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LESBIAN COUPLE DYNAMICS AND HETEROSEXIST STRESSORS: BUILDING
A FOUNDATION FOR CULTURALLY COMPETENT RELATIONSHIP
INTERVENTIONS

A Dissertation
Presented to
the Faculty of Social Sciences
University of Denver

In Partial Fulfillment
of the Requirements for the Degree
Doctor of Philosophy

by
Shelby B. Scott
August 2016
Advisor: Howard Markman

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Advisor: Howard Markman

Degree Date: August 2016

Abstract

Lesbian relationships are severely underrepresented in the couples and family literature (Hartwell, Serovich, Grafsky, & Kerr, 2012). The current study sought to expand the basic science on lesbian couples with the overarching goal of informing evidence-based relationship interventions. The first aim of this study was to examine processes found to be important to relationship success in previous studies of couples in general, including communication, external support, household tasks, intimacy, and sex, as these processes are typically targeted in relationship interventions. The second aim was to examine the role of factors more specific to lesbian couples and related to heterosexual stressors as these factors may provide content areas for creating more culturally sensitive and affirming relationship programs. The heterosexual stressors analyzed included sexual minority stress—conceptualized to consist of outness, internalized homophobia, and discrimination—as well as commitment behaviors given the variable legal climate for same-sex couples. Finally, the third aim was to assess the associations between relationship quality and mental health outcomes. Participants included 103 adult female same-sex couples who provided self-report data and participated in observational communication tasks. Actor-Partner Interdependence Models (Kenny, Kashy, & Cook, 2006) were utilized for most analyses. Findings suggest that processes traditionally addressed by relationship interventions would likely be

beneficial to focus on with lesbian couples. At the same time, factors specific to lesbian couples were also found to be important, suggesting that some cultural adaptations that incorporate these factors may be beneficial for relationship interventions that serve lesbian couples. Finally, individual mental health outcomes were all found to have associations with relationship quality. Clinical implications are discussed, including how to incorporate cultural competence into relationship interventions for lesbian couples, the importance of challenging heteronormative biases, and which topics specific to lesbian relationships may be important to discuss with some clients. The study concludes with recommendations for future research to continue building a strong relationship science on lesbian couples and possible ideas for future interventions.

Acknowledgements

I would like to express my deepest gratitude to my advisors, Drs. Howard Markman and Galena Rhoades, for their unwavering support and guidance throughout this project and my entire graduate training. Thank you to my research assistants who so graciously volunteered their time on interviews, coding, and data management. I also wish to express my appreciation to my committee members, Drs. Wyndol Furman, Anne DePrince, and Elizabeth Suter, whose thoughtful questions and feedback challenged me and enhanced this paper's contribution to the field. Thank you to my family, friends, and colleagues who all helped support me and this project from beginning to end. Finally, I would like to thank the American Psychological Foundation's Roy Scrivner Memorial Grant for the funds to make this project possible.

Table of Contents

Specific Aims.....	1
Aim 1	2
Aim 2	2
Aim 3	2
Background and Significance	3
Core Components of Relationship Interventions.....	5
Comparative Studies of Lesbian Couples and Non-Lesbian Couples	6
Relationship functioning.....	7
Stability.....	8
Communication.....	9
External supports.....	12
Egalitarianism	13
Intimacy.....	14
Sex.....	15
Factors Specific to Lesbian Couples.....	16
Sexual minority stress.....	17
Outness.....	18
Internalized homophobia.....	19
Discrimination.....	20
Commitment behaviors.....	20
Mental Health.....	21
Hypotheses and Research Questions	22
Aim 1 hypotheses.....	22
Aim 2 hypotheses.....	23
Aim 3 hypotheses.....	24
Research Design and Method	25
Participants.....	25
Procedures.....	26
Measures	27
Problem topic.....	27
Social support task.....	28
Communication patterns.....	28
Division of household tasks.....	29
Perceived fairness of household tasks.....	30
External support.....	30
Outness.....	30
Internalized homophobia.....	31
Faced discrimination.....	31
Commitment behaviors.....	32
Intimacy.....	32
Sexual satisfaction.....	32
Sex frequency.....	32

Gender characteristics.....	33
Depressive symptoms.....	33
Life satisfaction.....	34
Alcohol use.....	34
Relationship adjustment.....	34
Dedication.....	34
Aggression.....	35
Likelihood of relationship dissolution.....	35
Relationship distress screen.....	35
Results.....	37
Data Analytic Plan.....	37
Dyadic data adjustment.....	38
Level-2 variables.....	40
Control variables.....	41
Model effects.....	41
Preliminary Results.....	41
Tests of Central Hypotheses.....	43
Aim 1 results.....	43
Aim 2 results.....	54
Aim 3 results.....	60
Discussion.....	62
Aim 1: Core Relationship Processes.....	62
Observed communication.....	62
Demand-withdrawal communication patterns.....	67
External support.....	73
Household tasks.....	78
Gender characteristics and lesbian couples.....	80
Intimacy.....	81
Conceptualizations of and engagement in sexual activities.....	83
Sexual satisfaction and relationship quality.....	85
General Aim 1 Conclusions.....	88
Aim 2: Factors Specific to Lesbian Couples.....	91
Outness.....	91
Internalized homophobia.....	94
Faced discrimination.....	96
Discrepancies in sexual minority stress between partners.....	99
Commitment behaviors.....	99
General Aim 2 Conclusions.....	102
Aim 3: Relationship Quality and Mental Health.....	104
Depressive symptoms.....	104
Alcohol use.....	105
Life satisfaction.....	106
Partner effects for mental health.....	107
Moderation of relationship quality.....	107

General Aim 3 Conclusions	107
Study Contributions	108
Limitations and future directions	111
Endnotes.....	115
References.....	116
Appendix A: Tables	130
Table 1	130
Table 2	131
Table 3	132
Table 4	133
Table 5	134
Table 6	135
Table 7	136
Table 8	137
Table 9	138
Table 10	139
Table 11	140
Table 12	141
Table 13	142
Table 14	143
Table 15	144
Table 16	145
Table 17	146
Table 18	147
Table 19	148
Table 20	149
Table 21	150
Table 22	151
Table 23	152
Table 24	153
Table 25	154
Table 26	155
Table 27	156
Table 28	157
Table 29	158
Table 30	159
Table 31	160
Table 32	161
Table 33	162
Table 34	163
Table 35	164
Table 36	165
Table 37	166

Table 38	167
Table 39	168
Table 40	169
Table 41	170
Table 42	171
Table 43	172
Table 44	173
Table 45	174
Table 46	175
Table 47	176
Table 48	177
Table 49	178
Table 50	179
Table 51	180
Table 52	181
Table 53	182
Table 54	183
Table 55	184
Table 56	185
Table 57	186
Table 58	187
Table 59	188
Table 60	189
Table 61	190
Table 62	191
Table 63	192
Table 64	193
Table 65	194
Table 66	195
Table 67	196
Table 68	197
Table 69	198
Table 70	199
Table 71	200
Table 72	201
Table 73	202
Table 74	203
Table 75	204
Table 76	205
Table 77	206
Table 78	207
Table 79	208
Table 80	209
Appendix B: Figures	210
Figure 1.	210

Figure 2	211
Appendix C: Sexual Activities Questionnaire	212

Specific Aims

The current study sought to expand the basic science foundation of lesbian couples¹ in order to inform evidence-based relationship interventions. The vast majority of research on romantic relationships has focused on heterosexual couples and no comprehensive study, to our knowledge, has focused on evaluating lesbian couple dynamics with the goal of informing relationship interventions (Clark & Serovich, 1997; Hartwell, Serovich, Gafsky, & Kerr, 2012). Importantly, evidence-based treatments must be grounded in basic research, ranging from qualitative studies to illuminate constructs worthy of further investigation, to quantitative studies that evaluate how different variables are associated with relationship outcomes (American Psychological Association, Presidential Task Force on Evidence-Based Practice, 2006). Preceding the current project, the author completed a qualitative focus group study composed of sexual minority women (Scott & Rhoades, 2014). The focus groups discussed general interest and appropriateness of relationship education programs for lesbian couples as well as possible content changes and adaptations that could better meet the needs of these relationships. Results from these focus groups showed that most participants believed that lesbian relationships were composed of similar core processes in heterosexual relationships, in line with previous research (Kurdek, 2004, 2005). These processes included a desire for love, intimacy, emotional support, and sexual attraction between partners which could be effectively enhanced through relationship education programs.

At the same time, participants reported that lesbian relationships may possess unique properties as well, ranging from dynamics within their relationships to external challenges imbedded in living within a heterosexist society (Scott & Rhoades, 2014).

The current project sought to expand upon this previous study and other research (e.g., Kurdek, 2004, 2005) by empirically investigating lesbian relationships with an emphasis on processes that could be addressed in relationship interventions. Findings from the current study also contribute to the field's understanding of relationships more broadly and the need for basic research on sexual minority women and their romantic relationships more specifically. The specific aims of this project were:

Aim 1

Investigate relationship processes typically addressed in relationship education and therapy programs (e.g., communication, commitment, household labor distribution, intimacy, sexual satisfaction).

Aim 2

Explore potential areas for content changes and cultural sensitivity specific to lesbian couples (e.g., outness, internalized homophobia, discrimination, commitment behaviors).

Aim 3

Evaluate the association between relationship quality and individual mental health (e.g., depressive symptoms, alcohol use, and life satisfaction).

Background and Significance

The number of lesbian led households in the United States is estimated to be over 300,000 and continues to grow (The Williams Institute, 2010). However, the vast majority of research on romantic relationships has primarily focused on heterosexual couples. Indeed, a meta-analysis from 1975-1995 found that only 0.6% of research articles published in marriage and family journals focused on sexual minority issues or even included sexual orientation as a variable (Clark & Serovich, 1997). A follow-up to this study demonstrated an increase in research on LGBT (lesbian, gay, bisexual, and transgender) family issues to 2.0% of articles between 1996-2009, indicating an important improvement in this research while nonetheless concluding that research on LGBT families is still grossly underrepresented (Hartwell et al., 2012).

Recent research has called for empirical investigations of same-sex couples with an emphasis to develop guidelines for practitioners and to create future interventions (American Psychological Association, 2011; Markman & Rhoades, 2012). Prior to the current project, one study has focused on investigating gay male couples in the context of relationship interventions (Buzzella, Whitton, & Tompson, 2012). By comparison, the author of the current project and other researchers are starting to create and test relationship interventions for lesbian couples (Whitton, Scott, Buzzella, 2013). However, there is a dearth of basic science research on relationship dynamics and challenges faced by lesbian couples to inform these intervention efforts.

Further, although heterosexism is still pervasive in American society, changes over the last few decades have indicated significant increases in acceptance of same-sex couples in law, policy, and public opinion. In 2004, Massachusetts became the first and only state with full legal marriage recognition for same-sex couples. Slightly over a decade later, discriminatory policies such as Don't Ask Don't Tell and the Defense of Marriage Act were repealed and as of July 26, 2015, the Supreme Court ruled that same-sex marriage must be recognized in all fifty states. Public opinion has also demonstrated remarkable increases in support for same-sex marriage, changing from only 27% of the general public in 1996 to majority support of 60% in 2015 (McCarthy, 2015). These changes in policy, law, and public opinion are important for the mental health field in numerous ways, including that more same-sex couples may seek services for their relationships in the near future. For example, increases in societal acceptance and full access to legal same-sex marriage may decrease barriers to relationship services because couples will be more confident in finding an affirming, supportive provider. Couples may also want to participate in relationship education programs or couples counseling to prepare for legal marriage—a common practice for over 40% of premarital heterosexual couples between 1990-2001 (Stanley, Amato, Johnson, & Markman, 2006). Further, marriage provides legal and social constraints that make it more difficult for relationships to dissolve (Stanley & Markman, 1992; Stanley, Rhoades, & Whitton, 2010). Moreover, as more same-sex couples become legally married following the recent Supreme Court decision, it is likely that many couples will experience normative declines in marital satisfaction over time. However, the constraints of marriage may lead more of these couples to seek relationship services before making any ultimate decisions regarding

divorce (Kurdek, 2004). For these reasons, it is imperative that research address some of the basic questions regarding how lesbian relationships function in general, and more specifically, what components of their relationships could be addressed in interventions to increase positive outcomes.

Core Components of Relationship Interventions

Relationship education programs and couple therapies often focus heavily on improving communication skills—active listening, speaking skills, and constructive problem solving—in order to enhance relationship satisfaction (e.g., the Prevention and Relationship Education Program [PREP]; Markman, Stanley, & Blumberg, 2010; Ragan, Einhorn, Rhoades, Markman, & Stanley, 2009; Integrative Behavioral Couple Therapy [IBCT]; Jacobson & Christensen, 1998). These intervention efforts often aim to limit destructive conflict that is conceptualized to be particularly damaging to relationship quality in order to increase closeness and safety between partners. Interventions also often focus on increasing social support for the couple's relationship, creating fulfilling sexual experiences between partners, and maintaining fun and friendship. It has also been suggested that other couple therapy approaches, such as an emphasis on acceptance in IBCT and repairing attachment injuries through Emotionally Focus Therapy (EFT; Johnson, 2008; Johnson, Hunsley, Greenberg, & Schindler, 1999), would be appropriate for lesbian relationships as well (Hardtke, Armstrong, & Johnson, 2010).

An important question regarding these assumptions, however, is whether these core relationship processes function similarly in lesbian couples. Scott and Rhoades (2014) demonstrated that most sexual minority women in that study believed that relationship education programs could be helpful for lesbian couples because many

relationship processes are universal across couple type, consistent with previous research (Kurdek, 2004, 2005). At the same time, most participants in Scott and Rhoades (2014) also voiced concerns that if relationship education programs were based exclusively on heterosexual couple dynamics, these programs may not completely address the needs of lesbian relationships. These concerns included perceptions from participants that lesbian couples may have differences in communication dynamics, commitment development, and designation of household tasks compared to heterosexual couples. Other issues specific to heterosexist biases throughout society were also mentioned as unique challenges to lesbian couples, such as barriers to establishing emblems of commitment, gay-related discrimination, and lack of support from others for being in a same-sex relationship.

The current project sought to expand upon the initial qualitative project and other research in order to quantitatively evaluate dynamics typically addressed in relationship interventions as well as factors more specific to lesbian couple experiences. These results will help shape important guidelines regarding how intervention efforts may best meet the needs of lesbian couples.

Comparative Studies of Lesbian Couples and Non-Lesbian Couples

Given that the vast majority of research on relationship interventions have focused on heterosexual couples (Hartwell et al., 2012), the appropriateness of these programs for lesbian couples may be based, in part, on how similar lesbian couple dynamics are to their heterosexual counterparts. Indeed, the majority of research on lesbian couples has generally taken this comparative approach (e.g., Gotta et al., 2011; Julien, Chartrand, Simard, Bouthillier, & Bégin, 2003; Kalmijn et al., 2007; Kurdek,

1998, 2001, 2004; Lau, 2012; Solomon, Rothblum, & Balsam, 2005). Cross-group research has provided useful information; however, it is also important to acknowledge limitations and biases associated with comparing lesbian relationship dynamics to heterosexual couples. Specifically, heterosexist bias is inherently present in research that compares lesbian couples to heterosexual couples because this approach presumes that heterosexual relationships are the normative standard (Cabaj, 1988; Goodrich, Rampage, Ellman, & Halstead, 1988). Thus, interpretations of these differences must be taken with caution as not to ascribe heteronormative standards to non-heterosexual populations. Other problems include that studies vary in their selection of heterosexual and same-sex couples across a variety of factors, such as whether each couple type has children, is married, has participated in a commitment ceremony, or whether the couples are cohabiting. Considering that legal opportunities for the recognition of same-sex relationships varied by state at the time of all of these previous studies, it was difficult, if not impossible, to establish equivalent comparison groups. With these limitations in mind, the following sections review previous research on cross-group differences between lesbian and non-lesbian couples while also discussing the difficulties inherent in interpreting their findings.

Relationship functioning. Overall the majority of research on lesbian couples indicates that lesbian couples, on average, are at least as satisfied with their relationships as married heterosexual couples (Blumstein & Schwartz, 1983; Kurdek, 2001, 2004, 2005). Indeed, one study found that lesbian couples have higher self-reports of relationship quality across the first ten years of cohabitation compared to both heterosexual and gay male couples (Kurdek, 2008). Changes in relationship quality over

time are also similar across groups, in that relationship quality often starts relatively high and declines over time (Kurdek, 1998). Therefore, the available research suggests that lesbian relationship satisfaction is similar, or possibly higher than, satisfaction in heterosexual couples.

Research has also found that across a variety of processes, lesbian relationships function similarly to gay male and heterosexual couples. Specifically, psychological distress, neuroticism, ineffective arguing, and dissatisfaction with social support predict lower levels of relationship quality across all groups (Kurdek, 2004). The magnitude of these associations are also similar across couple-type, suggesting that the underlying mechanisms of lesbian couple dynamics are similar to other couple-types (Kurdek, 2004).

Stability. Another important variable to evaluate in couples research is whether relationships last or dissolve because one goal of intervention efforts is often to help healthy couples stay together over time (Markman & Rhoades, 2012). Survey research shows that between 8% - 21% of all lesbian couples have been together for over 10 years, providing evidence that many lesbian couples form long-term relationships (Kurdek, 2004). However, several studies have found that lesbian couple dissolution rates are higher than heterosexual couples (Kalmijn et al., 2007; Kurdek, 2004; Lau, 2012). Theoretical interpretations of these findings include that lesbian couples face additional challenges to establishing long-term relationships, including heterosexist stressors such as lack of support from others and discrimination (Kurdek, 1998, 2004). Additionally, throughout most previous research, lesbian couples did not have equivalent legal means to establish commitment to their relationships which may have made it easier for lesbian couples to leave unhappy relationships compared to married heterosexual couples who

faced legal, financial, and social consequences associated with divorce. Further, research on heterosexual couples has demonstrated that wives are more likely to file for divorce than husbands, suggesting that women may leave unsatisfactory relationships more readily (Amato, 2003; Johnson et al., 2001; Scott, Rhoades, Stanley, Allen, & Markman, 2013). Taken together, more research is needed to understand how lesbian couples form long lasting relationships, particularly regarding how they find support for their relationships, cope with external challenges, and how commitment behaviors relate to relationship stability.

Communication. Participants in Scott and Rhoades's qualitative study (2014) suggested that lesbian women may value emotional closeness and expression in their relationships more than heterosexual couples. Participants speculated that these differences may be due to how women are socialized to communicate, making it easier and more expected that partners should openly discuss their emotions. The following sections review studies on lesbian communication and their limitations to understanding these processes fully.

Few studies have examined communication patterns in lesbian couples with observational measures. Julien et al. (2003) found that across heterosexual, gay male, and lesbian couples, positive and negative communication within conflict discussions, as well as positive communication in support talks, accounted for unique variance in relationship satisfaction. These results provided evidence that global positive and negative communication patterns in lesbian couples function similarly to other couples. By comparison, Gottman et al. (2003) found that lesbian couples were more emotionally expressive of both positive and negative emotions compared to gay male and

heterosexual couples. These authors also found that female and male same-sex couples displayed more positive communication patterns in problem discussions compared to heterosexual couples. Gottman and colleagues' study also found that, compared to heterosexual couples, same-sex couples initiated conflict discussions more positively and less negatively and had more positive and less negative effects on each other throughout their discussions. Arellano (1993) similarly found that same-sex couples used more constructive communication strategies compared to heterosexual couples.

Despite these differences between lesbian and non-lesbian couples, it remains unclear how these communication processes are associated with relationship quality in lesbian relationships, indicating that more research is necessary to parse out which aspects of communication are most important. Research has generally focused on the overall negative and positive components of communication, such as those measured in the Interactional Dimensions Coding System (Kline et al., 2004; Julien et al., 2003). The current study completed a factor analysis of this coding system to see how communication dimensions load on to composite factors in this sample.

Furthermore, observational communication research has generally concluded that negative communication behaviors are more predictive of relationship quality compared to positive communication (e.g., Markman, Rhoades, Stanley, Ragan, & Whitton, 2010). These findings have led intervention programs to primarily focus on limiting negative exchanges, which are conceptualized as particularly damaging, in comparison to increasing positives, which have less reliable effects on couple outcomes (Markman, Rhoades et al., 2010). However, as suggested by Scott and Rhoades (2014), lesbian women may place particular value on emotional closeness and intimacy in their

relationships. Further, women in heterosexual relationships may be more affected by the absence of positive connections within their relationships compared to men (Stanley, Markman, & Whitton, 2002). Thus, it may be particularly important to better understand how positive and supportive communication patterns are associated with relationship functioning in lesbian relationships. Given that it is difficult to analyze positive communication styles in problem discussions it seems important to study communication patterns in conversations also designed to elicit helping and supporting behaviors. The current study included observation tasks that involved both problem discussions as well as support talks designed to better evaluate positive communication. (However, as discussed in the Support Talk Coding System section of the Results, support talk data were not analyzed in the current project due to low reliability with this sample. Implications regarding future coding of support talks are addressed in the Limitations and Future Directions section within the Discussion.)

Moreover, research has recently started to evaluate whether lesbian couples engage in communication patterns similar to heterosexual couples. Specifically, one damaging communication pattern often observed in heterosexual couples is the *demand-withdrawal pattern*, characterized by when one partner, the demander, tends to criticize, nag, or pursue a change in his/her partner, while the other partner, the withdrawer, avoids, terminates, or withdraws from the interaction (Christensen, 1988; Eldridge & Christensen, 2002). Research has shown that men tend to withdraw more frequently than women, and conversely, that women tend to pursue their partners more than men (e.g., Christensen & Shenk, 1991).

A few studies have demonstrated that lesbian couples also display the demand-withdrawal pattern (Kurdek, 1998, 2004; Baucom, McFarland, & Christensen, 2010) but no study has evaluated how demand-withdrawal patterns are associated with relationship quality in this population. Further, no study, to our knowledge, has investigated whether any individual characteristics of each partner are associated with communication patterns in lesbian couples. Considering that the gender of partners in heterosexual relationships has been shown to have associations with demand-withdrawal behaviors, it would be helpful to understand whether traditionally masculine and feminine characteristics of lesbian partners are associated with demanding or withdrawing behaviors. This information could help practitioners better assess each partner's risk for engaging in these behaviors. Conversely, if there is no association between traditional gender characteristics and these communication patterns, or if these associations are in unexpected directions, this information could help practitioners avoid making biased assumptions based on heteronormative standards.

External supports. Evidence suggests that romantic relationships develop within social contexts such that the level of support from family members and peers within one's social network affects the quality of one's romantic relationships (Huston, 2000; Kurdek, 2004). Compared to married heterosexual couples, lesbian relationships tend to report less support from family members (Kurdek, 2004, 2005). Other research has documented how faith-based communities often have belief systems that do not accept same-sex relationships, further limiting the amount of support readily available to some lesbian couples (Barnes & Meyer, 2012). Due to this lack of support, lesbian couples are more likely to cite friends as their primary support systems compared to heterosexual couples

(Kurdek, 2004). These friendship networks, sometimes referred to as “families of choice,” may help lesbian couples cope with the lack of social and familial supports for their relationship (Kurdek, 2004). Participants in Scott and Rhoades’s qualitative study (2014) described the lack of these easily accessible external supports as additional stressors for lesbian couples compared to heterosexual relationships. In the context of relationship interventions, it may be particularly important for practitioners to understand how external support from family, social networks, and religious communities are associated with relationship quality.

Egalitarianism. Research has consistently shown that in heterosexual relationships the distribution of household tasks and financial responsibilities are often influenced by societal gender norms (Coltrane, 2000; Petrella, 2011). These gender roles have evolved throughout the past few decades, such that women tend to have more financial resources and have reduced their hours spend on household tasks. Moreover, men now share more domestic responsibilities today compared to several decades ago (Stafford, 2008). Despite these advances, however, research indicates that within heterosexual relationships, women are still more likely to take responsibility for the majority of household tasks regardless of the woman’s employment status (Coltrane, 2000; Greenstein, 2009; Knudsen & Waerness, 2008; Solomon et al., 2005). Same-sex couples, in contrast, tend not to divide household tasks across typical gender roles (Solomon et al., 2005; Spitalnick & McNair, 2005). Instead, same-sex couples tend to divide tasks based on interest (who likes to do what) and convenience (who is more able and available to do what), which over time may lead partners to specialize in certain tasks. Studies have found that sexual orientation is a better predictor of egalitarianism in

relationships than income, suggesting that same-sex couples divide household tasks more equally than heterosexual couples (Gotta et al., 2011; Solomon et al., 2005; Spitalnick & McNair, 2005). This topic was also mentioned in Scott and Rhoades (2014) in which participants indicated that with no traditional gender roles to follow, the division of household tasks may require more negotiation in lesbian relationships compared to heterosexual relationships. The current study evaluated how lesbian couples divide household tasks, including whether the gender characteristics of each partner were associated with participating in more traditionally masculine (e.g., mowing the lawn) or feminine (e.g., cooking and cleaning) tasks. This information is useful for practitioners to better understand how the designation of these tasks is established in lesbian couples.

Evidence also suggests that within heterosexual couples, appraisals of fairness and general satisfaction with the division of household tasks are associated with relationship quality beyond the quantitative distribution of labor (Coltrane, 2000; Petrella, 2011). Despite these findings, there has been no research, to our knowledge, that has directly tested whether the actual division of household labor or perceived fairness of these arrangements are most predictive of relationship satisfaction in lesbian couples.

Intimacy. Research suggests that lesbian couples may develop higher levels of emotional intimacy compared to heterosexual and gay male couples (Kurdek, 1998; Ossana, 2000; Spitalnick & McNair, 2005). Some scholars have also suggested that lesbians are more likely to develop extreme levels of intimacy—referred to as *merger* or *fusion*—which describes the process in which emotional boundaries between partners are blurred and the couple places togetherness and emotional closeness at high priority (e.g., Burch, 1986; Ossana, 2000). These higher levels of intimacy have been theorized to lead

to more difficulty maintaining individuality across partners, which may lead to lower levels of sexual desire between partners and lower relationship satisfaction (Burch, 1986; Ossana, 2000; Spitalnick & McNair, 2005).

However, implications of more intimacy in lesbian couples are mostly theoretical, and as previously mentioned, a bias may be present in these interpretations as they are comparing levels of lesbian couple intimacy to heteronormative standards. Indeed, some researchers suggest that women in general may have higher thresholds for intimacy in relationships compared to men; hence, higher levels of intimacy in lesbian relationships may not be problematic and instead fit with the desires of many women in these relationships (Hardtke et al., 2010). Other studies have shown that greater closeness between lesbian partners is associated with higher satisfaction providing evidence that clinicians should take caution pathologizing intimacy in lesbian relationships (Ackbar & Senn, 2010).

Sex. Regarding sexuality in lesbian relationships, participants in Scott and Rhoades (2014) reported that sexual dynamics in lesbian relationships may differ from those in heterosexual and gay male relationships because women may have different sexual desires than men. Women in that study noted that partners in lesbian relationships may be particularly sensitive to not wanting to hurt their partner's feelings when discussing their sexual likes and dislikes due to the socialization of women that values emotional sensitivity to others. This fear of hurting one's partner may present barriers to having important conversations surrounding sex.

Evidence also shows that lesbian couples have sex less frequently than heterosexual or gay male couples and that lesbian couples may want to have sex more

frequently (James & Murphy, 1998; Solomon et al., 2005). Research on the conceptualizations of sex in lesbian relationships is very scarce, making it difficult to interpret studies that either do not specify their conceptualizations of sex or studies that use heteronormative approaches to defining sex. Indeed, some studies have compared any or vaguely defined aspects of sexual activity between female partners to explicitly defined sexual penile-vaginal intercourse, anal penetration, or oral sex between men and women, or men and men (e.g., McCabe, Brewster, & Harker Tillman, 2011).

Overall, research has yet to establish a measure of sexual activity in lesbian couples that specifies how women in these relationships conceptualize sex and which sexual behaviors are most common. The current project used a new measure to clarify these questions (see Appendix C for the study questionnaire).

Factors Specific to Lesbian Couples

Cross-group research that compares lesbian couples to heterosexual couples limits which relationship processes can be evaluated because some factors may be specific to lesbian experiences. Consequently, non-comparative research is needed to explore certain processes in exclusively lesbian samples. For example, lesbian couples must navigate through a society pervasive with heterosexism, homophobia, and sexism, which may provide unique challenges to their relationships (Connolly, 2004).

Within these systems, heterosexism refers to forms of systematic oppression pervasive throughout all levels of society that conceptualizes “human experience in strictly heterosexual terms and consequently ignoring, invalidating, or derogating lesbian, gay, and bisexual orientations, behaviors, relationships, and lifestyles” (Herek, Kimmel, Amaro, & Melton, 1991, p. 258). Homophobia, in comparison, refers to “individual

antigay attitudes and behaviors” as well as personal aversions to non-heterosexual people, behaviors, and lifestyles (Herek, 2000, p. 19). Thus, heterosexism refers primarily to societal ideologies and institutionalized oppression while homophobia refers more to the attitudes, opinions, and behaviors at the individual level (Herek, 2000). Importantly, oppression related to being a sexual minority can often intersect with sexist experiences in lesbian women, leading to uniquely oppressive experiences that may not be shared by gay men (who also face heterosexism) or heterosexual women (who also face sexism; Szymanski, 2005). For example, some participants in Scott and Rhoades’s study (2014) discussed how lesbian women often face sexual objectification, such as men telling them that they find their relationships sexually arousing or asking if they can join or watch a sexual encounter. Also, although societal acceptance of same-sex relationships has improved dramatically over the past two decade, it is important to remember that close to 40% of Americans still do not approve of these relationships (McCarthy, 2015).

These forms of oppression and discrimination can collectively result in *sexual minority stress* (Meyer, 2003). Minority stress, more generally, refers to the stress individuals from a socially marginalized identity experience due to their inferior social status (Brooks, 1981). The negative mental health effects of sexual minority stress on individuals have been well documented (e.g., Lehavot & Simoni, 2011; Meyer, 2003), however, the impact of sexual minority stress has yet to be explored at the couple level. The following sections review variables specific to lesbian couples—including components of sexual minority stress and commitment behaviors.

Sexual minority stress. Sexual minorities may experience stress as a result of navigating through the aforementioned systems of oppression. Sexual minority stress for

lesbians refers specifically to stressors relevant to their lesbian identity and has been conceptualized to involve discriminatory experiences, internalized homophobia, and concealment of one's sexual minority status (Meyer, 2003). Overall, the impact of sexual minority stress has been shown to have negative effects on individual wellbeing and mental health (Lehavot & Simoni, 2011); yet it is unclear how lesbian partners may face these stressors together and how these challenges are associated to relationship quality. Further, considering that romantic relationships may serve as a primary source of support for some lesbian individuals to cope with these systems of oppression, it seems important to explore if romantic relationships can buffer or exacerbate the effects of sexual minority stress. In addition, romantic dyads may consist of varying levels of sexual minority stress across partners, suggesting that individual differences between partners on this construct could affect couple functioning.

Outness. Disclosure of one's sexual orientation or "outness" to others has been shown to be associated with stress-related growth in individuals (Oswald, 2000; Vaughan & Waehler, 2009). At the same time, the decision to disclose one's sexual orientation can be a distressing process because individuals must weigh the possible risks and benefits of divulging this information compared to concealing it. For example, disclosure of one's sexual minority status may lead to rejection or discrimination from others while hiding one's sexual orientation may evoke feelings of shame and fear (Baiocco et al., 2015; Green, 2000). Although outness to others has been considered an important part of the development of sexual minorities, more research is needed to explore this process at the couple level. Qualitative and quantitative studies suggest that individuals with higher outness are more likely to report higher relationship quality (Berger, 1990; Caron & Ulin,

1997; Jordan & Deluty, 2000; Knoble & Linville, 2012). However, research is still needed to evaluate this phenomenon at the dyadic level. Specifically, partners may have different expectations regarding to whom and when to come out to others and interpretations of the underlying meaning of this process may also vary across partners (Kurdek, 2005; Vaughan & Waehler, 2009; Scott & Rhoades, 2014). Indeed, participants in Scott and Rhoades (2014) expressed that conflict in lesbian couples may arise when partners disagree about relationship disclosure suggesting that differences in outness across partners needs to be evaluated.

Internalized homophobia. Internalized homophobia is defined as a person's negative perceptions of the self because he or she is not heterosexual. It is also characterized by intrapersonal conflict between the desire to be heterosexual and the experiences of same-sex attraction (Meyer & Dean, 1998). Higher levels of internalized homophobia are associated with lower global self-concept and poorer mental health (Herek, Cogan, Gillis, & Glunt, 1998; Meyer & Dean, 1998; Szymanski & Chung, 2003), however, little research has investigated how internalized homophobia may impact relationship quality in same-sex couples. Considering that internalized homophobia is often marked by shame for being a sexual minority, it is plausible that internalized homophobia may reflect negative perceptions toward one's romantic relationship. One study demonstrated that individuals with higher internalized homophobia also tend to have less satisfactory romantic relationships (Frost & Meyer, 2009), yet no study has considered how individual internalized homophobia may be associated with one's partner's relationship quality.

Discrimination. Numerous studies have found that sexual minority women, compared to heterosexual women, are more likely to experience interpersonal violence and discrimination over the life span (Balsam, Rothblum, & Beauchaine, 2005; Moracco, Runyan, Bowling, & Earp, 2007). In addition, experiencing victimization related to being a sexual minority has been found to be more predictive of mental health problems compared to victimization unrelated to sexual orientation (Descamps, Rothblum, Bradford, & Ryan, 2000). Despite the clear risks and associations between discrimination/victimization and negative individual outcomes, no study to our knowledge has examined the association between discrimination and overall couple quality. Considering that partners may have various experiences with discrimination and may cope with these experiences through different methods, it seems important to understand how discrimination may manifest in lesbian relationships.

Commitment behaviors. Until the June 2015 Supreme Court ruling, lesbian couples have faced challenges obtaining legal recognition and protections for their relationships and families. From the theoretical perspective of relationship commitment, this lack of access has disenfranchised many lesbian couples because marriage is both an important public emblem of commitment and provides structural constraints (e.g., legal, financial, social) that make leaving relationships more difficult (Stanley & Markman, 1992). These constraints, in turn, are related to levels of commitment by providing internal and external barriers to divorce even if relationship satisfaction wanes. Now that barriers to legal marriage have been removed, it is important to understand how different commitment behaviors, including legal marriage, are associated with relationship quality

(Kurdek, 2004). This information is important for providers to understand in order to help lesbian couples foster strong commitment in their relationships.

Mental Health

The quality of romantic relationships has consistently shown to be associated with individual well-being and mental health outcomes, at least in heterosexual couples (Whisman & Baucom, 2012). However, no research, to our knowledge, has investigated the associations between mental health and relationship quality in lesbian couples. The role of romantic relationship functioning in lesbian women's mental health seems particularly important to investigate for several reasons. First, research has demonstrated that sexual minority women have a higher prevalence of mental health disorders, including anxiety, depression, and substance abuse, compared to heterosexual women (Cochran, Keenan, Schober, & Mays, 2000; Cochran, Sullivan, & Mays, 2003; Williams & Chapman, 2011), so it is important to better understand predictors of mental health problems in this population. Second, research on heterosexual couples has demonstrated clear bidirectional links between romantic relationship functioning and mental health (Whisman & Baucom, 2012). Given these associations, some empirically-based therapies for individual mental health problems, such as alcoholism and depression, are now couple-based (Beach, Dreifuss, Franklin, Kamen, & Gabriel, 2008; Birchler, Fals-Stewart, & O'Farrell, 2008). Third, research on heterosexual couple functioning and mental health shows the strongest associations for women (Johnson & Jacob, 1997, 2000); consequently, relationships involving two women may be especially strongly linked with mental health outcomes. Fourth, lesbian women tend to report less family and external support for themselves and their relationships compared to heterosexual

individuals (Kurdek, 2004, 2005), suggesting that the functioning of one's primary romantic relationship may be an especially salient component of general well-being and mental health.

Furthermore, although sexual-minority stress is often linked with problems in mental health in sexual minority women (Lehavot & Simoni, 2011) it is clear that not all or even most lesbian women develop mental health problems. Thus, possible moderating factors, such as romantic relationship quality, may buffer or protect lesbian women from developing mental health difficulties. In sum, the association between romantic relationship functioning and individual mental health needs more investigation.

Hypotheses and Research Questions

The current study was designed to contribute to the relationship science foundation of lesbian couples by focusing on relevant dimensions (suggested by theory, research and practice) as they relate to relationship quality. These dimensions include processes typically addressed in relationship interventions (Aim 1) as well as other possible factors more specific to lesbian relationships (Aim 2). The study also evaluated the associations between relationship quality and mental health (Aim 3). The hypotheses listed below are organized by these aims.

Aim 1 hypotheses.

1. Higher levels of positive and lower levels of negative communication were expected to be associated with better relationship functioning.

2. Total demand-withdrawal behaviors and polarization of behaviors were expected to be negatively associated with relationship quality.

3. Traditionally feminine characteristics were expected to be positively associated with demanding behaviors and negatively associated with withdrawing behaviors.

Masculine characteristics were predicted to be positively associated with withdrawing behaviors and negatively associated with demanding behaviors.

4. Dyads with larger discrepancies on feminine and masculine characteristics (e.g., one partner high in masculine characteristics and one partner high in feminine characteristics) were expected to display more demand-withdrawal patterns.

5. External support was predicted to be positively associated with relationship quality.

6. Perceived fairness with household tasks and partner contribution to household tasks were both expected to be positively associated with relationship quality, but perceived fairness was expected to have a stronger association.

7. Partner contributions to household labor were expected to be positively associated with perceptions of fairness with household distribution.

8. Relationship intimacy was predicted to be positively associated with relationship quality.

9. Sexual satisfaction was predicted to be positively associated with relationship quality.

10. Sexual frequency, lower discrepancies between actual frequency and ideal frequency, and emotional intimacy with sex were predicted to be positively associated with sexual satisfaction.

Aim 2 hypotheses.

11. Outness was expected to be positively associated with relationship quality.

12. Internalized homophobia was expected to have negative associations with relationship quality.

13. Faced discrimination was predicted to be negatively associated with relationship quality.

14. Couples with larger discrepancies between partners across outness, internalized homophobia, and experiences of discrimination were expected to have lower relationship quality.

15. Having participated in more commitment behaviors, including legal and non-legal, were expected to have positive associations with relationship quality.

Aim 3 hypotheses.

16. Relationship quality was predicted to be negatively associated with depressive symptoms.

17. Relationship quality was predicted to be negatively associated with alcohol use.

18. Relationship quality was expected to be positively associated with life satisfaction.

19. Better relationship quality was predicted to buffer negative associations between sexual minority stress and mental health.

Research Design and Method

Participants

Participants included 103 adult, English speaking, female same-sex couples ($N = 206$ individuals) who had been in their romantic relationships for a minimum of 2 months. Four additional couples also completed the research protocol, but their data were removed because they failed to meet an eligibility criterion (2 couples reported they were together for less than 2 months; 1 couple had a partner who identified as a transgender man; 1 couple self-reported as having cognitive disabilities that prevented them from completing the protocol).

Recruitment methods followed similar procedures as piloted by Scott and Rhoades (2014) and included advertising for the study through a lesbian-focused newsletter, website/Facebook advertisements, and recruitment tables and flyers at LGBT-events. Participants indicated how they learned about the study in their questionnaires. Endorsed recruitment methods included 26.5% from a Facebook page run by a lesbian-focused organization, 25.3% from recruitment tables set up at lesbian-friendly events, 24.1% from flyers at lesbian-friendly events, 14.5% from friends who had either heard about the study or participated themselves (participants did not indicate if their friends participated in the study or not), and 9.6% from a lesbian-focused online newsletter.

Participant characteristics included an average age of 33.7 years ($SD = 9.0$), median income of \$30,000-39,999, and median educational level of 16 years

(approximately 4 years of college). The average couple relationship length was 46.8 months (3.9 years) with a median relationship length of 26 months (2.2 years)—thus the length of relationship variable was positively skewed due to some couples who had been together for a long time. Seventy-eight percent of the sample was currently cohabiting (see Table 1 for demographic information). 23% of couples endorsed having participated in some form of commitment ceremony including 10% legal wedding, 12% civil union, and 10% non-legal commitment ceremony (Table 2). Further, 22% of couples had obtained legal protections for their relationship through alternative measures including 11% domestic partnerships, 7% power of attorney, and 12% other legal measures (e.g., joint adoption of children, designation on each other's wills, trusts, or life insurance policies). A total of 34% of couples had participated in at least one of the aforementioned forms of commitment (legal or non-legal). Additionally, 22% of the couples endorsed having at least one child together or having at least one child currently living within their residence. Racial and ethnicity demographics were as follows: 73.3% Caucasian/European American, 13.6% Hispanic/Latina, 5.8% African American/Black, 2.4% Native American, 2.4% Asian/Pacific Islander, and 2.4% Multiracial.

Procedures

Before starting recruitment, a power analysis conducted in G*Power (Faul, Erdfelder, Lang, & Buchner, 2007) indicated a minimal sample size of $N = 107$ in order to achieve power = .80 and capture a medium effect size ($f = .25$). 103 couples who participated met eligibility criteria and participated in a two-hour research assessment session at the University of Denver's Marital and Family Studies lab. During this time, research assistants verbally summarized the study procedures and limits of

confidentiality, followed by obtaining written consent from each partner. Partners were then separated in order for each participant to complete their research questionnaires privately. After completing each packet, the couples participated in three videotaped discussions, including a problem discussion in which participants discussed their highest rated problem area (up to 15 minutes), and two support talks, in which participants took turns discussing a topic of concern or individual goal outside of their relationship while the other partner provided support (up to 10 minutes each). Participants were provided \$25 for their participation (\$50 per couple) at the end of their research session. This project was funded by the American Psychological Foundation's Roy Scrivner Memorial Research grant awarded to the author.

Measures

Problem discussions. Problem discussions were coded with the global Interactional Dimensions Coding System (Kline et al., 2004). The coding system includes nine partner specific dimensions that include affective, behavioral, and content cues. Each couple was also rated on several dyadic codes to rank negative and positive escalation, stability, commitment, and satisfaction. A factor analysis was conducted to create composite scores (see Results section). Previous studies have shown the scale to have high interrater reliability (Kline et al., 2004). In this study, interrater reliability for each individual dimension was adequate (α range = .64 - .92) while the average reliability across all dimensions was considered excellent (α = .80; Cicchetti, 1994). All means, standard deviations, and reliability statistics for this measure are provided in Table 3.

Problem topic. Participants ranked a list of common problem areas in relationships (e.g., communication, sex, money) from a modified version of the Marital

Agenda Protocol (Nortarius, Markman, & Gottman, 1983). Each item was ranked on a 0-100 point scale in which 0 indicates “no problem at all” and 100 indicates “a severe problem.” This measure was adapted to include several items distinctive to same-sex relationships, including “gay related discrimination” and “legal recognition of relationship.” This measure was utilized to pick which topic the couples would discuss in the problem discussion task.

Social support task. The Social Support Interaction Coding System (SSICS; Bradbury & Pasch, 1994; Pasch, Bradbury, & Sullivan, 1997) was used to code behaviors between partners in the support task condition. During each support talk, one partner was assigned to be the “helper” (the individual supporting her partner with the issue) while the other partner was the “helpee” (the individual asking for support). Each helper speaking turn was assigned one of six codes (positive instrumental, positive emotional, positive other, negative, neutral, or off-task), and each helpee speaking turn was assigned one of four codes (positive, negative, neutral, or off-task). Previous research has shown this coding system to have high inter-rater reliability (Stapleton & Bradbury, 2012). Reliability in this study, however, was poor (see Support Talk Coding System section in the Results) suggesting that this coding system may not be suitable for this sample. Thus, the SSICS was not utilized in this study and implications regarding this low reliability are discussed in the Discussion section.

Communication patterns. Self-reports of demanding and withdrawing behaviors were assessed by the Communication Patterns Questionnaire (CPQ; Christensen & Sullaway, 1984). The scale includes 11-items designed to measure damaging communication patterns by each partner. Example items include, “My partner pressures,

nags, or demands while I withdraw, become silent, or refuse to discuss the matter further.” Previous studies have shown high internal consistency (e.g., $\alpha = .81$ for females; Heavey, Larson, Zumtobel, & Christensen, 1996) and relatively high levels of spousal agreement in heterosexual couples (e.g., $\alpha = .67$, Heavey et al., 1996). In this study, internal consistency was .75 for demanding behaviors and .70 for withdrawing behaviors (see Table 3).

Division of household tasks. Division of household task was measured by a 12-item scale from Blumstein and Schwartz (1983). The scale includes 8 items traditionally considered as more feminine household tasks (e.g., washing dishes, vacuuming, cooking meals) and 4 items traditionally seen as more masculine household tasks (e.g. repairing things around the house, taking out the trash). This measure has shown to be reliable in previous studies (e.g., Gotta, 2011; Solomon, 2005). However, internal consistency in this study was relatively low, with an alpha of .51 for feminine household tasks and .60 for masculine tasks (Table 4). Due to low reliability, individual items were removed systemically in attempts to achieve higher reliability (George & Mallery, 2003). Following this process, the feminine scale would have only resulted in 3 items—including tasks related to cooking breakfast, cooking dinner, and grocery shopping—to obtain adequate reliability. Similarly, the masculine scale would have resulted in only 2 items related to taking care of the lawn and repairing things. Thus, these scales did not present adequate reliability until half or more of the individual items were deleted. Therefore, this scale was considered to have inadequate reliability in this sample and not used in analyses. The implications regarding the lack of reliability of this scale are discussed in the Discussion section entitled Gender Characteristics and Household Tasks.

Perceived fairness of household tasks. A 14-item measure of perceived fairness of household task was utilized (Petrella, 2011). The scale uses Likert-scale items ranging from 1 (strongly disagree) to 5 (strongly agree) and contains questions such as “I think the way my partner and I divide the housework is fair” and “My partner and I have worked out a good compromise in terms of housework.” Cronbach’s alpha for the scale was high in this sample ($\alpha = .93$; Table 4).

External support. Social support from others was assessed with the Multidimensional Scale of Perceived Social Support (MSPSS; Zimet, Dahlem, Zimet, & Farley, 1988). The MSPSS consists of 7 items assessing subjective social support and relationship approval from family and friends. Responses were scored on a 7-point scale from 1 (completely disagree) to 7 (completely agree). The scale has demonstrated good internal and test–retest reliability and construct validity in previous studies (Zimet et al., 1988) and provided an adequate internal consistency of .70 in this study (Table 4).

Outness. The Outness Inventory (OI; Mohr & Fassinger, 2000) measured the degree to which each partner’s sexual orientation was known by and openly discussed by others. The scale includes 10 items in which individuals rate how out they are to others on a 7 point Likert-type scale ranging from 1 (not out at all) to 7 (completely out and openly talked about). The OI was scored across four subscales, including family, friends, work, and spiritual communities, and the mean of all items was calculated to obtain a global outness score. Evidence for reliability and validity for this scale have been established in previous studies (Balsam, 2003; Mohr & Fassinger, 2000) and the measure had good internal consistency with this sample ($\alpha = .87$). Means, standard deviations, and reliability of the full measure and all subscales can be found in Table 7. Of note, only 56

participants (27.2% of the sample) answered items on the religious community outness subscale, indicating that the majority of participants most likely did not associate with any particular religious community.

Internalized homophobia. The Lesbian Internalized Homophobia Scale (LIHS; Szymanski & Chung, 2003) is a 52-item, self-report measure designed to examine internalized homophobia specifically in sexual minority women. Items use a Likert-type scale ranging from 1 (strongly disagree) to 7 (strongly agree). The LIHS includes five subscales that reflect dimensions of internalized homophobia in lesbians: connection with the lesbian community, public identification as a lesbian, personal feelings about being a lesbian, moral and religious attitudes toward lesbianism, and negative attitudes toward other lesbians. Internal consistency for this scale was high in this study ($\alpha = .90$). Means, standard deviations, and reliability of the full measure and all subscales are located in Table 7.

Faced discrimination. Heterosexist Harassment, Rejection, and Discrimination Scale (HHRD; Szymanski, 2006) consists of 14 items reflecting the frequency of experienced discrimination in the last year that can be attributed to being a sexual minority woman. The scale consists of three subscales, including harassment and rejection, workplace and school discrimination, and other discrimination (from helping professionals and strangers). Each item was rated on a 6-point Likert scale, from 1 (the event has never happened to you) to 6 (the event happened almost all the time). The scale has demonstrated good validity and internal consistency in previous research (Szymanski, 2006) and provided high internal consistency in this sample ($\alpha = .90$). Means, standard deviations, and reliability of the full measure and all subscales can be found in Table 7.

Commitment behaviors. Participation in various forms of commitment behaviors was measured by a single item question stating, “Have you and your partner done/obtained any of the following?” with answer choices including “legal marriage (including outside the state), civil unions, domestic partnerships, non-legal commitment ceremonies, power of attorney, and other legal protections.” Percentage scores for all commitment behaviors are included in Table 2.

Intimacy. The Intimate Safety Questionnaire (ISQ; Cordova, Warren, Gee, & McDonald, 2010) is a 13-item measure designed to assess each partner’s intimacy across several domains. Example items are, “When I need to cry I go to my partner” and “I feel uncomfortable talking to my partner about our sexual relationship” and were assessed on a 5-point Likert scale. This scale has demonstrated high reliability and validity in other studies (e.g., Cordova, Gee, & Warren, 2005) and provided adequate internal consistency with this sample ($\alpha = .73$; Table 4).

Sexual satisfaction. Overall sexual satisfaction was assessed with a single item stating “We have a satisfying sensual or sexual relationship” with a 7-point Likert scale ranging from 1 (strongly disagree) to 7 (strongly agree). The average score on this measure was 5.48 ($SD = 1.72$; Table 4).

Sex frequency. Frequency of sexual activities was assessed by a novel measure created for the current study. The measure includes 14 items that assess a variety of sexual activities ranging from cuddling and kissing to oral sex, genital-to-genital touching, and the use of sex toys. Most questions also specified whether the participant pleased her partner or was pleased by her partner. Answer choices range from “never” to “more than once a day.” The mean score on this measure was 6.57 ($SD =$

1.78), indicating that participants were having sex once every week or other week on average. Table 5 also gives a frequency distribution of how often participants reported having sex, their ideal frequency of sex, and frequency of orgasm. Additionally, participants were asked to indicate which of these sexual activities were considered acts that constituted “having sex” in lesbian relationships (Table 6).

Gender characteristics. Traditionally masculine and feminine characteristics were measured by the 24-item Personal Attributes Questionnaire (Spence & Helmreich, 1978). The items include a 5-point scaled juxtaposed between an adjective on one end and its antonym (e.g., “very submissive-very dominant”) or its negation on the other end (e.g., “very helpful-not at all helpful”). The scale included feminine and masculine subscales. The scale has demonstrated adequate reliability in previous studies (Atkinson & Huston, 1984; Spence & Helmreich, 1978). Within this sample, internal consistency for the feminine subscale was .73 while internal consistency for the masculine subscale was .66. One item was removed from the masculine subscale (“not at all competitive” to “very competitive”) to improve the reliability to .70 (Table 4).

Depressive symptoms. The Center for Epidemiological Studies-Depression Scale (CESD; Radloff, 1977) measured participant self-reports of how often they have experienced 20 depressive symptoms during the past week. Items were ranked on a 4 point scale from 0 (rarely or none of the time) to 3 (most or all of the time). This measure has shown high levels of internal consistency and validity across a number of studies, including within samples of sexual minority women (Birnholz & Young, 2012). This scale demonstrated high internal consistency with this sample ($\alpha = .87$; Table 8).

Life satisfaction. Global life satisfaction was measured by the 5-item Satisfaction with Life Scale (Diener, Emmons, Larsen, & Griffin, 1985). Example items include, “In most ways my life is close to ideal” and “If I could live my life over, I would change almost nothing.” Items were rated on a 7-point scale ranging from 1 (strongly disagree) to 7 (strongly agree). This scale has demonstrated validity and reliability in prior research (Pavot & Diener, 2009) and provided high reliability within this sample ($\alpha = .85$; Table 8).

Alcohol use. Alcohol use and specific consequences of harmful drinking was evaluated by the 10-item Alcohol Use Disorder Identification Test (AUDIT; Babor Higgins-Biddie, Saunders, & Monteiro, 2001). Some items assessed frequency and quantity of alcohol use while other items evaluated consequences of drinking, such as injuring another person while under the influence of alcohol. This scale demonstrated high internal consistency within this study ($\alpha = .84$; Table 8).

Relationship adjustment. Relationship adjustment was measured by a 4-item version of the Dyadic Adjustment Scale (Sabourin, Valois, & Lussier, 2005; Spanier, 1976). This scale includes 3 items on a 6-point scale that measure thoughts about dissolution, frequency of confiding in one’s partner, and how well the relationship is going. The last question asks participants to “please indicate the degree of happiness, all things considered, of your relationship” with a 7-point scale ranging from 0 = extremely unhappy to 6 = perfectly happy. Internal consistency for this scale was adequate for this study ($\alpha = .75$; Table 8).

Dedication. Dedication (or interpersonal commitment) to one’s relationship was assessed by the 14-item Dedication Scale from the Revised Commitment Inventory

(Stanley & Markman, 1992). The measure includes items such as “I want this relationship to stay strong no matter what rough times we encounter” and “I like to think of my partner and me in terms of ‘us’ and ‘we’ than ‘me’ and ‘her’”. Items were rated from 1 (strongly disagree) to 7 (strongly agree). Numerous studies have demonstrated the scale’s reliability and validity (e.g., Kline et al., 2004; Owen, Rhoades, Stanley, & Markman, 2011) and the scale had high internal consistency within this sample ($\alpha = .80$; Table 8).

Aggression. The Revised Conflict Tactics Scale (Straus, Hamby, Boney-McCoy, & Sugarman, 1996) was utilized to evaluate self-reports of destructive communication and physical aggression. Items were ranked on a 0-7 scale in which 0 indicated that an event has never happened, 1 indicated that the event has happened before, but not in the last year, and 2-7 indicated a range of how often an event has happened in the past year, ranging from once to over 20 times. The subscales utilized in this study included the psychological aggression toward one’s partner and psychological aggression from one’s partner scales. Sample items from these scales were, “I insulted or swore at my partner/My partner did this to me” and “I shouted or yelled at my partner/My partner did this to me.” Reliability for this measure with this sample was high ($\alpha = .93$; Table 8).

Likelihood of relationship dissolution. Participants answered a 1-item measure of their perceived likelihood of break-up which stated “How likely is it that you and your partner will break-up within the next year?” with a scale ranging from 1 (very unlikely) to 5 (very likely).

Relationship distress screen. The Marital Taxon Self-Report Measure is a brief screening measure of 10 dichotomous true/false items and was used in the current study

to categorize couples as non-distress vs. distressed (Whisman, Snyder, & Beach, 2009). Example items include “There are some serious difficulties in our relationship” and “Whenever I’m feeling sad, my partner makes me feel loved and happy again” (reverse scored). The clinical cutoff for relationship distress with this measure is a score of 4 or more. Using this criterion, approximately 22.2% of couples in the current sample fell into the distressed range with a mean score of 1.9 ($SD = 2.1$).

Relationship confidence. Participants indicated the confidence they had of their relationship working in the future through 5 items from the Confidence Scale (Stanley, Hoyer, & Trathen, 1994). Example items were, “I believe we can handle whatever conflicts will arise” and “We have the skills a couple needs to make a relationship last.” Internal consistency for this scale was .92 in this study.

Results

Data Analytic Plan

Because data were collected from both partners in a couple, and were therefore non-independent, we used guidelines developed by Kenny, Kashy, and Cook (2006) for dyadic data analysis. These guidelines suggest using multilevel modeling (MLM) to take into account the nested nature of the data in which individuals (level 1) are nested within couples (level 2). Because the couples in this study were composed of same-sex partners, partner assignment as Partner 1 or Partner 2 was randomly assigned. Given this arbitrary assignment, the data were treated as indistinguishable dyads.

To complete data analyses, an individual level data set was restructured into a pairwise data set such that each row contained data reflective of both that individual's own scores (referred to as *actor* data) as well as the individual's partner's scores (referred to as *partner* data). Following this approach, intraclass correlations (ICC) were calculated before running MLMs to provide an estimate of the non-independence between partners for all outcomes. ICCs were computed by calculating Pearson's *R* coefficients between partners and correcting the *p*-value to reflect the "double entry" of the data in the pairwise data set (Kenny et al., 2006).

Dyadic data analysis involves several adjustments to traditional MLMs. Thus, it can be helpful to first describe traditional MLMs followed by an explanation of the adjustments for dyadic data. In traditional MLMs that focus on individuals nested in

groups ($n > 2$ per group), the outcome of interest, Y_{ij} , is calculated by what can be understood as a two-step process. In the first step, a regression is estimated for the individual- or lower-level (level-1) units in which the outcome variable Y is predicted by a set of X variables, such as in the equation below:

Lower Level Model:

$$Y_{ij} = B_{0j} + B_{1j}X_{ij} + e_{ij}$$

Within this equation, B_{0j} represents the intercept estimate, B_{1j} represents the slope estimate of a level-1 predictor X (e.g., individual outness), and e_{ij} represents the error or variation in scores after controlling for the upper- and lower-level units.

The second step of multilevel modeling involves treating the intercept and slope variables as separate regression models, which can be represented in the following group- or upper-level (level-2) models:

Upper Level Models:

$$B_{0j} = \gamma_{00} + r_{0j}$$

$$B_{1j} = \gamma_{10} + r_{1j}$$

In these models, γ_{00} represents the grand-mean for the intercept variable and r_{0j} represents the variation in the intercepts across groups. Further, γ_{10} represents the coefficient estimate for the B_{1j} predictor (i.e., level-1 slopes), and r_{1j} represents the variation in slopes across groups.

Dyadic data adjustment. As recommended by Kenny et al. (2006), to adjust these models for analysis of dyads, r_{1j} and all other slope variances were removed to constrain the slope estimates. This adjustment is necessary because dyads do not have enough lower level units to allow slopes to vary across dyads. Thus, the variance across

couples can be captured by the intercept variance, as long as the ICC of the outcome variable is positive. However, because the ICC between partners can be negative, another adjustment was made in which the non-independence was specified as a covariance using *compound symmetry* (CS). CS “forces the degree of unexplained variance for the dyad members to be equal” and provides a correlation (more technically a covariance) between partners’ residuals (Kenny et al., 2006, p. 91). Therefore, when using CS, the random effects include what equates to the ICC between partners *after* controlling for the predictors and the model error term, e_{ij} , which represents the sum of the remaining intercept and residual variance. Importantly, CS provides identical fixed effect estimates compared to having a random intercept while allowing for accurate computation of the variance across couples whether the non-independence of the outcomes scores is positive or negative.

For analyses in which both actor and partner effects were of interest (e.g., actor outness and partner outness), Actor-Partner Interdependence Models (APIM) were utilized to calculate how one’s own scores on a predictor variable were associated with one’s own outcome (the *actor effect*) as well as how one’s partner’s scores on a predictor variable were associated with one’s own outcome (the *partner effect*; Kenny et al., 2006). Thus, the APIMs consisted of 5 parameters including the intercept, B_{0j} ; fixed effects for the actor, B_{1j} , and partner, B_{2j} ; the sum of the intercept and residual variance, e_{ij} ; and the correlation between the error terms between partners, representing the ICC of the outcome after taken into account the predictors, $\text{Cov}(e_1, e_2)$. A visual depiction of APIMs is presented in Figure 1 with an example from analyses in this study presented in Figure 2.

Level-2 variables. Analyses that utilized level-2, or couple level, predictors (e.g., participating in legal commitments, total demand/withdraw behaviors per couple) included these variables as Z predictors of the intercept. For example, the intercept, B_{0j} , may have the following equation:

$$B_{0j} = \gamma_{00} + Z_j(\text{LegalWedding})$$

For analyses in which only actor data was of interest (e.g., actor perceived fairness of household labor distribution), only actor predictors were utilized. Whether APIMs with both actor and partner data or MLMs with only actor data were utilized will be distinguished throughout the results. For all analyses, continuous predictors were grand-mean centered and dichotomous predictors were dummy coded and uncentered. Hence, when only continuous predictors were used, the intercept represented the average score of that outcome variable. By contrast, when dichotomous variables were utilized, the intercept represented the average score for that outcome variable when the predictor was “no” because dichotomous variables were always dummy coded as $no = 0$ and $yes = 1$.

Further, for some analyses, discrepancy scores were calculated to investigate how partner differences on predictor variables were associated with relationship outcomes. Discrepancy scores were always calculated as the absolute difference in scores between partners. Other analyses included interaction terms that were created from multiplying centered predictor variables. Discrepancy scores were entered as level-2 predictors since they were shared between partners, while interaction terms were entered as level-1 variables.

Control variables. Research has demonstrated that age, income, educational level, relationship length, and cohabitation status are associated with relationship quality (Hawkins & Erickson, 2015; Rhoades, Stanley, & Markman, 2012; Baucom, Atkins, Rowe, Doss, & Christensen, 2015); therefore, all models were initially run with and without the control variables. The vast majority of results did not change when including control variables in the models, so only results from models without controls are presented. Also, as can be seen in Table 13, the control variables had little association with the relationship outcomes of interest, providing further evidence that control variables explained minimal variance in the outcomes.

Model effects. Results from all models are presented with unstandardized and standardized estimates. Standardized estimates were calculated by transforming all predictor and outcome variables into Z-scores before running the models while unstandardized estimates were calculated by using the original untransformed data.

Regarding the presentation of results, fixed effect estimates are referred to in the text as actor or partner *effects of predictor* variables for outcome variables. Although the terms “effect” and “predictors” may suggest causality in some research, all results from this study are from cross-sectional data, and thus, reflect only associations between variables, not causal pathways.

Preliminary Results

Given the non-independence of the data, basic bivariate correlations were run separately for Partner 1 and Partner 2. Throughout this paper, correlation tables provide correlations for Partner 1 above the diagonal and correlations for Partner 2 below the diagonal. Within the text, Partner 1 correlations are provided first, followed by Partner 2

correlations (i.e., $r_{\text{Partner1}}/r_{\text{Partner2}}$). The vast majority of r-to-z transformations demonstrated that correlations between relationship outcomes, control variables, and mental health outcomes did not significantly differ between partners, reflecting the random assignment and indistinguishability between Partner 1 and Partner 2.

Correlations between relationship outcomes can be found in Table 9. Several relationship outcomes had large correlations with each other, including relationship confidence and relationship adjustment ($r = .67/.71$), likelihood of breakup and relationship adjustment ($r = -.59/-.61$), and the taxon measure and relationship adjustment ($r = -.71/-.67$), indicating that they were likely measuring very similar concepts. Further, the constructs of psychological aggression *towards* one's partner and *from* one's partner were highly correlated ($r = .91/.89$), suggesting that psychological aggression may best be conceptualized by combining the constructs.

Given the strong relationships between some outcome variables, for analyses that focused on relationship quality as the primary outcome, the measures of *relationship adjustment*, *dedication*, and the combined *psychological aggression* measure were utilized. These variables measure overall relationship quality, dedication to the relationship, as well as highly negative interaction patterns. These three outcomes were correlated with one another with coefficients between $-.52$ to $.41$ for Partner 1 and $-.55$ to $.55$ for Partner 2, suggesting that overall, these variables measured related yet distinctive qualities of relationship quality.

Regarding analyses that focused on mental health as the primary outcomes, Table 22 displays correlations between the mental health outcomes of *depressive symptoms*, *life satisfaction*, and *alcohol use*. These three variables were correlated with one another with

coefficients between $-.50$ to $.12$ for Partner 1 and between $-.42$ to $.07$ for Partner 2, suggesting that the mental health outcome measures were measuring different albeit associated concepts. Therefore, for analyses that involved mental health as the primary outcome of interest, all three constructs were utilized.

Tests of Central Hypotheses

Aim 1 results. The first aim was to investigate relationship processes in lesbian couples that are typically addressed in relationship interventions.

Non-independence of relationship outcomes. The original ICCs for relationship quality outcomes were as follows: relationship adjustment, $ICC = .51, p < .001$; dedication, $ICC = .29, p = .003$; psychological aggression, $ICC = .68, p < .001$. These results show that all relationship outcomes were significantly and positively correlated between partners when excluding any predictor variables.

IDCS factor analysis. A principal component analysis (PCA) was conducted on the IDCS (Kline et al., 2004) to compute composite scores. The IDCS includes nine individual dimensions—positive affect, negative affect, problem solving skills, denial, dominance, support/validation, conflict, withdrawal, and overall communication—in addition to five dyadic codes, including positive escalation, negative escalation, commitment, future satisfaction, and future stability. In line with previous research on the IDCS, all dyadic codes were excluded from factor analysis with the exception of negative escalation (e.g., Markman, Rhoades et al., 2010).

Preliminary analyses investigated the correlations between dimensions. Individual dimensions that demonstrated a majority of correlations below $.3$ or above $.8$ were considered for elimination due to the lack of relationship or too strong of a relationship,

respectively, between other dimensions. Results indicated all dimensions were significantly correlated with one another, on average, between .3-.8, suggesting that it was appropriate to maintain all 10 dimensions for PCA.

The Kaiser-Meyer-Olkin (KMO) measure confirmed the sampling adequacy for the PCA, as the KMO measure in this sample was considered “great” (KMO = .892; Field, 2009; Hutcheson & Sofroniou, 1999) and all KMO values for individual codes were > .80 (acceptable limit > .50; Field, 2009). Bartlett’s test of sphericity indicated that correlations between items were acceptably large for PCA ($\chi^2 (45) = 1536.116, p < .001$).

Analyses were run with both Kaiser’s eigenvalue criterion of 1 and Jolliffe’s criterion of .7. When using Kaiser’s criterion, results indicated a 2-factor solution that explained 70.57% of the variance while Jolliffe’s criterion yielded a 3-factor solution that explained 77.69% of the variance. Oblique rotation was utilized because the underlying factors were assumed to be related. For interpretative purposes, only factor loadings >.40 are presented (Stevens, 2002).

The items that clustered on the 2-factor solution were difficult to interpret because both positive (positive affect, overall communication, and support/validation) and negative codes (negative affect, withdraw) loaded onto Factor 1 while only negative codes (conflict, dominance, negative escalation, and denial) loaded onto Factor 2. By contrast, the 3-factor solution suggested that all positive codes clustered onto Factor 1, including overall communication, problem solving, support/validation, and positive affect. The negative codes were then dispersed onto the remaining two factors in which dominance, conflict, and negative escalation loaded onto Factor 2 and withdrawal, negative affect, and denial loaded onto Factor 3. Factor 2 codes were interpreted to

represent “overt” negative communication behaviors, referring to active conflict or attempts to control the conversation. Factor 3 codes were interpreted as “avoidant” negative communication behaviors because they were characterized by attempts to distance oneself from the conversation and emotional negativity. Given the clearer interpretability of the 3-factor solution in conjunction with a focus on demand-withdrawal, or approach-distance behaviors in the couples communication literature (Baucom et al., 2010; Eldridge & Christensen, 2002), the 3-factor solution was utilized for IDCS analyses in this study. Because oblique rotation was utilized, both pattern and structure matrixes are presented (Pattern Matrix, Table 10; Structure Matrix, Table 11; Graham, Guthrie, & Thompson, 2003). As can be seen in Table 12, these 3 factors were correlated with one another between .30-.55.

Problem discussion results. APIMs evaluated actor-partner effects of the three IDCS composite scores—positive communication, overt negative communication, and avoidant negative communication—on the relationship quality outcomes of relationship adjustment, dedication, and psychological aggression. Results indicated that actor positive communication had significant associations on relationship adjustment ($\beta = .16$), while partner positive communication had significant associations with psychological aggression ($\beta = -.15$; Table 25). Regarding overt negative communication, significant actor effects were found for relationship adjustment ($\beta = -.37$) and psychological aggression ($\beta = .27$; Table 26). Avoidant negative communication, in contrast, was found to have only significant actor effects for relationship adjustment ($\beta = -.16$), while both actor ($\beta = .19$) and partner effects ($\beta = .15$) were significantly associated with psychological aggression (Table 27). No significant actor or partner effects were found

for the three composite scores on dedication. All significant results were in the expected directions such that more positive communication and less negative communication were associated with better relationship quality.

When all three composite scores were entered together, only actor overt negative communication demonstrated significant associations with relationship adjustment ($\beta = -.31$) and psychological aggression ($\beta = .29$; Table 28). Thus, when all composite scores were analyzed together, the positive communication and avoidant negative communication effects were no longer significant, suggesting that actor overt negative communication may explain the majority of the findings related to communication and relationship quality. An r-to-z transformation also indicated that overt negative communication had a significantly stronger association with relationship adjustment compared to positive communication ($p = .037$) and avoidant negative communication ($p = .037$).

Support talk coding system. Support tasks were coded with the Social Support Interaction Coding System (Bradbury & Pasch, 1994; Pasch, Bradbury, & Sullivan, 1997) that has been utilized in studies of support interactions (e.g., Lawrence et al., 2008; Sullivan, Pasch, Johnson, & Bradbury, 2010). The coding system applies an individual categorical code to each partner's speaking turn. These categorical codes are then transformed into percentage scores based on the total amount of speaking turns.

Although this coding system has been successfully utilized in previous studies, the system demonstrated several problems within this study. First, despite obtaining adequate interrater reliability through the SSICS training ($\alpha > .70$) interrater reliability was poor with this sample during the actual coding ($\alpha < .60$) suggesting that coders were

not reliably differentiating between codes. This low reliability could also be a result of the low variability of scores across couples such that the vast majority of helpee and helper codes were coded as positive (helpee positive = 82.0%; helper positive = 77.5%) with very few negative exchanges (helpee negative = 5.2%; helper negative = 5.0%). Thus, the coding system may not be sensitive enough to the differences in quality between lesbian couples in this study who were primarily displaying positive support behaviors. This lack of sensitivity could also result from the categorical approach of this coding system as it did not provide dimensional codes to evaluate the global quality of partner interactions. Therefore, couples could receive similar percentage scores regarding the types of support behaviors they engaged in even if couples had meaningful differences in the quality of these exchanges. Finally, this system also forced each speaking turn to be categorized into only one categorical code even if several different support behaviors were present. This problem may have misrepresented the entire range of partner support behaviors. Given these reasons, the support talk data were not utilized in analyses as planned and results regarding support talks are not presented².

Demand-withdrawal. A total (couple-level) demand-withdrawal score was calculated based on individual self-reports of these behaviors. Because this score reflected a total sum of these behaviors across partners, the score was entered as a level-2 predictor of the intercept on overall relationship quality. Results revealed significant associations between total demand-withdrawal behaviors and relationship adjustment ($\beta = -.50$), dedication ($\beta = -.18$), and psychological aggression ($\beta = .61$; Table 29).

Similarly, a term for polarization of demand-withdrawal behaviors was created to measure the extent to which partners differed in demand-withdrawal behaviors. For

example, couples in which one partner was high-demand/low-withdrawal while the other partner was high-withdrawal/low-demand received high polarization scores compared to couples with more comparable demand/withdrawal scores across partners. This polarization score was similarly entered as a level-2 predictor of relationship quality. Results revealed significant associations between demand-withdrawal polarization and relationship adjustment ($\beta = -.26$) as well as psychological aggression ($\beta = .25$), but not dedication (Table 30). All results were in the expected direction such that more total demand-withdrawal behaviors and more polarization was associated with poorer relationship quality outcomes.

Feminine and masculine characteristics. Feminine and masculine scales were used to evaluate the association between feminine and masculine characteristics on demanding and withdrawing behaviors. The ICC for the outcomes were $<.01$ ($p = .968$) for demanding behaviors and $.03$ ($p = .784$) for withdrawing behaviors, suggesting that neither demanding nor withdrawing behaviors between partners were significantly related.

MLMs were first run with only actor gender characteristics independently predicting demanding and withdrawing behaviors. Results revealed that both masculine ($\beta = -.18$) and feminine ($\beta = -.19$; Table 31) characteristics were associated with demanding behaviors. As hypothesized, higher levels of masculine characteristics were associated with lower levels of demanding behaviors. However, higher feminine characteristics were also associated with lower levels of demanding behaviors, a finding in the unexpected direction. Regarding withdrawing behaviors, results revealed significant associations between feminine ($\beta = -.21$), but not masculine, characteristics

(Table 31). This finding was in the expected direction such that more feminine characteristics were associated with fewer withdrawing behaviors.

When actor and partner masculine and feminine characteristics were entered together to predict actor demanding behaviors, significant results emerged for actor feminine ($\beta = -.17$), actor masculine ($\beta = -.14$), and partner feminine effects ($\beta = -.21$). When actor and partner effects were included to predict actor withdrawing behaviors, only actor feminine characteristics were significantly associated with withdrawing behaviors ($\beta = -.22$; Table 32). All actor effects were in the same direction as when they were entered into the models independently. The significant partner feminine effect on demanding behavior was in the expected direction and suggested that higher partner feminine characteristics are associated with lower actor demanding behaviors.

Polarization in gender characteristics. A polarization score was calculated to measure the absolute value of the magnitude by which partners differed in feminine and masculine scores. Because this score was shared across partners, the gender polarization score was treated as level-2 variable. The gender polarizations score was used to predict the outcomes of total couple demand-withdrawal behaviors as well as demand-withdrawal polarization. Given that the outcomes were also level-2 variables these analyses were run with linear regressions using only one set of partner data.

Results indicated no significant association between gender polarization and total demand-withdrawal behaviors (Table 33). Results were also non-significant for gender polarization on demand-withdrawal polarization. Thus, results indicated no support for the hypothesis that gender polarization between partners was associated with demand-withdrawal behaviors.

External support. APIMs were utilized to estimate the actor and partner effects of external support on relationship adjustment, dedication, and psychological aggression. The general external support measure was utilized to represent total friend and family support and approval. However, because the reliabilities within the subscales were low, we utilized the individual items of friend support, friend relationship approval, family support, and family relationship approval.

The general external support measure was found to have significant actor ($\beta = .26$) and partner effects ($\beta = .16$) for relationship adjustment, as well as significant actor ($\beta = -.20$) and partner effects ($\beta = -.26$) for psychological aggression. Only a significant actor effect was found for dedication ($\beta = .15$; Table 34). These results were all in the expected direction, such that more general support of actors was associated with higher relationship satisfaction and dedication, and less psychological aggression. Similarly, more general support of partners was associated with higher reports of one's own relationship adjustment and lower reports of psychological aggression.

In terms of social support from friends, only a significant actor effect was found for relationship adjustment ($\beta = .20$; Table 35). By contrast, when evaluating associations with friends' approval of the current relationship, significant actor and partner effects emerged for relationship adjustment (actor $\beta = .39$; partner $\beta = .19$) and psychological aggression (actor $\beta = -.20$; partner $\beta = -.21$), as well as a significant actor effect for dedication ($\beta = .21$; Table 36).

Regarding social support from family, actor ($\beta = -.20$) and partner effects ($\beta = -.28$) were significantly associated with psychological aggression, but not relationship adjustment or dedication (Table 37). By contrast, relationship approval from family

demonstrated significant actor and partner effects for relationship adjustment (actor $\beta = .15$; partner $\beta = .14$) and psychological aggression (actor $\beta = -.16$; partner $\beta = -.16$), as well as a significant actor effect for dedication ($\beta = .15$; Table 38). All results were in the expected direction such that more support and approval from friends and family were associated with better relationship outcomes. An r-to-z transformation indicated that friend approval had a significantly stronger association with relationship adjustment compared to family approval ($p = .016$).

Household labor. MLMs were used to investigate how the constructs of actual division of household labor and perceived fairness regarding the divisions of household labor are associated with relationship adjustment, dedication, and psychological aggression. Only actor effects were investigated because the individual perception of these constructs, not partner perceptions, was of primary interest. The construct of actual division of household labor measured a participant's perception of how various household tasks were divided with one's partner. Lower scores (below 5) indicated more personal contribution and higher scores (above 5) indicated more partner contribution. The fairness construct measured whether participants considered the division of household tasks to be fair, with higher scores indicating more fairness.

Results indicated that the actual division of household labor had no significant association with the relationship quality outcomes (Table 39). However, perceptions of fairness of the distribution of labor demonstrated significant associations with relationship adjustment ($\beta = .39$), dedication ($\beta = .30$), and psychological aggression ($\beta = -.19$; Table 40). These results suggest that higher perceptions of fairness are associated with better relationship quality while providing no support for the hypothesis that the

actual distribution of household labor would have significant associations with relationship quality. Next, the actual distribution of household labor was utilized to predict perceptions of fairness ($ICC = .20$). Results indicated that actual distribution of labor was significantly associated with perceptions of fairness ($\beta = .23$; Table 41), suggesting that higher partner contributions to household labor were associated with higher perceptions of fairness regarding household labor.

Intimacy. APIMs evaluated the relation between actor and partner levels of intimacy and relationship quality. Results revealed significant actor ($\beta = .57$) and partner effects ($\beta = .12$) of intimacy on relationship adjustment as well as significant actor ($\beta = -.37$) and partner effects ($\beta = -.22$) on psychological aggression. The only significant effect on dedication was the actor effect ($\beta = .36$; Table 42). All results were in the expected direction such that more intimacy was associated with better relationship quality.

When utilizing only actor data and including both a linear intimacy term and quadratic intimacy term in the model, the main effects of the linear intimacy term remained significant for relationship adjustment ($\beta = .48$), dedication ($\beta = .33$), and psychological aggression ($\beta = -.23$; Table 43) while all quadratic terms were non-significant.

Defining sex. Participants were asked if seven different sexual activities were considered to constitute “having sex” in lesbian relationships. Results included that participants answered “yes” to the following sexual acts as “having sex”: 4.9% French kissing/making-out, 96.1% oral sex, 96.6% hand-to-genital stimulation, 94.2% genital-to-genital contact, 86.9% anal stimulation, 96.1% using sex toys, and 62.0% joint masturbation (see Table 6). Thus, results suggests that the vast majority (>85%) of

participants considered any form of genital touching from one partner to the other as having sex.

Frequency of sexual acts. Regarding engagement in various sexual acts, the least common sexual act that couples reported engaging in was anal stimulation or penetration in which less than 30% of couples reported ever engaging in that with their current partner. More participants reported engaging in joint masturbation (63%), using sex toys (77%), or genital-to-genital touching (81%) while the vast majority of couples (>93%) reported engaging in oral sex or hand-to-genital touching with their current partner at some point in their relationship (Table 6). When asked how often participants engaged in having sex with their partner, the average frequency was 6.57 ($SD = 1.78$) which represents between *once per week* to *once every other week*, while the averaged desired sex frequency was closer to *more than once per week* ($M = 7.84$; $SD = 1.14$; Table 4). Table 5 provides a frequency distribution of how participants reported frequency of sex, ideal frequency of sex, and frequency of orgasm.

Sexual satisfaction. APIMs evaluated the relation between actor and partner sexual satisfaction and relationship quality. Only a significant actor effect was found to be associated with relationship adjustment ($\beta = .16$; Table 44) while no significant effects emerged for dedication and psychological aggression. Thus, higher levels of one's own sexual satisfaction were associated with higher relationship adjustment while results provided no support that sexual satisfaction is associated with dedication or psychological aggression.

MLMs were also utilized to investigate how various aspects of sexuality were related to overall sexual satisfaction ($ICC = .61$, $p = <.001$). Three actor variables—

including sexual frequency, frequency discrepancy (the absolute difference in actual sexual frequency and ideal sexual frequency), and intimacy with sex—were entered into models to predict sexual satisfaction. Of note, frequency of orgasm was originally entered into these models as well; however, frequency of orgasm was too highly correlated with sex frequency (.90/.89; see Table 23), resulting in problems with multicollinearity. Thus, frequency of sex was utilized but not frequency of orgasm in these models.

Results indicated that all three predictors had significant associations with sexual satisfaction (sexual frequency $\beta = .31$; frequency discrepancy $\beta = -.31$; intimacy with sex $\beta = .24$; Table 45). These results suggest that, as hypothesized, higher levels of sexual frequency, smaller discrepancies in desired sex compared to actual sex, and higher levels of intimacy with sex are all associated with higher levels of sexual satisfaction. However, original hypotheses predicted that the effect of sexual frequency would be accounted for when controlling for the effects of the discrepancy score. Results suggest that sexual frequency still significantly predicts sexual satisfaction even when controlling for the discrepancy in desired sex frequency.

Aim 2 results. The second aim was to explore potential areas for content in relationship education programs that may be unique to lesbian couples.

Sexual minority stress. APIMs were used to estimate actor and partner effects for outness, internalized homophobia, and faced discrimination on the relationship outcomes of relationship adjustment, dedication, and psychological aggression. Analyses included full scale measures of each construct (e.g., general outness) and all subscales (e.g., outness to friends, outness to family; see Measures section for review of all subscales).

Outness. Results for the full measure, referred to as general outness, indicated significant actor but non-significant partner effects on relationship adjustment ($\beta = .15$; see Table 46) with no significant actor or partner effects on dedication or psychological aggression. These results suggest that higher levels of one's own general outness are associated with higher levels of relationship adjustment, as hypothesized.

Variability was apparent across outness subscales. Specifically, outness to friends was associated with significant actor ($\beta = .14$) and partner effects ($\beta = .17$) for relationship adjustment, while only a significant partner effect ($\beta = -.17$) was associated with psychological aggression; there were no significant actor or partner effects for dedication (see Table 47). These results were in the expected direction in which more actor and partner outness to friends was associated with higher relationship adjustment, while more partner outness to friends was associated with less psychological aggression.

Additionally, significant actor ($\beta = .16$) and partner effects ($\beta = .14$) were found regarding the association between outness at work and one's own relationship adjustment. Only a significant actor effect was apparent for dedication ($\beta = .22$) and no significant associations were found for psychological aggression (Table 48). All effects for outness at work were in the expected direction in which more outness at work was associated with higher relationship quality.

Regarding outness to family, no significant actor or partner effects were found across all relationship quality outcomes (Table 49). Similarly, no significant result emerged for the subscale of outness to religious communities; however, only 27.2% of participants answered questions on this subscale, suggesting that most participants were not active members of religious communities (Table 50).

Outness and social support. Correlations were run between the individual constructs of friend and family support and approval, as well as the constructs of outness, including outness to friends and family, to investigate how these constructs generally related to one another (Table 18). Overall, results demonstrated that general outness and general external support were positively related (.32/.38), suggesting that more outness is generally associated with more support from family and friends.

Further, the correlations between family support and family outness (.35/.27) as well as family approval and family outness (.52/.30) were significant. These results suggest that outness to family is significantly related to receiving more general family support and family relationship approval. Interestingly, some correlations within the friend constructs differed between Partner 1 and Partner 2 despite random assignment. Specifically, the correlation between friend support and friend outness was .05 ($p > .05$) for Partner 1 and .32 ($p < .05$) for Partner 2. R-to-z transformations suggest that these differences were statistically significant ($p = .047$). Similarly, correlations between friend approval and friend outness were .06 ($p > .05$) for Partner 1 and .31 ($p < .05$) for Partner 2 (although these results were only marginally significantly different, $p = .066$). Thus, results provided mixed evidence regarding the relation between friends approval/support with outness to friends.

Internalized homophobia. No significant actor or partner effects were found for the general internalized homophobia measure with the exception of a significant partner effect for dedication ($\beta = .17$; Table 51). Further, a significant partner effect of public identification as a lesbian, but not actor effect, was found for dedication ($\beta = .16$; Table 53). Interestingly, these findings were in unexpected directions, indicating that higher

levels of partner general internalized homophobia or internalized homophobia specific to publically identifying as a lesbian were associated with *higher* levels of one's own dedication. Finally, a significant actor effect, but not partner effect, was found of actor negative perceptions of other lesbians for psychological aggression ($\beta = .17$; Table 56). This finding was in the expected direction such that higher levels of one's own negative perceptions of other lesbians was associated with higher reports of psychological aggression in one's relationship. No significant effects were found regarding the subscales of connection to the lesbian community (Table 52), personal feelings about being a lesbian (Table 54), or moral and religious feelings about being a lesbian (Table 55).

Faced discrimination. The general measure of faced discrimination demonstrated significant actor ($\beta = -.16$) and partner effects ($\beta = -.16$) on relationship adjustment, as well as significant actor ($\beta = .15$) and partner effects ($\beta = .24$; Table 57) on psychological aggression. No significant associations were found for faced discrimination and dedication. These results suggest that, as predicted, more actor and partner experiences with faced discrimination are associated with lower levels of relationship adjustment and higher levels of psychological aggression.

Regarding individual subscales of faced discrimination, experiences with harassment or rejection demonstrated significant actor ($\beta = .15$) and partner effects ($\beta = .21$) for psychological aggression with non-significant effects on relationship adjustment and dedication (Table 58). The significant results indicated that higher levels of actor and partner experiences with harassment or rejection were associated with higher levels of psychological aggression.

Regarding experiences of discrimination at work, significant actor ($\beta = -.14$) and partner effects ($\beta = -.17$) were found for relationship adjustment, while only a significant actor effect ($\beta = -.20$) was found for dedication, and only a significant partner effect ($\beta = .20$) was found for psychological aggression (Table 59). All results were in the expected directions such that more actor and partner experiences with work discrimination were associated with lower relationship quality.

Finally, the subscale of discrimination from others—including service workers, helping professionals, and strangers—was found to have significant actor effects on relationship adjustment ($\beta = -.18$) and significant partner effects on psychological aggression ($\beta = -.18$; see Table 60); no significant effects emerged for dedication. These results were also in the expected direction such that more actor experiences with discrimination from others was associated with lower relationship adjustment while more partner experiences with discrimination from others was associated with more psychological aggression.

Discrepancy scores between partners. Discrepancy scores between partners on outness, internalized homophobia, and faced discrimination were created to measure absolute partner differences on these full scales. On average, partners differed by .89 ($SD = .87$) on the general outness scale, .49 ($SD = .42$) on the internalized homophobia scale, and .60 ($SD = .65$) on the faced discrimination scale. Because both partners had the same discrepancy score, the interaction terms were treated as couple-level variables and added to their respective APIMs as level-2 predictors of the intercepts.

APIMs revealed that in relation to relationship adjustment, dedication, and psychological aggression, no significant effects emerged for the discrepancy terms. These

findings provide no evidence that partner differences in sexual minority stress variables have significant associations with relationship quality outcomes (see Tables 61-63).

Commitment behaviors. The association between participating in different forms of commitment behaviors and relationship quality was evaluated by including the different types of commitment terms (e.g., legal weddings, civil unions, etc.) as level-2 predictors of the intercept.

Results indicated that participating in a *legal wedding* was significantly associated with dedication ($\beta = .16$; Table 64), but not relationship adjustment or psychological aggression. By contrast, participating in *any public ceremony*—which included a legal wedding, civil union, or commitment ceremony—was associated with higher relationship adjustment ($\beta = .18$) and dedication ($\beta = .23$), but not psychological aggression (Table 65).

Additionally, the number of attendees at any ceremony—calculated by the maximum number of attendees at the couple’s legal wedding, commitment ceremony, or civil union— was investigated as a predictor of relationship quality. Because the number of attendees was only relevant to couples who had participated in such ceremonies, analyses were conducted by selecting participants who participated in any ceremony and calculating the maximum number of attendees at any ceremony as a level-2 predictor. Result indicated that the number of attendees was not significantly associated with any relationship quality outcomes (Table 66).

By contrast, participating in *any* of the commitment behaviors measured in this study—including power of attorney, trusts/wills, and other contracts, as well as all legal and non-legal ceremonies—was associated with no significant associations with

relationship quality (Table 67). Similarly, when only evaluating legal commitments *without* public ceremonies—thus only domestic partnerships, power of attorney, and other legal contracts—no significant associations with relationship quality outcomes were discovered (Table 68). These results suggest that participating in public commitment ceremony, whether legal or non-legal, is associated with significantly higher relationship quality while no evidence was provided for associations between relationship quality and commitments without ceremonies.

Aim 3 results. The third aim was to evaluate the association between relationship quality and individual well-being (e.g., anxious and depressive symptoms, alcohol use).

Non-independence of mental health outcomes. ICCs for mental health outcomes were the following: depressive symptoms, ICC = .32, $p = .001$; alcohol use, ICC = .48, $p < .001$; and life satisfaction, ICC = .19, $p = .059$. Thus, depressive symptoms as well as alcohol use were significantly and positively correlated between partners, while the ICC for global life satisfaction was only marginally significant.

Relationship quality and mental health. APIMs evaluated the association between actor and partner relationship quality on depressive symptoms, alcohol use, and life satisfaction. Results indicated significant actor effects of relationship adjustment ($\beta = -.24$) and psychological aggression ($\beta = -.28$) for depressive symptoms (Table 69). Regarding life satisfaction, actor relationship adjustment ($\beta = .44$), dedication ($\beta = .34$), and psychological aggression ($\beta = -.32$) were significant (Table 70). Further, only actor dedication ($\beta = -.14$) and psychological aggression ($\beta = .25$) demonstrated significant associations with alcohol use (Table 71). All results were in the expected direction such that higher levels of actor relationship quality were associated with better mental health

outcomes, while results provided no support for the hypothesis that partner relationship quality would be related to actor mental health.

Relationship quality as a moderator of sexual minority stress on mental health.

MLMs were utilized to investigate whether relationship quality moderated the association between sexual minority stress and mental health outcomes. An interaction term was created by multiplying the centered relationship quality variable (e.g., dedication) by the centered sexual minority stress variable (e.g., general outness). The interaction was then added to the models in addition to the main effects of relationship quality and the sexual minority stress variable. Only actor data were used in these models.

Results indicated no interaction terms were significant in predicting depressive symptoms, life satisfaction, or alcohol use (see Tables 72-80).

Discussion

The current study sought to expand the basic science foundation of lesbian couples with the goal to improve relationship intervention efforts. The study investigated relationship dynamics commonly addressed in relationship interventions, stressors specific to lesbian couples, and the associations between relationship quality and mental health. Findings from this project contribute to the field's understanding of lesbian relationships more generally while also providing possible areas for culturally sensitive adaptations. The following provides conclusions and clinical implications for each of the study aims and concludes with general contributions of this study, limitations, and future directions.

Aim 1: Core Relationship Processes

Observed communication. Factor analyses indicated that observed problem discussion tasks were best conceptualized as three factors, including positive communication, overt negative communication, and avoidant negative communication. The IDCS has been utilized in numerous studies, yet this is the first study that presented a 3-factor structure as opposed to a 2-factor structure that often includes a generally negative and a generally positive composite (Kline et al., 2004; Markman, Rhoades et al., 2010). Thus, within this coding system, this is the first study that has distinguished overt expressions of anger and conflict from attempts to avoid or distance oneself from a

problem discussion. More research is needed to replicate these distinctions in lesbian couples and it may also be interesting to investigate in other couple-types.

Regarding the main observed communication findings, results generally supported hypotheses that lower negative communication and higher positive communication would be associated with better relationship quality. These findings also provide new information regarding the dyadic nature of lesbian couple communication which were analyzed with APIMs.

Results indicated a small significant actor effect of positive communication for relationship quality and a small significant partner effect of positive communication for psychological aggression, supporting previous research that positive exchanges in lesbian relationships are associated with better relationship quality (Gottman et al., 2003; Julien et al., 2003). Interestingly, positive *partner* communication, but not actor (although it was marginally significant), was negatively associated with psychological aggression, providing evidence that partner positivity may be important to perceptions of psychological aggression in the relationship. Throughout other findings of this study, it was common for partner effects to emerge on psychological aggression (as was seen here) even if actor effects were not significant (e.g., partner outness to friends, partner discrimination from others). This pattern might indicate that the perception of one's partner may be particularly important to how one perceives psychological aggression in her relationship. Attribution theories, research, and clinical conceptualizations of couple distress agree that individuals are more likely to blame their partners for conflictual

patterns in their relationships, which may explain these findings (Bradbury & Fincham, 1990; Jacobson & Christensen, 1998).

Small actor and partner effects of avoidant negative communication emerged for psychological aggression, and a small actor effect for relationship adjustment. By contrast, the actor effects of overt negative communication for relationship adjustment and psychological aggression were moderate in size. An r-to-z transformation indicated that the actor effects of overt negative communication for relationship adjustment were significantly stronger compared to the actor effects of positive communication and avoidant negative communication. Additionally, when all actor and partner predictors—positive, overt negative, and avoidant negative communication—were included in the models together, only overt negative communication remained significant for both relationship adjustment and psychological aggression. Therefore, overt negative communication appeared to have particularly strong associations to individual perceptions of relationship quality and replicates previous research regarding the predominant role of negative communication (Johnson et al., 2005; Markman, Rhoades et al., 2010).

Taken together, findings regarding negative communication contain several important implications. Results suggest that as women in lesbian relationships engage in avoidant communication behaviors—such as withdrawing or denying the importance of a problem topic—these behaviors are associated with *both* individual relationship distress in addition to relationship distress in her partner who witnesses those behaviors. Therefore, avoidant negative communication by one individual may have dyadic effects

on perceptions of relationship quality for both partners. These findings may reflect that when individuals deny problem topics or try to distance themselves from the conversations, these behaviors may indicate a lack of feeling emotionally safe for that individual. Further, the partner of the individual may feel distance and frustration at her partner's lack of engagement (Jacobson & Christensen, 1998).

Additionally, overt expressions of negative communication were the most associated with individual relationship distress in the sample. This pattern was evident in both the significantly larger effect size of actor overt negative communication for relationship adjustment in addition to actor overt negative communication remaining as the only significant effect when all communication factors were included together. Scholars have theorized that the impact of negatives in relationships bear more weight in romantic relationships for several reasons. From an evolutionary perspective, negative events can have notable ramifications in terms of safety. Humans may have evolved through natural selection to focus more on negative events that pose threats to safety and stability as opposed to positive interactions that are more likely to maintain or make little difference to the status quo (e.g., Buss, 2000). This phenomenon is often observed in clinical settings, in which therapists often report that couples more readily remember and focus on isolated negative events (e.g., one disagreement) while giving little recognition to positive interactions (e.g., eating a meal together, laughing; Markman, Rhoades et al. 2010). From a cognitive consistency perspective (Aronson, 2008) couples often report an abundance of positive feelings, love, friendship, and fun in the early stages of their relationships. These positive factors may set unrealistic expectations when couples

believe their relationships will be void of negative factors as they progress (Markman, Rhoades, et al., 2010). Hence, negative exchanges, particularly those that involve direct insults or slights, may challenge an individual's expectations regarding how she envisioned her relationship functioning over time.

In many ways, findings from this project regarding overt negative communication fit nicely with the predominant approaches of relationship interventions, including couple therapy and relationship education programs. Two of the most utilized evidence-based couple therapy interventions, IBCT and EFT, focus on limiting expressions of anger and contempt between partners (Jacobson & Christensen, 1998; Johnson, 2008; Johnson et al., 1999). IBCT conceptualizes these negative expressions as damaging to emotional safety while EFT conceptualizes these behaviors as injuring secure attachment between partners (Johnson, 2008; Johnson et al., 1999). Albeit through different specific clinical approaches, both interventions attempt help couples end negative communication cycles and understand how these negative behaviors are often unconscious attempts to protect oneself from emotionally damaging exchanges. A primary aspect of IBCT is a focus on acceptance of partner differences and emotional sensitivities in order to increase empathy between partners (Jacobson & Christensen, 1998). EFT works on repairing attachment injuries through intrapersonal and interpersonal processes (Johnson, 2008; Johnson et al., 1999). Therapists in both of these modalities help couples recreate safe communication patterns that enhance closeness or secure attachment. Findings from this project provide additional support that these therapies are most likely appropriate for lesbian couples,

which has been theorized by both IBCT and EFT scholars (Jacobson & Christensen, 1998; Hardtke et al., 2010).

Similarly, skills-based components of relationship education programs, such as PREP (Markman, Stanley et al., 2010) and couple therapies, such as Cognitive Behavioral Couple Therapy (CBCT; Baucom & Epstein, 1990; Baucom, Epstein, LaTaillade, & Kirby, 2008; Rathus & Sanderson, 1999) aim to disrupt negative communication patterns through direct cognitive and behavioral interventions. Importantly, within these interventions, negative expressions are also conceptualized to outweigh the impact of positive ones (Markman, Rhoades et al., 2010; Markman, Stanley et al. 2010) and results from this study suggest that the impact of negative exchanges may function similarly in lesbian couples. These programs often employ structured communication skills-training to help conversations stop from escalating (e.g., Speaker-Listener Technique; Markman, Stanley et al., 2010). Cognitive approaches consist of helping couples recognize and value positive aspects of their relationships that may be more difficult to focus on naturally. These strategies also challenge tendencies to negatively interpret ambiguous situations (Epstein et al., 2008; Markman, Rhoades et al., 2010). In general, intervention efforts that aim to limit overtly negative behaviors and challenge negative interpretations are likely to be well suited for lesbian relationships, although future research needs to evaluate effects of these approaches for lesbian couples

Demand-withdrawal communication patterns. Demand-withdrawal patterns were also investigated as possibly damaging communication processes in lesbian couples. Overall, the total amount of demand-withdrawal behaviors in a couple was shown to have

strong negative associations with all relationship quality outcomes. The polarization of these behaviors—meaning that one partner was higher in demanding behaviors while the other partner was higher in withdrawing behaviors—was further associated with lower relationship adjustment and higher psychological aggression, but not dedication. In line with findings from the observational tasks, these negative communication processes appeared to have clear associations with relationship adjustment and psychological aggression and less consistent associations with dedication.

Results regarding demand-withdrawal behaviors suggest that this commonly establish pattern in heterosexual couples (Christensen, 1988; Eldridge & Christensen, 2002) reflects relationship distress in lesbian couples, particularly regarding lower relationship adjustment and higher reports of damaging communication exchanges. These findings replicate results from earlier works suggesting that lesbian couples may engage in demand-withdrawal patterns as well (Kurdek, 1998, 2004; Baucom et al., 2010). Further, the current study demonstrated that couples in this sample with strongly established demand-withdrawal patterns, in which one partner predominately pursues and the other predominately withdraws, were at additional risk for relationship distress. Therefore, relationship interventions may be wise to target and help change demand-withdrawal patterns that often leave partners feeling unheard, hurt, and unable to communicate effectively. As mentioned before, these changes may be accomplished through a variety of evidence-based approaches.

Gender characteristics and demand-withdrawal behaviors. This study investigated how gender characteristics were associated with demanding and

withdrawing behaviors. It was hypothesized that masculine characteristics would be associated with high withdrawal/low demand behaviors and feminine characteristics with high demand/low withdrawal behaviors. Results provided partial support for these hypotheses while also demonstrating that these associations may work in unexpected directions. Specifically, as expected, higher actor femininity was associated with less withdrawing behaviors and higher partner femininity was associated with less actor demanding. However, counter to predictions, higher actor femininity was also associated with *less* demanding.

Hypotheses were based on research showing that women within heterosexual relationships—who are presumably more feminine, on average, than their male partners—are more likely to engage in demanding behaviors (Eldridge & Christensen, 2002; Jacobson & Christensen, 1998). Results from this study suggest that in lesbian couples, feminine characteristics may be positively associated with better communication behaviors overall. In comparison, as hypothesized, higher masculine characteristics were associated with less demanding behaviors, as predicted, while no significant results emerged for masculine characteristics and withdrawing behaviors.

The findings regarding gender characteristics and demand-withdrawal behaviors may best be understood when considering how feminine and masculine subscales from the PAQ have also been conceptualized in the literature to reflect *communal/expressive* and *agentic/instrumental* characteristics, respectively (e.g., Abele, 2003; Ward, Thorn, Clements, Dixon, & Sanford, 2006). Communal characteristics can be understood as a desire to connect and be emotionally sensitive to the needs of others while agentic

characteristics may reflect a desire for autonomy and lack of dependence on one's partner for emotional needs. When considering these definitions, a communal approach to communication may simply result in more understanding and emotional sensitivity between partners. This approach, in turn, could lead to less demand-withdrawal behaviors because problem areas are discussed constructively and resolved appropriately.

Communal communication styles may also be more expected in lesbian relationships because both partners are women who have been socialized to communicate in that fashion. Research suggests that throughout the lifespan, women and girls are socialized to be more emotionally sensitive, agreeable, and cooperative with others (Wood, 2010). By contrast, individuals with more autonomous characteristics may approach conflict topics less often because understanding and resolution within their relationships is less important to those individuals. This lower need for communication discussions could explain why masculine characteristics were negatively associated with demanding behaviors.

Another component of demand-withdraw patterns is the role of unequal power in relationships that may lead to change seeking or distancing behaviors. In heterosexual couples, wives demanding behaviors have been conceptualized to reflect women's lower status in their relationships due to a variety of factors ranging from traditionally sexist views of women to how women tend to earn less than their male counterparts. Women in heterosexual relationships are therefore more likely to seek resources, support, and change in their husbands, while their husbands may find these approach behaviors undesirable due to their higher status. These power dynamics are interesting to consider

in lesbian relationships due to higher egalitarianism in same-sex relationships. In lesbian relationships, women may be more likely to mutually desire closeness and connection through communication, leading to more efficient discussions across a variety of topics. Thus, communal characteristics could be generally beneficial for both partners.

In order to further explore the dyadic nature of demand-withdrawal patterns in lesbian couples, this study investigated if partner differences in gender characteristics related to overall communication patterns. It was hypothesized that partners with higher discrepancies in gender characteristics would be at risk for engaging in stronger demand-withdrawal patterns. However, no significant results emerged to support these predictions when including a gender polarization term to predict total demand-withdrawal patterns or demand-withdrawal polarization. Thus, no evidence emerged from this study to suggest that differences in gender characteristics across partners place lesbian couples at risk for demand-withdrawal patterns. Given that the pattern of how *individual* gender characteristics did not map on to demanding and withdrawing behaviors exactly as expected in the current study, it is understandable that the polarization of these characteristics between partners was not related to demand-withdrawal patterns either.

Practitioners can incorporate findings regarding gender characteristics from this study by evaluating communal, expressive, agentic, and instrumental characteristics of partners in lesbian relationships because these traits may be associated with different communication behaviors. The finding that communal/expressive traits demonstrated positive associations with better communication—including less demanding and withdrawing—suggests that assumptions based on heteronormative gender roles may not

translate to lesbian relationships. Findings regarding gender characteristics and household tasks further strengthen this argument (see Household Tasks section below).

Conceptualizing individual characteristics with non-gendered terms (e.g., communal and agentic) may remove biases associated with gendered terms (e.g., feminine and masculine) that do not adequately fit lesbian couple experiences. Further, gendered terms may also mislead practitioners to focus on other markers of gender, such as the physical gender presentation of each partner (e.g., clothing, haircuts), that may lead to biased assumptions regarding character traits. The evaluation of how gender presentation translates to actual communal and agentic traits is a topic for future studies to investigate.

Although no evidence was apparent in this study that differences between partners in communal and agentic characteristics placed lesbian couples at risk for more demand-withdrawal patterns, more research is needed to investigate this possibility further. For example, given the finding that communal characteristics were generally associated with better communication, future research could evaluate if couples are protected when both partners are high in communal traits. The current study evaluated absolute partner differences across both communal and agentic traits together, but it is possible that only communal characteristics are important.

Communication and dedication. Interestingly, none of the observed communication factors nor demand-withdrawal polarization patterns demonstrated significant associations with dedication. Indeed, the only communication factor associated with dedication was total demand-withdrawal behaviors, which was also

associated with relationship adjustment and psychological aggression. Although caution must be taken into account when interpreting null results, these lack of findings may reflect how dedication functions differently in relation to communication processes when compared to overall relationship adjustment and reports of destructive interactions. Most studies on communication processes in heterosexual couples have found that couples who complete relationship education programs, such as PREP, are likely to demonstrate improvements in both communication and dedication, while mechanisms of change are still unclear (Owen, Quirk, Bergen, Inch, & France, 2012; Rhoades, Stanley, Markman, & Allen, 2015). Thus, the association between communication and dedication is also largely unknown in the broader couples literature. Regarding relationship adjustment, the ability to openly and safely communicate may allow couples to effectively solve problems, find support in one another, and feel emotionally close. Similarly, the ability to communicate effectively lessens the chance that discussions of problem areas will escalate into aggressive exchanges. Dedication, by contrast, may be less sensitive to these communication processes and more associated with other factors, such as relationship constraints that may remain unchanged even if communication quality wanes (Stanley & Markman, 1992; Stanley et al., 2010).

External support. In addition to communication processes, external support was also investigated in association to relationship quality. Overall, actor and partner levels of general external support were found to have positive associations with relationship adjustment and psychological aggression, while a significant actor effect also emerged for dedication. These results suggest, in line with previous research on gay, lesbian, and

heterosexual couples, that social support is related to better relationship functioning (Graham & Barnow, 2013; Stanley & Markman, 1992; Stanley et al., 2010). Social support can both directly improve individual wellbeing as well as help individuals cope with life stressors, both of which may be important factors to having positive romantic relationships (Graham & Barnow, 2013).

When evaluating support and approval from family and friends separately, a pattern emerged in which the *approval* of friends and family demonstrated more associations with relationship quality compared to the *support* from friends and family more generally. Specifically, significant approval results included actor and partner effects of approval from both friends and family for relationship adjustment and psychological aggression, as well as significant actor effects for dedication. By contrast, the only significant support findings were an actor effect of friend support for relationship adjustment and actor and partner effects of family support for psychological aggression.

These results suggest that the *approval* of one's relationship from family and friends may be of particular salience compared to the general support from these systems. In terms of dedication, commitment theory conceptualizes social pressure as a structural constraint, meaning that when others view the couple as a unit and approve of their relationship, individuals may feel pressured to stay in their relationship regardless of relationship quality (Stanley et al., 2010). The role of structural commitment may explain why approval for the relationship was more important than general support from family and friends because approval implies that these support systems actually want to couple

to stay together. Furthermore, approval from family and friends may be more sensitive to the specific quality of an individual's relationship while the general levels of support from these systems are more constant regardless of how one's relationship is functioning. In other words, the significant approval findings may simply reflect that relationships of better quality are most likely to elicit approval from others. The cross-sectional nature of the data prevents causal interpretations.

Regarding the two significant support findings, general support from friends had a significant association with one's relationship adjustment. As mentioned before, individuals with more social support, including from friends, may have more secure resources to turn to in the face of life stressors and when relationship problems develop (Graham & Barnow, 2013). This support could help individuals cope in effective ways and improve individual wellbeing, an important component of strong relationship adjustment. Alternatively, individuals who possess strong social skills may also be more likely to have both strong friendships and romantic relationships, indicating that there is no causal relation between friend support and relationship adjustment.

Additionally, support from actor and partner families was negatively associated with psychological aggression. Research has documented how social isolation is a risk factor for victimization of aggression towards women and perpetration of aggression, although only by men (Erez, Adelman, & Gregory, 2009). Social isolation often equates to a lack of resources to turn to if aggression is prevalent, making it more difficult to get help or leave these relationships. Similarly, social isolation also reduces social pressures that may deter individuals from engaging in aggressive behavior (Erez et al., 2009). Thus,

when individuals or their partners do not have strong social support from their families, it may place them at risk for victimization or perpetration of aggression, respectively. Also, individuals with strong family support may have had healthy relationship skills modeled for them growing up. Research has demonstrated that the quality of family-of-origin relationships are associated with aggression and emotional reactivity in later romantic relationships (Gardner, Busby, & Brimhall, 2007; Karakurt, Keiley, & Posada, 2013).

Finally, an r-to-z transformation demonstrated that *friend approval* was more strongly associated with relationship adjustment compared to *family approval*. These findings generally replicate other research that has discussed the role of “families of choice” in LGBT communities to describe how sexual minorities often form support circles from friends as an act of resilience in the face of lack of support from family or community members (Kurdek, 2004; Graham & Barlow, 2013). In general, these findings provide evidence that lesbian couples may value the perceptions of their friends more than the perceptions of their family. At the same time, family approval was still significant, suggesting that both of these support systems may still be important for some lesbian couples. As acceptance of same-sex couples continues to grow, more research should investigate if the salience of friend vs. family approval change as well.

Overall, results regarding social support and approval provide some of the first evidence demonstrating the dyadic nature of these constructs in lesbian couples. For many of the findings, not only did one’s own levels of support and approval demonstrate significant results, but the levels of support and approval for one’s partner was also significant. These findings indicate that support and approval may be important even if it

comes from only one partner's support network. Possibly, individuals are sensitive to how others perceive their relationship even if these support networks are closer to their partner. Support networks for one's partner may also improve that partner's wellbeing, making her more desirable and stable.

Practitioners could incorporate findings regarding social support by encouraging couples to build strong social networks that approve of the couple's relationship. For example, practitioners could help couples increase these social networks by providing couples with resources in the LGBT community. This may require service providers to be educated about which resources are most appropriate and helpful for establishing these support networks. Findings also highlight a potential strength of lesbian couples that can be built upon by relationship interventions. Specifically, despite societal discrimination and barriers to some ready-made support networks that many heterosexual couples enjoy, lesbian couples have shown that they can establish important, beneficial support networks through friendships. At the same time, the establishment of these networks may take extra effort and time, such as going to LGBT friendly events or finding supportive organizations/clubs to join. A unit on building social support networks has been successfully piloted with female same-sex couples and findings from the current study support the inclusion of such topics (Whitton et al., 2013). Further, family approval was also shown to have significant associations to relationship quality, so practitioners should consider helping couples improve these systems if possible. However, practitioners should take caution when addressing family support systems because there may be negative consequences, such as additional discrimination and rejection, if an individual's

family is staunchly unsupportive (Baiocco et al., 2015; Green, 2000). Therapists could help couples consider the costs and benefits of trying to connect with specific family members and develop plans to implement these decisions, including how partners could support one another (Green, 2000). If partners wish to mend family relationships, resources such as Parents and Friends of Lesbians and Gays (PFLAG)—a support group that facilitates healing between sexual minorities and their families who may struggle to support same-sex relationships—could be helpful. Finally, practitioners could also offer family counseling services, as long as the therapists recommended are vetted to be gay-affirming.

Household tasks. The division of household labor was also investigated in its association with relationship quality. Overall, results demonstrated that individual perceptions of fairness with household labor distribution was associated with relationship quality, while the actual contribution of each partner was not. These results support previous research suggesting perceptions of fairness in the division of household labor is more important than the specific distribution of labor between partners (Frisco & Williams, 2003; Petrella, 2011).

At the same time, this study found that the women in this sample perceived the division of household labor as fairer when their partners contributed more to household tasks. In Petrella (2011), the author found no association between the actual distribution of labor and household satisfaction in heterosexual couples, despite previous studies finding this association (Suitor, 1991). Petrella suggested that due to gender role expectations, the women in her sample may have held low expectations for their male

partners and thus considered it “fair” for women to do more of the housework. Given the lack of gender role expectations in same-sex couples, it could be possible that lesbian partners adhere to more egalitarian standards, making the contribution of each partner to household labor more important. Nonetheless, the actual distribution of labor did not directly relate to relationship quality in the current study, suggesting that other factors beyond just the quantitative distribution of labor may be important.

Practitioners may incorporate these findings by assessing partner perceptions of fairness in household tasks and encouraging partners to discuss their expectations in order to create agreements that work for both partners. Further, practitioners should not assume that lesbian couples with uneven distributions of labor are necessarily distressed over these arrangements. More research is needed to understand what factors are associated with higher perceptions of fairness. These factors most likely vary by couple and circumstance, in which perceptions of fairness are based on the availability of each partner (Solomon et al., 2005; Spitalnick & McNair, 2005). At the same time, practitioners should recognize that on average, more even distribution of labor is associated with higher perceptions of fairness.

Gender characteristics and household tasks. Additionally, the division of household tasks was evaluated through the masculine and feminine household tasks subscales. However, these divisions of masculine and feminine tasks demonstrated a lack of reliability for this sample even after removing items in a systematic format (see Methods section). This lack of reliability suggests that, in line with previous research, lesbian couples may not divide household tasks across traditional gender lines and may

instead divide tasks based on each partner's availability and preferences (Solomon et al., 2005; Spitalnick & McNair, 2005). These findings are also consistent with other results from this study regarding gender characteristics and communication (see earlier section entitled Gender Characteristics and Demand-Withdrawal Behaviors) showing that gender characteristics did not manifest in lesbian communication patterns as would be expected based on heterosexual norms.

Gender characteristics and lesbian couples. Taken together, results regarding gender characteristics—both from investigations of demand-withdrawal behaviors and household task distribution—suggest that lesbian couples do not ascribe to heteronormative gender roles. This finding is important in light of concerns voiced from participants in Scott and Rhoades's work (2014) who had experienced heterosexist bias regarding gender roles in their relationships, including from professionals. Because heterosexist bias is still pervasive in American society more research is needed to challenge biased assumptions that could be harmful if held by practitioners serving lesbian couples.

The lack of gender roles in lesbian couples may also be interpreted as a particular strength in these relationships. Without the preconceived societal expectations guiding the assignment of household tasks and roles, lesbian couples may have more freedom to define and negotiate these tasks (Solomon et al., 2005; Spitalnick & McNair, 2005). At the same time, negotiation of these tasks may necessitate more communication to set expectations given the lack of guidelines for lesbian couples to follow while establishing

these roles. Practitioners may be in ideal positions to help guide lesbian couples through these conversations.

Intimacy. The role of intimacy—defined as feelings of emotional safety and closeness in the relationship—was investigated in association to relationship quality. Results revealed that actor levels of intimacy had moderate to large positive associations with all relationship quality outcomes, some of the largest effects sizes demonstrated in this study. Partner reports of intimacy also demonstrated small associations with higher levels of one’s own relationship adjustment and lower perceptions of psychological aggression. Additionally, when a quadratic term was included in the models, only the linear effects remained significant while the quadratic effects were non-significant. These results provide no evidence that higher intimacy in lesbian relationships is problematic and instead demonstrate that higher intimacy is beneficial.

For decades, many scholars conceptualized high intimacy in lesbian relationships as pathological and presumed to indicate that lesbian partners had difficulty maintaining individual identities (e.g., Burch, 1986; Ossana, 2000). These theories of fusion conceptualized intimacy as including how much time partners spent together, feelings of closeness, and sharing clothing, doctors, bank accounts and friends. More recent research has attempted to distinguish *positive closeness* from *negative fusion*. Within these theories, closeness is conceptualized to include feelings of warmth, physical intimacy, and nurturance between partners, while fusion represents intrusiveness, jealousy, and attempts to control each other (Ackbar & Senn, 2010). Importantly, the intimacy measure in the current study resembled positive closeness.

The current findings add to the literature by suggesting that inherently negative views of closeness in lesbian relationships are inaccurate and based on heterosexist norms (Ackbar & Senn, 2010; Hardtke et al., 2010). Instead, higher levels of closeness in lesbian relationships most likely reflect feelings of emotional safety and connection with one's partner which makes relationships more satisfying, stable, and healthy. Thus, high intimacy in lesbian relationships may foster a deeper sense of trust and connection between partners that is generally desired. Also, given the prevalence of heterosexist stressors within society, feelings of closeness between women in same-sex relationships may very well be protective, as suggested by other scholars (Ackbar & Senn, 2010). These theories fit with results related to intimacy as well as other results of the current study. Specifically, close interpersonal relationships, whether through external support systems or connections with one's partner, were generally associated with better relationship quality in this sample. These findings may also relate to how communal characteristics served a positive role in these relationship.

The current study was also the first to evaluate intimacy at the dyadic level in lesbian couples through APIMs. Results demonstrated that both higher levels of one's own intimacy as well as one's partner's levels of intimacy were associated with one's own relationship adjustment and reports of psychological aggression. Therefore, individual perceptions of their partner's level of closeness in lesbian couples may lead individuals to feel more satisfied in their relationship. Actor intimacy was also related to one's own dedication, implying that feelings of closeness may relate to stronger

perceptions of couple identity, an important component of dedication (Stanley et al., 2010).

Findings suggest that practitioners should generally focus on enhancing intimacy, conceptualized as positive closeness between partners, in lesbian relationships. However, practitioners should take care in deciphering between more positive aspects of intimacy as opposed to feelings of intrusiveness that has been shown to have negative implications for relationship quality (Ackbar & Senn, 2010).

Conceptualizations of and engagement in sexual activities. This study provided novel information regarding how lesbian couples conceptualize sex within their relationships. Findings indicated that sexual acts involving genital touching of one partner to the other—including oral sex, genital-to-genital touching, hand-to-genital touching, using sex toys, and anal stimulation—were all considered acts that constituted having sex by the vast majority of participants (> 85%). By contrast, joint masturbation—defined as one partner masturbating in the presence of her partner—was only considered having sex by approximately 60% of participants and making out/French kissing was only considered having sex by very few participants (<5%). Further, it is interesting to consider how across all sexual acts, at least some participants did *not* consider each sexual activity to mean having sex. Hence, conceptualizations of sex by women in lesbian relationships cannot be completely reduced to an absolute definition. This is the first study to evaluate these definitions in lesbian couples specifically; however, research has evaluated how the general population defines sex. In Sanders et al. (2010), the authors found that less than half of participants from a national survey of adults

considered manual stimulation of genitals from one partner to another as having sex, and less than three fourths considered oral sex as having sex. Therefore, there may be reason to believe that lesbian couples conceptualize having sex in broader terms compared to the general population. Indeed, within Sanders's study, the only sexual acts that were considered having sex by the vast majority of participants, involved penile-vaginal penetration. Thus, definitions of having sex within the general public may be informed by heterosexual bias that prioritizes intercourse above other sexual acts.

In terms of engagement in these various sexual activities, the least common sexual act that participants in the current study reported engaging in was anal stimulation or penetration. More participants reported engaging in joint masturbation, using sex toys, and genital-to-genital touching. The most common sexual acts were oral sex and hand-to-genital touching, in which the vast majority of participants indicated that they had engaged in those sexual activities with their current partner at some point in their relationship. These results suggest that lesbian couples may vary in the type of sexual activities they typically engage in while also indicating that some sexual acts are more common within lesbian relationships.

Descriptive data from this study regarding conceptualizations of and engagement in sexual behaviors provide important information for clinical interventions that focus on sexuality with this population. Heterosexist bias regarding the role of vaginal penetration should be challenged based on results from this study. Practitioners should recognize that lesbian couples may define sex within their relationships in broad and various terms. The touching of genitals from one partner to the other was considered having sex by most

participants, but there was no consensus across any sexual act, suggesting that conceptualizations may vary across couples. Conversations regarding sex may serve as opportunities for relationship programs to provide psychoeducation about broad definitions of sex in lesbian relationships. In many ways, these broad conceptualizations may be considered a particular strength of lesbian relationships by giving partners numerous ways to experience sexual satisfaction. In general, it seems that the variation of definitions of sex makes this topic particularly important for partners to talk about in order to create shared expectations and to understand each other's desires.

Sexual satisfaction and relationship quality. Regarding sexual satisfaction and relationship quality, results revealed that actor sexual satisfaction had a small association with relationship adjustment, but not dedication or psychological aggression. Researchers have acknowledged how sexual satisfaction and relationship quality are intertwined in lesbian relationships (Holmberg, Blair, & Phillips, 2010; Sanchez, Moss-Racusin, Phelan, & Crocker, 2011; Tracy & Junginger, 2007). Scholars have suggested that sexual satisfaction may enhance relationship intimacy, particularly for women, which may lead to increases in relationship quality (Offman & Matheson, 2005). Findings from the current study provide additional evidence that sexual satisfaction may be associated with relationship quality in lesbian couples.

However, these results provided no support that the quality of one's sexual satisfaction was directly related to feelings of commitment towards the relationship or experiences of hurtful interactions between partners. Again, caution must be taken when interpreting null findings, but possibly, as lesbian couples develop long-term

relationships, the quality of sex does not directly affect how committed partners feel towards one another. Similar to other null dedication findings, commitment may be related to the value of emotional connection, feelings of support between partners, and relationship constraints (Stanley & Markman, 1992; Stanley et al., 2010). It could also be that declines in sexual satisfaction are generally expected in long-term lesbian relationships. Stereotypes such as “lesbian bed death” may also be problematic because lesbian women could expect less sexual satisfaction and frequency in their relationships over time and not work to improve these areas if there are problems (Cohen & Byers, 2014). The null finding regarding sexual satisfaction and psychological aggression could reflect that sexually dissatisfied women in these relationships may not have discussed this topic with their partner. If this was the case, it is still unclear if the lack of communication arose from attempts to avoid these conversations or if individuals did not find the topic of sex important enough to discuss. Scott and Rhoades (2014) found that sexual minority women consider sex and sensuality in their relationships important, but found the topic particularly difficult to talk about within their relationships. Indeed, several participants within that study mentioned that, compared to men, women may be socialized not to pursue sexual encounters or to openly discuss sexual likes and dislikes. More research is clearly needed to further evaluate how partners in lesbian relationships discuss sex, but the current study provides additional evidence that sexual satisfaction is related to overall relationship adjustment.

Results from the present study also provided no evidence that partner perceptions of sexual satisfaction were directly associated with one’s own levels of relationship

quality. This null finding may suggest that individual perceptions of sexual satisfaction are more important than partner perceptions. Alternatively, as mentioned above, it is unclear if individuals were aware of their partners' sexual satisfaction levels. More research is needed to confirm this null finding or evaluate why this lack of association exists.

When evaluating how different aspects of sexuality related to sexual satisfaction, it was discovered that higher sexual frequency, lower discrepancies between desired sexual frequency and actual sexual frequency, as well as higher levels of emotional intimacy associated with sex were all positively associated with sexual satisfaction. These results provide evidence that both frequency of sex and the emotional quality of sex are associated with general perceptions of sexual satisfaction in lesbian relationships. Moreover, the actual frequency of sex in these relationships may have additional implications as it diverges from the ideal frequency of sex desired. On average, couples reported wanting a higher frequency of sex (approximately *more than once per week*) compared to how often they were actually having sex with their partner (approximately *once every week to every other week*). These findings replicate other studies demonstrating that lesbian couples tend to desire more sexual frequency in their relationships (Solomon et al., 2005).

Overall, results suggest that perceptions of sexual satisfaction may play a role in overall relationship adjustment in lesbian relationships. Practitioners could incorporate findings from this study by helping couples work to increase their sexual frequency and emotional closeness with sex in order to improve overall sexual satisfaction. For

example, practitioners could help couples more openly discuss their desires for sexual experiences and problem solve around any barriers, both emotional and logistical, that prevent sexual encounters from happening as often as desired. These discussions could be facilitated by either structured skills-based communication (Markman, Stanley, et al., 2010) or through other therapy approaches that help couples discuss vulnerable experiences and emotions (Jacobson & Christensen, 1998; Johnson, 2008; Hardtke et al., 2010). Programs may also help couples feel more connected and emotionally comfortable during sexual encounters. Approaches such as *sensate focus* help couples engage in sensual and sexual acts in ways that enhance intimacy and communication and could be included in either relationship education or couple therapy settings (Masters & Johnson, 1970; Weiner & Avery-Clark, 2014).

General Aim 1 Conclusions

Overall, Aim 1 of this study focused on expanding the basic relationship science foundation of lesbian couples with a focus on processes typically addressed in relationship interventions. Generally speaking, results indicated that processes associated with relationship quality in the traditional couples literature were generally found to function similarly in this sample of lesbian couples. For example, the couples in this sample displayed more relationship distress when engaging in less positive communication and more overt negative communication, avoidant negative communication, and demand-withdrawal patterns. Importantly, it appeared that overt negative communication and demand-withdraw patterns were most destructive. Many relationship education programs and couple therapy models focus on limiting negative

communication as a primary component of improving relationship quality and this study provides support that these communication strategies will most likely translate to lesbian couples. Positive communication was also shown to have small associations with relationship quality, suggesting that increasing recognition and frequency of positives may also be helpful as a secondary priority in intervention settings.

Furthermore, results suggest that other relationship processes typically addressed in relationship interventions—such as social support, intimacy, and sexual satisfaction—were significantly associated with relationship quality as well. These processes are also often addressed in relationship interventions, further enhancing the argument that many relationship intervention approaches are most likely appropriate for lesbian couples. This study also provided information regarding how friends vs. family, and approval vs. support, may function in lesbian couples. Findings included that one's immediate environment was strongly associated with relationship quality. Given that some lesbian couples may have less ready-made support from family, practitioners may want to emphasize helping lesbian couples build friendship support networks in particular. This recommendation may require practitioners to familiarize with the local LGBT community in order to provide appropriate and culturally sensitive resources. Further, practitioners may also wish to discuss the type of support couples receive from others, including whether these support networks approve of the couple's relationship.

Additionally, this study provides new descriptive information regarding how lesbian couples conceptualize sex and which components of sexuality are most associated with sexual satisfaction. Overall, it appears that sexual satisfaction was associated with

several components, including frequency and emotional closeness, and that lesbian couples in this study conceptualized having sex in broader terms compared to the general population. Practitioners should integrate these findings into practice by acknowledging these broad conceptualizations of sex and by using evidence-based tools to help increase sexual frequency and enhance sexual satisfaction.

Finally, Aim 1 also evaluated how gender characteristics manifest in lesbian relationships. These associations are important because the vast majority of research has been on heterosexual couples, possibly resulting in an understanding of couple dynamics that reflects heteronormative biases. Findings from this study indicated that gender characteristics did *not* map on to lesbian relationship dynamics as hypothesized based on heteronormative expectations. However, by conceptualizing gender characteristics as communal/expressive vs. agentic/instrumental traits, it was reasonable to understand how more communal attributes may be associated with better relationship quality in lesbian couples. More research is still needed to evaluate how partner traits may interact in different ways. Overall, practitioners would be wise to question heteronormative biases and recognize that lesbian couples do not fit gender roles commonly seen in heterosexual couples.

All findings from Aim 1 built on the pilot project to this study (Scott & Rhoades, 2014) and other works suggesting that many processes in lesbian couples represent universal properties that manifest in similar ways across couple types (Kurdek, 2004, 2005). Findings from this study are important because they suggest that many of the core features of relationship education programs and couple therapy may not need much

adaptation to meet the needs of lesbian couples. At the same time, results also demonstrated that cultural sensitivity may be important to best meet the needs of lesbian couples, particularly regarding factors such as building support in the LGBT community, sexual practices, and how gender characteristics manifest in these relationships. Aim 2 continues this discussion of cultural competence by evaluating stressors and commitment behaviors that may be more specific to lesbian relationships.

Aim 2: Factors Specific to Lesbian Couples

The second aim of this project was to evaluate how processes more specific to lesbian couples—including outness, internalized homophobia, discrimination, and commitment behaviors—relate to relationship quality. These processes were evaluated as potential content areas that are not typically addressed in relationship interventions but may be important to consider when adapting or creating culturally sensitive programs.

Outness. Results indicated that higher levels of one’s own general outness—defined as whether a person/group knows about the individual’s sexual orientation and how openly it is talked about—was related to having better relationship adjustment. Findings from this project built on previous research suggesting that outness is important to individual growth (Oswald, 2000; Vaughan & Waehler, 2009) and perceptions of relationship quality in same-sex relationships (Berger, 1990; Caron & Ulin, 1997; Jordan & Deluty, 2000; Knoble & Linville, 2012). In some ways, outness may be necessary for some individuals to receive social support from others, particularly for their romantic relationship. These support networks could provide individuals with emotional resources to process and work through relationship difficulties as they arise (Graham & Barnow,

2013). Correlations between general social support and general outness were significant in this study, providing further evidence that higher outness may lend itself to more support from others. Alternatively, individuals with more satisfying relationships may be more likely to share their relationship status with others. Thus, higher levels of outness may be reflective of relationships of better quality. More research is needed to understand the directionality of these findings.

When the outness scale was divided into more specific subscales, the associations between outness and relationship quality outcomes varied. Both actor and partner outness to friends and work demonstrated significant associations with relationship adjustment. Further, partner outness to friends was associated with lower psychological aggression and actor outness at work was associated with increased dedication. By contrast, neither actor nor partner outness to family were associated with any relationship quality outcomes. Because few couples answered the religious outness questions, there was not enough power to analyze this construct thoroughly. Future research may need to purposely recruit for lesbian couples with religious affiliations in order to understand the role of outness in religious settings.

Outness results generally built on earlier findings from this project regarding the role of external support/approval from friends and family and strengthen the suggestion that “families of choice” may be of particular importance to female same-sex couples. Similarly, outness at work may provide additional support networks from peers as well as opportunities for individuals to be perceived as a couple. This recognition of the couple

as a unit could lead to increases in social constraints associated with dedication (Stanley et al., 2010).

Interestingly, higher partner levels of outness to friends, but not actor levels, were associated with less psychological aggression. This finding provides another example regarding how perceptions of overall psychological aggression may be particularly associated to how individuals perceive their partners. Further, these findings may reflect the role of social isolation, which was discussed in relation to social support. Specifically, more outness may lend itself to more social support; thus, when one's partner has more social support from her friends, this may make her less likely to engage in aggressive behavior (Graham & Barnow, 2013). Alternatively, as was suggested by participants in Scott and Rhoades's study (2014), findings from the current project could represent how individuals can interpret lack of outness by their partners as an indication that their partner feels shame regarding the relationship. Clearly, such negative interpretations could lead to conflict and negative emotionality in the relationship.

Importantly, this is the first project, to our knowledge, that has evaluated how outness functions at the dyadic level in lesbian couples through APIMs. Prior research has only evaluated how outness relates to relationship quality at the individual, not partner, level (Jordan & Deluty, 2000). Findings from the current project suggest that practitioners should recognize that the outness of both partners, particularly to friends and in their work environments, may be associated with both partners' relationship quality. Relationship programs can help partners discuss their expectations regarding disclosure of their relationships to others and encourage partners to consider ways to increase their

social support systems if outness is particularly low. These conversations may be facilitated through relationship education programs by teaching skills to safely discuss expectations and problem solve when partners disagree. As an example of how to integrate discussions of relationship disclosure into relationship education, a piloted workshop for female same-sex couples used relationship disclosure as an example topic for an expectations unit (Whitton et al., 2013). In therapy settings, clinicians may be able to provide couples with more individualized attention to help partners better understand each other's meanings and interpretations regarding outness. Overall, it appears important that practitioners understand how outness may manifest in lesbian relationships and present an openness to leading discussions surrounding this topic.

Internalized homophobia. Internalized homophobia—conceptualized to measure one's own negative perceptions of the self for being a sexual minority—was also assessed in association to relationship quality. Because internalized homophobia has been shown to have negative associations with individual outcomes (e.g., Herek, Cogan, Gillis, & Glunt, 1998; Meyer & Dean, 1998; Szymanski & Chung, 2003) and also represents a negative view towards same-sex attraction, it was expected that higher internalized homophobia would have negative associations with relationship quality. However, counter to hypotheses, higher partner internalized homophobia from the full scale and higher partner internalized homophobia regarding publically identifying as a lesbian were both related to *higher* levels of one's own dedication.

One study has demonstrated that internalized homophobia is related to poor relationship outcomes in individuals (Frost & Meyer, 2009), however the current project

is the first study to investigate this construct through APIMs. Importantly, both significant findings that suggested more internalized homophobia was beneficial to relationships were *partner* effects. By contrast, the only significant *actor* effect was in the expected direction, such that higher actor negative perceptions of other lesbians was related to higher levels of perceived psychological aggression. Possibly, individuals of partners with higher levels of internalized homophobia feel more secure in their relationships because their partners are less likely to seek alternative partners. Alternatively, partners with high levels of internalized homophobia may be more resistant to same-sex relationships in general, but the fact that they entered a same-sex relationship regardless may reflect particularly positive perceptions of that specific relationship. If an individual knows her partner feels negatively towards same-sex relationships in general but chooses to be in such a relationship anyway, this may lead individuals to have more confidence that their partner is truly committed to the current relationship.

Regarding the finding that actor negative perceptions of other lesbians was related to more psychological aggression, it could be that women with more negative perceptions of other sexual minority women may be more critical in general, and thus, more likely to engage in critical exchanges and conflict within their relationships. Another explanation includes that individuals with more psychological conflict in their relationships may interpret the negative aspects of their own relationships to be reflective of other lesbians more generally. In other words, if an individual believes that other lesbians are too aggressive or that their behaviors look badly upon the broader community, she may become more critical of her lesbian partner.

Clinical implications regarding internalized homophobia results from this study are mixed and warrant more research to understand these constructs at the dyadic level. It would be difficult to imagine that practitioners should try to increase internalized homophobia in partners, even though it was related to some positive outcomes. The explanation of a selection effect—meaning that women with more internalized homophobia who enter same-sex relationships may lead their partners to more dedication—would suggest that increasing this construct would not be helpful once individuals are already in these relationships. Further, the majority of findings regarding internalized homophobia were non-significant, making it difficult to draw strong conclusions. Future research that utilizes longitudinal designs may be necessary to better understand this phenomenon.

Faced discrimination. The last sexual minority stress variable that was considered in this study was a measure of experiences with discrimination. These discriminatory experiences ranged from being treated unfairly from family, strangers, and professionals to being victim to anti-gay remarks and insults. Overall, results provided evidence that both one's own experiences as well as one's partner's experiences with discrimination were associated with lower relationship quality, including relationship adjustment and psychological aggression. When the measure was divided into subscales, actor and partner experiences with harassment or rejection were associated with psychological aggression. Actor and partner experiences with discrimination at work/school were also associated with psychological aggression, as well as relationship adjustment. Discrimination at work/school also included a significant actor effect on

dedication, which did not emerge in the general scale or harassment/rejection subscales. Discrimination from others also included a significant partner effect for psychological aggression, but not actor effect.

Experiences of harassment often involve psychological aggression themselves, so individuals who experience high levels of this negative modeling of communication could replicate such behavior in their relationships (Kernsmith, 2006). Experiences of rejection have also been demonstrated through social-cognitive, attachment, and interpersonal theories to lead some individuals to develop *rejection sensitivity*, meaning that people who have been rejected may come to expect this from others. This hypervigilance towards rejection can lead to overreactions to ambiguous situations and engagement in hostility and violence (Downey, Khouri, & Feldman, 1997; Levy, Ayduk, & Downey, 2001). These theories on rejections sensitivity and aggressive modeling may explain findings from the study in which more experiences with harassment/rejection were associated with more psychological aggression.

Regarding discrimination at work/school, these findings fit nicely with other results from this study suggesting that the perceptions of peer groups (such as those in work/school settings) may be particularly important to lesbian relationship functioning. Individual relationships with fellow employees, employers, or other students may be important components of a person's daily experiences compared to relationships with family members who may not be as present on a regular basis. Thus, maltreatment from individuals at work or school may be particularly damaging to romantic relationships given the salience of those peer relationships in an individual's everyday life. These

stressors may also lead to frustrations and emotional negativity that could translate into conflict with one's partner. Also, as discussed in findings regarding outness at work, perceptions of one's relationship from work may provide structural constraints that increase dedication (Stanley et al., 2010). Conversely, these findings may suggest that discrimination from these sources could pressure individuals to become less dedicated, possibly because their relationships are the target of discrimination in these settings. Finally, discrimination from others—including service professionals, and strangers—only demonstrated significant actor effects on relationship adjustment and partner effects on psychological aggression. This finding provides another example of how partner's experiences may be particularly related to levels of psychological aggression in the relationship.

Overall, findings suggest that experiences of discrimination can have direct associations with one's relationship quality at the dyadic level in lesbian couples. Partner effects are important because they suggest that the effects of discrimination may not be limited to only individual consequences because they also reduce the relationship quality of both partners.

Given these findings, practitioners may find it beneficial to assess partner experiences with discrimination and explore how partners cope individually and together. Partners may be in favorable positions to support one another with discriminatory experiences as long as both partners feel safe talking about these potentially vulnerable situations. A unit on coping with stress with an emphasis on how discrimination informs same-sex couple experiences, has been successfully piloted in a workshop for female

same-sex couples (Whitton et al., 2013). Moreover, if individuals have faced significant harassment/rejection in their lives, results showed that they may be at risk for engaging in psychological aggression. Thus, practitioners, particularly in therapy settings, may be wise to obtain some background information regarding this topic. This information could inform practitioners to better make sense of each partner's communication patterns and subsequently provide appropriate interventions.

Discrepancies in sexual minority stress between partners. Despite predictions that partner discrepancies across sexual minority stress variables would be related to negative outcomes, no significant interaction terms emerged across partner discrepancies in outness, internalized homophobia, and discrimination. Consequently, this study provided no evidence that partner differences in their levels of sexual minority stress were associated with negative relationship outcomes. Interpretation of these null findings is difficult, as this is the first study to evaluate how sexual minority stress functions at the dyadic level. Based on this study's results, it is possible that individual levels of sexual minority stress are most important to relationship quality as opposed to how much partner's match on these variables. However, based on the qualitative study preceding this project, it appears that differences between partners may be important for future research since these topics could serve as areas for potential conflict (Scott & Rhoades, 2014).

Commitment behaviors. Finally, engagement in various commitment behaviors—ranging from legal and non-legal commitment ceremonies to legal protections such as power of attorney—were evaluated in their association to relationship

quality. Interestingly, the status of same-sex legal recognition has significantly changed since this project's original proposal. Just prior to the beginning of recruitment, civil unions became legal in Colorado in March, 2013. Thus, at the onset of the study, couples had only been afforded the right to civil unions for several months. Further, just following the end of recruitment, same-sex marriage became legal in Colorado in October, 2014. Most recently, in June, 2015, the Supreme Court upheld the right for same-sex couples to be afforded legal marriage in all fifty states. Therefore, although same-sex marriage is currently available nationally, only civil unions were available during the course of the study.

Results indicated that only relationship commitment behaviors involving a public ceremony (e.g., legal wedding, civil union, or commitment ceremony *with attendees*) were significantly associated with relationship quality. Indeed, no significant effects emerged when considering all commitment behaviors together (legal and non-legal commitments), nor when only considering legal commitments *without ceremonies* (e.g., power of attorney, domestic partnership). These findings provide some of the most up-to-date information regarding the role of commitment behaviors in same-sex couples within the context of a rapidly changing legal system and speak to how legal protections vs. public declarations may function differently in association to dedication.

Rothblum, Balsam, and Solomon (2011) found that most same-sex couples (both male and female) who participated in civil unions qualitatively reported finding the civil union experience important and powerful. At the same time, for some participants who obtained civil unions without the attendance of loved ones but who had also participated

in a previous non-legal commitment ceremony that loved ones attended, many of these participants recalled their commitment ceremony as more important. Results from the current study similarly suggest that even though legal marriage is now currently available to all same-sex couples, it may be important for couples to consider having formal ceremonies attended by loved ones. These results also mirror findings among heterosexual couples, in that those who reported having a wedding were more likely to report high marital quality compared to those who married without such a ceremony (Rhoades & Stanley, 2014). Scholars have theorized that public ceremonies provide several benefits to couples, including that they involve a clear decision to commit to one's partner—in line with previous research on the importance of “sliding” versus “deciding” in relationship choices (Stanley et al., 2010). Public ceremonies also symbolize the witnessing and sanctioning of the couple's commitment by broader society. These components of formal, public ceremonies can help solidify dedication to one's relationship and increase couple identity, which may explain the findings of the current study.

Rhoades and Stanley (2014) also found that the number of attendees was related to relationship quality which was not replicated with this sample. However, it is difficult to interpret findings from the current study because at the time, same-sex couples were limited to geographical regions of the country to engage in legal marriage and had only briefly been afforded the right to civil unions in Colorado. These factors may have impacted how many friends and family could attend a ceremony, particularly if couples had participated in such ceremonies out of state.

In sum, this study provides evidence regarding the importance of *public* declarations of commitment in same-sex couples in relation to dedication and relationship quality. As mentioned by some participants in Scott and Rhoades's study (2014), some couples had been waiting for legal marriage before engaging in any commitment ceremonies, even though they could have participated in a non-legal commitment ceremony at any time. Now that marriage is legal across the country, practitioners could help encourage lesbian couples to consider the role of such ceremonies as a means to solidify commitment in their relationships as opposed to only obtaining legal protections without the attendance of loved ones. Further, if couples choose to obtain legal protections immediately, it may still be beneficial to consider having an additional ceremony that family and friends can attend.

General Aim 2 Conclusions

Aim 2 sought to evaluate the association between stressors specific to lesbian couples and relationship quality. Results demonstrated that lower outness and higher experiences with discrimination were associated with lower relationship quality in this sample. In line with earlier findings from this study regarding external support from friends, it appears that outness to those who one may have more daily associations with, such as friends and co-workers, also had the strongest associations with higher relationship quality. Similarly, higher levels of experienced discrimination at work or in school was associated with negative relationship outcomes in this sample. Taken together, these findings demonstrate the dyadic nature of sexual minority stress and suggest that these stressors present unique challenges to female same-sex couples. The

constructs of outness and discrimination may provide opportunities for content areas that can be addressed through relationship education and couple therapy programs.

Practitioners could provide psychoeducation regarding the role, complexities, and consequences of outness and teach couples effective tools to increase outness to people that will support their relationship. Similarly, practitioners could help lesbian couples develop effective coping mechanisms, both individually and together as a couple, to combat experiences with discrimination. Both of these recommendations regarding outness and coping with stress have been successfully incorporated into a recently piloted program for female same-sex couples (Whitton et al., 2013).

Additionally, regarding the role of commitment behaviors in lesbian relationships, results demonstrated that public ceremonies were positively associated with dedication, while legal commitments without such ceremonies did not demonstrate these associations. Given the recent Supreme Court ruling that ratified same-sex marriage in all 50 states, these findings may be important for same-sex couples who are considering legal marriage because the attendance of loved ones at wedding ceremonies may be important for solidifying commitment, social constraints, and establishing couple identity. Thus, as more same-sex couples obtain legal marriage, it may be important for these couples to consider having loved ones attend these ceremonies. If couples seek legal marriage immediately without enough time to make arrangements for family and friends to attend, these couples may want to consider having an additional commitment ceremony so that loved ones can witness these declarations of commitment.

Overall, Aim 2 results speak to the need for practitioners to develop a solid foundation of cultural sensitivity regarding the role of additional challenges and stressors that many lesbian couples may face. This cultural sensitivity may ultimately lead to programs that more effectively serve the needs of lesbian couples.

Aim 3: Relationship Quality and Mental Health

Finally, Aim 3 focused on the association between relationship quality and mental health. Results from this study generally suggested that actor relationship quality was significantly associated with mental health outcomes. These associations are important to understand in lesbian couples because discrimination and stress associated with being a sexual minority has been shown to increase individual risk for psychological distress and mental illness (Cochran et al., 2003). Moreover, numerous studies have demonstrated bidirectional associations between depressive symptoms and relationship quality in heterosexual couples (see Whisman & Baucom, 2009 for review) yet this is the first time, to our knowledge, that these associations have been evaluated with lesbian couples.

Depressive symptoms. Results indicated significant actor effects of relationship adjustment and psychological aggression, but not dedication, for depressive symptoms. Whisman and Baucom (2012) have described the bidirectional association between depressive symptoms and relationship quality in heterosexual couples. As noted by Whisman and Baucom (2012), stress is an important risk factor for developing mental health problems, and relationship distress can serve as an interpersonal stressor that increases the likelihood for developing depressive symptoms. Conversely, depressive symptoms can increase relationship problems because partners of depressed individuals

may find their mental health problems burdensome and overwhelming. Depressed individuals may also have more difficulty connecting with their partners and engaging in mutual enjoyment. Results from the current study suggest that these processes may also operate in lesbian couple relationships, but more research is necessary to confirm the directionality of these associations.

Relationship interventions have been shown to reduce depressive symptoms in heterosexual couples (Whisman & Beach, 2012) and findings from this study suggest that similar intervention efforts may be appropriate for lesbian couples as well. As in other analyses, dedication was not significantly associated with depressive symptoms which may indicate that relationship adjustment and psychological aggression are more salient to day-to-day assessments of one's relationship quality. These daily assessments may have more direct implications for depressive symptoms.

Alcohol use. Alcohol use, by contrast, was found to have significant actor effects on dedication and psychological aggression, but not relationship adjustment. Alcohol use is associated with dysregulation and aggression in studies on heterosexual couples, suggesting that individuals who use alcohol at higher levels are more likely to engage in hurtful exchanges with their partners (e.g., Lund & Thomas, 2014; Watkins, Maldonado, & DiLillo, 2014). Thus, alcohol use may place lesbian couples at similar risks for destructive behavior when alcohol use is frequent. Regarding dedication, dysregulation and aggression associated with alcohol use may also lead to relationships that feel less stable and consistent which may be important to feelings of dedication.

Similar to studies on relationship interventions and depressive symptoms, research has also demonstrated that couple therapy can be an effective approach to treating substance use disorders, particularly when both relationship dynamics and substance use problems are directly addressed through the intervention (see Fletcher, 2013 for review). The current study provides important evidence suggesting that the content of these interventions will likely meet the needs of lesbian couples. Regarding the non-significant effect of relationship adjustment on alcohol use, it is possible that alcohol use may be associated with both negative interactions between partners, as well as positive relationship aspects, such as fun and friendship associated with recreational settings, leading to no direct effects (positive or negative) on relationship quality. This study did not evaluate when or where individuals were using alcohol, including whether they were with their partner. These are important factors to consider in future research.

Life satisfaction. Finally, life satisfaction was associated with all three relationship outcomes, including relationship adjustment, dedication, and psychological aggression. As with other findings, the directionality of these results are unclear and most likely bidirectional, such that relationships with higher satisfaction, commitment, and less negative interactions can lead to higher perceptions of life satisfaction, and that higher life satisfaction may help one become a better partner and lead to healthier and more stable relationships. Although these associations have been demonstrated with heterosexual couples (Stanley, Ragan, Rhoades, & Markman, 2012), this finding is important given the additional stressors sexual minority women face in their daily lives.

Partner effects for mental health. Surprisingly, no significant partner effects emerged from any analyses of relationship quality and mental health outcomes, providing no evidence that the perceptions of relationship quality by one's partner had any associations with one's own mental health. Thus, these associations may not be present in lesbian relationships despite evidence from several studies on heterosexual couples demonstrating partner effects (see Whisman & Baucom, 2009 for review). More research is necessary to replicate these null findings or to understand these processes more fully.

Moderation of relationship quality. Finally, this study investigated if relationship quality would moderate the relationship between sexual minority stress—outness, internalized homophobia, and discrimination—with the hypothesis that healthier relationship quality would buffer the effects of higher sexual minority stress. However, none of the interactions were significant, providing no evidence for these hypotheses. These findings speak to the need for research to evaluate these associations more thoroughly.

General Aim 3 Conclusions

Overall, findings from this study expand the relationship science foundation regarding lesbian relationship quality and individual mental health. Specifically, clear actor associations were prevalent for depressive symptoms, life satisfaction, and alcohol use. Implications from these findings include that couple interventions may be important means to not only increase relationship quality in lesbian couples, but also to improve mental health. These interventions may be particularly important to explore with lesbian couples because these relationships face additional challenges associated with being part

of an oppressed group. More research is clearly needed to explore these possibilities thoroughly.

Study Contributions

The current study sought to expand the basic science foundation of lesbian relationships with the goal to inform evidence-based relationship interventions. In general, findings demonstrated that processes typically considered important to couples more generally also appear important to lesbian relationship functioning. The strength of associations in the study ranged from small to large, with some of the strongest associations including how negative communication (overt and demand-withdrawal) were related to relationship quality. Other strong associations included how intimacy, fairness with household tasks, and approval from friends were associated with relationship quality. Weaker, albeit significant, associations were found across avoidant communication, positive communication, sexual satisfaction, approval from family, and support from family and friends.

Importantly, the processes shown to be important in lesbian couples in this study are typically addressed in traditional relationship interventions (e.g., PREP, IBCT, EFT, CBCT), indicating that minimal adaptations to core relationship processes in relationship programs and couple therapy approaches are necessary to serve lesbian couples. Results may also suggest that some couple properties may be universal in nature, an important finding for the couples field more generally.

At the same time, this study found that some factors specific to lesbian relationships may also be important to understanding lesbian relationship functioning.

Specifically, outness, families of choice, and coping with discrimination demonstrated small associations to lesbian relationship quality. More communal traits also demonstrated a small association with better communication behaviors and public ceremonies had a small association with dedication. These factors are not typically addressed in relationship interventions but seem compatible with many intervention goals that focus on helping couples solve problems, set realistic expectations, build support networks, and increase commitment. Programs that wish to target lesbian relationships, or to at least become more culturally sensitive and affirming to them, may benefit from considering how to incorporate discussions of these topics in informed ways.

Other patterns from this study included that partner experiences were often related to perceptions of psychological aggression, in which partner effects on psychological aggression were sometimes significant even when actor effects were not. These findings suggest that the overall assessment of hurtful communication patterns may be most associated with how individuals view their partners, as opposed to assessments of the self. These findings fit well with attribution theories (Bradbury & Fincham, 1990) and suggest that practitioners should help individuals understand their partners' experiences and develop empathy in order to reduce conflict. These recommendations are consistent with IBCT and EFT approaches that focus on understanding, empathy, and acceptance (Jacobson & Christensen, 1998; Johnson, 2008; Johnson et al., 1999; Hardtke et al., 2010).

Another notable pattern from this study was that dedication had fewer associations with the majority of predictors compared to the outcomes of relationship

adjustment and psychological aggression. Relationship adjustment and psychological aggression may be more malleable to every day interactions and individual experiences. Dedication, in contrast, may remain more stable and reflect a variety of factors, including tangible and social constraints that remain constant even if relationship quality wanes (Stanley et al., 2010). The only variables with clear associations with dedication compared to the other outcomes were commitment behaviors, particularly those involving public commitment ceremonies. These findings make sense when considering that commitment behaviors are expressions of dedication and reflect the obtaining of additional social constraints (Rhoades et al., 2015).

Overall, this study provides some of the first evaluation of actor-partner effects across relationship processes and heterosexist stressors in lesbian relationships. In general, actor effects were more prevalent across most findings, but for many processes—including outness, intimacy, and external support—partner effects were also significant. These findings provide novel information regarding how various individual characteristics may have dyadic associations in lesbian relationships.

Finally, this study provided evidence suggesting that relationship quality in lesbian relationships has associations with individual mental health outcomes. Lesbian couples are at risk for experiencing higher levels of psychological distress and psychopathology that is often associated with challenges related to sexual minority stress and lack of support from others (Lehavot & Simoni, 2011). Results from this study suggest that couple interventions should be explored as potential means to enhance life satisfaction and reduce depressive symptoms and alcohol use given the association

between these outcomes and relationship quality. Although numerous studies have demonstrated how such interventions can assist heterosexual couples (Whisman & Beach, 2012), research is still needed to investigate how relationship interventions may help individual wellbeing and mental health in lesbian couples. These future intervention efforts may benefit from incorporating culturally sensitive adaptations mentioned throughout this paper.

Limitations and future directions. All the data from this study were cross-sectional, limiting the ability to make directional conclusions. Longitudinal research is necessary to evaluate how these processes work over time and in order to make causal inferences. The sample was also comprised from female same-sex couples in the Denver area, so caution must be taken in generalizing these findings to other areas of the country. This might be particularly important when considering how the cultural acceptance of same-sex couples may vary by region and political climate. Participants in this study were predominantly white, middle class, and college educated, limiting interpretations of how these findings will translate to other demographic groups. For example, research has demonstrated that Black and Latino sexual minorities face a compounded risk for discrimination and often receive less acceptance from others for their sexual orientations (O'Donnell, Meyer, & Schwartz, 2011). Thus, the intersectionality of identities will be important to investigate within lesbian relationships.

Interpretations of specific results from this study also contain additional limitations. Regarding communication, the lack of reliability of the social support coding limited our abilities to test hypotheses regarding the role of support between partners, as

opposed to how couples discuss problem topics. Results from this study indicated that both positive and negative communication were significantly associated with relationship quality, but that negative communication was most important. It is still unclear how these processes may work in supportive conversations. In the future, it may be important to use a macro-level coding system to code these interactions, such as the Social Support Interaction Global Coding System (SCIS; Pizzamiglio, Julien, & Parent, 1991) that has been successfully utilized in coding lesbian support talk interactions in other studies (Julien et al., 2003). A macro-level coding system may help address some problems associated with the categorical approach of the coding system used in the current study.

Regarding intimacy, the measure used in this study more closely resembled positive aspects of closeness without differentiation between negative fusion. Measures that distinguish these concepts are currently quite time intensive for participants to fill out (e.g., California Inventory for Family Assessment; Werner & Green, 1999), yet they may be necessary to explore these components fully. The current study also used a new measure to better evaluate conceptualizations and frequency of sex. Future analyses with this measure could evaluate how specific sexual activities (oral sex, using sex toys, etc.) relate to overall sexual satisfaction and relationship quality. It may also be interesting to take into account whether the partner was giving or receiving pleasure from her partner and how that might relate to sexual satisfaction. Future studies with this measure may want to consider revising the conceptualization of sex questions to a more continuous scale (as opposed to yes/no) and to further assess how context may affect how women in these relationships define sex.

Furthermore, more research is needed to evaluate findings of this study that were non-significant. As was described in the Methods section, power analyses indicated that with a full desired sample size of 107, we were only 80% likely to capture medium effect sizes of .25 or larger. Power was even more limited when using couple level predictors and analyses of moderation (which were all non-significant). Research with larger sample sizes and through longitudinal designs are needed to evaluate null findings as well as replicate significant findings.

Finally, future research is necessary to evaluate how clinical recommendations from this study translate into clinical interventions, including relationship education programs and couple therapy. Recently, many of the recommendations from this study were piloted in a workshop for female same-sex couples (Whitton et al., 2013). Results indicated that compared to a waitlist control group, the program was associated with increases in relationship satisfaction and confidence as well as decreases in negative communication (Whitton et al., 2013). Other results from that pilot workshop included a high level of satisfaction with the program and qualitative feedback that the cultural adaptations were appropriate and helpful. More relationship programs are needed to continue investigating how practitioners may best meet the needs of lesbian couples, preferably through clinical trials that can evaluate which cultural adaptations are most helpful. Finally, no research on culturally sensitive therapy approaches for lesbian couples has been conducted, furthering the need for research to explore how to incorporate these findings in therapy settings. In sum, we hope the findings from this project can inform such future endeavors

in order to increase access to and the effectiveness of culturally sensitive relationship interventions for lesbian couples

Endnotes

¹ For the sake of brevity, we are using the term “lesbian” to describe women in relationships with women but recognize that the women in these relationships do not necessarily identify as lesbians regarding their sexual orientation. Similarly, we refer to relationships involving one man and one woman as “heterosexual” relationships, and relationships involving two men as “gay male” relationships.

² Although the support talk results are not presented due to low reliability, we ran APIMs with the coding system to predict relationship adjustment, dedication, and psychological aggression. No significant results emerged from these analyses.

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Appendix A: Tables

Table 1

Means, Standard Deviations, and Medians for Age, Personal Income, Length of Relationship, and Education Level and Percentages for Couples Cohabiting and Who Have Children

Measure	<i>M</i>	<i>SD</i>	<i>Mdn</i>	%
Age ^a	33.70	9.00	32.00	
Personal Income ^b	6.00	2.59	6.00	
Length of Relationship ^c	46.58	56.09	25.00	
Education Level ^d	15.77	2.27	16.00	
Cohabiting				77.67
Children				22.33

Note. *M* = mean; *SD* = standard deviation; α = Cronbach's alpha; % = Percent of couples who answered "yes"

^a Age in years; ^b Personal income scale score of 6 is approximately \$30,000-39,999 annually; ^c Length of relationship in months; ^d Education levels refers to years of school completed

Table 2

Percentages for Participating in Legal and Non-Legal Commitment Behaviors

Commitment Behavior	Yes
Legal Wedding	10.34
Civil Union	11.65
Commitment Ceremony	10.29
Domestic Partnership	10.45
Power of Attorney	6.97
Other Legal Protections	12.18

Table 3

Means, Standard Deviations, and Reliability for the Interactional Dimensions Coding System and Communication Patterns Questionnaire

Measure	<i>M</i>	<i>SD</i>	α
IDCS			.80 ^b
Positive Affect	6.28	0.99	.78
Negative Affect	1.74	0.83	.87
Problem Solving	5.80	1.00	.65
Denial	1.72	0.68	.64
Dominance	1.42	0.60	.71
Support Validation	6.13	0.97	.78
Conflict	1.51	0.84	.75
Withdrawal	1.28	0.57	.81
Overall Communication	6.35	1.02	.85
Positive Escalation ^a	4.38	1.62	.90
Negative Escalation ^a	1.67	1.19	.92
Commitment ^a	6.88	0.99	.83
Future Satisfaction ^a	6.18	1.04	.89
Future Stability ^a	6.44	0.98	.84
CPQ			
Demand	3.50	2.00	.70
Withdrawal	3.48	1.88	.75

Note. *M* = mean; *SD* = standard deviation; α = interrater reliability; IDCS = Interactional Dimensions Coding System; CPQ = Communication Patterns Questionnaire.

^a Dyadic Codes; ^b Mean interrater reliability across dimensions.

Table 4

Means, Standard Deviations, and Reliability for External Support, Intimate Safety Questionnaire, and Sexual Satisfaction Measures

Measure	<i>M</i>	<i>SD</i>	α
External Support	5.74	1.03	
Friends	6.02	1.02	.41
Family	5.47	1.51	.58
ISQ	4.32	0.42	.72
ISQ Sexual Intimacy	4.38	0.57	.69
Sex Measures			
Sexual Satisfaction	5.48	1.72	
Actual Frequency	6.57	1.78	
Ideal Frequency	7.84	1.14	
Frequency of Orgasm	6.38	1.99	
Division of Labor			
Perceived Fairness	5.41	1.16	.93
Contribution to Labor			
Feminine Tasks ^a			.51
Masculine Tasks ^a			.60
PAQ			
Feminine Characteristics	4.08	0.49	.73
Masculine Characteristics ^b	3.65	0.54	.70

Note. *M* = mean; *SD* = standard deviation; α = Cronbach's alpha; ISQ = Intimate Safety Questionnaire; PAQ = Personal Attributes.

^a Means and standard deviations not provided because scales were unreliable; ^b Reflects masculine subscale after removing one item.

Table 5

Percentage Scores for Frequency of Actual Sex, Ideal Sex, and Orgasm

Frequency Measure	1	2	3	4	5	6	7	8	9	10
Actual Sex	0.0	3.9	5.4	3.4	11.7	15.1	18.5	38.0	2.9	1.0
Ideal Sex	0.5	0.0	0.0	0.5	2.9	5.3	15.5	56.3	13.1	5.8
Orgasm	2.9	3.4	4.9	5.9	10.2	14.6	18.0	36.1	2.9	1.0

Note. The frequency scales for actual sex, ideal sex, and orgasm were 1 = Never, 2 = More than 6 months ago, 3 = Less than once in 6 months, 4 = Every other month, 5 = Once a month, 6 = Every other week, 7 = Once a week, 8 = More than once a week, 9 = once a day, 10 = more than once a day.

Table 6

Percentage Scores of Considering Different Sexual Activities as Having Sex, Ever Engaging in Those Sexual Activities, and Means and Standard Deviations of Frequency of Engagement

Sexual Activity	Consider Sex	Ever Engage	<i>M</i>	<i>SD</i>
Cuddle		99.0	9.13	1.47
Kiss on Lips		99.5	9.67	0.92
Making Out	4.9	98.5	7.98	1.93
Oral Sex	96.1	93.7	5.43	2.23
Hand-to-Genital	96.6	98.0	6.28	1.99
Genital-to-Genital	94.2	81.1	4.44	2.50
Anal Sex	86.9	28.8	1.91	1.78
Sex Toys	96.1	76.6	4.16	2.50
Joint Masturbation	62.0	62.7	3.34	2.39

Note. *M* = mean; *SD* = standard deviation; The frequency scales for all sexual activities were 1 = Never, 2 = More than 6 months ago, 3 = Less than once in 6 months, 4 = Every other month, 5 = Once a month, 6 = Every other week, 7 = Once a week, 8 = More than once a week, 9 = once a day, 10 = more than once a day.

Table 7

Means, Standard Deviations, and Reliability for Outness, Internalized Homophobia, and Faced Discrimination

Measure	<i>M</i>	<i>SD</i>	α
Outness	5.64	0.95	.87
Friends	6.13	1.06	.61
Work	5.56	1.56	.83
Family	5.78	1.22	.81
Religious Community	4.39	2.28	.95
Internalized Homophobia	2.02	0.54	.90
Connection to Community	3.04	0.96	.84
Public Identification	1.90	0.77	.85
Personal Feelings	1.38	0.51	.65
Moral and Religious	1.36	0.56	.66
Attitude Towards Others	1.83	0.82	.80
Faced Discrimination	1.90	0.67	.90
Harassment/Rejection	2.04	0.76	.82
Work/School	1.63	0.79	.83
Others	1.95	0.81	.80

Note. *M* = mean; *SD* = standard deviation; α = Cronbach's alpha.

Table 8

Means, Standard Deviations, and Reliability for Relationship Quality Measures and Mental Health

Measure	<i>M</i>	<i>SD</i>	α
Relationship Quality			
Relationship Adjustment	17.23	2.51	.75
Dedication	6.07	0.65	.80
Psychological Aggression ^a	1.96	1.55	.93
Relationship Confidence	6.23	0.91	.92
Taxon Measure	1.91	2.06	.72
Mental Health			
CESD	0.57	0.40	.88
Life Satisfaction	5.33	1.15	.85
AUDIT	6.55	5.28	.84

Note. *M* = mean; *SD* = standard deviation; α = Cronbach's alpha; CESD = Center for Epidemiological Studies-Depression Scale; AUDIT = Alcohol Use Disorder Identification Test

^a Combined psychological aggression measure of aggression towards and from partner subscales

Table 9*Correlations between Relationship Quality Variables for Partner 1 and Partner 2*

Measure	1	2	3	4	5	6	7	8
1. Relationship Adjustment	--	.41*	.67*	-.59*	-.71*	-.53*	-.48*	-.52*
2. Dedication	.55*	--	.54*	-.56*	-.22*	-.21*	-.15	-.18†
3. Confidence	.71*	.68*	--	-.70*	-.46*	-.32*	-.27*	-.30*
4. Likelihood Breakup	-.61*	-.54*	-.65*	--	.37*	.24*	.22*	.23*
5. Taxon	-.67*	-.33*	-.45*	.29*	--	.56*	.50*	.54*
6. Psy. Agg. Towards Partner	-.52*	-.26*	-.43*	.18†	.48*	--	.91*	.98*
7. Psy. Agg. From Partner	-.55*	-.30*	-.48*	.23*	.52*	.89*	--	.98*
8. Combined Psy. Agg.	-.55*	-.29*	-.47*	.21*	.52*	.97*	.97*	--

Note. Psy. Agg. = Psychological Aggression; Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 10

Pattern Matrix of Exploratory Factor Analysis for the Interactional Dimensions Coding System

Codes	Rotated Factor Loadings		
	Positive	Overt Negative	Avoidant Negative
Problem Solving	-1.00		
Overall Communication	-.81		
Support/Validation	-.80		
Positive Affect	-.64		
Dominance		.90	
Conflict		.70	
Negative Escalation		.53	.48
Withdraw			.84
Negative Affect			.56
Denial		.47	.48

Note: Factor loadings are only presented for loadings > .40; Loadings in bold reflect items loaded onto their respective factors.

Table 11

Structure Matrix of Exploratory Factor Analysis for the Interactional Dimensions Coding System

Codes	Rotated Factor Loadings		
	Positive	Overt Negative	Avoidant Negative
Problem Solving	-.93	-.49	-.61
Overall Communication	-.89		-.41
Support/Validation	-.89	-.56	-.50
Positive Affect	-.84	-.43	-.69
Dominance		.86	
Conflict	.59	.84	.56
Negative Escalation	.56	.71	.69
Withdraw	.52		.86
Negative Affect	.67	.51	.78
Denial	.46	.61	.62

Note: Factor loadings are only presented for loadings > .40. Loadings in bold reflect items loaded onto their respective factors.

Table 12

Correlations among Composite Scores of Interactional Dimensions Coding System

Composite Factor	1	2	3
1. Positive Communication	--		
2. Overt Negative Communication	-.41	--	
3. Avoidant Negative Communication	-.55	.30	--

Note. Factor analyses for the IDCS used the full sample and did not distinguish between Partner 1 or 2.

Table 13

Correlations between Demographic Variables and Relationship Quality for Partner 1 and Partner 2

Measure	1	2	3	4	5	6	7	8
1. Age	--	.18†	.08	.44*	.53*	-.02*	.28	-.02
2. Education	.06	--	.08	.35*	.12	-.12	-.14	-.11
3. Cohabitation	.10	.02	--	.16	.36*	.00	.24*	.30*
4. Income	.48*	.36*	.16	--	.38*	.12	.18†	-.14
5. Length	.54*	.12	.34*	.36*	--	.12	.14	-.04
6. Relationship Adjustment	-.07	.00	-.12	.09	-.11	--	.41*	-.52*
7. Dedication	.14	.11	.07	.22*	.03	.55*	--	-.18†
8. Psychological Aggression	-.03	-.05	.36*	-.06	.09	-.55*	-.29*	--

Note. Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 14

Correlations between Sexual Minority Stress Variables and Relationship Quality Variables for Partner 1 and Partner 2

Measure	1	2	3	4	5	6
1. Outness	--	-.51*	.11	-.03	-.05	.06
2. Internalized Homophobia	-.45*	--	.01	.02	-.06	-.01
3. Faced Discrimination	-.03	-.11	--	-.19†	-.18†	.17†
4. Relationship Adjustment	.35*	-.14	-.18†	--	.41*	-.52*
5. Dedication	.20*	-.02	-.09	.55*	--	-.18†
6. Psychological Aggression	-.16†	.12	.24*	-.55*	-.29*	--

Note. Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 15*Correlations between Outness Subscales for Partner 1 and Partner 2*

Outness Measure	1	2	3	4	5
1. Full Scale	--	.72*	.54*	.66*	.75*
2. Family	.74*	--	.20*	.14	.43*
3. Friends	.78*	.51*	--	.30*	.20
4. Work	.70*	.22*	.51*	--	.51*
5. Religious Community	.69*	.35†	.39*	.57*	--

Note. Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 16*Correlations between Internalized Homophobia Subscales for Partner 1 and Partner 2*

LIHS Measure	1	2	3	4	5	6
1. Full Scale	--	.76*	.82*	.62*	.49*	.68*
2. Connection to Lesbian Community	.73*	--	.40*	.33*	.17†	.37*
3. Public Identification as Lesbian	.74*	.21*	--	.46*	.29*	.42*
4. Personal Feelings about being a Lesbian	.68*	.37*	.48*	--	.38*	.38*
5. Moral and Religious Attitudes	.56*	.15	.40*	.44*	--	.39*
6. Attitude Towards Other Lesbians	.68*	.39*	.34*	.36*	.46*	--

Note. LIHS = Lesbian Internalized Homophobia Scale; Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.
 † $p < .10$, * $p < .05$

Table 17*Correlations between Faced Discrimination Subscales for Partner 1 and Partner 2*

Discrimination Measure	1	2	3	4
1. Full Scale	--	.92*	.78*	.87*
2. Harassment/Rejection	.91*	--	.54*	.68*
3. Work/School	.87*	.66*	--	.64*
4. Others	.77*	.57*	.58*	--

Note. Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 18*Correlations between External Support and Outness for Partner 1 and Partner 2*

Measure	1	2	3	4	5	6	7	8
1. Full Support Scale	--	.47*	.44*	.73*	.76*	.32*	.12	.44*
2. Friends Support	.65*	--	.11	.13	.05	.23*	.05	.11
3. Friends Approval	.66*	.42*	--	-.04	.31*	-.04	.06	-.03
4. Family Support	.76*	.33*	.21*	--	.41*	.26	.12	.35*
5. Family Approval	.72*	.13	.44*	.43*	--	.28	.06	.52*
6. Overall Outness	.38*	.31*	.39*	.19†	.23*	--	.54*	.72*
7. Friends Outness	.30	.32*	.31*	.22*	.05	.78*	--	.20*
8. Family Outness	.37*	.23*	.23*	.27*	.30*	.74*	.51*	--

Note. Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 19

Correlations between Gender Characteristics and Demand-Withdrawal Behaviors for Partner 1 and Partner 2

Measure	1	2	3	4	5	6
1. Feminine	--	.23*	-.18†	-.26*	-.21*	.00
2. Masculine	.10	--	-.35*	-.08	-.24*	-.04
3. Demand	-.17†	-.02	--	.24*	.68*	.15
4. Withdrawal	-.19†	-.06	.18†	--	.69*	.38*
5. D/W Total	-.28*	-.07	.66*	.65*	--	.41*
6. D/W Polarization	-.21*	-.12	.38*	.19†	.41*	--

Note. D/W = Demand-Withdrawal; Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal;.

† $p < .10$, * $p < .05$

Table 20

Correlations between Demand-Withdrawal Behaviors and Relationship Quality for Partner 1 and Partner 2

Measure	1	2	3	4	5	6	7
1. Demand	--	.24*	.68*	.15	-.37*	-.13	.51*
2. Withdrawal	.18†	--	.69*	.38*	-.37*	-.16	.39*
3. D/W Total	.66*	.65*	--	.41*	-.54*	-.15	.58*
4. D/W Polarization	.38*	.19†	.41*	--	-.26*	.17†	.24*
5. Relationship Adjustment	-.50*	-.37*	-.46*	-.26*	--	.41*	-.52*
6. Dedication	-.24*	-.20*	-.22*	-.08	.55*	--	-.18†
7. Psychological Aggression	.50*	.42*	.64*	.25*	-.55*	-.29*	--

Note. D/W = Demand-Withdrawal; Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 21

Correlations between Contributions to Household Labor, Fairness of Household Labor, and Relationship Quality for Partner 1 and Partner 2

Measure	1	2	3	4	5
1. Contribution to Household Labor	--	.26*	.08	-.05	.04
2. Fairness of Household Labor	.27*	--	.52*	.32*	-.32*
3. Relationship Adjustment	.15	.38*	--	.41*	-.52*
4. Dedication	.14	.31*	.55*	--	-.18†
5. Psychological Aggression	-.10	-.23*	-.55*	-.29*	--

Note. Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 22

Correlations between Mental Health Outcomes and Relationship Quality for Partner 1 and Partner 2

Measure	1	2	3	4	5	6
1. CESD	--	-.50*	.12	-.28*	-.07	.34*
2. Life Satisfaction	-.42*	--	-.31*	.37*	.29*	-.28*
3. AUDIT	.15	-.14	--	-.05	-.12	.25*
4. Relationship Adjustment	-.32*	.53*	-.10	--	.41*	-.52*
5. Dedication	-.22*	.40*	-.18†	.55*	--	-.18†
6. Psychological Aggression	.22*	-.28*	.22*	-.55*	-.29*	--

Note. CESD = Center for Epidemiological Studies-Depression Scale; AUDIT = Alcohol Use Disorder Identification Test; Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 23

Correlations between Sexual Satisfaction, Sexual Frequency, Ideal Sexual Frequency, Frequency of Orgasm, Intimacy, and Relationship Quality for Partner 1 and Partner 2

Measure	1	2	3	4	5	6	7	8
1. Sexual Satisfaction	--	.57*	.23*	.55*	.44*	.22*	.02	-.12
2. Actual Sex Frequency	.75*	--	.66*	.90*	.31*	.08	-.16	.00
3. Ideal Sex Frequency	.45*	.73*	--	.55*	.24*	-.01	-.05	.04
4. Frequency of Orgasm	.73*	.89*	.64*	--	.30*	.11	-.14	-.05
5. ISQ	.40*	.41*	.48*	.41*	--	.63*	.26*	-.41*
6. Relationship Adjustment	.23*	.21*	.30*	.16	.58*	--	.41*	-.52*
7. Dedication	.00	-.06	.10	-.00	.48*	.55*	--	-.18†
8. Psychological Aggression	-.20†	-.18†	-.18†	-.13	-.46*	-.55*	-.29*	--

Note. ISQ = Intimate Safety Questionnaire; Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 24

Correlations between Sexual Minority Stress and Mental Health Outcomes for Partner 1 and Partner 2

Measure	1	2	3	4	5	6
1. Outness	--	-.51*	.11	.11	-.10	.02
2. Internalized Homophobia	-.45*	--	.01	.04	-.11	-.06
3. Faced Discrimination	-.03	-.11	--	.31*	-.14	.02
4. CESD	-.25*	-.03	.15	--	-.50*	.12
5. Life Satisfaction	.30*	-.12	-.12	-.42*	--	-.31*
6. AUDIT	.20*	-.07	.11	.15	-.14	--

Note. CESD = Center for Epidemiological Studies-Depression Scale; AUDIT = Alcohol Use Disorder Identification Test; Partner 1 coefficients are displayed above the diagonal and Partner 2 coefficients are displayed below the diagonal.

† $p < .10$, * $p < .05$

Table 25

Actor-Partner Interdependence Models of Observed Positive Communication on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.25					
Actor Positive, B_1	0.46	0.21	.16	191	2.16	.032
Partner Positive, B_2	0.24	0.21	.09	191	1.16	.247
Random Effects						
Error, e_{ji}	6.06	0.67				<.001
ICC, Cov(e_1, e_2)	.49	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Positive, B_1	0.06	0.06	.08	170	0.96	.338
Partner Positive, B_2	-0.04	0.06	-.06	170	-0.71	.481
Random Effects						
Error, e_{ji}	0.43	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.98					
Actor Positive, B_1	-0.23	0.12	-.13	201	-1.92	.057
Partner Positive, B_2	-0.25	0.12	-.15	201	-2.15	.033
Random Effects						
Error, e_{ji}	2.28	0.27				<.001
ICC, Cov(e_1, e_2)	.66	.06				<.001

Note. Actor and partner effects were grand-mean centered.

Table 26

Actor-Partner Interdependence Models of Observed Overt Negative Communication on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.25					
Actor Overt Neg., B_1	-1.22	0.30	-.37	157	-4.11	<.001
Partner Overt Neg., B_2	0.27	0.30	.08	157	0.92	.358
Random Effects						
Error, e_{ji}	5.80	0.65				<.001
ICC, Cov(e_1, e_2)	.50	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Overt Neg., B_1	-0.12	0.09	-.13	137	-1.28	.204
Partner Overt Neg., B_2	0.04	0.09	.04	137	0.41	.683
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.98					
Actor Overt Neg., B_1	0.55	0.16	.27	177	3.39	.001
Partner Overt Neg., B_2	0.22	0.16	.11	177	1.34	.182
Random Effects						
Error, e_{ji}	2.12	0.25				<.001
ICC, Cov(e_1, e_2)	.64	.06				<.001

Note. Overt Neg. = Overt Negative Communication; Actor and partner effects were grand-mean centered.

Table 27

Actor-Partner Interdependence Models of Observed Avoidant Negative Communication on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.25					
Actor Avoid Neg., B_1	-0.69	0.32	-.16	193	-2.13	.034
Partner Avoid Neg., B_2	-0.62	0.32	-.14	193	-1.90	.059
Random Effects						
Error, e_{ji}	5.95	0.66				<.001
ICC, Cov(e_1, e_2)	.47	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Avoid Neg., B_1	-0.06	0.09	-.05	174	-0.65	.518
Partner Avoid Neg., B_2	0.03	0.09	.03	174	0.35	.726
Random Effects						
Error, e_{ji}	0.43	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.98					
Actor Avoid Neg., B_1	0.52	0.18	.19	200	2.84	.005
Partner Avoid Neg., B_2	0.41	0.18	.15	200	2.24	.026
Random Effects						
Error, e_{ji}	2.21	0.26				<.001
ICC, Cov(e_1, e_2)	.65	.06				<.001

Note. Avoid Neg. = Avoidant Negative Communication; Actor and partner effects were grand-mean centered.

Table 28

Actor-Partner Interdependence Models of Observed Positive, Overt Negative, and Avoidant Negative Communication on Relationship Quality

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.25					
Actor Positive, <i>B</i> ₁	0.05	0.30	.02	196	0.18	.859
Partner Positive, <i>B</i> ₂	-0.05	0.30	-.02	196	-0.16	.872
Actor Overt Neg., <i>B</i> ₃	-1.03	0.40	-.31	195	-2.61	.010
Partner Overt Neg., <i>B</i> ₄	0.44	0.40	.13	195	1.11	.267
Actor Avoid Neg., <i>B</i> ₅	-0.28	0.54	-.06	177	-0.53	.598
Partner Avoid Neg., <i>B</i> ₆	-0.30	0.54	-.07	177	-0.56	.579
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	5.89	0.67				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.50	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor Positive, <i>B</i> ₁	0.02	0.09	.02	191	0.20	.838
Partner Positive, <i>B</i> ₂	-0.07	0.09	-.09	191	-0.78	.438
Actor Overt Neg., <i>B</i> ₃	-0.19	0.11	-.23	193	-1.74	.084
Partner Overt Neg., <i>B</i> ₄	-0.06	0.11	-.07	193	-0.53	.599
Actor Avoid Neg., <i>B</i> ₅	0.10	0.15	.09	195	0.69	.490
Partner Avoid Neg., <i>B</i> ₆	0.12	0.15	.10	195	0.80	.424
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	0.43	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.29	.09				.002
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.98					
Actor Positive, <i>B</i> ₁	0.14	0.17	.08	183	0.80	.427
Partner Positive, <i>B</i> ₂	-0.02	0.17	-.01	183	-0.11	.913
Actor Overt Neg., <i>B</i> ₃	0.59	0.23	.29	180	2.57	.011
Partner Overt Neg., <i>B</i> ₄	0.23	0.23	.11	180	0.99	.324
Actor Avoid Neg., <i>B</i> ₅	0.17	0.32	.06	157	0.52	.602
Partner Avoid Neg., <i>B</i> ₆	-0.09	0.32	-.03	157	-0.28	.778
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	2.16	0.26				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.64	.06				<.001

Note. Overt Neg. = Overt Negative Communication; Avoid Neg. = Avoidant Negative Communication; Actor and partner effects were grand-mean centered.

Table 29

Multiple Level Models of Demand-Withdrawal Total Behaviors on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.25					
D/W Total, Z_1	-0.24	0.03	-.50	100	-7.06	<.001
Random Effects						
Error, e_{ji}	4.72	0.50				<.001
ICC, Cov(e_1, e_2)	.36	.09				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
D/W Total, Z_1	-0.02	0.01	-.18	100	-2.31	.023
Random Effects						
Error, e_{ji}	0.41	0.04				<.001
ICC, Cov(e_1, e_2)	.28	.09				.002
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
D/W Total, Z_1	0.18	0.02	.61	100	8.77	<.001
Random Effects						
Error, e_{ji}	1.55	0.17				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001

Note. D/W Total = Demand-Withdrawal Total; Predictors were grand-mean centered; D/W = Demand-withdrawal.

Table 30

Multiple Level Models of Demand-Withdrawal Polarization on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.25					
D/W Polar., Z_1	-0.22	0.07	-.26	100	-3.14	.002
Random Effects						
Error, e_{ji}	5.89	0.65				<.001
ICC, Cov(e_1, e_2)	.49	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
D/W Polar., Z_1	0.01	0.02	.05	100	0.65	.515
Random Effects						
Error, e_{ji}	0.43	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
D/W Polar., Z_1	0.13	0.05	.25	100	2.77	.007
Random Effects						
Error, e_{ji}	2.30	0.28				<.001
ICC, Cov(e_1, e_2)	.67	.06				<.001

Note. D/W Polar. = Demand-Withdrawal Polarization; Predictors were grand-mean centered; D/W = Demand-Withdrawal.

Table 31*Multilevel Models of Masculine and Feminine Characteristics on Demanding and Withdrawing Behaviors*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Demand						
1. Fixed Effects						
Intercept, B_0	3.51					
Actor Feminine, B_1	-0.78	0.29	-.19	203	-2.73	.007
Random Effects						
Error, e_{ji}	3.90	0.39				<.001
ICC, Cov(e_1, e_2)	-.07	.10				.493
2. Fixed Effects						
Intercept, B_0	3.50					
Actor Masculine, B_1	-0.65	0.26	-.18	203	-2.54	.012
Random Effects						
Error, e_{ji}	3.89	0.39				<.001
ICC, Cov(e_1, e_2)	-.02	.10				.855
Withdraw						
3. Fixed Effects						
Intercept, B_0	3.48					
Actor Feminine, B_1	-0.85	0.26	-.22	202	-3.22	.002
Random Effects						
Error, e_{ji}	3.39	0.34				<.001
ICC, Cov(e_1, e_2)	.00	.10				.975
4. Fixed Effects						
Intercept, B_0	3.48					
Actor Masculine, B_1	-0.21	0.24	-.06	204	-0.88	.378
Random Effects						
Error, e_{ji}	3.54	0.35				<.001
ICC, Cov(e_1, e_2)	.02	.10				.848

Note. Actor and partner effects were grand-mean centered.

Table 32

Multilevel Models of Actor and Partner Masculine and Feminine Characteristics on Demanding and Withdrawing Behaviors

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Demand						
Fixed Effects						
Intercept, B_0	3.50					
Actor Feminine, B_1	-0.69	0.29	-.17	200	-2.41	.017
Actor Masculine, B_2	-0.53	0.25	-.14	199	-2.07	.040
Partner Feminine, B_3	-0.86	0.28	-.21	200	-3.05	.003
Partner Masculine, B_4	-0.11	0.25	-.03	199	-0.45	.650
Random Effects						
Error, e_{ji}	3.68	0.37				<.001
ICC, Cov(e_1, e_2)	-.08	.10				.397
Withdraw						
Fixed Effects						
Intercept, B_0	3.48					
Actor Feminine, B_1	-0.87	0.27	-.22	199	-3.21	.002
Actor Masculine, B_2	-0.07	0.24	-.02	201	-0.29	.771
Partner Feminine, B_3	-0.28	0.27	-.07	199	-1.02	.307
Partner Masculine, B_4	-0.31	0.24	-.09	201	-1.28	.201
Random Effects						
Error, e_{ji}	3.38	0.34				<.001
ICC, Cov(e_1, e_2)	-.01	.10				.943

Note. Actor and partner effects were grand-mean centered.

Table 33

Linear Regressions of Gender Polarization between Partners on Demand-Withdrawal Total Behaviors and Demand-Withdrawal Polarization

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Demand-Withdraw Total						
Constant	13.94					
PAQ Polarization	1.18	0.84	.14	101	1.42	.160
Demand-Withdraw Polarization						
Constant	3.37					
PAQ Polarization	0.81	0.48	.17	101	1.69	.095

Note. PAQ Polarization = Personal Attributes Questionnaire Gender Polarization; Independent variables were grand-mean centered.

Table 34

Actor-Partner Interdependence Models of Full External Support Scale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.22					
Actor Gen. Support, B_1	0.63	0.16	.26	177	3.95	<.001
Partner Gen. Support, B_2	0.39	0.16	.16	177	2.47	.015
Random Effects						
Error, e_{ji}	5.70	0.63				<.001
ICC, Cov(e_1, e_2)	.47	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Gen. Support, B_1	0.10	0.04	.15	193	2.24	.026
Partner Gen. Support, B_2	-0.02	0.04	-.03	193	-0.42	.674
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.31	.09				<.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor Gen. Support, B_1	-0.30	0.10	-.20	151	-3.04	.003
Partner Gen. Support, B_2	-0.40	0.10	-.26	151	-4.12	<.001
Random Effects						
Error, e_{ji}	2.15	0.26				<.001
ICC, Cov(e_1, e_2)	.65	.06				<.001

Note. Gen. Support = Full External Support Scale. Actor and partner effects were grand-mean centered.

Table 35*Actor-Partner Interdependence Models of Social Support from Friends on Relationship Adjustment, Dedication, and Psychological Aggression*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor Friend Sup., B_1	0.35	0.12	.20	173	3.03	.003
Partner Friend Sup., B_2	0.05	0.12	.03	173	0.45	.653
Random Effects						
Error, e_{ji}	6.09	0.68				<.001
ICC, Cov(e_1, e_2)	.52	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Friend Sup., B_1	0.03	0.03	.06	196	0.83	.406
Partner Friend Sup., B_2	-0.02	0.03	-.03	196	-0.50	.619
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor Friend Sup., B_1	-0.03	0.07	-.03	148	-0.41	.681
Partner Friend Sup., B_2	-0.08	0.07	-.07	148	-1.11	.270
Random Effects						
Error, e_{ji}	2.41	0.29				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. Friend Sup. = Friend Support. Actor and partner effects were grand-mean centered.

Table 36

Actor-Partner Interdependence Models of Relationship Approval from Friends on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Actor Friend Apr., <i>B</i> ₁	0.88	0.14	.39	195	6.37	<.001
Partner Friend Apr., <i>B</i> ₂	0.42	0.14	.19	195	3.05	.003
Random Effects						
Error, <i>e</i> _{ji}	4.98	0.54				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.42	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor Friend Apr., <i>B</i> ₁	0.13	0.04	.21	202	3.14	.002
Partner Friend Apr., <i>B</i> ₂	0.02	0.04	.04	202	0.59	.555
Random Effects						
Error, <i>e</i> _{ji}	0.40	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.29	.09				.002
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor Friend Apr., <i>B</i> ₁	-0.28	0.09	-.20	164	-3.14	.002
Partner Friend Apr., <i>B</i> ₂	-0.30	0.09	-.21	164	-3.39	.001
Random Effects						
Error, <i>e</i> _{ji}	2.17	0.26				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.65	.06				<.001

Note. Friend Apr. = Friend Approval. Actor and partner effects were grand-mean centered.

Table 37

Actor-Partner Interdependence Models of Social Support from Family on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor Family Sup., B_1	0.11	0.09	.09	154	1.20	.232
Partner Family Sup., B_2	0.13	0.09	.10	154	1.41	.160
Random Effects						
Error, e_{ji}	6.26	0.70				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Family Sup., B_1	0.01	0.02	.04	178	0.50	.617
Partner Family Sup., B_2	-0.01	0.02	-.04	178	-0.58	.565
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor Family Sup., B_1	-0.17	0.06	-.20	137	-3.00	.003
Partner Family Sup., B_2	-0.23	0.06	-.28	137	-4.16	<.001
Random Effects						
Error, e_{ji}	2.15	0.26				<.001
ICC, Cov(e_1, e_2)	.65	.06				<.001

Note. Family Sup. = Family Support. Actor and partner effects were grand-mean centered.

Table 38

Actor-Partner Interdependence Models of Relationship Approval from Family on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.21					
Actor Family Apr., <i>B</i> ₁	0.22	0.10	.15	157	2.10	.038
Partner Family Apr., <i>B</i> ₂	0.21	0.10	.14	157	2.05	.042
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	6.10	0.68				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.49	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor Family Apr., <i>B</i> ₁	0.06	0.03	.15	179	2.07	.040
Partner Family Apr., <i>B</i> ₂	0.00	0.03	.00	179	0.01	.996
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	0.42	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.31	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor Family Apr., <i>B</i> ₁	-0.15	0.06	-.16	135	-2.32	.022
Partner Family Apr., <i>B</i> ₂	-0.15	0.06	-.16	135	-2.28	.024
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	2.32	0.28				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.67	.05				<.001

Note. Family Apr. = Family Approval; Actor and partner effects were grand-mean centered.

Table 39

Actor-Partner Interdependence Models of Contributions to Household Labor on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>T</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.18					
Actor Contrib., <i>B</i> ₁	0.18	0.13	.07	103	1.34	.183
Random Effects						
Error, <i>e</i> _{ji}	6.47	0.74				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.51	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.08					
Actor Contrib., <i>B</i> ₁	0.00	0.04	.00	114	0.01	.990
Random Effects						
Error, <i>e</i> _{ji}	0.43	0.05				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.27	.09				.004
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	2.03					
Actor Contrib., <i>B</i> ₁	-0.02	0.07	-.01	100	-0.30	.764
Random Effects						
Error, <i>e</i> _{ji}	2.43	0.30				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.67	.06				<.001

Note. Actor Contrib. = Actor's contribution to labor score with lower scores indicating more actor contribution and higher scores indicating more partner contribution; Predictors were grand-mean centered.

Table 40

Actor-Partner Interdependence Models of Perceptions of Fairness of Household Labor on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>T</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.20					
Actor Fairness., <i>B</i> ₁	0.83	0.13	.39	182	6.43	<.001
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	5.17	0.57				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.46	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.08					
Actor Fairness., <i>B</i> ₁	0.17	0.04	.30	197	4.55	<.001
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	0.38	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.23	.10				.016
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	2.00					
Actor Fairness., <i>B</i> ₁	-0.26	0.07	-0.19	154	-3.46	.001
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	2.23	0.27				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.65	.06				<.001

Note. Actor Fairness = Actor's perceptions of fairness regarding household labor distribution; Predictors were grand-mean centered.

Table 41

Multilevel Models of Contribution to Household Labor on Perceptions of Fairness of Household Labor

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>T</i>	<i>p</i>
Fixed Effects						
Intercept, B_0	5.43					
Actor Contrib., B_1	0.27	0.08	.23	110	3.43	.001
Random Effects						
Error, e_{ji}	1.29	0.13				<.001
ICC, Cov(e_1, e_2)	.15	.11				.146

Note. Actor Contrib. = Actor's contribution to labor score with lower scores indicating more actor contribution and higher scores indicating more partner contribution; Predictors were grand-mean centered.

Table 42

Actor-Partner Interdependence Models of Intimacy on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor ISQ, B_1	3.43	0.32	.57	194	10.59	<.001
Partner ISQ, B_2	0.74	0.32	.12	194	2.29	.023
Random Effects						
Error, e_{ji}	3.95	0.43				<.001
ICC, Cov(e_1, e_2)	0.45	0.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor ISQ, B_1	0.56	0.10	.36	203	5.55	<.001
Partner ISQ, B_2	0.01	0.10	.01	203	0.08	.939
Random Effects						
Error, e_{ji}	0.37	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor ISQ, B_1	-1.39	0.22	-.37	173	-6.39	<.001
Partner ISQ, B_2	-0.82	0.22	-.22	173	-3.78	<.001
Random Effects						
Error, e_{ji}	1.86	0.22				<.001
ICC, Cov(e_1, e_2)	.61	.06				<.001

Note. ISQ = Intimate Safety Questionnaire; Actor and partner effects were grand-mean centered.

Table 43

Multilevel Models of Actor Linear and Actor Quadratic Intimacy Terms on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.34					
Linear ISQ, B_1	2.91	0.37	.48	192	7.82	<.001
Quadratic ISQ, B_2	-0.63	0.36	-.04	169	-1.74	.083
Random Effects						
Error, e_{ji}	4.07	0.45				<.001
ICC, Cov(e_1, e_2)	.48	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.09					
Linear ISQ, B_1	0.52	0.12	.33	203	4.35	<.001
Quadratic ISQ, B_2	-0.09	0.12	-.02	191	-0.76	.448
Random Effects						
Error, e_{ji}	0.37	0.04				<.001
ICC, Cov(e_1, e_2)	.31	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.92					
Linear ISQ, B_1	-0.87	0.24	-.23	166	-3.66	.000
Quadratic ISQ, B_2	0.27	0.22	.03	143	1.20	.231
Random Effects						
Error, e_{ji}	2.04	0.25				<.001
ICC, Cov(e_1, e_2)	.64	.06				<.001

Note. ISQ = Intimate Safety Questionnaire; All predictors were grand-mean centered.

Table 44*Actor-Partner Interdependence Models of Sexual Satisfaction on Relationship Adjustment, Dedication, and Psychological Aggression*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Actor Sex Sat., <i>B</i> ₁	0.23	0.11	.16	186	2.08	.039
Partner Sex Sat., <i>B</i> ₂	0.16	0.11	.11	186	1.51	.133
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	6.21	0.71				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.50	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.06					
Actor Sex Sat., <i>B</i> ₁	0.00	0.03	.01	164	0.11	.912
Partner Sex Sat., <i>B</i> ₂	0.01	0.03	.04	164	0.43	.668
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	0.42	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.27	.09				.004
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.98					
Actor Sex Sat., <i>B</i> ₁	-0.10	0.06	-.11	189	-1.54	.125
Partner Sex Sat., <i>B</i> ₂	-0.06	0.06	-.07	189	-0.99	.325
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	2.39	0.29				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.67	.06				<.001

Note. Sex Sat. = Sexual Satisfaction; Actor and partner effects were grand-mean centered.

Table 45

Multilevel Models of Individual Actual Sexual Frequency, Discrepancy between Ideal Frequency and Actual Frequency, and Intimacy with Sex on Sexual Satisfaction

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Fixed Effects						
Intercept, B_0	5.47					
Actual Frequency, B_1	0.30	0.09	.31	189	3.49	.001
Discrepancy, B_2	-0.42	0.11	-.31	194	-3.87	<.001
Intimacy with Sex, B_3	0.78	0.19	.24	195	4.14	<.001
Random Effects						
Error, e_{ji}	1.48	0.15				<.001
ICC, Cov(e_1, e_2)	.20	.10				.056

Note. All predictors were actor variables and grand-mean centered.

Table 46

Actor-Partner Interdependence Models of General Outness on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.21					
Actor Outness, B_1	0.40	0.18	.15	175	2.26	0.025
Partner Outness, B_2	0.26	0.18	.10	175	1.46	0.147
Random Effects						
Error, e_{ji}	6.12	0.68				<.001
ICC, Cov(e_1, e_2)	.50	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Outness, B_1	0.05	0.05	.08	195	1.15	0.254
Partner Outness, B_2	-0.05	0.05	-.07	195	-1.05	0.296
Random Effects						
Error, e_{ji}	0.42	0.42				<.001
ICC, Cov(e_1, e_2)	.31	.09				<.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.97					
Actor Outness, B_1	-0.07	0.11	-.04	148	-0.66	0.508
Partner Outness, B_2	-0.10	0.11	-.06	148	-0.93	0.355
Random Effects						
Error, e_{ji}	2.43	0.29				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. Actor and partner effects were grand-mean centered.

Table 47*Actor-Partner Interdependence Models of Outness to Friends on Relationship Adjustment, Dedication, and Psychological Aggression*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor Out. Friends, B_1	0.33	0.16	.14	159	2.00	.047
Partner Out. Friends, B_2	0.39	0.16	.17	159	2.40	.018
Random Effects						
Error, e_{ji}	6.08	0.67				<.001
ICC, Cov(e_1, e_2)	.49	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Out. Friends, B_1	0.00	0.04	.01	182	0.08	.937
Partner Out. Friends, B_2	-0.02	0.04	-.04	182	-0.52	.606
Random Effects						
Error, e_{ji}	0.43	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	2.03					
Actor Out. Friends, B_1	-0.04	0.11	-.03	143	-0.40	.689
Partner Out. Friends, B_2	-0.26	0.11	-.17	143	-2.43	.016
Random Effects						
Error, e_{ji}	2.51	0.29				<.001
ICC, Cov(e_1, e_2)	.62	.06				<.001

Note. Out. Friends = Outness to Friends; Actor and partner effects were grand-mean centered.

Table 48

Actor-Partner Interdependence Models of Outness at Work on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Actor Out. Work, <i>B</i> ₁	0.25	0.12	.16	156	2.19	.030
Partner Out. Work, <i>B</i> ₂	0.23	0.12	.14	156	1.98	.049
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	6.39	0.76				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.51	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.05					
Actor Out. Work, <i>B</i> ₁	0.09	0.03	.22	170	2.98	.003
Partner Out. Work, <i>B</i> ₂	0.00	0.03	-.01	170	-0.15	.885
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	0.43	0.05				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.36	.09				<.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.92					
Actor Out. Work, <i>B</i> ₁	0.00	0.07	.00	130	0.02	.988
Partner Out. Work, <i>B</i> ₂	-0.04	0.07	-.04	130	-0.55	.587
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	2.44	0.32				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.70	.05				<.001

Note. Out. Work = Outness to Work; Actor and partner effects were grand-mean centered.

Table 49

Actor-Partner Interdependence Models of Outness to Family on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.24					
Actor Out. Family, B_1	0.08	0.14	.04	167	0.55	.584
Partner Out. Family, B_2	0.03	0.14	.01	167	0.20	.841
Random Effects						
Error, e_{ji}	6.35	0.72				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Out. Family, B_1	-0.02	0.04	-.03	190	-0.44	.664
Partner Out. Family, B_2	-0.03	0.04	-.05	190	-0.70	.487
Random Effects						
Error, e_{ji}	0.43	0.05				<.001
ICC, Cov(e_1, e_2)	.31	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor Out. Family, B_1	-0.01	0.09	-.01	143	-0.09	.930
Partner Out. Family, B_2	-0.04	0.09	-.04	143	-0.52	.607
Random Effects						
Error, e_{ji}	2.41	0.29				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. Out. Family = Outness to Family; Actor and partner effects were grand-mean centered.

Table 50

Actor-Partner Interdependence Models of Outness to Religious Community on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.58					
Actor Out. Religious, B_1	0.12	0.31	.11	17	0.39	.700
Partner Out. Religious, B_2	-0.10	0.31	-.09	17	-0.32	.753
Random Effects						
Error, e_{ji}	6.48	2.23				.004
ICC, Cov(e_1, e_2)	.45	.25				.070
Dedication						
Fixed Effects						
Intercept, B_0	6.30					
Actor Out. Religious, B_1	-0.01	0.05	-.03	14	-0.20	.842
Partner Out. Religious, B_2	0.02	0.05	.07	14	0.43	.674
Random Effects						
Error, e_{ji}	0.11	0.04				.001
ICC, Cov(e_1, e_2)	.07	.31				.829
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.58					
Actor Out. Religious, B_1	-0.08	0.13	-.11	18	-0.60	.555
Partner Out. Religious, B_2	-0.09	0.13	-.13	18	-0.68	.506
Random Effects						
Error, e_{ji}	1.26	0.44				.005
ICC, Cov(e_1, e_2)	.51	.23				.026

Note. Out. Religious = Outness to Religious Community; Actor and partner effects were grand-mean centered.

Table 51*Actor-Partner Interdependence Models of Internalized Homophobia on Relationship Adjustment, Dedication, and Psychological Aggression*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Actor LIHS, <i>B</i> ₁	-0.28	0.32	-.06	188	-0.90	.371
Partner LIHS, <i>B</i> ₂	0.06	0.32	.01	188	0.20	.844
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	6.34	0.71				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.52	.07				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor LIHS, <i>B</i> ₁	-0.10	0.08	-.08	202	-1.23	.219
Partner LIHS, <i>B</i> ₂	0.20	0.08	.17	202	2.45	.015
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	0.41	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.33	.09				<.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor LIHS, <i>B</i> ₁	0.15	0.19	.05	162	0.80	.423
Partner LIHS, <i>B</i> ₂	-0.03	0.19	-.01	162	-0.17	.867
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	2.42	0.29				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.69	.05				<.001

Note. LIHS =Lesbian Internalized Homophobia Scale; Actor and partner effects were grand-mean centered.

Table 52

Actor-Partner Interdependence Models of Internalized Homophobia – Connection to Lesbian Community Subscale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Actor LIHS Com., <i>B</i> ₁	-0.02	0.18	-.01	182	-0.10	.921
Partner LIHS Com., <i>B</i> ₂	0.17	0.18	.06	182	0.94	.348
Random Effects						
Error, <i>e</i> _{ji}	6.34	0.71				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.52	.07				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor LIHS Com., <i>B</i> ₁	-0.01	0.05	-.01	201	-0.15	.879
Partner LIHS Com., <i>B</i> ₂	0.07	0.05	.11	201	1.55	.124
Random Effects						
Error, <i>e</i> _{ji}	0.42	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor LIHS Com., <i>B</i> ₁	-0.01	0.11	.00	155	-0.07	.946
Partner LIHS Com., <i>B</i> ₂	-0.09	0.11	-.06	155	-0.84	.403
Random Effects						
Error, <i>e</i> _{ji}	2.42	0.29				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.68	.05				<.001

Note. LIHS Com. = Connection with Lesbian Community Subscale; Actor and partner effects were grand-mean centered.

Table 53

Actor-Partner Interdependence Models of Internalized Homophobia – Public Identification as a Lesbian Subscale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor LIHS Pub., B_1	-0.21	0.22	-.06	184	-0.93	.351
Partner LIHS Pub., B_2	-0.07	0.22	-.02	184	-0.32	.749
Random Effects						
Error, e_{ji}	6.33	0.71				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor LIHS Pub., B_1	-0.09	0.06	-.10	201	-1.49	.137
Partner LIHS Pub., B_2	0.14	0.06	.16	201	2.39	.018
Random Effects						
Error, e_{ji}	0.41	0.04				<.001
ICC, Cov(e_1, e_2)	.33	.09				<.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor LIHS Pub., B_1	0.03	0.13	.02	157	0.23	.819
Partner LIHS Pub., B_2	-0.01	0.13	-.01	157	-0.08	.935
Random Effects						
Error, e_{ji}	2.43	0.29				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. LIHS Pub. = Public Identification as a Lesbian Subscale. Actor and partner effects were grand-mean centered.

Table 54

Actor-Partner Interdependence Models of Internalized Homophobia – Personal Feelings About being a Lesbian Subscale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor LIHS Feel., B_1	-0.50	0.34	-.10	164	-1.45	.149
Partner LIHS Feel., B_2	-0.23	0.34	-.05	164	-0.68	.498
Random Effects						
Error, e_{ji}	6.28	0.70				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor LIHS Feel., B_1	-0.08	0.09	-.06	187	-0.91	.366
Partner LIHS Feel., B_2	0.14	0.09	.11	187	1.63	.105
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.32	.09				<.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor LIHS Feel., B_1	0.25	0.21	.08	140	1.17	.244
Partner LIHS Feel., B_2	0.11	0.21	.04	140	0.54	.593
Random Effects						
Error, e_{ji}	2.41	0.29				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. LIHS Feel. = Personal Feelings about being a Lesbian Subscale; Actor and partner effects were grand-mean centered.

Table 55

Actor-Partner Interdependence Models of Internalized Homophobia – Moral and Religious Attitudes Subscale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor LIHS Mor., B_1	-0.01	0.30	.00	188	-0.04	.965
Partner LIHS Mor., B_2	-0.15	0.30	-.03	188	-0.49	.623
Random Effects						
Error, e_{ji}	6.36	0.71				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor LIHS Mor., B_1	0.02	0.08	.02	203	0.24	.812
Partner LIHS Mor., B_2	0.10	0.08	.09	203	1.25	.213
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor LIHS Mor., B_1	-0.07	0.18	-.03	160	-0.41	.684
Partner LIHS Mor., B_2	0.13	0.18	.05	160	0.71	.477
Random Effects						
Error, e_{ji}	2.42	0.29				<.001
ICC, Cov(e_1, e_2)	.69	.05				<.001

Note. LIHS Mor. = Moral and Religious Attitudes about being a Lesbian Subscale; Actor and partner effects were grand-mean centered.

Table 56

Actor-Partner Interdependence Models of Internalized Homophobia – Negative Attitudes Toward Other Lesbians Subscale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>Df</i>	<i>T</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor LIHS Others, B_1	-0.17	0.21	-.06	196	-0.83	.407
Partner LIHS Others, B_2	0.02	0.21	.01	196	0.09	.926
Random Effects						
Error, e_{ji}	6.35	0.71				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor LIHS Others, B_1	-0.06	0.06	-.07	202	-1.00	.321
Partner LIHS Others, B_2	0.05	0.06	.06	202	0.89	.377
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.31	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Actor LIHS Others, B_1	0.33	0.12	.17	170	2.71	.007
Partner LIHS Others, B_2	0.03	0.12	.02	170	0.26	.794
Random Effects						
Error, e_{ji}	2.35	0.28				<.001
ICC, Cov(e_1, e_2)	.69	.05				<.001

Note. LIHS = Negative Attitudes Towards Other Lesbians Subscales; Actor and partner effects were grand-mean centered.

Table 57

Actor-Partner Interdependence Models of Faced Discrimination Full Scale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.24					
Actor Discrim., <i>B</i> ₁	-0.62	0.25	-.16	176	-2.45	.015
Partner Discrim., <i>B</i> ₂	-0.59	0.25	-.16	176	-2.36	.020
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	6.04	0.67				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.48	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor Discrim., <i>B</i> ₁	-0.13	0.07	-.13	195	-1.94	.053
Partner Discrim., <i>B</i> ₂	-0.03	0.07	-.03	195	-0.39	.694
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	0.42	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor Discrim., <i>B</i> ₁	0.41	0.15	.18	151	2.71	.008
Partner Discrim., <i>B</i> ₂	0.55	0.15	.24	151	3.65	<.001
Random Effects						
Error, <i>e</i> _{<i>ji</i>}	2.21	0.26				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.65	.06				<.001

Note. Discrim. = Full Faced Discrimination Scale; Actor and partner effects were grand-mean centered.

Table 58

Actor-Partner Interdependence Models of Faced Discrimination – Harassment and Rejection Subscale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.24					
Actor Hars/Rejc., <i>B</i> ₁	-0.41	0.23	-.13	168	-1.83	.070
Partner Hars/Rejc, <i>B</i> ₂	-0.43	0.23	-.13	168	-1.90	.060
Random Effects						
Error, <i>e</i> _{ji}	6.20	0.69				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.50	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor Hars/Rejc., <i>B</i> ₁	-0.05	0.06	-.06	190	-0.87	.387
Partner Hars/Rejc, <i>B</i> ₂	0.00	0.06	.00	190	-0.03	.977
Random Effects						
Error, <i>e</i> _{ji}	0.43	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor Hars/Rejc., <i>B</i> ₁	0.34	0.14	.16	145	2.46	.015
Partner Hars/Rejc, <i>B</i> ₂	0.43	0.14	.21	145	3.15	.002
Random Effects						
Error, <i>e</i> _{ji}	2.26	0.27				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.66	.06				<.001

Note. Hars/Rejc. = Harassment and Rejection Discrimination Subscale; Actor and partner effects were grand-mean centered.

Table 59*Actor-Partner Interdependence Models of Faced Discrimination – Work and School Subscale on Relationship Adjustment, Dedication, and Psychological Aggression*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Actor Work/Sch., <i>B</i> ₁	-0.43	0.22	-.14	166	-2.02	.045
Partner Work/Sch., <i>B</i> ₂	-0.53	0.22	-.17	166	-2.45	.015
Random Effects						
Error, <i>e</i> _{ji}	6.06	0.67				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.49	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor Work/Sch., <i>B</i> ₁	-0.16	0.06	-.20	188	-2.89	.004
Partner Work/Sch., <i>B</i> ₂	-0.02	0.06	-.03	188	-0.44	.662
Random Effects						
Error, <i>e</i> _{ji}	0.41	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor Work/Sch., <i>B</i> ₁	0.32	0.13	.16	143	2.43	.016
Partner Work/Sch., <i>B</i> ₂	0.41	0.13	.21	143	3.17	.002
Random Effects						
Error, <i>e</i> _{ji}	2.25	0.27				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.66	.06				<.001

Note. Work/Sch. = Discrimination at Work or School Subscale; Actor and partner effects were grand-mean centered.

Table 60

Actor-Partner Interdependence Models of Faced Discrimination –From Others Subscale on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Actor Others., B_1	-0.54	0.20	-.18	190	-2.66	.009
Partner Others., B_2	-0.29	0.20	-.09	190	-1.42	.158
Random Effects						
Error, e_{ji}	6.05	0.67				<.001
ICC, Cov(e_1, e_2)	.49	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Others., B_1	-0.10	0.06	-.13	203	-1.86	.064
Partner Others., B_2	-0.07	0.06	-.09	203	-1.30	.194
Random Effects						
Error, e_{ji}	0.41	0.04				<.001
ICC, Cov(e_1, e_2)	.28	.09				.002
Psychological Aggression						
Fixed Effects						
Intercept, B_0	2.03					
Actor Others., B_1	0.12	0.13	.06	175	0.95	.344
Partner Others., B_2	0.36	0.13	.18	175	2.80	.006
Random Effects						
Error, e_{ji}	2.47	0.29				<.001
ICC, Cov(e_1, e_2)	.60	.06				<.001

Note. Others = Discrimination from Others Subscale; Actor and partner effects were grand-mean centered.

Table 61

Actor-Partner Interdependence Models of General Outness and Differences in General Outness between Partners on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.21					
Actor Outness, B_1	0.31	0.19	.12	160	1.61	.109
Partner Outness, B_2	0.17	0.19	.07	160	0.89	.376
Diff. Outness, B_3	-0.29	0.28	-.10	99	-1.05	.296
Random Effects						
Error, e_{ji}	6.11	0.69				<.001
ICC, Cov(e_1, e_2)	.50	.08				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Actor Outness, B_1	0.09	0.05	.13	183	1.68	.095
Partner Outness, B_2	-0.02	0.05	-.03	183	-0.35	.727
Diff. Outness, B_3	0.11	0.07	.15	99	1.60	.114
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.97					
Actor Outness, B_1	-0.02	0.12	-.01	136	-0.18	.854
Partner Outness, B_2	-0.05	0.12	-.03	136	-0.42	.675
Diff. Outness, B_3	0.17	0.19	.10	99	0.93	.355
Random Effects						
Error, e_{ji}	2.43	0.30				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. Diff. Outness = Absolute discrepancy score between partners on Full Outness Inventory; Predictors were grand-mean centered.

Table 62

Actor-Partner Interdependence Models of Internalized Homophobia and Differences in Internalized Homophobia between Partners on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Actor LIHS, <i>B</i> ₁	-0.23	0.32	-.05	183	-0.71	.476
Partner LIHS, <i>B</i> ₂	0.11	0.32	.02	183	0.35	.727
Diff. LIHS, <i>B</i> ₃	-0.37	0.54	-.06	100	-0.69	.490
Random Effects						
Error, <i>e</i> _{ji}	6.37	0.72				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.52	.07				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor LIHS, <i>B</i> ₁	-0.11	0.09	-.09	200	-1.34	.182
Partner LIHS, <i>B</i> ₂	0.19	0.09	.16	200	2.26	.025
Diff. LIHS, <i>B</i> ₃	0.08	0.13	.05	100	0.64	.521
Random Effects						
Error, <i>e</i> _{ji}	0.42	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.33	.09				<.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor LIHS, <i>B</i> ₁	0.13	0.20	.05	156	0.67	.501
Partner LIHS, <i>B</i> ₂	-0.05	0.20	-.02	156	-0.26	.792
Diff. LIHS, <i>B</i> ₃	0.15	0.35	.04	100	0.41	.680
Random Effects						
Error, <i>e</i> _{ji}	2.44	0.30				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.69	.05				<.001

Note. Diff. LIHS = Absolute discrepancy score between partners on Lesbian Internalized Homophobia Scale; Predictors were grand-mean centered.

Table 63

Actor-Partner Interdependence Models of Faced Discrimination and Differences in Faced Discrimination between Partners on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.24					
Actor Discrim., <i>B</i> ₁	-0.68	0.29	-.18	154	-2.32	.022
Partner Discrim., <i>B</i> ₂	-0.65	0.29	-.17	154	-2.24	.027
Diff. Discrim., <i>B</i> ₃	0.16	0.40	.04	99	0.41	.681
Random Effects						
Error, <i>e</i> _{ji}	6.08	0.68				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.49	.08				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Actor Discrim., <i>B</i> ₁	-0.19	0.08	-.20	177	-2.55	.012
Partner Discrim., <i>B</i> ₂	-0.09	0.08	-.09	177	-1.18	.242
Diff. Discrim., <i>B</i> ₃	0.17	0.10	.17	99	1.76	.082
Random Effects						
Error, <i>e</i> _{ji}	0.42	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.29	.09				.002
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Actor Discrim., <i>B</i> ₁	0.41	0.18	.18	134	2.31	.023
Partner Discrim., <i>B</i> ₂	0.55	0.18	.24	134	3.10	.002
Diff. Discrim., <i>B</i> ₃	-0.01	0.25	.00	99	-0.02	.983
Random Effects						
Error, <i>e</i> _{ji}	2.23	0.27				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.65	.06				<.001

Note. Diff. Discrim. = Absolute discrepancy score between partners on Faced Discrimination Scale; Predictors were grand-mean centered.

Table 64

Multilevel Models of having a Legal Wedding on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Legal Wedding, Z_1	1.29	0.72	.15	101	1.80	.075
Random Effects						
Error, e_{ji}	6.20	0.69				<.001
ICC, Cov(e_1, e_2)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Legal Wedding, Z_1	0.36	0.17	.16	101	2.08	.040
Random Effects						
Error, e_{ji}	0.41	0.04				<.001
ICC, Cov(e_1, e_2)	.28	.09				.002
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Legal Wedding, Z_1	-0.47	0.47	-.09	101	-0.99	.323
Random Effects						
Error, e_{ji}	2.40	0.29				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. Legal wedding was dummy coded, with no = 0 and yes = 1.

Table 65

Actor-Partner Interdependence Models of Any Ceremony on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Any Ceremony, Z_1	1.08	0.50	.18	101	2.16	.033
Random Effects						
Error, e_{ji}	6.14	0.68				<.001
ICC, Cov(e_1, e_2)	.50	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Any Ceremony, Z_1	0.35	0.12	.23	101	3.00	.003
Random Effects						
Error, e_{ji}	0.40	0.04				<.001
ICC, Cov(e_1, e_2)	.26	.09				.004
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Any Ceremony, Z_1	-0.04	0.33	-.01	101	-0.12	.903
Random Effects						
Error, e_{ji}	2.42	0.29				<.001
ICC, Cov(e_1, e_2)	.69	.05				<.001

Note. Any ceremony was dummy coded, with no = 0 and yes = 1.

Table 66

Multiple Level Model of Maximum Number of Attendees at a Ceremony on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	18.06					
Attendees, Z_1	0.00	0.01	-.02	22	-0.15	.881
Random Effects						
Error, e_{ji}	3.82	0.98				<.001
ICC, Cov(e_1, e_2)	.68	.11				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.34					
Attendees, Z_1	0.00	0.00	-.08	22	-0.72	.480
Random Effects						
Error, e_{ji}	0.19	0.04				<.001
ICC, Cov(e_1, e_2)	.36	.18				.048
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.93					
Attendees, Z_1	0.00	0.01	.00	22	0.03	.978
Random Effects						
Error, e_{ji}	2.06	0.52				<.001
ICC, Cov(e_1, e_2)	.64	.12				<.001

Note. Number of attendees was grand-mean centered.

Table 67

Actor-Partner Interdependence Models of Participation in Any Commitment Behavior on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>P</i>
Relationship Adjustment						
Fixed Effects						
Intercept, <i>B</i> ₀	17.23					
Any Commit., <i>Z</i> ₁	0.40	0.45	.08	101	0.89	.376
Random Effects						
Error, <i>e</i> _{ji}	6.31	0.71				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.51	.07				<.001
Dedication						
Fixed Effects						
Intercept, <i>B</i> ₀	6.07					
Any Commit., <i>Z</i> ₁	0.18	0.11	.13	101	1.69	.094
Random Effects						
Error, <i>e</i> _{ji}	0.42	0.04				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.29	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, <i>B</i> ₀	1.96					
Any Commit., <i>Z</i> ₁	0.20	0.30	.06	101	0.67	.506
Random Effects						
Error, <i>e</i> _{ji}	2.41	0.29				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.68	.05				<.001

Note. Any commitment was dummy coded, with no = 0 and yes = 1.

Table 68

Actor-Partner Interdependence Models of Any Legal Commitment without a Ceremony on Relationship Adjustment, Dedication, and Psychological Aggression

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Relationship Adjustment						
Fixed Effects						
Intercept, B_0	17.23					
Legal Commit., Z_1	-0.16	0.52	-.03	101	-0.31	.758
Random Effects						
Error, e_{ji}	6.35	0.71				<.001
ICC, Cov(e_1, e_2)	.52	.07				<.001
Dedication						
Fixed Effects						
Intercept, B_0	6.07					
Legal Commit., Z_1	0.07	0.12	.04	101	0.55	.584
Random Effects						
Error, e_{ji}	0.42	0.04				<.001
ICC, Cov(e_1, e_2)	.30	.09				.001
Psychological Aggression						
Fixed Effects						
Intercept, B_0	1.96					
Legal Commit., Z_1	0.24	0.34	.06	101	0.71	.479
Random Effects						
Error, e_{ji}	2.41	0.29				<.001
ICC, Cov(e_1, e_2)	.68	.05				<.001

Note. Legal commitment was dummy coded, with no = 0 and yes = 1.

Table 69*Actor-Partner Interdependence Models of Relationship Adjustment, Dedication, and Psychological Aggression on Depressive Symptom*

s

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Depressive Symptoms						
1. Fixed Effects						
Intercept, B_0	0.57					
Actor DAS, B_1	-0.04	0.01	-.24	187	-3.33	.001
Partner DAS, B_2	-0.02	0.01	-.11	187	-1.53	.128
Random Effects						
Error, e_{ji}	0.15	0.02				<.001
ICC, Cov(e_1, e_2)	.26	.09				.006
2. Fixed Effects						
Intercept, B_0	0.57					
Actor Dedication, B_1	-0.08	0.04	-.13	202	-1.82	.071
Partner Dedication, B_2	-0.03	0.04	-.04	202	-0.58	.562
Random Effects						
Error, e_{ji}	0.16	0.02				<.001
ICC, Cov(e_1, e_2)	.31	.09				.001
3. Fixed Effects						
Intercept, B_0	0.57					
Actor Psy. Agg., B_1	0.07	0.02	.28	164	3.33	.001
Partner Psy. Agg., B_2	0.00	0.02	.01	164	0.12	.905
Random Effects						
Error, e_{ji}	0.15	0.02				<.001
ICC, Cov(e_1, e_2)	.28	.09				.002

Note. DAS = Dyadic Adjustment Scale; Psy. Agg. = Psychological Aggression; Actor and partner effects were grand-mean centered.

Table 70*Actor-Partner Interdependence Models of Relationship Adjustment, Dedication, and Psychological Aggression on Life Satisfaction*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Life Satisfaction						
1. Fixed Effects						
Intercept, B_0	5.33					
Actor DAS, B_1	0.20	0.03	.44	171	6.22	<.001
Partner DAS, B_2	-0.01	0.03	-.02	171	-0.22	.827
Random Effects						
Error, e_{ji}	1.08	0.11				<.001
ICC, Cov(e_1, e_2)	.12	.10				.224
2. Fixed Effects						
Intercept, B_0	5.33					
Actor Dedication, B_1	0.61	0.12	.34	197	5.07	<.001
Partner Dedication, B_2	-0.04	0.12	-.02	197	-0.35	.727
Random Effects						
Error, e_{ji}	1.18	0.12				<.001
ICC, Cov(e_1, e_2)	.19	.10				.054
3. Fixed Effects						
Intercept, B_0	5.33					
Actor Psy. Agg., B_1	-0.24	0.06	-.32	149	-3.74	<.001
Partner Psy. Agg., B_2	0.05	0.07	.07	150	0.83	.409
Random Effects						
Error, e_{ji}	1.23	0.12				<.001
ICC, Cov(e_1, e_2)	.17	.10				.088

Note. DAS = Dyadic Adjustment Scale; Psy. Agg. = Psychological Aggression; Actor and partner effects were grand-mean centered.

Table 71*Actor-Partner Interdependence Models of Relationship Adjustment, Dedication, and Psychological Aggression on Alcohol Use*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Alcohol Use						
1. Fixed Effects						
Intercept, B_0	6.30					
Actor DAS, B_1	-0.12	0.15	-.06	203	-0.82	.413
Partner DAS, B_2	-0.06	0.15	-.03	203	-0.41	.679
Random Effects						
Error, e_{ji}	29.13	3.21				<.001
ICC, Cov(e_1, e_2)	.48	.08				<.001
2. Fixed Effects						
Intercept, B_0	6.30					
Actor Dedication, B_1	-1.15	0.56	-.14	194	-2.05	.042
Partner Dedication, B_2	-0.19	0.56	-.02	194	-0.34	.733
Random Effects						
Error, e_{ji}	28.68	3.16				<.001
ICC, Cov(e_1, e_2)	.48	.08				<.001
3. Fixed Effects						
Intercept, B_0	6.30					
Actor Psy. Agg., B_1	0.87	0.27	.25	186	3.27	.001
Partner Psy. Agg., B_2	-0.07	0.27	-.02	186	-0.27	.787
Random Effects						
Error, e_{ji}	27.67	3.05				<.001
ICC, Cov(e_1, e_2)	.47	.08				<.001

Note. DAS = Dyadic Adjustment Scale; Psy. Agg. = Psychological Aggression; Actor and partner effects were grand-mean centered.

Table 72

Multilevel Models of Outness by Relationship Adjustment, Dedication, and Psychological Aggression on Depressive Symptoms

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Depressive Symptoms						
Fixed Effects						
Intercept, B_0	0.56					
Outness, B_1	-0.01	0.03	-.01	200	-0.19	.848
DAS, B_2	-0.04	0.01	-.24	188	-3.26	.001
Outness*DAS, B_3	0.01	0.01	.08	183	1.49	.138
Random Effects						
Error, e_{ji}	0.15	0.02				<.001
ICC, Cov(e_1, e_2)	.27	.09				.004
Fixed Effects						
Intercept, B_0	0.57					
Outness, B_1	-0.03	0.03	-.07	196	-1.00	.317
Dedication, B_2	-0.07	0.04	-.11	200	-1.58	.116
Outness*Dedication, B_3	0.03	0.05	.05	193	0.57	.572
Random Effects						
Error, e_{ji}	0.16	0.02				<.001
ICC, Cov(e_1, e_2)	.31	.09				<.001
Fixed Effects						
Intercept, B_0	0.57					
Outness, B_1	-0.03	0.03	-.06	198	-0.90	.372
Psych. Agg., B_2	0.07	0.02	.28	162	3.82	<.001
Outness*Psych. Agg., B_3	-0.01	0.02	-.04	169	-0.60	.552
Random Effects						
Error, e_{ji}	0.15	0.02				<.001
ICC, Cov(e_1, e_2)	.31	.09				.001

Note. DAS = Dyadic Adjustment Scale; Psy. Agg. = Psychological Aggression; Actor and partner effects were grand-mean centered.

Table 73

Multilevel Models of Internalized Homophobia by Relationship Adjustment, Dedication, and Psychological Aggression on Depressive Symptoms

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Depressive Symptoms						
Fixed Effects						
Intercept, B_0	0.57					
LIHS, B_1	0.01	0.05	.01	200	0.16	.875
DAS, B_2	-0.04	0.01	-.27	179	-3.82	<.001
LIHS*DAS, B_3	-0.01	0.02	-.04	192	-0.57	.570
Random Effects						
Error, e_{ji}	0.15	0.02				<.001
ICC, Cov(e_1, e_2)	.25	.09				.008
Fixed Effects						
Intercept, B_0	0.57					
LIHS, B_1	0.01	0.05	.02	201	0.28	.783
Dedication, B_2	-0.08	0.04	-.12	200	-1.73	.086
LIHS*Dedication, B_3	-0.01	0.07	-.01	195	-0.15	.884
Random Effects						
Error, e_{ji}	0.16	0.02				<.001
ICC, Cov(e_1, e_2)	.31	.09				.001
Fixed Effects						
Intercept, B_0	0.57					
LIHS, B_1	0.01	0.05	.02	200	0.25	.804
Psych. Agg., B_2	0.07	0.02	.28	161	3.87	<.001
LIHS*Psych. Agg., B_3	-0.01	0.04	-.01	184	-0.17	.868
Random Effects						
Error, e_{ji}	0.15	0.02				<.001
ICC, Cov(e_1, e_2)	.29	.09				.002

Note. DAS = Dyadic Adjustment Scale; Psy. Agg. = Psychological Aggression; LIHS = Lesbian Internalized Homophobia Scale; Actor and partner effects were grand-mean centered.

Table 74

Multilevel Models of Faced Discrimination by Relationship Adjustment, Dedication, and Psychological Aggression on Depressive Symptoms

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Depressive Symptoms						
Fixed Effects						
Intercept, <i>B</i> ₀	0.56					
Discrim., <i>B</i> ₁	0.09	0.04	.15	197	2.28	.023
DAS, <i>B</i> ₂	-0.04	0.01	-.24	187	-3.47	.001
Discrim.*DAS, <i>B</i> ₃	-0.01	0.01	-.04	187	-0.79	.431
Random Effects						
Error, <i>e</i> _{ji}	0.15	0.02				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.23	.10				.017
Fixed Effects						
Intercept, <i>B</i> ₀	0.57					
Discrim., <i>B</i> ₁	0.11	0.04	.18	196	2.60	.010
Dedication, <i>B</i> ₂	-0.07	0.04	-.11	200	-1.52	.130
Discrim.*Dedication, <i>B</i> ₃	0.02	0.07	.02	183	0.30	.765
Random Effects						
Error, <i>e</i> _{ji}	0.16	0.02				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.28	.09				.004
Fixed Effects						
Intercept, <i>B</i> ₀	0.57					
Discrim., <i>B</i> ₁	0.10	0.04	.16	193	2.42	.016
Psych. Agg., <i>B</i> ₂	0.07	0.02	.26	167	3.63	<.001
Discrim.*Psych. Agg., <i>B</i> ₃	-0.02	0.02	-.05	185	-0.91	.366
Random Effects						
Error, <i>e</i> _{ji}	0.15	0.02				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.28	.09				.003

Note. DAS = Dyadic Adjustment Scale; Psy. Agg. = Psychological Aggression; Discrim = Faced Discrimination; Actor and partner effects were grand-mean centered.

Table 75

Multilevel Models of Outness by Relationship Adjustment, Dedication, and Psychological Aggression on Life Satisfaction

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
<hr/> Life Satisfaction <hr/>						
Fixed Effects						
Intercept, B_0	5.35					
Outness, B_1	0.02	0.08	.01	197	0.21	.835
DAS, B_2	0.20	0.03	.43	176	6.25	<.001
Outness*DAS, B_3	-0.02	0.02	-.04	189	-0.90	.372
Random Effects						
Error, e_{ji}	1.08	0.11				<.001
ICC, Cov(e_1, e_2)	.14	.10				.153
Fixed Effects						
Intercept, B_0	5.34					
Outness, B_1	0.09	0.08	.08	198	1.19	.236
Dedication, B_2	0.56	0.12	.31	194	4.62	<.001
Outness*Dedication, B_3	-0.26	0.14	-.14	196	-1.79	.075
Random Effects						
Error, e_{ji}	1.17	0.12				<.001
ICC, Cov(e_1, e_2)	.21	.10				.029
Fixed Effects						
Intercept, B_0	5.34					
Outness, B_1	0.09	0.08	.07	198	1.03	.304
Psych. Agg., B_2	-0.21	0.05	-.28	156	-3.94	<.001
Outness*Psych. Agg., B_3	0.05	0.06	.07	180	0.91	.362
Random Effects						
Error, e_{ji}	1.23	0.13				<.001
ICC, Cov(e_1, e_2)	.18	.10				.072

Note. Predictors were grand-mean centered.

Table 76

Multilevel Models of Internalized Homophobia by Relationship Adjustment, Dedication, and Psychological Aggression on Life Satisfaction

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Life Satisfaction						
Fixed Effects						
Intercept, <i>B</i> ₀	5.33					
LIHS, <i>B</i> ₁	-0.20	0.14	-.09	192	-1.45	.149
DAS, <i>B</i> ₂	0.19	0.03	.42	165	6.53	<.001
LIHS*DAS, <i>B</i> ₃	0.05	0.05	.06	197	0.99	.324
Random Effects						
Error, <i>e</i> _{ji}	1.07	0.11				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.11	.10				.269
Fixed Effects						
Intercept, <i>B</i> ₀	5.33					
LIHS, <i>B</i> ₁	-0.22	0.14	-.10	194	-1.55	.124
Dedication, <i>B</i> ₂	0.57	0.12	.32	192	4.77	<.001
LIHS*Dedication, <i>B</i> ₃	0.37	0.21	.11	199	1.79	.076
Random Effects						
Error, <i>e</i> _{ji}	1.15	0.12				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.17	.10				.087
Fixed Effects						
Intercept, <i>B</i> ₀	5.33					
LIHS, <i>B</i> ₁	-0.21	0.15	-.10	194	-1.45	.148
Psych. Agg., <i>B</i> ₂	-0.21	0.05	-.29	156	-4.08	<.001
LIHS*Psych. Agg., <i>B</i> ₃	-0.19	0.11	-.13	194	-1.70	.091
Random Effects						
Error, <i>e</i> _{ji}	1.20	0.12				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.15	.10				.126

Note. Predictors were grand-mean centered.

Table 77

Multilevel Models of Faced Discrimination by Relationship Adjustment, Dedication, and Psychological Aggression on Life Satisfaction

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Life Satisfaction						
Fixed Effects						
Intercept, <i>B</i> ₀	5.33					
Discrim., <i>B</i> ₁	-0.09	0.11	-.05	198	-0.82	.415
DAS, <i>B</i> ₂	0.20	0.03	.43	178	6.39	<.001
Discrim.*DAS, <i>B</i> ₃	0.00	0.04	.00	193	-0.04	.972
Random Effects						
Error, <i>e</i> _{ji}	1.09	0.11				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.12	.10				.227
Fixed Effects						
Intercept, <i>B</i> ₀	5.32					
Discrim., <i>B</i> ₁	-0.13	0.11	-.07	197	-1.12	.266
Dedication, <i>B</i> ₂	0.61	0.12	.34	196	4.94	<.001
Discrim.*Dedication, <i>B</i> ₃	-0.16	0.18	-.06	189	-0.85	.395
Random Effects						
Error, <i>e</i> _{ji}	1.18	0.12				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.19	.10				.053
Fixed Effects						
Intercept, <i>B</i> ₀	5.33					
Discrim., <i>B</i> ₁	-0.13	0.12	-.08	196	-1.09	.275
Psych. Agg., <i>B</i> ₂	-0.20	0.05	-.27	165	-3.65	<.001
Discrim.*Psych. Agg., <i>B</i> ₃	-0.02	0.07	-.02	191	-0.27	.786
Random Effects						
Error, <i>e</i> _{ji}	1.24	0.13				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.16	.10				.095

Note. Predictors were grand-mean centered.

Table 78*Multilevel Models of Outness by Relationship Adjustment, Dedication, and Psychological Aggression on Alcohol Use*

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Alcohol Use						
Fixed Effects						
Intercept, <i>B</i> ₀	6.29					
Outness, <i>B</i> ₁	0.58	0.38	.10	188	1.52	.130
DAS, <i>B</i> ₂	-0.15	0.16	-.07	201	-0.92	.357
Outness*DAS, <i>B</i> ₃	0.04	0.11	.02	161	0.35	.729
Random Effects						
Error, <i>e</i> _{ji}	29.03	3.20				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.47	.08				<.001
Fixed Effects						
Intercept, <i>B</i> ₀	6.32					
Outness, <i>B</i> ₁	0.60	0.36	.11	182	1.66	.098
Dedication, <i>B</i> ₂	-1.28	0.56	-.15	197	-2.29	.023
Outness*Dedication, <i>B</i> ₃	-0.46	0.65	-.05	178	-0.72	.474
Random Effects						
Error, <i>e</i> _{ji}	28.39	3.12				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.47	.08				<.001
Fixed Effects						
Intercept, <i>B</i> ₀	6.29					
Outness, <i>B</i> ₁	0.57	0.36	.10	183	1.59	.113
Psych. Agg., <i>B</i> ₂	0.86	0.25	.25	184	3.39	.001
Outness*Psych. Agg., <i>B</i> ₃	-0.15	0.23	-.04	150	-0.67	.503
Random Effects						
Error, <i>e</i> _{ji}	27.72	3.09				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.48	.08				<.001

Note. Predictors were grand-mean centered.

Table 79

Multilevel Models of Internalized Homophobia by Relationship Adjustment, Dedication, and Psychological Aggression on Alcohol Use

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Alcohol Use						
Fixed Effects						
Intercept, <i>B</i> ₀	6.33					
LIHS, <i>B</i> ₁	-0.31	0.66	-.03	193	-0.47	.641
DAS, <i>B</i> ₂	-0.17	0.15	-.08	200	-1.10	.275
LIHS*DAS, <i>B</i> ₃	0.34	0.24	.08	170	1.41	.159
Random Effects						
Error, <i>e</i> _{ji}	28.80	3.17				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.47	.08				<.001
Fixed Effects						
Intercept, <i>B</i> ₀	6.32					
LIHS, <i>B</i> ₁	-0.45	0.66	-.04	197	-0.68	.499
Dedication, <i>B</i> ₂	-1.26	0.56	-.15	199	-2.26	.025
LIHS*Dedication, <i>B</i> ₃	1.07	0.92	.07	180	1.16	.248
Random Effects						
Error, <i>e</i> _{ji}	28.51	3.14				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.47	.08				<.001
Fixed Effects						
Intercept, <i>B</i> ₀	6.29					
LIHS, <i>B</i> ₁	-0.42	0.65	-.04	194	-0.65	.518
Psych. Agg., <i>B</i> ₂	0.86	0.25	.25	184	3.37	.001
LIHS*Psych. Agg., <i>B</i> ₃	0.37	0.44	.06	164	0.84	.403
Random Effects						
Error, <i>e</i> _{ji}	27.72	3.06				<.001
ICC, Cov(<i>e</i> ₁ , <i>e</i> ₂)	.48	.08				<.001

Note. Predictors were grand-mean centered.

Table 80

Multilevel Models of Faced Discrimination by Relationship Adjustment, Dedication, and Psychological Aggression on Alcohol Use

Parameter	<i>B</i>	<i>SE B</i>	β	<i>df</i>	<i>t</i>	<i>p</i>
Alcohol Use						
Fixed Effects						
Intercept, B_0	6.31					
Discrim., B_1	0.59	0.52	.07	171	1.14	.257
DAS, B_2	-0.09	0.15	-.04	201	-0.59	.556
Discrim.*DAS, B_3	-0.10	0.17	-.03	156	-0.57	.567
Random Effects						
Error, e_{ji}	29.38	3.29				<.001
ICC, Cov(e_1, e_2)	.50	.08				<.001
Fixed Effects						
Intercept, B_0	6.32					
Discrim., B_1	0.55	0.51	.07	174	1.09	.277
Dedication, B_2	-1.01	0.56	-.12	188	-1.80	.073
Discrim.*Dedication, B_3	-0.26	0.80	-.02	158	-0.32	.749
Random Effects						
Error, e_{ji}	28.84	3.21				<.001
ICC, Cov(e_1, e_2)	.50	.08				<.001
Fixed Effects						
Intercept, B_0	6.33					
Discrim., B_1	0.51	0.50	.06	171	1.01	.315
Psych. Agg., B_2	0.82	0.26	.24	191	3.21	.002
Discrim.*Psych. Agg., B_3	0.06	0.27	.01	160	0.21	.835
Random Effects						
Error, e_{ji}	27.97	3.13				<.001
ICC, Cov(e_1, e_2)	.50	.08				<.001

Note. Predictors were grand-mean centered.

Appendix B: Figures

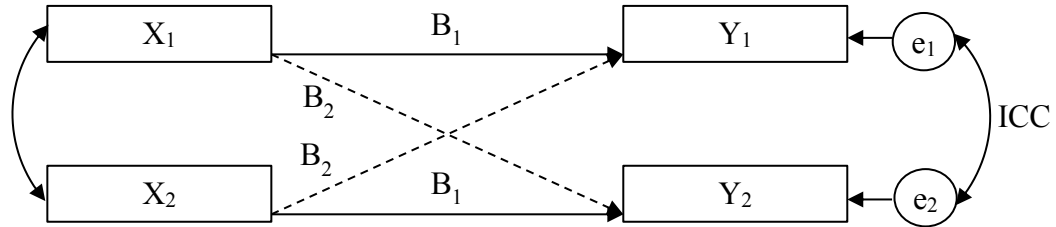


Figure 1. Actor-Partner Interdependence Model of X predictors on Y outcomes. In this model, X_1 represents Partner 1's scores of the X predictor and X_2 represents Partner 2's scores of X predictor. Y_1 represents the outcome for Partner 1 and Y_2 represents the outcome for Partner 2. B_1 , depicted with solid lines, represents the actor effect and is constrained to be equal across partners. B_2 , depicted with dashed lines, represents the partner effect and is constrained to be equal across partners. The ICC represents the remaining intraclass correlation between Y outcomes after taking into account the X predictors.

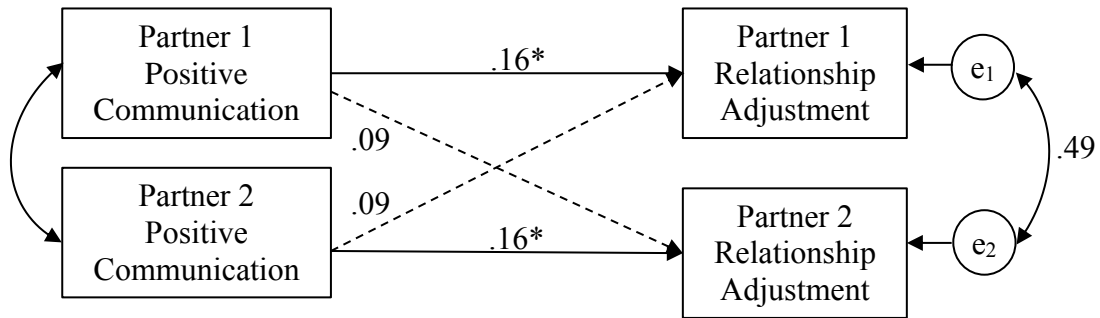


Figure 2. Actor-Partner Interdependence Model of positive communication on relationship adjustment. In this model, the actor effect of .16 is depicted with solid lines and the partner effect of .09 is depicted with dashed lines. The remaining intraclass correlation of relationship adjustment between partners is .49 after taking into account the actor and partner effects of positive communication.

* $p < .05$

Appendix C: Sexual Activities Questionnaire

Please answer the following questions using the answer choices below:

About how frequently do you and your partner cuddle?	
<input type="radio"/> More than once a day	<input type="radio"/> Once a month
<input type="radio"/> Once a day	<input type="radio"/> Every other month
<input type="radio"/> More than once a week	<input type="radio"/> Less than once in 6 months
<input type="radio"/> Once a week	<input type="radio"/> More than 6 months ago
<input type="radio"/> Every other week	<input type="radio"/> Never
About how frequently do you and your partner kiss on the lips?	
<input type="radio"/> More than once a day	<input type="radio"/> Once a month
<input type="radio"/> Once a day	<input type="radio"/> Every other month
<input type="radio"/> More than once a week	<input type="radio"/> Less than once in 6 months
<input type="radio"/> Once a week	<input type="radio"/> More than 6 months ago
<input type="radio"/> Every other week	<input type="radio"/> Never
About how frequently do you and your partner make-out (sometimes called necking or French-kissing)?	
<input type="radio"/> More than once a day	<input type="radio"/> Once a month
<input type="radio"/> Once a day	<input type="radio"/> Every other month
<input type="radio"/> More than once a week	<input type="radio"/> Less than once in 6 months
<input type="radio"/> Once a week	<input type="radio"/> More than 6 months ago
<input type="radio"/> Every other week	<input type="radio"/> Never
About how frequently do you and your partner have oral sex, in which YOU please YOUR PARTNER?	
<input type="radio"/> More than once a day	<input type="radio"/> Once a month
<input type="radio"/> Once a day	<input type="radio"/> Every other month
<input type="radio"/> More than once a week	<input type="radio"/> Less than once in 6 months
<input type="radio"/> Once a week	<input type="radio"/> More than 6 months ago
<input type="radio"/> Every other week	<input type="radio"/> Never
About how frequently do you and your partner have oral sex, in which YOUR PARTNER pleases YOU?	
<input type="radio"/> More than once a day	<input type="radio"/> Once a month
<input type="radio"/> Once a day	<input type="radio"/> Every other month
<input type="radio"/> More than once a week	<input type="radio"/> Less than once in 6 months

<input type="radio"/> Once a week <input type="radio"/> Every other week	<input type="radio"/> More than 6 months ago <input type="radio"/> Never
<p>About how frequently do you and your partner have sexual encounters that involve hand-to-genital stimulation or penetration, in which YOU please YOUR PARTNER?</p>	
<input type="radio"/> More than once a day <input type="radio"/> Once a day <input type="radio"/> More than once a week <input type="radio"/> Once a week <input type="radio"/> Every other week	<input type="radio"/> Once a month <input type="radio"/> Every other month <input type="radio"/> Less than once in 6 months <input type="radio"/> More than 6 months ago <input type="radio"/> Never
<p>About how frequently do you and your partner have sexual encounters that involve hand-to-genital stimulation or penetration, in which YOUR PARTNER pleases YOU?</p>	
<input type="radio"/> More than once a day <input type="radio"/> Once a day <input type="radio"/> More than once a week <input type="radio"/> Once a week <input type="radio"/> Every other week	<input type="radio"/> Once a month <input type="radio"/> Every other month <input type="radio"/> Less than once in 6 months <input type="radio"/> More than 6 months ago <input type="radio"/> Never
<p>About how frequently do you and your partner have sexual encounters that involve sex toys (this can include dildos, strap-ons, vibrators, etc.), in which YOU please YOUR PARTNER?</p>	
<input type="radio"/> More than once a day <input type="radio"/> Once a day <input type="radio"/> More than once a week <input type="radio"/> Once a week <input type="radio"/> Every other week	<input type="radio"/> Once a month <input type="radio"/> Every other month <input type="radio"/> Less than once in 6 months <input type="radio"/> More than 6 months ago <input type="radio"/> Never
<p>About how frequently do you and your partner have sexual encounters that involve sex toys (this can include dildos, strap-ons, vibrators, etc.), in which YOUR PARTNER pleases YOU?</p>	
<input type="radio"/> More than once a day <input type="radio"/> Once a day <input type="radio"/> More than once a week <input type="radio"/> Once a week	<input type="radio"/> Once a month <input type="radio"/> Every other month <input type="radio"/> Less than once in 6 months <input type="radio"/> More than 6 months ago

Every other week

Never

About how frequently do you and your partner have sexual encounters that involve anal stimulation or penetration in which YOU please YOUR PARTNER?

More than once a day

Once a month

Once a day

Every other month

More than once a week

Less than once in 6 months

Once a week

More than 6 months ago

Every other week

Never

About how frequently do you and your partner have sexual encounters that involve anal stimulation or penetration in which YOUR PARTNER pleases YOU?

More than once a day

Once a month

Once a day

Every other month

More than once a week

Less than once in 6 months

Once a week

More than 6 months ago

Every other week

Never

About how frequently do you and your partner have sexual encounters that involve genital-to-genital stimulation (sometimes referred to as dry sex, tribadism, scissoring, etc.)?

More than once a day

Once a month

Once a day

Every other month

More than once a week

Less than once in 6 months

Once a week

More than 6 months ago

Every other week

Never

About how frequently do you and your partner participate in joint masturbation, where either one of you pleases yourself in the presence of the other?

<input type="radio"/> More than once a day <input type="radio"/> Once a day <input type="radio"/> More than once a week <input type="radio"/> Once a week <input type="radio"/> Every other week	<input type="radio"/> Once a month <input type="radio"/> Every other month <input type="radio"/> Less than once in 6 months <input type="radio"/> More than 6 months ago <input type="radio"/> Never					
About how frequently do you have an orgasm in presence of your partner?						
<input type="radio"/> More than once a day <input type="radio"/> Once a day <input type="radio"/> More than once a week <input type="radio"/> Once a week <input type="radio"/> Every other week	<input type="radio"/> Once a month <input type="radio"/> Every other month <input type="radio"/> Less than once in 6 months <input type="radio"/> More than 6 months ago <input type="radio"/> Never					
We have a satisfying sensual or sexual relationship.						
<input type="radio"/> 1 Strongly disagree	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4 Neither agree or disagree	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7 Strongly agree

Do you consider the following, on their own, as “having sex” (even if you and your partner do not partake in these sexual activities)? Please circle “yes” or “no”.

Making-Out	Yes	No
Oral Sex	Yes	No
Hand-to-Genital Stimulation/Penetration	Yes	No
Genital-to-Genital Stimulation	Yes	No
Anal Stimulation/Penetration	Yes	No
Using Sex Toys	Yes	No
Joint Masturbation	Yes	No

Considering all of your sexual activities with your partner, about how often do you and your partner have sex?	
<input type="radio"/> More than once a day <input type="radio"/> Once a day <input type="radio"/> More than once a week <input type="radio"/> Once a week	<input type="radio"/> Once a month <input type="radio"/> Every other month <input type="radio"/> Less than once in 6 months <input type="radio"/> More than 6 months ago

Every other week

Never

How often would you ideally like to have sex with your partner?

More than once a day

Once a month

Once a day

Every other month

More than once a week

Less than once in 6 months

Once a week

More than 6 months ago

Every other week

Never