How Coming to Terms with Difficulties in the Family of Origin Positively Influences Adult Children's Relationship/Marital Quality

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HOW COMING TO TERMS WITH DIFFICULTIES IN THE FAMILY OF ORIGIN
POSITIVELY INFLUENCES ADULT CHILDREN’S RELATIONSHIP/MARITAL
QUALITY

by

Vjolca Kadi Martinson

A dissertation submitted to the faculty of
Brigham Young University
In partial fulfillment of the requirements for the degree of
Doctor of Philosophy

Marriage, Family, and Human Development Department
Brigham Young University
December 2005
of a dissertation submitted by

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This dissertation 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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As chair of the candidate’s graduate committee, I have read the dissertation of Vjollca Kadi Martinson in its final form and have found that (1) its format, citations, and bibliographical style are consistent and acceptable and fulfill university and department style requirements; (2) its illustrative materials including figures, tables, and charts are in place; and (3) the final manuscript is satisfactory to the graduate committee and is ready for submission to the university library.

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ABSTRACT

HOW COMING TO TERMS WITH DIFFICULTIES IN THE FAMILY OF ORIGIN POSITIVELY INFLUENCES ADULT CHILDREN’S RELATIONSHIP/MARITAL QUALITY

Vjolca Kadi Martinson
Marriage, Family, and Human Development Department
Doctor of Philosophy

Decades of research have shown that family-of-origin experiences are generally important predictors of individuals’ later relationship/marital quality. On average, the healthier these experiences are, the healthier adult children’s relationships and marriages tend to be. The focus of this study was to investigate how coming to terms with difficulties experienced in the family of origin may enhance adult children’s ability to create high quality relationships and marriages. The study employed a sample of 6423 U.S. couples, 18-45 years old, who were dating, cohabitating, engaged or married.

This study showed that individuals in couple relationships who reported healthier family-of-origin experiences and those who had come to terms with difficult experiences in their families had higher relationship/marital quality than those who reported less healthy experiences and had not come to terms with them. Males in this sample were
more likely than females to have come to terms with difficulties experienced in their families of origin, while females were more likely than males to believe that there was still something from their family experience that they were struggling with. Results showed that individuals may have utilized several factors to help them come to terms with difficulties in their families. Some of these factors may have been: being autonomous from the family of origin, being agreeable, extroverted, flexible, mature, spiritual, loving, having high self-esteem, being able to be empathetic and send clear messages while communicating with partners, spouses, or parents. Some vulnerabilities associated with coming to terms may have been: showing symptoms of depression, neuroticism, contempt, stonewalling, flooding, and being negative in relating to others. Results of this study suggest that the ability to come to terms with difficulties in the family of origin is related not only to the resource factors available for the individuals struggling but also to the resources utilized by their partners/spouses.
I would like to express my gratitude and appreciation to the people who made it possible for me to complete this dissertation. I would like to thank my committee members for their assistance, patience, flexibility, encouragement, and helpful suggestions to turn this manuscript into what it currently is. I am indeed grateful to my chair, Dr. Thomas B. Holman, for his willingness to work closely with me for several years, for his guidance and support, for encouraging me throughout this process, and for believing in me. I also thank the faculty members of the Marriage, Family, and Human Development Department for sharing their knowledge with me throughout this wonderful journey.

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CHAPTER 1

INTRODUCTION

Much research has been done to understand and predict relationship quality and success prior to marriage and to identify premarital predictors of relationship quality (Holman & Associates, 2001; Holman, Larson, & Harmer, 1994; Karney & Bradbury, 1995; Larson, 2000; Larson & Holman, 1994; Lewis & Spanier, 1979; Wamboldt & Reiss, 1989). Many educational and intervention programs, as well as instruments, are designed to enhance relationship quality and to prevent and reduce relationship stress, break up, or divorce (Holman, Busby, Doxey, Klein, & Loyer-Carlson, 1997; Markey, Micheletto, & Becker, 1997; Markman, Stanley, & Blumberg, 1994; Miller & Sherrard, 1999; Olson, Fournier, & Druckman, 1996; Parrott & Parrott, 1999). Although several predictors of relationship quality are identified, such as family-of-origin experiences, couple interactional processes, personality traits, social support, etc. (Holman & Associates 2001; Larson, 2000), several family scholars and clinicians are focusing their interventions mostly on the changeable, or the so-called dynamic factors of relationship quality (i.e., couple interactional processes) (Halford & Moore, 2002; Sayers, Kohn, & Heavey, 1998; Stanley, 1997, 2001). Thus, most of the interventions available to couples today are skill-based and focus on couple processes. They fail to address, or do not give a considerable amount of attention to, factors such as family-of-origin processes, personality traits, and individual characteristics, considering them to be static or unchangeable during interventions (Halford & Moore, 2002; Halford, 1999; Sayers et al., 1998; Stanley, 1997, 2001).
Although intervening in couple interactional processes is important and effective, some family scholars, researchers, and clinicians are questioning the completeness of this approach and are recognizing that addressing family-of-origin issues is necessary for intervention (Stahmann, 2000; Stahmann & Hiebert, 1997). Although events that took place in the family of origin cannot be changed, interventions can address the meaning these events have for individuals’ past, present and future. Addressing early family-of-origin experiences can be important because the way individuals make sense of these experiences and adjust to them may influence their future relationship/marriage quality (Framo, 1992; Holman & Associates, 2001). This is particularly true if negativity has been experienced and individuals need to come to terms with the negative family-of-origin experiences. Coming to terms is an outcome of a healing process that involves individuals’ efforts to interpret, understand, and find meaning in the difficult experiences, to re-story and reframe these experiences, to come to a resolution, and to be at peace with whatever happened. Coming to terms with difficult experiences in the family of origin may help individuals respond successfully to major challenges, place the early experiences in perspective, grow from the past, and not let their early pain color the quality of their current relationships. Thus, family-of-origin processes are not considered as static factors of the past, but rather are seen as dynamic, and thus, worthy of attention in couple interventions.

**Purposes and Significance of the Study**

The fundamental purpose of this study is to investigate the relationship between early family-of-origin experiences and adult romantic relationship quality. More specifically, this research investigates the relationship between coming to terms (or not)
with difficult issues and events that took place in family of origin relationships and the quality of premarital or marital relationships. A further purpose of this research is to help family scholars and clinicians understand the factors that may be associated with the coming to terms. That is, what individual, partner, and/or background factors influence coming to terms and how do these factors differ between those who have come to terms with negative experiences in their past and those who have not.

While there is a significant amount of research on family-of-origin influences on adult children’s premarital and marital relationships, no study to date has specifically examined how coming to terms or not with difficult events in the family of origin influences adult children’s relationship quality. Thus, the significance of this study is in that it expands previous research through exploring more aspects of family-of-origin influences on adult children’s relationship quality.

**Potential Impact of the Study**

Results of this study are of particular interest for family educators and clinicians. Becoming familiar with the concept of coming to terms with difficult events in the family of origin will help family practitioners focus on increasing individuals’ awareness of the relationship between family-of-origin processes and later relationship/marital quality. Intervening in this level helps family clinicians focus on individuals’ restructuring or restory-ing difficult experiences they have had in their families. As individuals learn to come to terms with the events that took place in their families of origin, they will learn how to create higher quality relationships and marriages.
CHAPTER 2
LITERATURE REVIEW

The goal of this section is to first provide evidence from the marital literature that establishes the importance of family-of-origin variables as good predictors of relationship quality. Then, this section provides a review of the literature that shows how individuals cope and come to terms with difficult issues and events that took place in their families of origin.

I. Family-of-Origin Variables as Predictors of Relationship/Marital Quality

The Importance of Family-of-Origin Experiences on Adult Children’s Relationship/Marital Quality

Research and clinical theory suggests that compared to all other factors that influence the individual (culture, society, work, neighborhood, friends, etc.), family of origin has the greatest influence on individual’s development. It is the most important learning environment to which an individual will be exposed (Framo, 1981; Harvey & Bray, 1991; L’Abate, 1997). Early experiences within this unit have a significant impact on one’s life not only during childhood, but also in later life (Holman et al., 1994; Rossi & Rossi, 1990; Wilcoxon & Hovestadt, 1985). A child’s first exposure to marriage is through her parents. It is in the home that a child first encounters marriage, not as an abstract concept, but as an exhibition of her parents’ behaviors with and toward each other. If parents model effective parental roles and provide a secure environment, then a child will be more likely to act in a similar fashion and to form high quality adult relationships (Greenberg & Nay, 1982). As a child enters adolescence and tries to
develop intimate relationships, she relates with others primarily from what she has learned from and seen modeled in her family of origin (Amato & DeBoer, 2001).

Family of origin is a significant environment in teaching individuals about relationships and marriage. Holman and Associates (2001) indicate that from all premarital predictors of marital quality, family-of-origin variables are the most important ones. Therefore, an understanding of processes and interactions within the family of origin can help us understand the quality of adult children’s romantic relationships. For example, the quality of family interactions and home environment are predictors of adults’ later marital satisfaction (Conger, Cui, Bryant, & Elder, 2000; Holman & Associates, 2001; Kelly & Conley, 1987; Larson, 2000; Wamboldt & Reiss, 1989; Whyte, 1990; Wilcoxon & Hovestadt, 1985). Relevant components of the quality of family interactions include the quality of the parent-child relationship, the quality of the parents’ marriage, and the quality of the relational childhood environment.

*The Quality of the Parent-Child Relationship.* Studies concerning parent-child relationship influences on later relationship/marital quality are based primarily on attachment theory as a theoretical framework. Adult romantic relationships are attachment processes, thus, attachment theory may help us in understanding these affectional bonds that an individual creates even beyond his/her infancy (Ainsworth, 1989; Shaver, Hazan, & Bradshaw, 1988). In general, this theory emphasizes that the nature and quality of one’s intimate relationships in adulthood are strongly influenced by attachment patterns formed earlier in life between an infant and her parents (Alexander, Anderson, Brand, Schaeffer, Grelling, & Kretz, 1998; Collins & Read, 1990; Hazan & Shaver, 1987; Searight, 1997; Weiss, 1985). A child’s early attachment relationships with
her parents are carried forward into future relationships, shaping important beliefs about self-concept, developing a worldview about the nature of adult relationships, and a capacity to create affectional bonds (Bowlby, 1979; Collins & Read, 1990; Searight, 1997). This early relationship shapes later ones by having a significant impact on the personality formation and by shaping what one knows how to do and what one understands. Thus, one learns how to be in relationships by being in relationships (Sroufe & Fleeson, 1986).

The quality of the parent-child relationship and its association with adult children’s later relationship quality has received some research attention. Holman and Associates (2001) notice that from all family-of-origin variables, the quality of the parent-child relationship is the most powerful premarital predictor of later marital quality. Emotional security that comes from nurturing and warm parent-child relationships influences child’s future responding (Davies & Cummings, 1994) and individual adjustment and well-being (Feeney & Noller, 1996). Research reveals that having a warm and affectionate relationship with parents is related to having happy romantic relationships and marriages (Conger et al., 2000; Franz, McClelland, & Weinberger, 1991; Holman & Associates, 2001; Kelly & Conley, 1987; Larson, 2000). For example, compared to those who were not as close to their parents, young adults who report affectionate and emotionally close relationship with their parents are more likely to have positive self-esteem, manifest social competence in their intimate relationships by being warm and supportive, become close to others easily, find their partners trustworthy, respond more constructively to stressful situations of various kinds, have lower levels of anxiety, anger, hostility, depression, resentment, and guilt, experience their romantic
relationships as happier, create long-term commitment relationships, and have a greater relationship/marital quality (Cohn, Silver, Cowan, Cowan, & Pearson, 1992; Conger et al., 2000; Feeney & Noller, 1996; Feeney, Noller, & Callahan, 1994; Hazan & Shaver, 1987; Larson, 2000).

The Quality of the Parents’ Marriage. Parents’ marital quality appears to be a good predictor of an individual’s later relationship/marital quality, indicating that the higher the marital quality of one’s parents’ marriage, the higher the marital quality of one’s own marriage (Cate & Lloyd, 1992; Ellis, 2000; Heaton, 2002; Holman & Associates, 2001; Larson, 2000; Loukas, Piejak, Bingham, Fitzgerald, & Zucker, 2001; Sanders, Halford, & Behrens, 1999; Wamboldt & Reiss, 1989). A good marriage provides caring relationships and secure and harmonious family environment (Ambert, 1997). In addition, parents who have a good marriage transmit effective role functioning to their children. Thus, the greater the individual’s exposure to adequate role models for marital functioning in the family of origin is, the higher the adult children’s marital quality is (Larson, 2000; Larson & Holman, 1994; Lewis & Spanier, 1979).

Compared to those whose parents remained married, adult children whose parents divorced are more likely to cohabit and have premarital intercourse (Booth, Brinkerhoff, & White, 1984), have more negative expectations and attitudes toward marriage and more favorable attitudes toward divorce, are more at risk of exhibiting problematic behaviors such as anger, jealousy, hurt feelings, poor communication, infidelity, and are more prone to display feelings of insecurity, disappointment, lack of trust, and inability to commit. These increase the risk of having unstable and distressed romantic relationships, or even divorce (Amato, 1988, 1996; Amato & DeBoer 2001; Ellis, 2000; Glenn &
Kramer, 1987; Greenberg & Nay, 1982; Sanders et al., 1999; Thornton, 1985; Thornton & Freedman, 1982; Trent & South, 1992). However, it needs to be noted that although there exists a relationship between the quality of the parents’ marriage and the quality of adult children’s relationship, the most recent test of these relationships showed that parents' marital quality was indirectly (through parent-child relationship quality) rather than directly related to the adult children’s marital quality (Holman & Associates, 2001).

The Quality of the Relational Childhood Environment. The family environment includes events, people, interactions, and perceptions in the family in which one grew up (Holman & Associates, 2001). A healthy family environment is one that promotes individual growth by developing autonomy and intimacy while cultivating feelings of closeness, belongingness, and differentiation (Hovestadt, Anderson, Piercy, Cochran, & Fine, 1985; Larson, 2000; Minuchin, 1974).

The perceived level of relational health in the family of origin is significantly predictive of the current levels of family functioning. Healthier perceived levels of family-of-origin relational experiences are associated with positive perceptions of current and future marital and family relationships (Canfield, Hovestadt, & Fenell, 1992; Fine & Hovestadt, 1984; Holman & Associates, 2001; Larson, Benson, Wilson, & Medora, 1998). For those who experience current marital difficulties with their spouses, Framo's (1976) explanation is that these difficulties are reconstructions and elaborations of their relationship problems in their families of origin.

Literature has captured the emotional suffering and confusion of those who have lived through stressful events in their families such as family conflict (Cummings, 1994; Davies & Cummings, 1994), fusion and triangulation (Larson et al., 1998), emotional
abuse (Doyle, 2001), sexual abuse (Shapiro & Levendosky, 1999; Spaccarelli, 1994), neglect (Larson, 2000; Shapiro & Levendosky, 1999), loss of one parent or sibling(s) (Rutter, 1987), parental alcoholism (Loukas et al., 2001; Schwartz & Liddle, 2001; Watt, 2002), and parental mental illness (Larson, 2000). Exposure to negative family-of-origin experiences has been associated with increased risk for relationship problems in children when they become adults (Halford et al., 2001). These difficulties can be expressed in communication (Halford & Moore, 2002; Halford, Sanders, & Behrens, 2000; Sayers et al., 1998), attitudes about marriage (Stanley, 2001), anxieties (Benson, Larson, Wilson, & Demo, 1993), etc.

For example, those who experienced fusion and triangulation in their families of origin, experience emotional dependence, lack of autonomy, confusion over emotional interactions, and negative attitudes and feelings in their current intimate relationships (Larson et al., 1998). Child abuse and neglect may lead to low self-esteem, depression, anxiety, resentment, and a disruption of parent-child bond, which can impair adult children’s ability to form a healthy romantic relationship (Larson, 2000; Shapiro & Levendosky, 1999; Spaccarelli, 1994). Parental alcohol or drug dependency damages parents’ ability to provide a stable and healthy parent-child relationship. Parents who suffer from mental health problems (i.e., depression, chronic anxiety, or addiction) have difficulties expressing affection, providing love, and building self-esteem in their children. Children who grew up in such family environments experience feelings of insecurity and being unloved, which negatively effect romantic relationships (Larson, 2000).
Gender Differences. Several studies (Holman & Associates, 2001; Kelly & Conley, 1987; Wamboldt & Reiss, 1989) have shown that family-of-origin factors impact relationship outcomes differently for men and women. For example, Cohn et al. (1992) showed that connections between childhood attachment and couple relationships may be more direct for men than for women. Husbands who have had secure attachment styles with their parents are more likely to form better functioning couples who engage in more positive interactions and display less conflict compared to husbands who have had an insecure attachment with their parents. However, the most recent research by Holman and Associates (2001) showed that the parent-child relationship had a much stronger direct relationship to the marital satisfaction of wives rather than husbands. Even when controlling for factors such as individual characteristics and couple communication, wives’ quality of relationship with parents during childhood retained a significant and positive relationship with their current marital satisfaction. This was not the case with their husbands.

Childhood family environment affects the quality of marital relationships differently for men and women. Early social environment has a larger impact on the marital satisfaction of women than men (Holman & Associates, 2001; Kelly & Conley, 1987; Wamboldt & Reiss, 1989). This may be because women appear to be more strongly embedded in the framework established in their families (Kelly & Conley, 1987), and probably because traditionally women have been the ones who set the emotional tone of the home (Rossi & Rossi, 1990). However, this is not to say that males’ marital quality is not affected by childhood family environment (Holman et al., 1994;
Rossi & Rossi, 1990). Their marital quality is generally not as affected by family environment as females’ marital quality.

The Dichotomy between Dynamic vs. Static Predictors of Relationship/Marital Quality

Several studies and the reviews of the research have identified premarital factors that are related to variation in marital quality in later years, helping us to understand and explain the developmental changes that occur in couples over time (Holman & Associates, 2001; Holman et al., 1994; Karney & Bradbury, 1995; Larson, 2000; Larson & Holman, 1994; Lewis & Spanier, 1979; Wamboldt & Reiss, 1989). However, several family scholars are conceptualizing these variables as falling into two categories of dynamic and static predictors, and are focusing their interventions mostly on the dynamic factors of the relationship quality. Dynamic predictors are considered to be those that can change during interventions. Such predictors are couple interactions, conflict management, couple expectations, etc. Other factors such as family-of-origin experiences, personality traits, individuals’ characteristics, etc., are considered to be static or less likely to change (Halford, 1999; Halford & Moore, 2002; Sayers et al., 1998; Stanley, 1997, 2001; Stanley, Blumberg, & Markman, 1999; Stanley, Markman, St. Peters, & Leber, 1995).

Based on this division, many of the interventions designed to reduce relationship stress and break up or divorce focus on skills. They target mainly factors such as couple communication and effective conflict resolution (Halford, Sanders, & Behrens, 2001; Hunt, Hof, & DeMaria, 1998; Stanley et al., 1999). They fail to address or do not give a considerable amount of attention to factors such as family-of-origin processes or personality traits, considering them to be static or unchangeable during interventions
While intervening in couple interactional processes is important and effective, family scholars, researchers, and clinicians need to recognize that addressing the “unchangeable” factors such as family of origin is necessary for interventions (Stahmann, 2000; Stahmann & Hiebert, 1997). While events that took place in the family of origin are unchangeable, interventions can address the meaning these events have for individuals’ past, present, and future.

Addressing early family-of-origin experiences is important because the way individuals make sense (or not) of these experiences and come to terms (or not) with them may influence their future relationship/marriage quality (Framo, 1992; Holman & Associates, 2001). Williamson (1978) stressed “relatively few people are aware of how they continue to be influenced and controlled in their behavior by the unachieved goals and the unresolved problems of the parental and the grandparental generations” (p. 94). Thus, family-of-origin processes should not be considered as static and need to be addressed during interventions. The past is alive and changeable, especially in how one remembers the past and how one allows the past to influence present goals, attitudes, and behaviors (Holman & Associates, 2001).

Relevance of Family-of-Origin Variables in Predicting Adult Children’s Relationship/Marital Quality

Although family-of-origin variables have shown to be important factors in predicting adult children’s relationship quality, their predictive relevance is questioned by a lack of understanding of family-of-origin processes’ indirect effects on marriage through more proximal factors (Holman & Associates, 2001). For example, family-of-
origin factors have an indirect effect on marital quality through influencing couple’s consensus building process (Wamboldt & Reiss, 1989) and individual’s self-esteem (Holman & Associates, 2001). Specifically, secure attachment with parents influences current relationship satisfaction by influencing communication processes in the new relationship (Feeney, 1994; Holman & Associates, 2001). In addition, parents’ marital quality is indirectly related to the adult children’s marital quality through the quality of the parent-child relationships (Holman & Associates, 2001). A better understanding of these relationships can be provided when the indirect effects are acknowledged and understood, and when the meaning and interpretation embedded in the indirect pathways become alive and allow a developmental understanding of marital relationships.

Another reason why the predictive relevance of family-of-origin variables has been questioned is relatively poor measurement of family-of-origin processes from past research (Holman & Associates, 2001). In their review of the available instruments for measuring family-of-origin processes, Hovestadt et al. (1985) found most of these instruments to be deficient. Since then, many other family assessment measures have generated, however, in an uncoordinated manner. Bradbury (1995) notes that “family assessment literature has become a victim of its own success” (p. 459). Family assessment instruments are generated in a way that practitioners cannot afford to evaluate and select them properly. As a consequence, they avoid using them, or go back to familiar instruments even if they provide limited information (Bradbury, 1995). In addition, there is a lack of a theoretical consistency among family-of-origin instruments that measure the same constructs. This makes it difficult to compare data gathered by different instruments (Sawin, Harrigan, & Woog, 1995).
The most common instruments used to gather data on the family-of-origin processes are self-report instruments. Although self-reported instruments and data are found to be important, several concerns exist. Some of these are: (a) Self-report instruments measure memories, but do not provide a measure of the accuracy of the memories being reported (Melchert & Sayger, 1998); (b) it is hard to distinguish between objective-factual or interpretive-subjective views of the family of origin (the instruments simply measure individuals’ perceptions of their family-of-origin experiences based on the assumption that perceived reality is reality); (c) perceptions are susceptible to distortion and denial over time and life experiences; (d) it is difficult to tell if respondents are reporting past or current judgments and feelings (Hovestadt et al., 1985); (e) constructs of these instruments are neither comprehensive nor exhaustive (Hovestadt et al., 1985; Melchert & Sayger, 1998); and (f) self-report measures do not allow for a systemic perspective of data collection (Larson et al., 1998). Although there is skepticism about the reliability of retrospective reports of childhood experiences, an objectively accurate and meaningful criterion for establishing family-of-origin memories’ reliability does not exist (Melchert & Sayger, 1998). In addition, several memory experts have concluded that autobiographical recalls are reliable and reasonably accurate (Baddeley, 1997; Brewin, Andrews, & Gotlib, 1993; Neisser, 1994).

Another issue with family-of-origin measures is that instruments assess family characteristics globally, not allowing for separate assessments of what are often important differences (Melchert & Sayger, 1998). Furthermore, available instruments vary from multi-item scales to single-item ones. Thus, findings can be affected from differences in the types of measures used (Hill & Peplau, 1998). These existing concerns with family-
of-origin measures have also brought the rejection of family-of-origin variables as not good predictors of relationship/marital quality.

In summary, family-of-origin experiences not only influence greatly individual’s development, but also are important predictors of individuals’ later marital quality. Aspects of the family of origin such as the quality of the parent-child relationship, the quality of the parents’ marriage, and the quality of the relational childhood environment have been shown to affect the quality and course of romantic relationships. The more satisfying these relationships are, the more satisfying adult children’s marriages tend to be. Therefore, an understanding of processes and interaction within the family of origin helps us understand adult children’s romantic relationships.

Coming to Terms with Difficulties in the Family of Origin

Framo (1981) suggests that current relationship difficulties may to some extent stem from the attempts to master early conflicts in the family of origin. Dealing with family conflicts or other difficult events helps individuals come to terms with difficulties experienced in their families, which in turn tends to lead to higher relationship quality (Holman & Associates, 2001). Although there is not any empirical evidence that shows how individuals come to terms with stressful events or processes in the family of origin, clinical and theoretical impressions exist.

Clinical work shows that working with the family-of-origin variables allows for progress in addressing and resolving past and current relationship conflicts (Framo, 1992). Literature indicates that constructive changes of family relationships can happen when individuals master the ability to establish a sense of belonging to the family of origin while simultaneously remaining differentiated individuals (Kerr, 1981; Kerr &
Bowen, 1988; Papero, 1995; Whitaker & Keith, 1981); go back and deal directly with the previously avoided issues which existed between them and their family members (Framo, 1981); and deal with the invisible loyalties and the ledger of merit and indebtedness (Boszormenyi-Nagy & Ulrich, 1981; Framo, 1992). However, this means not only dealing with the present, but also with the past. Although several scholars and clinicians consider the past as unchangeable, the past is “alive” and changeable (Slife & Williams, 1995).

The postmodern approach suggests that individuals are bound and constrained by the past (Slife & Williams, 1995), especially in how they remember the past and how they allow the past to influence present goals, attitudes, and behaviors (Holman & Associates, 2001). This approach views time as holistic, in a way that the past, present, and future are simultaneously involved in the life of individuals.

The crucial point is that a postmodern view of time allows for the present (and future) to be constrained by the past and yet also admit possibility. The present is constrained by the past because no present is ever free of past context. For someone to make a meaningful choice in the present, the person must have some knowledge of the choice—the options available, their consequences, and so forth. This knowledge of the choice stems from the past. Indeed, without some past, the person would not even know that a choice was to be made. However, the present is not determined (necessitated) by the past, because the past itself is not determined or necessary. The past, according to many postmodernists, is "alive" and changeable, dependent on the possibilities of present and future contexts.
Rather than lawful necessity being the rule of our nature, change and temporality provide better understandings (Slife & Williams, 1995, p. 218).

Thus, family-of-origin variables are important and may be helpful in interventions (Stahmann, 2000; Stahmann & Hiebert, 1997). Addressing these variables helps individuals cope and come to terms with difficulties experienced in their families, which in turn tends to lead to higher relationship quality. Addressing difficulties in the family of origin adds to the meaning, interpretation, and understanding of self, others, and the events that took place in the family of origin. While parental divorce cannot be undone or the quality of the early parent-child relationship cannot be changed, individuals can come to terms with the past by "restory-ing" or reframing their experiences. For example, relationships can be seen through different lenses or different aspects of the relationships can be emphasized so that the negative influences of family-of-origin experiences can be lessened (Holman & Associates, 2001).

II- How Do Individuals Cope and Come to Terms with Difficulties in Their Families of Origin?

Although empirical evidence is lacking on how individuals come to terms with difficulties in the family of origin and how coming to terms influences their relationship/marital quality, several studies (Burr & Klein, 1994; Folkman & Lazarus, 1980; Lazarus, 1993; Patterson & McCubbin, 1987) show how individuals cope with several family and other stressors. Thus, the following section of the dissertation provides a review of the coping literature.
What is Coping?

The term *coping* is used to describe several cognitive and behavioral processes (i.e., gathering information, considering alternatives, cooperating with others, focusing on the positive aspects of the event or situation) that operate to manage a troubled situation or relationship (Cowan, Cowan, & Schulz, 1996; Folkman & Lazarus, 1985; Wills, Blechman, & McNamara, 1996). Coping can be problem- or emotion-focused. Problem-focused coping attempts to change the stressful situation by acting on the environment or on the self (Billings & Moos, 1981; Lazarus, 1993). Emotion-focused coping is aimed toward maintaining one’s emotional equilibrium by changing the relational meaning attached to the event or by changing how the stressful situation is attended to (Billings & Moos, 1981; Lazarus, 1993). Coping can also be conceptualized as approach- or avoidance-oriented. Approach oriented strategies, or active coping, include cognitive and behavioral attempts such as information gathering, problem-solving, reframing the situation or the event to see the positive side of problems, and seeking support from several sources to deal with the situation or event directly. Avoidant strategies include cognitive and behavioral strategies to deny or minimize that the event occurred or had an effect, to avoid confronting the situation, or to remove self physically from the situation. Some of these strategies are ventilating feelings, acting out to manage tension, and seeking alternative sources of pleasure (Billings & Moos, 1981; Ebata & Moos, 1991; Phelps & Jarvis, 1994).

Functions of Coping

Coping is understood as a way to protect the individual from the negative physical or psychological consequences by individual's reaching out and within for resources
available. Its functions are: (a) to eliminate or reduce demands and/or increase resources for managing the demands, (b) to redefine demands so as to make them more manageable, (c) to create definitions and meaning by cognitively appraising the situation, (d) to manage the tension which is felt as result of experiencing demands (Patterson & McCubbin, 1987), and (e) to regulate distressing emotions and to do something to change for the better the problem causing the stress (Folkman, Lazarus, Dunkel-Schetter, DeLongis, & Gruen, 1986; Folkman & Lazarus, 1985; Folkman, 1984).

Mechanisms of Coping

Research identifies several coping mechanisms that individuals use to deal with stress. According to Burr & Klein’s (1994) framework these coping mechanisms can be arranged into seven categories. These categories are:

1) **Cognitive**: changing the relational meaning of the situation or the event (Burr & Klein, 1994; Lazarus, 1993), wishful thinking (Folkman & Lazarus, 1980, 1985), imagining releasing resentments and letting resentments go (Bloomfield & Felder, 1985), mentally working through unpleasant past experiences and creating mental models of healthier relationships (Hazan & Shaver 1987), and using humor (Phelps & Jarvis, 1994).

2) **Emotional**: expressing feelings (Burr & Klein, 1994) and distancing (Folkman & Lazarus, 1985).

3) **Relationship**: increasing adaptability, cooperation, and tolerance of others (Burr & Klein, 1994).
4) **Communication**: being open and honest (Burr & Klein, 1994) and problem-solving in an indirect manner without confronting any one or challenging any situation (Drapeau, Samson, Saint-Jacques, 1999).

5) **Community**: finding emotional resources outside the family (an aunt, friend, teacher) and creating wider emotional investment with them (Doyle, 2001; Drapeau et al., 1999; Patterson & McCubbin, 1987; Rutter, 1987).

6) **Spiritual**: getting more involved in religious activities, seeking help from God (Burr & Klein, 1994), and forgiving and letting go (Bloomfield & Felder, 1985; Veenstra, 1993).

7) **Individual development**: developing or expending self-confidence, self-esteem, self-efficacy, and emotional competence by reflecting on the self (Saarni, 1999).

Coping strategies that individuals use to deal with stress are not universal. Certain coping strategies that can produce positive outcomes in one context, in one person, may not in another (Burr & Klein, 1994; Lazarus, 1993). For example, avoidant coping strategies such as distancing self from the situation or event sometimes may have potential benefits by reducing anxiety (Ebata & Moos, 1991; Rooth & Cohen, 1986). However, they may not always produce constructive changes. The effectiveness of coping strategies is related to the nature of the stressful event (Burr & Klein, 1994; Ebata & Moos, 1991; Lazarus, 1993), contextual factors (Burr & Klein, 1994), availability of resources (Compas, Malcarne, & Fondacaro, 1988), individual characteristics such as individual's values, beliefs, commitment (Forsythe & Compass, 1987), temperament (Forsythe & Compass, 1987; Rutter, 1987), gender (Burr & Klein, 1994; Patterson &
McCubbin, 1987; Phelps & Jarvis, 1994; Stark, Spirito, Williams, & Guevremont, 1989), age (Phelps & Jarvis, 1994), individual's evaluation of a specific situation (Lohman & Jarvis, 2000), and individual's sense of control over the problem or the situation (Drapeau et al., 1999).

**Theoretical Framework of Coping**

To examine how individuals cope with the difficulties and stressful events experienced in their families of origin, this paper combines individual and family stress approaches as well as the interpersonal competence theory (L'Abate, 1997). The individual is considered as a subsystem of a larger system, the family, which itself is embedded in community. Each of these levels (individual, family, and community) has its own demands (stressors and strains) and capabilities (resources and coping behaviors). Each of these systems tries to reach adaptation through reciprocal relationships, where the demands of one unit are met by the capabilities of another, so as to achieve balance in functioning (Patterson & McCubbin, 1987).

Systems theory of family stress identifies that stress occurs when the individual, or the subsystem, does not have sufficient rules to transform the family's, or the system's inputs (energy, time, closeness) to outputs (meaning, love, attention, affection, etc.). In the absence of this transformation, the subsystem tends to be stressed (Burr & Klein, 1994). When the subsystem is stressed, it develops coping strategies which are active processes, efforts, and behaviors to help manage and adapt individual and family related demands with capabilities (Burr & Klein, 1994, McCubbin & Dahl, 1985; Patterson & McCubbin, 1987). Some of these strategies can be individual's efforts to differentiate (Kerr, 1981; Kerr & Bowen, 1988; Papero, 1995; Whitaker & Keith, 1981) or to deal
directly with specific issues between the subsystem and other subsystems or the system itself (Framo, 1981).

However, the system can be not only the origin of stress but also a buffer to stress. This can happen when (a) the system and subsystems have the ability to love and negotiate, (b) certain relationships with certain subsystem are restored, and (c) other subsystems in the family serve as resources to help the individual come to terms with difficulties. Interpersonal competence theory suggests that individual and/or family functioning can increase during and after stressors when individuals exercise their ability to love (being emotionally available to one another and valuing each other’s worth) and negotiate (problem solving, bargaining, and decision making). These competencies are learned in the family. Unless family members are ready to exercise their ability to love, it will be difficult for them to share the hurt and fears about hurt and to negotiate issues (L'Abate, 1997).

For example, an individual's ability to come to terms with stressors is increased when, as result of several coping strategies used, certain relationships with certain family member are restored and certain issues with him/her are resolved. For example, if a parent who has exploited a child in the past atones in the present, the child is credited and the parent earns entitlement, thereby balancing the emotional ledger (Framo, 1992). In this situation, the individual uses this subsystem (the parent) as a resource to help him/her continue to cope with stresses and come to terms with them.

In addition, when the cause of stress is a specific subsystem, then resources from other subsystems in the family can help the individual cope with stress. Reliance on resources within the family can contribute to improved individual or family functioning.
during and after stressors. Research shows that those who have more family resources such as support (Wills et al., 1996), cohesion, flexibility, good relationship with parents, and good communication and conflict resolution skills (McCubbin & Patterson, 1982; Patterson & McCubbin, 1987) are more likely to cope (Lohman & Jarvis, 2000; Patterson & McCubbin, 1987; Shek, 1998; Wills et al., 1996).

Coping is successful when the individual achieves a “fit” with the larger system he/she is a part of (Patterson & McCubbin, 1987) and when positive changes and declines in symptoms are stimulated in a way that makes future adoption to similar stressors more likely (Cohan & Bradbury, 1997). Coping is also successful when the individual is resilient. In the face of stress, a resilient individual possess and utilizes protective factors such as physiological and psychological strengths, resources, and interpersonal skills that enable him/her to counterattack the stress and to "cancel" its negative impact (Cohan & Bradbury, 1997; Cowan et al., 1996). To be resilient does not mean that the individual is invulnerable to stress. It means to respond successfully to major challenges, to place the early experiences in perspective, to grow from the past, and to not let the early pain color the quality of the current relationships (Cowan et al., 1996; Egeland, Carlson, & Sroufe, 1993). Resilience is not an individual trait. Individuals who cope successfully with stress at one point in their life, may react adversely to other stressors when the situation is different. If circumstances change, resilience alters (Rutter, 1987).

Who Is most Likely to Cope?

Different individuals respond differently to stress. Some are impaired by, some are improved by, and some are resistant to stress (Burr & Klein, 1994). Those who have a more favorable perception of the family of origin and have more family resources such as
support, cohesion, flexibility are more likely to use more coping resources (Patterson & McCubbin, 1987; Shek, 1998; Wills et al., 1996) and more approach-oriented coping strategies (Lohman & Jarvis, 2000). Those with higher levels of education and income are also more likely to use more active coping strategies. On the other hand, those who have fewer social resources are more likely to use avoidant coping strategies (Billings & Moos, 1981). Those who use approach-oriented strategies adjust better than those who use avoidant ones, who may suffer from long-term adjustment problems (Ebata & Moos, 1991).

Women use a wider range of coping strategies than men (Burr & Klein, 1994; Patterson & McCubbin, 1987). Based on traditional sex-role expectations, women are considered to be more emotionally responsive and sensitive, while men are viewed as more analytic and task-oriented. Thus, women may be more likely than men to use emotion-focused coping responses (Billings & Moos, 1981; Phelps & Jarvis, 1994) and men more likely to use problem-focused ones (Billings & Moos, 1981). Women use strategies that help them reach out to others (Burr & Klein, 1994; Stark et al., 1989), such as share concerns with others, be more involved in religious activities, and express feelings openly. Men use more of the avoidant, harmful types of strategies that indicate withdrawal. Some of these harmful strategies are: use of alcohol, trying to keep feelings inside, and trying to keep others from knowing how bad things are (Burr & Klein, 1994). However, males and females do not differ significantly in their use of active coping strategies (Phelps & Jarvis, 1994).

This section of the paper reviewed the coping literature and identified several coping mechanisms individuals use to deal with stress. Although the review was helpful
in identifying the importance of coping in the process of healing, it needs to be noticed that coming to terms is not similar with coping. While coping is a necessary step in the healing process to help the individual function, coming to terms is the outcome of the healing process. Although the coping literature is quite generous, what is lacking is how coping helps individuals come to terms with the difficulties experienced in their families, and how coming to terms (or not) with these difficulties may influence the quality of current and future relationships and marriages.

In summary, family-of-origin experiences not only influence greatly individual’s development, but also are important predictors of individuals’ later relationship/marital quality. The more satisfying these experiences are, the more satisfying adult children’s marriages tend to be. Therefore, an understanding of processes and interaction within the family of origin helps us understand adult children’s romantic relationships. Thus, addressing family-of-origin issues is necessary for intervention (Stahmann, 2000; Stahmann & Hiebert, 1997), because the way individuals make sense (or not) of these experiences and come to terms (or not) with them influences their future relationship/marriage quality (Framo, 1992; Holman & Associates, 2001). Coming to terms with difficult experiences in the family of origin helps individuals respond successfully to major challenges, place the early experiences in perspective, grow from the past, and not let the early pain color the quality of the current relationships. While specific events or relationships cannot be changed, the meaning attached to these experiences can be altered. For example, relationships can be seen through different lenses or different aspects of the relationships can be emphasized so that the negative influences of family-of-origin experiences can be lessened (Holman & Associates, 2001).
Focus of the Study

The focus of this study is to look at how coming to terms with difficulties experienced in the family of origin helps enhance individuals’ ability to create high quality relationships and marriages. This study suggests that coming to terms with these difficulties is a necessary step in dealing with the past and present and in learning how to create higher quality relationships and marriages. Because the existing marital literature has not paid much attention to the concept of coming to terms with difficulties experienced in the family-of-origin, the significance of this study is substantial for the field.

Hypothesis to Be Tested

Given the foregoing theoretical and empirical literature, it is hypothesized that:

1) Individuals who report healthier family-of-origin experiences will report higher current relationship/marital quality compared to individuals with less healthy family-of-origin experiences and who have not come to terms with these relationships.

2) Those with less healthy family-of-origin experiences who have come to terms with them, will report higher current relationship/marital quality than individuals with less healthy family-of-origin experiences who have not come to terms with them.

3) The empirical literature gives no bases for hypothesizing the difference between those who report healthier family-of-origin experiences and those with less healthy family-of-origin experiences and who have come to terms with these
experiences. Therefore, I will test the null hypothesis of no difference between these two groups.

4) If there are significant differences in relationship/marital quality between individuals from moderately to highly dysfunctional families, who have come and have not come to terms with the difficulties, tests of other family, individual, couple processes, as well as partner factors will be conducted to test differences between these groups. These differences, if any, may indicate factors associated with coming to terms with difficulties in the family. Since the data is all cross-sectional, it is difficult to identify if these differences are antecedents, correlates, or outcomes of coming to terms. However, it is hypothesized that factors utilized could be the result of coming to terms or even just correlates rather than antecedents of it.
CHAPTER 3
METHODOLOGY

Participants

This research employs a cross-sectional data of 6,423 U.S. individuals, ages 18-45, and their partners/spouses (N=12,846) who were part of a larger, ongoing longitudinal study of the formation, maintenance, and/or break up of premarital, marital, and non-marital relationships. Participants are 18-45 years old, with a mean age of 24.9 for males and 23.4 for females. Most of the participants are in a serious relationship (steady dating, cohabiting, engaged or married), come from a Christian religious background, and are highly educated. Table 3.1 contains further demographic information about the sample.

Table 3.1
Sample Characteristics

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<thead>
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<th>Demographic Variables</th>
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<td>2.4</td>
</tr>
<tr>
<td>Some college, not currently enrolled</td>
<td>677</td>
<td>10.5</td>
<td>371</td>
<td>5.8</td>
</tr>
<tr>
<td>Some college, currently enrolled</td>
<td>2829</td>
<td>44.0</td>
<td>3522</td>
<td>54.8</td>
</tr>
<tr>
<td>Associate’s degree</td>
<td>382</td>
<td>5.9</td>
<td>434</td>
<td>6.8</td>
</tr>
<tr>
<td>Bachelor’s degree</td>
<td>1177</td>
<td>18.3</td>
<td>1089</td>
<td>17.0</td>
</tr>
<tr>
<td>Graduate or professional degree,</td>
<td>368</td>
<td>5.7</td>
<td>319</td>
<td>5.0</td>
</tr>
<tr>
<td>not completed</td>
<td>464</td>
<td>7.2</td>
<td>424</td>
<td>6.6</td>
</tr>
<tr>
<td>Total</td>
<td>6385</td>
<td>99.4</td>
<td>6367</td>
<td>99.1</td>
</tr>
<tr>
<td><strong>Yearly Income</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td>307</td>
<td>4.8</td>
<td>723</td>
<td>11.3</td>
</tr>
<tr>
<td>Under $5,000</td>
<td>1039</td>
<td>16.2</td>
<td>2013</td>
<td>31.3</td>
</tr>
<tr>
<td>$5,000-$14,999</td>
<td>1725</td>
<td>26.9</td>
<td>1648</td>
<td>25.7</td>
</tr>
<tr>
<td>$15,000-$24,999</td>
<td>930</td>
<td>14.5</td>
<td>638</td>
<td>9.9</td>
</tr>
<tr>
<td>$25,000-$29,000</td>
<td>421</td>
<td>6.6</td>
<td>303</td>
<td>4.7</td>
</tr>
<tr>
<td>$30,000-$39,999</td>
<td>601</td>
<td>9.4</td>
<td>417</td>
<td>6.5</td>
</tr>
<tr>
<td>$40,000-$49,000</td>
<td>400</td>
<td>6.2</td>
<td>229</td>
<td>3.6</td>
</tr>
<tr>
<td>$50,000-$74,999</td>
<td>505</td>
<td>7.9</td>
<td>232</td>
<td>3.6</td>
</tr>
<tr>
<td>$75,000-$100,000</td>
<td>236</td>
<td>3.7</td>
<td>114</td>
<td>1.8</td>
</tr>
<tr>
<td>Over $100,000</td>
<td>245</td>
<td>3.8</td>
<td>98</td>
<td>1.5</td>
</tr>
<tr>
<td>Total</td>
<td>6409</td>
<td>99.8</td>
<td>6415</td>
<td>99.9</td>
</tr>
</tbody>
</table>

*N=12,846*

**Procedure**

The RELATionship Evaluation (RELATE) questionnaire (Holman et al., 1997) was used to collect data from the sample. RELATE is a multidimensional assessment instrument. It is composed of 271 questions that are designed to measure respondents’ perceptions about themselves and their partners in four major subsystems or contexts of adult romantic relationships: 1) the individual subsystem (i.e., personality characteristics,
styles of interacting, values and beliefs), 2) the couple subsystem, (i.e., couple
communication, patterns of relating, conflict resolution), 3) the familial context (i.e.,
parents’ relationship, parent-child relationships, overall family tone), and 4) the social
context (i.e., social support, race, SES, religion, cultural beliefs). Data is collected from

Participants filled out on-line or paper versions of the questionnaire. The on-line
version is found at http://www.relate-institute.org. The paper versions were mailed to
participants. A written agreement assuring confidentiality of the participants as well as
informing them about the purpose of the research was provided on-line for participants
who filled out the electronic version of the RELATE and was mailed to those who filled
out the paper version. The consent form was also included in both versions of the
questionnaire. Paper version questionnaires were scanned and a raw data file was
processed into an SPSS data set. This data set was then combined with the data set
created by the on-line version of the questionnaire.

Based on the participants’ reported evaluation of the quality of their family-of-
origin experiences as well as the degree of their coming to terms or not with difficult
events and issues in their families of origin, the sample is initially divided in four groups:
1) those who report not-so-healthy family-of-origin experiences and have not come to
terms with them, 2) those who report not-so-healthy family-of-origin experiences and
have come to terms with them, 3) those who report healthy family-of-origin experiences
and have come to terms (or have no need to come to terms with them), and 4) those who
report healthy family-of-origin experiences, but somehow still have concerns with which
they have not come to terms with. The focus of this study is only on three groups. When
referring to participants who report high family-of-origin experiences, analysis do not include participants who report high quality family-of-origin experiences and have not come to terms with them. The reason for this omission is that although participants of this group report high quality family-of-origin experiences, the fact that they have not come to terms with some of these experiences may mean that: a) these participants are not able to accurately evaluate their family experiences, b) although their overall view of their family experiences is healthy, there may be a particular relationship or a particular event in the family that RELATE did not measure, that may have impacted them negatively and continues to do so in the present. Thus, there may be a possibility that these participants may be more similar to participants who report not-so-healthy family-of-origin experiences rather than those who report healthy family-of-origin experiences. However, although omitted from analysis, several interesting results about this group are acknowledged in the discussion section of this dissertation.

Because items are measured in a 5-point scale from 1-Strongly Disagree to 5-Strongly Agree, with a possible response 3-It Depends in the middle, the cut-off point to divide the groups is set around 3-It Depends, considering the frequency of responses. Those whose responses fall around 3 are omitted as these individuals do not seem to have a clear indication of the quality of their family-of-origin experiences as well as their ability to come to terms with them. Participants whose responses fall below the cut-off point compose the groups who report not-so-healthy family-of-origin experiences and inability to come to terms with them. Participants whose responses fall above the cut-off point compose the groups who report healthy family-of-origin experiences and ability to come to terms with them. Table 3.2 provides information about the sample division.
### Table 3.2

**Sample Division**

<table>
<thead>
<tr>
<th></th>
<th>Males</th>
<th></th>
<th>Females</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Group 1 (Low FOO/Not CTT)</td>
<td>199</td>
<td>5</td>
<td>348</td>
<td>9.3</td>
</tr>
<tr>
<td>Group 2 (Low FOO/CTT)</td>
<td>64</td>
<td>1.6</td>
<td>51</td>
<td>1.4</td>
</tr>
<tr>
<td>Group 3 (High FOO/CTT)</td>
<td>3693</td>
<td>91</td>
<td>3206</td>
<td>86</td>
</tr>
<tr>
<td>Total</td>
<td>4050</td>
<td></td>
<td>3752</td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
- a) Low FOO=Not-so-healthy family-of-origin experiences
- b) High FOO=Healthy family-of-origin experiences
- c) CTT=Coming to Terms

Most of the participants (91% of males and 86% of females) report having healthy family-of-origin experiences. However, a good number of participants (5% of males and 9.3% of females) report being impacted from the negativity of their family-of-origin experiences. Only a few number of participants (1.6% of males and 1.4% of females) report having been able to come to terms with the negativity of their family experiences.

The study uses a between-subjects approach. Its focus is particularly on those individuals who report not-so-healthy family-of-origin experiences and it tests how coming (or not) to terms with these experiences influences the quality of their romantic relationships.

In addition, this study identifies what differentiates individuals who report not-so-healthy family-of-origin experiences and have not come to terms with them from those who report healthy family-of-origin environments and have come to terms with whatever happened. More specifically, it investigates what factors are associated with coming to terms that may help individuals to interpret, understand, and find meaning of difficulties experienced in their families. Based on the literature review provided, participants of this study may use strategies that have to do with: a) finding support from a family subsystem (i.e., parent or spouse) and using that relationship as a buffer to stress, b) personality
characteristics (i.e., having a positive view about self, feeling like a person of worth, being mature, hopeful, loving, independent, flexible, and open minded), c) couple processes (i.e., ability to discuss issues in a clear and positive way), and d) spirituality (i.e., the importance of religion in someone’s life).

**Measures**

Different measures are used for the analysis. The quality of family-of-origin experiences is measured by the Overall Evaluation of Family Process Scale. The participants’ ability to come to terms with difficulties in the family of origin is measured by the Coming to Terms Scale. Relationship outcomes are measured by: a) Relationship Satisfaction Scale, b) Relationship Stability Scale, and c) the Frequency of Problems Scale. Several measures are also used to identify what factors participants use to come to terms with difficulties in their families. Family-of-origin factors are measured by: a) The Quality of Mother-Child Relationship Scale, b) the Quality of Father-Child Relationship Scale, c) the Quality of Parents Marriage Scale, and d) the Autonomy from the Family of Origin Scale. Emotional and personality characteristics factors are measured by the following scales: Self-Esteem, Kindness, Extroversion, Neuroticism, Maturity, Flexibility, and Depression. Couple processes are measured by Clear Sending Scale, Empathetic Communication Scale, Love Scale, Criticism Scale, Contempt/Defensiveness Scale, Stonewalling Scale, Flooding in Conflict Management Scale, and Soothing Scale. Spirituality factors are measured by the Spirituality Scale. A description of the scales is given in Table 3.3. A complete list of scale items is provided in APPENDIX A.
Analysis

Multiple analysis of variance (ANOVAs and MANOVAs) are conducted to test the relationship between adult children’s coming (or not) to terms with the difficult events in the family of origin and their relationship quality. Separate models for males and females are created to test these effects. Since relationship quality involves relationship satisfaction, relationship stability, and problem frequency, separate models are tested for each of the dependent variables. Figure 1 presents the relationships between family-of-origin variables as the independent variables, coming to terms, as the moderate variable, and the relationship outcome variables as the dependent variables.

Through mean comparisons of the Overall Evaluation of Family Processes Scale and the Coming to Terms Scale, this study first investigates if the quality of family-of-origin experiences and coming to terms have an effect on and if they matter for participants’ evaluation of their current relationship/marriage quality. It is expected that individuals who have higher mean scores in the Overall Evaluation of Family Processes Scale and the Coming to Terms Scale would also have higher scores in Relationship Satisfaction, Relationship Stability, and Problem Frequency scales. The next step is to test what amount and what type of factors do participants of different groups use to interpret, understand, and find meaning of difficulties experienced in their families. Several multivariate general linear models are employed to complete this testing. It is expected that individuals who come to terms with difficulties in their families utilize more factors to assist them during their coming to terms. A further step of the study is to discuss if the factors utilized are antecedents, correlates, or outcomes of coming to terms.
Table 3.3
Family of Origin, Emotional and Personality Characteristics, Couple Processes, and Spirituality Factors, Coming to Terms, and Relationship Quality Scales

<table>
<thead>
<tr>
<th>Category/Variable</th>
<th>Description</th>
<th>Measure(^a)/type/((\alpha^{b,c})/)response range(^d)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The Quality of Family-of-Origin Experiences</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Quality of Mother-Child Relationship</td>
<td>Physical affection, participations in activities, sharing feelings</td>
<td>3 item scale/(.67/.72)/ 1</td>
</tr>
<tr>
<td>The Quality of Father-Child Relationship</td>
<td>Physical affection, participations in activities, sharing feelings</td>
<td>3 item scale/(.79/.81)/ 1</td>
</tr>
<tr>
<td>The Quality of Parents’ Marriage</td>
<td>Parents’ marital quality</td>
<td>3 item scale/(.91/.91)/ 1</td>
</tr>
<tr>
<td>The Overall Evaluation of Family Processes</td>
<td>Overall quality of family-of-origin relationships</td>
<td>4 item scale/(.83/.87)/ 1</td>
</tr>
<tr>
<td>Autonomy from the Family of Origin</td>
<td>Individual’s autonomy from the family of origin</td>
<td>2 item scale/(.50/.60)/ 1</td>
</tr>
<tr>
<td><strong>Emotional and Personality Characteristics Factors</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>Positive attitude toward self</td>
<td>4 item scale/(.82/.83)/ 2</td>
</tr>
<tr>
<td>Kindness</td>
<td>Being kind</td>
<td>4 item scale/(.73/.73)/ 2</td>
</tr>
<tr>
<td>Extroversion</td>
<td>Being extrovert</td>
<td>4 item scale/(.81/.82)/ 2</td>
</tr>
<tr>
<td>Neuroticism</td>
<td>Being anxious</td>
<td>4 item scale/(.73/.73)/ 2</td>
</tr>
<tr>
<td>Flexibility</td>
<td>Being flexible</td>
<td>4 item scale/(.69/.73)/ 2</td>
</tr>
<tr>
<td>Maturity</td>
<td>Being mature</td>
<td>3 item scale/(.58/.62)/ 2</td>
</tr>
<tr>
<td>Depression</td>
<td>Being depressed</td>
<td>3 item scale/(.80/.82)/ 2</td>
</tr>
<tr>
<td><strong>Couple Processes</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clear Sending</td>
<td>Discussing issues in a clear manner</td>
<td>5 item scale/(.77/.77)/ 2</td>
</tr>
<tr>
<td>Empathetic Communication</td>
<td>Level of personal use of empathetic communication</td>
<td>3 item scale/(.74/.76)/ 2</td>
</tr>
<tr>
<td>Love</td>
<td>Admiring partner, showing love toward him/her</td>
<td>4 item scale/(.75/.76)/ 2</td>
</tr>
<tr>
<td>Criticism</td>
<td>Being tactless when complaining</td>
<td>3 item scale/(.62/.67)/ 2</td>
</tr>
<tr>
<td>Contempt/Defensiveness</td>
<td>Finding faults in partner, being defensive during an argument</td>
<td>4 item scale/(.74/.75)/ 2</td>
</tr>
<tr>
<td>Stonewalling</td>
<td>Withdrawing to avoid a fight</td>
<td>4 item scale/(.77/.74)/ 2</td>
</tr>
<tr>
<td>Flooding in Conflict Management</td>
<td>Being tense and anxious during an argument</td>
<td>3 item scale/(.74/.78)/ 2</td>
</tr>
<tr>
<td>Soothing</td>
<td>Soothing self during an argument</td>
<td>3 item scale/(.52/.54)/ 2</td>
</tr>
</tbody>
</table>
Table 3.3  
*Family of Origin, Emotional and Personality Characteristics, Couple Processes, and Spirituality Factors, Coming to Terms, and Relationship Quality Scales (Continue)*

<table>
<thead>
<tr>
<th>Category/Variable</th>
<th>Description</th>
<th>Measure(^a)/Response range(^d)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Spirituality</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spirituality</td>
<td>Being spiritual</td>
<td>4 item scale/(.71/.72)/3</td>
</tr>
<tr>
<td><strong>Coming to Terms</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coming to Terms</td>
<td>Ability to come to terms with difficulties in the family of origin</td>
<td>3 item scale/(.79/.82)/1</td>
</tr>
<tr>
<td><strong>Participants’ Relationship Outcomes</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relationship Satisfaction</td>
<td>Degree of satisfaction with current relationship</td>
<td>7 item scale/(.86/.87)/4</td>
</tr>
<tr>
<td>Relationship Stability</td>
<td>Relationship in trouble to break up</td>
<td>3 item scale/(.79/.81)/2</td>
</tr>
<tr>
<td>Frequency of Problems</td>
<td>Amount and frequency of relationship issues</td>
<td>9 item scale/(.80/.79)/2</td>
</tr>
</tbody>
</table>

Notes:  
\(a\). All items are measured on a five point scale (range 1 to 5).  
\(b\). First alpha value corresponds to scales for males, second alpha value corresponds to scales for females.  
\(c\). Some scale reliabilities are low due to the small number of their items.  
\(d\). Response range: 1=Strongly Disagree (1) to Strongly Agree (5); 2=Never (1) to Very Often (5); 3=Hardly at all (1) to Very Much (5); 4=Very Dissatisfied (1) to Very Satisfied (5).
Figure 1

*Relationship between Functionality of Family-of-Origin Processes and Relationship/Marriage Quality through the Moderating Effect of Coming to Terms*
CHAPTER 4

RESULTS

The main purpose of this study is to test the relationship between coming to terms (or not) with difficult issues and events that took place in the family of origin and the quality of premarital and marital relationships. Prior to this testing, Table 4.1 provides descriptive statistics for each independent and dependent variables. Table 4.2 provides correlations between these variables. Mean comparisons of the Overall Evaluation of Family Processes Scale and the Coming to Terms Scale showed that coming to terms indeed matters for the participants’ evaluation of their relationship quality. Table 4.3 provides descriptive statistics for these comparisons.

One way ANOVAs show that there are significant differences between groups for relationship satisfaction (Males: F4046,3=65.90, p<.001; Females: F3748,3=77.90, p<.001), relationship stability (Males: F4046,3=47.45, p<.001; Females: F3748,3=46.38, p<.001), and the frequency of relationship problems (Males: F4046,3=80.46, p<.001; Females: F3748,3=125.78, p<.001). Post hoc tests using the Tukey test show that in general, those who report having healthier family-of-origin experiences also report having more satisfying and more stable current relationships and marriages.

As hypothesized, individuals who report healthier family-of-origin experiences report higher current relationship/marital satisfaction (M=4.15 for males; M=4.20 for females), stability (M=4.23 for males; M=4.24 for females), and lower frequency of problems (M=1.75 for males; M=1.72 for females) compared to individuals who report less healthy family-of-origin experiences and who have not come to terms with them [relationship satisfaction (M=3.56 for
### Table 4.1
**Means and Standard Deviations for Independent and Dependent Variables**

<table>
<thead>
<tr>
<th>Composite Scales</th>
<th>Males N</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Mother-Child Relationship</td>
<td>6421</td>
<td>3.10</td>
<td>0.81</td>
<td>6421</td>
<td>4.03</td>
<td>0.89</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Father-Child Relationship</td>
<td>6403</td>
<td>3.54</td>
<td>1.06</td>
<td>6409</td>
<td>3.55</td>
<td>1.07</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. The Quality of Parents’ Marriage</td>
<td>6412</td>
<td>3.55</td>
<td>1.26</td>
<td>6415</td>
<td>3.42</td>
<td>1.33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Overall Evaluation of Family Processes</td>
<td>6423</td>
<td>4.30</td>
<td>0.73</td>
<td>6423</td>
<td>4.24</td>
<td>0.83</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Autonomy from the Family of Origin</td>
<td>6422</td>
<td>4.25</td>
<td>0.89</td>
<td>6422</td>
<td>4.18</td>
<td>0.90</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Coming to Terms</td>
<td>6412</td>
<td>3.93</td>
<td>0.95</td>
<td>6400</td>
<td>3.70</td>
<td>1.06</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Relationship Satisfaction</td>
<td>6421</td>
<td>4.02</td>
<td>0.96</td>
<td>6421</td>
<td>4.06</td>
<td>0.73</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Relationship Stability</td>
<td>6420</td>
<td>4.12</td>
<td>0.73</td>
<td>6421</td>
<td>4.12</td>
<td>0.77</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Frequency of Problems</td>
<td>6422</td>
<td>1.87</td>
<td>0.55</td>
<td>6423</td>
<td>1.87</td>
<td>0.55</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Table 4.2
**Correlation Matrix for All Variables by Gender**

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Mother-Child Relationship</td>
<td>--</td>
<td>.431</td>
<td>.367</td>
<td>.489</td>
<td>.250</td>
<td>.361</td>
<td>.176</td>
<td>.076</td>
<td>-.181</td>
</tr>
<tr>
<td>2. Father-Child Relationship</td>
<td>.347</td>
<td>--</td>
<td>.540</td>
<td>.553</td>
<td>.195</td>
<td>.433</td>
<td>.201</td>
<td>.118</td>
<td>-.206</td>
</tr>
<tr>
<td>3. The Quality of Parents’ Marriage</td>
<td>.375</td>
<td>.585</td>
<td>--</td>
<td>.636</td>
<td>.170</td>
<td>.532</td>
<td>.147</td>
<td>.125</td>
<td>-.185</td>
</tr>
<tr>
<td>6. Coming to Terms</td>
<td>.386</td>
<td>.482</td>
<td>.608</td>
<td>.690</td>
<td>.281</td>
<td>--</td>
<td>.259</td>
<td>.216</td>
<td>-.292</td>
</tr>
<tr>
<td>7. Relationship Satisfaction</td>
<td>.195</td>
<td>.176</td>
<td>.165</td>
<td>.215</td>
<td>.126</td>
<td>.239</td>
<td>--</td>
<td>.494</td>
<td>-.582</td>
</tr>
<tr>
<td>8. Relationship Stability</td>
<td>.085</td>
<td>.119</td>
<td>.122</td>
<td>.145</td>
<td>.104</td>
<td>.200</td>
<td>.521</td>
<td>--</td>
<td>-.370</td>
</tr>
<tr>
<td>9. Frequency of Problems</td>
<td>-.219</td>
<td>-.185</td>
<td>-.199</td>
<td>-.266</td>
<td>-.162</td>
<td>-.299</td>
<td>-.618</td>
<td>-.405</td>
<td>--</td>
</tr>
</tbody>
</table>

Notes:  
- a) Males (n=4050) listed above the diagonal, females (n=3752) listed below the diagonal.  
- b) Correlations are significant at the 0.01 level.
Table 4.3  
*A Comparison of Means, Standard Deviations, and Effect Sizes of Dependent Variables for Different Groups*

<table>
<thead>
<tr>
<th></th>
<th>Males</th>
<th></th>
<th>Females</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Mean</td>
<td>SD</td>
<td>Effect Size</td>
</tr>
<tr>
<td><strong>Relationship Satisfaction</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1 (Low FOO/Not CTT)</td>
<td>199</td>
<td>3.56</td>
<td>0.89</td>
<td>-0.36</td>
</tr>
<tr>
<td>Group 2 (Low FOO/CTT)</td>
<td>64</td>
<td>3.87</td>
<td>0.83</td>
<td>-0.91</td>
</tr>
<tr>
<td>Group 3 (High FOO/CTT)</td>
<td>3693</td>
<td>4.15</td>
<td>0.63</td>
<td>-0.44</td>
</tr>
<tr>
<td>Group 1 vs. Group 2</td>
<td></td>
<td>-0.36</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1 vs. Group 3</td>
<td></td>
<td>-0.91</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 2 vs. Group 3</td>
<td></td>
<td>-0.44</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Relationship Stability</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1 (Low FOO/Not CTT)</td>
<td>199</td>
<td>3.73</td>
<td>0.84</td>
<td>-0.41</td>
</tr>
<tr>
<td>Group 2 (Low FOO/CTT)</td>
<td>64</td>
<td>4.07</td>
<td>0.78</td>
<td>-0.73</td>
</tr>
<tr>
<td>Group 3 (High FOO/CTT)</td>
<td>3693</td>
<td>4.23</td>
<td>0.68</td>
<td>-0.23</td>
</tr>
<tr>
<td>Group 1 vs. Group 2</td>
<td></td>
<td>-0.41</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1 vs. Group 3</td>
<td></td>
<td>-0.73</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 2 vs. Group 3</td>
<td></td>
<td>-0.23</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Problem Frequency</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group 1 (Low FOO/Not CTT)</td>
<td>199</td>
<td>2.31</td>
<td>0.71</td>
<td>0.40</td>
</tr>
<tr>
<td>Group 2 (Low FOO/CTT)</td>
<td>64</td>
<td>2.03</td>
<td>0.68</td>
<td>1.02</td>
</tr>
<tr>
<td>Group 3 (High FOO/CTT)</td>
<td>3693</td>
<td>1.75</td>
<td>0.54</td>
<td>0.53</td>
</tr>
</tbody>
</table>

Note:  
Low FOO=Not-so-healthy family-of-origin experiences  
High FOO=Healthy family-of-origin experiences  
CTT=Coming to Terms
males; $M=3.63$ for females); relationship stability ($M=3.73$ for males; $M=3.83$ for females); problem frequency ($M=2.31$ for males; $M=2.30$ for females)]. The effect sizes for relationship satisfaction (0.91 for males; 0.83 for females), relationship stability (0.73 for males; 0.57 for females), and frequency of problems (1.02 for males; 1.06 for females) are small to moderate (See Table 4.3). Thus, hypothesis one is supported.

Results also show support for hypothesis two. As hypothesized, those who report less healthy family-of-origin experiences and have come to terms with them, have higher current relationship/marital quality than individuals who report less healthy family-of-origin experiences and have not come to terms with them. Participants who report less healthy family experiences and have come to terms with them have a significant ($p<.005$) higher mean score for relationship satisfaction ($M=3.87$ for males; $M=4.24$ for females) and relationship stability ($M=4.07$ for males; $M=4.24$ for females), as well as a lower mean score for the frequency of relationship problems ($M=2.03$ for males; $M=1.79$ for females) compared to participants who report less healthy family experiences and have not come to terms with them ($M=3.56$ for males, $M=3.63$ for females; $M=3.73$ for males, $M=3.83$ for females; and $M=2.31$ for males, $M=2.30$ for females respectively). The effect sizes for relationship satisfaction (0.36 for males; 0.71 for females), relationship stability (0.41 for males; 0.52 for females), and frequency of problems (0.40 for males; 0.77 for females) are small to moderate.

Based on the literature review, Hypothesis three suggests that there is no difference between those who report healthier family-of-origin experiences and those who report less healthy family-of-origin experiences and have come to terms with them. Results of this study show that there are differences between these groups. Participants
who report healthy family-of-origin experiences and have come to terms with them report higher relationship satisfaction (males only) ($M=4.15$ for males; $M=4.20$ for females), higher relationship stability (males only) ($M=4.23$ for males; $M=4.24$ for females), and lower frequency of relationship problems ($M=1.75$ for males; $M=1.72$ for females) than participants who report less-healthy family experiences and have come to terms with them ($M=3.87$ for males, $M=4.24$ for females; $M=4.07$ for males, $M=4.24$ for females; $M=2.03$ for males, $M=1.79$ for females respectively). Indeed, the difference between means is statistically significant ($p<.005$) and the effect sizes for relationship satisfaction (0.44 for males), relationship stability (0.23 for males; 0.00 for females), and frequency of problems (0.53 for males; 0.12 for females) are small. However, mean comparisons show that there is no difference in relationship stability between females who report having healthy family-of-origin experiences and have come to terms with them ($M=4.24$) and those who report having less healthy family-of-origin experiences and who have come to terms with them ($M=4.24$; effect size=0.00). In addition, females who report less-healthy family experiences and have come to terms with them report higher relationship satisfaction ($M=4.24$) compared to females who report having healthy family-of-origin experiences ($M=4.20$; effect size=0.06). Thus, Hypothesis three is partially supported. Although results show that coming to terms with difficulties in the family of origin enhances one’s current relationship quality, they also indicate that the quality of family-of-origin experiences is also an important factor for one’s relationship quality. Although coming to terms may help improve current relationship/marital quality, participants who report having less healthy family experiences and have come to terms
with them still do not “recover” to the level of those who report having healthy family experiences.

This study shows some differences and similarities between genders. Both males and females in this study show similar patterns. For them, those who report higher quality family-of-origin experiences also report higher current relationship/marital quality. In addition, those who report less healthy family-of-origin experiences and have come to terms with them, report higher current relationship/marital quality compared to individuals with less healthy family-of-origin experiences who have not come to terms with them. However, some variations from the pattern exist. Different than males, females who report not-so-healthy family-of-origin experiences but have come to terms with them and females who report healthy family-of-origin experiences do not differ from each other in the way they rate their current relationship/marital stability. In addition, females who report not-so-healthy family experiences but have come to terms with them report higher relationship satisfaction than females who report healthy family-of-origin experiences. This is not the case for males.

Crosstabulations provided in Table 4.4 indicate that males who report not-so-healthy family-of-origin experiences are more likely than their female counterparts to have come to terms with difficulties in their families (24% vs. 13%). Males who report healthy family-of-origin experiences are also less likely than their female counterparts to believe that there is still something in their families that they are struggling with (2.5% vs. 4.4%). While only a small percentage of individuals who report less healthy family-of-origin experiences perceive themselves as coming to terms with difficulties in their families, the rest of the participants in this group, 76% of males and 87% of females, see
that the dysfunctionality of their families of origin is still affecting their ability to form high quality romantic relationships and marriages.

Table 4.4

<table>
<thead>
<tr>
<th></th>
<th>Less Healthy Family of Origin</th>
<th>Healthy Family of Origin</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Males</td>
<td>Females</td>
</tr>
<tr>
<td>Not Coming to Terms</td>
<td>199</td>
<td>76</td>
</tr>
<tr>
<td></td>
<td>94</td>
<td>2.5</td>
</tr>
<tr>
<td>Coming to Terms</td>
<td>64</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>3693</td>
<td>97.5</td>
</tr>
</tbody>
</table>

Hypothesis 4 of the study is to compare participants who report not-so-healthy family-of-origin experiences and identify what makes these groups different from each other. These participants are similar to each other in the way they have evaluated the quality of their family-of-origin experiences. However, they are different in their ability to come to terms with the difficulties experienced, as some have come to terms with them and some have not. The purpose of the comparison is two-fold: a) to find what factors or resources may have been used by the participants who have come to terms with difficult events in their families, and b) to identify if the factors utilized are antecedents, correlates, or results of coming to terms.

Multivariate General Linear Models are employed to identify these factors in four areas of interest: a) family-of-origin factors, b) emotional and personality characteristics factors, c) couple processes factors, and d) spiritual factors. Attention is given to specific variables such as individual’s autonomy from the family of origin, the quality of parent-child relationship, the quality of parents’ marriage (family-of-origin factors); individual’s self-esteem, agreeableness, depression, neuroticism, flexibility, maturity, extroversion
(emotional and personality characteristics factors); individual’s clear sending of messages, empathy, love, criticism, contempt, stonewalling, flooding, soothing (couple processes factors); and the importance of the religion (spirituality). These factors are tested for participants and their partners/spouses.

Family-of-Origin Factors

Results show significant differences in family-of-origin factors between participants who report not-so-healthy family-of-origin experiences but have come to terms with them and those who report not-so-healthy family experiences and have not come to terms with them (F=2.28, p=.014 for males; F=2.20, p=.017 for females). However, not all the family-of-origin factors tested serve as resources for participants of this study. For males, only his partner’s/spouse’s view of his autonomy from the family of origin is an important factor (p=.002) in helping them come to terms with the difficulties experienced in their families. For females, her partner’s/spouse’s view of her autonomy as well as her view of her partner’s/spouse’s autonomy are significant variables in helping them come to terms with difficulties experienced in the family of origin (p=.016; p=.046 respectively). Thus, having a partner/spouse who sees the other partner/spouse as autonomous from his/her family of origin, or promotes this autonomy, as well as a partner/spouse who himself/herself is autonomous from his/her family of origin, may be important factors in helping individuals come to terms with difficulties experienced in their families of origin.

Emotional and Personality Characteristics Factors

Significant differences (F=3.28, p<.001 for males; F=4.76, p<.001 for females) are also shown for emotional and personality characteristics factors tested. In general,
compared to those who have not come to terms, those who have come to terms with
difficulties in their families of origin have higher mean scores in their emotional and
personality characteristics variables. However, not all the variables tested are
significantly different for these groups.

For males, those who have high self-esteem, as described by themselves (p<.001)
and their partners/spouses (p=.001), those who see themselves as agreeable (p=.013),
extroverted (p=.023), flexible (p=.023), and mature (p=.002), those who show less
symptoms of neuroticism, as described by themselves (p<.001) and their partners/spouses
(p<.001), as well as those who show less symptoms of depression (p<.001) and have
partners/spouses who also show less symptoms of depression (p<.001) have come to
terms with difficulties in the family of origin better. For females, the ones who have
come to terms with the difficulties in their families of origin are those who have high
self-esteem, as described by themselves (p<.001) and their partners/spouses (p<.001), and
who view their partners/spouses as having high self-esteem (p=.008), those who are
described by themselves (p<.001) and their partners/spouses as being agreeable (p=.003),
those who consider themselves to be extroverted (p=.052) and flexible (p<.001), those
who show less symptoms of neuroticism as described by themselves (p<.001) and their
partners/spouses (p<.001), and who have partners/spouses who show less symptoms of
neuroticism (p=.004), those who are described as mature by themselves (p<.001) and
their partners/spouses (p=.001), and who describe their partners/spouses as mature
(p<.001), those who show less symptoms of depression as reported by self (p<.001) and
by partner/spouse, and who view their partner/spouse as showing less symptoms of
depression (p<.001).
Coulpe Processes Factors

This variable is divided into two variables in testing, into positive and negative variables. The positive variable includes individual’s clear sending of messages, empathy, and love. The negative variable includes criticism, contempt, stonewalling, flooding, and soothing.

Differences between both groups (participants who report not-so-healthy family-of-origin experiences and have come to terms with them and those who have not come to terms with them) in relation to the positive couple processes factors are significant only for females (F=4.38, p<.001 for females; F=.82, p=.57 for males). These differences indicate that in regards to the positive aspects of couple processes, male participants of different groups are not different from each other in coming to terms with the difficulties experienced in their families of origin. For males, their level of empathy shown toward their partner/spouse is the only variable that is used as an influencing source during coming to terms (p=.027). For females, several factors may be influencing coming to terms. Females who are able to be clear in sending their messages, as viewed by themselves (p<.001) and their partners/spouses (p=.006), who view their partners/spouse as individuals who could send their message clear (p<.001), who are empathetic (p<.001) and have partners/spouses who are empathetic (p=.001), and who are loving (p=.007), are more likely to come to terms with difficulties in their families of origin.

Differences in regards to the negative aspect of the couple processes factors are significant (F=3.06, p=.001 for males; F=6.03, p<.001 for females), indicating that for both males and females, the less negative they are in their way of relating to others, the more likely they are to come to terms with difficulties experienced in their families. For
males, less contemptuous they are \((p=.017)\) and less flooding \((p<.001)\) they do, more likely they are to come to terms. For females, those who use less criticism \((p<.001)\) and have partners/spouses who use less criticism \((p=.031)\), who are less contemptuous \((p<.001)\) and have partners/spouses who are less contemptuous \((p=.009)\), who do less stonewalling \((p=.002)\) and flooding \((p<.001)\) and have partners/spouses who do less flooding \((p=.039)\) are more likely to come to terms with difficulties experienced in their families.

**Spiritual Factors**

Participants’ spirituality seems to be an important factor only for males \((F=3.25, p=.041\) for males; \(F=0.25, p=.78\) for females). Males who consider themselves as spiritual \((p=.040)\) and have partners/spouses who are spiritual \((p=.016)\) are more likely to come to terms with difficult events experienced in their families of origin. This is not the case for females. Table 4.5 provides a summary of factors utilized by the participants of this sample that may have helped them to come to terms with difficulties experienced in their families.

**Table 4.5**

*Factors Utilized that may Help Individuals Come to Terms*

<table>
<thead>
<tr>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) <em>Family-of-Origin Factors</em></td>
<td></td>
</tr>
<tr>
<td>Partner’s/spouse’s view of male’s autonomy</td>
<td>Partner’s/spouse’s view of female’s autonomy</td>
</tr>
<tr>
<td></td>
<td>Female’s view of her partner’s/spouse’s autonomy</td>
</tr>
<tr>
<td>2) <em>Emotional and Personality Characteristics Factors</em></td>
<td></td>
</tr>
<tr>
<td>Less neuroticism</td>
<td>Less neuroticism (self, partner/spouse)</td>
</tr>
<tr>
<td>Less depression (self, partner/spouse)</td>
<td>Less depression (self, partner/spouse)</td>
</tr>
<tr>
<td>High self-esteem</td>
<td>High self-esteem (self, partner/spouse)</td>
</tr>
<tr>
<td>Agreeable</td>
<td>Agreeable</td>
</tr>
<tr>
<td>Extroverted</td>
<td>Extroverted</td>
</tr>
<tr>
<td>Flexible</td>
<td>Flexible</td>
</tr>
<tr>
<td>Mature</td>
<td>Mature</td>
</tr>
</tbody>
</table>
Table 4.5
Factors Utilized that may Help Coming to Terms (Continue)

<table>
<thead>
<tr>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>3) Couple Processes Factors</td>
<td></td>
</tr>
<tr>
<td>Empathetic</td>
<td>Empathetic (self, partner/spouse)</td>
</tr>
<tr>
<td>Less negative</td>
<td>Less negative</td>
</tr>
<tr>
<td>Less contemptuous</td>
<td>Less contemptuous</td>
</tr>
<tr>
<td>Less flooding</td>
<td>Less flooding (self, partner/spouse)</td>
</tr>
<tr>
<td></td>
<td>Less criticism (self, partner/spouse)</td>
</tr>
<tr>
<td></td>
<td>Less stonewalling</td>
</tr>
<tr>
<td></td>
<td>Communicate clearly (self, partner/spouse)</td>
</tr>
<tr>
<td></td>
<td>Loving</td>
</tr>
</tbody>
</table>

4) Spiritual Factors

| Spiritual (self, partner/spouse) | -- |

In summary, results of this study show that coming to terms with difficulties experienced in the family of origin indeed matters for individuals’ current relationship/marital quality. Those who report healthier family-of-origin experiences and those who have come to terms with difficult experiences in their families have higher relationship/marital quality compared to those who report less healthy family experiences and have not come to terms with them. Males in this sample are more likely than females to come to terms with difficulties experienced in their families. Some of the factors utilized from participants of this study that may have helped them come to terms with difficulties experienced in their families are: being autonomous from the family of origin, being agreeable, extroverted, flexible, mature, spiritual, empathetic, having high self-esteem, and being able to send clear messages while communicating. Some vulnerabilities that hinder coming to terms may be: showing symptoms of depression and neuroticism, contempt, stonewalling, and flooding. Results of this study show that along with individuals’ factors used, the partner’s/spouse’s factors are also important in helping individuals come to terms with difficulties experienced in their families of origin.
CHAPTER 5
DISCUSSION

Prior research (Conger et al., 2000; Holman & Associates 2001; Larson, 2000) has shown that early family-of-origin experiences and processes influence adult romantic relationships. Findings of this study not only support previous research, but also expand it by examining how coming to terms with difficulties in the family of origin influences adult children’s relationship quality. Overall, results of this study are consistent with previous research which indicates that a positive home environment with healthy family interactions predicts having satisfying relationships (Conger, et al., 2000; Holman & Associates, 2001; Larson, 2000).

Because literature is lacking on how coming to terms enhances the quality of later romantic relationships, it is difficult to compare results of this study with previous research. This study indicated that those who have come to terms with difficulties in the family of origin may have higher quality romantic relationships and marriages compared to those who have not come to terms yet. Clinical and coping literature provide several emotional, cognitive, behavioral, and spiritual processes that individuals engage in to improve their relationships in the family of origin or to lessen the impact of stress on themselves. Some of these processes can be becoming differentiated from the family of origin (Kerr, 1981; Kerr & Bowen, 1988; Papero, 1995; Whitaker & Keith, 1981), improving problem-solving, focusing on the positive aspects of the event or situation (Wills, Blechman, & McNamara, 1996), seeking help from God (Burr & Klein, 1994), forgiving and letting go (Bloomfield & Felder, 1985; Veenstra, 1993), increasing self-esteem (Saarni, 1999), or finding emotional support from someone else (Doyle, 2001;
Drapeau et al., 1999). Clinical literature indicates that constructive changes of family relationships can happen when individuals utilize these processes and coping mechanisms. As individuals improve their family relationships, then, as indicated by the results of this study as well as other research, the quality of their current and later romantic relationships and marriages may increase.

Contrary to what was hypothesized, this study showed that there were differences between those who came from healthy family-of-origin environments and those who came from not-so-healthy family environments and had come to terms with their experiences. Results showed that individuals who came from not-so-healthy family-of-origin environments and had come to terms with their experiences, had more satisfying and more stable relationships than those who had not come to terms with their difficulties. However, males from not-so-healthy family-of-origin environments and who had come to terms with their difficulties had less satisfying and less stable relationships compared to males who came from healthy family-of-origin environments. Females who came from not-so-healthy family environments and had come to terms with their difficulties had more satisfying relationships than females who came from the healthy family-of-origin environments. Individuals who came to terms with their difficult experiences showed resiliency. They possessed and utilized protective strengths, resources, and interpersonal skills that enabled them to respond successfully to major challenges and to not let the early pain color the quality of their current romantic relationships. However, they did not “recover” to the level of those who came from healthy families who reported having higher relationship satisfaction, higher relationship stability, and lower frequency of relationship problems. Findings again reinforced the
importance of family-of-origin environment for adult children’s later romantic relationships and marriages. Findings showed consistency with previous research that indicates that a positive home environment with healthy family interactions predicts having satisfying relationships (Conger, et al., 2000; Holman & Associates, 2001; Larson, 2000).

Although there were differences between participants who came from healthy family environments and those who came from not-so-healthy environments and had come to terms with their experiences, similarities were also found. Females of both groups (those who came from healthy family environments and those who came from not-so-healthy environments) were similar to each other in how they rated their relationship/marriage stability. There are two possible explanations for this finding. One may be that females who came from not-so-healthy family environments and had come to terms with their difficulties had supportive partners/spouses who had been their resources to rely on during coming to terms. Because they had supportive partners/spouses, these females may have been more committed to their partners/spouses and their relationships/marriages. In addition, these females who came to terms may have been more committed to their current relationships or marriages because they did not want their children to experience difficulties in their own families. These explanations may also account for why females who report not-so-healthy family-of-origin experiences but have come to terms with them indicated having higher relationship satisfaction compared to other females who report healthy family-of-origin experiences.

This study focused on only three groups of participants (those who reported not-so-healthy family-of-origin experiences and had not come to terms with them, those who
reported not-so-healthy family-of-origin experiences and had come to terms with them, and those who reported healthy family-of-origin experiences and had come to terms with them) and did not include in the analysis participants who reported healthy family-of-origin experiences and had not come to terms with them (2.3% males and 3.9% females). Although this group was omitted, some interesting findings about these participants are reported in this section. Participants who reported healthy family-of-origin experiences but somehow had not come to terms with them had lower relationship/marital satisfaction ($M=3.70$ for males; $M=3.93$ for females), lower relationship/marital stability ($M=3.73$ for males; $M=3.81$ for females), and more relationship problems ($M=2.08$ for males; $M=2.04$ for females) than participants who reported healthy family-of-origin experiences and had come to terms with them [$M=4.15$ for males, $M=4.20$ for females (relationship satisfaction); $M=4.23$ for males, $M=4.24$ for females (relationship stability); $M=1.75$ for males, $M=1.72$ for females (relationship problems)]. Participants of this group (healthy family-of-origin experiences but had not come to terms with them) had also lower relationship satisfaction ($M=3.87$ for males; $M=4.24$ for females), lower relationship stability ($M=4.07$ for males; $M=4.24$ for females), and more relationship problems ($M=2.03$ for males; $M=1.79$ for females) than participants who reported not-so-healthy family-of-origin experiences and had come to terms with them. However, participants who reported healthy family-of-origin experiences and had not come to terms with them reported having higher relationship/marital satisfaction, higher relationship/marital stability, and less problems in their relationship/marriage compared to participants who reported not-so-healthy family-of-origin experiences and who had not come to terms with them [$M=3.56$ for males, $M=3.63$ for females (relationship satisfaction); $M=3.83$ for
females only (relationship stability); and \( M=2.31 \) for males, \( M=2.30 \) for females (relationship problems). The only exception was that males who reported healthy family-of-origin experiences but had not come to terms with them and males who reported not-so-healthy family-of-origin experiences and had not come to terms with them were similar to each other in how they viewed their relationship/marital stability (\( M=3.73 \) for males of both groups). Thus, those who reported healthy family-of-origin experiences and had not come to terms with them were more similar to participants who reported having not-so-healthy family-of-origin experiences and had not come to terms with them. Findings emphasize again the importance of coming to terms with difficulties in the family.

There were several gender differences in this sample. Although males and females showed similar patterns (i.e., those who reported higher quality family-of-origin experiences also reported higher current relationship/marital quality), males (24% from not-so-healthy families and 97.5% from healthy families) were more likely than females to have come to terms with difficulties in their families (13% and 96% respectively). Males (76% from not-so-healthy families and 2.5% from healthy families) were also less likely than females (87% and 4.4% respectively) to believe that there was still something in their families that they were struggling with.

These gender differences have their own possible explanations. Only 13% of females from not-so-healthy families reported they had come to terms with difficulties in their families. Maybe the perception of depth of coming to terms was different for males and females. Based on the traditional sex-role expectations, women are considered to be more emotionally responsive, more sensitive, and more relationship-oriented, while men
are viewed as more analytic and task-oriented. Because women are more concerned about their relationships (Billings & Moos, 1981; Phelps & Jarvis, 1994), maybe the expectations they had about coming to terms may have been different compared to those of males. For example, these women may have not considered the coming to terms as happening until everything or most of things were resolved and everyone or most of the people involved felt at peace with what had happened. Because females are more likely than males to be more concerned about their relationships, maybe females were more likely than males to recognize that there was something in their families that they were still struggling with. This may have not been the case for males who may have considered coming to terms happening at a much earlier stage than females did.

Another purpose of the study was to compare participants who report less healthy family-of-origin experiences, who have come to terms with them and who have not, and to identify what makes these groups different from each other in terms of what factors they may have used to come to terms with their difficult family experiences. Based on the literature review provided, four different groups of possible factors were tested. These groups were: a) family-of-origin factors (individual’s autonomy from the family of origin, the quality of parent-child relationship, the quality of parents’ marriage), b) emotional and personality characteristics factors (individual’s self-esteem, agreeableness, depression, neuroticism, flexibility, maturity, extroversion), c) couple processes factors (individual’s clear sending of messages, empathy, love, criticism, contempt, stonewalling, flooding, soothing), and d) spiritual factors (the importance of the religion in one’s life).
Family-of-Origin Factors

From all the family factors tested, only autonomy from the family of origin was used as a resource to help participants come to terms with difficulties in their families. The most important variable for males was their partners’/wives’ perceptions of how autonomous these males were from their families. Males who had partners/wives who thought that they were differentiated from their families may have been able to come to terms with their difficulties. Females used more resource factors than males. For females, their perceptions of how autonomous their partners/spouses were from their families, as well as their partners’/husbands’ perceptions of how autonomous these females were from their families, may have helped them come to terms with difficulties in the family of origin.

Thus, having an autonomous partner/spouse as well as a partner/spouse who promoted autonomy for the other, were important factors in helping individuals interpret, understand, find meaning, and come to terms with difficulties experienced in their families of origin. Maybe these autonomous partners/spouses instilled the confidence in their partners/spouses to become differentiated and to deal with the difficult issues in their families. The more autonomous or differentiated individuals were, the more able they were to be in contact with the emotional and difficult events and not be impaired by them. These autonomous or differentiated partners were already confident on themselves. They had learned to separate the emotional from the intellectual system and were not dependent on others’ love and approval (Papero, 1995). These differentiated individuals may have helped their partners/spouses by modifying the way partners/spouses think, the process of blaming self and/or others, as well as their feelings and attitudes. They may
have instilled the confidence in their partners/spouses by helping them learn how to get beyond the blame and deal with the anxiety and stress caused by the difficult events, by seeing the total picture, and by acquiring a balanced view with no compelling of either approving or disapproving of one's own family (Kerr & Bowen, 1988). Findings are consistent with previous research that indicates that constructive changes of family relationships can happen when individuals master the ability to establish a sense of belonging to the family of origin while simultaneously remaining differentiated individuals (Kerr, 1981; Kerr & Bowen, 1988; Papero, 1995; Whitaker & Keith, 1981).

**Emotional and Personality Characteristics Factors**

Participants of this sample identified several emotional and personality characteristics factors that may have helped them come to terms with difficulties in their families. For males, those who showed less symptoms of neuroticism and depression, and had partners/spouses who showed less symptoms of depression, those who had high self-esteem, who were agreeable, extroverted, flexible, and mature, may have been better able to come to terms with difficulties experienced in their families. For females, those who showed less symptoms of neuroticism and depression, and had partners/spouses who showed less symptoms of neuroticism and depression, those who had high self-esteem and had partners with high self-esteem, those who were agreeable, extroverted, flexible, and mature, may have been more likely to come to terms with difficulties in their families.

Females utilized their partner/spouse as a resource much more than males. Females’ view of their partners’/spouses’ personality characteristics or emotional state may have helped them come to terms with difficulties in their families of origin. More
particularly, females who had partners’/spouses who showed less symptoms of
depression and neuroticism and had higher self-esteem may have been better able to
come to terms with difficulties in their families. Several explanations may account for
this finding. First, a healthy partner/spouse may have encouraged these females to work
with difficulties in the family of origin and eventually to come to terms with them.
Second, females who were in a relationship with a healthy partner/spouse and idealized
their partners’/spouses’ attributes may have been more willing to start dealing with
difficulties and possibly come to terms with them in order to become healthier and to
function at a more similar emotional level as their partners did. Third, having a healthy
partner/spouse, and thus, a healthy relationship, may have allowed these females to focus
on dealing with their own family-of-origin issues.

Findings are consistent with prior research that indicates that the presence of
neuroticism and depression is predictive of low marital adjustment and low marital
quality (Bouchard, Lussier, & Sabourin, 1999; Lavee & Ben-Ari, 2004; Kelly & Conley,
1987; Karney & Bradbury, 1995, 1997; Kurdek, 1997). In addition, being extroverted and
having high self-esteem have a positive influence on relationship quality (Holman &

Couple Processes Factors

Couple processes factors were also used by participants of this sample to help
them come to terms with difficulties experienced in their families. Males who were more
empathetic and less negative toward their partners/spouses, and showed less contempt
and flooding, may have been more likely to come to terms with difficulties experienced
in their families. Females again differed from males in the importance they attributed to
their and their partners'/spouses' expressiveness. Those who were able to communicate clearly with their partners/spouses and had partners/spouses who communicated clearly with them, those who were empathetic and had partners/spouses who were empathetic, those who were less negative, used less criticism and had partners who used less criticism, who were less contemptuous and had partners/spouses who were less contempt, who did less stonewalling, less flooding, and had partners who did less flooding as well, and those who were loving, may have been more likely to come to terms with difficulties in their families of origin.

Consistent with prior research (Gottman, Katz, & Hooven, 1996), findings indicated that women placed a higher value on emotional expression in the marital relationship. Their sense of relationship quality was also enhanced by emotional expressivity on the part of both themselves and their husbands (Lavee & Ben-Ari, 2004). Other research (Framo, 1981) indicates that constructive family changes happen when individuals go back and deal directly with the previously avoided issues which existed between them and their family members. Based on this research evidence, it may be possible that these females were more likely to come to terms with difficulties in their families, because, as they dealt directly with their family issues, they had already learned how to express themselves clearly, positively, effectively, and at the same time be empathetic and loving. It may also be possible that their partners/husbands, who were already effective in their communication, may have helped these females indirectly to come to terms with difficulties in their families by being empathetic, understanding, and positive of their experiences.
**Spiritual Factors**

Spirituality was seen as a resource to help individuals come to terms with difficulties in their families only from males. Males who considered themselves spiritual and had partners/spouses who were spiritual, may have been more likely to come to terms with difficult events experienced in their families of origin. This finding is contrary to previous research (Burr & Klein, 1994) that indicates that women are more likely than men to use spiritual resources as a means to help them reach out to others. A possible explanation for this finding may be that because males are more likely to use strategies that indicate withdrawal (Burr & Klein, 1994), they may have used their spirituality as a way to come to terms with the difficulties in their families in their own. While men are viewed as more analytic and task-oriented, their spirituality may have helped them come to a better understanding of the issue on their own and to come to terms with it.

Results of this study showed that compared to men, women used more resources to help them cope with difficulties experienced in their families. Findings are consistent with the coping literature which shows that women use a wider range of coping strategies than men (Burr & Klein, 1994; Patterson & McCubbin, 1987). An interesting finding of this research was that both male and female participants identified and were able to utilize their partners/spouses as an important resource to help them come to terms with difficulties experienced. Coping literature as well as the interpersonal competence theory support this finding by indicating that reliance on resources within the family can contribute to improved individual or family functioning during and after stressors (Wills et al., 1996). This improvement in family functioning can happen when individuals have already learned how to love and negotiate (L’Abate, 1997).
Are the Factors Utilized Antecedents, Correlates, or Outcomes of Coming to Terms?

A further step of the study was to discuss if the factors utilized were antecedents, correlates, or outcomes of coming to terms. Because the data used for this study was cross-sectional, it is difficult to determine which comes first. In other words, it is difficult to determine if coming to terms happened because these factors existed prior or during the coming to terms, or if coming to terms helped individuals realize the presence of these resources and utilize them. It is quite likely that these factors could have been antecedents for some participants, correlates for some others, and outcomes for the rest of the participants. Because some participants already had good resources to rely on (antecedents), it may have been easier for them to find support, help, and encouragement to come to term with difficulties experienced in their families. However, these resources may have also been correlates of coming to terms. As individuals started dealing with their past issues, relationships were mended, skills were acquired, changes were made, and thus, resources were created. These resources may have helped individuals come to terms with several difficulties experienced. Resources could have also been outcomes of coming to terms. Because individuals came to terms, they may have realized the importance of these resources, and thus, worked toward creating or improving them.

Conclusion

Results of this study show that family-of-origin experiences are important predictors of adult children’s relationship quality. Addressing early family-of-origin experiences and processes in different interventions is important because the way individuals make sense (or not) of these experiences and come to terms (or not) with them, may influence their future relationship/marriage quality. Coming to terms with
difficult experiences in the family of origin may help individuals respond successfully to major challenges, place the early experiences in perspective, grow from the past, and not let their early pain color the quality of their current relationships. This study found that those who report healthier family-of-origin experiences and those who have come to terms with difficulties experienced in their families have higher relationship/marital quality compared to those who report less healthy family experiences and have not come to terms with them. Those who have come to terms with difficulties have been able to utilize more resources in their current relationships/marriages or in themselves to support them during coming to terms.

**Implications of the Study**

Overall, 6.6% of males and 10.7% of females in this sample reported having less-healthy family-of-origin experiences. From them, only a small number of individuals (1.6% of males and 1.4% of females) reported coming to terms with difficulties in their families. Those who had come to terms with these difficulties reported higher quality relationships and marriages. Results of this study show the importance of family-of-origin variables in adult children’s relationship/marital quality, the importance of coming to terms with difficulties in the family, and the need for family educators and clinicians to help individuals understand the importance of dealing with difficulties in the family of origin and coming to terms with them. These results are of particular interest for family educators and clinicians as they create and implement different educational and intervention programs to enhance the quality of romantic relationships. This study shows that even though family-of-origin variables are considered as “unchangeable”, they are important and influence the quality of later romantic relationships. Thus, instead of
disregarding them, a better understanding of how static predictors can influence the
dynamic ones, and how they can jointly explain the relationship quality is necessary.
Although focusing on teaching individuals the necessary skills for a better
relationship/marriage is important, focusing only on the process without trying to
understand the context in not sufficient for a developmental understanding of marital
relationships.

Thus, educational programs can focus toward: a) increasing individuals’
awareness of the relationship between family-of-origin processes and adult children’s
later relationship/marital quality, b) teaching parents and adult children how to create and
maintain a warm and healthy family environment, and c) preparing adult children to learn
how to deal effectively and actively with members and events in their families of origin.
There are several ways that family educators and clinicians can provide this information
to individuals. For example awareness can be provided through premarital counseling,
college level marriage preparation courses, psycho-educational programs, as well as
weekend retreats for parents, singles, engaged couples, or newlyweds. Clergy can also
play an important role in helping individuals prepare for their future marriages.

Awareness and information can be given to individuals through the use of
different instruments such as RELATE (Holman et al., 1997), PREmarital Preparation
And Relationship Enhancement (PREPARE) (Olson, Fournier, & Druckman, 1996), and
PREPARE/ENRICH (Olson & Olson, 1999). These instruments provide individuals with
helpful feedback which allows for a better understanding of family-of-origin experiences
(relationship with parents, the quality of parents’ marriage, the quality of family
environment) and their impact on the adult children’s marital quality, a better
understanding of self and partner/spouse (personality characteristics, emotional health, self-esteem, spirituality, maturity), an ability to compare relationship experiences and views about family, gender roles, religion, and more, an opportunity to understand similarities and differences of family experiences, as well as insights about challenges and strengths of the relationship.

Educational and prevention programs as well as college level marriage preparation courses can provide individuals with awareness and information about the degree of emotional and psychological separation they have from the family of origin and how it impacts adult children’s later relationship/marital quality. For example, parents can be taught how to teach their children to be independent, so they can function like adults in their relationships and will not choose partners/spouses to parent them. Adult children also can be taught how to leave home emotionally and psychologically so their future romantic relationships will not be influenced by the crises in the larger family. In addition, they can be taught to choose partners/spouses who are also independent from their own families (Stahmann, 1997).

The impact of the quality of parents’ marriage on adult children’s relationship/marital quality can also be taught by educational programs. For example, programs can focus on teaching parents how to transmit healthy models of marriage to their children and what are the effects of parental divorce on children’s romantic relationships (Stahmann, 1997). Educational programs can also address how family environment (family interactions including parent-child relationships, communication, conflict resolution) affect adult children’s relationship/marital quality. For example, parents can learn how to not triangulate any of the children in their marital relationship,
how to let children be children and not substitute any of them for a mate (Stahmann, 1997). Programs can also focus on teaching the necessary skills to improve family interactions, especially effective conflict resolution.

To increase the probability of marital success, educational programs can also focus on teaching individuals the impact of emotional health on relationship/marital quality, the importance of religion practices on a relationship (Stahmann, 1997), the importance of commitment, how to turn to each other in times of crises, and how to be supportive and flexible. Of particular interest would be to provide knowledge to the individuals about how their (or their partners’/spouses’) emotional health may impact their future relationship/marital quality. In addition, individuals can be taught about the importance of becoming emotionally healthy before marriage. This means individuals need to understand the importance of taking care of any unfinished business in their families and possibly coming to terms with any difficulty experienced. Helping individuals take care of their unfinished business promotes healthy individual functioning before intervening in the couple level and it may be more useful than programs that focus mainly on conflict resolution skills at the couple level (Sayers et al., 1998).

Educational programs are valuable and useful. Intervening early in the relationship enables couples to alleviate the tension created between the onset of the problems and the time of therapy and allows them to gain mastery over any minor difficulties before they turn into major problems and erode the commitment to the marriage. These programs reach a large number of couples and lead to economic gains insofar as preventing marital dysfunction would lead to a diminish need for a variety of
services such as medical, psychological, and legal (Bradbury & Fincham, 1990/a, 1990/b; Pasch & Bradbury, 1998; Rogge, & Bradbury, 1999).

In addition, the use of other existing psycho-educational programs as well as therapeutic interventions are beneficial in helping individuals learn the importance of coming to terms with difficulties in their family. For example programs such as PAIRS (Practical Application of Intimate Relationship Skills) Gordon (1988) or FOCCUS (Facilitating Open Couple Communication, Understanding, and Study) (Markey et al., 1997) can provide an in-depth exploration of self, family-of-origin relationships, as well as relationship dynamics. In clinical settings, a Bowenian approach may be very effective. Therapists who use this approach may focus on: 1) helping young adults take care of their unfinished business in their families of origin, become differentiated individuals, achieve emotional maturity, handle better their anxiety, and establish a person-to-person relationship with as many family members as possible; 2) helping the parents increase their ability to manage their own anxiety and not triangulate children into their marital difficulties; and 3) helping individuals gain insights about the way their family functions and how some processes are transmitted from one generation to the other (Nichols & Schwartz, 2001; Papero, 1995).

Intervening in the educational or clinical setting may help family clinicians focus on individuals’ restructuring or restory-ing difficult experiences they have had in their families. As individuals learn to come to terms with the events that took place in their families, they may learn how to create higher quality relationships and marriages. Therefore, the “unchangeable” predictors of relationship quality such as family-of-origin
processes need to be included in educational and intervention programs designed to enhance the quality of romantic relationships.

**Limitations of the Study and Directions for Future Research**

Although this research has expanded previous work done on the importance of the family-of-origin variables on adult children’s relationship/marital quality, some of the conclusions drawn from this study may be modified by future research. This is because the study has some limitations. For example, the sample size is a limitation of this study. Although the sample identified was a large one, when the sample was divided into different groups, the sample size of each group became relatively small. In addition, the sample was very young (mean age for males was 24.9 and for females 23.4), some participants were single, and the participants’ relationship length varied from four to six months together to more than 20 years together. Because the participants were young, several of them who came from not-so-healthy families may have still been in the coping phase of the healing process and may have not reached the healing point of coming to terms with the difficulties experienced in their families. They may have the ability and the resources to come to terms, however, may need more time to do so. This may have influenced their responses in evaluating their ability to come to terms with difficulties in the family.

Length of relationship may have influenced participants’ views of their relationship/marital quality. For example, individuals who have been in a relationship for several years have a more realistic and accurate view of the quality of their relationship compared to those who have been in a relationship for only four months. Length of relationship as well as relationship status may have also influenced the resources
available for individuals to come to terms with difficulties in their families. For example, compared to a female partner who has been in a relationship for several months, a wife who has been married to her husband for several years may have been much more effective in helping her husband come to terms with difficulties in his family of origin because she may know him and his family better, may probably be more familiar with what her husband is struggling with, and may be more committed to him and to the marriage. Another limitation of the study is that it did not control for age, education, or income. Maybe some of the findings will be modified in the future as result of controlling for these variables. Thus, for better generalization of the findings, other studies should be conducted with a much larger sample and probably with older participants who have been in a relationship for a considerable amount of time.

Another limitation of the study has to do with the scales used. The existing scales that measured the quality of the family-of-origin experiences and the ability to come to terms with difficulties in the family captured participants’ perceptions in the two extreme ends of the continuum (healthy; not-so-healthy, come to terms, did not come to terms). These scales did not account for a gray zone for individuals who are in between of the continuum. For example, such individuals may have been the ones who reported healthy family-of-origin experiences but somehow had not come to terms with them. Future research may probably consider developing two scales, a positive and a negative one (instead of only one) to measure the quality of family-of-origin experiences or the participants’ ability to come to terms with difficulties in their families. The study also focused on only four different groups of possible factors to come to terms with difficulties in the families, and on certain variables within each group. More possible
factors should be considered in the future for a better understanding of how individuals come to terms.

Since this is the only study to test the relationship between coming to terms and relationship/marital quality, it is important and appropriate to suggest that future studies should continue addressing this topic. Particularly, more research needs to be done in examining other possible factors that help individuals come to terms with difficulties in their families. Of particular interest will be conducting a longitudinal design that can study its participants from childhood to adulthood. Of interest can also be conducting a qualitative study, using the same sample from the longitudinal one, where the focus of the study would be to ask participants to tell their story of what factors they used to come to terms with difficulties in their families and which of these factors were the most important ones. It is hoped that future research will help discover more factors and resources individuals use to come to terms with difficult events and experiences in their families and will shed more light for a better understanding of this healing.
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APPENDIX A

The following questions are the actual RELATE study questions that were used to create the scales listed in the Methods section. Variables marked with an “R” were reverse coded.

I. Family-of-Origin Factors

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Strongly Disagree, (2) Disagree, (3) Undecided, (4) Agree, (5) Strongly Agree. A “Doesn’t Apply” category was also included in these response choices.

1. Mother-Child Relationship Scale

V115: My mother showed physical affection to me by appropriate hugging and/or kissing.

V119: My mother and I were able to share our feelings on just about any topic without embarrassment or fear of hurt feelings.

V121: My mother participated in enjoyable activities with me.

2. Father-Child Relationship Scale

V110: My father showed physical affection to me by appropriate hugging and/or kissing.

V117: My father participated in enjoyable activities with me.

V124: My father and I were able to share our feelings on just about any topic without embarrassment or fear of hurt feelings.
3. The Quality of Parents’ Marriage Scale

V109: My father was happy in his marriage.
V114: My mother was happy in her marriage.
V123: I would like my marriage to be like my parents’ marriage.

4. Overall Evaluation of Family Processes Scale

V108: From what I experienced in my family, I think family relationships are safe, secure, rewarding, worth being in, and a source of comfort.
V113: From what I experienced in my family, I think family relationships are confusing, unfair, anxiety-provoking, inconsistent, and unpredictable.
V118: We had a loving atmosphere in our family.
V122: All things considered, my childhood years were happy.

5. Autonomy from the Family of Origin Scale

V112: My parents currently encourage me to be independent and to make my own decisions.
V 120 (R): My parents currently try to run my life.

6. Participant’s View of Partner Autonomy from the Family of Origin Scale

V 169: My partner’s parents encourage him/her to be independent and make his/her own decisions.
V 170 (R): My partner’s parents try to run his/her life.
II. Emotional and Personality Characteristics Factors

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Never, (2) Rarely, (3) Sometimes, (4) Often, (5) Very Often.

1. Self-Esteem Scale

V 27: I take a positive attitude toward myself.

V 28 (R): I think I am no good at all.

V 29: I feel I am a person of worth.

V 30 (R): I am inclined to think I am a failure.

2. Participant’s View of Partner’s Self-Esteem Scale

V 163: My partner takes a positive attitude toward himself/herself.

V 164 (R): My partner thinks he/she is no good at all.

V 165: My partner feels he/she is a person of worth.

V 166 (R): My partner is inclined to think he/she is a failure.

3. Kindness Scale

V 1: Considerate

V 7: Loving

V 14: Kind

V 20: Friendly

4. Partner’s Kindness Scale

V 139: Considerate
V 145: Loving
V 152: Kind
V 158: Friendly

5. Extroversion Scale
V 2: Talkative
V 8 (R): Quiet
V 15 (R): Shy
V 21: Outgoing

6. Neuroticism Scale
V 24 (R): Worrier
V 9 (R): Fearful
V 16 (R): Tense
V 22 (R): Nervous

7. Partner’s Neuroticism Scale
V 162 (R): Worrier
V 147 (R): Fearful
V 154 (R): Tense
V 160 (R): Nervous
8. Maturity Scale

V 5 (R): Fights with others/loses temper
V 12 (R): Acts immature
V 19 (R): Easily irritated or mad

9. Partner’s Maturity Scale

V 143 (R): Fights with others/loses temper
V 150 (R): Acts immature
V 157 (R): Easily irritated or mad

10. Flexibility Scale

V 4: Open minded
V 11: Flexible
V 18: Easy going
V 23: Adaptable

11. Depression Scale

V 3 (R): Sad and blue
V 10 (R): Feel hopeless
V 17 (R): Depressed

12. Partner’s Depression Scale

V 141 (R): Sad and blue
III. Couple Process Factors

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Never, (2) Rarely, (3) Sometimes, (4) Often, (5) Very Often.

1. Clear Sending Scale

V 186: I discuss my personal problems with my partner.

V 188: When I talk to my partner I can say what I want in a clear manner.

V 191 (R): I struggle to find words to express myself to my partner.

V 194: I sit down with my partner and just talk things over.

V 196: I talk over pleasant things that happen during the day when I am with my partner.

2. Empathetic Communication Scale

V 189: I understand my partner’s feelings.

V 192: I am able to listen to my partner in an understanding way.

V 197: In most matters, I understand what my partner is trying to say.

3. Love Scale

V 187: I include my partner in my life.

V 190: I find my partner physically attractive.

V 193: I admire my partner.

V 195: I show a lot of love toward my partner.
4. Criticism Scale

V 198: I don’t censor my complaints at all. I really let my partner have it full force.

V 203: I use a tactless choice of words when I complain.

V 208: There’s no stopping me once I get started complaining.

5. Contempt/Defensiveness Scale

V 199: I have no respect for my partner when we are discussing an issue.

V 204: When I get upset, I can see glaring faults in my partner’s personality.

V 209: When my partner complains, I feel that I have to “ward off” these attacks.

V 213: I feel unfairly attacked when my partner is being negative.

6. Stonewalling Scale

V 200: I think, “It’s best to withdraw to avoid a big fight.”

V 205: I think that withdrawing is the best solution.

V 210: I don’t want to fan the flames of conflict, so I just sit back and wait.

V 214: I withdraw to try to calm down.

7. Flooding in Conflict Management

V 201: Whenever I have a conflict with my partner, I feel physically tense and anxious, and I don’t think clearly.

V 206: I feel physically tired or drained after I have an argument with my partner.

V 211: Whenever we have a conflict, the feelings I have are overwhelming.
8. Soothing

V 202: When I am in an argument, I recognize when I am overwhelmed and then make a deliberate effort to calm myself down.

V 207: While in an argument, I recognize when my partner is overwhelmed and then make a deliberate effort to calm him/her down.

V 212: I’ve found that during an intense argument it is better to take a bread, calm down, then return to discuss it later.

IV. Spirituality Factors

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Never, (2) Rarely, (3) Sometimes, (4) Often, (5) Very Often.

1. Spirituality Scale

V 31: Is spirituality an important part of your life?

V 32: Do you pray (commune with a higher power)?

V 33 (R): Are some doctrines or practices of your church (or religious body) hard for you to accept?

V 74 (R): How often do you attend religious services?

V. Coming to Terms

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Strongly Disagree, (2) Disagree, (3) Undecided, (4) Agree, (5)
Strongly Agree. A “Doesn’t Apply” category was also included in these response choices.

1. Coming to Terms Scale

V111 (R): There are matters from my family experience that I’m still having trouble dealing with or coming to terms with.

V116 (R): There are matters from my family experience that negatively affect my ability to form close relationships.

V125: I feel at peace about anything negative that happened to me in the family in which I grew up.

VI. Relationship Outcome

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Very dissatisfied, (2) Dissatisfied, (3) Neutral, (4) Satisfied, (5) Very Satisfied.

1. Relationship Satisfaction Scale

In your relationship, how satisfied are you with the following?

V179: The physical intimacy you experience.

V180: The love you experience.

V181: How conflicts are resolved.

V182: The amount of relationship equality you experience.

V183: The amount of time you have together.

V184: The quality of your communication.

V185: Your overall relationship with your partner.
2. Relationship Stability Scale

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Never, (2) Rarely, (3) Sometimes, (4) Often, (5) Very Often.

V248 (R): How often have you thought your relationship (or marriage) might be in trouble?

V249 (R): How often have you and your partner discussed ending your relationship (or marriage)?

V250 (R): How often have you broken up or separated and then gotten back together?

3. Frequency of Problems Scale

Each question is measured on a 5-point Likert-type scale, and has the following response choices: (1) Never, (2) Rarely, (3) Sometimes, (4) Often, (5) Very Often.

How often have the following areas been a problem in your relationship?

V 251: Financial Matters
V 252: Communication
V 253: Having children
V 254: Rearing children
V 255: Intimacy/sexuality
V 256: Parents/in-laws
V 257: Roles (who does what)
V 258: Weight
V 259: Who’s in charge
V 260: Time spent together

V 261: Substance/Chemical Abuse