Marital Quality and Parent-Adolescent Relationships

Marital Quality and Outcomes for Children and Adolescents: A Review of the Family Process Literature
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Prepared for: The Office of the Assistant Secretary for Planning and Evaluation

Department of Health and Human Services

Prepared by: Randal D. Day
Brigham Young University

With: Elizabeth Hair
Kristin Anderson Moore
Child Trends, Inc.

Kelleen Kaye
NORC at the University of Chicago

Dennis K. Orthner
University of North Carolina at Chapel Hill

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The entire series can be found at http://aspe.hhs.gov/hsp/08/RelationshipStrengths/. Additional papers and versions of the various reports were also published in the journal Marriage and Family Review (2009), Vol.45, issue 2/3.
The overall purpose of this report is to show how marital quality, strengths, and/or interpersonal protective factors work to enhance the probability that children will do better among families where strengths are higher. We reviewed the research about parental marital quality and child outcomes and showed how those two constructs are connected. Studies indicate that conflict and parents’ ability to resolve that conflict affect children’s levels of anxiety and self esteem, and these effects can carry over into adulthood. The quality of the parental relationship often spills over into an adult’s parenting behaviors, creating a second source of tension in the family. Negative effects of parental discord are found for both boys and girls.

This review focused on adolescent and young adult outcomes so articles on early childhood outcomes or grade school performance were not included. Much of the current research on marital quality and adolescent outcomes has been collected from small or localized sample populations. Comparisons are often cross-sectional, not longitudinal. And discussions of parental marital quality are mainly based on the parents’ report of conflict or discord. Within the current review, several of the longitudinal studies drew from the National Survey of Families and Households and the authors of a number of the other longitudinal studies shared their data sources.

The Relationship Strengths in Married Families project, of which this review is a part, addresses several of the gaps identified in the research literature by focusing on the adolescents and young adults themselves and draws on a longitudinal, nationally representative data set with information from both the parents and their offspring.
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Introduction

Since 1960, the number of unmarried couples in America has increased by over 1100 percent (US Bureau of the Census, 2003). It has been estimated that nearly a quarter of unmarried people in the United States between the ages of 25 and 34 cohabit (Horwitz & White, 1998). As these changes have occurred, considerable research has accumulated concluding that family break-up and single-parenthood have negative implications for children, adults, and families. Rigorous studies have repeatedly demonstrated the negative effects of parental divorce on outcomes of children, even into adulthood (Glenn & Kramer, 1985; Zill, Morrison, & Coiro, 1993; Sandefur and McLanahan, 1994).

Notwithstanding this focus on examining the implications of family structure, comparatively little research has addressed a related and similarly important question—specifically, how do parental marital quality and conflict affect outcomes for children and adolescents in the millions of married couple families that stay married? The following review of literature will examine the marital quality construct, including: how it is usually assessed; how it is measured in the NLSY97, the specific data set used in this research project; how marital quality influences both positive and negative outcomes in children; and what is known about the implications of marital conflict and relationship quality on outcomes for children, without the additional effect of divorce.

Existing research shows that on average children in married-parent families are better off than children who are raised in other family configurations. (Amato 2001; Amato & Sobolewski 2001; McLanahan, et. al, 2005). However, we know relatively little
about how the various kinds of relationship qualities enhance children’s well-being. In addition, researchers struggle to explain why marriages involving step-parents do not confer the same benefits to children as do first marriages (McLanahan & Sandefur, 1994; Hetherington & Kelly 2001).

This literature review is part of a research project to examine how marital quality and parent-child relationships affect outcomes for adolescents transitioning into adulthood. One of the working hypotheses of the project is that when couples have increased levels of marital quality, their children are less likely to exhibit problem behaviors. A second hypothesis is that higher levels of marital quality (or strengths) contribute to children’s chances of success—that is, showing higher levels of community responsibility, more leadership skills, higher levels of social cognition, greater achievement in school, etc. (Moore & Lippman, 2005).

Some benefits of marriage are well-known, such as increased economic resources and family stability (see Waite & Gallagher, 2001 for a review). However, there has been less focus on how marriage and inner family life generally may affect parents’ interaction with each other and with their children and why marriage does not produce this same effect for step-parent families. Remarriage alleviates some of the financial problems associated with divorce, but it does not appear to ameliorate the long term deficits experienced by these children in their educational attainments, labor-force commitments, or likelihoods of unmarried births (Cherlin & Furstenburg, 1981; Goldschedider & Sassler, 2006; Carlson, 2006).

Research has demonstrated that families typically have a balance between relationship assets and liabilities or deficits (Orthner, Jones-Sanpei & Williamson, 2004).
The strength of a relationship comes as much from its capital or assets as it does from challenges that the family may face. While much of the current literature focuses on how family deficits are related to negative child and youth outcomes (Pergamit, Huang & Lane, 2001), a strengths-based approach can serve as a critical foundation for building successful relationship interventions and marriage strengthening programs (Orthner, Jones-Sanpei & Williamson, 2003). Therefore, a key question of this project centers on the connection between marital quality (relationship strength) and outcomes for children. While the existence of that connection has been well-documented in past research, we know much less about how the attributes of stronger marital relationships combine to generate positive outcomes in children, produce protective factors, and provide sources of resiliency when crises occur.

We also seek to understand how marital relationship quality may directly influence the quality and strength of the parent-child subsystem dyad. In addition, we will examine how religiosity within family life operates as a particularly interesting and valuable kind of relationship strength across family structure and racial/ethnic and/or socio-economic condition.

Below we examine what is meant by marital quality/strength and propose a theoretical base from which our hypotheses are derived. Within that theoretical discussion we examine how research about marital quality has emerged and suggest why the connection between marital quality and child outcomes is strong. We also show the connections among the constructs of marital quality, marital or relationship strength, and resiliency.
Measuring Marital Quality

There are few more enduring and researched topics in family science than the idea of marital satisfaction, marital quality, and/or marital happiness. In 1979, Spanier and Lewis published a chapter about marital quality in the family science handbook entitled *Contemporary Theories about the Family* (Burr, Hill, Nye, & Reiss, 1979). They found that (by 1979) there were several hundred studies that dealt with marital quality. Given the scope of this research topic, we cannot hope to present a cogent history of this complicated research topic here. However, we can distill from several reviews what seem to be the more compelling ideas that have emerged.

First, the construct of marital quality (satisfaction, happiness, adjustment, integration) is clearly separate from the idea of marital success. Most authors would agree that marital success or marital status describes the degree to which a relationship is intact. That is, marital stability or status is not truly a dichotomous variable (married or divorced), but instead describes, a continuum of ‘intactness’. Indeed, when we assess this concept, researchers often ask about disintegration of a relationship and want to know if a couple has seriously talked about splitting up, or how many times a partner has moved out.

Measures of relationship quality, on the other hand, have less straight-forward conceptual clarity. Some researchers see marital quality as a subjective evaluation of one individual’s assessment of the relationship, while others see this construct describing relational attributes, and yet others focus on a broad spectrum of behaviors that can be observed. For example, Lewis and Spanier (1979) declared that many researchers chose to assess marital quality as the “subjective evaluation of a married couple’s relationship
(p. 269). In that vein, Spanier (1976) published the most widely used measure of marital adjustment called the *Dyadic Adjustment Scale* (See Table 1). This scale is a multi-dimensional scale that favors the relational elements of the marriage dyad. The first 15

**Table 1. Dyadic Adjustment Scale**

<table>
<thead>
<tr>
<th>Item</th>
<th>Always agree</th>
<th>Most always agree</th>
<th>Occasionally disagree</th>
<th>Frequently disagree</th>
<th>Almost always disagree</th>
<th>Always disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Handling family finances</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2. Matters of recreation</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>3. Religious matters</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>4. Demonstration of affection</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>5. Friends</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>6. Sex Relations</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>7. Conventionality (correct or proper behavior)</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>8. Philosophy of life</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>9. Ways of dealing with parents or in-laws</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>10. Aims, goals, and things believed important</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>11. Amount of time spent together</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>12. Making major decisions</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>13. Household tasks</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>14. Leisure time interests and activities</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>15. Career decisions</td>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

16. How often do you discuss or have you considered divorce, separation or terminating your relationship? 0 1 2 3 4 5

17. How often do you or your mate leave the house after a fight? 0 1 2 3 4 5

18. In general, how often do you think that things between you and your partner are going well? 5 4 3 2 1 0

19. Do you confide in your mate? 5 4 3 2 1 0

20. Do you ever regret that you married? (or lived together) 0 1 2 3 4 5

21. How often do you and your partner quarrel? 0 1 2 3 4 5

22. How often do you and your mate “get on each other’s nerves”? 0 1 2 3 4 5


items asks the married person to rate their marriage on an agreement scale. For example:

“How much do you and your partner agree about handling family finances (scored on a six point scale)”. The remaining items ask the person to rate such things as how often they discuss divorcing or separating, do they leave the house following a fight, and if
they regret getting married. Spanier’s scale moved researchers away from asking the
couple (or usually one member of the dyad) if he/she thought she was in a strong, viable
relationship. Instead, Spanier’s scale asks about *behaviors* and sources of agreement.

Another research approach emerged in the 1990’s with regard to assessing marital
quality. Norton and colleagues returned to the work of the 1940’s and 1950’s and re-
established a more global measure of marital quality and steered away from behavior
assessments of partner activity (See Table 2. The Norton Quality Marital Index). While
there are a few items in the Quality Marital Index (QMI) that assess behavioral indicators
or hint at interactional style, most of the items are global assessments and rate an
individual’s overall attitude toward the marriage and/or long term partnership.

Bradbury et al. (2000) states that this latter approach is stronger and more
defensible in assessing marital quality, and that if one wants to measure the behavioral
world of marital interaction then one should exclusively rely on observational indices of
interaction. In similar fashion, Gottman & Notarius (2000) make the same argument,
noting that during the last 20 years or so, there has been a significant increase in the
number of studies published in prominent journals that focus on interactive, behavioral
elements and qualities of relationships. According to these and many family science
scholars, behavioral coding assessments by a disinterested third party (usually the
researcher and/or his/her staff) provides a much more pure and un-managed view of
relationship properties.
### Table 2. The Norton Quality Marital Index

<table>
<thead>
<tr>
<th>Variable</th>
<th>Factor Loadings</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>We have a good marriage.</td>
<td>.83 .24 .24 .22</td>
<td>6.22</td>
<td>1.16</td>
</tr>
<tr>
<td>My relationship with my partner is very stable.</td>
<td>.78 .29 .24 .28</td>
<td>5.95</td>
<td>1.38</td>
</tr>
<tr>
<td>Our marriage is strong.</td>
<td>.77 .20 .22 .24</td>
<td>6.08</td>
<td>1.32</td>
</tr>
<tr>
<td>My relationship with my partner makes me happy.</td>
<td>.77 .24 .21 .37</td>
<td>6.05</td>
<td>1.25</td>
</tr>
<tr>
<td>I really feel like part of a team with my partner.</td>
<td>.68 .30 .23 .22</td>
<td>5.75</td>
<td>1.53</td>
</tr>
<tr>
<td>(the degree of happiness, everything considered, in your marriage)</td>
<td>.69 .39 .22 .24</td>
<td>7.74</td>
<td>1.81</td>
</tr>
<tr>
<td>How often have you and your partner seriously discussed ending your relationship?</td>
<td>-.61 -.24 -.14 .10</td>
<td>1.02</td>
<td>1.75</td>
</tr>
<tr>
<td>I have often seriously considered ending my relationship with my partner.</td>
<td>-.65 -.28 -.30 .01</td>
<td>2.03</td>
<td>1.63</td>
</tr>
<tr>
<td>Of the major things in my relationship, I am satisfied with about [percentage of satisfaction]</td>
<td>.57 .45 .21 .19</td>
<td>.79</td>
<td>.16</td>
</tr>
<tr>
<td>I often wish I had not married my partner.</td>
<td>-.53 -.32 -.25 -.12</td>
<td>1.91</td>
<td>1.37</td>
</tr>
<tr>
<td>My partner and I are very similar in our attitudes toward most things.</td>
<td>.48 .42 .30 .09</td>
<td>5.51</td>
<td>1.24</td>
</tr>
<tr>
<td>We will probably still be together [estimated time]</td>
<td>.47 .11 .39 .03</td>
<td>6.83</td>
<td>.85</td>
</tr>
<tr>
<td>My partner and I engage in many outside interests together.</td>
<td>.43 .27 .11 .29</td>
<td>4.85</td>
<td>1.53</td>
</tr>
<tr>
<td>My partner and I agree on minor things in our relationship, about [percentage of time of agreement].</td>
<td>.18 .75 .10 .17</td>
<td>.74</td>
<td>.18</td>
</tr>
<tr>
<td>My partner and I agree on the major things in our relationship about [percentage of time of agreement]</td>
<td>.41 .65 .17 .13</td>
<td>.81</td>
<td>.18</td>
</tr>
<tr>
<td>Of the minor things in my relationship, I am satisfied with about [percentage of satisfaction]</td>
<td>.26 .46 .18 .11</td>
<td>.73</td>
<td>.19</td>
</tr>
<tr>
<td>I am very committed to making my relationship last.</td>
<td>.34 .19 .67 .16</td>
<td>6.40</td>
<td>1.06</td>
</tr>
<tr>
<td>Which of the following statements best describes how you feel about the future of your relationship?</td>
<td>-.24 -.21 -.64 -.26</td>
<td>1.74</td>
<td>2.10</td>
</tr>
<tr>
<td>Indicate how much energy you give to your relationship as compared to work and other outside activities.</td>
<td>-.02 -.07 -.17 -.66</td>
<td>3.22</td>
<td>1.41</td>
</tr>
<tr>
<td>Indicate how much energy your partner gives to your relationship as compared to work and other outside activities.</td>
<td>-.25 -.19 -.06 -.51</td>
<td>3.26</td>
<td>1.50</td>
</tr>
</tbody>
</table>


The data used in this project, the NLSY97, adopt the behavioral indicators tradition. These data do not have an observational component and therefore rely on an assessment of marital quality (or strength) by asking the individuals in the family (each member of a couple and the adolescent) for their opinion about the parents’ behaviors.
While recognizing the value of the observational approach described above, we nonetheless recognize the NLSY97 data as one of the richest data sources combining measures on marital quality, adolescent outcomes and an extensive array of covariates. In addition, the specific behavioral indicators allowed us to examine elements of both assets and deficits related to family functioning. The source for items used in the NLSY97 was the *Iowa Youth and Family Project (IYFP)* (Conger & Elder 1994) and are shown on Table 3. These six items map fairly well on a few of the items found in the DAS (especially the behavioral assessment features), but map less well on the QMI (see Table 3 for a comparison).

**Table 3. Marital Quality as measured in the NLSY97, DAS and QMI**

<table>
<thead>
<tr>
<th>NLSY97: How often is he or she fair and willing to compromise when you have a disagreement?</th>
<th>DAS: Items 1-15 are a compromise score on individual aspects of the relationship. The NLSY97 item shown here could be thought of as a summative score of the DAS items.</th>
<th>QMI:</th>
</tr>
</thead>
<tbody>
<tr>
<td>NLSY97: How often does he or she scream or yell at you when he or she is angry?</td>
<td>DAS: How often do you or your spouse leave the house after a fight? How often do you and your partner quarrel?</td>
<td>QMI: Nothing similar</td>
</tr>
<tr>
<td>NLSY97: How often does he or she insult or criticize you or your ideas?</td>
<td>DAS: How often do you and your mate get “on each other’s nerves”?</td>
<td>QMI: Nothing similar</td>
</tr>
<tr>
<td>NLSY97: How often does he or she encourage or help you to do things that are important to you?</td>
<td>DAS: How often do you think thing are going well between you and your partner?</td>
<td>QMI: Do you confide in your mate?</td>
</tr>
<tr>
<td>NLSY97: How often does he or she blame you for his or her problems?</td>
<td>DAS: Nothing similar</td>
<td>QMI: Nothing similar</td>
</tr>
<tr>
<td>NLSY97: How often does he or she express affection or love for you?</td>
<td>DAS: Do you have disagreements about showing affection?</td>
<td>QMI: Nothing similar</td>
</tr>
</tbody>
</table>
Key constructs usually assessed in the study of marital quality not included in the NSLY97 family process items:

- Broad assessment of disagreement (or agreement) about key daily relationship tasks (such as how money is handled, religious difference, sexual relations, friends, philosophy of life, etc.)
- How often we have considered divorce or separation
- Do you regret having married this person
- Any assessment within which the couple is asked to rate the quality of their marriage directly (i.e. ‘Do we have a good marriage?’; ‘Is our relationship stable?’; ‘I feel like I am part of a team’; I am committed to this relationship?’

While the literature documents concerns over the use of a strong behaviorally based marital quality measure, the NLSY97 approach is viable if other cautions are exercised. First, Bradbury, Fincham, and Beach (2000) warn against mixing items in analysis that cross conceptual boundaries. That is, some construct items used in this area of research assess attitudes (e.g. ‘We have a good relationship.’) while others measure more behavioral elements of relationships (e.g. ‘How often do you confide in your spouse?’). Within analyses, they state, it is important to separate those two approaches. But it is, they claim, critical to have both types of measures. That concern is reduced in the Relationship Strengths in Married Families project because the data used are exclusively behavioral, assessing six areas of action: compromising, screaming, criticizing, blaming, encouraging, and showing affection.

Bradbury, et al., also note that behavioral assessments, when carefully controlled in longitudinal settings, can serve as suitable proxies for general global measures of marital quality (see also Karney & Bradbury, 1997). Reassessing marital quality over time (if carefully grouped) can provide a window in the quality of a relationship. In the current project, our analyses follows this advice to the extent possible: we assess behavioral measures of marital quality over two time periods. While, the NLYS97 did not
re-interview the parents in subsequent data collection waves, we do have assessments of behavioral elements of marital quality during later waves through the eyes of the teen.

Next, Bradbury and colleagues remind us that a satisfying, strong, resource-rich relationship is not merely the absence of dissatisfaction or the lack of conflict. As they note, “Recent discussion of the defining features of a healthy marriage (Halford, Kelly, & Markman, 1997), continuing interest in the attributes of long-term satisfying relationships (Kaslow & Robinson, 1996)…all point to a developing conception of marriage and marital quality in which the unique dimensions of dissatisfaction and …. (conflict) are recognized… (as separate processes)” (Bradbury, Fincham, & Beach 2000 p. 973). They strongly recommend that both negative and positive features be assessed but that analyses separate these conceptually and statistically (see Fincham, Beach, & Kemp-Fincham 1997). These authors clearly show that these two dimensions have different correlate capabilities and account for different variance levels in a variety of outcomes. Therefore, our project here separates the items conceptually into two features of marital quality: marital strengths (compromising, encouraging, and showing affection) and conflict/strife/dissatisfaction (screaming, criticizing, and blaming).

Finally, Bradbury et al. (2000) note that whenever possible, measures of marital quality should be assessed longitudinally. They contend that the shape and slope of the trajectory of marital quality needs to be referenced and indexed to a base-line time. Only then can more accurate estimations of its potential impact assessed. Our research here follows that advice and took account of the extent to which parent-marital relationships and parent-adolescent relationships were sustained over time when developing the relationships profiles used in our analyses.
Strengths Perspective and Marital Quality

Increasingly, family researchers are utilizing a strengths-based approach in their research, trying to understand why some families when faced with stressors become stronger, while others disintegrate. What are the qualities and strengths found in resilient families and how are they established and maintained? Ultimately, the goal is to foster positive relationships among family members rather than solely focusing on addressing negative outcomes. Marital quality is significant and key protective factor that has the potential to have a high impact on child-based outcomes.

Risk factors are simply the description of the probability of a future event. Individuals with risk factors for a certain outcome are more likely to experience that outcome than individuals without those risk factors. The concept comes from fields such as epidemiology and the insurance industry, suggesting that individuals with higher cholesterol, for example, are at greater risk of developing heart disease than individuals with lower cholesterol. Just like cholesterol, risk factors can have both environmental and genetic components.

Nonspecific risk factors such as child abuse, chronic family conflict, academic failure, poverty, racism, etc. elevate risk for a variety of conditions (Coie, Watt, West, Hawkins, & et.al., 1993; Fraser, Kirby, & Smokowski, 2004). These nonspecific risk factors have led some researchers to argue that cumulative risk may be more important than problem-specific risk (Appleyard, Egeland, Van Dulmen, & Sroufe, 2005). Perhaps the number of risk factors is a better predictor of outcomes than path models based on specific risks (Gerard & Buehler, 2004). However, even though cumulative risk may predict some developmental outcomes, understanding specific risk mechanisms is
necessary to target prevention and intervention programs (Fraser et al., 2004).

Specific risk factors may be more salient at different times in the developmental process. While by definition, risk factors are individual, they are also context-specific and could be “thought of as nested in the context of family, school, neighborhood, and broader societal influences that both affect and are affected by individual factors” (Fraser & Richman, 1999). Risk factors also differ by gender, race, and ethnicity. Risk factors can refer to a specific event or a risk chain, that is, an event that may initiate change that increases the risk of other events. One example of a risk chain is the death of a parent, which may lead to a stress disorder, but also change family dynamics which may increase the risk for other outcomes (Capaldi & Stoolmiller, 1999).

Protective factors, on the other hand, are both internal and external resources that modify risk (Fraser et al., 2004). They may compensate for risk by directly reducing a dysfunction or they may mediate risk chains (Coie et al., 1993), in addition to having a “buffering” effect of moderating the relationship among risk factors and potential outcomes (Fraser & Richman, 1999). These protective factors may be individual characteristics, family factors, or extrafamilial conditions. Distinguishing between mediating and moderating effects in high-risk populations is difficult, if not impossible. The tie to our project here is that marital quality is a key and significant protective factor that has the potential to have high impact on child-based outcomes.

Similar to the idea of risk factors, resiliency comes from epidemiology and the risk of negative medical outcomes. Individuals at risk for specific events or risk chains who overcome the odds and achieve positive and unexpected outcomes have been called “resilient.” Three aspects of resilience are: overcoming the odds, sustaining competence
under pressure, and recovering from trauma (Fraser & Richman, 1999). Unfortunately, there are many measurement problems with the concept of resiliency. The key problem is that resiliency is something of a circular condition, where a resilient individual is defined as one that succeeds, or thrives, and a nonresilient individual does not. Resiliency is context-dependent and there is no common, agreed upon measure of success—either statistically or conceptually (Fraser & Richman, 1999).

Several groups of family researchers have conducted research projects in the area of family strengths. Many of these researchers have developed dimensions of family strengths and family processes—protective factors that may contribute to resiliency. High scores on any of these measures do not guarantee a positive, or negative, outcome. Rather, the risk of success, or failure, in a statistical sense, of a future event is increased.

Protective factors, in family research, are seen as having a moderating/mediating influence in circumstances of external stressors to the family and marital relationship. Examples of protective factors include communication, cohesion, flexibility, conflict resolution or problem-solving, support, togetherness, family time, clear expectations, shared core values, and commitment (Olson, 2000; Orthner, Jones-Sanpei, & Williamson, 2004; Seccombe, 2002; Silberberg, 2001). Factors discriminating between families with more successful outcomes and those with less successful outcomes are positive communication (Olson, 2000), problem solving and conflict management (Cox & Davis, 1999), companionship (Orthner, 1998), cohesion around values (Barber & Buehler, 1996), and social support (DePanfilis, 1996).

These protective factors are not qualities, but processes. For example, McCubbin, et.al. (1997) suggest that resilient families: experience stress; possess
strengths that protect and assist them in recovering from negative experiences; benefit from and contribute to a network of relationships; seek to make meaning of and develop shared understanding of negative experiences; and when faced with crisis seek to restore order and balance to their lives. In this way families protect family members by providing processes or behavioral strategies for working through stress and negative experiences, not just possessing attributes of strong families. These processes develop over time in response to a family’s specific context and development stage, and are evidenced by indicators such as supportive family ties and marital satisfaction, similar to the family strength attributes (Conger & Conger, 2002; Patterson, 2002).

Taken together, these conceptualizations of family resilience and the factors associated with successful outcomes allow us to identify important aspects and processes of family relations. We can interpret that a family’s sense of cohesion, ability and willingness to communicate, and access to social support are important aspects and processes of family resilience (Orthner, Jones-Sanpei, & Williamson, 2002).

Religion and/or Spirituality and Marital Quality.

A key to understanding marital and/or relationship strength is religiosity. Many of the world’s religions place an emphasis on the importance of marriage and family. A family’s religious beliefs can promote family bonds, particularly between parents and children. In a study of 867 families from the longitudinal Intergenerational Panel Study of Mothers and Children, mothers’ religious beliefs and practices were positively associated with reports of the parent-child relationship from both generations, suggesting that the extent to which individuals internalize religion can have implications for family relationships (Pearce & Axinn, 1998). Religious beliefs, in a study of 486 families with
adolescents from the Nonshared Environments Study, appeared to temper parenting styles, promoting social responsibility and conveying a family’s values to the next generation (Gunnoe, Hetherington, & Reiss, 1999).

Results from a study of 97 couples in a Midwestern metropolitan area suggest that joint participation in religious activities is associated with better marital functioning, greater marital satisfaction, more perceived personal benefit from marriage, less marital conflict, and greater use of collaboration for wives and husbands (Mahoney, et al., 1999). Higher levels of parental religiosity among 90 African American adolescents and their married parents in the rural South were associated with increased marital interaction, quality and support, and lower levels of conflict (Brody, Stoneman, Flor, & McCrary, 1994). The view that marriage is “sanctified” by God may encourage greater effort to support and maintain the relationship (Mahoney, Pargament, Murray-Swank, & Murray-Swank, 2003). Conversely, disagreements about what a “sanctified” marriage looks like can contribute to increased conflict in the family, e.g., disputes over appropriate gender roles.

A study of 2,945 couples from the NSFH suggests that dissimilarities in religious attendance are positively associated with the overall frequency of conflicts in a marital relationship (Curtis & Ellison, 2002). Men’s religious attendance in these data is inversely related to the overall frequency of disputes over housework, finances, and sex. The same pattern is not evident for women’s attendance. The NSFH data suggest that theological differences between spouses are linked both with more frequent conflicts overall, and with disagreements over household labor and finances. Religious homogamy, in general, was found to have little effect on the frequency of marital
disputes, with the exception of financial matters.

Recent research has noted that regular religious attendance is inversely associated with the perpetration of domestic violence (Ellison & Anderson, 2001). Religious attendance among couples, in this study of NSFH data, was associated with greater levels of social integration and support, reduced risks of alcohol or drug abuse, and a decreased likelihood of psychological problems. Other longitudinal research, however, suggests that increases in religious activity do not lead to improved marital relations, but that increases in marital interaction and happiness are associated with measurable increases in religiosity (Booth, Johnson, Branaman, & Sica, 1995). Thus, the association between religious activity and marital quality based on this study appears to be reciprocal.

Unfortunately, while the relationship between religious views and marital quality is well documented, there is limited empirical research on how religiosity might mediate marital quality and conflict, and thus affect adolescent and young adult outcomes (Mahoney, 2005; Wilcox, 2002).

Marital Quality as an Independent Variable

Typically, the research on marital quality focused on antecedents. Researchers assumed that marital quality was important and attempted to show what factors contributed to higher levels of marital quality, strength, or satisfaction (see Bradbury, et al. 2000 for a review of this literature). Even into the 1990’s there were very few studies within which marital quality was placed in the theoretical position as an independent variable. Typically, when so placed, it has been used to predict individual well-being (depression, suicide, or other measures of individual well-being) or to predict marital success (i.e. stability). We bring this to the reader’s attention because the literature about
marital relationship quality and its connection to children’s well-being is surprisingly scarce.

A refinement occurred in the 1990s when researchers began asking married partners about the inner workings of their relationships. Previously it had been noted that couples who rated their marriages as having higher quality were less likely to get divorced, but few researchers had focused specifically on the attributes of ‘higher quality’ marriages and what it was about those relationships that seemed to matter to the well-being of the adults and/or the children. It was during this time of exploration into what made marriages work that the marital or family strengths and family resiliency approach came into use.

This theoretical orientation has it roots in Hill’s ABC-X model of family crisis (Hill 1949; Hill 1966). The resources aspect of this model described the idea that when there was some type of stressor event (be it normative, non-normative, ordinary, extraordinary, chronic or acute), the consequences of that event were ameliorated when the resource base of the couple or family group were stronger. The most obvious example would be in the case where there was someone injured in a car accident. The blow of that stressor event on the functioning (long and short term) of the couple dyad and even the family as a whole could be softened or ameliorated by financial resources (e.g. insurance). Additionally, it was reasoned that there were other strengths, resources, or attributes, that is, resiliency, that families could bring to an event (or series of events) that would, in like manner, improve the situation.

Resiliency is the ability of a person or group (such as family unit) to rebound following some type of stressor event. The speed and/or efficacy of that rebound was
hypothesized to be directly associated with the bank of resources available. These could include personal resources such as abilities, talents, or relationship acumen, or relational resources, such as internal and external social support, or material resources, such as financial assets, health insurance and earned income. All of these combine to both protect individuals and families from the impact of stressor events… but also, lift them from the disorganization created by such events. One of those strengths is found within marital dyads.

A couple’s resiliency in times of stress is closely tied to their resource base. And, a key resource in that base is the strength or quality of their relationship. For example, couples that are good decision makers create efficiencies in times of crisis and/or during times of smooth sailing. If they are experienced and efficient decision makers, goal-facilitating choices can be made more quickly resulting in goal attainment efficiency. In like manner, couples who trust each other will be more likely to generate better options and choices, allocate resources more effectively, and implement course correction strategies during a crisis. Couples with non-conflicted communication patterns are more likely to find solutions to problems more easily, implement corrective strategies more quickly, and pay attention to the emotional and physical needs of family members.

Conversely, couples who are mired in highly conflicted interactional patterns are more likely to send mixed and unclear messages, find themselves diverted in confrontations that are not problem specific, and will be less likely to venture untried solutions for fear of reprisal and criticisms (for review of this literature see Anderson & Sabatelli [2007]).
Marital Quality and Adolescent Outcomes

Children should have the opportunity to grow up healthy, with the ability to learn, to provide for themselves and their families in the future, and to contribute to society. In order to achieve those goals, they need to be healthy, succeed in school, avoid participating in illegal activities, and minimize externalized and internalized problems as well as risky sexual activity. The families in which they grow up influence these goals in a myriad of ways. Families can reduce vulnerability by removing and reducing risk factors. They can increase resiliency by adding protective factors. While some nonfamily risk and protective factors may be mentioned in this review, the focus is on family strengths, and thus some environmental and individual risk factors are not included.

The primary health related risk factors are poor dietary habits, limited exercise and regular physical activity, and lack of primary healthcare (Simeonsson & Gray, 1994). According to the National Center for Health Statistics, the top five health risk factors in the United States are: cigarette smoking, binge drinking and marijuana use among high school students, low physical activity, obesity, and untreated dental caries (National Center for Health Statistics, 2006). Factors associated with these health risks among youth include family history, family income, race, poor diet, physical inactivity, obesity, and smoking (National Center for Health Statistics, 2006). Parental stress, race, poverty, parental education, and family structure also contribute to health outcomes (Bauman, Silver, & Stein, 2006). Protective factors are represented by the absence of these risk conditions and the presence of supportive values and lifestyles that promote positive health outcomes.
One key element of the risk chain for several key adolescent outcomes is academic failure. For example, academic failure is a precursor to unemployment (Laird, DeBell, & Chapman, 2006, Orthner et al., 2002; Orthner, D.K., Cook, P., Rose, R. & Randolph, K.A. (2002)), poverty and welfare dependency (Bowen, Desimone, & McKay, 1995), higher mortality rates, suicide, criminal behavior, and intravenous drug use (Dornbusch, Erickson, Laird, & Wong, 2001; Kasen, Cohen, & Brook, 1998; Laird et al., 2006; Obot, Hubbard, & Anthony, 1999). Family risk factors for school failure and dropout include single-parent families, large families, parent(s) who did not complete school, and a parent in jail (Hauser, Simmons, & Pager, 2000). Other risk factors include poverty, racial or ethnic minority, urban and regional location, prior academic failure, grade retention (Kaplan & Peck, 1997), delinquency, residential mobility (Tucker, Marx, & Long, 1998), and pregnancy. Family protective factors, on the other hand, include support from adults and parental involvement (Demaray & Malecki, 2003; Richman, Rosenfeld, & Bowen, 1998). Stable, close, and caring relationships between parent and child play a vital role in developing resiliency (Dornbusch et al., 2001; Werner, 1990). Other protective factors include involved teachers and community adults (Brewster & Bowen, 2004; Rosenfeld, Richman, & Bowen, 2000, Orthner, 2007), and involvement in extracurricular activities (Mahoney, 2000).

Alcohol and drug use are becoming increasingly common among adolescents. Family factors that increase the risk of adolescent alcohol and drug use include parental conflict, poor parent-child bonding, poor family management practices, poor family communication (Feldstein & Miller, 2006; Fergusson & Horwood, 1999), larger family size (Reinherz et al., 2000), and family alcohol and drug use (Biederman, Faraone,
Monuteaux, & Feighner, 2000; S. Y. Hill, Shen, Lowers, & Locke, 2000). Non-family risk factors include school failure, association with drug-using peers, delinquent behavior (Fergusson & Horwood, 1999; Hallfors, Hyunsan, Brodish, Flewelling, & Khatapoush, 2006), and residential mobility (Felner, Primavera, & Cauce, 1981; Nation & Heflinger, 2006). There may also be different risk profiles for individuals based on ethnic/racial differences (Vega, Zimmerman, Warheit, Apospori, & Gil, 1993). Family protective factors include a small family, low parental conflict, caring relationships with siblings (Werner, 1994), parental monitoring (Barnes, Hoffman, Welte, Farrell, & Dintcheff, 2006), family involvement (Wang, Matthew, Bellamy, & James, 2005), and parental attachment (Feldstein & Miller, 2006; Kumpfer & Alvarado, 2003).

Externalizing behaviors such as juvenile delinquency and conduct disorder are pressing concerns facing U.S. society today. Juvenile criminal arrests for both property and violent crimes peaked in the 1990s, and have since decreased (Williams, Ayers, Van Dorn, & Arthur, 2004, p. 212). Children with externalizing behaviors frequently come from families experiencing high level of stress (Appleyard et al., 2005; Dahinten, Shapka, & Willms, 2007), families with alcoholics or criminals (West & Prinz, 1987), or families where other members exhibit pathologies (Jaffee, Moffitt, Caspi, & Taylor, 2003; Pfiffner, McBurnett, Rathouz, & Judice, 2005). Parent-child interactions and parent management practices are perhaps the most significant family risk factors for externalizing behaviors (Appleyard et al., 2005; Loeber et al., 2005; Pfiffner et al., 2005). Family instability due to divorce also increases the risk of delinquent behavior (Loeber et al., 2005). Discipline practices characterized by inconsistent and highly punitive actions may increase both alienation and deviant behavior (Pfiffner et al., 2005). Family
protective factors include good parenting skills and family management styles (Short & Brokaw, 1994). Protective family factors include (1) supportive parent-child relationship and family environment, (2) positive discipline techniques, (3) monitoring and supervision, and (4) family advocacy (Williams et al., 2004) as well as general social support (Maschi, 2006).

Internalized outcomes such as depression and suicide are influenced by family risk factors such as family psychopathology, parental depression (Marmorstein & Iacono, 2004), physical/sexual abuse, family conflict, having a nonresidential parent, low parental monitoring, and poor communication between youth and parents (Eberhart & Hammen, 2006). The emotional climate in families with depressed children is less cohesive, less emotionally expressive, more hostile, more critical (Asarnow, Tompson, Hamilton, Goldstein, & Guthrie, 1994; Hamilton & Asarnow, 1997), less accepting, more conflictual, and more disorganized than in families without depressed children (Hammen & Rudolph, 2003). Although these studies indicate a correlation between the risk factors and the outcomes, the studies often did not indicate whether the risk factor preceded the outcome, thus a causal relationship is not verified (Wagner, 1997). Children who live in poor, high-crime, urban neighborhoods were protected from depression by higher parental education, employment, and good health (Durant, Getts, Cadenhead, Emans, & Woods, 1995).

Factors increasing the odds of risky sexual behavior, leading to pregnancy and sexually transmitted diseases, are related to the proximity of others who are also engaging in risky sexual behaviors (Rounds, 2004). For example, family norms that accept early initiation of sexual intercourse and intercourse with multiple partners and older siblings.
who are sexually active (East, 1996; Widmer, 1997), both increase the odds of risky sexual behavior. Poor parent-youth relationships, communication, and parental monitoring are also family risk factors (Meschke, Bartholomae, & Zentall, 2000). Factors associated with the early onset of intercourse include lower levels of maternal education, lack of religious activity engagement, early age at menarche, and family instability when the adolescent is age 14 (Cates, 1991); poor academic performance (Santelli & Beilenson, 1992); and drug and alcohol use (Fergusson & Lynskey, 1996). Adolescents from intact families tend to initiate sexual intercourse later than those from non-intact families, as well as hold perceptions of less risky sexual behaviors among their peers and friends. Adolescents who have been sexually abused are also more likely to engage in risky sexual activity (Miller, Monson, & Norton, 1995). Risk factors for adolescent pregnancy include family conflict, family management skills (Corcoran, Franklin, & Bennett, 2000), poor education/dropout, low job skills, single parent status, poverty, permissive sexual attitudes, experience with physical abuse, and living in a high-risk environment (Franklin, Corcoran, & Harris, 2004; Miller, 2002). Research on factors that protect adolescents from engaging in risky sexual behaviors is only beginning to emerge, generally through research on the absence of these specific risk factors (Rounds, 2004). However, some studies indicate that positive sibling relationships may mediate family risks such as welfare receipt and teenage pregnancies (East & Khoo, 2005; Kolburn Kowal & Blinn-Pike, 2004).

Poverty and racial or ethnic minority status have unique risk and protective factors for many of the adolescent outcomes discussed in the literature. Some of the family protective factors for African American youth include strong kinship bonds,
strong work orientation, adaptability of family roles, strong achievement orientation, and strong religious orientation. The odds of African American males succeeding in school are greatly increased by specific parenting practices such as emphasizing cultural heritage and personal power to succeed (Mandara, 2006). Table 4 summarizes the commonly used risk and protective factors for selected domains and the variables used to measure them.

**Table 4. Defining Risk and Protective Factors.**

<table>
<thead>
<tr>
<th>Common</th>
<th>Risk Factors</th>
<th>Protective Factors</th>
<th>Typical Variable Selection</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Child maltreatment</td>
<td>Positive parent-child relationship</td>
<td>Smoking</td>
</tr>
<tr>
<td></td>
<td>Interparental conflict</td>
<td>Effective parenting</td>
<td>Eating with family</td>
</tr>
<tr>
<td></td>
<td>Parental psychopathology</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Harsh, inconsistent parenting</td>
<td></td>
<td></td>
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<tr>
<td>Health</td>
<td>Poor dietary habits</td>
<td>Nutritious eating habits</td>
<td>Smoking</td>
</tr>
<tr>
<td></td>
<td>Limited regular exercise/physical activity</td>
<td>Regular physical activity/exercise</td>
<td>Eating with family</td>
</tr>
<tr>
<td></td>
<td>Lack of primary health care</td>
<td>Regular medical and dental care</td>
<td></td>
</tr>
<tr>
<td>Academic</td>
<td>Race/ethnicity</td>
<td>Parent/child relationship</td>
<td>Race</td>
</tr>
<tr>
<td></td>
<td>Poverty</td>
<td>Other adult relationship</td>
<td>Poverty</td>
</tr>
<tr>
<td></td>
<td>Parent dropout</td>
<td></td>
<td>HH size</td>
</tr>
<tr>
<td></td>
<td>Large families</td>
<td></td>
<td>Parental status</td>
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<tr>
<td></td>
<td>Single parent families</td>
<td></td>
<td>Academic scores</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Illegal drug/alcohol</td>
<td>Parental conflict</td>
<td>Small family (&lt;4)</td>
<td>Family size</td>
</tr>
<tr>
<td>use</td>
<td>Poor parent-child bonding</td>
<td>Low parental conflict</td>
<td>Parent/child relationships</td>
</tr>
<tr>
<td></td>
<td>Poor communication</td>
<td>Caring sibling relationships</td>
<td>Communication</td>
</tr>
<tr>
<td></td>
<td>Poor family management practices</td>
<td>Parental attachment</td>
<td>Drug use</td>
</tr>
<tr>
<td></td>
<td>Family substance abuse</td>
<td></td>
<td>Alcohol use</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>sibling relationships</td>
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<td></td>
<td></td>
<td></td>
<td>Parental relationships</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>
Externalizing behavior
- Family stress
- Family substance abuse
- Family pathologies
- Inconsistent behavior expectations
- Inconsistent parenting
- Low monitoring
- Poor family management

Good parenting skills
- Good family management
- Supportive parent/child relationship
- Family advocacy

Monitoring
- Hang out
- Movies
- Parent/child relationship
- Adult activities?
- School act up?

Internalizing behaviors
- Family psychopathology
- Hostility
- Critical
- Parental depression
- Less emotional expression
- Disorganized
- Poverty

Parental education
- Employment
- Good health
- Lack of risk factors

Parent education
- Parent/child interactions
- Confiding
- Income
- Depression?

Risk sexual behavior & teenage pregnancy
- Family norms
- Poor parent/youth relationship
- Communication
- Poor parental monitoring
- Maternal education
- Degree of religious affiliation
- Family income
- Family instability
- Family conflict
- Family structure
- Academic performance
- Drug & alcohol use
- Sexual abuse
- Physical abuse

Intact family

Parent/youth relationship
- Communication
- Monitoring
- Income
- Family structure
- Academic performance
- Substance abuse
- Sexual activity

Marital Quality and Conflict: Implications for Adolescent and Young Adult Outcomes

Research suggests that the experience of parental marital conflict often repeats in the relationships formed by adult children. Over 30 years ago, research indicated that a couple’s current marital problems may be part of a specific “familial behavior
patterning”; that is, current marital complaints were associated with the quality of their own parents’ marriages (Overall, Henry, & Woodward, 1974). Recent research has produced similar findings, indicating that parents’ attitudes towards cohabitation and divorce, as well as premarital sex, are strongly linked to those same attitudes among their young adult children (Cunningham and Thornton, 2006). The results of such studies suggest that a couple’s high quality, low conflict marriage can influence their children to act similarly and to view marriage positively.

Only a handful of studies have approached the question of how marital quality affects children in married couple families and fewer still have focused on the effects on adolescents or young adults; however, studies conducted among married couple families consistently find that children are affected by what happens in their parents’ marital relationships. In a study of 79 married couples with an eldest child between 7 and 11, the ability of parents to resolve their conflicts successfully was associated with self-reported levels of anxiety in children (Kerig, 1996). That is, parents who more constructively resolved their conflicts had children who reported lower levels of anxiety. A study of 146 sixth and seventh graders found that their perceptions of marital conflict both directly and indirectly affected internalizing behaviors, and also indirectly affected externalizing behaviors, while a companion study of 451 families found that perceptions of parental marital conflict were associated with increased levels of distress over a 12-month period (Harold, Fincham, Osborne, & Conger, 1997). Also, in a sample of 267 children ages 8 to 16 and their parents, the incidence of parental depression brought on by marital conflict was found to be associated with increased depression and other internalizing behaviors in children (Schudlich & Cummings, 2003).
Children’s awareness of discord in their parents’ relationships has been found to be related to their later psychological health. Amato and Sobolewski (2001), in a 17-year longitudinal study of 655 adult children, investigated the effects of divorce and marital discord among married couples on the psychological well-being of their adult children. Both divorce and parental discord were associated with lower levels of psychological well-being in adulthood, and the long-term implications for discord were comparable to those of marital dissolution. While the parent-child relationship served as an important mediator for later child well-being, marital discord was associated with weaker parent-child relations for both mothers and fathers. For divorce, this association was only found for fathers. Ultimately, the quality of the relationship between parents and young adults was found to be the only significant predictor of the adult child’s psychological well-being, with poorer parent-child relationships being associated with greater risks in adult offspring for distress, low self-esteem, and general unhappiness.

Children form their attitudes and beliefs about marriage in light of their experiences growing up. Childhood exposure to marital conflict has been associated with greater acceptance of divorce and cohabitation by young adults. A study of 444 young adults suggests that parental marital conflict can serve as a better predictor of children’s attitudes towards marriage than either general family conflict or parental divorce (Kozuch & Cooney, 1995). In a study of 471 young adults whose families participated in a national longitudinal study, those who witnessed long-term marital conflict were more likely to report thinking that their parents should divorce and to hold more tolerant views of divorce, as well as being more likely to report that they did not feel accepted while living at home (Kapinus, 2005). Particularly important were the experiences of these
young adults in their teenage years. A previous analysis of these data found that it is
during the late teen years that parental attitudes about marriage and divorce have the
greatest effect upon the long-term attitudes of adolescents (Kapinus, 2004).

Studies consistently find that marital discord, much like divorce, affects long-term
outcomes for adolescents and young adults. In addition to the individual’s psychological
health, experiencing marital discord also affects personal beliefs and values about divorce
and how one addresses conflict in a relationship. Data from the National Survey of
Families and Households (NSFH) suggest that young adults often replicate the family
structures in which they grew up (Wolfinger, 2003) and, based on those experiences, may
view marriage less positively and self-report a greater acceptance of divorce and
cohabitation (Trent & South, 1992) These patterns were also found in a localized
longitudinal study where 867 mothers who were first interviewed in 1962, were

Research suggests that there is a link between negative marital interactions and
negative parenting behaviors. A study of 40 married couples and their 6 to 8-year-old
sons found that, following a conflicted interaction with their spouses, fathers tend to
express negativity about their wives to their sons, and to remove themselves from the
conversation if the mother is present (Kitzmann, 2000). The negativity of the marital
interaction was related to significantly lower family cohesion, lower support and
engagement by both mothers and fathers towards their children, increased family
negativity, decreased family warmth, and less democratic parenting styles. Studies of 170
children ages 10 to 12 and their married parents further suggest that marital relationships
affect other family relationships. Husbands have been found to be more susceptible than
wives to have marital conflict spill over into problematic parent-child relationships (Brody, Arias, & Fincham, 1996). However, children’s awareness of parental conflict was associated with their negative perceptions of the mother-child relationship (Osborn & Fincham, 1996). That is, fathers were found to be more likely to act negatively toward their children because of marital conflict, yet children who were aware of conflict perceived their relationships with their mothers more negatively.

Marital conflict has been found to elicit negative, aggressive behaviors in children, in both boys and girls. Laboratory observation and questionnaire data from 156 two-parent families found that, following instances of parental conflict, adolescent girls displayed aggressive behavior patterns during family interactions, similar to those of boys and often directed at the mother (Davis, Hops, Alpert, & Sheeber, 1998). A study of 68 married-parent families and their adolescent twins provides evidence that children learn the conflict management techniques they use in parent-child interactions from observing the interactions of their parents (Noller, Feeney, Sheehan, & Peterson, 2000). However, the parent-child conflict management behaviors were not found to carry over into the sibling relationship.

A meta-analytic review of the research suggests that the parent-child relationship may not buffer children from negativity in the marital relationship, and that marital conflict has a spillover effect on parent-child relationships (Erel & Burman, 1995). The authors find that, collectively, the analyzed studies support a previous proposition that adult intimate relationships not only serve adult intimacy needs but also provide emotional support necessary for positive nurturing of children (Sroufe & Fleeson, 1988). It was hypothesized that the marital relationship exerts an effect on children’s long-term
outcomes through the association of marital quality and parenting, as proposed by Belsky (1984). Ultimately, Erel and Burman find, “regardless of causality, positive parent-child relations are less likely to exist when the marital relationship is troubled” (1995, p. 129). They also suggest that improving parent-child relationships may be aided through efforts to address parental marital difficulties and strengthen the skills needed to prevent difficulties from becoming profound and irreconcilable.

Booth and Amato (1994) found that, in a national sample, children who are close to one parent tend to be close to the other parent as well, when parental marital quality is high. However, among the 419 families interviewed in this longitudinal study, when parents had low parental marital quality, children tended to be close to one parent only. Marital unhappiness also appeared to weaken parent-child relationships in later life; and poor marital quality was found to affect the father-child relationships more strongly than relationships with mothers. Finally, strong parental support of adolescent children was found to mediate the association between parental marital quality, or divorce, on later parent-child relationships.

Buehler and Gerard (2002), using an NSFH subsample of 2,541 parents with a child aged 2 to 18 living with them, found both direct and indirect effects of marital conflict on child and adolescent outcomes. In addition to directly impacting children, increases in marital conflict were found to be associated with decreased parental involvement and presence in the lives of their children. The effects of marital conflict on the parent-child relationship were found to continue even after children have left home. In a national, longitudinal study of 471 parents and their young adult children, marital conflict was associated with a lower tendency of young adults to name their parents as
people who can provide them with help or assistance (Amato, Rezac, & Booth, 1995). While it does not appear to mediate the actual exchange of assistance between parents and children, low parental marital quality seems to decrease the young-adult child’s willingness to rely on parents for support.

**Parent Gender and the Influence of the Parent-Child Relationship**

Research has well established the connection between children’s relationships with their parents and their own long-term outcomes. Often, research focuses on the influence of one parent in the absence of the other, such as in post-divorce families (Forgatch, & DeGarmo, 1997), or even on one parent to the exclusion of a present partner or spouse (Rogers, 1996; Sturge-Apple, Gondoli, Bonds, & Salem, 2003). Studies that do address differences in parent gender often focus on parenting practices rather than on the parent-child relationship (Amato & Fowler, 2002). For example, recent studies have investigated the connection between parenting patterns and their effects on the cognitive outcomes of young children (Ryn, Martin, & Brooks-Gunn, 2006; Smith, Landry, & Swank, 2000). Nevertheless, a handful of studies have explored the implications of parent-child relationships by gender.

Parental gender has been associated with influence of the parent-child relationship on children’s views of divorce, particularly the quality of father-child relationships. In a longitudinal sample of 300 European American and African American boys, adolescents who felt close to their biological fathers reported feeling less likely to divorce in the future, regardless of whether or not they live with their father (Risch, Jodl, & Eccles, 2004). The same association is found for stepfathers, suggesting that a close relationship with a father-figure contributes to a lesser acceptance of divorce. This association was not
found for girls, however, which may reflect the reality that girls are not typically separated from their same-gender parent by divorce.

In a study of 325 married-parent families with sixth grade children, researchers found that mothers and fathers differed in their effect on antisocial behaviors in their children (Kosterman, Haggerty, Spoth, & Redmond, 2004). Mothers were found to significantly affect their sons by promoting pro-social beliefs, but they did not influence their daughters. Fathers, on the other hand, directly affected the behavior of their daughters but not their sons. However, fathers had an indirect influence on their sons’ outcomes as paternal bonding was associated with boys having more pro-social beliefs which in turn inhibited their antisocial behavior.

Influence of Parental Marital Quality on Young Men and Women

Several studies have found that higher levels parental conflict are associated with different effects for boys and girls. Boys tend to show more externalizing behaviors and psychological symptoms when parental conflict is more frequent, more severe, and more aggressive, and when it involves them (Kerig, 1996; Grych, Seid, & Fincham, 1992). Also, while girls tend to exhibit internalizing problems, such as depression or anxiety, they also show aggressive behaviors, particularly in interactions with their fathers. One sub-study of 79 couples suggests that it is the child’s perception of the opposite-gender parent that may be most predictive of children’s reports of anxiety—that is, girls’ reports of anxiety are related to their fathers reports of conflict frequency, severity, and aggressiveness (Kerig, 1996). A study of 169 adolescents and their married parents suggested that the mother-son relationship is most negatively affected by parental marital discord (Osborne & Fincham, 1996).
Research on marital quality suggests that boys and girls are affected differently by their parents’ marital quality, through differences in parent responsiveness (Sturge-Apple, Davies, Boker, & Cummings, 2004). Based on a 1-year study of 226 married parents of kindergarten children, higher levels of marital discord were found associated with lower levels of responsiveness to boys’ distress, but higher levels of responsiveness for girls’ distress. At the same time, parental marital conflict was associated with increased children’s aversive and aggressive behaviors, which were met with increased psychological control on the part of the parents.

*Marital Quality in Step-Families and Biological Families*

Couples who were remarried, in an NSFH subsample of 5,642 couples, were found to report lower levels of happiness in their relationships over time than once-married couples, with remarried couples who cohabited indicating the lowest levels of happiness (Skinner, Bahr, Crane, & Call, 2002). The amount of marital conflict in remarried couples has been found to be related both to the length of time married and to the status of children in the family. Remarried couples with step-children but no shared biological children experience less marital conflict early in the relationship, but there is an increase in conflict as the relationship continues. In another NSFH subsample of 2,655 married couples with children, couples with only their own biological children, or with both step-children and their own biological children, experienced more marital conflict early on in their relationships, but less as the relationships continued over time, (MacDonald & DeMaris, 1995). Couples with both shared biological and step-children were found to be at no greater risk of conflict than couples with only shared biological children.
A longitudinal study of 80 couples in first marriages and 369 couples in “stablized” remarriages supports the previously mentioned findings regarding the levels of conflict in complex step-families (O’Connor & Insabella, 1999). In comparing first marriages with remarriages that were high functioning and stable, the authors found no significant difference in reports of depressive symptoms by spouses, and that the marital qualities of the two relationship types were more similar than different. However, the study did note that the married adults tended to focus their parental energy on their biological children, suggesting that stepchildren do not automatically gain a new parent figure when their mother or father remarries. Another 2-year longitudinal study of 127 families found that marital conflict predicted changes in children’s behavior problems, particularly when the conflict was about the children (Jenkins, et al., 2005). Children in this study were more likely to be both exposed to conflict and a source of conflict in stepfamilies than in biological families.

Vuchinich, Hetherington, Vuchinich and Clingempeel’s (1991) two-wave longitudinal study of 26 families found that, compared to biological fathers, stepfathers were more positive and responsive and less negative and directive towards the children in the household. Mothers in a stepfamily, on the other hand, exhibited more negative behavior toward the children than mothers in intact families. Despite a stepfather’s positive behavior, early adolescent children, especially girls, were likely to reject their stepfather’s attempts at a relationship through avoidance and withdrawal.

Hetherington (1998) also noted that for preadolescent boys, the presence of a stepfather can reduce adjustment problems; however, a stepparent’s presence is linked to an increase in problem behaviors for girls. A child’s temperament can moderate their
adjustment as they experience this change in family and parenting behavior during the process of divorce and remarriage. Children with difficult temperaments may be more negatively affected by the changes than children with easy temperaments.

Summary and Conclusions

Within this review we have covered the following points. First, we explained how marital quality has historically been conceptualized, defined, and measured. In addition, we explained how the current measures of marital quality found within the NLSY97 map onto other strategies developed by family science researchers. We suggest in our review that it is important to theoretically separate marital qualities (or strengths) from measures of marital conflict.

We also show how the marital quality literature juxtaposes the emerging construct of marital and family strengths with the idea of family resiliency. It was proposed that understanding a strengths/resiliency perspective takes us theoretically beyond simply understanding the nature of marital quality.

The overall purpose of this paper is to show how marital quality, strengths, and/or interpersonal protective factors work to enhance the probability that children will do better among families where strengths are higher. Additionally, we reviewed the research about parental marital quality and child outcomes and showed how those two constructs are connected. Studies indicate that conflict and parents’ ability to resolve that conflict affect children’s levels of anxiety and self esteem, and these effects can carry over into adulthood. The quality of the parental relationship often spills over into an adult’s parenting behaviors, creating a second source of tension in the family. Furthermore, negative effects of parental discord are found for both boys and girls.
Many articles were identified for this review and not included because of a focus on early childhood outcomes or grade school performance, rather than adolescent and young adult outcomes. Much of the current research on marital quality and adolescent outcomes has been collected from small or localized sample populations. Comparisons are often cross-sectional, not longitudinal. And discussions of parental marital quality are mainly based on the parents’ report of conflict or discord. Within the current review, several of the longitudinal studies drew from the National Survey of Families and Households and the authors of a number of the other longitudinal studies shared their data sources.

The current project addresses several of the gaps identified in the research literature by focusing on the adolescents and young adults themselves and draws on a longitudinal, nationally representative data set with information from both the parents and their offspring.
Bibliography


