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# A Revision of the Marital Status Inventory: Reliability and Validity with Marital and Remarital Couples

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BRIGHAM YOUNG UNIVERSITY

GRADUATE COMMITTEE APPROVAL

of a thesis submitted by

Rachel V. Jamieson

This thesis has been read by each member of the following graduate committee and by majority vote has been found to be satisfactory.

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A REVISION OF THE MARITAL STATUS INVENTORY:  
RELIABILITY AND VALIDITY WITH MARITAL  
AND REMARITAL COUPLES

by

Rachel V. Jamieson

A thesis submitted to the faculty of  
Brigham Young University  
in partial fulfillment of the requirements for the degree of

Master of Science

Marriage and Family Therapy Programs

School of Family Life

Brigham Young University

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## ABSTRACT

### A REVISION OF THE MARITAL STATUS INVENTORY: RELIABILITY AND VALIDITY WITH MARITAL AND REMARITAL COUPLES

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Master of Science

Predicting divorce potential has been of interest to researchers and clinicians. The Marital Status Inventory (Weiss & Ceretto, 1980) was developed to provide information about clients' perceived divorce potential. The MSI has been widely used but there have been complaints about the negatively worded items from clients, therapists, and researchers. Therefore, this study compared a revised form of the MSI (MSI-R has no negatively worded items) with the original format. There were three purposes of the study. The first was to assess the reliability and validity of the MSI-R. The second purpose was to see if the MSI-R continued to distinguish between types of therapy couples attended (marital versus other therapy). The third and final purpose of the study

was to assess the ability of the MSI-R to assess divorce potential with a remarital sample. It was found that the MSI-R is on face value equally as valid as the original MSI. There was a lack of support for discriminate validity. The MSI-R was found to be internally consistent ( $\alpha = .83$ ), therefore reliable. Clients found the revised items to be more easily understood and readable than the original items. The MSI and MSI-R were significantly correlated indicating that they apparently measure the same concepts. Results showed that both groups scored on the low end of the scale indicating that the sample was not a very divorce prone group. There did not appear to be any difference with regards to mean scores on the MSI and MSI-R between marital and remarital groups. While the MSI-R appears to be a promising replacement for the MSI, further research is warranted to provide sufficient evidence of validity.

## Introduction and Review of the Literature

Researchers and clinicians have been interested for some time in predictors of divorce potential (Brewer, 2004; Buehlman & Gottman, 1996; Buehlman, Gottman & Katz, 1992; Crane, Newfield, & Armstrong, 1984; Crane & Mead, 1980; Gottman, 1994; Weiss & Cerreto, 1980). Buehlman, Gottman, and Katz (1992) developed a research tool, the Oral History Interview, to predict divorce. Later Buehlman and Gottman (1996) developed a coding system to be used for research with the Oral History Interview. Mead (Mead, Unpublished) developed an Oral History Rating Scale (OHRS) for use by clinicians to rate divorce potential following administration of Buehlman's Oral History Interview. Brewer (2004) revised and tested Mead's OHRS and found that the observer's OHRS scores and the Marital Status Inventory (MSI) (Weiss & Cerreto, 1980)—a divorce potential assessment instrument described below—were moderately correlated  $r = .54, p < .03$  and  $r = .46, p < .05$  for husbands and wives respectively. However, therapists' OHRS scores were not significantly correlated with MSI scores  $r = .43, p < .08$  and  $r = .39, p < .09$  again for husbands and wives respectively. It appears that therapists are not good predictors of divorce potential which is consistent with the general finding that therapists are not as reliable as observers, which are not as reliable as standardized assessment instruments (Coddington, Feinberg, Dunn & Pace, 2005) (Garb, 2005) (Lambert & Hill, 1994) (Western & Weinberger, 2004). Therefore, efforts to further improve assessment instruments such as the MSI appear warranted.

Weiss and Cerreto (1980) developed the Marital Status Inventory (MSI) as a clinical measure of divorce potential. The MSI is a 14 item paper and pencil self-report Guttman type scalogram (Edwards, 1957). In a scaleogram the items are thought to form

Marital Status Inventory-Revised a scale of intensity such that each additional item infers further steps toward the action of divorce. Therefore, if a respondent scores 7 on the MSI it is assumed that they also indorsed items 1-6. Higher scores indicate greater probability of taking action for divorce. The items were marked True or False by respondents with items 1-4, 8, 9, 12, and 14 receiving one point if marked True. Items 5-7, 10, 11, and 13 are written in negative format (e.g. item 13 reads "I have *not* contacted a lawyer to make preliminary plans for divorce"). These items receive one point if marked False. The total MSI scores can range from 0 to 14 with higher total scores being taken as more divorce prone. The authors presented evidence that the instrument is unidimensional and cumulative with a Coefficient of Scalability (CS) = .87. CS values of .60 or greater are taken as an indication of a true scale (Weiss & Cerreto, 1980). Weiss and Cerreto suggest that indorsing item 8 or above is indicative of a "precarious relationship" (p. 83). Item 8 reads, "My spouse and I have separated." They therefore concluded that the cutoff score for the MSI should be 8 and above.

Crane, Newfield, and Armstrong (1984) analyzed MSI data taken at intake from a large sample from various clinics across the United States. After therapy the data was divided into two groups: those that were known to have divorced and those that remained married. The only significant differences were those found between divorced and non-divorced wives. Divorced wives mean MSI scores were 8.40 ( $SD = 3.02$ ) and non-divorced wives mean MSI scores were 6.27 ( $SD = 3.57$ ). Crane et al. (1984) suggest that their findings support Weiss and Cerreto's use of 8 as a cutoff score. However, Crane et al.'s (1984) study suggests that this cutoff score, which is useful clinical information for the therapist, is limited to the wives' MSI score. This was due to the fact that the husband's score was not found to be predictive of divorce.

Reliability of the MSI has been reported by several researchers. Crane and Mead (1980) found a Spearman-Brown split half reliability of .86. Crane, Newfield and Armstrong found a Spearman-Brown split half reliability of .87.

Weiss and Cerreto (1980) looked at the discriminant validity of the MSI by comparing couples seeking marital therapy with couples seeking family therapy. Both groups were administered the MSI and the Locke-Wallace Marital Adjustment Test (MAT) (Locke & Wallace, 1959). Husbands and wives in the marital therapy group scored significantly higher total mean scores for the MSI and significantly greater marital dissatisfaction on the MAT than husbands and wives in the family therapy group. There was a significant correlation between the MSI and the MAT only for the family therapy group  $r = -.73$  and  $-.72$  ( $p < .01$ ) for husbands and wives respectively. For the marital therapy group the relationship between the MSI and MAT were found to be  $r = -.26$  and  $-.26$  ( $p > .10$ ) for husbands and wives. This suggests that the marital satisfaction and divorce potential are different concepts. Crane et al.'s (1984) research described above may be taken as evidence for predictive validity as wives intake scores of 8 and above were found to be associated with divorce during post-therapy follow up.

The MSI has been found to be useful in studying divorce potential (Crane & Mead, 1980) (Crane et al., 1984) (Crane, Soderquist & Gardner, 1995) (Whiting & Crane, 2003) related to a variety of marital problems such as: couple problem solving skills (Caceres, 1989); couples interpersonal space in a marital therapy setting (Crane, Dollahite, Griffin, & Taylor, 1987); assessing wives' distress at intake (Crane et al., 1984); gender differences in a couple's steps toward divorce (Crane et al., 1995); gender differences related to marital functioning of treated alcoholics (Perodeau, 1989); validation of a Marital Problems Questionnaire (Douglass & Douglass, 1995); marital

Marital Status Inventory-Revised distress in military couples (Griffin & Morgan, 1988); and issues related to wife employment (Williams-Evans, Feinauer, Hendrix & Stahmann, 1989). In addition, the MSI has been used to study marital constructs related to abusive and non-abusive parents (Butler & Crane, 1980) and parental characteristics related to intergenerational problems and child behavior (Christensen, Phillips, Glasgow & Johnson, 1983).

Although the MSI has been used widely there have been complaints by clients about the negatively worded items (items 5-7, 10-11, and 13) being hard to understand. Douglass and Douglass (1995) suggest that “differences in question phrasing and response formats can be confusing especially for respondents with low levels of education” (p. 239). Edwards (1957) noted that negatively worded items can be confusing and frustrating to clients. Therapists too have complained that the negatively worded items are difficult to score and interpret. Therefore one of the purposes of this study was to determine if there would be differences between the original MSI scores and a revision of the MSI--the Marital Status Inventory-Revised (MSI-R). The revision reflects the negatively worded items being re-written in a positive format. For example, item 6 presently reads “I have not made specific plans to discuss separation or divorce with my spouse. I have not considered what I would say, etc.” (Weiss & Ceretto, 1980, p. 82). In the MSI-R Item 6 reads “I have made specific plans to discuss separation or divorce with my spouse. I have considered what I would say, etc.” If the differences in the mean scores for the two forms are not significant then the MSI-R would be preferred especially if it proves to have greater customer satisfaction.

In this study, the MSI-R will be used in conjunction with the Revised Dyadic Adjustment Scale (Busby, Crane, Larson, & Christensen, 1995) and a client satisfaction survey to assess the reliability and validity of the revised version. The MSI assesses

Marital Status Inventory-Revised divorce potential in a stepwise fashion while the Revised Dyadic Adjustment Scale (RDAS) serves to assess marital satisfaction on three subscales. In this study, only total scores were utilized, not subscores. The RDAS will be applied to this study to aid in discovering the consistency of the MSI-R in divorce prediction as it relates to marital satisfaction.

The MSI has been used with marital couples without regard as to whether the couple was in their first marriage or re-married. There has been an increase in the number of remarriages after divorce such that “4 out of 10 marriages in the United States involve a second or higher-order marriage for the bride, the groom, or both.” (U.S. Bureau of the Census, 1992, p. 5). Increases in the number of remarriages after divorce result in increases in ending marriage through redi-orce of at least one of the partners. Some researchers have found that redi-orce is slightly more likely than first divorce and that redi-orce occurs more quickly after re-marriage (Castro, Martin, & Bumpass, 1989; Spanier & Glick, 1980). However, recent data suggests that the pattern of change from 1985 to 1990 indicates that “no clear-cut assertion can be made that redi-orce is more probable than divorce after first marriage” (U.S. Bureau of the Census, 1992, p. 6). Because it is unclear whether or not divorced and remarried individuals are more divorce prone than first marriages it may help to have more information about whether married and remarried clients differ on perceived divorce potential as measured by the MSI. Therefore in this study respondents were divided into first married and re-married groups to attempt to determine if the two groups could be differentiated on the basis of MSI or MSI-R scores.

In summary, predicting divorce potential has been of interest to researchers and clinicians for some time. The Marital Status Inventory (Weiss & Ceretto, 1980) was

Marital Status Inventory-Revised developed to provide information about clients' perceived divorce potential. The MSI has been widely used but there have been complaints about the negatively worded items from clients, therapists, and researchers. Therefore there are in this study a revised form of the MSI was compared with the original format. Administration of the two forms was followed by a customer satisfaction survey to determine clients' response to the two forms. In addition, a preliminary investigation of the MSI responses of the first married couples as compared to remarried couples was undertaken.

## Method

### *Participants*

The sample ( $n=102$ ) was composed of married and remarried individuals over the age of 18 seeking marital or other therapy at the Brigham Young University Comprehensive Clinic ( $n=74$ ) and the ANASAZI Foundation ( $n=28$ ). According to the Mental Health Services Report (Brigham Young University, 2003) the summary of client demographics is that "The typical Clinic client is Caucasian, married, employed but making less than \$30,000 per year, a high school graduate with perhaps some college, Latter-Day Saint, and not affiliated with BYU" (p. 6.15). Of those cases that terminated treatment during this review period 40% are comprised of individual cases, 25% were couple cases, 17% were family cases, 10% were groups, and 9% were psychological assessments.

The ANASAZI Foundation is an Outdoor Behavioral Residential Health Program for adolescents operated out of Arizona. Parent or primary care-giver involvement is required prior to admission. Each is required to attend an all day parenting seminar, weekly therapy sessions, and three days in a family camp prior to discharge. Average income information was unavailable however, the average cost for the six week program

Marital Status Inventory-Revised is approximately \$17,000. In 2006 the ANASAZI Foundation reported that 53% of students received some sort of financial aid (ANASAZI Foundation, 2007) to help cover some portion of the tuition costs (i.e. scholarship, loan or insurance coverage). Geographically, the majority of families come from Arizona, California and Utah. Sixty-three percent of families were Caucasian, 5.9% were multi-ethnic, and 3.7% were Hispanic/Latino. Other ethnic groups were minimally represented. Specific demographic information such as length of marriage, household income, level of education, number of children, etc was not collected.

All participants were volunteers and were treated in accordance with the *AAMFT Code of Ethics (2001)*, Principle V “Responsibility to Research Participants.” Prior to participation in this study each individual was given a “Consent to Participate in a Research Study” consent form. By signing this form, they agreed that they had been informed of the risks and benefits of the study as well as the procedure, and agreed to participate. Service to clients was not affected if they chose to decline or withdraw from participation. All clinic and *AAMFT Code of Ethics (2001)* regulations regarding client confidentiality were maintained in this study. In compliance with university policy at Brigham Young University, the current study was reviewed and approved by the Institutional Review Board, which regulates studies involving human subjects. Permission was granted to conduct this research with human subjects at the BYU Comprehensive Clinic and the ANASAZI Foundation by the Institutional Review Board. Data was collected for approximately two years. Initially all data was collected solely at the BYU Comprehensive Clinic in Utah, however due to a relocation of the researcher, permission was obtained to collect data at the ANASAZI Foundation in Arizona.

*Instruments*

*The Marital Status Inventory.* The Marital Status Inventory (Weiss & Cerreto, 1980) was reviewed above. The MSI was scored according to the manner prescribed by Weiss and Cerreto (1980). As described above the items were marked True or False by respondents with items 1-4, 8, 9, 12, and 14 receiving one point if marked True. Items 5-7, 10, 11, and 13 are written in negative format (e.g. item 13 reads “I have not contacted a lawyer to make preliminary plans for divorce”). These items receive one point if marked False. The total MSI scores can range from 0 to 14 with higher total scores being taken as more divorce prone.

*The Marital Status Inventory-Revised.* In this study, the Marital Status Inventory (see Appendix A) was revised by changing items number 5-7, 10, 11, and 13 (see Table 1) to make the instrument more easily read and understood. In an effort to increase face validity these items have been reconstructed to have a positive sentence structure rather than a negative sentence structure (see Table 1). All items will be answered either “True” or “False.” In the MSI-R all items marked “True” receive 1 point. As with the MSI the scores can range from 0 to 14 and higher scores indicate greater probability of taking divorce action.

Table 1

*Original and Revised Items on the Marital Status Inventory*

T	F	5	I have not suggested to my spouse that I wished to be divorced, separated or rid of him/her.
T	F	5R	I have suggested to my spouse that I wished to be divorced, separated or rid of him/her.
T	F	6	I have not made any specific plans to discuss separation or divorce with my spouse. I have not considered what I would say, etc.
T	F	6R	I have mad specific plans to discuss separation or divorce with my spouse. I have considered what I would say, etc.
T	F	7	I have not discussed the issue seriously or at length with my spouse.
T	F	7R	I have discussed the issue seriously or at lengthy with my spouse.
T	F	10	I have made no inquiries from nonprofessionals as to how long it takes to get a divorce, grounds for divorce, costs involved in such actions, etc.
T	F	10R	I have made inquiries from nonprofessionals as to how long it takes to get a divorce, grounds for divorce, costs involved in such actions, etc.
T	F	11	I have not consulted a lawyer or other legal aid about the matter.
T	F	11R	I have consulted a lawyer or other legal aid about the matter.
T	F	13	I have not contacted a lawyer to make preliminary plans for a divorce.
T	F	13R	I have contacted a lawyer to make preliminary plans for a divorce.

*The Revised Dyadic Adjustment Scale.* The Revised Dyadic Adjustment Scale (Busby, Crane, Larson & Christensen 1995; see Appendix C) is a 14 item instrument which assesses marital adjustment or satisfaction. The scores can range from 0 to 69. The RDAS provides an overall score and three subscales, Consensus, Satisfaction, and Cohesion. The RDAS appears to have excellent test-retest reliability. For the Total RDAS

Marital Status Inventory-Revised

Cronbach's Alpha was reported to be .90, Guttman Split-Half = .94 and Spearman-Brown Split-Half was found to be .95. The RDAS is reported to distinguish between distressed and non-distressed samples (Busby et al., 1995). The RDAS has a cutoff score of 48 (Crane et al., 2000; Thurber & Mead, 2002) however Thurber and Mead found that there is a range of uncertainty around the cutoff score,  $\pm 5$ . This means that within a range of  $\pm 5$  around the cutoff score of 48 it can not be determined if the couple is in the distressed or non-distressed range. Therefore, a cutoff score of 43-53 is recommended. Individuals who score 43 or below fall into the clinically martially distressed range. Additionally, individuals who score above 53 fall within the clinically and martially non-distressed range. The Reliable Change Index score (RCI) was found to be  $\pm 5$  (Thurber & Mead, 2002). The Reliable Change Index score indicates the amount of change in either direction that is statistically significant. The RDAS was used in this study as a measure of marital satisfaction.

*Client Satisfaction Survey.* The Client Satisfaction Survey (see Appendix D) is a two item survey designed by the author to gather opinions about the clarity of both the original and revised versions of the assessment from participants. The first item addresses reading ease and the second item addressed how well the participant understood the instrument. The client is asked to respond on an anchored Likert scale from one to five, one being “strongly disagree,” five being “strongly agree.” This scale appears to have sufficient face validity as it is asking two questions regarding readability and understandability. There is no evidence to support the content validity, internal validity, or reliability of the assessment as it was designed to assess client satisfaction only for this study in a general way.

### *Confidentiality*

Information generated by this study was maintained confidential and was reported as group data and not as data identifiable to a specific person. Participants were assigned a case number and all other identifying information was detached. Access to raw data was granted only to personnel who were directly involved in administration of the surveys.

### *Procedures*

Recruitment for this study was done through the Brigham Young University (BYU) Comprehensive Clinic and the ANASAZI Foundation. Qualifications for inclusion in this study included married individuals or couples seeking therapy services at the Comprehensive Clinic and the ANASAZI Foundation. Clients did not need to be seeking marital therapy to participate as long as they were married (both partners in the

Marital Status Inventory-Revised marriage did not need to participate in order to be included). Qualifications for exclusion in this study included couples or individuals under the age of 18 and single or divorced individuals.

As standard assessment, the MSI is typically given within the first three sessions to couples seeking marital therapy at the BYU Comprehensive Clinic. All graduate interns and front desk staff at the Comprehensive Clinic were asked to administer the following instruments to their client(s) either just prior to the beginning of their session, or send the packet home with their client(s) to be brought back when they return for their next session. The packet consisted of: a letter of consent (see Appendix E), the MSI, the MSI-R, a Client Satisfaction Survey and the RDAS. The front desk staff and interns were asked to have the client(s) read and sign the informed letter of consent to be a research participant before they administered the assessments. Additionally, therapists from the ANASAZI Foundation were asked to follow the same procedures with clients. The MSI and the MSI-R were randomly ordered in the packets in an attempt to prevent bias based on order of presentation.

### *Research Questions*

The research questions to be asked by this study are: (1) Is the MSI-R reliable? (2) Is the MSI-R valid? Since the goal was to convert the negatively written items to positively stated items the first validity question is does the MSI-R have construct validity. Followed by another validity question, does the MSI-R retain convergent and discriminate validity? And third (3) do married and remarried individuals differ in their responses to the MSI-R and MSI?

## Results

*How the MSI-R Compares with the MSI*

All participants  $n=102$  had a total score on the MSI, however only  $n=101$  participants had a total score for the MSI-R. The mean total score on the MSI ( $n=102$ ) was 2.17 ( $sd=2.61$ ), while the mean total score on the MSI-R ( $n=101$ ) was 1.70 ( $sd=2.42$ ). The difference between the two scales is approximately half a point (-.48). This difference is found to be statistically significant ( $t=-2.922$ ,  $df=100$ ,  $p=.004$ ; see table 2), with an associated 95% confidence interval of -.80, for the lower bound, and the -.15 for the upper bound, and an effect size of .28.

The MSI-R and MSI were found to have a correlation of  $r=.793$  ( $p<.000$ ). The correlation between the scores on the two scales is high, and statistically significant (see Table 2). Thus, although the means differ significantly, the distributions are relatively similar.

The two forms, MSI and MSI-R were presented in random order to all respondents. To determine if the order of presentation made a difference a simple analysis of the means (t-test) was used to assess the statistical significance (see Table 2). It was found that when the MSI-R was presented first, the total mean score (1.74) was not statistically different from the MSI (presented second) mean score (1.66) ( $t=-.157$ ,  $df=99$ ,  $p=.876$ ). When the MSI was presented first, the total mean score was not different (2.15) than the total mean score of the MSI-R (presented second) (2.14) ( $t=.025$ ,  $df=100$ ,  $p=.980$ ), therefore there was no order effect.

Table 2

*MSI and MSI-R Means Based on Order of Presentation*

Type of therapy	N	Mean	Std. Deviation	Std. Error Mean
MSI Second	59	1.66	2.39	.31
MSI-R First	42	1.73	2.48	.38
MSI First	59	2.15	2.45	.31
MSI-R Second	43	2.13	2.85	.43

The sample consisted of individuals who were married ( $N = 102$ , 44 males, 58 females) over the age of 18 who were seeking therapy at the BYU Comprehensive Clinic ( $n=28$ ) or the ANASAZI Foundation ( $n=74$ ). Of those, 58 were seeking marital therapy, and 32 were seeking therapy for another reason such as family therapy (parent-child relational issues) or individual therapy (anxiety, depression, phobias, non-relational issues) and 12 did not disclose the reason for the therapy. This category of individuals will be referred to as “other therapy” instead of “family therapy.” It was the first marriage for 64 individuals, and a re-marriage for 31 individuals, the marital status was undisclosed for 7 individuals. Of the 102 respondents all 102 completed the MSI however only 101 completed the MSI-R. Table 3 gives the average score by gender, therapy type, data collection location, and marital status on the MSI, MSI-R, and RDAS as a general summary.

Table 3

*General summary of results*

Demographics			Mean Score		
			MSI	MSI-R	RDAS
Gender	Male	n=44	2.30 (SD=1.80)	1.61 (SD=2.66)	47.79 (SD=9.72)
	Female	n=58	2.03 (SD=2.03)	1.75 (SD=2.23)	47.34 (SD=7.89)
Therapy Type	Marital	n=58	2.43 (SD=2.39)	1.60 (SD=2.17)	47.31 (SD=9.30)
	Other	n=32	1.47 (SD=1.90)	1.46 (SD=2.52)	48.50 (SD=7.73)
	Undisclosed	n=12			
Marital Status	First Marriage	n=64	2.27 (SD=2.81)	1.89 (SD=2.66)	47.00 (SD=9.45)
	Remarriage	n=31	2.23 (SD=2.37)	1.48 (SD=1.98)	48.74 (SD=7.10)
	Undisclosed	n=7			
Data Collection Site	BYU CC	n=80	1.99 (SD=2.55)	1.76 (SD=2.39)	46.9 (SD=9.15)
	ANASAZI	n=22	2.72 (SD=2.44)	1.41 (SD=2.04)	49.43 (SD=7.04)
Total	MSI	n=102	2.17 (SD=2.61)		
	MSI-R	n=101		1.70 (SD=2.42)	
	RDAS	n=93			47.53 (SD=8.67)

*Question 1: Reliability and Validity of MSI-R*

The reliability of the MSI-R was assessed by finding Cronbach's alpha.

Cronbach's alpha is a function of the number of items ( $k$ ) in the scale and the mean inter-item correlation coefficient ( $r'=.21$ ). For a given  $r'$  adding items to the scale will increase the value of  $\alpha$ , and the same happens, for a given  $k$ , if  $r'$  is larger. With the industry standard for alpha at .70, Cronbach's alpha was found to be .83 for the MSI-R, which suggests that the MSI-R has acceptable internal consistency.

*Validity of the MSI-R*

*Construct validity of the MSI-R.* The MSI-R was developed in an effort to replace the negatively written items, 5, 6, 7, 10, 11, and 13, with positive items. The theoretical assumption is that a scale predicting divorce potential should provide the same results whether the questions are stated positively or negatively (Helmstadter, 1970). In the MSI these items would be marked False if the respondent had taken action toward divorce whereas in the MSI-R the items would be marked True. For example, in the MSI item 7 states "I have not discussed the issue seriously or at length with my spouse" and the same item in the MSI-R states "I have discussed the issue seriously or at length with my spouse." If the respondent had discussed divorce seriously or at length with their spouse then they should respond with False on the MSI and True on the MSI-R. The McNemar Test (Siegel & Castellan, 1988) was used to determine if the changes in these items were consistent across respondents, that is, if a respondent marked item 5 on the MSI False then they should mark item 5 on the MSI-R True.

The McNemar test (Siegel & Castellan, 1988) also sometimes called "McNemar's test of symmetry" because it applies to square tables in which the diagonal reflects subjects who did not change in the matched pair sample. It is used to detect changes in

Marital Status Inventory-Revised responses due to experimental intervention in “before-and-after” designs. The test of symmetry tests whether the counts in cells above the diagonal differ from counts below the diagonal. If the two counts differ significantly, this reflects change between the samples. For example on item number one on the MSI-R the square table would reflect the response (i.e. true or false) for form A and form B (see Table 4). (Each item in the MSI-R was examined by response. Of the 14 items, the five items that were found to be statistically significant ( $p < .05$ ) were: item 5 ( $p = .031$ ), item 6 ( $p = .004$ ), item 7 ( $p = .021$ ), item 10 ( $p = .021$ ), and item 13 ( $p = .039$ .) The results of this test support the face validity of the MSI-R as these were only revised items. Item number 11 did not reach statistical significance thus respondents did not respond consistently to this item.

Table 4

*Example of McNemar’s Test for item number one on the MSI-R*

MSI-R	True score		Total
	True	False	
True	56	3	59
False	0	41	41
Total	56	44	100

The client satisfaction survey was designed to assess clients’ preference between the MSI and the MSI-R. During the pilot study, only two questions were asked “Which form was easier read?” and “Which form was easier to understand?” The participant could then mark a box for either form A or form B. Out of the 43 participants who took the pilot survey ( $n = 38$ ) 88% marked that the MSI-R was easier to read and understand, ( $n = 3$ ) 7% marked that the MSI was easier to read and understand, and 5% ( $n = 2$ ) were undecided.

Later, the Client Satisfaction Survey was changed to four questions: “Form A was easier to read, Form B was easier to read, Form A was easier to understand, Form B was easier to understand” (see Figure 1 and 2, see also Appendix D). They were then asked to rate the readability and understandability on a Likert Scale with 1 being “Strongly Disagree” and 5 “Strongly Agree” (see Figures 1 and 2). A total of 97 individuals filled out a Client Satisfaction Survey. 43 participants filled out the pilot version, 54 participants filled out the Likert version. Of those participants who filled out the Likert version 85% ( $n=46$ ) thought that the MSI-R was easier to read than the MSI. Overall, ( $n=97$ ), 87% ( $n=84$ ) agreed that the MSI-R was easier to read and 88% ( $n=85$ ) agreed that it was easier to understand. Only 5% ( $n=5$ ) felt that the original assessment was easier to read and understand. These findings also support the face validity of the MSI-R.

Figure 1

*Client Satisfaction Survey: Understand*

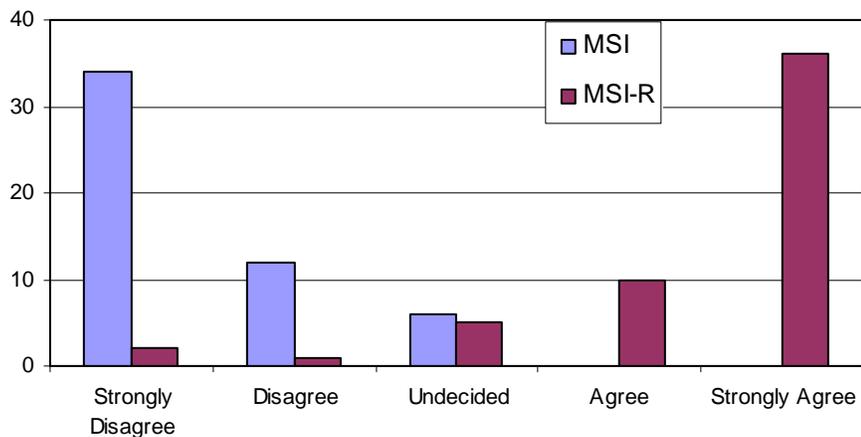
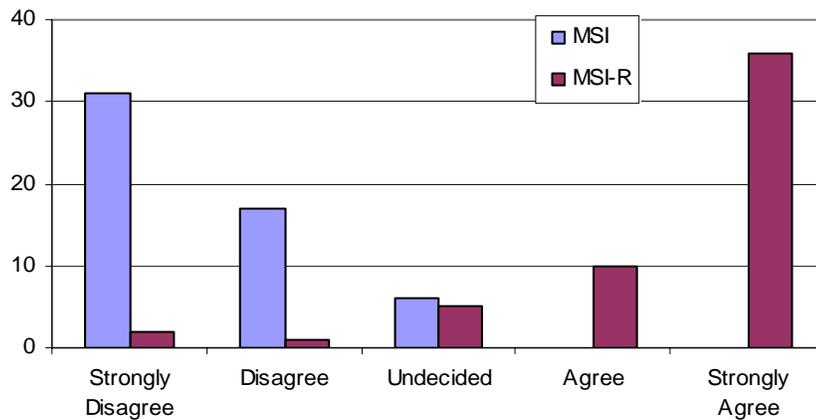


Figure 2

*Client Satisfaction Survey: Readability*

The successful replacement of the negative items, with the exception of item 11, and the respondent's endorsement of the readability and understanding of the MSI-R as opposed to the MSI suggests acceptable face validity of the new format. Participants responded appropriately to the rewritten items and found the MSI-R format more readable and more easily understood than the MSI format.

*Convergent Validity*

The MSI-R and MSI were found to have a correlation of  $r=.79$  ( $p<.000$ ). The correlation between the scores on the two scales is high, and statistically significant (see Table 5). This suggests that the two instruments are measuring the same construct with this sample.

Table 5

*Paired Sample Statistics-MSI versus MSI-R*

	Mean	N	Std. Deviation	Std. Error Mean
Total MSI-R Score	1.69	101	2.42	.24
Total MSI Score	2.16	102	2.61	.26
	Correlation	<i>p</i>		
Total MSI-R Score & Total MSI Score	.793	.000		

*Discriminate Validity of the MSI-R.* One purpose of the study was to establish whether or not the MSI-R retained the ability to distinguish between marital therapy and other types of therapy cases. Weiss and Cerreto (1980) found that the MSI differentiated between marital and family therapy cases. They found that individuals seeking therapy for marital issues scored higher on the MSI (more divorce prone) than those seeking therapy for family related issues.

Using a t-test to compare the therapy types, the mean difference on the MSI-R between the marital therapy group and the other therapy group was only .13 points, which was not found to be a statistically significant difference ( $t=.26$ ,  $df=88$ ,  $p=.79$ ; see Table 6). Therefore, the MSI-R was not found to discriminate between marital therapy cases and other therapy cases.

Table 6

*Differences between Marital Therapy and Other Therapy on the MSI-R*

Type of therapy		N	Mean	Std. Deviation	Std. Error Mean
Total MSI-R Score	Marital Therapy	58	1.60	2.17	.28
	Other Therapy	32	1.46	2.52	.44
Total MSI Score	Marital Therapy	58	2.43	2.39	.35
	Other Therapy	32	1.47	1.90	.42

To determine if there was a difference in marital distress between the clinic respondents and the ANASAZI respondents the mean RDAS scores were tested using a t-test. The mean RDAS score for clients from the BYU Comprehensive Clinic ( $n=80$ ) was 46.9 ( $t=43.21, p=.000$ ) while the average score for ANASAZI clients ( $n=22$ ) was 49.43 ( $t=34.16, p=.000$ ). It was determined that the difference between the samples is statistically significant. The cutoff score for the RDAS is 48 with an indeterminate zone of plus or minus 5 points (Thurber & Mead, 2002). The ANASAZI sample scored above the mean and the clinic sample scored below the mean. Thus, although there is a statistically significant difference in marital distress between the groups neither group can be considered to differ clinically on marital adjustment as both means fall within the indeterminate range for the MSI which is 43-53 (Thurber & Mead, 2003).

In a two-year follow up study Weiss and Ceretto (1980) reported a difference in MSI scores between husbands and wives. They noted that wives' MSI scores were higher than husbands' scores, which, they concluded was indicative of divorce potential. In the current study (see Table 7), wives' MSI mean score (2.03) was actually lower than

Marital Status Inventory-Revised husbands' mean score (2.29). The wives MSI-R mean score (1.75) was higher than husbands' (1.61).

Table 7

*Mean MSI and MSI-R scores by male and female*

	Gender	N	Mean	Std. Deviation	Std. Error Mean
Total MSI-R Score	Male	44	1.61	2.67	.40
	Female	57	1.75	2.24	.29
Total MSI Score	Male	44	2.29	2.80	.42
	Female	58	2.03	2.48	.33

Additionally, the data was analyzed by gender to determine if there was a difference in husband's versus wives' MSI and MSI-R scores (Table 5). Crane and Mead (1980) and Whiting and Crane (2003) noted in their research that wives' scores seem to be more indicative of divorce potential than the husband's score, and that on average the wife scored higher than the husband (Crane, Soderquist & Frank, 1995). In this study, male and female scores were analyzed to determine if the difference was statistically significant. On the MSI, the mean score for females (2.03)( $t=.49, df=99, p=.62$ ) was only slightly lower than for males (2.29). While on the MSI-R, the mean score for females (1.75) was only slightly higher than the mean score for males (1.61)( $t=-.28, df=99, p=.77$ ). There was no difference, thus neither differences were statistically significant difference between males and females for either the MSI or the MSI-R in this study.

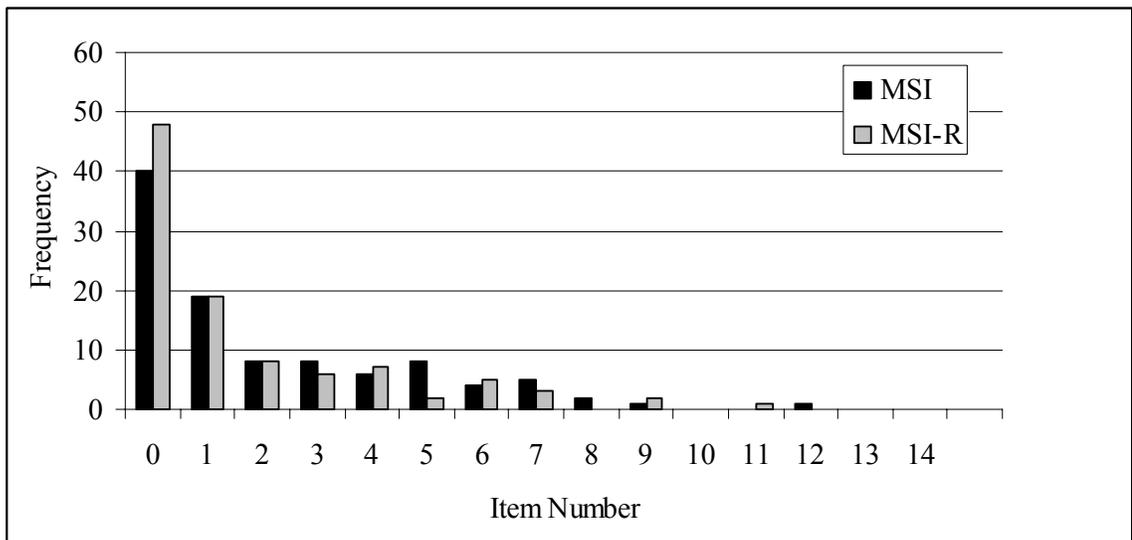
The findings in this study suggest that the MSI-R does not differentiate between individuals seeking marital therapy and individuals seeking other forms of therapy. In

Marital Status Inventory-Revised addition, the MSI-R does not discriminate between males and females. Therefore the evidence for discriminant validity was not found in this study.

As can be seen in Figure 3 the distribution of scores fell heavily at the low end of the scale for both forms of the MSI. Ninety-six percent of the MSI participants scored below the clinical cut off score (7 or less) which would indicate low divorce potential (Whiting & Crane, 2003) and similarly 97% of the MSI-R participants scores were seven or below. There was no statistical difference between the two nearly identical distributions (see Figure 1):  $X^2=7.135$ ,  $df=6$ ,  $p=.309$ . This would suggest that two formats of the MSI were similar in their assessment of the respondents' divorce potential.

Figure 3

*Distribution of Scores for MSI and MSI-R*



*First marriage versus Remarriage*

The final purpose of this study was to test this specific assessment with the remarried population. Using Fisher's Z transformation, the difference between the two groups was not found to be statistically significant ( $Z=1.54$ ,  $p=.124$ ). In an ANOVA, the

Marital Status Inventory-Revised difference in scores of married and remarried by gender showed that there was no difference in scores on the MSI-R ( $F=.358, p=.554$ ).

### Discussion

The purpose of this study was to determine if the negatively written items in the Marital Status Inventory (MSI: Weiss & Cerreto, 1980) could be rewritten in a positive format. The Marital Status Inventory-Revised (MSI-R) replaced the negatively worded items 5, 6, 7, 10, 11, and 13 with positively worded items. The three research questions in this study were: (1) Is the MSI-R reliable? (2) Is the MSI-R a valid instrument specifically with regards to content, convergent and discriminate validity? (3) Do first time married individuals differ in their response to the MSI-R from remarried individuals? (4) Do married and remarried individuals differ in their responses to the MSI-R and MSI?

#### *Question 1: Reliability of the MSI-R .*

The MSI-R was found to be reliable with a Cronbach alpha score of .83 indicating satisfactory internal consistency. This is comparable to the earlier MSI findings of a split-half reliability of .86 (Crane & Mead, 1980) and .87 (Crane, Newfield, & Armstrong, 1984).

#### *Question 2: Validity of the MSI-R.*

*Construct Validity.* The study of the validity of the MSI-R is divided into construct, convergent, and discriminate validity. The primary goal of the study was to determine if the negatively written items in the MSI (items 5, 6, 7, 10, 11, and 13) could be rewritten in a positive format to overcome complaints by clients and therapists. The first question to be answered about this issue was would respondents answer both formats consistently. The MSI and MSI-R were administered with the one or the other

Marital Status Inventory-Revised administered first randomly. The respondents' scores did not differ significantly by order of administration.

The two formats were analyzed to determine if they answered the two formats consistently using the McNemar test of symmetry (Siegel & Castelian, 1988). It was found that respondents changed their responses appropriately for items 5 ( $p=.031$ ); 6 ( $p=.004$ ); 7 ( $p=.021$ ); 10 ( $p=.021$ ); and 13 ( $p=.039$ ). Item 11 did not reach statistical significance. Therefore, it appears that the change from negative to positive format was successful.

As further evidence of face validity it was predicted that respondents would find MSI-R more readable and easier to understand than the original MSI format. Two different client satisfaction forms were used. The first used two questions (1) "Which form, A or B was easier to read?" and (2) Which form, A or B, was easier to understand. On the first version of the client satisfaction survey there were 43 respondents of which 88% ( $N=38$ ) endorsed the MSI-R as easier to read, 7% ( $N=3$ ) responded that the MSI was easier to read, and 5% ( $N=2$ ) were undecided.

In the second format of the Client Satisfaction Survey the items asked four questions (1) Form A was easier to read, (2) Form B was easier to read, (3) Form A was easier to understand, and (4) Form B was easier to understand. These four questions were followed by a 5 point Likert type scale from 1 "strongly agree" to 5 "strongly disagree." The Client Satisfaction Survey was completed by 97 respondents. Eighty-five percent of the participants ( $N=54$ ) agreed or strongly agreed that the MSI-R was easier to read than the MSI.

*Convergent Validity.* The MSI and MSI-R were found to have a high correlation ( $r=.793$ ) suggesting that they are very similar assessments. The results of the reliability

Marital Status Inventory-Revised test using Cronbach's alpha (.83) suggest that the MSI-R has a strong internal consistency. The McNemar test (Siegel & Castellan, 1988) is used to detect changes in response due to experimental intervention in matched pair designs. Statistically significant differences were detected on five of the six revised items, specifically items 5, 6, 7, 10, and 13, however item 11 did not show any difference in response between the original and revised assessment. These results suggest that participants did differentiate between forms, specifically concerning the items that were revised.

*Question 3: Discriminate Validity.*

From looking at the distribution of scores (Figure 1), one could conclude that this sample was not very divorce prone, as the majority of scores fell well below the clinical cut-off score of 8. This may be one explanation of why the MSI-R was not found to have discriminate validity. The sample was skewed to the left with few respondents perceiving their marriage to be at risk for divorce. The RDAS data also tends to support this supposition. The sample was clustered around the RDAS cutoff score of 48 suggesting that there were few respondents that perceived their marriage as severely or even moderately distressed.

In order to participate in this study, participants had to be attending therapy. For classification purposes clients were either categorized with a presenting problem of "marital" or "other." The "other" category included family related issues such as parenting, adolescent defiance, adjustment problems, and relational issues as well as individual issues included presenting problems such as anxiety, depression, bereavement, addictions, etc. It could be argued that since the MSI and the MSI-R have such a high correlation (alpha = .83) the MSI-R should discriminate between types of therapy cases. That may be the finding if this study were replicated and inclusion in the marital group

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were carefully screened for marital cases, and the “other” group were carefully screened for strictly family cases.

*Question 4: Married and Remarried Differences.*

As this was a cross-sectional study, it is difficult to draw conclusions about the effectiveness of using the MSI-R specifically with a remarital population. While it is beyond the scope of this study, it would be preferable to use a longitudinal methodology in order to find out if the MSI-R is a good tool to indicate divorce potential for remarrieds. Written remarks by one client suggested that the MSI-R could be potentially confusing with regards to subsequent marriages. However, with clear instructions to confine responses to the client’s current situation, it is not a foreseeable problem.

The difference between mean scores on the MSI and MSI-R seem to be statistically significant with a relatively small effect size (.28), making the difference of little significance. The reason for this could be largely having to do with the design of the methodology of this study. As this was a paired sample study, each participant was given a short packet of information to fill out, including both versions of the scale. The order of presentation was randomized and the assessments were presented one after the other. During administration some participants noted that they did not notice a difference between the two assessments, therefore they circled the same answers on both forms. Even when it was explained to the participants that there was a difference between the two assessments, there remained a certain portion that insisted there was no difference in the assessments. Some amount of error is to be expected when using human subjects and self-report measures. It is also speculated that when dealing with a clinical population there will be more distress than with a non-clinical population. Since it was a requirement for inclusion in this study that the participant be in therapy, all participants have the

Marital Status Inventory-Revised potential for having increased emotional distress. It could be argued that it would have been prudent to use a test-retest method where half of the participants would take the original assessment, and the other half of participants would take the revised assessment and compare the two samples. However, much of the motivation for this research came from the desire to achieve greater client satisfaction while maintaining reliability. Without the comparison between forms it would have been impossible to gather client satisfaction information.

Crane and Mead (1980) noted that the wife's score seemed to be more indicative of divorce potential. Crane, Soderquist, and Frank (1995) point out that "the distress level of the wife is a more important predictor of divorce than is the distress level of her husband" (p. 234). As the current study was a cross-sectional design, it would be estimated guessing if conclusions were to be drawn regarding which marriages would end in divorce. Longitudinal data would need to be gathered with this sample to determine if the wife's score was more indicative of divorce than the husband's. There was not, however, a statistically significant difference between the mean scores between husband and wife, suggesting that there is insufficient evidence to reject the null hypothesis that there is no difference on the two scales between genders. A possible reason that no gender differences appeared on the MSI could relate to the sampling. Similarities between data collection locations were not compared to see if they could be combined. Additionally, in light of the low scoring responses, it would appear that this was not a very divorce prone sample. Since women tend to be more indicative of divorce (Crane, Soderquist & Frank, 1995) it is reasonable to not see any gender differences with such low scores.

The principle limitation of this study was the sample populations. Both samples appeared to be at best mildly distressed as determined by the RDAS. They also did not perceive themselves to be divorce prone as evidenced by the distribution of the MSI scores. As a result there was little variance which could be used to discriminate between marital therapy individuals and other therapy individuals. The same could be said about predicting divorce potential. Without more distressed couples the MSI and MSI-R were unable to find differences in the male and female scores. In the past it is the wives' scores which best predict divorce potential. However, as husbands' and wives' scores were very similar in this study there was little opportunity to observe divorce potential for either gender. Additionally, there was insufficient diversity in the sample with regards to race, socioeconomic status, and religion in order to determine if the MSI-R is applicable across the board.

A longitudinal study would be more suitable for determining the effectiveness of this tool with a remarried group as well as the first time married group. This may include an initial assessment with a six month, year, and two year follow up. Furthermore, a replication study of the MSI-R would serve to increase its validity as a tool for assessing divorce potential. Areas of further study may include looking at each item on the MSI-R and determining if each item is still a step toward divorce. For example, item number 12 reads "I have set up an independent bank account in my name as a measure of protecting my own interests." Some clients had indicated that this is true, however scored very low on the assessment indicating a low divorce potential.

For ease and convenience of clinicians, the use of the MSI-R is recommended. It will help ease the experience of the client as well as increase the speed of assessment for the clinician. For clinicians, when scoring the MSI-R, any items marked "true" will

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receive one point. The sum total of all the items marked “true” make up the client’s score. It was beyond the scope of this research to conduct an investigation to determine cut-off scores for clinical levels of distress on the MSI-R. It is recommended that the clinician refer to Crane, Newfield, and Armstrong’s (1984) work on the MSI to learn more about distress ranges for the MSI. It could be argued that since the MSI and MSI-R have such a high correlation the same would be applicable as far as cut-off scores. Further research on the MSI-R would be warranted to be empirically sound in that regard.

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Appendix A

Name \_\_\_\_\_  
 Male \_\_\_\_\_ Female \_\_\_\_\_  
 Date \_\_\_\_\_

Form A

We would like to get an idea of how your marriage stands right now. Please answer the following by circling true or false for each item.

- T F 1. I have occasionally thought of divorce or wished that we were separated, usually after an argument or other incident.
- T F 2. I have considered divorce or separation a few times other than during or shortly after a fight, although only in vague terms.
- T F 3. I have thought specifically about separation or divorce: I have considered who would get the kids, how things would be divided, pros and cons of such actions, etc.
- T F 4. I have discussed the question of my divorce or separation with someone other than my spouse. (Trusted friend, psychologist, minister, etc.)
- T F 5. I have suggested to my spouse that I wished to be divorced, separated or rid of him/her.
- T F 6. I have made specific plans to discuss separation or divorce with my spouse. I have not considered what I would say, etc.
- T F 7. I have discussed the issue seriously or at length with my spouse.
- T F 8. My spouse and I have separated. [This is a (a) trial separation or (b) permanent separation; circle one.]
- T F 9. Thoughts of separation or divorce occur to me very frequently, as often as once a week or more.
- T F 10. I have made inquiries from nonprofessionals as to how long it takes to get a divorce, grounds for divorce, costs involved in such actions, etc.
- T F 11. I have consulted a lawyer or other legal aid about the matter.
- T F 12. I have set up an independent bank account in my name as a measure of protecting my own interests.
- T F 13. I have contacted a lawyer to make preliminary plans for a divorce.
- T F 14. I have filed for divorce or we are divorced.

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<sup>1</sup>Weiss, R.L., & Cerreto, M. (1980). The Marital Status Inventory: Development of a measure of dissolution potential. *The American Journal of Family Therapy*, 8(2), 80-86. Revised by R. Jamieson 2004.

Appendix B

Name \_\_\_\_\_  
Male \_\_\_\_\_ Female \_\_\_\_\_  
Date \_\_\_\_\_

Form B

We would like to get an idea of how your marriage stands right now. Please answer the following by circling true or false for each item.

- T F 1. I have occasionally thought of divorce or wished that we were separated, usually after an argument or other incident.
- T F 2. I have considered divorce or separation a few times other than during or shortly after a fight, although only in vague terms.
- T F 3. I have thought specifically about separation or divorce. I have considered who would get the kids, how things would be divided, pros and cons of such actions, etc.
- T F 4. I have discussed the question of my divorce or separation with someone other than my spouse (trusted friend, psychologist, minister, etc.)
- T F 5. I have not suggested to my spouse that I wished to be divorced, separated or rid of him/her.
- T F 6. I have not made any specific plans to discuss separation or divorce with my spouse. I have not considered what I would say, etc.
- T F 7. I have not discussed the issue seriously or at length with my spouse.
- T F 8. My spouse and I have separated. [This is a (a) trial separation or (b) permanent separation, circle one]
- T F 9. Thoughts of separation or divorce occur to me very frequently, as often as once a week or more.
- T F 10. I have made no inquiries from nonprofessionals as to how long it takes to get a divorce, grounds for divorce, costs involved in such actions, etc.
- T F 11. I have not consulted a lawyer or other legal aid about the matter.
- T F 12. I have set up an independent bank account in my name as a measure of protecting my own interests.
- T F 13. I have not contacted a lawyer to make preliminary plans for a divorce.
- T F 14. I have filed for divorce or we are divorced.

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<sup>1</sup>Weiss, R.L., & Cerreto, M. (1980). The Marital Status Inventory: Development of a measure of dissolution potential. *The American Journal of Family Therapy*, 8(2), 80-86.

## Marital Status Inventory-Revised

Appendix C  
Revised Dyadic Adjustment Scale  
Busby, Christensen, Crane, and Larsen (1995)

Name \_\_\_\_\_

Date \_\_\_\_\_

Most persons have disagreements in their relationships. Please indicate below the approximate extent of agreement or disagreement between you and your partner for each item on the following list.

	Always Agree	Almost Always Agree	Occasionally Agree	Frequently Disagree	Almost Always Disagree	Always Disagree
1. Religious Matters						
2. Demonstrations of affection						
3. Making Major Decisions						
4. Sex Relations						
5. Conventionality (correct or proper behavior)						
6. Career decisions						

	All the time	Most of the time	More often than not	Occasionally	Rarely	Never
7. How often do you discuss or have you considered divorce, separation, or terminating your relationship?						
8. How often do you and your partner quarrel?						
9. Do you ever regret that you married (or lived together)?						
10. How often do you and your mate "get on each other's nerves?"						

	Every Day	Almost Every Day	Occasionally	Rarely	Never
11. Do you and your mate engage in outside interests together?					

	Never	Less than once a month	Once or twice a month	Once or twice a week	Once a day	More often
12. Have a stimulating exchange of ideas						
13. Work on a project together						
14. Calmly discuss something						

Marital Status Inventory-Revised  
Appendix D

Satisfaction Survey

Thank you for completing the two forms of the Marital Status Inventory. Please indicate your answer by circling the number one through five.

1=Strongly Disagree

2=Disagree

3=Do Not Agree or Disagree

4=Agree

5=Strongly Agree

	SD	D		A	SA
1. Form A was easier to read	1	2	3	4	5
2. Form B was easier to read	1	2	3	4	5
3. Form A was easier to understand	1	2	3	4	5
4. Form B was easier to understand	1	2	3	4	5

Other comments about these inventories:

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Thanks again for your help.

Marital Status Inventory-Revised  
Appendix E  
Consent to Be a Research Subject

Assessments are a way for a therapist to gain specific information about a client. By improving the assessments, therapists can be better informed of their client's situation, thereby providing better service to the client. The assessment used in this project is the Marital Status Inventory-Revised, which is designed to assess the dissolution potential of married couples. Rachel V. Jamieson, a master's student at Brigham Young University, and D. Eugene Mead, Ed.D., are conducting this study for a thesis. You were selected for participation in this study because you are seeking therapy at the BYU Comprehensive Clinic or the ANASAZI Foundation.

For your participation in this study, you will be asked to fill out two 14 item assessments, a satisfaction survey, and a marital satisfaction survey. It will take about 10-15 minutes to complete the forms. Both assessments include questions about your thoughts and actions in regards to separation and divorce. The satisfaction survey has items regarding the first two forms in this packet, and the marital satisfaction survey contains items regarding your current marital relationship. **The first two forms look very similar, please read each item carefully.** If you are willing to participate fill out the forms and return them to the receptionist.

Although there are minimal risks for participation in this study, there is potential for some discomfort associated with providing information about your relationship that may be of a personal and sensitive nature. It is possible that you may feel some anxiety when answering the items on the assessment. During the assessment, your anxiety is not expected to be any greater than normally seen in individuals during regular assessment.

Participation in this research is voluntary. You have the right to refuse to participate at any time. Your decision to withdraw will in no way affect the services you receive at the Comprehensive Clinic. Strict confidentiality will be maintained, and data collected in the study will be stored in a secure area and access will be given only to personnel associated with the study.

If you have any questions regarding this research project, you may contact Rachel Jamieson or Dr. Eugene Mead by calling (801) 422-7759, or by e-mail: [victoriajamieson@gmail.com](mailto:victoriajamieson@gmail.com) or [eugene\\_mead@byu.edu](mailto:eugene_mead@byu.edu).

If you have any questions regarding your rights as a participant in a research project, you may contact Dr. Renea Beckstrand, IRB Chair, 422-3873, 422 SWKT, Brigham Young University, Provo, UT 84602 [renea\\_beckstrand@byu.edu](mailto:renea_beckstrand@byu.edu).

I have read, understood, and received a copy of the above consent, and desire of my own free will and volition, to participate in this study.

Research Participant \_\_\_\_\_

Date \_\_\_\_\_