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Hearing on
The Benefits of a Healthy Marriage

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Mr. Chairman and Members of the Subcommittee:

I appreciate this opportunity to share with you a glimpse of what is happening regarding marriage in the United States. I believe we stand at the door of an unprecedented opportunity for strengthening this foundational family relationship upon which so much of the future of our children and our society rests.

My name is Scott Stanley. I am the co-director of the Center for Marital and Family Studies at the University of Denver, where my colleague Dr. Howard Markman and I have worked for over two decades from a scientific perspective to better understand what factors put couples at risk for marital distress and divorce, and what steps can be taken to help couples achieve their goals for stable, happy, and healthy marriages. This research program, begun by Howard Markman, has been supported by the National Institute of Mental Health since 1980. I am also one of two senior advisors to the Oklahoma Marriage Initiative. The ambitious and strategic efforts in Oklahoma are generating knowledge about broad-based dissemination of marriage services (among the many innovative steps they are taking), and is providing much insight to efforts around the nation.

In my written comments, I will cover a significant amount of ground. The major points detailed in the body of my testimony are these:

- There is a rich and sustained discussion about marriage among policy experts and social scientists from very diverse philosophical and political backgrounds. This discussion has moved well beyond superficial differences in ideology to a serious focus on problems that real couples and families face in developing and sustaining stability in their marriage relationships. Further, a deep consensus has emerged among social scientists about the beneficial effects of healthy marriages for children and adults.
- Healthy marriages can be defined in a variety of ways. One way to readily grasp their nature can be framed in three types of safety, roughly defined as emotional safety in day-to-day interactions, freedom from fear of harm, and security about a future that makes

investing in the relationship worthwhile. Further, as evidenced by the recent work of the nationally recognized scholars of the Research Advisory Group for the Oklahoma Marriage Initiative, models for how to track societal progress in strengthening marriages are definable and practical.

- While most discussions about "marriage education" assume a very narrow definition of what that might include, I will argue that there are, in fact, a wide range of educational activities that can be seen as furthering the goal of helping more people achieve their desires of forming and sustaining healthy marriages.
- Decades of development, practice, and research lay a strong foundation for optimism that
 marriage education (and marital therapy) encompasses various and effective tools
 designed to help people be successful in their aspirations in marriage. While there is a
 strong research base upon which to build further, there is also a clear need for more
 program implementation, refinement, and evaluation among those in poverty.
- The defining elements of true, research-based approaches for helping people in their goals of achieving healthy and lasting marriages are that they be empirically informed, empirically tested (or testable), and regularly refined based broadly upon ongoing research in the field of marriage and family. Within such a model, one acts on what is known and one takes action to know more over time.

Why Marriage and Why Now?

Over the past decade, an amazing convergence has developed around the belief that there is something of special value to marriage. While this convergence may, on the surface, seem a union of strange bedfellows, a marriage movement of sorts has taken hold, not because one ideology about marriage has overwhelmed another, but because influential minds have found productive ways to meet in the middle for discussions based on a level of respect and agreement about the value of stable and *healthy* marriages. For example, many liberals and conservatives have been working together in efforts to take reasonable steps to help more people who desire marriage to succeed in their aspirations for it.

In my view, liberals have tended to increase their focus on marriage because of the influence of important and clear trends in social science data—much of it funded by national institutions of the federal government such as The National Institutes of Health (e.g., NIMH, NICHD) and The National Science Foundation. As a result of decades of accumulated data, many family scientists from the fields of sociology, psychology, and economics have concluded that children and adults, on average, experience the highest levels of overall wellbeing in the context healthy marital relationships. Of course, there are a great many single parents and step-families doing a wonderful job of providing what their children need to succeed in life. Nevertheless, the evidence has accumulated showing advantages for children being raised by their married parents.

Conservatives have rallied to the marriage agenda from a more ideological basis of concern, fueled by data on the trends in divorce, out-of-wedlock births, and generalized family (and extended family) fragmentation. Further, a vast amount of government expenditures is directly

related to the need to deal with the effects of these trends—a concern to liberals and conservatives alike, and one that has led various states to consider or launch efforts to address these complex problems.²

It would be hard to overstate the amount of progress that has been made in various social science and policy venues (e.g., conferences, working groups on federal evaluation projects) with regard to the quality and tone of the discussions between groups with historically very different views. There are exceptions to be sure, but there is a high degree of convergence developing around the view that marriage is important and worth thoughtful efforts to strengthen. I think this convergence may be the single most important trend related to marriage in the past 10 years. As people grapple with real problems affecting real people, it has become harder to tell the conservatives from the liberals, and vice versa. Real progress can be made under such conditions.

In addition to accumulating evidence that there is something uniquely beneficial about marriage, it is clear that most people in the U.S. aspire to be married, and be married for life.³ This interest in marriage holds regardless of race, religion, and income; although there are some important variations among groups, such as it being less likely that, without intervention, African Americans in poverty will marry or remain married than other groups. The reasons for such differences are very complex.

Recent research from the large, multi-city Fragile Family research project garnered great attention because of the finding that couples having children out-of-wedlock tended to be far more positive in their views about marriage than most people thought.⁴ Of course, it is also well understood that, without some supports and intervention, most of these couples will not end up married; the barriers for marriage among the most disadvantaged are considerable.⁵

While most citizens have the dream of life-long marriage, many if not most do not achieve this goal. As divorce rates grew, successive generations became wary of marriage, desiring it while fearing it. Many people have a crisis in confidence about its viability, and, therefore, have sought alternatives such as cohabitation, which is falsely believed by younger people to reduce the risks of relationship dissolution and pain. The evidence has accumulated showing that these alternatives are associated with even higher levels of risk on a variety of dimensions, providing less stable contexts for raising children.

If there is generally strong evidence that marriage is desired by most and generally beneficial, the question arises, "what kinds of marriages provide clear benefits and which do not?" There are many ways to answer this question, but the concept that has taken greatest hold in the context of public policy discourse is that of healthy marriage.

What is Healthy Marriage?

"Healthy" marriage has become the language of common ground. While the term "healthy" is somewhat clinical and limited for purposes of describing such a complex and rich relationship, the term has significant political utility because it clarifies what reasonable public policy goals about marriage promotion and support are and are not about. Healthy marriage, by definition, does not include marriages that are dangerous or chronically damaging.

My colleague Howard Markman and I at the Center for Marital and Family Studies at the University of Denver have been expanding the theory that underlies our prevention approach along the lines of what we call safety theory. In this model, sound and healthy marriages have three fundamental types of safety:

- 1) **Safety in interaction**: being able to talk openly and well (enough) about key issues, with the strongest expressions of such safety including emotional safety and support
- 2) **Personal Safety**: freedom from fear of physical or emotional harm and intimidation
- 3) *Safety in commitment*: security of mutual support, teamwork, and a clear future together

Based on a wide range of research as well as experience working with people from various cultures around the world, it appears to us that these themes are basic and universal. To provide more detail, I will draw on thought from a recent paper of mine. ¹⁰

Interaction Safety. There is a tremendous amount of evidence that relationships that are characterized by chronic negative interaction are damaging to adults and the children living with them. Negative interaction includes patterns such as frequent escalation of conflict, criticism, invalidation, withdrawal, demand-withdraw, contempt, and so forth.

- Negative patterns of interaction strongly differentiate happy from unhappy couples. 11
- Negative patterns of interaction are one of the best discriminators of which couples will go on to experience chronic distress, break up, or divorce, and which will succeed. 12
- Negative patterns of interaction among adults put children at greater risk for a variety of negative outcomes, including mental health problems, decrements in school performance, and various forms of acting out behavior. This may be the most clearly agreed upon single fact in the family science literature.
- Negative patterns of interaction are associated with negative mental health outcomes for adults, such as depression and anxiety, ¹⁴ and also reduced work productivity. ¹⁵

There is therefore compelling evidence that chronic, negative interaction and poorly managed conflict places adults and children at risk. A healthier marriage would be characterized by lower levels of such negativity. An unhealthy marriage would be marked by higher, chronic levels. Beyond negative interaction being a hallmark of an absence of interaction safety, positive dimensions such as supportiveness and friendship foster a day-to-day sense of positive connection in a marriage—moving a marriage from merely healthy to great.

Personal Safety. Domestic violence puts people—and especially women and children—at greater risk for mental health problems, physical health problems, and death. Domestic violence and aggression can include physical threats and harm as well as psychological abuse

and intimidation. Healthy marriages do not include such dangerous and debilitating behaviors.

Interventions to foster healthy marriages could be expected to help reduce domestic violence by any of several means, such as (1) educating young people about the dangers of aggression, and how to avoid aggressive relationships and behaviors; (2) reducing the likelihood of ongoing violence in relationships where poorly managed conflict has spilled over to physically aggressive contact that is, nevertheless, not the type of domestic violence that is most dangerous and least likely to change; and (3) helping women at risk realize a need to leave or avoid relationships with the most serious and dangerous types of aggression. Research is becoming ever clearer that, while all forms of domestic violence can be dangerous, some forms are far more dangerous and more likely to last than others.

The healthy marriage concept clearly implies that one outcome of good relationship education occurs when a woman in a dangerous relationship learns she has better options, while learning about steps she can take to increase safety for herself and any children involved. Metaphorically, a goal of marriage education should be to help people in burning houses leave, and to help people considering entry into smoldering buildings to gain the strength and support to flee.

Commitment Safety. Marriage can be fundamentally construed as a long-term investment, and in many ways, functions like one. It is the expectation of longevity that makes the day-to-day investment rational. ¹⁸ People require a sense of security about the future of the relationship in order to fully invest in the present for that future. This is the nature of commitment in marriage, in which some options are given up in favor of the richer possibilities of building a life together.

In contrast, relationships with no clear sense of a future favor pressure for performance in the present (because there is no guarantee that the partner will stay), with score-keeping about levels of effort and investment, and anxiety about continuance, being the logical outgrowth. Simply put, couples do best when they have a clear sense of couple identity and a long-term view. This does not mean that it makes sense for all couples to have a future. Some relationships are destructive and would be better ended than continued. Yet, informed opinion is that the average couple with reasonable potential in marriage will do best if they are able to maintain a clear commitment that provides the protective benefits of having a secure sense of a future together. These are the conditions of family stability that also give children the most secure base.

There is growing empirical evidence that it is this element of a commitment to a future that is most strongly linked to healthy types of sacrifice or mutual giving among partners. ¹⁹ Further, we have preliminary but compelling evidence that the degree to which males will sacrifice for female partners, without a sense of personal loss and ensuing resentment, is strongly related to how committed they are to a long-term future. ²⁰ In fact, the relationship between commitment to a future and sacrifice appears to be strong for men and weak in women—a finding warranting further research. This, along with data from various studies, has led me to hypothesize that women may give their best to men as long as they are attached to them while men may not give their best to women unless they have committed to a future. If this is, in fact, generally true, it holds dramatic implications for understanding inequities in what men versus women get out of less committed forms of relationships than marriage. Unhealthy marriages can be damaging to women, but it is also becoming clearer that women are too often on the short end of differential

levels of commitment and investment in relationships with men outside of marriage.

While many other details and nuances of healthy marriages can be, and are, delineated by various marriage and family experts, these elements of safety can be seen as foundational to what a healthy marriage provides. That also means that educational or therapeutic programming designed to foster such dynamics, where appropriate, hold promise for helping more couples to achieve stability and happiness resulting in obvious benefits for their children.

In close parallel, the national marriage scholars comprising the Research Advisory Group for the Oklahoma Marriage Initiative recently discussed ways to empirically define healthy marriage in the context of government programming and policy, suggesting that progress toward a goal of increasing healthy marriages could be tracked with existing survey methods along these lines²¹:

- The percentage of children living with their biological or adoptive parents who are also in healthy marriages defined by simple measures of relationship quality on several dimensions already reasonably well measured in the Oklahoma Marriage Initiative Baseline Survey²²:
 - o Moderate to high relationship satisfaction
 - o Lower levels of negative interaction
 - o Lower levels of divorce potential (thinking and talking about divorce)

Healthy marriages would be characterized by reasonable levels of marital satisfaction, though the levels would not have to be the highest levels to argue that the marriage was healthy. This assumption is well founded on Paul Amato's (of Pennsylvania State University) concept of the "good enough" marriage. These are marriages in which adults and children derive most of the major benefits of marriage even though the adults are, at least at present, not highly satisfied. While these marriages have chronic vulnerability, and are therefore not as "healthy" as they could be, they provide clear benefits as long as the marriages remain stable (and do not encounter any major destabilizing events).

What Is "Marriage" Education?

Part of the work that Howard Markman and I (and numerous colleagues) have done over the past 25 years includes basic research on the risks for marital failure, research on positive and protective factors in marriage, and research on commitment and how it functions in relationships. We (and colleagues²⁴) have also spent considerable energy developing an empirically based, educational model for couples designed to help them reduce their risks and increase skill and confidence to achieve their goals in marriage. That program is called PREP, which stands for the Prevention and Relationship Enhancement Program. PREP fits in a broad range of efforts designed to help people develop core attitudes and behaviors associated with marital success.

Over the past 10 years, there has been increased activity in private (e.g., professional counselors, religious organizations) and public (e.g., government service settings) sector efforts to help more people through what has become loosely described as "marriage education." There has even arisen a large, annual conference where people of varied backgrounds have been congregating to share approaches, solutions, and dialogue on how to help people who choose to be married to be

successful in it.25

It is unfortunate and limiting that the term "marriage education" conjures up such a narrow image of what is meant and what is possible in the public discourse about efforts to strengthen marriages. In my view, true "marriage" education can take a wide range of forms, all of which can be understood as supporting the broad goal of helping people succeed in this endeavor.

I would add that there have been decades of research in the closely related field of marital counseling²⁶, which can play an important role in more intense efforts to help couples who have viability yet high risk of distress or dissolution.

All of the following can be forms marriage education. Each would plausibly increase societal good by increasing, over time, the percentage of healthy marriages, and, thereby, the percentage of children being raised in that context:

- Helping someone better understand the benefits of marriage is marriage education.
- Helping someone develop realistic expectations about marriage is marriage education, including an understanding that relationships take work, but also that lasting marriages are possible.
- Helping someone understand key risk factors for marital and relationship distress, in general, and their relationship in particular, is marriage education.
- Working with couples who are planning marriage, or who are already married, is marriage education.
- Working with a single person can be marriage education: e.g., someone who may not be interested in marriage for now but who could use help distinguishing between healthy and unhealthy relationships, and what sort of relationship to consider as a foundation for a good marriage.
- Teaching information that leads someone to break up with a dangerous partner can be marriage education.
- Teaching people how to manage conflict more constructively, even if their primary focus is not currently marriage, is relationship education and often part of marriage education.
- Helping someone identify additional resources to support healthy relationships can be marriage education.

In national discussions about government initiatives and programs designed to foster healthy marriages, too many people picture only a scenario where couples receive instruction in some kind of class setting. This is certainly a common form of marriage education, and one on which we have focused a great deal of our work in developing and testing PREP. But marriage education does not have to assume an existing marriage or even an existing relationship. For example, educating high school students about key facts related to marriage, mate selection, and risk factors can be easily seen to be marriage education, even if there is no marriage on the horizon for the bulk of the students in the coming few years.

Another misunderstanding about marriage education, especially in the context of government

initiatives, is represented in the fear that some have of government case workers pressuring non-married recipients of means-tested government benefits to get married out of some belief that more marriage among highly disadvantaged people would solve all the ills of poverty. I know a great many people from all kinds of political and philosophical backgrounds who are part of ongoing national and state discussions about what might be done, and I can honestly say that I do not know anyone who thinks this simplistically about the challenges facing low income individuals and couples. The problems are very complex, as will be the best solutions. The good news, maybe the best news of all, as I said earlier, lies in the quality of the discussions now taking place in various circles.

A specific example highlights one truly good outcome along the lines of healthy marriage, but one not consistent with the caricature sometimes painted in debates on this issue. Consider a woman who has struggled with poverty, and who happens also to be residing with a dangerous and abusive male. As part of her experience in TANF, she may take part in relationship/marriage education in which she learns more about healthy vs. dangerous relationships patterns in such a way that changes occur her own beliefs and expectations about what is acceptable for her and her children. She may decide that her present relationship is unacceptably dangerous, learn more about how to get support and help to become safe, and take steps to move on from that relationship in ways that improve her future outcomes. Sometimes, relationship and marriage education will and does result in the end of a relationship, not movement toward marriage.

True marriage education can occur at multiple stages in life, from high school education about reasonable expectations, to young adults learning about high and low risk relationships and behaviors, to helping people make better choices when thinking about a mate, to helping already partnered couples gain a better chance in succeeding.

Does Marriage Education Work, and For Whom Does It Work?

I have laid out a broad definition of what marriage education can encompass. Not all variations of what is possible have been attempted on a broad basis nor are they all fully tested. On the other hand, there are a great many studies over a number of decades that demonstrate promising and positive findings from a wide range of marriage and relationship education efforts with couples—findings summarized in numerous papers and reviews.²⁷ There is evidence of gains in communication, improvements in relationship satisfaction, and, in some studies, a lower likelihood of relationship dissolution. The most consistent and robust findings suggest that couples can be helped to communicate less negatively and more positively, and that such effects can be very long lasting. Given that conflict and negativity are highly associated with deleterious effects on adults and children (as discussed earlier), this is important.

Such studies lay out an empirical foundation for believing in the value of broad-based efforts to make such experiences available to more couples.

Other, more conceptual, arguments can also be put forth regarding the value of marriage education. ²⁸

- 1. Education about marriage and family relationships can help people learn about key risks early enough to take action to lower them. For example, long before becoming deeply involved with someone, a person can learn more about what types of patterns in relationships suggest trouble later. Likewise, a couple considering marriage in their future can learn strategies that will help them identify and perhaps lower their risks prior to marriage. If they find that they cannot lower their risks, marriage education can help them be more deliberate in their thinking about their choices.
- 2. Education on marriage and family relationships can help people understand the benefits of healthy marriage as a foundation for family life. There is a vast amount of evidence that marriage, as an institution, is beneficial provided marriages are reasonably healthy. However, there is also evidence that young people, especially teenage girls, are not aware of this, being increasingly likely to believe that legal marriage confers no particular benefits over cohabitation.²⁹ This trend is especially concerning given the growing theory and empirical evidence that men, in contrast, see marriage and non-marriage very differently, and are the most inclined to give their best to their partners and families in the context of marriage.³⁰
- 3. Education on marriage and family relationships can help make people aware of other resources that may be of use, now or in the future, for a range of difficulties they may face. This may be one of the greatest potential benefits of soundly conducted relationship and marriage education. In our work with preventive education, we have come to believe that well conceived and delivered educational opportunities can lay the seeds for future help-seeking. We have recently begun to assess this outcome in our initial studies of PREP within the Building Strong and Ready Families Initiative of the U. S. Army. Short term findings show couples reporting an increased awareness of other Army resources for helping their families cope with various issues. In our work with the Oklahoma Marriage Initiative, we have devised a handout for all participants which provides information about other types of services that may be of use (such as in the areas of substance abuse, mental health, financial hardship, and domestic violence), along with contact information for how to seek out such services.

While many studies exist and encouraging studies abound, there are many things that we do not know that ongoing and future studies will address.

- We know much about premarital and marital education efforts with couples in relatively committed relationships. Indeed, most outcomes studies have been conducted with either couples who are planning marriage or who are already married. We know less about such efforts with non-married couples, and especially non-married couples with ambiguous or low levels of commitment.
- We have the most data on effectiveness with middle class, white couples, and relatively less data on how lower income and non-white couples respond.
- We have a great deal of data on couples, in general, and comparatively little data on the long-term effects of teaching individuals how to make good relationship choices.

While there is a lack of formal evaluation research on relationship and marriage education with the economically disadvantaged, or those from various racial or cultural groups, there are pertinent data as well as a great deal of experience and anecdotal reports by educators working in diverse settings which can guide current efforts. The Oklahoma Marriage Initiative, for example, represents an extensive and strategic effort to foster healthy marriages across a range of systems, sectors, providers, policies, and clients. It is a living laboratory, in which thoughtful people are grappling with how best to serve people from various backgrounds. Extensive experience is being gained from these efforts to reach low income recipients of government services, middle class couples, religiously involved couples, high school students, married individuals about to return home from prison, parents of youth in diversion programs, and so forth. Couples from very diverse racial backgrounds such as white, African American, Native American, and Hispanic (English speaking or Spanish speaking) are being reached as well.

Empirically, we know that people who have historically been less likely to participate in relationship/marriage education express high interest in doing so. For example, in the statewide baseline survey conducted in Oklahoma (which formed a model being used in other states now), respondents were asked: "Would you consider using relationship education, such as workshops or classes to strengthen your relationship?" The data showed that, as expected, recipients of government services for economically disadvantaged people were less likely to be married, yet, not as we expected, were slightly *more* likely to say they were interested in such services (71%) than those who had never received such government supports (64%).³² Further, young people were particularly likely to say they would be interested in such services.

Of course, interest in relationship education can exist without it necessarily translating into actual attendance. However, these data suggest that it would be misguided to infer disinterest in relationship education among those who are economically disadvantaged when the historical lack of participation in such services may be fundamentally more due to a lack of access than a lack of interest. Services in accord with this interest are generally lacking in the U. S, except where communities are making a concerted effort to make such services available.

There is a belief among experts who study lower income families that marriage education efforts will be most effective when³³: (1) they are provided with a variety of wrap-around services to meet multiple needs; (2) more intensive and ongoing services are made available to those who have greater problems; (3) there is a clear understanding of who the clients are, and how their circumstances can be best addressed in the educational context; and (4) serious efforts are made to reduce the barriers to initial and ongoing participation in such services, such as the need for transportation or childcare. Theodora Ooms and Pam Wilson suggest that the degree of modification in approach from existing programs likely depends a great deal on whether one is working with lower income couples who have some economic stability at those lower levels versus those who are suffering substantial and sustained economic hardship, wherein more services and supports may be crucial in an overall programmatic approach to helping them succeed.³⁴ Based on years of experience in various settings (and in various countries), Howard Markman and I believe this is a very sound conclusion.

In our ongoing work disseminating and evaluating marriage education in the context of the U. S. Army, we have had the opportunity to test short-term outcomes of our program for couples (PREP) with a sample that is relatively quite diverse (racially and economically) compared to most studies in this field. I quote at length from guidelines we have developed for those working with low income clients:

To be clear, Army couples are not like some of the low income clients that providers may work with in their settings. They have somewhat higher than average educations (high school and up), have more structure in their lives, have a steady income even if low, and have many kinds of support systems available. Young Army couples tend not to be in poverty, but, nevertheless, have lower levels of income than middle and upper class couples who have been the most typical participants of marriage education and research. Further, in our evaluation work in the Army, over 50% of the samples were made up of couples where one or both partners were racial minorities—a much greater percentage than found in most marriage research.

While the initial evaluations with the Army have been very simple in nature (e.g., relatively simple pre to post to a one month follow-up evaluation), the data are very useful for examining if there are differences in short-term response to the program that are moderated by racial and income differences. This is because the Army couples, while not being representative due to the fact of being in the Army, are otherwise a very diverse group of couples. While we do not want to over generalize these findings since Army couples are not a representative group, they are still useful and unlike other data currently available in the field of marriage and relationship education.

The findings from the Army evaluation are among the strongest we have seen in any studies of PREP on self-report measures over the short-term. Overall, couples taking the program reported reductions in negative interaction, increases in confidence, an increased ability to use time outs when upset, an increase in their ability to talk effectively about Army life issues, and so forth. In a second study, these same gains were replicated along with significant findings on new variables such as an increased ability to stay focused when discussing problems, an increased ability to maintain fun and friendship, and a trend for reductions in depressive symptoms among those who had felt depressed in the prior 6 months. Further, the couples reported an increased connection with other couples and an increased awareness of other resources that may be of use in helping their families. This latter finding have particular relevance to work with lower income clients where linking them with other services and resources may be crucial. We have come to believe that outcomes such as increasing awareness and use of other community services, and increasing community connections, are crucial goals in efforts aimed at helping disadvantaged groups.

With regard to income levels, in the Army sample, we have been able to compare couples where their household incomes were under \$25,000 with those whose incomes were greater. There were no differences in responses on various measures of effectiveness of the program for couples above and below that income level. With regard to racial diversity, the results from the Army studies thus far show that minority couples derived

just as much benefit from taking PREP as non-minority couple, with similar gains on all key variables. These couples were also just as likely to report high satisfaction with their experience in the training.

As stated above, there is much more we can (and will) learn in the coming years about meeting the needs of those who have been underserved and understudied in this field. Yet, I and my colleagues have very high confidence that many existing methods will prove valuable, and that new and improved methods will be forthcoming. Data from evaluations and feedback from front line providers will prove crucial in guiding efforts to tailor and fine tune strategies for the future.

What Are Best Practices In Healthy Marriage Education?

I will close my testimony by describing what Howard Markman, I, and many colleagues consider crucial in the interplay between science and practice in marriage education. Existing approaches to helping people in their relationships, and marriage aspirations, have varying degrees of these elements. Some have none and a few have all.³⁵ I offer the following schema as an exemplar of the strongest kind of foundation upon which to build and refine interventions for couples.

Research based approaches are strongest, in our view, when they are *empirically informed*. By this we mean that, to the extent possible, the information and strategies are based on the growing body of sound research on marital and family health. Not every point in any approach can be tested for individual effect, and many powerful, common sense principles are unlikely to ever be studied by social scientists, but we do think that approaches will generally be the strongest when the goals and strategies are consistent with existing, replicated, scientifically based knowledge.

Approaches can also be *empirically tested*. PREP, for example, has been studied intensively, including long-term outcome studies by six different research teams in four different countries. The term that has come to be used most often for being empirically tested is "evidence based." Approaches vary in their basis of evidence for promoting positive results—some are no doubt effective yet have not such evidence, some are effective and also have a body of encouraging findings behind their history, and some approaches may lack both effectiveness and evidence. And, of course, there are empirically informed and tested approaches where there many be little formal evaluation of effects with a new target audience. Nevertheless, even in those circumstances—and perhaps especially in such circumstances—care can be taken to build the content of an approach based on sound social science findings.

Finally, strong, scientifically based models, are, in our view, *regularly refined* based on the latest research. We live in a time of unprecedented intensity and pace in the growth of a knowledge base about relationships. Approaches can (and some are) built in the present around sound findings, but new studies and understandings are steadily emerging in many relevant fields. It is ideal for approaches to be designed so that regular updates are possible and reoccurring.

This model of understanding the role of empiricism gives us great optimism for the future of efforts to help couples and families. We do not know everything we would like to know, but a great deal is known today, and what is known is certainly enough to continue this work with confidence. As we take action to help others, we can build on the confidence of present

approaches while refining strategies over time based on ongoing research and evaluations.

Thank you for this chance to provide testimony to the U. S. Senate about something as important to this country as marriage.

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¹⁹ Van Lange, P. A. M., Rusbult, C. E., Drigotas, S. M., Arriaga, X. B., Witcher, B. S. & Cox, C. L. (1997). Willingness to sacrifice in close relationships. *Journal of Personality and Social Psychology*, 72, 1373-1395.

²⁰ Whitton, S. W., Stanley, S. M., & Markman, H. J. (2002). Sacrifice in romantic relationships: An exploration of relevant research and theory. In H. T. Reiss, M. A. Fitzpatrick, A. L. Vangelisti (Eds), *Stability and Change in Relationship Behavior across the Lifespan* (pp. 156-181). Cambridge: Cambridge University Press.

²¹ From the two day meeting held with Secretary Howard Hendrick and all the members of the advisory group, in December 2003. Those attending included nationally recognized social scientists, policy experts, and state and social scientists.

²² Johnson, C. A., & Stanley, S. M. (Eds.). (2001, Fall). *The Oklahoma Marriage Initiative Statewide Baseline Survey* (Available from the Bureau for Social Research, Oklahoma State University, 306 HES, Stillwater, OK 74078-6117).; Johnson, C. A., Stanley, S. M., Glenn, N. D., Amato, P. A., Nock, S. L., Markman, H. J., & Dion, M. R. (2002). *Marriage in Oklahoma:* 2001 baseline statewide survey on marriage and divorce_(S02096 OKDHS). Oklahoma City, OK: Oklahoma Department of Human Services.

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²⁴ There are many who have played important roles in various ways, including most notably Susan Blumberg, Frank Floyd, Natalie Jenkins, and Savanna McCain.

²⁵ See www.smartmarriages.com

²⁶ For example, see: Baucom, D. H., Shoham, V., Meuser, K. T., Daiuto, A. D., & Stickle, T. R. (1998). Empirically supported couple and family interventions for marital distress and adult mental health problems. *Journal of Consulting and Clinical Psychology*, *66*, 53–88.; Bray, J. H., & Jouriles, E. (1995). Treatment of marital conflict and prevention of divorce. Journal of Marital and Family Therapy, 21, 461-473.; Jacobson, N. S., & Gurman, A. S. (Eds.). (1995). *Clinical handbook of couple therapy* (2nd ed.). New York: Guilford.

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²⁸ These conceptual arguments are adapted from the narrow focus of this article about preventive, premarital education: Stanley, S.M. (2001). Making the Case for Premarital Education. *Family Relations*, *50*, 272–280.

²⁹ From Whitehead & Popenoe, National Marriage Project State of Our Unions, 2002. Source: Monitoring the Future Surveys conducted by the Survey Research Center at the University of Michigan.

³⁰ For example, see: Ahituv, A., & Lerman, R. (September, 2003). *Job stability, earning, marital stability: How are they related?* Paper presented at the National Poverty Center Conference on Marriage and Family Formation Among Low-Income Couples, Washington, D.C.; Nock, S.L. (1998). *Marriage in men's lives*. New York: Oxford University Press.; Whitton, S. W., Stanley, S. M., & Markman, H. J. (2002). Sacrifice in romantic relationships: An exploration of relevant research and theory. In H. T. Reiss, M. A. Fitzpatrick, A. L. Vangelisti (Eds), *Stability and Change in Relationship Behavior across the Lifespan* (pp. 156-181). Cambridge: Cambridge University Press.

³¹ Stanley, S. M., Markman, H. J., Saiz, C. C., Schumm, W. R., Bloomstrom, G., & Bailey, A. E. (2004). *Building Strong and Ready Families*. Washington D. C.: SAIC, Inc.

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³³ Dion, M. R., Devaney, B., McConnell, S., Ford, M., Hill, H., & Winston, P. (2003). *Helping unwed parents build strong and healthy marriages: A conceptual framework for interventions*. Washington D. C.: Mathematica Policy Research, Inc.; Ooms, T.J., & Wilson, P. C. (submitted for publication) *The challenges of offering couples and marriage education to low income couples*.; Stanley, S. M., Markman, H. J., & Jenkins, N. H. (2004). *Marriage Education Using PREP With Low Income and Diverse Clients*. Denver, Colorado: PREP, Inc.

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³⁵ This distinction becomes clear in reviews such as Silliman, B., Stanley, S.M., Coffin, W., Markman, H.J., & Jordan, P.L. (2001). Preventive interventions for couples. In H. Liddle, D. Santisteban, R. Levant, and J. Bray (Eds.), *Family psychology: Science-based interventions* (pp. 123-146). Washington, D.C.: APA Publications.

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