## How Can Public Policy Promote Healthy Marriage?: The Couples' Perspective

Lina Guzman, Kristin Moore, Greg Matthews, Zakia Redd, Susan Jekielek, Jacinta Bronte-Tinkew and Suzanne Ryan Child Trends

<u>Overview</u>: Recent federal and state initiatives have focused on promoting healthy marriage with the goal of improving adult and child well-being. Building on an extensive review of research studies and measures used in databases, a conceptual model for healthy marriage was developed and a protocol was designed and tested using semi-structured cognitive interviews with low-income couples (N, approximately 20) in the Washington D.C. metropolitan area. This paper explores couples' thoughts about what is a healthy marriage and how policy efforts to promote healthy marriage can best serve couples and families.

## Goals of the study:

- 1) Does our conceptual model match couples' thoughts and experiences about what makes a marriage healthy? More specifically, are the elements or aspects that respondents identify as being essential to a healthy marriage included in our conceptual model? Based on a review of decades of research on marriage and consultation with experts in the field, ten constructs or domains were identified as defining a healthy marriage. They include, commitment to couple, satisfaction, communication, conflict resolution, violence, fidelity, interaction, intimacy and emotional support, commitment to children (when present), and duration and legal status.
- 2) To examine the applicability of existing and newly developed measures of healthy marriage and relationships to economically and racially diverse samples. While policies and initiatives are likely to focus on low-income couples, our existing relationship and marriage measures have been developed for and tested almost exclusively on white middle-class samples. Yet recent research by Smock and Manning, for example, indicates that issues surrounding fidelity and trust may play a more salient role among low-income couples. Semi-structured cognitive interviews with a sample of economically and racially diverse couples will be used to explore the meaning and interpretation of, identify problems with, and improve existing and newly developed items.
- 3) To explore couples' ideas about what programs aimed at fostering healthy marriage should focus on and how they can best be structured. Based on their experiences and personal observations, couples are asked to discuss the types of programs or services couples would most benefit from receiving. Through a series of close-ended attitudinal items, respondents are asked to discuss their opinions about the role that government can or should play in promoting healthy marriage. In addition, respondents are asked to rank the usefulness and importance of

various marriage education programs (i.e., conflict resolution skills, parenting classes, etc). Last, issues surrounding the timing (i.e., stage at which couples would most benefit from services), duration (i.e., short vs. long term programs) and delivery (i.e., program provider; couple or individual level services) of services are explored.

<u>Sample:</u> In the fall of 2004, flyers advertising a small research study to learn what couples think makes a good marriage were posted in libraries, community centers, bus stops, bodegas, supermarkets, churches, and laundromats in low-income neighborhoods throughout the Washington DC area, as well as in a weekly local paper. To facilitate recruitment, prospective respondents were informed that they would receive \$25 dollars at the end of a 60- to 90-minute interview. Prospective respondents were screened to ensure that they met the study requirements. In addition to being English-speaking, respondents had to be married or planning to get married, as the majority of healthy marriage initiatives are aimed at couples who have chosen marriage (ACF 2004). Efforts were made to ensure that a range of family types (e.g, stepfamilies, nonparents, two-parent households) were represented in the sample. Though couples were encouraged to participate, individual partners were eligible to be interviewed.

<u>Preliminary Findings:</u> The findings summarized below reflect information collected from initial interviews. Data collection is expected to be completed at the end of October.

*a .Defining Healthy Marriage*: Preliminary data indicates that the conceptual model developed closely matches couples' perceptions of a healthy marriage. Aspects that couples identify as being crucial to a healthy marriage include: communication, trust, commitment, and loyalty. Interestingly, the couples interviewed thus far also (spontaneously) identified spirituality and religiosity as being important or key to their relationship. More specifically, couples listed having a common understanding and feelings about the role of religion and spirituality in their lives as part of the definition a healthy marriage. Additionally, respondents indicated a need for young couples to recognize that "marriage is hard work" and that "having a successful marriage means going through the hard times as well as the good times". This suggests an area where education programs or campaigns aimed at students may be particularly helpful.

b. *What should programs focus on?* Initial interviews indicate a preference among respondents for programs that focus on communication, conflict resolution, parenting and financial management skills, as well as elements of family planning. Preliminary interviews also suggest a need for programs to incorporate both couple and individual counseling sessions. More specifically, while respondents recognize the need for couples "to work through their problems together," there is an understanding that some problems may stem from individual characteristics or experiences. Consequently, respondents appear to prefer programs that offer couple as well individual-level programs and counseling, when necessary. While initial interviews indicate that couples would most

benefit from marriage education programs prior to marriage, couples seem open to such programs and services at all family stages or union duration.