the results of this ANOVA.

Table 22

Results of ANOVA Analyzing Gender Differences in the Pretest DAS Scores for Treatment and Control Group Participants

Source of Variation	Sum of Squares	DF	Mean Square	F	Sig. of F
Gender Groups	466.1	1	466.1	1.15	.29
Within Groups	24392.7	60	406.5		
Total	24858.8	61			

Note.  $N = 62$ .

Effect Size

Effect size was calculated for the marriage enrichment treatment. Computations followed the procedures described by Glass, McGaw, and Smith (1981) with the two exceptions noted by Giblin et al. (1985):

(a) change scores were utilized in place of posttest scores due to lack of pretest equivalence between the groups, and (b) a pooled posttest standard deviation was used as the standard deviation term because it was considered more consistent with the pooled error terms for the F statistics.

Effect size was computed as the difference between the mean change scores for the treatment group and the control group from the pretest to the posttest divided by the standard deviation of the pooled sample of both groups at the posttest. This formula yielded an effect size of .90 for the treatment group. In addition, the effect size for the treatment group at the six month follow-up was obtained by dividing the mean change score for the treatment group from the pretest to the follow-up by the standard deviation of the pooled sample of both groups at the posttest. The effect size at the follow-up was .79.

#### Summary

The results supported Hypotheses 1, 2, and 3. Couples in the treatment group showed significantly higher DAS scores than the couples in the wait-list

control group (Hypothesis 1). In addition, both men and women in the treatment group demonstrated significantly higher DAS scores than their respective counterparts in the control group (Hypotheses 2 and 3).

Hypotheses 4 and 5 were fully affirmed, while Hypothesis 6 was not supported. Couples (combined men/women group) and men in the treatment group reported significantly higher DAS scores at the posttest and follow-up test than at the pretest (Hypotheses 4 and 5). The women in the treatment group showed gains in their DAS scores at the posttest, but they were not sustained at the follow-up. Their follow-up scores were not significantly different from their pretest scores (Hypothesis 6).

Overall, the results of the statistical analyses supported five of the six hypotheses stated in chapter one. The participants' marital adjustment, as measured by the DAS, significantly increased as a result of participation in the treatment group. This treatment effect was found for both men and women. These changes in marital adjustment from the pretest remained significant at the follow-up test for the couples (combined men-women group) and men, but not for the women.

In the next chapter, the implications of the results, limitations of the study, and recommended future research will be discussed.

## CHAPTER 4

## DISCUSSION

## Introduction

This chapter contains a discussion of the research results presented in Chapter 3. The chapter is divided into five sections: (a) A review of the results, (b) Implications and limitations of the research, (c) Recommendations for future research, and (d) Summary.

## Summary and Discussion of the Results

This section will discuss the sample's general characteristics and examine the results of the statistical analyses for the six hypotheses and other research questions in this study.

Discussion of the Sample

The sample consisted of two groups, a treatment group and a wait-list control group. Participant couples were randomly assigned to these groups. The

sample was tested to determine if any significant differences existed between the two groups on any of the demographic items.

The two groups appeared to be fairly similar on the basic demographic data. The mean age of participants in the two groups was almost identical, being 42.8 years for the treatment group and 42.7 for the wait-list control group. The racial composition of both groups was overwhelmingly Caucasian, with 96.7% of the treatment group members and 93.8% of the wait-list control group participants falling within this category. Participant couples' mean years married was roughly equivalent for the groups: 12 years for couples in the treatment group and 13.1 years for couples in the wait-list control group. Income level for participants in the two groups displayed little variation. The participants did not differ significantly on marital status or level of education. The members in both groups were also comparable in their religious orientation as reflected by frequency of church attendance, profession of faith, and importance of religious beliefs and practices.

Statistical testing found that the groups were significantly different on only one demographic item:

the number of children at home three days or less a week. None of the participants in the treatment group reported any children in this category. In the wait-list control group 31.3% of the participants reported having one or two children at home three or fewer days a week. While not significant, 62.6% of the control group members claimed that they had two or three children at home four or more days a week as compared to only 33.3% of the treatment group members. In fact, 40% of the treatment group members reported that they had no children at home four or more days a week. This was true for only 25% of the control group participants. Thus, couples in the treatment group had fewer children at home than those in the wait-list control group.

The demographic variable, children at home three or less days a week, represented the participant's children from a prior marriage(s) who were living in the participant's home on a part-time basis. The higher percentage of remarried couples in the wait-list control group most likely accounted for the presence of a significantly greater number of such children in that group. This significant demographic difference between the two groups potentially could have affected the outcome. Analysis of covariance, however, was used to

control for the effects of this variable on posttest DAS scores. Within the limits of this statistically controlled procedure, this variable is not deemed significant.

This discrepancy between the two groups lends itself to speculation that marriage enrichment may especially benefit couples who are in their first marriage or have fewer children from other marriages living part-time in the home. Possibly, the presence of such children in the home would be a potential source of additional stress or conflict within a relationship. Therefore, it might limit the positive effect of marriage enrichment on marital adjustment.

Yet the marriage enrichment literature contains no indication that number of children at home has any effect upon enrichment outcome as measured by participants' marital adjustment. Reviews of marriage enrichment literature have not suggested any research findings on the relationship between enrichment outcome on measures of marriage adjustment or satisfaction and this variable (Giblin, 1986; Guerney & Maxson, 1990). Additional research is needed to explore the relationship between this variable and enrichment outcome on measures of marital adjustment.



In summary, close similarity existed between the two groups, apart from the significant difference in number of children at home three or fewer days a week. Both the treatment group and the wait-list control group represented a strongly religious, Caucasian sample of individuals whose mean age was nearly 43 years old. The treatment group participants, however, had fewer children at home than did those in the wait-list control group.

#### Effects of THC-ME on Marital Adjustment

The central thesis of the study was that participation in the THC-ME, a cognitive-behavioral, marital enrichment workshop, would promote the marital adjustment of church couples attending conservative, evangelical churches, as measured by the DAS. Further, the study posited that participants in the workshop would maintain their improvement in reported marital adjustment over a six month period following treatment.

The first three hypotheses of this study predicted that couples, men, and women, respectively, would report a significant increase in marital adjustment at the posttest after participation in the marriage enrichment workshop. The analysis in Chapter 3 revealed a

significant treatment effect for couples (combined men/women group), men, and women in the treatment group, and thus provided support for these hypotheses. The treatment group showed significant gains in reported marital adjustment from pretest to posttest. The wait-list control group exhibited virtually no change in marital adjustment from pretest to posttest. The random assignment of the two groups coupled with their close match on the basic demographics strengthens the likelihood that the marital enrichment workshop produced this significant effect.

This enrichment study yielded an effect size of .90 for the treatment intervention at the posttest. Compared to the average effect size of .44 for the enrichment studies examined by Giblin et al. (1985), the effect size in this study was more than twice as large. Moreover, the magnitude of the THC-ME intervention's effect size is underscored by the fact that self-report measures of adjustment or satisfaction generally show weaker effects than behavioral measures of change. Accordingly, this strong effect size suggests that this particular marriage enrichment intervention may be about twice as effective as the average enrichment program.

The results also supported Hypotheses 4 and 5, which postulated that couples and men, respectively, would report significantly higher levels of marital adjustment at the six month follow-up than at the pretest. Significant change in reported marital adjustment was demonstrated by couples (combined men/women group) and men in the treatment group at the six month follow-up test in comparison to their pretest scores. In addition, the overall effect size of the THC-ME workshop at the follow-up for treatment group participants was .79, which was more than double the average follow-up effect size of .34 found for enrichment interventions in the Giblin (1986) study. These findings suggest that church couples can acquire relationship skills in a structured, cognitive-behavioral enrichment intervention that enhance their marital adjustment over many months.

The data failed to sustain Hypothesis 6 positing that women would continue to report a significantly higher level of marital adjustment at the follow-up test as compared to the pretest. However, nine out of thirteen of the women at the follow-up test reported almost the same or a higher level of marital adjustment relative to their posttest results. A single extremely

unfavorable follow-up DAS score which declined 40 points below that person's pretest score accounted for the differential result with this hypothesis.

These results raise the possibility that treatment effects are transient in some participants, as suggested by Giblin's (1986) finding that follow-up scores in enrichment studies tend to decline from posttest results. This possibility warrants further study to evaluate the durability of enrichment effects on measures of marital adjustment across time. Further, the dramatic decline for one woman during the follow-up gives rise to concerns about possible adverse treatment effects, though no causal link can be established (Giblin, 1986; Lester & Doherty, 1983).

The research design for testing these last three hypotheses, however, did not provide for an experimentally controlled follow-up test. Accordingly, the exact cause of the observed change for couples and men is not firmly established. However, the fact that posttest effects can be attributed to treatment and that no significant differences were found between posttest and follow-up DAS scores in any analysis supports a conclusion that follow-up effects are also the result of treatment. Although the six month follow-up results

were not significant for women, nearly 70% of them reported about the same or a higher level of marital adjustment compared to that measured at the posttest. Hence this enrichment intervention may have an extended treatment effect for a majority of the participant women as well as for men and couples.

#### Gender and Marital Adjustment

No significant differences were found at the pretest between men and women. Statistical analyses showed no main effect for gender at the posttest and no interaction effect between gender and treatment at the posttest when pretest scores were controlled. The results of the present study showed that both men and women benefited from the marriage enrichment treatment. In the treatment group, men and women reported almost identical levels of marital adjustment at the pre-test. Their mean change scores on the DAS also paralleled each other in the positive direction from pretest to posttest. Women's mean change scores at the posttest were slightly higher than the men's mean change scores.

These gender results are inconsistent with earlier research finding that men generally report higher levels of marital satisfaction than women after participation

in marriage enrichment (Giblin et al., 1985). Summaries of the marital enrichment literature fail to provide adequate information on the types of measures utilized or other factors that might have explained this gender discrepancy (Giblin, 1986; Giblin et al., 1985). Thus determining the effect of measurement or other factors upon this reported gender difference is difficult.

This study's failure to find such a gender difference in the treatment effect is significant. A variety of factors, including participant, program, and measurement characteristics and research design, may possibly account for this result. Further research is needed to evaluate the effect of such factors upon gender differences in marital enrichment outcome.

#### Internal Validity

In interpreting the results of this study, certain cautions previously specified in Chapter 2 should be kept in mind. Potential design weaknesses threatening the internal validity of the study included selection, history, maturation, interaction effect between testing and treatment, testing, instrumentation, regression effects, and mortality of the participants.

However, these factors, except for mortality, were fully controlled with respect to the posttest findings

through the random assignment of participants to the two groups in an experimental-control group design. Further, an ANCOVA statistical design was employed to control for between-group differences on the pretest and on a significant demographic variable (i.e., number of children at home three or fewer days a week). A modest mortality rate of nearly 12% for the treatment group and approximately 6% for the wait-list control group may have vitiated the posttest findings to some degree. Overall, the internal validity of the posttest results is generally assured and causal conclusions as to the effects of treatment are warranted.

The six month follow-up results are weaker than the posttest findings. The follow-up results are most at risk to the above-specified threats given the absence of a pretest-posttest control group design at time of follow-up in testing the related hypotheses. For instance, the effect of history may have contributed to the within-group differences observed at the follow-up for the treatment group. Possibly, an interaction effect could have occurred between treatment and outside variables in this group during the interval from the posttest to the follow-up test. In addition, mortality was another possible problem with the follow-up findings

although the mortality rate for the treatment group at the follow-up was a modest 13%. Nonetheless, taking all these factors into consideration, the follow-up effects likely represent treatment effects.

#### External Validity

The generality of the results is limited for several reasons. First, the small number of participants in the sample restricts the findings to tentative conclusions. Second, the findings have limited generalizability due to the use of a convenience sample. Participants were not randomly selected from the population of church couples attending conservative, evangelical churches. Rather, they volunteered for this study, as random selection from a defined population was not possible under the circumstances.

The demographics of the sample kept it from being representative of a cross section of the average marriage population. The participants were almost entirely Caucasian. They had an average age of approximately 43 years, exceeding by eleven years the mean age of participants in the marriage enrichment studies reviewed by Giblin et al. (1985). In light of the particular demographics describing this sample, this study's findings generalize best to similar conservative



religious samples. However, Noval et al. (1993) found that couples from a variety of church and community groups experienced a significant increase in their marital adjustment, as measured by the DAS, following participation in the THC-ME workshop. Their findings suggest that generality of the treatment should extend to a broader spectrum of church and community groups.

#### Implications of Marriage Enrichment Research

The last century has seen a transition from the traditional marriage to the companionship marriage. Marital growth and happiness are increasingly viewed as a function of attaining competence in interpersonal relationships. The companionship model of marriage assumes that a lack of insights and skills in relation to interpersonal functioning is the primary deficit accounting for marital difficulties. Such a model indicates that marriage enrichment interventions should seek to educate marriage partners about relationship dynamics and to teach them interpersonal skills.

Halter's cognitive-behavioral approach to marriage enrichment addresses interpersonal competencies in marriage in several respects. First, it teaches

attitudes and insights about marital dynamics from the perspective of social learning theory, social exchange theory, and object relations theory. Second, it emphasizes training in the skills of communication, positive behavior change, cognitive reframing, problem-solving/conflict resolution, self-esteem, and relationship enhancement.

The results of this study confirmed the efficacy of this psychoeducational, skills-training intervention in boosting marital adjustment of church couples and maintaining these gains over a six month period. These findings are consistent with a wide body of research showing that marriage enrichment interventions accentuating the teaching of skills and behavioral practice yield positive increases in marital adjustment or satisfaction (Guerney and Maxson, 1990). The results support the inference that successful marriages require basic relationship insights and skills which couples can learn. Moreover, these insights and skills, once learned, may have an immediate as well as an enduring, propitious influence upon the marital adjustment of couples.

This study makes a significant contribution to the marriage enrichment literature in several ways. First,

this research extends these positive findings to a new cognitive-behavioral intervention that was tested in a specific population of couples attending predominately conservative, evangelical churches. Moreover, the use of an experimental-control group design addressed a methodological weakness frequently found in marriage enrichment research: the lack of a randomly assigned wait-list control group for the purpose of controlling unrelated factors affecting the results. This study also responded to the need for follow-up measurements over extended time frames in evaluating marriage enrichment interventions (Giblin, 1986; Mace, 1986).

Accordingly, this design strengthened the internal validity of the study. It generated findings about the workshop's effectiveness over and above the effects due to extraneous factors associated with treatment design. In demonstrating that couples attending conservative, evangelical churches benefit from such an intervention, the study thus provides useful, verifiable outcome results that will assist conservative, evangelical churches in the development of effective marriage enrichment programs.

Second, this study's examination of gender differences in the area of marital adjustment adds to

the meager research on this subject in the marriage enrichment literature. Contrary to expectations and existing research (Giblin, 1986; Giblin et al., 1985), the findings of this study showed no evidence of significant gender differences in respect to marital adjustment as measured by the DAS either before or at the close of the workshop. In addition, the results revealed no interaction between gender and treatment.

Instead, the outcome of this research suggests that men and women are nearly alike in their sensitivity to relationship issues. They also appear to experience a mutuality of short-term benefit to their overall level of marital adjustment from a cognitive-behavioral marriage enrichment intervention which combines didactic and experiential components. Both men and women should find equal encouragement from these results for participating in similar marriage enrichment programs with an expectation of enhancing their marital adjustment.

Finally, the six month follow-up provided an extended opportunity to assess the durability of this intervention's effect on marital adjustment. The research preceding this study has yielded mixed findings on the effect of marriage enrichment on marital

adjustment over time. Overall, the results have proved to be largely positive, indicating that reported gains in marital adjustment from the pretest generally remain significant over many months (Zimpfer, 1988). Yet follow-up studies have also reported a significant weakening in outcome results between post-test and follow-up although follow-up levels remained higher than pretest levels (Giblin, 1986; Mace, 1986).

The findings revealed that Halter's cognitive-behavioral intervention appears to maintain significant marital adjustment gains of couples and men as compared to the pretest over a six month post-treatment interval. While most women also showed lasting increases in their marital adjustment over their pretest scores, this result was not significant for women as a whole. Thirty percent of the women returned to or below pretest levels of marital adjustment at the follow-up, suggesting that the treatment benefits may be limited to the immediate short-term for a significant minority of women.

Nonetheless, the overall follow-up results for women were skewed by a single woman's DAS score at follow-up which was 40 points below her pretest score. Otherwise the data would have supported Hypothesis 6. This result is most likely explained by an extraneous

intervening factor that occurred after the posttest, given the 28 point gain in her DAS score from pretest to posttest.

In accord with earlier studies (Giblin, 1986; Giblin et al., 1985), almost 54% of all participants showed some drop in marital adjustment levels between the posttest and the follow-up. Consequently, "booster sessions" or some other intervention may be needed to maintain initial changes over a prolonged time frame for many participants in this program. However, the lack of an experimental-control group design for this part of the study prohibits drawing any definitive conclusions about the extended effectiveness of this intervention on marital adjustment.

#### Recommendations for Future Research

The results of this study suggest the following possibilities for further research:

1. This study should be replicated with a larger sample. Increasing the sample size would mitigate against statistical flaws that are typically found in smaller sampling distributions.

2. Replication of the study with other populations and in different settings would permit assessment of the generalizability of the findings. Future research on this intervention should be conducted with non-religious populations and in other settings outside the church for the purpose of broadening the generality of the findings.

3. The use of a non-specific factors control group in this study left open the possibility that changes in the participants' marital adjustment were in part the product of non-specific factors (Lambert, Shapiro, & Bergin, 1986). Replicating the study with an attention-placebo control group or an alternate treatment group would permit assessment of the role of such factors. Lipsey and Wilson (1993) noted that non-specific factors are generally considered as part of psychological interventions, but nonetheless encourage assessing their role in outcomes.

4. For the purpose of minimizing experimenter and participant bias, the workshop instructor and the participants should be kept blind as to the type of treatment which each group receives.

5. One of the purposes of marriage enrichment is to foster preventive maintenance of marriages. While

this study offers encouraging findings as to the durability of marital adjustment gains from participation in the workshop, no firm conclusions can be reached due to the limited scope of the research design. The follow-up results would be more definitive and conclusive if the study were replicated by extending the pretest-posttest control group design to the follow-up period, which could also be lengthened to 12 or 18 months.

6. Further study should examine the effect of specific components and/or program characteristics on marital adjustment as well as on other interpersonal changes resulting from participating in the subject workshop. Characteristics of interest could include demographic factors, personality variables, individual gains, expectations, and attitudes, and specific program components such as the educational vs. skills training aspects of the intervention.

7. Future research should focus on comparing the treatment effectiveness of the marriage enrichment workshop as presented in formats of varying lengths. The research question to be explored is whether altering the length of the workshop, changing the number or length of sessions, or varying the time intervals



between sessions, would produce any differences in reported marital adjustment.

#### Summary

This study employed a pretest-posttest control group design to evaluate the short-term effect of a cognitive-behavioral marriage enrichment intervention on marital adjustment among couples predominately attending conservative, evangelical churches. The long-term effect of this intervention on marital adjustment was also examined at a six month follow-up of the participants randomly assigned to the treatment group.

The main finding of this study is that this couple intervention approach increased the reported marital adjustment of all participants, regardless of gender, at the conclusion of the workshop. The treatment effect was strong: effect size was .90 for this sample, about twice the average effect of marriage enrichment. Moreover, studies employing measures of satisfaction generally report weaker effects than those utilizing measures of behavioral change. Thus the effect size for this sample is particularly strong.

Additionally, the study demonstrated that couples and men maintained significant gains in marital adjustment compared to the pretest over a six month period following treatment. Most women also showed substantial increases in marital adjustment over their pretest levels although their gains were short of significance when taken as a whole. The effect size for the follow-up results for the treatment group participants was .79, suggesting the durability of the treatment effect on the participants' marital adjustment.

This study suggested several implications. First, Halter's cognitive-behavioral marriage enrichment workshop appears to be a promising couple intervention for enhancing the marital adjustment of couples from conservative, evangelical churches. Second, this workshop seems to be equally beneficial to men and women at least in the short-term. Third, this intervention appears to have an enduring positive effect on marital adjustment for couples, men, and most women at the six month follow-up. Finally, taken with earlier data, these results suggest such benefits may have considerable generality to other church and non-church populations.

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APPENDICES

Appendix A  
Informed Consent Form

Code # \_\_\_\_\_

## INFORMED CONSENT FORM

Marriage Enrichment Research  
Conducted by  
Charles W. Combs  
George Fox College  
at Newberg, OR

1. The purpose of the research is to determine the effect of the Traits of a Happy Couple marriage enrichment workshop on perceived marital adjustment among Christian couples attending conservative, evangelical churches. Does the perceived marital adjustment of Christian couples increase significantly as a result of participating in this marriage enrichment workshop? Participants are asked to attend five two-hour workshop sessions conducted by Dr. Larry L. Halter over five consecutive weeks. They are further asked to respond to a Background Information Questionnaire (BIQ) and the Dyadic Adjustment Scale (DAS) before the workshop and to later take the DAS as a posttest and then as a follow-up test to accumulate marital adjustment data.
2. The only identifying mark on the BIQ and DAS instruments is a random assigned number which will allow the results from a participant's completed instruments to be matched. This identifying mark is used so a participant cannot in anyway be personally identified. The name of a participant will appear nowhere on these instruments. A master list will be kept during the study that matches each participant with his or her randomly assigned number. After all data is collected, the master list will be destroyed and the personal identities of the participants will no longer be available. Apart from individual feedback to each participant, individual information from these instruments will not be available or used outside of this study. Information from these instruments is confidentially guarded.
3. Participation in this research study is voluntary and no compensation or remuneration is offered.

4. Answers to pertinent questions about the research and research participants' rights may be obtained through contacting:

Charles W. Combs  
P. O. Box 2237  
Lake Oswego, OR 97035  
(503) 636-3164

5. Participants have the right to discontinue participation at any time, with no restraint or moral obligation.

6. Results are available to participants in aggregate or group form, and may be obtained through the address listed in Section Four.

I have read the material above, and any questions I have asked were answered to my satisfaction. I agree to participate in this activity, realizing that I may withdraw without prejudice at any time.

SIGNED: \_\_\_\_\_  
Participant Date

Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Appendix B

Initial Letter to Treatment Group

March 24, 1993

Dear Mr. and Mrs. \_\_\_\_\_,

I am pleased to inform you that you will be in the first Marriage Skills Workshop which is scheduled to meet during the month of April. I believe you will find the workshop to be rewarding and valuable to your relationship.

As explained at the orientation session last week, the workshop consists of five two-hour sessions held over five consecutive weeks. Couples in this workshop will meet on April 1, 7, 15, 22, and 29 from 7 P. M. to 9 P. M. in room 102 (NW quad of Fellowship Hall) at the Mt. Scott Church of God. The workshop sessions are all on Thursday evening with the exception of the second session on April 7, which is on a Wednesday evening. Your attendance at each of these sessions is important as different material will be covered each time and each session builds on the previous ones. In addition, your attendance is vital in a study of this nature.

As previously stated, Dr. Larry Halter will refund to you \$10.00 out of your registration fee if both of you attend all five sessions of the workshop and fill out the Dyadic Adjustment Scales (DAS) as provided below. At the conclusion of the final session of your workshop on April 29, you will each be asked to complete the DAS which you were given at the orientation session. This inventory will provide a measure of any change in the perceived level of your marital adjustment since the beginning of the workshop. I will also ask each of you to take the DAS six months after the workshop ends. This will allow me to assess the durability of any changes in your level of marital adjustment as a result of the workshop. These DAS's along with Written Instructions will be mailed to you at that time with the request that you complete and return them to me no later than one week from your receipt of these instruments. Upon compliance with the above, your refund will then be mailed to you.



On the matter of child care, we have decided not to provide such care due to the few families expressing a need for it. We do hope that those couples requiring such care will be able to make the necessary arrangements for the care of their children during the five sessions of the workshop.

Should you have any questions at any time regarding this workshop, please do not hesitate to call me at 636-3164. I greatly appreciate your cooperation with this study.

Cordially yours,

Charles W. Combs, M. A.

Appendix C

Initial Letter to Control Group

March 24, 1993

Dear Mr. and Mrs. \_\_\_\_\_,

I am pleased to inform you that you will be in the second Marriage Skills Workshop which is scheduled to meet during the month of May and early June. I believe you will find the workshop to be rewarding and valuable to your relationship.

As explained at the orientation session last week, the workshop consists of five two-hour sessions held over five consecutive weeks. Couples in this workshop will meet on May 6, 13, 20, and 27 and on June 3 from 7 P. M. to 9 P. M. in room 102 (NW quad of Fellowship Hall) at the Mt. Scott Church of God. The workshop sessions are all on Thursday evening. Your attendance at each of these sessions is important as different material will be covered each time and each session builds on the previous ones. In addition, your attendance is vital in a study of this nature.

As previously stated, Dr. Larry Halter will refund to you \$10.00 out of your registration fee if both of you attend all five sessions and fill out the Dyadic Adjustment Scales (DAS) as provided below. Each of you will be asked to take the DAS at the initial session of your workshop on May 6th. In addition, you will each be asked to complete the DAS at the final session of your workshop on June 3rd. This will provide a measure of any changes in the perceived level of your marital adjustment as a result of the workshop. Upon compliance with the above, your refund will then be mailed to you.

On the matter of child care, we have decided not to provide such care due to the few families expressing a need for it. We do hope that those couples requiring such care will be able to make the necessary arrangements for the care of their children during the five sessions of the workshop.

Should you have any questions at any time regarding this workshop, please do not hesitate to call me at 636-3164. I greatly appreciate your cooperation with this study.

Cordially yours,

Charles W. Combs, M. A.

Appendix D  
Workshop Curriculum

Workshop Curriculum

Outline

Session 1

1. Get Acquainted
2. Learning Goal: Each participant couple had a brief opportunity to agree on a specific learning goal for the workshop.
3. Share Learning Goal with other Couples
4. Cookie Cutters: Couples signed up to provide treats and refreshments for one of the four remaining sessions.
5. Workshop overview
6. Biography/Research/Theology
7. ABCX Stress Model
8. Attraction
9. Polarization
10. Renewal
11. Group Brainstorm
12. Homework

Session 2

1. Get Acquainted/Share
2. Recognition of Cookie Cutters
3. Team Test
4. Dyadic Brainstorm
5. Becoming Positive Partners - Introduction of the BEST
6. Practice on the BEST
7. Visual/Frame
8. Homework

Session 3

1. Say "Hi" and Share
2. Recognition of Cookie Cutters
3. Team Test
4. Visual Revisited
5. BEST Discussion
6. XYZ/PSR: Action Requests
7. Homework

Session 4

1. Agreement/Share
2. Recognition of Cookie Cutters
3. Scripture
4. BEST Reports

5. Social Support
6. Win-Win Problem Solving
7. Discussion on Problem Solving
8. Homework

Session 5

1. Agreement-Share; Say "Hi"
2. Recognition of Cookie Cutters
3. Bean Game
4. Sexual Functioning
5. Self-Esteem
6. Win-Win Problem Solving
7. Administration of Dyadic Adjustment Scale



Appendix E  
Background Information Questionnaire

Code # \_\_\_\_\_

BACKGROUND INFORMATION QUESTIONNAIRE

For each of the following statements circle either the number, fill in the space with a number as it describes your personal experience, or provide the information requested:

Q-1. What is your age?

\_\_\_\_\_ YEARS

Q-2. Your gender:

1 MALE

2 FEMALE

Q-3. What is your present marital status?

1 SINGLE

2 FIRST MARRIAGE

3 SEPARATED OR DIVORCED

4 REMARRIED

5 LIVING TOGETHER

6 OTHER (PLEASE SPECIFY) \_\_\_\_\_

Q-4. Which of the following best describes the number of years of education that you have completed?

- 1 LESS THAN NINE YEARS
- 2 TEN TO TWELVE YEARS
- 3 THIRTEEN TO FOURTEEN YEARS
- 4 FIFTEEN TO SIXTEEN YEARS
- 5 SEVENTEEN TO EIGHTEEN YEARS
- 6 MORE THAN EIGHTEEN YEARS

Q-5. What was your approximate gross family income from all sources for the past year?

- 1 LESS THAN \$10,000
- 2 BETWEEN \$10,000 AND \$19,999
- 3 BETWEEN \$20,000 AND \$29,999
- 4 BETWEEN \$30,000 AND \$39,999
- 5 BETWEEN \$40,000 AND \$49,999
- 6 OVER \$50,000

Q-6. Which of the following best describes your racial or ethnic background?

- 1 BLACK
- 2 HISPANIC
- 3 NATIVE AMERICAN
- 4 ASIAN
- 5 OTHER WHITE
- 6 OTHER (PLEASE SPECIFY) \_\_\_\_\_

Q-7. Rounding to the nearest whole year, how many years have you been married to your present spouse?

\_\_\_\_\_ YEARS

Q-8. How many children eighteen years old or less currently live with you four or more days a week?

\_\_\_\_\_

Q-9. How many children eighteen years old or less currently live with you three or fewer days a week (including periodic visitations)?

\_\_\_\_\_

Q-10. Do you profess to be a Christian? (Mark only one number which best describes you.)

- 1 NO
- 2 YES, I RESPECT AND ATTEMPT TO FOLLOW THE MORAL AND ETHICAL TEACHINGS OF CHRIST
- 3 YES, I HAVE RECEIVED JESUS CHRIST INTO MY LIFE AS MY PERSONAL SAVIOR AND LORD
- 4 YES, I HAVE RECEIVED JESUS CHRIST INTO MY LIFE AS MY PERSONAL SAVIOR AND LORD AND I SEEK TO FOLLOW THE MORAL AND ETHICAL TEACHINGS OF CHRIST

Q-11. How frequently have you attended church during the past year?

- 1 LESS THAN ONCE PER YEAR
- 2 ONCE OR TWICE A YEAR
- 3 BETWEEN THREE AND TWELVE TIMES A YEAR
- 4 BETWEEN ONCE A MONTH AND ONCE A WEEK
- 5 WEEKLY
- 6 MORE THAN ONCE PER WEEK

Q-12. How important are your religious beliefs and practices?

No importance: 1 2 3 4 5 6 7 Extremely important;  
Have no religion Religious faith is  
the center of my life

Appendix F  
Written Instructions

## WRITTEN INSTRUCTIONS

A Dyadic Adjustment Scale is attached to these instructions. You and your spouse are each to complete a separate Dyadic Adjustment Scale (DAS). In completing the attached DAS, please carefully follow the steps set forth below:

1. Read and follow the instructions on the DAS.
2. You should complete the 32-item DAS individually without working on or discussing it with your spouse. Please circle only one number for each item and respond to all items as honestly and as accurately as possible. Respond according to the way you feel at the moment you are filling out the DAS. There are no right or wrong answers to the items in the DAS.
3. Do not sign your name anywhere on the DAS. All responses will be kept confidential and anonymous.
4. When you have completed the attached DAS, please review each item to make sure that you have responded to each item. Then place it along with the DAS filled out by your spouse in the enclosed stamped return envelope and deposit same in the U. S. mail.

Appendix G  
Posttest Follow-up Letter  
to  
Treatment Group Members



April 30, 1993

Dear Mr. and Mrs. \_\_\_\_\_,

I am sorry that you were unable to attend the final session of the Marriage Skills Workshop. We appreciated your attendance at the workshop, and were extremely grateful for your willingness to voluntarily participate in this current study.

Seven weeks ago each of you agreed to complete the Dyadic Adjustment Scale at the end of the workshop. I have enclosed two Dyadic Adjustment Scales for each of you to fill out pursuant to the Written Instructions attached to these instruments. Please take a few minutes to complete these inventories and return them to me in the stamped envelope provided. It is important that you both take the DAS and return the completed inventories to me no later than five days from your receipt of this letter in order to insure the reliability and validity of the research results.

We will also need to have each of you take the DAS a final time six months after the end of the workshop. A third set of DAS instruments and instructions will be sent to you at that time.

Your response to this material is very valuable. Thank you for your cooperation in completing these instruments and returning them to me.

Cordially,

Charles W. Combs, M. A.

Appendix H  
Posttest Follow-up Letter  
to  
Control Group Members

May 7, 1993

Dear Mr. and Mrs. \_\_\_\_\_,

I am sorry that you were unable to attend the first session of the Marriage Skills Workshop on Thursday, May 6th, at the Mt. Scott Church of God. The first session was primarily an introduction to the workshop and what will be covered in the ensuing four weeks. I would encourage you to attend the remaining sessions as I believe that you will find this workshop will enhance your relationship. The next session will be held from 7:00 P. M. to 9:00 P. M. on Thursday, May 13th, at the Mt. Scott Church of God.

I have enclosed two Dyadic Adjustment Scales for both of you to fill out pursuant to the Written Instructions attached to these instruments. Please take a few minutes to complete these inventories and return them to me in the stamped envelope provided. It is important that you both take the DAS and return the completed inventories to me no later than five days from your receipt of this letter in order to insure the reliability and validity of the research results. Even if you do not intend to attend the workshop, it is important that you complete the DAS's and return them to me so that the research results from the two workshop groups can be compared since the Orientation session.

Your response to this material is very valuable. Thank you for your cooperation in completing these instruments and returning them to me.

Cordially,

Charles W. Combs, M. A.

Appendix I  
Six Month Follow-up Letter  
to  
Treatment Group Members

October 26, 1993

Dear Mr. and Mrs. \_\_\_\_\_,

Six months has passed since your attendance at the Marriage Skills Workshop led by Dr. Larry Halter. At the time of that workshop, I indicated that I would be asking each of you to complete a Dyadic Adjustment Scale ("DAS") as a final six month follow-up on your marriage enrichment experience. That time has now arrived. Therefore, I have enclosed two DAS's for each of you to fill out pursuant to the Written Instructions attached to these instruments.

Would you be so kind to respond to these inventories, for it only requires a few minutes of your time. Your voluntary input will greatly add to the validity of this study! The purpose of this follow-up administration of the DAS is to help determine the "lasting effect" of marriage enrichment on workshop participants. I will be able to compare your results from this final administration of the DAS with your results from the first and second administrations of the DAS. Consequently, your response to this material is very valuable.

Each of you should complete that DAS which is in an envelope bearing your name. It is important that both of you take and return the completed DAS's to me in the stamped, return envelope provided within seven days of your receipt of this letter. Please be sure to verify that each of you have responded to all items on the DAS. As previously stated, you will receive a refund of \$10.00 out of your registration fee if both of you complete and return the Dyadic Adjustment Scales (DAS) within the above time period.

Thank you in advance for your cooperation in completing these instruments and returning them to me. Your participation in this study has been greatly appreciated. Best wishes for a long and rewarding marriage relationship!

Cordially,

Charles W. Combs, M.A.

Appendix J  
Raw Data Table

## Explanation of Raw Data

Columns 1-3:	Identification Number
Column 4:	Gender
Column 5:	Group Membership (1 or 2)
Columns 6-7:	Age in years
Column 8:	Marital Status
Column 9:	Years of Education
Column 10:	Income Level
Column 11:	Ethnic Background
Column 12-13:	Years Married to Present Spouse
Column 14:	Number of Children at Home Four or More Days a Week
Column 15:	Number of Children at Home Three or Fewer Days a Week
Column 16:	Christian Profession
Column 17:	Frequency of Church Attendance
Column 18:	Importance of Religious Beliefs
Column 19-21:	Pretest Dyadic Adjustment Scale
Column 22-24	Posttest DAS
Column 25-27	Follow-up Test DAS



001	113542350300121	101106118
002	213744350300334	112118128
003	115643650700456	116135129
004	214743650700456	122120130
005	116514250000446	103107122
006	215512150000467	097118120
007	112923550710444	086113119
008	212723550710456	073116115
009	114326651110457	118122---
010	213625651110456	099109---
011	115136251400223	074104103
012	214434251400215	101122117
013	113922661830467	091100099
014	213623651830467	089111107
015	115624452800255	100102075
016	215024452800246	089117049
017	114762550000155	093122128
018	213164250000254	102114124
019	113443651430457	086105---
020	213524651430456	092105---
021	114544551520467	099110106
022	214324551520467	090106111
023	114644451320467	120120116
024	214344451320467	110125110
025	113922351920457	075092095
026	214022351920447	080119084
027	114724652710456	060106121
028	21--24652710455	062087114
029	114122450410234	064099082
030	214443450410445	076100077
031	123925351820455	099087
032	223823351820456	081091
033	122933350402235	090088
034	223433250420325	051059
035	125845650700224	080078
036	225545650700447	078077
037	124743350520467	111111
038	222523350520467	108107
039	123123351220467	070049
040	223022351220467	057038
041	124825152500457	096096
042	224744152500457	045043
043	124725452720466	073076
044	224522422720456	084092
045	124643551711467	112122
046	224042551711467	111128
047	124742551620467	138137
048	224442551620467	141128

Marriage Enrichment

202

049	125343652000221	092090
050	225146652000233	096089
051	124622452022456	111108
052	223923452022457	075091
053	123622651630434	089091
054	223423651630457	082075
055	124643350122457	113109
056	224143350122467	086101
057	126844652110456	122116
058	226045632110457	123134
059	123242450121436	076077
060	222742450121445	091100
061	124343650120467	117112
062	223942650120466	102105

Appendix K

Vita

Vita

Charles W. Combs

ADDRESS

35 Tanglewood Drive  
Lake Oswego, OR 97035  
(503) 636-3164

D.O.B.: 11-17-48  
Age: 45 Sex: Male

EDUCATION

- 1994: Psy. D. (Anticipated), Clinical Psychology  
George Fox College, Newberg, OR
- 1990: M. A., Clinical Psychology  
Western Conservative Baptist Seminary,  
Portland, OR
- 1974: J. D., Doctor of Jurisprudence Degree  
University of Texas School of Law,  
Austin, TX
- 1971: B. A., in Political Science  
The Leland Stanford Junior University,  
Stanford, CA

EMPLOYMENT HISTORY

- 1993-1994: Sundstrom & Associates, Portland, OR  
Position: Therapist. Work included  
individual adult/child therapy.
- 1979-1987: Case & Lynch, Kahului, Maui, HI  
Position: Associate attorney and  
partner.
- 1974-1978: Hooper, Kerry, Chappell, & Broiles  
Fort Worth, TX. Position: Associate  
attorney.

INTERNSHIP

1992-1993: Sundstrom & Associates  
Portland, OR  
Supervisor: Brent Burson, Psy. D.

PRACTICUMS

1990-1991: CPC Cedar Hills Hospital  
Beaverton, OR  
Work included milieu and group therapy  
with adolescents and adults.  
Supervisor: Elon Schlesberg, Director  
of Nursing

1989-1990: Gladstone Elementary School,  
Gladstone, OR  
Work included individual and small  
group play therapy with school  
children, grades one through four.  
Supervisor: Joan Vera, M. A.

DISSERTATION

"The Effect of Cognitive-Behavioral Marriage  
Enrichment on Marital Adjustment Among Church  
Couples"

REFERENCES

Available upon request