

1984

Danger signals of marital dysfunction

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Danger signals of marital dysfunction

Abstract

As a fundamental social institution, the American Family has elicited research studies by sociologists, psychologists, anthropologists, historians, theologians, political scientists, and economists. Conflicting interpretations and conclusions about the family abound. Even so elementary an expectation as consensus on a definition of family has eluded us.

DANGER SIGNALS OF MARITAL DYSFUNCTION

A Research Paper
Presented to
The Department of Educational Administration
and Counseling
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In Partial Fulfillment
of the Requirements for the Degree
Master of Arts

by
Shelda Jean Hertzke Beener
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TABLE OF CONTENTS

	Page
Chapter 1	
Introduction	1
Purpose of the Study	7
Importance of the Study	7
Assumptions	8
Limitations	8
Definition of Terms	8
Chapter 2	
Review of Literature	10
Introduction	10
Dimensions of Family Mental Health and Pathology	12
Characteristics of Functioning Families	17
Marital Quality and Stability	20
Marital Expectations	23
Chapter 3	
Ascertainment of Indicators of Marital Dysfunction	26
Introduction	26
Comparison of Characteristics of Healthy Family Functioning	27
Comparison of Characteristics of Healthy Family Functioning with Barnhill's Dimensions of Family Mental Health and Pathology	31

	Page
Comparison of Barnhill's Dimensions Mental Health and Pathology with Propositions of Quality and Stability in Marriage	34
Specifying Indicators of Marital Dysfunction	37
Danger Signals of Marital Dysfunction	38
Chapter 4	
Summary, Conclusions, and Recommendations	42
Summary	42
Conclusions	42
Recommendations	43
References	45

Chapter 1

INTRODUCTION

As a fundamental social institution, the American Family has elicited research studies by sociologists, psychologists, anthropologists, historians, theologians, political scientists, and economists. Conflicting interpretations and conclusions about the family abound. Even so elementary an expectation as consensus on a definition of family has eluded us. Perhaps, psychoanalyst R. D. Laing (1969) was correct when he wrote:

We speak of families as though we all knew what families are. We identify, as families, networks of people who live together over periods of time, who have ties of marriage and kinship to one another. The more one studies family dynamics, the more unclear one becomes as to the ways family dynamics compare and contrast with the dynamics of other groups not called families, let alone the ways families themselves differ (p. 3).

Just as there has been no agreement on definition so has there been no agreement on the general condition of families. A major issue during the 1970s was whether the family was dying or developing (Reiss & Hoffman, 1979). Economic and psychological needs had propelled women into the work force and the productive function of families continued to move from the familial unit to the larger community. Couples had fewer children and those children were destined to be economic liabilities rather than economic assets (Keniston, 1977). People were healthier and living longer, but psychologists such as Urie Bronfenbrenner (1976) claimed American families were in trouble. The August 15, 1971 cover picture

of the New York Times Magazine portrayed the nuclear family as an antique to be exhibited under glass. And psychotherapist David Cooper (1970) wrote in The Death of the Family about "some of the factors that operate within the family, often with lethal but always with humanly stultifying consequences" (p. 22).

But not everyone agreed with such evaluations. In the April 25, 1970, Saturday Review, Herbert A. Otto asserted that monogamy was "no longer a rigid institution but instead an evolving one" (p. 23). Concerning the family, Leontine Young (1973) wrote:

The family is not doomed to slide into ever more vitiating weakness and futility; it may instead stand on the threshold of its most important era. Its challenge is not physical survival, as in the past, but emotional survival, the creation not of abundance but of the values to use abundance for a life worth living (p. 138).

And in 1976, sociologist Mary Jo Bane, in Here to Stay: American Families in the Twentieth Century, concluded that American families were as strong as ever. While agreeing that the high divorce rates were cause for concern, the rate of remarriage indicated to Bane that marriage was still highly valued by Americans.

Debates of such consequence could hardly escape the political stump. With encouragement from highest government leaders, such as Jimmy Carter (1976) and Walter Mondale (1976), organizations and individuals moved to endorse the development of a national family policy. A notable study, released in 1977 and entitled All Our Children: The American Family

Under Pressure by Kenneth Keniston and the Carnegie Council on Children, proposed a major governmental commitment to families.

Critical response to such proposals was immediate. Historian Christopher Lasch (1977), in Haven in a Heartless World: The Family Besieged, asserted that bureaucracy and the helping professions were attempting to remove from the family control of its own destiny. More recently, in The Futility of Family Policy (1981), Gilbert Y. Steiner referred to family policy as fad and chided supporters for failing to provide reliable data about family dysfunction as well as realistic proposals for programs. In addition, he wrote:

The timing is wrong. Family policy implies intervention, regulation, public assistance, manipulation of individual choice - all difficult under any circumstances, since family issues carry a traditional protection against such government activity. Yet family policy has been offered when, in nearly all respects, the national swing is to nonintervention, deregulation, fiscal restraint, reliance on market forces (p. 205).

Dying of developing was, indeed, the question for many professionals. But Steiner (1981) questioned whether the dichotomy was necessary.

The persistent issues of family dysfunction have little to do with whether the family is suddenly in trouble as an institution or whether it is here to stay. A thoughtful, scholarly inquiry leading to the here-to-stay conclusion and a politician's assertion that "the American family is in trouble" may not represent incompatible positions as much as different preoccupations (p. 201).

Perhaps, then, it was not too surprising that when challenging Lasch, Bane, and others, Rita Kramer (1983) wrote:

The trouble is, the experts disagree. And when the authorities say different, and often even opposite things, whom do you listen to?... If you listen to everyone you'll find sooner or later that they cancel each other out. The obvious conclusion is to listen to yourself (pp. 4-5).

Rita Kramer may be echoing the confusion of many Americans.

Eighty percent of the more than 201,000 middle-class Americans responding to a 1982 Better Homes and Gardens questionnaire said that family life in America was in trouble, an increase of such views reported in 1972 (71%). But, as in 1977, the report (1983) presented conflicting views. Although a high percentage of respondents saw the family as being in trouble, when asked specifically about their own situation, an equally high percentage saw their own family happiness fulfilling expectations. The report concludes that "some see problems galore... . More often, however, readers venture that American families are on the right track" (August, p. 33). Recognizing that the Better Homes and Gardens readership is not representative of the total American population, it does, nonetheless, reflect the views of a large segment of society.

If Americans are confused about the state of American families, they are with reason. Historian John Demos (1979) claimed that the American family has been seen as "beleagured,

endangered, and possibly on the verge of extinction. The sense of crisis is hardly new; with some allowance for periodic ebb and flow, it seems an inescapable undercurrent of our modern life and consciousness" (Tufte & Meyerhoff, 1979, p. 44). A consciousness of crisis might well conflict with an experience of happiness. Americans are confused and that confusion exacts a price.

"No trend in American life since World War II has received more attention or caused more concern than the rising rate of divorce" (Cherlin, 1981, p. 21). According to the U.S. National Center for Health Statistics (1979), if the divorce rates in the 1980s and 1990s remain at the same level as the 1977 rate, 48% of those who married in 1970 will eventually divorce.

Although divorce is increasingly accepted, few people see it as desirable. People usually do not marry with an intent to divorce. And "regardless of how outsiders view divorce, it is rarely experienced as other than tragic and painful by the participants" (Grunebaum & Christ, 1976, p. 3).

Many couples make their first visit to the family therapist's office when it is too late - when their marital relationship is so damaged that at least one of them sees dissolution as the essence of personal survival. According to Napier and Whitaker (1978), "Most people are willing to consider divorce only to protect something both terribly

important to them and fragile: their sense of identity" (pp. 225-226). Such situations are complex. Had the couple been aware, had they been able to foresee the outcome, they might have sought counseling sooner.

The couple simply don't see the problems, though sometimes they have to work hard to avoid seeing them. The reason they don't want to look is obvious enough to the outsider: they are so dependent on each other and so afraid of any disruption of their relationship that they cannot admit the true magnitude of the problems. They have developed a technique of temporizing over the years: they walk away when they are angry, pretend affection when they don't feel it, and hope that time and effort will change their attitudes. They become timidly and anxiously estranged, living through their days with suppressed yearnings and muffled screams, exchanging the contentious and exhausting pressure of their inner lives for an uneasy peace (Napier & Whitaker, 1978, p. 147).

Although not destined to fail, such marriages often do not have enough caring left in them (Fogarty, in Guerin, 1976). Fogarty stated that "the emotional connectedness between the twosome must be tested over time by stretching, by examination, by efforts to change. Only then will it be clear whether the marriage will continue or stop" (pp. 329-330).

Marital relationships do not have to reach such levels of dysfunction. Just as people have used the danger signals of cancer to alert themselves to possible malignancy so could they use danger signals of marital dysfunction. Recognition of the existence of a potentially destructive situation could be the catalyst necessary for seeking professional assistance while the problems could be more easily resolved (Napier & Whitaker, 1978, p. 147).

Purpose of the Study

The purpose of this study is to review relevant literature for delineation of danger signals of marital dysfunction. Specifically, the study will consider identified dimensions of family mental health and pathology, characteristics of functioning families, propositions of marital quality and stability, and marital expectations. By comparing the theoretical data in these areas, it is hoped that danger signals of marital dysfunction can be deduced. Restatement of the danger signals into language which can be readily understood by the general public is the final goal.

Importance of the Study

Because marital dissolution is usually considered undesirable, the importance of this study would be derived primarily from the preventive nature of danger signals. People who recognize one or more signals as characteristic of their relationship would be confronted with the choice of whether or not to seek professional assistance. If they chose to seek therapeutic assistance, successful resolution of the problems might be facilitated by their earlier consideration.

For counselors, then, the danger signals could serve a case finding function. They could also be used in prevention oriented educational programs and/or as an assessment checklist.

Assumptions

It is assumed that the literature is accurate and that the reviews of literature are also representative and comprehensive. It is also assumed that the theoretical language can, in a pragmatic way, be restated to meet the needs of the general public.

Limitations

Validity of this study is dependent upon the accuracy of the available literature. While there has been a proliferation of studies concerning marital quality and related concepts (Spanier & Lewis, 1980), only a few studies specifically address prediction of marital dysfunction. Lack of empirical data presents a limitation. This study, also, is a review of literature rather than empirical in nature.

Definition of Terms

Marital Quality: "A subjective evaluation of a married couple's relationship. The range of evaluations constitutes a continuum reflecting numerous characteristics of marital interaction and marital functioning" (Lewis & Spanier, 1979, p. 269).

Marital Stability: "The formal or informal status of a marriage as intact or nonintact. . . . A stable marriage is one which is terminated only by the natural death of one spouse" (Lewis & Spanier, 1979, p. 269).

Marital Dysfunction: The impaired or incomplete performance of a married couple.

Danger Signal: An indication or sign given to convey a warning (Webster, 1982).

Dimension: Any measurable extent between two points (Webster, 1982).

Proposition: A statement put forth for consideration and acceptance (Webster, 1982).

Characteristic: "A distinguishing trait, feature, or quality" (Webster, 1982).

Chapter 2

REVIEW OF LITERATURE

The purpose of this study is to review relevant literature for delineation of danger signals of marital dysfunction and to pragmatically state those danger signals in language readily understood by the public. This chapter is divided into four sections: dimensions of family mental health and pathology, characteristics of functioning families, marital quality and stability, and marital expectations.

The increase in professional literature in the field of marital and family therapy during the 1970s gives ample evidence of the mushrooming growth in the field. Olson, Russell, and Sprenkle (1980) reported that there were 200 books and over 1500 articles published as the number of journals for family therapists increased from two in 1970 to more than ten in 1979. They also note that the field has attracted professionals from several disciplines and "has become a 'melting pot' of therapists" breaking down but not destroying "the identity of traditional professional groups" (p. 973). "The hallmark and unifying characteristic of the field of marital and family therapy is the emphasis on treating problems within a relationship context" (p. 974). However, there has been a lack of integration of research, theory, and practice. A review of relevant literature for

this paper, therefore, required investigation in the fields of sociology and psychology as well as in the field of marital and family therapy.

"The literature examining psychological indicators has concentrated on the effects of certain background factors on marital instability, such as value dissimilarity among mates, age at marriage, premarital or early postmarital pregnancy, and intergenerational transmission of instability" (Mott & Moore, 1979, p. 355). Sociologists have studied how sociological phenomena such as the social structure of the community can place pressure on a marriage and economists have examined economic factors that contribute to marital breakdown. But only a limited amount of literature specifically addresses the etiology of marital disruptions. Spanier and Lewis (1980) noted that there have been "few long-term longitudinal studies in the history of marriage research" (p. 830). Such longitudinal analysis is necessary in exploring causality (Kitson & Sussman, 1982).

An example of the limited longitudinal work in etiology of marital dysfunction is a study by Psychologist Howard J. Markman (1981) in which he focused on dimensions of communication and produced "evidence that unrewarding communication patterns are predictive of marital distress five years later" (p. 761). In another study, Frank L. Mott and Sylvia F. Moore (1979) used data from the National Longitudinal Survey of Labor Market Behavior of Young Women

to examine the determinants of marital disruption for women married between 1968 and 1973. Their approach was interdisciplinary and

. . . it was found that direct economic factors are apparently of less importance as determinants of a marital breakdown than are other socioeconomic background and demographic factors. While modest "income" and "Independence" effects were noted, factors such as educational attainment (independent of the above economic factors), coming from a "broken home," age and duration of marriage were far more significant (pp. 363-364).

The need for longitudinal research does not, however, negate the significance and relevance of other studies. Emphasis during the 1970s seems to have been placed on the expansion and refinement of positive theoretical approaches, i.e., the quality, stability, and healthy functioning of families, rather than on marital dysfunction. An examination of some of the literature in these three major areas is necessary but, given the focus of this study, it is expedient to first consider dimensions of family mental health and pathology.

Dimensions of Family Mental Health and Pathology

In his review of theoretical literature in the field of family therapy, Barnhill (1979) isolated and discussed eight dimensions or measurements of family mental health and pathology. Barnhill concentrated on the healthy dimensions and integrated them as a mutually causal system which he called the "family health cycle" (p. 94). Such a system allows for intervention and strengthening at any weak point on the

cycle and thus would probably promote change in other dimensions. The eight dimensions of family mental health and pathology constitute four basic family themes and are divided as follows:

- I. Identity Processes
 1. Individuation vs enmeshment
 2. Mutuality vs isolation
- II. Change
 3. Flexibility vs rigidity
 4. Stability vs disorganization
- III. Information Processing
 5. Clear vs unclear or distorted perception
 6. Clear vs unclear or distorted communication
- IV. Role Structuring
 7. Role reciprocity vs unclear roles or role conflict
 8. Clear vs diffuse or breached generational boundaries (p. 96).

According to Barnhill (1979), the dimensions "can provide a framework for diagnosis and therapy based on a positive goal-oriented approach in addition to the traditional problem-solving, pathology-remediating model" (p. 98). He also stated that the general public, seeing a need for help along these lines, could "ask for something positive or growth oriented rather than needing a symptom to request help" (p. 99). Barnhill's work is viewed as significant for this paper, however, because it does present both pathological and healthy dimensions of family functioning. It also presents a review and integration of the relevant writings of major therapists in the field.

Murray Bowen and Salvador Minuchin are known for their work in developing theories incorporating the concepts of individuation, enmeshment, mutuality, and isolation. Bowen (1971) proposed that there are two forces in human relationships which counterbalance each other. One force is individuation and the other force is a need for others, for togetherness. Individuation includes a person's need to have a self-contained identity and independence of thought, feeling, and judgment. In contrast, enmeshment represents an exaggeration of togetherness, resulting in poorly delineated boundaries of self and in shared ego fusion. A sense of belonging dominates the family and any separation of self is seen as betrayal. According to Satir (1967), the enmeshed person will say ". . . be like me; be one with me. You are bad if you disagree with me. Reality and your differentness are unimportant" (p. 13).

Barnhill's second dimension, "mutuality vs isolation," is closely related to the first, "individuation vs enmeshment." Mutuality is possible only when family members have individuation and it refers to emotional joining and intimacy. According to Ackerman (1958), "mental health is not a static quality in the private possession of anyone. it is not self-sustaining. It can be maintained only by continuous exertion and with the emotional togetherness and support of others" (p. 7). Conversely, then, isolation means disengagement or even alienation.

The ability to respond to change with flexibility and stability is a recognized attribute of healthy family functioning. Rigid, constricted, and automatic responses to varying circumstances are considered pathogenic (Ackerman, 1958). Healthy functioning requires not only resilience in response to change but also consistency and responsibility. Satir (1975) has stated that "effective employment of the family's resources in decision-making or problem-solving requires a balance between work or task efforts and appropriate attention to social and emotional needs of the members" (p. 70). Ackerman (1958) said that the family "must be internally integrated, cohesive, and self-stabilizing and fulfill the potentials for growth. It must preserve a fluid, resilient capacity to adapt to change" (p. 328).

According to Satir (1975), one of the most difficult tasks for a family therapist is to get family members "into the position where they can really look and see each other" (p. 95). Clear perceptions of self, others, and shared events are necessary for healthy family functioning. Sager (1981) illustrated the importance of perception with the following example:

One's choice of mate may have been guided by one's perception of that mate as a particular type, but one's perception may not be accurate; it may be colored by one's own realistic or neurotic needs, including the need to deny positive or negative attributes in terms of one's own value system and unconscious needs and fears (Gurman & Kniskern, p. 98).

Clear perception is necessary for effective communication, another dimension of healthy family functioning. Several distinguished family therapists, including D. Jackson, J. Weakland, V. Satir, J. Haley, and G. Bateson, have been involved in the development of communication theory. The two central ideas of the communicational view of behavior are "1) That specific behavior of all kinds is primarily an outcome or function of communicative interaction within a social system; and 2) that 'problems' consist of persisting undesired behavior" (Weakland, in Guerin, 1976, p. 121). Thus, the communication dimension is viewed as highly significant in evaluating marital functioning. A concept unique to this dimension is the "double bind" concept which occurs when there is a double-level message which is incongruent but no one comments on the discrepancy (Bateson, et. al., 1956). Therefore, unclear or distorted communication refers to confusing or vague messages and to failure to 'check out' communication in order to clarify meaning or intention.

Barnhill's (1979) last two dimensions concern family roles. Family roles are usually seen as patterns or behavior designed to fulfill family functions. Role reciprocity refers to agreed upon behaviors and to the degree or extent that one role complements that of another. Minuchin (1974) has stated that "there must be a complementarity of functions, with the husband and wife accepting interdependency and

operating as a team" (p. 52). There are, however, specific differences in marital and parent-child relationships.

We have been particularly impressed by the need to maintain lines between the generations; that is, not to confuse or blur distinctions between parents and children. Spouses cannot remain primarily in a dependent position to their parents to the exclusion of an interdependent marital relationship; nor can one behave primarily as the other's child; nor as a rival with one's own children for the spouses attention, nor reject a parental role completely (Lidz, Fleck, & Cornelison, 1965, p. 135).

Barnhill's (1979) dimensions encompass major theoretical approaches in the field of family therapy. Another approach found in the literature was descriptive of the characteristics of healthy family functioning.

Characteristics of Functioning Families

While some therapists concentrate their work on one aspect of healthy family systems, others present a comprehensive picture. For example, Fogarty (Guerin, 1976) sees a functioning family as having the following characteristics:

- (1) It has the kind of balance that can adapt to and even welcome change. This balance is different from homeostasis, which acts to maintain the status quo in the presence of change.
- (2) Emotional problems are seen as existing in the unit, with components in each person. There is no such thing as an emotional problem in one person.
- (3) Connectedness is maintained across generations with all members of the family.
- (4) There is a minimum of fusion, and distance is not used to solve problems.
- (5) Each twosome in the family can deal with all problems that occur between them, Triangulating onto a third person who is used to arbitrate or judge or solve the dispute is discouraged.
- (6) Differences between people are not only tolerated, but encouraged.
- (7) Each person

can operate selectively using both thinking and emotional systems with other members of the family. (8) There is a keen awareness of what each person gets functionally from himself, and what he gets from others. These are the areas of identification and differentiation. (9) There is an awareness of the emptiness in each member of the family, and each person is allowed to have his own emptiness. There is no attempt made to fill it up. (10) The preservation of a positive emotional climate takes precedence over doing what "should" be done and what is "right." (11) Function in the family is determined by each member saying that this is a pretty good family to live in over time. If one or more members say there is a problem, there is a problem. (12) Members of the family can use others in the family as a source of feedback and learning, but not as an enemy (p. 149).

Another statement of successful family functioning is the result of a twenty-year ongoing study described by Emily H. Mudd and Sara Taubin (1982). The study began with a nation-wide sample of "100 young husband-wife-children families" (p. 59) in 1957-1960. Twenty years later, in 1978-1979, fifty-nine of the families completed a follow-up questionnaire. "Judgments from a variety of sources estimated that these families portrayed an atmosphere of health, competence, strength and achievement" (p. 60). In summary, the study revealed:

Their family histories are marked by pragmatic, flexible adaptation. Family dynamics are egalitarian in the marital dyad, democratic with regard to sons and daughters. Relations with adult children are frequent, reinforced by a thriving transfer economy. Close friendships and active community involvement are cited as important sources of strength. While severely troubling situational events affecting family members are enumerated, few are defined as problems. Perceived problems are most often resolved within the family or, less often, with appropriate professionals. Husbands and wives express continuing satisfaction with marriage and family. They are optimistic about the future and, through careful planning, anticipate positive later-year development (p. 59).

"Healthy family functioning is a complex and exciting area of study that professionals have only begun to unravel" (Fisher, Giblin, & Hoopes, 1982, p. 273). Fisher, Giblin, and Hoopes contributed another perspective to what is known in a study of healthy family functioning as assessed by 208 nonclinical family members. The findings were compared with the results of a previous study (Fisher & Sprenkle, 1978) of family therapists' perceptions of healthy family functioning. While there were some differences in perceptions of the two groups, the findings were consistent with a major study of healthy family functioning by the Timberlawn group (Lewis, Beavers, Gossett & Phillips, 1976). Based on the three studies, the following picture emerged:

A healthy family is one in which family members develop an attitude of comradery and mutuality. That is, members are generally reciprocally accepting, supporting and caring of one another. They honor their agreements and commitments with one another. At the same time, behavioral and attitudinal differences are respected. These characteristics are achieved through open and direct communication. Family members are encouraged to express their feelings and thoughts which are attended to and valued by other family members. These behaviors result in family members feeling secure, trusting, and positive about and in the family (Fisher, Giblin, & Hoopes, 1982, pp. 283-284).

Looking more specifically at marriage partners, Ammons and Stinnett (1980) have identified and described personality characteristics that "enable couples to develop and sustain a vital relationship" (p. 37). Such a relationship is, according to them, what most couples expect their marriage

to be. Using data gathered by questionnaire, Ammons and Stinnett concluded that vital marital partners possess personality needs that promote: "(a) sexual expressiveness; (b) 'otherness' rather than selfness; (c) determination; and (d) high ego strength" (p. 37).

There seems to be little doubt that most American couples want a vital relationship and healthy functioning families. "The need for stability and the hope for quality are still strong motives underlying family formation, with less emphasis placed on stability than in previous generations and more emphasis on quality" (Taubin & Mudd in Cuber & Harroff, 1965, p. 262).

Marital Quality and Stability

"'Marital quality,' as a concept, has been gaining greater usage among marriage and family researchers, since it includes the entire range of variables which have been the traditional dependent variables in marital research" (Spanier & Lewis, 1980, p. 826). Lewis and Spanier (1979) argue that "the quality of most American marriages is the primary determinant of whether a marriage will remain intact" (p. 268). They stress that quality and stability do not automatically coexist. A stable marriage (one terminated only by the natural death of one spouse) may not, in fact, have high quality relationships.

Lewis and Spanier (1979) have "systematically examined, evaluated, codified, and reformulated virtually all of the

empirical and conceptual propositions of social scientists who have attempted to investigate the quality and stability of marriage" (p. 268). After identifying and organizing the empirical findings into topical areas according to the independent variables, they developed "first-order propositions from each set of empirical findings by the process of induction" (p. 273). More general propositions, called second-order propositions, were then induced from related first-order propositions. There were 74 first-order and 13 second-order propositions related to the concept of marital quality. The 13 second-order propositions are:

75. The greater the premarital homogamy, the higher the marital quality.
76. The greater the amount of premarital resources acquired for marital role functioning, the higher the marital quality.
77. The greater the individual's exposure to adequate role models for marital functioning, the higher the marital quality.
78. The more support that significant others give to a couple, the higher the subsequent marital quality.
79. The greater the socioeconomic adequacy of the family, the greater the marital quality.
80. The more spouses' satisfaction with the wife's working, the more the marital quality.
81. The more the household composition is perceived as optimal, the higher the marital quality.
82. The greater the couple's community embeddedness, the higher the marital quality.
83. The more positive the regard between the spouses, the greater the marital quality.
84. The more the emotional gratification between the spouses, the more the marital quality.
85. The more effective the communication between the spouses, the more the marital quality.
86. The greater the role fit, the greater the marital quality.
87. The greater the interaction, the greater the marital quality (pp. 275, 276, 279, 282, 283).

Identification of the components of marital quality and statement of them in propositional form provided valuable information concerning marital relationships. But "it is probable that there are some marriages of high quality which terminate in separation or divorce and some marriages of low quality which remain intact in spite of what may be an intolerable relationship" (pp. 285-286). Thus, in relating quality to stability, the following propositions were formulated:

91. The greater the marital quality, the greater the marital stability.
92. Alternative attractions to a marriage negatively influence the strength of the relationship between marital quality and marital stability.
93. External pressures to remain married positively influence the strength of the relationship between marital quality and marital stability (pp. 288 and 290).

The work of Lewis and Spanier substantiated the work of Levinger (1965, 1976) and of Nye and associates (1976).

The commonalities among these theoretical efforts are quite apparent. Each of them either implicitly or explicitly, draws heavily on exchange theory, pointing up the centrality of rewards to be obtained from the marital relationship, the personal profit to be derived outside of that relationship, and the importance of external influences on the perceived nature of the marriage. Each of these formulations, self-consciously, has been induced from existing empirical literature. Accordingly, these theories share a very similar level of generality and have a similar level of abstraction, high in informational content and yet easily operationalizable for testing purposes. In short, each of them forgoes an intimate link between empirical research and theory, advancing our understanding of stability or dissolution far beyond the simple bivariate relationships - forming

the bulk of the empirical literature - upon which they are based (Edwards & Saunders, 1981, p. 380).

Having recognized that alternative attractions and external pressures can be contingency factors impacting upon marital quality and stability, a concomitant factor to consider is that of perception. Taubin and Mudd (Cuber & Harroff, 1965) see satisfaction (also used to describe quality according to Lewis & Spanier, 1979) as being highly dependent upon the expectations each spouse brings to the union. A person's level of satisfaction usually results from a comparison between marital expectations and the marital situation according to Lenthall (1977).

Marital Expectations

Social historians have observed major changes in the expectations that Americans have concerning their marital and family relationships. Both Philippe Aries (1962) and Edward Shorter (1975) described the preindustrial family as one characterized by a lack of privacy and intimacy. The family was the unit of production and marriages were often arranged to advance a family's economic worth.

With industrialization, the family lost its productive function and work was separated from the family. Men became more involved in the outside working world while women were increasingly confined to the home.

The family became more of an emotional unit rather than a mainly productive and reproductive one. The affectional and caring sentiments tied

the husband-wife relationship tighter. It began to replace lineage, property, and economic considerations as the foundation of the marriage (Hutter, 1981, pp. 279-280).

Concerning the postindustrial age of the mid-twentieth century, Aries (Tufte & Meyerhoff, 1979) claimed "the public sector of the nineteenth century collapsed and people thought they could fill the void by extending the private, family sector. They thus demanded that the family see to all their needs" (p. 40). Historian John Demos (Tufte & Meyerhoff, 1979) agreed with Aries and further asserted that "we have isolated family life as the primary setting - if not, in fact, the only one - for caring relations between people" (p. 60). Thus, the responsibilities of marriage increased but the criteria of success were more difficult to define.

Being a "good provider" or a "good housekeeper" is a well-defined task, while being a good companion is more vague, as it may require silence at one time and conversation at another. The more the demands on a marriage are clear-cut and concrete, such as earning a living, procreating, and caring for the other person in times of illness, the more clearly can the success or failure be assessed. However, sexual gratification, psychological assistance to another person, and friendship are far more subtle, indefinite, and sophisticated in their requirements, the more so as individuals evolve and change over time. In addition, the fulfillments sought for in marriage are often contradictory in their requirements. Stability, loyalty, and dependability are qualities which do not easily coexist with stimulation, excitement, and variety (Grunebaum & Christ, 1976, p. 4).

Current marital expectations have become so great that some have questioned whether they can be met. To Elaine May

(1980), personal life in 20th century America seems to have become an obsession and she has questioned whether some people are caught up in a personal quest for "the perfect relationship" (p. 163). Daniel Yankelovich (1981) would agree with May that Americans are hungering for deeper personal relationships. But the research of Yankelovich, Skelly and White (1981) revealed that the hungering comes from a "growing conviction that a me-first, satisfy-all-my-desires attitude leads to relationships that are superficial, transitory and ultimately unsatisfying" (p. 251). It is, perhaps, as Richard Farson (1969) has suggested - that "the frustration and discontent in family life arise from the discrepancy between what one has and what one sees it is possible to have. Frustration arises, essentially, from the improvement in family life" (p. 65).

Chapter 3

ASCERTAINMENT OF INDICATORS OF MARITAL DYSFUNCTION

Introduction

The basic question for this research is whether or not enough knowledge can be gleaned from family therapy literature to assist American families in becoming aware when potentially dangerous dysfunction is present. Unfortunately, longitudinal research specifically identifying etiology of marital dysfunction is very limited both in the number of studies and in the number of factors included in each of the studies.

In Chapter 2, the review of literature provided several comprehensive descriptions of marital and family functioning. Except for Barnhill's (1979) dimensions, the descriptions were primarily stated in positive terms. Therefore, Barnhill's work in isolating eight basic dimensions of family mental health and pathology provides a solid foundation with which to begin. The dimensions come from the works of major theorists in the field of family therapy including Bowen (1971), Satir (1967, 1975), Minuchin (1974), Ackerman (1958), Weakland (Guerin, 1976), Bateson (1956), and Lidz (1965). Others, not referenced, included Haley, Boszormenyi-Nagy, Lederer, Jackson, and Whitaker. As such, the dimensions characteristically emphasize the dynamics of relationships. Barnhill's dimensions also constitute an extent of measurement

as if on a continuum, with total dysfunction at one point as opposed to the highest level of healthy functioning at the opposite point.

In this chapter, the characteristics of each of the descriptions of healthy family functioning will be compared. Then positive family functioning characteristics and the propositions of marital quality will be compared to Barnhill's (1979) dimensions. Where correlation exists between the characteristics of propositions and Barnhill's dimensions, the opposite dysfunctional or pathological aspect will also exist. Where correlation with Barnhill's dimensions does not exist, the characteristic or proposition will have to be conversely stated in terms of dysfunction. The last section of this chapter will restate the elements of dysfunction as danger signals which can be understood by the general public.

Comparison of Characteristics of

Healthy Family Functioning

The listing of characteristics of healthy family functioning has been a positive approach to understanding family dynamics. It is anticipated that such characteristics may compare with the healthy dimensions isolated by Barnhill (1979). A first step in making that comparison, however, will be to integrate the functioning family descriptions given in Chapter 2.

The most comprehensive listing of those characteristics of a functioning family comes from Fogarty (Guerin, 1976).

They could be abbreviated as follows:

- (1) Balance that can adapt to and welcome change
- (2) Emotional problems exist in the unit
- (3) Connectedness across generations
- (4) Minimum of fusion; distance not used to solve problems
- (5) Discourages triangulating by arbitrating, judging, or in resolving disputes
- (6) Differences encouraged
- (7) Each person operates selectively with other family members
- (8) Identification and differentiation respected
- (9) Awareness of emptiness
- (10) Positive emotional climate takes precedence over "should" and "right"
- (11) Family satisfaction; recognize problems
- (12) Family support; feedback and learning (p. 149).

In like manner, an abbreviated listing of characteristics resulting from the 20-year study reported by Mudd & Taubin (1982) included:

Flexible adaptation
 Egalitarian marital relationship
 Democratic relationships with sons and daughters
 Frequent relations with adult children
 Close friendships and active community involvement
 Perceived problems appropriately resolved
 Continuing satisfaction with the marriage and family
 Careful planning for the future (p. 59).

In integrating the Mudd and Taubin (1982) study with Fogarty's (1976) list, it is apparent that there is agreement concerning the ability to be flexible, listed by Mudd and Taubin, and to adapt to change, listed by Fogarty. The Mudd and Taubin study listed marital relationships as egalitarian and parent/child relationships as democratic, as its second and third characteristics respectively. Such qualities might be expected to result from having the following seven

characteristics as numbered by Fogarty: (4) a minimum of fusion, (5) discouraging triangulating, (6) differences are encouraged, (7) each person operates selectively with other family members, (8) identification and differentiation respected, (10) a positive emotional climate, and (12) family support. Also, frequent relations with adult children (Mudd & Taubin) relates to Fogarty's third characteristic, connectedness across generations.

The next aspect of successful family functioning enumerated by the Mudd and Taubin (1982) study, close friendships and active community involvement, is the only aspect which lacks a corresponding characteristic on Fogarty's list. Correlation does exist between another of Mudd and Taubin's characteristics, the appropriate resolution of perceived problems and several of Fogarty's characteristics. The corresponding Fogarty characteristics include: (2) emotional problems existing in the unit, (4) minimum of fusion, distance not used to solve problems, (5) triangulating discouraged, (11) family satisfaction, recognizing problems, and (12) family support, feedback and learning.

Satisfaction with the marriage and family (Mudd & Taubin 1982), correlates with Fogarty's eleventh characteristic, family satisfaction. And the last Mudd and Taubin characteristic, careful planning for the future, seems to relate to Fogarty's first characteristic, balance that can adapt to and welcome change. Ease in integrating

characteristics of healthy family functioning from the Mudd and Taubin study with Fogarty's characteristics encourages additional correlation.

The composite picture of healthy family functioning based on the three studies discussed by Fisher, Giblin, and Hoopes (1982) also corresponds well with Fogarty's (1976) description. In abbreviated form, the characteristics enumerated by Fisher, et al. include:

- Attitudes of comradery and mutuality
- Members reciprocally accepting, supporting and caring
- Agreements and commitments honored
- Behavioral and attitudinal differences respected
- Open and direct communication
- Feelings and thoughts attended to and valued
- Members feel positive, secure, and trusting (pp. 283-284).

The first two characteristics, attitudes of comradery and mutuality, and reciprocal acceptance, support and caring (Fisher, et al.) correlate with the following Fogarty characteristics: (2) emotional problems exist as a unit, (10) positive emotional climate, (11) family satisfaction, and (12) family support. Honoring agreements and commitments (Fisher, et al.) relates to Fogarty's number (7) each person operates selectively with other members, and number (8) identification and differentiation. Respect for behavioral and attitudinal differences (Fisher, et al.) would correspond with Fogarty's number (6) differences encouraged and with number (8) identification and differentiation. Open and direct communication, the fifth characteristic in the Fisher, et al. study (1982), is not specifically listed by Fogarty,

However, most of the other listed characteristics are dependent upon open and direct communication, and, therefore, it seems to be assumed. The expression of feelings and thoughts and the positive, secure and trusting feelings, listed as the sixth and seventh characteristics of Fisher, et al. correspond to Fogarty's number (10) positive emotional climate, number (11) family satisfaction, and number (12) family support.

The comparison of the three lists of characteristics of healthy functioning families provided by Fogarty (1976), Mudd and Taubin (1982), and Fisher, Giblin, and Hoopes (1982) revealed that the twelve characteristics listed by Fogarty, the eight characteristics by Mudd and Taubin, and the seven by Fisher, et al., appear to be descriptive of qualities which are the same or nearly the same. Only one characteristic, close friendships and active community involvement (Mudd & Taubin), lacked correlation with both Fogarty's list and the Fisher, et al., list. Adding the close friendships and active community involvement characteristic to Fogarty's list, which was the most comprehensive, allows for further comparison including a comparison of characteristics of healthy functioning families and Barnhill's (1979) dimensions of family mental health and pathology.

Comparison of Characteristics of Healthy Family
Functioning with Barnhill's Dimensions
of Family Mental Health and Pathology

Barnhill's (1979) eight dimensions were grouped into four basic family themes. The theme, Identity Processes, included

the first two dimensions, "individuation vs enmeshment" and "mutuality vs isolation." "Individuation refers to independence of thought, feeling, and judgment of individual family members" (p. 95). Several characteristics of healthy family functioning relate to this dimension. Using Fogarty's (1976) numbered list, these characteristics are (4) minimum of fusion, (5) discourages triangulating, (6) differences encouraged, (8) identification and differentiation, and (9) awareness of emptiness. The characteristic from the Mudd and Taubin (1982) study, close friendships and active community involvement, also has some relationship to the "individuation vs enmeshment" dimension.

The second dimension grouped under Identity Processes by Barnhill (1979) is "mutuality vs isolation." "Mutuality refers to a sense of emotional closeness, joining, or intimacy which is only possible between individuals with clearly defined identities" (Barnhill, 1979, p. 95). Again, several of the characteristics of healthy family functioning (Fogarty, 1976) coincide with this dimension. Using Fogarty's numbering and list, they include (2) emotional problems exist in the unit, (4) minimum of fusion - distance not used to solve problems, (10) positive emotional climate, (11) family satisfaction, and (12) family support.

Barnhill's (1979) second family theme, Change, involves the dimensions of "flexibility vs rigidity" and "stability vs disorganization." "Flexibility refers to the capacity to

be adjustable and resilient in response to varied conditions and to the process of change" (p. 95). Forgarty's (1976) healthy functioning family characteristics which correlate are: (1) balance that can adapt to and welcome change, (6) differences encouraged, and (10) positive emotional climate takes precedence over "should" and "right."

The third family theme of Barnhill (1979) is Information Processing and the two dimensions involved are "clear vs distorted perception" and "clear vs distorted communication." "Clear perception refers to undistorted awareness of self and others. As a shared phenomenon, it refers to clear joint perceptions and consensual validation of shared events (e.g., conflict, affection)" (p. 95). "Clear communication refers to clear and successful exchange of information between family members" (p. 96). All of the characteristics of healthy family functioning enumerated by Fogarty (1976) relate to one or both of these dimensions. Healthy family functioning requires realistic perception and communication.

Barnhill's (1979) fourth family theme is Role Structuring and the dimensions are "role reciprocity vs unclear roles or role conflict" and "clear vs diffuse or breached generational boundaries." "Role reciprocity refers to mutually agreed upon behavior patterns or sequences in which an individual complements the role of role partner" (p. 96). "Clear generational boundaries refers to certain specific types

of role reciprocity among family members; that is, to specific differences between marital, parent-child, and sibling relationships. Members of each generation are allied more closely with their own than across generations" (p. 96). Characteristics of healthy family functioning from Fogarty's list (1976) which relate to these dimensions are (3) connectedness across generations, (5) discourages triangulating by arbitrating, judging, or in resolving disputes, (7) each person operates selectively with other family members, and (8) identification and differentiation. Also, the characteristic isolated from the Mudd and Taubin (1982) study, close friendships and active community involvement, would relate to this family theme of Role Structuring.

It appears evident from the comparison of the literature thus far that there is considerable agreement about the components of healthy family functioning. It also appears that, in terms of the relationship context, Barnhill's (1979) dimensions are comprehensive. Therefore, the last comparison will consider the relationship between Barnhill's dimensions and stability in marriage.

Comparison of Barnhill's Dimensions of
Family Mental Health and Pathology with
Propositions of Quality and Stability in Marriage

In classifying empirical findings in their review of literature related to the quality and stability of marriage, Lewis and Spanier (1979) found three generic areas to be

most meaningful: "premarital factors influencing marital quality, social and economic factors, and interpersonal and dyadic factors" (p. 274). The premarital variables included homogamy, resources, parental models, and support from significant others. Of these four premarital variables, parental models, or exposure to adequate role models, (Prop. #77) coincides with Barnhill's (1979) dimension of "clear vs unclear roles or role conflict." Support from significant others (Lewis & Spanier, Prop. #78) relates to Barnhill's dimension of "mutuality vs isolation." The other two premarital variables, premarital homogamy (Lewis & Spanier, Prop. #75) and premarital resources (Lewis & Spanier, Prop. #76), have no comparable dimension in Barnhill and thus will be considered as additional areas with potential to contribute to marital dysfunction.

The second generic area, according to Lewis and Spanier (1979), included four social and economic factors: socio-economic adequacy, satisfaction with the wife's working, household composition, and community embeddedness. Socio-economic adequacy (Lewis & Spanier, Prop. #79) is related to both the third and fourth dimensions of Barnhill (1979), "flexibility vs rigidity" and "stability vs disorganization" respectively. Flexibility and stability are needed for achievement of stable economic resources and roles. Satisfaction with the wife's working (Lewis & Spanier, Prop. #80)

is related to Barnhill's first dimension, "individuation vs enmeshment" and the seventh dimension, "role reciprocity vs unclear roles or role conflict." Spouse approval and satisfaction regarding a wife's work can be seen as an affirmation of her as an individual. Proposition #81 (Lewis & Spanier) concerning optimal household composition has little, if any, relationship to any of Barnhill's dimensions. Community embeddedness (Lewis & Spanier, Prop. #82) relates somewhat to Barnhill's first dimension, "individuation vs enmeshment" and also to the seventh dimension, "role reciprocity vs unclear roles or role conflict." Community embeddedness involves self-identity and role perception in activities with friends and associates.

The third generic area identified by Lewis and Spanier (1979), interpersonal and dyadic factors, seems to have the most significant correlation with Barnhill's (1979) dimensions. The five factors involved are positive regard for spouse, emotional gratification, effectiveness of communication, role fit, and amount of interaction. Positive regard for spouse (Lewis & Spanier, Prop. #83) relates to the first, second, fifth, and sixth dimensions of Barnhill: "individuation vs enmeshment," "mutuality vs isolation," "clear vs unclear or distorted perception," and "clear vs unclear or distorted communication" respectively. Proposition #84 (Lewis & Spanier), emotional gratification, relates to Barnhill's first and third

dimensions, "individuation vs enmeshment" and "mutuality vs isolation." Effectiveness of communication (Lewis & Spanier, Prop. #85) clearly relates to Barnhill's dimension number six, "clear vs unclear or distorted communication" and Lewis and Spanier's Proposition #86, role fit, relates to Barnhill's dimension number seven, "role reciprocity vs unclear roles or role conflict" and to dimension number five, "clear vs unclear or distorted perception." Finally, Proposition #87 (Lewis & Spanier), regarding the amount of interaction, relates to dimension number two (Barnhill), "mutuality vs isolation."

Specifying Indicators of Marital Dysfunction

Having compared the findings reported in the literature regarding healthy family functioning and marital quality and stability, it appears that areas with potential for dysfunction have been delineated. The following pathological dimensions come from Barnhill's (1979) integration of concepts from major writers in the field of family therapy:

1. enmeshment
2. isolation
3. rigidity
4. disorganization
5. unclear or distorted perception
6. unclear or distorted communication
7. unclear roles or role conflict
8. diffuse or breached generational boundaries (p. 95).

Four additional areas which have potential to contribute to dysfunction have been identified by Lewis and Spanier (1979). They are premarital homogamy, premarital resources,

household composition, and community involvement or embeddedness which was also delineated by the Mudd and Taubin (1982) study.

Because of the positive wording of Lewis and Spanier's propositions and the characteristics of healthy family functioning, these four areas need to be conversely stated in terms of dysfunction. Therefore, as if an opposite ends of a continuum, the dysfunctional terms for premarital homogamy could be "dissimilar background." Premarital resources could be restated as "limited role resources." "uncontrolled or undesired household composition" could be the dysfunctional counterpart of household composition and "limited support and community involvement" could replace community embeddedness. The addition of these four factors to the eight pathological dimensions of Barnhill (1979) produces twelve indicators or danger signals of potential for marital dysfunction. While the terms are probably readily understood by professionals in the family therapy field, most of the general public would not be acquainted with them. For danger signals to have utility, they must be recognizable as such. For these characteristics to serve as danger signals for the general public, they must be restated and defined. That is the goal for the final section of this chapter.

Danger Signals of Marital Dysfunction

The following restatement and definitions of danger signals of marital dysfunction are proposed:

1. Significant differences in background

Major differences in race, socio-economic status, religion, age, and intelligence can place stress on marital relationships. The parallel of this danger signal is dissimilar backgrounds, the opposite of premarital homogamy.

2. Low levels of physical, psychological, social, or intellectual performance.

Premarital resources, according to Lewis and Spanier (1979, p. 275) include physical and psychological health, interpersonal skill functioning ability, and higher levels of social class and education. Lack of such resources results in low levels of performance.

3. Loss of individual self-identities

Enmeshment, according to Barnhill (1979), "refers to poorly delineated boundaries of self, to an identity dependent on others, to symbiosis, and to shared ego fusion" (p. 95).

4. A continuing sense of loneliness

Isolation in a relationship results in little intimacy. The individuals are emotionally apart and feel lonely.

5. Inflexible responses to change

Rigidity refers to the inability to be flexible in reaction to change. The belief that there is "one way" to do things results in disagreements.

6. Unpredictable behavior
Barnhill (1979) describes disorganization as "a lack of stability, or consistency, in family relations. . . .a lack of predictability" (p. 95).
7. Unrealistic perceptions of people and situations.
"Lack of clear perception refers to confusing or vague perceptions, or perceptions distorted for another" (Barnhill, 1979, p. 95).
8. Failure to communicate openly and honestly
Unclear or distorted communication includes confusing, dishonest, and paradoxical communication with failure to check out meaning.
9. Disagreement over what a spouse, parent, or child "should" be and do.
Unclear roles or role conflict results from failure to agree on the expected individual actions as spouse, parent, or child.
10. Differences between parental and child responsibilities are ignored
Diffuse or breached generational boundaries results from failure to maintain separation between parents and children.
11. Undesired household composition.
The presence of undesired family members, whether young or old, can create problems.

12. Insufficient community support and/or participation. Approval and support from family, friends, and the community contribute to healthy family functioning.

Chapter 4

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

The purpose of this study was the delineation of danger signals of marital dysfunction. The theoretical conflict over whether American families are dying or developing and the confusion of the American public concerning the state of American families were initially presented. Recognition was given to the current high rate of marital dissolution and to the lack of understanding which contributes to marital dysfunction. Major changes in marital expectations were acknowledged. Dimensions of family mental health and pathology were examined and compared with characteristics of healthy functioning families and with propositions of marital quality and stability. Twelve danger signals of marital dysfunction were isolated. Having originated in the professional literature, restatement of the danger signals into language more readily understood by the general public was effected to encourage utilization. Suggestions for use of the danger signals by counselors were also recommended.

Conclusions

As a basic institution, the American family has been subjected to continual evaluation by professionals from many disciplines. However, judgments and conclusions conflict and often seem to originate as much from the personal philosophies of the evaluators as from objective data.

Consequently, Americans are confused about the status of American families.

Americans have not repudiated marriage and family. Marital expectations have changed and families are experiencing greater pressure to meet the emotional needs of their members. Americans have indicated that they want deeper and more meaningful personal relationships. There is no evidence that they want to experience dysfunction.

The field of marital and family therapy has grown very rapidly since 1970. There has been an impressive development and refinement of theory about family relationships. Families have benefited from the efforts of theorists in the field through the services offered by counselors and therapists. This review of literature validates the belief that reliable data concerning marital dysfunction not only existed but could be isolated and restated for use by the general public.

Recommendations

Based on the literature review and the results of this study, the following recommendations are offered:

1. More longitudinal research concerning the etiology of marital dysfunction should be conducted.

2. Prevention-oriented educational materials which incorporate the danger signals of marital dysfunction should be developed. Such materials could range from a simple listing of the danger signals to lengthy descriptions and

suggestions or strategies for either self-improvement or improvement with the assistance of a counselor or therapist.

3. Research and development of ways to assess the level of dysfunction in each signal area should be effected.

4. Effective intervention strategies pertaining to each of the danger signals should be identified and/or developed.

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