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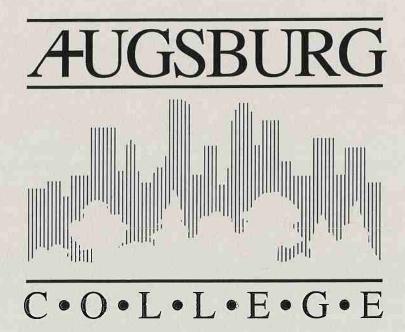
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MASTERS IN SOCIAL WORK THESIS

Michael Robert Borowiak

MSW Thesis

Thesis Borowi

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The Intentions of Engaged to be Married and Recently Married Individuals to seek professional help

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The Intentions of Engaged to be Married and Recently Married Individuals to Seek

Professional Help

By

Michael Robert Borowiak

Submitted in partial fulfillment of

the requirements for the degree of

Master of Social Work

AUGSBURG COLLEGE MINNEAPOLIS, MINNESOTA

MASTER OF SOCIAL WORK AUGSBURG COLLEGE MINNEAPOLIS, MINNESOTA

CERTIFICATE OF APPROVAL

This is to certify that the Master's Thesis of

Michael Robert Borowiak

has been approved by the Examining Committee for the thesis requirement for Master of Social Work Degree.

Date of Oral Presentation: December 15, 1997

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ABSTRACT

The Intentions of Engaged to be Married and Recently Married Individuals to Seek Professional Help

Michael Robert Borowiak

DECEMBER 1997

Many individuals in early marriage do not experience a traditional honeymoon period. These distressed couples may resort to ineffective coping mechanisms that can cause greater marital dissatisfaction and instability. One effective coping method engaged or recently married individuals can use is professional help. This study assessed the intentions of engaged to be married and recently married individuals to seek professional help when faced with different types of marital problem areas. The study used a quasiexperimental design with volunteer participants from a suburban Catholic community who answered anonymous self-administered questionnaires. The results found that engaged and recently married individuals were not significantly different with intentions to seek professional help. Women were significantly more likely to seek professional help than men. The findings assist social workers in designing effective interventions for engaged and recently married individuals so that marital quality can be enhanced and marital dissolutions reduced.

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Introduction

This chapter describes the trends of marital problems and dissolution rates for couples in early marriage. It includes a discussion of the importance of professional help to solve marital problems. The purpose and rationale for this research study, along with its relevance to social work practice is also included. The chapter concludes with the research questions explored in this study.

Almost every marriage faces the certainty of relationship problems. These problems may reflect areas of stress or emotionally charged conflicts between partners. It is estimated that between one half and two thirds of all marriages will end in divorce, in large part because partners fail to resolve their problems (Martin and Bumpass, 1989). Some marriages stay intact but remain distressed because problems are not dealt with constructively (Henton and Albrect, 1991). Of particular concern is research that suggests newlywed couples may not experience a traditional "honeymoon" phase in their marriage (Arond and Pauker, 1987). Rather, they may experience increased stress during the first few years of marriage (Kurdek, 1991). Even couples who participate in pre-marital enrichment programs may face marital problems that often require professional assistance (Dindia and Baxter, 1987). The inability of marital partners to cope with their relationship problems has been viewed as one of the most powerful factors contributing to marital dissatisfaction and dissolution (Christensen, 1987).

One effective coping method for couples facing marriage problems is the use of professional guidance. Marriage counseling has been shown effective in helping couples

face marital problems (Hahlweg and Markman, 1988). Therefore, it follows that accessing marital counseling when the marital relationship is under stress could lead to enhanced satisfaction and fewer divorces. However, Bowen and Richman (1991) reported that only 8% of distressed couples actually seek marital counseling. One step towards increasing the percent of distressed couples seeking professional guidance would be to understand the decision couples make about seeking professional help under conditions of distress. This study explored the coping strategy of seeking professional help with pre-marital and recently married couples.

Purpose of this Study

The purpose of this study is to assess the intentions of engaged to be married and recently married individuals to seek professional help when faced with marital stressors. Further, this study intends to determine if there are marital status or gender differences in professional help seeking. Finally, the purpose of this study is to assess the professional help seeking patterns of those who have participated or are signed up to participate in the pre-marital preparation program PREPARE (Olson, Fournier, and Druckman, 1989).

The analysis of marital status and gender differences in help-seeking intentions gives insight into the patterns of help seeking that is portrayed by engaged and newlywed couples. This information is valuable to social workers and other professional helpers because it allows them to plan strategies to best assist these populations in addressing marital problems.

This research sheds light onto the ability of PREPARE to influence the attitudes of help seeking behavior of men and women when faced with perceived marital problems while engaged and during the early years of marriage. The results have impact on the

programmatic structure of PREPARE to affirm their emphasis on help-seeking methods or the need to add additional components that emphasize help seeking to the program. These findings may prove valuable in the strategies used by social workers and other professionals in the reduction of marital discord and dissolution.

Research Questions

- When faced with relationship problems, are individuals engaged to be married more likely than recently married individuals to seek professional help?
- 2) Are females more likely to seek professional help than males when faced with potential marriage problem areas?

Chapter Two

Literature Review

It is important to study the decisions engaged and recently married individuals make under conditions of distress because it aids in the development of intervention programs that may assist in the successes of marriage and prepare professional help providers with information to best serve distressed married couples. This chapter examines the literature pertinent to professional help seeking by engaged and recently married individuals. The chapter begins by discussing the developmental stages and tasks that families and couples work through. A discussion of the problems faced by married couples and the patterns of professional help seeking follows. Next, three relevant theories are presented: the vulnerability-stress-adaptation model of marriage, the theoretical framework of seeking help and the theory of planned behavior. The chapter ends with a summary and a listing of the research questions for this study.

According to family developmental theory, many families experience similar life cycle stages as they negotiate a course through life (Mattessich and Hill, 1987; Nock, 1979). Mattessich and Hill (1987) identified seven stages in describing family transition periods:

- 1. Newly established couple (childless)
- 2. Child bearing families (infants and preschool children)
- 3. Families with school children (one or more children of school age)
- 4. Families with secondary school children (one or more children in adolescence)

- 5. Families with young adults (one or more children aged 18 or over)
- 6. Families in the middle years (children launched from parental household)
- 7. Aging families (parents in retirement)

In addition to these stages, Carter and McGoldrick (1980) added an additional stage to family development, the "pre-marital" stage.

A notable limitation of this model is that an estimated two thirds of married couples will end in divorce (Martin and Bumpass, 1989) resulting in a disruption of this life cycle. In spite of this, all couples, including those who have experienced a prior divorce, will experience variations of a pre-marital or "newly established couple" stage (some remarriages may include children from previous marriages). These are stages where couples adjust to living as a married pair. Mattessich and Hill (1987) reported couples spend an average of 2.2 years (approximately 28 months) in the newly established couple stage. It is important to research the nature of these stages because they are often the basis of intervention and prevention programs designed to help couples cope with problems that are prominent at different stages of family development.

Wallerstein and Blakeslee (1995) propose that young married couples face 9 life challenges or psychological tasks as couples. They interviewed 50 volunteer couples, married nine years or more, to identify common inter-workings of the successful marriages. The 9 tasks they identified were: a) separating from the family of origin; b) building togetherness and creating autonomy; c) becoming parents; d) coping with crises; e) making a safe place for conflict; f) exploring sexual love and intimacy; g) sharing laughter and keeping interest alive; h) providing emotional nurturance; I) preserving a double vision of early romantic images and the sober realities of change.

Wallerstein and Blakeslee note that the early years of marriage can be difficult because the tasks do not necessarily occur in sequence. Several may have to be addressed simultaneously. This qualitative research is limited in its generalizability outside the 50 Caucasian couples interviewed for this research. Yet, it provides greater depth to the marital developmental tasks that couples may work through.

While some couples may successfully work through these marriage tasks, research has found that not all newlywed couples experience a traditional "honeymoon" phase in the marriage (Arond and Pauker, 1987). Arond and Pauker found the first year of marriage wrought with serious problems for newlyweds: a) sixty three percent had serious problems related to money, b) 51% had serious doubts their marriage would last, c) 45% were not satisfied with their sexual relationship, d) 42% found marriage harder than expected, e) 35% said their mate was often critical of them, and f) 49% had other significant marital problems. During these first few years of marriage, as interaction patterns begin to form, the transitions between tasks and stages can add stressors that threaten to derail a family system (Haley, 1973). These problems are compounded by the "taboo" around discussing marriage troubles with others (Mace, 1987). Mace coined this phrase from his research as a family specialist. He noted that once couples married they divulge very little to others outside the dyadic relationship. Mace felt that breaking this "taboo" against talking to others about marriage issues was an important step in receiving help from others and enhancing marital satisfaciton.

Marital Coping Styles

Menaghan (1982) found that individuals who reported chronic distress in marriage were more likely to cope with relationship difficulties by using strategies

involving conflict and avoidance. Ilfeld (1980) identified conflict and avoidance strategies as relatively ineffective in reducing distress and unlikely to be associated with positive outcomes. The National Center for Health Statistics (1996) has determined that 36% of marriages end in divorce during the first four years of marriage, 19% of all marriages end in divorce during the first two years. As marital problems compound over time, the need for outside help becomes stronger, especially if marriages are to avoid dissolution.

A review of the research on marital conflict areas reveals 18 common areas that could lead to marital dissatisfaction and dissolution (Blood and Wolfe, 1960; Fals-Stewart, Schafer and Birchler, 1993; Geiss and O'Leary, 1981; Kurdek, 1994). The 18 common marital problem areas identified are: communication, friends, physical affection, in-laws, jealousy, religion, values, decision making, power struggles, lack of loving feelings, unrealistic expectations, domestic responsibilities, children, financial, drugs or alcohol, violence or open hostility, sexual problems and trust. Kurdek (1994) identified 20 areas of conflict that marital couples argue that he researched about their influence on relationship satisfaction. Fals-Stewart et. al., in their research of typologies of distressed couples, asked distressed couples seeking marital therapy to list the four most important problem areas in their relationship. From their responses they identified 15 problem categories. Geiss and O'Leary asked practicing marital therapists to rate the frequency, severity and treatment difficulty of 29 problems commonly experienced by distressed couples. These studies combined, assisted in the development of a list of 18 common problem areas used in this study.

Storassi and Markman (1990) researched marital problem areas in the early stages of marriage. They analyzed the problem intensity of ten typical marital problem areas with couples at pre-marriage, early marriage and early parenting. The ten problem areas they assessed were: Money, communication, relatives, sex, religion, recreation, friends, drugs and alcohol, children and jealousy. The researcher's analysis indicated that relatives, jealousy, friends, and religion were more intensive problem areas pre-maritally, but significantly less after marriage. Communication and sex showed significant increases in problem intensity after marriage. The authors suggest that the issues most intensive for pre-marital couples were "exterior" problems, outside the spousal relationship. The researchers state this is possibly due to concern about outside threats to the integrity of the developing marital relationship. Further, after the marriage, couples seem to focus on "interior" problems, focusing on potential trouble spots within the relationship. Given that many couples possess less than adequate communication skills, the researchers suggest their results may reflect "a process of unresolved problems and an awkwardness of differences as the (length of) marriage increases, signaling the need to improve communication and promote togetherness through intimacy enhancing activities" (p. 93). This research provides an understanding of how relationship problems change within the early stages of the marriage and implies that couples who cannot enhance communication and togetherness may need assistance to improve their relationship. One source of assistance is marital therapy.

Effectiveness of marital therapy

There is agreement among meta-analytic reviewers of marital therapy research that marital therapy can, in the short term, reduce conflict and increase marital

satisfaction (Dunn & Schwebel, 1995; Halweg and Markman, 1988; Shadish, Montgomery, Wilson, P., Wilson, M.R., Bright and Okwumabua, 1993). These reviews indicate that the post marital-therapy effect sizes range from .51 to .91. Shadish et. al. concluded that there is a 60% chance that a treatment couple will be better following marital therapy than a couple whom did not receive therapy.

Snyder, Wills and Grady-Fletcher (1991) assessed the long-term impact of marital therapy. The authors collected four-year follow up data on couples participating in a study that compared insight-oriented marital therapies with behavioral marital therapy. Thirty-eight percent of behavior marital therapy recipients and 3% of insight oriented marital therapies recipients had separated or divorced at the four-year follow up assessment.

These findings, while limited, suggest that marital therapy is very effective in the short term and somewhat effective in the long term. Brady and Jouriles (1995), in their review of marital therapy state that "there is no evidence that a particular type of marital therapy is better than any other type. Brady and Jouriles also note that additional research is needed to further assess the long-term impact of marital therapy. In addition to determining the effectiveness of marital therapy, it is important to determine the general patterns of professional help seeking and the patterns of seeking help for marital problems.

Professional Help-Seeking

Negebauer, Dohrenwend and Dohrenwend (1980, cited in Wills, 1987) found 21% of their study population to experience distress. Within the distressed population the median percent of individual ever in treatment with mental heath professionals was 27%.

This suggests that three quarters of the sample of distressed individuals had never sought professional help (Link and Dohrenwend, 1980, cited in Wills, 1987). Veroff, Kulka and Douvan (1981) found that, when faced with a major life crisis, 45% of people used only informal sources, 39% used both formal and informal sources and 3% used only formal sources of help.

Through research on the process of seeking therapy, Saunders (1993) reported that therapy applicants tended to have fairly long-standing problems for which they were seeking help. He reported that 73% of applicants had reported their problems, for which they were seeking professional help, had lasted for a year or more; 48.0% had problems that had lasted more than two years. These findings suggest the problems that individuals seek help for are long standing. This research provides a foundation for understanding the process of seeking help for individuals and limited in it's generalizability to the process of seeking help for married couples.

A number of studies have researched the various demographic characteristics of help seeking behavior. It is well documented that women are more likely to seek help than men (Butler, Giordano, and Neren, 1985; Neighbors, Jackson, Bowman and Grin, 1983: Veroff, 1981). Of these studies, Veroff identified types of people who are less likely than others to seek help. These included: the elderly, less educated, poor, and men. Within racial and ethnic groups' research, African-Americans have been found to rely on informal sources of help more than formal sources of help (Hines and Boyd-Franklin, 1982). Bowen and Richman (1991) reported that African-American husbands were more likely than white husbands to pursue family counseling services. This research provides

an understanding of the patterns of help seeking within different demographic populations.

Intentions to Seek Professional Help

Through their research on the influence of problem solving appraisal and nature of problem on likelihood of seeking counseling services, Kahn and Nauta (1997) found female and male college students did not differ in their reported intentions to seek professional help for personal problems generally experienced by college students. Their research did find that attitudes of females were more positive toward seeking professional help than male college students. These findings differ from the literature that has reported that women seek professional help more than men (Veroff, 1981).

Good, Dell and Mintz (1989) assessed the intentions to seek professional help as one part of their research with male college students on gender role conflict and it's reactions to help seeking in men. The authors designed an instrument that inquired about the likelihood of help seeking for personal/emotional and academic/vocational problems. Additional measures were used to assess gender role conflict and attitude toward help seeking. The results indicated that as men's values regarding the male role became less traditional, their views of psychological help seeking became more positive. There was limited generalizability with this study as subjects were only late-adolescent college men. Marital Help-Seeking

Bowman and Richman (1991) measured the likelihood of US Air Force married couples to seek marriage and family counseling. They conducted face to face interviews with 1856 individual spouses, 928 couples. Six independent variables were included in the analysis: education level of husband and wife, racial/ethnic group, husband rank,

knowledge and prior use of marriage and family counseling, likelihood of consulting friends given a major personal or family problem, and likelihood of consulting parents and other relatives given a major personal or family problem. The dependent variable, likelihood to seek marriage and family counseling was measured by asking a single question: "If you had a marital or family problem, how likely would you be to seek marriage and family counseling?" Subjects responded on a three-point scale ranging form "not likely at all" to "very likely". The mean likelihood was 1.81 for husbands and 1.90 for wives. A t-test for this independent variable was not significantly different. An analysis of covariance was conducted with the six independent variables; three emerged as significant predictors of potential use of marriage and family counseling by both husbands and wives. These were: knowledge and prior use of services, years of formal education, and willingness to consult parents and other relatives given a major personal or family problem. The higher the years of education for both husbands and wives, the less likely they were to pursue marriage and family counseling services in times of relational stress. The more likely husbands and wives were to turn to parents and other relatives given a major personal or family problem, the more likely they were to seek marital and family counseling services. Spouses who have knowledge of and prior use of marital and family counseling services are more likely to use these services if the need arises in the future than those with either knowledge and no prior use or no knowledge and no prior use. The researchers note that the findings do not support professional helpseeking research conducted with non-military individuals. They acknowledge the potential bias associated with research on military personnel, suggesting that higher military rank may enhance the stigma associated with seeking professional help.

Furthermore, a second bias suggested by Bowen and Neenan (1988) suggests that men who choose to stay in the military, as a career may be more sex-role traditional than those who elect to leave. Thus, this sample may be more representative of traditional male roles than those found in civilian populations.

Bowen (1985) analyzed US Air Force married couples family and social relationships and their attitude toward and knowledge of family enrichment and support programs. He found 73% of Air Force husbands and 71% of their wives had heard of some type of marriage enrichment program, yet only 4% of husbands and wives had actually participated in one. 63% of husbands and 65% of wives were at least somewhat likely to seek professional advice or assistance when asked about the likelihood of their seeking marriage or family counseling in times of relationship difficulty. This research is limited due to its focus exclusively on military personnel and their spouses.

Dindia and Baxter (1987) conducted a qualitative study of the strategies for maintaining and repairing marital relationships. They found married couples who had previous involvement in marital enrichment were more likely to seek outside help for marriage difficulties. They found these results from interviewing a snowball sample of fifty couples married an average of 14 years and categorizing the strategies.

Bader, Microys, Sinclair, Willett and Conway (1980) assessed help seeking behavior in their study of a pre-marital preparation program and found that pre-marital intervention groups showed an increase in their mean use of professional help over the first year of marriage, as compared to the control group. The researchers interpreted this as an indicator of couples' use of resources in the community, a positive ability to confront and resolve marital conflicts constructively.

Gelles and Straus (1988) in their extensive survey of family violence found that one in four women who had experienced no violence in the last year sought any kind of help outside their families for personal or family problems. Two out of four victims of minor violence were likely to go outside of their home for help and guidance, while almost seven out of ten victims of severe violence turned to someone for help. This suggests that as the severity of the violence increases so does the seeking of help. Current literature searches have found no studies using pre-marital and recently married couples that assess the attitudes of seeking professional help when faced with different types of marital problems.

Vulnerability-Stress-Adaptation Model of Marriage

Karney and Bradbury (1995) developed a vulnerability-stress-adaptation model of marriage by integrating four theoretical frameworks of marriage with the findings of 115 longitudinal studies that predict marital outcome, providing an in-depth understanding of the marital process. The model uses attachment theory (Bowlby, 1969), social exchange theory (Jacobson and Margolin, 1979), and crisis theory (McCubbin and Patterson, 1982). Karney and Bradbury assessed the extent to which longitudinal research on marriage has advanced an understanding of marital development. The researchers integrated the theories with their review and analysis of longitudinal marriage studies to develop the vulnerability-stress-adaptation model shown in Figure 1. The model shows how the three variables of enduring vulnerabilities, stressful events and adaptive processes interact to influence marital quality and stability over time.

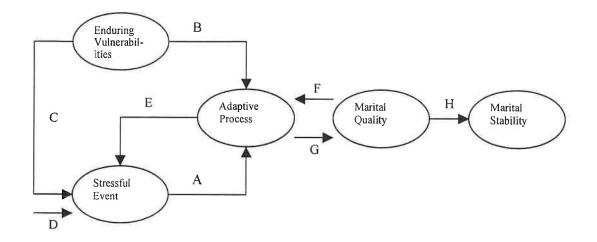


Figure 1. The vulnerability-stress-adaptation model developed by Karney and Bradbury, 1995.

Enduring vulnerabilities represent the demographic, historical, personality and experiential factors that individuals bring to the marriage. Attachment theory adds to the understanding of this variable by maintaining that an individuals very early experiences, in close relationships, will shape the nature and development of adult relationships. A spouse's history of advanced education and positive upbringing can positively influence the adaptive process. A negative upbringing may create stressful events and negatively influence the adaptive process. The enduring vulnerabilities brought to a marriage may exert their longitudinal influences on marriage outcomes through their effects on the ability of spouses to adapt to the challenges they encounter.

The adaptive process is the way married individuals cope with differences of opinion, marital difficulties and transitions. One possible coping method found within this adaptive process is the seeking of professional help. Social learning theory provides the theoretical background for this variable of the model. This theory maintains that the stability and quality of a marriage is influenced by the ways in which spouses treat and

respond to each other, and the responses to such reactions. An effective problem-solving couple will resolve a stressful event and in the process enhance marital quality. On the contrary, an ineffective problem-solving couple may not only aggravate a stressful event, but also actually increase the distress associated with the stressful event. Repeated failures in marital adaptability negatively influence the marital quality. And, if repeated success is experienced the positive increase in marital quality will reinforce the adaptive process.

The variable, stressful events, represents the developmental transitions, incidents, and chronic or acute circumstances that spouses and couples encounter. Crisis theory (McCubbin and Patterson, 1982) provides the theoretical background for this variable of the model. It emphasizes how family and marital stability are effected by crisis. Recovery from a marital stressor depends on how a couple defines and appraises it and what functional resources are available. To further understand the coping process experienced by marital couples in this model it is important to understand stress and coping theory at a greater depth.

Theoretical Framework of Stress and Coping

Selye (cited in Cherry, 1978) defined stress as "the body's nonspecific response to any demand placed on it, whether the demand is pleasant or not" (p. 60). Selye states further that a person's attitude determines whether the situation is positive or negative to him or her. Stress interpreted as positive is labeled eustress. Stress interpreted as negative is labeled distress. Houston (1987) notes that these stressors can be internal or external of the person. Within the framework of Karney and Bradbury's model (1995, See figure 1), the stressful event can develop internally from a spouses positive or

negative enduring vulnerabilities (e.g. depression, poor or excellent communication skills) and externally by outside events (e.g. loss of a job, job promotion, major disaster), interpreted as distress or eustress.

Coping with stress is contained within the adaptive process of Karney and Bradbury's model. Bowman (1990), in her studies on coping methods and marital satisfaction defined coping as a mechanism used by couples and families to deal with the stress in their lives. Houston (1987) states that coping can take place within a person's own thoughts and as an action or behavior. Coping within a person's own thought may involve cognitively reinterpreting a distress inducing behavior by a spouse as not worth getting upset about, thus coping with the distress. In response to a husband's distressing comments, a wife actively copes with the distress by verbally confronting her husband, possibly resolving the distress. Both of these types of coping may or may not be effective. If ineffective, a spouse may need to attempt additional coping strategies. Coping and the adaptive process of this model have important implications for marital quality and stability. As noted previously, as distress levels rise and remain chronic, coping strategies become more maladaptive, raising distress levels and possibly leading to dissolution. One type of coping mechanism available to engaged and recently married individuals is to seek help from others.

Theoretical framework of Help Seeking

To understand the framework of help seeking, Wills (1987) divided help seeking sources into informal and formal networks. Informal networks include social support of families and friends. Formal networks include formal agencies and/or professional helpers. To understand the process of help seeking, Saunders (1993) devised a four-step

model of help seeking: a) cognitive labeling of a behavior or situation as problem; b) deciding that therapy would be an appropriate way to solve the problem; c) deciding to seek therapy (intention); d) Making contact with mental health services (behavior). Saunders reported that the most distressed participants of his study had more difficulty achieving the first three steps than participants with lower levels of distress. The percent of applicants who took a year or more to accomplish each step was 48.7% for step one, 32.7% for step two, 20.7% for step three, and 9.5% for step four. These findings suggest that problem recognition is the most difficult and time-consuming step and decision making is the second most difficult step.

For an engaged or recently married couple to go through these steps one partner needs to decide that the distress in their relationship is problematic in some way and warrants the help of someone outside the relationship. Next, a decision or intention needs to be made to seek the help of a marital therapist. The intentions lead to the actual process of making contact with a marital therapist. The theory of planned behavior (Ajzen, 1991) provides a more in depth description of the intention-behavior process discussed in this section.

Theory of Planned Behavior

Ajzen (1991) developed the theory of Planned Behavior to further the understanding of the underlying psychological processes that influence behavior. This theory suggests that the cause of an individual's voluntary behavior is his/her intention to engage in that behavior (See figure 2). Intentions are defined as decisions to engage in a particular behavior. Intentions are in turn influenced by several factors including: subjective norm, attitude, and perceived behavior control. The subjective norm is the

personal belief about whether significant others think he/she should engage in the behavior. Attitude is defined as the evaluative thoughts about the particular behavior. Perceived behavior control refers to individuals' perception of how easy or difficult it is to perform the behavior. Eagley and Chaiken (1993) state this construct is similar to Bandura's concept of self-efficacy, "the conviction that one can successfully execute (a given) behavior" (Bandura, 1977, p. 193). Ajzen also acknowledges this similarity.

Several studies have been conducted to test this theory (See Ajzen, 1991, for a review of these studies). In their analysis, the multiple correlation's predicting behavior from intentions and perceived behavioral control ranged from .20 to .78, with a mean of .51 (Eagley and Chaiken 1993). These findings suggest behavior can be predicted by knowing the intentions of an individual. This theory provides a foundation for understanding the methods used in the current study. The current study asked subjects to estimate their intentions (likelihood) to engage in a hypothetical behavior (seeking professional help).

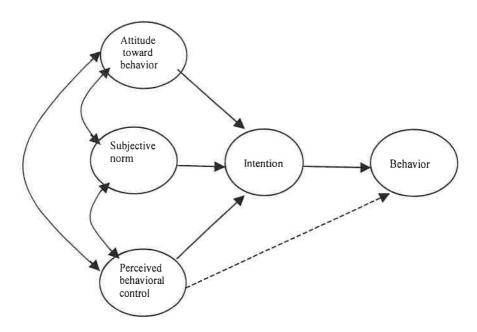


Figure 2. A representation of Ajzen's theory of planned behavior (Ajzen, 1991).

Summary

Couples beginning a life together face several developmental tasks that, if successfully navigated, can lead to marital satisfaction and stability. Unfortunately, many of these newlyweds struggle during the first few years of marriage, resulting in marital distress and possible dissolution. To cope with this distress couples may choose to seek the help of professionals. The vulnerability-stress-adaptation model of marriage provides a context to understand the interacting variables that interact to influence marital quality and stability. The coping method of professional help seeking is found within the model's adaptive process. This mode of coping is the result of a four-step process leading to the actual behavior of seeking help. Among these four help seeking steps, the theory of planned behavior assists in understanding step three, the process of developing intentions to seek professional help. Research has shown a moderate correlation between intentions and actual behavior.

Seeking the assistance of a marital therapist has been deemed effective. The literature has shown that women seek professional help more than men. To date there is no research that assesses the engaged and recently married individuals' intentions to seek professional help when faced with different marital problem areas. It is important to research the intentions to seek professional help of this population because of its implications to social workers working with this population. This study provides valuable information on whom is most likely in the marital dyad to seek professional help. The results assist in developing better ways to prepare these couples for married life and the coping methods available to them for resolving conflict.

Research Questions

Question 1: Are engaged to be married individuals more likely to seek professional help than recently married individuals when faced with potential marriage problem areas? Question 2: Are females more likely to seek professional help than males when faced with potential marriage problem areas?

Chapter Three

Methodology

This chapter describes the research methods and design of this study. This study is descriptive in nature, designed to measure the likelihood of recently married and engaged to be married individuals to seek professional help when faced with potential unresolved marital problem areas. Included in this chapter is the research question of the study, research design, sampling, procedures, instrument, data analysis, and protection of human subjects.

Research Question

Question 1: Are engaged to be married individuals more likely to seek professional help than recently married individuals when faced with potential marriage problem areas? Question 2: Are females more likely to seek professional help than males when faced with potential marriage problem areas?

Research Design

The design of this thesis study is quasi-experimental in nature, using two-sample survey design to measure the research question. The independent variables are marital status (engaged to be married and recently married individuals) and gender. The dependent variable is the intentions to seek help. The unit of analysis is individuals engaged to be married and recently married.

Sample

The study population is parishioners at a large Catholic Church community located in a suburb of a major Midwest metropolitan area. This Catholic community has approximately 3,000 families in its membership. They conduct approximately 250 weddings per year. This Catholic community requires all couples who want this church to conduct the wedding ceremony to complete the premarital preparation program PREPARE (Olson, Fournier and Druckman, 1989) prior to marriage ceremony. The church had recorded within their computer database all engaged couples who have signed up for PREPARE and couples who have completed PREPARE and were married at this church. A purposive sample of 238 individuals (119 couples) were found in the database that met the criteria of being engaged to be married or were married 28 months or less. Seventy-six individuals (38 couples) were engaged to be married and 162 individuals (81 couples) were married. Engaged to be married is operationally defined as formally engaged to be married and signed up to participate in PREPARE at the church used in this study. Recently married is operationally defined as married for approximately 28 months or less, based on research by Mattessich and Hill (1987) who defined this as the early marital stage of the marital life cycle.

Procedure

All 238 individuals in the purposive sample were sent a survey packet that included a cover letter, the self-administered questionnaire, and a stamped return envelope for the questionnaire. The cover letter explained the purpose of the study and instructions on how to complete the enclosed questionnaire, and emphasized that

participants were voluntary and anonymous to the researcher. The instrument of measure was a three-page survey (Appendix A) consisting of 28 questions. Participants were instructed to individually complete the enclosed survey and return it in the enclosed envelope by a specified date. Return envelopes were addressed to the researcher via a post office box at Augsburg College. A reminder post card was sent to each participant 7-10 days after mailing the questionnaire.

Instrument Design

The survey was divided into three parts. The first part consisted of 18 questions that asked the participants to rate on a 1-7 Likert type scale his/her likelihood of seeking professional help when faced with potential unresolved marital distress areas. Marital distress areas were translated into question items and ranked from research assessing areas of conflict for couples (Kurdek, 1994), couples rating of problem intensity (Fals-Stewart, Schafer and Birchler, 1993), therapists estimates of problem frequency and damaging effect on marital relationships (Geiss and O'Leary, 1981), and important relationship areas found in PREPARE (Olson, Fournier, and Druckman, 1982). From this research, questions were numbered from low stress to high stress. A comparison of the findings of these studies identified high distress areas as those with high problem intensity (Fals-Stewart et. al.), and high problem frequency and damaging effect (Geiss and O'Leary). Question design was pre-tested by presenting a sample questionnaire consisting of 5 questions to a MSW thesis seminar class. Design changes were made from class recommendations. The second part consisted of two questions asking the participants to rate: (a) how long a problem must exist before determining it to be unresolved, and (b) how long would a problem need to be unresolved before seeking

professional help. The third part of the survey consisted of general demographic information including a question asking participants to indicate his/her previous participation in couples/marital counseling and/or education. A copy of the questionnaire is located in Appendix A.

Data Analysis

Questionnaire data was recorded into Excel. Descriptive statistics were computed for the sample based on responses to demographic questions. Aggregate mean scores were calculated for each participant. An overall mean score was also calculated for the whole sample. Questions 19-20 were analyzed descriptively. In a second stage of descriptive analysis the data were summed first by marital status and then by gender. Within these groups, group means and standard deviations for questions 1-18 were analyzed, reporting means below 3.0 or above 5.0. An independent sample two-tailed ttest was calculated from participant aggregate mean scores for marital status. When testing the effects of gender an independent sample one-tailed t-test was calculated from participant aggregate mean scores, based on research findings that suggest females are more likely to seek professional help than males.

Protection of Human Subjects

The pastor and program director of PREPARE AT the Catholic community used for this research approved this study. The Augsburg College Institutional Review Board (IRB)also pre-approved this study (#96-71-3). A copy of the IRB approval letter is located in Appendix D.

Anonymity of the subjects was maintained by having the church staff label and mail out the survey packets and the reminder post card to the study population. The

researcher had no access to these names. The church staff maintained the confidentiality of the participants.

Due to the potential sensitivity of the questionnaire, the name of a licensed psychologist was listed in the body of the cover letter sent to subjects as a referral source for individuals distressed by the content of the questionnaire.

No incentives or rewards were offered to the Catholic community or the subjects of this research. A copy of this thesis was given to this Catholic community upon its completion.

Limitations of this design include the use of a purposive sample and selfselection. Using these methods excludes a portion of the population. Self-selection limits the respondents to those who desired to complete the survey, thus limiting the generalizability. Different conclusions may have resulted from the use of a random sample from the population. Also, the use of face to face interviews or focus groups to gain in depth qualitative data may have resulted in different conclusions.

Chapter Four

Results

This chapter presents the results of this research study. Descriptive statistics describing the sample characteristics are presented first. Second, the variables marital status and intentions to seek professional help are analyzed with descriptive statistics and then, with bivariate analyses using independent sample t-tests.

Response Rate

Two hundred thirty-eight questionnaires were distributed and 57 were returned. This resulted in a response rate of 24%. This response rate was unexpectedly low. Rubin and Babbie (1993) describe response rates of 50% or more as adequate.

Demographics

Sixty-eight percent (n=39) of the participants were female and 32% (n=18) were male. The ethnic background of all the participants was Caucasian, except for one female who was Asian-American. The average age for participants was 30 years (range=22-45 years). The average age for females was 30 years (range=22-42 years), and 31 for males (range=22-45 years).

Income level

Nine percent of the study participants (n=5) reported an income level under \$15,000, 21% (n=12) reported an income level \$15,000-\$29,000, 28% (n=16) reported incomes of \$30,000-\$45,000, 26% reported incomes of more than \$45,000. Sixteen percent (n=9) of participants did not respond to this question.

Marital Status

Thirty-seven percent (n=21) of participants were engaged to be married and 63% (n=36) were currently married. One of the engaged participants and 5 of the currently married participants were previously married. The average length of marriage for those currently married participants was 18 months (S.D.=8.5 months), and range between 1 month and 28 months. Fourteen married participants reported having one child with their partner and two participants reported having two children. None of the engaged participants reported having children with their partner.

Prior Experience with Professional Help

All married individuals had prior experience with PREPARE and/or another marital enrichment program (e.g. Marriage Enrichment, marital or family therapy). Eleven engaged individuals had completed PREPARE and/or another pre-marital enrichment program. The remaining 10 engaged participants were signed up to participate in PREPARE to fulfill the requirements for marriage through the church. <u>Likelihood of Seeking Professional Help</u>

When asked how likely are you to seek professional help, the average aggregate mean score for the likelihood of seeking professional help with all subjects was 4.81 (SD=2.1), measured on 1-7 Likert scale (1=not at all, 7=very likely). When asked in general, how long must a problem persist before you determine the problem to be unresolved, 54% of all subjects responded with six months or longer. When asked, in general, how long would a problem need to be unresolved before seeking professional help, seventy-three percent of subjects responded that the problem would need to be

unresolved for 6 months or longer. (See Appendix B for a table of mean scores for questions 1-18. Appendix C contains a table of descriptive statistics for questions 19-20.) Engaged to be Married

When asked how likely are you to seek professional help, the mean of aggregate scores for participants engaged to be married was 4.76 (SD=1.5). When asked how likely are you to seek professional help considering specific problem areas, seven questions had mean scores over 5.0. These included potential unresolved marital issues of communication (Mean=5.10, SD=2.0), values conflict (Mean=5.10, SD=1.8) sexual problems (Mean=5.10, SD=1.7), trust (Mean=5.33, SD=1.9), lack of loving feelings (Mean=5.62, SD=1.9), alcohol and or drug use (Mean=6.05, SD=1.5), and violence or open hostility (Mean=6.43, SD=1.0). There were no problem area questions with mean scores less than 3.00. (See Figure 3 for a comparison of mean scores for questions 1-18.)

Thirty-eight percent reported that a marital problem must exist for 6 months or more before the problem was determined to be unresolved. Sixty-seven percent reported that the problem would need to be unresolved for 6 months or more before seeking professional help. (See Figures 4 and 5.)

Currently Married

The mean of aggregate scores of perceived likelihood of seeking professional help for married participants was 4.33 (SD=1.5). Two problem area questions had mean scores over 5.0. These included unresolved marital issues of alcohol and/or drug use (Mean=6.00, SD=1.7), and violence or open hostility (Mean=6.11, SD=1.6). One problem area question had a score below 3.00, concerns regarding spouse/fiancé(e)'s friends (Mean=2.83, SD=1.8). (See Figure 3 for a comparison of mean scores of questions 1-18 comparing engaged and married participants.)

Sixty three percent reported that a marital problem must exist 6 months or more before the problem was determined to be unresolved. Seventy-seven percent reported the problem would need to be unresolved for six months or more before seeking professional help. (See Figures 4 and 5.)

An independent two tailed t-test was conducted for marital status, comparing engaged and married individuals, t=.1.06, p=NS. These results cannot rule out the possibility the differences in the aggregate mean scores occurred by chance.

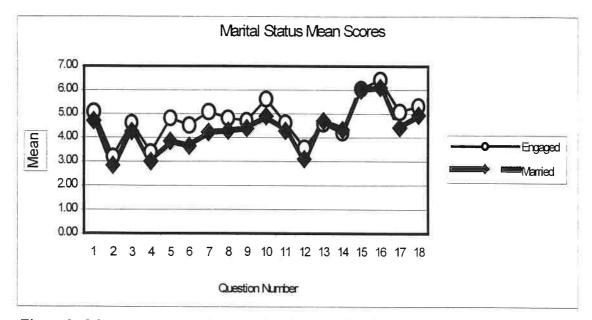


Figure 3. Mean scores, questions 1-18, of engaged and married participants.

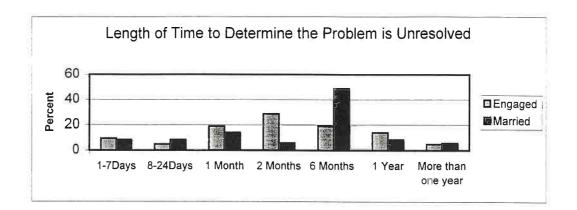


Figure 4. Engaged and married participants' estimated amount of time before determining a problem unresolved.

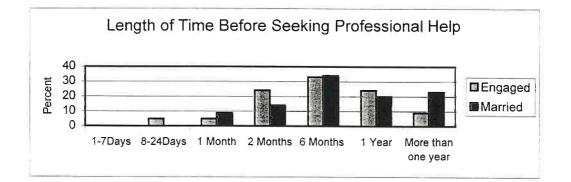


Figure 5. Engaged and married participants' estimated amount of time before seeking professional help with an unresolved problem.

Females

The mean of aggregate scores of likelihood of seeking professional help for females was 4.79 (SD=1.3). The average likelihood of seeking professional help for engaged and married females was 4.81 (SD=1.9) and 4.81 (SD=1.1) respectively. Five questions had mean scores of 5.0 or greater when comparing all female scores. These

included potential unresolved marital issues of communication (Mean=5.21, SD=1.6), lack of loving feelings (Mean=5.56, SD=1.7), alcohol and or drug use (6.33, SD=1.7), violence or open hostility (6.54, SD=0.9), and trust (5.31, SD=1.8). One question had a mean score less than 3.00, concerns regarding spouse/fiancé(e)'s friends (Mean=2.95, SD=2.0). (See Figure 6 for a graphical analysis of the gender differences.)

When assessing the length of time a problem must exist before it is determined to be unresolved, 57% (n=22) of female participants reported 6 months or more before the problem is determined to be unresolved. Seventy-seven percent (n=30) of female participants reported the potential marital problem needed to exist for six months or more before seeking professional help. Figures 5 and 6 provide a graphical analysis of these questions.

<u>Males</u>

The mean of aggregate scores of likelihood of seeking professional help when faced with potential marital stressors for men was 3.84, (SD=1.6). The average likelihood of seeking professional help for engaged and married males was 4.69 (SD=1.3) and 3.51 (SD=1.7) respectively. Two questions had mean scores greater than 5.0 when comparing all male scores. These included alcohol and drug use (Mean=5.33, SD=2.0), and violence or open hostility (Mean=5.56, SD=2.0). Two questions had mean scores less than 3.00, difficulties with in-laws (Mean=2.33, SD=1.6), and concerns with domestic responsibilities (Mean=2.89, SD=1.6). (See Figure 6.)

Forty-seven percent (n=8) of male participants reported a problem needs to persist for six months or more before determining it unresolved. When asked how long an

unresolved problem need to occur before seeking professional help, 62.5% (n=11) of male participants reported 6 months or more. See Figures 5 and 6.

An independent, one tailed t-test was conducted for gender, comparing female and male compiled average scores. The results, t=2.15, p<.05, suggest a significant difference in intentions of seeking professional help for gender.

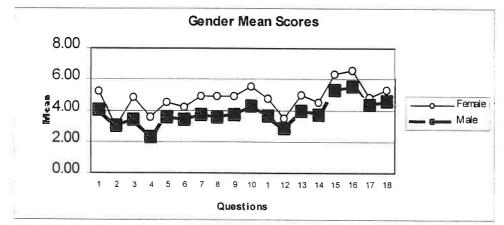


Figure 6. Mean scores, questions 1-18, of female and male participants.

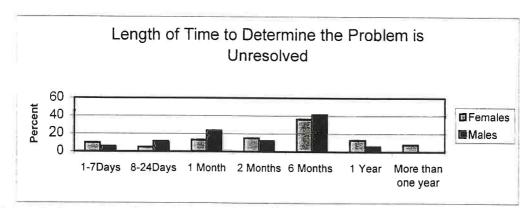


Figure 7. Engaged and married participants' estimated amount of time before determining a problem is unresolved.

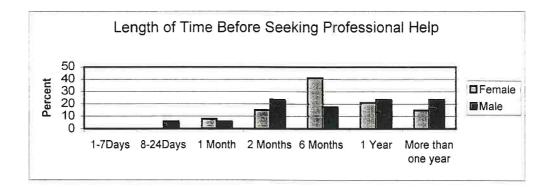


Figure 8. Female and male participants' estimated amount of time before seeking professional help with an unresolved problem.

The results of this chapter reported significant differences in intentions to seek professional help for gender, suggesting females are more likely to seek professional help when faced with situations of distress than males. No significant differences were found for marital status. Aggregate mean scores and mean scores above 5.0 and below 3.0 were reported for overall subjects and the independent variable.

Chapter Five

Discussion

This chapter summarizes and discusses the findings of this study. The chapter begins by discussing the key findings, followed by their implications for social work practice and churches that use PREPARE. Next the chapter discusses the limitations of the study and the implications for future research. A summary will conclude the chapter. <u>Key Findings</u>

This research study assessed the intentions of engaged and recently married individuals to seek professional help when faced with marital problems.

The results suggest engaged and recently married individuals are mildly likely to seek professional help when faced with marital problem areas. The majority of individuals within the pre-marital and early marriage stage generally allow a problem to exist for a year or more before seeking professional help. While these findings are similar to research findings on general professional help seeking (Sanders, 1993), they remain a concern. As couples become more distressed, they tend to use more ineffective coping methods that exacerbate the problem (Menaghan, 1982). While this is a concern, it is unclear how long couples may require to solve their problems. There is a possibility that these individuals are receiving assistance from informal sources other than a professional (i.e. family or friends). Also, the "taboo" against talking about marital problems with others (Mace, 1987) may still exist for recently married individuals, particularly in talking with professional help providers such as social workers.

The findings suggest that engaged individuals are quicker to label marital problems as unresolved than recently married individuals. This may be indicative of engaged individuals beginning the marriage tasks as discussed by Wallerstein and Blakeslee (1995). It is possible that if engaged individuals have not been previously married, they may have not experienced most of the martial problems listed in the questionnaire. Thus, engaged participants may have reported a shorter time period before determining a problem unresolved. Recently married individuals may have already experienced some marriage problems as reported by Arond and Pauker (1987) and wait longer before seeking help because they may have confidence from successfully resolving problems previously. Karney and Bradbury's vulnerability-stress-adaptation model emphasizes that the enhanced marital quality and stability from prior successes in solving marital problems reinforces the use of these effective coping strategies. With time, successful couples reinforce their coping strategies and thus maintain stability and enhance the quality of the marriage.

The findings suggest that women seek professional help more often than men. This finding supports previous research of general help seeking patterns (Veroff, 1981). This suggests that women are more accepting of the use of professional help as a coping mechanism. Women may be socially conditioned to be responsible for the care and maintenance of the marriage relationship. Also, women may be economically vulnerable should marital dissolution occur. Women may end up as the primary care giver to her children with minimal financial help from her ex-husband in the event of a divorce. Women may have more at stake if a divorce should occur.

In this sample, male participants identified marital problems as unresolved and sought help sooner than women. This finding may be the result of a sampling bias. It is possible that only those individuals that actually would seek professional help returned the questionnaire. Caution is warranted in generalizing these findings to the general population. With this possible bias, it is possible that men who seek professional help generally are quicker to determine a problem unresolved and seek professional help than women who seek professional help. This suggests that help seeking women may endure more distress than help seeking men, when situations of marital distress arise. It is possible that these women may use the time between the onset of a marital problem and the reported time before seeking professional help to utilize other coping methods (e.g. informal support of friends and family, trying to work it out with spouse, avoidance). The use of professional help may be observed as a last resort method of coping for women.

The findings suggest that men will generally seek professional help for problems of higher distress levels. Women will generally seek help for a range of problems ranging from low distress to high distress. These findings suggest that men may perceive professional help seeking as a more viable option for the more intense marital problem areas. Women are more willing to seek professional help in general.

It is noteworthy that both men and women will seek help for more severe marital problem areas such as violence and drug abuse. Couples appear to realize the severity of these problem areas and the difficulty in treating them (Geiss and O'Leary, 1981).

Implications for Social Workers

The findings that men in the early stages of marriage are more inclined to leave problems unresolved unless they are severe in nature, and that women will seek help more than men have difficult implications for social work practitioners. Social workers may face situations where only the wife has sought help for marital problems, unable to convince the husband to participate. The social worker is then faced with a dilemma in determining the best treatment for the client. The social worker as to choose either to work with the couple as a whole or work with the wife alone. Deciding to work with the couple as a whole must follow the self-determination of each spouse. It may prove difficult to get both spouses involved if resistance is strong from one of the partners. Of only one spouse will participate, the social worker must then determine what the best interest of the client is, to continue to treat the spouse alone or stop services until the other spouse decides to participate. This must largely be decided from assessing the selfdetermination of the client.

When choosing to work with the wife alone, it must follow her self-determination. She must be informed that her involvement in therapy may result in dissolution of the relationship, as the marital system will be impacted from the therapy. The social worker must be prepared to work with the couple as a whole if the other spouse decides to participate. If a primary therapeutic relationship has been established with the single spouse another difficult situation for the social worker may arise. The social worker needs to again decide what is the best interest of the client, to work with the client as a

whole or work individually with the client and bring in a second social worker to facilitate the marital therapy.

Further, as couples enter marital therapy the wife may have marital distress areas that differ from her husband. The husband may not perceive that distress areas exist in the relationship. The social worker is faced with a challenging situation where both partners are agreeing to seek professional help, yet, only one spouse may believe there is distress in the relationship. The social worker must assess the self-determination of each partner and work to promote the well being of the dyad. The social worker must work from the strengths of the dyad, one of which may be the agreement by both to seek professional help.

As couples enter marital therapy the social worker needs to keep in mind that the marital problem areas have generally been in existence for a year or more. Also, as couples become more distressed, they tend to use conflict and avoidance coping methods (Meneghan, 1982). Social workers must be prepared for this by knowing conflict resolution tactics that may assist the couple in breaking the cycle of ineffective coping strategies. Additionally, social workers may need to work with couples experiencing high levels of conflict over a relatively long period of time to ensure that effective coping methods are actualized.

The findings of a minimal likelihood of seeking professional help by couples early in the marriage life cycle indicate that social workers must be proactive when working with couples early in the marriage life cycle. Couples engaged to be married are generally more likely to seek professional help than recently married couples. To be effective in preventing the dissolution and problems associated with it; social workers

need to implement programs that can work to educate couples about the problems faced by newlyweds and the opportunities for professional assistance. This educational response by practitioners can work to remove the "taboo" against talking about marriage problems (Mace, 1987). It is hoped that couples, whether early in the marriage tasks or later into them, can utilize the resources of social workers or other marriage professionals. Tiesel and Olson (1992) have proposed that couples could receive preventive assistance through annual check-ups at approved clinics. Insurance companies may see the preventive benefit and sponsor it.

This study has implications for Catholic churches that implement PREPARE with engaged couples. Although many recently married couples may participate in PREPARE, this may not inoculate them from marital distress, possibly resulting in needing the assistance of a social worker or other marital professional to resolve marital distress. Early marital couples participating in PREPARE are mildly likely to seek professional help suggesting that many may face marital difficulties and not utilize effective coping methods. Churches may want to consider informing PREPARE participants of the option of using professional help when faced with marital problems. This could assist couples in learning effective coping methods before problems persist to the point where couples turn to conflict and avoidance strategies. Also, churches may want to disseminate information regarding the common problem trends faced by couples early on and resources that many couples can access for marital growth. This information could be developed from the Catholic Church's own teachings on marriage. It is through these processes that the rate of seeking professional help can be increased and thus enhancing marital quality and stability for distressed couples.

Limitations

The results of this study may not be representative of all individuals engaged or recently married. The participants in this study were almost exclusively Caucasian and located in a suburban community. Therefore, there are limits to applying these findings to populations outside these demographics. There is some generalizability to religious populations outside Catholic communities. Research has reported no evidence to support a relationship between religious behavior and attitudes toward and use of psychotherapy. There is a possible response bias from the limited response rate (24%). Rubin and Babbie (1993) state that a response rate of 50% is considered adequate. As noted earlier, a selection bias may exist where only those individuals that actually would seek help returned the questionnaire.

A larger, random sample with a more rigorous experimental design may have produced different results. More participants would have allowed for additional analyses of independent variables (e.g. previously married and income level) and increased the ability to generalize to the larger population. The questionnaires were self-reported data rather than observed behavior data, creating another limitation to this study.

A limitation to the design of the survey involved the wording used in questions 19 and 20. In these questions participants were asked to determine how long a "problem" must persist and how long a "problem" must be unresolved rather than using the wording "*marital* problem." Participants may have interpreted these questions as describing all types of problems rather than specifically as marital problems. While some participants

may have implied these questions to mean marital problems, the results of these two questions must be viewed as limited in validity. It is possible that participant responses were negatively biased due the deficit based design of the questionnaire (i.e. the questionnaire focused on the problems of marriage only thus participants were inclined to respond with a lower likelihood).

Further Research

Research is needed to determine the differences between those who will seek help and those who do not. Studies with a larger sample size could further analyze the characteristics and demographics of these individuals. Additional questions asking about divorce and family counseling within a spouse's family of origin may provide important information about the impact of family of origin on coping strategies used in the marriage relationship.

Assessing the barriers to seeking professional help that engaged and recently married individuals experience may prove valuable in developing methods for practitioners to access these individuals before problems become detrimental. Qualitative methods may be useful to accomplish this. Individuals who have filed for divorce could be interviewed to first identify if he/she used marital therapy before filing for divorce, and if not, explore the factors in deciding not to seek marital therapy. This could enhance the understanding of both the reasoning behind not seeking marital therapy and the "taboo" against talking to someone about marital problems.

Further research is warranted that assesses the perceived importance of each unresolved marital problem area along with the amount of time each marital problem needs to persist before determining it unresolved and the amount of time a problem is

unresolved before seeking professional help. This would provide greater context for understanding each marital problem area.

Finally, research assessing marital distress from the pile-up of these marital problem areas may enhance the knowledge of the patterns of distress that couples may find themselves. Thus, assisting professional help practitioners to enhance intervention techniques with these couples.

Summary

This thesis asked if engaged to be married individuals are more likely to seek professional help than recently married individuals. The findings suggest that there is no significant difference between these groups. In further analysis of the data it was found that women reported a significantly higher average likelihood of seeking professional help than men. These findings support prior research on gender help seeking patterns. Implications for social workers were discussed, including the need for more education of couples early in the marriage process and implications for churches that implement premarital preparation programs. The limitations of generalizability for this study and the validity of specific questionnaire questions were discussed. A discussion of future research that addresses the perceived importance of specific marital problem areas, barriers to seeking professional help and the pile-up effect of marriage problem areas concluded the chapter.

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APPENDIX A

COUPLES LIKELIHOOD OF SEEKING PROFESSIONAL HELP QUESTIONNAIRE (IRB approval number: #96-71-3)

1

Thank you for volunteering to participate in this study.

Please do NOT put your name on this survey.

General Instructions: Either a pen or pencil may be used to complete this questionnaire. Most of the questions may answered by writing in the space provided or when appropriate simply placing an X in the appropriate box. Do not discuss questions or responses with your partner while taking this survey. After completion please place it in the return envelope and mail to the return address.

A. Survey Questions

No matter how well a couple gets along, there are times when they disagree on major decisions, get annoyed about something the other person does, or just have spats or fights because they're in a bad mood or tired or for some other reason. They also use many ways of trying to settle their differences. The following questions ask you to rate how likely you are to seek professional help in response to these potential marital problem areas. Please circle the numerical value that best represents your intentions to seek professional help.

1.	If you were to have unresolved communication concerns in the relationship with your spouse/fiancé(e), how likely are you to seek professional help?								
	Not At All	1	2	3	4	5	6	7	Very Likely
2.	If you were to h seek profession		solved co	oncerns re	egarding	your spo	use/fianc	é(e)'s	friends, how likely are you to
	Not At All	1	2	3	4	5	6	7	Very Likely
3.	If you were to h likely are you to				bout lack	of physi	cal affect	ion fi	rom your spouse/fiancé(e), how
	Not At All	1	2	3	4	5	6	7	Very Likely
4.	If you were to h help?	ave unre	solved di	fficulties	with you	ır in-laws	, how lik	ely a	re you to seek professional
	Not At All	1	2	3	4	5	6	7	Very Likely
5.	If you were to h professional hel		solved fe	elings of	jealousy	with you	Ir spouse	fianc	é(e), how likely are you to seek
	Not At All	1	2	3	4	5	6	7	Very Likely
6.	If you were to have unresolved religious differences in the relationship with your spouse/fiancé(e), how likely are you to seek professional help?								
	Not At All	1	2	3	4	5	6	7	Very Likely
7.	If you were to have unresolved values conflicts in the relationship with your spouse/fiancé(e), how likely are you to seek professional help?								
	Not At All	1	2	3	4	5	6	7	Very Likely
8.	If you were to h spouse/fiancé(e							e rela	tionship with your
	Not At All	1	2	3	4	5	6	7	Very Likely

9.	If you were to have unresolved concerns involving power struggles in the relationship with your spouse/fiancé(e), how likely are you to seek professional help?									
	Not At All	1	2	3	4	5	6	7	Very Likely	
10.	If you were to h spouse/fiancé(e)							in the	relationship with	your
	Not At All	1	2	3	4	5	6	7	Very Likely	
11,	If you were to h spouse/fiancé(e)							ations	in the relationshi	p with your
	Not At All	1	2	3	4	5	6	7	Very Likely	
12.	If you were to h spouse/fiancé(e					•		es in t	he relationship w	ith your
	Not At All	1	2	3	4	5	6	7	Very Likely	
13.	If you were to h spouse/fiancé(e							, in th	e relationship wit	h your
	Not At All	1	2	3	4	5	6	7	Very Likely	
14.	If you were to h spouse/fiancé(e)							elatio	nship with your	
	Not At All	1	2	3	4	5	6	7	Very Likely	
15.	If you were to h spouse/fiancé(e							se in t	he relationship w	ith your
	Not At All	1	2	3	4	5	6	7	Very Likely	
16.	If you had unres spouse/fiancé(e							relati	onship with your	
	Not At All	1	2	3	4	5	6	7	Very Likely	
17.	If you were to h professional hel		solved se	xual prot	olems wi	th your s	pouse/fia	ncé(e), how likely are y	ou to seek
	Not At All	1	2	3	4	5	6	7	Very Likely	
18.	If you were to h likely are you to				ith trust	in the rel	lationship	with	your spouse/fian	cé(e), how
	Not At All	1	2	3	4	5	6	7	Very Likely	
19.	In general, how unresolved? (P			em persi	st before	you dete	ermine the	e prob	elem to be	
1-7 day	ys 8-24 d	ays	1 mont	th	2 mon	ths	6 mon	ths	l year	more than one year

20.	In general, how long wou help? (Please circle one.)	In general, how long would a problem need to be unresolved before seeking professional help? (Please circle one.)						
1-7 da	ays 8-24 days	l month	2 months	6 months	l year	more than one year		
B. Ge	eneral Information							
21.	What is your age?		22.	What is your Rac	e?			
				 () African-Am () American Ir () Asian () Caucasian () Hispanic () Other 				
23.	What is your gender?		24.	What is your inco	me level?			
	() Female () Male			 () Under \$15,0 () \$15,000 - \$2 () \$30,000 - \$2 () More than \$ 	29,999 45,000			
25.	Have you been previously () Yes () No	v married?						
26.	Are you currently married () Yes () No	1?						
	If you answered yes , how	long have you	been married to	your current husbar	nd/wife?			
	months	5						
27.	Prior to taking this survey spouse/engaged partner.			have you had exper	ience partici	pating with your		
	 PREPARE Marriage Encounter ENRICH Marriage or family t other enrichment products (TIME, Marriage Enderse Other 	herapy ograms counter, Grow			ther)			
	() I have not participat			n program.				
28.	How many children do yo	ou have with y	our partner?					

Please return this survey in the stamped return envelope provided. Thanks for your time and participation in this study.

APPENDIX B

	Marital	Status	Ger		
Question	Engaged (n=21)	Married (n=35)	Female (n=39)	Male (n=17)	Overall Mean (n=56)
1	5.10	4.69	5.21	4.06	4.84
2	3.19	2.83	2.95	3.00	2.96
3	4.62	4.25	4.82	3.44	4.39
4	3.38	3.00	3.53	2.33	3.14
5	4.81	3.86	4.49	3.59	4.21
6	4.52	3.64	4.21	3.44	3.96
7	5.10	4.22	4.92	3.72	4.54
8	4.81	4.28	4.90	3.56	4.47
9	4.71	4.39	4.87	3.72	4.51
10	5.62	4.89	5.56	4.28	5.16
11	4.62	4.28	4.77	3.61	4.40
12	3.57	3.11	3.46	2.89	3.28
13	4.57	4.69	4.97	3.94	4.65
14	4.19	4.33	4.54	3.72	4.28
15	6.05	6.00	6.33	5.33	6.02
16	6.43	6.11	6.54	5.56	6.23
17	5.10	4.42	4.79	4.39	4.67
18	5.33	4.94	5.31	4.61	5.09

Table of average scores of each question for marital status and gender.

APPENDIX C

	Engaged % (n=21)	Married % (n=35)	Females % (n=39)	Males % (n=17)
1-7Days	9.5	8.5	10	6
8-24Days	5	8.5	5	11.5
1 Month	19	14	13	23.5
2 Months	28.5	6	15	12
6 Months	19	48.5	36	41
1 Year	14	8.5	13	6
More than one year	5	6	8	0
Total	100%	100%	100%	100%

Table of percentage of responses for question 18, the estimated amount of time before determining a problem unresolved.

	Engaged % (n=21)	Married % (n=35)	Females % (n=39)	Males % (n=17)
1-7Days	0	0	0	0
8-24Days	5	0	0	6
1 Month	5	9	8	6
2 Months	24	14	15	23.5
6 Months	33	34	41	17.5
1 Year	24	20	21	23.5
More than one year	9	23	15	23.5
Total	100%	100%	100%	100%

Table of percentage of responses for question 19, the estimated amount of time before seeking professional help for an unresolved problem. APPENDIX D

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June 1, 1997

TO: Michael R. Borowiak 4037 Beard Avenue South Minneapolis MN55410

Ea Aulerchial

FROM: Rita R. Weisbrod, Ph.D. Chair Institutional Review Board (612) 330-1227 or FAX (612) 330-1649

Your IRB application: "The perceived likelihood of pre-marital and recently married individuals to seek professional help"

I have received your memorandum indicating changes in your project and I am pleased to report that your application is now approved.

Your IRB approval number is: #96-71-3.

This number should appear on all participant- related materials.

If there are substantive changes to your project which change your procedures regarding the use of human subjects, you should report them to me by phone (612-330-1227) or in writing so that they may be reviewed for possible increased risk.

Good luck to you in your research project!

Copy: Michael Schock, Thesis Adviser

APPENDIX D